



**North Cumbria
Integrated Care**
NHS Foundation Trust

Consultant in Gastroenterology
Surgery, Critical Care & Clinical Support Care Group
North Cumbria Integrated Care NHS Foundation Trust

Example Job Plan for a full time 10PA contract can be found in Appendix 1.
Applications are welcomed from candidates wishing to work either full or part-time.

On-call commitment:

Negotiable but could include out of hours GI Bleed and GIM

Visiting arrangements:

We strongly encourage interested applicants to visit the Trust and meet prospective colleagues, and to view the area and all of its attractions.

Arrangements for visiting may be made by contacting:

Mr Daya Karat (Clinical Director for GI Services)

Email: Dayalan.Karat@ncic.nhs.uk

Telephone: 01228 814144 or 07795046480

Dr Adrian Clements (Executive Medical Director)

Email: Adrian.Clements@ncic.nhs.uk

Telephone: 01228 603034 or 07825503825

Additional information can be found on the Trust's website at <https://www.ncic.nhs.uk/>

Interview/Assessment Dates

Interview date will be circulated once shortlisting is finalised. We hope to be able to accommodate assessments and interviews on the same date. However, if this does not fit in with your own timetable, please let us know.

Job Summary

GI Services

The North Cumbria GI Service is a cohesive and integrated department, combining the services gastroenterology and endoscopy, upper gastrointestinal, hepatobiliary, colorectal, emergency GI surgery.

The service provides complete care for patients with disorders relating to the gastrointestinal tract. Surgeons, physicians, specialist nurses and allied health professions work closely together to provide in house multidisciplinary care for all patients with gastrointestinal problems both in the emergency, electives inpatient and outpatient setting.

The specialties/Core ward areas within GI Services are:

- Endoscopy
- GI physiology lab
- General Gastroenterology
- Hepatology
- Oesophago-gastric surgery
- Colorectal surgery
- Hepato-pancreato-biliary surgery
- Pelvic floor disorders
- Bowel cancer screening
- Nutrition
- Emergency GI Surgery
- In patient ward areas

The successful candidates will join our team of 16 consultants including six consultant gastroenterologists and one specialty doctor in gastroenterology to provide an integrated digestive diseases service across North Cumbria. Associated with the transformation of all our services across the Trust, and in conjunction with the introduction of our model for acute medical care, it is envisaged that future configurations will focus complex in patient work at the Carlisle site, and elective outpatient services (endoscopy and outpatient clinics) will be provided by all of the team across the Trust. The department has two dedicated GI wards within the Cumberland Infirmary at Carlisle for the treatment of inpatients. The plan in the near future is to have all GI areas collocated. There is a dedicated 3-room endoscopy unit at The Cumberland Infirmary and the new endoscopy unit at West Cumberland Hospital, Whitehaven has 2 dedicated rooms in a new, state of the art facility. There is a specialist GI physiology lab on both sites. The successful candidates will join a team of gastroenterologists supported by nurse specialists across North Cumbria NHS Trust. Sub specialty interest will be encouraged where this contributes to and complements the department and Trusts' service needs. While appointees will be appointed to a base unit, all members of the team will be expected to contribute to all aspects of the general gastroenterology service across the Trust.

The Trust provides access to radiology services, CT scanning, including CT colonography and MRI (including MR enteroclysis), and medical physics imaging on two sites.

We have radiotherapy and oncology on site at Carlisle with outreach services to west Cumbria. There is a Palliative care consultant based on each site with links to hospice and community services.

We have access to a medical day procedures unit that undertakes, for example, biologic treatments, ascitic drainage, liver biopsy, and transfusions. The GI department has just taken delivery of a new Fibroscan® machine.

The Team:

Consultants

Daya Karat	GI Physiology, UGI Surgery, UGI Endoscopy, Clinical Director
Chris Macdonald	ERCP, IBD, Nutrition
Mohamed Aly	Hepatology, Endoscopy and IBD
Sherif Shabana	IBD, Endoscopy and Hepatology
Assan Atwi	Locum Gastroenterologist, IBD, Endoscopy
Ibrahim Hossam	Locum Gastroenterologist, Starts August 2022
2 x Vacant	Consultant Gastroenterology Posts
1 x Vacant	Specialty Doctor, Gastro
Nikhil Premchand	Infectious Disease and Viral Hepatitis (Visiting)
Frank Hinson	Colonoscopist, BCSP (P/T)
John Wayman	UGI Surgery MDT Lead, Therapeutic UGI Endoscopy
Hari Avalapati	HPB Surgery, ERCP
Ruben Canelo	HPB Surgery MDT lead, Academic Director Surgery
Ashraf Elmetwally	Laparoscopic, Emergency General Surgeon
Bhaves Devkar	Emergency General Surgeon (starts April 2022)
Ahmed Mortada	Specialty Doctor, UGI
Myat Aung	Colorectal Cancer
Mohammed Edilbe	IBD, Pelvic Floor Surgery
Sorena Afshar	Colorectal Cancer/Audit Lead/MDT Lead
Chris Rao	Colorectal Cancer
Fadel Shabeeb	Due to start Summer 2022 – Colorectal
1 x Vacant	Consultant Colorectal Surgeon
Sairi Bibi	Specialty Doctor, Colorectal
Mike Walker	General Surgery, Paediatrics
Mike Williams	General Surgery, Thyroid
Maung Aye	General Surgery, Colorectal
Khairi Hajaji	Specialty Doctor, UGI
Des O'Callaghan	Consultant Endoscopist

Specialist Nurses

Deborah Gibson	Lead Clinical Nurse & UGI Nurse Endoscopist (including PEG)
Chris Fleming	Nurse Endoscopist
Natalie Tindall	Nurse Endoscopist
Paula Andrews	Nurse Endoscopist
Gill Smith	Colorectal Nurse Specialist & Lower GI Endoscopist
Mark Irving	UGI Cancer Nurse Specialist & Endoscopist, GI Physiology
Victoria Hendry	UGI Cancer Nurse Specialist
Lianna Thomlinson	ACP Endoscopist
Helen Graham	HPB Cancer Nurse Specialist
Olivia Gartland-Armstrong	IBD Nurse Specialist
Victoria Lithgow	IBD Nurse Specialist
Vacant	IBD Nurse Specialist
Ruth Harrington	Hepatology Nurse Specialist (Viral Hepatitis)

Angela Sinkinson

Hepatology Nurse Specialist (Viral Hepatitis)

Advanced Care Practitioners

x 5 covering surgery and GI Services SDEC Unit

Physician Associates

x 3 in Surgery

Trainees (HENE)

FY1 x 5

FY2 x 2

CMT x1

CST x1

ST (Gastro) x 2

ST (GI Surgery) x 5

MDTs

Multi-disciplinary team meetings are held in a dedicated MDT facility at the Cumberland Infirmary with robust video link. All MDT's are supported by co-ordinators.

HPB Wed AM (Video linked with Freeman Hospital, Newcastle)

OG (local) Wed AM

OG (Specialist) Friday AM (Video linked with RVI, Newcastle)

Lower GI Monday PM

IBD Thursday AM

Nutrition (TBA)

Endoscopy

There are two endoscopy units operating within the Trust at the Cumberland Infirmary, Carlisle (three rooms including X-Ray screening with digital C-arm) and West Cumberland Hospital, Whitehaven (two rooms).

We are able to provide a full range of diagnostic and therapeutic endoscopy services, including:

- Argon Plasma Coagulation
- Heater probe
- Electrocautery
- EMR
- Upper and lower GI stent insertion
- PEG, PEJ and PEXACT
- ERCP is provided at the Cumberland Infirmary
- Variceal banding

We are currently developing plans to develop EUS and RFA. Both units have Olympus video endoscopy equipment, colonoscopic scope guide systems, CO₂ insufflation and electronic endoscopy reporting and database systems.

Our GI bleeding service runs in conjunction with surgical colleagues and endoscopy nurses to provide a north Cumbria out of hours service, based at the Cumberland Infirmary. It is proposed that this will initially be on a 1:7 basis and could run concurrently with any GIM on call. It is expected that with our plans to have 7 day endoscopy provision that the out of hours demands would be reduced.

We provide Bowel Cancer Screening Services at Carlisle as part of the Cumbria and Morecambe Bay Bowel Cancer Screening Programme and we provide 2 screening colonoscopists at present. We intend to implement Bowel Scope Screening.

The successful candidates will be expected to carry out outpatient gastroenterology clinics, diagnostic and therapeutic endoscopy sessions.

Acute Medicine

We have established an acute physician model on both sites with the ultimate aim of providing consultant presence 8am till 10 pm on site, whereby acute care physicians (ACP) provide cover for our acute medical assessment and short stay units, 8am till 6pm Monday to Friday (on both sites). As our cohort of ACPs expands there input will extend to weekend cover.

Our specialty physicians, including the gastroenterology team, are encouraged to share the contribution to the “physician of the day” out of hours and at weekends. Currently this is 1:12, but with new appointees this commitment is likely to change and would be renegotiated.

There is no requirement for daytime input from the GI team to the acute medical take (Monday to Friday) other than in-reach for GI specialist work, as this will be provided by the acute physician team who will undertake post take ward rounds, and a formal handover at 5pm.

THE DEPARTMENT OF GENERAL MEDICINE

Cumberland Infirmary

The Department provides acute hospital medical services to a population of approximately 340,000. The specialties of cardiology, renal medicine, dermatology, clinical oncology serve the whole of North Cumbria.

Consultant Medical Staff

Cardiology: Dr R Moore, Dr R Shelton, Dr L Buchanan, Dr M Varma, Dr J Barclay, Dr Majewski, Dr Ibrahim,

Elderly Care Dr D P Davies, Stroke Locum, Dr A O'Callaghan, Dr A Asgar (locum), Dr A Ananth (locum)

Thoracic Medicine: Dr M Hewson, Dr M Lane, Dr J Atkinson, Dr Punzuite (locum), Dr Taylor

Renal Medicine: Dr A Bow Dr P A Mead, Dr F Dallas, Dr A Hayat,

Acute Physicians: Dr J Shawcross, Dr K Poulton, Dr J Craig, Dr A Miller, Dr D Zehnder,

The following Consultant Physicians provide specialty services:

Dermatology: Dr M Nik, Dr H Nik, Dr Bakos

Clinical Oncology: Dr A Kumar , Dr Haidar

Rheumatology: Dr A Hassan, Locum

Haematology: Dr Oakes, Dr I Grant, Locum

Junior Medical Staff

1 Associate Specialist (Cardiology)

12 Specialist Registrars (Elderly Care x3, Acute Medicine x3, Renal Medicine x2, Gastroenterology x2, Cardiology x2, Respiratory x1)

2 Staff Grade Doctor (Elderly Care)

Our foundation doctors, core medical trainees and ACCS doctors work a "Front of House/ Back of House" system shared between

6 CT/ACCS

2 GP Trainees

17 Foundation Year 2 Trainees

23 Foundation Year 1 Trainees

Mentoring

We are currently looking at opportunities for mentoring programmes for new Consultants employed by the Trust. This is to create positive relationship between new employees and the organisation. We expect mentors to help new consultants settle into the organisation and help promote a quality service as well as help understand the culture of the organisation.

Administration

Secretarial support will be available to the successful candidate. Office accommodation and a personal computer with internet access will also be provided.

Other Duties: Flexible Commitments

The remainder of the appointee's professional time will be deployed flexibly on other clinical duties, administration, liaison with relatives, teaching, research, clinical audit, grand rounds and special interests. The Trust supports the requirements for continuing professional development (CPD) as laid down by the Royal College of Physicians and is committed to providing time and financial support for these activities. (Details of this part of the Job Plan arrangements will be agreed with the successful applicant).

Participate in Consultant Appraisal and Job Plan Review on an annual basis and the revalidating process when necessary. The Trust will support revalidation

Senior clinical colleagues will provide mentorship.

Time off in lieu of extra duties will be considered.

Main Terms and Conditions of Service

These posts are Trust appointments and will be subject to the new Terms and Conditions – Consultants (England) 2003 as amended from time to time. The Trust has established a Joint Negotiating Consulting Committee for negotiating changes to terms and conditions of service, which will then be incorporated into the handbooks and become part of your employment contract.

Candidates appointed to an NHS Consultant for the first time will be offered a salary on the minimum scales except where a higher salary is justified by taking into account any previous consultant level experience recognised by the Trust for this purpose.

Any offer of employment with the Trust will be subject to satisfactory pre-employment checks as defined in Health Service Circular 2002/008

- references
- qualification/registration verification
- occupational health clearance
- DBS clearance
- identity verification
- eligibility to work in the U.K

and in accordance with Department of Health guidelines relating to 'Health Clearance for Tuberculosis, Hepatitis B, Hepatitis C and HIV: New Healthcare Workers'.

Your private residence shall be maintained in contact with the public telephone service and shall be not more than 30 minutes or 10 miles by road from the base unit (Cumberland Infirmary, Carlisle) unless specific approval is otherwise given by the Trust.

Your principal hospital, for the purposes of reimbursement of travelling expenses, will be the Cumberland Infirmary, Carlisle.

Professional Registration

It is the responsibility of individual doctors to hold current GMC Registration with a current licence to practise.

Professional Code of Practice

As a Registered professional, you are required to abide by the GMC's 'Good Medical Practice' (Regulating doctors, ensuring good medical practice). Disreputable behaviour, even if it is not directly connected to your professional practice, or failure to abide by the principles outlined by your code of practice mentioned above could put your registration as well as your continuing employment at risk. You should be aware that any breaches of your code of practice will be investigated in line with Trust policy, and action taken where appropriate, including reporting the misconduct to the GMC/PPA.

Health & Safety Management Responsibilities

The Trust recognises its duties under the Health and Safety at Work Act 1974 to ensure as far as reasonably practicable, the health, safety and welfare at work of all employees. In addition, the business of the Trust shall be conducted so far as to ensure that patients, their relatives, contractors, voluntary workers, visitors and members of the public having access to Trust premises and facilities are not exposed to risk to their health and safety.

Managers have a duty to ensure that safe systems of work are used within their areas of responsibility and must investigate accidents and incidents, arrange annual risk assessments and ensure all staff attend appropriate health and safety training.

All employees have a duty to take reasonable care for their own health and safety, and that of others who may be affected by their activities; to co-operate with the Trust by complying with all health and safety rules and safe systems of work; and to inform their line manager of any work situation, or practice which may be considered a danger to health and safety.

Travel and Subsistence

Travel and subsistence expenses will be reimbursed for preliminary visits in addition to interview expenses only to those candidates selected for interview. Reimbursement is restricted to two such visits, whether they are made before or after the constitution of the short list is known. In the case of candidates traveling from abroad, traveling expenses are normally payable only from point of entry to the United Kingdom

Recruitment Premia

The post currently attracts a discretionary recruitment premium of up to 10% (based on basic salary) per annum. This is pensionable, payable for up to 4 years and is reviewed by the Trust on an annual basis.

Appendix 1 - Example Job Plan

The full-time working week will consist of 10 Programmed Activities (PA's), separated into:

1. Direct Clinical Care

1. Supporting Professional Activities:

Supporting Professional Activities are to meet the needs of continuing professional development for revalidation purposes. Additional SPA time will be allocated as required under the Trust Job Planning Guidance and Procedure and at the time of the Job Plan review, (Additional PAs, or an adjustment of SPA and sessional time, if a successful candidate is suitable to take part in a teaching/training role). This will be negotiated as through the Trust Job Planning Guidance and Procedure.

Weekly timetable of fixed commitments: (draft only and open to discussion)

	MON	TUES	WED	THURS	FRI
AM	Ward Round	Endoscopy		Ward round	Endoscopy
PM	Clinic	Clinic	SPA	SPA	Admin

The job plan is subject to review once a year with the Consultant, Clinical Manager, Clinical Director or Clinical Lead.

DCC	Frequency / week	PA
Ward rounds	2	2
OP	2	2
Diagnostics	2	2
Clinical admin		1.0
SPA		1.5
On-call		1.5 (current OOH is 1.57
PA for GIM on call 1:12		
Total:		10

Work-load:

- Clinics: The standard templates are based a sixteen points: 2 points for new/urgent referrals an 1 point for review patients.
- Endoscopy lists: The standard templates are based on a 10 point template with 2 points for colonoscopy and 1 point for OGD/Flexible-sigmoidoscopy. Appropriate time will be allocated for more complex procedures. It is accepted that endoscopist speed will vary, depending upon experience.

The successful candidates will be encouraged to develop any particular interest she or he has that complements the needs of the service and a timetable will be agreed in advance, to reflect the particular interests of the applicant, and the specialist interests of the existing Consultants, and needs of the Trust.

Ward rounds may not be fixed sessions but may entail flexible working with colleagues (cohort of 7) to provide daily senior review. Ward cover is envisaged to be undertaken on a rotational basis within the expanded team once established. Time away from ward cover will allow alternative clinical activity, planned compensatory time for out of hours work or additional administration and will be negotiated via the Trust job planning process.

All doctors should be familiar with the GMC requirements governing good medical practice, which is supported by the Trust.

Appendix 2 - Person Specification

This document should be read in conjunction with the Competency Framework (Appendix 3)

Requirement	Essential	Desirable
Education and Qualifications	<ul style="list-style-type: none"> • MBBS • Dual accreditation in Gastroenterology and General Medicine with the appropriate Royal College • MRCP (UK) or equivalent • Full GMC Registration <p>Entry on the General Medical Council (GMC) Specialist Register via one of the following:</p> <ul style="list-style-type: none"> • Certificate of Completion of Training (CCT) (the proposed CCT date must be within 6 months of the interview) • Certificate of Eligibility for Specialist Registration (CESR) • European Community Rights 	<p>Fellow of Royal College of Physicians</p> <p>Higher degree</p> <p>Educational qualifications</p> <p>ALS</p>
Experience and Knowledge	<p>High level of clinical experience and competence in specialty</p> <p>Excellent communication skills with patients, colleagues, managers and other staff</p> <p>Ability to take full and independent responsibility for clinical care of patients</p>	<p>A commitment to, and experience of teaching</p> <p>An interest in developing links with Acute Medicine or Primary Care</p> <p>Endoscopy experience</p> <p>General Internal Medicine experience</p>
Management & Administrative	<p>Ability to advise on efficient and smooth running of the service.</p> <p>Ability to organise and manage own workload efficiently</p>	<p>Experience of audit management</p>
Teaching	<p>Experience of, and commitment to teaching undergraduate and postgraduate medical staff.</p>	<p>Experience of teaching basic clinical skills to undergraduates</p> <p>Teaching of non-medical health professionals.</p> <p>Educational Qualification</p>
Research, Audit and Clinical Governance	<p>Experience of, and commitment to, medical audit.</p> <p>Experience of research and Clinical Governance</p>	<p>Ability to supervise postgraduate research</p> <p>Publications in referred journals</p>

Requirement	Essential	Desirable
Communication skills and abilities	<p>Empathetic and sensitive approach to patient needs</p> <p>Approachable and effective Multi-disciplinary team member with excellent interpersonal skills</p> <p>Team loyalty</p> <p>Positive approach to lessons learnt</p> <p>Confident approach without being arrogant</p>	<p>IT Skills</p> <p>Presentation skills</p>
Continued Professional / Personal Development	<p>Demonstrable evidence of lifelong learning.</p> <p>Reflective approach to personal development with an ability to acknowledge and effectively manage poor performance.</p> <p>Participation in appropriate peer review processes.</p>	Continued Professional / Personal Development
Personal Attributes	<p>See Consultant Competency Framework (Appendix 3)</p> <p>Ability to work as part of a multi-disciplinary team</p> <p>Participation in on call and emergency cover.</p> <p>Ability to travel to fulfil the requirements of the post</p>	