

NHS Blood & Transplant (NHSBT)

and

Royal Devon University Healthcare
NHS Foundation Trust

JOB DESCRIPTION & PERSON SPECIFICATION

Post title: Consultant in Haematology and Transfusion Medicine

based at the Royal Devon & Exeter Hospital

1. BACKGROUND

This is a new post for a full-time Consultant in Haematology and Transfusion Medicine, and will be a joint appointment between NHS Blood and Transplant (NHSBT) and Royal Devon University Healthcare NHS Foundation Trust (Royal Devon). The post is, in broad terms, intended:

- To provide a local, regional and national expert transfusion medicine service as part of the wider NHSBT Patient Blood Management (PBM) and Components clinical team
- To work as part of a team with the Regional Transfusion Committee, and the other members of the multidisciplinary NHSBT customer services and Patient Blood Management teams to support hospitals in the Royal Devon region and promote safe and effective transfusion practice.
- To support the delivery of the Transfusion Transformation / Transfusion 2024 strategies, along with recommendations from the Infected Blood Inquiry, as part of a wider team workplan.
- To participate in clinical research in transfusion medicine.
- To participate in local, regional & national audit initiatives in transfusion medicine.
- To participate in teaching and training regionally and nationally of medical and non-medical staff, and to contribute to the teaching programmes for Haematology and Transfusion Medicine Specialty Registrars preparing for the part I and part II of the FRCPath examination, including visitors from overseas.
- To undertake other medical functions within the NHSBT Patient Blood Management and Components (PBMC) Team and Transfusion Clinical Directorate as required in co-operation with consultant colleagues, particularly those in the Royal Devon region.
- To participate in the NHSBT consultant appraisal and revalidation programmes and job planning for both NHSBT and Royal Devon. These can be arranged jointly with representatives from both organisations.
- To participate actively in Clinical Governance in both NHSBT and Royal Devon.
- To participate actively in Continuing Professional Development.
- To work with colleagues to provide medical leadership of clinical and laboratory aspects of transfusion practice to Royal Devon, and to work with clinical teams to develop practices for the safe and effective use of blood.

- To work with colleagues at the Royal Devon to provide outpatient services, initially to increase new patient capacity, moving towards the evolution of subspecialisation evenly across the department, including development of an “iron service”.
- To participate in multidisciplinary team meetings at the Royal Devon, discussing patients with both non-malignant and malignant haematological conditions.
- To participate in University of Exeter Medical School undergraduate teaching.

2. JOB DESCRIPTION

2.1 Post title: Consultant in Haematology and Transfusion Medicine

2.2 Grade: Consultant

2.3 Employer: The employer is NHSBT. The postholder will have an honorary consultant contract with Royal Devon.

2.4 Accountable to

- NHSBT Managerial Responsibility – Dr Andrew Charlton, Clinical Lead for Patient Blood Management and Components
- NHSBT Professional Accountability – Dr Gail Mifflin, Chief Medical Officer, NHSBT
- Royal Devon Managerial Responsibility – Drs Jason Coppell and Paul Kerr, Joint Clinical Leads in Haematology
- Royal Devon Professional Accountability – Professor Adrian Harris, Chief Medical Officer, Royal Devon NHS Foundation Trust

The laboratory management arrangements of both Authorities conform to HC (90)18 and EL(89)/P71, and to the recommendations of the Strategic Review of Pathology Services notably paragraphs 4.22 to 4.26.

2.5 Key Duties and Responsibilities

2.5.1 NHSBT – 5.125 Programmed Activities

- To provide medical leadership for transfusion medicine within Royal Devon region, developing close links with hospitals to promote best practice. This will include being an active participant in the activities of the Regional Transfusion Committee.
- To be one of the Regional Consultants for Patient Blood Management and Components within the NHSBT Hospital Liaison Team, working with the Customer Services Managers and the Patient Blood Management Practitioners to support hospitals in the region to provide safe and effective transfusion practice.
- To support the delivery of the Transfusion Transformation / Transfusion 2024 strategies, along with recommendations from the Infected Blood Inquiry, as part of a wider team workplan.
- To provide clinical support for the Red Cell Immunohaematology (RCI) service in NHSBT, and the Components clinical team.
- To lead and participate in NHSBT clinical research activities, including clinical trials and studies, and systematic reviews.
- To lead and participate in regional and national audit initiatives in transfusion medicine working with the National Comparative Audit Team and regional support.
- To support the development of clinical benchmarking of Patient Blood Management in hospitals
- To undertake other medical functions within the Clinical Directorate as required in co-operation with consultant colleagues. Personal periods of

study, holiday or sickness will be covered by mutual agreement between senior colleagues.

- To participate in teaching and training of medical and non-medical staff, and to contribute to the teaching programmes of Haematology and Transfusion Medicine Specialty Registrars preparing for the Part I and Part II of the FRCPATH examination, including visitors from overseas.
- To participate in the NHSBT Patient-Facing On Call rota in-hours and out-of-hours, and other rotas within NHSBT as the job responsibilities dictate (for example, RCI work).
- To participate in the consultant appraisal programme, revalidation & job planning. This will be arranged so as to cover duties for the Trust as well as NHSBT, and can be undertaken jointly with representatives from both organisations.
- To participate in & contribute to continuing professional development (CPD).
- To participate in internal / external training programmes.
- To undertake additional duties as requested by the Clinical Director.
- To ensure that staff for whom they are responsible receive adequate training and are fully aware of how the principles of health and safety and good manufacturing practice (GMP) apply to their duties and of the need to achieve the quality requirements as specified in current guidelines.
- Study leave and training will be subject to the NHSBT / Royal Devon Medical Staff Study and Professional Leave Policy. NHSBT gives high priority to CPD, and the appointee is expected to participate fully in the RCPATH scheme. This will include a programme of learning designed to develop and maintain core knowledge of transfusion medicine as defined at the time within NHSBT. The appointee will currently be entitled to up to 30 days of study leave in a rolling period of three years and up to £900 per year in a rolling three year period, pro rata between NHSBT and Royal Devon.
- The appointee will be expected to share with Consultant colleagues in the medical contribution to management.
- The appointee will be required to work within the financial and other constraints decided upon by NHSBT and Royal Devon. Budgeting responsibilities will be undertaken where agreed. Additional expenditure will not be committed without the approval of the appropriate manager/budget holder.
- Junior Medical Staff will be appropriately involved in the work of the appointee in both NHSBT and Royal Devon. Regional Specialty Registrars in Haematology and Blood Transfusion rotate through all haematology specialities as part of their training.
- The duties of this post will be subject to regular review through the agreed job planning process.

2.5.2 Royal Devon Trust – 5.125 Programmed Activities

- A provisional outline job plan is included but is subject to modification. The individual job plan and detailed timetable will be discussed with the successful candidate. Special interests will be accommodated where they are compatible with service requirements.
- It is expected that the initial job plan will be agreed within three months of the start date and will be reviewed annually or earlier, if necessary.

- The appointee will be expected to provide one outpatient clinic per week at the Royal Devon, initially to increase new patient capacity, evolving towards subspecialisation evenly across the department with a view to developing an interest in general haematology and an “iron service”.
- To participate in multidisciplinary team meetings at the Royal Devon, discussing patients with both non-malignant and malignant haematological conditions.
- Other regular commitments include a weekly morphology session and time for clinic preparation / administration, chemotherapy prescribing, planning and review of patients on treatment.
- On-call rota: The post holder will participate in the cross-site on-call rota at a 1 in 16 frequency (including weekends) with prospective cover for the telephone out of hours advice service. There are 3 full ward rounds at RDE during each on-call week (including Sunday), laboratory support, rapid referral review and telephone advice out of hours (for NDH and RDE). Emergencies admitted to NDH out of hours are under the care of duty physicians with telephone advice from RDE haematologists, as specified in the Service Level Agreement (SLA). Currently, the on-call commitment attracts a 3% salary supplement (category A, 1 in 16).
- To participate actively, via the Hospital Transfusion Team (HTT) and Hospital Transfusion Committee (HTC) in clinical governance, including participation in national, regional and local audits.
- To provide advice in all aspects of transfusion medicine.
- To monitor blood component usage and provide advice on best practice in transfusion medicine.
- To work with clinical directorates in the Trust to develop safe and effective use of blood components based on national guidance and evidence from research.
- To participate in teaching and training of medical and non-medical staff, including undergraduates at the University of Exeter Medical School, and to contribute to the teaching programmes of Haematology and Transfusion Medicine Specialty Registrars (StRs) preparing for the Part I and Part II of the FRCPATH examination.
- The appointee should be experienced in the management of patients with disorders requiring either acute or long term transfusion support, general haematological conditions and be competent in haemostasis and thrombosis. It is expected that the post holder will have recent experience of hospital-based transfusion medicine in a centre of excellence.
- The appointee will participate in the inpatient care of patients with complex transfusion needs, including those who refuse blood components, bleeding disorders and non-malignant haematological conditions
- The appointee will assist StRs with referrals for consultative haematology advice.
- To take a leading role in clinical governance issues within the Royal Devon Haematology Department relating to blood transfusion and in the wider Cancer Services Directorate, working through the existing medical management structure to help deliver the clinical governance agenda.
- The appointee will be required to supervise StR management of patients with complex transfusion needs and patients who have had an adverse reaction to blood components.

- The post holder will lead on managing the demand management of blood components and supporting the implementation of appropriate patient blood management initiatives throughout the hospital.
- To develop and maintain an active interest in Patient Blood Management (PBM), including the use of alternatives to donor blood such as peri operative cell salvage and pharmacological agents such as antifibrinolytics and intravenous iron and ensure that this is implemented.
- To ensure transfusion incidents and adverse events are investigated and reported to the Serious Hazards of Transfusion / Serious Adverse Blood Reactions and Events (SHOT/SABRE) haemovigilance schemes as appropriate.
- To monitor usage and wastage with reference to the Blood Stocks Management Scheme (BSMS) data and lead implementation of strategies to correct any outlying practice.
- The appointee will be required to participate in the education of undergraduates, postgraduates and allied health professionals. This includes participation in the departmental teaching programme for junior haematology medical and nursing staff and active participation in the departmental weekly meeting programme.
- The post holder would be expected to enable Royal Devon participation in multicentre clinical studies of blood transfusion and to develop an area to lead systematic reviews, national audit of practice, guideline writing and research.
- All members of the consultant team will be occasionally required to provide emergency cover for absent consultant colleagues; it is expected that the consultant(s) providing cover will also provide clinical supervision to junior staff caring for elective inpatients and day cases. External Locum cover will not normally be provided for short-term absences.
- The appointee will be responsible for the leadership of his or her team as appropriate within the specialty. Specific leadership responsibilities for areas of the service will be agreed on an individual basis and will be detailed in the appointee's job plan.
- The appointee is expected to be responsible to the Associate Medical Director for the effective and efficient use of resources under his or her control, to contribute to the planning and development of the service and to participate in directorate / departmental meetings.
- Infection control: all medical staff have a duty to practice safe medicine in relation to infection control and other issues. Appointees will therefore be expected to attend infection control learning opportunities once per year as a minimum, and also to comply with Trust Infection Control policies and guidelines.
- The appointee will have office accommodation, secretarial support, access to a dedicated PC and the Internet.
- Annual and study leave will be granted to the maximum extent allowable by the Medical & Dental Whitley Council regulations, but in accordance with the Trust's leave policy.

3. MAIN CONDITIONS OF SERVICE

- The post is subject to the national Terms and Conditions – Consultants (England) 2003, and relevant General Whitley Council Conditions of Service as amended from time to time.
- The salary is on the consultant scale as set out in the Terms and Conditions – Consultants (England) 2003.
- Removal expenses, where appropriate, will be paid to the appointee in accordance with NHSBT policy.
- The successful applicant will be required to reside within a reasonable distance/travelling time from Royal Devon.
- Any offer of employment is subject to satisfactory health clearance and, where appropriate, other conditions e.g. Right to Work, Disclosure and Barring Service (DBS) check etc.
- Because of the nature of the work, the post is exempt from the provisions of Section 4 (2) of the Rehabilitation of Offenders Act 1974 (exceptions) Order 1975. You are therefore not entitled to withhold information about convictions, which for other purposes are “spent” under the provisions of the Act, and, any failure to disclose such convictions could result in disciplinary action by the Authority. Any information given will be kept in strict confidence, and used only in relation to the position to which the order applies.
- The successful candidate must hold full and specialist registration with a licence to practise with the GMC (or be eligible for registration within six months of interview).
- The successful candidate must be a Holder of Certificate of Completion of Training (CCT), or within six months of award of CCT or equivalent by date of interview.
- The successful candidate is not required to subscribe to a recognised professional defence organisation to fulfil their contractual obligations, but should ensure that they have adequate defence cover as appropriate, for example, for private and Category 2 work, and for GMC disciplinary proceedings.
- Any applicant who is unable, for personal reasons, to work 10.25 programmed activities will be eligible for consideration for the post; if such a person is appointed, modification of the job content will be discussed on a personal basis with the Royal Devon clinical service lead and NHSBT Clinical Lead (Patient Blood Management and Components).
- The post-holder must be willing to travel within the UK and internationally to fulfil organisational needs.
- Good Medical Practice: both organisations are committed to providing safe and effective care for patients. The postholder is expected to carry out their duties and responsibilities in line with Good Medical Practice.
- The appointee will be expected to share with consultant colleagues in the medical contribution to management and clinical work throughout NHSBT and Royal Devon.
- The appointee will be required to work within the financial and other constraints decided upon by NHSBT / Royal Devon. Budgeting responsibilities will be undertaken where agreed. Additional expenditure will not be committed without the approval of the appropriate manager / budget holder.

- Subject to the Terms and Conditions of Service there will be an expectation to observe policies and procedures of NHS Blood and Transplant and Royal Devon. These will be drawn up in consultation with the profession where they involve clinical matters.
- A shared office (NHSBT is increasingly using “agile working” in an open plan area), relevant IT/Internet equipment and shared secretarial support will be provided at both sites (to a total of approximately 0.5WTE).
- The duties of this post will be regularly reviewed as part of the routine job planning process. Changes to the duties may be made with the agreement of the postholder and their employers.
- Important general note: The postholder must take reasonable care of their own health and safety and any other personnel who may be affected by their omission. Organisational policies must be followed at all times

4. BACKGROUND INFORMATION NHS BLOOD AND TRANSPLANT (NHSBT)

NHSBT was established as a Special Health Authority for England and Wales in October 2005 by the merger of the National Blood Authority (NBA) – made up of the National Blood Service (NBS) and UK Transplant (UKT). The remit of NHSBT is to provide a reliable efficient supply of blood, organs, tissues, haemopoietic stem cells and associated services to the NHS.

NHSBT collects around 5,000 blood donations every day to ensure a constant supply of blood to hospitals. Our work also makes some 5,500 organ and cornea, transplants possible every year. In addition, we retrieve and store other tissues, such as skin and bone, ready for patient use. We provide a number, of related specialist services, such as diagnostic laboratory services, solid organ tissue typing and cord blood banking. We are responsible for the NHS Organ Donor Register (which has over 13 million names), the British Bone Marrow Registry (BBMR), and the NHS Cord Blood Bank, with over 13,000 donations banked.

NHSBT has 13 sites across England for manufacturing, diagnostics, and R&D (see below), as well as multiple fixed donor clinics and mobile donor collection facilities.

NHSBT Organisation Structure

Senior staff

Mr Peter Wyman Chairman

Executive Directors:

Dr Jo Farrar	NHSBT Chief Executive
Dr Gail Miflin	Chief Medical Officer & Director of Clinical Services
Mr Carl Vincent	Director of Finance
Mr Mark Chambers	Deputy Director of Donor Experience and Communication
Mr Anthony Clarkson	Director of Organ and Tissue Donation & Transplantation
Mr Gerry Gogarty	Director of Blood Supply.
Ms Deborah McKenzie	Chief People Officer
Ms Wendy Clark	Chief Digital & Information Officer (& Deputy CEO)
Ms Helen Gillan	Director of Quality

Medical Staffing Arrangements in NHSBT

There are approximately 50 NHSBT consultants nationally, many with joint appointments with universities or hospitals. They work within one of the 3 operational directorates but are professionally responsible to the NHSBT Chief Medical Officer, Dr Gail Miflin.

Medical staff work within 4 teams reflecting the operational structure each headed by a medical director:

- MD Transfusion: A/Prof Lise Estcourt, Oxford
- Medical Director Cellular Therapies: Dr James Griffin, Filton
- MD Organ Tissue Donation and Transplantation: Professor Derek Manas, Newcastle
- MD Pathology: Professor David Roberts, Oxford

Within this structure Transfusion consultants are further organised into national teams, each under a Lead (s) to provide services within specific areas:

- AMD Transfusion and Components: Dr Andrew Charlton (deputy Prof Laura Green)
- AMD in Donor Medicine / Plasma for Medicines: Dr Andi Fletcher
- R & D Lead: Prof Laura Green
- Lead in Education: Dr Suzy Morton

Directorate of Blood Supply. Allied with Medical Director Transfusion

This Directorate is responsible for the collection of blood. All events relating to this are also managed largely by Clinical Teams. These include donor adverse events, processing events, positive microbiology results in donors and clinical governance. Processing and secondary manufacture of components, testing and distribution to hospitals.

Clinical Transfusion and Blood Components:

Management of partnerships between hospitals and NHSBT, and support and advice to hospitals on all aspects of transfusion medicine, including the implementation of Patient Blood Management

The Clinical Transfusion, Blood Components and R&D Team, Medical Staff:

The Patient Blood Management Team has a network of haematology consultants with a proven record in clinical transfusion medicine led by Dr Andrew Charlton (Newcastle). The main current objective of these posts is to promote better blood transfusion practice. The funding is shared, proportionate to the programmed activities between NHSBT and the host trust. In the hospital, the consultant has clinical responsibility for clinical and laboratory transfusion services, and they provide an advisory and leadership role for these services in the surrounding region through the relevant Regional Transfusion Committee (RTC). Their work in trusts provides the experience for their work in national audit, clinical research, guideline development, and leading better practice initiatives in their regions, and nationally.

The current Consultants Team, together with the RTC they support, and the Trust where they hold their joint appointment is outlined below.

- **Dr Sam Aliman:** Joint post with University College London Hospital
- **Dr Shubha Allard:** NHSBT

- **Dr Catherine Booth:** NHSBT Tooting and Barts Health NHS Trust.
- **Dr Andrew Charlton:** North East RTC, joint post with Newcastle upon Tyne Hospitals NHS Foundation Trust, Clinical Lead
- **Dr Fateha Chowdhury:** London RTC, Imperial College Healthcare NHS Trust
- **Dr Michael Desborough:** Main role Oxford University Hospitals Trust, 2 PAs NHSBT
- **A/Prof Lise Estcourt:** NHSBT, Oxford shared post with NHSBT R+D
- **Dr Oliver Firth:** NHSBT
- **Dr Dora Foukaneli:** East of England RTC, Cambridge University Hospitals NHS Foundation Trust.
- **Dr Marina Karakantza:** Yorkshire and The Humber RTC, Joint post with Leeds Teaching Hospitals.
- **Dr Anne Kelly:** Main role Great Ormond Street Hospital, 2 PAs NHSBT
- **Dr Suzy Morton:** Joint post with University Hospitals Birmingham, NHS Foundation Trust, Clinical tutor
- **Prof Mike Murphy:** NHSBT.
- **Dr Helen New:** NHSBT
- **Dr Jayne Peters:** North West RTC, Joint post with Manchester University Hospitals NHS Foundation Trust.
- **Prof Simon Stanworth:** South-East RTC, Joint post with Oxford University Hospitals (OUH), and remit within the team for clinical research.
- **Dr Sara Trompeter:** Joint post with University College London Hospital specialising in paediatric and adult inherited red cell disorders.

Donor Clinical Team

The Donor Clinical Team has responsibility for clinical leadership for Blood donors assuring their safety is addressed through robust clinical governance processes (Blood Donation and Regional CARE (Clinical audit, risk, and effectiveness) groups), working closely with operational colleagues. Consultants manage SAS doctors as part of the Donor Medical Team. Operational advice is provided to Change Programmes and procurement projects run by operational teams. Clinical input is also provided into the JPAC Standing Advisory Committee on Care and Selection of Donors.

The AMD Donor Medicine and Plasma for Medicine is Dr Andi Fletcher, and the team is part of the Transfusion and Clinical Directorate. The other members of the donor medical team are

- Dr Shruthi Narayan (Manchester) – Consultant & MD SHOT
- Dr Angus Wells (Liverpool) – Consultant & Chair SAC CSD
- Dr Charlotte Washington (Bristol) – Consultant, Deputy CMO & Chair Research Subgroup
- Dr Lianwea Chia (Tooting) – Consultant
- Dr Chiara Vendramin (Colindale) – Locum Consultant
- Dr Suhail Asghar (Bristol) – Associate Specialist, Donor, TAS & BBMR
- Dr JB Muller (Manchester) – SAS
- Dr Liezl Gaum (Manchester) – SAS
- Dr Jill Clarkson (Newcastle) - SAS

Directorate of Pathology

Pathology:

Red Cell Immunohaematology, Histocompatibility and Immunogenetics (H&I) and Microbiology laboratories across England provide support for transfusion, solid organ and haemopoietic stem cell transplantation. The International Blood Group Reference Laboratory (IBGRL) undertakes complex red cell serology investigations and molecular genotyping of patients and fetuses. Foetal genotyping for blood groups is predominantly performed using free foetal DNA from maternal plasma.

The Pathology Team, Medical Staff:

The 7 Red Cell Immunohaematology (RCI), 6 Histocompatibility and Immunogenetics (H&I) and the International Blood Group Reference Laboratories are supported by a team of medically qualified Haematology Consultants. Wisdom Musabaiké, the head of RCI is developing a team of Consultant Clinical Scientists in Blood Transfusion, which is similar to the approach previously taken in H&I laboratories managed by Dr Katy Latham. Dr Nicole Thornton is the head of IBGRL. The medical consultants are led by the Clinical Director for Diagnostics Dr Fiona Regan. They are generally 50% funded by NHSBT and 50% by the host trust as is the case for this post. In the hospital, the consultant has clinical responsibility for clinical and laboratory transfusion services, and they provide an advisory and leadership role for these services.

The current Diagnostics Consultants Team, together with the RTC they support, and the Trust where they hold their joint appointment is outlined below.

Cath Booth: NHSBT Tooting and Barts Health NHS Trust.

Tom Latham: NHSBT Bristol and University Hospitals Bristol, NHS Foundation Trust

Akila Chandrasekar: NHSBT Liverpool and Tissue and Eye Service

Andrew Charlton: NHSBT Newcastle and Newcastle upon Tyne Hospitals NHS Foundation Trust.

Tracy Hui: NHSBT Colindale & Imperial College Healthcare NHS Trust

Kamala Gurung: NHSBT Tooting and Kings College Hospital NHS Foundation Trust.

Suzy Morton: NHSBT Birmingham and QE Birmingham

Directorate of Cellular Apheresis and Gene Therapy:

Cellular Therapies provided by NHSBT, includes the NHSBT stem cell laboratories in England and the Clinical Biotechnology Centre in Bristol.

Stem Cell Donation and Transplantation (SCDT) support is provided via the British Bone Marrow Registry and the NHS Cord Blood Bank which are based at NHSBT Filton in Bristol, which also has accredited facilities for stem cell processing. (See below).

Therapeutic Apheresis Services (TAS): This clinical function provides apheresis-based services, as well as counselling and assessment for stem cell

donors to Trusts and Bone Marrow Registries. These services are provided from eight units (Liverpool, London, Leeds, Sheffield, Oxford, Bristol, Birmingham, and London).

NHSBT has a long history of providing lifesaving and life-enhancing therapeutic apheresis services within the NHS. TAS provides over 1000 patients each year with access to a portfolio of therapies across a range of clinical specialties using technology that exchanges, removes, or collects certain components within the blood. The service is delivered from eight units that are based within NHS Trusts and which operate an outpatient model for non-acute patient procedures. Each unit operates as a regional service provider as part of a national infrastructure.

Research within NHS Blood and Transplant

NHSBT runs a national programme of research, in four major research centres (Oxford, Cambridge, Bristol and Colindale) with additional immunotherapy research in Birmingham, and tissues research and development in Filton, Bristol. At all sites, research is embedded into our partner University. In addition, there is infrastructure for clinical studies and randomised trials: a systematic reviews group (Oxford), a clinical studies unit (Cambridge/Oxford) and separate GMP production facilities for cellular products (multiple sites); therapeutic antibodies/vectors for gene therapy (Bristol); and tissues (Bristol). There is a senior lecturer post in Virology of Transplantation which is hosted in the University Department of Medicine in Cambridge. This is a research post which is intended to develop the study of viral adverse events and their management in haematology/oncology transplant patients.

NHSBT research is organised in themes, linking work carried out at different locations:

- Donor health
- Transfusion and transplantation virology
- Appropriate blood use
- Erythropoiesis
- Platelet biology and genomics
- Improving the number and quality of organs for transplantation
- Stem cells and immunotherapies
- Cellular and tissue engineering

These are linked to service areas through themed strategy groups comprising operational and R&D staff.

The Systematic Reviews Initiative (SRI) based in Oxford for the development of the evidence base for safe clinical transfusion practice and the effective use of blood components by carrying out systematic reviews of the transfusion medicine literature, assessing its strength and weaknesses, and identifying the need for new clinical trials. A further emphasis for the SRI is the dissemination of its output within NHSBT and, more widely, to the UK health services and international readers. The SRI section of the Joint Professional Advisory Committee for the UK Blood Transfusion Services (JPAC) website (www.transfusionguidelines.org.uk) was launched in March 2005 to improve access to citations for systematic

reviews. A database is being developed to present references for the randomised controlled trials (RCTs) identified by systematic reviews and hand-searching of transfusion medicine literature.

The Transfusion Evidence Library (TEL): The TEL was redeveloped and relaunched on 8 October 2013 with a commercial partner: Evidentia Publishing. It now contains over 700 systematic reviews, 3800 randomised control trials and 60 economic evaluations and is updated monthly. The TEL was endorsed by the Cochrane Collaboration, recognising it as a unique, evidence-based resource for the transfusion medicine community.

The NHSBT Clinical Trials Unit (CTU) for the conduct of:

- Epidemiological studies e.g., studies to determine what types of patients receive blood transfusions and the effect of transfusion on their long-term survival.
- Clinical outcome studies in specific clinical settings, usually with the aim of establishing baseline data to power future clinical trials e.g., the frequency of haemorrhage and use of platelets in thrombocytopenic neonates, and the relationship between coagulopathy, bleeding and FFP use in patients in adult and paediatric intensive care units.
- Randomised controlled trials to improve the evidence base for good transfusion practice e.g., the use of red cell transfusions prior to surgery in patients with sickle cell disease, the use of prophylactic platelet transfusions in patients with haematological malignancies and defining the thresholds for platelet transfusions in neonates.

Research into Donor Health

The main location for this research is Cambridge where a team headed by Prof Emanuele di Angelantonio leads a Blood and Transplant Research Unit into Donor Health. Prof Emanuele di Angelantonio is a NHSBT Principal Investigator into Donor Health and Epidemiology. Prof Dave Roberts is a NHSBT Principal Investigator and Deputy Director of the Blood and Transplant Research Unit into Donor Health and clinical research in donor health will also be undertaken at Oxford and other NHSBT Centres.

Any research undertaken should come within the scope of the NHSBT strategy for R&D.

5. Royal Devon University Healthcare (Royal Devon) NHS Foundation Trust

Our core services support a population of over 615,000 people and cover more than 2,000 square miles across Devon. This makes us one of the largest providers of integrated health care in the UK, and the biggest employer in Devon, with more than 15,000 staff.

We have two acute hospitals, 20 community locations, outpatient clinics and community teams who care for people within their own homes. We also provide primary care and a range of specialist services which extends our reach throughout the South West Peninsula as far as Cornwall and the Isles of Scilly.

As a newly formed Foundation Trust in April 2022, We are embracing change, innovation and technology in our ambitions to be a digitally-enabled, clinically-led teaching organisation. We are developing new ways of working and investing in new infrastructure, equipment and facilities. There has never been a better time to join us.

The Royal Devon is committed to supporting the personal and professional development of our consultant staff and in turn improving the care offered to our patients. This might include developing or introducing innovative care models and bringing these to rural patients, teaching the doctors of tomorrow or undertaking award-winning clinical research. Examples include our specialist nurses, who were recognised in the British Journal of Nursing Awards for their innovations during the COVID pandemic, our inflammatory bowel disease research team who were recognised with the national team award for their contribution to the NIHR portfolio, and our recent launch of a world-first national genetic testing service from our labs, which can rapidly test DNA samples of babies and children, so we can provide life-saving treatment.

You'll find more information about the role and the Trust below. Further information is also available on our website www.royaldevon.nhs.uk.

Highlights of the Role

- **Research and Innovation:** The haematology department at Royal Devon offers patients treatment in national studies of leukaemia, lymphoma, myeloma, and myeloproliferative disorders. Existing consultants have developed sub specialist expertise in myeloma/ lymphoma/ myeloproliferative disorders/ transfusions/ myeloid disorders. Both Exeter and NDDH have support from trials nurses and the Research and Development department to further develop research projects. The postholder will be expected to participate in recruitment of patients to national trials and develop their own research interests. We have a large programme of investigator-led and commercial research studies which have been internationally recognised for their programme of multi-site, award-winning research. Research interests are strongly encouraged and supported. We have a multimillion-pound research facility, dedicated research staff and collaborative links with researchers from across the University of Exeter. Funded time for the development of research proposals is available for interested consultants.

- **Training and Development:**

- Interest in and experience of teaching at undergraduate and postgraduate levels is desirable. The Royal Devon is part of the Peninsula Haematology training programme and support two registrars on rotation as well as Medical Students from the University of Exeter.
- The Royal Devon holds a contract from the Department of Health to host a Peninsula wide Research and Development Support Unit to facilitate NHS R&D in the implementation of Evidence Based Practice in the research community. This Peninsula Unit, which was formed from three highly successful units, involves networks throughout the Peninsula embracing both Primary Care Secondary Care and supports all professional groups
- Service development: The Royal Devon's core services support a population of more than 615,000 people across more than 2,000 square miles across Devon. The scale of operation brings opportunities to establish and develop innovative new services to better meet the needs of our patients such as harnessing technology to deliver remote patient consultations and disease monitoring.
- Teaching: The Royal Devon enjoys close ties with the University of Exeter Medical School. We offer funded time for teaching of medical students and junior doctors. We are planning a regular programme of evening educational meetings, which will bring the Eastern and Northern teams together providing opportunities for your CPD.
- Career progression: The size and structure of our team create opportunities for rapid progression to areas of increased responsibility.
- On-call rota at Royal Devon: The postholder will participate in the on-call rota currently at a 1 in 16 frequency with telephone advice being provided to North Devon District Hospital.
- Electronic patient record: The Royal Devon went live with the EPIC electronic patient record system across our Eastern services in 2020 and our Northern services in 2022. We are optimising the way we use the system, but we are already seeing huge benefits for our patients. EPIC is transforming the way we deliver care across our Trust, allowing teams to share the caseload across Devon and provide care to patients remotely.
- Location and relocation: We are fortunate to be based in the beautiful South West of England, with the cultural city of Exeter, the rolling moors of Exmoor and Dartmoor, and a multitude of stunning beaches on our doorsteps. We have low rates of crime and excellent education - schools and further education colleges are good or outstanding, and Exeter boasts a top Russell group university. We can offer you accommodation to support a visit and a relocation package should you choose to come to Devon.

About the RDUH NHS Foundation Trust and Service Structure

- The Royal Devon's Board of Directors is chaired by Dame Shan Morgan and is comprised of both executive and non-executive directors. The executive directors manage the day to day operational and financial performance of the Trust.
- These consist of the chief executive officer (Sam Higginson), deputy chief executive officer (Chris Tidman), chief medical officer (Professor Adrian Harris), chief nursing officer (Carolyn Mills), chief operating officer (John Palmer), chief finance officer (Angela Hibbard), and chief people officer (Hannah Foster).
- Our Haematology services are based at the Royal Devon and Exeter Hospital (Wonford) (RD&E) and North Devon District Hospital (NDDH), and sit within the Clinical Specialist Services Care Group.
- The Clinical Director for Haematology and Oncology is Kate Scatchard and the Deputy Medical Director is Ms Cheryl Baldwick. All permanent medical staff are members of the Medical Staff Committee which has an elected Chairperson who represents the group at the Trust Management Committee.

The Department of Haematology

- The Clinical Haematology service at the Royal Devon and Exeter Hospital (RDE) and North Devon District Hospital (NDDH) is a joint service with a catchment population of over 615,000 and provides a patient-focussed high-quality service with excellent purpose-built facilities supported by the Exeter Leukaemia Fund charity. The RDE site delivers Level 3 care including autologous stem cell transplantation. Inpatients benefit from en-suite rooms in a 13-16 bedded inpatient unit. The department diagnoses 350 new haematological malignancies per annum and provides 450 inpatient admissions, 6300-day cases and outpatient episodes on the Exeter site. Nine outpatient clinics per week are held at RDE. Disease specific clinics are offered for myeloproliferative disorders, coagulation disorders and allogeneic transplant follow-up.

Clinical and Laboratory aspects:

- The clinical service is located within a BCSH level 3a purpose-built Haematology Unit, opened in 2002 (2.4 million pounds joint-funded by the Trust and Exeter Leukaemia Fund). We currently provide fully integrated inpatient, outpatient and day-care facilities nursed by a dedicated team of specialist nursing staff. The inpatient accommodation comprises 10 HEPA-filtered en-suite rooms and one 3 bedded ward, with 800 admissions per annum on average. There are 8-10 outpatient clinics per week and there are 16000 outpatient episodes per year. The day unit accommodates 7500 patients per year for chemotherapy, blood transfusion and other procedures.
- **Laboratory Haematology** is within the specialist services Division within the diagnostic services cluster. The laboratory serves a population in excess of 500,000. The average daily number of blood counts currently is 1100,

presently using Sysmex technology. Approximately 600 coagulation specimens are processed daily; the coagulometers comprise two IL Futuras. Most of the automated tests are carried out in a Fast Throughput Section. Flow cytometry and genetic services are performed at the internationally recognised Bristol haematology-oncology diagnostic service; aspirate, trephines and production of a combined report are all produced locally. The laboratory is computerised; all wards are online and GP links continue to be developed. In Blood Transfusion, 20,000 units of blood are matched annually, together with 27,000 group and screen samples. An active Hospital Transfusion Committee has existed for many years and the trust has a leading vein to vein electronic transfusions system and a history of academic publications in this area.

- A **Molecular Genetics laboratory** is on site, which forms part of the SW Regional Genetics Hub along with North Bristol NHS Trust, and has close links with Immunology and Haematology; haematological malignancy genetics work is mainly located on the North Bristol site and offers a full range of diagnostic tests in the fields of leukaemia, lymphoma and thrombosis.
- About 700 **bone marrows** are performed annually and there is close co-operation between Haematology, Histopathology and Molecular Genetics in the diagnostic workup of marrows and lymph nodes in leukaemia and lymphoma, reflecting increased complexity in this area. The laboratory provides a full marrow and stem cell cryopreservation service. The Stem Cell laboratory opened in 2003 is fully MHRA accredited and obtained full JACIE accreditation in 2008/9.
- In addition to the experienced and dedicated team of specialist nursing staff headed by an experienced Clinical Nurse Manager, there are 8 Consultants, 2 Specialist Registrars, 1 Associate Specialist, 3 Specialty/Staff Grade doctors, 1.5 WTE CT1/2 (SHO equivalent) doctors, 1 Transplant Coordinator, a team of Advanced Nurse Practitioners and Clinical Nurse Specialists as well as a Physician Associate on training rotation. We are also supported by an excellent team of clerical, secretarial, laboratory and domestic staff.
- The consultants have a regular commitment at North Devon District Hospital in Barnstaple (27 days per consultant), which provides a BCSH level 1 service to the local population. Therefore, a proportion of patients requiring BCSH level 2 care and above are transferred to and from Barnstaple on a regular basis.
- On the NDH site there are 5 outpatient clinics per week, where visiting consultants attend to provide patient continuity for outpatients or day cases. The haematology service at North Devon is level 1 and is supported by two clinical nurse specialists, 2 specialty grades and an F2 doctor.
- A weekly joint-multidisciplinary team meeting is held across RD&E and NDH trusts over a videoconferencing link. Patients requiring allografts are referred to Plymouth, and return to Exeter for their post-transplant care.
- **Consultant Medical Staff:**

Dr David Veale - Lead clinician for North Devon Service Departmental Medical School Lead. General and malignant haematology. Stem Cell Clinical Programme Director HTA Designated Individual

Dr Loretta Ngu - Haemostasis and thrombosis, Haemato-oncology

Dr Jason Coppel - Joint Lead Clinician for Clinical Haematology, Haemophilia Centre Director, Myeloproliferative disorders, Haemostasis and thrombosis

Dr Tony Todd - Lymphoproliferative disorders, Chronic lymphocytic leukaemia

Dr Paul Kerr - Joint Lead Clinician for Clinical Haematology, Acute leukaemia and allografts, Blood transfusion, Medical Information Office for Cancer Services

Dr Deyna Cardosa - Chemotherapy Governance Lead, Haemoglobinopathy

Dr Tom Coats - Haematology Research Lead, Acute myeloid leukaemia & myelodysplasia, Digital Healthcare, Regional Genetics Lead

Dr Mark Crowther - Haemostasis and thrombosis, General Haematology, MDT lead

Dr Sudhakar Kakarlamudi - Associate Specialist Doctor in Haematology

- **Resident Doctors:** We are continuing to support the expansion of haematology training across the Peninsula network and the consultants are expected to be involved in the clinical and educational supervision of our trainees. The senior staff are currently supported by the following resident doctors:

Dr Tom Scrivin, Dr Rachel Walker, Dr Sophie Johns, Dr Sarit Smith, Dr Mahseeman Majid, 2 Specialist Trainee Registrars from Peninsula Deanery

- **Nursing staff:**

The Lead Nurse for Haematology and Oncology is Ms Tina Grose. There are a number of clinical nurse specialists, advanced nurse practitioners and research nurses across the haematology department.

- **Medical and clinical oncology:** in addition to the experienced and dedicated team of specialist nursing staff there are 11 Consultant Clinical Oncologists and 7 Consultant Medical Oncologists, 1 Associate Specialist, 2 Consultant Radiographers, 1 Consultant Nurse, 6 Specialist Registrars, 2 Specialty Grade Doctors.

- **Palliative medicine:** the Enhanced Supportive Care service is led by Dr Niranjali Vijeratnam and provides early palliative care to oncology patients undergoing treatment within the Trust.
The Exeter and District Hospice is situated in the Grounds of the Royal Devon & Exeter Hospital supporting a network of Community Palliative Care Nurse Specialists. The Consultants, Dr Jenny Hayes, Dr Cate O'Neill and Dr Rebecca Baines contribute to the acute oncology team and are available to review inpatients in the acute trust. They provide out of hours on call cover. There is a Specialist Registrar in Palliative Medicine rotating with Plymouth.
- **Diagnostic Support:** a full range of diagnostic services including MRI and Spiral CT Scanning Nuclear Medicine, Ultrasound and Specialist Pathology Services including a tumour marker service are available. Molecular genetic testing (excluding FISH) is available on site. The Trust is the lead AHSN site for the 100,000 Genome project. A PET-CT scanner has been commissioned at the medical school which will be available for research projects and potentially for PET-CT radiotherapy planning in the future.
- **Pharmacy:** a full aseptic compounding facility is available with dedicated Oncology/ Haematological Pharmacists who are responsible for day to day cytotoxic chemotherapy services and some Clinical Research Trials.
- **Departmental Meetings:** there are 3 Histopathologists with a specialist interest in lymphoreticular pathology. These 3 participate in regular MDT meetings with the Haematologists. There are a team of Consultant Microbiologists, one Medical Biochemist and a top-level Clinical Scientist in Clinical Chemistry, an immunologist who visits Exeter on a part time basis from Derriford and a Clinical Scientist Head of Molecular Genetics.
- **Administration and Secretarial Support:** you will undertake administrative work associated with your clinical and other professional work. Adequate time and facilities for clinical administration, including appropriate office space, secretarial support and access to a personal computer, software and internet access, will be available.
- **Supporting Professional Activities:** you will participate in a variety of professional activities (SPA) to support your personal clinical practice and the overall work of the department and the Royal Devon. All consultants receive 1.5 SPA sessions for generic non-clinical work. This includes, but is not limited to:

 - Appraisals, job planning and revalidation
 - Personal and professional development, including service development
 - Professional administration, including related correspondence
 - Clinical supervision of junior staff and other educational activities
 - Governance and quality improvement activities
 - Departmental, divisional and other clinical or managerial meetings

Further details are published in the job planning policy.
- **Continuing Professional Development:** the Royal Devon supports the requirements for continuing professional development (CPD) as laid down by

the Royal College of Physicians and is committed to providing time and financial support for these activities.

- **Revalidation:** the Royal Devon has the required arrangements in place, as laid down by the Royal College of Pathologists, to ensure that all doctors have an annual appraisal with a trained appraiser, and supports doctors going through the revalidation process. For this post however, revalidation will be overseen by NHSBT.
- **Research:** the department offers patients treatment in national studies of leukaemia, lymphoma, myeloma, and myeloproliferative disorders. Dr Todd has a particular interest in CLL and Dr Coppell in myeloproliferative neoplasms. Dr Kerr is a member of the BSH guidelines taskforce and on the faculty of the University of Exeter Medical School leading on clinical and communication skills, and is currently the Peninsula network lead for haemato-oncology trials. Dr Coats has a special interest in Digital Healthcare and AML, currently working with the NCRI on improving treatment algorithms. Both Exeter and NDDH have support from trials nurses and the research and development department to further develop research projects.

The University of Exeter Medical School has an excellent research reputation from basic biomedical research through to patient-centred research. The group is supported by the University of Exeter and NIHR biomedical research centre and currently provides research training to three PhD students and two visiting fellows.

The Research, Innovation, Learning and Development (RILD) building on the RD&E Wonford site is a £27.5m development which consists of the Wellcome Wolfson Centre for Medical Research, the National Institute for Health Research (NIHR), Exeter Clinical Research Facility and a new Post Graduate Education Centre. The RILD is now home to a number of the Medical School's laboratory-based research teams, comprising both clinical research areas and class two and three medical research laboratories, complete with offices, meeting rooms and write-up areas.

Active assistance in the planning and design of research projects is available from the Research and Development Support Unit based on the RD&E Wonford hospital site. The Trust has an active academic strategy to facilitate research, development and teaching.

Candidates who wish to pursue a research interest alongside their clinical work will be strongly encouraged by the department and are eligible for support from the University of Exeter Medical School.

- **University of Exeter Medical School:** the University of Exeter is high-ranking in both UK and global standings and is a member of the Russell Group of leading research-based institutions. It has ambitious plans for the future and has invested heavily in its facilities in recent years.

The Medical School's cutting-edge research is driven by important clinical questions. It focuses on translational and applied research in areas of greatest

health burden and greatest opportunity for scientific advance, principally: diabetes, cardiovascular risk and ageing; neurological disorders and mental health; environment and human health; and health services research. It spans basic through clinical science to clinical trials and health policy.

UEMS delivers two highly-regarded and innovative undergraduate degrees: the BSc in Medical Sciences and Bachelor of Medicine, Bachelor of Surgery (BMBS). In addition, the Medical School offers a range of postgraduate programmes and courses. The curriculum reflects today's evolving models of care and patient experience in acute, primary and community care settings.

Building on the excellent educational reputation of the Peninsula College of Medicine and Dentistry and using problem-based learning in small groups, the BMBS programme reflects the belief that doctors need to adopt a socially accountable approach to their work and to understand the human and societal impact of disease as well as the community-wide context of contemporary healthcare provision.

UEMS graduates will be both capable and confident, whether they are clinicians, managers, educators or researchers and will be committed to life-long scholarship. Years one and two of the BMBS programme are based at the St Luke's Campus in Exeter and lay the scientific foundations for the future years of the course. There is clinical contact from year one and students begin acquisition of a range of transferable skills, learning science within a clinical context.

UEMS students spend years three and four of their programme at the Royal Devon and Exeter (Wonford) Hospital and North Devon District Hospital, as well as at the Royal Cornwall Hospital in Truro and in their surrounding general practices and community health environments.

The consultants in the Haematology Department are all involved in teaching students. The postholder is encouraged to develop interests in education and training and there are many opportunities to develop these interests both locally and more widely.

6. JOB PLAN TIMETABLE (APPENDIX 1)

The postholder will typically undertake 8.5 DCCs (Direct Clinical Care sessions) and 1.75 SPAs (Supported Programmed Activities). In common with all posts within the Royal Devon Trust and NHSBT the Consultants will be expected to agree a job plan with the Clinical Lead (NHSBT), Clinical Service Lead for Haematology Royal Devon and the Medical Director of both Trusts, which will be reviewed annually.

7. ON CALL COMMITMENT

The post-holder will be included on the NHSBT on call rota for one of the 3 regional patient-facing rotas (North, Midlands/South-West or London/South-East) both in and out-of-hours. These are medium frequency, 1:4-1:6, category A with a 5% supplement to the salary as outlined below although this may be subject to modification depending on needs of the service, and agreement at job planning. Other on-call duties are within-hours unless otherwise agreed.

Royal Devon on call will consist of 3 full weeks per annum (approximately 1:16, category A with 3% supplement). There are three full ward rounds at RDE during each on-call week (including Sunday), laboratory support, rapid referral review and telephone advice out of hours (for NDH and RDE).

8. PERSON SPECIFICATION (SEE APPENDIX 2)

9. FURTHER INFORMATION

Further details may be obtained from:

Dr Andrew Charlton Clinical Lead for Patient Blood Management and Components NHSBT telephone No: 07471148121 / Andrew.charlton@nhsbt.nhs.uk

Dr Jason Coppell and Dr Paul Kerr (Joint Clinical Leads for Haematology, Royal Devon Trust), telephone No. 01392 402468

10. APPOINTMENT PROCEDURE

The appointment will be made by NHSBT/ Royal Devon on the recommendation of an Advisory Appointment Committee constituted in accordance with the terms of the National Health Service (Appointment of Consultant) Regulations Statutory Instrument 1996 No. 701.

Visiting Arrangements

Applicants or prospective applicants are encouraged to visit NHSBT and Royal Devon to meet prospective colleagues. Arrangements for visiting may be made through Dr Coppell/Dr Charlton

Travel and Subsistence Allowance

Travel and subsistence expenses will be reimbursed by NHSBT for preliminary visits, in addition to interview expenses, only to those candidates selected for interview. Reimbursement is restricted to two preliminary visits, whether these are made before or after the constitution of the short-list is known. In the case of candidates travelling from abroad, travelling expenses are normally payable only at the point of entry to the UK.

Equal Opportunities

Both organisations are committed to the development of positive policies and practices to promote equal opportunity and will take all possible steps towards eliminating discrimination and promoting good employee relations and equality of opportunities generally.

Privacy & Dignity & Respect and Equality of Opportunity

Both organisations are committed to ensuring that all current and potential staff, patients and visitors are treated with dignity, fairness and respect regardless of gender, race, disability, sexual orientation, age, marital or civil partnership status, religion or belief or employment status. Staff will be supported to challenge discriminatory behaviour.

Major Incident or Civil Unrest

In the event of a major incident or civil unrest all employees will be expected to report for duty on notification. All employees are also expected to play an active part in training for and preparation for a major incident or civil unrest.

APPENDIX 1: JOB PLANS

This is an indicative guide to the proportion of time allocated to each task. It is based on a working week of 10.125 PAs in accordance with the Terms and Conditions – Consultants (England) 2003. Some flexibility in exactly how the PAs are worked is permissible. The appointee's job plan will be reviewed in detail with them once they have been post for a few months.

NHSBT ANNUALISED ACTIVITY	SITE	HOURS	PAs
On Call – Regional Daytime and Out of Hours	Flexible	4	1
Patient Blood Management Activities	Flexible	8.5	2.125
Red Cell Immunohaematology – Lab Support	Filton or Other	2	0.5
Red Cell Immunohaematology – On Call Daytime Support	National	2	0.5
SPA	Flexible	4	1
TOTAL			5.125

ROYAL DEVON ANNUALISED ACTIVITY	SITE	HOURS	PAs
1 st On Call	RD&E	1.7	0.425
Advice & Guidance	Flexible	0.66	0.165
Outpatient Clinic	RD&E	4	1.0
Clinic-related admin	Flexible	4	1.0
Bone marrow reporting	RD&E	2	0.5
MDT meetings	Flexible	2.7	0.675
SPA	Flexible	3	0.75
University of Exeter Teaching	Medical School	0.44	0.11
Urgent patient review	RD&E	1	0.25
Transfusion laboratory time	RD&E	1	0.25
TOTAL		20.5	5.125

Activity Summary

ACTIVITY CLASSIFICATION	PA's	Hours
DIRECT CLINICAL CARE	8.39	33.56
SUPPORTING PROFESSIONAL ACTIVITIES	Teaching:	0.11
	Research / Other:	1.75
	SUB-TOTAL:	1.86
TOTALS	10.25	41

On-Call Supplements

	NHSBT	Royal Devon
Agreed On-Call Rota	frequency 1:4-1:6, medium	frequency 1:16
Agreed Category	A	A
On-Call Supplement	5%	3%

APPENDIX 2: PERSON SPECIFICATION

NHSBT's Core Purpose is to demonstrate our values every step of the way, to save and improve more lives than ever. Our Core **Values** are: **Caring** about our donors, their families, our staff and the patients we serve; Being **Expert** in meeting the needs of our external and internal customers and partners; Providing **Quality** products, services and experiences for donors, staff and patients.

The **Royal Devon** is one of the largest healthcare Trusts in the country with ambitions to be a clinically-led, digitally-enabled teaching organisation. We foster **creativity, innovation** and a **personal approach to high-quality patient care**.

REQUIREMENTS	ESSENTIAL	DESIRABLE
Qualifications	<ul style="list-style-type: none"> • Full and specialist registration and a licence to practise with the General Medical Council (GMC) (or eligible for registration within six months of interview) • Holder of Certificate of Completion of Training (CCT) in Haematology, or within six months of award of CCT or equivalent by date of interview. • Applicants that are non-UK trained, will be required to show evidence of equivalence to the UK CCT • FRCPPath or equivalent. • MRCP or equivalent. 	<ul style="list-style-type: none"> • Postgraduate thesis e.g. MD, PhD, MSc • Postgraduate certificate of medical education or significant experience in medical education GCP training
Knowledge / Skills	<ul style="list-style-type: none"> • Ability to teach clinical skills and laboratory techniques • Experience of malignant haematology • Ability to report bone marrow aspirates • Ability to apply research outcomes to clinical problems • Ability to advise on efficient and smooth running of specialist clinical and laboratory service • Ability to offer expert clinical opinion on range of problems both emergency and elective within specialty • Ability to take full and independent responsibility for clinical care of patients 	<ul style="list-style-type: none"> • Ability to supervise postgraduate research • Ability to report bone marrow trephines • Ability to perform lumbar punctures • Knowledge of haemophilia • Knowledge of flow cytometry • Knowledge of molecular techniques • Knowledge of Better Blood transfusion 111 and NPSA-14 • Knowledge of national cancer standards

	<ul style="list-style-type: none"> • Ability to manage and lead specialist unit and working parties as appropriate 	
Clinical Experience	<ul style="list-style-type: none"> • Demonstrates clear interest and commitment to transfusion medicine. • Recent experience of hospital based clinical and laboratory transfusion medicine. • Ability to offer expert opinion on transfusion problems. • Clinical audit in the field of transfusion medicine. 	<ul style="list-style-type: none"> • Familiar with e-prescribing and principles of chemotherapy prescribing and safety issues • Expertise in subspecialty relevant to local needs
Management and Administrative Experience	<ul style="list-style-type: none"> • Experience of managing and leading clinical teams. 	<ul style="list-style-type: none"> • Experience of budget management • Proven experience of change management • Management course undertaken
Teaching Experience	<ul style="list-style-type: none"> • Ability to teach all grades of clinical staff, including those in training. 	<ul style="list-style-type: none"> • Experience of teaching basic clinical skills to undergraduates • Experience of supervising medical trainees • Ability to supervise the research of others
Research Experience	<ul style="list-style-type: none"> • Publications/ presentations in national/ international meetings in the field of transfusion medicine • Experience of audit • Ability to apply research findings to clinical practice 	<ul style="list-style-type: none"> • Clinical trial and/or research experience and ability to generate research funding
Personal Attributes	<ul style="list-style-type: none"> • Able to work with/influence senior colleagues across a range of specialties. • Effective interpersonal, motivational and influencing skills • Ability to communicate effectively with colleagues, patients and their relatives both verbally and in writing • Able to work against a background of change and 	<ul style="list-style-type: none"> • Proven leadership experience

	<p>uncertainty</p> <ul style="list-style-type: none"> • Able to demonstrate personal credibility • Self-motivated, pro-active and innovative • Enquiring, critical approach to work • Caring attitude to patients • Commitment to team-working, and respect and consideration for the skills of others • Commitment to Continuing Medical Education and the requirements of Clinical Governance and Audit • Willingness to undertake additional professional responsibilities at local, regional or national levels • Ability to undertake travel requirements of the post • Ability to participate in on-call rota 	
Other	<ul style="list-style-type: none"> • Mobility: able to efficiently undertake the travel requirements of the post. 	

Appendix 3: NHSBT Clinical Directorate Medical Management Structure



