

**Job title:        Consultant**

**Department: Stroke Medicine**

**Division:        Unplanned Care**



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# Message from Adam Sewell Jones, Chief Executive

Thank you for expressing an interest in working here at East and North Hertfordshire NHS Trust.

East and North Hertfordshire NHS Trust is a very special organisation. Our teams are amazing, and this was demonstrated even more so during the unprecedented challenges brought about by the Covid-19 pandemic. Our ability to be flexible and innovative in the way in which we work and deliver our services to our catchment has never been more important than it is now.

We are a large acute Trust which operates across four sites; acute services are offered at the Lister Hospital; specialist cancer services at the Mount Vernon Cancer Centre (MVCC); and non-acute services offered at the New QEII and Hertford County hospitals. We underwent an extensive £150m reconfiguration some years ago which saw all inpatient and complex services centralised at the Lister Hospital in Stevenage.

We are an organisation with a strong culture of positive values and our ambition is to provide high-quality, compassionate care to our community in all that we do, including patient experience, clinical outcomes, patient safety and financial sustainability.

We have many great people working for us doing all sorts of roles, ranging from porters to doctors, from administrators to nurses, and everything in between. But we all share one vision – we put our patients at the heart of everything we do.

We have recently partnered with the world-renowned Virginia Mason Institute in an exciting 3-year programme to create and embed a quality management system – our ENH Production System. Drawing on years of quality improvement and culture change experience, the ENH Production System will equip our teams to identify areas for improvement, make changes and measure impact – all with the patient at the centre.

If you decide to apply, you will be joining us at an incredibly exciting time as we continue on our transformation journey. I hope very much, that after reading this pack, you will want to join us on that journey.

I wish you the best of luck in your application.



**Adam Sewell-Jones**  
**Chief Executive**

# Message from Dr Justin Daniels, Medical Director

Before you decide to apply for a consultant job, you need to be really sure that the hospital you are looking to join has values and ambition that align with yours.

East and North Hertfordshire NHS trust wants its consultants to succeed – we will give you the support, the resources, and the infrastructure to give your patients safe, excellent care. When you start, our new consultant programme will allow you to understand how the hospital works.

In return we ask for your support to help us to provide care that we would all be proud to recommend to our families and friends.

We want consultants who are research active, we want consultants who are keen on education and training. We also want consultants who can innovate and who can lead.

If you are excited about working for us, then please get on and apply. I look forward to meeting you.

Justin Daniels  
Consultant Paediatrician and Medical Director



**Justin Daniels**  
**Medical Director**

Our complete commitment to developing careers means we're looking for proactive, motivated, forward thinking, and dynamic individuals to join our clinical team. This post is an important part of our ongoing development of medical services at East and North Hertfordshire NHS Trust, offering the successful applicant the opportunity to work closely with the existing Stroke physicians to provide a high standard of care across the Trust. We are seeking consultants with enthusiasm, commitment, and drive to work closely with colleagues throughout the organisation and within the community to help lead the organisation. This is an excellent opportunity within the Stroke department at East and North Hertfordshire NHS Trust. The department has just been designated a hub (HASU) and will progress from receiving around seven hundred attendances per annum to around eleven hundred. This is an exciting opportunity to further develop and expand our 7-day consultant led stroke service. We are seeking a dynamic individual with an interest in leadership, research, and the skills to provide high quality stroke care.

The post is negotiable to be integrated with general medicine depending on individual interests, however the 7-day consultant led Stroke service requires the majority of the on - call commitments within the Stroke Department including weekend stroke cover. We have excellent support from our local GPs, commissioners and at executive/board level within the trust.

The Trust has comprehensive programmes of leadership mentoring available for newly qualified Consultants. Opportunities are also available to other Consultant appointees to play an active part in the programmes.

**Please note:** That as part of the selection process you will be required to undertake a psychometric assessment which is mandatory. There are no right or wrong answers and the aim of this is to give the panel members more information about the strengths and possible derailers of candidates preferred behaviors. **You will also be required to take part in a stakeholder event, further details of which will be provided if you are shortlisted for interview.**

Applicants must be on or within 6 months of being on the Specialist Register, at the time of interview. Applications from those wishing to work part-time or job share are actively encouraged. It is imperative that you also attach your CV to your application as this is an integral part of the application process. Please ensure to supply the names and addresses of referees. This must cover a period of 3 years with no gaps, one of whom must be your current employer.

**To arrange an informal visit, please contact:**

<b>Dr Phil Wilkinson</b> Clinical Director, Stroke	phil.wilkinson@nhs.net	<b>Via Lister Hospital</b> <b>Switchboard (01438)</b> <b>314333</b>
<b>Mrs Charlene Mann</b> Medical Resourcing Advisor	Charlene.mann1@nhs.net	<b>(01438) 286512</b>

**Interview Date: 10<sup>th</sup> May 2024**

# About us

Since our creation in April 2000, we have undergone significant change. By the end of 2014 we delivered one of the most complex service reconfigurations in the NHS – both to deadline and budget. Under the banner of the *Our changing hospitals* programme, this saw an investment of £150 million to transform Lister Hospital into the trust's specialist emergency and inpatient hospital serving the local people of east and north Hertfordshire and parts of Bedfordshire (some 600,000 people).

The changes to Lister Hospital were completed in October 2014, following which our colleagues in the local clinical commissioning group opened the £30 million New QEII Hospital in Welwyn Garden City, which provides a range of ambulatory care services such as outpatient clinics, diagnostics, endoscopy, and antenatal care, along with a 24/7 urgent care centre.

Over recent years, we have encountered ever-increasing demand in a tighter financial climate, and we have needed to focus on our work to improve quality and patient experience. These are challenging times, and we continue to face a range of operational, financial and workforce pressures.

We must support the health, wellbeing and resilience of our staff who have experienced the most challenging years in the history of the NHS. A recent staff survey shows that, despite improvements, we have not made the progress we would like in relation to bullying and harassment and ensuring equality, diversity, and inclusion for all our staff. We know that the financial climate will be tougher, and we must tackle the elective waiting list demands. However, we have much to be proud of in terms of our current performance.

Delivery against the core standards has been impacted by the COVID pandemic - we responded well to an increased number of COVID positive patients requiring critical care, respiratory specialist beds and general inpatient beds. Despite this, we delivered good performance on cancer targets especially during the pandemic, when we maintained the targets including the 62-day referral to treatment target, one of only 6 Trusts to do so. Based on the latest data for this target in August 2022, our Trust is ranked 10th in the country. Alongside other NHS providers, we have a significant number of patients awaiting elective care and the waiting time has become longer because of COVID. Tackling this issue continues to be an important priority for us.

We remain committed to our journey of transformation, constantly improving the services that we provide to our communities and improving our CQC rating. We are an engaged and proactive system partner, and we are looking forward to more system working both locally within our ICP and across the ICS and regionally through the provider collaborative. We will continue to play a key role in developing long term plans to help keep people healthy and ensure high quality joined up care when needed.

The Trust has benefitted in recent years from an increase in capital funding which has enabled it to improve its diagnostic equipment, expand its treatment facilities and refurbish its mortuary. However, along with the NHS, the Trust is experiencing a challenging financial year in 2022-23 as it transitions away from COVID and back to business as usual. This role will be pivotal in helping the Trust to return to its pre covid levels of productivity and efficiency, whilst delivering safe, high quality, care in a financially sustainable way.

Given the climate of considerable change, we have begun the work of refreshing our strategy to develop an integrated strategic business plan. This will look at the shifting context for the NHS and seek to outline what the Trust could look like by 2030. This work is looking more specifically at the impact of COVID, wider provider and system change, the financial and capital development regime as well as the move to integrated care. In particular, the Trust is looking at the future shape of its clinical services to ensure that they are best in class and able to deliver significant health gain. The aim of this strategy is to understand and respond to population health needs, improve cancer outcomes, improve patient, and staff experience and improve access to local services.

# Benefits

As a Trust employee, you can access a range of financial and non-financial benefits to support our staff in all aspects of their life.

## **Wellbeing:**

- Get confidential advice and support on personal, work, family, and relationship issues, 24/7, from our Employee Assistance Programme
- Offers and discounts at local gyms
- In-house Health at Work service with advice line and self-referral facility for staff as well as signposting and access to other support, such as weight management clinics and physiotherapy
- On site workplace pharmacy at Lister offering a minor ailment service, flu vaccinations, travel clinic, sexual health, smoking cessation, and health check services
- Opportunity to discuss ideas, problems or concerns easily and anonymously with our Speak in Confidence service

## **Travel:**

- Save up to 30% on a new bicycle through our Cycle to Work scheme
- Reduced staff car parking costs through our Car Sharing scheme
- Discounts on local buses and trains
- Competitive rates through our car lease scheme
- Inter-site transport minibus which includes shuttle to Stevenage Railway Station

## **Work/Life Balance:**

- Pursue different interests with the security of employment on your return from your break of 3 months to 5 years with our Career Break scheme
- Generous annual leave with additional days awarded for long service
- A variety of different types of paid and unpaid leave covering emergency and planned leave, such as special leave/ emergency leave/carers leave, through our Special Leave policy
- A Retire and Return scheme, enabling you to draw your pension whilst continuing to work for us after a short break
- Options for flexible working to provide you with a healthy work/life balance such as part time working, term time only, compressed hours (subject to service requirements), and flexible work schedules

## **Financial:**

- Discounts on restaurants, getaways, shopping, motoring, finance through a variety of providers
- Access to the NHS Pension Scheme, providing generous benefits upon retirement, as well as a lump sum and pension for dependents.

## **Learning and Development**

- Extensive range of learning and development opportunities, including coaching, for both clinical and non-clinical topics
- Access to our Grow Together scheme, ensuring that you have meaningful, quality conversations with your manager about what matters to you and your development
- We fully encourage our staff to develop to their full potential and are supportive of secondments, acting up opportunities and all learning and development activities.

## **Other:**

- Local and Trust wide staff award schemes where staff are nominated and recognised by their colleagues and peers for their hard work
- Assistance in relocating for some staff with our Relocation Policy



# Our Vision, Mission, and Values

## Our vision is:

**“To be trusted to provide consistently outstanding care and exemplary service”**

We will achieve this by focusing on our 4 strategic themes:

### **Quality:**

Consistently deliver quality standards, targeting health inequalities and involving patients in their care.

### **Thriving people:**

Support our people to thrive by recruiting and retaining the best, and creating an environment of learning, autonomy, and accountability.

### **Seamless services:**

Deliver seamless care for patients through effective collaboration and co-ordination of services within the Trust and with our partners.

### **Continuous improvement:**

Continuously improve services by adopting good practice, maximising efficiency and productivity, and exploiting transformation opportunities.

## Our mission is:

Providing high-quality, compassionate care for our communities

## Our values are:



We value the diversity and experience of our community, colleagues and partners, creating relationships and climates that provide an opportunity to share, collaborate and grow together



We create a safe environment where we are curious of the lived experience of others, seek out best practice and are open to listening and hearing new ideas and change



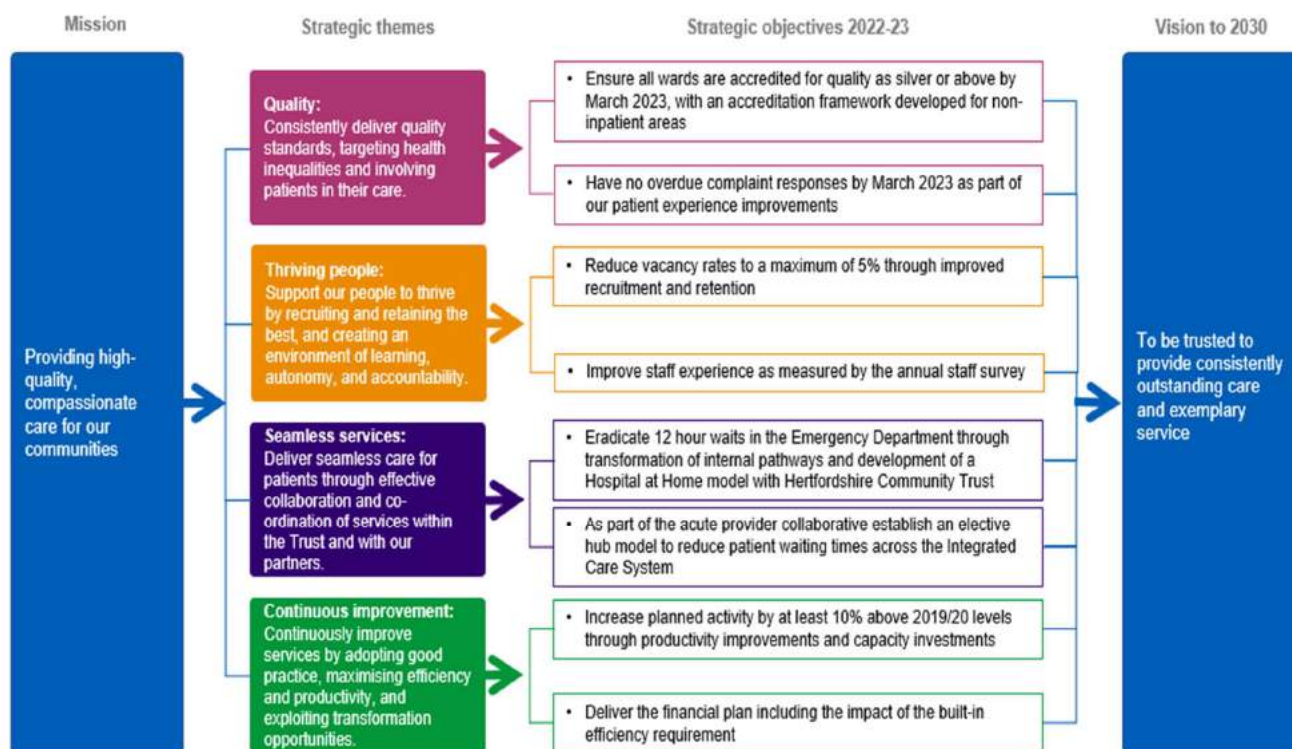
We are committed to consistently delivering excellent services and continuously looking to improve through a creative workforce that feels empowered to act in service of our shared purpose



# Our Strategic Priorities

In May 2022 we launched our new 2030 strategy. Our strategy was developed with engagement from our staff, patients, and partners throughout 2021 and consists of four strategic priorities which provide a framework to help the Trust meet the needs of the community, and the challenges faced by the local health and care system over the next five years.

Our strategic priorities are underpinned by our values and a sense of enabling strategies including the people, quality, finance, and estates strategies.



# Our Board

East and North Hertfordshire NHS Trust is run by a Trust Board that consists of full-time executives and a part-time non-executive chair and directors. The role of the Trust Board is to manage the Trust by:

- Setting overall strategic direction within the context of the NHS priorities
- Ensuring high-quality, effective, and patient-focused services through clinical governance are delivered
- Regularly monitoring performance against objectives
- Providing financial stewardship through value for money, financial control, and financial planning
- Ensuring high standards of corporate governance, personal conduct, and compliance with statutory duties
- Promoting effective dialogue with the local communities served



## Anita Day, Chair

Anita originally graduated in Biochemistry & Pharmacology, but later became a chartered accountant, executive facilitator & coach. She has an international consulting background in people and culture strategy, and UK board experience in the private, public and third sectors.

Her NHS career has included stints as a non-executive director at Nottingham University Hospitals NHS Trust and as Chair of Worcestershire Acute Hospitals NHS Trust. In addition to her role as Chair of East & North Herts NHS Trust, she currently also sits on the Board of the Lincolnshire ICB as their lead for Workforce Strategy, Health Inequalities and Digital Transformation.



## Adam Sewell-Jones, Chief Executive

Adam has worked in the NHS since 1992 and is passionate about continuously improving services for patients. Having joined as a trainee accountant, he qualified as a Chartered Management Accountant and held several finance and operational management roles in trusts in London and Essex. At Basildon and Thurrock University Hospitals NHS Foundation Trust he held the positions of Director of Finance and Continuous Improvement, Chief Operating Officer and Deputy Chief Executive.

He then went on to hold national leadership roles as Director of Provider Sustainability, Director of Improvement and Regional Director for the South West of England. In these roles he led several national programmes including the Virginia Mason NHS partnership, the Vital Signs programme, the Culture and Leadership programme and the Aspiring CEO programme, as well as national policies for improvement and leadership development.

Prior to joining the Trust Adam was the Chief Executive of Newham Hospital in East London. He also remains a faculty member of the Good Governance Institute.



## **Karen McConnell, Non-executive Director**

Karen, who lives in St Ippolyts (near Hitchin), studied Bacteriology at Newcastle University before joining the Northern Regional Health Authority as a finance trainee in 1983 based in Newcastle. In 1985 she joined the Audit Commission where she completed her accountancy training.

Karen held a variety of senior positions at the Audit Commission, including as a district auditor and regional director, before leading the Audit Practice and its 900 staff through the transition of outsourcing the Commission's work to the private sector during 2011 and 2012.

Karen was appointed as the Comptroller and Auditor General (C&AG) to the States of Jersey in January 2013 and completed her 7-year term in December 2019. In addition to her role at the Trust, Karen acts as an adviser to Public Sector Audit Appointments (PSAA).



## **Peter Carter OBE, Non-executive Director**

Peter was chief executive at the Royal College of Nursing from January 2007 to August 2015. Prior to his role at the RCN, he was chief executive of the Central and North West London NHS Foundation Trust for 12 years. Now an independent healthcare consultant, Peter was awarded an OBE for services to the NHS in 2006.



## **David Buckle, Non-executive Director**

A GP in Woodley, Berkshire for over 30 years, David also has had a long career in clinical leadership and, subsequently, medical management. In 2015, he was appointed as the medical director for the Herts Valleys Clinical Commissioning Group before retiring in early 2018. His first non-executive director role was for Berkshire Healthcare NHS Foundation Trust where he chaired the quality committee. His other NHS non-executive role is for Salisbury Hospital Foundation Trust.

David has been a member of the Society for the Assistance of Medical Families for over three decades. This charity which supports Doctors in difficult times, started up 230 years ago and David was voted President in 2018. He is also a trustee and vice Chair for the Stroke Association, the country's largest stroke charity.



## **Jonathan Silver, Non-executive Director**

Jonathan, who lives in Aldenham, studied operational research and accountancy at Strathclyde University, graduating in 1978. On qualifying as a chartered accountant with Grant Thornton in 1981, he moved to Fisons plc. After five years, Jonathan joined Laird plc – a global technology company providing systems, components and solutions that protect electronics from electromagnetic interference and heat, and that enable connectivity in wireless applications and antennae systems. Following 29 years with Laird, the last 21 of which had been as its chief financial officer and main board director, Jonathan retired in 2015.

He is a non-executive director and audit committee chairman of Henderson High Income Trust PLC and of Spirent Communications plc.



## **Val Moore, Non-executive Director**

Val Moore, who lives in Cambridge, has worked in several roles for the National Institute for Health and Care Excellence (NICE) between 2006 and 2015 – including on its Board as Implementation Director. Originally trained in psychology and as a science and physical education teacher, Val moved into the NHS in 1990 working in health promotion, prior to taking up roles including executive director in the former Cambridgeshire Health Authority and then regional associate director for the Health Development Agency (1999 to 2006).

Val has served as six years as Chair of Healthwatch Cambridgeshire and Peterborough up until September 2021 and has other independent roles within the integrated care system. She is a Trustee/Director for the Sport England active living partnership in the Cambridgeshire and Peterborough area, mirroring her interest in sports and as an active outdoors swimming coach.



## **Nina Janda, Associate non-executive**

Nina lives in St Albans and has spent much of her career establishing teams and organisations that have focused on using data analytics to transform patient care and operational processes across a number of health systems including the NHS, Europe, Australia and the USA. This has included developing and driving an international division at Dr Foster Intelligence and founding a unique global program that compared and improved health outcomes across 10 countries. In 2018, Nina became the CEO of Global Health Data @Work, a non-profit organisation, funded by global hospitals with the purpose of working collaboratively to transform their health systems.



## **Martin Armstrong, Deputy Chief Executive/Director of Finance**

Martin provides financial leadership to the Trust, ensuring that strong governance and commercial arrangements are in place and that the organisation is well placed to take advantage of strategic opportunities. He is a qualified accountant with over 25 years' experience at senior and board levels, with a successful track record of achievements operating as a Director and Deputy Chief Executive in complex and varied NHS organisations across the country.

Martin is a highly experienced, values driven NHS leader with a strong reputation as a successful and innovative problem solver, always striving to deliver high quality, cost effective services to patients. A strong team player with an excellent reputation for achieving significant results across a broad range of portfolios including, business intelligence and performance management, contracting and strategy, financial improvement, and turnaround in challenged organisations.



## **Dr Justin Daniels, Medical Director**

Justin trained in Nottingham and worked for a while in New Zealand before starting his Paediatric training in London. He worked at North Middlesex University Hospital for 17 years as a Paediatrician and Neonatologist, with Paediatric HIV as his subspeciality. He then moved to BHRUT as deputy CMO before joining ENHT in 2023.

Outside of work he tries to windsurf and rides his bike.



## **Lucy Davies, Chief Operating Officer**

Lucy joined the NHS as a graduate management trainee and progressed through roles in operations, performance, and transformation. Lucy has significant experience in developing teams and leading change at team, division, Trust, and system level.

Lucy joined ENHT in April 2022 from Royal National Orthopedic Hospital NHS Trust where she led cultural change and operational improvement as Chief Operating Officer and Director of Strategy & Improvement. Lucy also led an innovative programme of mutual aid for North Central London Integrated Care System as part of its elective recovery programme. Lucy is a mum to two teenage boys and lives in north London.



## **Thomas Pounds, Chief People Officer**

Thomas was appointed as Chief People Officer in April 2021. Thomas began his career in the NHS in 2003, working for NHS Professionals. During his 12 years there he covered a range of operational and strategic workforce roles, progressing to Regional Lead, where he was responsible for the client management of 15 NHS organisations across London, Essex, and Hertfordshire.

He joined East and North Hertfordshire NHS Trust team in 2015 as Head of Temporary Staffing and Medical Resourcing. He then progressed to Deputy Director of Workforce and Organisational Development, leading key strategic work including the Integrated Care System bank network agreement which helped to save the NHS millions in agency costs.

Thomas is a Chartered Member of the CIPD and is passionate about the delivery of the organisation's People Strategy to create an inclusive workplace where our people can work, grow, thrive, and care together.



## **Theresa Murphy, Chief Nurse**

Theresa is the Chief Nurse at East and North Hertfordshire NHS Trust, having joined the executive team on 2 September 2022 with over 30 years' experience in complex health and care settings.

Theresa began her career as a senior nurse in critical care, transplantation and acute medicine and has been the chief nursing officer in a range of organisations including Portsmouth University Hospital Trust, North Middlesex University Hospital, The Hillingdon Hospital Foundation Trust and The London Clinic. After becoming a registered general nurse in 1987, Theresa trained in neuroscience, transplant nursing and critical care.

Theresa holds an LLB and was a London scholar for Florence Nightingale Foundation; she is currently studying for an MA in leadership and has previously attended Oxford University for global executive studies. Theresa is passionate about patient focused care and advancing clinical practice.



## **Mark Stanton, Chief Information Officer**

Mark joined our Trust from Dudley Group NHS Foundation Trust in April 2019 where he was Executive Chief Information Officer (CIO) for 4 years, delivering a successful digital programme including an electronic patient record system. Prior to joining the NHS, Mark held several senior IT roles at board level within global private sector businesses including General Motors Europe, Siemens, GEC, BUPA and In Health Group.

Mark's early career was managing large-scale data centres before moving to consultancy – with the last 10 years spent in executive CIO-level roles. Mark's focus is to support the Trust in moving to a fit for purpose digital environment that supports our staff to deliver safe patient care and improve outcomes whilst integrating us into the wider health and social care economy.





## **Kevin O'Hart, Director of Improvement**

Kevin moved from an early career in finance and capital markets and qualified as a registered nurse in 2000. He has since worked clinically in several NHS trusts including University College Hospitals London and East Suffolk and North Essex NHS Foundation Trust. Kevin initially joined East and North Hertfordshire NHS Trust as programme management office director in April 2017, before being recruited into a new position as director of improvement in November 2019.

With an extensive and varied clinical background, Kevin has held several senior corporate roles in nursing, quality, governance, and risk with more recent experience focusing on project management and transformation, at both sub-board and executive level.



## **Kevin Howell, Director of Estates and Facilities**

Kevin joined the Trust in January 2020. With nearly 40 years' experience in the NHS, Kevin has held several senior and executive Estates and facilities roles in the London area – including the PRU Hospital, Barnet and Chase Farm, Watford, North Middlesex, and St Georges. He has led on the development of two new hospitals and a new midwifery led unit in north London.

Kevin leads on the development and implementation of the Estates and Facilities Strategy. The role encompasses hard Facilities Management services (engineering and building), soft Facilities Management services (cleaning and catering), security and electro biomedical engineering (medical devices).

Kevin's passion is ensuring the safety of patients, visitors and staff whilst under our care, ensuring a sustainable future for the Trust.

# The post

Title	Consultant
Specialty	Stroke Medicine
Basic programmed activities	10
Summary of role	The role of the appointee will be primarily to support the ongoing development in the department of Stroke and to deliver Stroke services at East and North Herts NHS Trust at the Lister Hospital Stevenage.
Key responsibilities	<ul style="list-style-type: none"> <li>• Maintenance of high-quality patient centered care</li> <li>• Shared responsibility for the day-to-day management of the service and participation in strategic planning</li> <li>• Teaching and training within the multidisciplinary service</li> <li>• Active involvement in multidisciplinary team meetings and directorate clinical governance activity</li> <li>• Active participation in continuing medical education</li> </ul>
Equality Diversity & Inclusion (EDI) responsibilities	Always demonstrate behaviours that support the Trust's commitment to equality, diversity and inclusion as detailed in the Herts and West Essex Integrated Care System Joint Statement on Equality, Diversity, and Inclusion, so that our workplaces are free from harassment and/or unlawful discrimination and where diversity is actively valued and celebrated.
Indicative additional programmed activities	The Trust offers the opportunity to undertake an additional 0.125 PA. Please see timetable for details
Indicative On-Call commitment	TBC
Base (you may be required to work on a temporary basis elsewhere within the Trust)	Lister Hospital
Appointment type and appointment term (substantive/fixed term & duration)	Substantive
Number of posts available	1.00 WTE
Responsible to	Dr Phil Wilkinson, Clinical Director, Stroke Medicine
Accountable to	Dr J Daniels, Medical Director

# The Department

There is a comprehensive stroke service, aiming to meet local targets. The national stroke strategy implemented in 2007 and updated in 2009 details several elements which Trusts are required to provide to ensure an effective service is delivered for patients having suffered a TIA / stroke.

We partake in the regional stroke vital signs metrics and have seen significant improvements over the past years. Any appointee will be expected to support the activities of the stroke service to ensure that:

- Patients presenting with a recent TIA or minor stroke have access to immediate referral to specialist assessment and investigation; 365 days per year. Patients identified as being at high risk of a preventable stroke should be assessed within 24 hours by an appropriate clinician.
- Where clinically required CT scans and carotid Doppler scans are performed within 24 hours.
- All patients having suffered a TIA / minor stroke are followed up within six weeks in either primary or secondary care.
- All patients with a suspected acute stroke are transported to a hospital providing hyper acute stroke services, supported by a protocol for stroke triage with appropriate clinical assessment and access to imaging and thrombolysis.
- Admission is to an acute stroke unit staffed by appropriate qualified MDT clinicians.
- Swallow assessments are performed within 24hrs.
- There is early supported discharge to an appropriate environment.
- 90% of patients spend at least 90% of their time on a dedicated stroke unit.

There are currently three levels of stroke unit encompassing hyperacute, acute and rehabilitation.

## The Medical Staff

<b>Divisional Medical Director (Unplanned Care)</b>	<b>Dr S. Mathavakkannan</b>
<b>Deputy Divisional Medical Directors (Unplanned Care)</b>	Dr Junaid Qazi
	Dr Neville Kukreja
<b>Clinical Director</b>	Dr Phil Wilkinson
<b>Consultants</b>	Dr Aparna Pusalkar
	Dr Ni Hlaing
	Dr Puneet Dangri
	Dr Mark Massyn
<b>Locum Consultant</b>	Dr Salman Mansoor
<b>Career Grades</b>	2 Specialty Doctors
<b>Clinical Fellows</b>	2 Senior Clinical Fellows
	2 Junior Clinical Fellows
<b>Training Grades</b>	3 (CMT & GP trainees)
	3 Foundation Year 1 Doctors

## The Multi-Disciplinary Team

Three Stroke CNS, three specialist registrars, one research nurse, and full complement of MDT including Early Supported Discharge Team.

## Administrative Support and Facilities

Administrative support will be made available to the post holder and the post holder will have access to a computer, telephone, and internet facilities.

# Job Plan and Post Duties

## Job Plan

There will be an opportunity to review the job plan with the successful applicant. Job plans and on call are agreed on appointment with the Clinical Director. Job plans are then subject to review annually.

## Provisional Timetable

The Job Plan will be based initially on the provisional timetable outlined below until the joint review takes place. The Job Plan will be a prospective agreement covering all aspects of a consultant's professional practice.

The weekly average of the indicative timetable is 10.06 PA.

## LISTER week rotation A: ward week

Provides 9 am – 5 pm thrombolysis + AE cover

Day	AM/PM	Time	Work	Category	PAs
MONDAY	AM	0800-0900 0900-1300	Stroke Thrombolysis cover + Admin Neuroradiology Hyperacute and acute unit round including board round with Therapy and Thrombolysis cover	DCC DCC	0.25 1.00
	PM	1300-1700	SPA	SPA	1.00
TUESDAY	AM	0800-0900 0900-1300	Stroke Thrombolysis cover + Admin Hyperacute and acute unit round including board round with Therapy and Thrombolysis cover	DCC DCC	0.25 1.00
	PM	1300-1700	Stroke F/U clinic and Stroke Thrombolysis cover	DCC	1.00
WEDNESDAY	AM	0800-0900 0900-1300	Stroke Thrombolysis cover + Admin Hyperacute and acute unit round including board round with Therapy and Thrombolysis cover	DCC DCC	0.25 1.00
	PM	1300-1700	MDT Meeting on hyperacute unit and family meetings plus thrombolysis cover	DCC	1.00
THURSDAY	AM	0800-0900 0900-1300	Stroke Thrombolysis cover + Admin Hyperacute and acute unit round including board round with Therapy and Thrombolysis cover	DCC DCC	0.25 1.00
	PM	1300-1700	SPA	SPA	1.00
FRIDAY	AM	0800-0900 0900-1300	Stroke Thrombolysis cover + Admin Hyperacute and acute unit round including board round with Therapy and Thrombolysis cover	DCC DCC	0.25 0.75
	PM	1300-1700	Off		
TOTAL				8.00	2.00

## LISTER week rotation B: Clinic week

Day	AM/PM	Time	Work	Category	PAs
MONDAY	AM	0830-0900	08.30 Neuroradiology meeting at Lister with Neurology	DCC	0.125
		0900-1300	New and F/U TIA	DCC	1.00
	PM	1300-1700	Stroke F/U, emergency TIA plus Thrombolysis cover	DCC	1.00
TUESDAY	AM	0900-1300	New and F/U TIA	DCC	1.00
	PM	1300-1700	SPA	SPA	1.00
WEDNESDAY	AM	0900-1300	New and F/U TIA	DCC	1.00
	PM	1300-1700	Admin	DCC	1.00
THURSDAY	AM	0900-1300	New and F/U TIA	DCC	1.00
	PM	1300-1700	SPA	SPA	1.00
FRIDAY	AM	0900-1200 12.00-1300	New and F/U TIA Thrombolysis cover	DCC	1.00
	PM	1300-1700	TIA/Stroke F/U and thrombolysis cover	DCC	1.00
TOTAL				8.125	2.00

### On Call Availability

On call commitments are primarily to cover stroke, including delivering thrombolysis. We are planning to start the in-house weekend Stroke on-call service after appointment into this post. This will involve seeing TIA patients, and HASU ward round. We have a regional thrombolysis Rota, and the appointees may join this in the future.

On weekdays during normal working hours, they will be on-call for stroke, reviewing new patients on post take round each day. They will also assess and deliver thrombolysis in A/E and make referrals for thrombectomy. This Rota will be shared with other stroke colleague consultants. Out of hours and weekends, stroke thrombolysis is covered via telemedicine. At present Dr Pusalkar contributes to regional telemedicine Rota from Lister.

Should routine weekend working become necessary in the future development of this post there will be consideration of time in lieu for hours worked.

### Supporting Professional Activity

The Trust standard is that two SPAs are allocated per post for a full time Consultant. 1.5 PAs are allocated as core SPAs with the additional 0.5 (or more) being allocated for undertaking specific supporting activities within the department/Trust.

Consultants can choose to reduce their SPA to 1.5 if they do not wish to undertake specific activities required by the department. The activity undertaken during this 0.5 SPA time will be reassigned as DCC and must be agreed with the Clinical Director.

### Travel between Sites

As we are a Trust over multiple sites travel between these sites is necessary. This is mainly to cover the pre-anaesthetics clinics at the satellite sites. At times there may be a need to cover any activity over all sites

### Cover for Colleagues

The successful candidate will be expected to cover for colleague's annual leave and other authorised absences.

# Person Specification

Requirements	Essential	Desirable	Measure
Qualifications / Training			
Entry on GMC Specialist Register or, be within 6 months of receipt of Certificate of Completion of Training (CCT) at time of interview or, provide GMC confirmed eligibility for entry on the Specialist Register	Y		Application Form
College Membership (MRCP) or qualification of an equivalent level	Y		
Advanced Life Support or demonstration of ability to achieve ALS immediately upon appointment	Y		
Postgraduate academic degree		Y	
College Fellowship		Y	
Previous Experience			
Broad range of experience in Stroke Medicine in particular: Experience of GIM, Geriatric Medicine and Neurology, Acute and Hyperacute Stroke	Y		Application Form
Fully competent in Stroke Thrombolysis	Y		
Delivered thrombolysis to a minimum of 20 patients	Y		
Experience of supervising undergraduates, doctors in training and other colleagues	Y		
Ability to offer and be accountable for full and independent expert diagnostic opinion	Y		
Can evidence leading on patient safety issues and achieving a change in practice	Y		
Published papers and original work in peer reviewed journals	Y		Interview
Demonstrate an understanding of the basic principles of audit, evidence-based practice, and clinical quality improvement initiatives	Y		
Demonstrable experience and participation in research	Y		
Skills			
Able to evidence engagement with clinical governance and the identification of errors and the learning from errors.	Y		Application Form
Evidence engagement with appraisal and revalidation	Y		
Able to show situational awareness and application of good decision making	Y		Interview
Ability to effectively teach clinical skills	Y		



Ability to critically appraise published evidence	Y		
Knowledge			
Demonstrate understanding of basic principles of audit, evidence-based practice, and clinical quality improvement initiatives	Y		Interview
Comprehensive knowledge and insight regarding all the domains within the GMC standards of Good Medical Practice	Y		
Other requirements			
Demonstrates an interest and commitment to the specialty	Y		Interview
Experience and evidence of engagement around the equality, diversity, and inclusion agenda. Able to actively support the development of a culture that recognizes and promotes equality, values diversity, and actively leads by example in deploying these qualities. Understands the impact on equality, diversity, and inclusion issues in all aspects of service delivery and planning	Y		
Role model our Trust values every day	Y		
Understands and can demonstrate the values of the NHS constitution	Y		
Evidence of being up to date and fit to practice safely, and aware of own training needs	Y		

# Terms and Conditions

This post is governed by the Trust's terms and conditions of service, which are based on the nationally agreed Terms and Conditions of service for Consultants (England) 2003, as amended from time-to-time by local agreements.

## Salary

The Consultant pay scale, applicable to the new consultant contract.

## Pension

NHS contributory pension scheme.

## Residence

The consultant appointee will be required to live within 10 miles or 30 minutes of their base hospital.

## Relocation

To be agreed in accordance with the Trust's policy.

## Trust Policies and Procedures

The post holder will be subject to locally agreed Trust policies including disciplinary and grievance procedures.

## Employment Checks

The appointment is subject to satisfactory pre-employment checks including right to work, identity, references, professional registration, DBS, qualifications, and health clearance.

## Study Leave

Study Leave will be granted in accordance with the Trust's policy.

# Training and Education

The Medical Education Board oversees education and training in the Trust and official communication with the Local Education and Training Boards and Colleges. The team members are as follows:

Chair and Director of Medical Education	Kavita Chawla
Locally Employed Doctors Tutor	Gunjan Jain
Undergraduate Tutors	Sagen Zac-Varghese
SAS Tutor	Farrukh Sheikh
Medical and Dental Education Manager	Jane Reiners
Foundation Training Programme Directors	Manivannan Srinivasan, Spencer Ellis
Royal College of Medicine Tutors	Jalini Joharatnam, Rachel Quail
Library and Information Services Manager	Isatou N'jie

The Trust has 356 training posts and there are active education centres run by the clinical tutors at Lister and Mount Vernon Hospitals. We have very close links with Cambridge University Hospitals, UCLH, Royal Free London and Imperial College School of Medicine (Charing Cross, Chelsea and Westminster, St Mary's, and Hammersmith Hospitals) in respect of foundation posts, the teaching of medical students and rotational training posts. All consultants are required to contribute to the hospital's education programmes for junior medical staff. The medical libraries service provides collections of books and journals with access to a range of online resources accessible via NHS Athens accounts (at work or home). Electronic resources include healthcare databases, journals, and books. In addition, the libraries provide quiet study space, computers, and training rooms with experienced library staff.

# Continuing Professional Development, Appraisal and Revalidation

The Trust supports the requirements for continuing professional development (CPD) as laid down by the GMC and commits to providing time and financial support for these activities.

The post holder will be required to follow a programme of continuing education to acquire a broadening of knowledge and skill, and a development of personal qualities necessary for the execution of professional and technical duties.

Staff are required to be knowledgeable about the relevance of clinical governance to their practices.

It is a contractual requirement that all staff remain up to date with Statutory and Mandatory training.

The Trust is supportive of those undergoing the Revalidation process and to assist in the process of annual assessment and Revalidation, the appointee will be expected to use our online Appraisal and Revalidation system for which training, and support will be provided.

Individual and team objectives will be set as part of the Trust appraisal process.

Additionally, newly qualified Consultants will be allocated a clinical mentor from within their Directorate and will also be supported by a programme of Leadership mentoring during their first year in post.

## Clinical Governance

The Trust Board is responsible for approving the Trust strategy for clinical governance and for monitoring activities at both corporate and clinical team level. Individual clinical teams are ultimately responsible for the safe delivery of quality care locally and for reporting their activities and issues to the executive team during the quarterly review process.

To achieve this, the Trust needs:

- A programme for quality improvement guided by the Improving Patient Outcomes and Patient Experience strategies
- Systems for clinical effectiveness and patient safety
- A learning culture
- Intelligent monitoring, to make improvements and to learn from any errors (e.g., incidents, claims, complaints)
- Involvement of users to inform our decisions and business planning processes
- Mechanisms for demonstrating the above in preparation for national inspections and routine reporting (e.g., annual reports, quarterly review process, Trust Development Authority, and the Care Quality Commission)
- Learning from good practices and sharing both within and outside the organisation

There is a regular monthly rolling half-day programme for directorates dedicated to clinical governance activity when all other elective commitments are cancelled.

The post-holder, along with other doctors, is required to undertake at least one clinical audit annually that evaluates aspects of their own practice.

The post-holder will also participate in the directorate's risk management activities. This will include regular reviews of adverse incidents, complaints, clinical negligence claims and education of junior staff.

# Other Activities

## Research

The Trust has an active research programme, lying third of all Trusts within the East of England. The Trust already enjoys strong collaborative relationships with both the University of Hertfordshire and the Eastern Academic Health Science Network (eahsn). Research activity is broadly equally divided between the Mount Vernon cancer centre and the Lister/New QEII where the research focus concentrates particularly on renal, diabetes, cardiology and respiratory. The Trust is keen to foster research more widely within the organisation.

## Reservists

The Trust has an excellent relationship with the East of England Medical Regiment and is supportive of our employee's reservist commitments.

# Equality, Diversity, and Inclusion

## Herts and West Essex ICB

### Joint Statement on Equality, Diversity, and Inclusion

The organisations that make up Herts and West Essex Integrated Care Board believe that fairness for people is fundamental to providing good care. We want to ensure that those who work with us and for us share this core value.

We are committed to equality, diversity and inclusion for all job applicants, staff, patients, and the wider community. We are continuing to develop the strength of our inclusive approach and creating a workforce that represents the diverse communities we serve is an important part of this.

We are committed to working collaboratively to develop and embed inclusive practices into every part of our system. We want to develop a sustainable culture of inclusivity that will benefit the people in our communities and our workforce.

We have agreed to:

- Work together to learn, celebrate, and embrace diversity, end unfairness and discrimination, and embed these changes into our everyday work
- Strive towards being an exemplar group of organisations for equality, diversity, inclusion, fairness and belonging
- Commit to value all people and promote a culture of zero tolerance to all kinds of harassment, bullying and discrimination in the workplace
- Pro-actively champion national and local policies and initiatives to address health and workforce inequalities
- Work in partnership with other professional, health and social care organisations, trade union and voluntary sector organisations to embed these principles

Each organisation with the ICB has agreed to include this statement on their job descriptions so that staff and job applicants are aware of this commitment. You are expected to be supportive of these principles and to demonstrate this in everything you do at work regardless of your role. You are required to always demonstrate behaviours which support this commitment.

# Supplementary Information

This job description is neither exclusive nor exhaustive and the duties and responsibilities may vary from time to time in the lights of changing circumstances and in consultation with the job holder.

## Confidentiality:

Each of us have a personable responsibility and liability under the Data Protection Act 2018 around the confidential nature of our jobs. Details of a confidential nature, including information relating to patients or staff, must not under any circumstances be divulged to any unauthorized person. Breaches in confidence will result in disciplinary action, which may result in dismissal. In exceptional circumstances this could result in a prosecution for an offence or action for civil damages under the Data Protection Act 2018.

## Health and Safety:

You must take reasonable care of your own health and safety and that of other people who may be affected by acts of omission at work and to ensure that statutory regulations, policies, codes or practice and department safety rules are adhered to.

## Sustainable Development:

We recognise the need for a sustainable development strategy that focuses on reducing carbon emissions. We do this through:

- Reducing environmental impact achieved by greener waste disposal and travel, energy, and water consumption
- Being a good community role model and supporter of the local economy
- Providing excellent value for money
- To reduce our carbon footprint, every single one of us must play a part in ensuring we are an environmentally responsible organisation. You recycle at home; we ask that you do the same simple things at work
- When you can, use public or inter-site transport, cycle between sites and claim for mileage
- Recycle all you can: paper, CDs, batteries – there are recycling stations throughout the Trust
- Always switch off lights, PCs, and other electrical appliances when not in use
- Don't waste water

## Safeguarding:

You must have regard to the need to safeguard and promote the welfare of children in line with the provisions of the Children Act 2004.

You must treat all patients with dignity and respect and ensure that vulnerable adults are safeguarded from abuse and neglect within the provisions of the Hertfordshire Safeguarding Adults from Abuse Procedure.

## Infection Control:

You are expected to take individual responsibility to ensure working practice is safe.

## Continuous Improvement

As part of our commitment to continuous improvement, we want to ensure that our culture and ways of working reflect and embed the philosophy and methodologies of our East and North Hertfordshire Production System (ENHPS). As a result, you may be invited to attend and complete relevant training and Kaizen (continuous improvement) events to support this commitment. Full attendance and completion of identified courses will be considered mandatory for this post.

### **Maintaining Medical Excellence:**

The Trust is committed to providing safe and effective care for patients, The Trust's medical staff are expected to practice in accordance with the *GMC Good Medical Practice Guidance* and to promote and adhere to the Trust's policies and procedures.

Medical staff practising in the Trust should ensure that they are familiar with the *GMC Good Medical Practice Guidance* and the Trust policies relating to *Raising Concerns* and *Conduct, Performance and Ill-Health Procedures for Medical and Dental Staff* to ensure that they are able to identify circumstances that require action.

### **Emergency Circumstances:**

The appointee will undertake to perform additional duties for the occasional emergency and unforeseen circumstances. The post holder will undertake, exceptionally, to be available for such irregular commitments outside normal rostered duties as are essential for the continuity of patient care.

### **Review:**

These guidelines are provided to assist in the performance of the contract but are not a firm condition of the contract. This job description will be reviewed as necessary to meet the needs of the service, in consultation with the post holder.