Golden Jubilee National Hospital

Surgical Specialties Directorate
Job Description and Particulars
Relating to the Post of
Consultant Cardiac Transplant & Retrieval Surgeon
1. Job Identification

**Job Title:** Consultant Cardiac Transplant & Retrieval Surgeon

**Responsible to:** Operational and Strategic lead & Associate Medical Director

**Accountable to:** Medical Director

**Department(s):** Cardiothoracic Surgery, SNAHFS

2. Introduction

The Golden Jubilee National Hospital (GJNH), which is part of NHS Scotland, has 300 beds, all wards having single or two bedded rooms with ensuite facilities. The estate is one of a high specification with a four star hotel and conference centre as an integral unit alongside the hospital. This has provided a very pleasing and attractive working environment for staff and a desirable patient experience. The main clinical services provided are heart and lung, elective major orthopaedics, general surgery, plastic surgery, diagnostic imaging and endoscopy services.

**Location**

The GJNH is a state of the art tertiary referral centre on the banks of the River Clyde adjacent to the Erskine Bridge, in close proximity to Glasgow International Airport and within 30 minutes of the centre of Glasgow by road and rail links. A direct overnight sleeper rail service to Euston, London is available at the local station 5 minutes from the hospital. It is effectively situated west of Glasgow City and is minutes away from the countryside of the West of Scotland and Loch Lomond.

Glasgow and the immediate surroundings have a population of around 580,000. It is the largest city in and the commercial capital of Scotland. The city has a vibrant cultural life, with municipal art galleries and museums, first class sports and leisure facilities, a wide range of theatres and restaurants, excellent shopping and is only 45 miles from Edinburgh.

**The West of Scotland Heart and Lung Centre**

The Centre was created in March 2008 bringing interventional cardiology and specialist surgical heart and lung services previously provided by three different units in the West of Scotland onto the one site under one management team. The interventional cardiology service which includes primary PCI is among the busiest in the UK. The Centre provides one of the primary PCI services in the UK and also the regional electrophysiology service for the West of Scotland. In addition, it is the national centre for the Scottish Adult Congenital Cardiac Service (SACCS), the Scottish National Advanced Heart Failure Service (SNAHFS) and the Scottish Pulmonary Vascular Unit (SPVU). With this comprehensive range of specialist cardiopulmonary services for a catchment population of 2.2 million, the GJNH is one of the largest heart and lung centres in Europe.

**National Waiting Time Activity**

In 2013/14, we treated over 23,000 inpatient, day case and diagnostic examinations. The range of services includes: orthopaedic, general, ophthalmic and plastic surgery, minor procedures, endoscopy and diagnostic imaging.
Management Structure

The NHS National Waiting Times Centre Board is one of eight Special Health Boards of Scotland. It reports directly to the Scottish Government. The key Board members are as follows:

Chair                                             Jeane Freeman
Chief Executive             Jill Young
Medical Director             Mike Higgins
Director of Operations                   June Rogers
Director of Human Resources       Lindsey Ferries
Nurse Director             AnneMarie Cavanagh (acting)

The Surgical Specialties Division includes

- Anaesthetics
- Cardiothoracic
- Critical care
- CSPD- Central Sterilising and Processing Department
- Orthopaedics
- Perfusion

The National and Regional Medicine Division includes

- Cardiology
- Clinical Nutrition
- Imaging
- Labs
- Medical Physics
- Pharmacy
- Radiology
- Rehabilitation

The division also leads on the management of the following national services:

- Scottish National Advanced Heart Failure Service.
- Scottish Adult Congenital Cardiac Service
- Scottish Pulmonary Vascular Unit

Surgical Specialties Division Management Team:

- Associate Medical Director (AMD)            Dr Alistair Macfie
- Head of Operations              Lynn Graham
- Head of Nursing                 Theresa Williamson (acting)
- Operations Manager             Claire MacArthur
- Theatre Manager                 Karen Boylan
- Service Manager                 Claire Fenwick (acting)

National & Regional Medicine Division Management Team

- Associate Medical Director (AMD)            Dr Hany Eteiba
The Associate Medical Director takes lead responsibility for professional governance of doctors and shares quality management and governance with the Senior Nurse/ Clinical Services Manager. The Heads of Operations is responsible for operational and financial management.

**The Cardiothoracic Surgery Department**

The medical management structure:

- **Operational/ Strategic Lead (cardiac)**: Ian Colquhoun
- **Governance Lead**: TBA
- **Educational Lead**: John Butler
- **Director of SNAHFS**: Nawwar Al Attar
- **Deputy Director of SACCS (Surgical Lead)**: Kenny MacArthur
- **Operational Strategic Lead (thoracic)**: Alan Kirk
- **Operational Strategic Lead (anaesthetics & critical care)**: Robyn Smith

**National Waiting Times Centre Board Medical Management Structure**
Consultant Workforce
There are currently 15 consultant surgeons. All work exclusively at GJNH apart from three who also practice paediatric cardiac surgery at Royal Hospital for Sick Children Yorkhill Hospital).

The following are members of the department in sub-specialty groups:

<table>
<thead>
<tr>
<th>Thoracic</th>
<th>Adult Cardiac</th>
<th>Cardiac Transplant</th>
<th>Adult Congenital Cardiac</th>
<th>Organ Retrieval</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alan Kirk</td>
<td>Ian Colquhoun</td>
<td>Nawwar Al Attar</td>
<td>Kenny MacArthur</td>
<td>Alan Kirk</td>
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<tr>
<td>Mohammed Asif</td>
<td>Geoff Berg</td>
<td>Saleem Haj-Yahia</td>
<td>Andrew McLean</td>
<td>Ian Colquhoun</td>
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<tr>
<td>Michael Klimatsidas (locum)</td>
<td>Vivek Pathi</td>
<td>Philip Curry</td>
<td>Mark Danton</td>
<td>Philip Curry</td>
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<tr>
<td>John Butler</td>
<td>John Butler</td>
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<td></td>
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<tr>
<td>Ian Colquhoun</td>
<td>Fraser Sutherland</td>
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Cardiac Surgical Services

General
Most surgeons contribute to the general cardiac surgical elective and emergency workload. The on call requirement of each individual surgeon is dependent on other on-call commitments such as transplantation and adult congenital work. The ethos is that there is an equitable distribution of on call work although some rotas will be more intensive in frequency than others. In the year April 2013 to March 2014, 1350 cardiac surgical procedures were carried out this included electives and non elective.

There is a gradual transition towards specialisation within the department and there is an increase in the collaborative work with interventional cardiologists. The interventional cardiologists undertake a wide range of procedures. Consultants are expected to work with a reasonable level of flexibility to cover direct clinical care theatre sessions when colleagues are on leave.
There is an e referral system from cardiologists from all boards in the West of Scotland for cardiac surgical referrals. Increasingly MDT’s are used to decide on treatment options. Most outpatient clinics are undertaken at the GJNH with one outreach cardiac clinic in Lanarkshire.

The appointee will not be expected to undertake thoracic surgical work and there are currently 4 surgeons undertaking this work (two with mixed cardiothoracic responsibilities).

Cardiac transplantation
Cardiac transplantation for Scotland is provided by this unit and the current national review indicates that activity will increase. VAD’s have been implanted since 2009 and the Scottish Government approved the Strategy for Advanced Heart Failure and Transplantation in 2011 which is now fully embedded. We carried out 19 cardiac transplants in the last financial year.

The appointee will play an important role with the multidisciplinary team for managing patients with advanced heart failure. Weekly MDT’s and regular clinical governance sessions take place to address quality of care for advanced heart failure and transplantation. The transplant surgeons work collaboratively and will frequently operate together when undertaking transplant or VAD procedures (short and long term). The service is commissioned by the Scottish Government through the commissioning arm, the Scottish Services Division which is a subdivision of National Services Scotland.

It is important to note that cardiothoracic anaesthetists and intensivists play an important role in the multidisciplinary care of preoperative and postoperative care of patients. Daily MDT’s are conducted when a transplant patient has surgery. Those patients considered for surgical treatment are discussed at the weekly MDT meetings.

Representatives attend the national and UK transplant group meetings as well as the VAD forum. Maintaining up to date practice is an important requirement and attending meetings related to transplantation will be required to assure satisfactory appraisal and revalidation.

Cardiothoracic Organ Retrieval
Our consultant led cardiothoracic retrieval service (heart and lungs) is integral to the transplant service and this job. We are participating in a UK wide SCOUT programme designed to optimise donor organs, this is delivered by our team of Transplant Fellows supported by the on call transplant/retrieval consultant. The service is subject to further redesign as funded is secured for Donor Practitioners.

The Cardiac Transplant surgeons work within the Surgical Services Division and are accountable to the management team as described. Equally they are part of the Scottish National Advanced Heart Failure Service which is described as follows.

The Scottish National Advanced Heart Failure Service (SNAHFS)
The SNAHFS is an integral part of the National and Regional Medicine directorate. SNAHFS was established in 2005 and is currently directed by Prof Nawwar Al-Attar.

The SNAHFS manages patients with advanced heart failure from all over Scotland. The service encompasses cardiac transplantation, long term and short-term ventricular assist devices and surgery made complex by the presence of heart failure and is an integral part of the West of Scotland Heart and Lung Centre located within the GJNH.

This includes heart transplantation and conventional cardiac surgery made complex by the presence of heart failure. The service is co-located with the West of Scotland Regional Heart failure Service which, among other aspects, delivers the CRT and ICD regional service. In line with developments in advanced heart failure and its specific responsibilities in introducing new technologies in heart failure, the Service is developing a ventricular assist device (VAD) programme in the indication of ‘bridge to transplantation’. This is a key development within the (SNAHFS) and will be promoted vigorously.

The service works as a closely integrated multidisciplinary group offering the complete range of investigations and treatments both medical and surgical that are currently available for the management of the patient with advanced heart failure.

The service strongly encourages research and has an active research programme in both basic science and clinical research.
Among its activities the National Audit of Heart Failure and our investigation into the prevalence of advanced heart failure in Scotland demonstrate an increasing need for the specialist services provided by the SNAHFS.

VADs and other developing technologies make it clear that advanced heart failure has become a very vibrant clinical and research area. The unit aims to be at the forefront of these activities as part of our core responsibilities in research and development in advanced heart failure under the terms of our Service Agreement with the National Services Division of National Services Scotland.

The successful candidate will be expected to work closely with the multidisciplinary team in these exciting developments and in accordance with the Board’s research and new procedures/technologies governance policies.

The Scottish National Advanced Heart Failure Service comprises the following core personnel:

**Cardiologists**
- Dr Mark C Petrie  SNAHFS
- Dr John Payne  SNAHFS
- Dr Roy Gardner  SNAHFS /Regional Heart Failure Service/Devices

**Surgeons**
- Mr Nawwar Al -Attar  Director of SNAHFS/Lead Consultant for Transplant
- Philip Curry  Cardiac/Transplant
- Mr Saleem Haj Yahia  Cardiac/Transplant
- Vacant Post  Cardiac/Transplant

The above named consultants perform other important clinical roles in their respective specialties.

**Scottish Adult Congenital Cardiac Service (SACCS) and Scottish Pulmonary Vascular Service (SPVU)**

By co-locating SNAHFS and SACCS, the primary aim of NSD was to centralise all complex congenital cardiac surgery and catheter intervention within one tertiary centre in Scotland to concentrate expertise and provide the best clinical outcomes. It was also anticipated that the service would bring together and coordinate the activity of the local and regional services such that all patients in Scotland would have equity of access to specialist care irrespective of their geographical location. The choice of location as Glasgow was made based upon the proximity to the Yorkhill Paediatric Service, also a nationally designated service.

In the year 2013/14 there was 124 surgical procedures and 120 diagnostic/ interventional procedures.

In addition to funding surgical and catheter intervention for SACCS, NSD also supports the provision of inpatient and outpatient care for patients under the care of the SPVU under the Director, Professor Andrew Peacock.

**The Regional and National Medicines Division**

**Cardiology Services are managed in this Division**

The Centre has a dedicated unit for all interventional cardiology including primary PCI and also provides the regional electrophysiology service. Cardiac catheter intervention is facilitated by two congenital catheter laboratory sessions each week with general anaesthetic provision. The cardiologists work very closely with the surgeons to provide an integrated interventional
cardiothoracic service.

**Consultant Cardiologists**

Dr H Eteiba  Intervention (Assoc. medical Director)
Prof. KG Oldroyd  Intervention (Director of Research & Development)
Dr MM Lindsay  Intervention (Operational & strategic lead)
Dr M McEntegart  Intervention
Dr Stuart Watkins  Intervention
Dr C Berry  Intervention
Dr A Davie  Intervention
Dr S Hood  Intervention
Dr Richard Good  Locum Interventional Cardiologist

Dr DT Connelly  Electrophysiology/Device Therapy
Prof AC Rankin  Electrophysiology
Dr AP Rae  Electrophysiology + Intervention
Dr RS Gardner  Heart failure/Device therapy
Dr Karen Hogg  Heart failure/Device therapy and palliative care
Dr Gary Wright  Locum Consultant Electrophysiologist

Dr MC Petrie  Heart Failure + Intervention
Dr John Payne  Heart Failure
Dr Roy Gardner  Heart Failure & Devices

Dr H Walker  Scottish Adult Congenital Cardiac Service (Director SACCS)
Dr N Walker  Scottish Adult Congenital Cardiac Service/ACHD Intervention

Dr H McAlpine  Cardiology

Dr N Tzemos  Senior Lecturer (University of Glasgow)/Imaging & Education Lead
Dr J Adams  Cardiac CT
Dr J Byrne  Cardiac CT
Dr P Sonecki  Echocardiography

**Consultant Respiratory Physicians**

Prof AJ Peacock  Scottish Pulmonary Vascular Unit (Director)
Dr Martin Johnson  Scottish Pulmonary Vascular Unit
Dr Colin Church  Scottish Pulmonary Vascular Unit

**Facilities of the Heart and Lung centre**

- 6 cardiothoracic operating theatres
- 2 Intensive Care Units (ICU)
- 2 Cardiothoracic High Dependency Units (HDU)
- 2 Cardiac wards
- 4 cardiac catheterisation laboratories (one dedicated EP)
- 9 bedded national services unit which includes a new dedicated procedures room for haemodynamic assessments and myocardial biopsy
- Coronary Care Unit (8 beds)
- Cardiology day and inpatient wards
- All standard non invasive cardiological services
- Non invasive cardiac imaging including
  - Multi-channel spiral CT Scanner
  - Siemens AVANTO 1.5T Cardiac MRI scanner
- Full range of echocardiographic facilities
- Cardiopulmonary exercise testing
- Full range of pulmonary function testing
- Outpatient facilities
- Excellent well appointed dedicated area for advanced heart failure and devices
- Links with Glasgow, Strathclyde, Caledonian and Stirling Universities

**Research, Development and Innovation**

Research is a very important component of the activity at the GJNH and is supported a R&D Steering Group and dedicated R&D Manager. There are currently 85 projects hosted by GJNH. These projects are either actively recruiting or in follow-up. Contract (commercial) research is encouraged and staff use income generated from this source to maintain research support staff such as Clinical Research Fellows and Research Nurses. Academic research is also encouraged and the new appointment will be strongly encouraged to take an active role in this activity. Collaboration with Glasgow Universities and NHS GG&C has been agreed as part of the Board’s strategy. The appointee will also be expected to work with other national and UK collaborative projects that are relevant to position. A number of consultants undertake significant research work.

The Board is committed to the development of innovative clinical programmes, recent developments include VAD and ECMO clinical support services.
The Director for Research and Development is Professor Keith Oldroyd.

**Beardmore Centre for Health Science**

This brand new centre has a dedicated Clinical Research Facility which is designed to provide a ‘fit for purpose’ space for patients recruited to clinical trials. There will be four consulting rooms; one is set up for echocardiography and one as an exercise tolerance suite. The remaining two rooms are general consulting rooms. The rest of the centre is made up of prep rooms, simulator training wet lab work stations and a patient waiting area. The Centre is adjacent to the main auditorium of the conference centre providing excellent opportunities to develop teaching techniques and learning. Improved audiovisual links to theatre and the cardiac cath lab are installed as part of this development.
The Beardmore Hotel and the integral conference centre attached to the Golden Jubilee Hospital is a unique arrangement in the UK and will enable important national and ‘focus’ international meetings for the Heart and Lung specialties to share learning in the UK and beyond.

The management team of the Centre are Catherine Sinclair and Roisin Houston.

**Education and Learning & Development**

There is a department for learning and development which is responsible for generic educational courses which doctors and other
health professional are required to attend. There is also a Director of Medical Education and the position is accountable to the Board but carries responsibilities for the West of Scotland Deanery. Medical Education in Scotland is overseen by NES (National Education Scotland). Consultants are expected to develop clinical supervisor skills and encouragement is given to those seeking educational supervisor roles. Medical education is important as the department attracts 2 F2’s and 4 CST trainees at any one time.

The Director of Medical Education is Mr Alan Kirk

Governance and Risk management

The Board has a comprehensive programme that covers both clinical and research governance domains and all medical staff are expected to uphold clinical and non-clinical policies and be exemplar role models for all other medical and non-medical staff. The Conforming to of infection control, hand hygiene and dress code policies and guidance must be adhered to at all times.

Patient safety underpins clinical practice and initiatives following the guidance of the SPSP and subsequent programmes apply to all staff.

Medical staff are required to undergo annual appraisal meeting the requirements for revalidation that will be directed by the GMC. The Medical Director is the Responsible Officer for the Board and he/she will ensure that an appropriate appraisal process and a nominated appraiser are in place.

The appointee will be accountable to the Medical Director for matters related to the GMC’s guidance on Good Medical Practice and the Duties of the Doctor. Any concerns raised relating to GMC guidance are referred to the Medical Director.

Support services for this Post

The successful candidate will have secretarial support, office accommodation and a personal computer. The appointee will be expected to work flexibly on the basis of the needs of the Heart and Lung Centre. Junior and support staff will be shared within the department.

Submission and review of job plan

Job plans are reviewed on an annual basis by the Medical Director or his deputy. Changes will be discussed and agreed with the post holder in line with service needs and objectives set for the consultant.

Indicative Job Plan

This Indicative Job Plan is based on a 10 PA contract. EPA’s (Extra Programme Activities, DCC or SPA) may be agreed following objective setting to undertake other duties (e.g. Education supervisor, management, specific projects for service improvement and patient safety and operating list etc).

<table>
<thead>
<tr>
<th>DAY</th>
<th>ACTIVITY</th>
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<tbody>
<tr>
<td>Monday am</td>
<td>Ward rounds, ICU and 1:4 Tx round / Tx clinic</td>
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<tr>
<td>pm</td>
<td>Cardiac OP Clinic + pt admin + ward round</td>
</tr>
<tr>
<td>Tuesday am</td>
<td>Operating Theatre</td>
</tr>
<tr>
<td>pm</td>
<td>Operating Theatre</td>
</tr>
<tr>
<td>Wednesday am</td>
<td>CCT MDT, ICU round &amp; 1:3 Tx ward round, waiting list weekly meeting</td>
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</table>
Thursday am  Valve MDT

Friday

am  HF-MDT, AHF business meeting ICU ward round, 1:3 Tx round, ICU MDT, HF strategy meeting, MCS, Donor Review group /SORT,STG,VAD forum

pm  SPA / cardiac M&M 1:4, cardiology M&M 1:4, Teaching 1:4

Sat +Sun  1:4x 3 hr ward rounds + pt admin + on going pt care

Activities undertaken at flexible times and / or locations

<table>
<thead>
<tr>
<th>Activity</th>
<th>Comment</th>
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<tbody>
<tr>
<td>SPA</td>
<td>Patient admin (non-transplant)</td>
</tr>
<tr>
<td></td>
<td>continuing care including pre and post-op</td>
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<tr>
<td>Predictable and unpredictable OOH</td>
<td>Includes a 1:4 commitment to the Transplant and Retrieval rota and a commitment to the general cardiac rota</td>
</tr>
<tr>
<td>Flexible Operating Theatre Days</td>
<td>21 lists per year</td>
</tr>
<tr>
<td>Transplant MDT &amp;Clinics &amp; ongoing care</td>
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On-Call and Additional Duty Payment

The on call rota is recognised to be both high intensity and frequency which carries an 8% banding.

1.5 PA’s are recognised for additional predictable and unpredictable hours. These form a constituent of the basic contract and EPA’s are allocated to other activities.

If any reduction of total EPA’s should be required as a result of the needs of the appointee or the employer a job plan review will be undertaken and agreed with the directorate on behalf of the Medical Director with notice as outlined in the terms and conditions of contract.

Prospective cover of colleague for annual and study leave is a requirement of the post.

4. Terms & Conditions of Service

- National terms and conditions of service (Consultants (Scotland) 2004) cover the post.
- The post is subject to pre employment checks such as Disclosure Scotland, Occupational Health, Visa clearance (where applicable) and satisfactory references.
- You are required to be registered with the General Medical Council/General Dental Council though out the duration of your employment and to comply with and abide by the relevant code of professional practice, as appropriate.
- Salary scale: National Salary Scales per annum
- The appointee will be expected to work with local managers and professional colleagues in the efficient running of services and will share with consultant colleagues the medical contribution to management. The appointee will be
expected to follow the local and national employment and personnel policies and procedures.

- All medical and dental staff employed by the Centre are expected to comply with the agreed health and safety policies.
- The appointee will have responsibility for the training and supervision of junior medical staff that work with him/her and will devote time to this on a regular basis. If appropriate he/she will be named in the contracts of junior doctors in training grades as the person responsible for overseeing their training and as a main source of advice to such doctors on their careers.
- The successful candidate(s) will normally be required to live within 30 minutes drive of GJNH.
- Where, however the successful candidate already resides within 45 minutes drive of GJNH, he/she will not be required to remove his/her home nearer to the Centre.
- Where the successful candidate’s present residence is more than 45 minutes drive from GJNH, he/she will be required to move his/her home to meet the residential clauses of his/her contract, unless he/she has the written consent of the Board to the contrary.
- The Terms and Conditions of Service state that the “removal expenses shall be reimbursed and grants paid only when the employing authority is satisfied that the removal of the practitioners home is required and the arrangements proposed are reasonable”. Therefore, successful candidates are advised not to enter into contractual arrangements for the removal of their home until such a time as the formal approval of the Centre is confirmed in writing.
- Annual appraisal by a Board recognised appraiser and job plan review by the senior directorate management are requirements for all permanent medical staff.
# National Waiting Times Centre NHS Board
## Recruitment Person Specification

### Consultant Cardiothoracic Surgeon with a Special Interest in Transplantation

<table>
<thead>
<tr>
<th>Essential</th>
<th>Desirable</th>
<th>How or where to be judged</th>
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</thead>
<tbody>
<tr>
<td><strong>1. Qualifications/Training</strong></td>
<td>FRCS (CT) or equivalent.</td>
<td>Higher research degree</td>
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<tr>
<td></td>
<td>On GMC specialist register or eligible to be within 6 months</td>
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<tr>
<td><strong>2. Experience</strong></td>
<td>Extensive training in cardiothoracic surgery.</td>
<td>Extensive experience in all aspects of cardiothoracic transplantation including pre and post operative care.</td>
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<td></td>
<td>Donor management &amp; assessment</td>
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<td>Training in cardiac transplantation</td>
<td>Experience in VAD implantation.</td>
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<td></td>
<td>Heart and lung retrieval</td>
<td>Experience of introduction of new technology or procedure.</td>
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<tr>
<td><strong>3. Skills/Knowledge</strong></td>
<td>Effective in MDT working.</td>
<td>Leadership in clinical risk systems in cardiothoracic surgery</td>
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<td>Excellent team working skills.</td>
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<td>Understanding of modern risk management systems</td>
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<tr>
<td><strong>4. Understanding of the objectives of the Cardiothoracic/transplant service and NWTC Board</strong></td>
<td>Cardiothoracic/Transplant</td>
<td>NWTC Board</td>
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<tr>
<td><strong>5. Teaching &amp; Education</strong></td>
<td>To provide clinical supervision of postgraduate training doctors</td>
<td>Educational supervisor of postgraduate doctors</td>
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<td>Teaching undergraduates and other health professionals</td>
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<tr>
<td><strong>6. Clinical Audit &amp; Risk Management</strong></td>
<td>Demonstrate experience of clinical audit and evidence based practice</td>
<td>Understanding of risk management and patient safety initiatives</td>
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<td></td>
<td>Key principles of Clinical Governance and Data Protection</td>
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<tr>
<td><strong>7. Research and</strong></td>
<td>Previous and current active interest in</td>
<td>Extensive research experience</td>
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<tr>
<td>Innovation</td>
<td>Research with evidence of publications. and leading research projects.</td>
<td>Interview</td>
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<td></td>
<td>Involvement in grant application</td>
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<td>Supervision of trainees in research</td>
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<td></td>
<td>Demonstration of success in major grant applications.</td>
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<td>Journal editorial experience.</td>
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<tr>
<td>8. Understanding of GMC Requirements</td>
<td>Knowledge of 'duties of doctor'</td>
<td>Interview</td>
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<tr>
<td>9. Leadership</td>
<td>Demonstrate strong leadership potential</td>
<td>Interview</td>
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<tr>
<td></td>
<td>Previous management and Clinical Leadership roles. Management qualification e.g. MBA.</td>
<td>CV</td>
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