



# Be part of Our Future

**Consultant Application Pack** 

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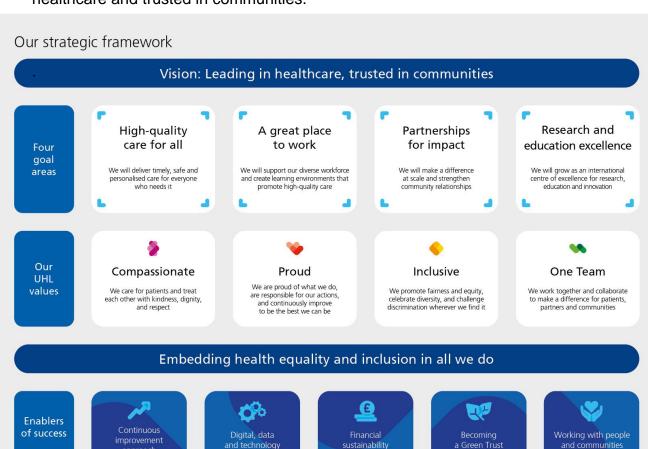
#### **SECTION 1: ABOUT UHL NHS TRUST**

The University Hospitals of Leicester NHS Trust (UHL) provides services for 1.1 million people in Leicester, Leicestershire and Rutland, and a further 2 million nationally through our specialist cardiac and renal services. The geography features the vibrant urban centre of Leicester, as well as beautiful rural areas in the wider county and Rutland.

Our three acute sites are the Leicester Royal Infirmary, the Leicester General Hospital and the Glenfield Hospital. As an integrated Trust, we provide services in seven community hospitals as well as in people's homes and virtually. We are a renowned biomedical research facility with an established international reputation for research excellence in cardiovascular, respiratory, diabetes, renal and cancer medicine. Together with University of Leicester, Loughborough University and De Montfort University – and as one of the country's largest teaching hospitals – we provide world-class training for tomorrow's health and care professionals.

As an organization with a long history and a £1.5bn annual turnover, we also play a role as a community anchor organisation. More than 18,000 people representing over 70 different nationalities work at UHL and we are proud of the diversity of our workforce. As one of the largest employers in the region, we use our economic influence to improve the health and wellbeing of our community, by purchasing local goods and services and being a good civic partner.

We are committed to working in partnership with health and social care, local authority and charitable sectors to make a difference at scale. UHL's 2023 – 2024 strategy, published in October 2023, sets out a clear vision to be leading in healthcare and trusted in communities.



approach

# Welcome from Our Chief Executive Mr Richard Mitchell

"Thank you for your interest in joining University Hospitals of Leicester NHS Trust (UHL). We are proud of the progress we are making and we are excited about our future as an integrated provider of health and care.

At UHL, we are working to achieve four goals; high quality care for all, a great place to work, partnerships for impact and research and education excellence. We have a turnover of £1.5bn and over 18,000 colleagues and we provide care in three main acute sites, seven community hospitals and in patients' homes.



UHL and University Hospitals of Northamptonshire (UHN) have formed a collaboration with me as the Joint Chief Executive. The three neighbouring trusts provide home, community, hospital and virtual care to a population of over two million people in the East Midlands. The Trusts have many shared services, jointly employed clinicians and deliver world leading research through the Leicester National Institute of Health and Care Research (NIHR) Biomedical Research Centre.

We will work more closely to strengthen clinical and support services and will improved efficiency, productivity and quality. We will collaborative with NHS and Local Authority partners to improve health and wellbeing of patients and create better employment opportunities across the region.

I am proud to work in Leicester, Kettering and Northampton, we have a truly diverse workforce and I look forward to working with you too."

Richard Mitchell
Chief Executive Officer

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#### **SECTION 2: ABOUT THE UNIVERSITY OF LEICESTER**

The University of Leicester is the major academic partner of the University Hospitals of Leicester NHS Trust. This partnership is hosted within the University by the College of Life Sciences and enables the highest standards of research, education and training in biomedical and related subjects, and to apply this knowledge and expertise to enhance the quality of life and economic prosperity of populations, locally within Leicester, Leicestershire and Rutland and in the wider world. Contributions made by consultant colleagues to this broad academic mission are recognised by the University through the award of a range of honorary titles from Honorary Fellow through to Honorary Professor.



The high calibre of our academic endeavour was recognised in the latest Research Excellence Framework (REF2021) which ranked the University of Leicester 2<sup>nd</sup> for Clinical Medicine (UoA1), with 95% of our submission ranked world-leading (4-star) or internationally excellent (3-star). Leicester was also ranked 18<sup>th</sup> (of almost 3,000 medical schools) in both the 2021 and 2022 Shanghai World Ranking, and 5th in the UK (the highest rank for Clinical Medicine outside of the Golden Triangle)

The College hosts two Research Institutes: <u>Leicester Institute of Structural and Chemical Biology</u>, <u>Led by Prof John Schwabe</u> and the Leicester Institute for Precision Health <a href="https://le.ac.uk/research/institutes/precision-health">https://le.ac.uk/research/institutes/precision-health</a> led by Professor Chris Brightling; and nine Research Centres:

- Centre for Cancer Research.
- Centre for Diabetes Research,
- Centre for Microbial and Infectious Disease,
- Centre for Environmental Health and Sustainability,
- Centre for Phage Research,
- Centre for Lifespan Health and Wellbeing,
- Centre for Fibrosis Research,
- Centre for Sarcopenia and Muscle Research, and
- Centre for Population Health.

Our newly expanded NIHR Biomedical Research Centre (BRC) recently received a 2.5-fold increase in funding, and now brings together the work of: Cardiovascular; Respiratory and Infection; Lifestyle; Personalised Cancer Prevention and Treatment; Environment; and Data innovation for Multiple Long-Term Conditions and Ethnic Health

The University's Mission is to 'change lives through education and research' and to work in partnership with our communities to become truly inclusive.

#### Our values are:

- Inclusive, diverse in our makeup and united in ambition;
- Inspiring, passionate about inspiring individuals to succeed and realise their ambitions;
- *Impactful*, as Citizens of Change we generate new ideas which deliver impact and empower our community

Our strategy consists of three themes:

- World-Changing Research
- Research-Inspired Education
- Our Citizens

Our educational ambition is to deliver a world-class, discovery-led and discovery-enabling learning experience in all teaching. There are programmes in Medicine and a growing range of healthcare professions including Midwifery with Leadership, Nursing with Leadership, Operating Department Practice, Physiotherapy and Radiography; a new Clinical Pharmacy course is also planned. A new more patient-centred undergraduate curriculum in Medicine was launched in 2016 with long 'apprenticeship-style' placement blocks developing student skills as they enter the clinical phase of our course. We are also proud of our work widening participation to medicine, and have developed an excellent Medicine with Foundation Year MB ChB which was launched in 2017. The Stoneygate Centre of Excellence in Empathic Healthcare was launched in 2023, following a major philanthropic donation to the university. The Centre will be a flagship institute and be world-leading: in the development and delivery of transformational empathy training; in establishing the best means of assessing clinical empathy; and in measuring the impact of empathic healthcare on patient and practitioner outcomes.

I look forward to welcoming you to Leicester and to you joining both UHL and the University in our joint endeavour to improve the health outcomes and quality of life of our local population through research and education with world-wide impact.

T.C.RL

Professor T G Robinson BMedSci MD FRCP FESO Pro Vice-Chancellor, Head of the College of Life Sciences and Dean of Medicine tgr2@leicester.ac.uk SECTION 3: LEICESTER, LEICESTERSHIRE AND RUTLAND,

A GREAT PLACE TO LIVE AND WORK

The geography features the vibrant urban centre of Leicester, as well as beautiful rural areas in the wider county and Rutland, including Rutland Water

Leicester is the largest city in the East Midlands and the fastest growing. With a proud history of migration, it is famously the first 'plural' city in the country, with no

single ethnic majority. The 2021 census identifies 94 languages spoken here,

making Leicester one of the most linguistically diverse places in the UK

The city is home to the largest Diwali celebration outside India each Autumn, and across the rest of the year Leicester celebrates Vaisakhi, Eid, Hanukkah and

Chinese New Year. It also hosts the third largest Caribbean Carnival in the country

Leicester has seen the development of the Space Park and Waterside area of the

city in recent years, with a view to nurturing specialist industry skills and the retention of knowledge from graduates of the city's two universities. In the wider county, life

sciences and logistics are industry growth areas, creating jobs and attracting more

people to settle in Leicestershire.

Leicester has been one of the most successful sporting cities in the UK in the last

decade with Leicester City Football Club, Leicester Tigers rugby union club and

Leicester Riders basketball team all winning their respective leagues

The county is crisscrossed by footpaths, cycle trails and canals. Outdoor attractions

include the National Forests, Bradgate Park, Beacon Hill and Swithland Wood. The strong transport infrastructure means you are never far from other destinations in the

UK or overseas. Find out more at Visit Leicester and Discover Rutland

https://www.visitleicester.info/

https://www.discover-rutland.co.uk/

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#### **SECTION 4: JOB DESCRIPTION**

## **Department of Anaesthesia in ITAPS Clinical Management Group**

The Clinical Management Group of Intensive Care, Theatres, Anaesthesia, Pain and Sleep (ITAPS)

The CMG is led by the Clinical Director, Dr Chris Allsager and Head of Operations Linda Fletcher. It has Departments of Anaesthesia at each of the three sites in the UHL Trust: Leicester Royal Infirmary, Leicester General Hospital and Glenfield Hospital. All three hospitals provide a wide range of specialities and work collaboratively under the leadership of the CMG.

#### **Leicester Royal Infirmary**

The LRI provides a comprehensive range of clinical services including one of the busiest Emergency departments in the country.

The Department of Critical Care provides General Intensive Care support to the following services: Elective and emergency general surgery, colorectal surgery, upper GI and bariatric surgery, trauma and orthopaedics, surgical specialities (ENT, Max fax and plastics), acute medicine, hepatology, gastroenterology, haematology, oncology and infectious diseases.

#### **Intensive Care Service at LRI**

There is a general Adult Intensive Care Unit with funding for 25 level 3 beds used flexibly in a physical space of 28 beds.

The unit admits over 1200 patients per year of which up to 80% are emergency or non-elective admissions.

Daytime and out-of-hours cover is provided by dedicated Intensive Care Consultants. The ICU is recognised for stage 1, stage 2 and stage 3 (Basic, Intermediate and Advanced) training as specified by the FICM. There is an Intensive Care Outreach service 24/7 (the Deteriorating Adult Response Team), providing specialist nursing support to the wards.

Within the department there is office space, managerial and secretarial support and a small research laboratory. There is a dedicated resuscitation and simulation training room and seminar rooms for teaching. Consultants in the department have a strong input into post-graduate and undergraduate teaching.

This is a new post in Intensive Care Medicine within ITAPS at the Leicester Royal Infirmary (LRI) Hospital site. It is expected that the post holder will take part in the day-time cover and on-call rota for Adult Intensive Care at this site.

This is an exciting time for UHL critical care. The Trust is committed to a 5 year strategy which will consolidate acute services from 3 to 2 acute sites. The first step of this, transfer of vascular surgery to Glenfield Hospital, has been completed.

There is a planned expansion of LRI ICU beds to accommodate further reconfiguration of services in UHL including transfer of all emergency general surgery to the LRI site.

This post will be suitable for a candidate with a CCT / CESR in ICM. It is expected that the post holder will take part in the day-time cover and on-call rota for Intensive Care at this site.

#### **DEPARTMENTAL RESEARCH**

Led by: Dr Hakeem Yusuff (Glenfield Hospital) and Dr Simon Scott (Leicester Royal Infirmary)

Research in the ITAPS Clinical Management Group encompasses several areas, including clinical and laboratory-based projects. There are close links with researchers in the University of Leicester via Professor D Lambert. Leicester Royal Infirmary is an active participant in NIHR portfolio studies, recruiting to multi-centre research trials with the support of specialist nurses from the Research Space.

Both clinical and laboratory-based research is performed. Areas of current clinical research include: the treatment of acute pain after surgery or injury and chronic pain of malignant or non-malignant origin; evaluation of the effectiveness of new general and local anaesthetic techniques; the evaluation of new analgesic drugs; and the assessment of non-invasive monitoring modalities in acute illness and critical care.

The group is also very active in recruiting to clinical multicentre trials in Critical and Emergency Care, Perioperative Medicine, and Pain Management, under the auspices of the Clinical Research Networks. Leicester was one of the top UK recruiters to the major COVID trials – RECOVERY and REMAP-CAP.

Our laboratories have expertise in a variety of analytical techniques including quantitative PCR, and active collaborations within the University of Leicester, nationally and internationally. Research has impacted upon local and national practice in several areas. The group pioneered the use of patient-controlled analgesia for postoperative pain relief and was involved intimately in the production of a national report which was instrumental in the introduction of acute pain teams in the UK.

It is expected that the successful applicant would be actively involved in the ongoing research activities in the Department. This may include the supervision of research nurses, specialty trainees and medical students as appropriate. Individual research interests consistent with the ongoing research priorities of the group will be encouraged, as will research presentations, publications and grant applications.

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It is expected that the successful applicant would be actively involved in the on-going research activities in the Department, under the guidance of the CMG research Lead. This may include the supervision of research nurses, Specialty Trainees and Medical Students as appropriate. Individual research interests consistent with the ongoing research priorities of the group will be encouraged, as will research presentations, publications and grant applications.

Job Title: Consultant in Intensive Care Medicine

(10 PAs)

**Location:** University Hospitals Leicester

Managerially Accountable to: CMG Clinical Director or Head of Service

Professional Accountable to: Medical Director

#### **Medical Staff**

#### **CONSULTANT MEDICAL STAFF, LRI**

Dr G Williams – Deputy Clinical ICM ITAPS Director, Dr P Boddy– Deputy Clinical Director, Workforce Lead

#### **Intensive Care**

Dr C Bouch

Dr J Briggs

Dr N Flint

Dr C Hebbes (Honorary Lecturer)

Dr A Keeshan

Dr A Khandhia

Dr M Little

Dr I McLaren

Dr J Parker

Dr S Pochiraju (Locum)

Dr S Scott – Head of Service (-Honorary Lecturer)

Dr M Smith

Dr Z Whitman

Dr M Woods

#### JUNIOR MEDICAL STAFF

All training levels of junior staff from FY1 up to ST 7 are allocated training attachments of 3-6 months to the Leicester Royal Infirmary Hospital by the Leicester School of Anaesthesia. Compliant resident rotas are run covering General Duties, Intensive Care and Obstetric Anaesthesia. There is a cohort of Specialty Doctors that provide a third tier of registrar-level support on the ICU rota.

Out of hours cover for ICU is provided by 3 ICU residents (one ST, one SD, one CT) supported by an anaesthesia ST and supervised by the non-resident consultant in Intensive Care.

#### **Appointment**

The appointment will be whole time. Any Consultant who is unable for personal reasons, to work whole time, will be eligible to be considered for the post. If such a person is appointed, modification of the job content will be discussed on a personal basis in consultation with Consultant colleagues and Head of Service.

#### **Base**

Your normal place of work will be as discussed at interview and will be confirmed in Section 1 of your contract but you may be required to work in other locations of the Trust. In particular, flexibility is required across the three main Hospital sites (Leicester Royal Infirmary, Leicester General Hospital, Glenfield Hospital). If your initial location is based at one of these sites, excess travel reimbursement will not apply for a permanent/temporary change to base.

#### **Key Tasks**

- To provide Consultant cover for the Intensive Care Unit at the LRI. This currently has 25 level 3 beds used flexibly in a physical space for 28 beds.
- Help prepare for the move into a new build ICU.
- Supervise and train junior intensive care medical staff.
- Work with the acute pain team to provide safe and effective postoperative analgesia to patients.
- Take part in multidisciplinary case conferences.
- Teaching post-graduate doctors and under-graduates, research and administration.
- Develop the Critical Care Service along with the other Consultants at UHL.
- Work with the Clinical Governance team to enhance patient safety.

#### **Duties and Responsibilities of the post**

The overriding purpose is to support the provision of highest quality patient care through personal actions and continuous improvement.

- Responsibility for the prevention, diagnosis and treatment of illness, and the proper functioning of the department.
- Cover for colleagues' annual leave and other authorised absences.
- To participate in service development and business planning in collaboration with the other Consultants in the department, the CMG and local GPs and commissioners within the local CCGs.
- Professional supervision and management of junior medical staff including the observance of local employment and human resource policies and procedures.
- Responsibilities for carrying out teaching, examination and accreditation duties as required and contributing to undergraduate, postgraduate and continuing medical education activity, locally and nationally.
- Participating in medical audit, the Trust's Clinical Governance processes and in CPD – CPD is provided in job plans and attendance at audit and other

- governance meetings is mandatory; Managerial, including budgetary responsibilities where appropriate and compliance with standing orders and standing financial instructions of the Trust.
- In line with GMC Good Medical Practice it is the responsibility of the post-holder to ensure that all duties are carried out to the highest possible standard, and in accordance with current quality initiatives within the area of work.
- The post-holder is expected to respond in a timely fashion to legitimate requests from Trust officers this might include investigations of incidents or complaints.
- The post-holder is expected to participate in teaching and training of junior staff and other clinical staff groups. The appointee will also have supervision responsibilities for junior medical staff within the specialty. If appropriate the postholder will be named in the contract of junior staff as the person responsible for overseeing their training and as an initial source of advice to such doctors regarding their careers.
- The post-holder is expected to participate in professional continuing medical education; study leave is provided for this purpose.
- The post-holder will be expected to undertake the Trust Corporate and Directorate specific Induction and competency Programmes appropriate to role.
- The post-holder will be required to maintain their continuing professional development (CPD) to be able to successfully revalidate. As per the Trust requirement the successful candidate will be required to have annual appraisal and attend / keep fully up to date with statutory and mandatory training as stipulated.

#### Job Plan

The job plan will be made up of the following elements:-

| Intensive Care – including day-time cover and on-call, prospective cover and clinical administration (DCC) | 7.5 |
|--|-----|
| ICU-allied service provision and development (e.g. ICU follow-up clinic)                                   | 1.0 |
| Supporting Professional Activity (SPA)   | 1.5 |
| TOTAL PROGRAMMED ACTIVITIES  | 10  |

ICU-allied service provision and development (DCC) will be organised in discussion with the Head of Service. There may be the opportunity to increase programmed activities to a maximum of 12PAs by mutual agreement.

It is expected that there will be the need from time to time to make changes to the job plan. The successful candidate will be expected to negotiate such changes for

the benefit of clinical service delivery and the department as a whole. Consultants wishing to carry out private practice may be asked to undertake an additional clinical programmed activity.

Cover for annual and study leave is by mutual arrangement with colleagues and is included within the PA allocation.

The job plan will be subject to annual review, with any revisions sought by mutual agreement but it is expected that the successful candidate will work with the CMG management team to ensure that services are delivered efficiently and reflect best practice with processes and governance to match - this may require new and flexible ways of working in the future.

#### **Programmed Activities**

The work programme will vary from week to week.

#### **Intensive Care Medicine**

- LRI AICU Consultant rota comprises 16 whole-time equivalent slots (5.5 PA per dual accredited doctor, 7.5 + 1 PA per single accredited). This post is to replace a vacancy.
- The rota allows for continuity of care by having a consistent team on during the week but with the afternoon off as compensatory rest after an on-call.
- Weekends are partially split and so occur 1 in 8.
- Prospective candidates are encouraged to discuss the working patterns and rota with the head of service and current consultants.
- No leave will be taken in ICU weeks, attracting a payment for prospective cover.

#### **Supporting Professional Activity (SPA)**

There is an opportunity for Consultants within the Trust to deliver up to 2.5 PAs for Supporting Professional Activities (SPA).

1.5 PAs are allocated as a minimum to all consultants for SPA in order to support the requirements of revalidation which include activities such as participating in audit, CPD and mandatory training.

Up to a further 1 PA will be available for SPA by mutual agreement as part of the job planning process for further appropriate verifiable SPA. Where a consultant decides not to undertake additional SPA over and above 1.5 PAs, suitable alternative clinical work will be offered to bring the job plan up to 11 PAs.

#### AICU On Call

The Intensive Care will be worked flexibly to provide continuous cover with colleagues on the 1 in 16 rota. When a consultant is scheduled to work on the ICU their duties are exclusively to ICU. The on-call PAs are included in the ICU DCC PAs in the outline job plan above.

The on-call supplement will be Category A, low frequency at 3%.

#### **Any Other Duties**

This job description is not to be taken as an exhaustive list of duties and it may be reviewed in the light of changed service needs and development. Any changes will be fully discussed with the post holder. The post holder will be required to carry out the duties appropriate to the grade and scope of the post.

In order to ensure the Trust's ability to respond to changes in the needs of the service, after appropriate consultation and discussion with you (including consideration of personal circumstances current skills, abilities and career development) the Trust may make a change to your location, duties and responsibilities that are deemed reasonable in the circumstances.

#### **Mentorship**

There is a mentorship scheme for all new consultant staff, this is designed to help and assist new appointees to settle into working at UHL as easily as possible. It is designed to assist individuals in a personal way to familiarise them with the Trust and how things work in practice.

The Trust also 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.

Appropriate secretarial and office accommodation will be available. The University Hospitals of Leicester NHS Trust are committed to support continued professional development with paid study leave within a budget. Each Consultant is provided with a personal computer with access to the internet and NHSNet connection.

#### **Education: Teaching and Training**

All Consultants are expected to contribute to teaching and training of undergraduate students and postgraduate trainees as part of their role as a Consultant in UHL.

Consultants will normally have undergraduate medical students placed with them during clinical duties and are expected to teach alongside clinical service work. Similarly, Consultants will normally be involved in clinical supervision of postgraduate trainees working within UHL.

Medical students based at the University of Leicester follow a standard 5 year programme with years 1 and 2 (phase 1) predominantly based in the University but including both a Healthcare assistant training programme, and a programme developing their consultation and examination skills; and three years on clinical placement in phase 2. The teaching of undergraduate students in UHL reflects the Divisional structure of the Trust. Undergraduate medical students are taught by UHL throughout the medical course from years 1 to 5. Both ward- and outpatient-based

clinical teaching, as well as tutorial and lecture style teaching is undertaken in addition to individual supervision of clinical students (years 3-5) attached to them,

Some Consultants will choose to take on additional undergraduate and/or postgraduate education and training responsibilities. This activity will be specific, identifiable, evidenced, recognised and appraised. Such additional teaching and training activity will be recognised within their SPA allowance.

The post holder will have the opportunity to apply to become a clinical teacher. In addition to the standard 1.5 SPAs, the clinical teacher role is supported by 0.5 SPAs to support two hours of undergraduate teaching time per week.

This teaching can occur in different settings. The clinical teacher will be expected to show evidence of satisfactory performance in this role at appraisal.

#### Principal Elements:

- To support and oversee the placement of students in the department and act as a clinical teacher
- To facilitate delivery of undergraduate teaching as directed by the departmental undergraduate education lead

Enhanced undergraduate duties also includes: acting as examiners in medical school assessments; providing regular seminar and small group teaching; lecturing and other Phase 1 teaching (year 1 & 2) within the medical curriculum; and leadership of a Student Selected Component (lasting four weeks in year 3 and/or six weeks in year 5).

Those who undertake additional significant responsibilities as a block or clinical education lead within their DCC time may be eligible for the award of the title of honorary lecturer or honorary senior lecturer depending on their level of activity

Enhanced postgraduate duties will include acting as an Educational supervisor for Foundation or Specialty trainee, UHL Divisional Education governance lead, contributing to recognised postgraduate-teaching courses in UHL, e.g. Specialty Training programmes, involvement in recruitment of trainees, interviews for specialty training and recruitment to Foundation programmes.

#### **General Policies, Procedures and Practices**

The post holder will be expected to comply with all Trust policies, procedures and practices and to be responsible for keeping up to date with any changes to these.

#### **Health and Safety**

All employees are subject to the requirements of the Health & Safety at Work Act and prevailing Acts since. It is the post-holders responsibility to ensure they are familiar with all UHL Health and Safety related policies that apply to their workplace or work –practice. The post holder is required to ensure that as an employee, his or her work methods do not endanger other people or themselves.

### **Data Protection / Confidentiality**

In accordance with the Employer's privacy notice for employees, the Employer will hold computer records and personnel files relating to you which contain personal data. The Employer will comply with its obligations under the General Data Protection Regulation, the UK Data Protection Act 2018 and all other data protection legislation. The data the Employer holds may include employment application details, references, bank details, performance appraisals, holiday and sickness records, salary reviews and remuneration details and other records, (which may, where necessary, include special category data and criminal offence data relating to your health, data held for ethnic monitoring purposes, and regarding DBS checks). The Employer requires such personal data for personnel administration and management purposes and to comply with its obligations regarding the keeping of employee records. The privacy notice sets out the Employer's legal basis for processing your personal data. Your rights of access to this data are prescribed by law.

You will familiarise yourself with the Employer's data protection policy which sets out its obligations under the General Data Protection Regulation, the UK Data Protection Act 2018 and all other data protection legislation. You must comply with the Employer's data protection policy at all times and you agree that you will only access the systems, databases or networks to which you have been given authorisation and only for the purposes of your work for the Employer. The Employer will consider a breach of its data protection policy by you to be a disciplinary matter which may lead to disciplinary action up to and including summary dismissal. You should also be aware that you could be criminally liable if you disclose personal data outside the Employer's policies and procedures. If you have any queries about your responsibilities in respect of data protection you should contact the Employer's Data Protection Officer.

#### **Equal Opportunities Policy**

All employees must comply with the Trust's Equal Opportunities Policy and in line with the Equality Act 2010, must not discriminate on grounds of age, disability, gender reassignment, race, religion or belief, marriage or civil partnership, pregnancy or maternity, sexual orientation or sex. Other grounds on which they should not treat others unfavourably include trade union membership (or non-membership) or political affiliation, or any other grounds which cannot be shown to be justifiable.

#### **Infection Control**

All healthcare professionals on a professional register are personally accountable for their standards of practice which must include compliance with the Trust's infection prevention

and control policies and guidelines. In addition all registered practitioners are expected to challenge non-compliance when observed to protect patients and promote patient safety. Local clinical leaders have a responsibility to maintain an organisational culture of vigilance through their role in supervising other staff.

#### Safeguarding Children and Vulnerable Adults

The post holder is responsible for safeguarding the interests of children and adults who they come into contact with during their work. To fulfil these duties post holders are required to attend training and development to recognise the signs and symptoms of abuse or individuals at risk, to follow local and national policy relating a safeguarding practice and to report and act on concerns that they may have.

#### **Electronic Rostering**

Our Electronic Rostering system is key to ensuring staff are in the right place with the right skills at the right time, to ensure we carry out this responsibility effectively; all UHL staff must adhere to the rostering standards and guidelines set out in the Electronic Rostering Policy, pertaining to their role.

# **SECTION 5: PERSON SPECIFICATION**

# **Appointment of: Consultant in Intensive Care Medicine-ITAPS CMG**

| CRITERIA                                | ESSENTIAL REQUIREMENTS   | DESIRABLE REQUIREMENTS  |
|---|--|---|
| Commitment to Trust Values & Behaviours |  |   |
|   | Must be able to demonstrate<br>behaviours consistent with the Trust's<br>Values and Behaviours   |   |
| Qualifications /<br>Training            |  |   |
|   | <ul> <li>MB BS or Equivalent</li> <li>Full GMC Registration</li> <li>FFICM or Equivalent</li> <li>Eligible for entry/entered on the specialist register of the General Medical Council for Intensive Care Medicine.</li> <li>CCT / CESR in Intensive Care Medicine or within 6 months of CCT at date of interview or equivalent experience at consultant level</li> <li>Completed advanced ICM training or equivalent (Step 2/Stage 3) as specified by the FICM, or equivalent.</li> </ul> | <ul> <li>Membership of relevant<br/>Specialist Societies or<br/>Associations.</li> <li>Higher degree e.g. MSc, MD<br/>or equivalent.</li> </ul>   |
| Experience /<br>Clinical Skills         |  |   |
|   | <ul> <li>Demonstrable experience and extended training in Adult Critical Care Medicine including extensive contemporary critical care experience in the last 2 years.</li> <li>Clinical Knowledge and Expertise: Appropriate knowledge base and ability to apply sound clinical judgment to problems; demonstrates clear, logical thinking/analytical approach; understands evidence-based practice.</li> <li>IT Skills, ability to use web browser, excel, word, etc.</li> </ul>          | <ul> <li>Evidence of relevant clinical specialty interest (e.g. Echocardiography)</li> <li>ATLS</li> <li>FICE accreditation</li> <li>Experience in transthoracic echocardiography.</li> </ul> |
| Management                              |  |   |
|   | Ability to work effectively as part of a<br>multidisciplinary team and supervise   | <ul> <li>Evidence of management and administration experience.</li> </ul>   |

|                            | <ul> <li>juniors.</li> <li>Experience of leading teams and awareness of leadership styles.</li> <li>Ability to effectively organise, prioritise and manage clinical workload.</li> <li>Understanding of wider health agenda and modern NHS.</li> <li>Ability to work to overcome barriers to change (negotiating, influencing and persuasion skills).</li> <li>Knowledge and understanding of clinical governance issues.</li> </ul> | <ul> <li>Management training on an accredited course.</li> <li>Awareness of Service Development issues.</li> </ul>  |
|----------------------------|--|---|
| Communication Skills       | <ul> <li>Demonstrable skills in written and spoken English that are adequate to enable effective communication with patients and colleagues.</li> <li>To be empathic and sensitive; capacity to take others perspectives and treat others with understanding.</li> <li>Highly Developed Emotional Intelligence</li> </ul>  | <ul> <li>Highly developed emotional intelligence</li> <li>High standard of presentation both written and verbal</li> <li>Demonstrable track record of successful change management</li> <li>Proven ability to maintain focus in a demanding environment</li> </ul>              |
| Motivation                 | <ul> <li>Personal integrity and reliability.</li> <li>Ability to motivate and develop both medical Staff and non-medical staff.</li> </ul>   | Commitment to further develop the post and the service provided.  |
| Audit/ Quality Improvement | <ul> <li>Effective participation in and a commitment to clinical audit.</li> <li>Participation in a quality improvement programme</li> <li>Experience of quality improvement work and audit</li> </ul>   | <ul> <li>Undergone training in teaching and willingness to organise relevant audit activities including quality improvement evidence</li> <li>Completion of formal courses in Audit and quality improvement.</li> <li>Published Audit including quality improvement.</li> </ul> |
| Research  Teaching         | <ul> <li>Understanding and interest in research.</li> <li>Ability to appraise research critically</li> <li>Ability to supervise juniors undertaking research projects.</li> <li>Evidence of recent research and development activity</li> </ul>  | Publications in nationally and internationally recognised peer-reviewed journals on subjects relevant to the specialty.   |
|                            | Experience of and a commitment to  | Willingness to develop new  |

|                      | training/ teaching undergraduate and postgraduates.  Appraisal and assessment skills.  Ability to asses clinical competencies  Enthusiastic and ability to inspire and lead others.                  | <ul> <li>approaches to teaching.</li> <li>Post Graduate qualification in teaching and training.</li> </ul> |
|----------------------|--|--|
| Equality & Diversity |  |  |
|                      | <ul> <li>Able to demonstrate a commitment<br/>and understanding of the importance<br/>of treating all individuals with dignity<br/>and respect appropriate to their<br/>individual needs.</li> </ul> |  |

#### **SECTION 6: PRE-EMPLOYMENT CHECKS**

#### **Professional Registration**

All persons appointed to the post are required to hold registration with their appropriate professional Regulatory Body and to comply with their professional code of conduct. Evidence of on-going registration will be required.

#### **Health Clearance**

- 1) It is recommended that all new healthcare workers have checks for tuberculosis (TB) disease/immunity and are offered hepatitis B immunisation (with post-immunisation testing of response) and blood tests for evidence of infection with hepatitis C and HIV [1]. Being free of infectious tuberculosis is mandatory. Checks for immunity to measles, mumps, rubella and varicella (chicken pox) will also be made and vaccination offered if immunity is not detected. These standard health clearance checks will be completed on appointment. Managers should inform new workers that they must contact the OH department so the necessary arrangements can be made. Even if the new worker has had similar checks recently elsewhere, or has worked in UHL before, they will still need to attend for a review, unless these were undertaken at UHL as part of a current rotational medical appointment.
- 2) For healthcare workers who will perform exposure-prone procedures (EPPs), work in a renal unit\*, or likely to practice in an exposure prone environment, additional health clearance must be undertaken. Additional health clearance includes testing or demonstration of satisfactory test results for:
  - HIV
  - Hepatitis B
  - Hepatitis C

The exact standards that must be met are described in detail in the Public Health England document: Integrated guidance on health clearance of healthcare workers and the management of healthcare workers infected with blood borne viruses (hepatitis B, hepatitis C and HIV) October 2017, or revisions thereof.

\*Workers in renal units only need to demonstrate satisfactory results for Hepatitis B.

These additional checks should be completed before confirmation of an appointment to an applicable post, as the healthcare worker will be ineligible if they do not meet the required criteria. Those who refuse to have the required tests will not be given clearance to start work.

All tests will be arranged in confidence through the Occupational Health department. All costs for testing will be borne by the employing organisation.

[1] Health clearance for tuberculosis, hepatitis B, hepatitis C and HIV: New healthcare workers. DoH 2007.

#### **Disclosure and Barring Service**

This post requires an enhanced disclosure by the Disclosure and Barring Service (DBS) as it is regulated by statute. Failure to disclose details if you are currently / or in the future the subject of police investigation / proceedings which could result in a conviction, caution, bind over order or charges is a disciplinary matter, and may result in dismissal.

To expedite the process the Trust will meet the initial costs of the disclosure which will be deducted from the individuals' salary over a three month period commencing on their first months payment.

#### Statement On The Recruitment Of Ex-Offenders

As an organisation using the Disclosure and Barring Service (DBS) to assess applicants' suitability for positions of trust, the University Hospitals of Leicester NHS Trust complies fully with the DBS Code of Practice and undertakes to treat all applicants for positions fairly. It undertakes not to discriminate unfairly against any subject of a Disclosure on the basis of conviction or other information revealed.

The University Hospitals of Leicester NHS Trust is committed to the fair treatment of its staff, potential staff or users of its services, regardless of race, gender, religion, sexual orientation, responsibilities for dependants, age, physical/mental disability or offending background.

We actively promote equality of opportunity for all with the right mix of talent, skills and potential and welcome applications from a wide range of candidates, including those with criminal records. We select all candidates for interview and appointment based on their skills, qualifications and experience.

A Disclosure is only requested after a thorough risk assessment has indicated that one is both proportionate and relevant to the position concerned. For those positions where a Disclosure is required, job adverts and job descriptions will contain a statement that a Disclosure will be requested in the event of the individual being offered the position.

Where a Disclosure is to form part of the recruitment process, we encourage all applicants called for interview to provide details of their criminal record at an early stage in the application process. At interview, or in a separate discussion, we ensure that an open and measured discussion takes place on the subject of any offences or other matter that might be relevant to the position. At conditional offer stage, we ask applicants to complete a declaration form. This is only seen by those who need to see it as part of the recruitment process.

Unless the nature of the position allows the University Hospitals of Leicester NHS Trust to ask questions about your entire criminal record we only ask about "unspent" convictions as defined in the Rehabilitation of Offenders Act 1974. Failure to reveal information that is directly relevant to the position sought could lead to withdrawal of an offer of employment. We will discuss any matter revealed in a Disclosure with the person seeking the position should a situation arise where we are required to

withdrawal conditional offer of employment. We have a specialist team who is available on hand to provide support and guidance on these matters.

There is a DBS Code of Practice details of which are available at: <a href="https://www.gov.uk/government/publications/dbs-code-of-practice">https://www.gov.uk/government/publications/dbs-code-of-practice</a>

Having a criminal record will not necessarily bar you from working with us. This will depend on the nature of the position and the circumstances and background of your offences.

#### **SECTION 7: RECRUITMENT SERVICES CONTACT INFORMATION**

**Recruitment Services Contact (Consultant Recruitment):** 07977957295

Recruitment Services email (Consultant Recruitment):

uhlconsultantrecruitment@uhl-tr.nhs.uk

**Recruitment Services Address:** 

University Hospitals of Leicester NHS Trust Knighton Street Offices Level 3 Leicester Royal Infirmary LE1 5WW



We are UHL

