

Working for NHS Shetland

Consultant Anaesthetist posts x 3



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This post requires the post holder to have a PVG Scheme membership/record. If the successful applicant is not a current PVG member for the required regulatory group i.e. child and/or adult, then an application will need to be made to Disclosure Scotland and deemed satisfactory before the successful post holder can commence work.

Section 1: Person Specification

REQUIREMENTS	ESSENTIAL	DESIRABLE
Qualifications and Training	<p>GMC Registered medical practitioner</p> <p>FRCA or equivalent</p> <p>Be on, or eligible for inclusion on, within 6 months of interview the GMC Specialist Register for Anaesthesia with a licence to practice.</p>	<p>Additional post-graduate qualifications, e.g. MD/PhD/MSc</p> <p>Additional sub-specialty training in obstetric anaesthesia or pain medicine</p>
Experience	<p>Experience in general adult anaesthesia, general obstetrics, gynaecology, vascular, emergency ENT and elective general surgery</p>	<p>Subspecialty training or fellowship in a relevant discipline e.g. preoperative medicine, acute or chronic pain, anaesthesia.</p>
Ability	<p>Ability to take full responsibility for independent management of patients</p>	
Teaching and Audit	<p>Experience of:</p> <ul style="list-style-type: none"> • Quality improvement work • Scottish Patient Safety Programme • Clinical Audit • Formal and informal teaching and training of trainee doctors, medical students and other clinical staff 	<p>Experience of simulation training</p>

Motivation	Evidence of commitment to: <ul style="list-style-type: none"> • patient-focused care • continuous professional development and life-long learning 	Desire to develop services for patients
Team Working	Ability to work in a team with colleagues in own and other disciplines Ability to organise time efficiently and effectively Reliability Excellent communication skills	Ability to motivate colleagues Evidence of previous managerial training and experience
Circumstances of Job	There will be rostered out of hours working.	

Section 2: Introduction to Appointment

Job Title: Consultant Anaesthetist

Department: Anaesthesia

Post Summary:

We are looking to appoint 3 full time consultant anaesthetists to work in NHS Shetland who will work at the Gilbert Bain Hospital, Lerwick. Whilst the post is of a general nature every effort will be made to accommodate a successful candidate's subspecialty interest. Subspecialty interest in pain medicine, trauma, and obstetric anaesthesia could be accommodated and these skills would be particularly advantageous.

Anaesthetic department function and workload

The Department provides comprehensive general anaesthetic and critical care services. In addition, because of the remote nature of Shetland there is the necessity for anaesthetists to operate outside their core skills when the occasion arises – for instance to provide an enhanced trauma resuscitation service, to provide expertise in the resuscitation and stabilisation of neonates and paediatric patients, and to reap the reward of being able to adapt core anaesthetic skills to suit unpredictable and potentially challenging clinical scenarios arising outside the traditional theatre-based environment.

In keeping with the broad nature of the workload each anaesthetist is expected to have a broad range of anaesthetic skills encompassing generalist, paediatric, obstetric and critical care fields. Case load is such that each anaesthetist is able to maintain essential skills but at the same time develop an individualised patient-centred anaesthetic plan that easily incorporates pre-and post-operative visits without compromise due to time constraints. In addition to this, a successful Chronic Pain Clinic was developed, including both outpatient consultation and interventional work. There is a good working relationship between the department and colleagues at Aberdeen Royal Infirmary and each anaesthetist would be eligible for Honorary Consultant status with Grampian Health Board, for the purposes of regular periods of secondment for professional development and skills refreshment which might include direct patient care.

Departmental workload includes sessional commitments to elective and emergency anaesthesia, pain services, anaesthetic pre-assessment and High Dependency as in the departmental weekly service plan shown below. Sessions would be apportioned on an equal footing to each consultant according to their own interests, their job and development plans, the requirements of the service and the resources available

On-call commitment, whilst relatively onerous in terms of availability, is much less intense than that experienced in most mainland DGH posts. It is unusual for the on-call consultant to be required in the hospital after 16:00 more than once or twice a week, although telephone advice may be required. There is rarely the need for emergency anaesthesia after 10 o'clock at night. On-call would primarily be 1:4, but provision of internal cover for absence would necessitate periods of 1:3.

Example Work plan

7 Direct Clinical Work
2 SPA

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM 8am-12 noon	List	List	O/C/HDU/PO A	SPA	O/C	One in Four	One in Four
PM 12 noon-4pm	List	List	O/C/HDU/PO A	SPA		One in Four	One in Four
OC 4pm-8am			O/C			One in Four	One in Four + 3PA for out of hours

** An additional 10 weekday nights on call would be required (see working above) and these could be arranged flexibly to suit staffing levels in the department as well as other commitments.*

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.

All posts are offered according to the Terms & Conditions of the 2003 Consultant Contract (Scotland) including all subsequent modifications to this. In addition where the above T&Cs do not make any provision the provisions of the General Whitley Council Terms & Conditions shall apply. The posts are subject to the provisions of the European Working Time Directive. The posts require the successful applicant to be registered with the GMC with a license to practice and to be on the specialist register by the time of taking up the post. The successful applicants will be allocated an appraiser and will be expected to participate in annual appraisal and job planning and to revalidate as required by the GMC.

Annual leave and study leave are as per the above T&Cs. On call is part of the service and has a 1:4 commitment.

Office accommodation and equipment is provided along with secretarial support.

Section 3: Organisation and Departmental Information

Introduction

The appointee will provide a comprehensive anaesthetic service to Shetland NHS Board and the people of Shetland. 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.

Gilbert Bain Hospital

The Gilbert Bain Hospital, Lerwick, 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 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	20
Surgical HDU		2
Day Surgery		6
Ward 3	Medical	22
Maternity		6

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 an acute surgical receiving unit with 20 acute beds and 2 HDU beds. The nursing team also provides on call cover for high dependency care (typically 120+ admissions each year). There has been an increase (40%) in the number of patients requiring post-operative high dependency care because we have proactively repatriated patients from Grampian and the local surgical team has been undertaking more complex surgery in collaboration with Aberdeen specialists (e.g. nephrology.) Staffing levels are appreciably higher than on equivalent mainland wards and allow a thorough and patient-centred approach to surgical nursing.

Within Ward 1 is a two-bedded area equipped and staffed as a **High Dependency Unit**. We are able to provide invasive monitoring and organ support, including short-term invasive ventilation. The unit is open to both medical and surgical patients. The incumbent consultant anaesthetists have extensive experience in Critical Care Medicine.

The **Day Surgery Unit** provides 6 day-case beds staffed by 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** 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 and an office that is used by the Anaesthetic department. Anaesthetic and monitoring equipment is of high standard and wherever possible is standardised throughout the Suite, the A&E and the HDU. The in-house surgeons undertake most elective and emergency procedures, including emergency operative obstetrics, and visiting surgeons provide regular opportunities to practice anaesthetic techniques for gynaecological, ENT, ophthalmic, orthopaedic and maxillofacial / dental surgery. The Anaesthetic Department also provides sedative services where necessary, thus permitting a gold-standard service to surgical endoscopy.

Pre-operative assessment is carried out by nursing staff supported by the consultant anaesthetists.

The **Maternity Department** is small but spacious (approximately 170 deliveries per year; 6 beds) and is currently being developed so as to satisfy the requirements of the Expert Group on Acute Maternity Services. Anaesthetic involvement currently does not include on-demand epidurals, but unusually does provide back-up resuscitation services to both mother and baby should the occasion arise. Intra-partum care is provided by three general practitioners with operative intervention by the general surgeons.

Services for children are designed to be appropriate for a non-specialist unit. There are regular paediatric lists for dental surgery and some operating for general minor/intermediate surface surgery, together with the regular paediatric component of ENT and ophthalmic surgery. In recognition of their specialist skills anaesthetists are also asked to advise and contribute to specialist areas of medical paediatric care, in support of and in partnership with the consultant physicians. A nation-wide retrieval team exists for the transfer of critically ill children, but the anaesthetic department is pivotally involved in the initial resuscitation, stabilisation and local management of such patients.

The **Outpatient Department** is compact and friendly – a Senior Staff Nurse heads the nursing support team with extensive experience and extended skills. The team also provides a pre-operative assessment service for patients who are receiving surgery in Shetland and other mainland Hospitals. Visiting specialist services provide expert support for ENT, ophthalmic, gynaecological, oral surgery and dental services. A variety of tele-health services are also in place e.g. orthopaedics and a new Tele-health Suite will be available early 2018. Specialist Nurses are in place supporting long term conditions and a variety of Link Nurses are in place to support other aspects of care such as Breast cancer and Inflammatory Bowel Disease.

The medical unit is based on **Ward 3**, it is a 22 bedded medical ward with adjoining consultant and medical secretarial offices. Nursing staff are flexible and expected to help manage the genuinely unselected admissions on the unit.

Clinical Support Services are in line with those expected of a Rural District General Hospital (DGH). These include a full range of laboratory and radiological services, including CT scanning, diagnostic ultrasound, and physiology. A number of invasive radiological investigations are performed locally on a regular basis under the supervision of a visiting radiologist. Digital CR/PACS is in place which allows viewing of an electronic image anywhere in the hospital. Images are sent digitally to NHS Grampian for reporting.

Junior **medical support** is available at ward level from 5 surgical and 5 medical staff, and the compact nature of the staffing establishment permits much more effective team-working than is usual elsewhere. The surgical and anaesthetic departments work together harmoniously at all levels, and the consultant physicians are approachable and readily available: they supply not only

general medical support but also extra expertise in elderly care, rheumatology, rehabilitation, cardiology, and endocrinology.

There is a wealth of **opportunity to teach** both junior medical and nursing staff and a steady stream of medical students on elective. Locally run ILS courses and one-day Paediatric Life Support courses are taught by anaesthetic consultants with nursing support.

An experienced **medical secretary** with extensive local knowledge provides secretarial assistance to the whole consultant team for anaesthetics. Her main responsibilities are the organisation of elective caseload relating to chronic pain services.

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 establishment:

Anaesthesia: 4 Consultant Anaesthetists
Surgery: 3 Consultant Surgeons
1 Speciality Doctor:
3 GP specialist trainees and 1 FY 2

Obstetrics & Gynaecology

1 Consultant:
2 GPWSI

General Medicine: 4 Consultant Physicians
6 training grade junior doctors

In addition there are further senior medical staff:

The Medical Director, Consultant in Public Health Medicine, Consultant in Public Health, Director of Pharmacy, Dental Director, Consultant Psychiatrist and a Specialty Doctor (Psychiatry)

Management Structure

NHS Shetland is a unified Island Board and the Board is responsible for both primary and secondary care services and is accountable directly to the Scottish Government Health Directorate. Formal medical representation at Board level is through the Medical Director, Director of Public Health and the chair of the Area Clinical Forum (ACF). An Executive Management Team (EMT) provides strategic and organisational direction to both hospital and community care. Primary Care is integrated into the overall structure via the Integrated Joint Board (IJB). The recently jointly appointed (NHS and Council) Director of Community Health and Social Care is the joint officer for integrated community health and social care services.

Board philosophy is to involve and work closely with senior clinicians regarding major aspects of health care management and strategy.

Consultant professional interests are focused into a Consultants Group with the additional representation on the Executive Management Team and the Board through the Medical Director. The Area Medical Committee (AMC), of which all consultants are automatically members, is represented on the Area Clinical Forum by the chair of the AMC. The Chair of the Area Clinical Forum attends Board Meetings.

Section 4: Main Duties and Responsibilities

All posts are offered as full time, ten Programmed Activities and two negotiated with the Medical Director. (Applicants interested in part-time/job share roles would have the terms pro rata)

Location:

- Gilbert Bain Hospital

Provide high quality care to patients:

- Maintain GMC specialist registration and hold a licence to practice
- Develop and maintain the competencies required to carry out the duties of the post
- Ensure patients are involved in decisions about their care and respond to their views
- Where possible to collaborate with academic and clinical colleagues
- To provide high quality teaching to medical undergraduates and members of other health care professions as required by the Medical Director
- Responsibility for provision to the Health Board, with consultant colleagues, of a full range of anaesthetic services and the proper functioning of the anaesthetic department.
- Out-of-hours responsibilities on a 1:4 rota for emergency anaesthesia (see above). Cover of consultant colleagues for periods of absence will be required (in accordance with section 4 of the Consultant Grade (Scotland) Terms and Conditions of Service).

Medical Staff Management:

- To work with colleagues to ensure junior doctors' hours are compliant in line with EWTD and New Deal
- To participate in the recruitment of junior medical staff as and when required
- To participate in team objective setting as part of the annual job planning process

Governance:

- Participate in clinical audit, incident reporting and analysis and to ensure resulting actions are implemented
- Ensure clinical guidelines and protocols are adhered to by doctors in training and updated on a regular basis
- Keep fully informed about best practice in the specialty areas and ensure implications for practice changes are discussed with the Medical Director
- Role model good practice for infection control to all members of the multidisciplinary team
- A requirement to participate in medical audit and other aspects of clinical governance, continuing medical education, appraisal and revalidation procedures.

- 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.
- A requirement to comply with Board Health and Safety policies.

Strategy and Business Planning:

- To participate in the clinical and non-clinical objective setting process for the directorate

Leadership and Team Working:

- To work collaboratively with all members of the team
- To resolve conflict and difficult situations through negotiation and discussion, involving appropriate parties
- Adhere to NHS Shetland and departmental guidelines on leave including reporting absence
- Adhere to NHS Shetland values
- 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 services.
- Share with consultant colleagues in the medical contribution to management.
- Respond positively to appropriate requests for assistance wherever possible in the event of a major incident or other event where anaesthetic or professional expertise is felt to be advantageous.

Special interests and skills

A general medical sub-specialism is not essential but would be welcomed. It must be practicable to develop this within the clinical services in Shetland.

Section 5: Contact information

Interested applicants are most welcome to contact Lorraine Porteous, Associate Director, at our recruitment partners Aspen People, on 0141 212 7555.

For details on how to apply please visit www.aspenpeople.co.uk/nhssheland

Section 6: Working for NHS Shetland

Who are we?

NHS Shetland is an integrated NHS Board in Scotland providing primary, community, mental health, and hospital and community services. Mr Ralph Roberts is the Chief Executive and Dr Gilbert Ozuzu is the Medical Director. Mrs Kathleen Carolan is the Director of Nursing and Acute Services.

The NHS Board determines strategy allocates resources and provides governance across the health system working in partnership with the Integrated Joint Board for Health and Social care services.

About NHS Shetland

NHS Shetland is the most northerly Health Service in the country and a unique setting in which to develop your career. We are, of course, a small organisation, with circa 650 staff looking after the health needs of some 23,000 people spread across 15 islands. However, what we lack in size, we more than make up for by way of the tight-knit, highly professional ethos that characterises every aspect of our operations. Local Hospital and Community Services are provided from the Gilbert Bain Hospital. In addition, visiting consultants from NHS Grampian provide out-patient clinics as well as in-patient and day-case surgery to supplement the service provided by our locally-based Consultants in General Medicine, General Surgery, Anaesthetics and Psychiatry. We have a progressive agenda within the Shetland and work in partnership, not only with other local stakeholders but with the NHS in Scotland as a whole and NHS Grampian in particular.

Our job – your job should you care to join us – is to provide healthcare services to, and strive to improve the overall health of, the population of this most delightful part of the British Isles. As well as the Gilbert Bain Hospital there are Local Community Services, which are provided via GPs and Community Nurses, Dentists, Pharmacists, Allied health Professionals and Social Care workers working from one of our ten Health Centres/ or Care Homes and other locations including mobile units and schools. All in all, you'll find a superb degree of professionalism allied to a practical, resolute approach to the challenges of providing healthcare in a northern island setting.

Working at NHS Shetland

What's it like to work in the Health Service in Shetland? Well, the remote and rural nature of our service brings its own challenges, however you can be assured that the facilities and equipment are as good as any you'll get on the mainland. Moreover, the friendliness and professionalism of your new colleagues will help you quickly to find your feet and feel at home in your new surroundings.

Living in Shetland

We cheerfully admit that Shetland is not for everyone, but if you value working in a team, providing a broad range of clinical interventions and living in one of the most beautiful parts of Scotland then Shetland may be for you.

What we can offer you

Working with NHS Shetland offers a variety of opportunities and benefits:

- Access to the NHS pension scheme
- Assistance relocating to Shetland
- NHS Shetland is an equal opportunities employer and promotes work-life balance and family-friendly policies
- A beautiful setting to live and work and to take time out after a busy day or week
- Access to a transport network offering easy travel links to the rest of the UK and Europe, as well as international options

Teaching and Training Opportunities & Research

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.

Clinical audit is regarded as an integral part of the CEPD package: some assistance and guidance in performing clinical audit is available from the Clinical and Governance Team. 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.

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.

Whilst small we do provide teaching and training opportunities for junior doctors.

We enjoy close links with the University of Aberdeen (<http://www.abdn.ac.uk>) whose Medical School is renowned for preparing its medical students to become doctors.

Our vision, values and strategic aims

We strive to provide high quality, safe, effective and person centred healthcare, continually improving clinical outcomes for patients who use our services and for our population as a whole.

To achieve this, we are committed to ever-closer integrated working with patients and our other partners in healthcare and to embedding a culture of continuous improvement to ensure that:

We have identified five strategic objectives to ensure we can deliver safe, effective and person-centred health and social care:

1. To improve and protect the health of the people of Shetland
2. To provide quality, effective and safe services, delivered in the most appropriate setting for the patient
3. To redesign services where appropriate, in partnership, to ensure a modern sustainable local health service
4. To provide best value for resources and deliver financial balance
5. To ensure sufficient organisational capacity, capability and resilience

Vision

To deliver sustainable high quality, local health and care services, that are suited to the needs of the population; to make best use of our community strength, community spirit and involvement; for people to make healthy lifestyle choices, and use their knowledge and own capacity to look after themselves and each other.

Values

Person centred – in the partnerships between patients, their families and those delivering healthcare services we respect individual needs and values and demonstrate care and compassion, continuity, clear communication and shared decision-making.

Safe – avoiding injury or harm, in an environment that is clean and safe.

Effective – the most appropriate treatments, interventions, support and services provided to everyone who will benefit.

Efficient – making best use of available resources, and the eradication of wasteful or harmful variation.

Equitable – taking account of and valuing diversity, promoting equality, fairness.

Timely - linked to effective: services in the right place at the right time, reducing waiting times wherever possible.

Sustainable – using resources responsibly, to continue to provide services locally.

Ambitious – always striving to be better for our patients, staff and service

Geography 60° North

The islands of Shetland lie scattered like the pieces of an elongated puzzle some 93 miles (150 km.) north of the Scottish Mainland. The capital, Lerwick is 211 miles (340 km.) from the Scottish port of Aberdeen and only about 18 miles (29 km) more than this from Bergen in Norway and Torshavn in the Faroe Islands.

The 60-degree line of latitude lies across the South Mainland of Shetland, passing through the small island of Mousa with its famous broch. There are over 100 islands ranging in size from the large island of Mainland (351 square miles/909 square kilometres) to the numerous small skerries and islets along the coast.

The distance from Sumburgh Head, the most southerly tip of Mainland, to Hermaness at the most northerly tip of Unst, is about 70 miles (113 km). North of Unst lies Muckle Flugga with its lighthouse perched 192ft. (59m) above sea level; the most northerly inhabited island in the British Isles.

Fair Isle is 24 miles (39 km) south-west of Sumburgh Head and lies mid-way between Shetland and Orkney. Foula, off the West Mainland, is about 18 miles (29 km) west of Walls.

Travelling to Shetland

Shetland lies at the crossroads of the North Sea and the North Atlantic, virtually equidistant from Aberdeen, Bergen in Norway and the Faroe Islands, and there are frequent, efficient air and sea services through Aberdeen.

Most major airports and cities in the UK have scheduled flights to Shetland through Aberdeen (50 minute flight), Edinburgh (1hour 20minutes) and Glasgow (1hour 30 minutes). Northlink Ferries currently operate car ferries seven days a week direct from Aberdeen to Shetland on Mondays, Wednesdays and Fridays (via Orkney on Tuesdays, Thursdays, Saturdays and Sundays) in comfortable, well-appointed vessels. There are also connections to Scrabster in Caithness (via Orkney).

The ferry journey from Aberdeen to Shetland takes between 12-14 hours, leaving Aberdeen at 1900 hours direct (1700 via Orkney) and arriving in Shetland 0730 hours the following morning. The return journey similarly leaves Lerwick at 1900 hours direct (1730 via Orkney).

In the summer an air service connects Bergen with Sumburgh Airport.

Links

NHS Shetland Website: www.shb.scot.nhs.uk

NHS Scotland Jobs and Online Application System: www.jobs.nhsscotland.com

Shetland Islands Council: www.shetland.gov.uk

Section 7: Terms and Conditions of Employment

Type of Contract	Substantive
Grade and Salary	Consultant £78,304 - £105,570 per annum (pro-rata if applicable)
Hours of Work	40
Superannuation	New entrants to NHS Shetland who are aged sixteen but under seventy five will be enrolled automatically into membership of the NHS Pension Scheme. Should you choose to "opt out" arrangements can be made to do this via: www.sppa.gov.uk
General Provisions	You will be expected to work with local managers and professional colleagues in the efficient running of services and will share with Consultant colleagues in the medical contribution to management. Subject to the provision of the Terms and Conditions, you are expected to observe the organisation's agreed policies and procedures and to follow the standing orders and financial instruction of NHS Shetland, in particular, where you manage employees of the organisation, you will be expected to follow the local and national employment and personnel policies and procedures. You will be expected to make sure that there are adequate arrangements for hospital staff involved in the care of your patients to be able to contact you when necessary.
Relocation Expenses	Relocation assistance is provided up to £8,000.
Expenses of Candidates for appointment	Candidates who are requested to attend an interview will be given assistance with appropriate travelling expenses. Re-imburement shall not normally be made to employees who withdraw their application, refuse an offer of appointment. Non NHS employees are not normally awarded travel expenses.
Tobacco Policy	NHS Shetland operates a No Smoking Policy in all premises and grounds.
Disclosure Scotland	This post is considered to be in the category of "Regulated Work" and therefore requires a Disclosure Scotland Protection of Vulnerable Groups Scheme (PVG)
Confirmation of Eligibility to work in the UK	NHS Shetland has a legal obligation to ensure that it's employees, both EEA and non EEA nationals, are legally entitled to work in the United Kingdom. Before any person can commence employment within NHS Shetland they will need to provide documentation to prove that they are eligible to work in the UK. Non EEA nationals will be required to show evidence that either Entry Clearance or Leave to Remain in the UK has been granted for the work which they are applying to do. Where an individual is subject to immigration control under no circumstances will they be allowed to commence until right to work in the UK has been verified.
Rehabilitation	The rehabilitation of Offenders act 1974 allows people who have been

of Offenders Act 1974	convicted of certain criminal offences to regard their convictions as “spent” after the lapse of a period of years. However, due to the nature of work for which you are applying this post is exempt from the provisions of Section 4 of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions Orders 1975 and 1986). Therefore, applicants are required to disclose information about convictions which for other purposes are “spent” under the provision of the act in the event of employment, failure to disclose such convictions could result in dismissal or disciplinary action by NHS Shetland. Any information given will be completely confidential.
Medical Negligence	In terms of NHS Circular 1989 (PCS) 32 dealing with Medical Negligence the Health Board indemnity will cover only Health Board responsibilities. Paragraph 63 of the General Medical Council's Good Medical Practice requires you to have adequate insurance or indemnity cover. You may wish to consider taking out additional medical indemnity e.g. with a Medical Defence Organisation to ensure that you have indemnity for the whole of your practice.
Notice	Employment is subject to three months’ notice on either side, subject to appeal against dismissal.
Principal Base of Work	Gilbert Bain Hospital
Social Media Policy	You are required to adhere to NHS Shetland’s Social Media policy, which highlights the importance of confidentiality, professionalism and acceptable behaviours when using social media. It sets out the organisation’s expectations to safeguard staff in their use of social media.

Section 8: General Information for Candidates

Data Protection Act 1988

Please note that any personal information obtained from you throughout the recruitment process will be collected, stored and used in line with the Data Protection Act 1998. Information will be available to the recruiting manager and to Human Resources staff.

Counter Fraud

NHS Shetland is under a duty to protect the public funds it administers, and to this end will use the information you have provided on your application form for the prevention and detection of fraud. It will also share this information with other bodies responsible for auditing or administering public funds for these purposes. More detail on this responsibility is on NHS Shetland intranet (Counter-Fraud and Theft page) and further information is available at <http://www.audit-scotland.gov.uk/work/nfi.php>.

References

All jobs are only offered following receipt of two satisfactory written references. At least one reference must be from your current/most recent employer or your course tutor if you are currently a student. If you have not been employed or have been out of employment for a considerable period of time, you may give the name of someone who knows you well enough to confirm information given and to comment on your ability to do the job.

Disclosure Scotland

Where a Disclosure or Protection of Vulnerable Groups Check is deemed necessary for a post, the successful candidate will be required to undergo an appropriate check. Further details on the Recruitment of Ex-Offenders are available from the recruitment centre.

Work Visa

If you require a Work Visa, please seek further guidance on current immigration rules, which can be found on the Home Office website www.ind.homeoffice.gov.uk

Job Interview Guarantee Scheme

As a Disability Symbol user, we recognise the contribution that all individuals can make to the organisation regardless of their abilities. As part of our ongoing commitment to extending employment opportunities, all applicants who are disabled and who meet the minimum criteria expressed in the job description will be guaranteed an interview.

Overseas Registration and Qualifications

NHS Shetland will check you have the necessary professional registration and qualifications for this role. You will need to provide an official translation of qualifications notarized by a solicitor of your overseas qualifications to be checked by the recruiting panel. Please ensure that this is available before applying for the post.

Workforce Equality Monitoring

NHS Shetland is committed to supporting and promoting dignity at work by creating an inclusive working environment. We believe that all staff should be able to fulfil their potential in a workplace free from discrimination and harassment where diverse skills, perspectives and backgrounds are valued.

In order to measure and monitor our performance as an equal opportunities employer, it is important that we collect, store and analyse data about staff. Personal, confidential information will be collected and used to help us to understand the make-up of our workforce that will enable us to make comparisons locally, regionally and nationally.

Equal Opportunities Policy Statement

NHS Shetland considers that it has an important role to play as a major employer and provider of services in Shetland and accepts its obligations both legal and moral by stating commitment to the promotion of equal opportunities and elimination of discrimination.

Our Equal Opportunities in Employment policy can be viewed at:

<http://www.shb.scot.nhs.uk/board/policies/hr-recruitment.pdf>

<http://www.shb.scot.nhs.uk/board/equality.asp>