#### **National Waiting Times Centre NHS Board**

#### **Job Description**

#### 1. Job Identification

Job Title: Consultant Thoracic Surgeon (Locum position)

Responsible to: Operational and Strategic Lead for Thoracic Surgery

Accountable to: Associate Medical Director

**Department:** Cardiothoracic Surgery

#### 2. Introduction

A Thoracic Consultant Surgeon is required to join a team of surgeons providing the full range of Thoracic Surgical services in the Golden Jubilee National Hospital in Clydebank near Glasgow.

The Golden Jubilee Foundation is an NHS Scotland National Health Board comprising of the Golden Jubilee National Hospital (GJNH), the Golden Jubilee Research Institute, the Golden Jubilee Innovation Centre and the Golden Jubilee Conference Hotel.

The GJNH has 300 beds, all wards having single or two bedded rooms with en-suite facilities. The estate has a high specification with a four star hotel and conference centre as an integral unit alongside the hospital. This has provided a very pleasing and attractive working environment for staff and a desirable patient experience. The main clinical services provided are heart and lung, elective major orthopaedics, general surgery, plastic surgery, diagnostic imaging and endoscopy services.

Our recent investment in a robotic surgery programme at GJNH is aligned with the Board's focus on continuous learning and promotion of strong links with academia and industry. The GJNH foundation is on both the UK and European map for innovative practice and further developing strategic partnerships with industry.

#### Location

The GJNH is a state of the art tertiary referral centre on the banks of the River Clyde adjacent to the Erskine Bridge, in close proximity to Glasgow International Airport and within 30 minutes of the centre of Glasgow by road and rail links. A direct overnight sleeper rail service to Euston, London is available at the local station 5 minutes from the hospital. It is effectively situated west of Glasgow City and is minutes away from the countryside of the West of Scotland and Loch Lomond.

Glasgow and the immediate surroundings have a population of around 580,000. It is the largest city in and the commercial capital of Scotland. The city has a vibrant cultural life, with municipal art galleries and museums, first class sports and leisure facilities, a wide range of theatres and restaurants, excellent shopping and is only 45 miles from Edinburgh.

## Catchment Population

The Territorial Health Boards for the West of Scotland are Greater Glasgow and Clyde, Lanarkshire, Forth Valley, Ayrshire and Arran, Dumfries and Galloway, all of which except Dumfries and Galloway are part of the West of Scotland Cancer network which oversees lung cancer services for the region. The thoracic surgical service provides clinical support to all the major acute admitting hospitals in the region.

## The West of Scotland Heart and Lung Centre

The Centre was created in March 2008 bringing interventional cardiology and specialist surgical heart and lung services previously provided by three different units in the West of Scotland onto the one site under one management team. The interventional cardiology service which includes primary PCI is among the busiest in the UK. The Centre provides one of the primary PCI services in the UK and also the regional electrophysiology service for the West of Scotland. In addition, it is the national centre for the Scottish Adult Congenital Cardiac Service (SACCS), the Scottish National Advanced Heart Failure Service (SNAHFS) and the Scottish Pulmonary Vascular Unit (SPVU). With this comprehensive range of specialist cardiopulmonary services for a catchment population of 2.2 million, the GJNH is one of the largest heart and lung centres in Europe. It is the largest Thoracic Surgical Unit in the UK.

#### **Management Structure**

The NHS National Waiting Times Centre Board is one of eight National Health Boards of Scotland. It reports directly to the Scottish Government. The key Board members are as follows:

Chair
 Chief Executive
 Medical Director
 Director of Finance
 Director of Operations
 Ms Susan Douglas - Scott
 Mrs Jann Gardner
 Dr Mark MacGregor
 Mr Colin Neil
 Mrs June Rogers

Director of Operations Mrs June Rogers
Director of Quality, Innovation and People Mr Gareth Adkins

Director of Nursing Mrs Anne Marie Cavanagh
Director of Global Development & Strategic Partnership Ms Angela Harkness

## The Heart, Lung, Diagnostics Division includes

- Anaesthetics
- Cardiothoracic
- Critical care
- Interventional Cardiology
- SNAHFS
- SACCS
- Perfusion

## Heart, Lung, Diagnostics Division Management Team:

Associate Medical Director (AMD)

• Director, Heart, Lung, Diagnostics

o Deputy Director

Associate Director of Nursing

• Theatre Manager

Prof Hany Eteiba Mrs Lynne Ayton Mrs Alex McGuire Mrs Theresa Williamson Mrs Karen Boylan The Associate Medical Director takes lead responsibility for professional governance of doctors and shares quality management and governance with the Senior Nurse/ Clinical Services Manager. The Heads of Operations are responsible for operational and financial management.

## **The Cardiothoracic Surgery Department**

The medical management structure:

Operational/ Strategic Lead (Cardiac)
 Governance Lead
 Educational Lead
 Mr Phil Curry
 Mr Stewart Craig
 Mr Mohammed Asif

Operational/ Strategic Lead (thoracic)
 Mr Alan Kirk

#### **The Anaesthetic Department**

The medical management structure:

• Operational/ Strategic Lead for Cardiothoracic & Critical Care Dr Jacqueline Church

Operational/ Strategic Lead for non Cardiothoracic
 Dr John Luck

Governance Lead for Cardiothoracic & Critical Care
 Dr Mark Stevens

Governance Lead for non Cardiothoracic
 Dr Gabriele Lindoff

In this medical management structure there is Operational/Strategic Lead and Governance Lead for Cardiothoracic Surgery. These posts are accountable to the respective members of the Senior Management team. There is also an Educational Lead who is responsible to the Director of Medical Education.

#### 3. The Cardiothoracic Surgery Department

There are currently 18 permanent Consultant Cardiac and Thoracic surgeons. All work exclusively at GJNH apart from three who practise paediatric cardiac surgery at Royal Hospital for Sick Children (Yorkhill Hospital).

The following are members of the department in sub-specialty groups:

Thoracic Surgery	Cardiac Surgery	Cardiac Transplant	Adult Congenital Cardiac	Organ Retrieval
Alan Kirk	John Butler	Nawwar Al-Attar	Andrew McLean	Philip Curry
Mohammed Asif	Vivek Pathi	Philip Curry	Mark Danton	Hari Doshi
Michael Klimatsidas	Fraser Sutherland	Hari Doshi	Ed Peng	Suku Nair
John Butler	Kasra Shaikhrezai	Suku Nair (locum)		
Rocco Bilancia	Zahid Mahmood			
Matthew Thomas				

#### **Thoracic Surgery**

Since March 2008 Thoracic Surgery in the West of Scotland has been provided solely at the West of Scotland Heart & Lung Centre at the Golden Jubilee National Hospital. Four full-time Thoracic Surgeons (to include the current post) and one mixed practice Cardiothoracic surgeon undertake the full range of thoracic surgical procedures.

GJNH is a UK leader in Video Assisted Thoracic Surgery (VATS) which is the predominant surgical approach used within the Board in the treatment of lung cancer. Recent investment in Robotics (da Vinci X) supports the development of this programme.

There is one thoracic ward which manages the majority of patients. In addition, there is a new surgical day unit for same day admission and day surgical procedures. Two thoracic operating rooms are available, both of them equipped to a high standard with fluoroscopy, laser and video thoracoscopy. Although the High Dependency Units are mixed cardiothoracic, one HDU receives the majority of the thoracic patients. All surgeons deal with referrals in a flexible manner, but lung cancer referrals tend to based on the geographical patterns defined by the MDTs (see below). Cardiothoracic trauma is not uncommon in the West of Scotland. Our cardiothoracic surgeons provide emergency cover for the management of chest trauma.

## **Lung Cancer MDTs**

There are currently 9 MDTs in the West of Scotland that are involved in Lung cancer care many of which are represented by clinicians at specific weekly MDTs.

#### **WOSCAN**

Forth Valley MDT based at Larbert

Clyde (Paisley, Inverclyde & Vale of Leven) MDT based at Royal Alexandra, Paisley (VC connection now in place)

South Glasgow (Victoria & Southern General) MDT based at New Victoria Infirmary North East Glasgow (Stobhill & Glasgow Royal Infirmary (GRI) MDT based at GRI Ayrshire (Ayr & Crosshouse) MDT based at Crosshouse (VC connection now in place) Lanarkshire (Wishaw, Monklands, Hairmyres) VC connection now in place Gartnavel Hospital (Glasgow)

#### Other

Dumfries (V/C connection)
Inverness (V/C connection)

WOSCAN (West of Scotland Cancer Network) is the cancer network for which GJNH provides specialist services. It includes the following health boards; Ayrshire & Arran, Lanarkshire, Forth Valley and Greater Glasgow & Clyde.

#### **Facilities of the Heart and Lung Centre**

- 6 cardiothoracic operating theatres
- 2 Intensive Care Units (ICU)
- 2 Cardiothoracic High Dependency Units (HDU)
- 2 Cardiothoracic wards
- 4 cardiac catheterisation laboratories (one dedicated EP)

- 8 bedded national services unit which includes a dedicated procedure room for haemodynamic assessments and myocardial biopsy
- Coronary Care Unit (8 beds)
- Cardiology day and inpatient wards
- All standard non invasive cardiological services
- Non invasive cardiac imaging including
- Multi-channel spiral CT scanner
- Siemens AVANTO 1.5T Cardiac MRI scanner
- Full range of echocardiographic facilities
- Full range of pulmonary function testing
- Outpatient facilities
- Excellent well appointed dedicated area for advanced heart failure and devices
- Links with Glasgow, Strathclyde, Caledonian and Stirling Universities

## Leadership

A number of key roles within the department require leadership provided by consultants. This post will specifically need experienced leadership skills or demonstration of potential ability. In view of the framework of the Surgical Division there will be potential to take a significant leadership role for the National Waiting Times Centre Health Board attached to this post for candidates with management experience.

## Research, Development and Innovation

Research is a very important component of the activity at the GJNH and is supported a R&D Steering Group and dedicated R&D Manager. There are currently 85 projects hosted by GJNH. These projects are either actively recruiting or in follow-up.

Contract (commercial) research is encouraged and staff use income generated from this source to maintain research support staff such as Clinical Research Fellows and Research Nurses. Academic research is also encouraged and the new appointment will be strongly encouraged to take an active role in this activity. Collaboration with Glasgow Universities and NHS GG&C has been agreed as part of the Board's strategy. The appointee will also be expected to work with other national and UK collaborative projects that are relevant to position. A number of consultants undertake significant research work.

The Board is committed to the development of innovative clinical programmes; recent developments include VAD and ECMO clinical support services. The Director for Research and Development is Professor Colin Berry.

The thoracic surgery department is committed to clinical research and has had presentations at most of the appropriate national and international meetings over the past three years. Within the GJRI, thoracic surgery has currently seven funded clinical trials as follows:

Lung Imaging study
Mesobank
CELEB
TRACERx
MARS 2
Mesotrap
UK Lung Reduction study

We were the biggest recruiting centre in Europe for the TRANSFORM research study investigating the efficacy of minimally invasive, implantable lung valves as a treatment for emphysema which is now concluded.

As a result of our participation in the study we were the first in Scotland to fit an emphysema patient with one of these groundbreaking implantable lung valves which have led to life changing improvements in quality of life for some patients.

#### The Golden Jubilee Research Institute

This dedicated Clinical Research Facility is designed to provide a 'fit for purpose' space for patients recruited to clinical trials. There are four consulting rooms; one is set up for echocardiography and one as an exercise tolerance suite. The remaining two rooms are general consulting rooms. The rest of the centre is made up of preparation rooms, simulator training wet lab work stations and a patient waiting area. The Centre is adjacent to the main auditorium of the conference centre providing excellent opportunities to develop teaching techniques and learning. Improved audiovisual links to theatre and the cardiac cath lab are installed as part of this development.

The Golden Jubilee Conference Hotel and the integral conference centre attached to the Golden Jubilee Hospital is a unique arrangement in the UK and will enable important national and 'focus' international meetings for the Heart and Lung specialties to share learning in the UK and beyond.

The management team of the Centre are Dr Catherine Sinclair and Mrs Roisin Houston.

#### **Governance and Risk management**

The Board has a comprehensive programme that covers both clinical and research governance domains and all medical staff are expected to uphold clinical and non-clinical policies and be exemplar role models for all other medical and non-medical staff. The importance of infection control, hand hygiene and dress code must be adhered to at all times.

Patient safety underpins clinical practice and initiatives following the guidance of the SPSP and subsequent programmes apply to all staff.

Medical staff are required to undergo annual appraisal meeting the requirements for revalidation that will be directed by the GMC. The Medical Director is the Responsible Officer for the Board and he/she will ensure that an appropriate appraisal process and a nominated appraiser are in place.

The appointee will be accountable to the Medical Director for matters related to the GMC's guidance on Good Medical Practice and the Duties of the Doctor. Any concerns raised relating to GMC guidance are referred to the Medical Director.

#### Junior medical staff and education

The department is committed to developing new ways of working with the appointments of specialist nurses with extended roles in the various clinical areas. The Board is committed to developing a strong educational ethos within the department and the new appointee will be expected to provide education and support to these staff members and develop the key educational skills to be an effective clinical and potential to become an educational supervisor. Supporting relevant programmes will be a requirement for the new appointment. There are close links with the West of Scotland Deanery and the Faculty of Medicine at Glasgow University. There is an excellent MDT/ educational room for the department which

is close proximity to the junior doctors' common room, study rooms with computer workstations and lockers. There is a library adjacent to the department.

Postgraduate education is overseen by the Director of Medical Education on behalf of the Medical Director for the Board and Postgraduate Dean. The Director of Medical Education is Mr Alan Kirk.

## **On-Call and Additional Duty Payment**

#### **Indicative Job Plan**

This Indicative Job Plan is based on a 10 PA contract, EPAs (Extra Programme Activities, DCC or SPA) may be agreed following objective setting to undertake other duties (e.g. Education supervisor, management, specific projects for service improvement and patient safety and operating list etc).

Clinic	1 PA
Theatre	5 PAS
MDT	1.
Ongoing Care	1
On call (weekend ward round)	1.5
Admin	0.5
Total	10

#### **On-Call and Extra PAs (EPAs)**

The on call rota is recognised for 8% availability supplement. The Thoracic Surgeon rota is nominally 1:4 with prospective cover and currently a member of the trauma rota is expected, shared with the Cardiac surgeons. PAs that are recognised for additional predictable and unpredictable out of hours work are required to be part of the basic job plan and EPAs are allocated to other activities.

If any reduction or increase of total PAs occurs as a result of job planning review, these would be agreed with the senior management team of Surgical Division on behalf of the Medical Director.

Prospective cover of colleague for annual and study leave is a requirement of the post.

#### Workload Flexibility

Job plans are reviewed on an annual basis by the Associate Medical Director and Operations manager. Changes will be discussed and agreed with the post holder in line with service needs and objectives set for the consultant.

The successful candidate will have secretarial support, office accommodation and access to a personal computer.

The appointee will be expected to work flexibly on the basis of the needs of the Thoracic service.

Flexibility of the job plan is required to ensure the provision of more clinical effective and efficient care as instructed by the Lead Consultant on behalf of the NWTC.

The tabled job plan is an indicative programme that will be revised 3 months after commencement by Directorate Management Team. All attributes are based on flexible cover of the rota when required.

#### 4. Terms & Conditions of Service

- National terms and conditions of service (Consultants (Scotland) 2004) cover the post.
- The post is subject to pre employment checks such as Disclosure Scotland, Occupational Health, Visa clearance (where applicable) and satisfactory references.
- You are required to be registered with the General Medical Council/General Dental Council through out the duration of your employment and to comply with and abide by the relevant code of professional practice, as appropriate.
- Salary scale: National Salary Scales per annum
- The appointee will be expected to work with local managers and professional colleagues in the efficient running of services and will share with consultant colleagues the medical contribution to management. The appointee will be expected to follow the local and national employment and personnel policies and procedures.
- All medical and dental staff employed by the Centre are expected to comply with the agreed health and safety policies.
- The successful candidate(s) will normally be required to live within 30 minutes drive of GJNH.
- Where, however the successful candidate already resides within 45 minutes drive of GJNH, he/she will not be required to remove his/her home nearer to the Centre.
- Where the successful candidate's present residence is more than 45 minutes drive from GJNH, he/she will be required to move his/her home to meet the residential clauses of his/her contract, unless he/she has the written consent of the Board to the contrary.
- The Terms and Conditions of Service state that the "removal expenses shall be reimbursed and grants paid only when the employing authority is satisfied that the removal of the practitioners home is required and the arrangements proposed are reasonable". Therefore, successful candidates are advised not to enter into contractual arrangements for the removal of their home until such a time as the formal approval of the Centre is confirmed in writing.
- Annual appraisal and job planning is a requirement for all permanent medical staff.

#### 5. JOB DESCRIPTION AGREEMENT

A separate job description will need to be signed off by each jobholder to whom the job description applies.

Date:

# Final Version

Head of Department Signature:	
Date:	

# **Recruitment Person Specification**

	Essential	Desirable	How or where to be judged
Qualifications/ Training	1.Full GMC Registration FRCS or equivalent Included on Specialist Register (or eligible for admission to the register within 6 months of the interview date)	1.Higher Resear Degree	ch Application Interview
Experience Thoracic Surgery Fellowship	2. Extensive training in Thoracic surgery.  Extensive experience in VATS Lobectomy  Special Interest in  Lung Volume Reduction surgery Mesothelioma surgery  Initial experience in Robotic Thoracic surgery		Application Interview
Skills/Knowledge	3. Knowledge of and skill relevant to the management of patients Ability to communicate effectively with all levels of staff and patients Ability to work efficiently and timeously Effective MDT working Excellent team working skills	2.Generic skills f clinicians course	1 1
Understanding of NWTC Board strategic vision.	Recent experience of working within the NHS	3.Understanding the NWTC Board objectives/strate	d
Teaching & Education  (Not applicable to Locum post)	5. To provide clinical supervision of postgraduate training doctors  Teaching undergraduates and other health professionals  Training the trainer course or equivalent	4.Educational supervisor of postgraduate doctors	Application Interview

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Clinical Audit & Risk Management	6. Experience and ongoing participation in clinical audit and evidence based practice.  Key principles of Clinical Governance, Data Protection and Patient Safety.	5.Understanding of risk management and Scottish Patient Safety initiatives (SPSP)	Application Interview
Research and innovation	7. Experience in research/ willingness to be innovative.  Peer reviewed publications in high impact/Key speciality journals  Lead on substantive research projects	6.Record of successful funding applications	Application Interview
Understanding of GMC Requirements	8. Knowledge of 'duties of doctor' and good medical practice.  Knowledge of appraisal /revalidation process	7.Understanding of the GMC and its new roles.	Interview
Leadership	9. Understanding of the principles of distributed leadership Willingness to engage constructively  Leadership Training	8.Experience in formal leadership role	Application Interview