





Consultant Physicians in Healthcare for the Older Person and Stroke Medicine



JOB TITLE

Consultant Physicians in Health Care for the Older Person and Stroke Medicine

DATE OF VACANCY

Immediate

BASE

North Devon District Hospital

A Warm Welcome

Hi, I'm Adrian Harris, Chief Medical Officer at the Royal Devon University Healthcare NHS Foundation Trust. Thank you for the interest you have shown in working with us at what is an exciting time for our organisation. We are one of the largest healthcare Trusts in the country and we have ambitions to be a clinically-led, digitally-enabled teaching organisation.

Our Trust is a special place to work. We foster creativity, innovation and a personal approach to high-quality patient care. We are proud of our healthcare for the older person department, which is nationally recognised for its multidisciplinary specialist clinical care and research activity. We are committed to further developing this successful and cohesive team and want to bring the very best clinicians to Devon.

Good luck with your application and I look forward to meeting you soon.



Prof Adrian Harris

We welcome enquiries for further information and strongly encourage informal visits either in person or virtually so that you can get a feel for what it's like to work with us. A list of contacts is detailed in the final section of this pack.



Application and Advisory Appointments Committee

The posts are offered on a whole-time basis (10PA) but suitably-qualified applicants who wish to work part-time will be considered. We are committed to flexible working arrangements, including job sharing, and we will discuss these arrangements with any shortlisted candidates.

We welcome applications from established consultants and senior trainees who will be within six months of completion of specialist training at the time of the Advisory Appointments Committee.

Applicants must have completed specialist training in geriatric medicine and have entered on the GMC Specialist Register prior to taking up the appointment.

We are trialling a shortened recruitment process for this role, which will allow us to accept CVs or online applications. Please contact Emily Simpson on 07958 931414 for a confidential chat in the first instance or visit www.jobs.nhs.uk

"We are committed to flexible working arrangements, including job sharing."

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Introduction

The Royal Devon University Healthcare NHS Foundation Trust is seeking to appoint Consultant Physicians in Healthcare for the Older Person and Stroke Medicine to join the department for its northern services, based at North Devon District Hospital.

We are looking for enthusiastic, innovative and flexible individuals to develop services for our elderly patients and progress integration across the Trust supported by our departmental partners in Royal Devon and Exeter Hospital. There is an existing dementia and delirium friendly ward, specialist dementia nurse support, and a newly constituted Frailty Team working within our Acute Hospital at Home service with close links to social care teams.

Colleagues from Royal Devon and Exeter Hospital provide 4 days a week consultant cover, delivering clinical care leadership, training and education. It is envisaged that closer integration in the future will support sub-speciality interests and research as needed.

"Our Trust is frequently voted as the top acute and community trust in the country for staff satisfaction" Successful candidates will be given a high degree of autonomy and time to undertake supporting professional activities including training and teaching or to pursue sub-speciality interests. This is a fantastic opportunity to design a consultant post to suit your professional aspirations. There is scope for working within frailty, orthogeriatrics, movement disorders, syncope, stroke and peri-operative medicine.

We are keen to encourage applicants who would like to focus on research within HfOP and who can support up to 4PAs for a role within the University of Exeter Medical School.

Highlights of the Role

Research and innovation. Research active departments deliver better clinical outcomes for patients. We have a large programme of investigator-led and commercial research studies which have been internationally recognised for their programme of multisite, award-winning research. Research interests are strongly encouraged and supported. We have a multimillion-pound research facility, dedicated research staff and collaborative links with researchers from across the University of Exeter. Funded time for the development of research proposals is available for interested consultants.

Training and development. There are ample opportunities for teaching and training throughout the Trust and the region. The department has regular medical student attachments from the local medical school. The Trust encourages involvement with research and national clinical audit.

Service development. The Royal Devon's core services support a population of more than 615,000 people across more than 2,000 square miles across Devon. The scale of operation brings opportunities to establish and develop innovative new services to better meet the needs of our patients such as harnessing technology to deliver remote patient consultations and disease monitoring.

Teaching. The Royal Devon enjoys close ties with the University of Exeter Medical School. We offer funded time for teaching of medical students and junior doctors. We are planning a regular programme of evening educational meetings, which will bring the Eastern and Northern teams together providing opportunities for your CPD.

Career progression. The size and structure of our team create opportunities for rapid progression to areas of increased responsibility.

On-call rotas. Currently we have an on-call rota on a 1 in 11 basis. Should the on-call option be taken up, the commitment is on site weekday evening (5pm – 8pm) and 15 hours over the weekend

(8am – 1pm and 5pm – 8pm Saturday and 8am – 12 noon and 5pm – 8pm Sunday). The remaining cover is offsite on-call.

The Trust is considerably expanding its physician workforce to 18 physicians across a number of specialities. This will also allow us to expand our Same Day Emergency Care (SDEC) service. An average medical take is 30 patients over the 24-hour period. There is a Registrar 24/7 who is supported by F2s/CT1and 2s and F1s. We are developing an Advanced Care Practitioner model to support our SDEC service.

The on-call commitment attracts 1.1 DCC PAs and a 3% supplement. There will be consideration of time off in lieu for out of hours/weekend working.

Electronic patient record. We went live with the EPIC electronic patient record system across our Eastern services in 2020 and our Northern services in 2022. We are optimising the way we use the system, but we are already seeing huge benefits for our patients. EPIC is transforming the way we deliver care across our Trust, allowing teams to share the caseload across Devon and provide care to patients remotely.

Location and relocation. We are fortunate to be based in the beautiful South West of England, with the cultural city of Exeter, the rolling moors of Exmoor and Dartmoor, and a multitude of stunning beaches on our doorsteps. We have low rates of crime and excellent education - schools and further education colleges are good or outstanding, and Exeter boasts a top Russell group university. We can offer you accommodation to support a visit and a relocation package should you choose to come to Devon.

A more comprehensive explanation of all of these elements can be found within this job pack, but if you have any questions then please do get in touch or arrange a visit to come and see us. Contact details are at the back of this pack.

About Royal Devon University Healthcare NHS Foundation Trust

Our core services support a population of over 615,000 people and cover more than 2,000 square miles across Devon. This makes us one of the largest providers of integrated health care in the UK, and the biggest employer in Devon, with more than 15,000 staff.

We have two acute hospitals, 20 community locations, outpatient clinics and community teams who care for people within their own homes. We also provide primary care and a range of specialist services which extends our reach throughout the South West Peninsula as far as Cornwall and the Isles of Scilly.

As a newly formed Foundation Trust in April 2022, We are embracing change, innovation and technology in our ambitions to be a digitally-enabled, clinically-led teaching organisation. We are developing new ways of working and investing in new infrastructure, equipment and facilities. There has never been a better time to join us.

The Royal Devon is committed to supporting the personal and professional development of our consultant staff and in turn improving the care offered to our patients. This might include developing or introducing innovative care models and bringing these to rural patients, teaching the doctors of tomorrow or undertaking award-winning clinical research. Examples include our specialist nurses, who were recognised in the British Journal of Nursing Awards for their innovations during the COVID pandemic, our inflammatory bowel disease research team who were recognised with the national team award for their contribution to the NIHR portfolio, and our recent launch of a world-first national genetic testing service from our labs, which can rapidly test DNA samples of babies and children, so we can provide life-saving treatment.

You'll find more information about the role and the Trust in this pack. Further information is also available on our website www.royaldevon.nhs.uk.



About the Trust and Service Structure

The Royal Devon's Board of Directors is chaired by Dame Shan Morgan and is comprised of both executive and non-executive directors. The executive directors manage the day to day operational and financial performance of the Trust.

These consist of the interim chief executive officer (Paul Roberts), deputy chief executive officer (Chris Tidman), chief medical officer (Adrian Harris), chief nursing officer (Carolyn Mills), chief operating officer (John Palmer), chief finance officer (Angela Hibbard), and chief people officer (Hannah Foster).

Our Healthcare for the Older Person services are based at North Devon District Hospital (NDDH), and sit within the medicine division.

The medical directors are Dr Karen Davies (Northern services including NDDH) and Dr Anthony Hemsley (Eastern services including RD&E). All permanent medical staff are members of the Medical Staff Committee which has an elected Chairman who represents the group at the Trust Management Committee.

More information about our structure and services can be found on the Trust website at www.royaldevon.nhs.uk

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The Department of Healthcare for the Older Person and Stroke Medicine

This is a great opportunity to make your mark by developing and upgrading our elderly care services. You will have senior management support to develop these services and your clinical input and leadership will be supported on site by the secondment of a senior geriatrician from the Royal Devon and Exeter Hospital (available 3 days a week). In addition, there is a third day of geriatrician support from RD&E to share the clinical workload and provide input for training and education.

A large part of Northern Devon's population is frail elderly and we need a team of senior clinicians who will be instrumental in delivering services for this patient group. We have invested significantly in our infrastructure and have a dementia friendly ward. We are currently developing pathways for our frail patients such as direct access from our Emergency Department to our dementia ward for appropriate patients and working on plans for our community hospital beds to become a beacon for non-acute frailty services.

The successful applicants will provide comprehensive care of the elderly services in North Devon, supported by senior trust grade posts (equivalent to SpR), F2/CT1s and F1s. There is funding for a rotating registrar post at SpR4 level, patently unfilled.

There is a very strong non-medical model with excellent therapy leadership and our Pathfinder team are the link between acute and community and help with avoiding admissions at the front door as well as with the complex discharges. This team comprises senior nurses, occupational therapists, physiotherapists and social workers as well as support staff. The Trust is also developing the roles of physician associates and clinical secretaries and we have invested in pharmacists who are non-medical prescribers who will be linked with the medical wards to support the junior doctors.

Consultant Medical Staff

The department has core medical trainees and foundation doctors, rotating within their respective training programmes. There is also an associate specialist who works alongside the community teams who specialises in falls and Parkinson's.

This post is supported by the following clinical staff:

Dr Mike Jeffreys, Consultant in geriatric/general medicine

Dr Karen Davies, Medical director

Dr Georgina Hands, Associate medical director for medicine division

Dr Riaz Latif, Associate specialist in stroke



Dr Susie Harris, Consultant in geriatric/general medicine (sessional basis from RD&E)

Dr Julia Saunders, Associate specialist in community geriatrics

Dr Aye Nay Win, SAS in neurology/stroke/HfOP medicine

Fiona Duncan, Specialty and associate specialist

We also have funding to develop roles for some of our local GPs who wish to provide some clinical sessions within secondary care. These posts will have outpatient and inpatient consultation sessions in sub specialty areas such as frailty, falls, Parkinson's etc.

PROFESSIONS ALLIED TO MEDICINE

Consultants at the Trust have access to an amazing team of specialised support including:

Lynn Gill, Parkinson's disease specialist nurse

Lucy Bates,
Associate director of nursing (medicine)

Simon Green, Trainee ward pharmacist

Hannah Hopkins, Frailty lead

Alex Stevens
Physicians associate in frailty

Outpatients

Outpatient clinics take place at North Devon District Hospital and our community hospitals. Clinics currently running include General Geriatric Clinic, Stroke and TIA clinics. Movement Disorders and Falls clinics.

It is expected that the appointees will develop clinic services according to their interests.

Ward work

The general Elderly Medicine service is currently based over 3 ward areas with 60 base beds. There are a total of 176 medical beds of which 26 are in the medical assessment unit. There are 7 inpatient specialty teams covering the remaining beds equating to approximately 20 beds per team. These wards have an excellent multi-disciplinary team working and training grade doctors delivering a ward-based service with consultant support. This includes the newly developed clinical secretary and a pharmacist who is a non-medical prescriber.

For geriatricians who wish to input in to stroke care, our Stroke Unit consists of 24 acute and rehab beds. The unit is supported by physiotherapists, occupational therapists, speech and language therapists, a dietician and a social worker. There is access to 24/7 thrombolysis services provided by the Emergency Department physicians and access to thrombectomy at University Hospitals Plymouth via the Stroke Delivery Network. We provide 4 TIA clinics per week.

Northern Acute Hospital at Home (AHAH) Frailty Team

Acute Hospital at Home (AHAH) also known nationally as a virtual ward, is a safe and efficient alternative to NHS bedded care. Acute Hospital at Home supports patients, who would otherwise be in hospital, to receive the acute care and treatment they need in their own home. This includes preventing avoidable admissions from ED and MAU and supporting early discharge out of hospital.

In Northern Devon our AHAH teams consist of frailty and non-frailty pathways and we have a dedicated frailty team.

The frailty AHAH team provide acute health care in the comfort of the patient's own home and are skilled health care professionals who review patients' individual cases with a multidisciplinary team daily. They see patients within the acute setting and are also able to see them at home.

The team comprises of an ACP, trainee ACP, nurses, a physiotherapist and a paramedic.

Treating our frail patients at home allows the frailty clinicians to provide a holistic assessment and allows them to review and discuss concerns with both the patient and their family as they arise. The clinicians are at the end of the phone to answer any questions or concerns and there is dedicated out of hours support from our AHAH colleagues in Exeter.

The frailty clinicians review and care for patients who are 65 years and over and who have a Rockwood frailty score of 5 or above. They work closely with the acute doctors and are able to provide essential support and expertise into frailty syndromes in order to work collaboratively. The Specialist Medical Team - with their passion for frailty - ensure a holistic view of each individual, promoting patient-centered care for all frailty pathway patients.

The frailty team are able to work jointly with the non-frailty AHAH nurses on pathways which include AKI, Syncope, AF, OPAT and heart failure. They are able to provide complete physical examinations, blood tests, observation monitoring, medication reviews, therapy input, equipment review, cognitive assessment, review social situations and prepare for

discharge from case load ensuring all onward referrals have been completed to ensure ongoing care continues.

Departmental Meetings

Fortnightly business meetings

Weekly HfOP teaching

Weekly Grand Round

Attendance at Medical Division Governance Meetings is expected.

Administration and Secretarial Support

You will undertake administrative work associated with your clinical and other professional work. Adequate time and facilities for clinical administration, including appropriate office space, secretarial support and access to a personal computer, software and internet access, will be available.



Supporting Professional Activities

You will participate in a variety of professional activities (SPA) to support your personal clinical practice and the overall work of the department and Trust. All consultants receive 1.5 SPA sessions for generic non-clinical work. This includes, but is not limited to:

- Appraisals, job planning and revalidation
- Personal and professional development, including service development
- Professional administration, including related correspondence
- Clinical supervision of junior staff and other educational activities
- · Governance and quality improvement activities
- Departmental, divisional and other clinical or managerial meetings

An additional SPA may be available for:

- Service development
- · Clinical management
- Research
- Additional teaching and training activities, including educational supervision
- Additional governance activities such as acting as an appraiser or mentor
- National audit programme projects

Further details are published in the job planning policy.

Continuing Professional Development

The Trust supports the requirements for continuing professional development (CPD) as laid down by the Royal College of Physicians and is committed to providing time and financial support for these activities.

Revalidation

The Trust has the required arrangements in place, as laid down by the Royal College of Physicians, to ensure that all doctors have an annual appraisal with a trained appraiser, and supports doctors going through the revalidation process.

Research

Investigator-led and clinical trial research has a prominent place in the Royal Devon. Patients are given the opportunity to participate in a wide number of studies.

The University of Exeter Medical School has an excellent research reputation from basic biomedical research through to patient-centred research. The group is supported by the University of Exeter and NIHR biomedical research centre and currently provides research training to three PhD students and two visiting fellows.

The department at Exeter is involved in a wide range of research topics which presently include:

Parkinson's Disease: Aquaporin study markers, PD families study, TOPHAT study

COVID-19 & vaccines studies

Multi-site studies on frailty & sarcopenia

Diabetes in the elderly. Postural hypotension. Polypharmacy in the elderly.

The Research, Innovation, Learning and Development (RILD) building on the RD&E Wonford site is a £27.5m development which consists of the Wellcome Wolfson Centre for Medical Research, the National Institute for Health Research (NIHR), Exeter Clinical Research Facility and a new Post Graduate Education Centre. The RILD is now home to a number of the Medical School's laboratory-based research teams, comprising both clinical research areas and class two and three medical research laboratories, complete with offices, meeting rooms and write-up areas.

Active assistance in the planning and design of research projects is available from the Research and Development Support Unit based on the RD&E Wonford hospital site. The Trust has an active academic strategy to facilitate research, development and teaching.

Candidates who wish to pursue a research interest alongside their clinical work will be strongly encouraged by the department and are eligible for support from the University of Exeter Medical School.

Candidates with a higher degree (PhD or MD) will be considered eligible to start at an extra increment on the Consultant Salary Grade.

University of Exeter Medical School

The University of Exeter is high-ranking in both UK and global standings and is a member of the Russell Group of leading research-based institutions. It has ambitious plans for the future and has invested heavily in its facilities in recent years.

The Medical School's cutting-edge research is driven by important clinical questions. It focuses on translational and applied research in areas of greatest health burden and greatest opportunity for scientific advance, principally: diabetes, cardiovascular risk and ageing; neurological disorders and mental health; environment and human health; and health services research. It spans basic through clinical science to clinical trials and health policy.

UEMS delivers two highly-regarded and innovative undergraduate degrees: the BSc in Medical Sciences and Bachelor of Medicine, Bachelor of Surgery (BMBS). In addition, the Medical School offers a range of postgraduate programmes and courses. The curriculum reflects today's evolving models of care and patient experience in acute, primary and community care settings.

Building on the excellent educational reputation of the Peninsula College of Medicine and Dentistry and using problem-based learning in small groups, the BMBS programme reflects the belief that doctors need to adopt a socially accountable approach to their work and to understand the human and societal impact of disease as well as the community-wide context of contemporary healthcare provision.

UEMS graduates will be both capable and confident, whether they are clinicians, managers, educators or researchers and will be committed to life-long scholarship. Years one and two of the BMBS programme are based at the St Luke's Campus in Exeter and lay the scientific foundations for the future years of the course. There is clinical contact from year one and students begin acquisition of a range of transferable skills, learning science within a clinical context.

UEMS students spend years three and four of their programme at the Royal Devon and Exeter (Wonford) Hospital and North Devon District Hospital, as well as at the Royal Cornwall Hospital in Truro and in their surrounding general practices and community health environments.

Third year medical students are seconded to the HfOP department for a 3-week block and 5th year students can be attached for longer periods if capacity allows.

The consultants in the Healthcare for the Older Person Department are all involved in teaching students. The postholder is encouraged to develop interests in education and training and there are many opportunities to develop these interests both locally and more widely.



Outline Job Plan

A notional outline job plan is included but is subject to modification. The individual job plan and detailed timetable will be discussed with the successful candidates and will reflect their sub speciality interests.

It is expected that the initial job plan will be agreed within three months of the start date and will be reviewed annually or earlier, if necessary.

A four-day job plan will be considered and could reflect on call commitments.

	PAs
DCC	
Full teaching ward round, ward referrals, board round, clinics, new patient review, morning report	4
Admin	1.5
Flexible (sub specialty interest/managerial role etc)	2
SPA (1.5 generic, 1 non-generic)	2.5
Total	10

GENERAL MEDICINE

Fortescue Ward: 29 bedded elderly care ward set up for patients with dementia and delirium.

Alex Ward: 19 bedded short stay ward.

Frailty Team: embedded in MAU and ED

ON-CALL ROTA

Optional

Currently we have an on-call rota on a 1 in 11 basis. Should the on-call option be taken up, the commitment is on site weekday evening (5pm-8pm) and 15 hours over the weekend (8am-1pm and 5pm-8pm) Saturday and 8am-12 noon and 5pm-8pm Sunday). The remaining cover is off site on-call.

The Trust is considerably expanding its physician workforce to 18 physicians across a number of specialities. This will also allow us to expand our Same Day Emergency Care (SDEC) service. An average medical take is 30 patients over the 24-hour period. There is a Registrar 24/7 who is supported by F2s/CT1and 2s and F1s. We are developing an Advanced Care Practitioner model to support our SDEC service.

The on-call commitment attracts 1.1 DCC PAs and a 3% supplement. There will be consideration of time off in lieu for out of hours/weekend working.

Emergency calls

In exceptional circumstances, the Trust may request emergency cover for colleagues. However, the Trust recognises that there is no contractual expectation of availability when a consultant has no scheduled duties.

Provisional Timetable

Ward weeks

Mon	Tue	Wed	Thu	Fri
900 – 1300 Board Round and full teaching ward round/ MAU referrals	0900 – 1130 Board round/new patients/ MAU referrals	0900 – 1230 Board Round and full teaching ward round/MAU referrals	0900 – 1130 Board round/new patients/ MAU referrals	0900 – 1230 Board Round and full teaching ward round/ MAU referrals
1300 – 1400 HfOP teaching	1130 – 1300 Admin	1230 – 1330 Grand Round (Generic SPA)	1130 – 1300 Admin	1300 – 1530 Admin
1400 – 1700 Generic SPA	OP Clinic	1330 – 1730 Flexible PA	Sub-speciality activity	1530 – 1700 Generic SPA

Person Specification

Applicants must demonstrate on the application form that they fulfil all essential criteria to be considered for shortlisting. Appointment is subject to pre-employment checks, including occupational health, DBS checks and a minimum of three satisfactory references, including one from your current Responsible Officer.

Requirement	Essential Attributes	Desirable Attributes
Qualifications and Training		
Professional qualifications	Primary Medical Qualification (MBBS or equivalent). Applicants must have completed specialist training in geriatric medicine prior to taking up the appointment.	An appropriate higher degree or qualification (MD, PhD or equivalent). Qualification in Teaching and Learning.
Professional training and memberships	 Full GMC registration and licence to practise. Entry on Specialist Register for geriatric medicine via: CCT (proposed CCT date must be within 6 months of interview date) CESR European Community Rights Membership of Royal College of Physicians or equivalent qualification. 	
Clinical Experience		
Employment	Evidence of completion of a comprehensive broad- based training programme at specialty registrar level (or equivalent).	
	or	
	Clear demonstration of equivalent experience, with a minimum of six years at a level comparable with or senior to specialty registrar.	
	Career progression consistent with personal circumstances.	
Clinical knowledge and skills	Demonstrates ability to fulfil comprehensive geriatric medicine duties at a consultant level. Able to take full and independent responsibility for clinical care of patients and provide an expert clinical opinion on a range of problems.	Demonstrates awareness of breadth of clinical issues Clinical feedback from colleagues and patients
	Speciality Training in Stroke Medicine if appropriate.	
	Demonstrates a clear, logical approach to clinical problems and an appropriate level of clinical knowledge.	
	Able to prioritise clinical need.	
	Caring approach to patients.	

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Requirement	Essential Attributes	Desirable Attributes	
Non-clinical skills			
Teaching	Evidence of previous teaching and training experience. Willingness and ability to contribute to departmental and Trust teaching programmes.	Defined educational roles or qualifications. Evidence of teaching of undergraduates, junior doctors and multi-professional groups.	
Management of change and quality improvement	Demonstrates clear understanding of quality improvement and clinical governance within the NHS. Demonstrates willingness to implement evidence-based practice. Evidence of effective personal contributions to clinical audit, governance, and risk reduction.	Evidence of innovative development and implementation of guidance. Evidence of involving patients in practice development.	
Innovation, research, publications and presentations	Understanding of the principles of scientific method and interpretation of medical literature. Demonstrates a critical and enquiring approach to knowledge acquisition. Demonstrates understanding of the research governance framework.	Recent evidence of relevant research presentations or publications.	
Management and leadership experience	Demonstrates familiarity with and understanding of NHS structures, management and current political issues, including an awareness of national strategic plan and constraints. Demonstrates willingness to lead clinical teams and develop an effective specialist clinical service.	Experience of formal leadership roles or training.	
Communication and personal skills	Good spoken and written English language skills. Communicates effectively with patients, relatives, colleagues, GPs, nurses, allied health professionals and outside agencies. Evidence of ability to work with multi-professional teams and to establish good professional relationships.	Evidence if patient and colleague feedback. Excellent presentation skills, engages audience.	
Other requirements			
Motivation and management of personal practice	Punctual and reliable. Good personal organizational and prioritization skills, achieve deadlines. Takes responsibility for personal practice and is able to cope well with stressful situations. Commitment to continuing medical education and	Demonstrates initiative in personal practice. Willingness to undertake additional professional responsibilities at local level.	
Commitment to post	professional development. Flexible and adaptable attitude. Demonstrates enthusiasm for Devon as a place to live and work.		

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Main Conditions of Service

Appointment is to the NHS Consultant Contract (2003) under the current Terms and Conditions of Service for Hospital Medical and Dental Staff (England and Wales) and the Conditions of Service determined by the General Whitley Council for the Health Services (Great Britain). These are nationally agreed and may be amended or modified from time to time by either national agreement or local negotiation with the BMA local negotiating committee.

The employer is the Royal Devon University Healthcare NHS Foundation Trust. The appointee will be professionally accountable to the medical director and managerially accountable to the chief executive officer.

The postholder is required to have full registration with a licence to practice with the General Medical Council and to ensure that such registration is maintained for the duration of the appointment.

Salary Scale

This is as described in the Medical and Dental Terms and Conditions, in line with the Consultant Contract (2003). The current full-time salary scale ranges from £93,666 to £126,281 with eight thresholds. The on-call is credited with 1 PA, the supplement is category A and attracts a supplement of 3% of basic salary.

Leave

Annual leave entitlement is as described in Schedule 18 of the Terms and Conditions of Service: Consultant (England) 2003. Further details are available in the Senior Medical Staff Leave Policy.

Locum cover for leave will not normally be provided. It is expected that consultants within the department will coordinate leave to ensure that an appropriate level of service (emergency, urgent and routine) is maintained.

Domicile

Consultants are expected to reside within a reasonable distance of the main acute hospital to which they are affiliated, normally within 10 miles or 30 minutes. Exceptions must be agreed with the medical director or chief executive. A relocation package will be considered if relocation is necessary to meet these requirements.

Duty to be contactable.

Subject to the provisions in Schedule 8, consultants must ensure that there are clear and effective arrangements so that the employing organisation can contact a post holder immediately at any time during a period when a post holder is on-call.

Indemnity

The post-holder is not contractually obliged to subscribe to a professional defence organisation but should ensure that they have adequate defence cover for non-NHS work.

Mentoring

New consultants will have access to mentoring and are encouraged to take advantage of this facility. This will be arranged following discussion and mutual agreement between the individual and the medical director.

Professional Performance

The Trust expects all doctors to work within the guidelines of the GMC Guide to Good Medical Practice. You will work with clinical and managerial colleagues to deliver high quality clinical care, within the management structure of the Trust and are expected to follow Trust policies and procedures, both statutory and local, including participation in the WHO surgical checklist.

You will be expected to take part in personal clinical audit, training, quality assessment and other professional activities, including continuing medical education, annual appraisal, job planning and revalidation. It is expected that you will participate in multi-source feedback from both colleagues and patients. You will undertake administrative work associated with management of your clinical and professional practice.

You will be responsible for leadership of junior doctors within the specialty as agreed in your job plan and will be accountable for the effective and efficient use of any resources under your control.

You will also participate in activities that contribute to the performance of the department and the Trust as a whole, including clinical and academic meetings, service development and educational activities.

Service developments that require additional resources must have prior agreement from the Trust.

Reporting Concerns

The Trust is committed to providing safe and effective care for patients. There is an agreed procedure that enables staff to report "quickly and confidentially, concerns about the conduct, performance or health of medical colleagues", as recommended by the chief medical officer (December 1996).

All medical staff practising in the Trust must ensure that they are familiar with the procedure and apply it if necessary.

Serious Untoward Incidents

It is expected that you will report all risks, incidents and near misses in accordance with the Trust governance structure. You will be required, on occasion, to lead or assist with investigation of incidents and implementation of risk-reducing measures to safeguard patients, visitors and staff. You must comply with the Duty of Candour legislation.

Research and Audit

Audit is supported by the clinical audit and effectiveness department and we encourage all levels of staff to undertake quality improvement projects. Research within the Trust is managed in accordance with the requirements of the Research Governance Framework. You must observe all reporting requirement systems and duties of action put in place by the Trust to deliver research governance.

Safeguarding Children and Vulnerable Adults

The Trust is committed to safeguarding children and vulnerable adults and you will be required to act at all times to protect patients. The appointees may have substantial access to children under the provisions of Joint Circular No HC (88) 9 HOC 8.88 WHC (88) 10. Please be advised that, in the event that your appointment is recommended, you will be asked to complete a form disclosing any convictions, bind-over orders or cautions and to give permission in writing for a DBS check to be carried out. Refusal to do so could prevent further consideration of the application.

Rehabilitation of Offenders

Attention is drawn to the provisions of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 as amended by the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) Order 1986, which allow convictions that are spent to be disclosed for this purpose by the police and to be taken into account in deciding whether to engage an applicant.

This post is not protected by the Rehabilitation of Offenders Act, 1974. You must disclose all information about all convictions (if any) in a court of law, no matter when they occurred. This information will be treated in the strictest confidence.

Health and Safety

Employees are required to take reasonable care to avoid injury or accident while carrying out their duties, in compliance with the Health and Safety at Work Act 1974, various statutory regulations, Trust and departmental guidelines, policies and procedures. This will be supported by provision of appropriate training and specialist advice.

Infection Prevention and Control

The Trust is committed to reducing hospital-acquired infections. All staff are expected to ensure that infection risks are minimised in line with national and Trust policies and best practice. They are supported in this by the infection prevention and control team.

Our Approach to Inclusion and Diversity

Inclusion is fundamental to our approach to organisational development, culture, service improvement, and public and patient engagement.

It is one of our core values and we have an inclusion lead to provide strategic oversight to the inclusion agenda. Our inclusion steering group is chaired by our interim CEO, Paul Roberts, and reports its progress to the Board of Directors.

Our aim is to create a positive sense of belonging for everyone, regardless of their background or identity, and to value visible and invisible differences, so everybody is respected and valued, and everyone feels comfortable bringing their whole selves to work and able to reach their full potential.

We have staff inclusion champions who provide information to colleagues and promote inclusion opportunities. We also have a range of networks which colleagues can join, including:

- Disability network
- LGBTQ+ network
- Ethnic minority network

Once colleagues join us, we can share with them more information, including how to join any of these groups.





Living in Devon

Devon offers a quality of life few other English counties can match. Where else will you find such a unique landscape that encompasses over 450 miles of dramatic coastline, rugged moorland and gently winding rivers?

Interspersed with vibrant market towns, chocolate-box villages and sleepy hamlets, it is easy to see why we are consistently voted as one of the top places to live in the country.

Devon's outdoor lifestyle is its biggest draw. This natural playground is unsurpassed with over a third of the county designated as Areas of Outstanding Natural Beauty. You'll have over 5,000 km of footpaths and 250km of off-road cycle paths to explore, not to mention endless opportunities to surf along the vast stretch of Atlantic coastline or paddleboard across tidal estuaries.

There are good transport links to the rest of Devon, including the M5 and regular trains to Exeter with its art galleries, museum and theatres. Your taste buds will find plenty to savour here too - Devon is rightly proud of the farmers and producers who make the South West one of the best regions in the UK to enjoy locally produced food and drink. Northern Devon also benefits from an excellent range of community, private schools and colleges for further education.

Whether you fancy surfing or fishing, cycling or climbing, fine dining or hearty pub fare, the county really does have it all.

"Never let it be said, it's all work and no play. Not here in Devon."

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Vibrant Cities and Friendly Market Towns

A thriving, forward-looking city, Exeter is home to the world-leading Met Office, boasts the UK's first leisure centre built to ultra-energy-efficient Passivhaus standard and has one of the top 20 universities in the country.

At the very heart of the city is Exeter Cathedral, an architectural gem surrounded by cobbled streets and beautiful old buildings, many of them shops and eateries. In the compact city centre, you can stroll alongside parts of the ancient Roman wall, visit the remains of Rougemont Castle or explore the depths of Exeter's historic Underground Passages. Exeter Phoenix Arts Centre and the Royal Albert Memorial Museum (RAMM), add to the cultural mix, plus you'll have performance venues such as the Northcott Theatre, the Barnfield Theatre and Corn Exchange close to the city centre.

The main shopping area provides a wide range of leading High Street brands alongside an eclectic mix of independent shops, many to be found in the narrow thoroughfares off Cathedral Close and the High Street. Nearby Fore Street is a haven for all things vintage and retro. Exeter also has a historic quayside, a great spot to sit and watch the world go by at one of the many cafes and restaurants with al fresco dining.

Friendly Market Towns

You'll find an array of historic towns across North Devon and Torridge such as Okehampton, famed for its easy access to stunning Dartmoor. Heading towards North Devon, you'll also have delights such as the charming harbour town of Ilfracombe and the riverside port of Bideford.

More information about the area and help with relocating can be found at



www.royaldevon.nhs.uk/careers

Great for Families

Outstanding Ofsted-rated primary schools, high-ranking secondaries and proximity to two leading universities are some of the biggest draws to Devon, making this a desired destination for families. Whether you have young children or teenagers in tow, the sheer quality of education and extra-curricular activities available are guaranteed to impress.

Living and travelling

Housing wise, housing stock is diverse, with everything from thatched moorland cottages to Georgian townhouses and contemporary builds. Time and distance are different here, too. Many residents in this – the fourth largest county in the UK – are happy to travel up to an hour or more for work. This means there's a great deal of choice when it comes to finding somewhere to live.

Transport links are also good. The county has more than 8,000 miles of road – the largest road network anywhere in the country, although (it has to be said) many are narrow Devon lanes.

From Exeter's main station, Exeter St David's, there are fast and frequent rail services to Bristol (one hour), London (around two hours to Paddington) and Birmingham (under three hours to Birmingham New Street). Exeter itself has an impressive rail network with no fewer than nine stations serving different parts of the city. There are a number of branch lines providing services to Mid and North Devon, Dartmoor and the Exe Estuary. Exeter International Airport provides flights to numerous destinations throughout the UK, Europe and even North America.

Support with relocation

Our Medical Staffing Team will help you get settled, providing financial relocation support, help with somewhere to live, registration for children at one of the excellent local schools and support for partners seeking employment.

Contacts

The Trust welcomes informal enquiries. Contact names are detailed below:

Interim Chief Executive Officer

Paul Roberts

Email: penny.manley@nhs.net (PA to Chief Executive and Deputy Chief Executive

Deputy Chief Executive Officer

Chris Tidman

Email: penny.manley@nhs.net (PA to Chief Executive and Deputy Chief Executive

Chief Medical Officer

Prof Adrian Harris

Email: rduh.cmooffice@nhs.net

Medical Director - Northern services

Karen Davies

Email: rduh.cmooffice@nhs.net

Associate Medical Director for Medicine

George Hands

Tel: 01271 370202

Lead Geriatrician

Dr Mike Jeffreys

Email: Mike.jeffreys@nhs.net

Associate Director of Nursing (Medicine)

Lucy Bates

Tel: 01271 370249

Group Manager for Medicine

Hannah Keightley

Tel: 01271 349595

Head of Medical Staffing

Tina Squire

Email: tinasquire@nhs.net

Tel: 01271 349111

Executive and Specialist Recruitment Lead

Emily Simpson

Email: emily.simpson21@nhs.net

Tel: 07958 931414

NORTH DEVON DISTRICT HOSPITAL

Raleigh Park

Barnstaple

EX31 4JB

Tel: 01271 322577

