



Royal College  
of Physicians

Approved

**NHS**

**Barts Health**  
NHS Trust

# Hello, we are Barts Health

#TeamBartsHealth

[bartshealth.nhs.uk](http://bartshealth.nhs.uk)

## Recruitment information pack



### Our Vision

To be a high-performing group of NHS hospitals, renowned for excellence and innovation, providing safe and compassionate care to our patients in east London and beyond.

**WeCare about our ambition for excellence**

Our WeCare values shape everything that we do, every single day. They are visible in every interaction we have with each other, our patients, their families and our partners.

WeCare about everything from the appointment letters our patients receive, to the state of our facilities when they walk through the door, to the care and compassion they receive when they are discharged. WeCare that the people who join our trust will hold the same values as we do, so our values are embedded within our recruitment and selection processes. WeCare that you feel valued working here, so our values also guide our training and development and performance and talent management. WeCare about working with suppliers that live and breathe our values too.

We have come a long way on our journey to delivering safe and compassionate care. By embracing these values as the way we behave around here, we will achieve our ambition for excellence.

Value	Key behaviours
<b>W</b> WELCOMING 	<ul style="list-style-type: none"> <li>Introduce yourself by saying "Hello, my name is ..."</li> <li>Smile and acknowledge the other person(s) presence</li> <li>Treat others as you would wish others to treat you</li> <li>Ensure the environment is safe and pleasant for our patients, our colleagues and our visitors</li> </ul>
<b>E</b> ENGAGING 	<ul style="list-style-type: none"> <li>Get involved in making improvements and bring others with you</li> <li>Encourage feedback from patients and colleagues and respond to it</li> <li>Acknowledge efforts and successes; say thank you</li> <li>Use feedback to make improvements, and empower colleagues to do this without needing to seek permission</li> <li>Appreciate that this may be a new experience for patients and colleagues; help them to become comfortable</li> </ul>
<b>C</b> COLLABORATIVE 	<ul style="list-style-type: none"> <li>Give time and energy to developing relationships within and outside own team</li> <li>Demonstrate pride in Team Barts Health</li> <li>Respect and utilise the expertise of colleagues</li> <li>Know your own and others' part in the plan</li> </ul>
<b>A</b> ACCOUNTABLE 	<ul style="list-style-type: none"> <li>Always strive for the highest possible standard</li> <li>Fulfil all commitments made to colleagues, supervisors, patients and customers</li> <li>Take personal responsibility for tough decisions and see efforts through to completion</li> <li>Admit mistakes, misjudgements, or errors; immediately inform others when unable to meet a commitment; don't be afraid to speak up to do the right thing</li> <li>Do not pretend to have all the answers; actively seek out those who can help</li> </ul>
<b>R</b> RESPECTFUL 	<ul style="list-style-type: none"> <li>Be helpful, courteous and patient</li> <li>Remain calm, measured and balanced in challenging situations</li> <li>Show sensitivity to others' needs and be aware of your own impact</li> <li>Encourage others to talk openly and share their concerns</li> </ul>
<b>E</b> EQUITABLE 	<ul style="list-style-type: none"> <li>Value the perspectives and contributions of all and ensure that all backgrounds are respected</li> <li>Recognise that individuals may have different strengths and needs, and that different cultures may impact on how people think and behave. Be curious to find out</li> <li>Work to enact policies, procedures and processes fairly</li> <li>Be open to change and encourage open, honest conversation that helps foster an inclusive work and learning environment</li> <li>Remember that we all have conscious and unconscious bias; get to know what yours are, and work to mitigate them</li> </ul>



## 1. Job Particulars

<b>Job Title</b>	Consultant Physician in Geriatric Medicine and General Internal Medicine
<b>Pay Band</b>	Consultant - Substantive
<b>Location</b>	Newham University Hospital E13 8SL
<b>Reports to</b>	Clinical Lead for Care of The Elderly
<b>Responsible to</b>	Clinical Director for Acute Medicine, Stroke Medicine and Care of the Elderly

## 2. Job Purpose

The Care of the Elderly at Newham University Hospital, Barts Health NHS Trust are looking for 2 substantive Consultant Physicians in Geriatric and General Medicine.

The Care of the Elderly Department has an age-related policy for admission of medical emergencies in patients aged 75 years and above. All over 75 year old non-surgical admissions are seen by the department, amounting to approximately 2,500 episodes per year.

Frailty services are in the process of expansion and Post 1 will provide part of the strategy to do this. There is a multidisciplinary acute frailty service on the hospital site and a new frailty virtual ward has just been set up.

Post 2 will provide input to our acute COE ward and also be part of the Acute Admissions Team for acute assessment of medical admissions of all ages during the day from 10am-7pm (intra-take). The frequency of this commitment is listed in the job plan attached.

For both posts there is a General Medical on call commitment in the form of an integrated on-call rota (currently 1:18 but with a plan to change to 1:12 as recruitment progresses – there will be an uplift in PA allocation that is to be confirmed following a pilot of a new weekend working rota model).

The successful candidates will be employed on a substantive basis. If working 10PAs the split of duties would be 7.5DCC/2.5SPA. This is a Royal College of Physicians approved post.

You must hold full registration with the General Medical Council and be on the Specialist Register for Geriatric and General Medicine or within 6 months of obtaining CCT.

The candidates will be supported by the Clinical Leads and there is the opportunity for mentorship to help you transition into your new role.



### 3. Main Duties

Duties of a consultant:

- Day to day clinical care of inpatients on base ward
- Lead daily board rounds and twice weekly MDMs on base ward
- Daily review of new and sick patients on base ward
- Attend family meetings on base ward
- Complete administrative work relevant to your clinical commitment.
- Participation in AAU providing MTWR from 10am – 7pm of acute unselected medical take – for frequency see post 2 job plan
- Participation in unselected general medical on call rota
- Participation in departmental teaching, clinical governance and service development
- Cover for colleagues during periods of absence and flexibility to work across all COE clinical areas as needed.
- Provide advice to colleagues related to COE and acute medicine.
- Participation in undergraduate and postgraduate training.
- Fulfill requirements for regular appraisal and revalidation.
- Prospective cover for inpatient work and AAU is included in the job plan.

### 4. Job Plan

There is an on call frequency of 1:18 for General Internal Medicine (0.6 PA DCC, B supplement). The offsite on call commences at 7pm when the onsite daytime consultant AAU shift finishes. It finishes at 9am the following morning. There is a commitment to a post take ward from 8am. This is 2 hours on a weekday morning and 4.5 hours on a weekend day. There is an expectation that the consultant will be on site during weekend days for at least 9 hours to allow for the morning post take and then an afternoon/ evening mid take round. There will be consideration for time off in lieu for weekend working.

10 PAs are based on 7.5 PA DCC programmed activities a week. 1.5–2.5 of this should be assigned to dictating letters, attending multidisciplinary team meetings, seeing relatives, reviewing results and attending case presentations. Includes time for lunch and travel.

1.5 SPA is for revalidation only. This includes medical audit, CPD and appraisal. Additional SPA is allocated for teaching, assessment of trainees, clinical governance and service development taking SPA to a total of 2.5.

There is an expectation of continued professional development (CPD) and a commitment to revalidation.

You will be provided with secretarial support and an adequately equipped office with IT facilities.



2 indicative job plans are listed below:

**Post 1:**

Week 1	Monday	Tuesday	Wednesday	Thursday	Friday	
AM	COE Ward Full WR & MDM 1.25PA DCC	1PA SPA	1PA SPA	COE Ward Full WR & MDM 1.25PA DCC	COE Ward New, sick and discharge reviews. Board round 1.25PA DCC	Total DCC 5 SPA 4
PM	COE Ward family meetings, admin and close of play catch up with juniors 0.5PA DCC	1PA SPA	1PA SPA	COE Ward family meetings, admin and close of play catch up with juniors 0.5PA DCC	Close of play catch up with juniors 0.25PA DCC	

Week 2	Monday	Tuesday	Wednesday	Thursday	Friday	
AM	COE Ward Full WR & MDM 1.25PA DCC	1PA SPA	MAU 10-19 Mid take WR all ages 2.25PA DCC	COE Ward Full WR & MDM 1.25PA DCC	COE Ward New, sick and discharge reviews. Board round 1.25PA DCC	Total DCC 7.25 SPA 2.25
PM	COE Ward family meetings, admin and close of play catch up with juniors 0.5PA DCC	1PA SPA		COE Ward family meetings, admin and close of play catch up with juniors 0.5PA DCC	Close of play catch up with juniors 0.25PA DCC  0.25PA SPA	

Week 3	Monday	Tuesday	Wednesday	Thursday	Friday	
AM	COE Ward Full WR & MDM 1.25PA DCC	1PA SPA	MAU 10-19 Mid take WR all ages 2.25PA DCC	COE Ward Full WR & MDM 1.25PA DCC	COE Ward New, sick and discharge reviews. Board round 1.25PA DCC	Total DCC 7.25 SPA 2.25
PM	COE Ward family meetings, admin and close of play catch up with juniors 0.5PA DCC	1PA SPA		COE Ward family meetings, admin and close of play catch up with juniors 0.5PA DCC	Close of play catch up with juniors 0.25PA DCC  0.25PA SPA	



Week 4	Monday	Tuesday	Wednesday	Thursday	Friday	
AM	COE Ward Full WR & MDM 1.25PA DCC	1PA SPA	1PA SPA	COE Ward Full WR & MDM 1.25PA DCC	COE Ward New, sick and discharge reviews. Board round 1.25PA DCC	Total DCC 5 SPA 4
PM	COE Ward family meetings, admin and close of play catch up with juniors 0.5PA DCC	1PA SPA	1PA SPA	COE Ward family meetings, admin and close of play catch up with juniors 0.5PA DCC	Close of play catch up with juniors 0.25PA DCC	

Week 5	Monday	Tuesday	Wednesday	Thursday	Friday	
AM	COE Ward Full WR & MDM. Close of play catch up 1.375PA DCC	COE Ward family meetings and admin 0.375PA DCC	COE Ward family meetings and admin 0.375PA DCC	COE Ward Full WR & MDM. Close of play catch up 1.375PA DCC	COE Ward New, sick and discharge reviews. Board round Close of play catch up with juniors 1.5PA DCC	Total DCC 10 SPA 0
PM	Virtual ward 1PA DCC	Virtual ward 1PA DCC	Virtual ward 1PA DCC	Virtual ward 1PA DCC	Virtual ward 1PA DCC	

Average weekly DCC 6.9 (plus 0.6PA for on call commitment 1:18) = 7.5

Average weekly SPA 2.5

**Post 2:**

Week 1	Monday	Tuesday	Wednesday	Thursday	Friday	
AM	MAU 10-19 Mid take WR all ages 2.25PA DCC	COE Ward Full WR & MDM Team 1 1.25PA DCC	Team 1 family meetings and admin 0.325PA DCC	COE Ward Full WR & MDM Team 1 1.25PA DCC	COE OP Clinic 1.5PA DCC	Total DCC 7.95 SPA 2
PM		New/ sick reviews Team 2 0.625PA DCC	1.5PA SPA	Family meetings and admin 0.375PA DCC	Close of play catch up with juniors team 1 0.125PA DCC	
		Close of play catch up with juniors team 1+2 0.25PA DCC				



Week 2	Monday	Tuesday	Wednesday	Thursday	Friday	
AM	Team 1 family meetings and admin 0.325PA DCC	COE Ward Full WR & MDM Team 1 1.25PA DCC  New/ sick reviews Team 2 0.625PA DCC	New, sick and discharge reviews for Team 1&2. Board round. 1.5PA DCC	COE Ward Full WR & MDM Team 1 1.25PA DCC  Family meetings and admin 0.375PA DCC	COE OP Clinic 1.5PA DCC	Total DCC 7.2 SPA 1.5
PM	1.5PA SPA	Close of play catch up with juniors - team 1+2 0.25PA DCC		Close of play catch up with juniors team 1 0.125PA DCC		

Week 3	Monday	Tuesday	Wednesday	Thursday	Friday	
AM	MAU 10-19 Mid take WR all ages 2.25PA DCC	COE Ward Full WR & MDM Team 1 1.25PA DCC  New/ sick reviews Team 2 0.625PA DCC	Team 1 family meetings and admin 0.325PA DCC	COE Ward Full WR & MDM Team 1 1.25PA DCC  Family meetings and admin 0.375PA DCC	1PA SPA	Total DCC 6.45 SPA 3.5
PM		Close of play catch up with juniors team 1+2 0.25PA DCC	1.5PA SPA	Close of play catch up with juniors team 1 0.125PA DCC	1PA SPA	

Week 4	Monday	Tuesday	Wednesday	Thursday	Friday	
AM	Team 1 family meetings and admin 0.325PA DCC	COE Ward Full WR & MDM Team 1 1.25PA DCC  New/ sick reviews Team 2 0.625PA DCC	New, sick and discharge reviews for Team 1&2. Board round. 1.5PA DCC	COE Ward Full WR & MDM Team 1 1.25PA DCC  Family meetings and admin 0.375PA DCC	COE OP Clinic 1.5PA DCC	Total DCC 7.2 SPA 1.5
PM	1.5PA SPA	Close of play catch up with juniors - team 1+2 0.25PA DCC		Close of play catch up with juniors team 1 0.125PA DCC		



Week 5	Monday	Tuesday	Wednesday	Thursday	Friday	
AM	1PA SPA	COE Ward Full WR & MDM Team 1 1.25PA DCC  New/ sick reviews Team 2 0.625PA DCC	Team 1 family meetings and admin 0.325PA DCC	COE Ward Full WR & MDM Team 1 1.25PA DCC  Family meetings and admin 0.375PA DCC	COE OP Clinic 1.5PA DCC	Total DCC 5.7 SPA 4
PM	1PA SPA	Close of play catch up with juniors team 1+2 0.25PA DCC	1.5PA SPA	Close of play catch up with juniors team 1 0.125PA DCC	0.5PA SPA	

Average weekly DCC 6.9 (plus 0.6PA for on call commitment 1:18) = 7.5

Average weekly SPA 2.5

### 5. Departmental Junior Doctor allocation

Junior Staff	On Rotation from
5 ST3+	3 COE - NE Thames rotation 2 IMT3 – NE London IMT
7 IMT1+	NE London IMT rotation
3 GPST1+	Newham VTS rotation
2 Trust IMT1+	Barts Health Trust non rotational
2 F2	North Central and East London Foundation School
7 F1	North Central and East London Foundation School

### 6. Care of The Elderly Services

#### Inpatient COE services:

- Thistle AAU – Acute COE with predicted LOS < 24 hrs (13 beds).
- Thistle Short Stay – Acute COE with predicted LOS <72 hrs (13 beds).
- Silvertown Ward – Acute COE (24 beds)
- Custom House Ward – Complex COE (20 beds)
- Heather Ward – Acute Stroke Unit (13 beds).

Each consultant is responsible on average for 13-16 inpatients, which is variable depending on season.



### **Outpatient COE services:**

We provide a wide range of outpatient clinics. These include general COE, diagnostic memory clinic, falls clinic, stroke and TIA and complex CGA. There are daily HOT clinic slots incorporated into all clinics.

Expected new to follow up ratio in clinic of 2 new to 4 follow up patients.

### **Other COE services provided:**

**Frailty** – We have embedded frailty screening within the Emergency Department for early recognition and management of frailty. We also operate a frailty virtual ward. Post 1 will enable us to expand and improve the existing service.

**Nursing Home Liaison** - There is a comprehensive nursing home liaison service for all six local care homes. The geriatricians provide a monthly MDT meeting, with GPs, care home staff, and representatives from the Rapid Response Team and the community palliative care team. We provide an in-reach service for patients requiring comprehensive assessment.

**Extended Primary Care Team (EPCT)** – There is a weekly MDM with the extended primary care team encompassing therapy and nursing. We also provide domiciliary visits through this service if required.

**Surgical and Medical Liaison** – This is currently an adhoc service providing input to older patients under surgical care and younger patients with complex multi-morbidity under medical care. There is scope to expand the service in line with the growing day case surgery facilities provided for all of Barts Health on the Newham site.

**Diagnostic Memory Services** - There is a multidisciplinary diagnostic memory service for inpatients and outpatients with links to psychiatry and the Dementia and Delirium team.

**Dementia and Delirium Team** – We have an outstanding Dementia and Delirium Liaison Team who are available to support ward staff with reminiscence therapy, all about me documentation, and facilitating regular video calls with relatives.

**Falls SDEC** – Daily input into the Emergency Department alongside a dedicated falls therapist. Links into falls clinic and admissions avoidance.

## **7. Acute Medicine and General Internal Medicine**

Newham Hospital has a 26 bedded Acute Admissions Unit. This is staffed by 2 acute medical consultants. They review all overnight admissions to the AAU each morning.

Admissions throughout the day are seen by another AAU/GIM consultant between the hours of 10am – 7pm on weekdays. Out of hours cover from 7pm until 9am overnight and at weekends is supported by a general medical on call rota with an on call frequency of 1:18.



This post will contribute to support for the evolving AAU model with an aim to move towards seven day working.

The medical take sees a wide selection of general medicine patients with approximately 30 admissions per 24 hours. There is a high proportion of patients with coronary artery disease, diabetes, chest disease and sickle cell disease.

The medical take has good junior staffing with 1 ST3+, 2 ST1+, 2F1 on varying shift patterns.

## **8. Current Configuration of Services at Newham University Hospital**

Newham University Hospital has 340 beds.

### **Emergency Department**

The updated Emergency Department and Urgent Care Centre opened at Newham in 2012. Facilities include an expanded 18 bed majors area that features dedicated cubicles for the care and treatment of patients with gynaecological and psychiatric needs, a seven bed resuscitation facility that offers specialised paediatric and isolation facilities, a GP surgery with five treatment rooms and a newly refurbished eight cubicle Urgent Care Centre (UCC).

### **Health Central**

The Trust's outpatients and interventional unit opened in July 2006 as part of the PFI development. The ground floor consists of 26 outpatient consultation rooms for use by up to eighteen specialties and is supported by two treatment rooms, phlebotomy room, and children's play area and features a spacious and modern layout. This provides improved environment for patients and staff and facilitates the development of innovative and specialist care.

The first floor features a day endoscopic suite with separate recovery, step down and state of the art equipment. In addition are three operating theatres for emergency and complex surgery adjacent to a 16-bay recovery and seminar room. There are two courtyards, a cafe and new large reception that provide good facilities for patients and staff alike.

### **St Andrews Wing**

This opened in July 2006 as part of the PFI and accommodates the AAU, a 26-bed ward for Care of the Elderly and the Stroke Unit designed to provide immediate support for patients with acute stroke and rehabilitation of stroke patients. There are also meeting and seminar facilities, a gym and several courtyards that can be used by patients and staff, one of which is dedicated to rehabilitation therapy. The main hospital entrance is located within a glass atrium, complemented with art work and effective way-finding for the public.



### **Women's & Family Health Unit**

In response to increasing demand on maternity capacity and one of the highest birth rates in the UK at over 5500/year, the Trust opened a new integrated Women's & Family Health Unit in 2010, which provides modern and effective facilities for Maternity, Neonatal Care, Foetal Medicine, Early Pregnancy Assessment Unit, Emergency Gynaecology Assessment Unit, Gynaecology and Adolescents.

### **Gateway Surgical Centre (GSC)**

The Gateway Surgical Centre was one of the first NHS treatment centres in the UK when it opened in October 2005, and provides facilities for planned day case and short stay surgery in Orthopaedics, Urology, Gynaecology and General Surgery, as well as a sports injuries clinic. This building has 53 beds and 12 day case trolleys and allows the trust to streamline the planned and unplanned pathways into dedicated settings. Its' effective award-winning design supports new pathways of care and one of the best day care rates in the UK and includes on-site gym and state-of-the-art facilities. The GSC has three operating theatres (two with laminar flow) for up to 9500 operations/year as well as 8 consultation rooms and 2 treatment rooms to manage patients undergoing minor procedures, It is supported by an x-ray suite and diagnostic services on site. The two wards are comprised of 50% single rooms and three-bed bays, all with ensuite accommodation.

In addition to treating Newham residents, the Gateway Surgical Centre also offers treatment to any resident of East London as part of the patient choice programme.

### **Electronic Patient Record (EPR)**

Barts Health Trust uses integrated IT clinical systems, including Cerner Millennium and PACs, to improve the quality and safety of patient care. Departments and services are evolving and redesigning their patient pathways to take advantage of the freedom allowed through the ease of electronic movement of medical records, x-rays and of test results. This continued expansion of electronic clinical systems is in tandem with advances in the use of IT equipment and the use of the physical environment in improving care, quality of services and efficiency. Full remote access to emails, documents and EPR is available for offsite and other remote working.

### **Community Based Services**

The trust runs a number of outpatient clinics off-site at PCT centres, which provide an effective locality based service for Newham residents. Specialties include Antenatal clinics, Cardiology, Chest clinic, Gynaecology and Endocrine clinics. Work is ongoing to ensure that activity is provided in the most appropriate location and that resources on both acute and community sites are used optimally for best practice and effectiveness.

### **Support Services**

Hospital services have the support of a full laboratory service including Haematology, Biochemistry, Microbiology, Pathology and a 24 hour Blood Transfusion Service.



The Radiology Department is adjacent to the Emergency Department. The radiology department accommodates a multi-slice CT scanner and MRI and incorporates an on-site nuclear medicine department. PACS was implemented in April 2007.

The Pharmacy Department comprises of 5 key areas, the dispensaries, the production unit, medicines information, procurement, and the clinical pharmacy ward service. The dispensary has recently undergone modernisation with the installation of a dispensing robot, freeing up pharmacy staff to spend more time on patient focussed duties. The Medicines Information department is a key resource for healthcare staff and patients for information about medicines and co-ordinates regular updates to staff. The clinical pharmacy ward staff comprises of highly qualified pharmacists and pharmacy technicians that are there to assist all members of the multidisciplinary team and patients to ensure medicines are used safely and appropriately on the wards and on discharge.

## **9. Research & Development at NUHT**

The hospital was awarded University Hospital status in July 2004 in recognition of the significant amount of research and medical education that is undertaken here. R & D remains central to the core Trust strategy, and research activity is focussed on clinical areas like infectious and communicable disease (TB, HIV), long terms conditions (diabetes, coronary artery disease, chronic airway disease, stroke) and maternal and childhood health (pre-eclampsia, foetal growth restriction, pre-maturity and gestational diabetes).

Clinical staff have developed innovative local service models which are delivered in a culturally appropriate way to deal with these challenges and the Trust therefore has expertise in health service based research

Funding is received from a number of grant giving organisations including the Department of Health and its associate research bodies, MRC, Kings Fund and Charities. Commercial trials are also carried out here

- Research Networks

The Trust is actively involved in and leads on funded projects for collaborative networks, which in accordance with NHS R & D requirements include NHS acute and primary care trusts, academic groups and voluntary agencies and charities. These include:

1. Stroke Network: The Stroke department currently based in the state of art St. Andrews Wing participates in National Studies and commercial trials in collaboration with the other stroke units within Barts Health.
2. Diabetes Network: The Diabetes Unit is a principal partner of the local Diabetes Research Network (DRN) and has been a key player since its inception. The department leads on a number of nationally funded studies and collaborated on clinical trials for the DRN



3. North East Cancer Research Network: The Trust is a recruitment centre for a number of multi-centre cancer trials, including breast cancer, colo-rectal, lung cancer and haematology trials.
4. Comprehensive Research Networks: This is a newly established DH research network that will incorporate the other areas of research at Newham including:
  - I. Cardiology – The department has just led and completed a large National Study evaluating the first locally led open access chest pain clinic and contributes to a large number of National commercial and non-commercial studies.
  - II. Women’s and Family Health: This is a significant area of research to the Trust and the department has supervised and supported a number of research registrars and Fellows over the years.
  - III. Sexual Health: There are six ongoing studies including a large National one that is led locally
  - IV. Chest medicine: The department participates in a number of collaborative studies in chronic airway disease, asthma and TB

## **10. About Barts Health**

Our group of hospitals provide a huge range of clinical services to people in east London and beyond.

We operate from four major hospital sites (The Royal London, St Bartholomew’s, Whipps Cross and Newham) and a number of community locations, including Mile End hospital. Around 2.5 million people living in east London look to our services to provide them with the healthcare they need.

Newham University Hospital is the acute hospital for the London Borough of Newham. It serves a diverse multi-cultural population of 350,000 people. Over 40% of residents were born abroad and it has the highest population turnover rate in London. It is also linguistically diverse with 103 different languages spoken. This makes it a fascinating place to work.

The Royal London in Whitechapel is a major teaching hospital providing local and specialist services in state-of-the-art facilities. Whipps Cross in Leytonstone is a large general hospital with a range of local services. Newham in Plaistow is a busy district hospital with innovative facilities such as its orthopaedic centre. Mile End hospital is a shared facility in Mile End for a range of inpatient, rehabilitation, mental health and community services. And St Bartholomew’s in the City, London’s oldest hospital, is a regional and national centre of excellence for cardiac and cancer care.



As well as district general hospital facilities for three London boroughs, Tower Hamlets, Waltham Forest and Newham, we have the largest cardiovascular centre in the UK, the second largest cancer centre in London, an internationally-renowned trauma team, and the home of the London Air Ambulance. The Royal London also houses one of the largest children's hospitals in the UK, a major dental hospital, and leading stroke and renal units.

We're also proud to be part of UCLPartners, Europe's largest and strongest academic health science partnership. The objective of UCLPartners is to translate cutting edge research and innovation into measurable health gain for patients and populations through partnership across settings and sectors, and through excellence in education.



## Person Specification

The appointee must hold their CCST (or equivalent) or be within 6 months of eligibility and/or appear on the GMC specialist register. A more detailed person specification is included at the back of this document and provides guidance on the required essential and desirable service and personal achievements for this post.

Domain	Essential Criteria	Desirable Criteria
<b>Qualifications</b>	<ul style="list-style-type: none"> <li>• CCT (or equivalent e.g. CESR, European community rights), or within 6 months of a date, or entry on the Specialist Register of the GMC for General Internal Medicine, and Geriatric Medicine.</li> <li>• Wide experience in General Internal Medicine and Geriatrics</li> <li>• MRCP UK</li> <li>• A higher specialist training scheme in General Internal Medicine and Geriatrics</li> </ul>	<ul style="list-style-type: none"> <li>• Higher Degree i.e MSc, PhD or equivalent</li> </ul>
<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• Excellent knowledge in Geriatric medicine and acute medicine.</li> <li>• A broad range of knowledge in other relevant disciplines.</li> </ul>	<ul style="list-style-type: none"> <li>• Maintenance of a CPD diary or portfolio</li> </ul>
<b>Skills</b>	<ul style="list-style-type: none"> <li>• Record of Teaching at under and post graduate levels.</li> <li>• Record of Completed audit projects</li> <li>• An understanding of Clinical Governance</li> <li>• To have the ability and willingness to teach at all levels</li> <li>• Team player</li> <li>• Patient focused</li> <li>• Adaptable to change</li> <li>• Problem Solver</li> <li>• Good Communication Skills</li> </ul>	<ul style="list-style-type: none"> <li>• Record of attendance at training for trainer courses</li> <li>• Evidence of multidisciplinary teaching</li> </ul>
<b>Experience</b>	<ul style="list-style-type: none"> <li>• Ability to critically assess published research and incorporate it into clinical practice where appropriate</li> <li>• Experience in performing clinical audit</li> </ul>	<ul style="list-style-type: none"> <li>• Publication record in field of [GIM, Geriatrics, Stroke]</li> <li>• Critical incident reporting</li> <li>• Training in and experience of appraisal</li> <li>• Risk management Training</li> <li>• NHS complaint handling</li> </ul>

