Consultant Physician(s) (Ref: D16/SHOW)
Up to 10 PAs (2 EPAs negotiable)
£74,504-£100,446 per annum (pro rata) plus 8% on-call availability supplement
Flexible work pattern and/or part-time hours/jobshare may be an option
Relocation package of up to £8,000 available plus Distant Islands Allowance of £1,654 per annum (pro rata)

Frustrated working in a narrow specialism? Here is a great opportunity to use all your skills and knowledge

We are seeking a new Physician(s) to join the medical team in Shetland. As one of the general Consultant Physicians, you will be providing a comprehensive General Physician service to Shetland NHS Board and the people of the Shetland Islands. It is an exciting opportunity to practice and use a wide range of medical skills. We would consider elderly care/rehabilitation consultants who are interested in working partly in the community.

It is expected that all postholders whether full or part-time will participate in the on call rota with the aim of achieving a 1 in 4 rota. Additional training that is identified and agreed as necessary to undertake the wider role will be provided for successful candidate(s).

Our 22-bedded recently refurbished medical ward is located at the Gilbert Bain Hospital, Lerwick (where this post will be located) which is the only acute general hospital in Shetland serving a population of approximately 23,000 within the Shetland Health Board area and the 4000 offshore workers in the fishing and oil industries.

Rise to the challenge and enjoy the opportunity - Shetland is a wonderful place to live and work. Shetland offers low pollution, low crime, excellent schools, great leisure facilities, unique wildlife and amazing scenery, whilst still only a short flight away from the UK mainland. To find out more about living and working in Shetland go to www.shetland.org

Informal enquiries should be addressed to Dr Jim Unsworth (Consultant Physician) or Dr Pauline Wilson (Consultant Physician) at the Gilbert Bain Hospital - they can be contacted via the hospital switchboard on 01595 743000 or via email jim.unsworth@nhs.net or paulinewilson@nhs.net or Dr Roger Diggle, Medical Director on 01595  743697 or via email rogerdiggle@nhs.net

Closing Date: Friday, 7 June 2013

To find out more and to apply, please visit our website www.choosenhshsshetland.com or call 01595 743067 (24 hour answerphone), quoting reference number. All applications must be on our standard application form (CVs will only be accepted as enclosures to the application form). Details of all NHS Scotland Medical Vacancies can be found at www.medicaljobs.scot.nhs.uk

In promoting equal opportunities, we welcome applications from all sections of the community.
JOB DESCRIPTION

CONSULTANT PHYSICIAN

INTRODUCTION
This position is one of three general Consultant Physicians providing a comprehensive General Physician service to Shetland NHS Board and the people of the Shetland Islands. The post is located at Gilbert Bain Hospital, Lerwick and you will be responsible to the Chief Executive via the Medical Director, a senior clinician.

Although there are only 3 whole time equivalent consultant physician posts, as part of the development of this service NHS Shetland is hoping to work towards 1 in 4 on call rota.

GILBERT BAIN HOSPITAL
The Gilbert Bain Hospital, Lerwick, Shetland ZE1 0TB, is the only acute general hospital in Shetland and it serves both the population of approximately 23,000 within the Shetland Health Board area and the 4000 offshore workers in the fishing and oil industries. The hospital is a 3-storey building, opened in 1961, with an extension opened in 1991 and a modern Outpatient department completed in 2008.

The bed complement is:
- Ward 1: Surgical in-patients 26
- Day Surgery: 5
- Ward 3: Medical 22
- Ronas Ward: Slow stream rehabilitation, elderly and palliative care 12
- Maternity: 6

Ward 3
The medical unit is based on Ward 3 a recently refurbished 22 bedded medical ward with adjoining consultant and medical secretarial offices. The ward environment is mixed sex and consists of 4 single sex bays, 4 side rooms and a 2 bedded area that can be adapted to manage higher dependency or bariatric patients. Nursing staff are flexible and expected to help manage the genuinely unselected admissions on the unit.

Ronas Ward
Transferred from the Montfield Hospital site, this 12 bedded ward environment consists of 3 single sex bays and 5 side rooms and is used to accommodate patients with various needs. The clinical team is headed by one of the Consultant Physicians, Dr Pauline Wilson, and provides an environment that facilitates slow stream rehabilitation, some hospital based palliative care and patients who may have complex medical and nursing needs that require NHS care.
The Accident and Emergency Department serves not only the islands but also acts as a front-line station for personnel on marine vessels and offshore installations. A full range of medical and surgical conditions is treated, from minor injuries to major trauma requiring resuscitation, stabilisation and aero-medical evacuation to mainland Scotland. It is permanently staffed and has two fully equipped resuscitation bays, a plaster room and three individual cubicles. Medical cover is provided in-hours by a dedicated surgical junior doctor and junior medical staff, with support from a number of Nurse Practitioners. At night cover is provided by a medical junior doctor with medical, surgical and anaesthetic consultants available from home.

Ward 1 is a mixed-sex ward with 4 single sex bays, two side-rooms and a two-bedded High Dependency Unit. The surgical consultants share the 26 beds as needs dictate. Staffing levels are appreciably higher than on equivalent mainland wards and allow a thorough and patient-centred approach to surgical nursing.

The Day Surgery Unit provides 5 day-case beds staffed by dedicated Day Surgery nurses. Under anaesthetic direction nurse clerking for elective patients has been successfully piloted recently and is being introduced throughout the different surgical specialities, allowing junior staff to concentrate on direct surgical intervention.

The Theatre Suite was completed seven years ago and is spacious, modern and well equipped. It includes two large operating theatres with adjoining anaesthetic rooms, a four-bay Recovery Unit, communal rest-room facilities for nursing and medical staff. There is an extensive up-to-date range of surgical equipment including endoscopic and laparoscopic systems that enable the surgeon to undertake most elective and emergency procedures. Instrument sterilisation is undertaken within the integral HSDU and is compliant with the recent requirements for hospital sterilisation facilities.

The Outpatient Department is compact and friendly – a Band 7 staff nurse heads a nursing support team with extensive experience and extended skills. A ‘one stop’ surgical and pre-assessment clinic is established along with specialist nurse (MS, hypertension, stroke), dietetic and substance misuse clinics. Currently there are consultant led commitments in General Medicine, diabetes, thyroid disease/endocrinology, hypertension, rapid access chest pain, nephrology and rheumatology. Visiting specialist services provide expert support and there are established teleneurology and videoconference ENT/nasendoscopy.

Support Services are in line with those expected of a DGH. These include a full range of laboratory and radiological services, including diagnostic ultrasound, and a physiotherapy and occupational therapy department. A number of invasive radiological investigations are performed locally on a regular basis under the supervision of a visiting radiologist, and the radiology department has recently procured a digital CR/PACS which allows viewing of an electronic image anywhere
in the hospital. Images are sent digitally to NHS Grampian for reporting. A CT scanner is available.

**Five doctors working at ‘SHO’ level provide medical support.** Currently this consists of two General Practice trainees, one FY2 and 2 Core Medical Training. In addition there is one FY1 attached to the medical ward. Three Consultant Physicians provide comprehensive medical services.

There is currently one secretary apportioned to each Consultant Physician and any change to this would involve consultation with all of the Consultant Physician team. Standard office facilities include a personal laptop PC with IT support including Internet access, e-mail and electronic shared diary facilities.

**The hospital medical staff complement** is currently:

**General Medicine**
- Consultant 1: Dr Jim Unsworth FRCP (Lond)
- Consultant 2: Dr Pauline Wilson MRCP
- Consultant 3: Vacant (this post – replacement position)
- Trainees: 5 Trainees and 1 FY1

**Surgery and A&E**
- Consultant 1: Mr Gordon McFarlane ChM, FRCS
- Consultant 2: Mr Piotr Mikolajczak
- Consultant 3: Ms Beatrix Weber
- Specialty Doctor: Mr Kushik Lalla
- Trainees: 1 FY2, 3GP Trainees

**Anaesthesia**
- Consultant 1: Dr Catriona Barr FRCA
- Consultant 2: Dr Brodyn Poulton FRCA
- Consultant 3: Dr Jacek Swierczewski

In addition there are the following senior medical staff who are based in nearby premises:

- Dr Sarah Taylor Consultant in Public Health Medicine and Director of Public Health
- Dr Roger Diggle Medical Director
- Dr Susan Laidlaw Consultant in Public Health Medicine (Part Time)
- Dr Sergey Boyadjiev Locum Consultant Psychiatrist

**MANAGEMENT STRUCTURE**
NHS Shetland is unified Island Board and the Board is responsible for both primary and secondary care services and is accountable directly to the Scottish Executive. Formal medical representation at Board level is through the Medical and the Director of Public Health and the chairman of the Area Clinical Forum. A Senior Management Team (SMT) provides strategic and organisational direction to both hospital and community care. Primary Care is integrated into the overall structure via the
Community Health Partnership. Board philosophy is to involve and integrate senior clinicians into all relevant major aspects of health care management and strategy. Consultant interests are focused into a Consultants Group with the additional representation on the SMT and Board of the Medical Director. The Area Medical Committee, of which all consultants are automatically members is represented on the Area Clinical Forum. The Chair of the Area Clinical forum attends Board Meetings.

MEDICAL DEPARTMENT WORKLOAD
The department provides a comprehensive service for the residents of Shetland, visitors and people working off shore. To that effect the Physicians must complement each other and work together to provide as wide a range of services as possible. The remote nature of Shetland means that immediate resuscitation and stabilisation of a full range of emergency conditions is required. This includes provision of care for acutely ill children with telephone support from Consultant Paediatricians in Aberdeen. Transfer and specialist services can be via ferry, scheduled flight, air ambulance, MOD helicopter and both paediatric and adult retrieval teams, depending on the circumstances and severity of the illness. Acute Psychiatric patients will also be managed by the Physicians until such time as the patient can be transferred to Aberdeen.

Specialist services in Clinical Genetics, Paediatrics, Child Health, ENT, Ophthalmic, Orthopaedic, Plastic, Gynaecological and Maxillofacial surgery are sustained by visiting consultants from mainland Scotland at present, though there is ample scope for these and other sub-speciality interests to be developed locally. There is a good working relationship between the department and colleagues at Aberdeen Royal Infirmary, run both on informal and formal clinical network lines and where appropriate this allows the local clinician to have a significant input into the management of patients traditionally managed in tertiary centres or much larger District General Hospitals (DGHs).

Theatre is currently staffed for nine sessions per week: together with outpatient surgical clinics and a fracture clinic this comprises the bulk of the weekly work. In 2010 there were 965 medical in-patient admissions and 459 day cases. In addition 3153 people attended A&E with a medical problem, the peak attendance being during the summer months.

On –call commitment, whilst relatively onerous in terms of availability, is much less intense than that experienced in mainland DGH posts and the current high-intensity payments reflect the frequency rather than the intensity of each on-call period. It is unusual for the consultant to be called into the hospital more than once or twice a week, although telephone advice may be required, and there is rarely the need for emergency operating after 10 o’clock at night. Currently there is a clinical staffing review being undertaken to look at all aspects of sustainability of the medical workforce which will include reviewing the 1:3 rota. NHS Shetland is hoping to work towards a 1 in 4 on-call rota with a prospective 1 in 3 rota.
Consideration is being given to increasing the gynaecological surgery undertaken at the Gilbert Bain Hospital and this could include the appointment of a Consultant Obstetrician/Gynaecologist.

**A GUIDE FOR THE DEPARTMENTAL WEEKLY WORKPLAN (NEGOTIABLE WITH MEDICAL DIRECTOR)**

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<tr>
<th>DAY</th>
<th>AM</th>
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<tr>
<td>Monday</td>
<td>Joint Ward Round</td>
<td>Clinic *</td>
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<tr>
<td>Tuesday</td>
<td>Ward Work</td>
<td>SPA</td>
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<tr>
<td>Wednesday</td>
<td>Clinic *</td>
<td>Admin Time</td>
</tr>
<tr>
<td>Thursday</td>
<td>Clinic – General Medicine</td>
<td>Clinic *</td>
</tr>
<tr>
<td>Friday</td>
<td>Ward Round &amp; Teaching</td>
<td>Ward Work</td>
</tr>
</tbody>
</table>

*potential for developing speciality clinics/services by negotiation*

The job plan and work schedule will set out agreed arrangements for how work is organised, when it is performed, and how programmed activities are divided between Direct Clinical Care and Supporting Professional Activities. The job plan is subject to mutual agreement and will initially be reviewed by the Medical Director three months after commencement of employment. In accordance with Section 3 of the Terms and Conditions of Service, the job plan will be reviewed at least annually thereafter.

We will consider part/time or jobshare and are willing to be flexible regarding work patterns for the right candidate(s). We will also be interested in physicians who may be interested in working part of the time in a community based setting (such as elderly care homes).

**PRINCIPAL DUTIES**
The main duties and responsibilities of the post include:-

1. Provision, with consultant colleagues, of a General Medical Service to the Health Board: with responsibility for the prevention, diagnosis and treatment of illness and the proper functioning of the medical department.

2. Responsibility for the supervision and education of junior staff: it is expected that the post-holder will devote time to this activity on a regular basis undertaking the required appraisals and assessments as required by the North of Scotland Deanery. In addition the post-holder(s) will be expected to ensure that junior staff have access to advice and counselling and will act as the initial source of advice to such doctors on their careers. There is a requirement to actively participate in the teaching of medical students who attend from Aberdeen on a regular basis.

3. A requirement to undertake other appropriate clinical work on behalf of the Health Board such as domiciliary consultations.
4. A requirement to participate in medical audit and other aspects of clinical governance, continuing medical education, appraisal and revalidation procedures.

5. A requirement to work with local managers and professional colleagues in the efficient running of services, and to manage local waiting lists, times and other service delivery targets and guarantees in order to ensure the quality delivery of medical services.

6. An expectation to share with consultant colleagues in the medical contribution to management.

7. Subject to the provisions of Terms and Conditions of Service, a requirement to observe the Board’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 Shetland NHS Board: in particular, in formally managing employees of the Board, there is the requirement to follow the local and national employment and personnel policies and procedures.

8. A requirement to make sure that there are adequate arrangements for hospital and other staff involved in the delivery of medical care to be able to contact the post-holder when on-call. The Board will provide communications equipment as appropriate in order to facilitate this.

9. A requirement to respond positively within working hours or when on call to appropriate request for medical assistance wherever possible in the event of a major incident.

10. A requirement to comply with Board Health and Safety Policies.

**SPECIAL INTERESTS AND SKILLS**
A general medical sub-specialty is not essential but would be welcomed. It must be practicable to develop this within the clinical services in Shetland.

**CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT (CEPD)**
The Board recognises this to be a crucial aspect of the appointment as part of its provision of high-quality health care and responsibility for clinical governance. CEPD is undertaken not only in line with individual Personal Development Plans but also as part of departmental service development.
A medical library has been recently established and is rapidly evolving under the guidance of senior medical and nursing staff. Internet access, the e-library and an on-line retrieval system is available locally. Arrangements exist for access to the extensive medical library at Aberdeen Royal Infirmary for research and study purposes not catered for in Shetland.

CEPD programmes are encouraged and take full advantage of study leave opportunities. Requests are considered flexibly to allow for the difficulties of off-island travel. The Board is at the forefront of videoconference use as an innovative tool to support remote learning. In recognition of the potential difficulties of professional isolation the Board also looks favourably on short secondments to other units, especially if designed to update clinical skills or to further develop clinical networks.

Medical audit is regarded as an integral part of the CEPD package: assistance and guidance in performing medical audit is available from the Quality Department and from the Area Clinical Audit Committee. Regular inter-departmental meetings are being developed to capitalise on local expertise and to enhance cross-fertilisation of knowledge, and videoconferencing is used to access Deanery and Royal College Programmes. Inter-disciplinary ward ‘mortality and morbidity’/governance meetings are currently scheduled every two weeks.

Regular service-wide multi-disciplinary clinical governance activities are in place and the medical team plays an active part in these.

Outside the hospital the local Postgraduate Education Adviser organises an active postgraduate training programme for doctors in both primary and secondary care and all are encouraged to participate. In addition mainland experts are invited at intervals to lecture both to this group and to local symposia.

RESEARCH
Although research is not included as part of the proposed duties of this post the Board will provide active encouragement for the post-holder to pursue any personal research interest, as it would any area of appropriate professional development.

LEAVE
The post-holder will be entitled to six weeks annual leave per year in addition to the ten public holidays. Study leave of thirty days per triennium is allowed and there is funding available for approved study. Innovative working patterns to accommodate special interests can be discussed within the team following appointment. There is recognition of the complexities of travel to educational events in mainland UK and this is taken into account when study leave is requested. In order to maintain continuity of care and ensure uninterrupted awareness of local constraints to medical management, leave requests resulting in more than one medical consultant being absent simultaneously will only be granted in exceptional circumstances.
LOCUM ARRANGEMENTS
When the full establishment of three consultant physicians is in place, consultants are expected to provide internal cover for leave absences. Locum cover can be provided for a number of weekends on call. Extended periods of unplanned leave or extraordinary circumstances might necessitate extended locum consultant cover, which would be negotiated on an exceptional basis.

OTHER INFORMATION
a) There is a restriction on residence: this should be within a reasonable distance or travel time from the Gilbert Bain Hospital. Distances of more than 10 miles by road will need to be agreed with the Medical Director.

b) A full driving licence or the ability to make suitable arrangements to attend promptly for on-call purposes is an essential requirement for this role.

c) The post is classed as exposure prone and a certificate of immunity against Hepatitis “B” is required.

c) Written evidence of full registration as a Medical Practitioner with the General Medical Council must be produced as well as evidence of admission to the Specialist Register.

d) Proof of identity and evidence that you are entitled to live and work in the United Kingdom must be supplied.

e) The appointment will be subject to the Terms and Conditions of Service for Consultant Grade (Scotland) and the General Whitley Council. A Terms and Conditions statement is attached.
HOW TO APPLY AND TO ARRANGE INFORMAL VISITS

All applications should be on the Board’s employment application form with CV attached (CVs will be accepted only as enclosures to the application form). For an application pack, please contact the Human Resources Department, Brevik House, South Road, Lerwick, Shetland ZE1 0TG or telephone 01595 743067 (24 hour answerphone), email shet-hb.hradmin@nhs.net or visit our website at www.nhsscotland.com/shb

Your completed application should be submitted to the Human Resources Department, Shetland NHS Board, Brevik House, South Road, Lerwick, Shetland ZE1 0TG by the closing date of Friday, 7 June 2013. Fully completed applications will also be accepted by email to the email address above or by fax to 01595 690623.

Informal enquiries should be addressed to Dr Jim Unsworth (Interim Medical Director/Consultant Physician) or Dr Pauline Wilson (Consultant Physician) at the Gilbert Bain Hospital: They can be contacted via the hospital switchboard on 01595 743000 or via email jim.unsworth@nhs.net or paulinewilson@nhs.net or Dr Roger Diggle, Medical Director on 01595 743697 or via email rogerdiggle@nhs.net

Arrangements for informal visits can be made through Alistair Morgan, HR Assistant on 01595 743694 or by email to alistairmorgan@nhs.net. Please contact Dr Unsworth or Dr Wilson to discuss beforehand.

More information about living and working in Shetland (including transport links to mainland Scotland) can be found on both our own website on www.choosenhsshetland.com and the Visit Shetland website on www.shetland.org

Thank you for your interest. The Board hope that you will agree with them that the challenges and rewards of this position and life and work in Shetland are worth exploring further and we look forward to receiving your application.
# TERMS & CONDITIONS OF SERVICE

## CONSULTANT PHYSICIAN

The appointment will be subject to the Terms and Conditions of Service for Consultant Grade (Scotland) and the General Whitley Council.

1. **Location:** Gilbert Bain Hospital (but you may be required to travel to other locations)

2. **Hours of Work:** Up to 10 programmed activities (9 DCC: 1SPA) (2 EPAs may be available by negotiation). 1:3 on call rota (aim to achieve 1:4 on call rota)

3. **Salary:** £74,504 - £100,446 per annum pro rata based on seniority. This post attracts an 8% availability supplement. In addition to salary, all posts qualify for a Distant Islands Allowance of £1,654 per annum (pro rata for part-time and fixed term positions)

4. **Tenure:** Permanent

5. **Notice Period:** 3 months from either party

6. **Annual Leave:** 6 weeks per annum

7. **Public Holidays:** 10 statutory public holidays each year (pro rata for part-time)

8. **Other Leave:** Details of other types of leave including study leave, sick leave and special leave can be found in Section 7 of the Terms and Conditions of Service for Consultant Grade (Scotland).

9. **No Smoking:** Smoking is not permitted on any Board premises, with the exception of patients detained under the Mental Health Act

10. **Confidentiality:** All information regarding patients, staff personal information that employees may learn in the course of their duties must be treated as confidential. Unauthorised disclosure may lead to disciplinary action.
11. Pension: The appointment is superannuable under the NHS (Scotland) Superannuation Scheme unless the post-holder opts out in favour of another scheme or is ineligible to join.

12. Relocation: This post is eligible for removal expenses and benefits in accordance with the Board’s Relocation Procedures. There is a maximum of £8,000 related to any relocation package.

13. Health Screening: All offers of appointment are subject to an Occupational Health screening undertaken by the Board’s in-house service. Candidates invited for interview will be provided with a medical questionnaire for completion and may be asked to have a medical examination. The post is exposure prone and evidence of immunity to Hepatitis ‘B’ is required.
# PERSON SPECIFICATION

**Job Title:** Consultant Physician  
**Department:** Medical  
**Location:** Gilbert Bain Hospital

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<tr>
<th>FACTOR</th>
<th>ESSENTIAL</th>
<th>DESIRABLE</th>
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<tr>
<td><strong>EXPERIENCE</strong></td>
<td>Confident and competent in relevant practical procedures – chest drain, lumber puncture, temporary transvenous cardiac pacing Function effectively within a team Flexible approach to the wide ranging nature of medical services needed to function in an isolated remote environment</td>
<td>A complementary special interest or skill</td>
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<td><strong>QUALIFICATIONS</strong></td>
<td>Membership of the Royal College of Physicians Applicants must be on the GMC Specialist Register or within 6 months of the anticipated award of a CCT or CESR(CP) at the time of interview for the post, with a current licence to practice</td>
<td>Higher Qualification MD or equivalent Original research published in peer review journals</td>
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<td><strong>KNOWLEDGE AND SKILLS</strong></td>
<td>Broad knowledge of unselected acute medical management Capacity to deliver thrombolysis for myocardial infarction and stroke Demonstrable teaching ability Commitment to clinical audit</td>
<td>Evidence of management experience IT Literacy</td>
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<table>
<thead>
<tr>
<th>DISPOSITION</th>
<th>Ability to work in multidisciplinary and multi-centre teams</th>
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<tr>
<td>Service orientated&lt;br&gt;Good communication and interpersonal skills with patients, relatives, medical and nursing colleagues&lt;br&gt;Committed to training and CPD</td>
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<tr>
<td>OTHER</td>
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<td>Eligible to work in the UK&lt;br&gt;Full driving licence or ability to make suitable arrangements to attend promptly for on-call purposes.&lt;br&gt;Proof of Immunity against Hepatitis B.</td>
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