

JOB DESCRIPTION

CONSULTANT TRAUMA & ORTHOPAEDIC SURGEON

(Specialist Interest- Lower Limb Arthroplasty including Revision)

10PAs



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SECTION 1 - ABOUT THE TRUST

North Middlesex University Hospital NHS Trust is a medium sized District General Hospital based in Edmonton in Enfield, North London. We serve a diverse multicultural population largely from the London boroughs of Enfield and Haringey. Many of our patients live in wards that are within the 5% most deprived in the UK and a large proportion of our patients were born abroad. This makes it both a fascinating and a challenging hospital to work in.

Over the last decade we have rebuilt almost all of the hospital and now have facilities that we are proud to work in. We employ just over 3,000 staff, more than half of whom live locally. We encourage apprenticeships from the local community and work closely with our local Health Watch.

The Edmonton Infirmary opened in 1910 and replaced the Union Workhouse that had been founded on the site in 1842. It was renamed as North Middlesex Hospital in 1920. In 2011 our new building opened placing all of the hospital under a single roof for the first time. In 2013 our new maternity and neonatal unit were added.

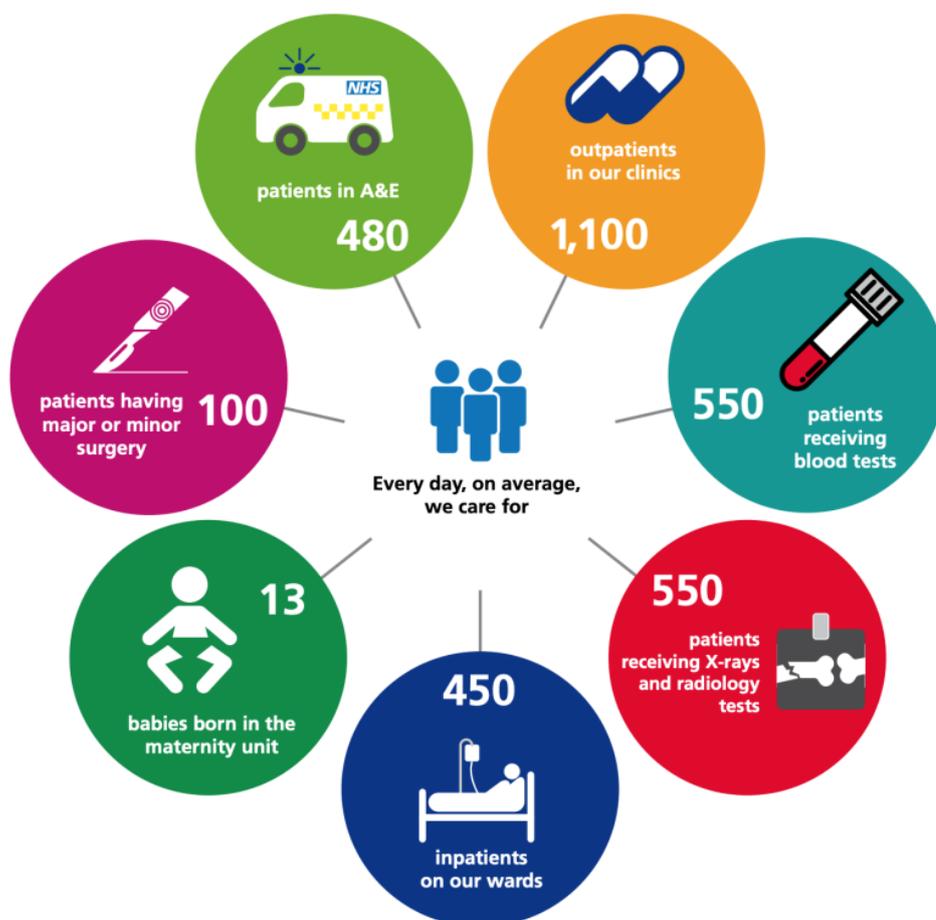
We are primarily an emergency led hospital with more than 90% of our bed days being used for patients admitted via our emergency and ambulatory units. As well as offering everything you would expect from a major acute hospital we have a number of tertiary services treating patients with HIV and Sickle Cell Disease and a large cancer and radiotherapy service. We also run our local community Sexual Health Clinics.

We are proud of our staff and want to ensure their training allows them to provide excellent clinical care. We are also a training unit for medical students from UCL and St George’s University Grenada, and for nursing and midwifery students from Middlesex and City Universities.

In our most recent CQC report (2018) we are still found to ‘require improvement’, but the report noted the achievements since the previous report, with a positive shift in culture and quality, notably in our Emergency and Maternity departments. Our Trust vision and objectives show our aspirations to develop towards ‘Good’ and ‘Outstanding’.

We are a major local employer with a headcount of 3,232 staff in March 2018, half of whom live locally in Enfield and Haringey. In 2017/18 we had a total annual income of £278 million. Other key figures for our activity are shown in the table and the figure

	2016/17	2017/18
A&E attendances	167,021	175,167
Outpatient attendances	376,348	401,072
Admissions	83,804	79,608
Operations / procedures	39,193	37,642
Babies born	5,047	4,707



Trust Strategy

The key objectives for the Trust in 2023/24 are based on our vision to provide outstanding care for local people:

- Excellent outcomes for patients
- Excellent experience for patients and staff
- Excellent value for money.

The organisation will continue to work in developing and enhancing the skills of the staff it employs. This will be in line with the patient safety strategy to deliver improved quality in clinical practice and also through enhancing the clinical management and leadership skills within the organisation. The clinical strategy for the next 5-10 years is anchored on delivering high quality emergency clinical services and networked specialist care to our local population in partnership with our local CCGs and other healthcare providers.

Quality Improvement and the Royal Free London Clinical Partnership

In September 2017, NMUH became the first clinical partner to the Royal Free London Group (RFLG). This means that we are cooperating with the RFLG in terms of quality improvement and service development, to ensure there are consistent approaches to designing and delivering care based on evidence and best practice.

Clinicians from both Trusts are now coming together in Clinical Practice Groups (CPGs), sharing their expertise to help transform the standards of care for our patients and local communities.

CPGs will embed continued Quality Improvement in the routine work of every department and every clinician.

In October 2018, the NNUH Trust Board considered the case for proceeding to full membership of the RFL Group. Based on engagement with our local stakeholders and a thorough evaluation of the financial and quality impact, the board decided not to pursue full membership, but reconfirmed the Trust's commitment to continuing as a clinical partner in the RFL group.

The North Middlesex Quality Improvement Strategy sets the Trust on a path to embed Quality Improvement QI in everything we do, guided by the 'Model for Improvement'. In 2017 we started a programme 'Listening into Action' that sets the foundations to our QI programme by involving all staff in identifying areas for improvement. Our QI programme includes the CPGs, our Urgent and Emergency Care Improvement Programme and other projects. Working for us will mean that you will have access to the best QI methods and teams to understand and continually improve your own work.

Our digital strategy

We have developed ambitious plans to modernise our information technology over the next three to five years. The "Global Digital Exemplar – Fast Follower" programme started in January 2019 and brought £12M investment to achieve:

- clinical noting replacing most paper-based documentation
- electronic prescribing to make the use of medication safer
- mobile devices for nurses to document patient encounters and identify patients at risk
- a new mobile team communication system to replace most pagers
- information exchange with other NHS providers and primary care across NCL
- a patient portal that promotes patients' active involvement in their care
- clinician's involved in the design, configuration, testing and implementation of these systems.

Trust Values and Expected Behaviours

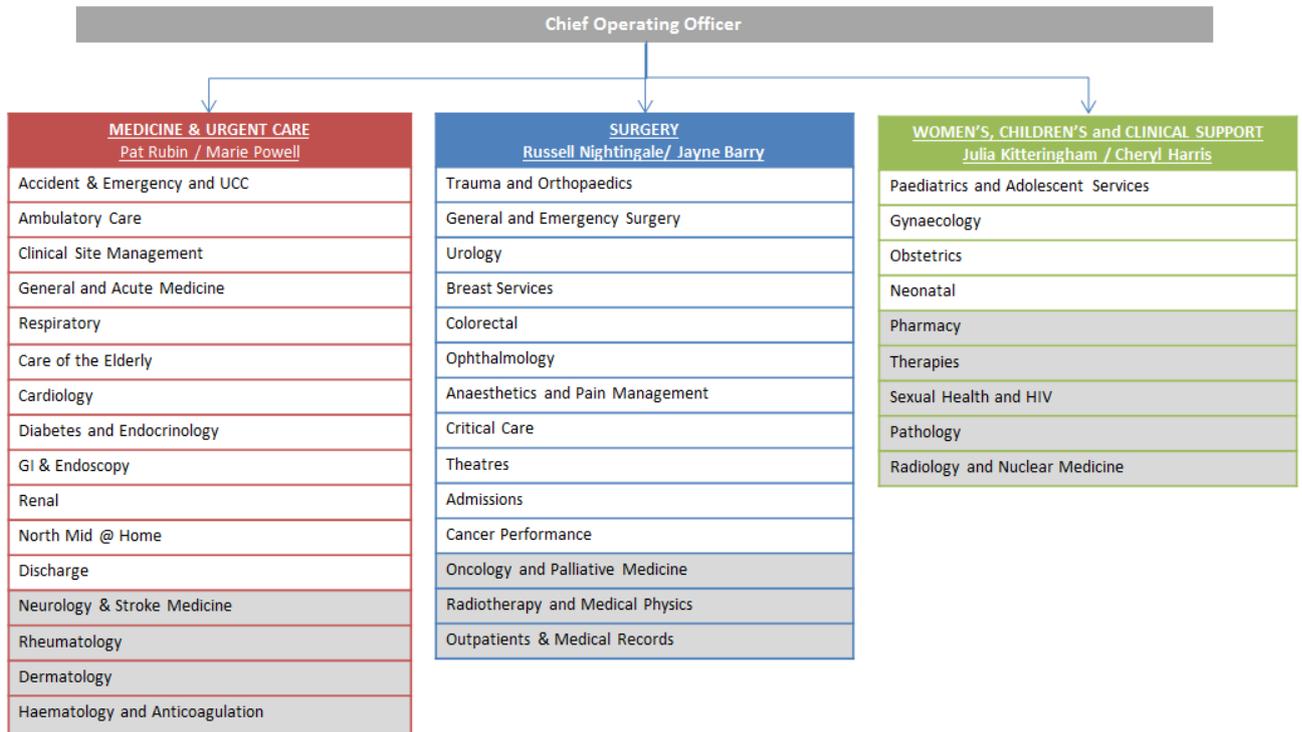
At North Middlesex University Hospital we provide great care to our patients. As colleagues we are enthusiastic about being the local hospital of choice and this rubs off on our patients. However, the way we do things is also important, and by demonstrating the values and behaviours chosen by staff and patients, we can make North Mid an even better place to work and receive care.

Our values are:

- **Caring**
- **Helpful**
- **Open and Honest**
- **Teamwork**

These values are extremely important to us and we expect everyone who works at the Trust in any capacity to share and uphold these values. Further information on the Trust's values is available on our website.

The Management Structure



The Executive team are:-

Chief Executive Officer	Dr Nnenna Osuji
Medical Director	Dr Vicky Jones
Director of Nursing & Midwifery	Sarah Hayes
Chief Operating Officer	Shola Adegoroye
Director of Strategic Development	Richard Gourlay
Director of Finance	Bimal Patel
Director of Human Resources	Mark Vaughan

The operational structure comprises 3 Divisions:

- Medicine and Urgent Care Services
- Surgery and Cancer Associated Services
- Women's, Children's and Clinical Support Services

Each Division has a Divisional Clinical Director, a Divisional Director of Operations and a Divisional Head of Nursing. This team is supported by Clinical Directors, Service Managers and Matrons.

SECTION 2

ABOUT THE DEPARTMENT

Division of Surgery, Cancer and Support Services

Divisional Management Team:

Andreas Martin	Divisional Director of Surgical Services
Anita Vincent	Interim Divisional Director of Operations
Rachel May	Divisional Director of Nursing

Key Surgical Staff

Consultants	Special Interests	Additional Responsibilities
Andreas Martin	Divisional Director and ED Consultant	Surgical Services
Anita Vincent	Interim Divisional Director of Operations	
Rachel May	Divisional Director of Nursing	
Mr Michael Kurer	Consultant Orthopaedic and Deputy Divisional Director	General Surgery, T & O and Urology
Ms Laura Spanu	Consultant Surgeon	Clinical Lead for Surgery
Mr Satish Janipireddy	Consultant Orthopaedic Surgeon	Clinical Lead for T&O
Mr Gopal Nair	Consultant Urologist	Clinical Lead for Urology
Miss Jyoti Raina	Consultant Ophthalmologist	Clinical Lead for Ophthalmology
Dr Abdul Nazar	Consultant Intensivist & Anaesthetist	Clinical Lead for Intensive Care
Dr Amit Saxena	Consultant Anaesthetist	Clinical Lead for Anaesthetics
Dr Upeka Ranasinghe	Consultant Anaesthetist and Deputy Divisional Director	Anaesthesia, Pain & ITU

Other KeyStaff

Ms Merline Jogie	Lead Nurse, Preassessment
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Support Staff

The consultant appointee will have dedicated office space with networked computer access and secretarial support. All administrative duties are facilitated with a remote access system.

Administration

There are weekly Departmental Meetings for teaching and training, and a separate Xray Meeting. Bimonthly there is Orthopaedic Consultants management meetings.

There are weekly Departmental Meetings for teaching and training in the Surgical Directorate, and a bi-monthly multidisciplinary audit meeting.

The Hospital Consultant body meets monthly as the Medical Staff Committee to discuss issues affecting the Medical Staff as a whole. All consultants are expected to participate in the management of their own Department and the Hospital as a whole, and will be encouraged to develop their management and leadership skills.

Services and Facilities

Department's Medical Staffing

Consultants	Special Interests	Additional Responsibilities
Mr M Kurer	Upper Limb	Deputy Divisional Director-Surgery & Orthopaedics
Mr H D Atkinson	Lower Limb including Revision Arthroplasty, Soft Tissue & Foot and Ankle	Audit Lead and Trust Representative for NCL
Mr S Gadikoppula	Upper limb	Educational Lead
Mr A Bhalla	Hand and Upper limb	GIRFT lead
Mr S Sinha	Lower Limb including Revision arthroplasty, Soft Tissue Knee.	NJR Lead
Mr S Janipireddy	Lower Limb and Foot & ankle	Clinical Lead
Mr S Jagernauth	Upper limb	Clinical Governance & Mortality Lead
Ms Pagona Parisidou	Locum Consultant Trauma	TARN Representative
Vacant (This post)	Lower Limb including Revision arthroplasty	

Other Medical Staff:

Mr B Ismail: Associate Specialist

3 SpRs (RNOH & UCL)

4 Speciality Doctors

2 Trust Registrars

4 FY2 2 FY1

4 Trust doctors (SHO)

Key Nursing & AHP Staff

Zoila Sanchez Matron

Ms V Johnson Trauma co-ordinator/ Lead nurse

Deputy trauma co-ordinator

Fracture NOF coordinator Nurse

2 x Plaster technician

3 X Band 5 Nurses

2 x Band 6 Nurse

1 x HCA

Key Service Staff

Mr Albert Bondoc: Interim General Manager- Orthopaedics, Anaesthetics and Intensive Care

Support Staff: 4 x secretaries

Each Consultant has secretarial support with office facilities, which are linked into the PAS system. There is a Team Leader overseeing the provision of administrative support and monitoring the turnaround times for secretarial work. Clinical typing uses a new digital system to allow the rapid turnaround of letters and other documents.

Services and Facilities

The hospital provides a full range of elective and non-elective secondary care services, although it is highly emergency driven with a very busy A&E department (140,000 attendances per annum). The Trust also has Specialist Units in Haematology, HIV and sickle cell services. The Cancer Unit is part of the North London Cancer Network, which has four other centres at UCLH, The Royal Free, The Whittington and Barnet & Chase Farm hospitals. All of these services are a source of referrals to the Orthopaedic Department. We are supported by a full range of investigative services including an imaging department that boasts 3-Tesla MRI and 64-slice CT scanners. The environment in which we deliver care has dramatically changed over the past few years. Our hospital development, which opened in June 2010, houses emergency, surgical and adult inpatient care in a state of the art environment. The implementation of the Barnet, Enfield and Haringey (BEH) Clinical Strategy in 2013 has seen over 80% of our clinical services provided out of facilities that are less than 7 years old.

The Department works closely and is supported also by the following services:

- Emergency medicine provided through an Acute Medicine Model
- Elderly medicine including Orthogeriatrics. One Care of the Elderly (CoE) physician is devoted whole time to Ortho Geriatric liaison. Our patients with fracture neck of femur receive assessments and advice routinely from the CoE colleagues and are transferred to their care 48 hours post surgery.
- Emergency and elective surgical specialities
- Paediatric services and 24-hour paediatric accident and emergency, including neonatal level 2 unit
- Critical Care Unit and Critical Care Outreach teams.
- Comprehensive range of diagnostic, therapy and outpatient services
- Elective Lower limb surgeries are carried out at the NCL Northern Hub site at Chase Farm hospital.

An Urgent Care Centre on site offers fast and convenient access to local NHS advice, information and treatment. The Trust is closely linked with the Royal Free University College School of Medicine within the University of London.

Office facilities

The consultant appointee will have dedicated office space with networked computer access and secretarial support. All administrative duties are facilitated with a remote access system.

Meetings

Trauma meetings led by consultant are held every morning.

There are weekly Departmental Meetings for teaching and training on tuesdays, and a separate Xray Meeting on Wednesdays and Metal work meetings on a Monday afternoon.

Surgical Directorate governance meetings are held bi-monthly.

The Hospital Consultant body meets monthly as the Medical Staff Committee to discuss issues affecting the Medical Staff as a whole. All consultants are expected to participate in the management of their own Department and the Hospital as a whole, and will be encouraged to develop their management and leadership skills.

SECTION 3 - ABOUT THE POST

Post Details

Job Title	Consultant - Lower Limb including Revision Arthroplasty
Division	Surgery and associated services
Professionally Accountable to	Medical Director
Responsible to	Clinical Director & Divisional Director
Type of contract	Substantive
Number of PAs	10 PAs
sBase	North Middlesex University Hospital

Background to the post

This is a Substantive post and has been arisen due to a consultant's retirement. It is also designed to help the expanding trauma in general, Arthroplasty including revision and Peri-prosthetic trauma. The successful candidate will join a team of 8 Consultants both to provide their services for the Trust, and to ensure that the Junior Doctors are continually supported at the required level and that their training needs are met.

Duties of the post

The following is not an exhaustive or exclusive list of the duties of the appointed consultant.

- This post is committed to providing an Orthopaedic and Trauma service with sub-specialisation in Hip and Knee arthroplasty including Revision surgery. This post will be full time on the new Consultant contract.
- A specialist interest in managing Peri-prosthetic fractures including Revision
- Participation in the Trauma On-call service 1 in 8 weekdays, and 1:8 weekends (this is likely to change to 'week of on-call')
- Operative lists, both Trauma and Elective
- Regular ward rounds
- Outpatient clinics, both Elective and Trauma
- Active involvement in Trauma management, both Adult and Paediatric.
- Supervision and training of Middle Grades
- Participation in management duties within the Department and the Trust

- Active liaison with the Emergency Department and attendance at Local and Regional Trauma meetings
- Active participation and provision of leadership to the MDTs
- Provide senior clinician services as per job plan or as agreed within the Trust, and as required when on call.
- Work with Consultant colleagues and Nursing staff to ensure the efficient use of the Trust's resources and contribute actively to clinical governance in the Department and to the development of quality enhancement projects in the Unit.
- Show flexibility and undertake different appropriate clinical tasks within the allocated DCC sessions at the request of the clinical manager, as the need arises.
- Actively participate in the Unit's teaching Programme and undertake supervision, teaching and training of medical trainees and other multi-professional staff, in line with guidance from the relevant Royal Colleges or specialty bodies.
- Actively participate in clinical guidelines development, audit and CPD.

Indicative Job Plan/Timetable

An indicative job plan/timetable for this post with indicative Programmed Activities (PAs) is provided below, but this will normally be re-assessed after 3 months of appointment to ensure it meets the needs of the service.

For a whole-time contract: the normal split is

- Direct Clinical Care: 7.5 PAs on average per week
(*Clinical activity, clinically related activity, predictable & unpredictable emergency work*)
- Supporting Professional Activities: 1.5 PAs on average per week (*CPD, audit, teaching & research (+ 1 PA for Quality & service improvement) ***)

** This additional SPA is available to all Consultant Staff, subject to review and agreement, for quality and service roles (which must be approved prospectively by the Divisional Director). Job plans are reviewed annually, and applicants are encouraged to study the provisions of the Consultant Contract for England 2003 under which this post is offered.

An On-Call commitment is required. The current rota is 1:8 Weekdays and 1:8 Weekends and it is expected that the post holder will participate in the on-call rota at or close to this frequency.

There is an expectation that the on-call commitment might change to 1:10 over the next 12 months, as the Department implements a "Trauma week" and as we move with our Elective surgery to the Chase Farm Hospital Elective Orthopaedic Centre. This is however in early stages of discussions. The job plan will be reviewed at 3 to 6 monthly intervals.

The on-call commitment is 24 hr during the weekday, followed by Trauma sessions comprising of a Trauma meeting, a Fracture Clinic and a Trauma List on the Monday. During the weekend, on call commences at 08:00 on Friday and runs until 08:00 on Monday; followed by a handover to the next consultant at the Monday Trauma meeting.

The current practice during the weekend is that the on-call Consultant reviews all the Trauma and Orthopaedics in-patients each morning, and see referrals upon request from other specialities as appropriate. There are dedicated Trauma sessions during Saturday and Sunday.

Responsibility of post operative patients (when off-site) shall be by the Consultant who is 'Rota' for the same during working hours and by RMOs and ANP (as below). There is also a 24/7 cover by a Resident Medical officer and Additional 'Advanced nurse practitioner' (ANP). The on-call consultants at NMH site shall be responsible for Orthopaedic complications and the Medical team based at Barnet hospital for any Medical complications for further advise and guidance. The Chase farm hospital (Elective orthopaedic centre) is the Northern Hub of the NCL (north central London) and has a robust governance structure for working of the same.

Day	AM	PM	DCC	SPA
Monday	Elective Specialist clinic (1:4) 1:8 Ward round (post on call weekend)		0.25	
Tuesday	Trauma (1:2)	SPA (Q&S)	0.5	1
Wednesday	Elective list (1:2) (CFH)* Trauma Meeting & Ward round (1:2)	Elective List (1:2)(CFH)* Elective Clinic (1:2)	2.375	
Thursday	Trauma meeting & Fracture clinic (1:2) Elective theatres (1:4) NMH Trauma List (peri prosthetic) (1:4)	Trauma Theatres (1:2) (Elective Theatre) 1:4 NMH**	2.125	
Friday	Admin	SPA	1	1.5
On call weekends	1:8 Weekends & 1:8 Weekdays		1.3	
TOTAL			7.55	1.5

ON CALL: There is a 1-in-8 weekend- On Call commitment, ie 1 Friday to Sunday in 8 Weekends) & 1:8 Weekday -On-call.

(*CFH: Chase farm hospital, **NMH: North Middlesex Hospital)

Other Requirements

Clinical Governance

This appointee is expected to contribute actively to improving clinical governance in our departments. The GMC's Good Medical Practice guidelines form the basis of the responsibilities and standards expected of the Trust's consultants. All newly appointed consultants will be issued with an Induction Programme and mandatory training, all aspects of which are mandatory. There is a well-established annual appraisal process for all consultants and non-consultant career grades in the Trust.

It is a condition of employment that all staff have a responsibility for Infection Control. The appointee will therefore be expected to attend mandatory Infection Control courses on appointment and to participate actively in measures designed to reduce Health Care Associated Infections (HCAIs).

The appointee will be expected to fulfil the relevant Royal College's requirements for Continuing Medical Education (CME)/Continuing Professional Development (CPD).

The Trust considers the development of Clinical Guidelines and Protocols as the foundation of evidence-based medical practice. All consultants are therefore expected as part of their SPAs to contribute to the development and updating of clinical guidelines within their specialty that meet NICE or other peer-body guidance, and to audit their practice according to them. There is a dedicated Clinical Services area on the Trust Intranet where clinical guidelines are uploaded by specialty. The Trust has an Audit and Clinical Effectiveness Manager and an IT Developer who work to support Consultants on this. The T&O Department has an active Audit Programme to ensure high quality clinically relevant audit cycles and Quality Improvement Projects.

Teaching, Postgraduate Education and Research

The North Middlesex University Hospital has gained a reputation for teaching excellence in the region due to our dedicated consultant teachers and a rich variety of clinical cases. Formal teaching sessions are organised differently in various departments. The successful applicant, is expected to support all junior doctors through teaching and training in their specific field, including supporting the Grand Rounds. The hospital is currently redeveloping its Education centre to ensure that we can provide education within modern facilities, including a dedicated

simulation suite and a comprehensive medical library. The Hospital has an excellent reputation for its postgraduate medical education. There are regular FRCS, MRCP, DCH and MRCOG courses held and ongoing MRCP training. ALS and other similar courses are conducted locally. Our Consultants contribute regularly to postgraduate training with MRCS candidates, as well as specialty training for Foundation Trainees

Undergraduate Education

As a partner of the University of London, the hospital has a substantial commitment to training of medical students from the University College London (UCL) Medical School, and is one of the 2 centres outside the teaching hospitals for UCL Final MBBS examinations. Many consultants are recognised teachers of UCL. Medical students of St. George's International School of Medicine in Grenada also attend for varying periods in different specialties. On occasions, there are elective students from other overseas universities. The post holder will contribute to teaching the students allocated to the T&O Department.

SECTION 4

GENERAL INFORMATION/CONDITIONS OF EMPLOYMENT

- The post is covered by those terms and conditions of service of Consultants 2003 (England) which are appropriate to the Trust. The Trust may, however, introduce future changes in standard terms and conditions of service after negotiation. All local policies and procedures apply. The appointment is pensionable under National Health Service regulations, unless the successful candidate chooses to opt-out of the scheme.
- Employees of the Trust are expected to maintain a safe working environment and observe obligations under organisational and departmental Health & Safety Policies, maintaining awareness of safe practices and assessment of risk.
- Employees of the Trust are required and expected to acquaint themselves of all the Trust policies that are relevant to their area of work. The operative policies at any time are available on the Trust Intranet.
- The Trust is committed to providing safe and effective care for patients. To ensure this, there is an agreed procedure for medical staff that enables them to report, quickly and confidentially, concerns about the conduct, performance or health of medical colleagues. All medical staff practising in the Trust should ensure that they are familiar with the procedure and apply it.
- All Consultants have a continuing responsibility for the care of patients in their charge and for the proper functioning of their departments. They are required to undertake the administrative duties associated with the care of their patients and the running of their clinical departments. The Consultant will be expected to attend meetings of the appropriate department and CBU as required.
- All Consultants are expected to assume responsibility, both singly and corporately, for the management of junior medical staff. In particular, they are expected to be responsible for approving and monitoring junior staff rotas and junior staff locum

arrangements, where appropriate. They are also expected to concern themselves with the professional development, both clinical and personal, of their trainees.

- All Consultants are required to participate in the Trust's annual appraisal process which identifies personal and professional development needs, agrees plans for them to be met, while reviewing the doctors work and performance and considering the doctors contribution to the quality and improvement of service delivery. The annual appraisal and documentation forms the evidence needed to meet the requirements for the GMC revalidation process.
- All consultants are required to participate in the Trust's annual job plan review process. Job Plans will list all NHS duties of the Consultant, the number of programmed activities and agreed supporting resources. Job Plans may only be changed with the agreement of the Trust.
- Where you intend to undertake private professional services other than such work carried out under the terms of this contract, whether for the NHS, for the Independent sector or for another party, the provisions in Schedule 6 of the Terms and Conditions apply.
- Reference should be made to the "Code of Conduct for Private Practice" which sets out standards of best practice governing the relationship between NHS work, private practice and fee-paying sessions.
- Candidates unable, for personal reasons, to work whole time are invited to apply and will be eligible to be considered for the post. If such a person is appointed, modification of the job content will be discussed on a personal basis in consultation with consultant colleagues, the Clinical Lead and the Clinical Director. All applicants to any post within the Trust are required to declare any involvement, either directly or indirectly, with any firm, company or organisation that has a contract with the Trust. Failure to do so may result in an application being rejected or if it is discovered, after appointment that such information has been withheld, and then this may lead to dismissal.
- The Consultant will be required to live within 10 miles by road (or 30 minutes travelling distance) of the main hospital base. Reimbursement of removal and associated expenses will be subject to agreement and in line with existing Trust Policy.
- This appointment is subject to the receipt of a satisfactory medical clearance from the Trust's occupational health department.
- The appointee will be expected to provide cover for annual and study leave of his/her consultant colleagues.
- Reimbursement of removal and associated expenses are discretionary and will be subject to agreement by the Trust. There is no guarantee that any reimbursement of expenses will be made.
- Access to a mentor is available where considered by the applicant to be helpful

A copy of the Terms and Conditions – Consultants (England) 2003 is available from Gerry Lambe, Recruitment Manager, Human Resources Department, North Middlesex University Hospital (020 8887 2914) or from www.doh.gov.uk/consultantframework.

Annual Leave

Annual leave is given in accordance with the Terms and Conditions of Service and the Trust Policy relating to Medical and Dental Staff. Whole-time Consultants are entitled to six weeks and two days' leave a year (32 working days) if within 7 years of service, or 6 weeks and 4 days (34 working days) after 7 completed years of service. Annual leave for part-time staff is pro rata this whole-time amount.

Consultants are expected to plan their annual leave well in advance so that their absence is not detrimental to the service. They should give no less than 6 weeks' notice of intention to take leave.

Recruitment and Retention Premium

The Trust agrees to pay a Recruitment and Retention Premium (RRP) to the sum of £15,000 (from which tax and national insurance payments will first be deducted) within 1 month of the post holder commencing substantive employment at the Trust. If, subsequent to the payment of the RRP, the post holder does not take up their duties with the Trust (for any reason), then they will re-pay the RRP to the Trust in full and within 21 days of their decision not to take up duties with the Trust. If after taking up duties with the Trust, the employment is terminated for any reason, the post holder will re-pay the Trust some or all of the RRP on the following percentage sliding scale, and within 21 days of their employment with the Trust terminating:

- on or before 6 months of date of first employment: re-payment of 100% of the RRP
- on or before 12 months: re-payment of 50% of the RRP
- on or before 24 months: re-payment of 33% of the RRP

After 24 months of duties with the Trust, no repayment of the RRP will be due.

Study and Professional Leave

Study and professional leave is given in accordance with the Terms and Conditions of Service relating to Medical and Dental Staff. Consultants are currently entitled to assistance with expenses associated with approved study leave. It is the current policy of the Trust to assist consultants with reasonable fees and expenses associated with approved continuing medical education (currently up to approx. £500 per annum). Consultants are expected to plan Study Leave in advance so that their absence is not detrimental to the service.

Rehabilitation of Offenders

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

Disclosure & Barring Service

Posts are offered subject to enhanced clearance from the Disclosure & Barring Service.

Confidentiality

You are required to maintain confidentiality of any information concerning patients, which you have access to or may be given in the course of your work.

Personal Conduct

All staff within the Trust are expected to treat other members of hospital staff with courtesy and respect. The Trust’s rules and policies including the disciplinary procedure apply to all staff without exception. The attention of consultant medical staff is drawn to the GMC document “Good Medical Practice”. The Trust will take this into account when considering the conduct of medical staff in relation to any incident.

Health & Safety Policy

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

Security

It is the responsibility of all employees to work within the security policies and procedures of the Trust to protect the patients, staff and visitors and the property of the Trust. This duty applies to the specific work area of the individual and the Hospital in general. All staff are required to wear official identification badges.

Data Protection

This post has a confidential aspect. If you are required to obtain, process and/or use information held on a computer or word processor you should do it in a fair and lawful way. You should hold data only for the specific registered purpose and not use or disclose it in any way incompatible with such a purpose and ought to disclose data only to authorised persons or organisations as instructed. Breaches of confidence in relation to data will result in disciplinary action.

No Smoking

North Middlesex University Hospital NHS Trust operates a No Smoking Policy and all staff are advised that it is a disciplinary offence to smoke inside or outside Trust buildings or anywhere within the grounds of the hospital.

Equal Opportunities

It is the aim of the Trust to ensure that no job applicant or employee receives less than favourable treatment on grounds of sex, race, colour, nationality or national origins and is not placed at a disadvantage by conditions or requirements that cannot be shown to be justifiable. To this end the Trust has an equal opportunities policy and it is for each employee to contribute to its success.

Method of Payment

Payment of salary is made into bank account/building society account by direct bank system. Details of a bank account or building society account will be required on the first day at work. There are no facilities for any other form of payment.

Prospects of Change

National and local discussions, including sustainability and transformation plans (STPs) may result in changes to the configuration of services over time. This may require changes to work patterns, for example some consultants may future be expected to undertake some clinical sessions in a dedicated elective centre off-site. This may result in changes to the working arrangements for individual consultant staff, but staff will be consulted about specific proposals as it affects them.

ADDITIONAL INFORMATION

Situated in Edmonton, North London with a multi-cultural community, the area provides a wide range of facilities and is close to the heart of London. On-site we offer car parking and restaurant facilities. Central London is easily accessible, with Liverpool Street and Kings Cross approximately 30 minutes away by public transport.

Road Access and Public Transport

Situated on the North Circular Road, the hospital is within very easy reach of the M25, M1, A1, A10 and A12. The hospital is situated close to the residential districts of North London including Enfield and Winchmore Hill, which all have an excellent environment and schools.

Silver Street main line railway station is a 5-minute walk away, with services direct to Liverpool Street Station and Seven Sisters underground Station.

VISITS FOR APPLICANTS

1. Intending applicants are welcome to contact for further information: Mr Satish Janipireddy , Clinical director & Consultant Orthopaedic Surgeon at Satish.janipireddy@nhs.net)
2. Short listed candidates are encouraged to visit the hospital before being interviewed by the Trust's Advisory Appointment Committee.

PERSON SPECIFICATION – CONSULTANT in Trauma and Orthopaedics

<u>Requirements</u>	<u>Essential</u>	<u>Desirable</u>	<u>Method of Assessment</u>
Qualifications /Training	Success in Intercollegiate Examination (FRCS Tr & Orth) or overseas equivalent.	Post Graduate degree. Previous Research Specific role	Application form
	CCT or equivalent in Trauma and Orthopaedics and on the specialist register, or within 6 months of CCT date at the time of interview.	MSc/ PhD or equivalent	Application form
Relevant Experience	Clinical Training and experience equivalent to that required for gaining UK CCST in Trauma & Orthopaedics		Application form

	<ol style="list-style-type: none"> 1. Experience to offer expert clinical opinion on range of problems, both emergency and elective. 2. Fellowship training in Revision Hip and Knee surgery 3. Fellowship in Lower Limb Arthroplasty. 	<ol style="list-style-type: none"> 1. Training and expertise in Trauma surgery 2. Fellowship training in Periprosthetic Fracture management, Lower Limb Osteotomy, Hip Arthroscopy and Uni-compartmental Knee Arthroplasty surgery 3. Experience of working in a Tertiary Arthroplasty unit 4. Consultant experience in Revision Arthroplasty, Periprosthetic Fractures and Soft-Tissue Knee surgery 	Application form and interview
	Able to take full and independent responsibility for clinical care of patients	<p>Experience of independent charge of an Orthopaedic service</p> <p>Consultant level experience of running a Trauma and Arthroplasty service.</p> <p>Experience in setting up an MDT service in relation to Arthroplasty.</p>	Application form and interview
Skills & Abilities	Ability to manage an efficient and smooth Trauma & Orthopaedic service at Consultant level.	Ability to develop lead and manage a sub-speciality service at Consultant level	Application form and interview

	Ability to organise and manage outpatient priorities, surgical waiting lists and operating lists	<p>Experience of change management</p> <p>Evidence of engaging with the GIRFT improvement programme.</p> <p>Experience in establishing a Virtual Fracture Clinic service.</p>	Application form and interview
	Ability to teach clinical and operative skills. Willingness to actively participate in postgraduate training on a regular basis and to support SpR core training	<p>Formal training in undergraduate and post graduate teaching with relevant practical experience</p> <p>Experience of establishing courses for Junior trainees.</p> <p>Experience of establishing a teaching programme for AHPs.</p>	Application form and interview
Knowledge	Knowledge and participation of clinical audit	<p>Experience of successfully completing audit cycles.</p> <p>Involvement in the process of setting up a Day Case Arthroplasty service.</p>	Application form and interview
	Understanding of Clinical Governance	Experience of assessing the safety profile of new surgical techniques	Application form and interview
Values	Demonstrable ability to meet Trust values		Interview

Other Requirements	Excellent communication skills, both oral and written, and an ability to relate to staff and patients.	Ability to support and motivate staff during periods of pressure Previous Leadership roles Rota management experience	Application form and Interview
	Knowledge of resource management		Application form and Interview
	Ability to stay calm under pressure.		Application form and Interview
	Willingness to work flexibly as part of a team.		Application form and Interview
	Computer literate		Application form and Interview
	GMC Registration		

