

Job Title: Consultant Care of the Elderly Department: Local Services Sector: Care Group 2 Division 3



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About Us:

Mid and South Essex NHS Foundation Trust is now one of the largest in the country, with a workforce of approximately 15,000 who serve a population of 1.2 million people.

We work together, and in conjunction with <u>MSE Health and Care Partnership</u> to deliver excellent local and specialist services, to improve the health and wellbeing of our patients, and provide a vibrant place for staff to develop, innovate and build careers.

From facilities through to consultant specialists we want to be the best, to achieve this we need to recruit not just those who are the finest in their field but also those who have the potential to be. Yes, experience is important but so is outlook – if you are dynamic, forward-thinking, and enthusiastic we want you to join us.

We not only offer you a good working environment with flexible working opportunities, but also the opportunity to develop your career with access to appropriate training for your job and the support to succeed and progress.

If you join the MSE team, you may be working at one of or across our three main sites:

- Broomfield Hospital in Chelmsford
- Basildon and Thurrock Hospital
- Southend Hospital

So, whether you're looking for an entry level, apprentice role or your next exciting and fulfilling challenge within the NHS <u>browse our vacancies</u> to find the right role for you and start building your career with MSE today.

Our Trust Values:

As a fully established, merged organisation, we've worked with you, our staff, to understand what it means to be part of Mid and South Essex NHS Foundation Trust. Our strategic goals clearly set out our purpose and ambitions, and our new values and behaviours show how we will work together, with each other, our patients, and our stakeholders, to achieve our aims.





Why join Mid & South Essex NHS Foundation Trust:

The NHS is changing. We are entering a new era in healthcare: one where everyone has a choice of where they receive their treatment and there are core NHS principles which outline the provision of care.

This creates new and exciting challenges for us. Gone are the traditional hospital and community care settings, replaced by a competitive more commercial environment, where the Trust is judged on the whole experience, from technical excellence, through to care and comfort.

We want our hospitals to be the place where patients come first.

We want patients to leave us feeling that they made the right choice, that they have received the best care and have been treated with dignity and respect.

This requires the right people. Experience is obviously paramount, but so is the right attitude. We want people who will thrive in a competitive environment and who are willing to go the extra mile to make patients feel that they are important, and colleagues feel that you are an integral part of their team.

If you are looking to make a positive contribution and have the commitment, professionalism and dedication working for the benefit of our patients to really make a difference then we want to hear from you.

In return we provide staff with clear roles and responsibilities and rewarding jobs for teams and individuals that make a difference to patients, their families and careers.

We offer you a good working environment with flexible working opportunities, consistent with the needs of patients and with the way that people live their lives.

We will also provide you with personal development, access to appropriate training for your job and the support to succeed.

We will provide support and opportunities for you to maintain your health, well-being, and safety.

You will also be given opportunity to engage in decisions that affect you and the services you provide, individually through representative organisations and through local partnership working arrangements.

All our staff are empowered to put forward ways to deliver better and safer services for patients and their families.

We'll also give you the motivation by providing excellent career packages and benefits, combined with the opportunity to work with like-minded individuals. All we need from you is the necessary expertise and good people attitude.



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Job Description

Consultant Care of the Elderly

(RCP no 2280003889 17.10.21)

Mid & South Essex NHS Foundation Trust

Broomfield

Directorate Profile:

Current Staff:

Role	Name	Special Interest (if applicable)
Consultant Geriatrician	Dr Anser Qureshi	Movement Disorders
Consultant Geriatrician	Dr Ahmed Ishaque	Orthogeriatric, Medical Examiner
Consultant Geriatrician	Dr Vijay Sharma	Community Geriatrics, Complex Care and Stroke Rehabilitation
Consultant Geriatrician	Dr Varghese Kurien Thyparambil	RCP College Tutor
Consultant Geriatrician	Dr Yoganathan Suthahar	Clinical Lead for Elderly Medicine Oncogeriatrics, Honorary Lecturer Barts & London Medical School
Consultant Geriatrician	Dr Katie Ewins	Falls Clinical Governance, Medical Examiner
Consultant Geriatrician	Dr James Orpin	Clinical Director for Local Services, Lead for Deteriorating Patient & End of Life Care
Consultant Geriatrician	Dr Matthew Sweeting	Movement Disorders Hospice Care
Consultant Geriatrician	Dr Charles Mukherjee	Frailty Morbidity & Mortality, QI / Audit
Consultant Geriatrician	Dr Isabel Costello	Delirium & Dementia Lead for Physician's Associates
Consultant Geriatrician	Dr Emma Stevenson	Frailty, Surgical Liaison

Department Bed Complement:

Our current bed base consists of:

- 1. A 4 trolley Same Day Emergency Care area/Frailty Ambulatory Bay (FAB)
- 2. A 16-bedded short stay Frailty Ward
- 3. 4 longer stay Geriatric wards (26 beds each)
- 4. An orthogeriatric 'buddy' ward
- 5. A Community liaison service to three Intermediate Care facilities.

Inpatients:

Our inpatient bed base is the largest in medicine at our hospital with a total of 120 beds spread across 5 ward areas.

Day-cases:

Patients can be reviewed via Frailty Ambulatory Bay for same-day emergency care or the Outpatients clinic.

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Office Accommodation / Support:

Trained medical secretarial support will be available and suitable office accommodation will be provided. Secretarial support will be provided at a minimum of 0.5 WTE support. The post holder will share office space with a desk and IT support with access to Microsoft Office, the Hospital intranet, internet and email facilities.

MDT Arrangements:

On our acute wards the consultant geriatricians facilitate twice daily board rounds with ward MDT input. The consultant geriatricians also contribute to wider MDTs for the Dementia Intensive Support Service, Virtual Frailty ward (home-based rehab), lower GI cancer pathway and vague symptoms suggestive of cancer services.

Job Description 6





Job Title: Consultant in Elderly Care

PA's: 10 Programmed Activities

Period: Permanent

Reports to: Clinical Director

The Job Role:

These are newly created substantive roles designed with flexible working in mind. Successful candidates will work alongside eleven substantive Consultant Geriatricians, some of whom already enjoy flexible working over 3 or 4 days/week.

The new consultant posts will support the expansion of our Frailty Service and the development of our Orthogeriatric service. The role would involve working across acute frailty, orthogeriatric, inpatient wards and community on a rotational basis and subspecialty interests can be catered for within these rotations.

The Department of Medicine for the Elderly (DoME)

The DoME is an exciting and expanding specialty which has undergone significant change in the last few years. We now have ten substantive Consultants with a range of sub-specialty interests. We are looking to expand our department in order to develop and improve our frailty and orthogeriatric services across the Mid Essex region across both acute and community domains. Our consultants can rotate between wards/areas depending on their areas of interest.

Frailty Unit

In April 2019 our Frailty service expanded to comprise of a 16-bedded Frailty Ward and a 4trolley ambulatory bay (FAB) within a self-contained unit on the hospital's emergency village floor.

This innovative service incorporates both acute and community employees to ensure older people with a frailty syndrome are identified, assessed, treated and discharged in a timely fashion utilising a rapid multidisciplinary Comprehensive Geriatric Assessment (CGA). The service is consultant led operating 7 days a week.

The Frailty team has a daily presence in the Emergency Department (ED) focusing on admission avoidance and works closely with our ED and Acute Medical colleagues. A 'Silver phone' exists to provide GPs with direct access to a Consultant Geriatrician 5 days a week for phone advice and access to Ambulatory Frailty slots.

Following the recent pandemic there has also been a shift towards providing virtual consultations for patients which has also enabled the service to expand and develop.

The new post holder will help to support the expansion of the frailty service to meet the current local needs which includes 7-day cover.

Longer Stay Geriatric Wards

The DoME has four 26-bedded "longer stay" geriatric wards (Baddow, Bardfield, Braxted and Writtle). The wards are multidisciplinary and utilise a CGA methodology. The wards are Consultant led and have twice daily board rounds during the week. These wards are designated 'dementia friendly' zones and actively participate in the Gold Service Framework.

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Orthogeriatric

There is a dedicated orthogeriatric ward which is covered by two Consultant Geriatricians. The Consultants review all new patients with a fractured neck of femur and support the National Hip Fracture Database. The Consultants support junior medical staff on the ward and have excellent working relationships with their Orthopedic colleagues. The Consultants support various orthogeriatric MDT meetings and provide clinical oversight for medical outliers on the orthogeriatric ward.

The new post holder will have opportunity to support the expansion of the elective orthopedic service providing in reach to the planned elective orthopedic surgery centre at Braintree Community Hospital.

Community Medicine / Intermediate Care (IMC)

The department currently provides one full time consultant equivalent to support Intermediate care services in the Mid and South Essex region. There are three IMC facilities based at Halstead, Maldon, and Braintree. The Consultant provides ward reviews, supports multidisciplinary meetings, and helps input into complex case decisions. Community services are rapidly evolving to support the needs of the frail older person at home. As such, there is now a real focus on rapid community response and early frailty identification. The DoME is actively involved with our community services to support this redesign. The new post holders would be encouraged to support this redevelopment.

Oncogeriatric Outpatient Service

This innovative service which has been in place since 2017 has seen Consultant Geriatricians assessing and investigating patients over the age of 80 years referred for suspected lower gastrointestinal cancer under the 2-week wait pathway. This allows a holistic approach to assessment and treatment in this patient cohort.

Movement Disorders Service

Two Consultant Geriatricians have a subspecialty interest in this area and run weekly clinics. They are supported by acute and community Parkinson's nurse practitioners. The team provides outpatient and inpatient support to Parkinson's patients. The clinics have recently expanded to support our Neurology services and the team supports the National PD audit.

Outpatient Clinics

All of the Consultant Geriatricians have outpatient clinics. These are a mixture of Geriatric Medicine and specialist clinics (e.g., movement disorders, delirium/dementia or oncogeriatrics).

Dementia Services

There is an excellent dementia team based at Broomfield. This is supported by a Delirium and Dementia CNS, a Consultant and a Steering group. The department also provides support to the 'Dementia Intensive Supportive Service' participating in a joint MDT with psychogeriatricians as well as front door assessments of older people through the frailty service. The department has good working relationships with the Old Age psychiatry team who are co-located on the same hospital site. Joint educational meetings are held every 2-3 month.

Safeguarding Older Adults

The lead Clinician for this service is based in the department. The team support the training and education of capacity assessments and safeguarding concerns for older people within the hospital.

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Morbidity and Mortality and Medical Examiner

The department has two medical examiners who support the bereavement office in death reviews and certification. They also work closely with the clinical lead for mortality in the medical division who is also within the department to provide a direct link into the Trust's morbidity and mortality group.

Clinical Governance and Departmental Meetings

The department has monthly clinical governance meetings which are fed into the Directorate group. There are regular Consultant business meetings to ensure adequate planning for our department.

Education, Postgraduate and Undergraduate teaching

The department currently provides Geriatric Medicine teaching to Medical Students studying at Bart's and the London Medical School as well as the local Anglia Ruskin University Medical School. All Consultants are expected to support the teaching, training, and nurturing of our future doctor workforce, if relevant to your job plan.

We also welcome Physician Associate trainees from the local university for placements and a high number of work experience students and clinical attachment doctors from overseas.

We have two Physician Associates working within our department to support our junior doctors. They are a great resource and provide excellent continuity of care.

The hospital is equipped with simulation training facilities, and this is led by one of the Consultants within this department.

The department holds weekly educational meetings and there is a weekly grand round. The successful candidate would be encouraged to contribute to these and support FY and IMT teaching.

The department has a long tradition of supporting audit and quality improvement and has presented work at local, regional, national and international levels.

Frailty Weekend Cover

The Frailty Unit is a 7-day geriatrician-led service and operates a 1:10 Rota. The Frailty Weekend consultant is on the unit 9.00am to 13.00pm to facilitate inpatient reviews on the ward. Candidates will be expected to join the Frailty Weekend Rota.

Workload and Additional Support Staff:

The Consultants are well supported by junior staff including four training Registrars from the East of England Deanery (2 Geriatrics, 2 GiM), with five further trust registrars currently in post. The wards are also supported by roughly 30 junior doctors of varying grades (Foundation, GPVTS and IMTs) and 2 Physicians Associates.

The Postholder would be expected to be actively involved in teaching including medical students and postgraduate trainees with formal teaching sessions, workplace assessments and Clinical/Educational Supervision, in accordance with your job plan. A new medical school has opened at the Anglia Ruskin University campus in Chelmsford, currently 100 students per year. This represents a great opportunity to develop teaching, and to train the doctors of the future to work locally. All formal additional training will come with 0.25% per trainee.



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Clinical Duties:

- Management of inpatients in DoME
- On call responsibilities
- Outpatient clinic or equivalent
- Clinical admin

Organisational Duties:

- Promote a friendly and team based working environment in line with our Trust Values.
- To undertake managerial and budgetary responsibilities as required.
- Teaching of primary care colleagues and junior medical staff through mixture of casebased review and formal teaching activity

Clinical Governance:

To provide clinical services in line with the Trust's clinical governance arrangements which is designed to ensure that agreed quality standards are achieved. These requirements include:

Audit:

To undertake audit of clinical practice within the department to ensure that current standards and evidence-based practice are applied.

Continuing Professional Development:

All Consultants are required to maintain and develop their clinical skills. Individual training and development needs will be identified through an appraisal process. The Trust supports the requirements for continuing professional development (CPD) and is committed to providing time and financial support for these activities.

Risk Management:

To work within the Trust's clinical risk management policies and in particular to participate as appropriate in clinical incident reporting.

Appraisal and Development:

All Consultants in the Trust are required to participate in the Trust's appraisal process. A trained, Trust-nominated appraiser conducts this. It is expected that the successful candidate will comply with the appraisal process. Yearly appraisals are a mandatory requirement as a part of the GMC Revalidation cycle for all medical staff in the NHS.

Teaching and Training Activities:

There is an expectation that part of this job should involve on-going teaching and training of primary care colleagues through group teaching and practice-based sessions in order to disseminate specialist skills and provide a forum for the discussion of case studies and set clinical guidance, in accordance with your job plan.

The hospital has University status. Consequently, the training of medical students, junior hospital doctors, physician's associates, nurses, and physiotherapists has a high priority. The new colleague will be actively encouraged to pursue any interest in this area.

Clinical Governance is a major part of our daily practice. The hospital has a dedicated, separate department with allocated clinical and ancillary staff to facilitate this.

There is a well-stocked medical library with audio-visual teaching aids and a full-time librarian.



The library has a Medline facility. There is a thriving Postgraduate Medical Centre with regular clinical meetings and a general education program.

All consultants are expected to take advantage of study leave to maintain and develop their clinical skills to comply with CME requirements.

Job Plan:

The Clinical Director and General Manager are responsible for the review of the job plan in conjunction with the post-holder. The job plan for the first three months will be based on the provisional timetable shown below.

A formal job plan will be agreed with the appointee and their Clinical Director, on behalf of the Medical Director, three months after the commencement date of the appointee. This will be signed by the Chief Executive and will then be reviewed annually, following an Appraisal Meeting.

It is expected that the job planning process will be approached with professionalism, honesty and transparency.

Weekly Timetable:

The changing nature of the contracting process makes it essential that all consultants have a flexible approach to working arrangements which may include innovative working patterns, including 7 days working in the future. The job plan will be reviewed at a 3, 6 and 12 monthly interval following initial appointment.

The job plan (for a full-time contract) will consist of the following (provisional timetable below):

•	Direct Clinical Care:	8.5 PAs on average per week (Includes clinical activity, clinical related administrative activity, predictable and unpredictable work)
٠	Supporting Professional Activities:	1.5 PAs on average per week (Includes CPD, audit, teaching and research)

Additional payment for on call will be calculated once job plan is finalised (if applicable to role).

Planning for lunch/ travel time will be include in the ongoing formal job planning discussion.

	AM	PM	
Monday	Ward Round (DCC)	Outpatient Clinic (DCC)	
Tuesday	Ward Round (DCC)	SPA	
Wednesday	Ambulatory Frailty (DCC)	Ambulatory Frailty (DCC)	
Thursday	Ward Round (DCC)	d Round (DCC) SPA	
Friday	Ward Round (DCC)	Admin	

On Call Availability

General Medicine On call (Optional)

The Physician of the Day on call operates a 1:22 rota. The medical takes are split between day and overnight. The day on-call physician is 'on take' from 2pm to 9.30pm. The overnight on-call physician is on call from home from 9.30pm and undertakes a post-take round at 7.30am the next day. The Medical Take Team provide junior doctor support.

The on-call availability supplement is 3%.

General Statement

Mentoring:

All new consultants will be provided with a mentor from the consultant body in order to aid professional development and provide advice.

Management:

The appointee will be expected to take part in day-to-day business management to ensure smooth running of services, and to contribute to service development, including review of consultant job plans where necessary from time to time.

Appointment to the post:

The appointment will be made by the Board on the recommendation of an Advisory Appointments Committee, constituted in terms of the Guidance on Advisory Appointments Committees. Any person suitably qualified and experienced who is unable for personal reasons to work full-time, will be eligible to be considered for the post for part-time hours.

The appointment is subject to Medical and Dental Terms and Conditions of Service for Consultants (England) 2003. It is subject to the National Health Service (Superannuation) Regulations. The conditions are exclusive of appeal rights to the Secretary of State (Section 190).

Policies & Procedures:

You are required to comply with the Trusts Policies and Procedures.

Information Security and Confidentiality:

- All person identifiable information must be held in the strictest confidence and must be disclosed only to authorised people in accordance with the 1997 Caldicott recommendations, 2018 Data Protection Act, ratified information sharing protocols and patient consent.
- Where there is any doubt, the post holder must seek advice from the Caldicott Guardian or deputy. A breach of confidentiality may result in disciplinary action being taken in accordance with the Trust's disciplinary procedure.
- It is the responsibility of the post holder to abide by all organisational policies and procedures, particularly those in the information security section of the

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policy folder.

- To meet the requirements of the 2018 Data Protection, Act the post holder is responsible for the maintenance of up to date and timely data entry and to ensure that information processed is safeguarded, securely stored and safely disposed of.
- To maintain data quality, it is essential that clinical information extracts and reports are validated by the appropriate clinician prior to distribution.

Information Governance:

- All staff must be familiar with and comply with the contents of the Information Governance Handbook, a personal copy will be provided at Induction to all staff.
- All staff are required to maintain confidentiality of patient and Trust's information as set out in the Trust's Confidentiality Policy.
- All staff are required to read and comply with all policies that are issued relating to the electronic security of Trust's information.
- All staff who create, access, transfer, modify sensitive Trust's records have a responsibility to be both accurate and timely and ensure that all the information that they record either on paper or electronically is complete.

Confidentiality:

- Your attention is drawn to the confidential nature of information collected and used throughout the NHS. The unauthorised use or disclosure of patient, staff or other personal information is a dismissible offence. The unauthorised disclosure of information could also result in a prosecution for an offence, or action for civil damaged, under the Data Protection Act.
- All matters relating to patients' diagnosis and treatment, staff or the Financial or contractual position of the Trust are strictly confidential and under no circumstances is such information to be divulged or passed to any unauthorised person(s) under penalty of summary dismissal.
- All staff should take particular care relating to the electronic storage and transfer of confidential information. This should only be done in accordance with the Trust's Information Security Policy.

Equal Opportunities and Diversity:

The Trust has an absolute commitment to equal opportunities based on sound management practice, respect for the individual and legislative compliance. The post-holder must at all times carry out his/her responsibilities with regard to the Trust's Equal Opportunities Policy & the Race Equality Scheme.

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Health and Safety & Risk management

Employees must be aware of the responsibilities placed upon them under the Health and Safety Work Act 1974, to ensure that the agreed safety procedures are carried out to maintain a safe working environment for patients, visitors and employees.

Employees must wear personal protective equipment where provided.

All employees are expected to comply fully with the Trust and Departmental fire policies and procedures to meet their responsibilities in relation to fire safety. All staff are also expected to maintain safe infection control practices at all times.

All employees are responsible for reporting any accidents, untoward occurrence and potential hazards to their Head of Department even no injury or property damage has resulted.

Relocation Expenses:

Relocation expenses may be available subject to eligibility in line with the Trusts policy.

Health Clearance:

The appointment is made subject to satisfactory fitness for practice. The candidate will therefore be required to complete a pre-employment health screening questionnaire and may/will subsequently be required to attend for health screening.

Revalidation:

The trust has the required arrangements in place, to ensure that all doctors have an annual appraisal with a trained appraiser and supports doctors going through the revalidation process.

Registration:

The appointed candidate will be required to be fully registered with the General Medical Council and hold a license to practice

Rehabilitation of Offenders Act:

Because of the nature of the work of this post, it is exempt from the provision of section 4(2) of the Rehabilitation of Offenders Act 1974 (Exemption Order 1975). Applicants are, therefore, not entitled to withhold information about convictions including those which for other purposes are "spent" under the provisions of the Act, and in the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by Basildon and Thurrock University Hospital. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the order applies.



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Terms and Conditions of Service:

The appointment is subject to Medical and Dental Terms and Conditions of Service for Consultants (England) 2003.

Applicants must have full and specialist registration with the General Medical Council (or be eligible for registration within 6 months of interview).

Holder of Certificate of Completion of Training (CCT), or within six months of award of CCT or equivalent by date of interview.

The starting salary for new Consultants is as per Annex A: Section 2: Consultant (2003 contract)

Annual and Study Leave

The annual leave is 30 working days plus two statutory day holidays which rises to 34 days with more than 7 years' service as an NHS Consultant.

All consultants are expected to take advantage of study leave to maintain and develop their clinical skills to comply with CME requirements.

Study leave is available as provided for under the Terms and Conditions of Service and Hospital Medical and Dental Staff. Study leave consists of 30 days over a threeyear period commencing from date of employment. Currently Consultants are allowed up to £1000 per financial year (1st April – 31st March) in line with the Trusts Study Leave Guidelines for Consultants and Specialty Doctors.

Approval of annual and study leave is subject to the procedures set out within the individual departments and the Postgraduate Medical Centre for study leave.

Post holders are required to follow the Trust annual leave policy and procedure for approval.

So far as is practical, the Consultant appointed will be expected to share in the provision of cover for the annual and study leave of other Consultants in the specialty.

Termination of Contract:

Termination of the appointment is subject to three months' notice on either side.

Private Practice:

The successful applicant may undertake private practice in accordance with the Schedules 9 & 10 of Terms and Conditions of Service. However, where such practice might conflict directly with the Trust's interests, the Appointee must bring this to the attention of the Medical Director.

Medical Indemnity:

The Trust is financially responsible for the negligent acts and omissions of consultant medical and dental staff in the course of their Trust employment. If, however, any private practice, within an NHS hospital or any other hospital is undertaken, the appointee will be personally responsible for subscribing to a recognised defence

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organisation. The Trust will not be responsible for category 2 (e.g., reports for insurance) or 'Good Samaritan' Acts. Health Circular HC (89) 34 provides full details of 'Claims of Medical Negligence against NHS Hospital and Community Doctors and Dentists'.

The Department of Health advises practitioners to maintain defence body membership in order to ensure they are covered for any work which does not fall within the scope of NHS Indemnity.

Place of Work:

The appointee will be based at Broomfield site however may be required to work at other sites within the Trust. The appointee will be fully consulted regarding any changes to job plan.

It is desirable for the appointee to have their own transport.

No Smoking Policy:

It is the policy of the Trust to promote positive health. Smoking, therefore, is prohibited in all buildings and the grounds of the hospital.

Security:

In the interests of safety and security the appointee will be required to wear Hospital Staff Identification Badge at all times whilst at work.

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Person Specification

Criteria	Essential	Desirable
	MBBS or Equivalent	MD/PhD or other higher degree
Qualifications	Entry on GMC Specialist Register; eligible for entry on Register or within six months of receipt of Certificate of Completion of training (CCT) at time of interview	Postgraduate diploma ALS
	Evidence of completion of specialist training or equivalent	
	MRCP (UK) or equivalent	
	Evidence of thorough and broad training and experience in the specialty.	Previous experience as a Consultant Geriatrician (locum or substantive)
	Comprehensive knowledge in the specialty and ability to offer expert clinical opinion on range of problems.	A special interest within Geriatric Medicine complementing those currently in the directorate.
Experience and Knowledge	Experience of working independently as a senior clinician	An interest in managing frailty in acute care, orthogeriatric or
	Experience of inter-agency working	movement disorders would be
	Experience of teaching trainees / multidisciplinary staff	particularly welcome
	Demonstrates good knowledge of the structures and culture of the NHS, roles, responsibilities and relationships across the MDT and the multi-professional team	
	Able to take full and independent responsibility for delivering service without direct supervision.	
	Knowledge and experience of supervising undergraduates, junior doctors and other staff	
	Ability to teach clinical skills	
Teaching Experience	Interest in, and knowledge of, advances in medical education and training. Ability to operate within a teaching / training culture	
	Interest in, and knowledge of, advances in medical education and training. Ability to operate within a teaching / training culture Page 18 of 19	

Ability to encourage on-going learning both in self and others	
Knowledge of the principles of research/audit and ability to interpret and apply clinical research.	Recent published clinical research in peer reviewed journal.
Ability to apply research outcomes to clinical and surgical problems	Ability to supervise postgraduate research
Excellent verbal and written skills. Ability to communicate effectively with clinical colleagues, other specialties and support staff	
Evidence of management experience or training.	
Ability to advise on efficient and smooth running of specialist service	
Ability to manage and lead department	
Ability to develop effective working relationships on an individual and multi- disciplinary basis with all levels of staff	Patient / staff awards for team- working / patient care / shared values
workload Ability to take responsibility and show	
evidence of leadership Ability to adapt and respond to changing circumstances	
Ability to work under pressure	
Willingness to undertake additional professional responsibilities at local, regional or national level	
Caring, honest and reliable	
Ability to travel between sites	Own transport
	learning both in self and others Knowledge of the principles of research/audit and ability to interpret and apply clinical research. Ability to apply research outcomes to clinical and surgical problems Excellent verbal and written skills. Ability to communicate effectively with clinical colleagues, other specialties and support staff Evidence of management experience or training. Ability to advise on efficient and smooth running of specialist service Ability to develop effective working relationships on an individual and multi- disciplinary basis with all levels of staff Able to organise and prioritise workload Ability to take responsibility and show evidence of leadership Ability to work under pressure Willingness to undertake additional professional responsibilities at local, regional or national level Caring, honest and reliable

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