

JOB DESCRIPTION

Consultant in Gastroenterology with interest in IBD

Surgery Health Group

JOB DESCRIPTION

SALARY SCALE £77,913 - £105,042

1. INTRODUCTION

1.1 The Hull and East Yorkshire Hospitals NHS Trust has an annual budget of circa £481 million, employs over 8,000 staff and serves an extended population of 1.2 million.

1.2 Hull York Medical School – Founded in 2003

1.2.1 Hull York Medical School is a partnership between the Universities of Hull and York and the NHS in North and East Yorkshire, and Northern Lincolnshire. The school performs well in league tables in recognition of its excellent undergraduate medical curriculum and research, judged to be of high international quality in the 2008 RAE.

The first doctors to complete the HYMS MB BS programme graduated in 2008. With a distinctive and innovative approach to training doctors for the health services of the 21st century, HYMS aims to influence positively the recruitment and retention of doctors in the region and the quality of local health services.

HYMS offers a five year programme using contemporary learning and assessment methods in an integrated structure to some 140 students each year. The programme features a modern learning environment and high quality clinical attachment opportunities. There is a strong focus on learning in community settings, including primary care, and on working collaboratively with other health professionals.

Postgraduate Education

1.2.2 Since 2009, HYMS has offered postgraduate taught and research programmes. Its postgraduate research student population has grown rapidly, with around 90 MD, PhD and MSc by Thesis students registered for HYMS degrees, in addition to the research students based in HYMS Centres following University of York research programmes. HYMS currently offers three postgraduate taught programmes – a postgraduate Certificate in Medical Education, an MSc in Human Evolution, based in the Centre for Anatomical and Human Sciences, as well as a Master in Public Health in conjunction with the Health Sciences department of the University of York. Further programmes in medical education are currently being developed.

- 1.3 Chairs in Reproductive Medicine, Surgery, Psychiatry, Primary Care Medicine, Radiology, Respiratory Medicine, Vascular Surgery, Head and Neck Surgery, Oncology and Cardiology have been appointed.

2. DEPARTMENT OF GASTROENTEROLOGY

2.1 Background

This post within the Gastroenterology Department of the Hull and East Yorkshire Hospitals NHS Trust is a full time post to replace a consultant retirement. The new post will join the 11 other consultants within the specialty of Gastroenterology to augment provision of Gastroenterology, Hepatology and Endoscopy services within the trust. There are transformational changes in an already well acclaimed IBD Service and the appointee will be able to contribute to these changes through promoting the delivery of high quality service and meeting the increasing demand. While this post is primary to complement the integrated IBD service, other additional interests can be accommodated individually.

The appointee will work closely with the Integrated IBD team members including the IBD service lead and other clinicians, specialist nurses, gastrointestinal surgeons, oncologists, radiologists and pathologists within the Trust. The department sits within the Surgical Health Group which also includes Upper GI Surgery, and Colorectal Surgery.

2.2 OBJECTIVES OF THE POST

- To complement and enhance the current IBD Service within Gastroenterology Department;
- To complement and enhance the current Endoscopy Service in particular IBD endoscopy including surveillance;
- To Contribute to out of hours on-call Gastroenterology rota and acute endoscopy;
- To support the specialist IBD Service for both local and regional referrals;
- To contribute to the organisation and the development of services, focusing on rapid and effective diagnostic pathways in collaboration with colleagues in Gastroenterology, Upper GI Surgery and Colorectal Surgery.in line with a Digestive Diseases Service;
- To improve the quality of care and increase the scope for innovation;
- To support the IBD service lead, IBD clinicians and other members of IBD team
- To participate in IBD MDT meetings;
- To promote and participate in research in IBD & allied area in gastroenterology ;
- To participate in training and supervision of specialist nurses & junior doctors;
- To contribute to undergraduate and postgraduate education.

3. REQUIREMENTS OF THE POST

3.1 General Training and Qualification

The appointee must hold a CCT in Gastroenterology.

Applicants must be on the Specialist Register or within six months of being admitted to the Register for trainees if currently in a training programme within the UK. In accordance with the regulations, all other categories of doctors must be on the Specialist Register to be eligible for consideration for a Consultant appointment by the Advisory Appointments Committee. Applicants must provide information regarding their status from the GMC and/or the Royal College of Physicians at the time of application, in order for their application to be progressed further.

3.2 Experience

The candidate should have interest in IBD and additional experience in IBD is desirable for this post. The appointee must be able to demonstrate a high level of competence and clinical experience in all aspects of general gastroenterology and competence in diagnostic and therapeutic endoscopy. ERCP or EUS competencies are not required.

3.3 Research

The IBD service has strong research ethos and consultants who wish to undertake or continue a research interest within the sessional commitment in the job plan will be supported.

3.4 Personal Attributes

The appointee will have good communication skills and be able to work effectively as part of a multidisciplinary team. Motivation to provide high quality care to achieve best outcomes for IBD patients is essential. He/she will have an understanding of current NHS management structures and be aware of the roles and responsibilities that a consultant post brings.

3.5 Governance

The appointee will be expected to actively contribute to the following:

- Mortality and morbidity meetings
- Clinical governance and quality assurance
- Clinical audit
- Development and application of agreed clinical guidelines

In the discharge of these responsibilities the candidate will be expected to maintain and update his/her skills and knowledge through appropriate continuing medical education.

3.6 Revalidation

The post holder is expected to comply with requirements of revalidation along with the annual appraisal process established within the trust.

3.7 Mentoring

Formal mentoring is available for consultants by arrangement with the clinical lead. This involves a designated senior clinician. There are additional support structures in the trust.

4. DEPARTMENT OF GASTROENTEROLOGY

4.1 There are currently 11 consultant posts in the department apart from this post,

Professor. S Sebastian - Consultant Gastroenterologist and IBD Service Lead Clinician. Research Lead for IBD

Dr. MH Giaffer - Consultant Gastroenterologist with an interest in IBD. Governance Lead

Dr. M Dakkak - Consultant Gastroenterologist with an interest in Oesophageal Disease and Small Bowel Imaging

Dr. SK Khulusi - Consultant Gastroenterologist with an interest in Endoscopic Ultrasonography

Dr. JA Smithson - Consultant Gastroenterologist with an interest in hepatology and nutrition. In addition, Dr Smithson is the Medical Director for the Medicine Health Group within the Trust

Dr. G Abouda - Consultant Gastroenterologist with an interest in Hepatology. Departmental Clinical Lead

Dr. Y Khiyar - Consultant Gastroenterologist with an interest in Interventional Endoscopy.

Dr. L Corless - Consultant Gastroenterologist with an interest in Hepatology. Research Lead in Hepatology .Training Programme Director for Gastroenterology in the Yorkshire Deanery

Dr. A Staicu - Consultant Gastroenterologist with an interest in Interventional Endoscopy and Nutrition.

Dr C Raychaudhuri - Consultant Gastroenterologist with an interest in Hepatology

Dr A Nelson - Consultant Gastroenterologist

While most subspecialties are currently represented in the department, new colleagues with special expertise in most fields will augment existing expertise. Those who want to develop additional complementary areas of sub-specialisation will be encouraged. This post has a particular focus on IBD.

4.2 The Department offers services based in the two main hospitals:

4.2.1 **Hull Royal Infirmary:** This is the acute site for the Trust where GI patients and most general medical patients are admitted. It is also the site where the Gastroenterology Ward and Acute GI Surgical inpatient facility is based.

4.2.2 **Castle Hill Hospital:** This site houses the upper GI and colorectal surgery in-patient bed base. It also houses the designated cancer centre for the east coast (purpose built Queens Centre for Oncology). The Daisy Research Centre and the Regional Training Centre for Endoscopy are also on this site.

4.3 IBD Service

The Hull IBD Service has a national and international reputation for innovative models of care, integrated clinical and research team delivering high quality service and excellent patient outcomes. The service has 2 FT gastroenterologists dedicated to IBD and this post will replace the third clinician in the service. 2 colorectal surgeons with special expertise in IBD surgery including pouch surgery are also core members of the IBD service. The service also has 4 FT IBD specialist nurses, an IBD service administrator and nominated members from other allied services such as paediatric gastroenterology, stoma care, dietetics, obstetrics, rheumatology, ophthalmology and dermatology. There is close collaboration with Crohn`s and colitis UK and there is a patient panel. There are 5 dedicated IBD clinics across 3 hospital sites per week and there are dedicated IBD endoscopy lists. In addition there is an IBD transition service with an adolescent clinic conducted out of hours. The acclaimed Immunomodulatory Infusion Unit (IMIC) provides comprehensive assessment and monitoring of patients on biologics and clinical trial medications. In addition there are 2 nurse led clinics, a rapid access clinic, a telephone clinic and a telephone and internet helpline service. There is a weekly IBD MDT. The unit has published its 3rd 5 year strategy with

transformational changes to augment the service further and the additional posts including this post is part of the strategy.

The IBD Unit has long standing commitment to clinical and translational research. The clinical and research teams work in an integrated model providing opportunity for all IBD patients to participate in research. The research is supported by 3 dedicated IBD research nurses, a clinical trials manager and a clinical trials assistant. The unit has been awarded grants in excess of 750K in the last 2 years. In addition to the unit led trials, we also collaborate with a number of leading national and international researchers in IBD in multicentre trials. There is strong track record of multicentre trials under the umbrella of auspices of European colitis and Crohn`s Organisation (ECCO) such as EPICOM, Epi-IBD, ICARE. The department has close collaboration with clinical trials unit in Sheffield with 2 co-applicant NIHR grants. The unit has published 43 papers in last 3 years including many in high impact journals. The unit staff are key players in research consortia and organisations such as BSG IBD CRG, International IBD genetics consortium, ENIGMA group, EPI-IBD Group etc. In addition there is close collaboration with Hull York medical school and the University of Hull.

4.4 Endoscopy

4.4.1 Hull Royal Infirmary: There is a new purpose-built three-room modern Endoscopy unit with its own x-ray screening.

4.4.2 Castle Hill Hospital: The unit on this site has five procedure rooms. The regional EUS is at this site and there is an adjacent x-ray screening facility.

4.4.3 Both sites are JAG accredited.

4.4.4 Both sites are accredited for National Bowel Cancer Screening.

4.4.5 Bowel Scope: The department has begun the roll out of the flexible sigmoidoscopy screening programme (Bowel scope) from December 2016.

4.4.6 East Yorkshire School of Endoscopy (EYSE)

The school is situated on the Castle Hill site and is a JAG accredited Regional Training Centre for Endoscopy. The school has been providing training for doctors, nurses and non-medical endoscopists since 1995. There is a dedicated school manager and local faculty which run about 20 courses a year. The courses included basic upper and lower GI endoscopy, Therapeutic endoscopy, Train the trainers, PEG placement, EUS, introduction to ERCP and scope simulation. The School also runs a number of courses internationally. The vision is “to provide high quality endoscopy training in a relaxed friendly atmosphere”

4.5 Workload

4.5.1 The Department provides Gastroenterology service to a local population of 600,000. It offers sub-regional services in certain areas such as Inflammatory Bowel Disease, Oesophageal Function testing, Capsule Endoscopy, Endoscopic Ultrasonography, Therapeutic Endoscopy and Hepatology to a wider population of 1.2 million. The IBD service currently has over 4000 patients in its books and over 500 patients on biologic therapies. There are 5 separate IBD clinics across the three hospital sites. The IBD service

has developed a 5 year strategy in an integrated model to provide high quality personalised care underpinned by research and the appointee can contribute to the delivery of this

- 4.5.2 More than 16,000 GI endoscopic procedures are carried out annually in the trust and the numbers are likely to increase.
- 4.5.3 The consultants in the Department provide a comprehensive service for the population including out of hours on call for emergency endoscopy. This is currently on a 1 in 8 rota, remunerated with 1.5 PA.
- 4.5.4 There is no GIM on call commitment to this post.
- 4.5.5 Multi-Disciplinary Teams
There are currently weekly upper GI cancer, weekly pancreato-hepatobiliary cancer, weekly lower GI cancer, weekly IBD and Hepatology MDTs.

4.6 Current Staffing

In addition to the consultants, there are 3 nurse endoscopists, 4 IBD specialist nurses in IBD, 3 hepatitis/hepatology specialist nurses, and 2 nurses in nutrition. There are 3 speciality doctors, 5 speciality registrars, 2 senior house level posts (currently CT1) and 3 foundation year trainees. The IBD clinical and research teams are integrated.

Other facilities:

- 4.6.1 The GI Physiology Service is based at CHH with both upper and lower GI function suites. Capsule endoscopy is also provided from CHH.
- 4.6.2: IMIC: This is a dedicated immunomodulatory infusion unit for biologic therapy and clinical trial medications in IBD.

CME/Training:

- 4.6.3 There is a Grand Round for 2 hours each week for all medical specialities. Tuesday afternoons are primarily designated for departmental meetings including clinical and management discussions. Wednesday is a weekly meeting with the radiologists and surgeons and a weekly journal club. The regional Ridings Gut Club which is affiliated to the BSG meets twice each year and its membership includes GI clinicians from Grimsby, Scunthorpe, Pontefract, Pinderfields, Scarborough and York, in addition to Hull.
- 4.6.4 One of the consultants in the department is the Training Programme Director for Gastroenterology Training in Yorkshire and the Humber (LC).
- 4.6.5 One of the consultants in the department is the UK Specialist Lead for the Specialist Certificate Examination in Gastroenterology (MD).

4.7 Research

There is an active research department which has 2 CRN research nurses, 2 IBD research nurses, 1 IBD Clinical Trials manager and a clinical trials assistant among its staff. The IBD research team is integrated with the clinical service. There is facility for bench space in the Daisy research building and the department has active collaborations with the University of Hull, Two clinicians from the department are CLRN speciality leads in gastroenterology (SS) and hepatology (LC). The

department is actively involved in research with CIs and PIs in a number of national and international studies and UKCCRN portfolio studies recruiting over 2300 patients in last 2 years. Many large scale multinational and multicentre studies are co-ordinated Abstracts and papers continue to be generated by the research carried out in the Department. The department clinicians are involved in international consensus guideline groups such as ECCO Crohn' s disease and ECCO endoscopy guidelines. The appointee will have opportunities and support to pursue research interests in the department and also in collaboration with other departments in the Trust and in the University.

6. RELATIONSHIPS WITH OTHER SERVICES

6.1.1 Surgery

There are excellent working relationships with the 8 Upper GI surgeons and the 6 Lower GI surgeons, GI pathologists and the clinical and medical oncologists. The Digestive Diseases Service has facilitated closer working with the development of joint clinics particularly in IBD, audit pathways and a combined clinical governance structure. Several GI surgeons contribute significantly to the provision of the endoscopy service along with a number of surgical nurse endoscopists. There are regular weekly meetings.

6.1.2 Paediatric Gastroenterology

There are close links with paediatric gastroenterology service. The department has a nationally acclaimed transition service and continues to be model for transition care in the region. There is dedicated adolescent and young persons clinic in gastroenterology.

6.1.3 Radiology

There is an excellent radiology department with 3 radiologists who have specific gastroenterology expertise. They provide a full range of imaging modalities including CT, PET, MRI, Scintigraphy and intervention radiology. They also take part in the provision of the EUS service. There are close links including an MDT with the vascular radiologists, who offer specialist tertiary services including TIPSS and TACE.

6.1.4: Infectious Diseases

The specialist Hepatitis Service is run in collaboration with the department of Infectious Diseases. Hull is the lead centre for the Hull and North Yorkshire Network for the provision of specialist viral hepatitis treatment, also encompassing York, Grimsby and Scunthorpe Hospitals and a range of community and prison clinics.

6.2 Medicine

Although the department sits in the Surgery Health Group, there are also strong links to the Medicine Health Group, and we form a vital part in the audit, research, clinical and educational activities. **There is no GIM on call commitment for this post.**

6.3: There is a hospital wide Nutrition Team. The team provides a focus for good relationship with pharmacists and dieticians. The Nutrition team has developed a national model for care, and is integral to the Intestinal Failure Service.

6.4 There are good contacts with speech therapists through the swallowing service and also with physiotherapy and occupational therapy through general medicine.

6.5. IBD Network
The IBD service in Hull is one of the key partners in the Yorkshire & Humber IBD Network which has enhanced quality of care by partnership working in service development, training and research.

6.6 Hepatology Network

6.7.1 We are part of a hub and spoke network for Hepatology with Leeds Liver unit and other hospitals in West Yorkshire.

6.7.2 Leeds provides the local transplant service and we have excellent working relationships with them.

7. WORK PROGRAMME

7.1 The timetable is flexible and subject to negotiation, and can be modified to reflect the special interests and expertise of the appointee.

7.2 We moved to a new model of working a few years ago, separating acute and elective work. This has universally been applauded for both improving our job quality and improving in patient care and length of stay. The dedicated gastroenterology ward has 27 beds including adequate facilities for managing acute IBD patients and HOB for unstable GI bleeding & sick liver patients.

7.3 We work two different timetables, one on the ward for a two-week spell and a second timetable when off the ward for 14 weeks.

8. PROVISIONAL TIMETABLE

8.1 The provisional work programme off the ward is as follows:

	AM	PM
Monday	Endoscopy	SPA
Tuesday	IBD Clinic	IBD MDT
Wednesday	SPA/Joint IBD Clinic	IBD clinic
Thursday	Research /SPA	Endoscopy
Friday	Admin	Research meetings/CPD/Admin

This will be an average of 7 PA of DCC + 1.5 PA for on call commitment and 1.5 SPA . Additional PAs to a maximum of 12 PA could be negotiated, including additional SPA for specific roles.

8.2 The work programme on the ward (2 weeks in 20 week cycle) is as follows:

	AM	PM
Monday	Ward round	
Tuesday	Ward round	Unit meeting/SPA
Wednesday	Ward round (hand over day)	Acute Endoscopy
Thursday	Ward round	SPA
Friday	Ward round	CPD/Acute Endoscopy

This will be 7 PAs of DCC plus 1.5 for on call commitment plus 1.5 SPA for the 2 weeks of ward commitment, and there are in-reach and review services on both sites when needed. Emergency GI cases are discussed with the consultant on the ward and allocated to elective lists when possible. Out of Hours on calls are managed by a separate rota and not by the consultant on the ward.

8.3 The basic job plan is for annualised 10 PAs (8.5 DCC including on call commitments and Medicine commitment as detailed above, plus 1.5 SPA (including CPD). The appointee may be invited to provide up to two additional clinical PAs (to make up a maximum of 12) if required by the Trust, including undertaking additional SPA role(s). There is a commitment to on call for Gastroenterology and Endoscopy, currently 1:8 (Category A). Contribution to the medical take is approximately 1:32 (post take ward round replaces other fixed commitment that session).

8.4 Duties other than those clinical duties specified will be in accordance with the Job Plan agreed between the Appointee, the present Consultants and the Chief Executive. The Job Plan allows time for Administration, Teaching and Medical Audit.

8.5 Participation in audit/appraisal and CME is mandatory under clinical governance/GMC guidance.

8.6 All consultants may be required to work on any of the Trusts sites and across the seven day period where necessary.

8.7 Secretarial support and appropriate office accommodation and IT facilities will be provided.

9. THE HOSPITALS

9.1 The Trust comprises of two main hospital sites and operates Outpatient Clinics from various peripheral sites.

9.2 Hull Royal Infirmary (709 beds)

9.2.1 This hospital is the major Acute hospital in East Yorkshire and serves a population in excess of 600,000. It has the only Accident and Emergency department and the following specialities:-

Cardiology	Neurosurgery
Clinical Haematology	Neurophysiology
Diabetes/Endocrinology	Ophthalmology
ENT & Head & Neck Surgery	Oral Surgery & Orthodontics
General Medicine	Orthopaedics
General Surgery & Vascular Surgery	Paediatric Medicine
Gastroenterology	Paediatric Surgery
Medicine for the Elderly	Plastic Surgery
Neurology	Renal Medicine
Obstetrics and Gynaecology	Rheumatology

9.3 **Acute Admissions Unit** - The Acute Admissions Unit is situated adjacent to the A & E Department. The Unit has promoted greater integration of the General Medical teams with the Department of Medicine for the Elderly, allowing medical and nursing staff to cope better with the growing pressures on emergency admissions. Close working relationships are established between the Admissions Unit and the A & E Department.

9.4 A ten bedded Intensive Care Unit and a ten bedded High Dependency Unit is in close proximity to the 9 main Operating Theatre complex. This hospital has a separate Neurosurgical Intensive Care and Neurosurgical High Dependency Unit and a Cardiac Monitoring Unit.

9.5 **Women's and Children's Hospital** - This development opened in March, 2003 and provides maternity wards and clinics, an antenatal day unit, a delivery suite, a neonatal unit with special and intensive care, theatres, an early pregnancy assessment unit, 22 gynaecology beds, a gynaecology day surgery unit, gynaecology day care and outpatients' department, a sub-fertility unit, an ultrasound department, and a children's outpatient department.

9.6 **Eye Hospital** – The Hull and East Yorkshire Eye Hospital was completed in October, 2002, and provides three operating theatres, a pre-assessment suite, a twelve bed inpatient ward, administrative space and a seminar room.

Phase two was completed in April 2011 and provides sufficient out-patient space for Paediatric and adult outpatient clinics, along with supporting facilities such as Orthoptics and optometry facilities, Lucentis treatment areas and paediatric outpatients.

9.7 **Castle Hill Hospital and Queens Oncology Centre (645 beds)**

9.7.1 The hospital is one of the two major hospitals on North Humberside. Clinical Services currently on site include:

Cardiology	North Humberside Breast Screening Service
Cardio-Thoracic Surgery	Oncology
Gastroenterology	Orthopaedics
General Medicine	Pain Service
General Surgery	Plastic Surgery
Genito Urinary Medicine	Rehabilitation
Haematology	Rheumatology
Infectious Diseases	Thoracic Medicine
Medicine for the Elderly	Urology Service

- 9.8 A 20 bedded Critical Care Unit is located in the new Cardiac building.
- 9.9 The Academic Medical Unit led by Professor Alyn Morice and the Academic Surgical Unit are based at this hospital

9.10 East Riding Community Hospital

Outpatients and minor injuries only. This is a community hospital which currently houses a GP unit, minor injuries and out patient departments. The X-Ray Department has one general purpose room. Plans are at a developed stage for a new hospital which is to be built on this site

10. PERFORMANCE RATINGS

- 10.1 Following the 2016 CQC inspection the Trust has an overall rating of requires improvement. The report has identified improvements across a range of services including Surgery, Emergency Care and End of Life Care. The report also highlights improvements in culture.

11. FUTURE DEVELOPMENTS AND SERVICE IMPROVEMENTS

- 11.1 Work is now complete on three major developments at the Castle Hill Hospital site.
- 11.2 A £45m cardiac and elective surgical facility opened to patients in February 2009. This has significantly increased capacity at the Trust and is helping the Trust contribute towards meeting government targets, principally for revascularisation and waiting times.
- 11.3 The £67m Castle Hill Cancer Centre development became operational in August, 2008. This unique building provides treatment and palliative care for patients with cancers and blood disorders. It serves a wide catchment area from Scarborough in the north, Scunthorpe and Grimsby in the south and Goole to the west.
- 11.4 The £12m Medical Research and Teaching Centre is a part charity funded facility. The building opened in June 2008 and provides day surgery facilities for the Trust, accommodation for the Hull York Medical School (HYMS) and medical research and teaching facilities.

12. MEDICAL EDUCATION CENTRE / CLINICAL SKILLS FACILITY

- 12.1 Medical Education at Hull and East Yorkshire Hospitals NHS Trust comprises of the Medical Education Centre (MEC), Hull Institute of Learning and Simulation (HILS) and the Clinical Skills Facility (CSF). The department is accessed by all health care professionals and offers a broad range of clinical training and support. These facilities are easily accessible for both internal staff and external visitors due to its ideal location on the Hull Royal Infirmary site. The Medical Education Centre provides a modern, flexible arena in which professionals can train in a supportive environment. The Centre contains a 190 seat auditorium and three large seminar rooms which are fully equipped with up to date audio visual presentation equipment and dual projection facilities. There is an extensive Resource Centre with a sister facility at Castle Hill Hospital. The Resource Centres have holdings of over 10,000 texts and receive 72 journals on weekly or monthly receipt, together with some Video and DVD items. Access is available to the numerous online resources available from the Resource Centres' PCs. The Resource Centres have 24/7 access via a swipe card system.

- 12.2 The Clinical Skills Facility is also able to offer practical skills rooms including ward areas, operating theatre and simulation suites. Each room has been built with a high level of flexibility and all can be customised to the user's needs. The Clinical Skills Facility has fast become an established and highly reputable centre of excellence in Clinical Skills training for all healthcare professionals locally, regionally and nationally.
- 12.3 The associated department at Castle Hill Hospital includes a 70 seat lecture theatre with modern audio-visual equipment.
- 12.4 Miss Helen Cattermole is the Director of Medical Education for the Trust and is responsible for the education of medical staff and the running of the Medical Education Centre and the Clinical Skills Facility. Dr Makani Purva is Deputy Chief Medical Officer and Director of Simulation for the Hull Institute of Learning and Simulation. Dr Marina Flynn is the Deputy Director of Medical Education and Dr Dave Wright is the Deputy Director of Simulation.
- 12.5 There is a commitment within the Trust for Locum Consultant staff to participate in continuing professional development.

13. APPRAISAL/CONTINUOUS PROFESSIONAL DEVELOPMENT

- 13.1 The Trust is committed to supporting the requirements for continuing education and professional development is laid down by the Royal Colleges. A personal development review will be undertaken by the Clinical Area Lead annually and objectives agreed. Appraisal is carried out according to GMC guidance in preparation for revalidation.

14. OTHER MEDICAL INFORMATION

- 14.1 Local professional bodies include the Joint Hospitals Medical Staff Committee whose membership comprises of all consultant staff and top-grade scientists; the Hull Medical Society and a branch of the British Medical Association.

15. RESEARCH AND DEVELOPMENT

- 15.1 There is a Research and Development Facilitator who promotes and facilitates NHS research in the area.
- 15.2 The Service has an admirable record of research publications and international Presentations, academic staff have attained MD degrees in the last year.

16. RELATIONSHIPS BETWEEN CONSULTANTS, CHIEF EXECUTIVES AND TRUSTS

- 16.1 The management of hospitals and other health care facilities is the responsibility of Trust Boards discharged through their Chief Executives, who have authority to decide policy commensurate with their responsibility. Consultants have a primary role to provide clinical services to patients referred to them.
- 16.2 The Consultants have a responsibility to the Chief Executive and a commensurate authority in respect of the reasonable and effective use of such resources and staff as they use and influence. The successful candidate will be expected to operate within the agreed speciality budget and workload target. There is in addition a collective responsibility falling on all Consultants to consult with their colleagues and, hence, to co-ordinate their individual

commitments in order to ensure that the particular clinical services with which they are involved operate effectively.

17. ADDITIONAL INFORMATION

- 17.1 Hull is one of the country's main ports with the advantage of closeness to the rest of the European Community.
- 17.2 There are an increasing number of direct inter-city trains to London and regular services to other major centres. The M62 motorway provides fast communications within Yorkshire and links up directly with the A1 and M1 North/South motor routes. Humberside Airport provides a reliable service to several European cities. There is easy access to nearby pleasant countryside, dales, moors and first class coastal resorts. The City of York, with its Minster and many other attractions, including the Jorvik Centre, can easily be visited in a day
- 17.3 East Yorkshire has forty miles of spectacular coastline from Spurn Point in the south to Filey Brigg in the north. Spurn Point has the only full-time lifeboat crew in the country and is a bird watchers' paradise. Nearby is Hornsea Mere, a huge freshwater lake and RSPB reserve. Hornsea also has a famous local pottery and an award winning Museum of Village Life.
- 17.4 Both the City of Hull and the nearby market town of Beverley are ancient Boroughs of considerable interest. Hull was very much rebuilt after heavy bombing in World War II and is, therefore, a modern as well as an historic City. There is an attractive Yacht Marina and an international ice rink and there is a good choice of theatre and concert programmes, at both the New Theatre and Spring Street Theatre within the city centre.
- 17.5 Beverley has a beautiful medieval Minster, fine Georgian and other period houses and cobbled market square. The restored Dominican Friary, dating from the 14th Century, and nearby racecourse are notable attractions.
- 17.6 The Humber Bridge links the North and South Banks of the Humber, which have a combined population of some 900,000 people.
- 17.7 There are good education facilities, both private and state, for school age children and, in addition to the University of Hull, there is a second university, the University of Lincoln, based in the area.
- 17.8 Several new projects have been completed in the City, to ensure that Hull is recognised as one of the UK's Top 10 cities. These include the Deep, (a Marine Science and Visitor Centre), a £43 million Stadium and the redevelopment of the Ferensway shopping area where the St Stephen's Shopping Mall is now located.

In November 2013, Hull was named the UK City of Culture 2017, after facing tough competition from 11 great cities. For further information relating to Hull City of Culture 2017 visit <http://www.hullcc.gov.uk/2017hull>

Hull was named as one of the best cities to live in Britain as part of the Times best cities list 2014.

17.9 Housing locally is generally cheaper than in most other parts of the country. There are many villages with good housing/facilities surrounding Hull and within the required travelling time.

18. RESIDENCE

18.1 The post holder must live within 30 minutes travelling time of base hospital.

19. CONDITIONS OF SERVICE

19.1 Any Consultant who is unable, for personal reasons, to work full time will still be eligible to be considered for the post. If such a person is appointed, modification of the job description will be discussed on a personal basis following consultation with colleagues and the Chief Executive.

19.2 Appointment under the Department of Health Flexible Careers Scheme will be in accordance with the provisions of that scheme and the associated guidelines for Trusts (08/05/02).

19.3 It is a legal requirement for all doctors to be on the Specialist Register before they can take up a Consultant appointment.

20. TRUST SAFETY POLICIES AND PROCEDURES

20.1 You are responsible for your own health and safety and must co-operate with management to achieve safer work processes and work places, particularly where it can impact on others.

20.2 You are to ensure suitable and sufficient equipment is provided and the adherence to Trust safety policies, to sustain the health and safety of staff, patients and visitors, to areas within your remit.

20.3 You are required to review all risk assessments periodically and particularly when staffing and/or equipment changes, monitoring the effectiveness of any control measures implemented.

20.4 You are to ensure suitable and sufficient equipment is provided to sustain the health and safety of staff, patients and visitors to areas within your remit.

20.5 In addition to the Trust's overall responsibilities under the Health Act Code of Practice for the Prevention of HCAI 2006 for your safety, you have a personal responsibility to ensure that your work adheres to this Code in the delivery of safe patient care within the organisation.

21. EQUAL OPPORTUNITIES

21.1 The Trust is an equal opportunities employer with family friendly working practices available.

22. VISITING ARRANGEMENTS AND EXPENSES

22.1 Arrangements to visit and meet the Chief Executive to be made through Tina Smallwood, HR Manager (01482) 816773. Shortlisted candidates who visit Hull for this purpose, or at the specific request of the Management, will be granted travel and appropriate subsistence

expenses on that occasion. In the case of candidates travelling from abroad, travelling expenses are normally paid only from the point of entry into the United Kingdom.

23 ACHIEVING A BALANCE

23.1 The Strategic Health Authority is committed to this nationally agreed initiative and will, in accordance with "Plan for Action" be reviewing and adjusting the numbers and disposition of hospital doctors. This will involve an increase in Consultant staff and a reduction in some of the training grade staff. The numbers and grades of junior staff currently supporting this post are, therefore, not guaranteed and may be changed as the plan develops.

24 PRESENTATION

24.1 Shortlisted candidates for Consultant appointments are required to deliver a 10 minute presentation on a given topic as part of the selection process.

25. CHIEF EXECUTIVE

25.1 The Chief Executive is Mr Chris Long (01482) 675783.

26. CONSULTANT CONTACT

Informal enquires welcome and please contact

S Sebastian, IBD service lead (shaji.sebastian@hey.nhs.uk)

Dr M Giaffer, consultant gastroenterologist with interest in IBD (Mustaffa.Giaffer@hey.nhs.uk)

Dr George Abouda clinical lead in gastroenterology (George.Abouda@hey.nhs.uk)

27. PROPOSED DATE OF INTERVIEW

27.1 TBC

28. CLOSING DATE FOR APPLICATION

28.1 TBC