

Job Profile

Senior Clinical Fellow in Thoracic Surgery

Royal Brompton Hospital

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A System of Care

Guy's and St Thomas' NHS Foundation Trust comprises five of the UK's best known hospitals – Guy's, St Thomas', Evelina London Children's Hospital, Royal Brompton and Harefield – as well as community services in Lambeth and Southwark, all with a long history of high quality care, clinical excellence, research and innovation.

We are among the UK's busiest, most successful foundation trusts. We provide specialist care for patients including heart and lung, cancer and renal services as well as a full range of local hospital and community services for people in Lambeth and Southwark.

We have a long tradition of clinical and scientific achievement and – as part of King's Health Partners – we are one of England's eight academic health sciences centres, bringing together world-class clinical services, teaching and research. We have one of the National Institute for Health Research's biomedical research centres, established with King's College London in 2007, as well as dedicated clinical research facilities.

Royal Brompton and Harefield hospitals joined Guy's and St Thomas' in February 2021 and is the largest specialist heart and lung centre in the UK and among the largest in Europe. We provide treatment for people with heart and lung disease, including rare and complex conditions, offering some of the most sophisticated treatment that is available anywhere in the world.

Our integrated approach to caring for patients from before birth, through childhood, adolescence and into adulthood and old age has been replicated around the world and has gained Royal Brompton and Harefield an international reputation as a leader in heart and lung diagnosis, treatment and research.

We are working in partnership with King's Health Partners, to deliver our vision of creating a new centre of excellence, which will be the global leader in the research into and treatment of heart and lung disease, in patients from pre-birth to old age.

We have around 22,700 staff, making us one of the largest NHS Trusts in the country and one of the biggest employers locally. We aim to reflect the diversity of the communities we serve and continue to develop new and existing partnerships with local people, patients, neighbouring NHS organisations, local authorities and charitable bodies and GPs.

We strive to recruit and retain the best staff as the dedication and skills of our employees lie at the heart of our organisation and ensure that our services are of the highest quality, safe and focused on our patients.

Clinical Group mission and approach.

Our mission is to be the UK's leading specialist centre for heart and lung disease. We will achieve this mission through a strategy of focused growth in aspects of heart and lung treatment, such as congenital heart disease, arrhythmia, heart failure and advanced lung diseases. Our approach is based on:

- The continual development of leading-edge services through clinical refinement and research
- The effective and efficient delivery of core specialist treatment
- The transition of appropriate routine services to other centres to release capacity for new interventions



Remaining an autonomous specialist organisation is central to preserving and building our strong clinical and organisational record. However, we are equally convinced of the importance of effective partnerships particularly with major academic bodies to ensure a continuing pipeline of innovations to develop future treatments.

1.1 Performance and achievements in 2020/2021

Our experts in 2020/2021

Cared for more than 152,000 patients in our outpatient clinics and over 52,000 'virtual' appointments	Treated 85 critically ill patients with cardiogenic shock through VV-ECMO and other therapies, achieving an 86% survival rate	Maintained one of the fastest 'arrival to treatment' times for UK heart attack patients – 30 minutes compared with a national median 39 minutes
Launched Rainbow badges showing that the Trust offers more open, non-judgmental and inclusive care for patients and their families and friends who identify as LGBT+	During the COVID-19 pandemic Harefield Hospital became one of two centres in London to maintain essential cardiac surgery involving Cardiac specialists from both our hospitals and colleagues from Guy's and St Thomas' NHS FT and Imperial College Healthcare	
	We are one of only five adult centres for ECMO (an advanced life support) in England. Treated more Covid 19 patients with ECMO than any other centre in Europe	Introduced sunflower lanyards which, when worn discreetly, indicate to staff that wearers have a hidden disability and may require additional support or assistance
Received a 96% recommendation score in the annual Friends and Family Test	Our researchers produced over 800 peer reviewed publications, maintaining the Trust's position as a leading centre for cardiovascular, critical care and respiratory research	Over 2,000 patients were recruited to research projects and there are now almost 200 active projects running
Improved our communication to patients with the introduction of digital appointment letters and text reminders		Maintained our environmental responsibility by reducing our carbon emissions and our energy consumption by 9% over the previous year



1.2 Range of Services

The Clinical Group provides first-rate clinical services and exceptional research output.

We have an outstanding Research and Development pedigree; with over 500 active research projects across 10 R&D programmes. Every one of these programmes has been consistently given the top rating by the NHS R&D Directorate. The table below illustrates the inter-relationship between our R&D activity and clinical services.

Several of our clinical services have been formally designated as national services by the Department of Health: Heart and Lung transplantation, Ventricular Assist Devices (LVAD), Pulmonary Hypertension and Primary Ciliary Dyskinesia.

Research Programmes		Clinical Services
Congenital Heart Disease	\Leftrightarrow	Adult Congenital Heart Disease
		Pulmonary Hypertension
		Paediatric Respiratory
		Paediatric Congenital Heart Disease
		Fetal Cardiology
		Primary Ciliary Dyskinesia
Chronic Coronary Heart Disease and Atheroma	\Leftrightarrow	Acquired Heart Disease
Failing Heart	\Leftrightarrow	Heart Failure
		Heart & Lung Transplant
Critical Care	\Leftrightarrow	Critical Care relating to Heart and Lung
Chronic Respiratory Failure	\Leftrightarrow	Chronic Obstructive Pulmonary Disease
		Sleep Ventilation
		Pulmonary Rehabilitation
		Lung Volume Reduction
Lung Cancer	\Leftrightarrow	Lung and Upper GI cancer services
Severe Respiratory Disease	\Leftrightarrow	Interstitial Lung Disease
		Acute Lung Injury
		Asthma & Allergy
Occupational and Environmental Medicine	\Leftrightarrow	Occupational Lung Disease
Chronic Suppurative Lung Disease	\Leftrightarrow	Paediatric and Adult Cystic Fibrosis
		Non – CF Bronchiectasis
		Aspergillosis
		Mycobacterial Infections

1.3 Organisation

The Heart, Lung and Critical Care Clinical Group Board are constituted as follows:

Non-Executive Members	Executive Members	
Baroness Sally Morgan (Chair)	Dr Ian Abbs, Chief Executive	
Mr Simon Friend (Deputy Chair)	Mr Lawrence Tallon, Deputy Chief Executive	
Dr Felicity Harvey, CBE	Mrs Avinderjit Bhatia, Chief Nurse and Vice President of the Florence Nightingale Foundation	
Heart, Lung and Critical Care Clinical Group		
Dr Richard Grocott-Mason, Chief Executive	Dr Mark Mason, Medical Director	
Mr Nicholas Hunt, Executive Director	Mr Robert Craig, Director of Development and Operations	
Mrs Joanna Carter, Director of Nursing	Mr Robert Stevens, Interim People Director (HR)	
Mr Richard Guest, Chief Financial Officer	Mr Piers McCleery, Director of Strategy and Corporate Affairs	
Mr Luke Blair, Head of Communication and Public Affairs	Mr Denis Lafitte, Chief Information Officer	
Mr David Shrimpton, Managing Director, Private Patients		



The Heart, Lung and Critical Care Clinical Group is a formal sub-committee of the Guy's and St Thomas' NHS Foundation Trust Board, with delegated responsibilities and decision-making rights for the strategic and operational running of its services. These are set out in the Guy's and St Thomas' Scheme of Delegation, and the Trust's Standing Financial Instructions provide the delegation limits with regards to financial decisions.

The Guy's and St Thomas' NHS Foundation Trust Board of Directors holds legal accountability for the Trust including all aspects of the Heart, Lung and Critical Care Clinical Group. The Clinical Group Board provides assurance to the Guy's and St Thomas' NHS Foundation Trust Board of Directors on the overall operational, quality and safety and financial performance of the Heart, Lung and Critical Care Clinical Group, and on the development and delivery of the Trust's strategy for its heart and lung services.

1.4 Harefield Hospital Site

Harefield Hospital (HH) is a regional centre for cardiology and cardiothoracic surgery, and an international centre for adult heart and heart-lung transplantation. It is one of a small number of UK cardiac centres assisting in development of implantable mechanical ventricular assist devices in the management of end-stage heart failure. It also provides a primary intervention service for acute coronary syndromes to selected Trusts and the London Ambulance Service, in outer West London and the Home Counties. It has approximately 1,185 staff, 180 beds with 5 operating theatres, and 4 catheter laboratories.

1.5 Royal Brompton Hospital Site

The Royal Brompton Hospital (RBH) is a specialist cardiothoracic centre specialising in diseases of the heart and lung, with services for adults (Cardiology, Cardiothoracic Surgery, Radiology, and Thoracic Medicine) and Paediatrics. It has approximately 2,081 staff, 296 beds, 6 operating theatres, 5 catheter laboratories, a private patients' ward and extensive imaging facilities. A state-of-the-art diagnostic and imaging centre is due to open in the autumn of 2021. The Hospital benefits from a joint cardiac and respiratory clinical research facility and has strong links both with King's College London/ King's Health Partners and the National Heart and Lung Institute at Imperial College.

1.6 Clinical Governance and Quality

The Clinical Group has an extensive programme of clinical governance and quality. The programme is delivered through the organisation's systems and processes for monitoring and improving services, including sections for:

- Clinical audit and information
- Clinical risk management
- Research and development office
- Infection prevention and control
- Patient feedback
- Clinical Quality and Improvement

Medical appraisals form an integral part of the process with each doctor undertaking annual appraisal with an allocated appraiser. There is also a programme of mandatory training undertaken by all staff.



1.7 Regulation

The Trust was inspected by the Care Quality Commission during Autumn 2018 and the inspection report was published in February 2019. Overall, the Trust was rated by the CQC as 'Good'. Within this rating, Harefield Hospital was rated as 'Good' and the Royal Brompton Hospital as 'Good' and identified several areas of outstanding practice.

1.8 Research and Development - King's Health Partners-Cardiovascular

Cardiovascular research and clinical services (KHP Cardiovascular) are considered a "peak of excellence" across King's Health Partners (KHP) and the partners are embarked on a transformation of service delivery and the integration of research and education to revolutionise cardiovascular prevention and care.

KHP Cardiovascular builds upon more than 8 years of collaboration through the Cardiovascular Clinical-Academic group (CAG), which brings together the clinical cardiovascular services of Guy's & St Thomas' NHS Foundation Trust together with the Royal Brompton and Harefield Hospital and King's College Hospital NHS Foundation Trust and the academic Cardiovascular Medicine and Sciences School of the university, King's College London (see <u>https://www.kcl.ac.uk/scms</u>). The overall vision is to integrate clinical services, teaching and research across these groups in a world-class centre that delivers excellent outcomes and innovative research-based advances for patients.

The current phase of the KHP Cardiovascular development consists of closer collaborative working and clinical-academic integration of the existing groups, and the strengthening of the population network within which we deliver services. In practice, this means increasingly working as a single clinical and operational team, providing a seamless service to patients across KHP, faster research and innovation translation, and new educational programmes.

The ultimate aim is the development of a new clinical academic hub within a purpose-built facility at the St Thomas' site.

1.9 Mentorship

All new doctors will be provided a detailed and focussed Trust and Departmental Induction upon their arrival. As part of the local induction, a Professional and Management Mentor will be allocated, with whom the appointee will meet for regular meetings.



THE SURGICAL DIRECTORATE

General Overview

RBH's surgical programme makes it the largest cardiothoracic unit in the UK. RBH supports a wide catchment area having longstanding referral relationships with clinicians in Beds & Herts, Bucks, Berks, Surrey and the South West Peninsula, as well as providing tertiary and quaternary services to referrers across the UK.

At Royal Brompton there are currently 279 beds in the hospital: the surgical unit has up to 54 beds available, divided between 2 cardiothoracic wards with integrated HDU facilities. Of the remainder, 55 are dedicated to cardiology, 86 to respiratory medicine, 18 are adult ICU plus 4 further surgical overnight recovery beds, and for 50 paediatrics. There is also a 28-bedded private ward. There are 4 catheter laboratories, 6 operating theatres and separate bronchoscopy facilities.

At Harefield there are currently 137 beds in the hospital: the surgical unit has up to 44 beds available, divided between 2 cardiothoracic wards, and a 9 bed HDU. Of the remainder, 42 are dedicated to cardiology and respiratory medicine, 14 are adult ICU beds, and for 30 transplant patients. There is also a 10-bedded private ward. There are 4 catheter laboratories, 6 operating theatres (3 Cardiac, 2 Thoracic) and one bronchoscopy room.

Royal Brompton Hospital Support Services

Imaging:

The specialist cardiothoracic imaging services at the Royal Brompton are first class with rapid access to CT, and CT-guided needle biopsy using the department's 64-slice CT scanner. There is access to cardiac MRI and both cardiac and general nuclear medicine scanning on site. General MRI and PET-CT services are provided by Chelsea & Westminster Hospital and an independent sector provider respectively with rapid access times. The Trust has plans to acquire its own PET-CT scanner.

Laboratory Medicine including specialist Pulmonary Histopathology:

The full range of laboratory services are provided on-site, or by arrangement with other NHS laboratories. The pulmonary histopathology service is led by Professor Andrew Nicholson, providing a rapid turn-around frozen-section service and BAL service.

Invasive and Interventional Cardiology:

The cardiology department has four catheter laboratories providing all aspects of invasive angiography, interventional (PCI), pacing and electrophysiology, and one biopsy/pacing room with limited facilities.

Non-Invasive Cardiology:

A comprehensive service is provided which includes stress testing, echocardiography, transoesophageal echocardiography, nuclear cardiology ambulatory monitoring, 24-hour tapes, ECG's, full outpatient cardiac facilities and pacing clinics. There is a close working relationship with radiology to provide cardiac CT and MRI.



Respiratory Physiology:

The department provides a comprehensive range of investigations.

STAFFING

Consultant Medical Staff

Cardiac Surgeons:

Mr G Asimakopoulos Mr A De Souza Mr M Petrou Mr C Quarto Mr U Rosendahl Mr R Trimlett Ms R Yadav Thoracic Surgeons: Miss S Begum Mr S Buderi Mr E Lim Mr S Jordan

Paediatric/Adult Congenital Cardiac Surgeons:

Mr A Hoschtitzky Mr G Michielon Prof D Shore Mr B Rocha (Locum)

Junior Medical Staff

- 6 Thoracic Clinical Fellows
- 7 Congenital / Cardiac Senior SpRs/Clinical Fellows (Deanery & Trust)
- 8 Cardiac SpRs/Clinical Fellows (Deanery & Trust)
- 7 CT1/Junior Clinical Fellows (Deanery & Trust)
- 5 Surgical Care Practitioners
- 5 Peri-operative Care Practitioners



JOB DESCRIPTION

- Post: Senior Clinical Fellow in Thoracic Surgery
- Location: This is a Trust appointment and the main base will be at Royal Brompton Hospital, Chelsea, London, SW3 6NP. The post holder may also be required to work at our Harefield site on an intermittent basis, or more regularly in due course by mutual arrangement. Additionally, the post holder may be required to work at any of the hospital sites and any associated sites as required.
- **Duration:** Contract: 6 months in the first instance, extendable by mutual consent to up to a maximum 24 months

To assist the consultant staff in the preoperative assessment, operative and postoperative management of patients under their care. In addition, clinical Trust fellows have a responsibility for administrative issues including staffing clinics, arranging operation lists, the organisation and staffing of lists and overseeing preoperative and postoperative care. This should include regular ward rounds and providing in and out of hours clinical cover when on-call.

DUTIES OF THE POST

Aims and responsibilities of the post:

To co-ordinate and supervise the admission and discharge of patients from the unit. Responsible for maintaining accurate notes, up-to-date cardiac and thoracic monthly audit and for recording patient details in the database. To take charge of all patients in the unit under the direction of the consultant surgeon to which you are attached. Co-ordinate and supervise the work of all the junior medical staff. Operating duties are directly or indirectly supervised and specific targets in operative experience as prospectively set out should be achieved.

The senior post holders will principally be assigned to one consultant but occasionally may be required to provide support to other firms. The junior post holders will rotate between the consultant firms and be fully involved in a range of cardiothoracic work. In addition to providing immediate cover to patients in recovery and on the general cardiothoracic ward, the postholder will provide cover for intensive care emergencies. Consultant cover will be available at all times.

<u>Clinical</u>

Attend and assist in the out-patient clinics, taking responsibility to ensure adequate staffing for the clinic and to facilitate its efficient running in any other way. Clinic letters must be dictated promptly.

Attend consultant ward rounds.

Make formal ward rounds daily including at weekends and holidays as part of the on-call responsibilities. These rounds should be considered a teaching opportunity for more junior staff.

Participation in the relevant rota will depend on clinical experience of the successful candidate. Out of hours responsibilities include:

• Night-time supervision of care of surgical patients including those in the Intensive Care Unit/Recovery Unit and communicate appropriately with the responsible consultant regarding major problems arising with that consultants' patients.



• Weekend on-call responsibilities include ward rounds as well as participation in emergency operations and assessment of in-patients or outside referrals.

Advise on the discharge of patients under the care of the cardiothoracic surgical consultants.

Theatre responsibilities

Ensure that the theatre cases are appropriately staffed.

Ensuring that junior staff are involved at an appropriate level wherever possible. Junior staff must be assigned to cases whenever ward responsibilities permits.

Ensuring that adequate junior level assistants are available to help open and close cases performed under the direction of, or with the assistance of, a consultant.

Ensuring that all cases are sent for promptly and facilitating the efficient transfer of patients if required.

Ensuring that communication is maintained with the relatives of patients.

Ensure that either the operating surgeon or senior level assistant involved in the operation complete all appropriate data entry tasks at the conclusion of the operation. In addition, the principal operator should be responsible for creating a suitable operation note, which accurately records the events of the procedure. If operations are delayed or cancelled, the post holders are responsible for communicating with the wards appropriately and explaining the situation to the patients.

Admission responsibilities

Communicate with the consultant staff regarding their respective theatre schedules individually and co-ordinate hospital admission in an integrated and coherent manner such that hospital beds are utilised most efficiently. This may require suggesting modifications to the planned admissions schedule to individual consultants on the basis of in-patient referrals, emergency cases or theatre cancellations. Participation in weekly planning meetings is required.

Waiting list management

Maintain knowledge of the active waiting list for your consultant and participate in their selection for admission and surgery in a manner that is equitable for patients as much as possible.

Be involved in the evaluation of patients referred to the service, particularly in-patient referrals.

Respond to queries from the patients and their GP's (both by telephone and letter) regarding their position on the waiting list and anticipated time of operation.

Administration of service

As part of their overall responsibilities for the patients, post holders must ensure that medical records are adequately kept by the junior medical staff including daily notes on in-patients and prompt dictation of discharge summaries. Notes must be representative and appropriate to the patient's true condition.

Medical audit

Post holders must ensure that all junior staff are present at the monthly medical audit meeting. Opportunities to present cases for discussion from the firm will arise and should be prepared for and presented by post holders or assigned to a colleague for presentation.



Research

Research is an integral component of the training programme. Post holders are encouraged and expected to participate in clinical or basic science research.

Teaching

Post holders are expected to take an active role in the postgraduate teaching activities. In addition he/she may be required to undertake teaching of medical students, nurses and other paramedical staff. Clinical research is continuously undertaken within the unit and the post holder will be encouraged to participate.

This job description lists key components of the job, but is not in any way exhaustive. The post holder must accept that he/she will also perform duties in occasional emergencies and unforeseen circumstances at the request of the appropriate consultant, in consultation where practicable with both junior and senior colleagues. However, it is recognised that additional commitments arising this way are exceptional and in particular that junior doctors should not be required to undertake work of this kind of a prolonged period or on a regular basis.

Applicants are encouraged to view the Directorate and discuss the post. Further information can be obtained from:

Sofina Begum <a>s.begum@rbht.nhs.uk Consultant Thoracic Surgeon, Royal Brompton Hospital

CAREER ADVICE

If you know the lines on which you wish to plan your career and require career advice and guidance you should, in the first instance, talk to the fellowship supervisor named in your contract, who will normally be a consultant for whom you work. You may also approach the district speciality tutor (who is responsible to the regional specialty advisor) for the specialty in which you are interested. If you are less certain and wish to be advised about possible careers then you should contact your district clinical tutor direct, who may also take the initiative in contacting you. Some, but not all, districts will appoint a medically qualified counsellor who will contact you direct.

If you have greater concerns about, or problems with your career or the way it is progressing, you should contact your District Clinical Tutor and/or Director of Postgraduate Medical Education and Training. The Director of PGMET, or member of his staff, will be happy to see you as, ultimately, he is responsible for the whole process of counselling services in the region.

Additional Information

Confidentiality

During the course of your employment you may have access to, see or hear information of a confidential nature and you are required not to disclose such information, particularly that relating to patients and staff.

Data Protection

In order to comply with the Data Protection Act 1998 you must not at any time use personal data held by the Trust for any unauthorised purpose or disclose such as data to a third party. You must not make any disclosure to any unauthorised person or use any confidential information relating to the business affairs of the Trust, unless expressly authorised to do so by the Trust.



Health and safety

You must co-operate with management in discharging its responsibilities under the Health and Safety at Work Act 1974 and take reasonable health and safety of yourself and others and ensure the agreed safety procedures are carried out to maintain a safe environment for patients, employees and visitors.

Diversity

You are at all times required to carry out your responsibilities with due regard to the Trust's diversity policy and to ensure that staff receive equal treatment throughout their employment with the Trust.

Risk management

All staff have a responsibility to report all clinical and non-clinical accidents or incidents promptly and, when requested, to co-operate with any investigation undertaken.

Conflict of interests

You may not without the consent of the Trust engage in any outside employment. In accordance with the Trust's conflict of interest policy, you must declare to your manager all private interests, which could potentially result in personal gain as a consequence of your employment in the Trust. Interests that might appear to be in conflict should also be declared to your manager.

In addition, the NHS Code of Conduct and Standards of Business Conduct for NHS Staff (HSG 93/5) requires you to declare all situations where you or a close relative or associate has a controlling interest in a business (such as a private company, public organisation or other NHS voluntary organisation) or in any activity which may compete for any NHS contracts to supply goods or services to the Trust. You must therefore register such interests with the Trust, either on appointment or subsequently whenever such interests are gained. You should not engage in such interests without the written consent of the Trust, which will not be unreasonably withheld. It is your responsibility to ensure that you are not placed in a position that may give rise to a conflict between your private interest and your NHS duties.

Code of Conduct for Professionally Qualified Staff

All staff are required to work in accordance with their professional group's code of conduct (e.g. NMC, GMC, DoH Code of Conduct for Senior Managers).

Criminal Records Bureau

Any applicant who is short-listed for this post will be asked to complete a disclosure form as the postholder will be required to have contact with vulnerable adults or persons under the age of 18. The successful candidate will be subject to a criminal record check from the Criminal Records Bureau prior to the appointment being confirmed. The disclosure will include details of cautions, reprimands, and final warnings, as well as convictions if applicable.

To abide by the Trust's no-smoking policy

Note: The above description is not exhaustive, and may be altered to meet the changing needs of the post and of the directorate. The post holder will be expected to be flexible and to co-operate in accordance with the changing requirements of the directorate and of the Trust.



PERSON SPECIFICATION

Job Title:Senior Clinical Fellow in Thoracic SurgeryDepartment:Cardiothoracic Surgery (Thoracic)

	Qualities	E/D
QUALIFICATIONS	MBBS or equivalent medical qualification	E
	Successful completion of MRCS or equivalent at time of application	E
ELIGIBILITY	• Full GMC registration with a licence to practice (or in progress)	E
	• Evidence of achievement of ST 1-2 equivalent competencies	E
	relevant to cardiothoracic surgery at time of appointment	E
	• Eligibility to work in the UK	E
FITNESS TO PRACTICE	Is up to date and fit to practice safely	E
LANGUAGE SKILLS	All applicants to have demonstrable skills in written and spoken	E
	English that are adequate to enable effective communication about medical topics with patients and colleagues which could be demonstrated by the following:	
	Have the appropriate scores in the academic International English	E
	Language Testing System (IELTS) – in line with GMC standards	
HEALTH	Meets professional health requirements (in line with GMC	E
	standards/Good Medical Practice)	
CAREER	Ability to provide complete details of employment history	E
PROGRESSION	• At least 12 months' experience (at SHO/ST 1/2 level) in	
	cardiothoracic, cardiac or thoracic surgery (not including foundation modules)	E
APPLICATION COMPLETION	• ALL sections of application form FULLY completed according to written guidelines	E
CLINICAL SKILLS	• Technical Knowledge & Clinical Expertise: Capacity to apply sound	E
	clinical knowledge & judgement & prioritise clinical need.	
	Demonstrates appropriate technical competence & evidence of	
	development of excellent diagnostic skills & judgement	
	Validated logbook documentation of surgical exposure to date	E
	• Personal Attributes: Shows aptitude for practical skills, e.g. hand-	D
	eye co-ordination, dexterity, visuo-spatial awarenessAttendance at relevant courses	



ACADEMIC /	• Research Skills: Demonstrates understanding of the basic principles	E
RESEARCH SKILLS	of audit, clinical risk management & evidence-based practice.	
	Understanding of research basic research principles, methodology &	
	ethics, with potential to contribute to research	
	• Teaching: Evidence of contributing to teaching & learning of others	Е
PERSONAL SKILLS	• Judgement under Pressure: Capacity to operate effectively under	Е
	pressure & remain objective in highly emotive/pressurised situations.	
	Awareness of own limitations & when to ask for help	
	 Communication Skills: Capacity to communicate effectively & 	
	sensitively with others, able to discuss treatment options with	Е
	patients in a way they can understand	
	 Problem Solving: Capacity to think beyond the obvious, with 	
	analytical and flexible mind. Capacity to bring a range of approaches	Е
	to problem solving	
	• Situation Awareness: Capacity to monitor and anticipate situations	
	that may change rapidly	Е
	• Decision Making: Demonstrates effective judgement and decision-	
	making skills	Е
	• Leadership & Team Involvement: Capacity to work effectively in a	
	multi-disciplinary team & demonstrate leadership when appropriate.	Е
	Capacity to establish good working relations with others	
	• Organisation & Planning: Capacity to manage time and prioritise	
	workload, balance urgent & important demands, follow instructions.	
	Understands importance & impact of information systems	Е
COMMITMENT TO	• Learning & Development: Shows realistic insight into cardiothoracic	Е
SPECIALTY	surgery and the demands of a surgical lifestyle. Demonstrates	
	knowledge of training programme & commitment to own	
	development.	
PROBITY	• Professional Integrity: Takes responsibility for own actions,	Е
	demonstrates respect for the rights of all. Demonstrates awareness of	
	ethical principles, safety, confidentiality & consent. Awareness of	
	importance of being the patients' advocate, clinical governance &	
	responsibilities of an NHS employee	

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



APPENDIX ONE

HEALTH CLEARANCE

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

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

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

CLINICAL GOVERNANCE

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

PERSONAL AND PROFESSIONAL DEVELOPMENT

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

MANAGEMENT

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

GENERAL

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



IMPORTANT GENERAL NOTE

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

INDEMNITY

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

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

Core behaviours for all Trust staff

All staff will commit to:

- Act with honesty and integrity at all times
- Demonstrate respect for others and value diversity
- Focus on the patient and internal and external customer at all times
- Make an active contribution to developing the service
- Learn from and share experience and knowledge
- Keep others informed of issues of importance and relevance
- Consciously review mistakes and successes to improve performance
- Act as ambassadors for their directorate and the Trust
- Be aware of the impact of their own behaviour on others
- Be discreet and aware of issues requiring confidentiality

In addition, all managers and supervisors will:

- Value and recognise the ideas and contributions of all team members
- Coach individuals and teams to perform to the best of their ability
- Delegate work to develop individuals in their roles and realise their potential
- Give ongoing feedback on performance, and effectively manage poor performance
- Provide support and guidance to all team members
- Encourage their team to achieve work/personal life balance
- Actively listen to comments/challenges and respond constructively
- Lead by example, setting high standards
- Ensure that there are sufficient resources for their team and rebalance priorities accordingly
- Provide a safe working environment