

# Working for NHS Shetland

Consultant Physician posts



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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
<b>Qualifications and Training</b>	<p>Primary Medical Qualification.</p> <p>GMC Registered with Licence to Practice</p> <p>Appropriate Royal College Membership</p>	<p>Additional post-graduate qualifications, e.g. MD/PhD/MSc</p>
<b>Experience and Ability</b>	<p>Wide general experience in all aspects of general medicine.</p> <p>Ability to offer an expert clinical opinion within the speciality.</p> <p>Ability to take full independent responsibility for the clinical care of patients referred to a secondary centre.</p> <p>Able to liaise effectively with colleagues in other centres, in primary, secondary and tertiary care.</p>	
<b>Teaching and Audit</b>	<p>Evidence of commitment and participation in/to:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Quality improvement work</li> <li><input type="checkbox"/> Scottish Patient Safety Programme</li> <li><input type="checkbox"/> Clinical Audit</li> <li><input type="checkbox"/> Formal and informal teaching and training of trainee doctors, medical students and other clinical staff</li> <li><input type="checkbox"/> Learning and continuing professional development</li> </ul>	<p>Experience of designing audits</p> <p>Evidence of training in clinical and / or educational supervision</p> <p>Formal training in Quality Improvement</p> <p>Evidence of having changed practice as a result of audit.</p> <p>Evidence of having revisited the audit to assess improvement.</p>
<b>Motivation</b>	<p>Commitment to:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> patient-focused care</li> <li><input type="checkbox"/> continuous professional development and life-long learning</li> </ul>	<p>Desire to develop services for patients</p>
<b>Team Working</b>	<p>Ability to work in a team with colleagues in own and other disciplines</p>	<p>Ability to motivate colleagues</p>

	<p>Ability to organise time efficiently and effectively</p> <p>Reliability</p> <p>Excellent communication skills</p>	<p>Evidence of previous managerial training and experience</p>
<p><b>Circumstances of Job</b></p>	<p>There will be rostered out of hours working.</p>	

## Section 2: Introduction to Appointment

**Job Title:** Consultant Physician

**Department:** Medicine

### **Post Summary:**

We are looking to appoint two full time Consultant Physicians to work in NHS Shetland who will work in the Gilbert Bain Hospital, Lerwick. Whilst the medical work is of a general nature every effort will be made to accommodate a successful candidate's subspecialty interest.

The job of Consultant Physician in the Gilbert Bain Hospital is very significantly different from the large majority of posts in the UK. This is not a job for a super specialist or narrowly focussed physician but very much for one who wishes to practice a wide ranging role as general physician. We see a very broad range of pathology and you must be prepared to deal with everything that presents, frequently outside our area of specialism. If you enjoy a challenge and to work on occasions at the edge of your clinical expertise this is a post to consider.

The role can be demanding but the many intellectual challenges provide the corresponding satisfaction to be derived from solving problems and helping patients. The physicians work closely and collaboratively together and are always helpful when discussing patients and offering thoughts and advice. We are also able to seek help and advice from a wide range of colleagues in Aberdeen Royal Infirmary, our local tertiary referral centre.

In addition to caring for general medical patients we also have a role, with a large degree of support from our psychiatry colleagues, in supervising the admission of a small number people with acute mental health conditions. We also see children who attend A&E and care for the small number admitted to the ward. We have direct Consultant-to-Consultant access, 24 hours a day, to telephone advice from the Paediatricians in Aberdeen though, in practice, this is needed only a few times a year.

We also have excellent support from our Consultant Anaesthetist colleagues when caring for children with respiratory difficulties and critically ill adults. We have facility to offer non invasive ventilatory support or high flow oxygen on the ward. Our Anaesthetic colleagues periodically need to intubate sick patients and support them while waiting for the retrieval team to transport them to ITU in Aberdeen. We thrombolysate patients presenting with ST elevation MI and fly them to Aberdeen for angiography, we also thrombolysate a small number of patients presenting with stroke. About once a year we need to insert a temporary pacing wire into a patient and they are then transferred to Aberdeen for permanent pacemaker insertion. We have a small dialysis unit.

We practice a very traditional model of hospital care with joint, multi-disciplinary ward rounds twice a week attended by all the Consultant Physicians, the senior nurse on the ward and junior doctors which allows for joint discussion of patients with difficult problems and informal education. Our junior doctors are relatively junior so we provide very hands on care. Patients admitted under our care remain under our care and the juniors experience a much greater degree of continuity of care of their patients than is usual in larger hospitals with all the educational and experiential benefits this provides to them and the patients.

Though the range of work we have to tackle is wide we have a much smaller number of patients presenting each day than in larger hospitals so have the time to devote to those with complex

problems or serious acute illness which is not always available to those in larger centres. We also have the satisfaction of being involved with the care from admission to discharge of almost everyone we admit and can then follow them up in clinic ourselves if required.

Being a small unit we get to know each other very well, there are friendly and excellent relations between doctors and nursing staff who all work very collaboratively.

### **Medical department workload**

The department provides a comprehensive service for the residents of Shetland, visitors and people working off shore. As a small and friendly team 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 hands on support from local Anaesthetists, telephone support from Consultant Paediatricians in Aberdeen and the Paediatric Retrieval team. Transfer and specialist services can be via ferry, scheduled flight, air ambulance, MCA helicopter and both Scottish Ambulance Service paediatric and adult retrieval teams, depending on the circumstances and severity of the illness. Acute admissions and A&E attendances for patients with acute mental health conditions are also managed by the Physicians with the assistance of the Psychiatrist, Speciality Doctor and Community Psychiatric Nurses, there being no dedicated psychiatric-inpatient beds.

Specialist outpatient services for Clinical Genetics, Paediatrics, Child Health, ENT, Ophthalmology, Orthopaedics, Gynaecology, Dermatology and Oral Surgery are sustained by visiting consultants from mainland Scotland

There are good working relationships between the department and colleagues in Aberdeen Royal Infirmary, and, where appropriate, these allow the local clinicians to have a significant input into the management of patients traditionally managed in tertiary centres or much larger District General Hospitals (DGHs).

In 2015, there were 1582 medical in-patient admissions and 2919 outpatient appointments. In addition approximately 5700 people attended A&E with a medical problem

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

A typical week involves:

Monday and Friday morning ward rounds attended by all Consultant Physicians, the senior nurse on the ward and the junior doctors. A briefer round of one's own patients on Wednesday morning  
Ward governance meeting alternate weeks after the Friday ward round.

General medical and specialty clinics.

Teaching and supervision of junior doctors.

When on call, clinics are cancelled, a morning post take ward round is performed and a mid afternoon handover meeting occurs.

It is expected that consultants maintain fairly frequent oversight of their ward patients and are available to the junior doctors and nursing staff for discussion and advice with regards these throughout the week.

Two different rota models have been used recently depending on availability of full time staff and the model used is negotiable, they are:

Week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1					On call	On Call	On call
2			On Call	On call			
3	On Call	On Call					
4							

Week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1	On Call	On Call	On Call	On call			
2					On call	On Call	On call
3							
4							

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 working or job-share 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).

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 dedicated secretarial support.

## Section 3: Organisation and Departmental Information

### Introduction

These posts provide an acute general medicine service supported by junior medical staff. Each physician also undertakes general medical outpatient clinics and a specialist clinic in their sub-specialty. All are expected to provide clinical supervision for the undergraduate and post graduate trainees.

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.

The appointee to this post will participate in a 1 in 4 on-call rota with prospective cover, to a maximum of 1 in 3 working.

### Gilbert Bain Hospital

The Gilbert Bain Hospital, Lerwick, Shetland ZE1 0TB, is the only hospital in Shetland and 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 three storey building, opened in 1961, with an extension opened in 1991 and a modern Outpatient department completed in 2008.

The bed complement is:

Ward 3	Medical	22
Ward 1	Surgical	20
High Dependency		2
Maternity		6

We also have a number of day services including:

Day Surgical Unit with 6 trolleys (a business case is in progress to increase the capacity of the DSU so that more procedures can be delivered through an ambulatory care pathway). The current unit was refurbished in 2009.

Renal unit with five stations (capacity has recently been increased and the unit refurbished in 2016).

### Ward 3

Ward 3 is an acute medical receiving unit and although the unit does not have a dedicated HDU, the multidisciplinary team occasionally manages patients with high dependency care requirements in situ, principally those with respiratory or cardiac failure and those with severe sepsis. Facility for cardiac monitoring via telemetry is available throughout the ward.

The unit admits both adults and children, providing the full range of inpatient care including palliative and end of life care. Patients with acute psychiatric illness are also admitted to Ward 3 as a 'place of safety'.

The ward is supported by a multi-disciplinary team including specialist nurses (for adults and children), clinical pharmacists and allied health professionals.

In addition, approximately 200 ambulatory care patients each year are supported by the medical unit with a variety of investigations and interventions.

**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. The A&E Department is open 24/7 with a dedicated team of Emergency Nurse Practitioners. Medical cover is provided in-hours by junior doctors with supervision from Speciality Doctor and Consultant input. At night cover is provided by a medical junior doctor with medical, surgical and anaesthetic consultants available from home.

Consultant Psychiatrists and Community Psychiatric Nurses (CPNs) provide input to A&E and support assessment of patients with acute psychiatric presentations who attend or are admitted to Ward 3.

## **Ward 1**

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 undertaken more complex surgery in collaboration with Aberdeen specialists (e.g. nephrology).

The **Day Surgery Unit** provides 6 day-case beds staffed by the surgical nursing team.

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. 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 Senior Staff Nurse heads the nursing support team with extensive experience and extended skills. Currently there are consultant led commitments in general medicine, diabetes, endocrinology, cardiology, including a rapid access chest pain clinic and rheumatology. Visiting specialist services provide expert support and there are established tele-neurology and a variety of tele-health clinics e.g. orthopaedics. Specialist Nurses are in place supporting Cardiac, Stroke, Diabetes, Continence and Neurological pathways as well as a variety of Link Nurses supporting specific aspects of care such as Breast cancer and Inflammatory Bowel Disease.

**Support Services** are in line with those expected of a District General Hospital. This includes a local Laboratory with a full range of testing available, with specialist provision accessed via NHS Grampian.

We have a Medical Imaging Department with access to Ultrasound and CT in Shetland. 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 supports CR/PACS which allows viewing of an electronic image anywhere in the hospital. Images are sent digitally to NHS Grampian for reporting.

A Diagnostic Physiology service is available as a visiting service for echocardiography, holter and other recording devices as well as an implanted device follow up/surveillance service.

There is also access to in-patient and community based Occupational Therapy and Physiotherapy services available on week days.

**There are six junior doctors attached to the medical team;** two General Practice trainees, one FY1, one FY2 and two Core Medical Trainees.

The current Consultant Physicians are supported by four medical secretaries. Appropriate medical secretarial and office accommodation including a personal PC with IT support including Internet access, e-mail and electronic shared diary facilities will be provided.

#### **The hospital medical staff complement:**

**General Medicine** 4 Consultant Physicians  
6 Training grade junior doctors

**Obstetrics & Gynaecology**  
1 Consultant  
2 GPWSI

**Surgery and A&E** 3 Consultant Surgeons  
1 Specialty Doctor:  
1 FY2, 3GP Trainees

**Anaesthesia** 4 Consultant Anaesthetists

In addition there are further senior medical staff based in nearby premises:

The Medical Director, Consultant in Public Health Medicine, Consultant in Public Health, Director of Pharmacy, Dental Director, Consultant Psychiatrist and a Speciality 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:

- Provision, with consultant colleagues, of a General Medical Service for the Health Board: with responsibility for the prevention, diagnosis and treatment of illness and the proper functioning of the medical department
- 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 students, medical undergraduates and members of other health care professions as required by the Medical Director
- 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 necessary 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 participate in the teaching of medical students who frequently attend from Aberdeen.
- Participate in out-of-hours responsibilities in a 1:4 rota. 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 your specialty areas and ensure implications for practice changes are discussed with the Medical Director
- Act as a role model for good practice for infection control to all members of the multidisciplinary team
- 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, you will be required 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 a requirement to follow the local and national employment and personnel policies and procedures.
- 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 including management of local waiting lists, waiting 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 your professional expertise is felt to be advantageous.

### **Special interests and skills**

A general medical sub-specialism is not essential but would be welcomed.

## 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](http://www.aspenpeople.co.uk/nhssheland)

## Section 6: Working for NHS Shetland

### Who are we?

NHS Shetland is an integrated NHS Board providing primary care, community mental health and hospital secondary care services. Mr Ralph Roberts is the Chief Executive and Dr Gilbert Ozuzu the Medical Director. Mrs Kathleen Carolan is the Director of Nursing and Acute Services and Mr Simon Bokor-Ingram the Director for Health and Social Care.

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 about 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 in 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 recently been 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. 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.

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 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.

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 and 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 Shetland Isles 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](http://www.shb.scot.nhs.uk)

**NHS Scotland Jobs and Online Application System:** [www.jobs.nhsscotland.com](http://www.jobs.nhsscotland.com)

**Shetland Islands Council:** [www.shetland.gov.uk](http://www.shetland.gov.uk)

## Section 7: Terms and Conditions of Employment

<b>Type of Contract</b>	Substantive
<b>Grade and Salary</b>	Consultant £78,304 - £105,570 per annum (pro-rata if applicable)
<b>Hours of Work</b>	40
<b>Superannuation</b>	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: <a href="http://www.sppa.gov.uk">www.sppa.gov.uk</a>
<b>General Provisions</b>	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.
<b>Relocation Expenses</b>	Relocation assistance is provided up to £8,000.
<b>Expenses of Candidates for appointment</b>	Candidates who are requested to attend an interview will be given assistance with appropriate travelling expenses. Re-imburement will not normally be made to employees who withdraw their application or refuse an offer of appointment.
<b>Tobacco Policy</b>	NHS Shetland operates a No Smoking Policy in all premises and grounds.
<b>Disclosure Scotland</b>	This post is considered to be in the category of "Regulated Work" and therefore requires a Disclosure Scotland Protection of Vulnerable Groups Scheme (PVG)
<b>Confirmation of Eligibility to work in the UK</b>	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 for which they are applying. 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.
<b>Rehabilitation</b>	The rehabilitation of Offenders act 1974 allows people who have been

<b>of Offenders Act 1974</b>	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.
<b>Medical Negligence</b>	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.
<b>Notice</b>	Employment is subject to three months’ notice on either side, subject to appeal against dismissal.
<b>Principal Base of Work</b>	Gilbert Bain Hospital
<b>Social Media Policy</b>	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 the NHS Shetland intranet (Counter-Fraud and Theft page) and further information is available at <http://www.audit-scotland.gov.uk/work/nfi.php>.

### References

Jobs are only offered following receipt of two satisfactory written references. At least one reference must be from your current/most recent employer. 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](http://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 lawyer 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 understand the make-up of our workforce and 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 its 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>