

**Consultant Nephrologist and General Physician**





We are seeking to appoint a motivated and enthusiastic colleague to work with the Renal Team in NHS Ayrshire and Arran.

The renal unit provides a full range of nephrology services with the exception of acute transplantation. Acute care is provided on ward 2F, a 12-bedded high dependency ward with 12 dialysis points. Acute intermittent haemodialysis, haemodiafiltration and plasmapheresis are all provided. There are approximately 70 cases of dialysis-dependent acute kidney injury per annum in the renal wards. Additional support is provided to the intensive care unit at UH Crosshouse, which can provide intermittent haemodialysis and continuous haemofiltration. There is also an intensive care unit in UH Ayr with the capability to perform continuous renal replacement therapy. The nephrologists also have approximately 40 step down/general medical beds, 6 of which are plumbed for dialysis. The nephrologists provide inpatient opinions for all Ayrshire Hospitals.

Outpatient haemodialysis is provided in the John Stevenson Lynch Renal Unit, a purpose built 30 station dialysis unit on the University Hospital Crosshouse site, currently for 108 patients; and in a renal satellite unit at University Hospital Ayr, a new-build 11 station facility, currently with 38 patients. All patients are treated with haemodiafiltration. There are two shifts per day. Patients are treated for 4-5 hours per session, thrice weekly. We are committed to providing high quality, and innovative haemodialysis and are national leaders in the provision of home based therapies. There are currently 16 home haemodialysis patients, with a commitment to expanding that service. Most are treated with frequent short daily dialysis, or nocturnal dialysis. We promote a shared care model within the dialysis units encouraging patients to participate as much as possible in their own care and are the only Scottish site selected for the ShareHD national quality improvement collaborative.

Our peritoneal dialysis unit is primarily nurse led and has a reputation for success, both in recruiting and sustaining patients. There are currently 38 patients, predominantly on APD. An in-house assisted PD programme has been successfully established which currently supports 5 patients.

We have a transplant follow-up clinic for patients more than one year post transplant. Kidney transplants are carried out at the Queen Elizabeth University Hospital, Glasgow, and combined kidney-pancreas transplants at Edinburgh Royal Infirmary.

There are currently around 220 patients attending for transplant follow up, and further growth is expected. Chronic kidney disease is managed in renal clinics on three sites.

The full range of nephrology is seen at these clinics. An Advanced Kidney Care Clinic additionally provides support and training for patients with stage 5 chronic kidney disease. We also provide a hypertension clinic in North Ayrshire. Non-transplant patients being actively immunosuppressed are seen in a renal immune clinic.

A PKD clinic has been established with 18 patients on active treatment. All clinics have returned to face to face unless there is a patient preference for a telephone consultation.

We have a well-supported conservative care programme that has received national recognition. A dedicated supportive care nurse works with patients across all areas of the service to develop future care plans and to provide support for those who have chosen not to have dialysis or are approaching end of life. There are excellent links with the Ayrshire Hospice.

The renal senior medical team currently comprises 6 renal consultants, one associate specialist and one senior specialty doctor. We have an excellent multi-disciplinary team of nurses, dieticians, renal pharmacists and renal technologists. A podiatrist visits the dialysis unit regularly. Vascular access support is provided by a team, comprising a vascular surgeon (Mr David Wallace), 2 vascular access specialist nurses and two interventional radiologists (Dr Mark Ablett and Dr JP Charon).

The unit participates in the Scottish Electronic Renal Patient Record (VitalData) and the dialysis unit uses the Diamant system to interface with dialysis machines. The hospital has full PACS and RIS systems, and a secure wireless network. Electronic prescribing is established for both inpatients and outpatients. There are high quality teleconferencing facilities within the two dialysis units to allow communication between the sites and further afield.

We deliver a standalone renal on-call rota with duties shared equally amongst the consultants. There is an active programme of postgraduate education in which all doctors are invited and encouraged to participate.

The terms and conditions of service are those determined by the New Consultant Contract (Scotland) 2004. The post is offered on a 10 programmed activity basis initially (including 2 SPAs), but opportunities may exist for Extra Programmed Activities to be undertaken subject to service requirements and in accordance with national terms and conditions of service. Applications from individuals who may wish to work on a part-time, compressed hours, or job share basis will be considered.

Applicants will be appropriately experienced with Full GMC Registration, including a current Licence to Practice. Applicants must also be on the Specialist Register of the GMC or be within 6 months of the anticipated award of a CCT or CESR in Renal medicine at the time of interview. Specialist registration in General Medicine is essential. Evidence of eligibility of inclusion on the Specialist Register will require to be provided at time of application.



* **University Hospital Crosshouse (UHC)**

**University Hospital Crosshouse** is a modern 536 bedded Acute District General Hospital located in the outskirts of Kilmarnock and easily commutable from the nearby city of Glasgow. The site opened in 1982 and has been expanded and regularly updated since then, including the co-location of the Ayrshire Maternity Unit. The UHC site provides acute health care services for a population of approximately 225,000 living in North & East Ayrshire as well as the Islands of Arran & Cumbrae. Our front door has been recently expanded to accommodate a Combined Assessment and Ambulatory Care Unit, which take all of the Primary Care medical referrals.

* **University Hospital Ayr (UHA)**

University Hospital Ayr is a 320 bedded Acute District General Hospital located in Ayr, around 25 minutes’ drive from UHC and within commuting distance to Glasgow. The hospital provides a full range of DGH services for a population of 146,000 people in South and East Ayrshire.

Both UHC and UHA are easily accessed by road, with the M77 providing access to the city of Glasgow within 30- 45 minutes. Rail services also link Ayr and Kilmarnock to Glasgow and other surrounding towns, and Prestwick Airport lies approximately a 15 minute drive away. Both sites provide free car parking facilities.

**Radiology:**

There is an excellent liaison with Radiology colleagues for case discussion, review of images, CT or US-guided biopsies etc. CT imaging for urgent cases is prompt. An extensive range of imaging facilities are available including spiral CT with 3D reconstruction, MRI, MRA, radio-isotope facilities and digital subtraction angiography.

**Palliative Care:**

The Ayrshire Hospice in Ayr provides an excellent Palliative Care Service. The renal Service have a dedicated supportive care nurse who works in close liaison with a team of Palliative Care Nurses and is supported by weekly Palliative Care Consultant visits.

**The Medical Unit**

Medicine in NHS Ayrshire and Arran comprises the Acute Medicine Directorate (pan-Ayrshire), the Medical Specialties Directorate at UHC and the Medical Specialties Directorate at UHA.

**Facilities are as follows**:

* Acute Medicine
* CAU on both sites (the UHA site includes surgical admissions)
* Initial & Same Day Assessment Area
* Medical High Dependency Unit
* Coronary Care Unit on both sites
* Renal High Dependency Unit in UHC
* Infectious Diseases Unit in UHC
* General Medicine in Medical wards on both sites
* Renal Dialysis Unit in UHC with satellite unit in UHA
* Diabetic Day Care Unit on both sites

The Acute Medical Unit has recently expanded its bed complement with a designated CAU on both sites including an Initial and Same Day Assessment Area. GP referrals are triaged and then sent directly to CAU (except patients needing emergency treatment in ED) where they are assessed, treated and decision to admit or discharge is made. Medicines are reconciled by a pharmacist. Consultant review usually occurs within 6 hours (during hours of 8am to 8pm) and thereafter patients are sent to the appropriate wards/discharged.

Patients admitted overnight to the CAU are reviewed by the acute physicians next morning and allocated to the relevant speciality teams. Acute medicine consultants run the Acute Medicine Ambulatory Care areas. This approach by Acute Physicians facilitates patient flow, improves early senior decision making and provides supervision and education to trainees. A small number of patients are admitted directly to the Medical High Dependency Unit, Coronary Care Unit, the Renal High Dependency Unit, the Acute Stroke Unit or the Infectious Disease Unit. This pattern continues Mon-Fri. Over the weekends the morning ward rounds are led by 2 Consultant General Medical Physicians alongside one Acute Medical Consultant. The on-call physician returns to the hospital at 5pm to carry out a second ward round and is then on call overnight. Renal Medicine provide a separate on call rota with daily review of specialty patients within the CAU. Renal medicine does not contribute to the GIM on call commitment.

The Medical High Dependency Unit is utilised for acutely unwell patients from CAU, ED, wards or for step down from ITU. It provides invasive monitoring and non-invasive ventilation. The Acute Medical Physician will review new admissions on the morning ward round at the weekend with any admissions during the day reviewed by the On-call physician during the evening ward round. Patients remain under the care of the acute medicine team until step-down, with speciality in reach as required.

**Acute Medicine and Medical Specialties Directorates at Ayr and Crosshouse**

|  |  |  |
| --- | --- | --- |
| **Consultant Staff** | **Specialist Interest** | **Base** |
| Dr Kati Carroll | Acute Medicine | UHC |
| Dr Mahanth Manuel | Acute Medicine | UHC |
| Dr Lucy Martin | Acute Medicine | UHC |
| Dr Natalie Rennie | Acute Medicine | UHC |
| Dr Wendy Russell | Acute Medicine | UHC |
| Dr Claire Shepherd | Acute Medicine | UHC |
| Dr Katrina Weir | Acute Medicine | UHC |
| Dr Adam Williamson | Acute Medicine | UHC |
| Dr David Wilkin | Acute Medicine | UHC |
| Dr Krish Prasad (Acting) | Acute Medicine | UHA |
| Dr Victor Chong  Dr Richard Dobson | Cardiology  Cardiology | UHC/UHA  UHC |
| Dr Ahmed El Wasseif | Cardiology | UHC |
| Dr Alex Payne | Cardiology | UHC |
| Dr Gavin Nicoll | Cardiology | UHC |
| Dr Angie Ghattas | Cardiology | UHC |
| Dr Omar Hassan | Cardiology | UHA |
| Dr Jim McGowan | Cardiology | UHA |
| Dr Jocelyn Reid (Locum) | Cardiology | UHA |
| Vacancy  Vacancy | Endocrinology/G(I)M  Endocrinology/G(I)M | UHA  UHA |
| Dr Jenna Cowan | Endocrinology/G(I)M | UHC |
| Dr Stewart Ferguson | Endocrinology/G(I)M | UHC |
| Dr Vincent McAulay | Endocrinology/G(I)M | UHC |
| Dr Alison MacEwen | Endocrinology/G(I)M | UHC |
| Dr Rajesh Thimmappa (Locum) | Gastroenterology/G(I)M | UHA |
| Dr Enes Muazzen | Gastroenterology/G(I)M | UHC |
| Dr Amir Shah | Gastroenterology/G(I)M | UHC |
| Prof Ali Taha | Gastroenterology/G(I)M | UHC |
| Dr Sultan Rome (Locum) | Gastroenterology/G(I)M | UHA |
| Dr Sam Allen | Infectious Diseases/G(I)M | UHC |
| Vacancy | Infectious Diseases/G(I)M | UHC |
| Dr Vishal Dey | Renal/G(I)M | UHC |
| Dr Aileen Helps | Renal/G(I)M | UHC |
| Dr Kara Porch | Renal/G(I)M | UHC |
| Dr Victoria Ross | Renal/G(I)M | UHC |
| Dr Gregory Skoyles (Locum) | Renal/G(I)M | UHC |
| Dr Elaine Spalding | Renal/G(I)M | UHC |
| Dr Ray Wan | Renal/G(I)M | UHC |
| Dr Hans Hartung | Respiratory Medicine/G(I)M | UHC |
| Dr Philip Hodkinson | Respiratory Medicine/G(I)M | UHC |
| Dr Zafar Iqbal | Respiratory Medicine/ G(I)M | UHC |
| Dr Gillian McVay | Respiratory Medicine/G(I)M | UHC |
| Dr Nick Pitman | Respiratory Medicine/G(I)M | UHC |
| Dr Sudipta Roy | Respiratory Medicine/G(I)M | UHC |
| Dr Anur Guhan | Respiratory Medicine/G(I)M | UHA |
| Dr David Sword | Respiratory Medicine/G(I)M | UHA |
| Dr Simona Huica | Rheumatology | UHA |
| Dr Margaret Duncan | Rheumatology/G(I)M | UHA |
| Dr Sujit Shetty | Rheumatology/G(I)M | UHA |

**Junior medical staff:**

Junior doctors rotate to Ayrshire as part of the West of Scotland Deanery.

NHS Ayrshire and Arran have substantially invested in junior doctor recruitment via our Fellow Programme over the last 3 years. There are now 6 substantive Clinical Teaching Fellows and 11 substantive Clinical Development Fellows employed in general medicine in University Hospital Crosshouse. NES training gaps are also backfilled via Clinical Development Fellow recruitment. Currently, in renal, there is a Clinical Teaching Fellow and a Clinical Development Fellow attached to the unit.



At present all day case renal biopsies and delivery of biological therapies are carried out in our Medical Day Care Unit. We wish to increase the use of this area to deliver same day assessment of acutely unwell patients known to the renal team. This will help with admission avoidance and be a truly person-centred approach to care.

In recognition of the challenges surrounding vascular access we are developing an in-house tunnelled central vein catheter insertion service and would welcome applications from individuals with prior experience of the practical aspects of this procedure.

As a team we recognise the importance of integration of digital technology in the delivery of clinical care. A remote blood pressure monitoring service is in the advanced stages of development which will improve the quality of remote clinical consultation. We utilise an electronic patient record (SERPR) which allows data from renal units across the West of Scotland to be shared for the benefit of patient care. Existing members of the team are involved in the steering groups leading the further development of this resource and an interest in digital solutions would be advantageous.

We have an active research portfolio which we would like to expand further. NHS A&A have an excellent Research and Development department and any existing or future research proposals would be supported by the team.



# Proposed Weekly Programme (rotating timetable shared equally with other members of the team)

Renal High Dependency Ward Week

|  |  |  |  |
| --- | --- | --- | --- |
| **DAY** | **HOSPITAL/ LOCATION** | **ACTIVITY** | **HOURS PER ACTIVITY INC TRAVEL** |
| **FROM / TO** |
| **Monday** |  |  |  |
| 0900 - 1300 | Crosshouse | Consultant Led ward round | 4 |
|  |  |  |  |
| 1300 - 1500 | Crosshouse | Referrals and Vetting | 2 |
| 1500-1700 |  | Ward Work/Admin | 2 |
| **Tuesday** |  |  |  |
| 0900-1100 | Crosshouse | Clinical Mailbox (GP queries/community phlebotomy etc) | 2 |
| 1100-1300 | Crosshouse | Admin | 2 |
| 1300-1700 | Crosshouse | SPA inc departmental meeting | 4 |
| **Wednesday** |  |  |  |
| 0900 - 1300 | Crosshouse | Consultant Led ward round | 4 |
| 1300 - 1500 | Crosshouse | Referrals and Vetting | 2 |
| 1500-1700 |  | Ward Work/Admin | 2 |
| **Thursday** |  |  |  |
| 0900-1300 | Crosshouse | Clinical Mailbox (GP queries/community phlebotomy etc) | 2 |
| 1300-1400 |  | Admin | 1 |
| 1400-1700 | Crosshouse | SPA | 3 |
| **Friday** |  |  |  |
| 0900 - 1300 | Crosshouse | Consultant Led ward round | 4 |
| 1300-1400 | Crosshouse | Referrals and Vetting | 1 |
| 1400-1500 | Crosshouse | Medical Directorate Meeting | 1 |
| 1500 - 1700 | Crosshouse | Ward Work | 2 |
| **Saturday** |  |  |  |
| **Sunday** |  |  |  |
| **Total Sessions** |  |  | 10 |

General Medical Ward Week\*

|  |  |  |  |
| --- | --- | --- | --- |
| **DAY** | **HOSPITAL/ LOCATION** | **ACTIVITY** | **HOURS PER ACTIVITY INC TRAVEL** |
| **FROM / TO** |
| **Monday** |  |  |  |
| 0900 - 1300 | Crosshouse | Consultant Led ward round | 4 |
| 1300-1400 | Crosshouse | Admin | 1 |
| 1400-1700 | Crosshouse | Clinic | 3 |
| **Tuesday** |  |  |  |
| 0900-1000 | Crosshouse | Ward Catch-up | 1 |
| 1000-1300 | Crosshouse | Admin | 3 |
| 1300-1400 | Crosshouse | MDT | 1 |
| 1400-1700 | Crosshouse | SPA inc departmental meeting | 3 |
| **Wednesday** |  |  |  |
| 0900 - 1300 | Crosshouse | Dialysis Unit Round | 4 |
| 1300 - 1600 | Crosshouse | Ward catch-up | 2 |
| 1600-1700 | Crosshouse | Ward Work | 1 |
| **Thursday** |  |  |  |
| 0900-1100 | Crosshouse | Admin | 2 |
| 1100-1300 | Crosshouse | Ward catch up | 2 |
| 1300-1700 | Crosshouse | SPA | 4 |
| **Friday** |  |  |  |
| 0900 - 1300 | Crosshouse | Consultant Led ward round | 4 |
| 1300-1400 | Crosshouse | Ward work | 1 |
| 1400-1500 | Crosshouse | Medical Directorate Meeting | 1 |
| 1500 - 1700 | Crosshouse | Ward Work | 2 |
| **Saturday** |  |  |  |
| **Sunday** |  |  |  |
| **Total Sessions** |  |  | 10 |

**Example Clinic Week\***

|  |  |  |  |
| --- | --- | --- | --- |
| **DAY** | **HOSPITAL/ LOCATION** | **ACTIVITY** | **HOURS PER ACTIVITY INC TRAVEL** |
| **FROM / TO** |
| **Monday** |  |  |  |
| 0900 - 1300 | Crosshouse | Transplant Clinic | 4 |
| 1300-1400 | Crosshouse | Admin | 1 |
| 1400-1700 | Crosshouse | Advanced Kidney Care Clinic | 3 |
| **Tuesday** |  |  |  |
| 0900-1300 | Crosshouse | Immune Clinic | 4 |
| 1300-1400 | Crosshouse | Admin | 1 |
| 1400-1500 | Crosshouse | MDT | 1 |
| 1500-1700 | Crosshouse | SPA inc departmental meeting | 2 |
| **Wednesday** |  |  |  |
| 0900 - 1300 | Crosshouse | Dialysis Unit Round | 4 |
| 1300-1700 | Crosshouse | SPA | 4 |
| **Thursday** |  |  |  |
| 0900-1300 | Crosshouse | Admin | 4 |
| 1300-1400 | Crosshouse | MDT | 1 |
| 1400-1700 | Crosshouse | General Renal Clinic | 4 |
| **Friday** |  |  |  |
| 0900-1300 | Crosshouse | Admin | 4 |
| 1300-1700 | Crosshouse | SPA inc Medical Directorate Meeting | 4 |
| **Saturday** |  |  |  |
| **Sunday** |  |  |  |
| **Total Sessions** |  |  | 10 |

\*Clinics worked will vary from week to week according to the needs of the service. In addition to those listed, there are also General Renal Clinics in University Hospital Ayr, additional General Renal Clinics in University Hospital Crosshouse, New Patient Clinics and an additional Transplant Clinic.

**Notes on the Programme**

**Patient Administration:**

This activity covers the management of individual patients including Out Patient administration, results reporting, letters/phone calls to patients, carers, GPs and members of the wider multidisciplinary team involved in the patients care.

**Ward Rounds**:

The time allocated is indicative and will be discussed with the appointee. Ward work will include teaching ward rounds as required.

**Travel:** Any travel allocation will be included within the Total Programmed Activities and will be determined by location at which Direct Clinical Care and Supporting Professional activities are carried out.

**Supporting Professional Activities**: NHS Ayrshire and Arran recognise the important role Job Planning has in ensuring consultants are supported in delivering high quality, safe, sustainable clinical care to patients. It is therefore important to ensure there is an adequate balance between direct clinical care activities and activities which support both the personal and professional development of the consultant workforce and facilitates agreed contribution to activities including:

* Under and post graduate teaching/training
* Clinical Governance
* Quality and Patient Safety
* Research and Innovation
* Service management and planning
* Work with professional bodies

The proposed job plan offers 2 SPAs to support job planning, appraisal, revalidation and educational supervision and formal training of post-graduate and under-graduate trainees. There will be a high degree of flexibility in job planning seeking to ensure that the service needs and work/life balance and appropriately met.

There may also be opportunities to contract for Extra Programmed activities Opportunities subject to service requirements and in accordance with national terms and conditions of service.

**Job Plan Review:** New appointees will discuss the indicative job plan with the Clinical Lead and Associate Medical Director, prior to starting in post, and will at that time review the balance of activities. Where it is possible to agree a revision to the indicative plan in advance of commencement this will be acted upon. In any event, there must be an interim Job Plan review conducted at 3 months post commencement to agree and finalise the Job Plan. The consultant at time of induction should ask for an interim review date to be scheduled. The agreed job plan will include all the consultant’s professional duties and commitments, including agreed Supporting Professional Activities. Thereafter Job Planning will be carried out annually as part of the Board’s Job Planning process.

**Private Practice:** If the post-holder wishes to undertake any private practice, they are obliged to inform their employer at the time of appointment of their intentions to do so. This should be submitted in writing to the Associate Medical Director. The conduct of private practice will be in accordance with the Consultant Contract (Scotland) Terms and Conditions.

The post-holder shall be free to undertake private practice without approval provided such work is undertaken outside the time agreed in the job plan for programmed activities. (Refer Section 6 of the New Consultant Contract).



The postholder will be accountable to the Associate Medical Director who will agree the Job Plan in conjunction with the Clinical Lead.

He/she will be expected to work with local managers and professional colleagues in the efficient running of services and will share with Consultant colleagues in the medical contribution to management. There will be opportunities for newly appointed Consultants to influence change and introduce new and innovative ways of working.

Subject to the provisions of the Terms and Conditions of Service, he/she is expected to observe NHS Ayrshire and Arran’s agreed policies and procedures, drawn up in consultation with the profession on clinical matters, and to follow the standing orders and financial instructions of NHS Ayrshire & Arran.

In particular, where he/she formally manages employees of NHS Ayrshire and Arran, the post holder will be expected to follow the Local and National Employment and Personnel Policies and Procedures.

He/she will be expected to make sure that there are adequate arrangements for hospital staff involved in the care of patients to be able to make contact with the post holder when necessary.

The post holder is required to comply with NHS Ayrshire and Arran’s Health and Safety Policies.

He/she will be responsible for the training and supervision of Junior Medical Staff who work with the post holder and will be expected to devote time to this activity on a regular basis. In addition, he/she will be expected to ensure that Junior Staff have access to advice and counselling. If appropriate, the post holder will be named in the Contracts of Doctors in training grades as the person responsible for overseeing their training, and as the initial source of advice to such Doctors on their career.

**Resources**

The staff resources of the Directorate are listed elsewhere. The post holder will have access to such general administrative support as is required for the discharge of his/her duties and responsibilities.

The appointed consultant will be provided with an office space, a personal computer with high speed internet access and printing facilities. Specific software requirements should be discussed at appointment.

The post holder will receive support from such other professional staff as are employed within NHS Ayrshire and Arran and are deployed to his/her area of patient care.

Excellent post-graduate facilities are provided at both hospitals, with the Alexander Fleming Education Centre based at University Hospital Crosshouse and the MacDonald Education Centre based at the University Hospital Ayr. Both centres include a full size lecture theatre, classrooms and a number of tutorial rooms.

There is a Medium Fidelity (SimMan based) Simulation Room with adjacent Debriefing Room within the Education Centre at University Hospital Crosshouse which is used by all acute specialties for training. The facilities are supported with modern audio visual and information technology, including teleconferencing facilities and both centres incorporate an excellent up-to-date library with a resident librarian. We have an enthusiastic faculty of trained simulation facilitators from anaesthesia, general medicine, emergency medicine and paediatrics.

**Medical Photography**

The Medical Illustrations Department can provide a full service at both hospitals for clinical photography, preparation of slides, PowerPoint etc., for lecture purposes.

**Duties and Responsibilities**

The main duties and responsibilities of the post include:

* Delivery of high quality, efficient and responsive clinical care to the patients and population of Ayrshire & Arran
* Responsibilities for carrying out teaching, accreditation and examination duties as required, and for contributing to undergraduate andpostgraduate medical education. The post holder will be expected to comply with College recommendations on Continuing Medical Education.
* The post holder will be required to comply with NHS Ayrshire and Arran’s Policies on Clinical Governance.



The Terms and Conditions of Service are those determined by the Terms and Conditions of the New Consultant Grade (Scotland) as amended from time to time. The distance that a consultant can reside from the principal base hospital, where travel time is seen as more important than mileage, is subject to the agreement of the Executive Medical Director, but it is usually anticipated that a journey that takes no more than 30 minutes for any emergency situation would be acceptable.



NHS Ayrshire & Arran Board believe that our staff are our greatest resource and are committed to improving staff experience in the knowledge that if this is good, it will have a positive impact patient experience. Safe, healthy, valued, respected and supported staff deliver higher quality of care to patients. Sustaining a culture of wellbeing, positive relationships and performance in such an environment is a key priority for the Board.

Informal visits and enquiries are encouraged and the existing team would value the opportunity to meet with prospective applicants to discuss the opportunities that the post offers. Visits can be arranged through:

Dr Aileen Helps, Lead Consultant in Renal Medicine, Tel: 01563 827358 or aileen.helps@aapct.scot.nhs.uk

Dr Victor Chong, Associate Medical Director, Medical Specialties,

Tel: 01292 614819 or victor.chong@aapct.scot.nhs.uk

Mrs Debbie Hardie, Site Director, University Hospital Crosshouse would also welcome the opportunity to discuss the post in more detail and can be contacted on 01292 27173



**Post of**: Locum Consultant Physician with an interest in Renal Medicine.

**Location**: NHS Ayrshire & Arran University Hospital Crosshouse

## Qualifications:

|  |  |
| --- | --- |
| Essential | Desirable |
| Full GMC Registration with a current Licence to Practice  MB ChB and MRCP or equivalent |  |
| **Existing Consultants**: Inclusion on the GMC Specialist Register  **New Consultants**: Be within 6 months of the anticipated award of a CCT or CESR at the time of interview. SCE Nephrology Exam.  **Accreditation** in General Medicine is essential **Accreditation** in Renal Medicine is essential |  |

**Skills/Knowledge/Competence**

|  |  |  |
| --- | --- | --- |
| **Requirements** | **Essential** | **Desirable** |
| General Experience:   * Expertise in generalist field * Expertise in sub-specialty field | As above. Inclusion on Specialist register for Inclusion on Specialist register for GIM and Renal Medicine |  |
| Teaching & Training | Skills in teaching and training | PG Certificate in Medical Education |
| Team Working | The applicant requires to work closely with a team to deliver multi-disciplinary patient care. |  |
| Development |  |  |
| Research/Publications | Not critical to the post. |  |
| Quality Improvement | A sound grounding in the principles and evidence of practical experience of clinical audit. |  |
| Management and Administration |  | An awareness of the functioning of the NHS and existing management structures. |
| Personal and Interpersonal Skills | Such skills are critical to the team working and cross-specialty working that the post involves. |  |

Living and working in Ayrshire



**Situated on the beautiful Clyde Coast, Ayrshire & Arran is great place to live and work.**

Ayrshire & Arran is a mecca for all golfers with over forty quality courses, including three Open Championship courses. It is also home to some of the most prestigious heritage and visitor attractions that Scotland has to offer.

Ancient castles, beautiful country parks and gardens, bustling market towns and award-winning visitor attractions are all to hand and set in awe-inspiring scenery. The spectacular granite mountains, ancient stone circles and the sheltered waters of the Firth of Clyde act as a magnet for walkers, cyclists, fishermen and sailing enthusiasts alike.

It is also the birthplace of world-renowned poet Robert Burns, and there are plentiful reminders of the man and his world to explore here.  
  
The Isle of Arran, reached by ferry from Ardrossan, is known as 'Scotland in miniature'. A fascinating and surprising island, it has an unrivalled range of landscapes, covering the whole spectrum of Scottish scenery in one delightfully compact package. It is big enough to offer a bewildering variety of activities yet small enough to retain its intimate island atmosphere.

Ayrshire has the benefit of allowing you to have the best of both worlds: it is an easy commute from Glasgow and the wider central belt with an excellent network of transport links throughout Scotland, and is also steeped in countryside, rolling hills and stunning beaches.

There are UK and international flights available from Glasgow Airport, as well as a range of services from Glasgow Prestwick Airport.

Should you wish to relocate to Ayrshire, you will find that property prices are much more affordable than in other parts of the UK and that there are some truly stunning houses and excellent communities to make a home and raise a family.

Local educational standards are very high at primary and secondary level and private education is available in the area.

The seaside towns of Ayr, Girvan, Irvine, Prestwick and Troon attract many visitors and have an abundance of restaurants, bars, cafes and leisure facilities. There are more than 80 fine hotels, several country parks, more than 40 castles, and close to 50 golf courses including two Open Championship courses at Turnberry and Royal Troon.

You will find a diverse cultural scene with theatres, halls, pubs, galleries and sports fields hosting orchestras, major gigs, classical recitals, kids shows, old-style variety shows, Highland Games and festivals such as Burns an’ a’ That, the Kilmarnock Edition, Marymass, Darvel Music Festival and Septembayr.

 

