



# **Chairman Mr Tom Spink Chief Executive Prof. Lesley Dwyer**

# **Locum Consultant in Anaesthesia** (Paediatric Anaesthesia)



Department of Anaesthesia, Critical care and Pain Management

**Norfolk and Norwich University Hospitals NHS Foundation Trust** 

April 2024



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#### Introduction

This a full time fixed-term Locum post for a Consultant in Anaesthesia with a special interest in Paediatric Anaesthesia for a fixed term of 12 months. The successful applicant would join a team of 8 paediatric subspecialty anaesthetists who undertake a mix of paediatric and adult practice and cover a paediatric anaesthetic on call rota.

A candidate who is unable for personal reasons to undertake the duties of a wholetime post will receive equal consideration. If such a candidate is appointed the job content will be modified as appropriate in consultation with consultant colleagues and local management.

We welcome all applications irrespective of age, disability, gender, sexual orientation, race or religion. Additionally, people with disabilities will be offered an interview providing they meet the minimum criteria for the post. The Trust operates job share and flexible working.

# The Department

# **ADMINISTRATIVE PERSONNEL (ANAESTHESIA)**

Operational manager Miss Mollie Snelling

Office Manager, Education Mrs Karen Hall

General Secretarial Support Mrs Bethany Jackson

Departmental OPA Ms Emmy Jackson

Chairman Dr N Saunders

Chief of Service Dr R Morris
College Tutor Dr J Kaur

College Tutor Dr J Ka

(ST3 and above)

College Tutor Dr J Francis

(LTFT/ACCS, CT1 and 2)

Faculty Tutor Pain Dr. D Laba
LTFT Dr M Roe

# **ADMINISTRATIVE PERSONNEL (CRITICAL CARE)**

Operational Manager: Ms Karen Warnes

Service Director Dr S Kumar Faculty Tutor ICM Dr J looker CCC Matron: Mrs Keri Betts

### CLINICAL PERSONNEL (ANAESTHESIA/CRITICAL CARE)

Consultants	72
Associate Specialist	2
SAS Grades	2
Clinical Fellows	2
CESR Fellows	4
Specialist Registrars	24
Research Registrar	1
MTIs	3
CT1/CT2/ACCS	6
Anaesthesia Associates	3
Anaesthesia Associate Trainees	3
CCC Specialist Registrars 2	
CCC FY2/CT2/ACCS/IMT 14	
CCC Clinical Fellows	3
CCC ACCPs	3
CCC ACCP Trainees	2
CCC ODPs	6

# The Department

The Norfolk and Norwich University Hospital NHS Foundation Trust (NNUH) is a 1300 bed tertiary teaching hospital providing surgical services for a population of approximately 1 million, serving patients from the James Paget Hospital (Great Yarmouth), and Queen Elizabeth Hospital (King's Lynn) as well as those living in its own catchment area.

# **Anaesthetic Department**

The anaesthetic department is one of the busiest in the country providing support for approximately 30000 surgical procedures per annum. It has recently been reaccredited by the prestigious Anaesthesia Clinical Services Accreditation (ACSA) system. The department supports 26 theatres (17 inpatient, 6 Day Surgery, 3 regional anaesthesia only), 2 obstetric theatres, eve theatres and remote anaesthesia in various other locations around the Trust. A new 2 theatre dedicated paediatric theatre complex opened in January 2024 and increased the paediatric surgical schedule. A dedicated 2 theatre elective orthopaedic surgical suite is due to open in May 2024. Specialties covered include:

- Thoracic surgery (approximately 200 lung resections per annum),
- Upper GI surgery including minimally invasive oesophagectomy.
- Colorectal surgery including robotic surgery and exenterations,

- Plastic and reconstructive surgery,
- Complex head and neck cancer,
- Paediatric (including neonatal surgery),
- ENT and maxillofacial surgery
- Vascular surgery including interventional FEVAR/EVAR,
- A high volume orthopaedic service including pelvic surgery, complex joint revision surgery and adolescent scoliosis surgery.
- Urology including robotic renal, prostate and bladder surgery.
- -Gynaecological oncology including exenterations, laparoscopic para-aortic lymph node surgery and HiPEC.
- Interventional radiology
- Brachytherapy
- Complex EP ablation surgery

The emergency theatres are amongst the busiest in the country. We performed 292 emergency laparotomies in the most recent NELA report (the fifth highest nationally). There are about 50-70 paediatric emergency cases a month including neonatal surgery.

The anaesthesia department supports a minimum of 10 consultant (averages 20) delivered pre-assessment clinics per week for high risk and complex surgery patients. There is currently one Paediatric clinic a week and one pre-op scoliosis clinic a month.

The obstetric department supports approximately 6000 deliveries per annum and provides multi-disciplinary care for high-risk pregnancies and is the regional centre for abnormally invasive placenta deliveries.

The critical care unit has 28 beds and is also amongst the busiest in the country with approximately 2500 admissions per annum.

The NNUH continues to invest in its specialist services. A new 4 theatre interventional radiology unit with 4 theatre suites (2 GA capable) opened in 2020. The NNUH is also investing in Robotic Surgery, has recently purchased two new DaVinci robotic systems and the Norwich Robotic Surgery Centre opened in 2021 supporting robotic surgery in urology, thoracic, colorectal, upper GI and ENT. The hospital recently became one of only a few centres nationally to introduce perioperative Hyperthermic Intraperitoneal Chemotherapy (HiPEC).

The anaesthesia department has supported the development of a dedicated regional anaesthesia service that supports the newly opened Ambulatory Procedure Unit (APU). The APU opened in 2021 and has three theatres (including one ultra clean) and supports plastic hand trauma, elective upper and lower limb surgery and will in due course support varicose vein surgery and renal fistula surgery. The unit runs a strict regional/local anaesthesia only model (no sedation/GA).

The anaesthetic department is a diverse group that prides itself and is recognised in the region for providing a friendly and supportive environment for all of its staff. Colleagues are actively encouraged to develop interests in teaching (post and undergraduate), research and quality improvement and audit. A number of colleagues are nationally active and include a recent vice-president of the RCOA council, a recent president of the ESRA, BADS council, an NCEPOD clinical lead, a member of BMA council and a member of AAGBI council. 4 consultants are current FRCA examiners.

The anaesthetic department has a small number of 'hot desks' with access to computer and internet within a shared office. Secretarial support is shared. Given the limited desk space, it is accepted that the appointee can complete SPA activity at home when appropriate.

# NNUH Paediatric Anaesthetic Service

The appointee will be joining a team of 9 colleagues with a paediatric anaesthetic interest and will be required to provide anaesthesia for paediatric patients including neonates and support a separate paediatric anaesthetic on-call service (1 in 8). Paediatric surgery includes all specialties with the exception of cardiac, neurosurgery and transplant. There are 6 Consultant Paediatric Surgeons and 3 Consultant Paed-Orthopaedic Surgeons. Other surgical specialties all have consultants with an interest in paediatric practice (ENT, plastics, ophthalmology, maxillo-facial, dental, rheumatology and gynaecology). There are regular GA CT/MRI lists covered by the paediatric anaesthetists. A paediatric pre-operative assessment clinic takes place once a week, which is flexibly covered by the group.

There is a level 3 NICU on-site run by a team of neonatologists and approximately 80 neonatal surgical procedures are undertaken each year. There is no PICU on site, but a 6-bedded HDU is based on the paediatric ward. There are plans to enhance the capacity and capability of this HDU to fully meet criteria for level 2 PCCU with possible overnight ventilation.

#### Consultant Staff

Dr S Adyanthaya	Lead for Obstetric Anaesthesia, Regional Anaesthesia
Dr K Allan	Critical Care, Major General Anaesthesia, Trust Sepsis Lead
Dr A Arora	Paediatric and Thoracic Anaesthesia
Dr P Barker	Anaesthesia for Spinal Surgery, Ex AAGBI Council
Dr M Bhagwat	Lead for Generalist Anaesthesia, General and Emergency Anaesthesia, MTI Lead, CESR Lead, Primary FRCA Examiner.
Dr S A Brown	Regional Anaesthesia, Medical School Module Lead
Dr A Channell	Major General Anaesthesia

Dr J Corfe	Obstetric Anaesthesia, NELA Lead, Lead for Emergency Theatres
Dr S Crawford	Paediatric Anaesthesia
Dr R De las casas	Vascular Anaesthesia, Peri-operative Medicine
Dr A Dhrampal	Critical Care, Colorectal
Dr M Dixon	Regional Anaesthesia
Dr J Francis	Obstetric, Upper GI, Thoracic Anaesthesia, College Tutor
Dr D Easby	Critical Care, Paediatrics, Trust Organ Donation Lead
Dr J Field	Orthopaedic Anaesthesia
Dr S J Fletcher	Critical Care, Ex RCOA Council, Research lead
Dr AK Fritz	Pain Medicine
Dr R Garforth	Regional Anaesthesia, Trauma and Ortho Lead
Dr J Gaynor	Lead for Paediatric Anaesthesia, Previous Chair of the trust Children's Critical Care Working Group
Dr H Goddard	Head and Neck, Head of School of Anaesthesia EoE
Dr A Greengrass	Paediatric Anaesthesia, Sustainability Lead
Dr J Harrad	Obstetric and Gynae-Oncology Anaesthesia
Dr S Harrison	Head and Neck, Airway
Dr K Hasan	Obstetric Anaesthesia
Dr P E Hodgson	Paediatric Anaesthesia. Previous TPD.
Dr MJ Hudspith	Pain Medicine
Dr S Hutchinson	Critical Care,QI lead
Dr Inge Falk Van Rooyen	Paediatric and Spinal Anaesthesia
Dr M Irvine	Critical Care, Thoracic, Chief of Division (Surgery). Trust Lead for Resuscitation
Dr N Jenkins	Major General
Dr J Kaur	Paediatric Anaesthesia, College Tutor
Dr L I Kerr	Paediatric & Spinal Anaesthesia.
Dr S Kumar	Critical Care, Foundation Training Programme director, Service Director for Critical Care

Dr K Kuntumalla	Anaesthesia for Complex Electro-Physiology Lead, Trust Sedation Lead
Dr D Laba	Pain Medicine
Dr T S Leary	Deputy Medical Director
Dr J Looker	Critical Care, College Tutor ICM
Dr B Maiya	Critical Care & Emergency Anaesthesia, Audit Lead
Dr M Maxwell	Spinal and Urology Anaesthesia, UEA Med School Module Lead
Dr R Morris	Service Director, Gynae-oncology and Day Surgery
Dr P Moondi	Critical Care, Governance Lead Critical Care
Dr M Morosan	Obstetric Anaesthesia, Maternal Medicine
Dr M Naik	Critical Care, Thoracic Anaesthesia,
Dr J Nortje	Critical Care and Colo-rectal Anaesthesia, Deputy Head of School Critical Care Medicine, Mortality lead
Dr D Nunn	Anaesthesia for Vascular Anaesthesia Lead and upper Gastro-intestinal surgery
Dr R Ochoa-Ferraro	Obstetric Anaesthesia, Department Governance Lead, Surgical Support Governance Lead
Dr D O'Hare	Orthopaedic Anaesthesia, Trauma.
Dr A Pandya	General and Regional Anaesthesia,
Dr J Payne	Paediatric Anaesthesia, Equipment Lead
Dr D Pearson	Critical Care
Dr J Raskovic	Breast & Head and Neck Anaesthesia.
Dr C Reavley	Vascular and General Anaesthesia, Research lead
Dr L Rhodes	Gynae-oncology, HiPEC, Lead for Anaesthesia Education Program
Dr M Roe	Major General Anaesthesia, Acute Pain, LTFT Champion. Rota Lead
Dr M Sanders	Clinical Lead Pain Medicine
Dr N Saunders	General and Plastics, Chairperson for Department.

Dr S Shah	Critical Care and Acute Medicine, Lead for Recognise and Respond Team, Clinical Lead for Point of Care Ultrasound
Dr C E Sharpe	Emergency, Vascular and Orthopaedic Anaesthesia, Primary FRCA Examiner
Dr M Sidery	Pain Medicine
Dr D Soltanifar	Obstetric Anaesthesia, FRCA Examiner.
Dr D Spackman	Thoracic Anaesthesia, Anaesthesia Associate Lead
Dr E Stickles	Paediatric Anaesthesia
Dr N Tate	Perioperative Medicine Lead, Vascular Anaesthesia
Dr S Thandayuthapani	Urology Anaesthesia
Dr L Vedham	Obstetric Anaesthesia, Trust Appraisal Lead, Final FRCA Examiner
Dr J Walker	Obstetric Anaesthesia, Feto-maternal medicine. Trust Deputy Simulation Lead.
Dr S Wilson	Thoracic and Emergency Anaesthesia, Trauma, Chair Transfusion Committee
Dr M Wolmarans	Regional and Vascular Anaesthesia,
Dr D Wotherspoon	Obstetric Anaesthesia, Department Governance Lead
Dr S Yarham	Vascular Anaesthesia, Mortality lead
Dr A Yusaf	Vascular Anaesthesia, Major General

# Research, Education & Training

Research is important as NHS Trusts with more research activity have better outcomes for patients.

NNUH's <u>Research Strategy 2020-2025</u> brings focus and direction for our organisation, our patients and stakeholders and is intended to position NNUH as a leader driving research locally, nationally and internationally. The strategic Goals are to:

- 1. Embed a culture of research throughout the NNUH creating an inspirational environment that is recognised nationally and internationally, which inspires future leaders of clinical research.
- 2. Consolidate and deepen the special partnership with the University of East Anglia (UEA) and the Quadram Institute Bioscience (QIB).
- 3. Develop sustainable strategic partnerships critical to the region and the wider NHS.
- 4. Be recognised as a leading NHS Trust in applying research and adopting innovation to deliver the best patient care and to benefit the wider NHS.

CQC Report (April 2020) identified research as an area of outstanding practice 'A five year research strategy had recently been adopted .... The strategy was comprehensive and looked to build on previous research at the Norfolk and Norwich. It clearly identified that research was important as trusts with more research activity have better patient outcomes. Four achievable goals had been identified for the strategy and it was clear there was broad executive support for research within the organisation.

NNUH is a partner in the National Institute of Health and Social Care Research (NIHR) Clinical Research Network East of England. In 2021/22 more than 170 staff members (generally doctors) led research studies as Principal Investigators and we are working to create opportunities for other healthcare professionals to be Principal Investigators and for increased patient participation.

In 2022, we received a prestigious award the NIHR <u>Clinical Research Facility (NIHR CRF) Norfolk</u> putting NNUH in a group of NIHR supported CRFs alongside Oxford, Cambridge, and London.

NNUH has an active departmental Research Leads Group which supports research (including research management and governance) and publishes an Annual Report.

Examples of past successes include the Norfolk Diabetes Prevention Study (the largest study aimed at prevention through lifestyle interventions), a clinical trial of a new device for automated insulin delivery for pregnant women with type 1 diabetes, an intervention to support smoking cessation in patients and delivery room cuddles for extremely premature babies and parents.

During the pandemic NNUH contributed to a Covid vaccine trial delivered at pace and scale and to trials such as RECOVERY which discovered the first medicine to treat COVID.

NNUH's commitment to research is embedded within our Corporate Strategy 'Caring with PRIDE' with aspirations to 'Drive....' and 'Embed world class research' and

extend our partnerships with the University of East Anglia (UEA), Quadram Institute Bioscience (QIB) and the Norfolk and Waveney Integrated Care System.

### Research Lead: Dr Caroline Reavley

The department with support from the UEA, supervises an Academic Registrar, who is appointed competitively annually and supported to complete a research project. Recent projects have included the development of novel phantoms to train in regional anaesthesia and projects working with 'big data sets' and anaesthetic demand modelling.

The Anaesthetic and Critical Care departments are actively involved in recruiting patients into national NIHR research projects.

The paediatric group contribute to national/international projects such as PEACHY, CASAP and EUROFAST. We are currently preparing to host the international CRICKET study and the PATRN organised FIGS study.

The appointee will be provided with an office, computer, internet access and secretarial support which may be shared.

## **Duties of the Post**

The appointment is to the Trust, not to specific hospitals.

The appointee will take his/her share of clinical responsibilities within the Department of anaesthesia. This will include provision for peri-operative assessment.

In addition to duties within sub-speciality, the appointee will be required to provide anaesthesia for adult patients in all specialties as appropriate to his/her training and experience.

There is an on-call commitment of approximately 1:8. This provides a paediatric anaesthetic service for out-of-hours emergency surgical cases, and for the initial management and stabilisation of critically ill children (together with paediatricians and adult intensivists) prior to retrieval by the Paediatric Retrieval Service (PaNDRS).

All consultants, including the appointee, will be expected to be involved in implementing the Trust's Clinical Governance programme. This includes active participation in clinical audit, quality, clinical guidelines/pathways, professional development, appraisal and risk management.

The appointee will be a member of the Consultant Staff Committee and be expected to serve on this committee.

Further, the appointee will support the delivery of a high quality, safe and compassionate healthcare service, whereby all staff are expected to act as a role model to others in all aspects of their work and consistently demonstrate NNUH's 'PRIDE' values of People focused, Respect, Dedication, Integrity and Excellence and demonstrate behaviours that support and encourage an inclusive culture.

# Job Plan

A formal job plan will be agreed between the appointee and their Service Director, on behalf of the Medical Director, as soon as possible after the commencement date of the appointee. This will be signed by the Chief Executive and will be effective from the commencement date of the appointment. A copy to be forwarded to the Medical Staffing Department to be retained on the personnel file.

The Trust has discretion to offer additional programmed activities in appropriate cases. However, where after the appropriate panel approval has been obtained it is agreed to pay temporary additional programmed activities these will only be payable to newly qualified consultants after three months in the post. Such additional programmed activities will not be paid retrospectively to the date of appointment. In the case of other consultants the date from which the additional programmed activities become payable will be a matter of agreement with the Service Director.

The Job Plan will then be reviewed annually, following the Appraisal Meeting. The Job Plan will be a prospective agreement that sets out a consultant's duties, responsibilities and objectives for the coming year. It should cover all aspects of a consultant's professional practice including clinical work, teaching, research, education and managerial responsibilities. It should provide a clear schedule of commitments, both internal and external. In addition, it should include personal objectives, including details of their link to wider service objectives and details of the support required by the consultant to fulfil the job plan and the objectives.

Provisional assessment of Programmed Activities in Job Plan for a whole-time contract:

- The balance between Direct Clinical care Activities and Supporting Programmed Activities will be agreed with the candidate as part of the initial job planning process.
- The standard full time job plan will consist of 10 programmed activities of which up to 2.5 will typically be SPAs. The Trust will initially allocate 1.5 SPAs for appraisals, CPD, mandatory training, job planning etc. A further 1 SPA may be allocated for formal audit, formal research and formal undergraduate and post-graduate education activity and supervision. Permission from your Service Director/Medical Director must be sought for participation in external NHS activities and once agreed these should be recorded in your job plan.

#### **Mentoring for New Consultants**

The Trust supports the principle of mentoring for all new consultants and has plans to formally incorporate this into Trust policy in the near future.

# **Provisional Timetable**

The following provides an outline of the expected clinical activity and clinically related activity components of the job plan which occur at regular times in the week. Agreement should be reached between the appointee and their Service Director with regard to the scheduling of all other activities, including the Supporting Professional Activities. Upon appointment the consultant with be given a specific "work programme" detailing the initial allocation of direct clinical care activities and supporting activities.

Day	Time	Location	Work (12-week Cycle)	NHS Activity Code	Number of PAs
Monday	07.30 – 18:30	NNUH	Theatres Float (Weeks 2, 4, 6) Paed General/Urology list (week 1,3, 5)	DCC	2.75 PAs
Tuesday	07:30 – 13:00	NNUH	Theatres Float (week 2, 4, 6) Paed Opthalmology List (week 1, 3, 5)	DCC	2.75 PAs
	13:30 – 17:30	NNUH	CPD, Mandatory training, teaching, appraisal. (Weeks 1 and 2)	SPA	1 PA
Wednesday					
Thursday	07:30 – 13:00	NNUH	Theatres Float (weeks 1, 3 & 5)	DCC	0.69
	13:00 – 18:30	NNUH	Theatres Float (weeks 2, 4, 6) Paed ENT list (week 1, 3, 5)	DCC	1.375
Friday					
Saturday					
Sunday					
Additional agreed activity	Flexible	Flexible	CPD, Mandatory training, teaching, appraisal.	SPA	0.5
Unpredictable emergency on-call work		NNUH	On Call ~1:8 weekends & weekday nights	DCC	1.0
TOTAL PAS					10.06

Total DCC PAs = 8.5 Total SPA PAs = 1.5 Total PAs = 10

This timetable is indicative; the definitive timetable will be agreed by the Trust and the appointee and subject to regular review

<b>Person</b>	Specif	ication
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JOB REQUIREMENTS	ESSENTIAL	DESIRABLE
Qualifications	Full GMC Registration FRCA or equivalent	MD, PhD or other postgraduate qualification (PGCert, PGDip, MSc)
	Advanced Training in paediatric anaesthesia or Equivalent	, ,
	Entry on the GMC Specialist Register in Anaesthesia Via;  CCT (Proposed CCT date must be within 6 months of the interview)  CESR or  European Community Rights	
Aptitudes	Good communicator.  Capable of working in a multi-disciplinary team.	Previous responsibility for service improvement.  Management skills
	Enthusiasm for service development and teaching.	
	Demonstrates understanding and commitment to Equality, Diversity and Inclusion.	
Experience	Applicants who are Nationals from another European country or elsewhere overseas would have to show equivalence to the 5 years training period in the National Health Service required for the specialty.	scoliosis surgery  Experience in paediatric pain management
	Training and expertise in children's safeguarding	Experience in paediatric critical care  Experience in ultrasound guided regional anaesthesia.
		Experience in neonatal anaesthesia  Experience in anaesthesia for major general surgery
		Experience in research or published papers in area of special interest

Interests	Commitment to continue to develop an appropriate specialist interest.  Evidence of interest in education and training.  Evidence of engagement with research and audit.	Publications in peer reviewed journals.  PGCert in Medical Education or equivalent.  Up to date GCP training.
Circumstances	Flexible outlook on working hours.  Must live within a 15-mile radius of the base Trust or 30 minutes travelling time.  Ability to travel across multi-sites whilst public transport may not be available.	
Communications and Language Skills	Ability to communicate effectively with clinical colleagues, colleagues in pathology and support staff  Ability to present effectively to an audience, using a variety of methods, and to respond to questions and queries	Good presentation skills.

Applicants who are Nationals from another European country or elsewhere overseas would have to show equivalence to the 5 years training period in the National Health Service required for the specialty.

It is essential that all Trust employees will adhere to, and follow good infection control practices, as detailed in the Trust's Infection Control Manual and other related policies and guidelines

#### **About the Trust**

The Norfolk & Norwich University Hospital NHS Foundation Trust (NNUH) is one of the busiest teaching trusts in England. We serve over 900,000 people across Norfolk, North Suffolk and surrounding areas for specialist services. In 2016/17 our 7,500 members of staff delivered 816,000 outpatient appointments, 90,000 day cases and 90,000 inpatient admissions from our two hospitals.

- The Norfolk and Norwich University Hospital is located on the Norwich Research Park and serves the population of Norfolk and Norfolk Suffolk and further afield for specialist services. It opened in 2001 and is a 1,200 bed teaching hospital with state-of-the-art facilities. We provide a wide range of secondary and tertiary services, including Accident and Emergency. The trust will be commemorating 250 years of a hospital in Norwich in 2021.
- Cromer and District Hospital is located in Cromer on the North Norfolk coast and serves the North Norfolk population. It was redeveloped in 2012 to replace the 1930s-founded hospital. We provide a wide range of consultantled outpatient services, day case operations and a Minor Injuries Unit (MIU). The trust is commemorated 150 years of a hospital in Cromer in 2017/18.

Our vision is to 'provide every patient with the care we want for those we love the most', Our PRIDE values support our vision and guide the behaviour of everything we do.

- People-focused: We look after the needs of our patients, carers and colleagues, to provide a safe and caring experience for all.
- Respect: We act with care, compassion and kindness and value others' diverse needs.
- Integrity: We take an honest, open and ethical approach to everything we do.
- Dedication: We work as one team and support each other to maintain the highest professional standards.
- Excellence: We continuously learn and improve to achieve the best outcomes for our patients and our hospital

Our strategy, agreed in 2016, is based on four key objectives:

- We will be a provider of high quality healthcare to our local population
- We will be the centre for complex and specialist medicine for Norfolk and the Anglia region
- We will be a recognised centre for excellence in research, education and innovation
- We will be a leader in the redesign and delivery of health and social care services in Norfolk.

Our clinical services are structured across four divisions offering a wide range of careers to new staff of all disciplines. Our four divisions are Medicine, Surgery, Women's and Children's, and Clinical Support Services. We always strive to hit the highest standard in each of these areas, including pioneering treatments and the best career development for employees. In addition, the Trust provides a full range of more specialist services such as Oncology and Radiotherapy, Neonatology, Orthopaedics, Plastic Surgery, Ophthalmology, Rheumatology, Paediatric Medicine and Surgery.

- Medicine is comprised of Cardiology; Respiratory Medicine; Stroke; Nephrology; Gastroenterology; Allergy; Older People's Medicine; Endocrinology; Neurology; Rheumatology; Emergency and Acute Medicine; Oncology, Palliative Medicine and Haematology.
- Surgery consists of General and Thoracic Surgery; Dermatology; Urology; Head and Neck; Ophthalmology; Orthopaedics; Plastic Surgery; Anaesthetics, Critical Care, Pain Management, Sterile Services, Theatres and the Day Procedure Unit.
- Women's and Children's Services consists of Obstetrics; Gynaecology;
   Paediatric Medicine; Paediatric Surgery and Neonatology.
- Clinical Support is comprised of Nuclear Medicine; Cellular Pathology; Laboratory Medicine; Therapeutic and Support Services; Radiology; Pharmacy; and Health Records.

We want to recruit people who are looking for new challenges and opportunities, share our values and want to be part of our vision to provide every patient with the care we want for those we love the most.

# The Faculty of Medicine and Health Sciences (FMH)

The Faculty of Medicine and Health Sciences is led by the Pro-Vice-Chancellor of Medicine and Health Sciences, Professor Dylan Edwards, working closely with the Heads of School, and the Associate Deans who share responsibility for the areas of Research; Enterprise and Engagement; Learning and Teaching; Admissions; and Postgraduate Research. These senior academics, together with the Senior Faculty Manager, the Faculty Human Resources Manager, and the Faculty Finance Manager, form the Faculty Executive. Teaching is organised through the Faculty's two Schools of study, comprising Health Sciences and Norwich Medical School, assisted by a Centre for Inter-professional Practice.

#### The School of Health Sciences

On 1st August 2014, the Schools of Nursing Sciences and Rehabilitation Sciences at the University of East Anglia (UEA) came together to create a new School of Health Sciences. The School's purpose is to resolve health challenges through the advancement of knowledge and interdisciplinary working. This innovative development has built on the strong reputation of the two Schools and creates an

outstanding learning environment for students; fostering cutting edge research and offering opportunities for real innovation in enterprise development.

The School of Health Sciences encompasses a family of interrelated disciplines; midwifery, all fields of nursing, operating department practice, paramedic science, physiotherapy, occupational therapy and speech and language therapy. Research is focused on developing solutions to future global health challenges, which may arise as a consequence of our life style choices (e.g. obesity, diabetes); living longer with long term conditions and the need for systems, services and training models to adapt to different health care needs in the future.

The school has a clear vision and strategy to be a leading international academic force, improving the quality of healthcare through research and education. The School's academic structure is designed to secure the delivery of this strategy. Staff belong to one of three health challenge units which drive innovation in research, teaching and learning in three theme areas: reforming health systems; promoting family and community health and living well with long term conditions. The groups foster a collaborative ethos and serve as an academic 'home' community for those with related interests from a variety of professional backgrounds.

There are currently have over 1300 undergraduate, pre-registration students and around 1200 post registration and postgraduate students taking a variety of modules and courses, including the flagship NIHR Masters in Clinical Research. The success of the School is reflected by the popularity of its programmes and a number of measures of esteem. The School is ranked 5th for nursing and midwifery and 7th for health professions in the Guardian University Guide (2015) and has recently climbed four places to 8th place for nursing in the Complete University Guide (2015).

#### The Norwich Medical School

The Norwich Medical School was established at UEA in 2001 and has over 200 members of academic, research and support staff – and a large number of active NHS secondees and honorary appointees – from a wide range of disciplines (including medical specialties, biological sciences and a range of social and statistical disciplines, including health economics, clinical psychology, epidemiology and medical statistics). The School has grown with a current entry each year of 168 students. Its first students graduated in 2007 and since then the School has been in the top 10 of all medical schools on the National Student Survey on three occasions, the Prescribing Skills Assessment pass rate is over 97%; the Situational Judgement Test is among the top scores nationally and the Preparedness to Practice and Core Skills Acquisition are consistently top 5. In 2014, 2015 and 2016 the school was shown to have produced some of the best prepared Foundation doctors, demonstrated through national data provided by the GMC following their annual survey of all doctors in training.

The Schools' research focus is on developing translational research themes that answer important health questions, from an understanding of the basic mechanisms and genetics of disease through to clinical trials and from there to incorporation into clinical guidelines and evaluation within the broader health care community.

The Medical School has a vision to build a clinical and translational research programme of international standing based on the existing strengths of the Medical School, UEA, The Norfolk and Norwich University Hospital and the Norwich Research Park. The presence of three BBSRC research institutes on the Norwich Research Park (Institute of Food Research, John Innes Centre, The Earlham Institute (formerly the Genome Analysis Centre or TGAC) provides unique opportunities not available to other comparable medical schools and in 2018 the Quadram Institute will also open its doors. Preventive medicine is a major goal for 21st century medicine. The role of diet in the prevention of a wide spectrum of disease will be a particular focus of research within the Medical School. Incorporated with this will be parallel strategies to understand the epidemiology and health economic impact of the conditions studied.

Areas of research within the Medical School include:

- **Cancer Studies**
- Clinical Science and Trials
- Dementia
- **Epidemiology**
- Gastroenterology and Gut Biology
- **Health Economics**
- Health Services Research
- Medical Microbiology
- Musculoskeletal Science
- Nutrition
- **Psychological Sciences**

Norwich Medical School is housed on East (main) campus in the Norwich Medical School Building, and on West Campus in the new £20m Bob Champion Research and Education Building, which opened in late 2014, adjacent to the Norfolk and Norwich University Hospital, providing outstanding facilities for staff and supporting clinically orientated research.



#### Norwich Research Park

The Norwich Research Park is a partnership between the NNUH, UEA and four independent world-renowned research institutes, namely the John Innes Centre, Quadram Institute Bioscience and The Genome Analysis Centre (all strategically funded by the Biotechnology and Biological Sciences Research Council (BBSRC) and The Sainsbury Laboratory to the Gatsby Charitable Foundation. The BBSRC is itself a partner as is the John Innes Foundation.

The Norwich Research Park is home to around 30 science and IT based businesses. With over 11,000 people including 2,700 scientists and an annual research spend of over £100 million; the Norwich Research Park is Europe's leading centre for research in food, health and the environment.

The main strength of Norwich Research Park is the concentration of world-leading scientists coupled with the capability for multidisciplinary research. The vision of the Norwich Research Park partners and local government stakeholders is to develop a thriving science and innovation business park over the next decade by supporting spin-out and start-up companies and through attracting inward investment from large corporate organisations involved in science and technology.

Norwich Research Park aims to deliver solutions to the global challenges of healthy ageing, food and energy security, sustainability and environmental change.

It is an international centre of excellence in life and environmental sciences research with world-class expertise in the research and development pipeline from genomics and data analytics, global geochemical cycles and crop biology, through to food, health and human nutrition.

Our science transcends conventional boundaries by forging interdisciplinary links, thereby driving innovation, enterprise and promoting economic growth, and particularly underpinning a new bioeconomy.

#### Quadram Institute

The Quadram Institute is the name of the new centre for food and health research to be located at the heart of the Norwich Research Park, one of Europe's largest single-site concentrations of research in food, health and environmental sciences. The new £81.6m facility to house the Quadram Institute opened in 2018.



The new world leading centre for food and health research will bring together the Institute of Food Research, the NNUH's regional gastrointestinal endoscopy facility and aspects of the UEA's Norwich Medical School and the Faculty of Science.

Due to population expansion combined with people living longer and the need to screen a broader age range for diagnostic and potential preventative reasons the NNUH will be doubling its capacity for bowel screening.

The dedicated unit and world leading research facilities will be located in the Quadram Institute. The Quadram Institute's mission will be to develop solutions to worldwide challenges in human health, food and disease. The concept for the institute is to enable a step-change in food and health science research by providing new insights and accelerating innovation that will deliver new foods and treatments as well as proactive health and lifestyle interventions, for the benefit of society and the bio-economy.

Its creation underlines the collaboration of the four founding partners and reflects its strategy to work across four research themes: the gut and the microbiome (the gut flora); healthy ageing; food innovation; and food safety. These research themes will link closely to the world-class plant and crop research at the John Innes Centre and bioinformatics at The Genome Analysis Centre, both also located at the Norwich Research Park, creating a powerful plant-food-health pathway to deliver clinically-validated strategies to improve human nutrition, health and wellbeing. The Quadram Institute will work closely with the food industry, healthcare and allied sectors to transfer its scientific knowledge into practice.

# **Norwich Radiology Academy**

The Trust is home to the Norwich Radiology Academy, run on behalf of the Department of Health and Royal College of Radiologists. The academy, one of only three in the country, is also located on the Norwich Research Park in the Trust's Cotman Centre and provides a ground breaking approach to radiology training in the UK.

### **Education and Training**

The Trust has an outstanding reputation for providing a good quality education and excellent clinical experience for trainees. The large catchment population provides a wealth of clinical material. Most departments have well-developed in-house teaching programmes and there are many examples of locally developed skills courses including Basic Surgical Skills, MRCS training and Minor Surgical Skills courses as well as more specialised courses such as for the FRCS (Orth). There is an established system of educational supervision and assessment for Foundation Programme and Core Training.

The Trust has one of the best-equipped Postgraduate Centres in the country. There is an excellent lecture theatre and library as well as seminar rooms and clinical skills laboratories within the Centre which is currently situated within the Hospital and in the new Bob Champion Research and Education Building.

There are opportunities for trainees to do an MSc in Health Sciences with the University of East Anglia. A diploma in clinical skills is being developed in collaboration with the University, aimed at the Core Training grade. There is an excellent local GP VTS scheme and this, and good quality educational programmes in NANIME, provide strong links with local GPs. For all these reasons Norwich is able to attract good quality candidates to fill training posts and eliminate many of the problems of recruiting into shortage specialties.

The Trust provides individual consultants with a budget to support additional training and CPD. A large number of consultants have active involvement in external College, regional or national activities.

# **Research and Development**

The Trust encourages all consultants to become involved with research. This is facilitated by the proximity of the Norwich Research Park.

There is a joint UEA and NNUH Director of Research & Innovation (Helen Lewis) and a joint research office which currently monitors nearly 200 new research applications per year. There is a Clinical Trials Unit based partly in the hospital and partly at the University. The Trust hosts the Clinical Research Network: Eastern (CRN). Our recruitment to clinical trials is consistently above target.

# **General Conditions of Appointment**

The Trust requires the successful candidate to have and maintain full registration with the General Medical Council, NHS Indemnity and private cover if appropriate. The appointee is advised to maintain membership of a Medical Defence Organisation for professional duties not included within the NHS Indemnity Scheme.

Consultants are required to have continuing responsibility for the care of patients in their charge and for the proper functioning of their departments. They are expected to undertake administrative duties that arise from these responsibilities. Specifically, Consultants will co-operate with the Service Directors to ensure timely and accurate production of discharge letters and summaries of patients admitted under their care. "Timely" will, as a minimum, be the meeting of standards agreed between the Trust and the Purchasers.

The successful candidate will normally be required to reside within 15 miles of the main hospital base or 30 minutes travel time.

The appointee will be accountable managerially to the Service Director and professionally to the Medical Director of the Trust.

The main terms and conditions of employment relating to this appointment will be those set out in the national handbooks of the Terms and Conditions of Service of Hospital Medical and Dental Staff and, as appropriate, of the General Whitley Council. Consultants will normally be appointed on the bottom of the consultant salary scale except where they have recognised seniority at a consultant level.

The appointee may be required to undergo a medical examination prior to appointment and will be required to attend the Occupational Health Department within one month of commencement. She/he will also be required to comply with the Trust's policies and procedures concerning Hepatitis B, details of which will be supplied to candidates shortlisted for posts that would involve exposure prone procedures

The post is exempt from the provisions of section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. Applicants are, therefore, not entitled to withhold information about convictions, which for other purposes are "spent" under the provision of the Act, and in the event of employment any failure to disclose such convictions could result in dismissal, or disciplinary action by the Trust. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the Order applies.

In accordance with the Protection of Children Act 1999, Criminal Justice and Court Services Act 2000 and Care Standards Act 2000 (Part VII – Protection of Vulnerable Adults, the Trust has a legal duty to safeguard children and vulnerable adults in its care from the potential risk of associating with persons with previous convictions involving children and vulnerable adults. In order to carry out checks on those persons having access to children and vulnerable adults, the Trust will use the Disclosure and Barring Service (DBS). The Trust therefore requires all medical staff successful at interview to complete and submit a Disclosure Application Form, and any offer of employment will be subject to a satisfactory Enhanced Disclosure check being returned from the DBS.

It is essential that all Trust employees will adhere to, and follow good infection control practices, as detailed in the Trust's Infection Control Manual and other related policies and guidelines

All Trust staff have a statutory duty to safeguard children in their care and promote the welfare of children and young people. Staff are expected to know about the Trust's safeguarding procedures which can be found on the intranet. Staff must be familiar with the signs and symptoms of abuse and know what to do if any such concerns are raised.

The Trust is a no smoking hospital and smoking is not permitted on any of the Trust's premises.

### **Contacts for Further Information**

Candidates requiring further information are invited to contact the following:

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#### **Dr. Nick Saunders**

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