Job Description

Job title:	Consultant Gastroenterologist
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:	Full time post (no formal on call commitment)

The Post

We are looking to appoint a consultant gastroenterologist to help shape services to the local community in the Bailiwick of Guernsey (65,000 people approx.).

This is an exciting development in the provision of Gastroenterology services in Guernsey. Increased demand has resulted in significant expansion with a change from two consultants providing GIM and gastroenterology services to the recent appointment of a whole-time gastroenterologist with no GIM commitment. We are now looking to appoint a second full time gastroenterologist to join the team. They will be supported by a nurse endoscopist and inflammatory bowel disease specialist nurse.

The post holder will be expected to be on the GMC Specialist Register for Gastroenterology. The appointee will NOT be expected to take part in the GIM on call rota. But it would be desirable for applicants to have accreditation in GIM. The appointee will be expected to work together with the established members of the department and support staff to improve patient choice and enable the development of new on-island services. This is a minimum 10 PA per week post with no formal commitment to an on-call rota. In addition to the salary there are opportunities to develop significant private practice which are integrated into the MSG model.

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 56 consultants with a range of professional interests. There are no junior doctors in Guernsey 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 who are wholly based within the PEH.

The successful applicant will join our team of 18 (17.8 FTE) Consultant Physicians & Oncologists. The MSG has 2 GI surgeons currently: Mr Van den Bossche – Upper GI & colorectal and Mr Allu – colorectal. Specialist hepatology advice is obtained from Southampton as well as Guys Hospitals. In conjunction with visiting consultants from the Royal Free Hospital, there is an on-island service for chronic viral hepatitis run by Dr Nikki Brink, who is primarily employed by HSC as Director of Public Health. There are good services in Radiology (including GI intervention), Histopathology Dietetics and Speech and Language Therapy. There is a Nurse Endoscopist and there are trained endoscopy nurses to assist with PEG/PEJ insertion and to change button PEGS. There is also an IBD specialist nurse.

There is a weekly endoscopy list with anaesthetic support. At present the ERCP service is provided off island.

There are weekly GI MDTs primarily dealing with cancer cases but also non-malignant GI disease such as IBD and Barrett's oesophagus.

Our team have a wide range of subspeciality interests and work cohesively to deliver high quality patient care to our local community.

Our Consultants

Dr S Evans	Geriatric Medicine (Stroke Disease & Syncope) & GIM. (Currently seconded to EPR project) Adult Medicine Directorate Chair
Dr Z Ali	GIM with an interest in Cardiology
Dr K Allen	Diabetes & Endocrinology & GIM
Dr W Anees	Respiratory Medicine, GIM & current lead for Cardiorespiratory Services
This post - new	Gastroenterology
Dr X Zhu	Oncology
Dr M Clynes	Rheumatologist
Dr R Copeland	GIM with an interest in Geriatric Medicine
Dr J Naftel	General and Acute Medicine
Dr T Saunders	Geriatric Medicine & GIM.
Dr P Gomes	Oncology
Dr P Harnett	Acute Medicine with a Renal interest
Dr A Khan	Gastroenterology
Dr Y Manikyam	Oncology
Dr A Matthew	Geriatric Medicine (Movement Disorders) & GIM
Dr T Tun (commencing 01 February 2027) Currently covered by Dr S Aman (locum)	GIM with an interest in Cardiology
Vacancy, currently covered by: Dr B Ridha (LTFT locum)	Neurology
Dr A Walker	Dermatology

Our general physicians are supported by an efficient and proactive managerial and secretarial team which comprises of a Directorate Manager, 13 Personal Assistants and 2 PA support positions.

Facilities and services

The Department of Medicine has approximately 2,000 admissions per year, most of which are non-elective. The weekday daytime acute medical rota is shared between the Physicians. This post is not part of the acute GIM on call rota. The Oncologists are also excluded from this rota as they run a 1:3 on call rota until 23:00 during the week and until 13:00 at the weekend.

Presently most unplanned admissions are assessed by the Duty Physician in the Emergency Department following referral from the emergency doctor or the community GPs.

The Princess Elizabeth Hospital has an excellent 7 bed Intensive Care Unit, of which 3 beds are used flexibly as Medical High Dependency/Coronary Care beds. There is a hospital modernisation program in progress which will increase the number of ITU/MHDU beds and upgrade the private wing. The acute medical wards have 48 beds in total and the Older Person/Rehabilitation Ward has 26 beds. There is a private ward for medical, surgical, orthopaedics and gynaecology, although at times is used for overflow medical patients.

Gastroenterology services

The successful applicant will be expected to help develop the GI service in collaboration with colleagues and to provide an integrated and high-quality service for patients. This will include trying to ensure that appropriate waiting times for clinic and endoscopy are adhered to and provided in an effective, safe and efficient manner and the principles of risk management and clinical governance are maintained.

At present colonoscopies for the BCS service are carried out by a Nurse Endoscopist who requires episodic but consistent operational support and guidance from this post.
The successful postholder may be required to act as clinical lead for the local bowel cancer screening programme for operational matters. Strategic leadership is already provided by external clinical advisers.

Outpatients

This post will include 2 or 3 general gastroenterology outpatient clinics per week. These are held at Alexandra House. They allow 30 minutes to assess a new patient and 15 minutes for follow-ups, but this may be varied by clinician. These include hepatology (excluding Hepatitis B & C) referrals.

Gastroenterological investigations and treatments are performed at the Princess Elizabeth Hospital. Approximately 200 “open access” (see below) patients are seen directly for consultation and endoscopy. A further 200+ patient episodes are seen in the Day Patient Unit (DPU) or Day Assessment Unity (DAU) at PEH for non-endoscopic procedures, such as venesection, iron infusion, anti-TNF therapy etc. The majority of venesections are now undertaken by the Haematology Department phlebotomists under the guidance of the Haematologists.

Endoscopy

Services provided, inclusive of most therapeutics are:

- Upper endoscopy (including stenting, banding etc)
- Flexible sigmoidoscopy
- Colonoscopy
- PEG
- PEJ
- Enteroscopy

ERCP, EUS, 24hr pH and oesophageal manometry, HALO and gastro-oesophageal EMR, and complex polyps potentially requiring ESD +/- advanced EMR are currently referred off-Island.

The BSG Guidelines for follow up of patients with Barrett's oesophagus and colonic polyps are followed.

Each week, one of the endoscopy lists is supported by the anaesthetic team.

There is no formal on call GI bleeding service. There is no formal open-access endoscopy service. All referrals are vetted and may then be seen directly for endoscopy and consultation if deemed appropriate.

There is a bowel cancer screening (BCS) service using FIT testing. This is currently supported by a BCS nurse who organises the FIT tests and interviews all prospective clients. If the FIT is positive, the client will be invited to have a colonoscopy.

There are currently no plans at present to introduce colon cancer screening for those with a family history of bowel cancer (other than those who fulfil the Amsterdam criteria). There are currently no plans to fund colonoscopy screening for families with a family history of colon cancer and if such clients wish to have a screening colonoscopy, this should be funded privately.

Local dyspepsia guidelines based in the NICE guidelines have been introduced in conjunction with HSC to help provide guidance and support to primary care in referring patients.

The faecal calprotectin testing is available to guide GP referrals to those most appropriate. GPs have been sent guidelines on the use of faecal calprotectin and FIT testing to help them decide on the appropriateness of the referral and it is expected that they are used to help rationalise referrals.

There is a high standard of GP care in Guernsey, who will provide many of the routine follow up services e.g., 6 monthly AFP and ultrasound screening of patients with cirrhosis, blood monitoring of patients on immune-suppressants and/or biologics. Biologics can be prescribed as clinically appropriate. However, not all drugs are available in Guernsey and the ones that are available are listed on Guernsey's White List. Requests can be made for drugs to be added to the White List.

The standard of endoscopy equipment is of high quality, and the endoscopy unit works well as a team. The rapid access to high quality, audited endoscopy is greatly valued. The Pentax EG series system is used (purchased in 2017), with a Sony digital capture unit and ScopePilot. The endoscopy suite equipment is due to be upgraded in coming months, with a procurement process underway. This includes replacement of stack systems, diathermy units and scopes, and is being undertaken in partnership with the NHS supply chain. Currently the computerised reporting system Endobase is used. Although this is not currently linked to the National Endoscopy Database (NED), the organisation is committed to progressing this.

ERCP is currently carried out off island at University Hospitals Southampton NHS Foundation Trust. However, consideration could be given to repatriating this service to Guernsey if the appropriate skills and resources are available.

New services planned

A sequenced introduction of the following services is planned:

- Flexible sigmoidoscopy screen for bowel cancer was introduced in 2013. When FIT testing was introduced in April 2018 the screening flexible sigmoidoscopy service was stopped. If a client is FIT positive, they undergo a colonoscopy under sedation. A propofol/GA service for screening colonoscopies is currently not funded. This screening is offered to people aged between 60 and 70, with the FIT test being carried out every 2 years if negative. If a person has had a clear colonoscopy following a FIT, then they can have a repeat FIT in 4 years' time provided they are fit enough.
- Colonoscopic screening for people with a family history of bowel cancer is currently not available on the contract.
- Hydrogen Breath tests have been introduced for Small Intestinal Bacterial Overgrowth and for Lactose Intolerance. An MSG nurse has been trained in performing the tests, which are then interpreted by the gastroenterologist.
- 24hr pH and oesophageal manometry is currently provided in UHS for contract and private patients.
- The development of off-island attachments to a tertiary hospital are to be encouraged to remain up to date and continue a good working relationship with UHS, which is our main gastroenterology tertiary provider.

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 10-11 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, any 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.

Clinical Duties

- To provide care for Gastroenterological patients in both inpatient and outpatient settings.
- To act as the clinical lead for the bowel cancer screening programme on operational matters and to provide support for the nurse endoscopist
- 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.
- To participate in the development of the adult medicine protocols and guidelines particularly relating to gastroenterology and its interactions with other subspecialties
- To develop and maintain collaborative professional relationships with medical colleagues in other specialties and participate in regular clinical meetings and other professional activities.
- To develop and maintain good communications with general practitioners and appropriate external agencies.
- Clinical Governance – active participation in all MSG governance processes.
- Quality improvement – lead approved quality improvement projects in your subspeciality area, to continually improve patient care.
- Education – to supervise and support allied health care professionals and medical students in training as required
- Administration – to complete administrative duties associated with your role in a timely manner.
- Work closely with the Directorate Manager to ensure the service remains efficient and optimises resources.
- Ensure appropriate record keeping using the designated EPR systems.
- Data protection – maintain good practice in handling of confidential information.
- Departmental activities – to support and contribute to departmental and wider MSG meetings.
- Appraisal and revalidation – adhere to these processes in the required timeframes.
- Maintain an up-to-date mandatory training record.
- Continuing Medical Education (CME) – be accountable for undertaking CME to maintain professional development.

Supporting Professional Activities

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

'The Academic Half Day' is a unique monthly multi-speciality educational half day meeting called. This comprises both a morbidity and mortality review and an academic session, bringing all hospital specialists together and delivers a broad educational programme – including external speakers.

Additional admin sessions are allocated (within job planning) to consultants with managerial roles with the department or the wider MSG.

Gastroenterology Job Plan

This indicative timetable will need to be determined with the successful applicant but would contain the following elements:

DCC: Minimum 8 PAs per week with admin time included.

SPA: 2 SPA per week (SPA time of 0.25 PA per week is acquired via monthly AHD, for which clinical activity is taken down)

The proposed timetable would be as below but is subject to change/development. It involves a suggested timetable for private practice which can be developed further.

Day	**08:00- 09:00**	**09:00-13:00**	**13:00-14:00**	**14:00-18:00**
Monday	Ward round	GI MDT and ward reviews	SPA	SPA
Tuesday	Ward round	Contract clinic	DCC admin	Endoscopy
Wednesday	Ward round	SPA – 2 hours Specialist nurse supervision – 2 hours	DCC admin	Private clinic inc. admin
Thursday	Physicians meeting	Endoscopy/Clinic (alternate weeks)	DCC admin	Contract clinic
Friday	Ward round	DCC admin Physicians x-ray meeting 12-1	DCC admin	Endoscopy

All Endoscopy lists have private and contract patients on them. On average the equivalent of 2 PAs will be contract and 1 PA private each week.

(SPA = Supporting professional Activity)

Additional private clinics can also be held on a Wednesday evening and Saturday morning.

Applications and visits

Informal enquiries about the post are welcome and can be made to Dr Steve Evans (Directorate Chair for Adult Medicine) stephen.evans@msg.gg or via Samantha Moutou (People & Organisation Officer) samantha.moutou@msg.gg or via our switchboard on 01481 238565.

Applications must be accompanied by a covering letter and CV and sent to recruit@msg.gg

Closing date for applications is **Monday, 07th December 2026** Applications will be reviewed as they are received, and the vacancy may close before the advertised closing date if a suitable candidate is identified.

Short listed candidates are encouraged to visit prior to interview.

Interviews planned for **January 2027.**

To find out more about The Medical Specialist Group LLP visit: 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 two consultant Partnership representatives form the Management Board.

The four Directorates are Adult Medicine (18 consultants), Anaesthetics (12 FTE Consultants), Surgery (16 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 income for the MSG comes primarily from the healthcare contract with the States (c.80%). The remaining balance is private earnings.

The Secondary Health 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 (Sark residents are treated as private patients). 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 four Consultant Emergency Doctors and eight 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 Haematological Oncology, Microbiology and some elements of renal medicine 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 Framework.

A local appraisal process is in place and upon joining you may be allocated an appraiser by the appraisal lead, if required. 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 system is in place 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 gastroenterologist. Within the rules of the LLP, consultants may be asked to join the Partnership at a stage that is favourable to both parties.

Consultants benefit from 35 days annual leave, 10 days funded study leave and the opportunity for up to 10 days 'off island attachment' per annum. 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 and 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 undertake integrated private practice, with additional remuneration
- Generous relocation package
- Private health insurance for yourself 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 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

	Essential Criteria	Desirable Criteria	Where evaluated
Professional Qualifications	Entry on GMC specialist register for Gastroenterology CCT (or entry expected within 6 months of interview) CESR or European community rights MRCP or equivalent Eligible to reside and work in the UK	Entry on GMC specialist register for GIM Higher degree JAG / BCSP accreditation	GMC Certification & certificate check Royal College Assessor CV
Clinical Experience, Skills, and Knowledge	Clinical training and experience equivalent to that required for gaining UK CCT in gastroenterology Ability to offer expert clinical opinion on a range of problems both emergency and elective within gastroenterology Ability to take full and independent responsibility for clinical care of patients Ability to integrate care of appropriate patients with the tertiary centre and establish personal links Ability to act as clinical lead for the local bowel cancer screening programme for operational matters	More than 1 year's experience at consultant level Expertise to develop a sub- specialty interest Ability to carry out ERCP	CV Interview References CCT Check
Quality Improvement, Management and IT	Ability to advise on the development of a specialist service and its smooth running.	Management course or evidence of management structures/processes	CV, interview, references

	Ability to organise and manage out-patient priorities Evidence of commitment to good clinical governance Commitment to administrative and managerial responsibility	Experience of managing a clinical service Knowledge/experience in utilisation of digitalised systems	
Teaching and Research	Ability to teach clinical skills to nursing, technical staff and medical students Ability to apply research outcomes to clinical practice	Instructor on recognised course Publications/research activity	CV Interview References
Personal Qualities	Honesty & reliability Ability to work in a small community Team working with ability to be flexible and adaptable to change Caring attitude towards patients Ability to communicate effectively (written & oral skills) with patients, relatives, GPs, nurses, staff and other agencies Ability to demonstrate good multidisciplinary High levels of emotional intelligence	Willingness to undertake additional responsibilities Commitment to developing the partnership	CV Interview References