

**Job Description**

Job title: Consultant Physician in General and Stroke Medicine

Directorate: Adult Medicine Directorate

Responsible to: Directorate Chair of Adult Medicine

Accountable to: Medical Director, States of Guernsey

 The Medical Specialist Group LLP Management Board

Location: Princess Elizabeth Hospital, Guernsey

 The Medical Specialist Group LLP

Hours: Fixed term backfill post (12-18 months)

**The Post**

We are looking to appoint a consultant general physician in stroke medicine to join a team of fifteen general physicians to provide high quality comprehensive consultant only secondary care in general and acute medicine in the Bailiwick of Guernsey (65,000 people approx.). The successful applicant must be on the GMC Specialist Register or be within 6 months of eligibility for inclusion at the time of interview.

This Consultant post is to provide backfill while the permanent incumbent is on secondment to introduce an Electronic Patient Record. In the first instance it will be for 12-18 months with the possibility of extension. This post will entail working as part of a team of three geriatricians and will focus on providing stroke care. All consultants within the department of medicine have a general medicine commitment so the post holder will be expected to be on the GMC Specialist Register for Geriatrics and General Medicine, and either on the stroke subspecialty register or with considerable experience in Stroke Care and would ideally have dual accreditation. The appointee will be expected to take part in the GIM on call rota for which they are first on-call without the support of junior doctors.

The team of consultant physicians work together to provide the general and acute medicine service to Guernsey. There are no junior doctors, but we are well supported by the ward nurses and Emergency Department Physicians to provide a high-quality health service.

**Why Choose Us?**

* A unique opportunity to work within a small, cohesive department with a shared vision to deliver top quality, holistic patient care.
* We offer a generous remuneration package, including an array of employee benefits.
* Guernsey residents benefit from an independent taxation system, including flat rate 20% income tax.
* Relocate to appreciate a rewarding quality of life within a thriving small community.
* Enjoy shorter commutes and a safe and friendly place to live and raise a family – all within easy reach of the UK.

**The Medical Specialist Group LLP**

The Medical Specialist Group (MSG) Limited Liability Partnership is contracted to provide a wide range of emergency and elective medical services for the Bailiwick of Guernsey, in partnership with the Health and Social Care Committee (HSC) of the States of Guernsey. It aims to serve and care for the community through the provision of the highest standard of clinical care.

The MSG was founded in 1992 by a group of 19 doctors. Today the service remains owned and run by a passionate team of doctors, currently comprising 55 consultants with a range of professional interests. There are no junior doctors and therefore consultants provide the complete range of inpatient and outpatient care. Tertiary care services are supplied by a variety of hospitals on the UK Mainland, mainly Southampton University Hospital, usually through contracted services.

The MSG is based at Alexandra House and Mill House, where most managerial and support staff are based. Both buildings have dedicated outpatient facilities and are situated in close proximity to the island’s main hospital, the Princess Elizabeth Hospital (PEH).

**The Team**

The MSG Adult Medicine Department and support services are located primarily at Alexandra House; however the departments of Cardiology and Oncology are wholly based within the PEH, and the Geriatricians have clinics in both Alexandra House and the Day Assessment unit.

The successful applicant will join our team of 15 consultant physicians and oncologists.

Our Consultants

|  |  |
| --- | --- |
| Dr Z Ali | Cardiology & GIM |
| Dr K Allen | Diabetes & Endocrinology & GIM |
| Dr W Anees | Respiratory Medicine & current lead for Cardiorespiratory Services |
| Vacancies, currently covered by:Dr B Barzangy (locum)Dr A Farrukh (locum) | 2x Gastroenterology |
| Dr M Clark | Oncology |
| Dr R Copeland | Geriatric Medicine & GIM |
| Vacancy | GIM |
| Dr S Evans\* | Geriatric Medicine (Stroke Disease & Syncope) & GIM.MSG Chairman |
| Dr P Gomes | Oncology |
| Dr P Harnett | Acute Medicine with a Renal interest |
| Dr Y Manikyam | Oncology |
| Dr A Matthew | Geriatric Medicine (Movement Disorders) & GIM |
| Dr D Patterson | Cardiology & GIM  |
| Dr T Saunders | Geriatric Medicine (orthogeriatrics) & GIM.Adult Medicine Directorate Chair. |
| This post\* | Locum Stroke Physician backfill to Dr S Evans post as he is currently seconded to the Electronic Patient Record Project |
| Vacancy, currently covered by:Dr B Ridha (part-time locum)Dr A Esack (part-time locum) | Neurology |

Our general physicians are supported by an efficient and proactive managerial and secretarial team which comprises of a Directorate Manager, 11 Personal Assistants and 2 PA support positions.

**Facilities and services**

The department has approximately 2,000 admissions per year, on average 4 during the day and 2 at night, most of which are non-elective. The Consultant in this post is expected to cover the daytime acute medical rota for three/four sessions and the remaining will be shared by the other physicians. The oncologists run a 1:3 on call night-time rota until 11pm following which, cover is provided by the physicians until 8am. The oncologists also provide oncology cover from 8am until 1pm at weekends. The service is consultant only, with a first on call commitment without junior staff, and is non-resident at nights and weekends. In general, the admitting physician continues the care of their own patients, cross-referrals are made as appropriate for patients requiring specialist input.

Presently most unplanned admissions are assessed by the Duty Physician in the Emergency Department following referral from the emergency doctor or from the community via GPs. For those patients who do not require hospital admission but do require intensive support in the community, there is a rapid response team, which provides experienced nursing, physio, OT and Social Worker input.

The Princess Elizabeth Hospital has an excellent 7 bed Intensive Care Unit, of which 3 beds are used flexibly as a Medical High Dependency Unit. The medical wards have 62 beds in total including rehabilitation. There is a private ward for medical, surgical, orthopaedics and gynaecology, although at times it is used for overflow medical patients. There is no dedicated stroke unit but there is an experienced MDT stroke team based on Le Marchant Ward.

The are many Nurse Specialists employed by HSC to support Consultants in their work. These include the areas of respiratory, cardiac rehabilitation, heart failure, elderly mental health, stroke, diabetes and tissue viability and others.

**Geriatric Services**

The successful applicant will be expected to lead and continue to develop the stroke service and in collaboration with colleagues provide an integrated and high-quality service for patients. The 3 current Geriatricians take part in the general medical take, and also provide orthogeriatric, stroke, and movement disorder assessment and rehabilitation.

There is a 26 bedded rehabilitation ward (Le Marchant) adjacent to the Physiotherapy Department (including a Gym and Hydrotherapy pool) and the Occupational Therapy department. This ward is shared by the three Consultants.

**Outpatients**

The geriatricians have clinics in both Alexandra House for GIM patients and geriatric clinics together with a multidisciplinary team in the Day Assessment Unit. The Osteoporosis unit including a DEXA scanner is currently located in the DAU. Dietic SLT and psychology support for stroke patients are available for patients in the DAU and the rehab ward, together with Specialist Nurses in stroke, movement disorders and osteoporosis/fracture liaison.

**Community services**

There is a well-established Rapid Response Team with a Band 7 nurse as Team Leader, 3x Band 6 Senior Staff Nurses and 4 x Band 5 Staff Nurses, and 8 Support workers. Its function is t o prevent inappropriate admissions to Hospital by providing intense support including assessment by Physio, OT and Social Worker for a period of up to 2 weeks. Referral can be made by any Doctor, but the majority arise from GP’s and Emergency Department doctors.

It is envisaged that a newly created reablement team will work jointly with the existing Rapid Response Team, and that some team members will work across both teams (e.g. therapists & support workers). The Reablement Team would provide intensive reablement support for a period of up to 6 weeks and would work with people to improve their independence in their own home.

It is proposed that there would be two main sources of referrals for reablement services: -

* From cross-referral within the Rapid Response team where it is felt that people need support for longer than the 2 weeks that the Rapid Response team can provide.
* Following discharge from hospital where it is felt that people might need some intensive reablement support to help them to transition from hospital to home. (For example, people who have been in hospital for hip and knee problems.)

In the longer term the team would ideally accept referrals from other health and care professionals (e.g. GP’s, social workers etc.). However, in order to properly evaluate impact and to manage demand it is proposed that the service be limited to the two referral pathways outlined above in the first instance.

It is envisaged that over the initial 12 months around 100 people might receive up to 6 weeks of reablement support – i.e. approximately 10 new reablement referrals per month.

**External Links**

The new physician will be encouraged to maintain a regular off-island link to maintain specialist clinical skills with a tertiary provider. The maximum time off-island is 10 days per year and is arranged to the mutual convenience of the post holder and the tertiary centre. Applications need to be supported by the Department of Medicine and approved by the Combined Governance Committee.

**Duties**

* + 1. To provide advice and take over the care, where appropriate, of patients under the care of other specialists within the Medical Specialist Group or HSC.
		2. To participate in the development of the adult medicine protocols and guidelines.
		3. To develop and maintain collaborative relationships with medical colleagues in other specialties and participate in regular clinical meetings and other professional activities.
		4. To develop and maintain good communication with general practitioners and appropriate external agencies.
		5. To demonstrate a firm involvement in clinical governance, risk management and clinical audit – this will include the development and maintenance of appropriate systems and practices to ensure continued safe clinical practice.
		6. To ensure that practice is up to date; this will necessitate the consultant taking responsibility for their clinical professional development and participating in the Medical Specialist Group’s performance, annual appraisal and revalidation system which is supervised by the GMC with whom the MSG has a special arrangement.
		7. To share responsibility for data protection arising out of the use of computers and maintain good practice in the handling of confidential information.
		8. To be accountable for improving and complying with infection control practices
		9. Cover for Consultant colleagues annual leave and other authorized absence, including care of patients.
		10. Participation in medical audit and the MSG’s Clinical Governance process.
		11. Managerial, including budgetary, responsibilities where appropriate, with adequate SPA time available.
		12. Compliance with all MSG / HSC Policies.

**Programme of Work**

Guernsey is not part of the UK, and the healthcare system is therefore not part of the NHS. This post therefore differs from an NHS consultant post in that there are no specified numbers of programmed activities (PAs,) but this job is the equivalent of 12-13 PAs. Remuneration appropriately reflects the duties and responsibilities of the role.

A job plan review between the appointee and the Directorate Chair will take place within 6-12 months of the post commencement. This prospective agreement will outline your main duties and responsibilities. Unlike within the NHS setting, the job plan is not linked to remuneration. It will comprise clinical duties, managerial responsibilities, accountability arrangements and personal objectives, including details of any off-island links and the support required by the consultant to fulfil the job plan.

The indicative timetable below includes Duty Physician daytime on call. This includes weekends and 1:10 night-time on call, with prospective cover. After a night on call the following afternoon is free once the post take ward round is finished and if working a Friday/Saturday/Sunday days or night on call, the Monday afternoon is free. Day time on call is from 8am until 6pm and night-time on call is from 6pm until 8am, followed by a ward round of your acute admissions.

The off-island attachments, monthly Academic Half Days and other meetings are considered as SPA activities. Time is also allocated for audit and appraisal. Achieving the recommended SPAs, with no commitment to teaching or research, is done flexibly and will vary according to acute workload.

There are 35 days holiday a year, with the ability to carry 5 days forward into the next year if untaken.

The consultant is expected to work flexibly and to put the needs of the patient first. This is a consultant delivered, not a consultant led service, with no junior staff. The post is planned for daytime 10.0 PAs, 2.0 of which are SPAs. Private patient activities are integrated into this rota but not included in the calculation of PAs.

Direct clinical care sessions include:

* Administration work directly related to clinical care
* Outpatient clinics
* Ward rounds
* Weekly day time on call activities

There is 1 afternoon off each week.

**Proposed Job Plan**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **AM** | GIM Ward Round/admin | GIM ward round Ward round – Le Marchant ward and MDT meeting | Ward round/SPA | Physicians business meeting/Ward round | GIM ward round and ward round on Le Marchant ward |
| **Lunch** | 12:30 – 13:30 | 12:30 – 13:30 | 12:30 – 13:30 | 12:30 – 13:30 | X-ray meeting |
| **PM** | DAU clinic  | Half day (post night on call) flexible | MSG clinic | MSG clinic | SPA |

Out of hours o-call (1:10): 1 DCC

DCC (Direct Clinical Care: includes clinical activity, clinically related activity, predictable and unpredictable emergency work): 8.0 PAs on average per week. SPA (Supporting Professional Activities: includes mandatory training, guidelines, CPD audit, teaching and governance meetings): 2.0 PAs on average per week. Private practice PAs are not included in this calculation.

The job plan represents a draft framework for negotiation depending on the specialty interest. The job plan will be subject to review in the context of annual appraisal and will be subject to modification by mutual consent.

The second SPA is taken flexibly and consists of academic half days, off island attachments and other meetings.

**Applications and visits**

Informal enquiries about the post are welcome and can be made to Dr Tom Saunders (Directorate Chair for Adult Medicine) tom.saunders@msg.gg or via Nathan Collenette (Business Partner – People and Organisation) Nathan.collenette@msg.gg or via our switchboard on 01481 238565.

Applications must be accompanied by a covering letter and CV and made via: (BambooHR link), or sent to recruit@msg.gg

Short listed candidates are encouraged to visit prior to interview.

To find out more about The Medical Specialist Group LLP visit: [www.msg.gg](http://www.msg.gg)

To find out more about relocating to Guernsey visit: <https://www.locateguernsey.com>

**The Medical Specialist Group LLP**

Management and organisation structure

The senior office holders consist of the Chairperson, Lead Governance Partner and

Lead Finance partner who together with the four Directorate Chairs and 2 consultant Partnership representatives, form the Management Board.

The four Directorates are Adult Medicine (15 consultants), Anaesthetics (12 FTE Consultants), Surgery (15 Consultants) and Women and Child Health (12 Consultants).

The MSG employs clinical & support staff (88.74FTE) including senior management, surgical assistants, nurses, audiologists, and administration staff supporting the directorate structure as well as in finance, IT, corporate and clinical governance, HR, facilities, medical records, reception and typing.

The PEH uses TRAK Care for electronic management of pathology and radiology requests and results etc., and this is currently undergoing a major upgrade. This project is the reason we are looking to backfill the stroke post. There is appropriate technology to carry out cross-sectional imaging as necessary with the MRI scanner and CT scanner having been replaced in the last 6 months. Images can be electronically linked to our tertiary centre via the IEP system. Radioisotope imaging is available locally (the camera has just been replaced).

The income for the MSG comes primarily from the healthcare contract with the States (79%). The remaining balance is private earnings.

The Secondary Care Contract

The Medical Specialist Group LLP is a limited liability partnership established on

the 1st January 2018 as a conversion from the Medical Specialist Group that previously

functioned as a General Partnership for more than 25 years in Guernsey.

The MSG commenced a new contract with the States of Guernsey on the 1st January

2018 for the continued provision of secondary healthcare to the population of the

Bailiwick of Guernsey. The Bailiwick of Guernsey has a population of approximately.

65,000, which includes 2,000 in Alderney, 100 in Herm and 500 in Sark (though Sark are not covered under the secondary healthcare contract arrangements). The MSG works in close partnership with HSC and services are reviewed regularly. Patients are seen at the MSG premises and the PEH. Outpatient activity takes place mainly at the MSG and inpatient activity occurs at the PEH. Private patient facilities are offered on Victoria Ward at the PEH and at MSG premises.

The Emergency Department at the PEH is fully staffed with 3 Consultant Emergency

Doctors and 8 Associate Specialists. The Emergency Department is run by HSC

whereby patients are seen, investigated, treated, and referred to the appropriate

specialist in secondary care.

There are 3 main GP practices in Guernsey and 1 in Alderney. GPs will refer patients to secondary care either electively or as an emergency. Secondary care services under the MSG are provided in General Surgery, Urology, Orthopaedics, ENT, Ophthalmology, Adult Medicine, Anaesthetics, Paediatrics and Obstetrics & Gynaecology.

Other secondary healthcare services are provided directly by HSC such as Radiology,

Psychiatry, Public Health and Pathology. There is scope for interventional radiology

procedures on island.

Specialties such as Haematology, Haematological Oncology, Rheumatology,

Microbiology and Dialysis are provided by visiting specialists from UK tertiary centres that have a contract with HSC. There are also inpatient facilities at The Mignot Memorial Hospital in Alderney, which is managed by GPs.

**Clinical Governance Requirements**

The appointee will be expected to participate in all aspects of clinical governance and best practice standards. These include compliance with policies relating to healthcare associated infection and data protection. The post-holder will participate in regular clinical audit and review of outcomes, and work towards achieving local/national targets.

Both the MSG and HSC are committed to the clinical governance process and have a single Clinical Governance Committee.

A local appraisal process is in place and upon joining you will be allocated an appraiser by the appraisal lead. We comply with the General Medical Council (GMC) revalidation requirements. Dr Peter Rabey (Medical Director) has been appointed by the States of Guernsey to oversee revalidation.

A consultant mentor will also be allocated on appointment, to support transition to working and living on island.

**General Conditions of Appointment**

The appointee will be employed by the MSG under the terms of a Consultant General Physician. Within the rules of the LLP, consultants may be asked to join the Partnership at a stage that is favourable to both parties.

The appointee will be required to cover for colleagues' absence from duty on the basis of mutually agreed arrangements with the Directorate Chair. It is required that 6 weeks' notice be given for leave (with the exception of compassionate/sick leave), in order to prevent impact on service delivery.

The MSG requires the appointee to maintain full registration with the GMC, be on the specialist register and to fulfil the duties and responsibilities of a doctors, as set down by the GMC. CPD activities are reimbursed up to a limit, as defined by MSG policy.

All appointments are subject to the following checks;

* Identity
* Criminal record
* Essential qualifications
* Professional registration
* References
* Occupational health clearance

Satisfactory Occupational Health and Enhanced DBS check with Barred List (Child and Adult Workforce) obtained. Applicants are not entitled to withhold information about convictions (including ‘spent’ convictions or pending prosecutions) and failure to disclose such convictions could result in dismissal or disciplinary action by the MSG LLP. Any information provided will be completely confidential and considered only in relation to the relevant application.

**Pay and benefits**

* Generous salary (not utilising NHS pay scale) and current local Guernsey income tax flat rate of 20%
* Opportunity to earn private income (package including 60% of private fees, indemnity, room, secretarial support and billing).
* Potential to join our partnership in the future (at a mutually convenient time). Partners are eligible for 6 weeks of sabbatical every 7 years.
* Full relocation package
* Private health insurance for you and your family
* Pension scheme delivered by a long-established local pension specialist (up to 5% matched employer contribution)
* Life assurance scheme
* Income protection scheme
* Medical indemnity insurance cover
* GMC and BMA subscription cover
* Free car parking at both the MSG and PEH
* Wellbeing allowance of £300/annum (towards gym/better commute scheme etc)
* 35 days per annum annual leave
* 10 days study leave with generous reimbursement package
* Up to 10 days fully funded ‘off island attachment’ with opportunities for professional and service development

**Our Vision, Purpose and Values**

Our Vision

Internationally recognised as a centre of excellence for clinical care.

Loved by the Guernsey community.

Our purpose and values

**The needs of our patients come first, always.**

With the patient at the centre of everything we do, we work as a multi-disciplinary team to relieve illness and improve health, providing the best possible care and experience.

**We are committed to patient safety and clinical excellence in all we do.**

We invest in our people so that we can achieve together the highest standards of clinical care and the best possible outcomes, justifying the trust our patients place in us.

**We work as one team and treat each other with respect.**

We value and respect each other, and we follow through on our promises. We create a compassionate environment. We follow the golden rule: treat people as we would like to be treated ourselves.

**We value partnership.**

We are fully integrated into our local community, and we actively seek opportunities to partner with government, other healthcare providers, patient groups, and businesses to improve healthcare and the quality of our patients’ lives.

**We focus on the long term.**

We invest in the future and in our financial security, using our resources efficiently and always innovating to improve the patient experience. We are committed to sustainability and measure our progress in accordance with the UN Sustainable Development Goals.

**Person Specification**

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| --- | --- | --- | --- |
|  | **Essential Criteria**  | **Desirable Criteria**  | **Where evaluated** |
| **Professional Qualifications**  | Entry on GMC Specialist Register for GIM and/or Geriatric MedicineEntry on Stroke Specialist register or extensive stroke experienceCCT (or entry expected within 6 months of interview)European Community rightsMRCP or equivalentEligible to reside and work in the UK | ALS providerDual accreditation  | Certification & certificate checkRoyal College AssessorCV  |
| **Clinical Experience and Knowledge** | Wide experience in Acute general medical takes. Ability to offer expert clinical opinion on range of problems both emergency and elective within the specialties of Geriatrics and GIM.Ability to take full responsibility for clinical care of patients.Ability to integrate the on-island care of appropriate patient with a tertiary centre. | At least 1-year experience at consultant levelTo develop an off-island attachment with an approved tertiary centre | CVInterviewReferencesCCT Check |
| **Management & Administrative Experience** | Ability to organise and manage outpatient clinics and admin.Ability and willingness to work within the contracted performance framework.Ability to advise on the development of a specialist service and its efficient and smooth running. | Experience of audit and management | CVInterviewReferences |
| **Teaching skills** | Ability to teach clinical skills to nursing, technical staff and medical students |  | CVInterviewReferences |
| **Personal Skills** | Honesty & ReliabilityAbility to work in a small communityTeam working with ability to changeCommitment to continuing Medical EducationCommitment to effective audit Commitment to good governanceCaring attitude towards patientsAbility to communicate effectively (written & oral skills), with patients, relatives, GPs, nurses, staff and other agenciesAbility to demonstrate good multidisciplinary team working |  | CVInterviewReferences |
| **Academic/Research** | Ability to apply research outcomes to clinical practice | Publications in refereed journals | CVInterviewReferences |