## **BOLTON HOSPITALS NHS TRUST**

## Appointment of Consultant Cardiologist with special interest in Cardiac Imaging

## Particulars of the Post

## 1. Introduction

Bolton NHS Foundation Trust serves a population of approximately 310,000. It administers services to an area coterminous with that of Bolton Metropolitan Borough Council. The population of Bolton is multi-racial and multi-cultural and very diverse.

Royal Bolton Hospital currently has 780 beds and has been developed as the District General Hospital for the area.

A major development at the Royal Bolton Hospital site was completed in 1996. This includes 290 Acute Beds, Operating Theatres, Dedicated Endoscopy Unit, Intensive Therapy, Coronary Care and Adult Day care Investigation and Surgery Units, Accident and Emergency, Radio diagnostic and Out-Patient Departments.

Bolton Hospitals NHS Foundation Trust recently received a 'good' rating form the CQC.

The trust has recently completed the build of a brand new 19-person Clinical Assessment Unit to help deliver Same Day Emergency Medicine principles and ensure patients aren't admitted to hospital unnecessarily. The trust is also currently working on an estates master plan for the whole hospital site that includes provision of the Bolton College of Medical Science-building work has already commenced on this project, and the building of a diagnostic hub on site.

Bolton is one of the largest towns in the North West of the United Kingdom, situated within the boundaries of Greater Manchester. Within an hour drive you can be either in the idyllic Lake District or the Yorkshire Dales. Bolton is situated only 12 miles from the centre of Manchester and 30 miles from Liverpool. The town is well-served by motorways, M61, M62 and Manchester International Airport.

The general environment in Bolton and the surrounding countryside is a pleasant one, with good residential areas offering a wide choice of housing styles at competitive prices. Shopping and social facilities are first rate. Bolton offers a wide range of schooling for all ages of children, (including state, independent and grant maintained schools) for teenagers and adults, Bolton College and Bolton Institute of Higher Education have a good choice of classes and extra activities. Bolton Independent Schools are consistently highly placed in the national league tables.



The West Pennine Moors lend themselves to many outdoor pursuits valchuralstion walking, climbing and cycling. There are also opportunities for fishing, golf and sailing.

## 2. The Bolton Cardiology Department

The Cardiology Team has expanded over the last 10 years and provides a comprehensive cardiology service to the local population.

The Cardiology Team currently has:

- 6 Cardiology Consultants participating in the inpatient workload and on call and the current consultant expansion will take this number to 8.
- 2 additional Consultants undertaking outpatient work only
- 2 Specialist Registrars (on the North West Cardiology training programme)
- 1 IMT1 doctor and 1 IMT2 doctor
- 1 Full time and 1 part time FY1 doctor and 1 FY2 doctor
- GPST2 trainee 2 days /week
- Clinical fellow

In addition, there are 14 Specialist Nurses caring for patients with cardiac problems. There are 3 chest pain nurses based in the emergency department, 4 nurse specialists who run nurse led clinics for post MI secondary prevention, angina and 7 Heart Failure Specialist Nurses.

### 2.1 Inpatient overview

The department operates a state of the art 10-bedded Coronary Care Unit which opened in December 2003 and is under the supervision of the cardiologists. There is one dedicated Cardiology ward (C1) with 25 beds which receives 'step down' patients from the CCU and cardiology admissions from the medical admissions wards

### 2.2 Outpatient overview

It is expected that you would undertake the equivalent of one new and one follow up outpatient clinic per week covering a range of general cardiac conditions.

## 2.3 Cardiology Diagnostics

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The Cardiology Department has skilled technicians who provide an ECG service for the hospital along with 24 hour ambulatory ECG & BP recording, ECG event monitoring, exercise testing, echocardiography and tilt table testing. Rapid Access Clinics for angina and heart failure are well-established, supported by Technicians and an outpatient Cardiologist. Strict criteria for referral to this clinic are in place. A Nuclear Cardiology service began in Bolton in May 2009 and both TOE and



stress echocardiography are performed on site. Secondary Prevention Sand datio Cardiac Rehabilitation programmes are well established for patients who have had a myocardial infarction. The service is principally nurse led but has physiotherapy input and can access supervised exercise at a local Leisure Centre. There is also a nurse led Angina Clinic. The building work currently underway on the trust site to develop a diagnostic hub will include CT facilities which will include the ability to develop on site CT Coronary angiography.

#### 2.4 Integrated Heart Failure Service

In 2018 CCG Transformation funding allowed the established cardiac rehabilitation specialist nurse team to grow and deliver an integrated heart failure service for Bolton. This saw the evolution of the service develop from a single hospital based heart failure nurse to a team of 7 nurses providing an integrated heart failure service providing hospital, hospice & community clinics based in local GP surgeries and offering home visits to our patients. This has also included wider MDT working with our clinical psychology & physiotherapy team to deliver a heart failure rehabilitation programme. Weekly MDTs are held with Palliative care and Heart Failure Cardiologists and HFSN Team. A monthly Renal/Heart failure MDT is carried out remotely with Prof Darren Green Nephrologist at Salford Royal Foundation Trust.

The HFSN team has a large case load and a business case is in progress to expand the team with additional community nurses to address unmet need within the wider population of patients with heart failure from all causes not just those with Heart Failure and reduced ejection fraction.

#### **2.5 Greater Manchester Integration**

Diagnostic Coronary Angiography is undertaken in the North West Sector Catheter Laboratory based at Wigan Infirmary. DGH angioplasty started in the district lab in 2008. The current waiting time for coronary angiography is around 4-6 weeks and there are good relations with the Cardiology Departments at Manchester Royal Infirmary and at Wythenshawe. There is a well-established 'Treat and Transfer' programme for patients with ACS and NSTEMI to access inpatient angiography and revascularisation. Primary PCI for Bolton patients with acute STEMI started in February 2011. One of the Cardiac Surgeons from Manchester Royal Infirmary holds a fortnightly out-patient clinic in Bolton.

Royal Bolton Hospital houses the NW Sector Pacing Lab which was opened September 2009. The Lab provides bradycardia pacing for Bolton patients and complex device implantation for patients from Bolton, Salford and Wigan. A new image intensifier with flat plate detector was installed about 18 months ago. Pacemaker, CRT and ICD clinics are held daily and are predominantly physiologist led. There is a monthly CRT optimisation clinic run as a combined



clinic with a physiologist, HFSN and Device consultant. Remote monitoring and dation Trust response to high risk alerts for our complex devices is standard practice and supported by our cardiac physiologist and HFSN Team.

## 3 The Post

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A specialist interest in cardiac imaging is required. This is a substantive post currently held by a locum consultant with special interest in cardiac imaging at Royal Bolton and will be complimented by the appointment of an additional imaging consultant to support the development of CT Coronary angiography on site whilst ensuring that functional imaging is completed in a timely fashion. You will join five substantive existing Consultant Cardiologists with interests in pacing and devices (2), advanced cardiac imaging (1) and cardiac failure (2) with recruitment plans for another full time substantive imaging consultant appointment (ie a total of 3 imaging consultants) and another consultant with a complimentary subspecialty interest. In addition to those consultants providing an inpatient service, we have a full time consultant supporting the outpatient service and rapid access clinics and another part time consultant supporting general cardiology and device therapy.

Full secretarial support will be provided with office accommodation in the Cardiac Investigation Department equipped with computer and internet access.

The person appointed will work within the Acute Adult Division. Attached at Appendix 2 are details of the Consultant physicians within the Division.

A new 10-bedded Coronary Care Unit, which is under the supervision of the cardiologists was opened in December 2003. You and the present cardiologists will run an integrated ward-based service. There is one dedicated Cardiology ward with 25 beds which receives 'step down admissions from the CCU and Cardiology admissions for the Acute Medical Receiving Unit. You will be responsible for the care of patients admitted to the CCU on the days that you are on call.

Cardiology on-call rota will be 1 in 7 reducing to 1:8 once recruitment is complete. There will be no on-call for GIM.

You will be responsible for the care of patients admitted to the CCU on the days that you are on call.

You and the present cardiologists will run an integrated ward-based service for CCU and C1 ward and will undertake new and follow-up outpatient clinics. The ward based service is supported by frailty input.





It is anticipated that the post holder will have a background in general cardiologydation and a specialist interest in cardiac imaging specifically, transthoracic, transoesophageal and dobutamine stress imaging and cardiac CT but other imaging experience such a CMR may be considered although it must be recognised that this will not be delivered on site in Bolton.

There are good relations with the Cardiology Departments at Manchester Royal Infirmary and at Wythenshawe Hospital. There is a well-established 'Treat and Transfer' programme for patients with unstable angina and NSTEMI to access inpatient angiography and revascularisation. One of the Cardiac Surgeons from Manchester Royal Infirmary holds a fortnightly out-patient clinic in Bolton.

The Acute Medical Receiving wards (CDU, D1 and SDEC), receive all acute medical admission referrals from General Practitioners and from the Accident and Emergency Department and provide for early assessment of all patients by the Duty Consultant or Specialist Registrar. Patients with acute cardiac problems may go directly to the Coronary Care Unit from A&E. The Clinical Decisions Unit, Ward D1 and SDEC (Same day Emergency Care Unit) are covered by physicians with special interest in emergency medicine plus a "Physician of the Day" on-call system is in operation. The post holder will not be expected to participate in the general medicine on-call rota but they are expected to review cardiac patients on CDU, D1 and SDEC on the days that they are on call for Cardiology. The average number of acute medical admissions is 40-50 per day. There are 3-8 cardiology referrals per day.

### **3.1 Sessional Allocation**

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It is assumed that as a whole time consultant, the individual will undertake 10 programmed activities inclusive of 1 PA for providing a Cardiology on call service. An additional PA, subject to negotiation may be available. The sessions are allocated as follows; however they should be used flexibly.

	PAs
Research/Clinical Governance/CME	2
Out-patient Clinic	2
Speciality sessions	2-3
Ward based activity	1
Clinical Admin	1-2
On-call	1

In respect of out-patients the target for attendances are as follows:-

5

New patients: 8-10 per week Follow-up patients: 12-16 per week.



The final job plan will be agreed following appointment.

#### 3.2 Clinical Responsibilities/Administration

- You will be contracted for continuing responsibility for the care of patients in your charge and for the proper functioning of your clinical department. You will be required to undertake the administrative duties associated with the care of your patients and the running of your clinical department.
- b. To maintain a special interest in cardiac imaging and general cardiology.
- c. To collaborate with incumbent colleagues in developing innovative working practices such as flexible working week, out-reach clinics and community-based activity as appropriate.
- c. To participate in the Cardiology on-call rota with consultant colleagues.
- d. You will be expected to provide emergency cover on reciprocal basis for consultant colleagues' periods of leave.
- e. The professional supervision and management of junior medical staff.
- f. Responsibilities for carrying out teaching, examination and accreditation duties as required, and for contributing to post-graduate and continuing medical education activity, locally, regionally and nationally.
- g. The Trust supports the requirements for Continuing Professional Development as laid down by the Royal College of Physicians and is committed to providing time and financial support for these activities.
- h. You will be encouraged to develop and continue your own research interests and to join in the research activities of the department/Trust.
- i. Managerial, including budgetary responsibilities where appropriate. These include membership of the Acute Adult Division.

#### 3.3 Teaching



The Trust has been approved by the University of Manchester for the teaching of dation medical students in all 3 clinical years. The department is fully committed to training for the membership of the Royal College of Physicians.

You will participate in the Postgraduate Education Programme, for both Hospital Medical Staff and Primary Health Care Workers. You will also be involved in the teaching of 3rd, 4th and 5th year medical students from the University of Manchester Medical School. Contribution to Research programmes is encouraged and regular clinical audit involvement is essential.

General Practice trainees may attend the clinics as and when required.

There is an excellent Postgraduate Centre which houses the library and the Education Centre and the building is underway for the New Bolton College of Medical Sciences.

### 3.4 Clinical Research

Opportunities for clinical research exist. A great many projects are undertaken without the need for additional resources, but if funds are required for the purchase of special equipment or for temporary assistance with staff, financial support may sometimes be obtained locally. Alternatively, applications for research grants may be made to the Region through its Clinical Research and Health Service Research Advisory Committees for short-term projects not exceeding three years. The Trust has a strong research governance structure. The Director of Research is Dr Mouli Bannerjee

### 3.5 Clinical & Medical Audit

The Cardiology Department takes an active part in Medical Audit and all members of the Directorate are expected to attend and participate specifically in the National Cardiac Audit projects relevant to their special interest. There is an active Clinical Audit department, from which support for clinical and medical audit is available.

Clinical Audit and other quality measures will be incorporated into the structure for Clinical Governance.



## 4 Visits



Visits can be arranged by contacting:

- Dr Karen Lipscomb, Consultant Cardiologist (01204 390489)
- Dr Rauf Munshi, Divisional Medical Director (01204 390973)

## **5** Timetable

Final timetable to be negotiated following appointment.

## 6 Nature of Contract and main conditions of service

The appointee will be contracted on a whole-time basis. Any consultant who is unable for personal reasons to work full-time, will be eligible to be considered for the post; if such a person is appointed, modification of the job content will be discussed on a personal basis, in consultation with consultant colleagues.

If the appointee wishes to undertake private medical practice, they may be asked to provide one additional programmed activity of direct clinical care. This would be paid at the appropriate rate.

1. You will be required to live within a 30-minute drive (on-call times) of the Royal Bolton Hospital unless the Trust agrees to a greater distance. This discretion will only be exercised in exceptional circumstances.

- 2. The post is subject to satisfactory medical clearance.
- 3. The post is subject to satisfactory police clearance.
- 4. Health, Safety and Security:

All employees have a duty to report any accidents, complaints, defects in equipment, near misses and untoward incidents, following Trust procedure. All employees must ensure that Health and Safety legislation is complied with at all times, including COSHH, Workplace Risk Assessment and Control of Infection.

## 5. Confidentiality:

Working within the trust you may gain knowledge of confidential matters which may include personal and medical information about patients and staff. Such information must be considered strictly confidential and must not be discussed





or disclosed. Failure to observe this confidentiality could lead to disciplinary action Trust action being taken against you.

## 6. Data Quality

All employees are reminded about the importance of Data Quality and staff should make themselves aware of both departmental and corporate objectives for Data Quality.

Data Quality forms part of the appraisal and objective setting process for staff responsible for data entry and data production; staff should ensure that they adhere to policies and procedures at all times. Failure to do so may result in disciplinary action being taken.

## 7. Codes of Conduct and Accountability:

You are expected to comply with relevant Bolton NHS Foundation Trust codes of conduct and accountability.

8. Infection Prevention and Control:

You must comply with all relevant policies procedures and training on infection prevention and control.

9. Safeguarding Children and Vulnerable Adults:

You must comply with all relevant policies, procedures and training on safeguarding and promoting the welfare of children and vulnerable adults.

10. Valuing Diversity and Promoting Equality:

You must comply with all relevant policies, procedures and training on valuing diversity and promoting equality.

11. Training:

Managers are required to take responsibility for their own and their staff's development.

All employees have a duty to attend all mandatory training sessions as required by the Trust.



## 7 The Acute Adult Care Directorate

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## CARDIOLOGY

- Dr Karen Lipscomb (Clinical Lead for Cardiac Services & Divisional Governance Lead)
  – Special Interests – Heart Failure, Cardiovascular Intervention in ischaemic heart disease, genetic cardiovascular disease)
- Dr S Little (Special Interest Complex pacing/ICDs & Heart Failure
- Dr K Ravi (Special Interest Imaging)
- Dr A Ashworth (Special Interest Heart Failure and Bradycardia Pacing)
- Dr Peter Scott –(Special Interest Complex Devices & Pacing)-Part-time, outpatient work
- Dr Juan Polla (Locum)-Special Interest Imaging
- Dr Akbar Ali-Locum consultant, General Cardiologist and outpatient work

### **RESPIRATORY MEDICINE**

Dr Rizwan Ahmed (Clinical Lead) Dr Ian Webster Dr Kamal Ibrahim Dr Rajesh Yadavilli Dr Jethin Rafique Dr Gareth Hughes (Critical Care) Dr Saumitra Bhaksi

### GASTROENTEROLOGY

Dr G Lipscomb Dr K Padmakumar Dr S Singh Dr M Bhalme (Clinical Lead) Dr Mark Murgatroyd Dr Shadhab Nayeemuddin Dr Kirsty Nixon Dr Nick Wang Dr Ben Crookes

### **DIABETES & ENDCRINOLOGY**

Dr H Bharaj -Deputy Medical Director Dr M Bannerjee (Clinical Lead) Dr A Basu Dr S Palin Dr S Krishnan Dr A Khan Dr El-Mahmoudi Dr Aashoutosh Patel

## CARE OF THE ELDERLY

Dr G Halstead-stroke medicine Dr A Kallat Dr Vee-Han Lim(Clinical Lead) Dr Y Adenwala Dr D Gopalkrishnan Dr Tom Warburton

Dr Geraldine Donnelly Dr Rebecca Oates Dr Rishi Patel Dr Nikesh Patel

## **ACUTE MEDICINE**

Dr S Irving (Clinical Lead) Dr R Munshi (Divisional Medical Director)

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Dr N Walker Dr Simon Hickman Dr N Khouw Dr N Naranyan



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