IMPERIAL COLLEGE HEALTHCARE NHS TRUST FACULTY OF MEDICINE, IMPERIAL COLLEGE LONDON

JOB DESCRIPTION Trust Grade/LAS

1. THE POST: Senior Clinical Fellows in Adult Intensive Care Medicine (3 posts)

2. IMPERIAL COLLEGE HEALTHCARE NHS TRUST

Imperial College Healthcare NHS Trust was created on October 1, 2007 by merging St. Mary's NHS Trust and Hammersmith Hospitals NHS Trust and integrating with the faculty of medicine of Imperial College London. One of the largest NHS trust in the country, we have come together to establish the UK's first academic health science centre (AHSC). The Trust has an annual turnover of over £950 million, approximately 10,000 staff, and it see over 500,000 patients a year.

The creation of the AHSC, a partnership between the NHS and Imperial College London, is a major advance for patient care, clinical teaching and scientific invention and innovation. The fusion of the different strands of our work and the achievements that can now be realised will lead to significant benefits for patients and greater advances in healthcare than could be delivered apart.

Imperial College Healthcare NHS Trust already has a world-leading reputation. Hammersmith and St Mary's hospitals have two of the highest clinical ratings in the country, rated second and third best Trusts for clinical performance, quality of care and safety.

The Trust was awarded the status of a generic Biomedical Research Centre by the National Institute of Health Research (NIHR) in 2006 for its excellence in translational and clinical research – one of only 5 in the UK.

Imperial College London has a campus on all main sites and is increasingly integrated with all the clinical specialties. The Clinical Sciences Centre of the Medical Research Council (MRC) is also based at Hammersmith Hospital providing a strong foundation for clinical and scientific research.

2.

THE AHSC VISION AND MISSION

The vision for our academic health science centre (AHSC) is that the quality of life of our patients and local populations will be vastly improved by taking the discoveries that we make and translating them into medical advances - new therapies and techniques - and by promoting their application in the NHS and around the world, in as fast a timeframe as is possible.

Our mission is to make our AHSC one of the top five AHSCs in the world within the next ten years, channeling excellence in research to provide world-class healthcare for patients.

Achieving this challenging mission will significantly improve the quality of healthcare for the local community, London and the UK as a whole, and enhance the UK's position as a global leader in biomedical research and healthcare.

Chairman CEO Medical Director Chief Financial Officer Sir Richard Sykes Dr Tracey Batten Dr Chris Harrison Alan Goldsman (interim) Professor Janice Sigsworth Professor Jonathan Weber

We need all our staff to work together to fulfil the promise of the AHSC, and all staff need to be inspired to share in making discoveries and finding new ways of treating patients. We are tearing down institutional barriers to enable this to happen, and devising new ways of working between doctors, scientists, nurses, administrators and managers. We have already made a start with our innovative Divisional Structure.

The clinical services of the Trust are organised into 4 Divisions which are clinician led and have the autonomy to organise themselves into optimum vehicles for the delivery of world class, integrated research and healthcare.

Divisions

Director

Medicine Surgery and Cancer/Clinical Haematology Investigative Services and Clinical Support Womens and Children Professor Tim Orchard Professor Jamil Mayet Professor Kikkeri Naresh Dr TG Teoh

Each Division has a Director of Research (usually a Head of Division) and a Director of Education, who will work with the Divisional Director to ensure that opportunities for translational research and postgraduate education for all staff are maximised.

3. IMPERIAL COLLEGE LONDON

Imperial College London consistently achieves one of the highest rankings nationally and internationally, as listed in the Times Higher QS World University Rankings 2010-2011.

The Rector, Sir Keith O'Nions FRS, is the College's academic head and chief executive officer. The Chairman of the Court and Council is Baroness Eliza Manningham-Buller.

3.1 The Mission

Imperial College embodies and delivers world class scholarship, education and research in science, engineering and medicine, with particular regard to their application in industry, commerce and healthcare. We foster interdisciplinary working internally and collaborate widely externally.

3.2 Strategic Intent

The College's vision and intent is to:

Continue to be a world-leading institution for scientific research and education,

To harness the quality, breadth and depth of our research capabilities to address the difficult challenges of today and the future,

To develop the next generation of researchers, scientists and academics,

To provide an education for students from around the world that equips them with the knowledge and skills they require to pursue their ambitions,

To make a demonstrable economic and social impact through the translation of our work into practice worldwide,

To engage with the world and communicate the importance and benefits of science to society.

3.3 Formation and History

Imperial College was established in 1907 in London's scientific and cultural heartland in South Kensington, as a merger of the Royal College of Science, the City and Guilds College and the Royal School of Mines. St Mary's Hospital Medical School and the National Heart and Lung Institute merged with the College in 1988 and 1995 respectively and Charing Cross and Westminster Medical School and the Royal Postgraduate Medical School merged on 1 August 1997, thereby creating the Faculty of Medicine. The Kennedy Institute of Rheumatology became a Division of the Faculty of Medicine in 2000. In addition to the Faculty of Medicine there are the Faculties of Engineering, Natural Sciences, and Medicine and the Tanaka Business School.

In July 2007 the Queen granted a new royal charter which declared Imperial College an independent university in its own right, awarding its own degrees. Until then Imperial was an independent constituent part of the University of London, awarding University of London degrees.

3.4 Staff and Students

The academic and research staff of 3,397 includes 72 Fellows of the Royal Society, 77 Fellows of the Royal Academy of Engineering, 81 Fellows of the Academy of Medical Sciences, one Fellow of the British Academy, four Crafoord Prize winners and two Fields Medalists. Fourteen Nobel Laureates have been members of the College either as staff or students.

The College has 14,342 students, of whom 37 percent are postgraduate. Thirty per cent of students come from outside the European Union. External assessment of the College's teaching quality in many different subject areas has been judged to be of high standard. The proportion of women students is 36 percent of the total.

3.5 Research

The quality of the College's research has been judged consistently to be of the highest international standard and the proportion of income from research grants and contracts is one of the highest of any UK university.

The concentration of research in science, engineering and medicine gives the College a unique and internationally distinctive research presence. Interdisciplinary working is fostered at the College through its institutes and centres, which include the Institute of Biomedical Engineering, the Grantham Institute for Climate Change and the Energy Futures lab. Their strength lies in the expertise drawn together from across Imperial to tackle some of the world's greatest problems.

Imperial's enterprise culture ensures that discoveries in the lab are quickly translated to the market place. The technology transfer company Imperial Innovations draws upon a pipeline of technology emanating from Imperial's research. In 2006-07 the company had equity holdings in 74 companies. The College made 366 invention disclosures to the company during the same period.

3.6 Teaching and Learning

The College's overall educational aim is to ensure a stretching and exhilarating learning experience. While maintaining its traditional emphasis on single honours degree courses, Imperial also aims to give students the opportunity to broaden their experience through courses relevant to student and employer needs.

In its MSc. course provision, the College seeks to provide a wide range of specialist courses in areas in which it has particular expertise. Many of those offered by non-medical departments emphasise the valuable interaction between scientific/technological training and industrial experience, whilst those offered by the medical departments focus on subjects at the interface between basic science and medicine and on specialist education for doctors and other health professionals in training. In addition, the College's wide range of PhD programmes reflect its aim of pursuing research at the frontiers of scientific, engineering, management and medical knowledge and the increasingly interdisciplinary nature of this research. The Centre for Educational Development raises and consolidates the profile of learning, teaching and educational development throughout the College. Newly-appointed non-clinical lecturers will be expected to develop and expand their teaching skills, and there are many learning and teaching activities for more experienced staff.

On 1 October 2011, the Graduate School of Life Sciences and Medicine merged with the Graduate School of Engineering and Physical Sciences, to form a single entity. The merged Graduate School is the focus of postgraduate education and research and maintains, enhances and monitors quality, disseminates best practice, while initiating and developing new programmes, particularly those with an interdisciplinary slant. It also has quality assurance responsibilities for the two non-faculty departments of Humanities and the Business School.

The College's teaching quality is audited regularly, both internally and externally. Recent external audit found teaching quality to be of a high standard.

3.7 Location

The College now has one of the largest operational estates of any UK University. It includes seven central London campuses: the main South Kensington Campus, Charing Cross Campus, Chelsea and Westminster Campus, the Hammersmith Campus, the Northwick Park Campus, the Royal Brompton Campus and St Mary's campus; there are also two campuses outside London: the Silwood Park and Wye Campuses.

Silwood Park, a postgraduate campus at Ascot in Berkshire, houses the Ecology and Evolution Section of the Biology Division, in the Department of Life Sciences. The successful Master's courses in Crop Protection, Forest Protection and Ecology, Evolution and Conservation are run at Silwood together with the newly created Master's course in Conservation Science, and there is a thriving postgraduate community. The campus houses excellent research facilities and a wide range of natural environments. The NERC funded Centre for Population Biology is also based at Silwood, together with a Business Centre.

3.8 THE FACULTY OF MEDICINE

The Faculty of Medicine is one of Europe's largest medical institutions – in terms of its staff and student population and its research income. It was established in 1997, bringing together all the major West London medical schools into one world-class institution. It maintains close links with a number of NHS Trusts with whom it collaborates in teaching and research activities.

Although on several sites, its academic Schools, Institutes and Departments function as one Faculty, fully integrated within the College. The current Dean, Professor Dermot Kelleher, took up his appointment in October 2012.

There are five academic Schools, Institutes and Departments:

Schools, Institutes and Departments Head of School/Institute/Department

- Department of Medicine
- Department of Surgery and Cancer
- Institute for Clinical Sciences
- National Heart and Lung Institute
- School of Public Health

Faculty Centre

Dean Vice Dean and Director of Education Vice Dean (Research) Director of the Graduate School Professor Gavin Screaton Professor Jeremy Nicholson Professor Amanda Fisher Professor Kim Fox Professor Elio Riboli

Professor Dermot Kelleher Professor Jenny Higham Professor Jonathan Weber Professor Susan Gibson

3. THE WORK OF THE DEPARTMENT

The directorate of Critical Care and Anaesthetics sits within the division of Surgery, Cancer and Cardiovascular sciences, headed by Dr Jamil Mayet. The directorate manages 4 critical care units on 3 sites (Charing Cross Hospital 15 beds, St Mary's Hospital 16 beds, Hammersmith Hospital GICU 16 beds, Cardiac ICU 16 beds). The 4 units have a close working relationship and together provide critical care services to support local tertiary level specialist centres as well as providing general critical care services to the local populations. The throughput between all units is more than 3000 admissions per year. The facilities at all 3 sites are very modern. All beds are fully equipped with standardized modular monitoring and with information technology allowing access to pathology and radiology results and patient documentation. 2 of our units (HH GICU and SMH) use ICIP documentation and are paper free with electronic prescribing.

Within Imperial College Healthcare NHS Trust we provide the vast majority of clinical and tertiary level specialties to the North West London population and this is reflected in the specialism of each unit. Charing Cross specialties include neurosciences, head and neck cancer surgery, complex urology and oncology in addition to general surgery and medicine. Charing Cross Hospital is one of the busiest neuroscience centres in London providing a full range of neurology, neurosurgery and neuro-radiology services. We have a leading HASU (Hyper Acute Stroke Unit) named as the best performing unit in England.

Hammersmith Hospital is major cardiovascular centre with a primary angioplasty service, tertiary cardiology services and cardiothoracic surgery. It is also the site of the North West London renal centre which takes referrals from around the region and also performs a large amount of renal transplantation. Other tertiary specialties include haematology and haem-oncology, gynae-oncology and hepato-biliary surgery. The world renowned Queen Charlotte's and Chelsea Hospital specialising in women's, maternity and children's services is also based at the Hammersmith Hospital site.

St Mary's is a top performing Major Trauma Centre of which the ICU forms an integral part. The NW London trauma centre outcomes have been rated as the best in country according to TARN data. Other tertiary specialties include vascular surgery, complex GI surgery, plastic and reconstructive surgery as well as general surgery and medicine and a busy obstetric unit.

All 3 units participate in national audit run by the Intensive Care National Audit and Research Centre (ICNARC) and standardized mortality ratios are consistently low in all our ICUs. This is in no doubt partly due to a high level of consultant input and commitment and a focus on high quality care. The St Mary's unit has recently received a "Good" rating from the CQC. The intensive care units work on the recommended principle of a closed unit with close involvement of referring clinicians and specialist teams. All decision making is channeled through the consultant intensivist to ensure a consistent patient focused strategy.

Each ICU is staffed by a team of consultants supported by middle grade and junior resident tiers of trainees. Dr Roseanne Meacher FRCP FRCA EDIC FFICM is the current Head of Specialty for Intensive Care Medicine. The units are staffed by a full multi-disciplinary team with nursing ratios of 1:1 or 1:2 depending on acuity. A dedicated team of data collectors, audit and research nurses administers our critical care specific database. A nurse led critical care outreach team is present at CXH and SMH with current plans to expand onto the Hammersmith site.

Three posts are offered one based at Charing Cross Hospital, one at Hammersmith Hospital and one at St Mary's Hospital. The posts are initially offered for 1 year and will be extended to 2 years on agreement based on satisfactory performance. We aim to offer suitable candidates a range of clinical experience across different specialties by rotating appointees across sites (minimum 6 months at each site within the trust). Over possibly 2 years appointees should experience the full range of ICU specialties.

Consultant Staff

Dr Roseanne Meacher FRCP FRCA EDIC FFICM – Head of Specialty for ICM

Dr Sarah Gordon MD FRCA DICM – Hospital tutor for ICM (CXH)

Dr Adrian Steele MRCP, FRCA – Clinical governance lead (CXH)

Dr Anthony Gordon MD FRCA FFICM - Clinical Senior Lecturer in ICM and research lead

Dr Doris Doberenz FRCA EDA EDIC FICM – M&M lead

Dr Francesca Rubulotta PhD – Educational lead for board of European Society of Intensive Care

Dr David O'Callaghan PhD - (Locum Consultant)

Dr Stephen Brett

Dr Robert Broomhead

Dr Parind Patel – Hospital Tutor for ICM (Hammersmith Hospital)

Dr Umeer Waheed

Dr Richard Stumpfle- Clinical governance lead (HH)

Dr Simon Ashworth

Dr Maribel Manikon – Hospital tutor for ICM (St Mary's Hospital)

Dr Richard Leonard – Undergraduate lead and Honorary Clinical Senior Lecturer in ICM

Dr Andrew Hartle – Honorary Clinical Senior Lecturer in ICM and clinical governance lead, current president of the Association of Anaesthetists of Great Britain and Ireland

Dr Carlos Gomez PhD – M&M lead

Dr Martin Stotz PhD – Honorary Clinical Senior Lecturer in ICM

Dr Vanessa Garnelo Ray (Locum Consultant) - trauma lead

4. **RESEARCH ACTIVITIES**

There is an active research programme within the department funded by numerous awards and supported by a dedicated research team. Dr Anthony Gordon runs the clinical research programme and is an NIHR clinician scientist. He leads the "Emergency & Critical Care" theme within the Imperial Clinical Trials Unit and is Director of Research in the Intensive Care Foundation. The section of Anaesthesia, Pain Medicine and Intensive Care (APMIC) at Imperial College is one of the most successful and active research departments in European academic anaesthesia. There is a current commitment to further expand academic anaesthesia and critical care with the development of new posts and new research initiatives into the areas of major trauma and perioperative medicine (working closely with the Division of Surgery).

Our department is leading a number of major clinical trials within the UK, including a double blind randomised controlled trial of vasopressin in septic shock (VANISH), Levosimendan in septic shock (LEOPARDS) and methylnaltrexone (MOTION). We have recently led or been involved in trials of nutrition (CALORIES), interferon in ARDS (FARON), and into traumatic brain injury (EUROTHERM and Rescue ICP). We propose to contribute to the FARON 3 study shortly. The department has strong links with basic scientists at Imperial College and the Academic Health Science Centre (AHSC) which is allowing us to develop ground breaking and truly translational research and therapies in genomics and metabonomics.

Other clinical research interests include ventilator associated pneumonia, Selective Decontamination of the Digestive tract, tracheostomy management and its long term outcomes and genetic studies in sepsis. The units also participate in a number of other external academic and industry sponsored randomised controlled trials.

We have a team of full-time research nurses to help recruitment into clinical trials. In addition the Intensive Care database AcuBase provides electronic data on all ICU admissions for the last 21 years, suitable for observational studies. This allows junior staff, supervised by a consultant, to perform clinical audit and to develop their own projects. We also have several clinical research fellows undertaking PhDs with Imperial College.

All staff in the department at each site are expected to support departmental research by involvement with planning, implementation and enrolment into research projects and implementation of research evidence. We expect successful applicants to develop research interests and their own projects within time.

5 TEACHING ACTIVITIES

Both postgraduate and undergraduate teaching activities take place in the units. The units are fully accredited for training in intensive care medicine and receive trainees from schemes in anaesthetics, medicine, ACCS and surgery as well as senior trainees in ICM. All juniors are required to attend teaching and journal clubs presenting topics on intensive care. We run BASIC and beyond BASIC courses in the department both of which have received excellent feedback. Trainees are also encouraged to attend numerous other courses provided by the trust and free transfer training courses run by the North West London critical care network.

At undergraduate level, students from Imperial College London Medical School are attached to the units for 1 week critical care blocks during their 5th year. Teaching activity is supported by teaching courses run by the College.

All staff are expected to teach all levels at the bedside as well as getting involved with other training events. Consultants are allocated trainees and fellows and act as their educational or clinical supervisor.

SECTION 2

THE POST

Title of Post:	Senior Clinical Fellows in Adult Intensive Care Medicine (3 posts)		
Main site of activity: 1 post Charing Cross Hospital			
	1 post Hammersmith Hospital		
	1 post St Mary's Hospital		
	Posts to rotate at 6 or 8 month intervals		
Responsible to:	Dr Roseanne Meacher - Head of Specialty		
Accountable to:	Dr Roseanne Meacher – Head of Specialty		

Background to the Post

These posts are to provide middle grade cover and experience at Imperial College Healthcare NHS Trust. One post on each site, rotating between sites. Initially posts will be offered for 1 year but may be extended to 2 years by agreement and depending on satisfactory performance.

Role Summary

The ICU clinical fellows would be expected to join the middle grade tiers of doctors who provide cover for the units.

Genesis of post i.e. new or replacement

Replacement posts.

Duties and responsibilities

When on duty for ICU the fellow will see referrals and will be expected to make assessments, initiate management and investigation of patients and also liaise with other teams. All junior grades work in close cooperation with the consultants. The ICM middle grades are expected to take an active role in supervision and training of more junior colleagues on the unit and medical students who are frequently attached to the ICU.

Outline Timetable

This will vary according to site – generally a minimum of twice daily multidisciplinary consultant ward rounds on each site, weekly MDTs and X ray meetings. Daily afternoon meeting or ward round with a consultant or SpR in Infectious Diseases/Microbiology. Some ward rounds are delegated to the middle grade doctors with consultant background cover and discussion.

Shifts vary in length from 8 to 13 hours. The work pattern amounts to an average of less than 48 hours per week (including weekends) for all grades.

We run a full 7 day service.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM	8am						
	consultant						
	ward round						
PM	Consultant						
	ward round						

Regular meetings: Monthly M&M Meetings, teaching and journal clubs, monthly quality meetings, weekly hospital grand round and medical meetings.

All junior doctors get an **induction day**, organized by the hospital and the local tutor for intensive care medicine and electronic and printed induction and educational material.

Network transfer training and BASIC courses available at minimal or no cost.

The trust also provides a wide range of courses in management topics and Information technology (often free of charge or at low cost) in the postgraduate centres at Charing Cross, Hammersmith and St Mary's hospital.

Intensive Care staff also get access to ALS courses at the trust.

On call: Full shift or partial shift pattern on each site with 1 A banding. Frequency of night shifts not expected to be more than 1 night in 5.

SECTION 3 - MAIN CONDITIONS OF SERVICE FOR MEDICAL STAFF

The post holder will be indemnified by the Trust for all NHS work undertaken as part of his/her contract of employment.

The post holder is encouraged to take out adequate defence cover as appropriate to cover him/her for any work that does not fall within the scope of the indemnity scheme (contract of employment).

Hours per week:	40
Rotas:	1A-50% Banding
Salary scale:	£30,002 - £47,175 pa
London Weighting:	£2,162pa

Trust arrangements for adherence to the EU Working Time Directive are in place.

Clinical Governance and Risk Management

The Trust believes everyone has a role to play in improving and contributing to the quality of care provided to our patients. As an employee of the Trust you are expected to take a proactive role in supporting the Trust's clinical governance agenda by:

-Talking part in activities for improving quality such as clinical audit

-Identifying and managing risks through incident and near miss reporting and undertaking risk assessments

-Following Trust polices, guidelines and procedures

-Maintaining your continue professional development

All Clinical staff making entries into patient health records are required to follow the Trust standards of record keeping

All staff have a responsibility to report all clinical and non-clinical accidents or incidents promptly and when requested to co-operate with any investigation undertaken.

Information Quality Assurance

As an employee of the Trust it is expected that you will take due diligence and care in regard to any information collected, recorded, processed or handled by you during the course of your work and that such information is collected, recorded, processed and handled in compliance with Trust requirements and instructions.

Freedom of Information

The post holder should be aware of the responsibility placed on employees under the Freedom of Information Act 2000 and is responsible for helping to ensure that the Trust complies with the Act when handling or dealing with any information relating to Trust activity.

Management of a Violent Crime

The Trust has adopted a security policy in order

- to help protect patients, visitors and staff
- to safeguard their property

All employees have a responsibility to ensure that those persons using the Trust and its services are as secure as possible.

Pension Scheme

Membership of the NHS Pension Scheme is available to all employees over the age of 16. Membership is subject to the regulations of the NHS Pension Scheme, which is administered by the NHS Pensions Agency. Employees who subsequently wish to terminate their membership must complete an opting out form - details of which will be supplied upon you making a request to the

Trust's Pensions Manager, based in payroll. A contracting-out certificate under the Pension Schemes Act 1993 is in force for this employment and, subject to the rules of the Scheme, if you join the Scheme your employment will be contracted-out of the State Earnings Related Pension Scheme (SERPS).

Health and Safety at Work

- a) It is the duty of every employee while at work not to intentionally or recklessly interfere with anything provided in the interest of health and safety, including anything provided in pursuance of statutory provision.
- b) It is the duty of everyone while at work to take reasonable care of the Health and Safety of themselves and other persons who may be affected by acts or omissions at work.
- c) It is the duty of every employee while at work to co-operate with the employer in ensuring that all statutory and other requirements are complied with.

Statutory Medical Examination

All appointments are conditional upon prior health clearance by the Trust's Occupational Health Service. Failure to provide continuing satisfactory evidence will be regarded as a breach of contract.

Professional Registration/Licence to Practice

Staff undertaking work which requires professional/state registration/licence are responsible for ensuring that they are so registered/licensed and that they comply with any Codes of Conduct applicable to that profession. Proof of registration/licence to practice must be produced on appointment and, if renewable, proof of renewal must also be produced.

Disclosure and Barring Service

Applicants for posts in the NHS are exempt from the Rehabilitation of Offenders Act 1974. All applicants who are offered employment will be subject to a Disclosure and Barring Service check before the appointment is confirmed. This includes details of cautions, reprimands, final warnings, as well as convictions. Further information is available from the Disclosure and Barring Service website at https://www.gov.uk/government/organisations/disclosure-and-barring-service

Equal Opportunities

The Trust believes that all employees have the right to be treated with dignity and respect. Failure to comply with or adhere to the Trust's Equal Opportunities Policy will be treated as misconduct under the Trust's Disciplinary Policy and Procedure

The Trust requires that in return you treat others with dignity and respect and that you do not harass or otherwise discriminate against any other member of staff, patient or visitor to the Trust or employees of any associated employers or contractors of the Trust on the grounds of race, colour, sex, age, disabilities, religious beliefs or sexual orientation.

Fitness to Practice

Prior to making an appointment to a post, the Trust needs to establish if applicants for such positions have ever been disqualified from the practice of a profession or required to practise subject to specified limitations following fitness to practise proceedings by a regulatory body in the UK or in another country, and whether they are currently the subject of any investigation or proceedings by any body having regulatory functions in relation to health/social care professionals, including such a regulatory body in another country.

Car Parking and Public Transport

There are pay and display and permit holders only car parks at all hospital sites. Information on transport links is available at http://www.imp..nhs.uk/maps/map.htm

Security

Employees are required to wear security badges at all times

Variation

The job description gives a general outline of the duties of the post and is not intended to be an inflexible or finite list of tasks. It may be varied, from time to time after consultation with the post holder.

Professional Association/Trade Union Membership

It is the policy of the Trust to support the system of collective bargaining and as an employee in the Health Service you are therefore encouraged to join a professional organisation or trade union. You have the right to belong to a trade union and to take part in its activities at any appropriate time and to seek and hold office in it. Appropriate time means a time outside working hours.

Work Visa/ Permits/Leave to Remain

If you are a non-resident of the United Kingdom or European Economic Union, any appointment offered will be subject to the Resident Labour Market test (RLMT). The Trust is unable to employ or continue to employ you if you do not obtain or maintain a valid Right to Work (leave to remain).

Safeguarding children and vulnerable adults

Post holders have a general responsibility for safeguarding children and vulnerable adults in the course of their daily duties and for ensuring that they are aware of the specific duties relating to their role.

Confidentiality

The post-holder must maintain confidentiality of information about staff, patients and health service business and be aware of the Data Protection Act (1984) and Access to Health Records Act (1990).

Conflict of Interests

You may not without the consent of the Trust engage in any outside employment and in accordance with the Trust's Conflict of Interest Policy you must declare to your manager all private interests which could potentially result in personal gain as a consequence of your employment position in the Trust. In addition the NHS Code of Conduct and Standards of Business Conduct for NHS Staff require you to declare all situations where you or a close relative or associate has a controlling interest in a business (such as a private company, public organisation, other NHS or voluntary organisation) or in any activity which may compete for any NHS contracts to supply goods or services to the Trust. You must therefore register such interests with the Trust, either on appointment or subsequently, whenever such interests are gained. You should not engage in such interests without the written consent of the Trust, which will not be unreasonably withheld. It is your responsibility to ensure that you are not placed in a position which may give rise to a conflict of interests between any work that you undertake in relation to private patients and your NHS duties.

Code of Conduct

All staff are required to work in accordance with the code of conduct for their professional group (e.g. Nursing and Midwifery Council, Health Professions Council, General Medical Council, NHS Code of Conduct for Senior Managers).

NHS Constitution

The NHS Constitution establishes the principles and values of the NHS in England. You should aim to maintain the highest standards of care and service, treat every individual with compassion and

respect, take responsibility for the care you provide and your wider contribution, take up training and development opportunities provided, raise any genuine concern you may have about a risk, malpractice or wrongdoing at work, involve patients, their families and carers fully in decisions, be open if anything goes wrong and contribute to a climate where the reporting of, and learning from, errors is encouraged. You should view the services you provide from a patient's standpoint and contribute to providing fair and equitable services for all.

The above is a brief summary; you are encouraged to access the full document at: www/nhs.uk/constitution

Infection control

It is the responsibility of all staff, whether clinical or non-clinical, to familiarise themselves with and adhere to current policy in relation to the prevention of the spread of infection and the wearing of uniforms.

Clinical staff – on entering and leaving clinical areas and between contacts with patients all staff should ensure that they apply alcohol gel to their hands and also wash their hands frequently with soap and water. In addition, staff should ensure the appropriate use of personal protective clothing and the appropriate administration of antibiotic therapy. Staff are required to communicate any infection risks to the infection control team and, upon receipt of their advice, report hospital-acquired infections in line with the Trust's Incident Reporting Policy.

Non clinical staff and sub-contracted staff – on entering and leaving clinical areas and between contacts with patients all staff should ensure they apply alcohol gel to their hands and be guided by clinical staff as to further preventative measures required. It is also essential for staff to wash their hands frequently with soap and water.

Staffs have a responsibility to encourage adherence with policy amongst colleagues, visitors and patients and should challenge those who do not comply. You are also required to keep up to date with the latest infection control guidance via the documents library section on the intranet.

No Smoking

The Trust operates a non-smoking policy.

Preliminary Visits

Candidates may discuss the post and arrange visits with: Dr Roseanne Meacher - roseanne.meacher@imperial.nhs.uk