

"A great place to be cared for; a great place to work"



Royal College
of Physicians

Approved



**University Hospitals of
Morecambe Bay**
NHS Foundation Trust

JOB DESCRIPTION

Job Title:	Consultant Physician in Geriatric Medicine
Care Group:	Medicine
Responsible to:	Lead Clinician
Accountable to:	Clinical Director

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JOB SUMMARY:	<p>The Frailty Service at Royal Lancaster Infirmary prides itself on the level of care it provides to its patients.</p> <p>This post is based at Royal Lancaster Infirmary and is a substantive appointment. Currently the Frailty Service works within the Emergency department at RLI a specialist Frailty Intervention Unit is currently being developed.</p> <p>The post offers the successful candidate an opportunity to contribute to the further development of an established service in our Acute Frailty Unit. When a frail patient require admission they are transferred to AFU for the first 72hours of their hospital stay. The post holder would also to be part of our developing Frailty Intervention Team service. Which aims to provide a 7-day service which works closely with colleagues in Emergency Medicine and the community to help patients return to their normal place of residency at the earliest opportunity. To ensure the Frailty Intervention Team is available for 10 hours a day in line with NHSE/I guidance.</p> <p>The post will suit candidates who are passionate about Frailty and are motivated to help keep patients out of hospital wherever possible.</p> <p>There is an emphasis on the ability of the team to excel as care providers. This applies across all levels of staff on the unit and is demonstrated by an active programme to develop Advanced Nurse Practitioners who remain as part of the permanent staff and embed the culture of the team.</p>
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BACKGROUND INFORMATION

Lancaster is a university city, close to the Lake District, the Yorkshire Dales and Morecambe Bay. The university provides cultural and sporting facilities. Local educational facilities are excellent with some of the best secondary school education in the country. The M6 makes travelling by road very easy.

Manchester is one hour's drive away and London under three hours by train. The Westmorland General Hospital is situated on the outskirts of Kendal, a market town close to the English Lake District. Driving time between the two hospitals is approximately 30 minutes.

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Furness General Hospital provides health care services to the 140,000 population based in the Furness peninsula and the surrounding part of South Cumbria. The majority of the population served is based in Barrow and the surrounding district in the west.

The area is one of outstanding natural beauty with excellent recreational facilities, particularly related to the sea, lakes, fells and countryside. Housing costs within the area are relatively low. There are some excellent educational facilities in Lancaster. Major industries within the area include shipbuilding, pharmaceuticals, shoe manufacture, paper manufacture, food processing, a large number of medium sized engineering and chemical companies and within South Lakeland a large tourism industry.

Acute Frailty and Care of the Older person services at Lancaster have been developed extensively over the last few years and has recently secured funding to substantially expand the service to become a full multidisciplinary 7 day acute service.

The senior medical team currently consists of 6 substantive consultants and 2 locum consultants and an opportunity has arisen for Consultant Geriatricians within our Frailty services at Royal Lancaster Infirmary working across our Frailty Intervention Team and wider Frailty Services as part of this expansion.

The Frailty Intervention Team pathway works on an “early intervention, better outcomes” philosophy with a focus to returning patients to their usual place of residence on the same day as presenting in the Emergency Department where appropriate.

As the service develops, it will continue to build strong links with our community services and establish formal links with pre-hospital urgent and emergency care services to offer direct referrals. Additional roles in Therapies & Pharmacy are also being recruited into the Frailty service at present to further strengthen the Frailty Intervention Team service.

This is an exciting time for our services and we hope you will want to play a part in developing a gold standard service which will achieve our aim of delivering excellent care in the Morecambe Bay area for our Frail and older patients

ACUTE & GENERAL MEDICAL SERVICES

ROYAL LANCASTER INFIRMARY General Hospital Facilities

The hospital serves a population of 135,000 and supports a broad spectrum of care. All the usual specialties are provided for and there are regular consultative clinics in Neurology, Cardiothoracic Surgery, Plastic Surgery, Radiotherapy, Nephrology, Immunology, Clinical Genetics and Paediatric clinics, with visiting Regional Paediatric specialists in Neurology, Nephrology, Endocrinology, Cardiology and Paediatric surgery.

The Division is active, innovative and handles virtually 100% of secondary general medical referrals for its area, offering expertise in Cardiology, Care of the Older Person, Dermatology, Diabetes, Endocrinology, Gastroenterology, Haematology, Oncology, Palliative Care, Respiratory Medicine and Rheumatology. It also provides a wide range of techniques and services, including endocrine investigations; DEXA scanning; GI endoscopy; bronchoscopy; chemotherapy; a cardiac, respiratory and oesophageal function laboratory; and ward-based non-invasive positive pressure ventilation.

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The trust has an emergency floor model incorporating the Emergency Department, the Acute Medical Unit (AMU), the Acute Frailty Unit (AFU), Huggett Suite (Acute Stroke), Coronary Care Unit (CCU) and a Medical Same Day Emergency Care unit (SDEC). The Acute Frailty unit is adjacent to the Acute Medical Unit and is close to the CT and MRI suite and to the Intensive Therapy Unit (ITU) and surgical departments.

The general medical wards have ward based junior teams (FY1 and 2, IMT and LED doctors). ST grades are speciality team based. General Medical Wards are single sex and consultants are allocated patients on one ward.

MAIN DUTIES AND RESPONSIBILITIES

The Frailty Intervention Team is a developing multidisciplinary team that currently consists of a Consultant Geriatrician, Advanced Nurse Practitioner, a foundation year's doctor / ST1 and REACT Community Assessor who provide a 7 day service assessing Frail & Older patients attending the emergency department.

The Acute Frailty Unit is comprised of a 15 Acute beds that sees and manages around 12/15 patients per day. The Medicine Care Group is looking for the forward thinking candidate to be part of the team that will work across both these areas at the Royal Lancaster Infirmary and help develop these services. A subspecialty interest or an interest in doing a session dedicated to performing a procedure the candidate is trained in can be accommodated.

The successful appointee will be expected to:

- Undertake patient assessments for Frail & Older patients attending the emergency department to help patients return to their normal place of residency at the earliest opportunity
- Provide care for acutely unwell, frail patients on the AFU
- Review appropriate patients classed as Outliers
- Contribute to service development and quality improvement
- Provide leadership and work as part of and develop our team

You will ensure, with Consultant colleagues that the department provides an effective 7 day service, within national and local standards. The hours during the week for the service are 8am-6pm and for weekend working 8am-5pm, This would mean each consultant would be doing a 1:5 weekend shift in our Frailty Intervention Team service. The 1:5 rota is further supported on a sessional basis by Consultants across the wider Care of the Older Patient team ensuring adequate cover for annual and study leave. There is no on call responsibility for this post, no travel requirements and 30 minutes is given for lunch break.

You will join in the running of the Department, and share the management of patients under the care of the team, in order to help achieve national key performance indicators relevant to geriatric medicine.

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Proposed job plan (negotiable – below demonstrating Frailty Intervention Team cover. Mix between Frailty Intervention Team DCC and Acute Frailty Unit DCC available and could be combined in the rota with current substantive consultants)

Day Work Categorisation No of PAs

Monday	Frailty Intervention Team (Full day)	DCC	2	
Tuesday	Frailty Intervention Team (Full day)	DDC	2	
Wednesday	Frailty Intervention Team (am)	DCC	1	SPA 1
Thursday	Frailty Intervention Team (am)	DCC	1	SPA 1
Friday	Frailty Intervention Team (Full day)	DCC	2	
Weekend	1 in 5 full day Frailty Intervention Team weekend (4 PA DCC time in Lieu off following week as a result of weekend work) DCC 4			

The appointment will be for 10 programmed activity sessions which would include direct clinical care and supporting professional activity. 1.5 PA clinical admin time is subsumed into the direct clinical care commitment. The above 2 SPA'S the 2SPA includes 0.5 for trainee supervision and 1.5 audit, CPD, mortality and morbidity, attendance at departmental teaching, monthly care group meetings and grand rounds (internal CPD meetings) in order to satisfy GMC revalidation requirements. Due to weekend sessions, there is no general medicine on call or general medicine post take ward rounds as part of this role. The number of programmed activities may be negotiated down or up.

Education and training of junior medical staff.

In addition, education of GPs, nurses, technical and paramedical staff where required. Medical students from Lancaster University also are taught within the department. The appointee will be encouraged to contribute to 3rd, 4th and 5th year student sessions on Acute Frailty and elderly medicine. Contribution to local and regional postgraduate teaching sessions in Medicine at Core and Speciality level will be expected.

Self-development and ensuring CME requirements are met.

The Trust supports the requirements for CME as recommended by the Royal College of Physicians and is committed to providing time and financial support for these activities. Newly refurbished office accommodation and secretarial support are provided to support the post. This includes provision of computers with Internet access via the Trusts intranet. Office accommodation may be shared. The trust has an electronic patient record (Lorenzo) and prescribing system. A PACS system is in place for radiology. The post-holder would undergo appraisal annually, including 360-degree assessment and patient satisfaction surveys, using the online L2P appraisal portfolio. The Trust are fully committed to the Revalidation process. Any issues arising in the appraisal process would be resolved in conjunction with the Medical Director. Opportunities for mentoring are available in the trust through the Clinical director and new consultants encouraged to use this facility.

Other Medical Staff

Consultant Physicians in the RLI Department of Acute and Non-Acute Medicine:

Dr David Fyfe Medical Oncology,

Dr Paul Smith Diabetes, GIM,

Dr Andrew Higham Clinical Director Gastroenterology, GIM, R&D Lead

Dr Colin Brown Clinical Director Gastroenterology, GIM, Bowel Cancer Screening Lead

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Dr David Eaton Medical Oncology
Dr Sri Dampetla Diabetes, GIM Dr Adrian Brodison Cardiology
Dr Mark Wilkinson Respiratory, Intensive Care
Dr Shahedal Bari Respiratory, GIM
Dr Gilbert Jifon Respiratory GIM
Dr Laszlo Szigeti Stroke
Dr Ian Chadwick HCE, GIM
Dr Don McGowan HCE, GIM
Dr James Barker Stroke, HCE, GIM Dr Mark Taylor HCE Clinical Lead (RLI), GIM
Dr Paula Nenn HCE, GIM
Dr Marwan Bukhari Rheumatology
Dr Lesley Ottewell Rheumatology
Dr Yunus Seth Acute Medicine Clinical Lead
Dr Colin Read Emergency Physician
Dr Jeremy Harrison Emergency Physician Consultant Physicians in the FGH Department of Medicine:
Dr Fiona Wood Rheumatology GIM
Dr Gill Cook Elderly Medicine
Dr Alan Barton Elderly Medicine
Dr Rachel Jolley Elderly Medicine
Dr Cathy Hay Diabetes, GIM FGH Site Clinical Lead
Dr Albert Davies Gastroenterology, GIM
Dr Richard Lea Acute Medicine Gastroenterology FGH Site Clinical Lead
Dr John Keating Gastroenterology, GIM
Dr Fiona McMillan Emergency Physician

CLINICAL GOVERNANCE

To provide clinical services in line with the Trust's clinical governance arrangements which are 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 MEDICAL EDUCATION

All consultants are required to maintain and develop their clinical skills. Individual training and developmental needs will be identified through an appraisal process taking into account Royal College requirements.

RISK MANAGEMENT

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

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APPRAISAL AND REVALIDATION

All Consultants in the Trust participate in the Trust's appraisal system, and any future revalidation process, and are required to undertake regular appraisal of junior and career-grade medical staff as appropriate. Training for this can be provided if required.

All doctors will be required to comply with the requirements set out by the respective Royal College(s) along with the General Medical Council to ensure they maintain a valid license to practise medicine.

Consultants should refer to guidelines produced from time to time by the GMC and the Royal Colleges of Medicine relating to Appraisal and Revalidation. Advice at present includes completing, collecting and updating evidence within a portfolio, reflecting on practice, and developing and reviewing a Personal Development plan.

EDUCATION FACILITIES

All Trust sites have a modern, well-equipped, postgraduate education centre with excellent lecture theatre and library facilities.

On Tuesday lunchtimes the Division has a clinical meeting which is well attended and supported by Consultants.

Medical Students from Lancaster Medical School receive the whole of their education, academic and clinical, in Cumbria and North Lancashire following the Lancaster undergraduate medical curriculum. The University Hospitals of Morecambe Bay NHS Foundation Trust is the lead NHS organisation and takes responsibility throughout the five years of the degree for the provision of acute practice placements. In addition to time spent at UHMBFT students spend around a third of their clinical time in the community. Primary care placements are based in practices across Cumbria and North Lancashire, and their mental health placements are provided by North Lancashire Primary Care Trust and the Lancashire Care NHS Trust.

The post-holder will be involved in the further education of FY1 and FY2 junior doctors.

CLINICAL AUDIT

There is an active audit programme supported by the audit department. Audit meetings for medicine occur on a rolling half day each quarter. The post-holder would be expected to participate in the Audit programme.

MANAGEMENT

The Chief Executive of University Hospitals of Morecambe Bay NHS Foundation Trust is Aaron Cummins, and the Medical Director is Miss Jane McNicholas.

There are 7 cross bay divisions Acute Medicine, Non-Acute Medicine, Surgery and Critical Care, Women and Children, Clinical Support Services, Corporate Business and Knowledge, Education Learning and Development.

The Clinical Director for Medicine is Dr Andrew Higham and the Divisional General Manager is Ms Diane Smith.

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The Medical division meets 4 times a year, but there are monthly meetings of the Division on each of the main hospital sites.

The appointee will be a member of the Division of Medicine and also of the Medical Staff Committee. He or she is expected to take an appropriate share of administrative work relating to the organisational needs of the Division.

MAIN CONDITIONS OF SERVICE

The appointee to the post must hold full GMC registration and be included on the specialty register for general internal medicine, stroke, neurology or geriatric medicine or be within 6 months of obtaining CCT at time of interview.

The post is subject to the terms and conditions of service for Hospital, Medical and Dental Staff (England and Wales), as amended from time to time.

The appointee will be required to reside within a 30-minute drive of Royal Lancaster Infirmary, unless specific approval is given by the Trust to reside at a greater distance.

VISITING ARRANGEMENTS

Prospective applicants are encouraged to visit the hospital and to meet prospective colleagues. Arrangements for visits can be made by contacting Dr Mark Taylor (Tel: 07918 613298) mark.taylor@mbht.nhs.uk, Dr Ian Chadwick (Tel:01539 715078) ian.chadwick@mbht.nhs.uk or Scott Bremner (Tel: 07929 728712) scott.bremner@mbht.nhs.uk

NOTE

This job description is not intended to be a complete list of duties and responsibilities but is a guide for information to the job. It will be periodically reviewed in the light of developing work requirements. The consultant will be expected to contribute towards this review process

This job description is not exhaustive and will be reviewed and amended, with the post holder, when necessary.

TERMS AND CONDITIONS

This post will be subject to the terms and conditions of the University Hospitals of Morecambe Bay NHS Foundation Trust.

CONFIDENTIALITY

Information relating to patients, employees and business of the Trust must be treated in strictest confidence. Under no circumstances should such information be discussed with any unauthorised person(s) or organisations. All staff must operate within the requirements of the Freedom of Speech policy.

SAFEGUARDING & PROTECTING CHILDREN

Everyone shares responsibility for safeguarding and promoting the welfare of children and young people, irrespective of individual roles. As a senior manager you will need to be aware of your

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responsibility in relation to safeguarding and protecting children. You will be expected to provide effective leadership in ensuring safeguarding children is a priority within all service delivery and developments.

ENVIRONMENTAL IMPACT

It is the responsibility of all staff to minimise the Trust's environmental impact by recycling wherever possible, switching off lights, computers, monitors and equipment when not in use and it is safe to do so, minimising water usage and reporting faults promptly.

HEALTH AND SAFETY

The Health and Safety at Work Act stipulates that it is the responsibility of each employee to observe all rules governing safety and conduct and as such safety equipment and Personal Protective Equipment provided must be used.

INFECTION CONTROL

The Trust is committed to protecting the health of all staff, patients and visitors to the Trust. As such all staff is personally responsible for compliance with all Trust and department infection prevention and control policies. Failure to comply with such policies and associated procedures is likely to lead to disciplinary action and may result in dismissal.

MANUAL HANDLING

The post holder will be provided with adequate training in correct lifting techniques by a recognised lifting instructor.

NO SMOKING POLICY

A No Smoking Policy operates across all Trust sites.

QUALITY OF SERVICE

The trust is committed in its use of available resources to obtaining the best possible service for patients and staff. The Post holder must share this objective and seek to maintain and improve the quality of service provided.

EQUAL OPPORTUNITIES

The Trust is pledged to equal opportunities for all and is committed to ensure that no job applicant or employee receives less favourable treatment on the grounds of gender, marital status, age, race, colour, sexual orientation, creed, nationality, ethnic or national origin or disability. We promote flexible working opportunities wherever possible to enable staff to balance their work with their private lives.

TRAINING AND DEVELOPMENT

Maintain your professional standards in respect of education and training and ensure that you are aware of your specific area specialty training and needs analysis.