

Royal Brompton & Harefield Hospitals
Part of Guy's and St Thomas' NHS Foundation Trust
Job Profile

Resident Medical Officer in Private Patients

Royal Brompton Hospital

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A System of Care

Guy's and St Thomas' is amongst the UK's busiest and most successful NHS foundation trusts. We provide specialist care for patients from across the world in cardiovascular, respiratory, cancer, renal and orthopaedic services as well as a full range of hospital and community services for people in south east London.

Our Trust includes St Thomas' Hospital, Guy's Hospital, Royal Brompton and Harefield Hospitals, Evelina London Children's Hospital, and community services in Lambeth and Southwark.

Our Trust has a reputation for clinical excellence and high-quality teaching and research. We are part of King's Health Partners, one of eight accredited UK academic health sciences centres. Together with King's College London we have dedicated clinical research facilities and a National Institute for Health Research (NIHR) Biomedical Research Centre. We are also working in partnership with King's Health Partners, to deliver the 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.

Royal Brompton and Harefield Hospitals (RB&HH) became part of Guy's and St Thomas' NHS Foundation Trust in February 2021 and the Group is the largest specialist heart and lung centre in the UK and among the largest in Europe. We provide treatment for people with heart and lung disease, including rare and complex heart and lung conditions, carrying out some of the most complicated surgery, and offering some of the most sophisticated treatment that is available anywhere in the world.

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 RB&HH an international reputation as a leader in heart and lung diagnosis, treatment and research.

As a Trust, our patients are at the heart of everything we do and we pride ourselves on ensuring the best possible patient experience. The commitment of our 22,000 staff is key to our success and we aim to develop and support all our staff, so they are able to deliver high-quality, safe and efficient care for our patients.

1.0 Clinical Group 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, such as Kings College London, to ensure a continuing pipeline of innovations to develop future treatments.

1.2 Range of Services

RB&HH 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 Fetal Cardiology 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 and Clinical Group Board are 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 (RB&HH). The RB&HH 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 (RB&HH incorporating Cardiology Radiology and Cardiac Surgery), Harefield (incorporating Cardiology, Transplant, Radiology, Respiratory and Cardiac and Thoracic Surgery), RB&HH 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 Adult Congenital Heart Unit

The Adult Congenital Heart Unit is one of the largest dedicated services of its type in the world, providing care for around 4,000 patients. The unit has an active interventional and surgical programme. Specialist clinics include high-risk pregnancy, intervention and pulmonary hypertension. Research is given high priority within the unit exemplified by the most recent assessment from the HFCE. RB&HH produces more highly-cited publications in ACHD than any other Trust in the country, or anywhere else in the world.

1.5 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

The Group 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.

1.10 King's Health Partners

As part of the wider Trust, the RB&HH Clinical Group partners with King's Health Partners, which provides further opportunities for collaboration and honorary positions for our research experts. King's Health Partners is a very strong and productive collaboration between Guy's & St Thomas', King's College Hospital, South London & Maudsley NHS Trust and King's College London as the academic partner.

King's College London is a leading Russell Group, multi-faculty university with a wide spectrum of academic activities covering medicine, the life sciences, nursing, dentistry, pharmacy, psychiatry, physical sciences, engineering, arts and humanities, business, social sciences and law. The vast majority of medical research and educational activities – including all cardiovascular and respiratory activities - are based within the Faculty of Life Sciences & Medicine, which is one of the largest and most successful centres for biomedical research

and education in the UK. It employs almost 1,900 staff (full time equivalent), of which there are 440 academic staff and 800 research staff.

RB&HH colleagues have been invited to affiliate and work with staff within the Life Sciences & Medicine Faculty and at King's College more widely. There are numerous opportunities for exciting collaborations in research, education, innovation for example and tremendous strengths and benefits from these synergies, which are just being explored, RB&HH colleagues are also able to obtain honorary appointments with King's College London too. All partners in the Kings Health Partnership share the same vision of creating a unique and world-leading centre of clinical-academic excellence for cardiovascular and respiratory patients.

1.11 Mentorship

All new Consultants at both 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.

2.0 Children and Fetal Services

The Group provides both Cardiac and Thoracic Surgical services on both Royal Brompton and Harefield sites, with a Paediatric/ACHD service at the Royal Brompton, and Transplantation at Harefield. In 2016/17 the activity volumes were as follows:

	Brompton Paediatric	Brompton Adult Congenital
Paed/ACHD	350 Surgical procedures	125 Surgical procedures

The Royal Brompton provides a comprehensive range of services for children with heart and lung disease, including a 12-bed paediatric intensive care unit, an 8-bed paediatric high-dependency unit and 26-bed paediatric ward. There is a dedicated paediatric outpatient area. There are 6 purpose-built operating theatres and an 18-bed adult intensive care unit which has the most sophisticated equipment available for the management of critical care. In addition, there is a hybrid facility, a dedicated adult ITU/HDU and 2 large cardiac wards for peri-operative patients. There are daily consultant ward rounds of all these facilities.

At Harefield there are currently 137 beds in the Hospital: The Surgical Unit has up to 44 beds available, divided between 2 cardio-thoracic wards, and a 9-bed HDU. Of the remainder, 42 are dedicated to cardiology and respiratory medicine, 14 are adult ICU beds, and for 30 transplant patients. There is also a 10-bed private ward. There are 4 catheter laboratories, 5 operating theatres (3 Cardiac, 2 Thoracic) and one bronchoscopy room.

The Evelina London Children's Hospital is one of only two specialist children's hospitals in London and cares for more than 103,000 children and young people each year, across the hospital and in the community. The neonatal unit cares for around 1,000 babies a year, and has some of the best survival rates in the UK. Their heart services span congenital and acquired heart disease plus rhythm disturbances.

Evelina's service is a rapidly developing field of medicine with an international reputation for treating heart problems in children, caring for around 6,000 patients each year. The service:

- cares for children from before they are born (fetal life) through to childhood and into adulthood
- offers both outpatient heart services and inpatient services, with 14 dedicated inpatient beds used for planned and urgent treatment

As both RB&H and Evelina are internationally-recognised, paediatric teams and part of Guy's and St Thomas' Trust we are working collaboratively to treat patients and provide them with the best possible care. This role will be part of a RB&HH team that will be joining the Evelina. As part of the Evelina expansion plan, the vision is to create a large single academic congenital heart disease centre covering the whole lifetime of these patients from pre-birth to old age.

JOB DESCRIPTION

Location

Royal Brompton Hospital

Contract

6 months in the first instance, extendable up to 23 months.

Resident Medical Officer

Royal Brompton & Harefield Hospitals are the largest postgraduate specialist heart and lung centre in the United Kingdom and the second largest private patient business within the NHS.

Private Patient Unit

Sir Reginald Wilson ward is a dedicated private patient ward consisting of 28 single rooms. Patients requiring investigations and treatments for cardiothoracic conditions are cared for here. Expertise includes cardiology, cardiothoracic surgery and respiratory medicine.

Clinical Services - Cardiology

The Cardiology service at the Royal Brompton Hospital is a modern facility with 4 cardiac catheter labs. It has state of the art facilities for cardiac electrophysiology and complex device implantation, interventional activities and an adult congenital heart disease (ACHD) unit.

The cardiac electrophysiology services use 2 state of the art labs, which have been transformed in the last 12 months. One is now equipped with the Stereotaxis magnetic navigation system and includes the Odyssey module and DynaCT. Both EP laboratories are each fully equipped with the latest conventional mapping systems, as well as with both an EnSite™ (St Jude Medical)(incl. Verismo) and a CARTO XP™ system with CARTOMERGE™ (Bio sense Webster), and there is close clinical and academic collaboration with the world class imaging department.

The interventional service uses the two remaining cardiac catheterisation laboratories for coronary angiography (>1000 cases per annum), percutaneous coronary intervention (>1200 cases per annum) and paediatric interventional procedures. A percutaneous aortic valvuloplasty program is also ongoing, with more than 30 procedures done so far, directly coordinated by the Structural Heart Disease group.

The ACHD unit is one of the largest dedicated services of its type providing care for over 5000 patients. It fulfils all components of a supra-specialist centre and was ranked first in the UK by the patient's association with regard to the comprehensive nature of its facilities.

The unit has an active interventional and surgical program including advances interventional techniques such a trans-catheter pulmonary valve implantation. There are multiple specialist clinics covering all aspects of tertiary care both nationally and internationally. These include high-risk pregnancy, Marfan, intervention and pulmonary hypertension service. In addition, there is a prestigious imaging facility including echocardiography, cardiac magnetic resonance and cardiac CT.

Consultant Cardiologists

Consultant Cardiologists at Royal Brompton Hospital:

Dr Simon Davies, Consultant Cardiologist & Clinical Lead for TAVI and percutaneous coronary intervention

Professor Peter Collins, Consultant in Cardiology (Joint with Imperial)

Professor Martin Cowie, Consultant in Cardiology (Joint with Imperial) & Clinical Lead for Heart Failure

Dr Jonathan Clague, Consultant Cardiologist & Electrophysiologist

Dr Konstantinos Dimopoulos, Consultant in Adult Congenital Heart Disease

Dr Sabine Ernst, Consultant in Arrhythmias, Research Lead for Arrhythmias

Professor Michael Gatzoulis, Consultant in ACHD & Pulmonary Hypertensions, Research Lead for ACHD

Dr Rakesh Sharma, Consultant Cardiologist in Heart Failure

Dr Tom Wong, Consultant Cardiologist specialising in Arrhythmias, Chair of Arrhythmias

Dr Vias Markides, Consultant Cardiologist, Divisional Director Heart Division RBH

Dr Julian Jarman, Consultant in Electrophysiology

Dr John Baksi, Consultant Cardiologist in inherited cardiac conditions, Cardiomyopathy and CMR services

Dr Paul Oldershaw, Consultant Cardiologist

Dr Ali Vazir, Consultant Cardiologist in Heart Failure & Critical Care

Dr Tushar Salukhe, Consultant in Cardiac Electrophysiology

Dr Ranil De Silva, Honorary Consultant in Cardiology & Clinical Senior Lecturer (Joint with Imperial)

Dr Alex Lyon, Consultant in Cardiology (Joint with Imperial)

Dr Julian Collinson, Honorary Consultant in Cardiology (joint with Chelsea & Westminster)

Dr Stuart Rosen, Honorary Consultant in Cardiology (joint with Ealing Hospital NHS Trust)

Dr John Foran, Honorary Consultant in Cardiology (joint with Epsom & St Helier NHS Trust)

Professor Christoph Nienaber, Consultant in Aortopathy

Dr Sam Kaddoura, Honorary Consultant in Cardiology (joint with Chelsea & Westminster)

Dr John Wort, Consultant in Pulmonary Hypertension

Dr Aleksander Kempny, Consultant Cardiologist

Dr Simon Davies, Consultant Cardiologist specialising in Coronary artery disease

Cardiology junior staff at Royal Brompton Hospital:

There are 18 SpR's, a combination of Deanery trainees and trust grade posts, covering all cardiology activities including diagnostic coronary angiography.

There are 9 CT1/2's mainly attending the cardiology wards.

Research fellows provide some out of hours cover at Registrar level.

Clinical Services-Surgery

Royal Brompton is the largest centre for heart and lung surgery in the United Kingdom. Over 2,000 adults and 350 paediatric operations are undertaken each year, and it is expected that this will increase in the future. Services are offered for a wide range of acquired and congenital heart disease, together with lung and oesophageal disease. The department of surgery has the use of 6 purpose built operating theatres and an adjoining 20 bed adult intensive care unit which has the most sophisticated high dependency equipment available. A

separate paediatric intensive care unit takes all paediatric cases. There are two surgical wards providing 58 in-patient beds, including 12 high dependency beds. The hospital also has a private ward with 28 beds with its own high dependency area and an international reputation for comfort and high standards of care.

The hospital has unique expertise in complex revisional surgery, for which referrals are received from all parts of the UK. Surgery benefits from an on-site Homograft department which collects, processes and supply's tissue valves for this and other national and international units. We are a national leader in the use of homograft in the treatment of acquired and congenital cardiac disease. The surgical department has several trials on the benefits of stentless valves.

The treatment of coronary artery disease forms a major part of the surgical workload. Off pump and robotic coronary surgery are major projects of the unit.

Thoracic surgery is undertaken by 3 consultants and has an international reputation for pioneering clinical practice and research. Close collaboration with the nearby Royal Marsden Hospital, including collaboration on the surgical treatment of pulmonary metastatic disease in the largest programme in Europe, is a further example of the teamwork which is fundamental to the strength of the unit.

The work involves total care of the patient, both pre- and post-operatively and a large commitment to the Intensive Care Units, both Adult and Paediatric.

The work undertaken involves total cardiopulmonary bypass for intra cardiac procedures, closed heart cases, pulmonary and oesophageal patients undergoing reconstructive surgery and transplant surgery in collaboration with Harefield Hospital. Royal Brompton Hospital is also one of the centres recognised by the Department for paediatric cardiac surgery.

Surgical staffing

Consultant Medical Staff

Cardiac Surgeons:

Mr M Petrou
Mr U Rosendahl
Mr A De Souza
Mr R Trimlett
Ms R Yadav
Mr C Quarto
Mr G Asimakopoulos

Thoracic Surgeons:

Mr S Jordan
Mr E Lim
Miss S Begum

Adult Congenital & Paediatric Surgeons

Professor D Shore
Mr G Michielon
Mr A Hoschitzky

Junior Medical Staff

7	Senior Clinical Trust Fellows	5	Surgical Care Practitioners
8	Junior Clinical Trust Fellows	4	Peri-operative Care Practitioners
9	ST1/ST2 Basic Surgical Trainees		

DEPARTMENT OF RESPIRATORY MEDICINE

FIRM 1: Asthma & Allergy: Dr A Menzies-Gow, Dr J Hull, Dr J Szram, Prof K F Chung, Prof S R Durham, Professor P Cullinan

FIRM 2: Cystic Fibrosis: Prof D Bilton, Dr NJ Simmonds, Dr K Gyi, Dr A Jones

FIRM 3: Infection (Host Defence): Prof R Wilson, Dr Michael Loebinger, Dr P Shah (Oncology), Dr R Jose (Oncology)

FIRM 4: Lung Failure (Sleep and Ventilation): Prof A Simonds, Prof MI Polkey, Dr M Hind, Dr A Hare

FIRM 5: Interstitial Lung Disease: Prof AU Wells, Dr E Renzoni, Dr P George, Dr V Kourano

Organisation and Duties of RMOs

The private patient unit has 28 single rooms. In general, RMOs are assigned to cover all clinical services, providing medical care under Consultants' supervision for private patients within the private patient unit.

Main Duties & Responsibilities

1. To acquaint him/herself with details of patient management in discussion with the Consultants and carry this out following Consultant direction.
2. To ensure that good communications are maintained with all medical colleagues, e.g. anaesthetists, surgeons, nursing staff and paramedical departments such as physiotherapists, radiographers and ancillary staff, to the benefit of the patient.
3. To ensure that Specialist Registrars and Consultants are kept informed regarding alteration in the condition of any of their patients.
4. To ensure that all in-patient notes are kept up to date and tidy.

Duties - Professional

1. To take history, examine and record all findings of all patients admitted under the Consultant's care.
2. Carry out and arrange all relevant investigations.

3. To see and examine all patients under the care of the Consultant concerned, including those in the High Dependency Unit.
4. To arrange for the transfer of patients to other hospitals or discharge home, including completion of a discharge summary.
5. To keep the Specialist Registrar and Consultant informed of any changes in their patients' condition.
6. To communicate to a patient relative the progress of that patient.
7. To be available for emergency calls to ITU and other parts of the hospital, if required i.e. for cardiac arrest.
8. To participate in research projects which may already be in progress.
9. To participate in lecturing to other staff if required, e.g. nurses and physiotherapists.
10. To accept that occasional emergencies and unforeseen circumstances may occur, and to respond to the needs of the service when they arise.

Our Aims:

- Trust mission : To be the leading national and international centre for the diagnosis, treatment and care of patients with heart and lung disease, creating and disseminating knowledge through research and education
- Patient care : To serve our patients by working with them to determine their needs, viewing the quality of care as being of paramount importance
- Research : To translate the outcomes of research into improved patient care by evaluating new ideas and being innovative in how they are applied
- Education : To provide education and training for our staff, while encouraging teamwork and valuing each member of the team for their involvement and specialist expertise.

Core behaviours for all Trust staff

All staff will commit to:

- Act with honesty and integrity always
- Demonstrate respect for others and value diversity
- Always focus on the patient and internal and external customer
- 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 enough resources for their team and rebalance priorities accordingly
- Providing a safe working environment

PERSON SPECIFICATION

CRITERIA	D / E	Assessed by
Qualifications / Training		
Full GMC registration	E	A / I
Foundation Year 1 and 2 signed off	E	A / I
MRCP, or equivalent	D	A / I
Desire to pursue specialist training in Cardiothoracic Medicine / Surgery	D	I
Experience		
Experience in Cardiology and or Respiratory Medicine / Surgery	D	A / I
Experience in Echo	D	A / I
Advanced life support training	D	A / I
Teaching experience	D	A / I
Evidence of understanding and application of clinical care	D	A / I
Skills, Knowledge and Abilities		
Proficient and efficient handling medical problems	E	I / R
Evidence of safe sound practical procedures	E	I / R
Proven ability to work as a member of a team	E	I / R
Good interpersonal and communications skills in line with the Trust's Core Behaviours (see appendix one)	E	I / R
IT skills and computer literacy	E	I / R
Other		
Evidence of continuing professional updating	A	I
Highly motivated and clear reasons for wanting this job		I

Key: E = Essential D = Desirable A = Application I = Interview R = References

APPENDIX

HEALTH CLEARANCE

Applicants invited for interview will be asked to complete a medical questionnaire for submission to the Trust's Occupational Health Service.

NB Medical Staff who will be undertaking clinical work will be required to provide written Proof of hepatitis B immunisation and antibody status, BCG and rubella immunisations. In the absence of such evidence the post holder will not be placed on the payroll or undertake clinical work until the evidence is produced to the satisfaction of the Trust.

The Trust requires that any doctor or dentist who directs the use of x-rays for procedures such as cardiac catheterization, pacemaker insertions, orthopaedic procedures, etc, in patient investigations or administers radioisotopes to patients possesses a certificate as proof of training in accordance with the "Ionising Radiation (Protection of Persons undergoing Medical Examination or Treatment) Regulations 1988", and submits a copy of their certificate to the Medical Staffing Department. Courses to allow Trust medical staff to obtain the certificate are available through the Department of Medical Physics, Churchill.

CLINICAL GOVERNANCE

The post-holder will participate in the clinical audit, clinical effectiveness, risk management, quality improvement and any other clinical governance activities as required by the Trust, Health Authorities, and external accrediting bodies.

PERSONAL AND PROFESSIONAL DEVELOPMENT

The post-holder will be required to keep himself/herself fully up to date with their relevant area of practice. Professional or study leave will be granted at the discretion of the Trust, in line with the prevailing Terms and Conditions of Service, to support appropriate study, postgraduate training activities, relevant CME courses and other appropriate personal development needs.

MANAGEMENT

The post-holder will be required to work within the Trust's management policies and procedures, both statutory and internal, accepting that the resources available to the Trust are finite and that all changes in clinical practice or workload, or developments requiring additional resources must have prior agreement with the Trust. He/she will undertake the administrative duties associated with the care of his/her patients, and the running of his/her clinical department under the direction of the Clinical Director.

GENERAL

The post-holder will assume a continuing responsibility for the care of patients in his/her charge and the proper functioning of his/her department.

IMPORTANT GENERAL NOTE

The post-holder must take responsible care of his/her own health and safety and any other personnel who may be affected by his/her omission. Trust policies and regulations must be followed at all times.

INDEMNITY

Under NHS Indemnity, the Trust will take direct responsibility for costs and damages arising from medical negligence where it (as employer) is vicariously liable for the acts and omissions of its medical and dental staff.

Where junior medical staff are involved in the care of private patients in an NHS hospital, they would normally be doing so as part of their contract. It is advisable that junior doctors who are involved in work outside his/her employment should have medical defense cover. This includes Category 2 work, i.e. reports for insurance companies, cremation fees.