

**Recruitment and Selection  
Procedure for Medical  
Consultants UHL Policy**

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<b>Board Director Lead:</b>	Hazel Wyton, Chief People Officer
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### REVIEW DATES AND DETAILS OF CHANGES MADE DURING THE REVIEW

January 2021:

- Updated core Job description and Person specification
- Updated web links for NHS Employers

## **SUMMARY**

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This policy sets out the process to be followed when appointing Medical Consultant at UHL. It incorporates the National Health Service (Appointment of Consultants) Regulations.

A summary of the process is provided in appendix 1.

UHL has a Recruitment and Selection Policy (ref: B43/2009) which clearly states the standards that must be adhered to during the recruitment and selection process.

## **1 INTRODUCTION AND OVERVIEW**

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- 1.1 This policy sets out the process to be followed during the recruitment and selection process of Medical Consultants at UHL. It complies with the NHS (Appointment of Consultants) Good Practice Guide (2005) and NHS Employers Pre-employment Check Standards.

<https://www.nhsemployers.org/your-workforce/recruit/employer-led-recruitment/consultant-appointments>

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## **2 POLICY SCOPE –WHO THE POLICY APPLIES TO AND ANY SPECIFIC EXCLUSIONS**

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- 21 This document applies to everyone involved in the approval, and Recruitment & Selection of Medical Consultants at UHL NHS Trust.

## **3 DEFINITIONS AND ABBREVIATIONS**

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AAC – Advisory Appointments Committee  
BMJ – British Medical Journal  
CMG – Clinical Management Group  
CD – Clinical Director  
GMC – General Medical Council  
HOOP – Head of Operations  
RC – Royal College  
CCT – Certificate Completion of Training  
RIC – Revenue Investments Committee  
SARS – Special Applicants Register  
TRAC – Applicant Tracking System  
CMG – Clinical Management Group  
ERCB – Enhanced Recruitment Control Board  
JDR – Job Description Review Form  
DBS – Disclosure and Barring Service (formally CRB)

## 4 ROLES – WHODOES WHAT

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- 4.1 The **Chief People Officer** has executive responsibility to assure the Trusts recruitment and selection practices and processes for Consultants are appropriate in accordance with the NHS (Appointment of Consultants) Good Practice Guide 2005, NHS Employers Check Standards and the UHL Recruitment and Selection Policy (ref: B43/2009)
- 4.2 The responsibility of the **Medical Staffing Team** is to:
- Work closely with the CMG throughout the recruitment process to ensure this policy is adhered to.
  - Gain Royal College and University approval for the job description, job plan and person specification.
  - Advertise the post and coordinate the recruitment process, including setting up the AAC.
  - Ensure all candidates have the required professional registration;
  - Set up the AAC and advise the AAC appropriately.
  - Undertake all pre-employment checks.
  - Issue the offer letter.
  - Ensure all information pertaining to the recruitment and selection process is kept securely and is destroyed appropriately within the correct timeframe. Please refer to the current national NHS retention periods guidance.
  - Provide appropriate training for AAC panel members as required.
- 4.3 The responsibility of the **Clinical Management Group** is to:
- Identify the vacancy and nominate a recruiting manager.
  - Gain appropriate approvals for the post.
  - Complete appropriate paperwork to advertise i.e. Advert, Job Description, Person Specification, JDR form, Case of Need etc.
  - Provide an appropriate title for the presentation.
  - Participate in the selection process.
  - Provide feedback to unsuccessful applicants and candidates.
  - Agree the start date with the successful candidate.
  - Induct the new starter in line with the Trust's Induction Policy.
  - Inform the CMG, Responsible Officer and Job Planning lead the successful candidate's name and date of commencement. Please refer to the policy for Retention of Records B10/2004
- 4.4 An Advisory Appointment Committees (AAC) is a legally constituted interview panel established by the Trust when appointing consultants. The responsibility of the **Appointments Advisory Committee Chair** is to:
- Chair the AAC
  - Ensure the panel have a shared understanding of the role and the requirements of the appointment.
  - Agree the questions that will be asked of each candidate.
  - Interview and assess candidate's suitability for the role in line with the Job Description and Person Specification.
  - Record the decision of the panel
  - Decide which, if any, of the applicants are suitable for appointment and to make a recommendation to the Trust.

- Offer the position subject to pre-employment checks.
- Please also refer to the role of the Chairperson guidance (appendix 2).

4.5 The **Appointments Advisory Committee** members will be responsible for the following:

- Having an awareness and understanding of their responsibilities under equality and diversity legislation and acting in accordance with these.
- Undertake shortlisting of applicants in a timely fashion against the person specification.
- Declare prior personal knowledge of a candidate to Medical Staffing and the Chair of the AAC.
- Provide feedback to both successful and unsuccessful applicants or candidates.

## **5. POLICY IMPLEMENTATION AND ASSOCIATED DOCUMENTS – WHAT TO DO AND HOW TO DO IT**

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### **5.1 Job Description and Person Specification**

5.1.1 The CMG CD (or nominated Consultant colleague) is responsible for drawing up a job description and the person specification.

5.1.2 The Trust Core Job Description template must be used (appendix 3) and must include a Job Plan, as well as setting out the purpose of the post, balance of programmed activities (PAs) and the details of staffing and facilities available to enable the Consultant to undertake his/her duties. Job plans should be drawn up in line with the Trust Job Planning Framework.

5.1.3 The Person Specification is a vital document throughout the recruitment process and is used by the AAC as the criteria for assessing the suitability of candidates. The person specification must clearly describe the requirements of the post holder (in terms of experience, skills, qualifications, other attributes and should include a commitment to Trust values) and the core UHL Person Specification must be used.

5.1.4 It is a legal requirement that all doctors are registered on the GMC's Specialist Register before taking up a Substantive Consultant appointment. Specialist Registrars are permitted to apply for Consultant posts provided their expected date of CCT (or recognised equivalent qualification, if outside the UK) falls no more than 6 months after the date of interview. These criteria must be reflected in the Person Specification as essential.

### **5.2 Defining the Vacancy and Approvals**

5.2.1 The CMG Clinical Director and Head of Operations are responsible for identifying the post to be recruited to and must obtain appropriate approval via the Trust Business Case Process (RIC) and complete a Case of Need for Enhanced Recruitment Control Board (the latest versions can be found on INsite).

5.2.2 For new posts the CMG Clinical Director must:

- (i) Share the Business Case proforma with other CMG Clinical Directors where appropriate.
- (ii) The CMG/CD or Head of Operations must submit the Business case to the Trust Revenue and Investment Committee for financial approval.
- (iii) Submit the approved Business case, Job Description, Person Specification and Case of Need on Trac for the Enhanced Recruitment Control Board. The post may **NOT** be advertised under any circumstances without the business decision process.

5.2.3 The Medical Staffing department will send the job description, person specification and JDR form where required to the appropriate Regional Adviser of the relevant Royal College or Faculty for approval; the Royal College should provide a response within 3 weeks. Medical Staffing will liaise with the CMG to make any suggested changes and ensure approval is obtained before proceeding to an advertisement. The Royal College approval of the recruitment documents will be valid for a period of 6 or 12 months, depending on the college.

### 5.3 Advertisement

5.3.1 Advertisements must be consistent with the Job Description/Person Specification and should avoid prescribing unnecessary requirements which may exclude candidates from any particular sections of the community.

5.3.2 The post must be advertised in two publications. These are normally the British Medical Journal (BMJ) and the NHS Jobs website. The post must be advertised for four weeks. All advertisements must include the closing date for applications; the date of the interview should also be included wherever possible. This must be a minimum of 29 days from the date the advertisement is placed. Where possible the date of the interview should also be included to enable candidates to plan accordingly. Most Royal Colleges require a minimum of 8 weeks' notice of the interview date, however some will require 12 weeks notice in order to provide a Royal College representative.

### 5.4 Arranging the AAC

5.4.1 The Medical Staffing department will make arrangements to convene the AAC and will contact the CMG to organise a date for the interview. The CMG will need to ensure there is flexibility to maintain appropriate representation on the panel.

5.4.2 The AAC will include:

- A Lay Representative
- Chief Executive (or nominated deputy)
- Medical Director (or nominated deputy)
- Relevant Royal College or Faculty Representative.
- CMG Clinical Director or representative
- University Representative (for posts that have a teaching or research commitment)

- 5.4.3 The Royal College representative is an external member of the panel nominated by the Royal College or Faculty. They will provide impartial knowledge and specialist advice to the panel. All Royal Colleges require a minimum 8 week notice period for providing a nomination.
- 5.4.4 The University will nominate the most appropriate representation dependent on the post, usually a Senior Lecturer within the recruiting department.
- 5.4.5 In exceptional circumstances and with prior agreement with Medical Staffing and the Chair an additional Departmental consultant representative could be added to the panel. Circumstances for this would include dual specialty appointments and/or dual site appointment.

## **5.5 Application Principles**

- 5.5.1 Applicants must apply via Trac or NHS Jobs. Applicants will be asked to include specific information indicating how they meet the essential requirements identified on the person specification and details of their employment and referees.
- 5.5.2 Equality and diversity monitoring information is required from all applicants and will be recorded on Trac.
- 5.5.3 Medical Staffing Department will check the Alert List and SARS to ensure there is no known history that would make the candidate unsuitable for employment.

## **5.6 Shortlisting and Invite to Interview**

- 5.6.1 Doctors can only be short-listed for a Consultant post if they are on the GMC Specialist Register, unless they expect to be awarded their CCT (or recognised equivalent, if outside the UK) within six months of the date of interview.
- 5.6.2 Within 48 hours of the post-closing, applications will be sent via Trac to all clinical panel members that have been arranged at that point together with the Job Description and Person Specification. If a Royal College member hasn't been nominated in time for shortlisting, they will be sent the applications at a later date.
- 5.6.3 Short listing will be carried out against the person specification and must be completed within 5 working days of the closing date. Each nominated clinical AAC member is responsible for scoring each applicant against the criteria on Trac and providing evidence of their decision. The evidence may be required at a later date, should the decision be challenged.
- 5.6.4 Upon receipt of shortlisting from the panel members, the Medical Staffing department will invite the candidates for interview accordingly. Any concerns with regards to the final shortlist will be discussed and finalised with the Recruiting Manager.

- 5.6.5 Any applicants who are unsuccessful at this stage will be notified via Trac by the Medical Staffing Department.
- 5.6.6 Candidates will be invited to interview via Trac by the Medical Staffing Department. The CMG may also choose to use other selection methods as part of the interview process. This could include,
- Presentation
  - Personality Profile Assessment
  - Clinical Assessment
  - Scenario Assessment
  - Role Play
  - Assessment of specialty specific information – performance information, complaint etc.

## 5.7 Interview

- 5.7.1 An AAC may not proceed if any of its members are not present, unless a suitable deputy or alternative member can be found. A member of the Medical Staffing Department must be informed and authorise the changes to the AAC constitution.
- 5.7.2 Medical Staffing will arrive in advance of the members of the AAC to prepare the venue. The interview room is to be prepared in accordance with the distributed table plan; ensuring refreshments are available for the candidates and the AAC members. The timings for delivery of refreshments should be agreed with the venue staff. Interview folders must be handed to the members of the AAC when they arrive, highlighting any minor amendments to the timetable or candidate list.
- 5.7.3 Prior to the commencement of the interviews, the Chair of the AAC will ensure that the panel agrees a common understanding of the criteria, drawn from the Job Description and Person Specification. The Chair will agree the questions to be asked and the order in which this will take place. All areas detailed on the person specification should be covered.
- 5.7.4 Any panel member with prior knowledge of a candidate must declare this to the Chair of the AAC.
- 5.7.5 The Chairperson should explain the assessment forms if the panel are unfamiliar with them as **completion is mandatory for all panel members**. The roles of each of the panel members should be clarified and an explanation given and agreement sought on the scoring mechanism that is required by **each** panel member, in advance of the interview/presentation.
- 5.7.6 Each AAC member should take individual notes for each interview and throughout the decision making process. At the end of each interview, the Chairperson should allow time to practically assess each candidate against the Job Description and Person Specification.



5.7.7 Candidates are required to give a 10 minute presentation (without visual aids). This is an opportunity to decide a title that will cover a desired area, which is particularly important to the CMG. The title of the presentation need to be agreed between the CMG and Medical Staffing, and provided prior to the interview or provided on the day as agreed by the CMG Lead.

## **5.8 Decision Making Process**

5.8.1 Once all candidates have been interviewed, the Chairperson will ask for comments from the panel, usually starting with the Royal College representative. All panel members should be able to clearly justify their decision-making and must ensure they do not contravene any employment legislation. Decisions should be based on application and interview performance and the presentation undertaken and must be transparent and clearly defined. Scoring/ranking sheets must be used and signed by each panel member as part of the decision making process,

5.8.2 Where possible the Chairperson should secure a unanimous decision from the panel. If this is not possible a majority decision will be made and the candidate duly appointed. Where the candidates are very closely matched or tied, the panel will revisit the criteria on the Person Specification and consider if a suitable 'weighting' of importance can be applied. Where a decision is still not clear the CMG representative/s along with the Medical Director Representative will discuss and agree the preferred candidate for appointment, by 'casting' vote. The Chairperson will agree a summary of the discussion that will be reflected on the decision form. In the event of a majority appointment discussion should be fully captured to provide a clear rationale for the decision making. Discussions between panel members should not be discussed directly with candidates outside of agreed feedback.

5.8.3 If any member of the panel does not agree with an appointment being made by majority vote and feels a particular candidate is not suitable for appointment, then all reasons should be formally recorded and the candidates informed that a decision cannot be made at this time and they will be contacted in due course. In this event the Medical Director will be provided with all the relevant documentations and asked to make a final decision.

5.8.5 The AAC is not permitted to reach any decision on starting salary as this will be determined by the national Terms and Conditions for Consultants (England) 2003. Any relevant information the candidate wishes to offer in relation to starting salary should be recorded by the Chair and passed to the Medical Staffing Team. There is no provision for the payment of removal expenses except in the exceptional circumstances described in the Trust's Relocation Expenses Policy (ref: A10/2004).

5.8.6 A decision form is completed and signed by the Chairperson.

5.8.7 At the conclusion of the AAC, the Medical Staffing team must collect the summary sheet and all of the interview assessment sheets for inclusion in the recruitment file. The file must be retained for 5 years. The Medical Staffing team will also collect spare copies of the candidate application forms so that these can be confidentially disposed.

## **5.9 Post Interview**

- 5.9.1 Candidates will be advised of the decision on the day or within one working day depending on the time of the Advisory Appointments Committee (AAC) concluding. Posts are offered to appointed candidates by telephone. It should be agreed who is the most suitable person to offer the post when concluding deliberations.
- 5.9.2 Feedback to unsuccessful candidates is offered. The committee, under the guidance of the Chairperson, is required to agree an appropriate panel member to meet or contact by phone the unsuccessful candidate/s within one working day. Usually this would be the CMG representative(s).
- 5.9.3 A conditional offer letter will be sent by Medical Staffing Department within two working days of the interview to the appointed candidate via Trac.
- 5.9.4 The Medical Staffing Department will undertake the necessary pre-employment checks i.e. Right to work, References, GMC, DBS, Health Clearances etc. The pre-employment checks will be in line with the NHS Employment Checks as outlined at the following link: <https://www.nhsemployers.org/your-workforce/recruit/employment-checks>
- 5.9.5 The CMG and candidate will discuss and arrange a provisional start date; however this will be subject to completion of the pre-employment checks.
- 5.9.6 Once all pre-employment checks have been completed the CMG will be informed. The Medical Staffing Department will complete the necessary payroll forms and contract of employment.

## **5.10 Induction**

- 5.10.1 The Medical Staffing Team will book the new starter to attend the corporate induction day in line with their start date and inform the CMG.
- 5.10.2 The Head of Service is responsible for planning and overseeing the new starter's local induction in line with the Trusts Policy for Induction B4/2003

<http://insitetogether.xuhl-tr.nhs.uk/pag/pagdocuments/Induction%20UHL%20Policy.pdf>

## **5.11 Appointment of Locum Consultants**

- 5.11.1 Locum Consultant appointments are not subject to the full appointment procedure used to substantive appointments. All doctors who are to be appointed as Locum Consultants should normally have held a post of consultant status (or its equivalent), or should be within 6 months of successfully completing specialist training.

- 5.11.2 Where possible Locum Consultant appointments should be restricted to an initial period of 6-12 months and are extended subject to a satisfactory assessment of performance by the Head of Service and agreement from the CMG Clinical Director.
- 5.11.3 Locum Consultant appointments should be advertised for a minimum of one week on the Trust website and NHS Jobs. Advertisements can be limited to internal applicants only provided there are sufficient candidates. Applicants must be short-listed against the Job Description and Person Specification by a minimum of two Consultants.
- 5.11.4 The interview panel for Locum Consultant appointments should include a minimum of 2 Consultants including the CMG Clinical Director or nominated Deputy.

## **6 EDUCATION AND TRAINING REQUIREMENTS**

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- 6.1 All AAC members from the Trust must receive training on Consultant Recruitment and be up to date on the UHL equality and diversity statutory and mandatory training.

## **7 PROCESS FOR MONITORING COMPLIANCE**

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### **7.1 Record Keeping**

- 7.1.1 Interview score/rank sheets from panel members, the interview summary sheet and interview notes are retained by Medical Staffing for the recommended 5 year period.

## **8 EQUALITY IMPACT ASSESSMENT**

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- 8.1 The Trust recognises the diversity of the local community it serves. Our aim therefore is to provide a safe environment free from discrimination and treat all individuals fairly with dignity and appropriately according to their needs.
- 8.2 As part of its development, this policy and its impact on equality have been reviewed and no detriment was identified.

## **9 SUPPORTING REFERENCES, EVIDENCE BASE AND RELATED POLICIES**

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- 9.1 NHS Employers website - <http://www.nhsemployers.org/>
- 9.2 Recruitment and Selection Policy and Procedure B43/2009
- 9.3 Disclosure & Barring Service Policy B2/2006
- 9.4 Policy for Corporate and Local Induction B4/2003

9.5 The National Health Service (Appointment of Consultants) Regulations 1996 –

<https://www.nhsemployers.org/your-workforce/recruit/employer-led-recruitment/consultant-appointments>

**10 PROCESS FOR VERSION CONTROL, DOCUMENT ARCHIVING AND REVIEW**

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- 10.1 This document will be uploaded onto SharePoint and available for access by Staff through INsite. It will be stored and archived through this system.
- 10.2 Medical Staffing will review this policy every 3 years. The updated version of the Policy will then be uploaded and available through INsite Documents and the Trust's externally-accessible Freedom of Information publication scheme. It will be archived through the Trusts PAGL system

## POLICY MONITORING TABLE

Element to be monitored	Lead	Tool	Frequency	Reporting arrangements Who or what committee will the completed report go to.
Ensuring Consultant Interviews follow the correct decision process with key members present	Medical Staffing	Medical Staffing to attend pre and post interview	Every interview	Recruitment Services Officer to report to Medical Staffing Manager if the correct process was not followed
Ensuring Pre-Employment Checks are carried out according to NHS Employment Check Standards	Resourcing Lead	TRAC	Monthly	Regular spot checks of candidate files/vacancies on TRAC carried out by Recruitment Administrator. Quarterly audit carried out by Resourcing Lead/ Recruitment Manager.

### Consultant Recruitment Process

~~Job Description, Person Specification, JDR where required and advert created by CMG (shared with other CMGs for comments/impact) and placed on Trac for approval by CMG Clinical Director and CMG Finance Lead. Approved Business Case and Case of Need to be attached.~~

Vacancy request taken to Enhanced Recruitment Control Board (ERCB) for authorisation from Director of People and OD, Medical Director and Chief Executive

#### Royal College Approval

Send Job Description to appropriate Royal College(s) and University for approval, discrepancies and comments actioned. Final approved JD uploaded to Trac ready to be advertised. College asked for Interview Panel Representative giving 8 weeks notice

#### Post advertised on Trac, NHS Jobs and BMJ

Advert live for 4 weeks and to include interview date where possible

Post loaded on ESR and linked to vacancy on Trac

#### Interview Panel Set up (8 weeks' notice is required from Advert Live Date)

Medical Staffing to agree date with CMG rep then search for panel which includes Chair person, CEO rep, MD Rep, Royal College Rep, Uni Rep, CMG Rep.

#### Advert Closed

Applications on NHS Jobs transferred onto Trac. Shortlisting sent to AAC via Trac within 2 days of advert closing.

#### Shortlisting Returned and Candidates invited to Interview (within 2 weeks of advert closing)

Sars and Alert List to be checked before invites sent

#### Interview Prep and Packs made up

Basic Packs made up with all application forms, which can be removed if candidates withdraw, Order Catering which includes Lunch if a full day of interviewing.

#### Interview day

Room set up by Medical Staffing Department.

#### Post interview

Preferred candidate offered by CMG Rep via telephone or in person if the candidates have been asked to wait. HR Rep brings all paperwork back to Medical Staffing Department and conditional offer made via Trac to successful candidate within 48 hours

#### Pre-Employment Checks started (in line with NHS Employers Guidance)

Employment History and References

Disclosure Barring Service, Right to Work (Tier 2 maybe required), Verification of Identity, Professional Registration (Online Check) and Qualifications, Work Health Assessment (Immunisation Form), RO to RO process to be completed, Request IAT if current NHS employee to confirm length of service and current post/salary details.

#### Start Date and Starter Paperwork

Start date to be confirmed once all pre-employment checks are completed. Book candidate(s) on the next available corporate induction to coincide with start date. Send contract and new starter paperwork through Trac. Update ESR with all Pre Employment checks

A Lay Chairperson is required on all Consultant Appointments Committees.

**In order to undertake the role of a Chairperson an individual will need to have undertaken an Equal Opportunities and Diversity Course within the last 3 years.**

The AAC has delegated responsibility from the Trust Board to make appointment decisions for Consultant posts. The role of the chair is to co-ordinate proceedings on the day; to ensure the selection interview is robust and to keep accurate records.

Typically there are 8 members of an AAC. Each has a defined role and lines of questioning to explore with the candidate. Separate guidance is issued to committee members to describe this further.

The Chair of the AAC has additional responsibilities and these are set out below:

#### **Before candidates arrive**

- Meet and greet all of the committee members and facilitate introductions
- Ensure the committee is clear about the post they are interviewing for and have all received and read their interview pack
- Describe how time will be managed during the day to ensure that the interviews run to time.
- Explain the use of the assessment sheets if any committee member has not used these before
- Ask the committee to declare any prior knowledge of the candidates
- Remind the committee about their responsibility to conduct the interview in a manner that complies with equal opportunities legislation
- Identify a committee member who will be able to give the candidates feedback once a decision has been made (usually this will be someone based at the Trust)
- Review the lines of questions to be pursued by each committee member to ensure robustness.
- Ensure the running order for questions is in the order prescribed on the AAC Guide
- If a summary or feedback from a psychometric test has been provided, share this with the committee and agree any additional questions to address any points of concern
- Liaise with the Medical Staffing Team to ensure any other additional materials associated with the selection methods are available and everyone is aware of the process to be followed
- Liaise with the Medical Staffing Team to resolve any local problems

#### **During the interview**

- Greet the candidate and describe the running order for the interview
- Manage the time
- The chair will be the last person to ask questions and should use the opportunity to probe further on any of the candidate's earlier answers that test interpersonal skills and values and behaviours.

- When all questions have been asked, invite any questions
- Check that you have the correct contact details for the candidate and describe who will call them and when to confirm the panel's decision

#### **After each interview**

- At the end of each interview, when the candidate has left, allow each committee member a few minutes to finish any notes and to reflect on the candidates' answers.

#### **When all interviews are complete**

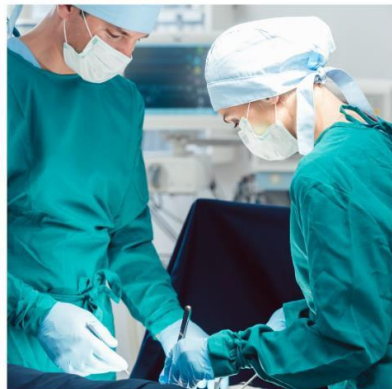
- Collect feedback sheets from each interviewer.
- Ensure that a proper assessment of the candidate's match to the identified domains and the Trust's values and behaviours is included in the feedback
- Lead a discussion to identify a preferred candidate, ensuring this can be objectively justified. If there is no consensus view, a majority decision is acceptable providing the external/Royal College Assessor is in agreement that the candidate meets the professional requirements for the role.

#### **Making the final decision**

- Record the final decision on the Interview record sheet.
- Record who will communicate the decision (successful and unsuccessful) to the candidates.
- Advise the Medical Staffing Team that the process is complete so that the panel's documentation can be collected in and the room returned to its normal layout.



# Recruitment information pack



## Consultant

Find out more about working with us:  
[www.leicestershospitals.nhs.uk/](http://www.leicestershospitals.nhs.uk/)



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## SECTION 1: ABOUT UHL NHS TRUST

We are one of the largest and busiest acute teaching Trusts in England with a team of approximately 15,000 dedicated employees.

**Our patients are the most important thing to us and we are constantly striving to improve the care they receive, through looking at the ways we work, ensuring our staff are highly trained and encouraging research which allows us to offer our patients the latest technologies, techniques and medicines.**

**We** serve the one million residents of Leicester, Leicestershire and Rutland – and increasingly specialist services over a much wider area.

Spread across the General, Glenfield and Royal Infirmary hospitals, we work closely with partners at the University of Leicester and De Montfort University, providing world-class **teaching to nurture and develop the next generation of doctors, nurses and other healthcare professionals, many of whom go on to spend their working lives with us.**

**Wherever employees work at whatever level, they are valued and contribute to the Trust's purpose of delivering 'caring at its best'.**

**Our Trust Values are:**

1. We **treat** people how we would like to be treated
2. We **do** what we say we are going to do
3. We **focus** on what matters most
4. We are **one team** and we are best when we work together
5. We are **passionate** and **creative** in our work

**At UHL NHS Trust we:**

- Have a mentorship scheme for all new Consultant staff. This is designed to help new appointees to settle into working at UHL as easily as possible. It is designed to assist individuals in a personal way to familiarise them with the Trust and how things work in practice.
- Fully involve our staff in both local and Trust-wide decision making.
- Support our employees' health and wellbeing.
- Truly embrace diversity, individuality, new ideas and staff innovations.
- Offer learning and development opportunities and career paths for real job satisfaction and personal progress.
- Offer a number of staff benefits that can save staff money.

## SECTION 2: ABOUT THE UNIVERSITY OF LEICESTER

**College of Life Sciences** <http://www2.le.ac.uk/colleges/medbiopsych>

***Pro-Vice-Chancellor, Head of College & Dean of Medicine:*** Professor Philip Baker BM BS, DM, FMedSci

The University of Leicester, with University Hospitals of Leicester NHS Trust, is committed to enhancing the partnership between academia and the NHS in Leicester. A strong synergy between our organisations is the key to success.

Major contributions made by consultant colleagues to the academic mission through research, teaching and education, clinical leadership, enterprise and innovation are recognised by the awarding of a range of honorary titles from Honorary Fellow through to Honorary Professor.

The College's mission is to pursue the highest standards of research, education and training in biomedical and related subjects, and to apply this knowledge and expertise to enhance the quality of life and economic prosperity of populations, both locally and in the wider world. Its considerable academic resources mean that it is widely recognised for the international impact of its research and the quality of its undergraduate and postgraduate teaching.

Based in some of the newest purpose-built and modern facilities in the UK, the College offers a wide range of courses and education in the areas of laboratory, clinical, and population health through the provision of innovative education and globally recognised research.

Since it was founded in 2009, the College has created the academic and physical environment to enable scientists and clinicians to work together across traditional boundaries to address some of the key outstanding questions in biomedical research and to engage with increasing effectiveness with commercial and public bodies. We are a thriving community of academic expertise based in laboratory, clinical, health and social science settings.

The high calibre of our academic endeavour is increasingly being recognised. For example in the 2016 Shanghai International ranking, Leicester was ranked 35<sup>th</sup> (of almost 3,000 medical schools); Leicester was 6<sup>th</sup> in the UK (the highest rank for clinical medicine outside of the Golden Triangle).

The College comprises four schools and six departments:

- Leicester Medical School
- School of Biological Sciences
- School of Psychology
- School of Allied Health Professions

- Cardiovascular Sciences
- Genetics and Genome Biology which hosts the Leicester Cancer Research Centre
- Health Sciences which host the Diabetes Research Centre
- Respiratory Sciences
- Molecular and Cell Biology
- Neuroscience, Psychology and Behaviour

The George Davies Centre is the largest investment in medical teaching and applied research by a UK university in the last decade. When you add to this the friendliness and resources of the University and the city's excellent facilities, you will understand why we attract leading scientists here – not to mention some of the most promising students from the UK and around the world.

### College Research Priorities

In 2015 the University launched its new institutional research strategy emphasizing our commitment to outstanding research that informs and enhances our teaching and learning, and is underpinned by the core values of excellence, rigour, originality and integrity. A key part of this strategy was the establishment of a small number of flagship interdisciplinary Research Institutes, Centres and Networks. We are proud to host a number of these within our College around which much of our research is now focused. These include the [Leicester Institute of Structural and Chemical Biology](#), the [Leicester Precision Medicine Institute](#), Centre for Black and Minority Ethnic Health, and Centre for Environment, Health and Sustainability. In the wider University are the Institute for Advanced Studies <https://www2.le.ac.uk/institution/lias> (or see further down), and CAMEo the Research Institute for Cultural and Media Economies <https://www2.le.ac.uk/institutes/cameo/about-cameo>.

The NIHR Biomedical Research Centre (BRC) commenced in April 2017, which is a collaboration between the University of Leicester, the University of Loughborough and the University Hospitals of Leicester NHS Trust. The BRC brings together the work of Respiratory Medicine, Cardiovascular Science and Diet, Lifestyle and Physical Activity. There is also an interest in research which underpins teaching and learning. (<http://www2.le.ac.uk/colleges/medbiopsych/research>)

The College's central provision in support of research and teaching includes a Core Biotechnology Service (covering bioinformatics, imaging technologies and protein and DNA facilities); a Central Technical Service (supporting teaching laboratories); a Clinical Trials Unit, and the Leicester Drug Discovery and Diagnostics Centre

With renewed energy and focus, our College doubled its annual research awards in 2016/17, and research income has been sustained at these levels since. This step-change in activity has been maintained as a result of the dual approach of encouraging individuals to win project grants and personal fellowships, and supporting teams to achieve major awards with large strategic initiatives.



Examples of Leicester's success include the award of an NIHR Biomedical Research Centre in partnership with the University Hospitals of Leicester (UHL) NHS Trust, an MRC funded Midlands Cryo-Electron Microscope Facility, the Midlands Health Data Research UK Substantive Site, a new British Heart Foundation Research Accelerator in Precision Medicine, and a Wellcome Trust Institutional Strategic Support Fund.

We are responding to the rapidly changing national and international research landscape that places an increasing emphasis on interdisciplinary and impactful research. For this purpose, we are working closely with our key NHS partners, UHL and the Leicester Partnership Trust, and growing our industrial engagement with biotech companies and pharma to meet the goals of the Government's Industrial Strategy and Life Science Sector Deal. This includes major investment in the Charnwood Life Sciences Opportunity Zone, where we will establish a Living Laboratory to showcase the healthcare research of the University and a bio-incubator space for new start-ups and grow-on companies. In addition, we are building exciting research programmes with partners in overseas countries through the Global Challenges Research Fund. We are also very conscious of the need to play to our institutional and regional strengths, and are engaging closely with Leicester City and County Councils, and the Midlands Health Innovation network of regional Universities.

### **Transformative and Innovative Teaching**

Teaching across the College of Life Sciences is research-led. Our ambition is to deliver a world-class, discovery-led and discovery-enabling learning experience in all teaching programmes to produce high quality, resourceful, independent and resilient graduates. There are programmes in Medicine and a growing range of allied health professions including Midwifery with Leadership and Nursing with Leadership. A new patient-ocentred, apprenticeship-based programme in Medicine was launched in 2016. In addition there is a broad range of programmes in Biological Sciences and Psychology at both undergraduate and postgraduate levels, currently including the DClinPsych. A new suite of postgraduate programmes reflecting the areas of research excellence in the College is under development including strengths in epidemiology and social sciences in medicine.

## SECTION 3: LEICESTER, LEICESTERSHIRE AND RUTLAND, A GREAT PLACE TO LIVE AND WORK

Leicester, Leicestershire and Rutland are vibrant, diverse and welcoming places to live, from the modern, bustling city to 'picture postcard' villages.

Leicester is home to over 100 shops including a flagship John Lewis and big name designers. St Martin's Square and a number of arcades house a range of independent and regional retailers and the famous city centre covered market is the largest in Europe. The Golden Mile on Belgrave Road has the largest concentration of Indian jewellery shops outside India.

The city offers an amazing chance to join many different cultural celebrations, including the UK's largest celebration of Diwali and biggest Caribbean Carnival. You can take your taste buds on a gastronomic journey around Leicester, Leicestershire and Rutland with award-winning chefs, city restaurants, rural country pubs, contemporary gastro pubs and country tea rooms. The nightlife and entertainment scene also includes:

- A fantastic range of clubs, pubs and bars
- The O2 Academy and De Montfort Hall bringing in international acts
- More intimate venues such as The Musician, Firebug, The Donkey and Y Theatre.
- The second biggest annual comedy festival in the UK
- The Curve theatre and Phoenix independent cinema.

Leicester also has a great sporting reputation, with the following:

- Leicester City Football Club
- Leicester Tigers Rugby Club
- Leicestershire County Cricket Club
- Leicester Riders Basketball Team
- Horse racing at Leicester Racecourse

The county is crisscrossed by footpaths, cycle trails and canals. Outdoor attractions include the National and Charnwood Forests, Bradgate Park, Beacon Hill and Swithland Wood, a number of stately homes and Rutland Water.

The strong transport infrastructure also means that you are never far from other destinations in the UK or even abroad.

Find out more at Visit Leicester and Discover Rutland (links below):

<http://www.jobsatleicestershospitals.nhs.uk/welcome-to-leicester/>

<https://www.visitleicester.info/>

<https://www.discover-rutland.co.uk/>

## SECTION 4: DEPARTMENT OF \*\*\*\*

add in information about the Dept.

### **KEY WORKING RELATIONSHIPS**

Detail the key relationships for the role

Detail any subspecialties and links with other depts.

### **MEDICAL STAFF**

List consultants, sites and subspecialty.

### **DEPARTMENTAL RESEARCH**

Led by: \*\*\*\*\*

About the activities of the academic division

The current interests within the CMG \*\*\*\*\* include \*\*\*\*\*



## Section 5: Job details

.....Clinical Management Group

<b>Job Title:</b>	<b>Consultant in ***** (** PAs)</b>
<b>Base:</b>	Your normal place of work will be xxxxxx but you may be required to work in other designated locations of the Trust. In particular, flexibility is required across the three main hospital sites (Leicester Royal Infirmary, Leicester General Hospital, and Glenfield Hospital). If your initial location is one of these sites excess travel reimbursement would not apply for a permanent or temporary change of base.
<b>Reports to:</b>	<b>CMG Clinical Director HOS??</b>
<b>Professionally Accountable to:</b>	<b>Medical Director</b>

### APPOINTMENT

The appointment will be whole time. Any Consultant who is unable for personal reasons, to work whole time, will be eligible to be considered for the post. If such a person is appointed, modification of the job content will be discussed on a personal basis in consultation with Consultant colleagues.

[About UHL, our values and behaviours](#)

Every day at University Hospitals of Leicester we save lives, improve lives and usher in new life. Our Trust Values determine our behaviour and our culture. We are a passionate and creative team and at our best when we work together.

Our Values are:

1. We **treat** people how we would like to be treated



2. We **do** what we say we are going to do



3. We **focus** on what matters most



4. We are **one team** and we are best when we work together



5. We are **passionate** and **creative** in our work



As one of the very largest NHS Trusts in the country, our contribution to our communities goes way beyond direct health; we are the largest employer in our region, we educate and train the staff of the future, we push research boundaries and with our £1bn turnover we are an economic engine for the wider East Midlands and beyond.

This is particularly exciting time for Leicester's Hospitals. We have been given £450m by the Government to provide a host of new facilities and reconfigure services between our three main sites. Flagship projects include a new Children's Hospital, a new Maternity Hospital, a new Treatment Centre and two new Intensive Care Units. Equally importantly, we are going "paperless", with a £12m investment in our NerveCentre computer system to help our team deliver world-class care.

We want to continue to improve everything that we do, so that we can achieve our Vision: Caring at its best for every patient, every time.

Our Quality Strategy, "**Becoming the Best**", describes how we are doing that in a determined, targeted and systematic way, with our staff the champions of change and our patients not just beneficiaries but partners.

"**Becoming the Best**" is based on best practice from "outstanding" organisations within the NHS and abroad. It has six key elements:

- We **understand** what is happening in our services, so that we know what needs to be improved
- We have clear **priorities and plans** for improvement, so that we are clear about what we are trying to do
- We are developing our **culture and leadership**, so that everyone is empowered and encouraged to make improvements
- We have adopted a single approach to improvement (our quality improvement **methodology**), and are giving people at all levels the **skills** to use it
- We always involve our **patients** when we are making improvements that impact on them and their care
- We are integrating this work with the wider **health and social care system**, of which we are a part.
- These elements are shown in the diagram below (the blue cog), together with the specific priorities that we are working on at the moment (the pink and green cogs).
- 

## Job Description

### JOB SUMMARY

(Example only)

- Maintenance of the highest clinical standards in the management of patients.
- To share with colleagues responsibility for the day-to-day management of patients.
- To promote new ways of working and co-ordinating care for patients in the community and to ensure that services are based on effective and integrated partnerships across the health community.
- Take part in multidisciplinary case conferences.
- Supervise and train junior medical staff
- To be involved in appraising and assessing juniors.
- Teaching, research and administration.
- To proactively develop the service.
- To actively participate in both departmental and Trust matters concerning Clinical Governance and audit.

## DUTIES AND RESPONSIBILITIES OF THE POST

The overriding purpose is to support the provision of highest quality patient care through personal actions and continuous improvement.

- Responsibility for the prevention, diagnosis and treatment of illness, and the proper functioning of the department;
- Cover for colleagues' annual leave and other authorised absences;
- To participate in service development and business planning in collaboration with the other Consultants in the department, the CMG and local GPs and commissioners within the local CCGs;
- Professional supervision and management of junior medical staff including the observance of local employment and human resource policies and procedures;
- Responsibilities for carrying out teaching, examination and accreditation duties as required and contributing to undergraduate, postgraduate and continuing medical education activity, locally and nationally;
- Participating in medical audit, the Trust's Clinical Governance processes and in CPD - CPD is provided in job plans - and attendance at audit and other governance meetings is mandatory;
- Managerial, including budgetary responsibilities where appropriate and compliance with standing orders and standing financial instructions of the Trust.
- In line with GMC 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.
- The post-holder is expected to respond in a timely fashion to legitimate requests from Trust officers: this might include investigations of incidents or complaints.
- The post-holder is expected to participate in teaching and training of junior staff and other clinical staff groups. The appointee will also have supervision responsibilities for junior medical staff within the specialty. If appropriate the

post-holder will be named in the contract of junior staff as the person responsible for overseeing their training and as an initial source of advice to such doctors regarding their careers.

- The post-holder is expected to participate in professional continuing medical education; study leave is provided for this purpose.
- The post-holder will be expected to undertake the Trust Corporate and Directorate specific Induction and competency Programmes appropriate to role.
- The post-holder will be required to maintain their continuing professional development (CPD) to be able to successfully revalidate. As per the Trust requirement the successful candidate will be required to have annual appraisal and attend/keep fully up to date with statutory and mandatory training as stipulated.

## JOB PLAN

The job plan will be subject to annual review, with any revisions sought by mutual agreement but it is expected that the successful candidate will work with the CMG management team to ensure that services are delivered efficiently and reflect best practice with processes and governance to match - this may require new and flexible ways of working in the future.

### Outline Job Plan - Example only

	<b>AM</b>	<b>PM</b>
<b>Monday</b>	OPD 1	MDT 0.5
<b>Tuesday</b>	Day case 0.5	Admin 1
<b>Wednesday</b>	ERCP 0.5	
<b>Thursday</b>	Theatre 1	Theatre 1
<b>Friday</b>	MDT / Ward round 0.5	Audit / CPD etc 1

### Programmed Activities

There is an on-call rota of 1:5 with Emergency work currently assessed as averaging half a programmed activity per week.

## SUPPORTING PROFESSIONAL ACTIVITY (SPA)

It is expected that most Consultants within the Trust will have 2.5 PAs for Supporting Professional Activities (SPA).

1.5 PAs are allocated as a minimum to all consultants for SPAs in order to support the requirements of revalidation which include activities such as participating in audit, CPD and mandatory training.

Up to a further 1 PA will be available for SPA by mutual agreement as part of the job planning process for further appropriate verifiable SPAs. Where a consultant decides not to undertake additional SPAs over and above 1.5 PAs, suitable alternative clinical work will be offered to bring the job plan up to 10 PAs.

It is expected that the post holder will become a clinical teacher. In addition to the standard 1.5 SPAs the clinical teacher role is supported by 0.5 SPAs to support two hours of undergraduate teaching time per week. This teaching can occur in different settings. The clinical teacher will be expected to show evidence of satisfactory performance in this role at appraisal. **IF THERE IS NO UNDERGRADUATE TEACHING PLEASE REMOVE THIS PARAGRAPH**

## ANY OTHER DUTIES

This job description is not to be taken as an exhaustive list of duties and it may be reviewed in the light of changed service needs and development. Any changes will be fully discussed with the post holder. The post holder will be required to carry out the duties appropriate to the grade and scope of the post.

In order to ensure the Trust's ability to respond to changes in the needs of the service, after appropriate consultation and discussion with the you (including consideration of personal circumstances, current skills, abilities and career development) the Trust may make a change to your location, duties and responsibilities that are deemed reasonable in the circumstances.

## EDUCATION: TEACHING AND TRAINING

All Consultants are expected to contribute to teaching and training of undergraduate students and postgraduate trainees as part of their role as a Consultant in UHL.

Consultants will normally have undergraduate medical students placed with them during clinical duties and are expected to teach alongside clinical service work. Similarly, Consultants will normally be involved in clinical supervision of postgraduate trainees working within UHL.

Medical students based at the University of Leicester follow a standard 5 year programme. The teaching of undergraduate students in UHL reflects the Divisional structure of the Trust. Undergraduate medical students are taught by UHL throughout the medical course from years 1 to 5. Both ward- and outpatient-based clinical teaching, as well as tutorial and lecture style teaching is undertaken.

Some Consultants will choose to take on additional undergraduate and/or postgraduate education and training responsibilities. This activity will be specific, identifiable, evidenced, recognised and appraised. Such additional teaching and training activity will be recognised within their SPA allowance.

Those undertaking specifically agreed additional undergraduate teaching duties recognised as part of the SPA allowance (up to 0.5SPAs) within their job plan may be recognised as Clinical Teachers.

<http://www2.le.ac.uk/colleges/medbiopsych/people/documents/clinical-teachers-guidance>; <https://www2.le.ac.uk/departments/msce/clinical-teaching/clinical-teaching>

This teaching can occur in different settings. The clinical teacher will be expected to show evidence of satisfactory performance in this role at appraisal.

#### Principal Elements:

- To support and oversee the placement of students in the department and act as a clinical teacher
- To facilitate delivery of undergraduate teaching as directed by the departmental undergraduate education lead

Enhanced undergraduate duties will include acting as examiners in medical school assessments, providing occasional seminar and small group teaching, lecturing and other Phase 1 teaching within the medical curricula, in addition to individual supervision of clinical students attached to them.

Those who have an additional significant responsibility as a block or clinical education lead within their DCC time are also considered for the award of the title of honorary senior lecturer.

Enhanced postgraduate duties will include acting as an Educational supervisor for Foundation or Specialty trainee, UHL Divisional Education governance lead, contributing to recognised postgraduate-teaching courses in UHL, e.g. Specialty Training programmes, involvement in recruitment of trainees, interviews for specialty training and recruitment to Foundation programmes

## GENERAL

This job description indicates the main functions and responsibilities of the post. It is not intended to be a complete list. You may be required to undertake other duties from time to time as we may reasonably require.

You will be required to maintain compliance with all statutory and mandatory training requirements.

The link to the Trust's policies and procedures is:

<https://secure.library.leicestershospitals.nhs.uk/PAGL/SitePages/Home.aspx>



# Section 6: Person Specification

Post: Consultant in \*\*\* - \*\*\*  
CMG:

Criteria	Essential	Desirable	Stage Measured at A – application I – Interview T – Test
Commitment to Trust Values and Behaviours	<ul style="list-style-type: none"> <li>Must be able to demonstrate behaviours consistent with the Trust's Values and Behaviours</li> </ul>		Interview
Training & Qualifications	<ul style="list-style-type: none"> <li>MB BS or Equivalent</li> <li>Full GMC Registration</li> <li>Fully Accredited for Higher Specialist Training or will be eligible for inclusion on the Specialist Register within 6 months of the interview date.</li> <li>MRCP/MRCS or Equivalent</li> <li>Current BLS Certification</li> </ul>	<ul style="list-style-type: none"> <li>Membership of relevant Specialist Societies or Associations.</li> <li>Higher degree e.g. MSc, MD or equivalent.</li> </ul>	Application
Experience and Clinical Skills	<ul style="list-style-type: none"> <li>Fully trained in .....</li> <li>Excellent clinical skills and experience requisite to meeting all aspects of the Job Plan.</li> <li>Ability to apply sound clinical judgment to problems.</li> <li>Demonstrates clear, logical thinking/ analytical approach.</li> </ul>	<ul style="list-style-type: none"> <li>Evidence of clinical or research commitment and a relevant specialty interest.</li> </ul>	Application Interview
Communicatio	<ul style="list-style-type: none"> <li>Demonstrable skills</li> </ul>	<ul style="list-style-type: none"> <li>Highly</li> </ul>	Application



<p>n and relationship skills</p>	<p>in written and spoken English that are adequate to enable effective communication with patients and colleagues.</p> <ul style="list-style-type: none"> <li>To be empathic and sensitive; capacity to take others perspectives and treat others with understanding.</li> <li>Highly Developed Emotional Intelligence</li> </ul>	<p>developed emotional intelligence</p> <ul style="list-style-type: none"> <li>High standard of presentation both written and verbal</li> <li>Demonstrable track record of successful change management</li> <li>Proven ability to maintain focus in a demanding environment</li> </ul>	<p>Interview</p>
<p>Management</p>	<ul style="list-style-type: none"> <li>Ability to work effectively as part of a multidisciplinary team and supervise juniors.</li> <li>Experience of leading teams and awareness of leadership styles.</li> <li>Ability to effectively organise, prioritise and manage clinical workload.</li> <li>Understanding of wider health agenda and modern NHS.</li> <li>Ability to work to overcome barriers to change (negotiating, influencing and persuasion skills).</li> <li>Knowledge and understanding of clinical governance issues.</li> </ul>	<ul style="list-style-type: none"> <li>Evidence of management and administration experience.</li> <li>Management training on an accredited course.</li> <li>Awareness of Service Development issues.</li> </ul>	<p>Application Interview</p>
<p>Motivation</p>	<ul style="list-style-type: none"> <li>Personal integrity and reliability.</li> <li>Ability to motivate and develop both medical Staff and non-medical staff.</li> </ul>	<ul style="list-style-type: none"> <li>Commitment to further develop the post and the service provided.</li> </ul>	<p>Interview</p>
<p>Audit/Quality Improvement</p>	<ul style="list-style-type: none"> <li>Effective participation in and a commitment to clinical audit.</li> </ul>	<ul style="list-style-type: none"> <li>Undergone training in teaching and willingness to</li> </ul>	<p>Application Interview</p>

	<ul style="list-style-type: none"> <li>• Participation in a quality improvement programme</li> <li>• Experience of quality improvement work and audit</li> </ul>	<p>organise relevant audit activities including quality improvement evidence</p> <ul style="list-style-type: none"> <li>• Completion of formal courses in Audit and quality improvement.</li> <li>• Published Audit including quality improvement.</li> </ul>	
Research	<ul style="list-style-type: none"> <li>• Understanding and interest in research.</li> <li>• Ability to appraise research critically</li> <li>• Ability to supervise juniors undertaking research projects.</li> <li>• Evidence of recent research and development activity</li> </ul>	<ul style="list-style-type: none"> <li>• Publications in nationally and internationally recognised peer-reviewed journals on subjects relevant to the speciality.</li> </ul>	Application Interview
Teaching	<ul style="list-style-type: none"> <li>• Experience of and a commitment to training/ teaching undergraduate and postgraduates.</li> <li>• Appraisal and assessment skills.</li> <li>• Ability to assess clinical competencies</li> <li>• Enthusiastic and able to inspire and lead others.</li> </ul>	<ul style="list-style-type: none"> <li>• Willingness to develop new approaches to teaching.</li> <li>• Post Graduate qualification in teaching and training.</li> </ul>	Application Interview
Equality and Diversity	<ul style="list-style-type: none"> <li>• Able to demonstrate a commitment and understanding of the importance of treating all individuals with dignity and respect appropriate to their individual needs.</li> </ul>		Interview

## SECTION 7: CONDITIONS OF SERVICE

The appointment will be made on Trust terms and conditions which presently reflect the terms and conditions of service for Consultants (England) 2003, as amended from time to time.

### **Relocation**

Where applicable, removal expenses will be paid to the successful candidate in accordance with the Trust policy. It is advised that you seek advice before making any commitments.

### **Salary**

The starting salary of the appointment (exclusive of any distinction and meritorious service award payable to you) will be the appropriate threshold on the Consultant pay scale (MC72) ranging from £82,096 - £110,683 (or the appropriate transition scale threshold on MC51).

### **Notice Period**

The employment is subject to three months' notice on either side, subject to the provisions of schedule 19 of the Terms and Conditions of Service for Consultants (England) 2003.

### **Annual Leave**

The post-holder will be entitled to 32 days annual leave per year. After 7 years' service 2 additional days are awarded.

The Trust would normally require 6 weeks' notice for leave booked.

### **Study Leave**

A maximum of 30 days study leave with pay and expenses can be taken over a three year period, or ten days each year.

### **Residence**

The successful candidate will be required to maintain his/her private residence in contact with the public telephone service and to reside 10 miles by road from base hospital unless specific approval for greater distance is given by the Trust.

### **Medical Excellence**

The Trust is committed to providing safe and effective care for patients. To ensure this, there is an agreed procedure for medical staff that enables them to report quickly and confidentially, concerns about the conduct, performance or health of medical colleagues. All medical staff, practising in the Trust, should ensure that they are familiar with the procedure.

## **SECTION 8: RECRUITMENT SERVICES CONTACT INFORMATION**

### **RECRUITMENT SERVICES TELEPHONE (CONSULTANT RECRUITMENT):**

0116 258 6399

### **RECRUITMENT SERVICES E-MAIL (CONSULTANT RECRUITMENT):**

[uhlconsultantrecruitment@uhl-tr.nhs.uk](mailto:uhlconsultantrecruitment@uhl-tr.nhs.uk)

### **RECRUITMENT SERVICES ADDRESS:**

University Hospitals of Leicester NHS Trust  
Paget House  
2 West Street  
Leicester  
LE1 6XP

### **WEB ADDRESSES:**

You can also visit the UHL Website via the following web links:

<http://www.leicestershospitals.nhs.uk/aboutus/our-hospitals/>

<http://www.leicestershospitals.nhs.uk/aboutus/work-for-us/>

<http://www.jobsatleicestershospitals.nhs.uk/>