

JOB DESCRIPTION:

JOB TITLE:	Locum Consultant in Obstetrics & Gynaecology	
DIVISION:	Women & Children's	
SPECIALTY:	Obstetrics/Gynaecology	
NAME OF LINE MANAGER:	Heather Evans	
NAME OF RESPONSIBLE OFFICER FOR REVALIDATION:	Dr Jane Hawdon	
NUMBER OF PROGRAMMED ACTIVITIES PER WEEK:	10 PA – 1 Year Fixed Term	
MAIN LOCATION:	Hampstead Site, Royal Free Hospital	
MANAGES:	Directly:	None
	Indirectly:	Junior Medical Staff
JOB SUMMARY: <p>An excellent opportunity has arisen for a locum Consultant in Obstetrics at the Hampstead site of the Royal Free London NHS Foundation Trust. This is a full time 10 PA post for a 1 year fixed term.</p> <p>We are looking to appoint an enthusiastic, experienced colleague to join our obstetric services</p> <p>The successful candidate is expected to provide cover for labour ward, rapid access clinic and general gynae operating. The teaching and training of junior medical staff and is also expected to be a key part of the role.</p> <p>The successful candidate will be supported by a multidisciplinary team of obstetricians, obstetric anaesthetist and gynaecology nurses. The candidate should be keen to work as part of a team, continuing to develop good relationships with other staff within and outside the Clinical management team.</p> <p>The job plan includes regular labour ward sessions, which are in line with the cover provided by other members of senior staff. Oncall activities will be undertaken at the Hampstead site on a 1 in 13 obs & gynae cover and 1 in 13 gynae cover. The current service on this site provides 72 hours of consultant presence on the labour ward.</p> <p>Please also review the accompanying Person specification for this Post.</p>		

Royal Free London NHS Foundation Trust World Class Values

The post holder will offer World Class Care to service users, staff, colleagues, clients and patients alike so that everyone at the Royal Free can feel:

- a all of the time ●Confident because we are clearly
- **respected** and cared for ● **reassured** they are always in safe hands

About us

The Royal Free Hospital was founded in 1828 to provide free healthcare to those who could not afford medical treatment. The title 'Royal' was granted by Queen Victoria in 1837 in recognition of the hospital's work with cholera victims.

For many years, Royal Free Hospital was the only hospital in London to offer medical services to women. This began a close association with the London School of Medicine for Women, later renamed the Royal Free Hospital School of Medicine.

Royal Free Hospital moved to its present site in the mid-1970s, bringing together the old Royal Free Hospital in Gray's Inn Road with the Lawn Road, New End and Hampstead General hospitals.

In April 1991 the Royal Free Hampstead NHS Trust became one of the first NHS trusts established under the provisions of the NHS and Community Care Act 1990.

On 1 April 2012 the trust was authorised as a foundation trust, under the name Royal Free London NHS Foundation Trust.

In 2014, Barnet Hospital and Chase Farm Hospital joined our foundation trust, bringing further medical expertise and local care to the NHS services we provide.

Barnet Hospital first provided healthcare in an infirmary in the Barnet Union Workhouse in 1838. Chase Farm Hospital began as a home for pauper children in 1884.

The hospitals were important to medical treatment during both world wars. Between 1916-18, 6,000 wounded and sick soldiers were given medical care at Barnet Hospital, and during the Second World War, Chase Farm cared for wartime casualties under the emergency medical scheme. In 2004 Chase Farm made European history, by carrying out the first total hip replacement procedure with the patient leaving hospital in just 27 hours. At the time in the UK, the average length of stay following a total hip replacement was 11 days.

The Royal Free London NHS Foundation Trust runs three hospitals in London:

- Barnet Hospital
- Chase Farm Hospital
- Royal Free Hospital

Across our three London hospitals, our vision is clear: to deliver world class expertise and local care. We combine globally recognised clinical expertise with local and friendly hospital care to represent the NHS at its best.

Our mission is to be world class in terms of healthcare treatment, clinical research and teaching excellence. We aim to deliver and develop leading local healthcare in all three of our hospitals, to improve lives and help people thrive.

How the Royal Free will achieve its mission

We will achieve our mission by making sure that we have:

- **Excellent outcomes**, in our clinical treatment, research and teaching
- **Excellent experiences** for patients, staff and GPs
- **Excellent value**, by improving the efficiency and productivity of our services, and reducing costs
- **Full compliance**, meeting or exceeding all regulatory standards and outcomes we are set
- **A strong organisation**, investing effectively in our staff and infrastructure to make sure we are fit for future challenges

How the Royal Free measures its performance

In order to meet our aims, we want to ensure that our three London hospitals are in the top 10% of all healthcare providers for:

- quality of clinics and treatments
- medical research
- teaching and training new medical staff
- patient satisfaction and experience
- value for money

We set corporate objectives on an annual basis to help us achieve our mission.

The University College London Medical School

University College London is the largest of over 50 colleges and institutes which make up the federal University of London and is consistently rated as one of the U.K.'s premier academic institutions. The University College Medical School is a general medical school in the Faculty of Medicine of the University of London, formed on 1 August 1998 by the merger of the Royal Free Hospital School of Medicine and University College School of Medicine. A joint Department of Medicine, with around 400 staff, has existed between the two Schools since January 1994. The Department encompasses a broad range of basic and clinical research programmes and undertakes teaching of undergraduates and postgraduates.

Research

Research and development is a major component of the Royal Free London NHS Foundation Trust strategy and reflects the Trust's desire to maintain its position as one of the top ten trusts for R&D income in the UK. The research efforts of the Trust and Medical School are closely integrated and there are extensive facilities for both clinical and basis science research. Consultant staff are expected to participate in research according to their skills and speciality. An audit system for quality in R&D was introduced during 1998 and reflects an individual's commitment to this area. Applicants should prepare an outline of the research they would wish to undertake if appointed.

1 INTRODUCTION

The Women's Health and Maternity Directorate is currently seeking enthusiastic and dynamic applicants for an obstetric post based at the Hampstead site of the Royal Free London NHS Foundation Trust. Successful candidates will join an ambitious, friendly and supportive team of consultants within an actively progressive organization.

This post is envisaged to provide labour ward cover and provide Gynaecology Hot week cover and provide teaching for junior doctors and midwifery staff and support the department.

2. MAIN DUTIES AND RESPONSIBILITIES

2.1 Roles within the Obstetric and wider service

- Provision of expertise in labour ward and antenatal & postnatal care

2.2 Oncall commitments

- Provision of on-call commitments as part of the departmental oncall rota (non-resident overnight) but with the expectation you will be available on the unit within 30minutes if required.

The on-call commitment are currently shared with Consultant colleagues as follows:

- 1 in 13 oncall for obstetrics & gynaecology and 1 in 13 for gynaecology, 72 hours consultant presence on the labour ward.
- Weekday gynae oncall cover (hot week) 8.32x per annum

There is an excellent team spirit within the Directorate on both sites and senior support during the hot week and out of hours is typically readily available when there are seriously unwell patients or complex cases requiring operative intervention.

2.3 Provision of high quality care

- Lead by example and demonstrate the Royal Free's World Class Care values.
- Ensure patients are involved in decisions about their care and respond appropriately when concerns are raised.
- Develop and maintain any professional competencies required by the post.
- Comply with Trust requirements for annual appraisal and maintenance of mandatory (MAST) training.
- Participate fully in the RCOG's continuing professional development programme to ensure knowledge and skills are kept updated.
- Participate as required in local programmes to develop non-clinical, leadership and management skills.
- Adhere to the standards outlined by the GMC for Good Medical Practice.

2.4 Service Development and Business Planning

- To inform the Clinical Director of new developments and best practice in specialist areas where these vary from local practice.
- To attend and contribute to departmental and regional meetings as requested by the Clinical Director.

2.5 Performance Management

- To work with medical, nursing and operational colleagues to ensure key objectives are being met.
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2.6 Teaching, Training and Research

- To contribute actively in the teaching and training of junior doctors, medical students and other allied staff groups.
- To provide clinical and educational supervision roles for doctors in training.

- To participate in the induction programme for new medical staff as requested by the Directorate.
- To develop effective research initiatives and support existing research undertaken within the service.

2.7 Medical Staff Management

To work with colleagues :

- To ensure adequate systems and procedures are in place to control and monitor leave for junior medical staff.
- To ensure there is appropriate medical cover in clinical areas including on-call commitments.
- To participate in the recruitment of junior medical staff as requested by the Clinical Director.
- To participate in Directorate objective setting

2.8 Governance and Audit

- To escalate to the Clinical Director when service outcomes adversely vary from external and internal targets.
- To participate in ensuring national guidance requirements (eg. NICE, NSF, CNST, CQC) are reviewed, monitored and implemented.
- To ensure clinical guidelines and protocols are followed by junior medical staff. To ensure that these are monitored and updated on a regular basis.
- To embark in relevant clinical audit as required within your service area.
- To appropriately report clinical and non-clinical incidents via Datix.
- Where system and process improvements have been identified through incident reporting, to ensure the requisite actions are implemented.
- When requested to participate in incident reviews and complaints meetings with patients.
- When requested to provide clinical statements of involvement within a reasonable time-frame (eg. 1-2 wks) for any on-going serious incident investigation.
- Sharing lessons learned
- Local Departmental Clinical governance & Trust board clinical governance meetings
- Attend stake holders meetings and presenting dashboard
- Keep abreast of maternity dashboard and deal with any concerns
- Liaise with labour ward lead
- NCL obstetric meetings, newborn an antenatal screening

NATURE OF EMPLOYMENT AND HOURS OF WORK

This is a substantive NHS appointment attracting **10 PA**. Any candidate who is unable for personal reasons to work this will be eligible to be considered for the post; appropriate modification of the job content should, however, be discussed and agreed with the Divisional Director in consultation with the Clinical Director and Consultant colleagues prior to accepting any appointment that might be offered.

3. INDICATIVE JOB PLAN

The Directorate uses annualised job plans for its Consultant staff on the basis that a weekly activity will be undertaken 42 times a year (after allowing for annual leave, study leave and public holidays). Job planned PA's are calculated using Zircadian job planning software. The job plan below is indicative for this post and may be subject to some

changes depending upon prevalent service needs and individual specialist skills of the successful candidate. A job plan should be signed off within 3 months of the post commencement and this should then be reviewed annually. Changes to the contracted job plan can be suggested by either party but must be signed off by the Clinical and Divisional Directors before they are accepted. Admin and supporting professional activities are expected to be largely undertaken onsite.

The Trust is keen to simplify the time required for appraisal preparation, statutory and mandatory training and job planning. Accordingly an allowance for this has been prescribed into each job plan by subsuming it into the personal weekly 0.5 SPA allowance. This is defined on 'my job plan' as the baseline SPA and is recorded on an annualised basis.

Illustrative Job plan (subject to minor changes as per local departmental requirements):

	Time	Job Planned Activity	Annualised sessions	SPA	DCC	
MON						
Am	0800-1700	Gynae on-call	8.32		0.4457	
	0830-1300	Emergency C/S list	14		0.4167	
Pm	1245-1330	Gynae cancer MDT	33.68		0.1504	
	1330-1730	General gynae clinic	33.68		0.8019	
TUE						
Am	0800- 1700	Gynae on-call	8.32		0.4457	
Pm	1330 - 1830	Rapid access Gynae clinic	33.68		1.0024	
WED						
Am	0800 – 1700	Gynae on-call	8.32		0.4457	
	0900-1300	General gynae clinic	12		0.2857	
	1300-1330	Departmental meeting	21		0.0625	
Pm						
THUR						
Am	0800 – 1700	Gynae on-call	8.32		0.4457	
	0800-1700	Labour Ward	10.4		0.557	
Pm	1700-2130	Labour ward	16		0.5080	
FRI						
Am	0800 – 1400	Gynae on-call	8.32		0.2971	
	0730-1930	Chase Farm operating	24		1.8095	
Pm	1400 - 2130	Labour ward	4		0.1984	
SAT						
	1930 - 2200	Labour ward round	4		0.0794	
SUN						
	1930 - 2200	Labour ward round	4		0.0794	
		CPD / Appraisal		0.5		
		On call 1 in 13 Obs & Gynae category A			1	
		On call 1 in 13 gynae category B			0.5	
						10

4. THE WOMEN'S HEALTH AND MATERNITY DIRECTORATE

The Directorate strategy is to position itself to deliver class-leading healthcare outcomes for its patient population. A variety of gynaecology workstreams are being developed to provide patient-centred streamlined services, which harness recent technological advances to leverage the best clinical outcomes and patient experiences. The new post-holders will be expected to bring fresh initiatives to these workstreams. The Trust is correspondingly about to invest significant resources to embed modern quality improvement methodology to realize the corporate objectives in providing World class care outcomes.

The Directorate provides maternity unit and gynaecology services at the Barnet and Hampstead sites of the Royal Free Hospital with out-patient services at a number of other community hospital sites across North Central London and neighbouring areas. Across the Trust the service is responsible for the births of over 8500 mothers each year with over 5000 births currently taking place on the Barnet Hospital site. On the Barnet site the maternity service is supported by excellent Level 2 neonatal services. To support the maternity services on the Hampstead site there is a local Level 1 neonatal service closely supported by its sister Level 2 neonatal unit at the Barnet site. The Hampstead site Maternity services are accredited to CNST Level 3 whilst the Barnet site achieved Level 2 accreditation at the last CNST assessment. Recent MBRRACE reports (UK Perinatal Surveillance Report (June 2015)) have demonstrated the maternity service is providing class-leading outcomes with perinatal mortality rates more than 10% lower than the national average marking the service amongst one of the top performing Trusts within London for these outcomes.

4.1 GYNAECOLOGICAL SERVICES

There is a busy general gynaecological workload within the Directorate with a number of specialist services across the various sites. There is provision of excellent specialist obstetric and gynaecological services for HIV/AIDS patients. The purpose built Early Pregnancy and Acute Gynae Unit (EPAGU) is held in high regard by local patients and GP's. Across both the Hampstead and Barnet sites the EPAGU services have expanded to provide weekend scanning services for acute patients.

In addition to general Gynaecology, the following specialist services are offered:

- Colposcopy
- Diagnostic and Operative Outpatient Hysteroscopy
- Gynaecological Oncology / Rapid Access clinics
- Urogynaecology and Pelvic Floor/Prolapse clinics
- Minimal Invasive Surgery and Fibroid embolisation services
- Specialist Clinics eg. Vulval Clinics, Gynaecology clinics for patients with HIV/AIDs, Reproductive Endocrinology/PCOS clinics
- Gynaecological scanning
- Early Pregnancy and Emergency Gynaecology
- Community Gynaecology (includes Well-women screening, Menopause, Psychosexual counselling, complex family planning clinics, Termination of pregnancy service) at the Hampstead site

At the Hampstead site there are 8 in-patient gynaecology beds on 7 North ward (surgical in-patient ward). Ambulatory services (out-patient hysteroscopy, vulval procedure clinic and manual vacuum aspiration) are provided from a large well equipped treatment room

within the dedicated Early Pregnancy Unit space on the 5th floor. This unit also provides a day case hyperemesis management suite. A specialist Women's Health counselling service supports the Directorate's services. Colposcopy and Uro-dynamics clinics are undertaken in a dedicated area of the women's health out-patients department.

4.2 OBSTETRIC SERVICES:

In line with Changing Childbirth and Better Births, the Maternity services offer a wide range of choice for antenatal, delivery and postnatal care. Antenatal care is offered in the main hospital units, community hospitals, in the home environment and Children's centres and local GP surgeries. A community integration project aligning community midwifery services with objectives laid out in Better Births is imminently due for completion and roll-out

Hospital deliveries may take place in the Midwifery-led or Consultant led Units. Both maternity units at the Barnet and Hampstead sites have a full provision of in-patient obstetric services including maternity day assessment units, ultrasound, fetal monitoring and blood sampling services. Fetal medicine services at the Hampstead site of the Royal Free are being expanded to meet the requirements of both sites. Tertiary level FMU referrals are made from both sites to UCLH when required.

Summary of maternity services provided by the Directorate (on both maternity sites unless indicated otherwise):

- Full community midwifery services
- High-risk hospital based obstetric clinics
- Multi-disciplinary medical /obstetric clinics (endocrine, haematological)
- Dedicated maternal medicine clinics (established at the Hampstead site but still to be developed for the Barnet site)
- Multi-disciplinary Birth Options clinics
- Specialist services for women with female genital mutilation (FGM), HIV/AIDs and vulnerable adults
- Full antenatal and haemoglobinopathy screening services
- Antenatal Anaesthetic and Paediatric support clinics
- Postnatal Birth Reflections clinics (Hampstead site)
- Dedicated ultrasound services for booking, fetal anomaly and growth scans.
- Fetal Medicine service (located at the Hampstead site)
- Maternal Day Assessment Unit
- Hospital and home deliveries
- Services for low risk out-patient induction
- 24/7 Anaesthetic cover for the labour ward and dedicated anaesthetic cover for elective caesarean section lists
- Midwifery Led Unit
- 24/7 Interventional radiology service (Hampstead site)

4.3 THE WOMEN'S DIRECTORATE MANAGEMENT STRUCTURE

Women's services are managed within the Women's & Children's Division. The Directorate is managed by the following senior management team:

Divisional Director	-	Tim Wickham
Divisional Director of Operations	-	Ruth Ouzia
Divisional Director of Nursing & Midwifery	-	David Connor

Clinical Director - (RF)	-	Heather Evans
Obstetric Service Line Lead – RF	-	Sajjad Ali
Head of Midwifery (RF)	-	Ruth Akoto-Appiah
Gynae Nursing Matron (RF/BH)	-	Elizabeth Pollard
Operations Manager (RFH)	-	Louise Oliver

The Directorate is closely supported by Finance managers, Human Resources managers, Clinical Governance and Risk Teams and Information Teams. Directorate meetings are held monthly and have multidisciplinary representation. Consultants are accountable clinically and managerially to the Divisional Director and Clinical Director.

4.4 SENIOR STAFF

Hampstead Site Staff:

- Ms Rezan Abdel Kadir R&D Lead / General Gynaecology / High risk Obs (bleeding & thrombophilia)
- Mr Sajjad Ali High risk Obs
- Mr Demetrios Economides Fetal Medicine Lead / High risk Obs
- Ms Heather Evans Clinical Director Oncology Lead
- Mr Paul Hardiman Senior Lecturer, Endocrine
- Ms Eleni Mavrides MAS
- Ms Alison Wright High risk Obstetrics and safe-guarding
- Ms Vivita Singh Maternal Medicine
- Ms Deborah Boyle (PT) Gynae Governance Lead, Audit Lead, Vulval disease & Colp Lead
- Ms Nicole Zenner Vulval disease & Colposcopy
- Mr Fevzi Shakir MAS
- Mr Dagogo Jaja Associate Specialist
- Ms Jo Hockey Urogynaecology
- Ms Emma Kirk Early pregnancy
- Ms Sheila Radhakrishnan Community Gynaecology
- Miss Rebecca Gibbs Vulval disease & Colposcopy
- Ms Badenan Fathulla Labour Ward lead

4.5 JUNIOR MEDICAL / TRAINING DOCTOR STAFFING

Hampstead site:

18 ST 2-7 Grade (including 3 FMU Clinical fellows, 4 general Clinical fellows)

7 FY2/GP ST1-2 Grade doctors - 3 GP trainees, 2 FY2, 1 O&G ST1-2, 1 clinical fellow

GENERAL RESPONSIBILITIES

Infection Control

Infection control is everyone's responsibility. All staff, both clinical and non clinical, are required to adhere to the Trust's Infection Prevention and Control policies and procedures and the Health Act (2006) Code of Practice for the prevention and control healthcare associated infections and make every effort to maintain high standards of infection control at all times thereby reducing the risk of Healthcare Associated infections.

It is the duty of every member of staff to take personal responsibility for the prevention and control of infection, as laid down in the Trust's policies and procedures which reflect the statutory requirements of the Hygiene Code.

- To work in close collaboration with the Infection Control Team.
- To ensure that monitoring of clinical practice is undertaken at the agreed frequency.
- To ensure that the ward environments are cleaned and maintained to the highest standards; ensuring that shortfalls are rectified, or escalate as necessary.
- To ensure that all relevant monitoring data and issues are provided to the Directorate's Governance structures.
- To ensure that all staff are released to attend infection control-related educational sessions and staff with specialist roles, e.g. link practitioners, are released to undertake their duties.

Health and Safety at Work

The post holder is required to:

- Take reasonable care for the health and safety of himself/herself and other persons who may be affected by their actions or omissions at work.
- Co-operate with the employer in ensuring that all statutory and other requirements are complied with.

CONFIDENTIALITY AND RECORDS MANAGEMENT

You must at all times be aware of the importance of maintaining confidentiality of information gained by you during the course of your duties, which will in many cases include accessing personal confidential data relating to patients and staff. You must treat all information in a discreet and confidential manner and if applicable to your role comply with your professional obligations and codes of practice relating to confidentiality (such as the GMC's Confidentiality Guidance).

Your obligation to respect the confidentiality of information you encounter during the course of your duties continues after your employment with the Trust has ceased.

Personal confidential data regarding patients and staff must not be disclosed either verbally or in writing to unauthorised persons. It is particularly important that you should ensure the authenticity of telephone enquiries.

Written paper records containing patient or staff personal confidential data must be kept securely at all times.

Electronic records containing patient or staff personal confidential data must always be encrypted to the required trust standard, this includes when personal confidential data is saved to portable devices or media such as USB memory sticks, tablets, smartphones, compact discs and external USB hard drives.

Unauthorised deliberate access to records without permission or good reason is not permitted. Staff must not share access controls, passwords or CRS smartcards under any circumstances.

Staff who make entries into in health records must ensure that notes are legible and attributable. Staff are encouraged to follow the generic medical record-keeping standards prepared by the Health Informatics Unit of the Royal College of Physicians.

You must not use social networking websites, or similar media to discuss any aspect of your employment or to give an opinion about patients, colleagues or the trust.

Staff must not use recording equipment (such as camera phones/cameras/video cameras) to take images whilst on Trust premises except with the explicit (written) consent of the individual(s) in the image. Under no circumstances may these images be posted/uploaded onto a social networking website or similar media.

All data held by the Trust must conform to the requirements of the Data Protection Act 1998 ("DPA). Under the DPA, patients and staff have a right of access to their records, but you should be aware that unauthorised disclosure of personal information (including such information that is recorded on computer) is unlawful. Further guidance is available from your manager.

If it is necessary to share Trust personal confidential data in order to effectively carry out your work, you must make sure that as far as is reasonable this information will be exchanged securely, on a strictly 'need to know' basis, using the minimum that is required and be used only for the purpose for which the information was given. If you are unsure about this, you should seek advice from your manager or the Trust's Caldicott Guardian.

You are responsible for ensuring that all information is stored, used, transported and accessed appropriately and that security levels are maintained at all times in accordance with the trust's Information Governance policies.

Any breaches of these conditions during your employment may result in disciplinary action and may be regarded as gross misconduct. Further, any unauthorised disclosures of personal information may be an offence under the Data Protection Act 1998, or may breach the common law duty of confidentiality and/or professional obligations. Any such breach may result in criminal proceedings being taken against you and/or a civil action for damages by the Trust or another affected party

Conflict of Interest

The Trust is responsible for ensuring that the services for patients in its care meet the highest standards. Equally, it is responsible for ensuring that staff do not abuse their official position, to gain or benefit themselves, their family or friends.

Equality and Diversity

The Trust values equality and diversity in employment and in the services we provide. It is committed to promoting equality and diversity in employment and will keep under review our policies and procedures to ensure that the job related needs of all staff working in the Trust are recognised. The Trust aims to ensure that all job applicants, employees or clients are treated fairly and valued equally regardless of sex, marital status, domestic circumstances, age, race, colour, disablement, ethnic or national origin, social background or employment status, sexual orientation, religion, beliefs, HIV status, gender reassignment, political affiliation or trade union membership. Selection for training and development and promotion will be on the basis of the individual's ability to meet the requirements for the job.

All staff are responsible for ensuring that the Trust's policies, procedures and obligation in respect of promoting equality and diversity are adhered to in relation to both staff and services.

Vulnerable Groups

- To carry out responsibilities in such a way as to minimise risk of harm to children, young people and vulnerable adults and to promote their welfare in accordance with the Children Act 2004, Working Together to Safeguard Children (2006) and No Secrets guidance (DH 2000).
- To demonstrate an understanding of and adhere to the trust's child protection policies.

Smoke Free

The Trust implements a Smoke Free policy that applies to all staff. Staff are not allowed to smoke while wearing a recognisable Trust uniform or visible trust identification badge, and not allowed to smoke anywhere on hospital grounds. Staff are not allowed to take additional breaks in order to smoke. They may smoke during designated breaks but only out of uniform and off site. Staff contravening this policy may be subject to disciplinary procedures.

Standards of dress

All staff are expected to abide by the Trust's guidance on standards of dress.

This job description outlines the current main responsibilities of the post. However the duties of the post may change and develop over time and may therefore be amended in consultation with the post holder,

TERMS AND CONDITIONS GUIDE FOR APPLICANTS

ALL APPLICANTS SHOULD ENSURE THEY HAVE READ AND UNDERSTOOD THE FOLLOWING CONDITIONS

1. Applicants should hold the Fellowship or Membership of the appropriate Royal College or Faculty or overseas equivalent and maintain appropriate CME accreditation. Applications will be considered from those unable for personal reasons to work on a full-time basis. Any candidates wishing to work on a part-time basis should indicate this when submitting his/ her application.
2. The NHS (Appointment of Consultants) Regulations 2005 prevent appointment of any applicant for consultant posts commencing after 1st January 1997 who is either not:
 - On the GMC specialist register
 - In possession of the CCT, or EEA/EU equivalent, (although doctors who have completed higher specialist training and are within 6 months of being placed on the specialist register may be appointed)

It is the responsibility of applicants to satisfy all necessary GMC requirements prior to appointment. Applicants must ensure they provide evidence in their application identifying eligibility to be placed on the specialist register. This would ideally be in the form of a notification from the GMC.

3. The appointment is covered by the Terms and Conditions of Service of the Royal Free London NHS Foundation Trust and is subject to the National Health Services (Superannuation) Regulations.
4. As an employee of the Royal Free London NHS Foundation Trust you will be expected to practice at all times in accordance with the infection control standards specified in trust policies and procedures and the Health Act (2006) *Code of Practice for the prevention and control of health care associated infections*.
5. The full time basic salary for the first appointment of an NHS consultant (as at 1st April 2009) is set out below, including payment for agreed additional programmed activities. Part-time consultants will be paid pro rata, based on the number of agreed weekly Programmed Activities in the consultant's Job Plan. Salary on commencement and subject to progression will be in accordance with Paragraphs 4-9 of Schedule 14 of the Terms and Conditions.

Pay thresholds

Threshold	Period before eligibility for threshold	Basic salary (full-time) (2013/14)	Payment for one additional Programmed Activity	Annual payment for one additional Programmed Activity per week

1	N/A(full-time starting salary)	£75,249	£145	£7,525
2	One year	£77,605	£149	£7,760
3	One year	£79,961	£154	£7,996
4	One year	£82,318	£158	£8,232
5	Five years	£84,667	£163	£8,467
6	Five years	£90,263	£173	£9,026
7	Five years	£95,860	£184	£9,586
8		£101,451	£195	£10,145

A London Weighting Allowance of £2,162 per annum is payable and pro rata for part-time consultants.

6. There are separate arrangements for those whose first appointment as an NHS consultant was before 31st October 2003. These are stated in the terms and conditions of service. The successful applicant will be required to complete a health statement and the Trust may require an appointee to pass a medical examination as a condition of appointment.
7. **Private Professional Services and NHS Programmed Activities:** subject to the provision in Schedule 9 of the Terms and conditions, you may not carry out Private Professional Services during your programmed activities.
8. Significant new clinical services may only be developed after agreement has been reached with the relevant management team and the financial arrangements approved.
9. Assistance may also be given to newly-appointed consultants towards the cost of the removal expenses, provided that the consultant moves from a position within the National Health Service, that removal is necessary to comply with the Trust's requirements concerning the place of residence and a written request is sent to the Workforce department before or immediately after appointment.
10. It is now NHS policy that all new staff with patient contact will require satisfactory disclosures from the Criminal Records Bureau or successor organisation. With effect from 1 November 2004 the trust will therefore seek disclosures for all new medical appointments. The Trust must check the criminal background of all employees. Candidates must provide information on application relating to any criminal convictions they have had, even if they are 'spent' for other purposes. Posts in hospitals are exempt from the provisions on Section 4 (2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975. We will keep any information given completely confidential.