



Candidate brief for the position of Medical Director

## Introduction letter by Tim Willis, Chair of Trustees

# Thank you for expressing an interest in joining our team at Prospect Hospice.

Prospect Hospice is a highly respected local charity with deep roots in the community that it has served for 38 years. Prospect Hospice provides a wide range of care and support to people with life limiting illnesses and their families. In the last year 2,673 patients were cared for across all of our services and our team now comprises more than 200 staff (FTE) and over 850 volunteers.



The services are leading edge; enabling people to access the support and care they need to live well for as long as possible and die with dignity in the place of their choice. Like most hospices we rely on the income generated from our extensive fundraising activities and network of charity shops for the majority of our funding, generating over  $\pm 5.3$ M last year, (added to  $\pm 2.1$ M we receive from the local CCG) and this will need to continue to grow as we seek to extend our service to support even more people.

# Prospect Hospice published a new, five-year strategic plan in 2017, focused on a vision of: *Excellent, personalised and compassionate care for everyone affected by a life-limiting illness*

We've agreed **three key strategic themes** that will inform and drive our work over the next five years:

- We will provide excellent services and support within the hospice and our community to meet the needs of all patients, their families and carers
- As the lead organisation in palliative and end-of-life care, we will extend our influence across the community to improve understanding and support for everyone affected by a life-limiting illness
- We will strengthen our organisation, to ensure patients and those around them can continue to rely on us being there for them.

Prospect Hospice is the only provider of specialist palliative care services in Swindon, Marlborough and north east Wiltshire. We offer Inpatient and Day Therapy services and Community support and advice, as well as Prospect@Home, our hospice at home service in the area.

We are now looking for a Medical Director who will lead our services for patients and the people closest to them. Now is an exciting time to join the leadership team at Prospect Hospice in this vitally important role and to make a major contribution towards the implementation of our far-reaching strategy by driving a programme of change, offering strong leadership for an experienced team and developing our services to meet the anticipated growth in demand in future years.

We look forward to hearing from you.

Tim Willis Chair of the Board of Trustees Prospect Hospice

## **Organisational overview**

#### **About Prospect Hospice**

Prospect Hospice is a registered charity and company limited by guarantee, founded in 1980 by the Reverend Derryck Evans, then the chaplain at Swindon's hospital, who was inspired by Dame Cicely Saunders vision and work at St Christopher's Hospice in South London. Prospect Hospice provides free palliative care and support for patients and their families living with end-of life care needs, for a community of more than 300,000 people.

Care is based on the simple idea that patients are ordinary people living with physical, social, emotional and spiritual needs. The Hospice provides enormous support to families and friends, caring for the patients and all those around them. Last year we cared for 2,673 patients and 4,678 family members, and we were proud to have been rated 'Good' by the Care Quality Commission (CQC) in 2016 during their last full inspection. In the most recent survey of patients and their families, 95 percent of respondents told us that they were satisfied with the care that they received from Prospect Hospice, and 96 percent told us that they would recommend our services and their families.

#### What we do at Prospect Hospice

Prospect Hospice provides a wide range of services including an Inpatient Unit in the village of Wroughton, just outside Swindon. The Inpatient Unit is currently configured for 12 patients. Additionally, we offer our Prospect@Home service, a community-based nurse specialist team providing support and advice to patients and other providers, and a Family Support and Bereavement Service.

Our team of community-based nurse specialists work closely with local GPs, district nurses and other healthcare professionals, and are available to give advice and support for patients and their families and to refer them to services to match their needs. We also have a consultant-led medical team that works in all patient settings, and an education service which is also offered to healthcare professionals in the area.



To be able to provide our free care we need to raise around  $\pounds 6M$ 

each year, with £4M of through from charitable sources, including from our

16 charity shops located across the community we serve. We have a fully trained team of volunteers who support our specialist clinical teams, ensuring that patients and their families receive the best possible care. Many more volunteers support our fundraising, shops and administration, including in our finance department.

## **Our Vision**

Excellent, personalised and compassionate care for everyone affected by a life-limiting illness.

## **Our Values**

Our values apply in every setting – between staff, within teams, with volunteers, how we treat patients and families and how we engage with partner organisations and suppliers. They are Compassionate, Inclusive, Honest and Respect.

## **Our Strategy**

Some of the key reasons why we need this compelling vision and ambitious strategy are:

We know that there are more people from our community who we could support through our services, particularly in community groups who have previously been under-represented in our patient group.

**An increasingly frail population**, with over 40% of over 65s living alone.

**A growing population** of around 300,000 in Swindon and north Wiltshire, with an expected increase of 10 per cent in the years ahead.

As a result, our key strategic themes are:

- We will provide excellent services and support within the hospice and our community to meet the growing needs of all patients, their families and carers
- We will extend our influence across the community to improve understanding and support for everyone affected by life-limiting illness
- We will strengthen our organisation, to ensure patients and those around them can continue to rely on us being there for them.

### About our area

Prospect Hospice serves the towns of Swindon, Marlborough and north Wiltshire, which encompasses towns and villages including Highworth, Pewsey and Royal Wootton Bassett.

Our services and main activities are delivered from the hospice in Wroughton, a village just outside Swindon, and we also offer outpatient services from our Wellbeing Centre, based at the Savernake Hospital in Marlborough.



Swindon is the biggest town within our area of care and was historically

a town with a rich industrial heritage based on its development as a primary manufacturing town for Isambard Kingdom Brunel's Great Western Railway.



Its railway heritage is reflected in its excellent transport links to London, Bristol and Cardiff, while Bath, Oxford and the picturesque Cotswolds are all within easy range. The headquarters of Nationwide Building Society and the National Trust are both in the town.

Marlborough, the second largest of the towns in our area, is renowned for its Neolithic heritage, reflected in nearby landmarks such as Avebury stone circle and Silbury Hill. The town itself is notable for its charming, wide High Street, lined with shops, cafes, restaurants and pubs, and is popular as a tourist destination throughout the year.

## About the role

#### 1. Post Title - Medical Director/Consultant in Palliative Medicine

Responsible to:	Board of Trustees
Responsible for:	Hospice Medical Team
Salary Band/Grade:	The salary for the position will be calculated with reference to the NHS consultant
	pay scale.
Full/Part Time:	Full Time or 10PA plus on-call commitment. There is an option for this role to be part
	time.

We are looking to recruit a new Medical Director and, as part of our Senior Leadership Team, the post holder will have significant influence and responsibility for the organisation's strategic direction, working alongside our Director of Services and the wider team to ensure that the best interests of our patients and their families are at the heart of our strategy.

#### 2. About our services

Prospect Hospice provides a broad range of end-of-life care services across Swindon and north east Wiltshire. Our care is delivered in our 12 bed In-Patient Unit, Day Hospice, Great Western Hospital and patients' homes. The Hospice is committed to ensuring that the patients and families we provide comfort and care for each year receive exceptional support towards the end of their lives, and to influencing and enhancing best practice in end-of-life delivered by other providers.

Prospect Hospice is an independent hospice supporting a community of 300,000 people in Swindon, Marlborough and north Wiltshire, and the villages of Lechlade and Fairford in Gloucestershire. It is the only dedicated provider of specialist end-of-life care services within its locality.

We seek to provide and influence excellent care, support and understanding at the end of life through the following services:

- Specialist palliative care services for patients with advanced life limiting illness, and supportive services for the adults and children who are close to the patient.
- Supportive end-of-life care services for patients who have been diagnosed with an advanced, lifelimiting illness and the adults and children who are close to the patient.
- Advice, support and education to patients, families, communities and organisations, as well as to health and social care professionals requiring assistance in responding to service users' needs with respect to life- limiting illness, death and loss. what does this mean? Can it be broken down?
- Share best practice in palliative and end-of-life care to other healthcare and social care professionals though joint working, mentoring, education and training.

#### **Inpatient services**

The inpatient unit has 12 beds:

- Two beds are commissioned by the Great Western Hospital to support the smooth transfer of patients from the acute setting.
- One bed is commissioned for continuing healthcare.
- One bed is used for the provision of respite care.

- One bed is used as a rapid access bed for imminently-dying patients.
- Other beds are allocated to patients referred from the community, Great Western Hospital and from other hospitals. Referrals are prioritised on the basis of need.

Patients on the inpatient unit are supported with medical imaging, pathology, blood transfusion and pharmacy services from the Great Western Hospital. Investigations and interventions are requested directly from the hospital by the palliative medicine consultants. There is an IT link to view patient medical records and results at Great Western Hospital.

The medical and nursing services provided on our inpatient unit are supported by a skilled multiprofessional team and trained volunteers.

#### **Community services**

There is a team of nine WTE Prospect Nurse Specialists who provide an outreach service to the community. The team is allied to groups of local general practices, and offers focused care for the patients and their carers during the course of the illness. There are an additional two WTE Prospect Nurse Specialists who work exclusively with care homes providing a range of direct care services and education and advice. Together these services provide a 9am-5pm seven- day service including face-to-faceassessments if required.

#### Great Western Hospital

Prospect Hospice has a strong relationship with the Great Western Hospital, and currently provides an inreach palliative care service comprising four WTE of CNS time. The inreach service is also supported by a full time Locum Consultant in Palliative Medicine who is employed by the Great Western Hospital Foundation Trust. The team provides a weekday 9-5 advisory service to support the care of adult patients across the Trust.

The Great Western Hospital is a modern hospital, with up-to-date facilities. There are 450 beds. The Trust provides general planned and emergency services to the local populations of Swindon and north Wiltshire and to parts of Gloucestershire, Oxfordshire and West Berkshire, covering a totalpopulation of around 340,000 people.

Medical oncology is provided by an acute oncology team. Clinical Oncologists from the Oxford Cancer Centre provide consultant clinical oncology services. Most chemotherapy is administered locally in a dedicated day treatment centre and all radiotherapy and some complex solid tumour chemotherapy is provided in Oxford.

#### **Medical staffing**

The appointee will lead a medical team, which consists of:

- 3 Specialty doctors (1WTE) supporting the inpatient unit and providing 3:4 first on call cover.
- 1.6 WTE GPST1 6 -month rotational posts. Together the ST1 doctors provide 1:4 first on-call cover.

#### Other patient services departments

- Day Therapy Unit which opens 3 days per week for a range of supportive and therapeutic care.
- Family support comprising specialist social work, carers support, welfare and benefits advice, clinical psychology and bereavement care.

- Therapy services including physiotherapy, occupational therapy, dietitian and lymphoedema management. These services may be accessed by both inpatients and outpatients.
- Spiritual care services are currently provided by a team of local volunteer chaplains.
- Hospice at home service offering direct support for patients in the community by complementing other statutory care services. It is staffed by registered nurses and healthcare assistants. It is used for planned respite care, end-of-life care, hospital admission avoidance and crisis care.
- Complementary therapy is available to support inpatients, outpatients, day hospice patients and carers.
- The hospice provides 24/7 telephone advice to patients, carers and professionals through its advice line. Clinical Nurse Specialists cover this seven days aweek, 9am-5pm. Out of hours, the advice is provided by in-patient unit nursing staff in the first instance. The medical team are available to support this provision when needed. Out of hours calls from professionals which cannot be managed by nursing staff are directed to the doctor providing on-call cover, with access to consultant advice when required.

#### 3. Main Purpose and Scope

#### The postholder will:

- Lead and direct the hospice medical team to provide effective medical services across Prospect Hospice.
- Provide professional advice to the Chief Executive and Board of Trustees relating to general medical services and professional standards and the specialty of palliative medicine.
- Lead on clinical strategy development for the hospice, reporting directly to the Board of Trustees.
- Work in partnership with the Director of Services and the Director of Governance and Quality to oversee all systems of clinical governance and participate in clinical audit programme.
- As a member of the executive team, contribute to the overall leadership and management of the hospice and contribute to the continual improvement of services.
- Contribute to the strategic development of the hospice.
- Be the Caldicott Guardian.
- Be the Accountable Emergency Officer.

#### 4. Key accountabilities and areas of responsibility

- The postholder will contribute fully to the ongoing development of the executive team and to the delivery of the vision to provide excellent, personalised and compassionate care for everyone affected by a life-limiting illness, alongside the enhancement of all aspects of end-of-life and palliative care in the area we serve.
- Maintain effective professional management and leadership of the hospice medical staff, motivating them to work to the highest possible standards and continually develop their knowledge and skills in a manner that supports quality, flexibility and innovation across the hospice's clinical, educational, audit and research functions.
- Report directly to the Chair of Board of Trustees. Provide professional advice to the Chief Executive on general medical professional standards and the specialty of palliative medicine, and will work jointly with the Director of Services on clinical strategy planning for the hospice.
- Work closely with the Director of Services and Director of Governance and Quality to oversee all systems of clinical governance and professional appraisal necessary for professional revalidation for medical, nursing and allied healthcare professional staff at the hospice.
- Share responsibility with the Director of Services and the Director of Governance and Quality for maintaining a culture which embeds all aspects of clinical quality, governance and effectiveness at the hospice; specifically participating in the regular monitoring and updating of clinical policies and guidelines, investigations into complaints and clinical incident monitoring (with specific attention to prescribing issues).

- The Medical Director will oversee the monitoring of, and be responsible for the budget for, the contract relating to the provision of professional pharmaceutical services and drug supplies for the hospice.
- Work in partnership with the Director of Services to monitor all aspects of medicines management at the hospice.
- Monitor the work of any externally-contracted doctors who are granted practising privileges to work on the hospice premises, and advise on any contractual changes that may be deemed necessary.
- Directly manage the senior medical staff on contract to the hospice, ensuring that both external clinical appraisals and internal performance reviews are carried out for these staff annually.
- Liaise with the Training Programme Director for the local palliative medicine specialty training rotation in relation to the specialist registrars based at the hospice and involved with the medical on-call rota. Also, to liaise with the GP rotation in relation to the GPST doctors based at the hospice.
- Manage the budget for all aspects of medical staffing and medical revalidation.
- Work with the Education team to further develop medical teaching events within the hospice programme of internal and external teaching, facilitating the participation of the senior medical staff at the hospice in these events as appropriate.
- Represent the hospice and participate in public speaking or engage in fundraising activities to support the charitable status of the hospice.

#### **Clinical Duties**

• Work as a senior clinician across all clinical services at the hospice, at a level which allows for the proper performance of the significant commitment to managerial and strategic responsibilities. The clinical commitment will include regular senior support for clinical leads, the inpatient unit, outpatient and domiciliary reviews to support the work of the Community Nurse Specialists and some medical input to Day Services (particularly when other medical colleagues are on leave). The postholder will also offer some advisory support for the 24-hr Advice Line.

Note: Clinical leads are directly line-managed by the Director of Services.

The 8a Matron will indirectly report to the Medical Director although this post is line-managed by the Director of Services. The Matron has a leadership role across the hospice services and provides clinical support to the Clinical Leads and their teams.

- The on-call commitment for this post is one week in every four.
- Ensure appropriate medical cover for the hospice at all times.
- Perform additional duties in exceptional circumstances to ensure the continuity of patient care.

#### **Teaching Duties**

- The postholder will be responsible for supporting the professional clinical supervision and management of junior medical staff working at the hospice in training-grade roles.
- The postholder might be named in the educational contract of junior staff as the person responsible for overseeing their training and as an initial source of advice in their developing careers.
- The postholder will also contribute to the teaching and supervision of medical students who spend time at the hospice during their training and other specialty trainees or GP registrars who may arrange clinical attachments at the hospice.

#### Study and research

- The postholder will be entitled to 30 days study leave within a 3-year period (pro-rata for a part-time post). Continuing Medical Education (CME) planning for the senior medical team at the hospice is managed to ensure that the essential individual needs are met along with any requirements relating to service development.
- The hospice is fully committed to ensuring that all necessary support is given for Continuing Medical Education. The postholder will be expected to register, and fulfil the requirements, for CPD monitoring with the Royal College of Physicians; and to fulfil the requirements for revalidation laid down by the General Medical Council.
- The postholder will not necessarily be expected to undertake research: however, encouragement is given to develop relevant collaborative projects approved by the Board of Trustees.

#### Audit, Governance and Risk

• The postholder will be required to contribute to the development of, and take part in, the hospice clinical audit, governance and risk programmes. The postholder will expected to Chair, Clinical Governance and Audit meeting.

#### **Resources Available**

- Secretarial Support- The postholder will be supported by the Executive PA.
- Activity/Contracts: Prospect Hospice reports on the patient activity data on a six monthly basis to the commissioners representing the local CCGs with which the hospice has a contractual agreement. The hospice also produces and annual Quality Account.

#### 5. Key contacts

- Board of Trustees
- Chief Executive
- Directors/Heads of corporate functions and senior managers across the organisation
- Stakeholders/Partners

#### 6. Conditions of service

- The postholder will be given a contract with pay, terms and conditions of service which reflect most elements of the National NHS terms and Conditions of Service (Consultants (England) 2003). The contract is available on request.
- The Hospice supports the requirements for continuing medical education as laid out by the Royal college of Physicians and is committed to providing the time and financial support for these activities. Study leave provision is 30 days over a three year period.
- The postholder must reside within a one hour drive of Prospect Hospice.
- It is the postholder's responsibility to familiarise themselves with agreed Prospect Hospice policies and procedures and adhere to them.
- The post is subject to pre-employment checks such as criminal records bureau clearance (DBS), occupational health, visa clearance (where applicable) and satisfactory references.
- The successful applicant must be either on the Specialist Register or within six months of being eligible for inclusion on the Specialist Register in the appropriate specialty at the time of the interview.
- The successful applicant will be required to be registered with the General Medical Council throughout the duration of employment and to comply with and abide by the relevant code of practice.
- It will be essential that the postholder has appropriate personal medical indemnity.

## Person Specification

REQUIREMENTS	CRITERIA	ESSENTIAL (E) OR DESIRABLE (D)	
Qualifications	<ul> <li>Primary medical qualification</li> <li>MRCP or MRCGP or equivalent</li> <li>Full GMC registration</li> <li>Entry on Specialist Register for Palliative Medicine or within six months of obtaining CCST/CCT</li> <li>Higher degree (e.g. MA, MSc, PhD, MD)</li> </ul>	E E E D	
Clinical Experience	<ul> <li>Experience in working effectively within a specialist palliative care unit / hospice and within a multidisciplinary team</li> <li>Recent experience of UK healthcare systems and practices with specific understanding of the role of independent hospices.</li> <li>Experience of leading medical teams</li> <li>Ability to inspire, motivate and develop medical staff</li> <li>Training and experience in the management of patients with specialist palliative care needs.</li> <li>Ability to prioritise clinical need and direct resources accordingly</li> <li>Practice in palliative medicine at senior level for at least five years</li> </ul>	E E E E D	
Leadership and Management	<ul> <li>A proven track record in medical leadership and management</li> <li>Demonstrate ability to manage priorities and resources</li> <li>Understanding and experience of all aspects of clinical governance</li> <li>Experience of designing and delivering innovative models of practice</li> <li>Experience of leading organisational change</li> <li>Highly developed interpersonal skills including strong influencing, facilitating, and negotiating skills</li> <li>Evidence of management/ leadership training/ qualification</li> <li>An understanding of voluntary sector hospice funding and management.</li> <li>Knowledge of agendas within the NHS which have a bearing on the strategic vision of Specialist Palliative Care.</li> <li>Training and experience in medical appraisals, case investigation or case management</li> <li>Engagement with medical management bodies (e.g. FMLM or NHS Academy)</li> <li>RO Training</li> </ul>	E E E E D E E D D D D D D D D D D D D D	

REQUIREMENTS	CRITERIA	ESSENTIAL (E) OR DESIRABLE (D)
Teaching and Research	<ul> <li>Experience of teaching, including doctors and medical students in both large and small groups</li> <li>Experience of multidisciplinary teaching</li> <li>Understanding of core principles and guidelines in relation to research in clinical practice.</li> <li>Experience of research and ability to apply outcomes to clinical practice</li> <li>Teaching qualification</li> <li>Proven track record in undertaking further research</li> <li>Evidence of publications in professional and/or peer reviewed journals</li> </ul>	E E E D D D
Governance and Audit	<ul> <li>Experience of undertaking audits and identifying actions</li> <li>Understanding and experience of clinical governance</li> <li>Experience in handling clinical incidents and complaints, including root cause analysis</li> </ul>	E E E
Personal Attributes	<ul> <li>Committed to the ethos of hospice care and capable of fulfilling an effective ambassadorial function</li> <li>Ability to build effective internal and outward facing relationships across commissioning and health and social care</li> <li>Enthusiasm, motivation and commitment to the development of hospice and palliative care services</li> <li>Ability to cope and be resourceful in challenging and stressful situations</li> <li>Caring and empathic approach with patients and families</li> <li>Ability to communicate effectively with patients, relatives, colleagues, hospital staff, GPs and other agencies</li> <li>Commitment to Continuing Medical Education</li> <li>Ability to adapt quickly to changing circumstances</li> <li>High level of personal resilience</li> </ul>	E E E E E E E E E
Other Requirements	<ul> <li>Car driver with full UK driving licence and access to own car for work purposes, including business insurance</li> <li>Ability to undertake travel requirements of post</li> <li>Good IT skills, including word processing, presentations and spreadsheets</li> <li>Evidence of recent and ongoing CPD</li> </ul>	E E E

The line manager will discuss all elements of the job description with the postholder on an annual basis during appraisal, recognising that some elements may be developed.

## Proposed outline job plan

DAY	ТІМЕ	WORK	CATEGORISATION	No. OF PA's
MONDAY	09:00 - 13:00	IPU Hand Over, Bed Meeting and Consultant Ward Round	DCC	1.0
	13:00 - 17:00	Governance and Admin	SPA/AR	1.0
TUESDAY	09:00 - 10:00	Clinical Leads Meeting	SPA	0.25
	10:00 - 12:00	IPU MDT	DCC	0.5
	12:00 - 17:00	Governance/ Service Development	SPA	1.25
WEDNESDAY	09:00 - 11:00	Community MDT	DCC	0.5
	11:00 - 13:00	Out-Patient Clinic	DCC	0.5
	13:00 - 15:00	Team Meeting	SPA	0.5
	15:00 - 17:00	Domiciliary Visits	DCC	0.5
THURSDAY	09:00 - 13:00	IPU Hand Over, Bed Meeting and Consultant Ward Round	DCC	1.0
	13:00 - 14:00	Teaching/ Journal Club	SPA	0.25
	14:00 - 17:00	External Meetings/Service Development	SPA	0.75
FRIDAY	09:00 - 11:00	IPU Hand Over, Bed Meeting and Trouble Shooting Ward Round	DCC	0.5
	1100-1200	Liaising with Hospital Team	DCC	0.25
	1200-1400	Clinical Supervision	SPA	0.5
	1400-1700	Own CPD/ appraisals/ Admin	SPA/AR	0.75

### Your next steps

To arrange for an informal discussion with Naseena Methal, Consultant, call Siobhain Acott on 01793 816119.

#### To apply:

Please email your CV and a supporting statement to Siobhain Acott@prospect-hospice.net by Monday 11 March, 2019.



**Prospect Hospice** 

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