NHS Dumfries & Galloway

CONSULTANT ANAESTHETIST
Dumfries & Galloway Royal Infirmary
**VACANCY**

**Consultant in Anaesthesia**
**Dumfries & Galloway Royal Infirmary**
40 hours per week
£80,653 (GBP) to £107,170 (GBP) per annum
Tenure: Permanent

**The Post**

This is a post to replace a retiring consultant colleague. The successful candidates will join a team which comprises 15 Consultants, 6 Specialty Doctors and 5 trainees.

The out of hours commitment requires that a successful candidate has an ability in all anaesthesia sub specialty areas, in particular Intensive Care, Paediatrics and Obstetric. Sub-specialty interest may be able to be accommodated in particular in Chronic Pain and Intensive Care where daytime sessions are available.

**The Department of Anaesthetics**

The Department of Anaesthetics is located on the first floor of the new Dumfries and Galloway Royal Infirmary which opened in December 2018.

Members of the Department were heavily involved in the design and operational policy for the Operating Theatre suite, Combined Critical Care Unit and Dept Office accommodation.

**Operating Theatre Suite**

The main theatre complex consists of 8 operating theatres and 4 endoscopy/minor procedure rooms. The operating theatres include a dedicated obstetric theatre, three UCV (laminar flow) theatres, two integrated (laparoscopic) theatres and one theatre designed with the capability to install fixed radiological equipment. Each theatre has an anaesthetic room. Equipment in Theatres is of a high standard with all anaesthetic machines equipped with electronic flowmeters/end tidal control; BIS and videolaryngoscopes in each theatre; fibreoptic bronchoscopes, oesophageal Doppler and ultrasound facilities for regional anaesthesia all readily available.

The Admissions area provides an entry point for day surgery, 23 hr and admission on day of surgery (AODOS) patients. The Short Stay (‘23 hr’) ward is integrated in to the theatre complex to make the day surgery and 23 hr process as efficient as possible. There is a reception area for ward patients within the Stage 1 recovery which has a mixture of single rooms and bays. There is a separate stage 2 recovery area for day surgery patients and a discharge lounge.

A Pre-operative Assessment clinic sees all elective surgical cases with nurse assessments supported by dedicated consultant sessions. Day surgery, 23hr unit and day of surgery admissions are used for the majority of cases with plans for this to increase further.
Critical Care Unit
The Critical Care Unit is horizontally adjacent to the operating theatres and vertically adjacent to the Emergency Dept. This is a 16 bed combined Intensive Care and High dependency unit with 16 individual rooms: some with en suite; one with isolation facilities and one procedure room suitable for temporary pacemaker insertion etc. There is a seminar room and handover rooms, a relatives area with overnight rooms and adjacent on call bedrooms. All patient bedrooms have electrochromic glass fronts and large windows to maximise natural light. The facilities have been configured to allow the patients to benefit from the open views that the site provides. There is an open air terrace that some patients will be able to benefit from.

The Critical Care Unit is well equipped, currently with Excel ventilators, Philips monitoring and Oesophageal Doppler; PICCO; ultrasound and echocardiography available. Multi-modality renal support is used with excellent support from the renal unit. The Critical Care Unit runs a closed model for level 3 and selected level 2 patients and is staffed by six Consultant Anaesthetists with an interest in Critical Care on a ‘week at a time’ daytime rota. Out of hours cover is provided by the resident trainee/Sp Dr and the two on call consultants, one of which is always an Intensivist.

Level 1 and 2 patients are currently managed by their primary specialist team, however long term plans are to develop a closed model with shared care for these patients also.
The unit actively participates in audit and multi centre research.

There is full Medical Physics back-up, day and night for all departments.

Acute and Chronic Pain Service
The Chronic Pain Service is supported by one consultant Anaesthetist with up to 3 sessions available for a suitably qualified candidate. They in turn are supported by a multi-disciplinary team. A pilot which is underway involves multidisciplinary triaging of patients and a pain education session prior to the patients being appointed to the appropriate health care professional (Pain Consultant, Psychologist and/or physiotherapist). This pilot is a test to see if this can be a sustainable part of the service. Links with Primary Care, Palliative Care and the Third Sector are strong with the Pain Association being integrated in to the service provision via a direct referral pathway. Intervention sessions are currently performed in the main theatre complex but a high definition radiology intervention suite is also available and may be part of future provision. A radiofrequency ablation machine has recently been purchased. We have strong links with the tertiary centre in Glasgow who provide advanced interventions including spinal cord stimulation and a residential pain management programme.

There is a well established Specialist Nurse led Acute Pain Service with Consultant Anaesthetist support. Epidural anaesthesia, PCA, continuous regional anaesthesia techniques are all supported at ward level.
Clinical Areas supported by the Department of Anaesthesia and Intensive Care

The regional Emergency Department is supported by the Department of Anaesthesia in resuscitation and stabilisation of patients and on occasions is responsible for transport of critically ill patients to tertiary centres, particularly for neurosurgical and cardiothoracic intervention.

In addition, the Department supports the following facilities:

1. Cresswell Maternity Wing, which provides a specialist Obstetric and Neonatal Service for south-west Scotland, with around 1,400 deliveries per year. The resident anaesthetist is always trained in obstetric anaesthesia. A labour epidural service and remifentanil PCA are offered. There are two Consultant sessions for elective cases on Tuesday and Thursday mornings.

2. ECT – This is provided in the day surgery unit with patients being transported from the modern Midpark Hospital.

3. Galloway Community Hospital, which has a separate anaesthetic rota. Currently there are two funded full time consultants supported by a visiting specialty doctor. The model of care is to provide 24/7 on call availability for resuscitation and transfer purposes and daytime sessions for the day surgery theatre where low risk procedures are performed under local and general anaesthesia. The consultant positions are currently vacant and locum sessions are available to support this rota. These locum sessions are offered to departmental members in the first instance before being offered more widely. There is no current contractual requirement for Dumfries consultants to provide sessions at the Galloway Community Hospital.

Office Accommodation

The Department of Anaesthetics medical offices are adjacent to both Critical Care and Operating theatres. The accommodation consists of a ‘semi-open plan’ office divided in to 4 desk bays, with 3 separate non allocated rooms for private study, dictation, confidential meetings and small group discussions. Each consultant has a desk and PC. There is a 3 desk secretary’s office, a separate office for trainees and Specialty Drs with socialisation area and toilet facilities. The whole department has excellent views of the surrounding countryside.

Meet the Team

Dr D Christie (w/t) ICU, Deteriorating Patient
Dr V Edwards (w/t) Emergency Surgery, Rota
Dr D Macnair (w/t) Obstetrics, APLS director, Human factors
Dr J Muthiah (w/t) Chronic Pain, Orthopaedics
Dr J Neil (w/t) Obstetrics, Blood Transfusion
Dr M Nicol (p/t) ENT, Pre-operative assessment
Dr W Peel (w/t) ICU, Vascular Surgery, ECT, Galloway Community Hosp
Dr V Perkins (w/t) Ambulatory Surgery, Urology
Dr J S Rutherford (w/t)  ICU, Vascular Surgery, Acute Pain, Paediatric Anaesthesia, APLS Course Director, Non technical skills
Dr L Verner (p/t)  Regional Anaesthesia, Orthopaedics
Dr D Williams (w/t)  ICU, Vascular Surgery, Specialty Lead Clinician for ICU, ALS Course Director
Dr S Wilson (w/t)  ICU, Airway lead, College Tutor
Dr W Wrathall (w/t)  ICU, Vascular Surgery, ALERT Course Co-ordinator, Clinical Director of Anaesthesia & Intensive Care
Dr N Yatiwelle (w/t)  Colorectal Enhanced Recovery, Pre-operative Assessment
Vacant post x2 (locum)  Galloway Community Hospital, Stranraer

Specialty Doctors
Dr D Ballingall (wt/)
Dr C Billington (w/t)
Dr C Fernando (w/t)
Dr K Munshi (w/t)
Dr A Thompson (w/t)
Dr D Wright (w/t)

Trainees
- Five CT1/2 doctors, recognised by the College for basic specialist training, on the West of Scotland training rotation
- One ST3, for six months per year

Applicants must have full GMC registration, a licence to practise and be eligible for inclusion in the GMC Specialist Register.

Those trained in the UK should have evidence of higher specialist training leading to a CCT in Anaesthetics or eligibility for specialist registration (CESR) or be within 6 months of confirmed entry from the date of interview.

For further information or to apply for this exciting role, please contact the NHS Scotland International Recruitment Service:

Telephone: +44141 278 2712
Email: scotland@nhs.net
Web: www.international.scot.nhs.uk
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>AHP</td>
<td>Allied Health Profession</td>
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<tr>
<td>CAMHS</td>
<td>Child and Adolescent Mental Health Service</td>
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<td>CAPA</td>
<td>Choice and Partnership Approach</td>
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<td>CBT</td>
<td>Cognitive Behavioural Therapy</td>
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<td>CCT</td>
<td>Certificate of Completion of Training</td>
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<td>CESR</td>
<td>Certificate of Eligibility for Specialist Registration</td>
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<td>CPD</td>
<td>Continuing Professional Development</td>
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<td>DCC</td>
<td>Direct Clinical Care</td>
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<td>EEA</td>
<td>European Economic Area</td>
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<td>FBT</td>
<td>Family Based Treatment</td>
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<td>GIRFEC</td>
<td>Getting it Right for Every Child</td>
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<td>GMC</td>
<td>General Medical Council</td>
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<td>HR</td>
<td>Human Resources</td>
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<td>HSCP</td>
<td>Health and Social Care Partnership</td>
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<td>LD</td>
<td>Learning Disabilities</td>
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<td>NHS</td>
<td>National Health Service</td>
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<td>OOH</td>
<td>Out of Hours</td>
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<td>PA</td>
<td>Programmed Activity</td>
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<td>PVG</td>
<td>Protection of Vulnerable Groups</td>
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<td>RMN</td>
<td>Registered Mental Nurse</td>
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<td>SCA</td>
<td>Scottish Centre for Autism</td>
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<td>SPA</td>
<td>Supporting Professional Activity</td>
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<td>UK</td>
<td>United Kingdom</td>
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<td>WTE</td>
<td>Whole Time Equivalent</td>
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Post Details

Description of Programmed Activities and On-call Commitments
A detailed Job Plan will be negotiated with the successful candidate to accommodate sub-specialty interest; a typical job plan is illustrated below. The job plan comprises 10 Programmed Activities (PAs), a split of 9:1 between Direct Clinical Care PAs and Supporting Professional Activities is standard, but the balance between DCC and SPA will be agreed between the Board and successful applicant. The Department of Anaesthesia and NHS Dumfries and Galloway value the development of non-clinical interests and, as these roles expand, additional time may be allocated.

A minimum of 1 SPA will reflect activities such as appraisal, personal audit, professional development (outwith study leave) and teaching. The SPA session is taken flexibly.

Up to 2 additional PAs may be offered.

The department has a flexible approach to clinical sessions and it is hoped that the successful candidates will work with the same flexibility as the existing consultants. All of the department have some fixed sessional commitment to develop professional relationships and subspecialty interests: a variety of subspecialty fixed sessions are available to be incorporated in to the successful candidate’s job plan.

Job Plan

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<th>AM (08.00-13.00)</th>
<th>PM (13.00-18.00)</th>
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<tbody>
<tr>
<td>Monday</td>
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<tr>
<td>Tuesday</td>
<td>Theatre</td>
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<td>Wednesday</td>
<td>Theatre</td>
<td>Theatre</td>
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<td>Thursday</td>
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<tr>
<td>Friday</td>
<td>Theatre</td>
<td>Theatre</td>
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(This weekly plan is an example of a possible job plan: other sessions may be available and subspecialty interests will be accommodated if possible. Critical Care and Chronic Pain sessions may be accommodated)
Up to 2 extra clinical PAs are likely to be offered taking the job plan to 48hr/week. The terms and conditions for this extra activity will be as in the Consultant Contract.

- 1 SPA to be taken flexibly during the week.
- 2 PAs are allocated to out of hours clinical work generated by the 1:6 on call rota (see below). This calculation is supported by consultant diary evidence.

A clinical session is allocated 5 hours, or 1.25 PA, to allow for pre and post-operative clinical input and admin time associated with clinics. A typical morning session therefore is from 08.00-13.00 and afternoon session 13.00-18.00.

Theatre sessions may be ‘fixed’ ie in the same theatre each week usually covering the same sub-specialty, or ‘fixed flexible’ where the anaesthetist is allocated to whichever vacant sessions are available on that day. The weekly rota is published at the end of the previous week.

Up to 10 days of funded external study leave per year are allocated. Professional Leave for additional external duties may be available at the discretion of the Medical Director for Acute Services.

A hierarchical on call system operates; a resident CT/ST or Specialty Doctor is first on-call (always obstetric anaesthesia competent), sometimes with a second junior trainee for educational purposes. Consultants are ‘second’ and ‘third on-call’, one of which is an Intensivist with daytime Critical Care sessions. At present, the Consultants work 1:12 2nd on-call and 1:12 3rd on call, making the overall on call rota 1:6 with prospective cover. The on call is non-resident. Weekends are ‘split’ in to either Fri/Sun or Sat commitments.

The on call nights rotate through the week: no one consultant has a fixed on call night. Following a night ‘second on call’, no clinical commitments are allocated for the following day. Following a night third on call with a CT trainee, no clinical commitments are allocated for the morning session. This ‘loss’ of daytime activity after on call amounts to an average of 1PA per week and this is factored in to the job plan.

The on call case mix covers all sub-specialties including Obstetrics, Paediatrics, Intensive Care and resuscitation and transport to tertiary care for specialties not locally available eg Cardiothoracic and Neurosurgery.

Compulsory resident overnight duties are not part of current job plan, however future re-designs may be necessary to accommodate changes in working practices and it may be necessary to negotiate consultant resident out of hours duties. This is not, however the current model of future service provision.

The department is accommodated in an open plan office with each consultant having a desk space and networked PC, fully supported by the IT department with access to PACS, lab browser, patient records, pre-assessment clinic records, theatre management system, dictation facilities, NHS.net and clinical support including e-library. A fully electronic patient record is accessed within Clinical Portal. Department administration is provided by one full-time and one part-time secretary.
**Location**
The principal base of work will be the new Dumfries & Galloway Royal Infirmary.

**Education Research and Audit**
The Department holds weekly Intensive Care afternoon meetings and monthly half-day “Continuing Education and Professional Development” sessions. There is a tutorial programme and a series of lectures to theatre nursing staff.

Video conferencing facilities are widely used and the department participates in national educational meetings via excellent video conferencing facilities.

A weekly medical ‘grand round’ meeting is held and the department participates in the programme. In additions there is a weekly lunchtime medical journal club.

The Department is accredited for basic level training in Intensive Care Medicine.

The Department is heavily involved in Critical Care and Resuscitation teaching with ALERT, APLS, ALS, SCOTTIE courses, all being run in the well equipped Hospital Education Centre and Resuscitation Training Centre. SIM-MAN and HAL mannequins are used in much of the teaching.

The Intensive Care unit participates in the Scottish Intensive Care Society Audit and has a track record of recruitment in to multicentre trials. There is both a part time research and education nurse position supporting local audit, research and service development.
## PERSON SPECIFICATION

**NHS Dumfries & Galloway**  
Consultant Anaesthetist

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<tr>
<th>Attributes</th>
<th>Essential</th>
<th>Desirable</th>
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<tr>
<td><strong>Qualifications and training</strong></td>
<td><strong>Fellowship of the Royal College of Anaesthetists</strong> (or equivalent)</td>
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<td>Full Registration with the <strong>GMC and a licence to practice</strong></td>
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<td>Completion of Higher Training in Anaesthetics and inclusion on the <strong>GMC Specialist Register</strong> or within six months of CCT or CESR (Anaesthetics) at interview</td>
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<td><strong>Eligibility</strong></td>
<td>Eligibility to Work in the UK</td>
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<td><strong>Experience &amp; Skills</strong></td>
<td>Competence and experience across all anaesthesia sub-specialties, particularly Critical Care, Obstetrics and Paediatrics in line with requirements for participation in on call rota</td>
<td>Additional experience and training in sub specialty areas.</td>
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<td><strong>Teaching</strong></td>
<td>Evidence of experience of clinical teaching and delivering classroom based educational sessions</td>
<td>Qualifications in educational supervision. Faculty status on national educational courses</td>
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<td><strong>Academic Research &amp; Audit</strong></td>
<td>Ability to perform audit cycles in line with requirements for Appraisal and Revalidation.</td>
<td>Evidence of previous audit projects that have led to positive service development.</td>
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<td>Willingness to be involved in department multi centre research projects.</td>
<td>Current Good Clinical Practice certification. Evidence of participation in relevant research projects including published research</td>
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TERMS AND CONDITIONS OF SERVICE

NHS Dumfries & Galloway

Consultant Anaesthetist

Type of contract
Permanent

Grade and salary
Consultant: £80,653 to £107,170 per annum (GBP)
New Entrants to the NHS will normally commence on the minimum point of the salary scale (dependent on qualifications and experience). Salary is paid monthly by Bank Credit Transfer.

Hours of duty
40 hours per week
(10 sessions per week)

Leave
5 or 6 weeks annual leave dependant on experience pro rata plus 10 public holidays pro rata. Entitlement to 30 days study leaves over a 3 year period.

Occupational Sick Pay
During the first year of service – one month full pay (and after completing 4 months service) 2 months half pay
During the second year of service – 2 months full pay and 2 months half pay
During the third year of service – 4 months full pay and 4 months half pay
During the fourth year of service – 5 months full pay and 5 months half pay
During the fifth year of service – 5 months full pay and 5 months half pay
After completing 5 years of service - 6 months full pay and 6 months half pay

Pension
You will be automatically enrolled into the NHS Pension scheme (Scottish Public Pension Agency). The benefits of which can be found at [http://www.sppa.gov.uk/](http://www.sppa.gov.uk/)

Base
Your principal place of work is Dumfries and Galloway Royal Infirmary. Other work locations and off site working including may be agreed.

Notice Period
Three Calendar Months