

ALDER HEY CHILDREN'S NHS FOUNDATION TRUST

JOB DESCRIPTION

Post:	Locum Consultant in Paediatric Respiratory Medicine
Hours:	2 Programmed Activities
Accountable to:	Director Medical Division
Reports to:	Clinical Director for Respiratory

ROLE SUMMARY

This is a part-time locum post in Paediatric Respiratory Medicine at Alder Hey Children's NHS Foundation Trust, commencing as soon as possible for a period of 23 months. The post would suit someone wishing to work at tertiary respiratory level alongside another role. The post is for an average of 2 PA per week, but hours will be calculated on a per annum basis.

MAIN DUTIES AND RESPONSIBILITIES

Duties

Clinical

The successful applicant will work alongside the other consultants and share responsibilities and work load with support from other members of the team. In line with the agreed team objectives, the successful applicant will:

- Maintain a high quality tertiary service for children with complex respiratory disorders.
- Contribute to the "consultant of the week" and on-call commitment
- Contribute to the inpatient and outpatient management of children with general and complex respiratory disorders
- Contribute to the high quality training programme in paediatric respiratory medicine.

As well as providing day to day management for the respiratory in-patients at Alder Hey, the respiratory consultants provide a busy respiratory consultation service to all the other clinical

teams in the hospital on a day-to-day basis. They also provide prompt support for paediatricians in the Mersey region, North Wales and beyond, and for colleagues in primary care. This support is provided by the "consultant of the week" and the post holder will share this responsibility with 5 the other consultants on a 1:5 (WTE) basis. The post is for full time but if the successful applicant requested to work part time and this was agreed, the appointee would be expected to work 5 days on their "consultant of the week" with appropriate reduction in hours in the other weeks.

The appointee will lead a weekly respiratory/asthma clinic, with full support from nurse specialists and respiratory function testing. In addition, depending on the experience of the appointee, there may be the opportunity to run regular clinics dedicated to providing a higher level of care for patients with complex respiratory disease.

There is an out of hours commitment of 1:6 (WTE) which is largely telephone based, with attendance at the hospital as deemed appropriate by the on-call consultant.

In addition to these clinical duties, the appointee will take a full share of responsibility for training undergraduates and postgraduates, audit, clinical governance, and development of the service

Teaching & Academic role

Participate in the teaching and training of undergraduates and postgraduates.

Develop research interests in their area of interest and expertise

Managerial responsibilities Supervise junior staff.

Participate in departmental meetings related to strategic planning.

Take an active role in service review and development

CPD, Audit & Clinical Governance

Participate in CPD activity for which financial support is available

Initiate and undertake appropriate audits as required within the department.

Take part in the clinical governance programme

Proposed job plan

This post attracts 2 programmed activities per week. There may be the opportunity to discuss and review this with the clinical director.

The job plan for the first three months will be based on a provisional/indicative timetable. A formal job plan will be agreed between the appointee and the Clinical Director within three months of the commencement date of the appointee.

The supporting professional activities (SPAs) allocation within the provisional job plan is an illustrative guide only and will be finalised following individual agreement with successful candidate.

The basic template for new consultants is 1.5 SPA and there will be a contribution within the 2 Alder Hey PAs to the successful consultants overall job plan. Any additional SPA time in the Job Plan is linked to defined roles with clear objectives.

- 1.0 SPA for
 - Personal revalidation, appraisal/job planning/quality improvement /clinical governance/statutory & mandatory training/CPD.
 - Engagement in Quality Improvement, including :
 - ✦ Attending Quality Improvement meetings
 - ✦ Contributing data; and
 - ✦ Implementing agreed Quality Improvement recommendations in own practice.
- 0.5 SPA for departmental & Trust meetings and teaching (UG, departmental, Trust).

The Job plan entails:

Hot weeks (4 per year)

Day and Session		Activity	Category/Location	Number of Programmed Activities
Monday	AM	Ward round	Wards	DCC 1.0
	PM	Clinic Ward work	Resp unit	DCC 1.0
Tuesday	AM	Ward work	Wards	DCC 1.0
	PM	Departmental meeting Weekly respiratory MDT Consultant meeting Clinic admin	Respiratory Unit	SPA 0.25 DCC 0.25 SPA 0.25 DCC 0.25
Wednesday	AM	Ward round	Wards	DCC 1.00
	PM	CF team meeting SPA X-ray meeting	Respiratory Unit MS teams	DCC 0.375 SPA 0.375 DCC 0.25
Thursday	AM	Ward work	Wards	DCC 1.0
	PM	SPA		SPA 1.0
Friday	AM	Ward round	Wards	DCC 1.00
	PM	Clinic admin Patient admin		DCC 0.25 DCC 0.75
Additional work		Additional work arising from consultant of the week - Weekdays (5-6pm each day) -		DCC 1.25

On-call Arrangements and Category	No on-call		
		TOTAL 11.25	DCC 9.375 SPA 1.875

Cold weeks

Day and Session		Activity	Category/Location	Number of Programmed Activities
Monday	AM			
	PM			
Tuesday	AM	General respiratory clinic (monthly) – day and time TBC	Out-patients	DCC 0.25
	PM	Departmental meeting (1:4) Consultant meeting (alt weeks)	Respiratory Unit /MS teams Respiratory Unit /MS teams	SPA 0.0625 SPA 0.0625
Wednesday	AM	CF clinic (monthly)	Respiratory unit	DCC 0.25
	PM	CF MDT (monthly) Clinic admin XRAY meeting (1:4)	3: 4 MS teams 1:4 Respiratory unit MS teams	DCC 0.1 DCC 0.125 DCC 0.0625
Thursday	AM			
	PM			
Friday	AM			

	PM			
			TOTAL 0.9	DCC 0.75 SPA 0.15

Regular job planning meetings will be undertaken with the post holder to ensure that the appointee is remunerated for any additional activities undertaken and that the job plan accurately reflects the overall workload undertaken by the post holder.

The Respiratory Department

The Respiratory team provides a tertiary service for children with complex respiratory conditions across the North West of England, North Wales and the Isle of Man. In addition, we provide secondary care for children in the Liverpool area.

The respiratory consultants have 500-600 inpatients admitted under their care each year and are involved with another 750 inpatients in Alder Hey on a shared care basis with other specialties.

The service receives a large number of inpatient and outpatient referrals from other services at Alder Hey including PICU, surgery, ENT, cardiology, oncology, neurology and general paediatrics.

The Respiratory service currently runs 28 separate out-patient clinics at Alder Hey, with over 6000 attendances a year (800+ new referrals, 5000 out-patient follow-ups and over 500 inpatient attendances).

There are specialist clinics for children with:

- Cystic Fibrosis
- Asthma
- Primary ciliary dyskinesia
- Complex Respiratory Disorders
- Primary Immunodeficiency disorders
- Tracheo-oesophageal Fistula
- Chronic Lung Disease of Prematurity
- Neuro-respiratory disorders
- Sleep-related disorders of breathing
- Non-invasive and long-term ventilation

Many of the clinics are multidisciplinary and there is also joint working with consultants from other specialties (eg neurology, ID and clinical immunology, paediatric surgery).

As well as these Consultant-led clinics, there are several nurse led clinics each week.

The service includes the Regional Paediatric Cystic Fibrosis service. This cares for over 280 patients and families, making it one of the largest CF centres in the UK. Members of the CF team participate in 42 peripheral clinics a year in 11 DGH's around the North West, Wales and the Isle of Man, to provide shared care for children and young people with CF. There are strong links with the Adult CF Service. The CF shared-care clinical network established from Alder Hey is described as one of the best models of CF care in the UK. Members of the CF team contribute to national and international guidelines.

The multidisciplinary asthma service (MDAS) was established in 2017 and has been integral in providing guidance and pathways to improve care for asthmatic children in the North West. There is an emphasis on the multidisciplinary approach and on maintaining healthy lifestyles. The team have been involved in the development and revision of national asthma guidelines since 2000 and have presented at recent national and international meetings

The Long-term ventilation service looks after 27 children receiving invasive ventilation supervised and another 150 children and adolescents who receive nocturnal non-invasive ventilation in both an in-patient and out-patient capacity.

The unit has excellent Sleep study facilities and carries out c. 450 full polysomnogram recordings each year, including EEG, oxygen saturation, transcutaneous and end tidal CO₂, respiratory movements, nasal airflow monitoring, ECG and infra-red video recording. The studies are carried out and analysed by a dedicated sleep team including sleep physiologists and nurses.

Pulmonary function service was established in 2016 and provides lung function testing for patients within the respiratory team, those managed by other specialists within the hospital and consultants from DGHs can refer for testing. It also offers spirometry GP choose and book appointments.

The service is made up of 2.6 WTE physiologists and a physiology assistant. The service performs X spirometry tests and x complex test each year. All external tests and all complex tests are reported by both physiologists and respiratory consultants.

The respiratory service provides a regional paediatric bronchoscopy service, with 150 bronchoscopies under general anaesthesia each year. Most are undertaken in a dedicated theatre session on alternate weeks, but others as emergencies.

The Unit provides high quality training in Paediatric Respiratory Medicine and normally has 1-2 Grid Trainees in post in addition to 2-3 rotating paediatric trainees.

The Respiratory Unit research group linked to the Institute of Child Health, the University of Liverpool and the MCRN Local Research Network, is one of the largest and most active research departments in the Trust. The unit has an international reputation for high quality and innovative collaborative research. Several university staff (3 Professors,) are key

members of the clinical respiratory service. Respiratory research is a core component of the Trust's research strategy.

Current and Future Service/Team Objectives

The agreed objectives of the multi-disciplinary team are:

- to maintain a high standard of service for children with complex respiratory disorders within this region and beyond
- to maintain waiting times for all respiratory clinics within national standards
- to maintain our high quality training programme in respiratory paediatrics
- to maintain a high quality supra-regional diagnostic service for complex respiratory disorders
- to continue to support and develop further the role of the nurse specialists
- to ensure regional CF network and newborn screening programme are supported effectively
- to continue development of high quality transition for young people with long-term respiratory conditions to adult services
- to increase involvement of respiratory team in UK CRN portfolios of research studies
- to support further development of care for children with sleep related breathing disorders and long-term ventilation
- to improve accuracy and capture of activity data for all work carried out by respiratory team 4
- to develop new processes to ensure the care of children with respiratory problems out of hours
- to further develop network links with DGH colleagues

Staffing

The Respiratory Unit comprises a large multi-disciplinary team. The Unit has its own dedicated purpose-built department with office space for medical, nursing and support staff. There are good IT and teaching facilities, a library and seminar room.

The senior medical members of the Respiratory Team are currently -

Dr Rebecca Thursfield, Consultant in Paediatric Respiratory Medicine and departmental lead
 Dr Sarah Mayell, Consultant in Paediatric Respiratory Medicine
 Dr Clare Halfhide, Consultant in Paediatric Respiratory Medicine & Long-term Ventilation
 Dr Ian Sinha, Consultant in Paediatric Respiratory Medicine
 Dr Ruth Trinick, Consultant in Paediatric Respiratory Medicine & Long-term Ventilation
 Dr Chris Grime, Consultant in Paediatric Respiratory Medicine & Long-term Ventilation
 Prof Kevin Southern, Professor of child health & Honorary Consultant in Paediatric Respiratory Medicine
 Prof Paul McNamara, Professor of child health & Honorary Consultant in Paediatric Respiratory Medicine

Prof Calum Semple, Professor of child health & Honorary Consultant in Paediatric Respiratory Medicine

Dr Gemma Saint, Consultant in Paediatric Respiratory Medicine & Long-term Ventilation

The senior staff are supported by 3-5 Specialist Registrars/ ST 6-8 (including 1-2 National Grid trainees in PRM), 2 Specialist Trainees (1-3) and 1 research fellow.

There are excellent imaging facilities within Alder Hey for the assessment of children with complex respiratory disorders. These include CT, MRI, ultrasound, V/Q isotope scans, bronchography, as well as plain radiology.

There is a weekly meeting with a Consultant Radiologist at which all images of complex respiratory patients are reviewed.

ADDITIONAL REQUIREMENTS AND RESPONSIBILITIES

Research

We know that a children's hospital is different and that our job is more than just treating an illness; that's why Alder Hey has a dedicated research, education and innovation institute. The Trust has a comprehensive research portfolio with research embedded into every division and is very proud to have enrolled 800-1000 children and young people per month to research studies from a diverse portfolio of more than 150 observational and interventional research studies. All consultants, nurses and allied health professionals are encouraged to be involved in research such that clinicians from more than 25 specialities are currently principle investigators for a portfolio of local, national and international studies. The trust hosts an NIHR funded Clinical Research Facility, funding for which was renewed in 2022. The CRF enables delivery of clinical trials in experimental medicine whilst the Paediatric Medicines Research Unit specialises in clinical studies which aims to make drug treatments safer and more acceptable to children and young people.

Overall responsibility for the Trust's Research Strategy lies with the Medical Director and the Director of Research and Innovation. The Clinical Research Division ensures that research is incorporated into the management infrastructure and is part of the Trust's overall service plan and strategy. A number of operational groups and key individuals facilitate the design, coordination and support of research.

Innovation Alder Hey is the UK's leading trust for technological innovation and commercial exploitation, enjoying an international reputation for advancing child health in novel ways. With a dedicated innovation team of 27 individuals and an underground 1000sqm facility featuring VR, AR, rapid prototyping, simulation and 3D printing facilities, it has unrivalled capabilities to develop clinical problems into commercially viable solutions. The innovation system has multiple partnerships with large corporates, academic institutions and small companies to ensure that clinicians can access a wide range of technologies and experts to co-create their solutions.

Our problem based approach aligns with the trusts research and overall strategy to grow the future, making today's child tomorrow's healthier adult. Opportunities for clinicians to become part of the innovation drive include as a founder of a new company, intrapreneurship, dedicated time to join the innovation team or with bespoke support to allow translation of research to patient impact.

Our areas of strength lie not only in our open innovation methodology, facilities and dedicated support teams, but extends to specific technology themes including healthtech, digital therapeutics, artificial intelligence, immersive health and our Alderhey@nywhere patient facing user interface.

Teaching

Alder Hey serves as a teaching hospital to the University of Liverpool. The undergraduate curriculum is based on problem-based learning. All consultants are expected to take part in undergraduate teaching. Support is available to enable new consultants to deliver Level Two training.

All consultants have responsibility for organising the teaching and training of all members of staff in their department. There is an active training scheme for all junior medical staff and all consultants are expected to contribute to this programme. There are many postgraduate activities within the Trust including a weekly Grand Round.

Audit and Clinical Governance

The appointee will be expected to participate in the audit programme.

Whilst the Trust organises regular half day sessions to enable intra and inter-departmental audit and general education programmes, it is expected that the successful applicant will maintain their personal portfolios in accordance with the requirements of the Royal College of Paediatrics and Child Health and ensure that they achieve suitable continuing professional development. An appraisal system for all consultants is now established, including an annual review of job plans and CPD.

Consultants are also expected to be aware of the principles of clinical governance and to contribute to the aims of each Trust in achieving continuing improvement in all aspects of delivery of the service.

Continuing Professional Development

Consultants are expected to maintain their personal portfolios in accordance with the requirements of the Royal College of Paediatrics and Child Health, including the acquisition

of the appropriate CPD points. The Trust has introduced an Appraisal system for all consultants which includes a review of Continuing Professional Development.

Mentoring of newly appointed consultants by a more senior colleague is available within the Trust and the appointee will be encouraged to make use of this resource.

Terms and Conditions of Service

1. The Terms and Conditions applying to the post are those relating to Consultants (England) 2003 and shall be subject to any amendments negotiated from time to time by the appropriate bodies and approved by the Secretary of State.
2. The appointee will be expected to work with local managers and professional colleagues in the efficient running of the services and will share with consultant colleagues in the medical contribution to management.
3. The successful candidate will be expected to maintain existing service commitment and comply with Trust performance targets.
4. The post holder must be a medical practitioner fully registered with a licence to practice with the General Medical Council. The appointment is subject to clearance by the Disclosure and Barring Service and satisfactory medical screening results, including verification of Hepatitis B status.
5. The appointee will have responsibility for training and supervision of junior medical staff who work with him/her and will devote time to this on a regular basis.

6 . Residence

- (a) The successful candidate will normally be required to live within 15 miles/30 minutes of his/her base hospital (the hospital where the principal duties lie) and in a location offering easy access to the other organisations / facilities as required.
- (b) Where, however, the successful candidate already resides within 15 miles by road of his/her base hospital, he/she will not be required to remove his/her home nearer the hospitals.
- (c) Where the successful candidate's present residence is more than 15 miles by road from the hospital he/she will be required to remove his/her home to meet the residential clause of his/her contract, unless he/she has the written consent of the Trust to the contrary.
- (d) The Trust does not have a policy for reimbursement of relocation expenses.

7. Disclosure & Barring Service (previously Criminal Records Bureau)

The successful applicant will be required to undertake an enhanced DBS Disclosure check.

Further information on the DBS is available on their website at <http://www.dbs.gov.uk>. The Appointee will be required to pay for the DBS Enhanced Disclosure.

It is the policy of the Trust to undertake disclosure checks via the Disclosure & Barring Service (DBS) as appropriate under the Trust's policy and in line with current legislation. Criminal records will be taken in to account for recruitment purposes only when the conviction is relevant to the post applied for.

The offer of this post and continuation of your employment is subject to a satisfactory DBS disclosure (to be determined in accordance with current legislation).

The Trust retains the right to request that a further disclosure be sought at any time throughout your employment in line with current legislation and the continuation of your employment is subject to a satisfactory DBS check.

DBS checks will be completed every three years during your employment with the Trust and the cost of these checks will be deducted from your pay and you will be given the opportunity to pay this over three instalments.

Alternatively if you are registered with the DBS Update Service at the same level required for your employment with the Trust there will no requirement to complete a DBS and no further cost applied by the Trust as payment will be made by yourself directly to the DBS Update Service.

You are required to inform the Trust if you commit, or are investigated for, charged with, cautioned for or convicted of any criminal offence. A failure to provide such information or proving incorrect information may be considered to be gross misconduct warranting summary dismissal.

As an organisation which uses the Disclosure and Barring Service (DBS) Disclosure service, the Trust complies fully with the DBS Code of Practice and undertakes not to discriminate unfairly against any subject of a Disclosure on the basis of conviction or other information revealed.

We meet the requirements in respect of exempted questions under the Rehabilitation of Offenders Act 1974, all job applicants will be subject to a criminal record check from the

Disclosure and Barring Service before an appointment is confirmed. This will include details of convictions cautions and reprimands, as well as 'spent' and 'unspent' convictions. A criminal record will not necessarily be a bar to obtaining a position. A decision will be made depending on the nature of the position and the circumstances and background of the offences.

Mandatory Statements

1. The Trust is pro-diversity and anti-discrimination. Trust policies prohibit discrimination, victimisation, bullying or harassment. The Trust is committed to treating people equally, whether they are patients, colleagues, suppliers or other customers. We would like all our families and staff to feel valued and respected because we try to understand and provide for their individual needs.
2. The Trust is committed to promoting an environment that embraces diversity and promotes equality of opportunity. Staff should apply the values of respect, excellence, innovation, togetherness and openness in all that they do to ensure that Alder Hey truly belongs to everyone.
3. In the course of your duties you may acquire or have access to confidential information which must not be disclosed to any other person unless in the pursuit of your duties or with specific permission given on behalf of the Trust. You must ensure that you handle personal information in accordance with the requirements of the Data Protection Act 1998.
4. You are reminded that, in accordance with the Health & Safety at Work Act 1974, and subsequent legislation, you have a duty to take reasonable care to avoid injury to yourself and to others by your work activities, and are required to co-operate with the Trust in meeting statutory requirements.
5. You must ensure that you adhere to the Trust Infection Control policies and procedures at all times. You have a duty of care under the Health Care Act to prevent the spread of infection.
6. Within the NHS, good patient care is reliant on the availability of complete, accurate, relevant and timely data. The quality of information can limit the capability to make operational decisions about the way care is planned, managed and undertaken. Poor information quality can lead to poor decision making and may put service users at risk. High quality information means better, safer patient care. Where you are required to record data on systems, whether patient or staff data, or paper or electronic format you must ensure that it is up to date, accurate, complete and timely. You have a responsibility to ensure that you feel sufficiently knowledgeable about the system you are asked to use and what is required of you in order to fulfil your task accurately. Where an error is created or discovered by yourself on any system which you cannot rectify, you must contact the relevant helpdesk / system owner or your Line manager. Please read the Data Quality and Information Governance Policies located on the Intranet and ensure you understand your responsibilities.

As an employee of the Trust you will be accountable for the data entered into records and systems. It is very important that the Trust records the most up to date patient demographic details, including full name, D.O.B., address, contact number, NHS number, GP and GP Practice. This is not only to fulfil our legal obligation under Principle 4 of the Data Protection Act, which states 'Personal data shall be accurate and, where necessary, kept up to date', but it is also crucial in ensuring patient safety.

All staff should take ownership of records that are accessed and take the opportunity to check that the data held is correct.

7. Alder Hey Children's NHS Foundation Trust is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment. Staff have a responsibility to ensure they are aware of specific duties relating to their role and should familiarize themselves with the Trust's safeguarding and child protection procedures, regular safeguarding and child protection training updates are mandatory for all staff All individuals will have some risk management responsibilities with which you are required to comply, for details of your responsibilities please refer to the current Risk Management Strategy which is available on the intranet and in the local strategies folder.
8. You must comply with all Trust policies and procedures and attend all necessary mandatory training.
9. This document provides an outline of the main responsibilities of the post. It is not intended to be an exhaustive list of duties.

Further Information

Further information concerning the post is available from:

Dr Rebecca Thursfield, Consultant in Paediatric Respiratory Medicine: Tel 0151 252 5777

Dr Sarah Mayell, Consultant in Paediatric Respiratory Medicine: Tel 0151 252 5777 **PERSON SPECIFICATION**

Locum Consultant in Paediatric Respiratory Medicine

	ESSENTIAL	DESIRABLE
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Education and Training 1.	<ul style="list-style-type: none"> - Full GMC registration with licence to practise - Primary medical degree - MRCPCH/MRCP or equivalent degree - On the paediatric respiratory specialist register, or within 6 months of entry at date of interview. 	<ul style="list-style-type: none"> - Higher Degree e.g. MSc - DCH, DCCH, MBA or other relevant diplomas - Teaching qualification
2. Experience	<ul style="list-style-type: none"> - Management of specialist respiratory conditions in a tertiary setting 	
Skills 3.	<ul style="list-style-type: none"> - Teaching skills and experience - Ability to supervise the clinical work of doctors in training and other staff - Oral and written communication skills in English - Ability to organise and prioritise personal workload and that of others. - Ability to build effective relationships and work collaboratively with staff at all levels of the organisation. Ability to relate to patients and carers from a wide range of backgrounds and to empathise with their needs and concerns. - Evidence of being a team player and effective communicator as part of a multiagency team - Leadership: ability to develop a vision and lead the change that brings it into effect within a multi-disciplinary and multi-agency context - Effective time management, able to work under pressure - Well-developed reflective and self-care skills and able to foster these attributes in others - Ability to share knowledge and difficulties with colleagues 	
4. Personal Attributes	<ul style="list-style-type: none"> - Self-motivated to set and achieve targets - Flexible in regards to teamwork - Effective member of multidisciplinary team - Demonstrable evidence of ongoing commitment to personal and professional development 	

	<ul style="list-style-type: none"> - Demonstrable evidence of ongoing commitment to the development of a high quality service - Flexible, adaptable, thorough and resilient - Demonstrable evidence of ongoing commitment to clinical governance 	
Other	<ul style="list-style-type: none"> - An exceptional practitioner who is able to demonstrate ambition for themselves, the team and the service. - Membership of appropriate professional groups 	