

Chairman Mr Tom Spink
Chief Executive Mr Sam Higginson

Consultant in Luminal Gastroenterology



Department of Gastroenterology

February 2023

Consultant in Gastroenterology

This job description is for a new post within the department of Gastroenterology at the NNUH including the Quadram Institute. We are looking to attract a high-quality applicant with an interest in upper or lower Gastrointestinal disease, nutrition, endoscopy and general internal medicine. As a large and growing department, we can accommodate a range of sub-specialist interests (see below), including research, education and training. We are supportive of those applicants who are looking for part time and or a post-retirement post.

This post has arisen due to the need for a significant expansion of our outpatient luminal GI service and a growing need to increase our upper and lower GI endoscopic provision in alignment with the opening of our ***brand-new state of the art endoscopy unit in the Quadram Institute***, a need to increase our out-patient services and a need to support medical admissions to the hospital together a drive to increase our academic profile and support the wider STP (Sustainability and Transformation Partnership) in Norfolk and Waveney.

This post will focus on the subspecialist interest of IBD, of luminal gastroenterology. Patients with liver disease are managed by colleagues in the department with an interest in hepatology. Participation in education, training and research is encouraged. On call is exclusively for patients with luminal and liver disease. It does not include general medicine patients.

A candidate who is unable for personal reasons to undertake the duties of a whole-time post will receive equal consideration. For consultants wishing to move from existing posts we offer flexible working opportunities.

If such a candidate is appointed to this post, content will be modified as appropriate in consultation with the Gastroenterology and GI Endoscopic Service Director.

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 sharing and a flexible working programme.

The Gastroenterology Department

The GI department is divided into 3 sub-specialist inpatient teams comprising: Inflammatory Bowel disease/Luminal GI disorders/Therapeutic Endoscopy; Clinical nutrition/Luminal GI disorders/therapeutic endoscopy; and Hepatobiliary medicine and Hepatology. Successful applicants will join the most appropriate team and we welcome full time and part time applicants for these positions.

The Luminal/IBD team

The luminal GI team is currently a team of 5 full time consultants (Dr Richard Tighe, Dr Alvin Ochieng, Dr Anups Desilva, Dr Mark Tremelling & Dr Simon Chan), 4 part-time consultants (Dr Crawford Jamieson (Director of Division of Medicine, Professor Alastair Watson, Dr Andrew Douds, Dr Bernard Brett (Deputy Medical Director), 2 clinical academics (Dr Ian Beales & Dr Leo Alexandre) with part-time clinical duties and 5 clinical nurse specialists. The team care for one of the UKs largest cohort of IBD patients in a single center and have a large biological registry. In addition to this the team offer

- General luminal and IBD clinics
- A range of in and outpatient therapeutic and diagnostic endoscopic procedures
- Bowel screening services (led by Richard Tighe)
- A dedicated GI physiology unit
- A full upper GI service for patients with complex dyspepsia (led by Dr Ian Beales)

In reference to the IBD service (led by Dr Anups DeSilva) the team offer:

- A dedicated IBD adult clinic
- A dedicated monthly paediatric transition clinic with our Gastroenterology paediatric consultants
- 5 IBD nurse specialists (4 FTE) that offer pre-treatment counselling and drug monitoring
- Dedicated endoscopy lists for IBD patients (IBD surveillance chromoendoscopy)
- A monthly IBD MDT with joint surgical clinics with IBD dedicated colorectal surgeons
- An IBD Educational programme for junior doctors and specialist registrars
- Commercial Trial access for new and developing biological therapy for IBD and academic initiative studies
- Participation in national audits
- A pipeline for academic Gastroenterology Trainees
- An IBD helpline run by the IBD nurse specialists to provide easier access and advice for those with flares of their disease
- A virtual clinic for stable patients to reduce unnecessary clinic visits for patients, and to optimise the use of outpatient clinic consultations

Other Subspecialty Departments in Gastroenterology

Clinical Nutrition

The department has a dedicated multidisciplinary clinical nutrition service led by Dr Charlotte Pither, with Dr Neil Bowron and is supported by 4 specialist clinical nurses.

This team offers a regional service to James Paget Hospital, Kings Lynn and Ipswich Hospital. The clinical service offers:

- A weekly specialist nutrition MDT clinic which also supports complex IBD and hepatology patients
- A weekly nutrition MDT and specialist feeding issues MDT
- A biweekly ward round of enteral and TPN feed patients
- An inpatient service for metabolic stabilisation of patients with eating disorders
- Clinical care of patients with PEG and RIG feeding tubes
- Home support of patients with long term TPN feeding

Hepatology and Hepatobiliary Medicine

The clinical hepatology team currently is composed of 6 consultant Hepatologists (Dr Arun Shankar (Service Director), Dr Simon Rushbrook, Dr Martin Phillips, Dr Nimzing Ladep, Dr Syed Alam, Dr Marianna Mela, Dr Carl Hammond). There is an EUS service delivered by Dr Rushbrook and Dr Simpson and an ERCP and complex biliary endoscopy service delivered by Dr Martin Phillips, Dr Simon Rushbrook, Dr Richard Tighe and Dr Anups DeSilva).

The hepatology team offer a wide range of specialist clinics dedicated to hepatobiliary cancer, viral hepatitis, PSC, autoimmune liver disease, alcohol and NAFLD. This is in addition to specialist liver transplantation clinics and a range of general liver clinics.

The team has excellent working relationships with the Cambridge liver unit and works closely with our colleagues there in the management of patient's pre and post liver transplantation. We are part of the regional HCV network providing DAA drugs to patients with HCV infection according to operational managed network.

The core team is supported by consultant colleagues in Interventional Radiology (IRU), Clinical Biochemistry, Microbiology/virology, histopathology and hepatobiliary radiology (led by Dr Benedict Simpson).

Our IRU team offer: a mobile PICC Line service, Percutaneous biliary stent placement, a range of embolization procedures, transjugular liver biopsies, TIPS and perform Trans-arterial chemoembolization and microwave radiofrequency ablation of hepatocellular carcinoma cases.

The hepatology unit also run several fibroscan clinics and are able to offer MRE for liver fibrosis assessment in a research capacity.

The service is supported by 4 dedicated liver nurses and 3 dedicated fulltime specialist nursing posts in alcohol and substance abuse.

Bowel Screening Team and department (Led by Dr Richard Tighe)

The department has been at the forefront of the national colorectal cancer screening programme. We were in the first wave of centres to start the programme in 2006 and were also first to pilot the extension of this programme to the 70-75 year old age group in July 2008. We were also one of the first wave of centres performing bowel cancer screening flexible sigmoidoscopy in 2013. The programme overseen by Dr Richard Tighe is led by a strong nursing and administration team.

Successful applicants would be supported if they wished to become recognized bowel cancer screening endoscopists or wished to continue this if already accredited

We are a leading national endoscopy training centre with courses every month which we hope the successful applicants would participate in. These include foundation endoscopy, intermediate colonoscopy and teaching the teachers courses. We would hope that the successful applicants would participate in these as teaching high quality endoscopy is a vital part of the NNUH gastroenterology departmental ethos.

Departmental Organisation

Our department believes in delivering a high-quality consultant led and delivered service across both inpatient and outpatients domains.

Therefore, each consultant's job plan is reflective of time spent on and off ward cover. During ward cover periods time is allocated for supporting the Trust's Red to Green programme (to ensure bed days are not lost and communication between ward teams is high quality and effective) and ensuring that inpatient care is consultant led and delivered. It is expected that patients are pulled early from A&E and AMU, and that a consultant DECT phone is carried which is coordinated within the department.

Leave is coordinated between the teams and across the department in accordance with the Trusts annual leave policy. It is therefore expected that consultants on ward duty will generally carry out significantly less of the outpatient or endoscopy workload than colleagues off the ward.

Guist and Kimberley are the home wards for Gastroenterology and our elective work is coordinated through the endoscopy unit and the General medical day unit.

Endoscopy

The Norfolk and Norwich University Hospital serves a population of 750,000 and specialist services to a significantly wider population and is the busiest endoscopy unit in the country.

In 2018 we opened the Quadram Institute which houses our brand-new state of the art 10 roomed endoscopy unit.

This is a world-class institute for teaching and training and research in endoscopic care and underpins the NNUH GI Biorepository. Of course, as a gastroenterologist joining the team part of your work will be undertaken in this new institute and will give you an opportunity to develop and establish your own academic profile within the department.

This 10-roomed unit will be in conjunction with a 3 roomed endoscopy unit in the NNUH for interventional and inpatient work.

Our unit provides a full range of diagnostic and therapeutic endoscopy including therapeutic gastroscopy, upper GI stenting, ERCP, spyglass cholangioscopy, radial and linear endoscopic ultrasound, enteroscopy, PEG insertion, PEC insertion, oesophageal, duodenal and colonic stenting and a capsule endoscopy service led by Dr Alvin Ochieng, and along with a complex regional polypectomy service.

Our consultant team is supported by 6 established nurse endoscopy posts, and we are currently training a further 6. We believe that a modern unit will be a mixture of nurse and consultant endoscopists working alongside each other delivering diagnostic and interventional work.

Dr Tighe oversees our endoscopic trainees and ensure that as a department through audit that everyone is adhering to JAG KPIs and standards.

We also believe that consultants need to develop, so we would support any applicant that wishes to work towards new endoscopic goals through either in house or external training

Physiology Unit

We also have a full GI physiology service which is a central HUB to our service. This offers impedance manometry, anal manometry and pH manometry.

Expectations of the post

The current on-call frequency for Gastroenterology/Hepatology, including endoscopy and GI bleeding is 1 in 12 (supported by a middle-grade doctor and another junior doctor) but is anticipated to fall to a 1 in 14 or less over the course of the coming year or two.

The post holder will be expected to be proficient in emergency endoscopy including management of varices (not necessarily gastric varices). The out of hours “on call” commitment will include emergency gastroenterology and hepatology referrals and emergency endoscopy cover for the Trust as part of a formal upper GI bleeding rota that the department offers 24/7 service in accordance with NICE guidelines.

Out of hours endoscopy cover is supported by 2 on-call endoscopy nurses and most cases are scoped in the endoscopy department although emergency theatres and full anaesthetic cover is available for severe cases. **ERCP/EUS experience is not required for these posts. We currently have a small bowel capsule service, but if a post holder wished to undertake these, this would also be supported.**

- 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 successful applicant will share an office, equipped with a personal computer and full access to trust IT systems, with other consultants. There will be full secretarial support.
- The appointment is to the Trust, but as part of the STP developments cross cover of clinics and or other clinical sessions in other hospitals will become a realistic expectation moving forward with STP implementation – successful candidates will however be primarily based on the NNUH site
- The appointee will be a member of the Consultant Staff Committee and be expected to serve on this committee.
- The candidate will be expected to take an active role in the delivery of the clinical gastroenterology service including inpatient ward work, outpatients clinics, endoscopy sessions and emergency out of hours gastroenterology and endoscopy cover (on call rota). The Trust has an Acute Medical Unit run by consultant acute physicians and a specialty triage system. During the week patients admitted to the hospital and triaged to gastroenterology are reviewed by one the on-call Gastroenterologist who is freed up from other day-time activity.
- At weekends, in-patients and all gastroenterology triages are reviewed twice daily by the duty consultant gastroenterologist and the on-call team which consists of a registrar and one junior trainee. The consultant is expected to be on the hospital site at the weekend between 0800 and 2000.
- Clinic templates are flexible, but it would be expected that the appointee sees 4-5 new patients and 8-10 follow up patients in each clinic. Ward referral numbers are also variable and are usually seen by SpRs initially with consultant review subsequently.

Academic Opportunities

If an applicant wishes to establish an academic position within the department with university support/Quadram support we would encourage the applicant to apply and this can be discussed further at the time of interview and pre interview meetings. These posts are flexible and academic GI physicians would be encouraged to apply

THE SPECIALTY

Consultant staff and special interests

- Dr Arun Shankar – Hepatology, Alcohol services, NAFLD (Service Director of Gastroenterology)
- Dr Syed Alam - Hepatology, viral hepatitis, portal hypertension, endoscopy
- Dr Ian Beales (UEA Reader) – dyspepsia, medical education, clinical trials, acid-peptic disorders, IBD
- Dr Bernard Brett, IBD, ERCP, Therapeutic endoscopy, Bowel Cancer Screening, Luminal Gastroenterology and Medical Management (currently Deputy Medical Director)
- Dr Simon Chan – IBD epidemiology, clinical IBD, diagnostic and therapeutic colonoscopy, Associate Professor, Translational Medicine
- Dr Anups Desilva – IBD lead, Bowel Cancer Screening, therapeutic endoscopy and Medical Education
- Dr Andrew Douds – Luminal gastroenterology and IBD.
- Dr Carl Hammond – Hepatology and hepatocellular carcinoma
- Dr Nimzing Ladep – General gastroenterology and hepatology with an interest in hepatocellular carcinoma
- Dr Crawford Jamieson – General gastroenterology (Director of the Division of Medicine)
- Dr Alvin Ochieng – Emergency gastroenterology and therapeutic endoscopy
- Dr Charlotte Pither – Lead consultant in Nutrition
- Dr Martin Phillips– Hepatology, ERCP, therapeutic endoscopy
- Dr Simon Rushbrook – Hepatology, PSC genetics, endoscopic ultrasound, ERCP, hepatobiliary medicine and liver transplantation
- Dr Richard Tighe – screening colonoscopy, endoscopy training, therapeutic endoscopy, IBD, ERCP
- Dr Mark Tremelling – IBD genetics, Clinical IBD diagnostic and therapeutic colonoscopy
- Professor Alastair Watson - IBD
- Dr Neil Bowron - Nutrition, Chair of Feeding MDT, Enteral Nutrition lead
- Dr Leo Alexandre- Oesophageal cancer, Upper GI pathology.

Non Consultant Career Grade

- Dr Jean-Paul Cannon (Clinical Fellow)

Junior doctors

- 4 Gastroenterology specialist registrars
- 3 CT1 trainees
- 4 FY1 trainees

Education and Training in the Department

There is a weekly Wednesday lunchtime departmental meeting – once a month this is a histopathology meeting, the other weeks a radiology meeting (also attended by upper and lower GI surgeons). We run weekly teaching sessions for junior doctors in the department chaired by a consultant. There is an active audit programme including many audits required for the Global Rating Score as well as regular audits on sedation practice and patient satisfaction. The appointee is expected to participate in audit and the production of medical guidelines for the department. There is a monthly half day clinical directorate and clinical governance meeting including morbidity & mortality and patient safety discussions.

All trainees have an educational supervisor from the consultant staff. Medical students from the University of East Anglia attend the department as part of the Digestion module. We have had excellent feedback from previous cohorts of students. Dr Sarah Hyde will continue to organize this with Dr Phillips delivering most of the the department's teaching supported by Dr SM Rushbrook. All consultants in the department however have the opportunity to contribute to the teaching of these students on the ward, in clinic, in the endoscopy unit or via lectures/seminars. If the successful applicant wanted to develop an interest in teaching of students, then the SPA allocation would be reviewed accordingly.

Academic Gastroenterology and the Norwich Research Park

The Norwich Medical School within the University of East Anglia and the Norfolk and Norwich University Hospitals NHS Foundation Trust (NNUH) are both members of an overarching entity the Norwich Research Park (NRP) which has biomedical science as its major driver and as a deliverable. Aside from the NNUH and UEA, the Norwich Research Park includes the Sainsbury Laboratory and 3 Institutes supported the Biotechnology and Biological Sciences Research Council (BBSRC) - namely the Quadram Institute that has the Quadram Biosciences, the John Innes Centre (JIC) and the Earlham Institute (a genome analysis centre). All of these are within 12 minutes-walk of each other, facilitating close working relationships and networking. As already mentioned, the new endoscopy centre will be in the newly built Quadram centre.

The scientific research of the members of the Norwich Research Park (NRP) potentially has great relevance to gastroenterology. The BBSRC's John Innes

Centre is a world-leader in plant science and microbiology with research programmes including antibiotic discovery and the development of new plant strains to promote human health. Research at the Quadram is aimed at harnessing food for health and the prevention of food-related diseases and is led by 25 Principal Investigators. The microbiome and food-borne pathogens and major research themes within its research programme. UEA is one of the few universities in the UK to have a germ-free animal unit. Across the NRP facilities are available for analysis of gut microbiota, genome analysis, DNA sequencing and associated bioinformatics and mathematics and a single cell sequencing unit. Current gastroenterology research focuses on intestinal inflammation and the interaction of the gut microbiome, intestinal epithelial cells and mucosal immune system. Key areas of research interest are: Inflammatory bowel disease, PSC, enteric infection, intestinal epithelial cell death, microbial host interactions in the gut, autophagy, dietary risk factors for gastrointestinal disease and organoids models of disease.

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.

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 to newly qualified consultants after three months in the post. Such additional programmed activities will not be paid retrospectively to the date of appointment.

The Job Plan will then be reviewed annually, following the Appraisal Meeting and is in an electronic form. 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:

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 a minimum of 1.5 will be SPAs.

Candidates who wish to undertake a variety of roles such as educational supervision, appraisal, medical school teaching, clinical governance roles etc will be allocated additional SpAs. The Trust will initially allocate a basic level of 1.5 SPAs for personal

appraisal, CPD, mandatory training, job planning, limited medical student teaching during fixed clinical sessions etc. Candidates will be encouraged to take on additional remunerated SpA activity and the expectation is that most consultants will undertake a minimum of 2 SpAs and the average for the department will be over 2.5.

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.

PROVISIONAL INDICATIVE TIMETABLE

The following provides an example 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 regards to the scheduling of all other activities, including the Supporting Professional Activities. Upon appointment the consultant will be given a specific “work programme” detailing the initial allocation of direct clinical care activities and supporting activities.

Off the wards (75 to 80% of the time)

DCCs

On-call	2.0 PA
Endoscopy	2.0 PA
Clinics	3.0 PA
Patient related admin	1.0 PA
MDTs	0.5 PA
SPA	1.5 PA

Day	Time	Activity
Monday	AM	OP
	Lunchtime	Grand Round
	PM	Endoscopy
Tuesday	AM	OP
	Lunchtime	Free
	PM	SPA
Wednesday	AM	Clinic
	Lunchtime	Radiology meeting
	PM	SpA
Thursday	AM	SpA/Clinical Administration
	Lunchtime	IBD meeting
	PM	Free
Friday	AM	Clinical Admin
	Lunchtime	Upper GI MDT
	PM	Endoscopy List
Sat	All day 1 in 12	On-call
Sun	All day 1 in 12	On-call

*Additional SpA on agreement with Service Director including Educational Supervision, Appraisal, Medical School teaching etc

On the wards (20 to 25% of time)

DCC

Ward work	5 PA
Patient related Admin + MDT	1.5 PA
Endoscopy	1.0 PA
Clinics	1.0 PA

SpAs

Basic SpA	1.5 PA
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Day	Time	Activity
Monday	AM	Ward Round
	Lunchtime	Grand Round
	PM	Clinical Admin
Tuesday	AM	Ward Round
	Lunchtime	Free
	PM	Endoscopy
Wednesday	AM	Ward Round
	Lunchtime	Radiology meeting
	PM	SpA
Thursday	AM	Ward Round
	Lunchtime	IBD meeting
	PM	Clinic
Friday	AM	Ward Round
	Lunchtime	Upper GI MDT
	PM	Direct Clinical Care
Sat	24hrs (0800-2000) on site 1 in12	On-call
Sun	24hrs (0800-2000) on site 1 in 12	On-call

*additional SpA on agreement with Service Director including Educational Supervision, Appraisal, Medical School teaching etc.

JOB REQUIRMENTS	ESSENTIAL	DESIRABLE
Qualifications	Full GMC Registration with a license to practice MRCP Entry on the GMC Specialist Register via; <ul style="list-style-type: none"> • CCT (Proposed CCT date must be within 6 months of the interview) in General Medicine and Gastroenterology or equivalent (must be confirmed by PMETB/GMC) 	Higher degree
Aptitudes	Good communicator Capable of working in a multi-disciplinary team particularly within the endoscopy unit and nutrition team Enthusiasm for service development and teaching	Prepared to work in shared office space Management skills
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	Experience in research or published papers in area of special interest
Interests	Interest in Gastroenterology including treatment of both inpatients and outpatients and endoscopy	Sub speciality interest in IBD or upper GI gastroenterology or functional bowel disease
Circumstances	Flexible outlook on working hours Flexible outlook on working practices 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	<p>Ability to communicate effectively with clinical colleagues, colleagues in pathology and support staff</p> <p>Ability to present effectively to an audience, using a variety of methods, and to respond to questions and queries</p>	<p>Good presentation skills</p>
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It is essential that all Trust employees 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 consultant-led outpatient services, day case operations and a Minor Injuries Unit (MIU). The trust 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 behavior 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 Charles FFrench-Constant, 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 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 many 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 school's 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 Hepatology
- 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 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 are located in the Quadram Institute. The Quadram Institute's mission is 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 groundbreaking 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 can 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. Many 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 Chief of Research & Innovation (Professor A Forbes) 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 Criminal Records Bureau (CRB) disclosure service. 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 CRB.

It is essential that all Trust employees 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.

Interview Expenses

All potential applicants are advised the Trust will only reimburse travel and hotel accommodation expenses in respect of the interview and one preliminary visit. In the

case of candidates attending from outside of the United Kingdom, expenses will only be met from the port of entry.

Contacts for Further Information

Candidates requiring further information are invited to contact the following:

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