

Specialist Doctor in Palliative Medicine Garden House Hospice Care

Job description and person specification



Contents

- 1. Summary of job description
- 2. Why join Garden House Hospice Care?
- 3. Why come to North Hertfordshire?
- 4. What is Garden House Hospice Care?
- 5. Garden House Hospice Care Values
- 6. Garden House Hospice Care Mission Statement
- 7. Summary of role
- 8. Garden House Hospice Care teams
- 9. Duties of the role
- 10. Sample weekly timetable
- 11. Person specification
- 12. Contact information

Specialist Doctor in Palliative Medicine; JD and Person Specification; Nov 2024



Job Description for Specialist Doctor in Palliative Medicine

Summary of job description:

Type of post:	Specialist Doctor in Palliative Medicine
Nature of appointment:	Less than full time to full time
Number of Programmed Activities:	Up to 10
Responsible to:	Medical Director of Garden House Hospice Care
Employer:	Garden House Hospice Care
Main place of employment:	Garden House Hospice Care, Letchworth

This post arises secondary to a vacancy. The successful applicant will work alongside the Hospice Medical Director, leading the Hospice Medical Team to provide high excellent palliative medicine to adult patients with any life limiting diagnosis living in North Hertfordshire. The successful applicant will be involved in Hospice leadership from a medical perspective and quality improvement and clinical governance. The successful applicant will be involved in providing medical education, including for medical trainees on placement at the Hospice.

Why join Garden House Hospice Care?

The successful applicant will join Garden House Hospice Care (GHHC) at a very exciting time. In recent years the Hospice Trustee Board has been joined by a range of high-quality Trustees, and in January 2023, Lisa Hunt joined the Hospice as our new CEO. Since she has joined us, Lisa, leading the Hospice Executive Team, including the Medical Director, has taken the Hospice in a very positive direction.

As part of the care provided to patients with any life limiting diagnosis, in 2024 GHHC started a new, innovative service for patients with moderate to severe frailty. This service has been featured repeatedly on the BBC news and radio and has received multiple awards, including the Palliative Care Service of the Year Award. The Hospice has been allocated 5 years of funding from NHS England for the frailty service, in recognition of the patient benefit, including reduction in admissions to the Lister Hospital.

Why come to North Hertfordshire?

The Hospice is situated in the beautiful and historic Letchworth Garden City which combines a surprisingly peaceful, leafy setting and a wide range of amenities, including



independent shops, restaurants and cinema. As well as a range of quality state schools, Letchworth boasts two excellent private schools. A 10-minute drive away is the bustling market town of Hitchin, with yet more restaurants, independent shops, historic buildings and a number of primary and secondary schools graded by Ofsted as Outstanding.

There is a huge range of quality housing in urban, semi-rural or rural areas within easy travelling distance of the Hospice. Transport links to the area are excellent, with fast road and rail links to Cambridge, London and surrounding areas. Luton Airport is the nearest of a number of airports within easy reach.

The area of North Hertfordshire contains many areas of outstanding natural beauty, with opportunities for walking, horse riding, water sports and cycling, while the towns of Letchworth, Hitchin, Baldock, Stevenage and Royston provide a plethora of other recreational opportunities.

What is Garden House Hospice Care?

Garden House Hospice Care is the Hospice for North Hertfordshire, Stevenage, Royston and surrounding villages, covering 530,000 people within the catchment area.

The main Hospice building is in Letchworth Garden City, with eleven outreach hubs in Hitchin, Stevenage and Royston.

Clinical provision at Garden House Hospice Care includes:

- 12 bedded Inpatient Unit accepting patients for symptom control, reablement and last days of life care
- Medical outpatient clinics and domiciliary assessments
- Rehabilitation and Wellbeing Team
- 24/7 advice line for patients, families and professionals
- Hospice at Home and Continuing Health Care team
- Family Support Services
- Frailty in-reach team to the Lister Hospital
- Frailty CNS team
- Admiral Nurse
- Medical support to Herts Community Team Specialist Palliative Care CNS team.

In addition to our clinical services, we have a large Community Engagement team who run a Compassionate Neighbours befriending service, eleven (and increasing) volunteer led Community Hubs across our catchment area and a schools, colleges and youth outreach project.



Garden House Hospice Care has a wide range of clinical education provision, through which we work collaboratively with Isabel Hospice in Welwyn as part of the Herts Hospices Education Consortium.

Garden House Hospice Care values:

Started by the Community - Serving the Community - Sustained by the Community

- Place the patient at the heart
- Take inspiration from our community
- Deliver a high quality service
- Continually learn and improve
- Respect everyone
- One team with a shared vision

Garden House Hospice Care Mission Statement:

Embracing, empowering and enriching lives every day. Rebalancing and refocusing our services to enhance quality of life based on the needs of our communities.

Summary of the role:

The successful applicant will be a part of the Hospice Medical and Pharmacy Team, which is led by the Medical Director.

The Hospice medical team provides specialist palliative medical care to patients on the Hospice Inpatient unit, in outpatients and during domiciliary visits. The Hospice medical team also provided medical advice and oversight to the Herts Community Trust specialist palliative care CNS team.

The successful applicant will be invited to join the Hospice first on call rota, providing non resident on call cover.

Fitting with the Hospice's strong ethos of supporting training and education, the Hospice has a training slot for a Specialty Trainee in Palliative Medicine and GP Trainees, with the successful applicant being one of the Hospice Clinical Supervisors.

The successful applicant will be provided with shared office space, a computer, internet access and secretarial support.

Garden House Hospice Care acknowledges the importance of mentoring, and the successful applicant will be supported to have a mentor if desired.

An applicant who is unable to undertake the duties of a whole-time post will receive equal consideration. If such an applicant is appointed, the job content will be modified appropriately to support less than full time working.



The successful applicant will be employed by Garden House Hospice Care, who is an equal opportunities employer.

Basic salary on commencement will be set at a threshold to reflect previous experience and will range from £96,990 to £107,154 for a full time appointment.

On call is paid at a rate of half a session per night on call to be available via telephone, increasing to one session per three hours on site. On call is paid at a rate of three sessions per 24 hours for weekends.

Garden House Hospice Teams

Garden House Hospice Care Medical Team

- Dr Sarah Bell, 0.9 WTE, Medical Director
- Dr Lucy Thomas, 0.58 WTE, Specialty Doctor
- Dr Katy Fischbacher, 0.775 WTE, clinical fellow
- Sara Skandarajah, 0.4 WTE, Band 8 Specialist Pharmacist
- Speciality Trainee in Palliative Medicine, 1 WTE, currently vacant, post filled by Dr Charlotte Ho, senior clinical fellow
- Three GP trainees, 2.4 WTE in total



The Hospice has a Medical Bank Team who predominantly support with staffing the first on call out of hours rota. The Medical Bank a number of previous GP trainees keen to maintain links with the Hospice, local GPs with a special interest in palliative medicine and a palliative medicine consultant.

Support provided

The successful applicant will be under the line management of the Medical Director, who will be a key provider of support. They will also receive support from the members of the Hospice medical and pharmacy team as listed above.

The successful applicant will also receive MDT support from:

- Liz Kennedy, the Director of Nursing and Quality
- Victoria Oluwole, Interim Deputy Director of Nursing
- Steve Collins, Director of Operations
- Jay Hay, Inpatient Unit Ward Manager
- Lucy Heaps, Rehab and Wellbeing Service Manager
- Cathy Hunt, Hospice at Home Team Lead
- Liz Pybuss, Family Support Services Manager



Garden House Hospice Care Trustees

The Chair of the Trustees, Steve Mellish, leads the Board of Trustees. The Clinical Governance Committee, the clinical subcommittee of the Trustee Board, is chaired by Dr Simon Chatfield.

Duties of the role

The successful applicant will under the management of the Medical Director in leading the Hospice Medical Team to provide high quality care to adult patients with any life limiting diagnosis. Where necessary, the successful applicant will provide cross cover for duties of the Medical Director, where these relate to provision of patient care. The successful applicant will fully embrace the Hospice multidisciplinary team approach.

Inpatient Unit

The successful applicant will provide specialist palliative medical oversight for the Hospice Inpatient Unit, comprising 12 beds. The unit is open 24/7 with patients admitted for symptom control, last days of life care or reablement, especially for patients admitted as part of the Frailty Service. There is a combination of ensuite single rooms and bays, all with garden views.



The unit has six ensuite individual rooms and two three bedded bays. There is a large and wellappointed lounge area with access to a modern balcony and the extensive gardens for both patients and families. A Quiet Room with a specially commissioned stained glass window overlooking a fountain is maintained by the Hospice Chaplains. Further development of the unit is currently ongoing, which will provide modern, flexible accommodation for families.

On the Inpatient Unit, the successful applicant would be expected to see up to 6 new admissions and 6 existing admissions each week.

The successful applicant will be a key member of the weekly Inpatient Unit MDT, which is chaired by the Hospice Medical Director. During this well attended meeting, all inpatients will be discussed and their management plans agreed.

The successful applicant will work with the Hospice MD, with the support of the Quality and Governance Team, to ensure consistently high quality, safe and effective palliative care is provided and that patients have excellent experience and outcomes when under Hospice care.



The first on call rota is organised by a member of the Hospice admin team. The successful applicant will be involved in providing clinical oversight for the rota. This will include sharing responsibility with the Medical Director in signing off medical team leave, to ensure safe levels of staffing at all times.

Community work

The Hospice is commissioned to provide medical support to the Hertfordshire Community Trust Specialist Palliative Care CNS team. The team is comprised of three band 6 and three band 7 nurses, supported by two band 8 managers in a job share role.

The work supporting the CNS team will include a weekly 1.5 hour case review meeting where approximately between 6 and 12 complex new and follow up cases are discussed. The successful applicant will attend this meeting when the Hospice MD is unable to do so. The successful applicant will also work with the Hospice MD and Medical Team to provide telephone advice to the CNS team, usually giving telephone advice on up to 2 cases per day, taking approximately 15 minutes on each occasion.

The successful applicant will undertake domiciliary assessments if it is clinically indicated. Usually these will be new patients as follow up visits can be provided by the community SPC CNS team, under medical guidance. The expectation will be for an absolute maximum of two new patients to be seen in one PA, allowing time for travel and supporting activities, such as prescribing, documentation and liaison with the CNS team and GPs.

Together with the Medical Director and non-consultant members of the medical team, the successful applicant will be involved in providing specialist palliative medical telephone advice to other healthcare professionals, such as local GPs or community nurses. This may be through direct phone calls to the Hospice Medical Team or through the Hospice Palliative Advice Line. It is expected that the successful applicant will give medical telephone advice once per week, taking 15 minutes each time.

The successful applicant will undertake outpatient clinics to see new and follow up patients, either for symptom control or for where follow up is required for patients discharged from the Inpatient Unit. In a 4 hour clinic, the expectation would be to see a maximum of one new patient and two follow ups or two new patients.

On call

On call commitment is two weeknights and one Friday night, plus one weekend (Saturday and Sunday) non residential on call in every five weeks. The successful applicant will also be expected to cover two public (bank) holidays per year, for which TOIL will be given at a rate of one day per public holiday covered.

On call involves review of existing Inpatients or admission of new patients. The weekend on call doctor usually spends approximate 4 - 5 hours on the unit each day. For weeknights and Friday nights, attendance on the unit in person to review or admit patients will on average be required every few months at most.



Should it be necessary for the successful applicant to undertake extra work, including out of hours work (or in hours work for a less than full time applicant), time off in lieu will be arranged.

There are no acute on-take duties associated with this role.

Deputy Caldicott Guardian role

The successful applicant will be supported with funded study leave to complete training to become the Deputy Hospice Caldicott Guardian, supporting the Medical Director as the Hospice Caldicott Guardian. As deputy, the workload for this role is very light and comes into play only for urgent issues occurring during periods of the Medical Director's leave.

Training and education role

The successful applicant will act as a Clinical Supervisor to a maximum of two GP Trainees and the Specialist Trainee on placement. The successful applicant will be supported to train as a Clinical Supervisor if needed. Clinical Supervisor support to GP trainees is also provided by the Hospice Medical Director and Specialty Doctor and the Hospice Medical Director provides Educational Supervisor support to the Specialist Trainee.

The successful applicant will lead organisation of the four monthly GP Trainees placements and trainee induction. They will be supported in this role by the Hospice Speciality Doctor and will have significant administration support in addition.

The Hospice is a ratified training Hospice for University of Cambridge School of Clinical Medicine and regularly hosts Cambridge medical students, as well as other students wishing to learn about palliative medicine and Hospice care. Working with the Hospice Specialty Doctor, the successful applicant will lead on the local organisation of these placements on the Inpatient Unit, with administration support.

The successful applicant will be enabled and encouraged to provide multidisciplinary teaching in palliative medicine. Opportunities for this include the Hospice Medicines Management course for Hospice nurses, teaching on Hospice palliative medicine courses, acting as a facilitator for Medical Student teaching through the Cambridge School of Clinical Medicine and on request by local healthcare organisations. Time will always be allocated for the successful applicant to prepare for and deliver such education.

Research at Garden House Hospice Care

Garden House Hospice Care values and promotes the crucial importance of research in palliative medicine. Currently the Hospice actively engages with as many external research projects as possible, such that over the last year, the Hospice has collaborated with nine externally initiated research projects.



If desired, the successful applicant will be supported by the Medical Director to engage in research, with appropriate SPA time made available to dedicate to such work as required.

Clinical governance

The successful applicant will be supported to raise incidents as required and work with the Hospice MD and other medical team members to investigate incidents where relevant. They will attend the weekly Incident and Safety meeting and be an active participant in quality improvement work from that meeting.

The successful applicant will participate in audit around clinical practice, including supervising junior medical team members to carry out audits and generate and quality improvement plans from audit outcomes.

The successful applicant work with the Hospice MD and medical team to develop new policies, procedures and guidelines where necessary and to review existing policies, procedures and guidelines relevant to the medical team, as per the Hospice policy review schedule. In all their work, the successful applicant will work within Hospice policies and procedures

Managerial and strategic work

The successful applicant will work with the Medical Director in leadership of the Hospice Medical Team and trainees on placement at the Hospice.

The successful applicant will work with the Medical Director to develop the medical aspects of the Hospice annual plan.

Continual professional development, appraisal and revalidation

The successful applicant will be encouraged and supported through study leave and funding to undertake appropriate continual professional development. As well as completing Hospice mandatory training, they will have opportunities for CPD through a wide range of internal Hospice training as well as being supported to attend external training, to ensure they complete appropriate amounts of relevant CPD each year.

The successful applicant will be fully supported to comply with annual medical appraisal and revalidation requirements. The Hospice is part of the East & North Herts Trust appraisal system, through which there is a choice of appraiser and appraisal support, including when going through the revalidation process.



Sample weekly timetable

	Monday	Tuesday	Wednesday	Thursday	Friday
AM	DCC 9 - 9.45 Inpatient Unit handover & capacity meeting 9.45 - 12.30 Post weekend patient review	SPA 9-9.45 CS /teaching duties DCC 9.45-10 capacity meeting 10-11.30 Inpatient Unit MDT SPA 11.30-12.30 Quality & incident review meeting	DCC 9 - 9.45 Inpatient Unit handover & capacity meeting SPA 9.45-12.45 CS/teaching duties 2 hrs and governance (incident investigation etc) 1 hrs	DCC 9 - 9.45 Inpatient Unit handover & capacity meeting 9.45-12.30 Ward round, including relative meetings, results review etc (1hr)	DCC 9 - 9.45 Inpatient Unit handover & capacity meeting 9.45-12.30 Ward round, including relative meetings, results review etc (1hr)
Lunch PM	12.30-13.00 DCC 13.00 - 17.30 Domiciliary visits - including admin (1hr) and travel (1 hr)	12.30-13.00 DCC 13.00-16.00 Review of ward patients 16.30-17.30 N Herts Locality virtual SPC MDT or Heart Failure virtual MDT (1hr)	12.45-13.15 DCC 13.15-17.30 Outpatient clinic inc admin (1hr)	12.30 - 13.30 SPA 13.30 - 17.30 Audit, CPD, appraisal	12.30 - 13.30 DCC 13.15-17.30 Outpatient clinic inc admin (1hr)
DCC	2 (supporting 0.69)	1.44 (supporting 0.69)	1.19 (supporting 0.43)	1.0 (supporting 0.43)	2.0 (supporting 0.69
SPA	0	0.56	0.81	1.0	

PA allocation:

Direct clinical care -7.63 PA, including 2.93 PA for supporting clinical activities* Supporting professional activities -2.37 PA, including 1.5 PA for activities related to revalidation and 0.87 PA for teaching and clinical supervisory duties.

*Supporting clinical activities include activities such as meeting relatives, attending MDTs, clinical correspondence etc



Person Specification – Specialist Doctor in Palliative Medicine

Entry criteria	Essential	Desirable
Qualifications	 Full GMC registration with licence to practice Minimum of 12 years medical work since obtaining a primary medical qualification, of which a minimum of 6 years should have been in palliative medicine 	MRCP Postgraduate qualifications in palliative medicine qualification such as the Palliative Medicine Specialty Certificate Examination or MSc, Certificate of Diploma in Palliative Medicine
Professional values and behaviours	 Practices with professional values and behaviours as per the GMC standards in Good Medical Practice Comprehensive clinical experience in palliative medicine in a range of clinical settings, including hospice and community Ability to take full and independent responsibility for clinical care and formulation of evidence based, individualised management plans and ongoing review of patients Able to manage complexity and uncertainty in the care of patients, including having the expertise to function at the level of a senior, independent practitioner High level of communication skills with an empathetic, caring approach to patients and families, including skills to communicate with patients experiencing communication difficulties of any kind Ability to share decision making with patients, relatives and carers, to treat patients as individuals and promote a person-centred approach to their care Respect patients' dignity and ensure confidentiality Ability to make complex ethical decisions including withdrawal and withholding of treatments 	Palliative Medicine Attendance at Advanced Communication Skills course or communications skills qualification



	Cale	
Commitment to clinical governance	 Understands importance of taking prompt action around issues of concern relating to patient safety, care quality or outcome and of raising and escalating concerns through clinical governance systems as needed Able to collaborate with colleagues across the hospice or other healthcare teams to manage risk Support and contribute to organisational learning Participate in seeking feedback from patients, service users, families, careers, colleagues and stakeholders and uses feedback as part of a robust governance response as needed Leads new practice and service redesign in response to feedback, safety concerns or need, always promoting best practice Involvement in audit of own and others clinical practice and of clinical care, and develops action plans and quality improvement cycles based on findings with evaluation of their impact Adheres to professional requirements, including participation in annual appraisal and revalidation and reviews of performance and progression 	
Research and scholarship	 Keeps up to date with relevant research and best practice Critically appraises and understands relevance of literature and disseminates best practice Communicates and interprets research evidence meaningfully for colleagues and patients Able and willing to engage in development of new policies, procedures, guidelines and standard operating procedures and review all such documents as indicated by hospice governance procedures 	Audit or research presentations at national meetings
Safeguarding vulnerable groups	 Recognises and takes responsibility for safeguarding children, young people and vulnerable adults, using appropriate systems to identify, share information, record and raise concerns, obtain advice and take action as appropriate 	
Leadership and teamworking	• Awareness of leadership responsibilities as a clinician and ability to demonstrate appropriate leadership behaviours, including managing change, complex or unpredictable circumstances and working in a collaborative manner	



	Cale	
-	 Understanding of a range of leadership principes, approaches and techniques to enable adaptation of own leadership style as needed Able to work effectively across teams and work positively in a collaborative manner with all colleagues, within both multidisciplinary and interprofessional teams Able to critically reflect on decision making processes and explain outcomes to others in an honest and transparent manner 	-
Teaching	 Able to critically assess own learning needs and ensure a personal development plan affecting all areas of professional practice Promotes and participates in individual and team learning and creates a safe and supportive working and learning environment Acts as a role model, educator, supervisor, informal coach or mentor for colleagues Able to plan and provide effective teaching and training activities as needed Willing to train/maintain training required to function as a Clinical Supervisor for GP trainees or specialty registrars on placement at the hospice Able to create effective learning opportunities and feedback for leaners and doctors at all stages 	Trained clinical supervisor Attendance at recognized teaching course or teaching qualification
Personal skills	 Able to critically appraise own performance and that of colleagues, peers or systems to enhance performance and support development Able to understand own limits, seek help with required and be receptive to appropriate challenge Able to develop practice responding to changing population or service user needs and engage in horizon scanning for future developments or needs Able to cope with and effectively organise the workload of a specialist doctor Ability and drive to use information and experience to improve the clinical service; ability to adapt and respond to changing circumstances to improve patient care Self-awareness and ability to accept and learn from feedback Commitment to maintaining professional skills and knowledge relevant to the job, including all required statutory and mandatory training 	Formal management training



	• Familiarity with standard office packages and use of IT based technology and willingness to learn new IT skills according to need	
Understanding of health economy and legal aspects of role	 Understanding of key challenges and national strategies affection palliative medicine Understanding of national health systems and organisation, including integrated care systems and boards. Applies basic principles of public health as applicable to palliative medicine Awareness of legal responsibilities relevant to the role, including around the Mental Capacity Act, Deprivation of Liberty Safeguards, data protection and equality and diversity 	

Get in touch

If interested in this post, including to arrange a visit to Garden House Hospice Care, please contact:



Dr Sarah Bell, Medical Director

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