



**Royal Brompton and Harefield Hospitals**

**Job Profile**

**Consultant in Critical Care Medicine**

**Royal Brompton Hospital**

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## **Royal Brompton & Harefield Hospitals**

### **A System of Care**

On 1st February 2021 the Royal Brompton and Harefield Hospitals became part of Guy's and St Thomas' NHS Foundation Trust – a truly once-in a generation development. Together, we are taking our first steps towards our vision of creating a brand-new centre of excellence, which will be the global leader in the research into and treatment of heart and lung disease in patients from pre-birth to old age. We are developing some exciting plans and we want you to join us – so come and help to change the shape of healthcare for our heart and lung patients world-wide.

Working from two main sites, Royal Brompton Hospital in Chelsea, West London and Harefield Hospital near Uxbridge, we are the largest specialist heart and lung centre in the UK and among the largest in Europe.

Our experts are known throughout the world for their expertise, standard of care and research success.

Our specialist hospitals provide treatment for people with heart and lung disease, including rare and complex conditions. We carry out some of the most complicated surgery, and offer some of the most sophisticated treatment that is available anywhere in the world.

Among their many achievements, experts at Royal Brompton and Harefield Hospitals:

- pioneered intricate heart surgery for newborn infants born with a congenital heart disease
- performed the first successful heart and lung transplant in Britain
- implanted the first coronary stent.

Royal Brompton & Harefield Hospitals *Part of Guy's and St Thomas' NHS Foundation Trust* is an internationally renowned centre for heart and lung services. Our brand identity is strong and clear: delivering the best clinical care and the best research for patients with heart and lung disease.

Heart and Lung diseases are the world's biggest killers and our experts care for patients who come from across the UK and overseas, not only from our local areas.

Our integrated approach to caring for patients from the womb, through childhood, adolescence and into adulthood and old age has been replicated around the world and has gained the Trust an international reputation as a leader in heart and lung diagnosis, treatment, and research.

Research programmes play a vital role at both our hospitals. This is because the most talented medical experts are rarely content with using tried and tested methods to treat their patients. The opportunity to influence the course of modern medicine by developing new treatments is a prospect that attracts them to specialist centres, where research opportunities are a fundamental part of delivering patient care. As well as travelling internationally to lecture and share their knowledge, our clinicians hold prominent positions on influential boards, committees, institutions and professional associations.

Our closest academic partners are the National Heart and Lung Institute in the Faculty of Medicine Imperial College London and, the Harefield Heart Science Centre. Furthermore, we have active collaborations with hospital and universities across the UK, for example the with Liverpool Heart and Chest Hospital in the Joint Institute for Cardiovascular Medicine and Science. Over the past two

years, we have been working towards a closer collaborative model of cardiovascular health delivery with our colleagues from St Thomas' Hospital and King's Health Partners. Congenital Heart Disease, including its adult component are centrally placed in this collaboration.

Over the years our experts have been responsible for several major medical breakthroughs – discovering the genetic mutations responsible for the heart condition dilated cardiomyopathy, founding the largest centre for the development of new treatments for cystic fibrosis in Europe and pioneering heart surgery for newborn infants.

Our hospitals do not operate in a vacuum; fully integrated networks of care exist with partner organisations and many of our clinicians have joint appointments with neighbouring trusts.

Our experts promote the principle of 'shared care' through an expanding system of consultant-delivered outreach clinics, at which they see patients at over 30 hospitals across the South East, covering Essex, Sussex, Surrey, Hertfordshire, and Middlesex. This system allows patients to benefit from specialist expertise in their local environment, with inpatient care at our hospitals as needed.

### **1.0 Clinical Group mission, values and approach.**

Our mission is to be the UK's leading specialist centre for heart and lung disease. We will achieve this mission through a strategy of focused growth in aspects of heart and lung treatment, such as congenital heart disease, arrhythmia, heart failure and advanced lung diseases.

#### **Our Approach**

- The continual development of leading edge services through clinical refinement and research
- The effective and efficient delivery of core specialist treatment
- The transition of appropriate routine services to other centres to release capacity for new interventions

Remaining an autonomous specialist organisation is central to preserving and building our strong clinical and organisational record. However, we are equally convinced of the importance of effective partnerships particularly with major academic bodies to ensure a continuing pipeline of innovations to develop future treatments.

#### **Our Values**

At the core of any organisation are its values; belief systems that are reflected in thought and behaviour.

We have three core patient-facing values and four others that support them.

Our three core values are:

- **We care**

We believe our patients deserve the best possible specialist treatment for their heart and lung condition in a clean, safe place.

- **We respect**

We believe that patients should be treated with respect, dignity and courtesy and they should be well informed and involved in decisions about their care.

- **We are inclusive**

We believe in making sure that our specialist services can be used by everyone who needs them, and we will act on any comments and suggestions that can help us improve the care we offer.

And the following values support us in achieving them:

- **We believe in our staff**

We believe our staff should feel valued and proud of their work and know that we will attract and keep the best people by understanding and supporting them.

- **We are responsible**

We believe in being open about where our money goes, and in making our hospitals environmentally sustainable.

- **We discover**

We believe it is our duty to find and develop new treatments for heart and lung disease, both for today's patients and for future generations.

- **We share our knowledge**

We believe in sharing what we know through teaching, so that what we learn can help patients everywhere.

### 1.1 Performance and achievements in 2018/2019

#### Our experts in 2018/19:

Cared for more than <b>210,000 patients</b> in our <b>outpatient</b> clinics	Cared for nearly <b>40,000 patients on all our wards</b>	Maintained one of the <b>fastest 'arrival to treatment' times</b> for UK heart attack patients – <b>23 minutes</b> compared with a national average of 56
Received <b>more than 1,000 patient referrals</b> for our pulmonary rehabilitation programme at Harefield Hospital	Received a <b>95%</b> recommendation score in the annual Friends and Family Test	
	Reduced the average length of time children wait in outpatient clinic by <b>15 per cent</b>	Received <b>100 per cent positive feedback</b> about Harefield's new day surgery unit in a patient survey
Welcomed a rating of ' <b>Good</b> ' in our Care Quality Commission inspection	Produced <b>889 peer-reviewed publications</b> , with our academic partner, Imperial College, London making the Trust a leading Centre for cardiovascular, critical care and respiratory research	Recruited <b>2,284 patients</b> onto over 200 <b>research programmes</b> that will contribute towards better patient care and outcomes
Joined a <b>new genetic testing network</b> that is set to revolutionise the way rare genetic diseases are identified across South London and the South-East		Attracted more than <b>£10 million</b> in external grants for research

### 1.2 Range of Services

The Clinical Group provides first-rate clinical services and exceptional research output.

We have an outstanding Research and Development pedigree; with over 500 active research projects across 10 R&D programmes. Every one of these programmes has been consistently given the top rating by the NHS R&D Directorate. The table below illustrates the inter-relationship between our R&D activity and clinical services.

Several of our clinical services have been formally designated as national services by the Department of Health: Heart and Lung transplantation, Ventricular Assist Devices (LVAD), Pulmonary Hypertension and Primary Ciliary Dyskinesia.

Research Programmes		Clinical Services
Congenital Heart Disease	↔	Adult Congenital Heart Disease Pulmonary Hypertension Paediatric Respiratory Paediatric Congenital Heart Disease Foetal medicine Primary Ciliary Dyskinesia
Chronic Coronary Heart Disease and Atheroma	↔	Acquired Heart Disease
Failing Heart	↔	Heart Failure Heart & Lung Transplant
Critical Care	↔	Critical Care relating to Heart and Lung
Chronic Respiratory Failure	↔	Chronic Obstructive Pulmonary Disease Sleep Ventilation Pulmonary Rehabilitation Lung Volume Reduction
Lung Cancer	↔	Lung and Upper GI cancer services
Severe Respiratory Disease	↔	Interstitial Lung Disease Acute Lung Injury Asthma & Allergy
Occupational and Environmental Medicine	↔	Occupational Lung Disease
Chronic Suppurative Lung Disease	↔	Paediatric and Adult Cystic Fibrosis Non – CF Bronchiectasis Aspergillosis Mycobacterial Infections

### 1.3 Organisation

The Trust Board is constituted as follows:

Non Executive Members	Executive Members
Baroness Sally Morgan (Chair)	Chief Executive, Dr Ian Abbs
Mr Simon Friend (Deputy Chair)	Lawrence Tallon, Deputy Chief Executive
Dr Felicity Harvey, CBE	Avey Bhatia, Chief Nurse and Vice President of the Florence Nightingale Foundation
Royal Brompton and Harefield Clinical Group	
Dr Richard Grocott-Mason, Managing Director	Ms Jan McGuinness, Chief Operating Officer,
Dr Mark Mason, Medical Director	Mr Nicholas Hunt, Executive Director
Mrs Joy Godden, Director of Nursing and Governance	Mr Robert Craig, Director of Development and Partnerships
Mr Richard Guest, Chief Financial Officer	Mrs Lis Allen, Director of Human Resources (HR)

The Royal Brompton and Harefield Clinical Group Board is a formal sub-committee of the Guy's and St Thomas' NHS Foundation Trust Board, with delegated responsibilities and decision-making rights for the strategic and operational running of its services. These are set out in the Guy's and St Thomas' Scheme of Delegation, and the Trust's Standing Financial Instructions provide the delegation limits with regard to financial decisions.

The Guy's and St Thomas' NHS Foundation Trust Board of Directors holds legal accountability for the Trust including all aspects of the Royal Brompton and Harefield Clinical Group. The Royal Brompton and Harefield Clinical Group Board provides assurance to the Guy's and St Thomas' NHS Foundation Trust Board of Directors on the overall operational, quality and safety and financial performance of Royal Brompton and Harefield Hospitals, and on the development and delivery of the Trust's strategy for its heart and lung services.

The Clinical Divisions are: Heart (RBH incorporating Cardiology Radiology and Cardiac Surgery), Harefield (incorporating Cardiology, Transplant, Radiology, Respiratory and Cardiac and Thoracic Surgery), RBH Lung (incorporating Respiratory Medicine, Radiology and Lung Surgery); and Directorates of Paediatrics, Anaesthesia and Critical Care, Laboratory Medicine, Pharmacy and Rehabilitation and Therapies.

Non-clinical directorates are: Human Resources, Finance, Patient Services, Estates & Facilities, Communications and Public Affairs and Business Development & Commissioning.

#### **1.4 Harefield Hospital Site**

Harefield Hospital (HH) is a regional centre for cardiology and cardiothoracic surgery, and an international centre for adult heart and heart-lung transplantation. It is one of a small number of UK cardiac centres assisting in development of implantable mechanical ventricular assist devices in the management of end-stage heart failure. It also provides a primary intervention service for acute coronary syndromes to selected Trusts and the London Ambulance Service, in outer West London and the Home Counties. It has approximately 1,185 staff, 180 beds with 5 operating theatres, and 4 catheter laboratories.

#### **1.5 Royal Brompton Hospital Site**

The Royal Brompton Hospital (RBH) is a specialist cardiothoracic centre specialising in diseases of the heart and lung, with services for adults (Cardiology, Cardiothoracic Surgery, Radiology, and Thoracic Medicine) and Paediatrics. It has approximately 2,081 staff, 296 beds, 6 operating theatres, 5 catheter laboratories, a private patients' ward and extensive imaging facilities. The hospital has recently opened the Cardiovascular Biomedical Research Unit (BRU) in partnership with Imperial College London. This facility offers a CMR scanner, catheter lab and echocardiography suite for research purposes, as well as state of the art genetic analysis facilities.

A Respiratory Biomedical Research Unit was opened on the RBH site in 2010 offering extensive research facilities for lung disease. Following public consultation, it was agreed that inpatient paediatric surgery and investigations should consolidate at the Royal Brompton Hospital.

## **1.6 Clinical Governance and Quality**

The Clinical Group has an extensive programme of clinical governance and quality led by Mrs Joy Godden, Director of Clinical Governance and Nursing and Dr Mark Mason, Medical Director. The programme is delivered through the organisation's systems and processes for monitoring and improving services, including sections for:

- Clinical audit and information
- Clinical risk management
- Research and development office
- Infection prevention and control
- Patient feedback
- Clinical Quality and Improvement

Consultant appraisals form an integral part of the process with each consultant undertaking annual appraisal with their line manager. There is also a programme of mandatory training undertaken by all staff.

## **1.8 Regulation**

The Trust was inspected by the Care Quality Commission during Autumn 2018 and the inspection report was published in February 2019. Overall, the Trust was rated by the CQC as 'Good'. Within this rating, Harefield Hospital was rated as 'Good' and the Royal Brompton Hospital as 'Good and identified several areas of outstanding practice.

## **1.9 Research and Development**

Research is a major activity at Royal Brompton and Harefield Hospitals. In pursuing its research role, it is closely likened with its association with the National Heart and Lung Institute (NHLI) which is a constituent division of Imperial College School of Medicine. At the last research assessment exercise, the clinical research carried out jointly between the hospital and NHLI was awarded a 5\* rating (the highest possible rating, shared by only two other UK establishments). Consultant staff at Royal Brompton and Harefield NHS Foundation Trust are normally granted honorary status at Senior Lecturer level with the University of London through NHLI and Imperial College.

The Trust operates two Clinical Research Facilities (CRF), Cardiac and Respiratory, in partnership with Imperial College. The Cardiac CRF undertakes pioneering research into heart regeneration, aiming to increase the understanding of cardiac conditions in people living with cardiomyopathy, arrhythmia, coronary heart disease and heart failure. The CRF offers cutting edge genomics facilities, using state-of-the-art next generation DNA sequencing, to directly focus on the genetic analysis of inherited heart and lung conditions. It aims to be the leading national and international laboratory for the discovery of genes involved in cardiovascular disease and their use in diagnostic and therapeutic strategies.

The Groups structure for managing research changed in April 2017, with oversight for research being placed within the clinical divisions. In response to this, a new structure was implemented incorporating both operational and strategic aspects. To ensure appropriate delivery and oversight, new Cardiac and Respiratory Research Committees have been established with oversight and focus of



operational running of the core facilities, including prioritisation of studies, governance, staffing, study and strategic oversight by Imperial College with focus on strategic grant applications, AHSC linkages, NIHR and GEL interactions.

#### **1.10 Imperial College London**

Royal Brompton and Harefield Hospitals has established and maintained close links with Imperial College, which was established in 1907 in London's scientific and cultural heartland in South Kensington, as a merger of the Royal College of Science, the City and Guilds College and the Royal School of Mines. St Mary's Hospital Medical School and the National Heart and Lung Institute merged with the College in 1988 and 1995 respectively. Imperial College embodies and delivers world class scholarship, education and research in Science, Engineering and Medicine, with particular regard to their application in industry, commerce and healthcare. We foster interdisciplinary working internally and collaborate widely externally. Consequently, a significant amount of Medical Staff employed by Imperial College hold honorary contracts with the Royal Brompton Trust.

#### **1.11 Mentorship**

All new Consultants at the Royal Brompton and Harefield Hospitals will be provided a detailed and focussed Trust and Departmental Induction upon their arrival. As part of the local induction, a Professional and Management Mentor will be allocated, with whom the appointee will meet for regular meetings.

**ROYAL BROMPTON AND HAREFIELD HOSPITALS  
(ROYAL BROMPTON HOSPITAL)**

**JOB DESCRIPTION**

**1. POST**

**CONSULTANT IN CRITICAL CARE MEDICINE.** This post is a replacement post; it is a whole time Consultant in Critical Care Medicine. Applicants for part-time, job share or flexible working will also be considered. If such a person is appointed, modification of the job content will be discussed on a personal basis with the Trust in consultation with the Clinical Director.

**2. LOCATION**

This is a Trust appointment, and the main base will be at Royal Brompton Hospital, Chelsea, London, SW3 6NP. The post holder may also be required to work at our Harefield site on an intermittent basis, or more regularly in due course by mutual arrangement. Additionally, the post holder may be required to work at any of the GSTT and any associated sites as required.

**3. ACCOUNTABILITY**

- 3.1 In respect of the Consultant contract, the postholder will be professionally accountable to the Divisional Director of the Heart Division at the Royal Brompton through the critical care leads, and managerially accountable through the Clinical Director to the Chief Executive.
- 3.2 The postholder will have professional responsibility to the Medical Director and Director of Research and Development for clinical governance and research undertaken within the hospital.

**4. ANAESTHESIA and CRITICAL CARE**

- 4.1 This is a full time Consultant post in Critical Care Medicine, with a provisional job plan outlined in appendix A.
- 4.2 **Staffing at Royal Brompton & Harefield NHS Foundation Trust**

The current medical staff include:

**AICU Consultants (RBH)**

Dr Stephane Ledot (AICU clinical lead)  
Professor Susanna Price (peri-procedural echocardiography lead)  
Dr James Doyle (FICM tutor)  
Dr Maurizio Passiarello  
Dr Suveer Singh  
Dr Benjamin Garefield  
Dr Francisca Caetano  
Dr Brij Patel  
Dr Paolo Bianchi  
Dr Joanna Alcada (locum)

**AICU Consultants (cross-site)**

Dr Donna Hall (cross-site Director)  
Dr Clara Hernandez Caballero  
Dr Alex Rosenberg  
Dr Nick Lees

**EICU/HDU Consultants**

Dr Sarah Trenfield (EICU Clinical Lead)  
Dr Arshad Ghori  
Mr Richard Trimlett  
Dr Caterina Vlachou  
Dr Nicky Zimble  
Dr Shahana Uddin (honorary)

AICU Junior medical staff

2 x Specialist Registrar Intensive Care Medicine (pan-London scheme)  
1 x SpR Respiratory Medicine  
1 x SpR Imperial School of Anaesthesia  
1 x SpR rotating with Chelsea & Westminster Hospital  
5 senior Critical Care Fellows  
10 x F2/ST1-2  
6 core medical trainees (ST1-2)  
2 F2  
2 surgical trainees (ST1-2)

**Anaesthetic Consultants**

Dr D Alexander  
Dr B Keogh  
Dr R Stenz  
Dr K Fogg  
Dr S Jaggar  
Dr F Del Sindaco  
Dr S Mele (sabbatical)  
Dr T Pickworth  
Dr TC Aw  
Dr A Ghori (Director of Anaesthesia)  
Dr S Trenfield  
Dr M Lane (College tutor)  
Dr C Vlachou  
Dr P Bianchi  
Dr Stephane Ledot  
Dr Jonathan Weale  
Dr Amira Elkhateb (locum)  
Dr Bhairavi Bajelkar (locum)

Junior anaesthetic medical staff

9 Specialist Registrars  
(All junior posts rotate with other hospitals)  
3 Clinical Fellows

**5. Activity of the Department**

Critical care is the cornerstone of supportive expertise for critically ill patients with heart and lung conditions undergoing treatment within our hospitals and beyond.

**AICU**

The Adult Intensive Care Unit comprises 18 beds and is situated on level 3 of the Sydney Street Building of the Royal Brompton Hospital in close proximity to 6 operating theatres, 4 of the 5 catheter labs and a 10 bedded theatre recovery unit. Approximately 600 patients per year are admitted to the Unit, approximately 40% being patients following cardiac (including adult congenital heart disease) or thoracic surgery and the remainder from cardiology, respiratory medicine and the VV and VA ECMO Services. Approximately 200 ventilated patients per year are transferred directly from other intensive care units for investigation and treatment. Patients are managed using a full range of therapies including extracorporeal cardiovascular and respiratory support.

The Royal Brompton Hospital AICU is a tertiary referral centre for acute lung injury and severe acute respiratory failure. Since December 2011, the Royal Brompton has been contracted, with four other hospital providers to supply a national adult respiratory ECMO service for patients with reversible severe acute respiratory failure. This service includes retrieval (including on ECMO) of patients. The ECMO service has been granted a platinum award of excellence by the Extracorporeal Support Organisation for his patient centred care, education and training programme. In parallel with this formally and well- established service, we provide a regional service for patients with severe acute cardiac failure, including advice and, where appropriate, circulatory support.

**EICU/EHCU**

Elizabeth ICU/HDU is an 18 bedded adult critical care unit situated on level 5 of the Sydney Street Building. Its focus is to provide expert L3 and L2 care not only to patients after cardiac and thoracic surgery, but also other patients with acute cardiac or respiratory conditions requiring this level of care. It is run by a multi-disciplinary consultant team with backgrounds in anaesthesia, surgery and intensive care medicine. Pre pandemic, there were approximately 2500 admissions per year (mainly post operative patients). The unit has flexible Level 2/3 capabilities and offers invasive ventilation as well as mechanical circulatory support (IABP/Impella).

**6. Clinical Responsibilities**

- 6.1 To provide a consultant critical care medicine service across critical care areas.

- 6.2 To participate in, and contribute to, the proper functioning and efficient running of the Department across critical care areas and provide advice and support for other areas as required.
- 6.3 To participate in medical audit.
- 6.4 To participate in critical care outpatient and outreach clinics, as required.
- 6.5 To participate in the on-call rotas for Critical Care Consultants, including AICU, ECMO and patient retrieval and to ensure that the provision of these are efficient and consistent with the needs of the service.

## **7. Duties and Responsibilities**

- 7.1 This is a full time Consultant post in Critical Care Medicine to be based at Royal Brompton Hospital. There may be a requirement to undertake outpatient clinics on the Royal Brompton Hospital site. The post holder will join the existing Critical Care team and will report to the Director of the Royal Brompton Heart Division through the Critical Care Leads.

### **In summary, the post holder will:**

- Work with the current team of Critical Care Consultants to deliver a high-quality critical care service at whatever location this is required
- Work closely with colleagues to continue to develop a severe acute cardio-respiratory failure service including ECMO
- Collaborate with the research programme and lead research projects as appropriate
- Collaborate with clinical and research data collection
- Participate fully in clinical audit and clinical governance for the Critical Care and ECMO services including attendance at relevant meetings
- Undertake teaching and training locally and nationally
- Contribute to local, national and international development of the Critical Care service as described above.

In common with all consultants within the Trust, he/she will undergo annual appraisal by a senior colleague(s), which will include a review of the job plan. This will form part of the revalidation process for all registered medical practitioners. Please note that this post does not include G(I)M and a CCST/CCT in G(I)M is not necessary. The post holder will however be expected to have a CCST/CCT in Intensive Care Medicine or equivalent.

## **8. Research Responsibilities**

- 8.1 The National Heart and Lung Institute incorporated into the Imperial College of Science, Technology and Medicine. As such it is the cardiorespiratory limb of a broad-based undergraduate and postgraduate research organisation.

- 8.2 No research project can commence until it has been properly costed and agreed by both the Research Office and the lead for Critical Care Research, for a project involving patients, without Ethics Committee approval.

**9. Teaching**

- 9.1 Apart from informally teaching junior staff working directly with him/her, the postholder will be expected to make a positive contribution to postgraduate medical education within the organisation as a primary responsibility and undertake teaching of and support for junior doctors as necessary.
- 9.2 Teaching responsibilities will include co-operation with the programmes organised by the National Heart and Lung Institute Division of the Imperial College School of Medicine.
- 9.3 An important role of the Critical Care service is education of health care professionals. The post holder will be expected to contribute fully to local and national educational meetings in Critical Care for health care professionals and patients. The successful applicant will be required to participate in the regular and occasional teaching programmes arranged for nurses, cardiac technicians, junior medical staff, undergraduate medical students, postgraduate students and course attendees at Royal Brompton Hospital and Harefield Hospitals. He/she will be called upon to provide beside teaching, tutorials, lectures, and student assessments on the various clinical educational programmes that take place within the Trust.

**10. Administration**

- 10.1 To participate and contribute towards the work of the Committees of the Trust and the University.
- 10.2 To contribute towards the planning of developments in Intensive Care services in the trust.
- 10.3 To assist with the development and effective use of clinical (resource) budgeting.
- 10.4 To participate in Medical Audit programmes, including mortality meetings.
- 10.5 To assist with the development of service development plans and objectives.

**11. Office Accommodation and Secretarial Support**

- 11.1 Office accommodation and secretarial support will be provided.
- 11.2 Secretarial support for Critical Care work is available.
- 11.3 Computer and IT support will be available.

**12. Clinical Governance**

- 12.1 Both Directorates have Clinical Governance structures to deal with Clinical Risk Management, Clinical Effectiveness and Clinical Service Development. The post-holder will be required to participate in regular clinical audit meetings, both departmental and Trust wide, including mortality meetings and participation in Grand Rounds.

### **13. Staff Appraisal & Revalidation**

- 13.1 The Trust approach is based on the principle that appraisal is an essential part of good practice. It enables the organisation to ensure employees are able to assist in meeting organisational aims through the process of managing performance and identification of development needs. It also gives staff the opportunity to discuss their performance and development needs with their manager and ensures they are clear about what they are trying to achieve both in their current role and for the future.

- 13.2 The organisation therefore has a basic requirement of such good practice, which can be audited to ensure that it is achieved. This standard is outline below:

Clinical managers will meet with staff they directly manage, at least once per year on a formal basis, with informal progress reviews at least every six months.

A record of the discussions will be made using the scheme paperwork.

There is a clear and current agreement about the job the employee is expected to do covering the purpose, aims, responsibilities and tasks. Every member of staff will have work-based objectives which link to organisational standards and the business plan of their directorate/department.

- 13.3 Every employee should have a Personal Development Plan outlining short and long-term learning and development aims and actions to meet these. The Head of Department will also ensure fairness and consistency, will appropriately monitor appraisal to ensure all staff in their area are having an appraisal. The Human Resource department will be responsible for monitoring compliance across the Trust.

All staff that carry out appraisal will be given support and training.

- 13.4 Every new appointed consultant will be allocated a mentor.

### **14. Conditions of Service**

- 14.1 The post is covered by the Terms and Conditions of Service of Hospital Medical and Dental Staff (England and Wales 2003).
- 14.2 The post is for 10 programmed activities and will be paid according to the current Consultant salary scale which is £82,096 to £110,683 per annum depending on seniority.
- 14.3 The post will also attract an on-call availability supplement as per the rate set out in the Terms and Conditions of Service of Hospital Medical and Dental Staff (England and Wales 2003).

- 14.4 A London Weighting allowance is payable at the rate of £2,162 per annum.
- 14.5 The annual leave year will run the first of April – 31<sup>st</sup> March. Arrangements for taking annual leave should be discussed and agreed at least six weeks in advance, approved and documented on the electronic annual leave system. Any annual leave to be carried over is subject to the General Council Conditions of Service (sect. 1, para 10-14)
- 14.6 The successful applicant will be required to reside not more than 10 miles from Royal Brompton Hospital, unless otherwise agreed with the Clinical Group Board.
- 14.7 As a less than full time Consultant, the postholder has the right to engage in private practice but will be subject to the provisions governing the relationship between NHS work, private practice and fee-paying services set out in the terms and conditions of employment – Consultants (England) 2003. Any arrangements must also conform to the Trusts Standing Financial Instructions, and the guidance set out in the department of Health paper "The Management of Private Practice in England and Wales" (March 1986).

**15. Conditions of Appointment**

- 15.1 The appointment will be made in accordance with the National Health Service (Appointment of Consultants) Regulations 1996.
- 15.2 Full registration of the General Medical Council will be required, as will inclusion, or eligibility for inclusion, on the specialist register of the General Medical Council.
- 15.3 The Trust Board will indemnify the postholder for all National Health Service work undertaken as part of the contract of employment. Adequate defence cover as appropriate should be taken out by the postholder to provide cover for any work undertaken outside the scope of the indemnity scheme.
- 15.4 Due to the nature of the work of this post it is exempt from the provisions of Section 4(2) of the Rehabilitation of Offender Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exemption Order 1986). Applicants are therefore not entitled to withhold information about convictions including those, which are for other purposes spent under the provisions of the Act. In the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by the Trust.

**16. Additional Information**

- 16.1 Confidentiality  
During the course of your employment, you may have access to, see or hear information of a confidential nature and you are required not to disclose such information, particularly that relating to patients and staff.
- 16.2 Data Protection  
In order to comply with the Data Protection Act 1998, you must not at any time use personal data held by the Trust for any unauthorised purpose or disclose such as data to a third party.



You must not make any disclosure to any unauthorised person or use any confidential information relating to the business affairs of the Trust, unless expressly authorised to do so by the Trust.

**16.3 Health and safety**

You must co-operate with management in discharging its responsibilities under the Health and Safety at Work Act 1974 and take reasonable health and safety of yourself and others and ensure the agreed safety procedures are carried out to maintain a safe environment for patients, employees and visitors.

**16.4 Diversity**

You are at all times required to carry out your responsibilities with due regard to the Trust's diversity policy and to ensure that staff receive equal treatment throughout their employment with the Trust.

**16.5 Risk management**

All staff have a responsibility to report all clinical and non-clinical accidents or incidents promptly and, when requested, to co-operate with any investigation undertaken.

**16.6 Conflict of interests**

You may not without the consent of the Trust engage in any outside employment. In accordance with the Trust's conflict of interest policy, you must declare to your manager all private interests, which could potentially result in personal gain as a consequence of your employment in the Trust. Interests that might appear to be in conflict should also be declared to your manager.

In addition, the NHS Code of Conduct and Standards of Business Conduct for NHS Staff (HSG 93/5) requires you to declare all situations where you or a close relative or associate has a controlling interest in a business (such as a private company, public organisation or other NHS voluntary organisation) or in any activity which may compete for any NHS contracts to supply goods or services to the Trust. You must therefore register such interests with the Trust, either on appointment or subsequently whenever such interests are gained. You should not engage in such interests without the written consent of the Trust, which will not be unreasonably withheld. It is your responsibility to ensure that you are not placed in a position that may give rise to a conflict between your private interest and your NHS duties.

**16.7 Code of Conduct for Professionally Qualified Staff**

All staff are required to work in accordance with their professional group's code of conduct (e.g. NMC, GMC, DoH Code of Conduct for Senior Managers).

**16.8 Criminal Records Bureau**

Any applicant who is short-listed for this post will be asked to complete a disclosure form as the post-holder will be required to have contact with vulnerable adults or persons under the age of 18. The successful candidate will be subject to a criminal record check from the Criminal Records Bureau prior to the appointment being confirmed. The disclosure will include details of cautions, reprimands, and final warnings, as well as convictions if applicable.

**16.9 The Trust operates a no-smoking policy.**

**Note:**

The above description is not exhaustive and may be altered to meet the changing needs of the post and of the directorate. The post holder will be expected to be flexible and to co-operate in accordance with the changing requirements of the directorate and of the Trust.

**FURTHER INFORMATION**

Applicants are encouraged to view the Directorates and discuss the post.

Further information can be obtained from:

**Dr Stephane Ledot**

Consultant in ICM & Anaesthesia

Clinical Lead for ECMO and AICU

Email: [s.ledot@rbht.nhs.uk](mailto:s.ledot@rbht.nhs.uk)

**Dr Sarah Trenfield**

Clinical lead for EICU

Email: [s.trenfield@rbht.nhs.uk](mailto:s.trenfield@rbht.nhs.uk)

**PERSON SPECIFICATION**

**Job Title:** Consultant in Critical Care Medicine

**Department:** Critical Care

**Date:** April 2021

CRITERION	D / E	Assessed by A / I / R
<b>Qualifications/Training</b>		
MB BS or equivalent	E	A
Higher degree	D	A
MRCP or FRCA or equivalent	E	A
On the Specialist Register of the GMC or within 6 months of eligibility at the time of interview	E	A/I
CCT/CCST in Intensive Care Medicine or Anaesthetics or equivalent	E	A
FFICM/EDIC or equivalent	D	A
<b>Experience</b>		
Adult Critical Care Medicine	E	A
Cardiac/cardiothoracic Critical Care	E	A
Transport of critically ill patients with severe respiratory failure	D	A/I
Care of patients receiving extracorporeal support	D	A/I
<b>Skills, Knowledge and Abilities</b>		
Technical and clinical skills required for Adult Critical Care Medicine	E	A/I/R
Teaching skills	E	A/R
Ability to initiate & supervise quality improvement projects and research	E	A
Wide knowledge of cardiac and thoracic physiology	E	R/I
<b>Other</b>		
Commitment to continuing Medical Education	E	I

**KEY:**

**E = Essential   D = Desirable   A = Application   I = Interview   R = References**

## **Appendix One**

### **Core behaviours for all Trust staff**

All staff will commit to:

- Act with honesty and integrity at all times
- Demonstrate respect for others and value diversity
- Focus on the patient and internal and external customer at all times
- Make an active contribution to developing the service
- Learn from and share experience and knowledge
- Keep others informed of issues of importance and relevance
- Consciously review mistakes and successes to improve performance
- Act as ambassadors for their directorate and the Trust
- Be aware of the impact of their own behaviour on others
- Be discreet and aware of issues requiring confidentiality

In addition, all managers and supervisors will:

- Value and recognise the ideas and contributions of all team members
- Coach individuals and teams to perform to the best of their ability
- Delegate work to develop individuals in their roles and realise their potential
- Give ongoing feedback on performance, and effectively manage poor performance
- Provide support and guidance to all team members
- Encourage their team to achieve work/personal life balance
- Actively listen to comments/challenges and respond constructively
- Lead by example, setting high standards
- Ensure that there are sufficient resources for their team and rebalance priorities accordingly
- Provide a safe working environment

## Appendix A:

### Provisional Job Plan

The Critical Care consultant duties are currently delivered on a week (Monday to Friday) at a time basis. Weekends, evenings and nights are covered by 15 Consultants, with DCCs for weekend daytime working in AICU. HDU is currently covered by 6 Consultants.

The job plan will be based on the provisional timetables shown below. You and your clinical managers will review the job plan as a minimum annually in line with the provisions in the Terms and Conditions. Either of you may propose amendment of the Job Plan. You will help ensure through participating in Job Plan reviews that your Job Plan meets the criteria set out in the Terms and Conditions and that it contributes to the efficient and effective use of NHS resources.

### Outline Timetables

#### 12 Weekly Timetable (with PAs)

Week	Critical Care PAs	On call	SPAs	Total
1	13.75	1.5	1	16
2	0	1.5	1	3.5
3	13.75	1.5	1	16
4	0	1.5	1	3.5
5	13.75	1.5	1	9.5
6	3.5	1.5	1	16
7	0	1.5	1	3.5
8	13.75	1.5	1	16
9	0	1.5	1	3.5
10	13.75	1.5	1	16
11	4	1.5	1	7.5
12	13.75	1.5	1	9.5
Total	90	18	12	120
Total/wk	7.5	1.5	1	10.0

The job plan will be adjusted to allow sufficient base speciality work to satisfy requirements for revalidation in that speciality depending on the background of the successful candidate.

On-call availability supplement  
Agreed on-call rota (e.g. 1 in 5)

<b>1 in 6</b>
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Agreed category:

<b>Category A</b>
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On-call supplement

<b>5%</b>
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