APPOINTMENT OF A PAEDIATRIC CONSULTANT WITH A SUBSPECIAL INTEREST IN EPILEPSY / NEUROLOGY

JOB DESCRIPTION

February 2017
INTRODUCTION
The Shrewsbury and Telford Hospital NHS Trust has, following major investment, undertaken an extensive programme of reconfiguration of its Women and Children’s services with an entirely new purpose-built Women & Children’s Centre which opened in September 2014.

The Trust is now seeking to appoint a Consultant Paediatrican due to the upcoming retirement of one of the substantive Consultants who subspecialises in paediatric epilepsy. It also allows the development of 7 day working without the need to do any tier 2 shifts.

The post attracts 10 PA’s with the option of one additional PA. Part time applicants and job share applications are welcome to apply as all applications will be considered.

This is a fantastic opportunity to be part of the biggest development of Children’s services that the County has seen. You will become part of a team of 13 Acute Substantive General Paediatric Consultants, 2 Neo-Paediaic Consultants, 4 Associate specialists, 2 Speciality doctors and 10 ST4+. You will work in what will be one of the largest acute District General Hospital Paediatric departments in the Country serving a catchment population of over 0.5 million.

Our vision is for the highest quality care, to provide an environment in which all staff, and in particular trainees, are supported and thrive, with greater delivery of care by Consultants in line with RCPCH recommendations. The investment in infrastructure provides not only a single large Paediatric ward for the County – 36 beds, with specialist high-dependency and oncology areas, but also a new large Children’s Assessment/Short-Stay 8-bedded unit at the Princess Royal Hospital and a Paediatric Medical Day case Unit at the Royal Shrewsbury Hospital.

Investment has also delivered a brand new high-specification Neonatal Unit co-located with the new Paediatric and Obstetric units. There are separate on-call rotas for acute paediatrics and neonatology at consultant level, with shared on call at tier 2 level. This post does not include neonatal cover, although neonatal experience would be welcomed and could be accommodated.

Paediatric speciality services are already well developed in the Trust with the majority of subspecialties having 2 lead Consultants. This post supports this aim and will allow a thriving subspecialty service for children with Epilepsy. Paediatric Neurology experience would be welcomed and could be developed.

THE IMPACT OF RECONFIGURATION ON CHILDREN’S SERVICES
All Paediatric and Neonatal Inpatient services are now delivered from a single large department based at the Princess Royal Hospital in a new purpose-built state-of-the-art Women and Children’s Centre. The new facilities include
- A new 36 bed children’s ward
- Dedicated Oncology and High-Dependency Care 3-bedded Units within the ward
- Independently staffed 8-bedded Children’s Assessment Units at the Princess Royal Hospital 24/7
- Paediatric medical day case facilities at the Royal Shrewsbury Hospital.
- A new Neonatal Unit, designated as a Level 2 / Local NNU
- New Children’s Outpatient Centres at both Hospital sites
- Co-location with the new Labour Suite, Maternity Operating Theatres and Obstetric Wards with vastly improved estate and facilities combined with staff expansion. There is already separation of rotas at junior tier (24/7) and middle-tier (09:00-17:00hrs Mon-Fri) for paediatric and neonatal services. There is separation of the Consultant tier 24/7, and the middle tier 09:00-23:00hrs 24/7.

The Children’s Ward
A total of 36 beds, with 18 accommodated in 2- or 4-bedded bays, and 16 in cubicles, each with en-suite accommodation. The ward has a dedicated 3-bed Oncology Unit that has its own parent accommodation, Treatment Rooms and office accommodation, and delivers the highest quality of care as a Level 3 Paediatric Oncology Shared Care Unit. 3 beds are dedicated, and staffed, for High-Dependency Care. CPAP and High-Flow Oxygen facilities are in use already in county, and the new unit sees expansion of this, along with the potential to further develop HDU care provision for the West Midlands. The Ward’s resuscitation room allows for initiation of PICU support, including ventilation, and there are well-established links with the Regions PICU centres at Stoke and Birmingham and with the immensely supportive and efficient Regional Transport and PICU advice service (KIDS) based at the Birmingham Children’s Hospital.

This large new ward is ideally located, being adjacent to the Princes Royal Hospital Children’s Out-Patient facility, Neonatology, Radiology, A&E, and the new Children’s Assessment Unit.

There are currently in excess of 6,000 admissions per annum to the two Children’s Wards, with a further 6,000+ attendances at the Children’s Assessment Unit.

The PRH Children’s Assessment Unit
Separately staffed and open 24/7 this new facility has 8 beds, with 4 as en-suite cubicles, and a separate Treatment Room for practical procedures. Length of stay is already little over 24 hours for children in Shropshire, and the CAUs are expected to further facilitate earlier discharge home and ward admission avoidance.

The RSH Paediatric Medical Daycase Unit
Reconfiguration has ensured that cost effective services are provided with an emphasis of quality of care and effective triage of patients. The Paediatric Medical Day Unit at the Royal Shrewsbury Hospital is a 6-bedded unit. Opening hours reflect the need to deliver care for peak attendance hours, 09:00-17:00hrs Mon-Fri.

The unit is staffed by highly experienced Advanced Paediatric Nurse Practitioners or Associate Specialists.

Comprehensive care pathways have been developed to manage the admission of ill or injured children, whether they present to the Royal Shrewsbury Hospital or Princess Royal Hospital. The Paediatric team at RSH is expected to play a role in
supporting the Royal Shrewsbury Hospital A&E Department, which is also the designated Trauma Unit for the County. This support is available from 9am to 10pm 5 days/week and between 12pm and 10pm on a Saturday and Sunday.

**Children’s Outpatients**

At both the Royal Shrewsbury Hospital and Princess Royal Hospital there are new, enhanced out-patient facilities. Each also contain its own treatment room, clean and dirty utility and administration areas, allowing greater delivery of care away from the in-patient unit.

Children’s general paediatric out-patient clinics are also delivered in the excellent facilities provided by a number of the local Community Hospitals (in Whitchurch, Ludlow, Bridgnorth, Welshpool and Newtown) and in the specialist Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry. This post would involve 1 outreach clinic.

There is comprehensive provision of specialist services in the out-patients, including:

**A. Visiting Tertiary Specialists:** Cardiology, Nephrology, Urology, Surgery, Endocrinology, Cystic Fibrosis, Oncology & Haematology, and Genetics.
**B. In-County Specialist Clinics:** Gastroenterology, UTI/Renal, Cardiology, Allergy, Respiratory, Cystic Fibrosis, Rheumatology, Diabetes, Endocrinology, Oncology & Haematology, Metabolic, Epilepsy and Neurology

**The Paediatric Epilepsy/Neurology Service**

**Team:**
- Dr S Parepalli - Consultant Paediatrician, Lead for Paediatric Epilepsy
- Dr F Hinde - Consultant Paediatrician - (will be retiring – advertised post)
- Davina Beck - Senior epilepsy nurse specialist part time – 0.6 WTE
- Louise Weaver - Epilepsy nurse specialist – Fulltime, 1 WTE
- Dr Ram Kumar - Visiting Paediatric Neurologist (Alder Hey Hospital)

We are a friendly and supportive team and value opinion and respect the contribution of other team members.

**Facilities:**
- EEG – EEGs done within our hospital twice a month – Neurophysiology team from Kidderminster.
- Friendly and supportive Neurophysiology technician who is willing to do EEGs at home and at special schools for children with special needs.
- EEGs reported by Paediatric Neurophysiologist.
- Facilities for standard, sleep and ambulatory EEGs available.
- MRI head with epilepsy protocol including under sedation and under GA available (if GA required it will done at Alder Hey).
- Good links with CAMHS and Community Paediatricians for specialist opinion and management of co morbidities and Non epilepsy Attacks.

**Services Provided:**
- 1st Seizure clinic
- Epilepsy clinics at Princess Royal Hospital and Royal Shrewsbury Hospital.
• Adolescent clinics – Lead by epilepsy Nurse Specialists
• Transitional clinics
• Combined clinics with Tertiary Neurologist
• Telephonic Help Line – from 9AM to 5PM, Monday to Friday, run by epilepsy nurse specialist and supported by Consultants. (Used by parents, patients, G.P’s school nurses and other professionals).

Workload:
• We have around 550 children with epilepsy under our care, around 50 complex epilepsy children (epilepsy encephalopathy, drug resistant epilepsy, epilepsy syndromes). 4 children on VNS, 4 on ketogenic diet and currently 3 undergoing evaluation for epilepsy surgery.

Governance:
• We are active in the regional paediatric epilepsy and neurology network group.
• We have actively participated in all the Epilepsy 12 National Audits with excellent results.

THE DEPARTMENT’S MEDICAL STAFFING

There are a total of 16 acute General Paediatric consultants, with an additional 2 split posts with neonatology. The Paediatric Consultants are as follows:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Speciality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Sabri Abdu</td>
<td>General Paediatrician</td>
<td>Special interest in Gastroenterology</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Keele Undergraduate Tutor</td>
</tr>
<tr>
<td>Dr Naeem Ayub</td>
<td>General Paediatrician</td>
<td>Special interest in Gastroenterology and</td>
</tr>
<tr>
<td>Dr Richard Brough</td>
<td>General Paediatrician</td>
<td>Special interests in Rheumatology</td>
</tr>
<tr>
<td>Dr Rajesh Sakremath</td>
<td>General Paediatrician</td>
<td>Special interest Diabetes &amp; Endocrinology</td>
</tr>
<tr>
<td>Dr Andrew Cowley</td>
<td>General Paediatrician</td>
<td>Special Interest Oncology &amp; Haematology</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Clinical Director Paediatrics</td>
</tr>
<tr>
<td>Dr Frank Hinde</td>
<td>General Paediatrician</td>
<td>Special interest in Epilepsy</td>
</tr>
<tr>
<td>Dr Ari Kannivelu</td>
<td>General Paediatrician, Special interest in Cardiology</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>College Tutor</td>
</tr>
<tr>
<td>Dr Kathryn McCrea</td>
<td>General Paediatrician</td>
<td>Special Interest Diabetes &amp; Endocrinology</td>
</tr>
<tr>
<td>Dr Srini Parepalli</td>
<td>General Paediatrician</td>
<td>Special interest in Epilepsy &amp; Neurology</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Keele undergraduate tutor</td>
</tr>
<tr>
<td>Dr Tabitha Parsons</td>
<td>General Paediatrician</td>
<td>Special interest Haematology/Oncology</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Clinical Director for Governance</td>
</tr>
<tr>
<td>Dr Martyn Rees</td>
<td>General Paediatrician</td>
<td>Special interest Respiratory Paediatrics / Cystic</td>
</tr>
</tbody>
</table>
**Tier 2/Senior Medical Support**

10 ST4+ (3 General Paediatrics, 3 Neonatal and 4 community posts)

4 Associate Specialists

2 Specialty doctors

**Junior Tier**

2 Foundation Year 1

12-14 / GPVTS ST / Paediatric ST1-3

5 Advanced Paediatric Nurse Practitioners

**THE POST**

**DESCRIPTION OF POST**

This replacement appointment is full time and attracts 10 PAs and one additional PA

Clinical duties of the post are similar to all of the substantive consultants and include:

- **Acute General Paediatrics** – Consultant of the week on a 1 in 12 rota and as Consultant of the day (support consultant) also on a 1 in 12 rota.
- **Acute General on call** on a 1 in 6 (split between RSH non-resident, and PRH on call 4:30pm to 9:30pm, then non-resident overnight) supporting the RCPCH recommendations and 7 day working NHSE standards.
- **General Paediatric Outpatient Clinics** - Consultant led new and follow-up patients
- **Speciality clinics** – Epilepsy MDT clinics at the PRH and RSH sites.
- **General ward duties**, including patient reviews and day to day assistance with management of paediatric epilepsy patients
- **1 in 6 weekend general paediatric cover split between RSH and PRH**. This will be split resident Friday, Sunday 9am to 9:30pm (PRH) and Saturday 9am to 12pm (RSH) and non-resident overnight, then Monday off in the following week. This will be the reciprocal every 12 weeks for the RSH on call.
- **Admin** – 1 PA every week to be used flexibly
- **SPA’s** – 2 PA’s every week. Additional SPA’s may be available for specific roles.
<table>
<thead>
<tr>
<th>Day</th>
<th>Time</th>
<th>Location</th>
<th>Work</th>
<th>DCC</th>
<th>Frequency Per Year</th>
<th>Total Annual No. of PAs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>09:00 - 17:00</td>
<td>PRH</td>
<td>Consultant of the Week 1</td>
<td>2</td>
<td>1 in 12</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>09:00 - 13:00</td>
<td>PRH</td>
<td>Consultant of the Day – Week 7</td>
<td>1</td>
<td>1 in 12</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>09:00 - 12:30</td>
<td>PRH</td>
<td>General Paediatric outpatient clinic</td>
<td>1</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>Tuesday</td>
<td>09:00 - 17:00</td>
<td>PRH</td>
<td>Consultant of the Week 1</td>
<td>2</td>
<td>1 in 12</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>09:00 - 13:00</td>
<td>PRH</td>
<td>Consultant of the Day – Week 7</td>
<td>1</td>
<td>1 in 12</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>09:00 - 17:00</td>
<td>Outreach</td>
<td>General Outreach clinic</td>
<td>2</td>
<td>11</td>
<td>22</td>
</tr>
<tr>
<td>Wednesday</td>
<td>09:00 - 17:00</td>
<td>PRH</td>
<td>Consultant of the Week 1</td>
<td>2</td>
<td>1 in 12</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>09:00 - 13:00</td>
<td>PRH</td>
<td>Consultant of the Day – Week 7</td>
<td>1</td>
<td>1 in 12</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>16:30 - 21:30</td>
<td>PRH</td>
<td>On call resident evening</td>
<td>1.5</td>
<td>1 in 12</td>
<td>25</td>
</tr>
<tr>
<td></td>
<td>21:30 - 09:00</td>
<td>PRH</td>
<td>On call non-resident night</td>
<td>0.6</td>
<td>1 in 12</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>14:00 - 17:30</td>
<td>RSH</td>
<td>Speciality Outpatient epilepsy clinic + MDT</td>
<td>1</td>
<td>26</td>
<td>26</td>
</tr>
<tr>
<td>Thursday</td>
<td>09:00 - 17:00</td>
<td>PRH</td>
<td>Consultant of the Week 1</td>
<td>2</td>
<td>1 in 12</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>09:00 - 13:00</td>
<td>PRH</td>
<td>Consultant of the Day – Week 7</td>
<td>1</td>
<td>1 in 12</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>09:00 - 09:00</td>
<td>RSH</td>
<td>On call non-resident cover</td>
<td>1.3</td>
<td>1 in 12</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>14:00 - 17:00</td>
<td>PRH</td>
<td>Rapid access general clinic</td>
<td>0.7</td>
<td>1 in 12</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>09:00 - 13:00</td>
<td>RSH</td>
<td>Epilepsy transition clinic</td>
<td>1</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Friday</td>
<td>09:00 - 17:00</td>
<td>PRH</td>
<td>Consultant of the Week 1</td>
<td>2</td>
<td>1 in 12</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>09:00 - 13:00</td>
<td>PRH</td>
<td>Consultant of the Day – Week 7</td>
<td>1</td>
<td>1 in 12</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>17:00 - 21:30</td>
<td>PRH</td>
<td>On call resident - Week 1</td>
<td>1.3</td>
<td>1 in 12</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>21:30 - 09:00</td>
<td>PRH</td>
<td>On call non-resident night – Week 1</td>
<td>0.6</td>
<td>1 in 12</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>13:00 - 09:00</td>
<td>RSH</td>
<td>On call non-resident - Week 7</td>
<td>1.2</td>
<td>1 in 12</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>09:00 - 14:00</td>
<td>PRH</td>
<td>Outpatient epilepsy clinic + MDT</td>
<td>1.1</td>
<td>26</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td>10:00-16:00</td>
<td>PRH</td>
<td>Visiting Consultant - Neurology</td>
<td>1.5</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>
### Timetable

<table>
<thead>
<tr>
<th>Time</th>
<th>Department</th>
<th>Activity Description</th>
<th>Days</th>
<th>Ratio</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>09:00 - 21:30</td>
<td>PRH</td>
<td>On call resident COW</td>
<td>8.3</td>
<td>1 in 12</td>
<td>36</td>
</tr>
<tr>
<td>21:30 - 09:00</td>
<td>PRH</td>
<td>On call non-resident night</td>
<td>1</td>
<td>1 in 12</td>
<td>4</td>
</tr>
<tr>
<td>09:00 - 12:00</td>
<td>PRH/RSH</td>
<td>On call resident COD/support weekend</td>
<td>2</td>
<td>1 in 12</td>
<td>9</td>
</tr>
<tr>
<td>12:00 - 09:00</td>
<td>RSH</td>
<td>On call non-resident</td>
<td>1.8</td>
<td>1 in 12</td>
<td>8</td>
</tr>
</tbody>
</table>

### Additional agreed activity to be worked flexibly

<table>
<thead>
<tr>
<th>Activity</th>
<th>Days</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Epilepsy ward review</td>
<td>1</td>
<td>26</td>
</tr>
<tr>
<td>Clinical Admin 1pa x 42 weeks</td>
<td>1</td>
<td>42</td>
</tr>
<tr>
<td>SPA’s = 2 per week</td>
<td>2</td>
<td>84</td>
</tr>
<tr>
<td>Weekly PAs</td>
<td></td>
<td>10 (+1)</td>
</tr>
</tbody>
</table>

The post holder will be expected to participate in county-wide audit and CPD meetings. The post holder will be actively engaged with personal clinical audit and evidence-based medicine projects, and to support this activity within the Division.

### 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 of the successful applicant, particularly if trainee members of the department could be incorporated in the methodological and practical stages.

### Appraisal and Revalidation

The successful applicant will undergo annual appraisal allowing jointly agreed development needs to be fed into their job plan. 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. The successful applicant will be expected to participate in this exercise.

### Audit

There is a fully staffed Audit Department on both sites with well-organised teams.

### Office and Secretarial Facilities

Office accommodation and appropriate secretarial support will be provided.

### Terms and Conditions of Service

The appointment is full-time / part-time and the successful candidate will be appointed on the Terms & Conditions of Service for Specialty Doctors – England (2008).

The salary scale is based on the Consultant pay scale (MC72):

Salary Scale: £76,761 - £103,490 per annum for 10 Programmed Activities (as of April 2017)
The post is based on the recognition of 10 Programmed Activities + 1 PA by negotiation.

The post holder:
- will be in possession of a recognised medical / dental qualification and full registration with the General Medical Council and continue hold a licence to practice
- is on the special register or within 6/12 of CCT.
- is advised to be a member of a recognised medical defence society or be suitably insured. Trust insurance does not cover work undertaken outside the Trust other than caring for patients and work of the Trust
- will be expected to make sure that there are adequate arrangements for hospital staff involved in patient care to be able to contact him / her when necessary
- will not be permitted to commence employment until a full medical examination has been completed with a satisfactory result or the Occupational Health Physician has satisfied himself that a full examination is not necessary. The completion of a satisfactory health questionnaire is a condition of employment.
- will not be permitted to commence employment until full clearance has been received from the disclosure barring service.

The Trust operates a no smoking policy.

The Trust values its diverse workforce and is committed to taking all necessary steps to ensure that individuals are treated equally and fairly and to taking positive action to promote equal opportunities.

ACCOMMODATION
The Trust has residential accommodation for medical staff.

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.

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 for full-time medical and dental staff, staff gym membership, on-site crèche/childcare provision and access to NHS Discounts schemes.

INFORMAL VISITS AND FURTHER INFORMATION
Candidates interested in this post are encouraged to discuss the job description further and to visit the Hospital. For further details or to arrange a visit please contact:

Dr Andrew Cowley
Clinical Director Paediatrics
Princess Royal Hospital
Tel 01952 641222
Email andrewcowley@nhs.net

Dr Srini Parepalli
Consultant Paediatrican
Special Interest in Epilepsy
Princess Royal Hospital
STATEMENTS

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
- 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 KSF 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 Trusts 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.