



Locum Consultant in Haematology

1. WE CARE FOR YOU

We care because:

- **We** always put the patient first.
- Everyone counts – we treat each other with courtesy, honesty, respect and dignity.
- Committed to quality and continuously improving patient experience.
- Always caring and compassionate.
- Responsible and accountable for our actions – taking pride in our work.
- Encouraging and valuing our diverse staff and rewarding ability and innovation



2. JOB IDENTIFICATION

Job Title:	Locum Consultant in Haematology
Grade:	Consultant Pay scale (April 2023) YC73 £93,666 - £126,281 pa pro rata
Tenure of post:	Permanent
Department(s):	Haematology
Responsible to:	Dr Anurag Agrawal, Divisional Director of Specialty Medicine
Accountable to:	Executive Medical Director



3. JOB PURPOSE

This post is based at Doncaster Royal Infirmary but the post holder will be expected to work across hospital sites. They will be responsible for the continued delivery and further development of an already established haematology service for patients living within the catchment area of the Doncaster & Bassetlaw Hospital Trust and surrounding areas.

On-call is classed as Category A and is a 1:6 Rota, which attracts a 5% on call availability Supplement.

4. MAIN DUTIES/RESPONSIBILITIES

The post holder will be based at Doncaster Royal Infirmary, however you will be expected to contribute to the delivery and development of Haematology services across all Trust sites.

The principal duties of the post will include:

1. To provide, with the other Consultant Haematologists, continuing responsibility for Haematology Services in Doncaster and Bassetlaw Hospitals NHS Trust.
2. To share responsibility for diagnostic services with the other Consultant Haematologists including the day to day supervision of diagnostic tests and interpretation as required.
3. To share responsibility for professional standards in the laboratory and ensure compliance with the standards required to satisfy UKAS Ltd.
4. To share responsibility for the Clinical Haematology Service, including liaison with Clinicians, other hospital staff and General Practitioners, in the diagnosis and management of Haematological disorders.
5. To participate with the other Consultant Haematologists in the management of the Department.
6. To demonstrate a firm commitment to Clinical Governance including participation in effective Clinical Audit and continuing Medical Education.
7. To contribute to management within the Trust through the appropriate Division.
8. Participation in the multidisciplinary team meetings relevant to the post.



9. Take joint responsibility for the professional supervision and development of training and non-training grade posts in the department.
10. Participate in the system of consultant cover for annual, study and professional leave.
11. Maintain good communication with all members of the multidisciplinary teams.
12. Ensure good communication with GP and other agencies such as Palliative Care Services.
13. To be involved in clinical trials, work and co-ordination.
14. To ensure mandatory training is up to date.
15. To ensure own practice is up to date this will include taking responsibility for own Clinical Professional Development.
16. Comply with all relevant trust policies and procedures.

Indicative Weekly Job Plan

Below is an example of a provisional timetable for the post but this can be subject to change depending on the specialist interest of the applicants.

The job runs on a six weekly rolling job plan.

One week you will provide daily ward rounds, referral work, blood films, telephone advice, advice and guidance and responding to advice sent by letter. This includes weekend ward rounds and overnight availability for telephone advice (with very rare re-attendance out of hours for Haematological Emergencies).

	Start/End Times	AM	Start/End Times	PM
Monday	8.30 – 12.30	SPA / Admin	13.00 – 17.00	SPA
Tuesday	8.30 – 12.30	OP Clinic	13.00 – 17.00	Monthly obstetric clinic
Wednesday	8.30 – 12.30	Chatsfield Cover	13.00 – 17.00	X-ray meeting / OP Clinic
Thursday	8.30 – 12.30	Admin	13.00 – 17.00	Local MDT / Ward Round
Friday	8.30 – 12.30	Chemo-Clinic	13.00 – 17.00	Regional MDT
Direct Clinical Care (DCC)			8.5	
Supporting Professional Activities (SPA)			1.5	
On-call			(1:6 rota) Included in 10PA Attending	
TOTAL PA			10 Programmed Activities	



Job Plan

Under the terms of the new consultant contract (2003) the basic full-time Job Plan contains ten Programmed Activities (PAs) of 4 hours each, including an average 7.5 PAs for Direct Clinical Care (including predictable out-of-hours commitments) and 2.5 PAs for Supporting Activities (SPA), although the actual ratio may vary and will depend on the specific, identifiable and agreed contributions in various areas (see below).

There is recognition and remuneration for out-of-hours availability as per the national terms and conditions and for any mutually agreed additional activity, if applicable. Any appointee wishing to undertake Private Practice will be required to offer the Trust an 11th PA, which the Trust may or may not wish to take up. The Trust may also independently wish to offer an optional 11th PA to the appointee, irrespective of any anticipated involvement in Private Practice.

The Trust has an interim agreement that 1.5 SPAs should be set aside to meet the requirements of proof of fitness to practice including personal internal CPD including participation in clinical meetings, private study and document review, audit and clinical governance issues (clinical incident reports, risk management, complaint responses etc) as well as preparation for, and full engagement in, personal appraisal, assessment and job planning. Attendance at mandatory meetings (e.g. Resuscitation and Fire lectures, Equal opportunity training) is included under this heading. Time for attendance at other general Trust and Directorate meetings (e.g. Hospital Medical Committee and Consultants communication meetings) would also be included here. The list is not intended to be exclusive. Assessment of satisfactory engagement in these areas forms part of the annual appraisal process.

It is recognised that the time spent in other Supporting Activities will depend on individual involvement and specific circumstances and may vary significantly both between individuals and over time. Time spent on these activities will need to be accounted for as part of the annual appraisal and job planning process, and the Trust reserves the right to modify the Job Plan accordingly in discussion with the appointee. There may be circumstances where additional SPA time (above the average 2.5) is required to fulfil all the agreed additional commitments, which may necessitate an agreed reduction in clinical time. Equally there may be circumstances where an agreed reduction in SPA time (below the average 2.5) is appropriate, with the potential for additional clinical involvement within the overall PA allocation. Any altered commitments under this section will need to be agreed in advance with the Divisional Director and General Manager so as not to disadvantage clinical activity within the Division. Additional SPA allocation may be achieved by delivering a role, e.g. Educational Supervision, Governance Lead, etc. This agreement is subject to review.

Categories under this heading include:

- Formal teaching of undergraduates / postgraduates, Junior staff supervision, College Tutors



- Being a Trust Appraiser
- Agreed formal Trust committee involvement (e.g. Drug and Therapeutics Committee, Ethics Committee, Cancer Steering Group, Specialty subgroups etc)
- Clinical Governance Lead
- Lead clinicians (cancer etc)

The duties of the post may be changed with the agreement of the post holder. An annual review of duties will take place with the Divisional Director as part of the Job Plan process.

Education and Development:

- There is a wide teaching role within the post, to train medical students, nurses and junior doctors, as they rotate through the department.
- It is expected that the post-holder will be a clinical/educational supervisor to some of the training doctors on rotation, as well as taking part in their regular weekly teaching timetable. 1hr/week SPA time is afforded for this role.
- There is a monthly all staff teaching session which the post holder will be expected to attend and contribute to. This includes a regular audit meeting, where again, consultant contribution is expected.
- The study leave allowance is 30 days/3 years pro-rata. It is expected that these will be used, in addition to SPA time, for CPD towards revalidation as per the recommendations of the Royal College and the various specialty bodies. The trust is fully committed to supporting and assuring revalidation, by way of a dedicated support team and IT infrastructure package.
- The trust has a programme of mandatory training which all consultants are expected to undertake.
- For appointees new to the consultant role, or who may have had a career break, the department strongly encourages mentorship support

Clinical Governance:

- Attendance at the monthly specialty clinical governance group is expected.
- Further contribution to clinical governance activities in the form of local, regional and national audit participation, guideline writing/updating, and undertaking other relevant projects would also be expected.

Management and Leadership:

- There will be an expectation to take on management roles, such as Specialty or Foundation training co-ordinator, education lead or clinical governance lead. For any of these roles, additional SPA time would be granted.

Research:



The Trust has an active Research and Development Department, and provides access to research nurse support, participation in research is encouraged. This may take the form of personal local projects, or collaboration in regional or national projects, such as the current PrEP IMPACT study.

Recent years have seen tremendous advances within the Trust, culminating in the attainment of Teaching Hospital status in January 2017. Central to this achievement remains the long-standing commitment of the Trust to deliver a quality, patient centred research programme.

The research agenda will continue to be aligned with and influence changes in clinical services delivered within the Trust. We will achieve this through working with colleagues to capitalise on effective internal partnerships between clinical and corporate Trust areas, as well as maximising opportunities for collaborations with regional, national and international partners.

The strategy complements a number of other enabling strategies to deliver the Trust Strategic Direction 2017-2022, notably;

- Clinical Quality and Governance
- Quality Improvement and Innovation
- People and Organisational Development
- Communications and Engagement
- Information and Digital
- Estate and Facilities

Support:

The post holder will have a dedicated office space and secretarial support, shared with the other consultants. In addition to the department's electronic patient record the trust has comprehensive IT services, which ably support all aspects of the role.

Mandatory Training (Statutory and Essential Training):

All staff are required to abide by all Trust Policies and Procedures, details of which can be accessed via the Trust Intranet, and are required to comply with Mandatory Training requirements. In particular, medical staff should be aware of, and comply with, infection control and safeguarding requirements.

5. OUR SERVICE/OUR TEAM

The post holder will work within a team of six Consultant Haematologists, two Specialty Trainees, one Staff Grade, one IMT doctor and 5 Haematology Cancer Nurse Specialists to provide comprehensive Haematology care to patients. There is a dedicated haemato-oncology ward with 12 patient capacity as well as day unit for delivery of chemotherapy and other intravenous treatments. Consultants will undertake two clinics per week plus a 2 week-wait clinic one week in six. The clinics are a combination of new and follow up patients. The



Specialist Nurses run myeloproliferative clinics independently at Doncaster and at Bassetlaw and also undertake three bone marrow lists each week.

The Haematology Consultants provide Haematology cover for all hospitals in the Trust on a 1 in 6 rota.

The Haematology-Oncology Day Unit (Chatsfield Suite) is situated close to the laboratory at DRI and is the designated Chemotherapy Suite and facility for non-chemotherapy treatments and procedures. Nurse led transfusion and pre chemotherapy clinics are conducted from the Unit.

The Chatsfield Suite serves a population of 490, 000 and on average treats 66 patients per day. The Chatsfield suite consists of a team of 21 clinical staff including; one band 7 unit manager, 3 band 6 Sisters, 13 band 5 nurses, 3 band 3 Specialist Support Workers and 1 band 3 co-ordinator.

A Day Unit facility is also available at BDGH two days a week. This facility is used for blood transfusions, venesections, administration of intravenous drugs such as immunoglobulins and zoledronic acid etc but not for administering parenteral chemotherapy.

All adult haematology patients, excepting those for high dose therapy and stem cell support and intrathecal chemotherapy are treated at DRI (BSH Level 2b activity). Only outpatient oral chemotherapy (BSH Level 1 activity) is undertaken at BDGH site. All paediatric haematology patients are referred to the Sheffield Children's Hospital while young adults with cancer between the ages of 16 and 18 are referred to the Teenage and Young adult unit at the Royal Hallamshire Hospital.

Out of hours patients are usually admitted through the acute take to the acute medical unit both at DRI and BDGH. These patients are initially admitted under the medical team on take & handed over to the Haematology team on the next working day. There is however a protected bed on the Haematology Unit for admitting haematology patients with neutropenic sepsis post chemotherapy.

The 12 bed in-patient Haematology Unit is staffed with chemotherapy trained nurses delivering a 2:1 patient to trained nurse ratio for AML patients undergoing treatment and neutropenic sepsis patients. In addition in-patients at both sites are also cared for by specialist haematology/oncology nurses on virtually every day.

Support services include Hickman line insertion by interventional radiologists and radiotherapy by consultants from Weston Park Hospital. Patients with malignant spinal cord compression are immediately referred to the on-call spinal surgeon at Northern General Hospital who act as regional co-ordinators for Metastatic Spinal Cord Compression.



All major specialties are covered between the two sites with good imaging (CT scanners & MRI) & medical physics facilities.

There are 3 outpatient bone marrow biopsy sessions a week. The biopsies are performed by haematology specialist nurses or middle grade doctors. Bone marrow biopsies are sent to the Haemato-oncology Diagnostic Service (HODS) in Sheffield for central reporting. We have good working relationships with the Interventional Radiology team which facilitates early diagnostic core biopsies of lymph nodes etc.

There is a weekly South Yorkshire network haemato-oncology MDT meeting. The meeting is video-conferenced and links with Haematologists in Sheffield, Barnsley, Rotherham, Chesterfield and Doncaster. All Consultant Haematologists are core members of the MDT and 67 % attendance in person is mandatory as per Quality Surveillance Team (formerly peer review) measures. All newly diagnosed and relapsed patients are discussed at this meeting. In addition, weekly medical imaging review meetings are held every Wednesday afternoon where medical images on Haematology patients are reviewed by a designated Consultant Radiologist.

Entering patients into clinical trials is encouraged. There are close working links with neighbouring hospitals through the South Yorkshire Haemato-oncology network who provide tertiary level care.

Sheffield Children's Hospital for all childhood leukaemias, bleeding disorders, etc Royal Hallamshire Hospital, Sheffield, for autologous & allograft stem cell transplants Adult haemophiliacs & other severe bleeding disorders are cared for centrally at the Haemophilia and Thrombosis Centre, Royal Hallamshire Hospital, Sheffield.

Reference laboratories for cell markers, molecular haematology, coagulation & cytogenetics are all based in Sheffield.

Clinical Service

Haematology department has the following medical staff:

Dr Ruth Medlock - Consultant Haematologist, Clinical Lead, Lead for Clinical Governance,

Dr Atchamamba Bobbili - Consultant Haematologist & HaemOnc Lead

Dr Tobore Gbemre - Consultant Haematologist, Trust Lead for Acute Oncology Services & Deputy Lead for Chemotherapy services

Dr Youssef Sorour- Consultant Haematologist, Transfusion lead, Associate Medical Director for Patient Safety



Dr Rob Cutting - Consultant Haematologist, Specialty advisor to Laboratory Medicine (Pathology)

3 Middle Grade Doctors (one staff grade and two Specialty Trainees)

1 CT1 doctor- Full time, on medical rotation

We are supported by 4 Haematology Clinical Nurse Specialists along with Acute Oncology specialist nurses.

Secretarial staff - We have 3 Haematology secretaries and 2 assistant secretaries, based at Doncaster. At Bassetlaw we have 1 secretary (part time) and 1 assistant secretary (part time)

Divisional Director:	Dr Anurag Agrawal
Divisional Clinical Director:	Dr Raj Singh
Divisional General Manager:	Mel Howard
Business Manager:	Rebecca Wright

6. TERMS AND CONDITIONS

The appointment will be subject to the Terms and Conditions of Service (England 2003) for the new consultant contract agreed with the Trust.

Applicants must be on the General Medical Council Specialist Register or within six months of being admitted to the Register for trainees if in a training programme within the UK. In accordance with the regulations all other categories of doctors must be on the GMC Specialist Register to be considered for a consultant appointment by the Advisory Appointments Committee. Applicants must continue to hold a License to Practise.

The person appointed to the post will be expected to live within 10 miles of the hospital or within 30 minutes recall time, by road, from the hospital.

The job description and the weekly timetable will form an initial job plan as outlined by the Terms and Conditions of Service (England 2003) for the new consultant contract. This will be subject to an annual review by the Clinical Director of the Division.

New consultants will be paid on the first point of the consultant salary scale. For existing consultants there is an internal process to assess previous consultant level experience. Your basic salary will increase with the provisions of Section 20.2 and Schedule 15 of the Terms and Conditions.

Annual leave entitlement is as per national Terms and Conditions of Service for Consultants. Arrangement to take annual leave must be made with clinical colleagues and approved by the Divisional Director/Clinical Director as per local procedures and the local Rota coordinator should be notified accordingly.



HEALTH CLEARANCE & MEDICAL EXAMINATION

This appointment is subject to medical fitness and the appointee may be required to undergo a medical examination and chest X-ray.

Potential applicants should be aware of the Department of Health and GMC/GDC requirements with regard to HIV/AIDS, Tuberculosis, Hepatitis B and Hepatitis C viruses.

The successful candidate must be immune to Hepatitis 'B' and Tuberculosis. They will be required to provide, in advance of appointment, evidence of immunity or have a local blood test (as deemed appropriate by the Occupational Health Department).

DBS CLEARANCE

This appointment is subject to an enhanced Disclosure & Barring Service (DBS) clearance. Please note that all charges associated with this check will be passed on to the applicant.

REMOVAL EXPENSES

Removal expenses on appointment (should you be eligible) will be paid in accordance with the Doncaster & Bassetlaw Teaching Hospitals NHS Foundation Trust Removals and Associated Expenses policy. This can be found on the Trusts website by following this link. <https://www.dbth.nhs.uk/about-us/our-publications/publication-scheme/our-policies-and-procedures/policies-a-to-z/>



Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust

Medicine structure

Clinical Directors



Dr Rajender Singh
Speciality Medicine CD
rajender.singh1@nhs.net



Dr Shivani Dewan
General Medicine CD
shivani.dewan@nhs.net



Dr Anurag Agrawal
Divisional Director
anurag.agrawal1@nhs.net



Mel Howard
Divisional General Manager
melhoward@nhs.net



Lorna Ball
Divisional Nurse for Medicine
lorna.ball@nhs.net

Michelle Benyon
Business Manager
Michelle.beynon@nhs.net

Rebecca Wright
Business Manager
rebecca.wright19@nhs.net

Michelle Thorpe
Deputy Divisional Nurse
michelle.thorpe1@nhs.net

Howard Briggs
Principal Clinical
Physiologist
howard.briggs@nhs.net

Michelle Cookson
Matron (Bassetlaw Medical
wards)
michelle.cookson3@nhs.net

Zoe Cresswell
Matron (Cardiology, Gastro,
Respiratory)
zoe.cresswell@nhs.net

Tammy Brown
Matron (Renal, Dermatology,
Haematology)
tammy.brown1@nhs.net

Fiona Caddy
Specialist Palliative and End
of Life Care Nurse
fiona.caddy@nhs.net

Mandy Tyrell
Lead ACP
for Virtual ward
mandy.tyrell@nhs.net

Susan Robson
Lead Nurse
for Diabetes
susan.robson7@nhs.net

Lynne Rayner
Lead ACP
for Frailty
lynne.rayner1@nhs.net

Deam Dowson
Matron (Care of the Elderly
and Renal)
dean.downson@nhs.net

Joanne Pack
Matron (Outpatient and
Rehab)
joanne.pack1@nhs.net