

### Our Vision and Values

The Shrewsbury and Telford Hospital NHS Trust is an organisation that strives to provide high quality, safe care for our patients in an environment which our staff are proud to work in

### Our Vision:

# "To provide excellent care for the communities we serve"

### Our Values:



### About our Vision

We believe that by adhering to our Vision and working with our Values in mind we can behave in a way which will ensure the right results for the people that matter most – our patients and their families.

### About our Values

Our Trust Values provide a guide for our daily lives which we are all expected to uphold, both at work and when we are representing the Trust.

Our Values were developed by staff and our patients, so they represent what is important to us within the organisation and the way we should all behave towards patients, carers, visitors, partners and each other.

You will see our Values throughout the Trust; they are not just words on a page, they represent what we are about here at SaTH. We want patients and their families to say that the care and service they receive from all of us is consistently high-quality, safe, effective and personalised, so the feelings behind the Values shouldn't come as a surprise to anyone working in the NHS.

The reason why it is important that they are clearly written down is so we all know what's expected, and none of us are surprised if we are asked to explain any unacceptable behaviour.

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# About the Trust

The Shrewsbury and Telford Hospital NHS Trust (SaTH) is the main provider of acute hospital services for around half a million people in Shropshire, Telford & Wrekin and mid Wales.

Encompassing some of the most picturesque parts of England and Wales, the Trust's catchment stretches from the Cambrian Mountains in the west, to Newport and the fringes of the Black Country in the east. The main towns include: Bridgnorth, Ludlow, Market Drayton, Oswestry, Shrewsbury and Whitchurch (in Shropshire); Newport, Telford and Wellington (in Telford & Wrekin); and Newtown and Welshpool (in Powys) – all beautiful and unique.

Our main service locations are the Princess Royal Hospital (PRH) in Telford and the Royal Shrewsbury Hospital (RSH) in Shrewsbury which are located 20 minutes' drive apart. Together they provide 99% of our activity. Both hospitals provide a wide range of acute hospital services including accident & emergency, outpatients, diagnostics, inpatient medical care and critical care.

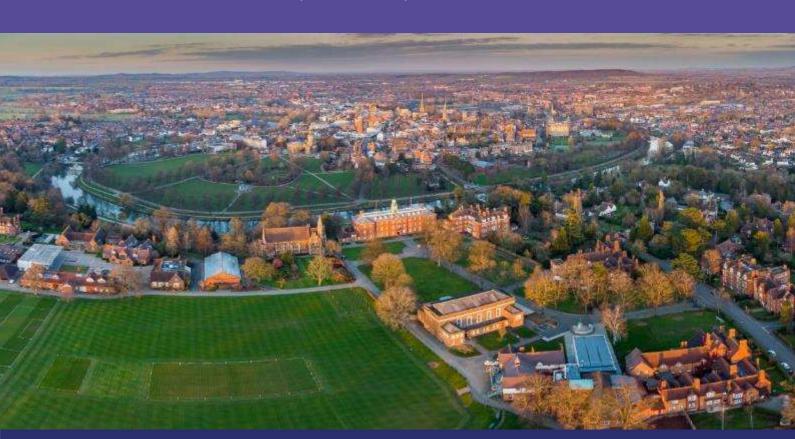
We also provide services such as consultant-led outreach clinics at the Wrekin Community Clinic, Telford, the Robert Jones and Agnes Hunt Orthopaedic Hospital, Gobowen and the Bridgnorth, Ludlow and Whitchurch Community Hospitals.

We employ almost 6,000 staff, and hundreds of staff and students from other organisations also work in our hospitals. We benefit from around 1,000 wonderful volunteers, and our main charitable partners are the League of Friends at the Royal Shrewsbury Hospital, Friends of the Princess Royal Hospital, and the Lingen DaviesCancer Appeal which is based at the Royal Shrewsbury Hospital.

We are committed to providing the best possible diagnostic facilities and high-quality clinical care in a clean, supportive environment where patients are treated effectively with respect and dignity.

The Shrewsbury and Telford Hospital NHS Trust continues to work with our partners in health and social care in Shropshire, Telford and Wrekin and mid Wales to develop patient-focused services that meet the needs of our communities.

Plans have been given the go ahead to transform local hospital services for the half a million residents of Shropshire, Telford & Wrekin and mid Wales to make sure two vibrant hospitals and the wide range of services they provide for people locally are kept in the county. This landmark decision will result in better care for patients, secure the £312m on offer from HM Treasury and develop both hospital sites to deliver state of the art facilities in which staff will be proud to work and patients will choose to be treated.



# Main Duties & Responsibilities

#### Clinical

- Antenatal clinics General.
- Elective caesarean section lists
- Resident Obstetric shifts (acute work) (days and nights)
- Resident Gynaecology shifts (acute work)
- Non-resident on-calls (Gynaecology)
- Gynaecology clinics General
- Gynaecology triage sessions
- Gynaecology theatres
- Early pregnancy clinics
- To develop enhanced clinical skills, especially in the assessment and management of acutely ill
  patients.
- To have excellent team-working skills with the abilities and professional attitude to work well in a multi-professional team.
- To deliver clinical and quality targets agreed both nationally and locally with clinical teams and commissioners.
- To follow patients throughout their clinical pathways.

#### Organisational

- To work with local managers and professional colleagues in the employing Trust in the efficient running of the service.
- To be subject to the provisions of the Terms and Conditions of Service, be required to observe the
  Trust's agreed policies and procedures, drawn up in consultation with the profession on clinical
  matters and to follow the local and national employment and personnel policies and procedures.
- To participate in the Continuous Professional Development and the Trust's appraisal scheme.
- To be aware of the responsibility of all employees to maintain a safe and healthy environment for patients, visitors and staff and attend all relevant health and safety training.
- Ensure that all Trust-wide standards are maintained to improve the quality of total care to all who
  come into contact with services provided by Shrewsbury and Telford hospital NHS Trust.

This job description is not intended to be exhaustive. The post holder will be expected to carry out any reasonable duties requested of them, appropriate to the grade and role of the post. Duties and responsibilities may vary from time to time in light of changing circumstances and in consultation with the post holder.



# **Job Description**

Job Title: Consultant Obstetrician and Gynaecologist with an interest in Early

pregnancy

Grade: Consultant

**Division:** Women & Children's

Responsible to: Divisional Medical Director

Professionally

Accountable to: Medical Director

Hours: 10 PAs

**Duration:** Permanent

**Salary:** £105,504 -£139,882 Per Annum [YC72]

#### **Job Summary**

We are looking to appoint an enthusiastic Consultant Obstetrician and Gynaecologist with an interest in Early pregnancy. You will join a team of 27 consultants working across the field of Obstetrics & Gynaecology in a busy District General Hospital. As well as early pregnancy clinic and scanning sessions this post is a balanced Obstetrics and Gynaecology role covering antenatal clinics, elective caesarean section lists, General gynaecology clinics, gynaecology triage sessions and Gynaecology elective theatres. Acute care will be resident Obstetrics days and nights, resident Gynaecology days and non resident gynaecology on call. All acute services including the labour ward are based at the Princess Royal site. Elective activity can be provided at both the Princess Royal Hospital and Royal Shrewsbury Hospital sites.

### The Post

#### The Department

#### The Obstetric Service

The Consultant Obstetric Unit is located at the Princess Royal Hospital with a midwifery led unit in Shropshire. Midwifery practice in mid-Wales is also supported by the Consultant Unit. The Consultant and alongside midwife led unit conducts approximately 4500 deliveries per year.

The Consultant Maternity Unit currently has 56 beds and a Level 2 neonatal unit of 22 cots. 18 of the 27 Consultants are responsible for acute labour ward practice (six Consultants conduct pure gynaecology practice). Consultant presence on the Delivery Suite is resident 168hrs per week.

Antenatal practice is divided up into specific speciality clinics to which expectant mothers are allocated. The vast majority of routine and detailed scans are performed within the department. Specific antenatal clinics are supported by consultant physicians and Nurse Specialists. Antenatal clinics are staffed with two consultants in each clinic and Tier1 or Tier 2 staff are supernumerary and there for education & training.

We have a very active maternal and fetal medicine unit. The vast majority of routine and detailed scans with invasive diagnostic procedures are performed within the department. We have close links with the fetal medicine departments in Birmingham Women's Hospital and University Hospital North Midlands.

#### The Neonatal Service

The neonatal unit is designated as a Local Neonatal Unit (level 2), working in conjunction with the West Midlands Perinatal Network Neonatal to ensure effective care for preterm and term babies. The neonatal unit has established pathways for in-utero and ex-utero transfers, working specifically with the Obstetric and Neonatal Intensive Care Units in the Royal Stoke and Royal Wolverhampton Hospitals as part of this network. The Unit is supplied by 2 Consultant Neonatologists and 5 Consultant Paediatricians with a specific interest in Neonatology. They provide dedicated neonatal care for the neonatal unit only. There Tier 1 and Tier 2 neonatal rota is supported by Speciality doctors, Postgraduate Doctors in Training and Advanced Neonatal Nurse Practitioners who work solely on the neonatal rota ensuring safe and effective care. There are 22 cots including six intensive/high dependency cots.

#### The Gynaecology Service

The gynaecological inpatient unit is located at the Princess Royal Hospital. At present, there are 12 beds with the use of further beds in the day surgery unit at both the Royal Shrewsbury Hospital and Princess Royal Hospital. Each year we perform:

- 1900 day case procedures
- 600 elective inpatient procedures
- 12400 new outpatients
- 11000 follow-up patients

A full range of gynaecology procedures are provided including advanced laparoscopic, robotic and urogynaecology surgery, advanced ambulatory procedures and colposcopy. There is a large and very active ambulatory care unit performing MyoSure, NovaSure and other outpatient techniques. There is specific Consultant-led practice in cervical pathology; oncology; fertility; ambulatory care and urogynaecology; and full facilities are available for the support of minimal access gynaecological surgery. Early pregnancy assessment is supported by nurse lead practice in both the Princess Royal and the Royal Shrewsbury Hospitals. The gynae-oncology service is provided at the unit level at SaTH with tertiary level cancer centre support provided by the

University of North Midlands and the Royal Wolverhampton Hospitals. Gynae-oncology MDT meetings are held every Wednesday morning with support provided at the meeting by Gynae-oncologists from nearby tertiary centres.

Consultant Job Role/Specialist Area

Ronke Awe Fertility, Trust Safeguarding Lead

Laura Bangs Maternal Medicine, Electronic Fetal Monitoring Lead

Nibedan Biswas Minimal Access Surgery & Ambulatory Care

Guy Calcott Preterm Birth and EPAS Lead, Deputy Clinical Director Obstetrics

Dorreh Charlesworth Obstetric Risk Lead
Pallavi Dhange Ambulatory Gynae Lead
Adam Gornall Fetal Medicine Lead
Mei-See Hon Clinical Director Obstetrics
Olesugun Ilesanmi Obstetrics & Gynaecology
Bala Karunakaran Fertility, Regional TPD
Salman Kidwai Maternal medicine

Naushabah Malik Obstetrics & Gynaecology, Guidelines Lead

Fetal medicine

Jane Panikkar Obstetric Mental Health & Colposcopy, Regional TPD

Will Parry-Smith Gynae-Oncology, R&D Director

Suneetha Racheneni Urogynaecology Lead Nick Reed Gynae-Oncology

Jo Ritchie Paediatrics & Community Gynae Lead

Susan Rutter Maternal Medicine Lead, MDT training Lead, Regional TPD

Banchhita Sahu Gynae-Oncology Lead

Andrew Sizer

Fertility Lead, Div Medical Director Women & Children's Division
Head of Postgraduate School of O&G, NHSE West Midlands

nead of Posigraduate school of Odd, NITSE West Mild

Nasreen Soliman RCOG College Tutor, Urogynaecology

Andrew Tapp Urogynaecology, HTP Director

Martyn Underwood Minimal Access Surgery, Ambulatory Care & Colposcopy

Marc Wilkinson Rota Lead, Obstetrics & Gynaecology

Matthew Wood Clinical Director Gynaecology and Robotic Surgery

Doaa Zeiden Antenatal, Triage and Postnatal Lead

#### Associate Specialists

Heba Mahdy (locum)

3WTE Associate Specialist/ Specialist grade

#### Specialty Doctors

**5WTE Specialty Doctors** 

#### Specialty Trainees (ST3+)

7WTE ST3+ or Locally Employed Doctors of equivalent grade.

#### Specialty Trainees (ST1-2)

11WTE ST1-2 (including 5WTE GP Specialist Trainees and 1 WTE FY2)

#### Foundation Training Programme Trainees

3WTE FY1 and 1 WTE FY2

#### **On-Call Arrangements**

When on call you are solely performing your on call duties and no other SPA or DCC work is scheduled during this time or allowed.

Obstetric shifts (acute work) are staffed as follows:

- Daytime 8.30am-9pm Consultant, T2, T1, 7 days a week
- Second Tier 2 8am to 7pm 7 days a week to support Maternity Triage and acute Gynaecology activity.
- Nights 8.30pm-9am resident Consultant, T2 & T1 with additional non-resident consultant support 7 days a week. The T1 and T2 also cover gynaecology at night.

Gynaecology on-calls are staffed as follows:

- Monday- Friday 8am-6pm resident gynae consultant with FY1 +/-T1 support + Triage 2 support. 6pm-8am non-resident on call gynaecology consultant. T1 and T2 on obstetric night cross-cover gynaecology as above.
- Saturday Sunday 8am-12pm and 6pm-8pm resident gynae consultant, outside of these times consultant is non-resident. A minimum of a T1 will be resident 8am-8pm

Non-resident on-calls are defined as Category A

#### **Resident Night Duties**

We have consultants resident 24/7. Night shift times are 8.30pm until 9am and all these hours are resident. An ensuite room close to labour ward is provided which has a bed, shower, and mini kitchen facilities available for you to utilise overnight if activity allows.

When you are on resident nights there will always be a Consultant Gynaecologist who will attend to conduct all emergency gynae surgery. You do not cover both roles at the same time.

There is always a non-resident consultant who can come and assist when needed, i.e. high workload, complex cases. This non-resident consultant will always attend for cases such as any return to theatre or C/Section hysterectomy etc.

#### **Ward Rounds**

Ward rounds are only expected to be conducted when you are covering acute work (ie. you will see all admitted Obstetric patients or Gynaecology patients). For elective surgery (caesareans or gynaecology) you will see patients prior to surgery and postoperatively (time is included in the sessions for this). Ward rounds are not expected at any other times.

#### Job Plan

A formal job plan will be agreed between the successful candidate and the Clinical Director on behalf of the Medical Director within 3 months of starting in post. A full-time job plan is based on a 10 PA working week. The job plan will be reviewed annually and is a prospective agreement that sets out the consultant's duties, responsibilities, and objectives for the coming year. It covers all aspects of a consultant's professional practice including clinical work, teaching, research, education and managerial responsibilities. It will provide a clear schedule of commitments, both internal and external and will include personal objectives, detailing links to wider service improvements and trust strategic priorities.

<sup>\*</sup>There are always two consultants available either on site or non-resident 24/7 to cover both Obstetrics & Gynaecology.

For a full-time contract, the job plan will be divided on average per week (pro-rata for a part time post) as:

- 8.5 Programmed Activities (PAs) of Direct Clinical Care includes clinical activity, clinically related activity and predictable and unpredictable emergency work.
- 1.5 Core Supporting Professional Activities (SPA) includes CPD, audit, appraisal, guidelines, teaching and research.
- Opportunities for further SPA roles can be decided once appointed should you wish. These will be to be discussed and agreed with the Obstetric and Gynaecology CD's to suit the successful candidates' strengths and interests and needs of the department.

The allocation of PAs is reviewed and may be subject to adjustment when a further diary exercise is undertaken or if the service demands a review of the team job plan.

Any applicant who is unable, for personal reasons, to work full-time will be eligible to be considered for the post. If such a person is appointed, modification of the job content will be discussed on a personal basis with the Trust in consultation with other consultant colleagues.

#### **Timetable**

The following provides scheduling details of the clinical activity and clinically related activity components of the appointee's standard working week.

Week	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Week 1		SPA core	Gynae clinic	Gynae Theatre	Caesareans		
WCCK 1		SPA core	Admin	Gynae Theatre	EPAS clinic		
Week 2		SPA core	Gynae Triage	Gynae clinic			
Week 2		SPA core	Admin	Antenatal clinic	EPAS clinic		
Week 3	1:16 Obstetr	On call week Moric consultant of ic consultant of ologist of the da	the day 8:30an the night 8:30p	n- 9pm	Off		
Week 4		SPA core	Gynae Triage				
WEEK 4	Gynae Theatre	SPA core	Admin		EPAS clinic		
Week 5	Caesareans	SPA core		Gynae clinic	Admin		
WEEK 3	EPAS clinic	SPA core		Antenatal clinic	EPAS clinic		
Week 6		SPA core	Gynae Triage	Gynae Theatre			
WEEK O		SPA core	Admin	Gynae Theatre	EPAS clinic		
Week 7		SPA core		Gynae clinic	1:16 Obstetr	On call Friday-Sunday: etric day 8:30am- 9pm etric night 8:30pm- 9:00am ecologist (Friday 8:00am-6pm)	
		EPAS clinic		Antenatal clinic	(Saturday &	Sunday 8:00-12pn	n, and 6pm-8pm)
Week 8	Off		SPA core	Gynae clinic	Caesareans		
.vccr o			Admin	Antenatal clinic	EPAS clinic		

This timetable is indicative only and the formal job plan will be agreed between the successful applicant and their clinical director within 3 months of starting in post.

This is an 8 week rolling rota for elective activity. On call activity is 1:16 Obstetric nights, 1:32 Obstetric days and 1:32 Gynaecology, but occurs at the same space on the 8 week rolling rota. This timetable is indicative only and the formal schedule will be agreed between the successful applicant and the clinical director.

#### Rota notes

Obstetric consultant in the day: 8:30-21:00
Obstetric consultant at night: 20:30-09:00
Gynaecology Consultant Monday -Friday 08:00-18:00

Gynaecology Consultant Saturday- Sunday 08:00-12:00 and 18:00-20:00

 Core SPA
 Morning: 9:00-13:00
 Afternoon 13:00-17:00

 Admin session
 Morning: 9:00-13:00
 Afternoon 13:00-17:00

 Antenatal clinic
 Morning: 9:00-13:00
 Afternoon 13:30-17:30

Gynaecology clinic	Morning: 9:00-13:00	Afternoon 13:30-17:30
EPAS clinic	Morning: 9:00-13:00	Afternoon 13:00-17:00
Gynae triage	Morning: 8:00-12:00	Afternoon 13:00-17:00
Caesareans	Morning: 8:00-13:00	
Gynae theatres	Morning: 8:00-13:00	Afternoon 13:00-18:00

All elective sessions above are 4 hours, except caesareans and theatres which are 5 hours.

#### The job also includes:

- Non resident Gynaecology on call (defined as Category A):
- o 5 times in 32 weeks (Monday, Tuesday, Wednesday, Thursday, Friday) 18:00-08:00
- o 2 times in 32 weeks (Saturday, Sunday) 12:00-18:00, and 20:00-08:00
- Non-scheduled sessions in the job plan include:
- o 2 x PMRT sessions per year. 8 hours per session one to attend the panel and one to prepare the cases.
- o 2 x ATAIN sessions per year. 2 hours each.

#### PA calculations

Category	Core PAs	APAs	Total PAs	Core Hrs	APA Hrs	ATC Hrs	Total Hrs	Premium Hrs
Direct Clinical Care	8.6396	0.0000	8.6396	31:57	0:00	0:00	31:57	7:52
Supporting Professional Activities	1.5000	0.0000	1.5000	6:00	0:00	0:00	6:00	0:00
Additional NHS Responsibilities	0.0000	0.0000	0.0000	0:00	0:00	0:00	0:00	0:00
External Duties	0.0000	0.0000	0.0000	0:00	0:00	0:00	0:00	0:00
Fee Paying Services	0.0000	0.0000	0.0000	0:00	0:00	0:00	0:00	0:00
Private Professional Services	0.0000	0.0000	0.0000	0:00	0:00	0:00	0:00	0:00
Medical School	0.0000	0.0000	0.0000	0:00	0:00	0:00	0:00	0:00
Total	10.1396	0.0000	10.1396	37:57	0:00	0:00	37:57	7:52

# **General Conditions**

#### **Annual Leave**

Doctors upon first appointment to the Consultant grade shall be entitled to annual leave at the rate of 32 days a year. Doctors who have completed a minimum of 7 years' service as a Consultant shall be entitled to annual leave at the rate of 34 days per year.

The rate of annual leave will be based on a full-time contract of 10 PAs. Additional PAs above 10 PAs will not accrue additional entitlements to annual leave over and above the full-time allocation. For consultants working part-time, the full-time entitlement will be pro-rated in accordance with the contracted PAs.

#### Study Leave

Professional and Study leave includes but is not restricted to participation in:

- Study, usually but not exclusively or necessarily on a course or programme.
- Research
- Teaching
- Examining or taking examinations
- Visiting clinics and attending professional conferences
- Training

The appointee will be entitled to 30 days of Study/Professional Leave across a 3-year fixed period with a set budget.

#### Research

It is usual for the Trust to be participating in many research projects at any time. Every effort would be made to accommodate a particular research interest you may have, particularly if trainee members of the department could be incorporated in the methodological and practical stages.

#### **Audit**

Great importance is placed upon audit within the Shrewsbury and Telford Hospital NHS Trust adyou will be expected to contribute to this as part of your role. The Trust has a fully staffed Audit Department at both hospitals with extremely well-organised teams.

#### Appraisal, Revalidation and Mentorship

- The Trust has the required arrangements in place, to ensure that all Doctors have an annual appraisal with a trained appraiser and supports all Doctors going through the revalidation process.
- The Trust supports the Royal College of Physicians Guidance on provision of mentors for new Consultants, in line with GMC recommendations. This will be provided within the Trust.
- We will require you to register SaTH as your designated body via the GMC to ensure that you are set up on the Premier IT Revalidation e-Portfolio (PReP) Revalidation System. We will complete this as soon as possible upon your commencement with the Trust.
- The Trust also supports the requirements for continuing professional development and is committed to providing time and financial support for these activities.
- A formal review of the job plan will be performed at least annually. Appropriate educational and training needs will be supported by the Trust, as agreed with the LNC (for example, the approval and funding of study leave). An annual job plan review at individual and departmental level is being introduced. You will be expected to participate in this exercise.
- We will require you to register SaTH as your designated body via the GMC to ensure that you are set up on the Equiniti Revalidation System. We will complete this as soon as possible upon your commencement with the Trust.
- The Trust also supports the requirements for continuing professional development and is committed to providing time and financial support for these activities.

#### Accommodation

The Trust offers single residential accommodation for medical staff depending on availability. The Trust only provides single accommodation so private rental would need to be arranged for family accommodation.

#### Other Facilities

There is an active Doctors Mess run by the Junior Doctors Mess Committee which organise social events, parties, outings etc. There are on-site fitness centres (a membership fee is payable) available to all members

of staff.

#### Office and Secretarial Support

The post holder will have full-time secretarial support with an adequately equipped office that will include a computer with access to Trust IT facilities.

#### **Staff Benefits**

There are a number of staff benefits schemes which attract tax reductions if joined. This includes a discount on the staff car parking charge, staff gym membership, on-site crèche/childcare provision and access to NHS Discounts schemes.

#### **Health & Safety**

As an employee of the Trust you have a responsibility to:

- Take reasonable care of your own health and safety and that of any other person who may be affected by your acts or omissions at work, and ensuring a COVID secure workplace for the team.
- Co-operate with the Trust in ensuring that Statutory Regulations, Codes of Practice, Local Policies and Departmental Health and Safety Rules are adhered to.
- To not intentionally or recklessly interfere with or misuse anything provided in the interests of health and safety.

#### Infection Prevention and Control

The prevention and management of acquired infection is a key priority for the Trust. Any breach of Infection Control Policies is a serious matter which may result in disciplinary action. As an employee of the Trust you have a responsibility to:

- Ensure that your work methods are compliant with the Trust's agreed policies and procedures and do not endanger other people or yourself.
- Be aware of Infection Prevention and Control Policies, Practices and Guidelines appropriate for your duties and you must follow these at all times to maintain a safe environment for patients, visitors and staff.
- Maintain an up-to-date knowledge of Infection Prevention and Control, Policies, Practices and Procedures through attendance at annual mandatory updates and ongoing continuing professional development.
- Challenge poor infection prevention and control practices of others and to report any breaches, using appropriate Trust mechanisms (e.g. incident reporting policy).

#### Information Governance

The Trust is committed to compliance with Information Governance standards to ensure that allinformation is handled legally, securely, efficiently and effectively. You are required to comply with the Trust's Information Governance policies and standards. Failure to do so may result in action being taken in accordance with the Trust's Disciplinary Procedure.

- Confidentiality and Security Your attention is drawn to the confidential nature of information collected within the NHS. Whilst you are employed by the Trust you will come into contact with confidential information and data relating to the work of the Trust, its patients or employees. You are bound by your conditions of service to respect the confidentiality of any information you may come into contact with which identifies patients, employees or other Trust personnel, or business information of the Trust. You also have a duty to ensure that all confidential information is held securely at all times, both on and off site.
- Disclosure of Information The unauthorised use or disclosure of information relating to the Trust's activities or affairs, the treatment of patients or the personal details of an employee, will normally be

considered a serious disciplinary offence which could result in dismissal. Upon leaving the Trust's employment and at any time thereafter you must not take advantage of or disclose confidential information that you learnt in the course of your employment. Unauthorised disclosure of any of this information may be deemed as a criminal offence. If you are found to have permitted the unauthorised disclosure of any such information, you and the Trust may face legal action.

• Information Quality and Records Management - You must ensure that all information handled by you is accurate and kept up-to-date and you must comply with the Trust's recording, monitoring, validation and improvement schemes and processes.

#### Professional Standards and Performance Review

As an employee of the Trust you have a responsibility to:

- Participate in statutory and mandatory training as appropriate for the post.
- Maintain consistently high personal and professional standards and act in accordance with the relevant professional code of conduct.
- Take responsibility for the maintenance and improvement of personal and professional competence and to encourage that of colleagues and subordinates.
- Participate in the Trust's appraisal processes including identifying performance standards for the
  post, personal objective setting and the creation of a personal development plan in line with the NHS
  Knowledge and Skills Framework outline for the post.

#### Safeguarding Children and Vulnerable Adults

We all have a personal and a professional responsibility within the Trust to identify and reportabuse. This may be known, suspected, witnessed or have raised concerns. Early recognition is vital to ensuring the patient is safeguarded; other people (children and vulnerable adults) may be at risk. The Trust's procedures must be implemented, working in partnership with the relevant authorities. The Sharing of Information no matter how small is of prime importance insafeguarding children, young people and vulnerable adults.

As an employee of the Trust, you have a responsibility to ensure that:

- You are familiar with and adhere to the Trust's Safeguarding Children Procedures and Guidelines.
- You attend Safeguarding Awareness Training and undertake any additional training in relation to safeguarding relevant to your role.

#### Social Responsibility

The Trust is committed to behaving responsibly in the way we manage transport, procurement, our facilities, employment, skills and our engagement with the local community so that we canmake a positive contribution to society. As an employee of the Trust, you have a responsibility to take measures to support our contribution and to reduce the environmental impact of our activities relating to energy and water usage, transport, and waste.

#### Continuous Improvement

The Shrewsbury and Telford Hospital NHS Trust is committed to creating a culture that puts Continuous Improvement at the forefront of our transformational journey and our aim is to empower colleagues at all levels have the confidence, capability, passion, and knowledge, to test changes and make improvements at SaTH and in the communities we serve.

Following a successful five-year partnership with the Virginia Mason Institute in the USA, SaTH continues to further develop and embed the Trust's approach to Continuous Improvement at all levels of the organisation. You will be supported by an Improvement Hub, which will provide the necessary expertise to support you make improvements, while also providing training at various stages of your time at SaTH, as part of your continuing professional development.

#### No Smoking Policy

There is a no smoking policy in operation within the Trust. Smoking within the Trust's premises or within the Trust's grounds is not permitted.

#### Miscellaneous

This job description is an outline of the key tasks and responsibilities of the post and is not intended to be an exhaustive list. The job may change over time to reflect the changing needs of the Trust and its services as well as the personal development.





# **Person Specification**

The following pages contain a description of the qualifications, skills, experience, knowledge and other attributes a candidate should ideallypossess to successfully perform this role.

# **QUALIFICATIONS**

CRITERIA	ESSENTIAL	DESIRABLE
<ul> <li>MBBS, MB ChB or equivalent medical qualification</li> <li>Appropriate qualification / experience in Early pregnancy care and scanning.</li> </ul>	<b>✓</b> ✓	

# **ENTRY CRITERIA**

CRITERIA	ESSENTIAL	DESIRABLE
<ul> <li>Full Registration and a licence to practise with the General Medical Council (GMC)</li> </ul>	<b>√</b>	
<ul> <li>Entry on the General Medical Council (GMC) Specialist Register via one of the following:</li> </ul>	✓	
<ul> <li>Certificate of Completion of Training (CCT) (the proposed CCT date must be within 6 months of the interview)</li> </ul>		
- Certificate of Eligibility for Specialist Registration (CESR)		

# **GENERIC CAPABILITIES FRAMEWORK**

#### **Professional Values & Behaviours**

ESSENTIAL CRITERIA	ESSENTIAL	DESIRABLE
<ul> <li>Practises with the professional values and behaviours expected of all doctors as set out in GMC Good Medical Practice and the Generic Professional Capabilities Framework (or equivalent for dentists).</li> </ul>	<b>✓</b>	
<ul> <li>Demonstrates the underpinning subject-specific competences i.e., knowledge, skills and behaviours relevant to the role setting and scope.</li> </ul>	<b>✓</b>	
<ul> <li>Clinically evaluates and manages a patient, formulating a prioritised differential diagnosis, initiating an appropriate management plan, and reviewing and adjusting this depending on the outcomes of treatment.</li> </ul>	<b>√</b>	
<ul> <li>Critically reflects on own competence, understands own limits, and seeks help when required.</li> </ul>	<b>✓</b>	

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•	Communicates effectively and able to share decision-making with patients, relatives and carers; treats patients as individuals, promoting a person-centred approach to their care, including self-management.	<b>✓</b>	
•	Respects patients' dignity, ensures confidentiality and appropriate communication where potentially difficult or where barriers exist, e.g., using interpreters and making adjustments for patients with communication difficulties	<b>√</b>	
•	Demonstrates key generic clinical skills around the areas of consent; ensuring humane interventions, prescribing medicines safely and using medical devices safely.	<b>√</b>	
•	Adheres to professional requirements, participating in annual appraisal and reviews of performance and progression.	<b>~</b>	
•	Awareness of legal responsibilities relevant to the role, such as around mental capacity and deprivation of liberty; data protection; equality and diversity.	<b>√</b>	
•	Applies basic principles of public health; including population health, promoting health and wellbeing, work, nutrition, exercise, vaccination and illness prevention, as relevant to their specialty.	<b>✓</b>	

## Leadership & Team Working

CRITERIA	ESSENTIAL	DESIRABLE
<ul> <li>Awareness of their leadership responsibilities as a clinician and demonstrates appropriate leadership behaviour; managing situations that are unfamiliar, complex, or unpredictable and seeking to build collaboration with, and confidence in, others.</li> </ul>	<b>√</b>	
<ul> <li>Demonstrates understanding of a range of leadership principles, approaches and techniques so can adapt leadership behaviours to improve engagement and outcomes – appreciates own leadership style and its impact on others.</li> </ul>	<b>√</b>	
<ul> <li>Develops effective relationships across teams and contributes to work and success of these teams – promotes and participates in both multidisciplinary and interprofessional team working.</li> </ul>	<b>√</b>	
<ul> <li>Critically reflects on decision-making processes and explains those decisions to others in an honest and transparent way.</li> </ul>	<b>~</b>	
<ul> <li>Demonstrates ability to challenge others, escalating concerns when necessary.</li> </ul>	<b>√</b>	
<ul> <li>Develops practice in response to changing population health need, engaging in horizon scanning for future developments.</li> </ul>	<b>✓</b>	

# Patient Safety & Quality Improvement

CRITERIA	ESSENTIAL	DESIRABLE
Takes prompt action where there is an issue with the safety or quality	✓	

of patient care, raises and escalates concerns, through clinical governance systems, where necessary.		
Demonstrates understanding of the basic principles of audit, clinical risk management, evidence-based practice, patient safety and clinical quality improvement initiatives	✓	
<ul> <li>Applies basic human factors principles and practice at individual, team, organisation, and system levels.</li> </ul>	$\checkmark$	
<ul> <li>Collaborates with multidisciplinary and interprofessional teams to manage risk and issues across organisations and settings, with respect for and recognition of the roles of other health professionals.</li> </ul>	<b>√</b>	
Advocates for, and contributes to, organisational learning.	✓	
<ul> <li>Reflects on personal behaviour and practice, responding to learning opportunities.</li> </ul>	<b>√</b>	

# Safeguarding Vulnerable Groups

CRITERIA	ESSENTIAL	DESIRABLE
<ul> <li>Recognises and takes responsibility for safeguarding children, young people, and adults, using appropriate systems for identifying, sharing information, recording and raising concerns, obtaining advice and taking action.</li> </ul>	<b>✓</b>	
Applies appropriate equality and diversity legislation, including disability discrimination requirements, in the context of patient care.	✓	

### **Education & Training**

CRITERIA	ESSENTIAL	DESIRABLE
<ul> <li>Critically assesses own learning needs and ensures a personal development plan reflects both clinical practice and relevant generic capabilities.</li> </ul>	<b>√</b>	
<ul> <li>Promotes and participates in individual and team learning; supporting the educational needs of individuals and teams for uni-professional, multidisciplinary and interprofessional learning.</li> </ul>	<b>√</b>	
<ul> <li>Identifies and creates safe and supportive working and learning environments.</li> </ul>	<b>✓</b>	
Takes part in patient education.	✓	

## Research & Scholarship

CRITERIA	ESSENTIAL	DESIRABLE
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<ul> <li>Keeps up to date with current research and best practice in the individual's specific area of practice, through appropriate continuing professional development activities and their own independent study and reflection.</li> </ul>	<b>√</b>	
<ul> <li>Critically appraises and understands the relevance of the literature, conducting literature searches and reviews; disseminates best practice including from quality improvement projects.</li> </ul>	<b>√</b>	
<ul> <li>Communicates and interprets research evidence in a meaningful way for patients to support shared decision-making.</li> </ul>	✓	
<ul> <li>Works towards identifying the need for further research to strengthen the evidence base or where there are gaps in knowledge, networking with teams within and outside the organisation</li> </ul>	<b>√</b>	
Locates and uses clinical guidelines appropriately.	✓	