

# **CONSULTANT JOB DESCRIPTION**

JOB TITLE:	Consultant in Obstetrics & Gynaecology		
DIVISION:	Women's & Children's		
SPECIALTY:	Obstetrics & Gynaecology		
NAME OF LINE MANAGER:	Natalia Barbaneagra – Clinical Director		
NAME OF RESPONSIBLE OFFICER			
FOR REVALIDATION:	Dr Jane Hawdon		
NUMBER OF PROGRAMMED	I0 PAs		
ACTIVITES PER WEEK			
MANAGES	Junior Doctors (Indirectly)		
LOCATION:	Barnet Hospital		

### JOB SUMMARY:

An excellent opportunity has arisen for a consultant in Obstetrics and Gynaecology with a special interest in Uro-Gynaecology at Barnet and Chase Farm Hospitals.

The successful candidate will join a strong group of 20 Consultants at the department. The job plan will be discussed in detail at the point of appointment to allow flexibility based on their competencies and service needs. The successful candidate will be expected to participate in the day-time Obstetrics and Gynaecology rota. The on-call commitment will be 1 in 16 out of hours on weekdays and 1 in 16 weekends. The Labour ward has on-site Consultant cover for 98 hours (8.00 a.m. -10.30 p.m. weekdays and 8.00 a.m. to 8.45 p.m. on weekends). The weekend on-call is split working i.e. Friday and Sunday or Saturday. An additional weekend ward round cover will also be required of the candidate which will be shared with the team.

We are particularly looking to appoint an enthusiastic, experienced colleague with a special interest in Uro-Gynaecology (at least several years in the sub-specialty) to join our

obstetrics and gynaecology services on our Barnet and Chase Farm sites. The Candidate must have proven hands-on experience in uro-gynaecology surgical skills (be able to perform independently pelvic floor repair, vaginal hysterectomy, incontinence procedures etc) and expertise and expected to hit the ground running. The successful candidate will have regular paediatric gynaecology clinics. Colposcopy and/or OPH experience will be highly desirable

The Barnet site has approximately 5600 deliveries per annum alongside a level II NNU unit and caters for a diverse high-risk population. Our intra-partum outcomes are within the top centile for the region and we are looking for an individual to help us maintain this high standard. Our co-located midwifery led unit (Barnet Birth Centre -BBC) delivers 20-25% of our births and has been highly commended. The successful candidate will run high-risk obstetric clinics, including debrief clinics.

Acute and outpatient gynaecological services are delivered at our Barnet site and elective and outpatient gynaecological services are delivered at our new state of the art Chase Farm site.

The successful candidate will be supported by a multi-disciplinary team of gynaecologists, specialist nurses and allied health professionals. The candidate should be keen to work as part of a team and develop good relationships with other staff within and outside of the department.

The candidate will have an interest in medical education and will be required to provide dedicated medical student teaching sessions. They will also be required to assist in progressing plans to develop the 4<sup>th</sup> site for clinical medical training of UCH medical students, in terms of infrastructure and support, governance and placements. They will report to the Departmental Undergraduate Lead in the first instance but may also be required to provide assistance to the Site Undergraduate Tutor and the UCLMS Sub Dean

The appointee will be expected to stay within 30 minutes travelling time from the





hospital when on call.

Date reviewed: April 2024

#### Royal Free London NHS Foundation Trust World Class Values

The post holder will offer World Class Care to service users, staff, colleagues, clients and patients alike so that everyone at the Royal Free can feel:

•we come all of the time •Confident because we are clearly communicating

• **respected** and cared for • **reassured** they are always in safe hands

### About us

The Royal Free Hospital was founded in 1828 to provide free healthcare to those who could not afford medical treatment. The title 'Royal' was granted by Queen Victoria in 1837 in recognition of the hospital's work with cholera victims.

For many years, Royal Free Hospital was the only hospital in London to offer medical services to women. This began a close association with the London School of Medicine for Women, later renamed the Royal Free Hospital School of Medicine.

Royal Free Hospital moved to its present site in the mid-1970s, bringing together the old Royal Free Hospital in Gray's Inn Road with the Lawn Road, New End and Hampstead General hospitals.

In April 1991 the Royal Free Hampstead NHS Trust became one of the first NHS trusts established under the provisions of the NHS and Community Care Act 1990.

On 1 April 2012 the trust was authorised as a foundation trust, under the name Royal Free London NHS Foundation Trust.

In 2014, Barnet Hospital and Chase Farm Hospital joined our foundation trust, bringing further medical expertise and local care to the NHS services we provide.

Barnet Hospital first provided healthcare in an infirmary in the Barnet Union Workhouse in 1838. Chase Farm Hospital began as a home for pauper children in 1884.

The hospitals were important to medical treatment during both world wars. Between 1916-18, 6,000 wounded and sick soldiers were given medical care at Barnet Hospital, and during the Second World War, Chase Farm cared for wartime casualties under the emergency medical scheme. In 2004 Chase Farm made European history, by carrying out the first total hip replacement procedure with the patient leaving hospital in just 27 hours. At the time in the UK, the average length of stay following a total hip replacement was 11 days.

The Royal Free London NHS Foundation Trust runs three hospitals in London:

- Barnet Hospital
- Chase Farm Hospital
- Royal Free Hospital

Across our three London hospitals, our vision is clear: to deliver world class expertise and local care. We combine globally recognised clinical expertise with local and friendly hospital care to represent the NHS at its best.

Our mission is to be world class in terms of healthcare treatment, clinical research and teaching excellence. We aim to deliver and develop leading local healthcare in all three of our hospitals, to improve lives and help people thrive.

# How the Royal Free will achieve its mission

We will achieve our mission by making sure that we have:

- **Excellent outcomes**, in our clinical treatment, research and teaching
- **Excellent experiences** for patients, staff and GPs
- **Excellent value**, by improving the efficiency and productivity of our services, and reducing costs
- **Full compliance**, meeting or exceeding all regulatory standards and outcomes we are set
- **A strong organisation**, investing effectively in our staff and infrastructure to make sure we are fit for future challenges

## How the Royal Free measures its performance

In order to meet our aims, we want to ensure that our three London hospitals are in the top 10% of all healthcare providers for:

- quality of clinics and treatments
- medical research
- teaching and training new medical staff
- patient satisfaction and experience
- value for money

We set corporate objectives on an annual basis to help us achieve our mission.

## The University College London Medical School

University College London is the largest of over 50 colleges and institutes which make up the federal University of London and is consistently rated as one of the U.K.'s premier academic institutions. The University College Medical School is a general medical school in the Faculty of Medicine of the University of London, formed on 1 August 1998 by the merger of the Royal Free Hospital School of Medicine and University College School of Medicine. A joint Department of Medicine, with around 400 staff, has existed between the two Schools since January 1994. The Department encompasses a broad range of basic and clinical research programmes and undertakes teaching of undergraduates and postgraduates.

### Research

Research and development is a major component of the Royal Free London NHS Foundation Trust strategy and reflects the Trust's desire to maintain its position as one of the top ten trusts for R&D income in the UK. The research efforts of the Trust and Medical School are closely integrated and there are extensive facilities for both clinical and basis science research. Consultant staff are expected to participate in research according to their skills and speciality. An audit system for quality in R&D was introduced during 1998 and reflects an individual's commitment to this area. Applicants should prepare an outline of the research they would wish to undertake if appointed.

#### The Department:

## STAFFING IN OBSTETRICS / GYNAECOLOGY at Barnet Hospital

Miss Moneli Golara	Mr Hemant Vakharia		
Miss Anne Jackson – (Locum)	Mr Daniel Selo-Ojeme - Urogynaecology &		
	Appraisal lead		
Miss Elizabeth Morakinyo – LW Lead	Miss Elaine Cheung - RCOG College Tutor		
Miss Natalia Barbaneagra Clinical	Mr Kannapar Jeyanthan (locum)		
Director (Barnet Site)			
Miss Vibha Ruparelia - Obstetric	Mr Tom Morewood – Medical Students Lead		
Service Line Lead			
Mr Adam Rodin	Miss Sonu Pathak – Colposcopy Lead		
Mr Ioannis Tsimpanakos – Audit Lead			
Mr Mahantesh Karoshi	Mrs Shazia Malik (sabbatical)		
Mr Mark Broadbent - Outpatient	Mrs Sanjay Kumari		
Hysteroscopy			
Mr Pratik Shah			
Rabhia Basri (locum)	Miss Katherine Andersen - Oncology Lead		

The consultant medical staffing in the department comprises the following:

20 Registrar Grade including 3 Trust doctors and 16 SHO Grade



# THE WOMEN'S DIRECTORATE

Women's services are managed within the Women's & Children's Division. The Directorate is managed by a senior management team that consists of:

Divisional Director	-	Tim Wickham
Divisional Director of Operations	-	Ruth Ouzia
Divisional Director of Nursing & Midwifery	-	David Connor
Clinical Directors -	-	Natasha Barbaneagra (BH)
	-	Heather Evans (RFH)
Consultant Service Line Lead – BH (Obs)	-	Vibha Ruparelia
Operations Manager (BH)	-	Julie Savage
Service Managers (BH)	-	Joanne Brain/Jenny
		Wicks
Head of Midwifery (BH)	-	Collette Spencer
Head of Gynae Nursing (RF/BH)	-	Elizabeth Pollard

The Directorate is also supported by Finance managers, Human Resources managers, Clinical Governance and Risk Teams and Information Teams. Directorate meetings are held monthly and have multidisciplinary representation. Consultants are accountable clinically and managerially to the Divisional Director and Clinical Director.

# NATURE OF EMPLOYMENT AND HOURS OF WORK

This is a full time NHS appointment attracting **10 PAs**, plus an availability allowance for the on-call rota. Any candidate who is unable for personal reasons to work full-time will be eligible to be considered for the post; appropriate modification of the job content should, however, be discussed and agreed with the Divisional Director in consultation with the Clinical Director and Consultant colleagues prior to accepting any appointment that might be offered.

## MAIN DUTIES AND RESPONSIBILITIES OF THE POST

Together with all Consultants in the Directorate, the post-holder will be responsible for the clinical and medical management of all Obstetric and Gynaecological patients at the site of the principal appointment and its associated peripheral hospitals and clinics.

The appointee will take part in the on-call emergency rota as shared with the other Consultants within the department but with internal cover for vacational and study leave. The post-holder will be expected to participate in the day to day running of the department including attending the fixed sessions, departmental Ward Rounds, teaching junior staff and students and in administration. In particular, all Consultants are responsible for the management of junior medical staff including the monitoring of their rotas, hours and the appointment, when necessary, of locum cover. They are expected to concern themselves with the personal clinical and professional development of their trainees. The new Consultant will be required to actively participate in the most effective use of resources and provision of services where appropriate and be responsible for overseeing the junior doctors' rotas. The new Consultant will participate fully in the meetings of the Directorate, be a member of the Trust Medical Staff Committee and membership of other Committees as and when nominated or elected.

A full spectrum of Gynaecological conditions is treated using modern methods and technology at Barnet and Chase Farm Hospitals. In addition to general Gynaecology, the following specialist services are offered:

- Colposcopy
- Specialist Vulval Clinic
- Outpatient Hysteroscopy
- Gynaecological Oncology
- Urogynaecology
- Minimal Invasive Surgery
- Endometriosis
- Gynaecological scanning
- Advanced Obstetric Scanning
- Early Pregnancy and Emergency Gynaecology
- Rapid Access Clinics

General and specialist Clinics are held at both Barnet & Chase Farm hospitals as well as sessions at Edgware Community Hospital and Finchley Memorial Hospital. At Barnet Hospital, Gynaecological services are located on Level 1 consisting of the Wellhouse Women's centre, the Early Pregnancy/Acute Gynaecology unit as well as a bespoke colposcopy and outpatient hysteroscopy suite (Level 0)

At Chase Farm there are dedicated outpatient services in Zone M.

Emergency gynaecological admissions are referred through the A & E department at Barnet. All elective operating is undertaken at Chase Farm Hospital. Barnet Hospital has one of the most modern Day Case Units in Europe. Barnet and Chase Farm Hospitals are part of the North London Cancer Network linking up with other Trusts, including the North Middlesex, the Royal Free, University College London Hospital and the Whittington. Dedicated gynaecological Oncology Clinics are held at both hospitals. A Urogynaecology Clinic is also held at Chase Farm Hospital. Colposcopy and Vulval clinics are held at both main sites.

## **Obstetric Services:**

The delivery rate for Barnet hospital is approximately 5,800 per annum. In line with changing Childbirth, Maternity services offer a wide range of choice for Antenatal, delivery and postnatal care. Antenatal care is offered in the main hospital units, community hospitals, in the home environment and G.P. surgeries.

Deliveries are planned to take place at home, in the Midwifery-led and Consultant led Units. Barnet has a full in-patient obstetric service provisions including Day assessment units, ultrasound, fetal monitoring and blood sampling services.

Summary of services provided by the Department include: -

- Integrated Community midwifery
- Outpatient obstetric/shared care

- Combined medical/obstetric diabetic clinics
- Joint Obstetric Haematology Clinic •
- Counselling service
- Dedicated Ultrasound services for booking, fetal anomaly and growth scans
- Consultant led unit. Co-located Midwifery led unit and home deliveries
- Day Assessment Unit
- Midwifery Led Unit
- Dedicated obstetric physiotherapy

# ADMINISTRATIVE SUPPORT

All Consultants will have some secretarial/admin support delivered by a team of navigators largely based at Barnet hospital.

### INDICATIVE JOB PLAN AND TIMETABLE

The on-call commitment will be 1 in 16 out of hours which equates to 1:4 Tuesdays for this job plan. Weekends are currently split Fri + Sun and then Saturday.

The job plan may vary depending on the requirements of the Directorate/Trust Board and future commissioning intentions of Gynaecological services. It is the intention of the commissioners to have non-emergency ambulatory services in the Community. This will have a direct impact on gynaecology outpatient workload and therefore this may no longer be part of the job plan. There will be shared secretarial and office space for the post. Admin and supporting professional activities will be on site.

The Trust is anxious to simplify the time required for appraisal preparation, statutory and mandatory training and job planning. Accordingly, an allowance for this has been prescribed into each job plan by subsuming it into the personal weekly 1 SPA allowance. This is defined on 'my job plan' as the baseline SPA and is recorded on an annualised basis.

	Monday	Tuesday	Wednesday	Thursday	Friday
AM	Elective CS 1:2	ANC 1:2	Labour Ward 1:3	ANWR/ PN debrief 1:4	ANC 1:2
PM	Paediatric gynae clinic 1:2	Main theatre operating uro-gynae 1:6	Uro-gynae clinic 1:2	Main theatre operating 1:4	Uro-Dynamics 1:4
EVE		On call 1:4			

## Indicative Job Plan (Subject to change and formal job planning meeting):

There will be a hot week with a frequency of 1:16 included.

The exact job plan will be formalised based on the successful candidate's competencies. Educational supervision There will be appropriate remuneration for lead roles. There will be a hot week with a frequency of 1:16 included.



## **GENERAL RESPONSIBILITIES**

### Infection Control

Infection control is everyone's responsibility. All staff, both clinical and non clinical, are required to adhere to the Trust's Infection Prevention and Control policies and procedures and the Health Act (2006) Code of Practice for the prevention and control healthcare associated infections and make every effort to maintain high standards of infection control at all times thereby reducing the risk of Healthcare Associated infections.

It is the duty of every member of staff to take personal responsibility for the prevention and control of infection, as laid down in the Trust's polices and procedures which reflect the statutory requirements of the Hygiene Code.

- To work in close collaboration with the Infection Control Team.
- To ensure that monitoring of clinical practice is undertaken at the agreed frequency.
- To ensure that the ward environments are cleaned and maintained to the highest standards; ensuring that shortfalls are rectified, or escalate as necessary.
- To ensure that all relevant monitoring data and issues are provided to the Directorate's Governance structures.
- To ensure that all staff are released to attend infection control-related educational sessions and staff with specialist roles, e.g. link practitioners, are released to undertake their duties.

#### Health and Safety at Work

The post holder is required to:

- Take reasonable care for the health and safety of himself/herself and other persons who may be affected by their actions or omissions at work.
- Co-operate with the employer in ensuring that all statutory and other requirements are complied with.

## CONFIDENTIALITY AND RECORDS MANAGEMENT

You must at all times be aware of the importance of maintaining confidentiality of information gained by you during the course of your duties, which will in many cases include accessing personal confidential data relating to patients and staff. You must treat all information in a discreet and confidential manner and if applicable to your role comply with your professional obligations and codes of practice relating to confidentiality (such as the GMC's Confidentiality Guidance).

Your obligation to respect the confidentiality of information you encounter during the course of your duties continues after your employment with the Trust has ceased.

Personal confidential data regarding patients and staff must not be disclosed either verbally or in writing to unauthorised persons. It is particularly important that you should ensure the authenticity of telephone enquiries.

Written paper records containing patient or staff personal confidential data must be kept securely at all times.

Electronic records containing patient or staff personal confidential data must always be encrypted to the required trust standard, this includes when personal confidential data is saved to portable devices or media such as USB memory sticks, tablets, smartphones, compact discs and external USB hard drives.

Unauthorised deliberate access to records without permission or good reason is not permitted. Staff must not share access controls, passwords or CRS smartcards under any circumstances.

Staff who make entries into in health records must ensure that notes are legible and attributable. Staff are encouraged to follow the generic medical record-keeping standards prepared by the Health Informatics Unit of the Royal College of Physicians.

You must not use social networking websites, or similar media to discuss any aspect of your employment or to give an opinion about patients, colleagues or the trust.

Staff must not use recording equipment (such as camera phones/cameras/video cameras) to take images whilst on Trust premises except with the explicit (written) consent of the individual(s) in the image. Under no circumstances may these images be posted/uploaded onto a social networking website or similar media.

All data held by the Trust must conform to the requirements of the Data Protection Act 1998 ("DPA). Under the DPA, patients and staff have a right of access to their records, but you should be aware that unauthorised disclosure of personal information (including such information that is recorded on computer) is unlawful. Further guidance is available from your manager.

If it is necessary to share Trust personal confidential data in order to effectively carry out your work, you must make sure that as far as is reasonable this information will be exchanged securely, on a strictly 'need to know' basis, using the minimum that is required and be used only for the purpose for which the information was given. If you are unsure about this, you should seek advice from your manager or the Trust's Caldicott Guardian.

You are responsible for ensuring that all information is stored, used, transported and accessed appropriately and that security levels are maintained at all times in accordance with the trust's Information Governance policies.

Any breaches of these conditions during your employment may result in disciplinary action and may be regarded as gross misconduct. Further, any unauthorised disclosures of personal information may be an offence under the Data Protection Act 1998, or may breach the common law duty of confidentiality and/or professional obligations. Any such breach may result in criminal proceedings being taken against you and/or a civil action for damages by the Trust or another affected party

## **Conflict of Interest**



The Trust is responsible for ensuring that the services for patients in its care meet the highest standards. Equally, it is responsible for ensuring that staff do not abuse their official position, to gain or benefit themselves, their family or friends.

## Equality and Diversity

The Trust values equality and diversity in employment and in the services we provide. It is committed to promoting equality and diversity in employment and will keep under review our policies and procedures to ensure that the job related needs of all staff working in the Trust are recognised. The Trust aims to ensure that all job applicants, employees or clients are treated fairly and valued equally regardless of sex, marital status, domestic circumstances, age, race, colour, disablement, ethnic or national origin, social background or employment status, sexual orientation, religion, beliefs, HIV status. gender reassignment, political affiliation or trade union membership. Selection for training and development and promotion will be on the basis of the individual's ability to meet the requirements for the job.

All staff are responsible for ensuring that the Trust's policies, procedures and obligation in respect of promoting equality and diversity are adhered to in relation to both staff and services.

# Vulnerable Groups

- To carry out responsibilities in such a away as to minimise risk of harm to children, young people and vulnerable adults and to promote their welfare in accordance with the Children Act 2004, Working Together to Safeguard Children (2006) and No Secrets guidance (DH 2000).
- To demonstrate an understanding of and adhere to the trust's child protection policies.

## Smoke Free

The Trust implements a Smoke Free policy that applies to all staff. Staff are not allowed to smoke while wearing a recognisable Trust uniform or visible trust identification badge, and not allowed to smoke anywhere on hospital grounds. Staff are not allowed to take additional breaks in order to smoke. They may smoke during designated breaks but only out of uniform and off site. Staff contravening this policy may be subject to disciplinary procedures.

## Standards of Dress

All staff are expected to abide by the Trust's guidance on standards of dress.

This job description outlines the current main responsibilities of the post. However the duties of the post may change and develop over time and may therefore be amended in consultation with the post holder,

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# TERMS AND CONDITIONS GUIDE FOR APPLICANTS

## ALL APPLICANTS SHOULD ENSURE THEY HAVE READ AND UNDERSTOOD THE FOLLOWING CONDITIONS

- 1. Applicants should hold the Fellowship or Membership of the appropriate Royal College or Faculty or overseas equivalent and maintain appropriate CME accreditation. Applications will be considered from those unable for personal reasons to work on a full-time basis. Any candidates wishing to work on a parttime basis should indicate this when submitting his/ her application.
- 2. The NHS (Appointment of Consultants) Regulations 2005 prevent appointment of any applicant for consultant posts commencing after 1<sup>st</sup> January 1997 who is either not:
  - On the GMC specialist register
  - In possession of the CCT, or EEA/EU equivalent, (although doctors who have completed higher specialist training and are within 6 months of being placed on the specialist register may be appointed)

It is the responsibility of applicants to satisfy all necessary GMC requirements prior to appointment. Applicants must ensure they provide evidence in their application identifying eligibility to be placed on the specialist register. This would ideally be in the form of a notification from the GMC.

- 3. The appointment is covered by the Terms and Conditions of Service of the Royal Free London NHS Foundation Trust and is subject to the National Health Services (Superannuation) Regulations.
- 4. As an employee of the Royal Free London NHS Foundation Trust you will be expected to practice at all times in accordance with the infection control standards specified in trust policies and procedures and the Health Act (2006) Code of Practice for the prevention and control of health care associated infections.
- 5. The full time basic salary for the first appointment of an NHS consultant (as at 1<sup>st</sup> April 2009) is set out below, including payment for agreed additional programmed activities. Part-time consultants will be paid pro rata, based on the number of agreed weekly Programmed Activities in the consultant's Job Plan. Salary on commencement and subject to progression will be in accordance with Paragraphs 4-9 of Schedule 14 of the Terms and Conditions.

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## Pay thresholds

Threshold	Period before eligibility for threshold	Basic salary (full-time) (2013/14)	Payment for one additional Programmed Activity	Annual payment for one additional Programmed Activity per week
1	N/A(full-time starting salary)	£75,249	£145	£7,525
2	One year	£77,605	£149	£7,760
3	One year	£79,961	£154	£7,996
4	One year	£82,318	£158	£8,232
5	Five years	£84,667	£163	£8,467
6	Five years	£90,263	£173	£9,026
7	Five years	£95,860	£184	£9,586
8		£101,451	£195	£10,145

A London Weighting Allowance of £2,162 per annum is payable and pro rata for parttime consultants.

- 6. There are separate arrangements for those whose first appointment as an NHS consultant was before 31st October 2003. These are stated in the terms and conditions of service. The successful applicant will be required to complete a health statement and the Trust may require an appointee to pass a medical examination as a condition of appointment.
- 7 Private Professional Services and NHS Programmed Activities: subject to the provision in Schedule 9 of the Terms and conditions, you may not carry out Private Professional Services during your programmed activities.
- 8. Significant new clinical services may only be developed after agreement has been reached with the relevant management team and the financial arrangements approved.
- 9. Assistance may also be given to newly-appointed consultants towards the cost of the removal expenses, provided that the consultant moves from a position within the National Health Service, that removal is necessary to comply with the Trust's requirements concerning the place of residence and a written request is sent to the Workforce department before or immediately after appointment.
- 10. It is now NHS policy that all new staff with patient contact will require satisfactory disclosures from the Criminal Records Bureau or successor organisation. With effect from 1 November 2004 the trust will therefore seek disclosures for all new medical appointments. The Trust must check the criminal background of all employees. Candidates must provide information on application relating to any criminal convictions they have had, even if they are 'spent' for other purposes. Posts in hospitals are exempt from the provisions on Section 4 (2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975. We will keep any information given completely confidential.

