



# **NHS HIGHLAND JOB PACK**

**Title: PICT Response Team Doctor**

**Location: Raigmore Hospital**

**Job Reference: MS14 193382**

**Closing Date: 28/08/2024**

## INFORMATION PACK

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## Section 1 – Welcome

## Introduction

Thank you for your interest in joining NHS Highland. This information package contains details relating to the local area, this post and the Terms and Conditions of Service.

NHS Highland is committed to becoming a learning organisation, recognising that staff require access to opportunities to learn, maintain and develop skills and knowledge, and we recognise the importance of valuing and supporting our staff throughout their time here.

We offer:

- Policies to help balance commitments at work and home and flexible family friendly working arrangements
- Excellent training and development opportunities.
- On-site library services at the Centre for Health Sciences
- Access to NHS staff benefits/staff discounts
- Cycle to Work Scheme
- Excellent student support
- Access to NHS Pension scheme

NHS Scotland is committed to encouraging equality and diversity among our workforce and eliminating unlawful discrimination. The aim is for our workforce to be truly representative and for each employee to feel respected and able to give their best. To this end, NHS Scotland welcomes applications from all sections of society.

## Recruitment Process

Applicants are expected to make contact with the department before applying and we would **strongly** encourage those that are shortlisted to ensure they have spoken to the informal contacts and other relevant senior colleagues. You can ask for a Teams meeting to be set up through the department contact.

## Department Contact:

Informal enquiries would be welcomed by Dr Luke Regan, Clinical Lead for PICT, Tel 01463 706525

## How to Apply

- Applicants should complete an Application Form on the NHS Scotland National Recruitment portal. <https://apply.jobs.scot.nhs.uk/>. Please note we do not accept CVs.
- All candidates and employees are afforded equal opportunities in the recruitment and selection process and in employment irrespective of their age, disability, gender reassignment, marriage or civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation.
- Your personal information will not be sent with the application for shortlisting. The application form will be identified by the candidate number only to ensure that no applicant will be unfairly discriminated against.
- NHS Scotland is exempt from the 1974 Rehabilitation of Offenders Act (Exclusions & Exceptions) (Scotland) Order 2003. As part of any offer of employment in regulated work candidates will be subject to Protection of Vulnerable Groups Scheme membership.

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For further information on NHS Highland, please visit our website on [www.nhshighland.scot.nhs.uk](http://www.nhshighland.scot.nhs.uk)

***PLEASE NOTE - You should apply for this post by completing the application process on Job Train. We suggest you use Internet Browser "Google Chrome" or "Microsoft Edge"***

***DO NOT upload a CV as this will not be used for short listing purposes.***

***Once you have submitted your application form you will be unable to make any amendments.***

***For help to complete an application on Job Train please click [here](#).***

Please contact [nhshighland.recruitment@nhs.scot](mailto:nhshighland.recruitment@nhs.scot) for any queries regarding submitting your application to the NHS Scotland National Recruitment website.

## Section 2 – Advert

**NHS HIGHLAND  
RAIGMORE HOSPITAL, INVERNESS  
PREHOSPITAL IMMEDIATE CARE AND TRAUMA (PICT) RESPONSE TEAM DOCTOR  
Part-time Post 1PA (paid per week) to provide a 12hr Shift and annual leave**

We need individuals who have a solid grounding in pre-hospital emergency care to join our extremely friendly and clinically dynamic team and help us deliver care to the ever growing population of the Highlands. Due to a member of the team reducing hours, NHS Highland is looking to recruit an individual on a part time substantive basis, providing the 'PICT Doctor' role within the joint Doctor/Advanced Practitioner PICT response team that operates from the Emergency Department at Raigmore Hospital in Inverness. The team has been providing emergency care to the Highlands for the past six years.

The Advanced Practitioner role within the team is itself undergoing continued training, progression and investment from both SAS and NHSH with a mixture of fully trained and trainee post-holders providing the roster for the other half of our team. Their training and clinical governance arrangements fall under an agreed MOU between SAS and NHSH.

Your core experience could be in one of a range of clinical roles – including both primary and secondary care. The case mix comprises the entire cross section of emergency work, notably targeting major trauma, cardiac arrest, paediatric and medical emergencies and multiple casualty incidents.

The challenges for a doctor providing 'ED Outreach' and all that entails in our often remote and rural population are academically and physically demanding. The senior decision-maker role of PICT doctor carries a very high level of clinical risk management for emergency patients at scene, in radio and phone triage of cases for attendance, and in direct professional to professional decision support for ambulance staff attending patients planning to convey to the Trauma Unit at Raigmore. Whilst the core role and majority of workload is in the primary prehospital attendance at such cases, the team are also regularly engaged in providing medical escort for transfer of unwell patients into hospital and providing clinical interventions to patients within the Trauma Unit ED itself that do not compromise their immediate availability for prehospital tasking. As such we seek doctors with the professional seniority, prehospital training and experience necessary to perform as the senior decision-maker in a team of advanced generalists and ideally to come with experience of working within such doctor/advanced practitioner response teams.

Those suitable for short-listing will have already spent time training and working at the level expected of pre-hospital doctors working for the Scottish Ambulance Service as per the existing BASICS Scotland / SAS Memorandum of Understanding 2019. Procedural competencies in a broad range of clinical interventions are set as essential criteria for application and as minimum standards prior to sign-off for working in the team. With prehospital emergency medicine in constant development, it is expected that treatments and procedures deployed by the team will continue to develop over time but with appropriate training and governance implemented before clinical deployment. There is a robust clinical governance framework in place with direct case review and interrogation in regular team meetings. As such we seek doctors as keen to learn as they are to teach.

It is envisaged that successful applicant will take on this role as a relatively small time commitment in contrast to that of their duties in their main employment. With 1PA per week translating to one 12 hour shift per month with prospective cover, the doctor will need to confirm with their service/practice manager that they can be released from other activity in their job plan or increase their number of PAs worked up to 12.

The successful implementation of this appointment requires time commitments from individuals within a large team to provide a resilient 365 day service. Remuneration for successful candidates from a hospital-based background is set to the pay scale and seniority point of their current professional pay scale eg Consultant, Specialty Doctor. Successful candidates holding a CCT in General Practice will be placed at an appropriate point dependent upon experience since obtaining their GP CCT on the Rural Practitioner / Emergency Practitioner pay scale.

PICT response team shifts run for 12 hours 11:00-23:00, seven days a week.

Informal enquiries would be welcomed by Dr Luke Regan, Clinical Lead for PICT, Tel 01463 706525

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## Section 3 – Job Information

This role is based in the Emergency Department of Raigmore Hospital – a designated ‘Trauma Unit’ and a training unit for undergraduates and postgraduates.

The team are tasked to patients by the Scottish Ambulance Service(SAS) in a SAS registered vehicle where they then undertake their primary role of the assessment, interventions and pathway advice for patients as a team, with final clinical responsibility during that shift for all decisions regarding patient care held by the Doctor.

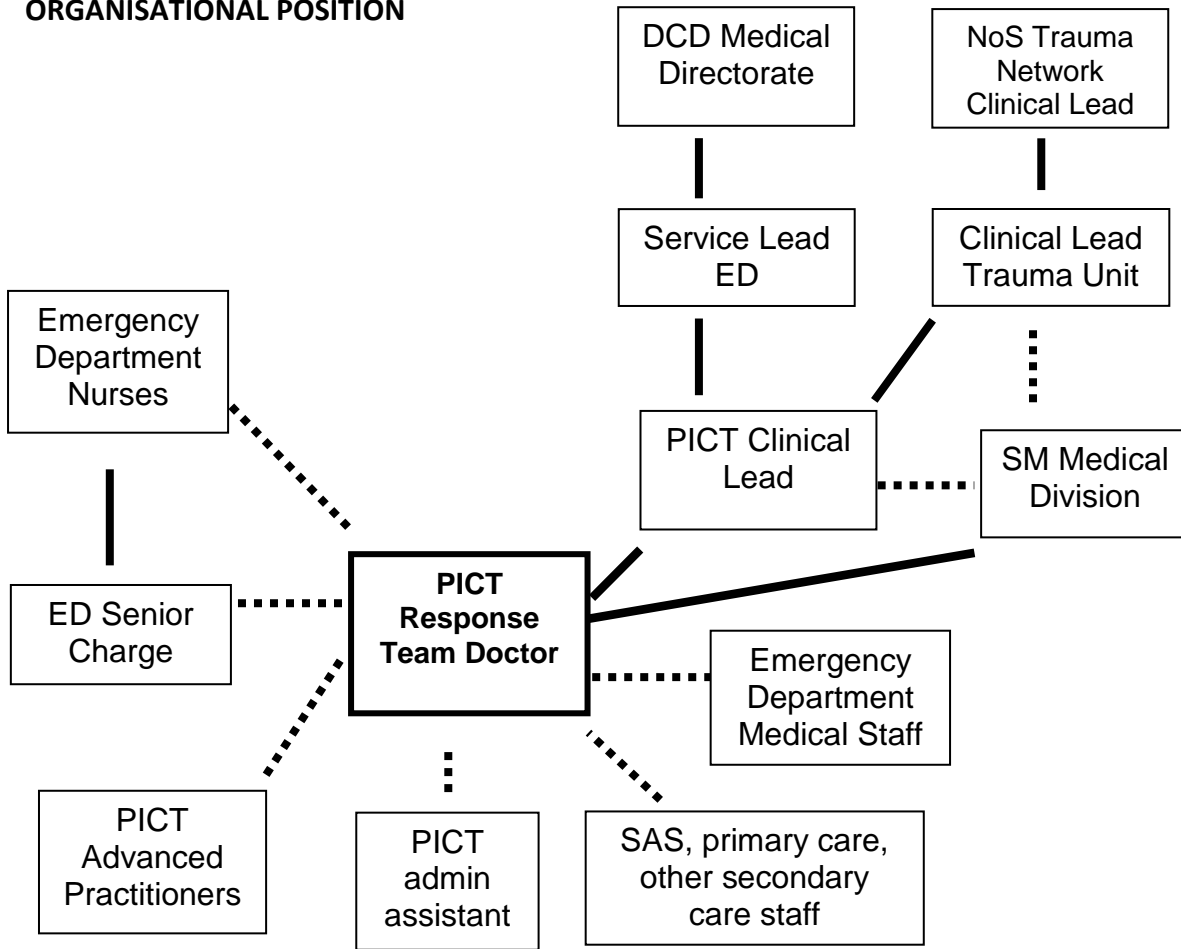
Both Doctor and Advanced Practitioner roles bring differing but complementary skills and experience to the overall benefit of the patient. The team interacts with local and distant SAS crews, critical care teams, ED teams, primary care, and in-patient teams within the hospital on a daily basis. They may be required to provide advice over the radio or phone to other clinicians at scene who would otherwise be inbound to Raigmore and may provide additional support to patient care within the ED on return to base.

Whilst travelling to the patients in a rapid response car that is itself not a conveying resource, the team are often required to provide medical escorts in other platforms to patients inbound to hospital or to rendezvous with crews already en route to hospital with unwell patients, ideally bringing additional care without additional delay. They also form part of the consideration for appropriate medical escort for inter-hospital transfers of patients travelling for emergency interventions, where paramedic only or critical care retrieval team transfer are deemed not appropriate or available by the referrer or SAS.

You will be working with your SAS and NHH colleagues to provide emergency care predominantly throughout the afternoon and evening period 7 days per week. The purpose is to provide the level of enhanced pre-hospital assessment, interventions and decision-making that is considered a standard of care throughout much of the rest of the UK.

The population being served is the ‘999’ population, or those patients seeking emergency assistance from SAS in the first instance. These may range from acute resuscitations of adults, children and infants, to major trauma and cardiac arrest, to patients with complex acute care needs where decisions to admit direct to the appropriate specialty or discharge from scene or focus on palliation can be every bit as important as deciding which medicine to give and when.

**ORGANISATIONAL POSITION**



**Accountability/Reporting** —————

**Working relationship** .....

**Professionally accountable:** NHS Highland Board Medical Director

**SCOPE AND RANGE**

This post is based in the Emergency Department at Raigmore Hospital, Inverness, attending to cases predominantly within a c.30 mile radius of Inverness, although clinical need, particularly of major trauma patients, and logistical appropriateness regularly see 10% of cases requiring response to incidents significantly beyond this area - to the north west coast, Morayshire and down the A9 and A82 corridors for example. You will be working as part of an existing multidisciplinary, multispecialty team of doctors, and advanced practitioners or advanced practitioners in training, as well as frontline A&E SAS crews. Close working with other agencies such as Scottish Fire and Rescue, Police Scotland, HM Coastguard and SAS Retrieval teams can frequently occur. Given the time-dependent nature of many of our patient’s conditions and the complexity of logistics in our region, the risk management and decision-making requires senior clinicians with recognised training and prior experience in pre-hospital care.

When on duty you will be involved in pre-hospital care to patients requesting emergency assistance via SAS. Tasking is via SAS control centres. Informed liaison directly with dispatchers, discussing the nature of the case, medical details of the patient available digitally to the team in Raigmore, its geographical location, other available resources and their journey times will then identify if the team is likely to bring enhanced care to the benefit of the patient, the SAS or the territorial health board.

When on shift but not actively engaged in prehospital tasking, the doctor is expected to take full and active part in the good governance daily activities of kit and medicines checks and stocking, case review and audit and drilling any procedural competencies. It is further expected that the doctor be available to the ED consultant in charge to provide appropriate interventions supporting the care of patients in the ED, where that does not compromise their immediate availability for prehospital tasking.

Further support is given to the PICT Doctor and Advanced Practitioners in the form of a decision support team member of the team who is themselves a senior and experienced pre hospital clinician who can assist and advise via dedicated telephone number, available for advice 24hrs a day.

The PICT doctor may be required to take on the role of the Site Medical Team to any major incident locally declared, following direction of the on scene Ambulance Commander and Medical Commander if on scene. They may also be required to act as Medical Commander, if first on scene to such a local major incident. Early and effective communications with Ambulance Control, the hospital and use of the Decision Support line is crucial in all such incidents.

The PICT Team has a responsibility to provide appropriate clinical governance. It is expected that two Pict Clinicians will also be selected for these roles. If you are an established NHS Consultant, we expect that a job plan negotiation and for you to use existing SPA time. If your contract does not include SPA time, NHS Highland will fund this role separately. Please note that there is a maximum of 8hrs per week linked to this role.

Any study leave must be authorised by the Service Manager and Clinical Lead at least six weeks in advance with the appropriate study leave application being completed. If you have a NHS Highland contract, we expect any study leave associated with PICT to be taken within your normal study allowance and be funded from the NHS Highland medical study leave budget. If you work as a GP, it is expected that your PICT study leave will be incorporated into your GP study time allowance.

## MAIN DUTIES/RESPONSIBILITIES

### On shift Role and Responsibilities

Provide enhanced decision making, skills & interventions as the doctor within the PICT team.  
Resuscitation and stabilisation of critically ill patients.  
Medical escort where appropriate to critically ill or injured patients in transit to a hospital  
Site Medical Team or Major Incident Officer role if first attending major incident.  
Support the care of emergency patients once arrived at ED or in the department as directed by clinician in charge  
Attend to mandatory daily team governance of kit and medicines checks, audit and patient follow up and skills based drills and training.

### Interpersonal Skills

Support and encourage those healthcare professional recently qualified to the area of pre hospital care and trainees attending PICT shifts as observers.  
Function in a holistic manner in dealing with patients.  
Support and supervise those in training whilst attached to the PICT service in their hospital based attachments  
Encourage an environment of team work with colleagues particularly trainee APs attached to the team

### Personal Professional Development

Develop a Personal Development Plan to include skill areas of clinical expertise  
Adopt a personal life-long learning culture  
Be fully involved in annual appraisal as dictated by NHS Highland and individual's appropriate governing body.

### Professional Issues

Work and practice at all times in accordance with the appropriate governing bodies code of professional conduct.  
Actively demonstrates a positive approach to sustaining and developing personal and professional knowledge required to undertake own role.

## KNOWLEDGE, SKILLS AND COMPETENCIES REQUIRED

Emergency medical skills and experience  
Resuscitation skills including pre hosp haemorrhage control.  
Basic and intermediate airway management skills and experience.  
Competence in emergency surgical airway.  
Excellent diagnostic ability with minimal investigatory  
Patient pathway/journey management skills and experience  
Awareness of own limitations and those of the service  
Planning and organisation  
Prioritisation and management of risk  
Influencing, listening and communication skills  
Diplomacy and trust building  
Training/Supervision and mentoring skills  
Literature updates  
Critical appraisal skills  
Awareness of national standards of care  
In-depth knowledge of professional code of conduct.  
Advocacy  
Creative thinking  
Negotiation skills  
Motivational skills  
Dealing with complexity and contentious information  
Effective communication skills  
Ability to work across organisational boundaries.

## **PHYSICAL DEMANDS OF THE JOB**

Ability to work in a sustained and focused manner

Ability to make immediate decisions

Ability to cope with stressful situations

Resilience

Ability to work in the challenging pre hospital environment which may require the individual to work for short periods in cramped low light conditions potentially exposed to the elements (an upturned car in a ditch on a winter's night for example- generic PPE is provided)

The ability to carry PICT equipment including kit bags often over difficult terrain and weather conditions.

## **MOST CHALLENGING/DIFFICULT PARTS OF THE JOB**

The PICT Doctor will have a high degree of autonomy in providing patient care within locally agreed and nationally guided standards and within the scope of both their base specialty and accredited pre-hospital training. The key challenges will be:

Providing a very wide range of medical expertise in an emergency pre hospital environment

Updating clinical skills and continuing professional development

Gaining respect and developing and maintaining effective working relationships with a range of colleagues, paramedics, technicians, advanced practitioners and other allied health professionals locally and nationally.

Balancing your education and training demands with service demands, satisfying both within the resources available to you.

## **DECISIONS AND JUDGEMENTS**

Working autonomously within the framework of a two person team with access to 24/7 clinical decision support line

Ability to recognize scope of personal abilities and clinical judgement

Ensure safety of practice at all times by liaison with other professionals and by adherence to national guidance and standards

## **COMMUNICATIONS AND RELATIONSHIPS**

Responsible for partnership working, involving all staff at the earliest opportunity to influence change if required and provide most efficient, effective and safe service

Collaborate with a range of colleagues both locally, within SAS frontline and control room staff and in higher specialist units in provision of patient care and in personal professional development

## **SYSTEMS AND EQUIPMENT**

PC and Microsoft office – Operational work.

Email system – Day to day communications

Intranet / Internet – Source of reference material and NHS Highland protocols

Laboratory Computer interface for results of patient tests

App based PRF reporting

Monitoring equipment used by both PICT and SAS

Resuscitation equipment

Near patient testing equipment

## **KNOWLEDGE, SKILLS AND COMPETENCIES REQUIRED**

Leadership and relationship building

Effective communication skills

Effective interpersonal skills

Good negotiation skills

Clinical Management skills

Influencing skills

Teaching/supervision and mentoring desirable

## Section 5 – Person Specification

**Essential Criteria** - these are attributes without which a candidate would not be able to undertake the full remit of the role. Applicants who do not clearly demonstrate in their application that they possess the essential requirements will normally be eliminated at the short listing stage.

**Desirable Criteria** - these are attributes which would be useful for the candidate to hold. When short listing, these criteria will be considered when more than one applicant meets the essential criteria.

Requirement	Essential	Desirable
Qualifications	<ul style="list-style-type: none"> <li>• MBBS or MBChB</li> <li>• Current PHECC</li> <li>• DipIMC or DipRTM RCoSEd or commitment to attain such within 2 years of commencing in post</li> </ul>	<ul style="list-style-type: none"> <li>• Current instructor status in PHECC or recognised life support course</li> <li>• Current PHPLS / EPLS / APLS or other</li> <li>• Current ALS/ATLS/ETC</li> <li>• Current MIMMS/HMIMMS</li> <li>• Fellowship of an appropriate medical college eg RCEM, RCA, RCGP, RCP, RCPE</li> </ul>
GMC/ Specialist Registration	<ul style="list-style-type: none"> <li>• Registration with the GMC with a licence to practice</li> <li>• Certificate holder on the specialist register for Emergency Medicine, Anaesthesia, Intensive Care Medicine, Acute Medicine or General Practice<sup>1</sup></li> </ul>	<ul style="list-style-type: none"> <li>• Subspecialty certificate holder in Prehospital Emergency Medicine</li> </ul>

Clinical Experience	<ul style="list-style-type: none"> <li>• Minimum of 2 years clinical experience as a senior decision-maker post award of Certificate of Completion of Training</li> <li>• Minimum of 2 years experience in regularly providing pre-hospital care in either a full time or part-time role</li> <li>• Experience being the first practitioner delivering care in a resus situation</li> <li>• Competence with basic/intermediate airway management</li> <li>• Competence and experience with surgical skills such as suturing</li> <li>• Clinical experience and knowledge of emergency presentations</li> <li>• Trained in pre-hospital surgical procedures such as finger thoracostomy, surgical airways, field amputation</li> </ul>	<ul style="list-style-type: none"> <li>• Experience working in a Physician/AP configured pre-hospital response team</li> <li>• Advanced Airway management skills</li> <li>• Competence in procedural sedation</li> <li>• Competence in providing regional anaesthetic blocks</li> <li>• Competence in reduction of fractures / dislocations</li> <li>• Experience leading a Resus Team either within or without the hospital environment</li> </ul>
Team Working & Interpersonal Skills	<ul style="list-style-type: none"> <li>• Effective communication skills</li> <li>• Motivational skills</li> <li>• Negotiation skills</li> <li>• Diplomacy and trust building</li> <li>• Planning / Prioritisation</li> <li>• Management of Risk</li> </ul>	<ul style="list-style-type: none"> <li>• Mentoring / training skills</li> <li>• In depth knowledge of Professional Code of Conduct</li> <li>• Advocacy</li> <li>• Creative thinking</li> </ul>

## Section 6 – Terms and Conditions

This appointment is offered on the terms and conditions of service of the Consultant Contract in accordance with the Hospital Medical & Dental Staff (Scotland) and current General Whitley Council. Further information can be found here: <http://www.msg.scot.nhs.uk/pay/medical>

<b>Job Title</b>	PICT Response Team Doctor
<b>Type of Contract</b>	Part time, 1PA per week Substantive
<b>Location</b>	Raigmore Hospital, Inverness
<b>Salary</b>	Remuneration for successful candidates from a hospital-based background is set to the pay scale and seniority point of their current professional pay scale
<b>Arrangement of Duties</b>	<p>The regular commitments of all PICT Doctors are annualised. For a given weekly nominal number of hours, the clinician will then be expected to provide an annual number of shifts to the rota. This allows flexibility (within reason) as clinicians are not duty bound to provide an exact number of shifts per month as long as they fulfil as close to their annual commitment as possible and the service itself retains seven day cover. This flexibility must be exercised sensibly i.e. it would not be appropriate for a clinician to block book all school holidays off. Every effort will be made to distribute shifts equitably and in consultation with the clinician's majority clinical commitments in other service.</p> <p>The rota will be compiled in 4 monthly blocks and clinicians can provide up to 12 months of availability in advance. The availability matrix will be available for all to edit their individual preferences via cloud accessible calendar.</p> <p>All clinicians should annotate availability for at least twice their average monthly number of shifts (eg. if your commitment averages to 2 shifts per month, then please give at least 4 dates of availability). If you wish to annotate further availability beyond that, you are encouraged to. If you provide limited availability in one month, for example due to leave, then you must provide additional availability in subsequent months to ensure that all of your shifts can be rostered.</p> <p>Non availability (prior clinical commitments, holidays etc) should be annotated fully.</p> <p>Clinicians will complete their availability 2 full months prior to the rota commencing. No changes should be made to the availability sheet after this time and the rota will then be released 2 weeks after this, thus giving all clinicians 6 weeks notice of shifts prior to the commencement of the new rota.</p> <p>The team administrator will ensure co-ordination of all rotas, including the Decision Support Team rota.</p> <p>Pro rata allocations for annual leave and public holidays are accounted for in the overall sessional load of the combined team.</p> <p>Some month to month variation in contributions will be inevitable but ongoing totals will be monitored, rostering in four month blocks should allow sufficient flexibility for all clinicians to fulfil their annual</p>

	commitments.
<b>Medical Negligence</b>	NHS Highland takes responsibility for expenses and damages arising from medical negligence where they, as the employer, are vicariously liable for the acts and omissions of their medical and dental staff. However, the appointee is strongly advised to maintain separate medical defence or insurance cover for all work which does not fall within the scope of the Board's indemnity scheme, details of which are given in NHS Circular 1989(PCS) 32.
<b>Registration with GMC</b>	Prior to commencement in post, successful candidates must have full registration with the GMC and a licence to practise.
<b>Disclosure of Criminal Convictions</b>	<p>Appointment to this post will be made subject to satisfactory screening by Disclosure Scotland. This post is considered to require registration with the Protecting Vulnerable Groups (PVG) Scheme as it involves substantial access to children and / or vulnerable adults. A PVG Scheme Record will contain details of all convictions on record, whether spent or unspent. This means that even minor convictions, no matter when they occurred will be included in the Scheme Record. It may also contain non conviction information held locally by the police, where this is considered relevant to the post.</p> <p>Following the selection interview only the "successful" candidate will be subject to registration with the PVG Scheme. Offers of appointment will be made subject to satisfactory PVG Scheme screening and medical fitness. Please note that a commencement date will only be issued once this clearance has been received.</p>
<b>Rehabilitation of Offenders Act 1974</b>	The Rehabilitation of Offenders Act 1974 provides for many people who have been convicted of certain criminal offences the opportunity to have no need to refer to these convictions or the circumstances relating to them in the course of their daily lives. Certain convictions can, therefore, be regarded as "spent" after the lapse of a period of years under the terms of the Act. The National Health Service employment for which you are applying is <b>excluded</b> in the provisions of the Act unless otherwise stated in the job description. If the post is excluded you are required not to withhold information about convictions which for other purposes are "spent" under the provisions of the Act. In the event of employment, any

	<p>failure to disclose such convictions could result in dismissal or disciplinary action by your employer. Any information given, however, will be completely confidential and will be considered only in relation to the post for which this application form refers.</p>
<b>Medical Fitness</b>	<p>All prospective members of staff are asked to submit a confidential health questionnaire to the Occupational Health Service. On the basis of this, they may be passed fit, or an appointment for further information or screening may be required. All entrants must be certified medically fit and employment is conditional on such certification. All appointees are expected to comply with NHS Highland's Immunisation Policy.</p> <p>Those posts classified as Exposure Prone Procedures appointments are dependent on satisfactory proof of immunity or freedom from Hep B infection prior to appointment.</p>
<b>Right to Work</b>	<p>NHS Highland has a legal obligation to ensure that it's employees, both EEA and non EEA nationals are legally entitled to work in the United Kingdom. Before any person can commence employment within NHS Highland they will need to provide documentation to prove that they are eligible to work in the UK. Non EEA nationals will be required to show evidence that either Entry Clearance or Leave to Remain in the UK has been granted for the work which they are applying to do. Where an individual is subject to immigration control under no circumstances will they be allowed to commence until the right to work in the UK has been verified. You will be required provide appropriate documentation prior to any appointment being made.</p>
<b>Annual Leave &amp; Public Holidays</b>	<p>The leave year shall run from date of taking up appointment and in a full year the postholder will be entitled to 33 days annual leave plus 8 statutory and public holidays as agreed by NHS Highland.</p>
<b>Superannuation</b>	<p>New entrants to NHS Highland who are aged sixteen but under seventy five will be enrolled automatically into membership of the NHS Pension Scheme.</p>
<b>Notice</b>	<p>The postholder will be required to give and is entitled to receive a minimum of one months notice of termination of employment.</p>
<b>Removal Expenses</b>	<p>Assistance with Removal expenses will be given in accordance with the NHS Highland Relocation Policy. It is compulsory that you discuss any arrangements relating to your relocation with us before arranging</p>

	anything. Failure to do so may result in limited or no assistance being given.
<b>Private Residence</b>	Your private residence shall be maintained in contact with the public telephone service and shall be not more than 10 miles or 30 minutes by road from your hospital base, unless the Board gives specific approval to you residing at a greater distance.
<b>Identity Badge Policy</b>	NHS Highland has a policy that all staff will be issued with and required to wear an Identity Badge at all times when on duty. If your badge needs replacing for any reason you are required to contact the Fire/Security Office, Estates Department to arrange for a replacement. All identity badges are the property of NHS Highland and must be returned when you terminate your employment.
<b>Smoke Free Policy</b>	NHS Highland operates a No Smoking Policy of tobacco products or e-cigarettes in any of our properties, vehicles or grounds. When selecting new staff NHS Highland does not discriminate against applicants who smoke but applicants who accept an offer of employment will in doing so agree to observe and familiarise themselves with NHS Highland's Smokefree policy.
<b>Confidentiality</b>	<p>In the course of your duties you may have access to confidential material about patients, members of staff or other health service business. On no account must information relating to patients be divulged to anyone other than authorised persons - for example medical, nursing or other professional staff, as appropriate who are concerned directly with the care, diagnosis and/or treatment of the patient.</p> <p>If you are in any doubt whatsoever as to the authority of a person or body asking for information of this nature you must seek advice from your superior officer. Similarly no information of a personal or confidential nature concerning individual members of staff should be divulged to anyone without the proper authority having first been given. Failure to observe this rule will be regarded by your employers as serious misconduct, which could result in serious disciplinary action being taken against you including dismissal. The unauthorised disclosure of official business under consideration by the Board Management Team or one of its Committees by an employee is also regarded as a breach of confidence and may lead to disciplinary action.</p>

**Scottish Workforce  
Information Standard  
System (SWISS)**

The information that staff provide will be used for employment purposes and where necessary to comply with legal obligations. The purpose of holding this information is for administration i.e. employment and pay amendments, superannuation, workforce management/planning and other personnel matters in relation to employment. Any requests for information outwith the above will only be processed with individual consent (e.g. building society mortgage applications etc.)

Staff information will be held securely, and will be accessed at a local, regional and national level to meet the requirements outlined above. Managers may also hold information within your department. There will be no unauthorised access.