**Job Title:** Consultant in Stroke Medicine

**Grade:** Consultant

**Department:** Medicine for Older People, Rehabilitation and Stroke

**Reports to:** Dr Ugnius Sukys, Clinical Direct of Stroke.

**Job Summary:**

The Stroke Unit of Portsmouth Hospitals University Trust is one of the busiest centres in the UK. We had over 5000 acute stroke referrals between 2022 -2023, 1100 stroke admissions and thrombolysed over 200 patients, with nearly 15% of them going for mechanical thrombectomy at the regional specialist centre in Southampton. Our reach and ability to open the revascularisation window has now been extended with our CT perfusion systems being online. We have a 34-bed stroke unit in which there are 12 designated HASU beds, as well as a newly purpose built 30 bed rehab unit with 2 dedicated neuro-gymnasiums, and a 7-day outpatient TIA service.

Currently, we are in partnership with Isle of Wight NHS Trust providing with consultant and senior support on a daily basis for thrombolysis on call cover out of hours and weekends. We achieved SSNAP A in Portsmouth for 3 consecutive quarters in 2020 – 2021 and we are regularly hitting SSNAP A in Thrombolysis domain. The Isle of Wight stroke unit is regularly attaining SSNAP A, and is one of the best in the region.

We are looking to recruit an enthusiastic Consultant in Stroke Medicine to work alongside 4 other Consultants (some locum) and 3 Stroke Specialist doctors in a well-motivated team. There is ample opportunity and encouragement to pursue research, improvement projects, teaching, and supervision.

The post holder will be doing a 1 in 7 on call rota alongside working with the MDT daily in the Stroke Unit to provide high quality care for our broad patient demographic. The post holder will be expected to contribute to education and supervision of our medical team. The Post holder will need to triage and review patients in the TIA clinic through the week alongside the ward-based responsibilities. Whilst on call, the post holder will need to review and support our Stroke Nurse Specialists, Stroke speciality doctor in the Emergency Department, and then remotely out of hours.

**Key Responsibilities:**

The Consultant in Stroke Medicine will be responsible for the management of Stroke patients along our care pathways. They will be part of a team of Stroke Consultants (some of whom are currently locum) managing hyper-acute & acute Stroke patients, TIA clinics, and regular Multidisciplinary team meetings. They will be required to contribute to a 1 in 7 on-call rota and provide with stroke expertise support to IOW stroke team.

1. Responsibility for the ongoing management, diagnosis, and treatment of illness of inpatients with Stroke or Stroke mimic symptoms.
2. Provision of and responsibility for a comprehensive Acute Stroke and Stroke Rehabilitation Service with Consultant colleagues.
3. Attend and contribute actively to departmental thrombolysis meetings, taking responsibility for actions where appropriate.
4. Take responsibility for the associated administration related to the management of patients.
5. Senior clinicians are expected to demonstrate Trust values throughout their day-to-day work being respectful and civil to colleagues.
6. Cover for colleagues’ annual leave and other authorised absences.
7. Clinical supervision of junior medical staff including the observance of local employment and human resource policies and procedures.
8. Responsibilities for carrying out teaching, examination and accreditation duties as required and contributing to undergraduate, postgraduate, and continuing medical education activity, both locally and nationally.
9. Participating in medical audit and the Trust’s Clinical Governance processes.
10. Ensuring to remain updated with regular education and CPD.
11. The post holder must always carry out his/her duties with due regard to the Trust’s Diversity and Inclusion Policies.
12. It is the responsibility of all employees to comply with Trust Health and Safety policies and maintain a safe and healthy environment for patients, visitors, and staff.
13. All employees have an individual responsibility to have knowledge of and employ the basic principles of infection control practice.
14. In line with GMC’s Good Medical Practice, it is the responsibility of the post holder to ensure that all duties are carried out to the highest possible standard, and in accordance with current quality initiatives within the area of work.
15. All staff who have access to or transfer data are responsible for this data and must respect confidentiality and comply with the requirements of the Data Protection Act 1998, in line with the Trust’s policies.

**Person Specification:**

**Essential**

* Full GMC registration and GMC registration in Stroke Speciality with a full medical licence to practice.
* Full MRCP or equivalent
* Post graduate Certificate or higher for Medical Education.

**Desirable**

* Competencies in brain CT perfusion interpretation and ability to act upon accordingly.
* PhD or higher degree or diploma

**Clinical Skills**

* Must be able to demonstrate a high level of clinical delivery and experience of Stroke Medicine.
* Fully competent and independent in delivering diagnostic and therapeutic care in acute stroke. CT, CTA, CT perfusion, and MRI is essential.
* Understanding the current developments within the field of Stroke Medicine and Rehabilitation, and being able to apply with best evidence based practice.
* Have obtained or willing to undertake training in the following: Good Clinical Practice training, Clinical Supervision training, and Teach the Teacher training.

**Teaching & Audit**

* Regular teaching and education of medical and non-medical teams.
* Quality improvement or audit relevant to the field.

**Leadership and Management**

* Demonstrate an understanding of the NHS leadership and management framework.
* Drive practice and civil working culture within the department and leading the service at consultant level.
* Work effectively and respectfully with your peers and other colleagues across the breadth of specialties.
* Understand and mange personal workload.
* Participate and lead other teams at consultant level; managing, leading, and inspiring junior colleagues.

**Other**

* Full right to work in the UK.
* Comprehensive IT skills.
* Excellent communication skills in English in both written and oral.
* Self-awareness of one’s own impact on others
* Be a good role model and ambassador for the trust and department, leading by example, ensuring good moral and ethical integrity.

**Working Together For Patients with Compassion as One Team Always Improving**

**Strategic approach** (clarity on objectives, clear on expectations)

**Relationship building** (communicate effectively, be open and willing to help, courtesy, nurtures partnerships)

**Personal credibility** (visibility, approachable, back bone, courage, resilience, confidence, role model, challenge bad behaviour, manage poor performance, act with honesty and integrity)

**Passion to succeed** (patient centred, positive attitude, take action, take pride, take responsibility, aspire for excellence)

**Harness performance through teams** (champion positive change, develop staff, create a culture without fear of retribution, actively listen and value contribution, feedback and empower staff , respect diversity)

Job holders are required to 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.

**Print Name:**

**Date:**

**Signature:**

**Consultant Job Plan**

|  |  |
| --- | --- |
| Name: | Stroke Consultant |
| Primary Speciality: |  |
| Secondary Speciality: |  |

The job plan is a prospective agreement that sets out the Consultant’s duties, responsibilities and objectives for the coming year. It will cover all aspects of the Consultant’s professional practice including clinical work, teaching, research, education and managerial responsibilities. It will provide a clear schedule of commitments, both internal and external. In addition, it will include personal objectives including details of their link to wider service objectives and details of the support required by the Consultant to fulfil the job plan and the objectives. The indicative timetable for the first 3 months will be based on the provisional timetable below.

**Indicative timetable of Programmed Activities**

This is a 10 Programme Activities (PA) contract with an additional 1.75 PA contracted for 1:7 on call including 24 hour weekend shift with onsite resident from 8am-5pm and on call from home 5pm-8am for hyperacute stroke- thrombolysis activities. .

Whilst working at the Queen Alexandra Hospital, the postholder will undertake 1 ‘acute’ day per week where they are ‘on-call’ to cover thrombolysis in the 24-hour period. In this job plan, this is illustrated as a Wednesday, with post-take ward round scheduled for Thursday, but this may vary in discussion with the postholder. The postholder will also undertake on-call at PHU (with remote support to the IOW) one split weekend on average per month.

. The actual number of PAs and personal Job Plan objectives will be agreed between the Consultant and the Care Group Director. The Job Plan will be reviewed at 3 months and conducted annually thereafter.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Week 1 | | | | | |
| Day | Time | Location | Cat | Work |  |
| Mon | 0900-12:30 | PHU | DCC | HASU/ ASU Ward round seeing your patients including admin time from 11:30 – 12:30 |  |
|  | 12:30 -1300 |  |  | Lunch break |  |
|  | 1300-1700 | PHU | SPA | Core SPA/or Education & Research |  |
|  |  |  |  |  |  |
| Tue | 0900-1300 | PHU | DCC | HASU/ ASU Ward round seeing your patients, including admin time from 11:30 – 12:30 |  |
|  | 12:30 -1300 |  |  | Lunch break |  |
|  | 1300-1700 | PHU | SPA | Core SPA (CPD, stat and mand training, audit, etc) |  |
|  |  |  |  |  |  |
| Wed | 0800-1700 | PHU | DCC | Acute day - HASU/Thombolysis/Acute Admissions including lunch brake 30 min. |  |
|  | 1700-800 |  |  | On-call from home overnight |  |
|  |  |  |  |  |  |
| Thu | 0800-1300 | PHU | DCC | HASU/Post take ward round |  |
|  | 12:30 -1300 |  |  | Lunch break |  |
|  | 1300-1600 | PHU | DCC | HASU/ Post take ward round organising investigations and discharged of your admitted patients and including admin time from 15:00-16:00 |  |
|  |  |  |  |  |  |
| Fri | 0900-1300 | PHU | DCC | HASU/ASU ward round including admin time from 11:30 – 12:30 |  |
|  | 12:30 -1300 |  |  | Lunch break |  |
|  | 1300-1700 | PHU | DCC | TIA clinic |  |
|  |  |  |  |  |  |
| Sat Sun (split) | 0800-1700 | PHU | DCC | HASU/Thombolysis/Acute Admissions 1 in 7 weekends (predictable/unpredictable) on-site at PHU with remote support on call for IOW. Including lunch brake 30 min. |  |
| On-call | 1700-800 |  | DCC | On call from home for PUH and IOW Thrombolysis support. Unscheduled activities |  |
|  |  |  |  |  |  |

\* Additional programmed activities subject to review and agreement.

1. **ON-CALL AVAILABILITY SUPPLIMENT**

|  |  |
| --- | --- |
| Agreed on-call rota | 1 in 7, 5% supplement |

#### **SUPPORTING RESOURCES**

|  |  |
| --- | --- |
| Facilities and Resources required for the delivery of duties and objectives | Description |
| 1. Staffing support including mentoring | The appointee will be provided with appropriate secretarial support. The department will allocate a more senior colleague to provide mentoring support for a new consultant. |
| 2. Accommodation | Office space will be provided |
| 3. Equipment | The appointees will be provided with a shared office with a PC enabling email, Internet and Intranet access. Office facilities and secretarial support may be shared with other Consultants. |
| 4. Any other required resources | Adequate study leave and admin time will be made available to ensure professional obligations to be met to undertake audit and CPD activities in accordance with the requirements of the Royal College of Physicians. |

#### **OTHER COMMENTS AND/ OR AGREEMENTS**

|  |
| --- |
| Detail any other specific agreements reached about how the job plan will operate (for example, with regard to Category 2 fees, domiciliary consultations and location flexibility): |
| The successful candidate will be required to take up the post no later than 4 months from the date of the offer of an appointment, unless a special agreement has been made between the appointee and the employer. For Specialist Registrars this would be 6 months. 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.  If additional hours are accrued then the department will consider reimbursing the candidate through offering Time Off in Lieu (TOIL). |

### Appraisal and Revalidation

The Trust has the required arrangements in place to ensure that all doctors have an annual appraisal with a trained appraiser and supports doctors going through the revalidation process. Annual appraisal is currently undertaken by the clinical directors or senior medical colleagues. Dr John Knighton is the Chief Medical Officer and Responsible Officer for Revalidation.

### General Compliance

You will be expected to comply with Trust Policies and Procedures, with particular regard to:

* Risk Management
* Health and Safety
* Confidentiality
* Data Quality
* Freedom of Information
* Equal and Diversity and Dignity at Work
* Information and Security Management and Information Governance
* Counter Fraud and Bribery

The Trust has designated the prevention and control of healthcare associated infection (HCAI) as a core patient safety issue.

As part of the duty of care to patients, all staff are expected to:

* Understand duty to adhere to policies and protocols applicable to infection prevention and control
* Comply with key clinical care policies and protocols for prevention and control of infection at all time; this includes compliance with Trust policies for hand hygiene, standards (universal) infection precautions and safe handling and disposal of sharps.
* All staff should be aware of the Trust’s Infection Control policies and other key clinical policies relevant to their work and how to access them. All staff will be expected to attend prevention and infection control training, teaching and updates (induction and mandatory teacher) as appropriate for their area of work, and be able to provide evidence of this at appraisal.

Additionally, the postholder is expected to perform their duties to the highest standard with particular regard to effective and efficient use of resources, maintaining quality and contributing to improvements.

The postholder’s behaviour will demonstrate the values and vision of the Trust by showing you care for others, that you act professionally as part of a team and that you will continually seek to innovate and improve. Our vision, mission, values and behaviours have been designed to ensure that everyone is clear about expected behaviours and desired ways of working in addition to the professional and clinical requirements of their roles. The postholder is expected to perform any other duties that may be required from time to time.

Patients come first in everything we do. Every postholder can make a difference to a patient’s experience. Staff will come across patients as they walk around the hospital; we rely on all our staff to be helpful, kind and courteous to patients, visitors and each other.

You should adhere to and work within local and national safeguarding children legislation and policies including the Children Act 1989 & 2004, Working Together to Safeguard Children 2013, 4LSCB guidance and Isle of Wight NHS Trust’s Child Protection policy.

Finally, the postholder should ensure adherence to and work within the local Multiagency safeguarding vulnerable adult’s policies and procedures. This job description may be altered to meet changing needs of the service and will be reviewed in consultation with the post holder.

### Conditions of Service

General Conditions of Appointment Terms and Conditions of Service (TCS) are in accordance with the new consultant contract 2003 with local amendments as agreed with Portsmouth Hospitals University NHS Trust following negotiations with the Local Negotiating Committee (LNC).

Consultants who are unable to work full-time for any reason will be considered. If appointed, modification of the job content will be discussed on a personal basis in consultation with Consultant colleagues. This post is open to applications from candidates who wish to job share.

The post holder is required to be resident within either 10 miles of, or thirty minutes by road from the principle place of work (Queen Alexandra Hospital, Cosham, Portsmouth) is a requirement of this post unless specific approval has been given.

The appointee will become eligible for additional pay thresholds at intervals set in Table 1, Schedule 14, of the Terms and Conditions for Consultants (England) 2003 on the anniversary of appointment.

The basic salary for the post will reflect previous experience (NHS and non-NHS) as described in Schedule 13 of the Consultant 2003 Terms and Conditions.

Annual leave is 6 weeks and 3 days plus bank holidays increasing to 6 weeks and 5 days after 7 years’ service plus bank holidays. Study leave is 30 days in 3 years. The leave year is 1 April to 31 March. All authorised absence must be taken in accordance with leave protocols.

The post is pensionable within the NHS Pension Scheme (unless the appointee opts out or is ineligible to join).

Removal expenses will be in accordance with the Trust’s Assisted Relocation Expenses Policy.

The Trust requires the successful applicant to have and maintain full registration and a licence to practise with the General Medical Council and be on the Specialist Register. You are required to comply with the General Medical Council’s Good Medical Practice.

In order to accept the post, all applicants should be eligible to work in the UK.

Because of the nature of the work involved in this appointment, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offender's Act 1974 (exceptions) Order 1975. Applicants are therefore not entitled to withhold information about convictions for which for other purposes are “spent” under the provisions of the Act and in the event of employment; any failure to disclose such convictions could result in dismissal or disciplinary action by the Trust. Any information given will be completely confidential and will be considered in relation to an application for post to which the Order applies.

Pre-employment disclosure checks are undertaken on all newly appointed medical and dental staff. The Disclosure Barring Service (DBS) is authorised to disclose in confidence to the Trust details of any criminal record including unspent and spent conditions, cautions, reprimands and final warnings. This DBS check will be made prior to the start of the appointment. The completion of a health questionnaire is required which may result in a medical examination together with compliance with the Trust’s Infection Control and Occupational Health Policies.

Any offer is subject to receipt of references which are considered satisfactory to the Isle of Wight NHS Trust as detailed in the NHS Jobs application form and in accordance with NHS employment advice. You will only be indemnified for duties undertaken on behalf of the Isle of Wight NHS Trust and Portsmouth Hospitals University Trust under its Acute Services Partnership arrangements. You are strongly advised to ensure that you have appropriate Professional Defence cover for duties outside the scope of the Trust and for any private work that you undertake.

Except in exceptional circumstances, the Trust expects, when on-call, that Consultant will be required to be able to return to base, Queen Alexandra Hospital within 30 minutes of receiving the call to return to base.

This job description may be altered to meet changing needs of the service and will be reviewed in consultation with the post holder.

# The Joint Stroke Service

Suffering a stroke is a devastating event in a person’s life. It is the third biggest killer in the UK and the greatest cause of severe disability. It costs the NHS over £3 billion a year. The NHS Long Term Plan prioritises improvement in stroke care and outcomes. Stroke services are heavily scrutinised through national audit and the Trust’s regulators.

With a combined catchment population of some 800,000 people, the Joint Stroke Service is one of the five largest Stroke services in the UK and aims to provide a consistent level of care to all stroke patients living within our catchment area.

Queen Alexandra Hospital currently provides a range of services comprising; a Hyper Acute Stroke Unit, an Acute Stroke Unit, a Stroke Rehabilitation ward, a Thrombolysis service, a Specialist Stroke Nurse Team, a Transient Ischaemic Attack (TIA) clinic and a Community Stroke Rehab Team (CSRT), which although based at QAH, is delivered in the community. There is a dedicated stroke ward with a 12-bedded Hyper Acute Stroke Unit (HASU) for Level 2 patients and 22 beds for Acute Stroke (ASU). This is a Direct Admissions unit. Our stroke rehabilitation ward accommodates 13 stroke rehabilitation patients and supports patient flow from the Direct Admissions Unit. We also offer a 7-day a week TIA clinic for review and treatment.

A Stroke Specialist Nurse (SSN) team is comprised of 6 specialist nurses providing a 24/7 service. We also offer a specialist thrombolysis service for the rapid thrombolysis of appropriate patients (and onward referral to University Hospital Southampton NHS Foundation Trust for thrombectomy as required). Finally, our CSRT service which provides a 45-55 bed virtual ward providing therapy and nursing care in patients’ own homes.

In PHU in the TIA clinic, clinicians will normally see 4 patients per clinic. On daily ward round in HASU there can be anything from 4-12, in ASU and potential outliers can be a further 2-8 patients. On average we have the equivalent of 4.5 Consultants in the acute setting.

St. Mary’s Hospital offers an 18 bedded mixed Hyper Acute, Acute and Rehabilitation Unit which is located in close proximity to the Emergency and Radiology Departments. We have a dedicated team of clinicians including a Nurse Consultant, Specialist Nurses and Therapists on site. At St. Mary’s we offer Hyper Acute Stroke care, a 24/7 Stroke thrombolysis service (out of hours covered remotely by QAH), a 5-day TIA outpatient service, Stroke Early Supported Discharge Team and Stroke rehabilitation. Additionally, there is a Nurse Specialist team covering 0730-2000 7 days a week.

Activity levels for 2020/21 for PHU and IOW are as follows

|  |  |  |
| --- | --- | --- |
| **Activity** | **PHU** | **IOW** |
| **HASU/ASU** | 1486 admitted (1358 confirmed Stroke) | 273 |
| **Outpatient new (TIA and Stroke)** | 1526 | 617 |
| **Follow up** | 470 | 51 |
| **New to Follow up ratio** | 0.33 | 0.08 |

The focus of the joint service is on the end-to-end pathway of patients presenting with stroke and/or stroke mimic symptoms. The Joint Stroke Service supports the local population of Portsmouth, Isle of Wight, South East Hampshire and West Sussex, although activity though the CSRT does extend provision to the north/north east of the region if the patient’s GP is located in the Liss/Bordon area.

Stroke service users are broadly evenly distributed across our local CCGs (Fareham & Gosport, Isle of Wight, Portsmouth and South East Hants). The stroke pathway is commissioned through the Clinical Commissioning Group

Our fundamental vision is that the joint service will be a key provider of stroke services within the region and has invested to secure a future as a regional specialist centre for stroke and one of the largest in the UK.

Both Partnership organisations in PUH and IOW are clinically led. Together they will lead the transformation and integration of stroke services across the two hospitals working closely with the Care Group management teams responsible for stroke services in each Trust as below:

#### Queen Alexandra Hospital (Portsmouth)

Divisional Clinical Director Dr Amanda Quine

Care Group Director – Older Persons Dr Zoe Hemsley

Medicine

Care Group Manager Chloe Weaver

Stroke Service Clinical Director Dr Ugnius Sukys

The management team are supported by human resources, operational management and finance colleagues. Other Consultant colleagues with whom you will work closely with are:

#### Queen Alexandra Hospital Stroke Medical team

Dr David Jarrett (part time) Consultant Stroke Medicine Physician

Dr Ugnius Sukys Consultant Stroke & Rehabilitation Medicine Physician, CD

Dr James Beckett Stroke Specialist Physician

Dr Utpal Naghotra Locum Consultant Stroke Medicine Physician

Dr Peter Howard Locum Consultant Stroke Physician

Dr Leonard Nfor Stroke Specialist Physician

Dr Balakrishna Kumar Locum Consultant Stroke Physician

**At PHU the team are supported by junior medical staff as follows:**

During the week this includes 4 junior doctors (Specialist Registrar/Core Trainee/FY1) plus a Reg in Emergency Department. On Saturday and Sunday, 2 junior doctors with a Specialist Registrar cover from the general medical rota.



