

**Grade:** Consultant

**Department:** Cardiology

Reports to: Cardiology Clinical Director

#### **Additional Information:**

Portsmouth Hospitals University NHS Trust is a provider of Acute Health Services under contract to a range of Purchasers in the area of the Hampshire basin and Western South Downs. The catchment is in excess of 650,000 people. The area served by the Trust is on the Solent and English Channel and includes the City of Portsmouth and the Boroughs of Gosport, Fareham and Havant extending from Warsash in the west to Emsworth on the Sussex border and its northern boundaries encompass Petersfield and Liss. With the exception of the rural north, it is an essentially urban area having grown up around the Royal Naval establishments in Portsmouth and Gosport. It now provides a wide range of modern high-tech industry and the facilities associated with a commercial port and cross Channel ferry terminal.

Portsmouth is a thriving naval city, steeped in history, on the South Coast. It is ninety minutes from central London and has good transport links, including regular ferries to France and Spain. The major airports are easily accessible. It has some of the best water sports facilities in Europe and sandy beaches are within easy reach. Developments within the city itself and on the Gosport side of the harbour suggest a vibrant future for the area. Inland from the hospital is the beautiful and relatively unspoilt countryside of rural Hampshire. Close by is the New Forest and the recently designated National Park of the South Downs. The area combines the advantages of city life with pleasant villages and seaside towns. There are a number of first-rate schools both in the state and private sector and it is an excellent place to raise a family.

## **Portsmouth Hospitals University NHS Trust**

Portsmouth Hospitals University NHS Trust has a vision to be recognised as a world-class hospital, leading the field through innovative healthcare solutions, focusing on the best outcomes for our patients, delivered in a safe, caring and inspiring environment. The catchment is in excess of 650,000 people. The recent partnership with the Isle of Wight will increase the overall catchment to 800,000.

At present Portsmouth Hospitals University NHS Trust provides the following services, Emergency Medicine, Trauma and Orthopaedic Surgery, Oncology, Radiology, Orthodontic and Oral Surgery, General and Specialist Medicine, General Surgery, Breast Screening and Surgery, Plastic Surgery, Renal Services, Acute Medical Admissions, Ophthalmology, Maxillofacial, ENT, Critical Care, Coronary Care, Elderly Medicine, Rheumatology, Elderly Medicine, Rehabilitation, Dermatology and Neurology.

## The Department

# **Cardiology Service**

Cardiology is the largest department within the Medicine Care Group employing 160 personnel with an annual budget of £14 million. Cardiology is led by a Clinical Director, Business Service Manager, Matron and Principal Physiologist supported by the Care Group Director, General Manager and Head of Nursing who are in turn supported by a Divisional Director, Divisional Operations Director and Divisional Nurse Director. The department consists of a 59 bedded purpose-built cardiology unit with 3 cardiac catheterisation laboratories (plans for regenerating the cathlabs and the addition of a 4<sup>th</sup> lab are well advanced), a 12 bedded CCU, 5 echo rooms, a 14-bedded day ward, a TOE and stress-echo room as well as a dedicated cardiology out-patient suite.

The consultant team is supported by a specialty doctor in heart failure and 10 SpRs who provide 24/7 middle grade cover. We have 12 junior doctors across grades FY1 – CMT2. The medical staff are supported by a Physician Associate and a team of Clinician Assistants, Chest Pain Nurse Specialists, Cardiac Rehab Nurse Specialists, hospital-based Heart Failure Nurse Specialists and Arrhythmia Nurse Specialists. There is a comprehensive team of cardiac physiologists with national specialist accreditation



(BSE or Heart Rhythm UK) who independently run pacemaker, echo, TOE and stress echo clinics as well as loop recorder implants and supporting all laboratory activities. In addition, there are student physiologists and cardiographers who provide resting and ambulatory ECG services as well as a team of fully trained EP cardiac physiologists.

#### **PCI Service**

The PCI service is currently delivered by seven consultants. This will be the 8<sup>th</sup> post. We provide a 24/7 primary PCI service to the people of West Sussex, East Hampshire, Portsmouth City and the Isle of Wight. The population served is approximately 1.25 million and we perform around 400 primary angioplasties per annum. Daytime PCI currently takes place during 17 cath lab sessions per week including Saturday and is supported by 2 interventional fellows. We perform in excess of 1200 interventions per annum.

The 24/7 primary angioplasty service is supported by a cardiology middle grade rota. A rest period will be timetabled on the day following a night on call and for 1 or 2 days following a weekend on call. The new appointment will bring the out of hours on call rota to 1:8 weekends and 1:8.5 weekdays.

We have a strong bias towards trans-radial intervention and >90% of cases are undertaken via the radial approach. Boston iLab and Volcano IVUS systems are available as well as OCT and both Abbott and Volcano pressure wire systems. Recannalisation of chronic total occlusions is a major interest within the department. We perform approximately 50 rotablation and Orbital cases per annum and shockwave IVL is available.

Elective cases are discussed at a weekly revascularisation meeting with surgeons from Southampton and these surgeons also provide our off-site surgical cover.

It is recognised that audit and assessment of quality and patient experience are essential for optimal service delivery, and these form an integral component of this position. The postholder will be expected to submit their data to the BCIS dataset hosted by NICOR.

Interventional research is another priority for us and over recent years, we have recruited patients into Forecast, Ripcord-2, Pioneer-AF, Orbita II, Precise, Rincal, Leaders Free, Rapid NSTEMI, Eric-PPCI, Revived, Onyx One and the Absorb registry amongst others.

## **Other Cardiology Services**

The heart failure service spans primary and secondary care in a seamless way thanks to extensive collaboration between the Trust, community providers and local commissioning groups. The team of 5 consultants is supported by a team of hospital and community-based heart failure nurse specialists and a Speciality Doctor. Approximately 1400 patients are seen annually.

There is a comprehensive implantable cardiac device service which includes implantation of around 550 bradycardia pacemakers per annum and physiologist-delivered implantable loop recorder service and device follow-up.

The complex device service (CRT and ICD) is provided by the Heart Failure Consultants. We implant over 200 ICD/CRT devices (predominantly new implants) and have recently started a physiological pacing service. All potential patients for complex device therapy, including ICD box changes, are discussed in a twice weekly device MDT.

Non-invasive services are well established and we perform around 15,000 transthoracic echos per annum. Transoesophageal, stress and 3-dimensional echo services are performed routinely. The elective cardioversion service is nurse/physiologist led and treats around 250 patients per annum. Physiologist led loop recorder implantation, TOE and stress echo is well established.

The imaging service is delivered as a joint service with radiology. Cardiac CT on a "Toshiba One Vision" scanner is already established and we have one of the highest volume CT-FFR services in the UK. Cardiac MRI is currently only delivered on site one session a week with the rest outsourced. There are plans to significantly increase inhouse cardiac MRI provision.

We see approximately 1600 patients in our Fast Access Chest Pain Clinic, and more than 5500 other new patients per annum. On average, we admit 10 emergency patients every 24 hours. The chest pain clinic is nurse led and supervised by the team of interventionists. We also run an outreach specialist Pulmonary Hypertension service in collaboration with The Hammersmith Hospital and an outreach GUCH clinic in collaboration with University Hospital Southampton and the Heart Hospital as well as a specialist valve clinics and Marfan aortic clinics. There is a sarcoidosis MDT, a clinical genetics MDT and an inherited cardiac conditions service is in development.

**Working** To drive excellence in care for **together** our patients and communities

#### **Ward Cover**

Acute admissions are currently taken by a team of 2 cardiologists (1 interventionalist and 1 non-interventionalist) doing 1 week at a time. The frequency of this rota for interventionists will be 1 in-9 following this appointment, but the interventionists will take patients for only 5 days rather than 7. The cardiologist, supported by a registrar and juniors is then responsible for the day-to-day management of these patients throughout their hospital admission before relinquishing ward duties 3 weeks later.

Responsibilities during the first weekend of ward cover include a ward round of patients admitted during the previous 5 days followed by a standby list in the cath lab on Saturday and availability for primary PCI. During these weekends, the interventionist will be responsible for general cardiology out of hours on call as well as PPCI. A CCU ward round, new admissions and review of other cardiology inpatients will be managed by a consultant colleague. A rest period will be timetabled on the Monday following a weekend on call during ward cover. Annual leave may be taken during the 3-week periods of ward cover only if appropriate cover is pre-arranged with colleagues.

## **Elective General Cardiology**

The successful candidate will provide around 5 new patient clinics and 5 follow-up clinics in every 9-week cycle. There may also be a contribution to pacing depending on interests.

There is also a commitment to Specialist Advice (formally advice and guidance) and admission avoidance support for ED, a 1 in 14 full day activity.

#### **Education & Research**

The medical school opened in 2024. It is expected that the appointee will contribute to teaching medical students and to the teaching programme for junior medical staff within the Trust, including Interventional Fellows and AHPs.

The post holder is strongly encouraged to develop the academic potential of the service and will be expected to have an active interest in academic developments, to promote an academic ethos amongst all staff and where appropriate to carry out and encourage research projects.

### **Cardiology Medical Staffing**

Dr Tom Farrell	Consultant Cardiologist
Dr Richard Jones	Consultant Cardiologist & Imaging Specialist
Dr Michael Stewart	Consultant Cardiologist & Imaging Specialist
Dr Anjana Siva	Consultant Cardiologist & Imaging Specialist
Dr Senthil Kirubakaran	Consultant Electrophysiologist
Dr Milena Leo	Consultant Electrophysiologist (starting Jan 2022)
Prof Paul Kalra	Consultant Heart Failure Specialist & Research Lead
Dr Geraint Morton	Consultant Heart Failure Specialist
Dr Kaushik Guha	Consultant Heart Failure Specialist
Dr Helena Bolam	Consultant Heart Failure Specialist
Dr Elena Cowan	Specialist Doctor (Heart failure)
Dr Huw Griffiths	Consultant Interventional Cardiologist
Dr Nik Shah	Consultant Interventional Cardiologist
Dr Ali Dana	Consultant Interventional Cardiologist
Dr Alex Hobson	Consultant Interventional Cardiologist and Clinical Director
Dr Peter Haworth	Consultant Interventional Cardiologist
Dr Brijesh Anantharum	Consultant Interventional Cardiologist
Dr Vani Mahadevan	Consultant Interventional Cardiologist
Dr Kristel Longman	Consultant Interventional Cardiologist (St Richards)
Dr Mark Connaughton	Consultant Cardiologist (IOW)
Dr Dallas Price	Consultant Cardiologist (IOW)
5 Specialist Registrars	

2 PCI Fellow	
2 Heart Failure Fellows	
1 Research Fellow	
1 Renal or ICU SpR	On secondment

#### **Conditions of Service**

The post is covered by the Terms and Conditions of Service Consultant Contract (2003)

The Trust expects all Medical and Dental staff to work within the guidelines of the GMC 'Guide to Good Medical Practice' which can be viewed on the GMC website <a href="https://www.gmc-uk.org">www.gmc-uk.org</a>.

Where the post holder manages employees of the Trust, he/she will be expected to follow the local and national employment and personnel policies and procedures.

#### Accommodation

Shared office accommodation will be made available within the department together with secretarial support.

## Management

The post holder will be expected to work with local managers and professional colleagues in the efficient running of services including the medical contribution to management. Subject to the provisions of the Terms and Conditions of Service, the post holder is expected to observe agreed policies and procedures drawn up on consultation with the profession on clinical matters and follow the standing orders and financial instructions of the Portsmouth NHS Trust. In particular, Managers of employees of the Portsmouth Hospitals University NHS Trust are expected to follow the local and national employment and personnel policies and procedures. The post holder will be expected to ensure that there are adequate arrangements for hospital staff involved in the care of patients to be able to contact him/her when necessary.

All medical and dental staff are expected to comply with the Portsmouth Hospitals University NHS Trust Health and Safety Policies.

All medical and dental staff are expected to proactively, meaningfully and consistently demonstrate the Trust Values in their every day practice, decision making and interactions with patients and colleagues.

### Study leave

30 days within a three-year period, subject to national and local policies will be allowed.

### **Status of Post**

This is a full-time post.

## Residence

Residence within either 10 miles or 30 minutes by road from Queen Alexandra Hospital is usually required unless alternative arrangements agreed with the Trust management. His/her private residence must be maintained in contact with the public telephone service.



### **Safe Guarding**

Act in such a way that at all times the health and well being of children and vulnerable adults is safeguarded. Familiarisation with and adherence to the Safeguarding Policies of the Trust is an essential requirement for all employees. In addition, all staff are expected to complete essential/mandatory training in this area.

#### **Infection Control**

In compliance with the Trust's practices and procedures associated with the control of infection, you are required to:

- Adhere to Trust Infection Control Policies assuring compliance with all defined infection control standards at all times.
- Conduct hand hygiene in accordance with Trust policy, challenging those around you that do not.
- Challenge poor practice that could lead to the transmission of infection.

## **Hand Hygiene Policy**

The Trust has adopted "Naked Below the Elbow" strategy which means that when involved in patient care and direct physical contact with patients, you must wash or decontaminate your hands as per the Hand Hygiene Policy.

Compliance with the Hand Hygiene Policy is mandatory; you must wear short sleeved shirts/blouses/uniform, remove any out jackets and roll up your sleeves. No jewellery should be worn below the elbow (except a plain wedding band) and wrist watches must be removed.

## **Rehabilitation of Offenders**

Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act, 1974 by virtue of the Rehabilitation of Offenders Act, 1974 (exceptions) order 1975. Applicants are therefore not entitled to withhold information about convictions. This could result in dismissal or disciplinary action from the Trust.

Any information given will be completely confidential and will be considered only in relation to an application for positions to which the order is applied.

## **Post Vacant**

The post is currently available, and the appointee will be required to take up the post no later than four months from the date of the offer of an appointment, unless a special agreement has been made between the appointee and Portsmouth Hospitals University NHS Trust

If you consider it unlikely that you will be able to take up the appointment within such a period, you are advised to point this out at the time of your application.

## **Visiting Arrangements**

Intending applicants may obtain further information and/or arrange a visit by contacting Dr Alex Hobson, Clinical Director (alex.hobson@porthosp.nhs.uk or on 02392 283650) or other consultants in the Department.

Please note that Portsmouth Hospitals University NHS Trust will reimburse expenses for <u>one</u> pre interview visit in respect of short-listed candidates.

Due to the high volume of recruitment and our desire to treat all applicants fairly it is not possible to meet with the Chief Executive Mrs Penny Emerit prior to the Appointments Advisory Committee.



