



**Royal Berkshire**  
NHS Foundation Trust

# Consultant Job Information Pack

## For Consultant in Emergency Medicine

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*Working Together to Provide Outstanding Care for Our Community*

Compassionate

Aspirational

Resourceful

Excellent

# Job Information Pack: Contents

Thank you for considering the Royal Berkshire NHS Foundation Trust (RBFT) as your next place of work. We look forward to welcoming you during the recruitment process and hopefully into our friendly and enthusiastic organisation.

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# Section 1: Departmental Information

## Departmental Welcome

This is an exciting opportunity to join our dynamic and enthusiastic team who believe in leading from the frontline with the aim of providing outstanding care to our community and investing in the well-being and development of our people.

## About The Department

### ***Emergency Medicine at the Royal Berkshire Hospital***

The RBH is a busy district general hospital serving a population of 900,000 and our ED sees approximately 140,000 patients per year with 25% of these being under 16 years old. We are a trauma unit operating within the Thames Valley Trauma Network. We have a 24hr cardiac catheterization and stroke thrombolysis service.

Emergency Medicine is at the heart of the hospital's emergency care pathway and provides innovative and high quality care for patients from the moment they arrive at the hospital. It is a consultant led service with consultants providing leadership and patient care on the 'shop floor'. There is a strong commitment to ensure the ED is appropriately resourced to deliver high quality and timely emergency care. The trust has been and continues to be very supportive of the developments that are taking place to address the pressures resulting from increased emergency admissions and a greater acuity of cases which present.

Over the last year we have expanded our Emergency Nurse Practitioner service, and they are now providing cover 0800-0100 7/7.

The Consultant team provide on-site cover from 0800-midnight 7 days a week, 24 hour middle grade cover, and night shifts staffed by 5-6 doctors.

## Facilities

The Emergency Department is a purpose built unit that opened in 2002, with a dedicated paediatric area, opened in December 2010. There are four resuscitation bays, (3 adult and 1 paediatric) equipped to provide state of the art care to critically ill and injured patients. There are 18 majors' assessment bays, a mental health assessment room and a dedicated minor injury area – with treatment bays. The paediatric ED has a dedicated waiting room, 10 majors assessment bays, minor injury assessment cubicles and 2 treatment rooms.

We have an 8 bedded zone for elderly patients (OPED) within the ED and a chaired area to enable us to carry out observational and ambulatory care medicine. In 2016, we opened a

new 8 bedded STAT (Senior Triage and Treatment) area which receives ambulance patients what arrive in the ED and allow us to streamline the initial assessment and investigations. The main radiology department with CT, US and MRI scanning facilities is directly opposite the department which has a computerised radiology PACS system. We have recently implemented a '*paper-light*' Electronic Patient Record (Firstnet Cerner) system, which integrates many of these functions and provides record keeping throughout the trust. These other services mean that we see a higher than average acuity of patient in the ED and the vast majority of patients have genuine emergency medicine problems. Our admission rate is approximately 25-30%.

## Services

### Trauma

We are a trauma unit within the Thames Valley Trauma Network (TVTN) which comprises 5 trauma units (TUs) and one major trauma centre (MTC). In 2018 we received an excellent report from the trauma unit peer review.

### Stroke

The RBH is one of the busiest stroke thrombolysis centres in the region, and the ED consultants form an integral part of the thrombolysis rota for strokes. We have one of highest performances in the country on combined key indicators on most recent SSNAP (Sentinel Stroke National Audit Programme) data. We scored particularly well in the domains of scanning, thrombolysis and the team centred key indicator level.

### Cardiac care

For the fourth year running the hospital has been named the fastest 24/7 centre in England and Wales for providing patients with primary angioplasty treatment. The ED works closely with the cardiology team to ensure patients presenting with chest pain receive high quality and timely emergency care.

### STAT (Senior Triage Assessment and Treatment) Process

Consultant led and consultant delivered care

During the hours of 1000-2200 ED consultants assess all new presentations in resus and majors on patient arrival, and institute early treatment, investigations and specialty input. This process has led to improved care and increased ability to deliver on KPIs e.g. median wait, neutropenic sepsis, antibiotics within 1hr.

## **Clinical Governance**

We have a robust programme of audit; which includes the CEM national audits, as well as a local programme of key performance targets. These complement the Clinical Governance system; which holds monthly meetings in the ED as well as joint meetings with other departments. Findings from audit and Clinical Governance are regularly fed into the educational meetings and communicated widely amongst the staff.

There is close input from consultants to enable this work to be taken further in terms of a quality improvement project. Middle grade doctors regularly present cases and recent management projects at clinical governance, which in turn can be added to their management portfolio as evidence of active participation in clinical governance.

Successful applicants will actively participate in departmental clinical governance and take on further roles within the department based on their special interests.

## **Research**

We have a strong research team across the Emergency Department and are one of the biggest recruiting ED's to national studies in the UK. The ED is proud to host an RCEM associate professor and in 2019 we became an academic department with a formal partnership with the University of Reading. We are actively involved in recruiting to multiple national studies as well as having several studies which have the RBH ED has led on. Emergency Medicine Research has now become firmly embedded in the Thames Valley and the Injuries and Emergencies Group meet regularly to share best practice in recruiting to time and target on portfolio research as well as a forum to share new ideas.

The successful candidates will be expected to take an active role in these areas and will be supported to undertake Good Clinical Practice training in enrolling patients and should they want, getting more involved in the running of studies as a Principle Investigator as well as study design.

## **Staffing**

Our clinical staffing currently consists of the following:

Consultants WTE 18

Associate Specialist 5

Registrars 24

SHOs 28

ACPs (including trainees) 10

Physician Associates 4

## Speciality Management Team

Role (where applicable)	Name
Care Group Director	<b>Dr David Mossop</b>
Care Group Director of Operations	<b>Mandy Claridge</b>
Clinical Director	<b>Dr Omar Nafousi</b>
Clinical Lead	<b>Dr Omar Nafousi</b>
Directorate Manager	<b>Lyndsey Seasman</b>
Matron	<b>Charlotte Bower</b>

## Speciality Clinical Team

Role (where applicable)	Name
Consultant	18
SAS Doctor	5
ST3-7	24
ST1-2	28
FY1	n/a
ACP/ PAs	14

## Research, Training & Development

The trust is committed to ongoing training and support of consultants, There is a structured two year programme of induction and leadership development. Every consultant appointed is offered a choice of mentors and expected to meet with them on a regular basis.

The Trust has an excellent reputation for education, as measured by its GMC Survey and regular responses from trainees and medical students. It has a medical library with an active Library & Knowledge Services team, a resuscitation and clinical skills department offering external nationally accredited courses and an established simulation centre - all of which are fully equipped for Technology Enhanced Learning (TEL) in a virtual environment.

There is an expectation that all consultants will participate in trainee education and training, both in theatre and through running tutorials, viva practice, etc. This is an important aspect of

the role. The Trust accommodates medical students from Oxford and Southampton Universities, attracts high calibre trainees and has a good exam success record.

The post holder will work towards facilitating, growing and consolidating a research culture within their department/specialty, whilst supporting the ambitions of research within the organisation to ensure the Trust remains an excellent organisation to host research and support its own research portfolio in line with NHS and NIHR priorities.

The department has a strong emphasis on education, and we are proud to be the only DGH ED within the region to gain an 'excellent' rating for training in the deanery, which has been maintained since 2018. This follows on from a grade A from the Deanery Approval Committee for 2011 and 2012 for the Royal Berkshire Hospital NHS Trust for both Emergency Medicine and our ACCS programme.

Successful applicants will teach on the weekly teaching programme for junior doctors, including simulation sessions which are incorporated in the programme and in real-time in the department. These sessions are based on a library of scenarios covering major acute presentations, written using a new simulation proforma designed and tested by the ICM and simulation teams. The regional simulation lead is an RBH ED consultant, who is building local and regional models of simulation training which focuses on real time, multi-specialty training. Monthly protected middle grade teaching occurs which is aimed at discussing and learning from challenges faced by middle grade doctors with an emphasis on management issues. All our trainees benefit from a strong consultant presence on the shop floor. We have a motivated and dedicated consultant body to deliver close clinical supervision and support throughout the day. The majority of the consultants carry out supervised ultrasound scanning and will support successful applicants to complete their logbook and gain signoff at the local finishing school run by the regional ultrasound lead who is a consultant in the RBH ED.

## Section 2: Job Summary

This is a new/replacement 10 PA post for an Emergency Medicine Consultant at the Royal Berkshire NHS Foundation Trust.

<b>Job Title:</b>	Emergency Medicine Consultant
<b>Clinical Speciality / Sub-Speciality:</b>	Paediatric Emergency Medicine (optional)
<b>Care Group/Clinical Directorate:</b>	Urgent Care
<b>Reports To:</b>	Clinical Lead for Emergency Department
<b>Accountable To:</b>	Chief Medical Officer (CMO)
<b>Nominal Base:</b>	RBH (i.e. RBH / PCEU / TMH)
<b>Hours:</b>	Full Time: 10 Programme Activities (PA)*
<b>Contract Type:</b>	Substantive
<b>Salary:</b>	£93,666 - £126,281
<b>New or Replacement Post:</b>	New
<b>On-Call Rota Requirements:</b>	1 in 4.5 weekends. 1 in 11 on-call
<b>Pension:</b>	NHS Contributory Scheme
<b>Annual Leave Entitlement:</b>	6 weeks + 8 public holidays + 2 statutory days
<b>Study Leave Entitlement:</b>	30 days

\*1 PA = 4 hours



## Section 3: Role Description

### Job Summary

The post holder will share clinical and managerial leadership within the Emergency Department with the present consultants. An office base with secretarial and administrative support will be provided.

### Main Duties & Responsibilities

#### Clinical Responsibilities:

- To provide, with colleagues, high quality emergency care 24/7/365.

#### Management Responsibilities:

- Active participation in monthly clinical governance meetings within the department.
- Participation and involvement in meetings and other business in the Emergency Department.

## Section 4: Person Specification

Criteria	Essential (E) Desirable (D)		Assessment Method			
	E	D	A	I	S	R
<b>Education and Qualifications</b>						
Full registration with the GMC/eligible for registration within 6 months of CCT in Emergency Medicine or successful completion of CESR at interview date	✓		✓			
Membership of the Royal College of Emergency Medicine of the United Kingdom or equivalent	✓		✓			
Higher degree e.g. PhD/ MD submitted/awarded		✓	✓			
<b>Clinical Experience, Knowledge &amp; Skills</b>						
Fully trained in Emergency Medicine	✓		✓	✓	✓	✓
Previous responsibility for clinical governance and GMC Good Medical Practice	✓		✓	✓	✓	✓
Fully trained in Paediatric Emergency Medicine		✓	✓	✓	✓	✓
All aspects of general Emergency Medicine and patient care	✓		✓	✓	✓	✓
<b>Audit Management &amp; IT</b>						
Ability to work within clinical governance guidelines	✓		✓	✓		✓
Undertake audits and present data as required	✓		✓	✓		✓
Good IT skills, use of patient and hospital database	✓		✓	✓		✓
Evidence of clinical leadership role demonstrating accountability for quality of care, financial controls and efficient management of workforce		✓	✓	✓		✓
<b>Research, Teaching Skill &amp; Experience</b>						
Track record of publications in peer reviewed journals	✓		✓	✓		✓
Evidence or providing good teaching and supervision to trainees	✓		✓	✓		✓
Educational qualification		✓	✓	✓		✓
<b>Patient Experience</b>						
Contributes to improving patients experience	✓		✓	✓		✓
See patients as individuals and involve them in decisions about their care	✓		✓	✓		✓
Ability to work in partnership to deliver a patient centred service	✓		✓	✓		✓
Demonstrate an understanding and willingness to embrace user involvement	✓		✓	✓		✓
<b>Personal Qualities</b>						
Able to abide by the Trust CARE Values; Compassionate, Aspirational, Respectful and Excellence	✓		✓	✓	✓	✓
Ability to communicate with clarity and intelligence in both written and spoken English	✓			✓		✓
Willingness to take responsibility, and exert appropriate authority	✓			✓		✓
Excellent interpersonal skills	✓			✓		✓
Work collaboratively with multi-disciplinary team, understanding each others unique role	✓			✓		✓

Assessment Criteria Key: A= Application, I= Interview, S= Simulation, R= References

## Section 5: Job Plan Information

This is a full time post with a minimum of 10 PAs. A final job plan will be agreed upon appointment, ensuring both individual and Trust / departmental objectives align. Job planning commences annually with the Clinical Lead and Directorate Manager, in September, to compliment the departmental business planning process and concludes in December, following sign-off by the CMO.

The balance between Direct Clinical Care and Supporting Professional Activities will be agreed with the post holder in the final job plan. The SPA allocation is 1.5 for personal CME, audit and revalidation requirements including departmental meetings. Additional Pas (APAs) may be allocated for specific agreed objectives for the trust subject to the agreement of the Clinical Director.

### Proposed Job Plan

Day	Time	Location	Work	Categorisation	PAs
Monday	08:00 - 1700	ED	Shop floor, seeing, assessing and treating patients. Supervision of junior staff. Shop floor leadership	DCC	2.25
Tuesday	08:00 - 1700	ED	Shop floor, seeing, assessing and treating patients. Supervision of junior staff. Shop floor leadership	DCC	2.25
Wednesday	1500-2200	STAT	STAT, Direct patient care, Observation bay, Supervision of junior staff	DCC	2
Thursday	0900-1300	ED office	Mandatory training, ED meetings, Answer complaints/Datixs/Sis, Clinical supervision of trainees. Quality improvement work, CPD	SPA	1
	1300-1500	ED office	Mandatory training, ED meetings, Answer complaints/Datixs/Sis, Clinical supervision of trainees. Quality improvement work, CPD	SPA	0.5
Friday	0800-1600	ED	STAT, Direct patient care, Observation bay, Supervision of junior staff	DCC	2
Direct Clinical Care (DCC)					8.5
On-call					
Supporting Professional Activities (SPA)					1.5
Other Activities (ANR / ED)					
<b>Total weekly programmed activities</b>					<b>10</b>

To provide on-call cover for Emergency Department on a 1 in 11 rota. On-call is Category A, low frequency (1 in 9 or less frequent) with 3% on-call intensity supplement. When a weekend / on call is worked there will be sufficient time off in between following shifts.

## Section 6: Term & Conditions of Employment

The main terms and conditions of employment will be the Terms and Conditions for Consultants (England) 2003, as amended from time to time.

The trust is committed to the ongoing training and development of its medical workforce. New consultants are offered a structured two year programme of induction and leadership development and all newly appointed consultants are offered a choice of mentors, available to meet on a regular basis.

### National Terms & Conditions of Employment

<https://www.nhsemployers.org/sites/default/files/2022-03/Terms-and-Conditions-consultants-Mar-2022-v12.pdf>

### The Appointee

The appointee will have an overriding duty of care to patients and is expected to comply fully with best practice standards. The appointee will be expected to adhere to local policies and procedures and to take note of the standing orders and financial instructions of the Trust. In particular, where the consultant manages employees of the Trust, they will be expected to observe and apply the Medical Workforce policies and procedures of the Trust.

### Equality & Diversity Opportunities

As an inclusive employer we work hard to ensure our entire staff community feels valued, engaged and appreciated. We understand and recognise the crucial value of diversity in our workforce and to be an organisation that represents the diversity of the communities we serve. Equality, Diversity and Inclusion are embedded into our way of life – our strategies, policies and our expected Behaviours Framework which clearly set out the standards we expect in terms of everyone's responsibility in an inclusive culture here at the Trust.

Colleagues at the Royal Berkshire NHS Foundation Trust are amongst the most engaged of any NHS Acute Trust in England and over recent years we have made huge strides forward in further developing career progression and opportunity across our workforce. In addition to a range of corporate priorities and actions, we have a range of forums and networks to connect

our staff and drive forward an even better experience at work – these include BME Networks; LGBT+ forums a Staff Disability Network and a Staff Carers Network.

## Continuing Professional Development

The appointee is required to participate in personal appraisal and revalidation programme annually. There is a revalidation officer to provide administrative support and advice for medical staff maintaining their credentials for revalidation. The medical workforce is actively encouraged to take part in a CPD programme and can allocate up to 1.5 Pas to SPA activities into their job plan.

## Clinical Governance

The post-holder will comply with the Trust's clinical governance requirements and participate in related initiatives where appropriate. This will include participating in clinical audit and review of outcomes, working towards achievement of national and local performance management targets, complying with risk management policies, and participating in the consultant appraisal process.

The post-holder will also be responsible for maintaining satisfactory patient notes as required within GMC Good Medical Practice (GMP) and, when relevant, for entering data onto a computer database in accordance with the rules and regulations of the General Data Protection Regulation (GDPR).

## GMC's Good Medical Practice Standards

Good medical practice describes what it means to be a good doctor. It says that as a good doctor you will:

- make the care of your patient your first concern
- be competent and keep your professional knowledge and skills up to date
- take prompt action if you think patient safety is being compromised
- establish and maintain good partnerships with your patients and colleagues
- maintain trust in you and the profession by being open, honest and acting with integrity.

This guidance is split into four sections which describe the professional values and behaviours we expect from any doctor registered with us. We expect you to use your

professional judgement and expertise to apply the principles in this guidance to the various situations you face.

This guidance came into effect 22 April 2013. It was updated on 29 April 2014 to include paragraph 14.1 on doctors' knowledge of the English language.

For more information please visit:

<https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-medical-practice>

## Conflict of Interest

All applicants to any post within the Trust are required to declare any involvement directly with any firm, company or organisation, which has a contract with the Trust. Failure to do so may result in an application being rejected or, if discovered (after appointment) that such information has been withheld, this may lead to dismissal.

## Health and Safety Responsibilities

The Trust has designated the prevention and control of Health & Safety as a core component in the organisation's clinical governance, managing risk and patient safety programmes. In consequence, all employees are expected to:

1. Provide leadership on Health & Safety risk issues across the organisation
2. Be aware of and follow all Trust Health & Safety guidelines and procedures relevant to their work
3. Participate in mandatory training updates
4. Challenge colleagues who are not complying with Trust Health & Safety procedures and report to line manager

## Infection Control Responsibilities

The Trust has designated the prevention and control of infection and the full implementation of the Health Act (2006) as a core component in the organisation's clinical governance, managing risk and patient safety programmes. In consequence, all employees are expected to:

1. Provide clinical leadership which instils a culture of zero tolerance on HCAI (healthcare associated infection) across the organisation

2. Following consistently high standards of infection control practice, especially with reference to hand decontamination, adherence to dress/uniform code and for clinical staff, aseptic technique
3. Being aware of and follow all Trust infection control guidelines and procedures relevant to their work
4. Participate in annual mandatory training updates
5. Challenge colleagues who are not complying with Trust Infection Control guides and procedures and report to line manager
6. Review compliance with national policy to ensure high reliability in reducing HCAI's and ensure results are used to inform action e.g. audit of antibiotic use to amend prescribing practice

## Safeguarding Children and Adults

The RBFT takes the issues of Safeguarding Children and Adults very seriously. All employees have a responsibility to support the Trust in its duties by:

1. Attending mandatory training on Safeguarding Children and Adults
2. Being familiar with the individual and Trust requirements under relevant legislation
3. Adhering to all relevant national and local policies, procedures, practice guidelines and professional codes
4. Reporting any concerns to the appropriate manager or authority.

## Private Practice

All consultants should adhere to the Department of Health Code of Conduct for Private Practice which outlines the basis for the relationship between NHS and Private Practice activity. A declaration of all internal and external private practice should be disclosed as part of the annual job plan review and failure to do so may be in breach of the Fraud Act 2006.

## Relocation Expenses

Financial assistance may be given to newly appointed to support costs incurred during their relocation, providing (generally) this is their first appointment in the NHS. The relocation must also comply with the Trusts requirements concerning the place of residence.

## Residential Criteria

A consultant is required to reside within 30 minutes or 10 miles by road from their principal place of work unless agreed otherwise with the CMO.

## Salary

The current salary applicable to the post is as per national pay scales.

## Pre-Employment Health Assessments

The successful candidate will be required to complete a health questionnaire. This will be treated in the strictest confidence and will not be seen by other employees of the Trust except for those in Occupational Health or with prior agreement from yourself.

## Interview Expenses

Consultant candidates who have been summoned by a prospective employing organisation to appear before a selection board or invited to attend in relation to their application shall be entitled to appropriate expenses in the below situations:

- reimbursement of eligible expenses shall be paid as per the Consultant 2003 terms and conditions
- a candidate should not be reimbursed for more than 3 attendances once shortlisted to interview and a consultant that visits but does not apply should not be entitled to reimbursement on more than 2 occasions
- reimbursement will not be paid to a consultant who is offered but does not take up the post

All expenses are paid as per the Consultant 2003 terms and conditions of service.

## Study Leave

Study leave will be obtainable within the limit confirmed in the Terms and Conditions of Service of Hospital Medical and Dental Staff (England & Wales) as amended subject to the Regional Postgraduate Medical Education Policy.

## Disclosure & Barring Check

This post is subject to the Rehabilitation of Offenders Act (Exceptions Order) 1975 and as such it will be necessary to submit a disclosure to be made to the Disclosure & Barring Service to check for any previous criminal convictions.