Job Description

Consultant Physician
in
Respiratory and General Medicine

February 2015
DUMFRIES AND GALLOWAY ROYAL INFIRMARY
CONSULTANT PHYSICIAN IN RESPIRATORY/GENERAL MEDICINE

THE POST

The opportunity has arisen to join the dynamic and progressive multi-disciplinary respiratory team in NHS Dumfries and Galloway - the successful applicant will share responsibility for the care of patients in the Respiratory Unit at Dumfries and Galloway Royal Infirmary with Dr Little (Respiratory Consultant), supported by an Associate Specialist, a Staff grade doctor, a Nurse Consultant, an acute respiratory nurse specialist, one middle grader and one Foundation year 1 trainee. He / she will also be expected to provide a role in the development of specialist services according to his / her particular interests and the needs of the service. The successful applicant will also participate in the rota for the Medical Admissions Unit.

Re-design of services at Dumfries and Galloway Royal Infirmary is currently underway, with NHS Dumfries and Galloway given the approval to start planning for a ‘new build’ hospital. In addition to the clinical commitment, the successful candidate will have opportunity to contribute to planning of the new hospital and, in particular, the appropriate facilities for Respiratory Medicine.

The appointment will be on a whole-time basis under the terms of the new consultant contract. The job plan, which will be subject to review, will be offered on a 10 PA contract, including at least one allocated to supporting professional activities (SPAs). Additional EPAs may be incorporated into the job plan, depending on the time required to support the successful candidate’s professional activities and the needs of the service including participation in the General Medicine on-call rota (refer to the “General Provisions” section in the Job Description – page 7). Additional SPAs will be required if educational supervision, teaching, service development etc are to be part of the post.
DEPARTMENT OF RESPIRATORY MEDICINE

The Respiratory Unit is currently based within ward 12 of Dumfries and Galloway Royal Infirmary, a 27 bedded ward shared flexibly between respiratory (18-24 beds) and the stroke service (3-9 beds). The majority of admissions are emergencies and are admitted via the 30 bed Medical Admissions Unit. The population served is approximately 150,000 in a region of 2,500 square miles stretching from Stranraer in the West to Langholm in the East.

**Medical Staffing**

<table>
<thead>
<tr>
<th>Grade</th>
<th>Post-Holders</th>
<th>Current Interests / commitments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consultant</td>
<td>Dr S Little</td>
<td>MHDU / NIV (both acute and home)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Sleep and Cystic Fibrosis</td>
</tr>
<tr>
<td></td>
<td></td>
<td>TB lead for NHS D&amp;G.</td>
</tr>
<tr>
<td>Consultant</td>
<td>VACANT POST</td>
<td>Currently covered by Dr paul Rafferty</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(retiring)</td>
</tr>
<tr>
<td>Associate Specialist</td>
<td>Dr Jane Gysin</td>
<td></td>
</tr>
<tr>
<td>Staff Grades</td>
<td>Dr M Ali</td>
<td></td>
</tr>
<tr>
<td>GPVTS or ST1 orFY2</td>
<td>One whole-time equivalent</td>
<td></td>
</tr>
<tr>
<td>FY1</td>
<td>One whole-time equivalent</td>
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</tbody>
</table>

**Specialist Nursing:** The specialist respiratory nursing support is well-developed in the region, with a nurse consultant leading the team and chairing the respiratory managed clinical network, with representation at national level. In addition there is a full time hospital-based respiratory nurse specialist with interest in acute airway disease, including ventilatory failure, but also in non-malignant palliative care (current chair of national group) and anticipatory care planning. Both participate in nurse-led COPD and Oxygen assessment clinics and contribute to pulmonary rehabilitation. The nurse consultant leads the sleep service, supported by a further part-time specialist nurse in sleep / ventilatory support. There is also a full time Lung Cancer nurse specialist, and two community based respiratory nurse specialists, one covering the east, and one the west, of the region.

**Physiotherapy:** There is a part-time Senior Respiratory Physiotherapist delivering an inpatient service, assisted by colleagues, and running the Pulmonary Rehabilitation Programme with the respiratory nurses. She has an outpatient service providing input for sputum clearance and with an interest in dysfunctional breathing.

**Inpatients:** The Respiratory team are based on Ward 12, sharing the ward with the Stroke service. Inpatient numbers vary with an average of 22 beds being utilised by the respiratory team. The majority of acute admissions with respiratory illness are triaged from the Medical Receiving Unit (ward 7) to Ward 12 and clinical responsibility transfers to the Respiratory Physicians. Elective respiratory admissions are to also that ward, although a 23 hour day bed unit is available for short stay investigations. There is an additional medical high dependency unit on which non-invasive ventilatory support, CPAP and nasal high flow systems are available.
**Outpatients:** Each consultant has 2 respiratory outpatient clinic sessions each week and each consultant has a “one-stop assessment clinic” linked to a bronchoscopy session. These clinics are principally for the assessment of suspected lung cancer cases and clinical evaluation, CT scanning and, if necessary, bronchoscopy are all carried out on the same day. Two weeks in every nine, each consultant provides general medical input to the hospital in Stranraer with a respiratory clinic and approximately monthly Dr Little runs a breathing support clinic (in conjunction with the Nurse Consultant) which also incorporates other patients with more problematic sleep breathing disorders. Dr Little also provides the lead for the local adult cystic fibrosis patients, with an open access service together with multidisciplinary clinics. The exact allocation of these services can be reconsidered as appropriate.

**Lung Cancer Management**

The unit deals with approximately 120 new lung cancer cases each year, often initially assessed in the one-stop clinics described above and with management guided by a weekly MDT meeting, with input from a visiting oncology consultant (Dr Campbell) from Edinburgh, a local radiologist and a cardiothoracic surgeon (Mr Kirk) via video-link from the Golden Jubilee Hospital in Clydebank.

**Clinical Oncology:** There is a weekly visit from a Clinical Oncologist from the Edinburgh Oncology Centre with review of all appropriate new lung cancer cases being considered for chemotherapy or radiotherapy. The majority of chemotherapy is given on-site in the MacMillan Chemotherapy suite adjacent to the oncology clinic with nursing staff trained in its administration.

**Radiotherapy**

This is given in Edinburgh under the care of the clinical oncologist, patients staying in Edinburgh when receiving more than one treatment.

**Radiology:** The radiology support is excellent, with multi-slice CT scanners both in Dumfries and Stranraer and MRI scanning in Dumfries, and access to a CT guided biopsy service in Dumfries, with patients attending via a 23 hour day bed unit. A new vascular laboratory has opened and it is intended that the vascular surgeons will develop a service for SVC stenting locally.

**Sleep Medicine Service**

The sleep medicine service has been well-established for over 10 years and evaluates approximately 300 new patients each year. Currently there are around 700 patients on CPAP therapy and 55 patients with ventilatory failure on domiciliary nocturnal NIV. The new patient evaluation is largely delivered by the respiratory nurse consultant and the specialist nurse in sleep disordered breathing. Most patients are assessed on an outpatient basis, with home or hotel-based limited channel polysomnography, with the data being downloaded on the ward the following day. There is close liaison between the specialist nurses delivering the service and the medical staff who are able to offer advice as required when the patients attend following a study, or on follow-up visits. Most clinical follow up is nurse delivered apart from special clinics for complex sleep/NIV patients.

**Cystic Fibrosis Service**

There are currently 10 adult patients within the CF service in Dumfries, with excellent links with the central CF services in Glasgow and Edinburgh for a shared care approach. There is also an excellent working relationship with the local paediatricians to permit transition of patients onwards to the adult service when appropriate.
**Pulmonary Rehabilitation**

This service is run by the senior physiotherapist, 2 respiratory nurses and a physiotherapy assistant with 8 week programmes running in Dumfries, Annan, Castle Douglas, Newton Stewart and Stranraer, the latter 2 being coordinated and run by the Community respiratory nurse specialist for the west of the region, in conjunction with physiotherapy support. Patients graduating from the classes have the opportunity to join self-management “Breathe easy” groups.

**Non-Invasive ventilation**

All acute non-invasive ventilation is managed on the high dependency unit at present. This unit is located immediately adjacent to the medical receiving unit and the nurses are adept at starting patients with respiratory failure on non-invasive therapy when appropriate, and according to a local protocol. Consequently intervention can be commenced out of hours by the acute medical team with subsequent referral to respiratory when appropriate. The medical high dependency unit is run by the physicians (clinical lead SAL) but with excellent links with a highly supportive critical care team and permits full level 2 care with some overlap with ICU.

**THE DIVISION OF MEDICINE**

Within the Division of Medicine there are currently 24 Consultant Physicians. The sub-specialties of the current Physicians are:

<table>
<thead>
<tr>
<th>Sub-specialty</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute Rehabilitation</td>
<td>Dr A McKendrick</td>
</tr>
<tr>
<td><strong>Cardiology</strong></td>
<td>Dr G Tait</td>
</tr>
<tr>
<td></td>
<td>Dr A Mackay</td>
</tr>
<tr>
<td></td>
<td>Dr H Elmahy</td>
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<tr>
<td></td>
<td>Dr H Ahmed (Locum)</td>
</tr>
<tr>
<td><strong>Care of the Elderly</strong></td>
<td>Dr I Hay</td>
</tr>
<tr>
<td></td>
<td>Dr R Holden</td>
</tr>
<tr>
<td></td>
<td>Dr K Graikos (Locum)</td>
</tr>
<tr>
<td><strong>Diabetes/Endocrinology</strong></td>
<td>Dr F Green</td>
</tr>
<tr>
<td></td>
<td>Dr L Clark</td>
</tr>
<tr>
<td><strong>Dermatology</strong></td>
<td>Dr J Norris</td>
</tr>
<tr>
<td><strong>Gastroenterology</strong></td>
<td>Dr S Saha</td>
</tr>
<tr>
<td></td>
<td>Dr A Wahab</td>
</tr>
<tr>
<td><strong>Haematology</strong></td>
<td>Dr A Stark</td>
</tr>
<tr>
<td></td>
<td>Dr R Thomas</td>
</tr>
<tr>
<td></td>
<td>Dr M Khan</td>
</tr>
<tr>
<td><strong>Infectious Diseases</strong></td>
<td>Dr G Jones</td>
</tr>
<tr>
<td><strong>Nephrology</strong></td>
<td>Dr T Muniraju</td>
</tr>
<tr>
<td></td>
<td>Dr K Donaldson</td>
</tr>
<tr>
<td><strong>Neurology</strong></td>
<td>Dr O Dolezal</td>
</tr>
<tr>
<td>Palliative Care</td>
<td>Dr L Martin</td>
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<td>----------------</td>
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</tr>
<tr>
<td>Respiratory</td>
<td>THIS VACANCY Dr S Little</td>
</tr>
<tr>
<td>Rheumatology</td>
<td>Dr M McMahon</td>
</tr>
<tr>
<td>Acute Medicine</td>
<td>Dr S Finlay Dr N Gareebo (Locum)</td>
</tr>
</tbody>
</table>

There are also a number of Associate Specialists and Specialty Doctors working within the above sub-specialties. The Medical Division is also supported by junior doctors from FY1, through FY2 to CMT1 and 2 and specialty trainees.

The following table summarises the 167 general medical beds across DGRI.

<table>
<thead>
<tr>
<th>Ward</th>
<th>Sub-specialty</th>
<th>Beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Acute Medicine &amp; Assessment</td>
<td>30</td>
</tr>
<tr>
<td>9</td>
<td>Renal, Cardiology, Diabetes</td>
<td>30</td>
</tr>
<tr>
<td>10</td>
<td>Gastroenterology, General Medicine, Haematology, ID, Rheumatology, Alcohol/Drugs</td>
<td>30</td>
</tr>
<tr>
<td>12</td>
<td>Respiratory, Acute Stroke</td>
<td>27</td>
</tr>
<tr>
<td>14</td>
<td>Care of the Elderly, Rehabilitation</td>
<td>25</td>
</tr>
<tr>
<td>18</td>
<td>Care of the Elderly</td>
<td>25</td>
</tr>
<tr>
<td>8</td>
<td>Medical High Dependency Unit/Coronary Care Unit</td>
<td>8</td>
</tr>
<tr>
<td>Renal</td>
<td>Haemodialysis unit for renal patients</td>
<td>18-station</td>
</tr>
</tbody>
</table>

Out-patient clinics are held at the Royal Infirmary in Dumfries, and in the Galloway Community Hospital in Stranraer, together with a number of peripheral locations throughout the region and video-linked clinics are in development for a variety of specialities.

The undergraduate teaching commitment is principally to Glasgow during year 3 of the undergraduate programme, with and Edinburgh University students during their final two years and to elective students from other Universities, with an increasing number of students applying to undertake Special Study modules. We attract postgraduate Clinical Attachments and have an active programme of teaching for SHOs preparing for MRCP examinations.

- **Emergency Medical Care**

The provision of emergency medical care to adult patients (16 and over) is currently shared between members of General Medical and Medicine for the Elderly Consultants. All acute medical receiving patients are admitted via the receiving ward, which is co-ordinated by an Acute Medicine Physician, Dr Finlay. She provides cover to the unit 5 sessions per week supported by the other physicians. Two physicians are present for the morning ward round each weekday. Afternoon receiving duties are sometimes covered by Dr Finlay and on other occasions by the physician scheduled to be on-call overnight. Most of the general and
COTE physicians participate in weekday and weekend cover. When on-call at weekends the applicant will provide morning and evening ward rounds as well as overnight cover. This is currently on a 1 in 13.5 rota and the weekends are split as Friday/Sunday and Saturday which results in 1 in 7 weekends being affected. These arrangements are subject to review and change by mutual agreement.

The Board has recently approved the appointment of a further two acute physicians with the intention that the acute physicians will provide receiving unit cover 8am-4pm Monday to Friday with the remainder of the physicians joining them in providing overnight and weekend cover on an approximately 1:14 basis.

- **Education**

  The appointee will have the opportunity to participate in, and contribute to, educational activities run by the Department and jointly with colleagues in the Division of Medicine. This involves a Wednesday lunchtime educational session and a Friday lunchtime Journal Club.

  The postholder will contribute to the training of non-consultant medical staff of all grades and other multi-disciplinary team members as required and participate in the teaching of under-graduate students. They will be expected to help with induction training of junior and middle grade medical staff.

- **Duties to Others**

  The successful candidate will at all times conduct themselves in a professional manner and work in accordance with recognised best practice. As multi-disciplinary working is central to the post, the successful applicant will be an effective team player and will involve him or herself with all team members including consultant colleagues. In planning and organisational matters the successful applicant will put the needs of the service first, will accept change and re-organisation when necessary and will contribute to the reaching of consensus when policies are being determined.

  The successful candidate will communicate effectively with patients, their relatives and carers and with all multi-disciplinary team members. The appointee will provide time within their allocated sessions to meet with relatives and carers in the interests of good practice or when requested to do so.

- **Key Result Areas**

  - Maintaining high quality cost effective clinical care, with feedback from all available sources.
  - Yearly appraisal and job planning.
  - Maintaining the high quality of clinical teaching for medical students that has existed in Dumfries & Galloway for many years, with the feed-back reports from students being used as an outcome measure.
  - Taking part in clinical audit and all aspects of clinical governance, as required by the Department and by the GMC.
  - Completing satisfactory CPD.
  - The Hospital has a Research Department, and the post-holder will be able to obtain support in the preparation and carrying out of research projects, as clinical time allows.
  - The postholder will be expected to work well with an extended multi-disciplinary team, ensuring good communications and co-operation.
JOB PLAN

The consultant job plan is flexible and open to negotiation on appointment. The job plan will be offered on a 10 PA contract (the balance between direct clinical care and supporting professional activities, along with the availability of extra programmed activities, will be discussed and agreed between the Board and the successful applicant). The current on-call commitment is 1 in 13.5 with prospective cover (this may change with the appointment of the 2 new consultant physicians), attracting a 3% availability supplement and potentially an EPA.

Discussion on the job plan will include the provision of:

- Ward Rounds
- Outpatient Clinics
- Bronchoscopy sessions
- Participation in general medicine oncall rota
- Clinical Administration
- Attendance at MDTs
- Local Lead for lung cancer, asthma
- SPA

Clinical commitments are flexible to cover essential services during colleagues’ leave.

The post-holder will be expected to take part in the supervision and training of medical students, junior medical and other professional staff and clinical audit.

General Provisions

- The successful candidate is required to work within the local management structure and co-operate with other professional colleagues to ensure the efficient running of the service and will take part, with other consultant colleagues in the medical contribution to management.
- Subject to the provision of terms and conditions of service, the postholder is required to observe the organisation’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 the organisation.
- The postholder is required to ensure that there are adequate arrangements in place for hospital staff involved in the care of patients for contacting him/her when necessary.
- The postholder is required to comply with the Organisation’s and the Department’s Standing Operating Procedures including Health and Safety Policies.

Travel

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

Research

Research is encouraged and supported by an active Research and Development Committee. The appointee will be encouraged to develop research interests associated with their specialist interest.

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.
On call arrangements
The post holder will join the on-call rota which is currently 1 in 13.5, but may change with the appointment of the two new Acute Physicians.

Supporting Professional Activities
A minimum of one SPA is included in the indicative job plan, amounting to 168 hours per annum which shall normally be sufficient to reflect activities such as revalidation, appraisal, personal audit, and professional development (occurring outwith the 30 days of study leave entitlement in any three year period). Time permitting, it may also cover minimal teaching, training and non-clinical administration. Any additional SPA allocation will require to be evidenced as being mutually beneficial and required by the department. Adjustment to the programme to incorporate additional SPA will require other activities to be reviewed to accommodate any increase as necessary. It will be requested that SPAs are delivered at the normal place of work, unless there are mutual advantages to it being performed elsewhere. The exact timing and location of SPAs, and flexibility around these, will be agreed during the 1:1 meeting with the Clinical Director/Associate Medical Director and included in the prospective job plan.

Private Practice
If the postholder wishes to undertake any private practice, he/she is obliged to inform his/her employer at the time of appointment of his/her intention to do so. This should be submitted in writing to the Medical Director.

The postholder 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 and is in accordance with the national terms and conditions to service. (Refer Section 6 of the New Consultant Contract).

Annual Appraisal and Job Planning
You shall also be required to participate in annual appraisal. Job planning is linked closely with, but is separate to, the agreed appraisal scheme for consultants. The job plan review will take into account the outcome of the appraisal discussion and reflect the agreed personal development plan.
TERMS & CONDITIONS OF SERVICE

The terms & conditions of service offered are those determined by the Consultant Contract 2004 Scotland (as amended from time to time).

This is a permanent position.

Salary scale
£75,249 - £101,451 (depending on seniority point)

New entrants to the NHS or the consultant grade will normally commence on the minimum point of the salary scale (dependant on qualifications and experience).

Participation on the General Medicine oncall rota will attract a 3% availability allowance.

Hours of duty
The hours of duty are 40 per week.

Superannuation
You will automatically be entered to the NHS Superannuation Scheme, in accordance with Auto Enrolment legislation. Full information regarding the pension scheme including information on auto enrolment is available from the SPPA website www.SPPA.gov.uk.

Removal expenses
Assistance with relocation and associated expenses may be given and can be discussed prior to appointment. A quick reference of entitlements is attached for you.

Expenses for candidates attending for interview / visit
Candidates who are required to attend an interview will be given assistance with appropriate travelling expenses. Reimbursement shall not normally be made to employees who withdraw their application or refuse an offer without good reason. Expenses will be paid from port of entry into the UK only.

Disclosure Scotland / PVG
This post is considered to be in the category of “Regulated Work” and therefore requires a Disclosure Scotland Protection of Vulnerable Groups Scheme (PVG) Membership which currently costs £59.00. The cost of the PVG Membership will be paid by NHS Dumfries & Galloway.

Right to work in the UK
NHS Dumfries & Galloway 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 D&G 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. ALL applicants regardless of nationality must complete and return the Confirmation of Eligibility to Work in the UK Statement with their completed application form. You will be required provide appropriate documentation prior to any appointment being made.

Rehabilitation of Offenders Act
The rehabilitation of Offenders act 1974 allows people who have been convicted of certain criminal offences to regard their convictions as “spent” after the lapse of a period of years. However, due to the nature of
work for which you are applying this post is exempt from the provisions of Section 4 of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions Orders 1975 and 1986). Therefore, applicants are required to disclose information about convictions which for other purposes are “spent” under the provision of the act in the event of employment, failure to disclose such convictions could result in dismissal or disciplinary action by NHS Dumfries & Galloway. Any information given will be completely confidential.

**Disabled Applicants**
A disability or health problems does not preclude full consideration for the job and applications from people with disabilities are welcome. All information will be treated as confidential. NHS Dumfries & Galloway guarantees to interview all applicants with disabilities who meet the minimum criteria for the post. You will note on our application form that we ask for relevant information with regard to your disability. This is simply to ensure that we can assist you, if you are called for interview, to have every opportunity to present your application in full. We may call you to discuss your needs in more detail if you are selected for interview.

**Notice**
The employment is subject to three months’ notice on either side, subject to appeal against dismissal.

**Medical negligence**
In terms of NHS Circular 1989 (PCS) 32 dealing with Medical Negligence the Health Board does not require you to subscribe to a Medical Defence Organisation. Health Board indemnity will cover only Health Board responsibilities. It may, however, be in your interest to subscribe to a defence organisation in order to ensure you are covered for any work, which does not fall within the scope of the indemnity scheme.

**Accommodation**
The post is non-resident, but temporary single accommodation may be available for a fixed period.
DUMFRIES AND GALLOWAY REGION

The population of Dumfries and Galloway is 148,000, within a large geographical area of about 2,500 square miles. Dumfries and Galloway stretches from Langholm in the East to Stranraer in the West, and from Kirkconnel in the North down to the Solway Coast. There are a number of community cottage hospitals in various towns throughout the region, and an intermediate unit – Galloway Community Hospital (with medical and maternity in-patient beds) in Stranraer.

Dumfries has a population of approx. 48,000 and is situated in the eastern half of the region. The River Nith runs through the town to the Solway coast and the city of Carlisle is approximately 45 minutes drive from Dumfries. Glasgow is within 1½ hours, Edinburgh and Newcastle within 2 hours, and Manchester and Liverpool within 2½ hours driving time from Dumfries.

Dumfries and Galloway offers the very best of Scottish countryside............from rugged cliffs and sandy beaches to forests, hills and rolling farmland. You’re spoilt for choice in the range of activities on offer, with watersports, fishing, birdwatching, golf, mountain-biking or cycling along the network of rural roads . . . and much more. The Southern Upland Way runs for 212 miles from Portpatrick in the west to Cockburnspath in the eastern Scottish Borders, through some of Scotland’s wildest country.

There are many attractions, ranging from the University Town of Dumfries, Scotland’s National Booktown Wigtown, Artists’ Town Kirkeudbright, Castle Douglas Food Town to the historic monuments, castles and abbeys, beautiful gardens, fascinating museums throughout the region. The local Council is committed to investing in education, with high achieving schools that earn top marks in HM Inspector of Education Reports. Children are encouraged to develop their talents and interests, with first-class opportunities in music, arts and sports. High quality sport and leisure facilities are available throughout the region. Property offers exceptionally good value, at very competitive prices.
NHS DUMFRIES & GALLOWAY

NHS Dumfries & Galloway became operational on 1st April 2003 when the two Trusts (Acute & Maternity and Primary Care) were dissolved and one NHS organisation was created, incorporating all NHS services along with the Health Board. NHS Dumfries & Galloway has led the process of integration and is seen as the model for the rest of Scotland to follow. Continuing new investment has resulted from the system always having met all financial and waiting times targets.

Structure
The NHS Board has its headquarters on the Crichton site in Dumfries. Comprising executive and non-executive Directors, its key responsibility is to ensure delivery and development of the local Health and Community Care Plan. You can see a copy of the HCCP on the NHS Dumfries and Galloway website on www.nhsdg.scot.nhs.uk

Staff
NHS Dumfries & Galloway employs approximately 4400 staff from a range of different clinical and non-clinical backgrounds, made up of the following broad groupings:

<table>
<thead>
<tr>
<th>Grouping</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing/Midwifery</td>
<td>49.2%</td>
</tr>
<tr>
<td>Administrative Services</td>
<td>16.8%</td>
</tr>
<tr>
<td>Support Services</td>
<td>11.6%</td>
</tr>
<tr>
<td>Medical &amp; Dental</td>
<td>7.9%</td>
</tr>
<tr>
<td>Emergency Services</td>
<td>0.2%</td>
</tr>
<tr>
<td>Other Therapeutic Services</td>
<td>2.4%</td>
</tr>
<tr>
<td>AHPs</td>
<td>7.1%</td>
</tr>
<tr>
<td>Senior Management</td>
<td>0.4%</td>
</tr>
<tr>
<td>Healthcare Sciences</td>
<td>2.7%</td>
</tr>
<tr>
<td>Medical &amp; Dental Support</td>
<td>1.2%</td>
</tr>
<tr>
<td>Personal &amp; Social Care</td>
<td>0.4%</td>
</tr>
</tbody>
</table>

Services
A wide range of services are provided from over 50 bases across the region. These services are provided via one of seven General Management Directorates – Operations, Acute, Diagnostics, Primary Care & Community Care – East, Primary Care and Community Care – West, Women’s & Children’s Services, and Mental Health. Most acute services are based at Dumfries and Galloway Royal Infirmary with a network of out-patient clinics held throughout the region and a range of acute services provided at the Galloway Community Hospital in Stranraer.

The map below highlights the main service bases throughout the region.
Dumfries and Galloway Royal Infirmary
Dumfries and Galloway Royal Infirmary contains 352 staffed beds (+11 cots), and includes the Departments of:
- Anaesthetics
- Cardiology
- Dermatology
- ENT Surgery
- General Medicine
- General Surgery
- Geriatric/Rehabilitation/Stroke Medicine
- Haematology
- Laboratory Services
- Neurology
- Obstetrics and Gynaecology
- Ophthalmology
- Oral and Maxillofacial Surgery
- Orthodontics
- Orthopaedic Surgery
- Paediatrics
- Palliative Care
- Radiology
- Renal Medicine
- Urology

A GP Out-of-Hours Service is located on the DGRI site, adjacent to the Emergency Department; this service shares the accommodation utilised by the Orthopaedic Department during the day. A helicopter landing site is located outside the Emergency Department.

The Operating Department, adjacent to the Day Surgery Unit, has six theatres *(one allocated for emergency cases)*, endoscopy suite and minor treatment area. There is an Intensive Care Unit of four beds and a Surgical High Dependency Unit of four beds. There is also a separate theatre in the Ophthalmology Day Case ward.

DGRI Education Centre
Dumfries and Galloway Royal Infirmary is the recognised Post-Graduate Medical Centre for south-west Scotland. The Education Centre has recently been refurbished, with state of the art facilities enabling us to deliver using a range of teaching methods, and providing videoconferencing facilities.

Dumfries and Galloway Royal Infirmary welcomes students from Glasgow *(departments of medicine, surgery, trauma and orthopaedics)*, Edinburgh *(departments of geriatrics, psychiatry, paediatrics and obstetrics)*, and Dundee *(department of psychiatry)*.

The curricula of the universities differ, and appropriate induction is provided into the methods used in the department selected.

In addition to undergraduate teaching Foundation and GPST programmes run, other specialist training posts are run as blocks from regional programmes.
There is a good programme of departmental teaching in all departments, and CPD for primary and secondary care clinicians.

For further information on the Dumfries and Galloway Education Centre go to www.dgeducationcentre.scot.nhs.uk

**DGRI Future Re-development**

It is an exciting time in Dumfries and Galloway as a new District General Hospital is being built, due to open in 2018. Redesign of services at Dumfries & Galloway Royal Infirmary is currently underway. NHS D&G have been given the approval to start planning for a ‘new build’ hospital on a site on the western outskirts of the town. This new build will ensure NHS Dumfries & Galloway staff are able to continue to provide high quality clinical care to the population of Dumfries & Galloway in a modern environment. Full information on the DGRI Redevelopment Project can be found on the NHS Dumfries & Galloway website – www.nhsdg.scot.nhs.uk

Please click on the link below to experience a walk-through of our new state of the art hospital.
https://www.youtube.com/watch?v=425ePpuzzy4&feature=youtu.be

**Galloway Community Hospital**

The Galloway Community Hospital is located in Stranraer, 75 miles from Dumfries. It opened in September 2006 replacing the former Dalrymple and Garrick Hospitals.

Services provided at this site include Day Surgery (12 trolley area); Assessment & Rehabilitation (24 beds); Palliative Care (2 beds); Acute Medicine (20 beds); Maternity Services (2 beds); Renal Services (4 station unit haemodialysis); as well as Accident and Emergency, Anaesthetics, Laboratory, Radiology, Out-patients (provided by a number of Consultants and specialist nurses from Dumfries & Galloway Royal Infirmary), and Out-of-Hours.

Health professionals based in the Galloway Community Hospital include: Physiotherapy, Occupational Therapy, Speech and Language, and Podiatry Services.

**Midpark Hospital**

A new Mental Health facility has opened in January 2012 on a site adjacent to the Crichton Campus. Facilities provided at the new site include - a 15 Bed elderly ward; 16 bed dementia/organic illness ward; 6 bed IPCU; 34 Bed adult (2 wards – 17 bed each); Acute hub accommodation; 8 Bed rehab recovery; 8 Bed rehab long stay; and Rehab hub accommodation.

These facilities have an average annual admission rate of over 700 and approximately 7,000 out-patient attendances per year. They provide a full range of psychiatric services for patients of all ages in the Dumfries & Galloway region. The Emergency Department is supported by a Psychiatric Liaison Nurse.

**Community Cottage Hospitals**

As well as the Galloway Community Hospital, there are a further eight Community Cottage Hospitals within Dumfries and Galloway:

**East**
- Annan Hospital
  24 beds (*palliative care and rehabilitation*)
- Lochmaben Hospital
  16 beds (*palliative care and rehabilitation*)
• Moffat Hospital
  12 beds (GP acute and rehabilitation) and Minor Injuries Unit
• Thomas Hope Hospital
  12 beds (palliative care and rehabilitation)

Dumfries & Upper Nithsdale
• Thornhill Hospital
  13 beds (rehabilitation)

West
• Castle Douglas Hospital
  21 beds (GP acute and rehabilitation) and Minor Injuries Unit
• Kirkcudbright Hospital
  14 beds (GP acute) and Minor Injuries Unit
• Newton Stewart Hospital
  22 beds (GP acute, palliative care and rehabilitation) and Minor Injuries Unit

(In some cases patients may be admitted directly from the DGRI Emergency Department to Community Hospitals through local General Practitioners)
DATE WHEN POST IS AVAILABLE

The post is available with immediate effect.

QUALIFICATIONS

All candidates must be fully registered with the GMC Specialist Register. The candidate will hold a CCST or be within 6 months of obtaining the certificate, or will be an established Consultant Physician.

See Selection Criteria for further details.

ENQUIRY ARRANGEMENTS

For any further details please contact:

- Dr Ken Donaldson, Renal Physician/Associate Medical Director
  (01387 246246) e-mail address - kdonaldson@nhs.net

Arrangements to visit the department can be made through Patsy Pattie, PA/Directorate Co-ordinator on 01387 241790, (e-mail address – patsy.pattie@nhs.net).
## NHS DUMFRIES & GALLOWAY PERSON SPECIFICATION

### Post: Consultant in Respiratory/General medicine

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential</th>
<th>Desirable</th>
<th>Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qualifications &amp; Training</td>
<td>- MBChB or equivalent</td>
<td>- Additional post graduate qualifications eg MD, PhD</td>
<td>CV and application form / External Advisor</td>
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<td>- MCRP(UK) or equivalent</td>
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<td></td>
<td>- On Specialist Register for Respiratory/General Medicine or within 6 months of obtaining CCST in either specialty at time of interview</td>
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<td>- Current full registration with the GMC with a licence to practise</td>
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<tr>
<td>Experience</td>
<td>- Extensive experience in Respiratory medicine and general medicine</td>
<td>- Experience of a formal teaching role</td>
<td>Interview, CV and application form</td>
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<td>- Experience of clinical governance</td>
<td>- Experience in departmental and organisational planning</td>
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<td></td>
<td>- Evidence of continuing professional development</td>
<td>- Experience of service development</td>
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<td></td>
<td>- Experience of building and maintaining effective working relationships</td>
<td>- Publications in peer-reviewed journals</td>
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<td>- Experience of patient safety initiatives</td>
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<td>Knowledge</td>
<td>- In depth knowledge of the UK health care sector strategies and service provision. (several audits completed)</td>
<td>- Knowledge of national and international clinical management guidelines</td>
<td>CV and application form Assessment process</td>
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<td>- Well versed in audit processes</td>
<td>- Understanding of economic constraints and requirements of financial planning and business governance processes</td>
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<tr>
<td>Skills and Abilities</td>
<td>- Competent in all practical procedures relevant to Respiratory/General Medicine</td>
<td>- Understanding of complex clinical work streams across multiple disciplines, localities, operational and regional boards</td>
<td>CV and application form Assessment process</td>
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<td>- Able to demonstrate successful team leadership/ motivation of others</td>
<td>- Politically aware of competing complex agendas and able to understand the wider stakeholder views across the network</td>
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<td>- Evidence of innovative thinking, including an ability to build organisation capacity and capability</td>
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<td>- Effective interpersonal skills</td>
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<td>- Computer literate</td>
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<td>- Interest in teaching</td>
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**Prepared by:** Respiratory Consultants  
**Date:** February 2014
NHS DUMFRIES & GALLOWAY RELOCATION POLICY

(Your entitlement at a glance)

£10,560 is the maximum reimbursement which is available in accordance with the following headings.

£8000 is the tax limit therefore, anything reimbursed above this amount will be taxed.

<table>
<thead>
<tr>
<th>Cost incurred</th>
<th>Maximum reimbursement</th>
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<tbody>
<tr>
<td>House sale/purchase fees</td>
<td>£4,700</td>
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<td>Preliminary visits to area x 2</td>
<td>Mileage + Subsistence</td>
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<tr>
<td>Temporary accommodation i.e. rent (where have another commitment) for 6 months</td>
<td>£3300</td>
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<tr>
<td>Removal / storage of furniture &amp; effects</td>
<td>£1000</td>
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<tr>
<td>Miscellaneous allowance</td>
<td>£1100</td>
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There are conditions which must be met for all of the above reimbursement entitlements therefore, it is important that the above is read alongside the full policy when a claim is being prepared.

A copy of the full policy is available on the intranet in the Services Section – Workforce – Policies.

Or from the HR helpline which is:
HR Helpline ext 34888 or via switchboard 01387 246246
Email dumf-uhb.hrenquiries@nhs.net
Recruitment Helpline (general and medical) ext 32757 or 01387 272757