



Consultant in Palliative Medicine

Wye Valley NHS Trust & St Michael's Hospice

Post 3



October 2023

Contents

	Page
<u>1</u> Introduction	3
<u>2</u> Purpose of the posts and general responsibilities	3
<u>3</u> Departmental Support	4
<u>4</u> Specific aims & responsibilities of the posts	6
<u>5</u> Location	7
<u>6</u> Review	7
<u>7</u> General information for candidates	7
Appendix 1 – Proposed job plan	11
Appendix 2 – Person Specification	14
Appendix 3 – Additional Information for Candidates	16

Consultant in Palliative Medicine

JOB DESCRIPTION, PERSON SPECIFICATION & PROPOSED JOB PLAN

1. Introduction

Herefordshire and Mid Powys Specialist Palliative Care (SPC) services provide direct patient care, training, teaching and service quality improvement and development, all aiming to achieve the best possible quality of life for people with life-threatening illness. We serve a catchment area of Herefordshire (192,000) and neighbouring rural mid Powys (40,000).

Herefordshire is an agricultural border county of outstanding natural beauty with agriculture being the main industry especially growing hops and cider apples. There is also some light industry. Hereford is a Cathedral city with a strong and vibrant tradition in the arts, particularly music. It is surrounded by a number of small market towns, many of which have community hospitals where various clinics are held by the consultant staff from Wye Valley Trust.

We are looking to appoint a Consultant in Palliative Medicine to complete a team of three senior colleagues working across Herefordshire and mid Powys. The aim being to provide a SPC team that operates a collaborative leadership model working across disciplines and organisations, minimising boundaries and promoting individualised, holistic patient care and family support.

The SPC team has been led and supported by a stable consultant workforce for many years during which time the service has evolved & grown in response to the rising palliative and end of life care service needs of the population. The opportunity has arisen over the last year to reorganise into an integrated team of three posts, funded jointly by Wye Valley NHS Trust and St Michael's Hospice, to provide palliative medicine input to the Hereford County Hospital; the rural community of neighbouring mid Powys; St Michael's Hospice and Herefordshire community including the community hospitals. The post described here (post 3), will focus on SPC provision to Hereford County Hospital, building on services which have a clear vision for further development through the evolving Herefordshire ICS Palliative and EOL Strategy and Powys LHB, incorporating scope for the post holders to develop new initiatives and specialty interests of their own.

2. Purpose of the Post and General Responsibilities

The new appointment forms part of the consultant team providing medical leadership, responsibility and support for SPC services at Hereford County Hospital (HCH), St Michael's Hospice (SMH), across Herefordshire community including the community hospitals and to the rural community of neighbouring mid Powys.

Post 3 will provide direct clinical care at Hereford County Hospital and clinical lead for the specialty. The appointee will be employed by Wye Valley NHS Trust (WVT) where the SPC service is part of the Clinical Support Division. They will be professionally accountable to the Associate Medical Director for Oncology, Haematology & Palliative Medicine and line managed by the Cancer Services Manager & Professional Lead for the Division. Secretarial support and office accommodation will be at Hereford County Hospital. A full induction programme will be provided.

3. Departmental Support

Current Palliative Medicine Medical Staffing

Consultants:

Post 1: Specialist Doctor Lead at SMH (9PAs) – Dr Jim Burtonwood

Post 2: Consultant Lead for Herefordshire Community (8PAs) – Dr Maddy Turley

Post 3: Consultant Lead for Hereford County Hospital, Clinical Lead (8PAs) – Dr Sally Johnson

All provide a 1 in 4, 2nd on call commitment at St Michael's Hospice with the Hospice senior specialist doctor.

Hospice medical team from 1.9.23:

Dr Cath Blinman (6.9PAs) Herefordshire and mid Powys Community Specialist Doctor

Dr Chris Lukaris (5PAs) Specialty Doctor (non-clinical)

Specialty Doctors: Dr Kate Harding (6.6PAs);

Dr Janet Hastle (5.6PAs)

Dr Laura Watkinson (6.6PAs)

Dr Mary Wall (9.6 PAs)

Dr Sarah Howarth (7.6PAs)

Dr Kate Conway (1PA)

Specialty Trainee on West Midlands Training Programme

ST3 Medical Clinical Education Post (50% clinical at SMH) – starting August'23 (1 yr FTC)

GP ST2 (3PAs) on 4 month placement

Foundation Programme Trainee (F2) (0.8 WTE) on 4 month rotation

SPC Clinical Service

WVT SPC nursing team comprises 2.4 WTE covering the acute hospital inpatient beds & is based in the cancer unit, the Macmillan Renton Unit at HCH; and 7.7 WTE covering Herefordshire community PCNs, 3 community hospitals and Care Homes and is based at SMH. It is an integrated team with a Lead CNS, Julie Williams (band 8a) who works closely with the Consultant team. The community component of the team provide 9-5pm weekend and bank holiday cover providing mainly telephone advice to Herefordshire healthcare professionals and patients known to their service but with scope for face to face visits to patients at home if required.

WVT Clinical Psychology team provides a clinical service to cancer and palliative care services at WVT & SMH.

Mid Powys is served by two Palliative Care CNSs – x1 band 7 & x1 band 6, part of the Powys wide team employed by Powys LHB. Clinical input is mainly through domiciliary visits, outpatients and support to the 2 community hospitals. Palliative Medicine provision is supported by an SLA with WVT/SMH.

SMH is a well-established, independent Hospice that was redeveloped in 2016 now providing a wide range of services out of excellent, modern facilities. These comprise a 20 bedded inpatient unit (16 of which are currently open), Day Hospice & in-reach services. SMH has access to facilities in HCH including Radiology, Oncology, Haematology, SALT, Dietetics, interventional pain team, and ready access to other colleagues at HCH. SMH services include:

- The **Hospice at Home service** provides support to patients at home especially for those meeting the criteria for a fast-track CHC funded care package which are provided by hospice @ home carers or through external brokerage.
- The **Supportive Care Team** provides counselling, support to children, young people and their families and spiritual care and bereavement support.
- A **Social Work service** provides support with practical, financial, social or emotional impact of life limiting illness and bereavement support.
- **Occupational therapy** and **Physiotherapy** work within the inpatient unit, day centre and community.
- Day Services include **Day Hospice, Living Well** and **Complementary Therapies, Mindfulness** and **Fatigue and Breathlessness** services.

Medical outpatient service. This is currently provided at SMH, the Macmillan Renton Unit at HCH, and Llandrindod Wells Community Hospital in Powys.

There are also joint **palliative-specialty clinics** at SMH for neurological, renal, cardiac and respiratory patients to promote a palliative approach to their care in keeping with the model for EOL for Herefordshire.

The SPC service as a whole has close working relationships with both primary and secondary care colleagues.

MDT Working: SPC services are well integrated clinically across WVT acute and community services & at SMH with a weekly MDT meeting to support patient centred care irrespective of place of care and primary service involvement. There are also weekly SPC MDTs at the acute hospital and SMH prior to each Consultant ward round; a monthly neurological MDT for patients with advanced neurological conditions in Herefordshire and mid Powys; and SPC attendance at site specific cancer MDT meetings at Hereford County Hospital.

Information/Communication: EMIS web (electronic patient record system) is the shared electronic notes system now across SMH and WVT community services. There is a developing EPR/Maxims system at HCH. There is also a rapidly progressing Digital programme which will link all provider systems via a common electronic platform.

Education: SPC services are all actively involved in providing both informal and formal education to health care professionals across the locality. There is a purpose built education suite at SMH which runs a rolling programme of palliative and end of life care educational opportunities as well as tailor made initiatives as required. There are multi-professional education programmes at HCH run out of the postgraduate centre which includes a new simulation suite and supported by the newly formed Education Directorate - Hereford Academy now also has 3rd, 4th, & 5th year medical students from the University of Birmingham, the University of Aston and the newly opened Three Counties Medical School, based in Worcester. There are therefore a range of opportunities for palliative medicine consultants to contribute and lead on educational initiatives alongside SPC colleagues across the locality.

Strategic support is through a Herefordshire & Worcestershire Palliative & EOL Network Strategy Group and Programme Board. Uniting the consultant posts into one team will provide an opportunity for more integration strategically for quality improvement and service development within Herefordshire and across the ICS. Due to the geographical location and the limited number of stakeholders, there are opportunities to shape and develop specialist palliative care services further into an example of excellent practice across the locality & ICS.

Our sub-specialty interests include education and service improvement including the development of non-malignant disease service provision and a model for EOL care across Herefordshire. We welcome discussions around any specialty interest and flexible working requests.

The department of Palliative Care Medicine is in the Clinical Support Division at WVT, where the current Clinical Director/Associate Medical Director is Mr Hamza Katali.

KEY RELATIONSHIPS

Wye Valley NHS Trust:

- Consultant Palliative Medicine/ Clinical Lead: Sally Johnson
- Lead Palliative Care CNS: Julie Williams
- Cancer Services Manager & Professional Lead for the Clinical Support Division: Kat Barker
- Associate Medical Director for the Clinical Support Division: Hamza Katali
- Director of Nursing: Lucy Flanagan
- Associate Director of Nursing with responsibility for EOL Care: Rachael Hebbert
- Medical Director & Responsible Officer: David Mowbray

St Michaels Hospice:

- Lead Specialty Doctors: Chris Lukaris & Cath Blinman (Community)
- Hospice Registered Managers: Nikki Proctor and Jade Dyke- Whitfield
- Head of Human Resources (HR): Lisa O’Neill
- Hospice CEO: Mike Keel
- Chairperson of the Hospice Board: David Teague

Herefordshire Locality:

- ICS EOL Lead: Joanna Hodgetts
- ICS Medical EOL Lead: Dr Sarah Onions
- Taurus Medical Director: Mike Hearne
- Herefordshire End of Life Services GP Lead: John Stevenson
- Herefordshire Cancer Services Lead: Edwina Gallagher

4. Specific Aims & Responsibilities of the Posts

Post 3: Lead for HCH services
DCC
Provide Consultant led specialist palliative care as part of the WVT spc team on an advisory basis to patients at Hereford County Hospital. Average 500 ipu referrals to the team per year.
Consultant led HCH spc weekly MDT of patients known to the hospital team and site specific hospital mdts as required. Average 10-15 patients discussed/mdt.
Consultant led outpatient clinic in the Macmillan Renton Unit (MRU) at HCH. (weekly) [Booking guidance for OP Clinic: 1hr/new patient; 0.5/follow up]
Attend the weekly Herefordshire SPC service-wide MDT – face to face or remotely.
Be available for advice for all SPC professionals caring for patients across the localities but focussing on Hereford Hospital and Mid Powys services respectively.
Work with the 2 other senior palliative medicine colleagues to foster a collaborative, team approach that nurtures a seamless spc service across organisational boundaries and in turn, integrates with non-spc colleagues and teams covering all places of care in Herefordshire and mid Powys.

Participate in cross cover with consultant colleagues including clinical advice and 2 nd on-call for sickness and annual leave.
It is anticipated that personal workload figures will not exceed that which is possible within the allocated DCC and SPA time.
SPA
Management and Service Development
Provide medical leadership and management support to the Lead CNS with regard to the hospital based SPC Team including CNS practice; and support and advice to hospital based clinical teams.
Lead on the SPC service contribution to WVT hospital based EOL work stream: Linking in with the local and wider strategic bodies i.e. WVT EOL Strategic group, Herefordshire & Worcestershire ICS P&EOL Network & Programme Board strategic groups including the development of and coordination of evidence for CQC inspections.
Provide strategic and operational input to the development WVT SPC hospital based services and their integration with non spc services, through engagement with and support for the H&W Palliative & EOL Strategy
Clinical Lead in Palliative Medicine to support the organisation of the consultant team including the job planning process.
Audit and QIA
Take part in audit and quality improvement activity to promote the quality, effectiveness and efficiency of SPC Hereford Hospital based services especially in the context of Herefordshire and Mid Powys. Work with hospital based clinical teams to promote and develop excellent palliative and eol care for patients across Hereford County Hospital irrespective of diagnosis or place of care.
Education and Training
With palliative medicine consultant and SPC CNS colleagues develop palliative care medicine training opportunities for SPC and non-SPC health care professionals across the hospital and community integrating with SMH educational initiatives and also in Mid Powys
Contribute to Specialty trainee & FY2 training and completion of work place based assessments and reports when required.
It is anticipated that personal workload figures will not exceed that which is possible within the allocated SPA time.

Research

Research interests will be welcomed. Post holders may wish to become involved in clinical trials if opportunities are available.

5. Location

The principal base for the post will be in the Macmillan Renton Unit at Hereford County Hospital.

6. Review

This job description is regularly reviewed. It is intended as a guide to the general scope of duties and is not intended to be definitive or restrictive. It is expected that duties will change over time and this description will be subject to review in consultation with the post holder.

7. General Information for Candidates

Information Technology

Employees are expected to develop the IT skills necessary to support the tasks included in their post. They will therefore be required to undertake any necessary training to support this.

Health and Safety

The post holder is required to conform to the Trust's & Hospice's Policies on Health and Safety and Fire Prevention, and to attend related training sessions as required.

Safeguarding Vulnerable Adults & Children

Wye Valley NHS Trust and St Michael's Hospice are committed to safeguarding and promoting the welfare of children, young people and vulnerable adults and expects all employees, volunteers and contractors to share this commitment.

All staff have a duty to safeguard and promote the welfare of patients, their families and carers. This includes practitioners who do not have a specific role in relation to safeguarding children or adults, you have a duty to ensure you:-

- Are familiar with organisational safeguarding policies.
- Attend appropriate training for safeguarding.
- Know who to contact if you have concerns about an adult or child's welfare.

Confidentiality

Employees are expected, to maintain confidentiality at all, times. In the course of their duty employees will have access to confidential material about patients, members of staff and other Health Service business. On no account must information relating to identifiable patients be divulged to anyone other than authorised persons, for example, medical, nursing or other professional staff, as appropriate, who are concerned directly with the care, diagnosis and/or treatment of the patient. If there is any doubt whatsoever, as to the authority of a person or body asking for information of this nature, advice must be sought from a superior officer. Similarly, no information of a personal or confidential nature concerning individual members of staff should be divulged to anyone without the proper authority having first been given. Failure to observe these rules will be regarded as serious misconduct, which could result in serious disciplinary action being taken including dismissal.

Policies and Procedures

The post holder will be required to comply with all policies and procedures issued by and on behalf of Wye Valley NHS Trust and St Michael's Hospice which may be amended from time to time.

Infection Control

It is a requirement for all Trust staff to comply with all trust infection control policies and procedures. All Trust staff should ensure that they fulfil their responsibilities for infection prevention and control, that they provide leadership where appropriate in infection control matters and that they challenge poor infection control practice in their workplace. All staff should have infection control training at induction and annual infection control updates via the Department of Health e-learning package, or by attendance at an annual Health and Safety refresher. All clinical staff will have annual infection control objectives set and these will be reviewed at appraisal.

No Smoking Policy

In recognition of the Trust's commitment to health promotion and its health and safety responsibility, the Trust has a no smoking policy that prevents all staff from smoking whilst on duty.

Equal Opportunities

The Trust and Hospice are Equal Opportunities employer and the post holder is expected to promote this in all aspects of their work. Their duty is to ensure that no existing or potential employees receive less favourable treatment on the grounds of gender, sexual orientation, nationality, ethnic origin, religion, marital status, age or disability, or are disadvantaged by conditions or requirements that cannot be shown to be justifiable. This also applies to patients – the Trust & Hospice have a duty to ensure patients have the right to equal access, care and treatment. All employees are expected to comply with this policy.

Financial

Employees must order and receipt goods in accordance with the Trust's financial framework.

Data Quality

The information that you record as part of your duties at the Trust must be 'fit for purpose', reliable and easily accessed by appropriate/authorised personnel. To achieve this standard the information must be accurate, legible (if hand written), recorded in a timely manner, kept up-to-date, appropriately filed. All staff must monitor and take responsibility for data quality throughout the areas of the system used locally, all users maintain timely input, and ensuring that data is checked with the patient, and staff (in relation to their staff record), whenever possible, and to support initiatives to improve data quality.

N.B. Recorded information includes patient information entered in case notes and entered on any computerised care records system, financial information, health and safety information e.g. incident reporting and investigation, personnel information recorded in personnel files etc. Failure to adhere to these principles will be regarded as a performance issue and will result in disciplinary action.

Records Management

All employees of the Trust & Hospice are legally responsible for all records that they gather, create or use as part of their work within the Trust (including patient, financial, personnel and administrative), whether paper or computer based. All such records are considered public records and all employees have a legal duty of confidence to service users. Employees should consult their manager if they have any doubt as to the correct management of records with which they work.

Conduct

The post holders are ambassadors for the division, the Trust, and the Hospice and their actions and conduct will be judged by customers as an indication of the quality of the service provided as a whole. The post holders will also comply with the NHS Core Values and the Constitution.

Other

The Trust is committed to continuous improvement in managing environmental issues, including the proper management and monitoring of waste, the reduction of pollution and emissions, compliance with environmental legislation and environmental codes of practice, training for staff, and the monitoring of environmental performance.

The post-holders have a general duty of care for their own health, safety and well-being and that of work colleagues, visitors, and patients within the hospice and hospital. This statutory duty is in addition to any specific risk management or clinical governance accountabilities associated with the post.

Duties

Your duties will be arranged with the Associate Medical Director, Clinical Lead for Palliative Medicine and Hospice CEO and you must discuss and understand these duties as soon as you take up your appointment. The consultant has final medical responsibility for all patients under their care.

For further information and visits to the Trust

Candidates are most welcome to visit the area, WVT and SMH, and are encouraged to discuss the post with any members of staff they wish. Interested candidates can make arrangements to meet or speak with the current post holders listed prior to application.

To arrange a visit or speak to a member of staff contact the SMH on 01432 851000 or WVT on 01432 355444, or by email:

Dr Sally Johnson
Consultant in Palliative Medicine

sally.johnson@wvt.nhs.uk
Tel 01432 364414

Mike Keel
CEO, St Michael's Hospice

mkeel@smhospicehereford.org
Tel. 01432 851000

Proposed Job Plan

CONSULTANT IN PALLIATIVE MEDICINE (Post 3)

The job plan will be tailored individually to suit the post holder and the needs of the service. The post holder will have the opportunity to be involved in this by negotiation.

The job plan will be offered as 8 PAs although there may be opportunities to change this through discussion and mutual agreement.

The proposed job plan below represents an average week. The plan may vary in response to other consultants leave and to unplanned increases in work. The doctor will be expected to monitor their hours to ensure that the workload averages out to the proposed job plan.

TIME OFF IN LIEU

Consideration would be made for reasonable requests for time off in lieu for work beyond usual hours of work such as covering a colleague's absence due to sickness or other work done beyond contracted hours.

ON-CALL ARRANGEMENTS:

There will be a 1 in 4, 2nd on-call commitment. This is Category B prospective cover attracting a 3% availability supplement shared between the consultant and senior specialist doctor posts. This is for telephone advice to the 1st on-call doctor at the hospice and on call SPC CNS plus external advice if requested and beyond the competence of the 1st on call doctor/SPC CNS. Availability to attend is necessary if required when 2nd on to the Specialist Trainee as a condition of the training post.

LEAVE ARRANGEMENTS:

Study Leave

The study leave entitlement is 30 days over a period of three years. Leave arrangements must be approved by the Associate Medical Director and Business Unit Manager and consultants must give 6 weeks' notice.

Annual Leave

Our local policy is more attractive than national T&C's and for anyone here or coming into the Trust local policy which apply.

- For a consultant with under 7 years' service this equates to 34 days + bank holidays
- For a consultant with + 7 years this equates to 36 days + bank holidays.

SUPPORT

Through joint working with consultant colleagues and membership of the West Midlands Palliative Care Physicians Society, Specialty Training Committee and Medical Director/Lead Consultant Group there is opportunity to maintain channels for mutual support, collaboration, strategic and operational awareness.

The appointee will have dedicated secretarial support and office based at HCH, a mobile phone, PC/laptop with IT support.

WVT have run regular Time Team support sessions during the pandemic with a view to starting Schwartz Rounds when feasible. There is also access to SMH & WVT support including Clinical

Psychology, Complementary therapies, Mindfulness, Chaplaincy & Spiritual Care support, the Hospice Employee Assistance Scheme and WVT Occupational Health.

A mentoring scheme for new consultant staff at WVT has been established and each new appointee will be appointed a mentor shortly after appointment.

CONTINUING PROFESSIONAL DEVELOPMENT

The post holders will be committed and financially supported to fully comply with RCP requirements for continuous professional development and engagement with all requirements of the GMC to maintain personal medical revalidation.

The Trust uses Zircadian e-portfolio records for the appraisal process through which they will participate in the annual WVT Job Planning process with the Associate Medical Director and Hospice CEO for hospice based service components. This encompasses expected compliance with the Trust & Hospice's mandatory training programme personally and by supporting medical team compliance.

TEACHING, RESEARCH, AUDIT AND CLINICAL GOVERNANCE

Wye Valley NHS Trust and St Michaels Hospice have good library facilities with internet access.

At WVT, there is a weekly Grand Round with opportunity to present as part of the specialty rotation. In addition, there are monthly education and audit rolling half days organised for departmental audit presentations. The hospice also has a weekly medical lunchtime meeting.

The Trust and Hospice have well-established frameworks for clinical governance that incorporate the clinical audit program. The post holders will be expected to take part in clinical audit activities and achieve clinical governance objectives in accordance with the agreed Divisional, Trust & Hospice clinical governance programs.

Post 3: HCH		PAs/week
DCC: HCH	HCH ward consults	2.85
	Outpt Clinic (MRU)	1
	SPC HCH & community MDTs	0.5
	Site specific MDTs	0.25
	Pt Admin/Letters	1
SPA: HCH focus	Med supervision/education HCH CNS team	0.4
	QIA incl. clinical governance & development of HCH SPC services	
	Multidisciplinary Education	1.5
	CPD/Appraisal	
	Clinic Lead	0.5
Total PAs		8
	1 in 4 with prospective cover	3%

Post 3 (HCH) 8PAs	Monday	Tuesday	Wednesday	Thursday	Friday
9-1 pm		SPC HCH MDT (1hr) HCH ward consults / SS MDTs 1 DCC	HCH Ward Consults / SS MDTs 1 DCC	SPC Community MDT (1 hr) / SPA 0.25 DCC / 0.75 SPA	Outpatient Clinic (MRU in HCH) 1 DCC
1-2pm incl. lunch		WVT Grand Round 0.25 SPA	Palliative Medicine JC 0.25 SPA	SPA 1 SPA	Ward Consults / Admin 1 DCC
2-5pm		HCH Ward Consults 0.75 DCC	Admin / SPA 0.6 DCC / 0.15 DCC		

APPENDIX 2

PERSON SPECIFICATION

REQUIREMENTS	ESSENTIAL	DESIRABLE	METHOD OF ASSESSMENT
Educational Qualifications	Full registration and a licence to practise with the GMC. MRCP (UK) or equivalent. On the GMC Specialist Register or within 6 months of CCT from the date of interview, Certificate of Eligibility for Specialist Registration (CESR) or European Community Rights.	Higher Medical Degree	CV
Experience	Experience in working effectively within a multidisciplinary team and specialist palliative care unit. Ability to undertake palliative care assessments in a variety of settings including hospital wards, outpatient clinics, palliative care inpatient unit, and in patients' homes. Ability to provide palliative care advice and support to other healthcare professionals in the palliative care team, hospital and community settings. Ability to take full and independent responsibility for clinical care of patients.	Subspecialty training or equivalent	CV/Interview
Ability/skills	Demonstrate effective team working skills.		CV/Interview
Research and Audit	Experience of research and ability to apply outcomes to clinical practice. Evidence of audit and the implementation of change following the audit.	Relevant research published in peer review journal	CV CV/interview
Education and Teaching	Experience of teaching, including doctors and medical students. Experience of multidisciplinary teaching.		CV Presentation/ Interview
Management Skills	Demonstrate effective team working skills. Time management/organisational ability. Proven knowledge of systems and process of NHS or equivalent. Sense of understanding and commitment to corporate responsibility. Understanding and experience of all aspects of Clinical Governance. Evidence of management/leadership skills training. Commitment to and understanding of their responsibility to the organisation. An understanding of voluntary sector hospice funding and management and of current agendas within the NHS which have a bearing on the strategic vision of specialist palliative care.		Interview CV/interview CV/Interview Examples to be given at Interview Interview

Leadership*	An understanding of and ability to demonstrate their ability to: <ul style="list-style-type: none"> • Empower others • Lead through change • Influence strategically • Work collaboratively • Drive for improvement • Integrity 		Interview / Application
Other	Be committed to the Continuing Professional Development of self and others Demonstrate innovation and problem solving abilities. Driving license and availability of a car to travel between settings when required.		CV/Interview

***Leadership Definitions**

- Empowering others – striving to facilitate others’ contributions and to share leadership, nurturing capability and long-term development of others
- Leading change through people – communicate the vision and rationale for change and modernisation, and engaging and facilitating others to work collaboratively to achieve real change.
- Effective and strategic influencing – being able and prepared to adopt a number of ways to gain support and influence diverse parties, with the aim of securing health improvements
- Collaborative Working – being committed to working and engaging constructively with internal and external stakeholders.
- Drive for improvement – a deep motivation to improve performance in the health service and thereby to make a real difference to others’ health and quality of life.
- Political astuteness – showing commitment and ability to understand diverse interest groups and power bases within organisations and the wider community, and the dynamic between them, so as to lead health services more effectively.
- Personal Integrity – a strongly held sense of commitment to openness, honesty, inclusiveness and high standards in undertaking the leadership role.

APPENDIX 3

ADDITIONAL INFORMATION FOR CANDIDATES

HEALTH SERVICES IN HEREFORDSHIRE

Herefordshire Health Services are supported by Herefordshire and Worcestershire Integrated Care System. There are 79 GP practices across Herefordshire and Worcestershire which have joined together into Primary Care Networks which consist of groups of general practices working together with a range of local providers, including across primary care, community services, social care, and the voluntary sector, to offer more personalised, coordinated health and social care to their local populations. There are five PCNs in Herefordshire served by Wye Valley NHS Trust and St Michaels Hospice.

WYE VALLEY NHS TRUST

Wye Valley NHS Trust is the provider of healthcare services at Hereford County Hospital, which is based in the city of Hereford, along with a number of community services for Herefordshire and its borders. It also provides healthcare services at community hospitals in the market towns of Ross-on-Wye, Leominster and Bromyard.

The Trust exists to improve the wellbeing, independence and health of the 192,000 people we serve within Herefordshire as well as the 40,000 people referred to us from Powys and Mid Wales.

There is a strong clinical network with trusts in Birmingham, Worcester, Gloucester and Cardiff and with a workforce of around 3,000 people, the Trust provides a range of specialist and generalist functions.

Serving a population of 192,000, the Trust is one of the smallest rural District General Hospitals in England. It works hard to deliver across traditional boundaries to provide integrated care in order to deliver a standard of care you would want for yourself, your families and friends.

The Trust mission is to provide a quality of care we would want for ourselves, our families and friends. The trust values are:

- Compassion**
- Accountability**
- Respect and**
- Excellence**

The County Hospital is the centre of Wye Valley Trust. It is a District General Hospital with 299 beds within the medical and surgical bed-base and 82 in the community hospitals.

There are specialist Coronary Care and Acute Stroke beds, a 8-bed Intensive Therapy Unit and a Frailty Unit. In addition there are two General Surgical wards accommodating Upper GI Surgery, Colorectal, Breast and Urology, two Orthopaedic wards (one trauma and one elective), a Paediatric ward and an Obstetrics & Gynaecology ward. Other on-site specialties without inpatient beds include Diabetes and Endocrinology, Neurology, Dermatology, Rheumatology, Haematology, Palliative Medicine, ENT, Oral Surgery and Ophthalmology.

There are regular visits by a Renal Physician, Oncology and Maxillofacial and Plastic surgery. There is an on-site Oncology day unit, providing radiotherapy, a satellite dialysis unit and in-patient Mental Health facility.

Medical Services are supported by a full range of Diagnostic services, including laboratory services, radiology and a cardiorespiratory unit. There is a 24/7 endoscopy rota and a cardiology suite for diagnostic angiography. Due to the size of the trust, it works closely with both Worcestershire Acute Hospitals NHS Trust and University Hospitals Birmingham NHS Foundation Trust.

Wye Valley NHS Trust is part of the West Midlands Local Education and Training Board and have Specialty Trainees and Foundation Doctors at all levels. It receives undergraduate students from the University of Birmingham. The trust is keen to develop educational opportunities for under- and post-graduate medical staff and the wider multidisciplinary team. A simulation facility is now operational and developed by one of the Acute Medicine Consultants.

LOCALITY HOSPITALS IN HEREFORDSHIRE

The county is currently well served by a range of community hospitals, many of which can provide ongoing medical care and rehabilitation to help patients recover when they have had treatment at Hereford County Hospital or another hospital but are not well enough to go home.

The Trust also has partnership arrangements in place with the 2gether NHS Foundation Trust, to provide community facilities for mental health services, mental health resource centres as well as facilities offering services to people with learning disabilities.

ST. MICHAEL'S HOSPICE

The vision of St Michael's Hospice is that everyone in Herefordshire and the surrounding areas who needs and wants palliative care has timely access to it and in a way that suits them.

The charity's mission is to make sure palliative and end of life care is available to all who can benefit from it, regardless of age, gender, diagnosis, social group, or location. This includes supporting those people close to the dying person throughout the pre- and post-bereavement stages too. We will do this by bringing together the excellent work already being done in the community; at the hospital; and in the Hospice to ensure there is a spectrum of services suitable for the wide variety of needs the patients and families have.

It also works with others to help people, their families and carers feel comfortable and able to have conversations with skilled professionals about how, when and where they would like their care and support towards the end of life. It will guide them, if they wish, to produce a plan that describes their needs and preferences. This will ensure people receive the right care, in the right place delivered by the right people.

The hospice works with communities, groups and organisations to help them to understand the importance of good palliative care and how they can play their part in it. It believes the Compassionate Communities Model is the best approach for Herefordshire. Herefordshire already has strong compassionate communities, and it builds on this through education, research and guidance so people feel supported to live and die well; on their own terms; and with whatever health conditions they have.

St Michael's has built up expertise and experience over thirty years, including upgrading of its facilities at its site in Bartestree in 2016. Following this, its aim has been to do the following:

- Provide care for all patients irrespective of diagnosis and provided much earlier in their disease pathway;
- Be available wherever and whenever the patient and family need it – especially in helping them to avoid unnecessary hospital admissions;
- Be a range of people from informal family carers through to highly trained specialists and a mix of paid and volunteer staff to provide care – the concept of compassionate communities;

- Move to a place where all people feel comfortable and confident to plan for their end-of-life care well before needing it.

St Michael's Hospice supports Herefordshire's vision that anyone who has a life limiting illness ill, be it with cancer or any other illness, and their families, should have high-quality personalised care, that is patient-centric not organisation-centric. It should be available wherever people choose to spend their last months, weeks or days - whether that is in a hospital, a hospice, a care home or their own home.

St Michael's Hospice subscribes to the six C's of caring devised by the NHS. The six C's of caring are principles that staff strive towards so they can achieve high levels of care.

The six C's are **Care, Compassion, Competence, Communication, Courage and Commitment.**
