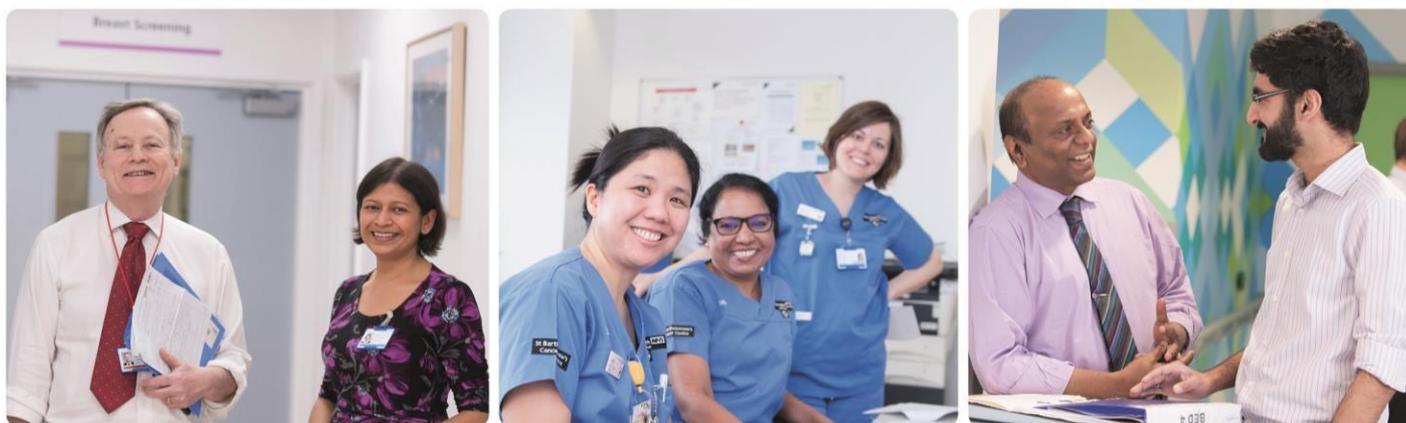


# Hello, we are Barts Health

#TeamBartsHealth

[bartshhealth.nhs.uk](http://bartshhealth.nhs.uk)

## Recruitment information pack





**Our Vision** To be a high-performing group of NHS hospitals, renowned for excellence and innovation, providing safe and compassionate care to our patients in east London and beyond.

## WeCare about our ambition for excellence

Our WeCare values shape everything that we do, every single day. They are visible in every interaction we have with each other, our patients, their families and our partners.

WeCare about everything from the appointment letters our patients receive, to the state of our facilities when they walk through the door, to the care and compassion they receive when they are discharged. WeCare that the people who join our trust will hold the same values as we do, so our values are embedded within our recruitment and selection processes. WeCare that you feel valued working here, so our values also guide our training and development and performance and talent management. WeCare about working with suppliers that live and breathe our values too.

We have come a long way on our journey to delivering safe and compassionate care. By embracing these values as the way we behave around here, we will achieve our ambition for excellence.

	Value	Key behaviours
W	<b>WELCOMING</b> 	<ul style="list-style-type: none"> <li>Introduce yourself by saying "Hello, my name is ..."</li> <li>Smile and acknowledge the other person(s) presence</li> <li>Treat others as you would wish others to treat you</li> </ul>
E	<b>ENGAGING</b> 	<ul style="list-style-type: none"> <li>Get involved in making improvements and bring others with you</li> <li>Encourage feedback from patients and colleagues and respond to it</li> <li>Acknowledge efforts and successes; say thank you</li> </ul>
C	<b>COLLABORATIVE</b> 	<ul style="list-style-type: none"> <li>Give time and energy to developing relationships within and outside own team</li> <li>Demonstrate pride in Team Barts Health</li> </ul>
A	<b>ACCOUNTABLE</b> 	<ul style="list-style-type: none"> <li>Always strive for the highest possible standard</li> <li>Fulfil all commitments made to colleagues, supervisors, patients and customers</li> <li>Take personal responsibility for tough decisions and see efforts through to completion</li> </ul>
R	<b>RESPECTFUL</b> 	<ul style="list-style-type: none"> <li>Be helpful, courteous and patient</li> <li>Remain calm, measured and balanced in challenging situations</li> </ul>
E	<b>EQUITABLE</b> 	<ul style="list-style-type: none"> <li>Value the perspectives and contributions of all and ensure that all backgrounds are respected</li> <li>Recognise that individuals may have different strengths and needs, and that different cultures may impact on how people think and behave. Be curious to find out</li> <li>Work to enact policies, procedures and processes fairly</li> </ul>

## 1. Job Particulars

<b>Job Title</b>	<b>Consultant Geriatrician</b>
<b>Pay Band</b>	Consultant
<b>Location</b>	Royal London Hospital
<b>Reports to</b>	Clinical Lead
<b>Responsible to</b>	Divisional Director

## 2. Job Purpose

To provide consultant physician service to older and frail patients at the Royal London Hospital. The post holder will work as part of a rolling rota providing consultant cover to Older People and other acute medical services.

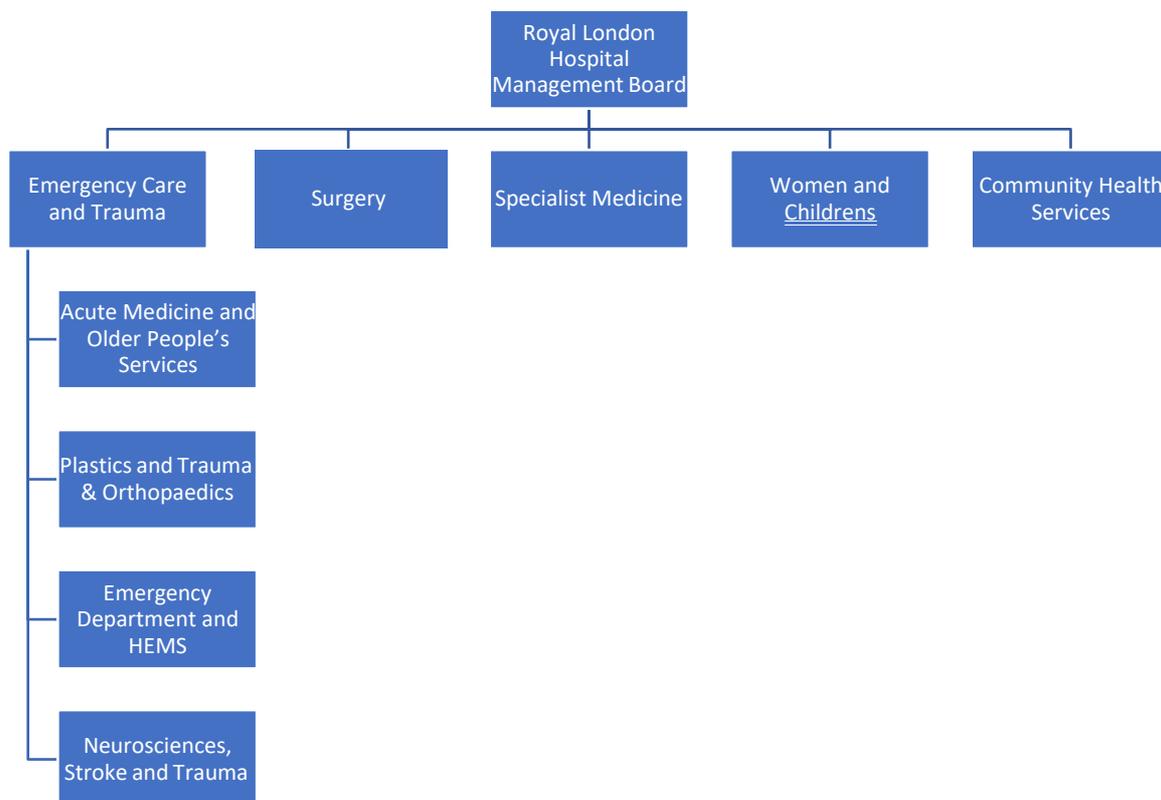
The post has the option of working up to 3 PAs in another speciality of the post-holder's choice. If the appointee specialises in Acute Medicine, the specialty sessions will be undertaken in Ambulatory care/Same Day Emergency Care or other acute medicine services. All speciality sessions will be agreed with the clinical director at the time of appointment.

## 3. Key Working Relationships

Internal	External
Consultants	Social services
Other specialities	Care homes
Ward staff	Community services
Therapists	Commissioners
Support services	GPs
Leadership Management Team	

## 4. Structure Chart

As part of the Trust's hospital group model, each site has its own structure. Clinical services at the Royal London are based on 5 key divisions, shown below. Acute Medicine sits within the division for Emergency Care and Trauma..



**Current staffing:**

Consultants:

Dr Dhanupriya Sivapathasuntharam (Clinical Lead for Older People's services/Lead for T-POPs (trauma and peri-operative service, Undergraduate Geriatric Module Lead)  
 Dr. Claire Dow (Community geriatrician )  
 Dr Salim Cheeroth (Acute physician with 0.3WTE role in Geriatrics)  
 Dr Natalia Barton (Acute frailty consultant Lead)  
 Dr Guy Lumley (T-POPs Consultant)  
 Dr Tom Boyle (Parkinson's disease)

Clinical Director:

Dr Daks Hettiaratchi

Divisional Director

Dr Mark Blunden

2x Specialist Registrars  
 1x Clinical Fellow in TPOPS  
 2x IMT3  
 10x ST1/ ST2/FY2s – 3x are GP trainees

5x FY1 Trainees rotating with General Medicine and Surgery

The trainees rotate between the different elements of the service, including the inpatient wards, AAU, surgery and clinics.

Senior Nurse:

Sarah Capsey

Ward managers:

Susan Brosnan

Diane Plummer

Service Manager:

Lucie Tulejova

General Manager:

Keira Tubridy

## **The department**

The department of Older People's Services at the Royal London Hospital aims to offer a comprehensive range of services to the local population of Tower Hamlets, one of the most deprived boroughs in the country and the City of London. We also accept patients from other areas and work on a needs-based referral system.

The department regularly sees a rich mixture of pathology and complex psychosocial issues. As a busy trauma centre, we are also called to support with medical input, discharge planning and end of life care for a variety of older and frail patients around the site. The local population is young but frail, with high rates of dementia and associated delirium, and a life expectancy of 7-10 years below the national average.

The service currently accepts patients acutely via a 'take triage' system and patients are cared for by the service from the point of referral. Patients are triaged on a 'needs' basis. The department also provides a liaison service for patients who would benefit from specialist management and multidisciplinary team working after initial intervention by other teams. Our inpatient base wards on the 14<sup>th</sup> floor are managed by a total of four consultants covering 52 patients.

We have close working relationships with acute and specialist medicine, psychiatry of old age, stroke, and Surgery (including orthopaedics, neurosurgery, vascular surgery, trauma, and general surgery which is covered by our T-POPs (trauma and perioperative service). There is one community geriatricians in place working across the community and secondary care.

As well as acute inpatient care we run a thrice weekly, acute rapid access outpatient unit, with an emphasis around frailty. This is jointly provided with the local mental health trust as part of the local Multi-specialty Community Services Provider Vanguard. It provides rapid access assessment and treatment for elderly and frail patients. The staffing includes a consultant

geriatrician and junior doctor, registered nurse, occupational therapist, physiotherapist, mental health nurse and access to some same-day diagnostics. We currently have one clinic face to face a week and another and one other face to face alternate weeks. We have another virtual clinic. The outpatient team meets weekly, virtually, to discuss the patients seen and to triage any new referrals through our advice and guidance service with a focus on supporting front door services, reducing admissions and interfacing with community services to prevent admission and facilitate early discharge.

We have recently set up a Frailty Virtual Ward which is run by the General practitioners and frailty team with input from a consultant geriatrician into the MDT. There is scope to develop this further.

The current post has the potential to fulfil a specialist interest outside of the base ward work of older people's services. As a small department, there are still openings to support other specialties within the hospital. We are currently looking to recruit a geriatrician with a specialist interest in Falls.

There would also be potential to remain involved in the general internal medicine rota via our acute medical unit and two of our team currently have allocated shifts planned into their job to do this. We will have flexibility around pursuing different specialisms and can adapt our rotas and clinical work to accommodate all interests and ways of working.

As a teaching hospital we welcome staff with a strong interest and enthusiasm for teaching and training. As a department we are involved in the teaching and training of staff of all grades and disciplines. We have worked closely with Barts and The London Medical School to develop a robust programme of geriatric medicine within the second clinical year of the undergraduate programme and run ad hoc special study modules in the final year. As well as Geriatric medicine, there are plenty of other opportunities to get involved in medical undergraduate teaching and assessment. However, there is no formal expectation that the appointee will have to provide undergraduate teaching/training.

We continue to strive to educate the wider hospital around Dementia and Delirium, Frailty and Falls, Continence, and Multi-professional and Inter-disciplinary working. We are hoping that new appointees will share our passion for education and involve themselves right across this spectrum of education and training.

The Trust has a commitment towards training all staff in the recognition and support of patients with frailty in all areas and there are opportunities to help to develop this exciting piece of work in conjunction with primary care colleagues and the local mental health trusts.

### **General responsibilities**

The appointee will be expected to take on the following roles and responsibilities:

- Comprehensive geriatric assessment of patients triaged to the department through acute ward rounds and reviews.
- When on the wards, daily attendance of the base ward multidisciplinary board round to review flow and discharge planning.
- Work collaboratively with colleagues in the Trust to develop a service model in keeping with best practice.
- Close working with colleagues in the emergency department; acute medicine and specialist medicine to ensure appropriate patients are transferred to and managed within the department.
- To always have regard to the clinical and quality standards set out within Trust guidelines, to participate in clinical governance working closely with other professionals to provide comprehensive care in and out of hospital. This will include liaison with general practice and community services regarding management of patients with chronic conditions.
- To supervise junior staff and contribute fully to their training, appraisal and assessment.
- The appointee will be expected to participate fully as a leader and member of the multi-disciplinary team.
- To partake in and lead audit activities within the department.

### **On call commitments**

- The on-call commitment is 1:8 weeks and is non-resident on call overnight.
- The week of acute on call includes a weekend resident 09:00 to 15:00 Saturday and Sunday working predominantly on the AAU and reviewing new and sick patients on the older people's services wards (15:00 –09:00 non-resident on call).
- Average daily take of patients on AMU is between 3-10,
- Inpatient older people's services wards consist of two 26 bedded wards. Each ward is shared between two consultants including internal cover during the week but covered by the on call at the weekend (as above).
- Time off in lieu is provided as a Zero day on Tuesday after working weekend on-call.

### **General points about these posts**

As recommended by the RCP – all posts will include:

- Suitable lunch breaks are factored into the working day.
- DCC will include family / carer and multidisciplinary meetings.
- Governance meetings – Departmental (weekly), Divisional (monthly)
- SPA to include time for revalidation.
- SPA time for education and training including radiology and departmental education programme, clinical and educational supervision.
- Currently trainee supervision is provided between consultant group and will vary between 2-4 trainees per consultant according to individual capacity and trainee needs.
- Postholders are expected to maintain their supervision skills.
- The trust provides opportunity to become consultant appraiser.
- Appropriate time for PDP/CPD agreed at yearly appraisal.

### Appraisal and Revalidation

- The Trust has arrangements in place to ensure that all doctors have an annual appraisal with a trained appraiser and are supported through the revalidation process.

### Mentoring

- The Trust will ensure all newly appointed consultants will have access to mentoring.

### Estimated Patient Numbers

- Post take rounds – average 3, range 1-10
- In-patient ward rounds (14th floor) - Current cover is 13 patients per consultant with internal cover for leave and study
- Acute Medicine Frailty ward rounds

### Summary

	<b>Total PA</b>
<b>Weekday DCC</b>	6.375
<b>Weekend DCC</b>	1.3
<b>Internal cover DCC</b>	0.3
<b>SPA</b>	2.5
<b>Total</b>	10.175

### General Timetable

Monday	Tuesday	Wednesday	Thursday	Friday	
9am safety huddle  9.15am Ward Round  12:00 Board round	9am safety huddle  9am Sick and news  12:00 Board round	9am safety huddle  9am clinic/telephone (alternate weeks) Or Sick and news	9am safety huddle 9am Ward round  12:00 Board Round	9am safety huddle   10am-2pm Falls Clinic	
Lunch  1.30-3.30pm SPA  3.30 - 5pm family meetings and Admin	Lunch  2pm-3.30pm Dept meetings (once per month)  3.30-5pm SPA	Lunch  1.15-3.15pm SPA  3.15 pm Cons meeting	Dept teaching/Lunch  2-3pm SPA  3-4pm family meetings and Admin	Lunch  2.30pm-4.30 Clinic Admin  4.30pm-5pm SPA	
DCC 1.375	DCC 1.25	DCC 1.5	DCC 1.5	DCC 0.75	6.375 DCC
SPA 0.5	SPA 0.75	SPA 0.5	SPA 0.5	SPA 0.25	2.5 SPA
				On call +cover	1.3DCC

### Facilities

The post holder will be provided with appropriate office space, IT equipment and administrative support.

### Safeguarding adults and children

Employees must be aware of the responsibilities placed on them to maintain the wellbeing and protection of vulnerable children and adults. If employees have reason for concern that a patient is 'at risk' they should escalate this to an appropriate person i.e. line manager, safeguarding children's lead, matron, ward sister/change nurse, site manager, consultant. (October 2002). [www.nmc-uk.org/](http://www.nmc-uk.org/)

### Person Specification

Domain	Essential Criteria	Desirable Criteria
<b>Qualifications</b>	<p>MRCP or Equivalent Specialist qualification</p> <p>Full GMC Registration with license to practice</p> <p>Entry on the GMC Specialist register or eligibility for entry within 6 months of date of advisory appointments committee</p> <p>Relevant CCT in Geriatric Medicine and General Internal Medicine or equivalent (CESR or European Community Rights if GMC registered (or CCT date within 6 months of date of advisory appointments committee)</p>	<p>Higher Research Degree</p> <p>Higher teaching degree</p>
<b>Clinical Experience</b>	<p>Higher specialist training in Geriatric Medicine and General Internal Medicine</p> <p>Broad experience in Geriatric Medicine and G(IM)</p>	<p>Prior experience of developing, delivering services in geriatric medicine</p>

	ALS Certificate	
Knowledge	<p>Detailed knowledge of Older People Services and G(I)M and of the specialist skills required for this post</p> <p>Knowledge of multidisciplinary clinical audit and demonstrable commitment to improving quality of care to patients</p> <p>Understanding of modern medical curricula and commitment to life-long learning</p> <p>Experience of supervising medical staff</p> <p>Attendance on management or leadership course</p>	
<b>Skills</b>	<p>Ability to work as part of a multi-disciplinary team</p> <p>Ability to teach medical students and junior medical and nursing staff.</p> <p>Ability to manage staff and resources effectively</p> <p>Ability to communicate effectively with colleagues, patients, relatives GPs nurses and other agencies</p> <p>Proficient use of IT systems</p>	<p>Previous experience developing, delivering and leading education and training within a department.</p> <p>Ability to develop research projects and supervise trainees in their research</p>
<b>Other</b>	<p>Flexible and co-operative approach to colleagues</p> <p>Good leadership skills</p> <p>Enthusiasm and ability to work under pressure</p> <p>Good organisational and management skills</p> <p>Team player with leadership qualities</p> <p>Good communication skills</p>	<p>Ability to organise and deliver a teaching programme</p>

## **About Barts Health**

Our group of hospitals provide a vast range of clinical services to people in east London and beyond.

We operate from four major hospital sites (The Royal London, St Bartholomew's, Whipps Cross and Newham) and a number of community locations, including Mile End hospital. Around 2.5 million people living in east London look to our services to provide them with the healthcare they need.

The Royal London in Whitechapel is a major teaching hospital providing local and specialist services in state-of-the-art facilities. Whipps Cross in Leytonstone is a large general hospital with a range of local services. Newham in Plaistow is a busy district hospital with innovative facilities such as its orthopaedic centre. Mile End hospital is a shared facility in Mile End for a range of inpatient, rehabilitation, mental health and community services. And St Bartholomew's in the City, London's oldest hospital, is a regional and national centre of excellence for cardiac and cancer care.

As well as district general hospital facilities for three London boroughs, Tower Hamlets, Waltham Forest and Newham, we have the largest cardiovascular centre in the UK, the second largest cancer centre in London, an internationally-renowned trauma team, and the home of the London Air Ambulance. The Royal London also houses one of the largest children's hospitals in the UK, a major dental hospital, and leading stroke and renal units.

We're also proud to be part of UCLPartners, Europe's largest and strongest academic health science partnership. The objective of UCLPartners is to translate cutting edge research and innovation into measurable health gain for patients and populations through partnership across settings and sectors, and through excellence in education.