



CONSULTANT IN DIABETES, ENDOCRINOLOGY AND GENERAL MEDICINE

INFORMATION FOR CANDIDATES

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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 Davies Cancer 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

- To develop new and complement existing services in the provision of Diabetes, Endocrinology and General Medical Services.
- To undertake on-call medical duties in collaboration with Consultant Physician colleagues.
- To deliver high quality Diabetes, Endocrinology and Medical Services.
- To provide inpatient diabetes care and support ambulatory care.
- To provide diabetes and endocrine outpatient 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 in Diabetes, Endocrinology and General Medicine
Grade:	Consultant
Division:	Medicine and Emergency Care
Responsible to:	Divisional Medical Director
Professionally Accountable to:	Medical Director
Hours:	10 Programmed Activities
Duration:	Permanent
Salary:	£88,364 - £119,133 per annum [YC72]

Job Summary

The Shrewsbury and Telford Hospital NHS Trust is looking to appoint two Consultants in Diabetes, Endocrinology and General Medicine to develop new services and to complement the existing services, currently being delivered to a high standard through a department of five whole-time equivalent (WTE) consultants. The posts are new posts expected to be based primarily at the Royal Shrewsbury Hospital or Princess Royal Hospital for inpatients and on-calls, with clinics to be done at both sites.

THE POST

The Department

The department works across both the Royal Shrewsbury and Princess Royal Hospitals with most of the diabetes and endocrine services and staff currently based at the Royal Shrewsbury Hospital in the purpose-built Hummingbird Centre.

Future reorganisation of the trust may alter bed bases, with plans being developed to have a hot and cold site. The role includes participation in the general medical on-call rota. In addition, there are discussions ongoing about providing a 7-day diabetes service with a separate rota.

Inpatient diabetes care will be a key emphasis of this post to strengthen the diabetes in reach service and optimise care of patients in diabetes across the hospital and thus enable reduction of length of stay. The candidate will also support ambulatory care to prevent admissions in patients with unstable diabetes. The consultant will be supported by the hospital Diabetes Specialist Nurses (DSN's) in this work.

The work will also include developing robust protocols for management of acute diabetic emergencies, pre- and peri-operative management of diabetes. There are also active discussions in developing community-based outreach diabetes clinics to support primary care. The post will also support a subspecialty interest complementary to current interests of the department or input in the antenatal endocrine clinic and development of a diabetes/renal link service or young adults' diabetic clinic.

The services are closely integrated with patients care through the local Diabetes UK branch as well as through the Pituitary Foundation. There are local patient support groups for those with pituitary disease, thyroid eye disease and those on insulin pumps (Severn Pumpers) through which the consultants take an active part in patient education and support. It is expected that the appointee will contribute to the existing groups and encourage development of further groups depending on clinical interest.

Diabetic Care in Shropshire

Diabetes care in Shropshire is organised on a countywide basis with agreed guidelines, which apply in both hospitals (RSH and PRH). The aim is to provide services to diabetic patients without admitting to hospital except those who require emergency treatment.

The department provides outpatient services for Type 1 and Type 2 diabetes, antenatal/preconception diabetes, transitional diabetes, MDT diabetic foot clinics, inpatient outreach diabetes, Continuous glucose monitoring (CGM)/insulin pump services and complex diabetes clinics are available. There is support from a hospital diabetes specialist nursing team (3.2 WTE) for inpatients supported by 0.6 WTE diabetes link nurses. There is a full community diabetes nursing team for outpatient community-based work.

Dietician Support

A specialist dietician (0.2 WTE) based at RSH specifically for patients with Type 1 diabetes initiating carbohydrate counting/insulin pump therapy in addition to the community-based diabetes specialist dieticians. The community diabetes nurses and dieticians run STILE (DAFNE equivalent) sessions for Type 1 diabetes and XPERT sessions for Type 2 diabetes education. Specialist diabetes podiatry services are available at both hospitals, and they support the MDT Diabetic foot clinics (also supported by vascular and orthopaedic surgeons and orthotics). There are community based high risk diabetic foot ulcer clinics on a hub and spoke arrangement.

Eye-Screening Support

The county wide diabetes eye-screening programme is managed by the Midlands Partnership Foundation Trust (MDFT). It has close links with the trust ophthalmology department which offers all patients over the age of twelve years routine annual eye screening by digital retinal photography, and co-ordinates optometrist led biomicroscopy/OCT clinics and other ophthalmic clinic appointments.

Patients with thyroid eye disease attending the trust are seen by a dedicated consultant oculoplastic surgeon and have access to the acute eye clinic for emergencies. Complex patients have access to high dose methylprednisolone at the Hummingbird Centre or orbital radiotherapy through the oncology services.

Renal Support

Close liaison with renal services is helped by co-location of the Hummingbird Centre and renal unit, as well as renal outpatient clinics within the Hummingbird Centre. Whilst there are close links between the 2 teams, the need for a formal consultant led diabetes/renal link service with a named consultant and DSN has been identified.

Vascular Support

There are close links with the vascular surgery department which is based at the RSH site for inpatients and provides outpatient services at both sites including joint diabetic foot clinics. The vascular surgeons support the MDT foot clinics (3/week at RSH and 1/week at PRH). There is also a monthly orthopaedic consultant clinic within the diabetic foot service. Joint antenatal/diabetes clinics are done alternate weeks at RSH and PRH. In the antenatal clinics, the diabetes nurses mainly support those with type 1 diabetes and diabetes specialist midwives support patients with gestational and Type 2 diabetes. There is a need identified to strengthen consultant presence in the antenatal endocrine clinics.

The Investigation Unit

There is a wide range of endocrine conditions referred for diagnosis and management, with investigation unit facilities available at the Hummingbird Centre. This service is available mainly on an outpatient basis with approved and regularly updated protocols for the management of all the usual (and unusual) endocrine conditions and supported by 0.8 WTE Endocrine Specialist Nurses. Outpatient clinics are held at the Hummingbird Centre, and an innovative phone-based outpatient service is in place for follow-up of patients with endocrine conditions, particularly thyroid disorders.

Radioiodine Service

Radioiodine service is available at RSH for the treatment of patients with hyperthyroidism. This service is currently suspended due to COVID, but it is hoped to restart in 2022. Adrenal surgery (including laparoscopic) is carried out locally by a dedicated surgeon, as is thyroid and parathyroid surgery. A dedicated thyroid nodule service is run by the ENT department and a joint clinic with endocrinologists is being developed.

Endocrine Patients

The small numbers of endocrine patients referred to a tertiary centre are mainly those requiring pituitary surgery and are referred to pituitary surgeons at Stoke-on-Trent (or Birmingham). Close links are maintained with these centres and the diagnostic work-up of patients with pituitary disease is carried out locally, as is the post-operative endocrine testing, imaging, and long-term post hypophysectomy follow up (monthly dedicated pituitary clinic). Patients with neuroendocrine tumours are referred to the NET services at Queen Elizabeth Hospital, Birmingham.

Workload Information

Inpatients: Ward round for 20 inpatient endocrine/GIM when on beds (25 weeks/year)

Outpatients: Diabetes renal clinic: 2 new and 8 follow-up, Antenatal diabetes clinic: 2 new and 18 patients on a list shared by consultant endocrinologist, Consultant obstetrician, diabetes specialist nurse and diabetes specialist midwife.

Teaching within the Department

The 'diabetes team' has for many years been involved with the training of practice and community nurses, chiropodists, and optometrists, in diabetes. Local training programmes for primary care (COPE sessions, Warwick course) and other similar programmes are held regularly. It is expected that the successful applicant would strongly support with teaching and training of primary care practitioners (GPs, nurses etc) which in addition to improving care in the community has also led to very close ties between primary and secondary care and integration of the diabetes service.

Several consultants in the Trust are involved in teaching and management capacity and would be happy to mentor newly appointed consultants, both clinically and managerially if necessary. There are opportunities

for clinical research, and it is expected that the post holder will participate in some of the clinical research studies which are currently in progress.

The Departments Medical Staff

The department consists of the following permanent medical staff:

<u>Name</u>	<u>Base</u>	<u>Sub-specialty interest</u>
Dr Probal Moulik (Clinical Director)	RSH	CSII, Diabetes foot, RSH Transitional diabetes
Dr Prashant Singh	RSH	Complex diabetes, adrenal
Dr Srinivas Rangan	RSH	PRH Transitional diabetes, adrenal
Dr Anna Green	RSH	Acute medicine, RSH antenatal diabetes
Vacancy	RSH	GPSI RSH diabetes clinic
Vacancy	RSH	GPSI RSH diabetes foot clinic
Dr David Barton	PRH	PRH antenatal diabetes, radioiodine
Dr Darren Warner	PRH	
Dr Anuja Sagdeo	PRH	Acute medicine and PRH diabetic foot clinic

The 2 new consultant posts will be supported by an SpR, Associate physician, 2 Foundation year 1 doctors and a Senior Clinical Fellow (IMT grade). This is in addition to the existing 2 consultants who are supported by an SpR, IMT, Senior Clinical Fellow (IMT grade), 2 Foundation Year 1 doctors. It is expected they will work as one larger team with cross cover of junior doctors.

Job Plan

A formal job plan will be agreed between the successful candidate and their Clinical Director and consultant colleagues, 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.

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

- 7.5 Programmed Activities (PAs) of Direct Clinical Care - includes clinical activity, clinically related activity and predictable and unpredictable emergency work.
- 2.5 Supporting Professional Activities (SPAs) - includes CPD, audit, teaching and research.

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.

On-Call Duties

The post holder will be expected to participate in the General Internal Medicine (GIM) on call on a 1 in 14 rota weekdays and weekends. When on call, the consultant will do an evening post take ward round from 17:00 to 20:30 and again next morning will do post take round from 08:00 to 10:00. There is a Tuesday off in lieu after a weekend on-call. There is a robust acute medical consultant team who will be working alongside the on-call consultant on the Acute Medical Unit (AMU). Admissions are unselected, but there is separate input in AMU both in and out of hours from the gastroenterologists, cardiologists, and stroke consultants (who have their own separate rota and do not participate in the GIM rota).

A separate 1 in 10 (weekdays and weekends) acute medicine consultant rota works alongside the GIM rota. The acute medicine rota is from 17:00 to 21:00 weekdays and 10:00 to 19:00 weekends. The appointee may choose to be on this rota instead of the GIM rota subject to agreement. 1.5 Direct Clinical Care depending on rota, 3% availability supplement if on overnight on call rota.

Timetable

The following provides scheduling details of the clinical activity and clinically related activity components of the appointee's standard working week. At any one time, 1 consultant will cover inpatients on endocrine ward (Ward 32 at RSH or Ward 7 at PRH) 20 beds and will cross-cover with colleague i.e. there will be 25 weeks on beds and 17 weeks off beds for each consultant. Whilst off beds there is an expectation to do more clinics. The frequency of on-beds/off-beds rotation could be either every alternate week or fortnight.

On Beds	AM	PM
Monday	Ward round (1 DCC)	Admin (1 DCC)
Tuesday	Ward round (1 DCC) Diabetes meeting (0.25 SPA)	1 SPA
Wednesday	Ward round (1 DCC) Grand round	
Thursday	Ward round (1 DCC) Endocrine meeting (0.25 SPA)	1 SPA
Friday	Ward round (1 DCC)	
Saturday	On call as detailed above	On call as detailed above
Sunday	On call as detailed above	On call as detailed above

Off Beds	AM	PM
Monday	Diabetes renal clinic PRH (1 DCC)	
Tuesday	1 SPA Diabetes meeting (0.25 SPA)	Diabetes Clinic (1 DCC)
Wednesday	Admin (1 DCC) Grand round	Antenatal Diabetes Clinic (1 DCC)
Thursday	1 SPA Endocrine meeting (0.25 SPA)	Endocrine Clinic (1 DCC)
Friday	Diabetes renal clinic RSH (1DCC)	
Saturday	On call as detailed above	On call as detailed above
Sunday	On call as detailed above	On call as detailed above

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.

Office and Secretarial Support

You will have a desk with a full range of facilities including secretarial support.

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 and you 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.
- A formal review of the job plan will be performed at least annually. Appropriate educational and training needs will be supported by the Trust in, 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 organises social events, parties, outings etc. There are on-site fitness centres (a membership fee is payable) available to all members of staff.

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; and
- 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; and
- 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; and
- 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; and
- 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 all information 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; and
- maintain consistently high personal and professional standards and act in accordance with the relevant professional code of conduct; and
- take responsibility for the maintenance and improvement of personal and professional competence and to encourage that of colleagues and subordinates; and
- 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 report abuse. 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 in safeguarding 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 can make 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.



PERSON SPECIFICATION

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

QUALIFICATIONS

CRITERIA	ESSENTIAL	DESIRABLE
<ul style="list-style-type: none"> • MBBS or equivalent medical qualification. • MRCP accreditation or equivalent experience • CESR or European Community Rights • Higher degree e.g. MD or PhD 	<ul style="list-style-type: none"> ✓ ✓ ✓ 	<ul style="list-style-type: none"> ✓

ENTRY CRITERIA

CRITERIA	ESSENTIAL	DESIRABLE
<ul style="list-style-type: none"> • Full Registration and a licence to practise with the General Medical Council (GMC) • Entry on the General Medical Council (GMC) Specialist Register via one of the following: <ul style="list-style-type: none"> - Certificate of Completion of Training (CCT) (the proposed CCT date must be within 6 months of the interview) - Certificate of Eligibility for Specialist Registration (CESR) • Wide experience in all aspects of general internal medicine and diabetes/endocrinology • Extended experience/training in speciality, general internal medicine as well as acute medicine • Experience in acute and inpatient diabetes management, antenatal diabetes/endocrinology, diabetes/renal link services • Experience in acute medicine/ambulatory care 	<ul style="list-style-type: none"> ✓ ✓ ✓ ✓ 	<ul style="list-style-type: none"> ✓ ✓

GENERIC CAPABILITIES FRAMEWORK

PROFESSIONAL VALUES & BEHAVIOURS

CRITERIA	ESSENTIAL	DESIRABLE
<ul style="list-style-type: none"> 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). 	✓	
<ul style="list-style-type: none"> Demonstrates the underpinning subject-specific competences i.e., knowledge, skills and behaviours relevant to the role setting and scope. 	✓	
<ul style="list-style-type: none"> 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. 	✓	
<ul style="list-style-type: none"> Critically reflects on own competence, understands own limits, and seeks help when required. 	✓	
<ul style="list-style-type: none"> 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. 	✓	
<ul style="list-style-type: none"> 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. 	✓	
<ul style="list-style-type: none"> Demonstrates key generic clinical skills around the areas of consent; ensuring humane interventions, prescribing medicines safely and using medical devices safely. 	✓	
<ul style="list-style-type: none"> Adheres to professional requirements, participating in annual appraisal and reviews of performance and progression. 	✓	
<ul style="list-style-type: none"> Awareness of legal responsibilities relevant to the role, such as around mental capacity and deprivation of liberty; data protection; equality and diversity. 	✓	
<ul style="list-style-type: none"> 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. 	✓	

LEADERSHIP & TEAM WORKING

CRITERIA	ESSENTIAL	DESIRABLE
<ul style="list-style-type: none"> 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. 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. Develops effective relationships across teams and contributes to work and success of these teams – promotes and participates in both multidisciplinary and interprofessional team working. Critically reflects on decision-making processes and explains those decisions to others in an honest and transparent way. Demonstrates ability to challenge others, escalating concerns when necessary. Develops practice in response to changing population health need, engaging in horizon scanning for future developments. 	<p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p>	

PATIENT SAFETY & QUALITY IMPROVEMENT

CRITERIA	ESSENTIAL	DESIRABLE
<ul style="list-style-type: none"> 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 Applies basic human factors principles and practice at individual, team, organisation, and system levels. 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. Advocates for, and contributes to, organisational learning. Reflects on personal behaviour and practice, responding to learning opportunities. 	<p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p>	

SAFEGUARDING VULNERABLE GROUPS

CRITERIA	ESSENTIAL	DESIRABLE
<ul style="list-style-type: none"> 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. Applies appropriate equality and diversity legislation, including disability discrimination requirements, in the context of patient care. 	<p>✓</p> <p>✓</p>	

EDUCATION & TRAINING

CRITERIA	ESSENTIAL	DESIRABLE
<ul style="list-style-type: none"> Critically assesses own learning needs and ensures a personal development plan reflects both clinical practice and relevant generic capabilities. Promotes and participates in individual and team learning; supporting the educational needs of individuals and teams for uni-professional, multidisciplinary and interprofessional learning. Identifies and creates safe and supportive working and learning environments. Takes part in patient education. 	<p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p>	

RESEARCH & SCHOLARSHIP

CRITERIA	ESSENTIAL	DESIRABLE
<ul style="list-style-type: none"> 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. Critically appraises and understands the relevance of the literature, conducting literature searches and reviews; disseminates best practice including from quality improvement projects. Communicates and interprets research evidence in a meaningful way for patients to support shared decision-making. 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 	<p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p>	

<ul style="list-style-type: none">• Locates and uses clinical guidelines appropriately.		
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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:



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.

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. Ultimately, if we follow our Values, we will provide services that are better for our patients and better for each other.



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Getting to Royal Shrewsbury Hospital

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Getting to Princess Royal Hospital