

# Trust doctor (ST3+ equivalent) in Cardiology/ Medicine



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## 1. The Post

### 1.1 Post Title

Trust Doctor (ST3+ equivalent) in Cardiology and Medicine

### 1.2 Post Description

Calderdale and Huddersfield NHS Foundation Trust are proud providers of acute hospital services, where we value our staff and recognise that they are our greatest asset.

CQC rated at Good in June 18, their report confirmed that; “Staff were caring and provided compassionate care. Patients were treated with dignity and respect and their privacy was respected. Patients spoke positively about the care they received”.

The posts offered will provide excellent experience in a District General Hospital setting for doctors who wish to pursue a career in Medicine with Specialty experience in cardiology. We have a track record of supporting Doctors through the CESR process to consultant level.

Although not a recognised training post, the Foundation Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others.

There is a comprehensive induction course and regular weekly teaching with the intention that the service commitment, supervision level and educational opportunities will be equivalent to that of our existing ST3+ trainees and is equivalent to a training post in every way.

There will be an Educational Supervisor allocated to ensure support for professional development and a weekly protected half-day teaching session covering clinical and managerial topics. We encourage research and audit projects and in addition, the Trust runs ALS and APLS courses.

This is a Full-Time post providing with basic hours of 40 hours per week, but applicants wishing to work part-time are also encouraged to apply and rotas will be adjusted accordingly, and by negotiation with appointees.

The post holder must be fully registered with GMC and hold a current license to practice.

All medical staff employed by the Trust are expected to comply with regional and appropriate Trust health and safety policies.

The Foundation Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others.

### **Cardiology at CHFT:**

The post is based predominantly at Calderdale Royal Hospital, but may include sessions at Huddersfield Royal Infirmary, and is offered on a substantive contract. The post holder will care for Cardiology inpatients on the Cardiology wards as well as outpatients in the Outpatient clinic.

The Cardiology department at CHFT provides a comprehensive service for our local population of 475,000 providing all diagnostic and treatment services offered in tertiary centres, with the exception of primary angioplasty and catheter ablation, which is currently provided in our regional tertiary

centre at Leeds. In 2018, the cardiology bed base consolidated onto the Calderdale Royal Hospital (CRH) site, and there are now no inpatient cardiology beds at the Huddersfield Royal Infirmary site (HRI). HRI is currently supported by daily in-reach cardiology ward rounds by a consultant or registrar in addition to a full outpatient service (including cardiology outpatient clinics and pacemaker follow-up clinics) supported by non-invasive investigations. This is part of a larger planned reconfiguration happening over the next 5 years within the trust moving towards a model with A+E on both sites, but all acute inpatient services provided from the CRH site (recently approved by the Secretary of State for Health). The post holder will be expected to work with their colleagues at both sites as required to support the service.

### **1.3 Base**

The post is based at Calderdale and Huddersfield NHS Foundation Trust but to enable cross cover of colleagues some cross site working will be necessary. Office accommodation will be provided in the post holders' base unit.

## **2. The Specialty and Staffing**

### **2.1 The Division**

Each Division has a Divisional Director who is supported by Director of Operations, along with finance, personnel and information technology support.

Each Directorate has a Clinical Director who is supported by an operational team with finance, personnel and Informatics support.

The Medicine Directorate includes:

#### **Medical Specialties**

- Cardiology
- Stroke Medicine
- Nephrology/Renal
- Respiratory Medicine

#### **Integrated Medical Specialties**

- Palliative Medicine
- Dermatology
- Haematology
- Neurology
- Oncology
- Gastroenterology
- Rheumatology

#### **Acute Medicine**

- Diabetes and Endocrinology
- Care of the Elderly
- Medical Assessment Unit

#### **Emergency Medicine**

## 2.2 The Specialty

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Cardiology Medical staff

There are currently 10 full-time Consultant Cardiologists:

Dr Karthik Viswanathan - Cardiac Devices, Arrhythmia, Clinical Director

Dr Hossam Elmahy - Cardiac Devices, Heart failure

Dr Qazi Ahmad – Cardiac Devices, Arrhythmia

Dr Julian Winter – Interventionalist

Dr Jeremy Butts – Interventionalist, Cardiac MR

Dr Veeran Subramaniam – Interventionalist

Dr Hossamaldin Abuomara – Interventionalist

Dr Azeem Sheikh – Interventionalist, Cardiac CT

Dr Talal Ezzo – Imaging (Advanced Echo, Cardiac CT, MPS)

Dr Monica Rap - Imaging (Advanced Echo, Cardiac MR)

In addition, there are 3 Specialty registrar trainees, 2 specialty doctors, 2 CT trainees, 4 Foundation trainees and 2 GP ST trainees supporting the cardiology service.

Inpatient service

Calderdale Royal Hospital has 16 beds on the Cardiology ward. The Cardiology medical team takes responsibility for the Cardiology ward and Coronary Care Unit. The Calderdale CCU is a 9 bedded unit with an additional 4 bedded step down beds. There is also a separate 8-bedded Day case cardiology unit, with the majority of elective diagnostic angiography, PCI and cardiac device implantations procedures being done as Day-case procedures.

Cardiac devices service

The Trust has a long history of permanent pacemaker implantation with commissioning for complex devices since 2012. A full range of cardiac devices including pacemakers, cardiac resynchronisation therapy (CRTD) & implantable cardiac defibrillators are implanted in a dedicated Pacing suite attached to CCU with sessions every day of the working week (Monday to Friday, 8am to 2pm). The Linq loop recorders are currently implanted by two of our cardiac physiologists.

In recent years, there has been a significant increase in complex device implantation within the Trust (see below) and this is an area the post holder will be expected to sustain and develop further. A successful pilot of His bundle pacing was also completed in 2019.

In 2019/20, there were 529 device procedures (not including Linq/ ILR implants): 109 new CRT implants (including 30 CRD, rest CRT-P), 35 single/dual chamber ICD implants and 385 pacemaker implants.

The Cardiac rhythm management service is supported by 8 cardiac physiologists with BHRS accreditation and specialist cardiac nurses. The department follows up over 2,300 patients per annum with cardiac devices in situ. There are well established services (entirely Physiologistled) for ILR implantation, MRI-scanning of patients with MR-conditional devices, peri-operative cardiac device management and 24/7 Cardiac Physiologist on call for device interrogations. There is a weekly Cardiac Devices MDT attended by Physiologists, Arrhythmia nurses and Consultants with cardiac devices sub-specialty interest and other Consultants (including Consultant of the week)

### Coronary intervention

Coronary Angiography and Angioplasty takes place on the Calderdale site in a state of the art dedicated cardiac catheter lab. The cath lab sessions run everyday (Monday to Friday) with extended days (until 18:00) from Monday- Thursday to meet current demands. The Trust has undertaken on-site PCI since 2011 and the cath lab is equipped with facilities for IVUS and Pressure Wires when required. The rotablation service commenced in February 2015 and complex CTO intervention is undertaken by 2 interventional cardiologists. In 2019, a coronary chronic total occlusion (CTO) clinic has been introduced to support the CTO service. Primary angioplasty services are currently provided at The Yorkshire Heart Centre in Leeds.

In 2019/20, a total of 1347 cath lab procedures (Angiograms and PCI) were done at the Trust, including 576 PCI procedures.

### Cardiology MDTs

A number of weekly MDTs run within the cardiology department attended by all members of the multi-professional health care teams including cardiology trainee doctors, specialist nurses, cardiac physiologists and senior cath lab nursing team. These include a weekly Cardiology MDT every Friday attended by all Interventional cardiologists, one non-interventional cardiologist and a cardiac surgeon from Leeds (via video link), Devices MDT every Wednesday attended by all cardiac device consultants. In addition there are weekly Heart Failure MDTs at both sites attended by community heart failure nurses and Palliative care physicians from our local hospices at Calderdale and Huddersfield. A monthly Echo review meeting started recently attended by all Imaging Consultants.

In addition, there is a monthly Friday afternoon Cardiology team meeting that is attended by all members of the cardiology team, that encompasses continuing professional development, clinical governance (including M&M), audit and QIP presentations and cardiology business meeting.

### Out patient services

The demand for outpatients has steadily risen over the years, with over 4,500 New patients and 9,700 follow-up patients seen in 2018/19. The Trust encourages innovative models of delivering outpatient care including nurse-led, one-stop and virtual clinics. A number of these clinics now support the traditional general cardiology clinics as detailed below.



The Rapid Access Chest Pain Clinics run regularly by specialty doctors and consultants, with support from cardiac physiologists and ACS nurses in the cardiology department. Currently 2-3 clinics run every week (6-8 patients per clinic).

Since 2018, there is also a weekly nurse-led post myocardial infarction clinic for routine review and discharge of uncomplicated post-MI patients.

There are weekly Rapid Access Heart Failure clinics and a nurse-led Heart failure follow-up clinic (based at HRI) and pharmacist-led Heart failure titration clinic (based at CRH). At Calderdale, the community and hospital heart failure nurses are part of a single team, all of whom actively contribute to Heart Failure MDTs and OP clinics.

Since 2017, a Rapid access one-stop Arrhythmia clinic was introduced, which now runs every week run jointly by a Specialist nurse and Consultant Cardiologist. Since October 2019, there is also a weekly nurse-led Arrhythmia follow-up clinic supported by a dedicated MDT every week.

We are the first DGH in West Yorkshire to introduce a satellite Inherited Cardiac Conditions (ICC) clinic, which now runs once a month (since May 2019) by one of our Consultant Cardiologists in conjunction with a Specialist nurse from the Leeds ICC service.

All patients listed for elective cardiology procedures (cardiac catheterisation, cardiac device implantation, cardioversion) attend a nurse-led pre-assessment clinic

### Cardiac rehabilitation

The cardiac rehabilitation nursing team work in conjunction with a wider team that includes occupational therapists & physiotherapists and provide services both in primary and secondary care. In 2019, the Trust achieved the BACPR/NACR National Certification for cardiac rehabilitation.

### Diagnostic Services in Cardiology

All standard diagnostic services are provided locally including ambulatory ECG& BP monitoring, Stress Testing, Cardio Pulmonary Exercise Testing (CPET), Echo (both Transthoracic and Transoesophageal) including 3D echo imaging, Dobutamine & Exercise Stress Echo, Myocardial Perfusion scanning, cardiac CT and cardiac MRI.

### Cardiac Imaging

Echocardiography takes place in the Diagnostic Cardiology departments in Huddersfield and Calderdale. There is also a satellite echo service in Todmorden. Transoesophageal Echo, Contrast (physiologist led) and 3D echocardiography are available. Both Dobutamine Stress and Exercise Stress Echo service is in place. TOE numbers have fallen as per national trend. There is a paediatric echo service running in partnership with the Yorkshire Heart Centre in Leeds. A number of clinical trials are supported by this service (most originating from the Trust Oncology services).

## Cardiac MRI

Facilities for cardiac MRI exist on the Calderdale site in the Radiology dept since 2005.

Currently this service is supported by 2 Consultant cardiologists. In line with National trends, the numbers have grown significantly in last few years. There are currently 2 dedicated cardiac MR sessions per week, with additional adhoc scans to accommodate urgent referrals. Recently the Trust has approved a business case for state-of-the-art MRI scanner to replace the existing MRI scanner.

## Myocardial perfusion scanning & Cardiac CT

Both cardiac CT angiograms and myocardial perfusion scanning takes place currently on the Huddersfield site; there is a joint reporting/ over reading process with shared responsibility between Cardiology and Radiology Consultants

### 2.3 Secretarial/Administrative Support

We currently have secretarial support at both hospital sites. All Consultants have access to office accommodation which includes access to the intranet and the internet.

### 2.4 Membership Council

We have a well-established and proactive Membership Council and membership. Both are a vital link with the local community. The Membership Council has several statutory responsibilities including the appointment and termination of Non-Executive Director roles via the Nominations Sub Committee; setting the remuneration for Non-Executive Directors via the Remuneration Sub Committee; the appointment of the External Auditors and approval of the trust's Annual Plan.

The Board of Directors and the Membership Council work closely together to shape future plans for improved patient care and experience, and to deliver governance processes of the highest order.

## 3. Duties of the Post

### 3.1 Duties of the Post

The post is predominantly based on the cardiology wards at Calderdale Royal Hospital. Along with ward rounds and supervision of the junior medical staff the post includes commitment to one New Onset Angina Clinic and two general cardiology clinics per week, and offers training in angiography, echocardiography and permanent pacing.

The post includes participation in the current on call Middle grade rota for General medicine on a 1 in 15 rota. When on-call you will be overseeing the management of acute admissions along with supporting the wards should it be required. The on-call team is made of registrar (ST3+) doctors, SHOs, FY1 and physician associates. There is also a team of nurses to manage catheters, cannulas, ECGs, IV fluids and some prescribing.

### 3.2 Rota Information

#### Important Note

The Trust encourages the development of innovative service models that support our ambition to provide improved access and choice for patients. It is envisaged that in time all medical staff will have an allocation of normal time duties at weekends or outside normal core hours. The post holder will be expected to engage in developing such changes and will be supported to do so.



### 3.3 Emergency Duties

The post-holder will participate in a 1 in 15 rota providing senior support to the departments at Huddersfield Royal Infirmary and Calderdale Royal Hospital. This support includes attendance at Trauma Calls and attending the department when requested by senior on-site medical or nursing staff.

### 3.4 Cover for Absent Colleagues

The post-holder would be expected to provide cover for absent colleagues on planned periods of leave and for short-term unexpected absences to help maintain the continuity of the Service. To this end, they would be expected to liaise with their colleagues in planning leave.

### 3.5 Teaching

It is expected that the post-holder will have an interest in and active role in teaching. The Departments are involved in teaching medical staff of all grades as well as medical students. The post-holder will be expected to participate in delivery of the weekly junior and middle grade teaching programmes. From time to time, there may be the requirement to provide clinical training to medical students and paramedics undertaking attachments to the Department. In the main, these activities will be delivered concurrently with normal clinical activities, rather than in addition to these.

## 4. Terms and Conditions of Service

The appointment will be subject to the Terms and Conditions of Service for NHS Doctors and Dentists in Training (England) 2016

The base salary is currently £51,017 - £58,398 per annum (effective April 2022). Any enhancements in addition to your base salary would be dependent upon your rota commitments. The rota is subject to change in line with service demands.

Annual leave entitlement is as per national Terms and Conditions of Service.

Arrangement to take annual leave must be made with clinical colleagues. The Divisional Director/Clinical Lead and the local rota co-ordinator should be notified accordingly.

The successful applicants will be required to undergo an enhanced Disclosure with the Disclosure and Barring Service (DBS).

## 5. Visiting and Further Information

Candidates wishing to find out more about the post are invited and indeed encouraged to contact or speak to:

Dominic Bryan	General Manager	01484 342000
Dr Karthik Viswanathan	Clinical Director	01484 343364
Dr Purav Desai	Divisional Director	01484 342000
Dr David Birkenhead	Medical Director	01484 342000
Mr Brendan Brown	Chief Executive	01484 342250

