Model job description: consultant medical virologist

Title of employing body
Title of post

Appointment
State whether the post is full or part time and state the number of programmed activities (PAs).

State whether the post is a new or replacement post.

State whether the appointee is expected to have a special interest, or is expected to develop such an interest to complement other consultants. If part of a managed network, give relevant information.

Any applicant who is unable, for personal reasons, to work full time will be eligible to be considered for the post. If such a person is appointed, modification of the job content will be discussed on a personal basis with the employing body in consultation with consultant colleagues.

General information
Describe the location: city/town and surrounding area, size of population, etc.

The employing body
Give a detailed description of the hospital(s) served and its/their work, including details of the clinical specialties, whether or not there is an accident and emergency service, details of surgical, medical, paediatric, obstetrics, gynaecology, oncology units, organ transplant, bone marrow transplant, HIV, hepatitis and antenatal etc. and any planned developments.

Describe hospital location, number of beds, including SCBU, PICU, ITU and HDU beds and range of clinical services, any planned changes or major developments, special features, management arrangements, etc.

Give an outline description of the pathology departments and their relationship with each other and the rest of the hospital. If relevant, describe the relationship with university/medical school departments and research units. This should include any planned or proposed changes in the provision of pathology services.
State whether the pathology laboratories are part of a joint venture initiative and give details of the organisational structure and operational nature of the service.

Detail networked and district general hospitals served by the laboratory.

Provide details of the hospitals, clinics or other premises (such as occupational health) and community (general practice) to which the service is provided locally, indicating where the consultant virologist would be expected to have an on-site presence for clinical liaison as required.

List regional or supra-regional services, if any are provided. These should include organ transplant, bone marrow transplant and neurosciences units.

Provide details of hospital microbiology laboratories (NHS and private) from which referrals for investigation or advice are received, or of any specialist (reference) service provided to other laboratories.

Local medical microbiology provision and university medical school, if relevant, should be included.

Describe local infectious diseases provision and whether this post is part of the ID service (dually accredited ID and virology consultants).

Describe the relationship to clinical medical microbiology and academic departments of medical microbiology and virology, and to any PHE laboratory serving the region.

Include any likely developments that may affect the service in the future.

Include details about the provision of molecular services, whether within the virology laboratory or part of a multidisciplinary laboratory. If the latter, description of multi-user lab is required with accountability.

Any other changes to the service anticipated in the following 12 months should also be stated.

Give a description of the hospital(s) served and its/their work, including details of the clinical specialties; whether or not there is an A&E service; details of surgical, medical, paediatric, obstetrics and gynaecology, oncology units, transplant units, HIV units, viral hepatitis service, etc. and planned developments.

Include information on the local health authority and on primary care providers.

If this is a Public Health England (PHE) appointment, give relevant information about the PHE region.

If relevant to the specialty please provide an organisational structure / organogram if one is available.

The pathology (or infection) directorate
Details should be provided of the directorate structure, including the departments it comprises.

Give details of how the individual departments are housed and whether they are in new or refurbished laboratories.

Hospitals and employing bodies (including primary care divisions) served by the laboratory should be detailed, including any regional services offered.
Provide an outline description of the individual departments within the directorate, including the consultant complement.

Associations with universities/research units should be detailed.

Give details of working relationships within the directorate, or equivalent for PHE posts (for example, the director of pathology is appointed by the chief executive and the medical director of the employing body/division). All consultants are eligible to be director of pathology and they will be appointed by the following process (insert details).

**The department of virology/specialist virology centre/unit**

A brief description of the virology laboratory and current services provided (by this section, if in an integrated laboratory).

State whether the lab is a member of a Specialist Virologist Centre, other regional networks, or whether the laboratory is part of a pathology modernisation network.

**The department**

Describe the laboratory, giving a detailed description of the individual department including its facilities and major equipment. There should be information on access to specialist or reference services.

State the month and year of **UKAS** Ltd accreditation, status of application or anticipated reply and/or completion.

State participation in external quality assurance (EQA) schemes if applicable.

**Laboratory accommodation and equipment**

Describe where it is, how much space there is, and any specialised equipment and laboratory computer system.

Links for reporting laboratory data to regional and national public health surveillance systems.

Information Technology: Please indicate the current laboratory information management system (LIMS) being used in the department including how this sits within the wider hospital IT infrastructure, and details of integration with the current hospital information system (HIS) and, if any, the provision of results to external requesters. Please indicate whether the department uses voice recognition and any macropathology imaging systems and whether these are integrated with the LIMS.

**Tabulate workload (indicate proportion from GPs)**

These figures should be as up-to-date as possible.

State the annual number of specimens processed and the proportion of work undertaken for units with complex virology needs, such as the following.
<table>
<thead>
<tr>
<th>Test name</th>
<th>Requests in year (state year)</th>
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</thead>
<tbody>
<tr>
<td>Solid organ transplant unit (including renal, liver, heart, lung, pancreas, small bowel and multi-visceral, etc.)</td>
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<tr>
<td>Bone marrow transplant unit</td>
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<td>Paediatric intensive care unit</td>
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<td>HIV unit</td>
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<td>Immunodeficiency unit</td>
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<tr>
<td>Infectious diseases unit</td>
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<tr>
<td>Viral hepatitis service</td>
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<tr>
<td>GUM/sexual health clinic serving complex patient needs</td>
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<tr>
<td>Dialysis units</td>
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<tr>
<td>Obstetric unit with attached foetal medicine unit</td>
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<tr>
<td>Occupational health service for a employing body/university hospital</td>
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<tr>
<td>No. of referred samples in/out of the laboratory</td>
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<tr>
<td>Provision of a dedicated 'out of hours' virology service, or a service combined with microbiology, which offers 'on call' virology tests</td>
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Provide details of sample numbers for rapid virus detection using molecular assays (in-house and commercial), viral load, virus genotyping, any chlamydia detection, viral and general serology (including any bacterial/parasitic serology covered). Include the number of confirmatory assays (for example, HBV, HCV, HIV, treponemal, and if the laboratory still runs a virus isolation and electron microscopy service).

State the proportion of workload from general practice, occupational health, antenatal serology.

Also provide the approximate time spent on selection of tests, result authorisation and interpretation, and telephone advice.

Detail regular commitment to specific units – ward and clinic work, infection control.

Describe the division of responsibilities and lead roles within virology.

Describe the facilities for multidisciplinary team (MDT) meetings, including audiovisual facilities if the MDT is coordinated off site.
Specify the number of MDT meetings held each week and describe how they will be shared between the consultants.

**Staffing**

List the consultant staff – full first names and titles, their sessional commitment (whole or part time) and any/all subspecialty responsibilities.

<table>
<thead>
<tr>
<th>Title, first name, surname</th>
<th>Whole or part time</th>
<th>Subspecialty interest(s)</th>
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All senior departmental staff should be listed and equated to whole time equivalents (or PAs), to include:

- List number of healthcare scientists by AFC banding.
- Secretarial support (full-time or part-time hours).
- Clerical staff.
- Specialist/specialty registrars.
- Non-consultant career grade staff.
- Laboratory manager/head BMS and quality manager.

State the number and status of trainees and rotational arrangements.

State the number and grading of clinical scientists, biomedical scientists (BMSs), medical laboratory assistants (MLAs), senior assistant technical officer (SATOs) and clerical staff.

**Management arrangements and administrative duties**

State how the pathology service is managed.

Name the current head of service/clinical lead for the specialty.

Summarise the process by which head/leadership is determined, for example: Since one of the functions of the head of service post is regarded as being to facilitate the development of management skills, it is anticipated that this role will rotate, with annual review, between colleagues with an interest in and aptitude for management.
**Duties of the post**

State that the appointee, together with consultant colleagues, will be responsible for the provision of the clinical diagnostic service.

State whether or not the appointee will be expected to participate in the management of the service.

State that the configuration of responsibilities will be reviewed from time to time and the appointee will be expected to work with consultant colleagues to provide a reliable and expeditious service.

List the major clinical specialties covered.

State that compliance with the requirements of good clinical governance and any new national arrangements for medical recertification/revalidation will be expected.

**Continuing professional development (CPD)**

State that the appointee will be expected to participate in CPD and the employing body’s policy on the provision of study leave and funding (number of days and amount of funding).

**Clinical effectiveness (clinical governance/audit)**

State the arrangements for clinical governance and clinical audit. The post holder’s participation must be outlined.

**Annual appraisal and revalidation**

Include the name of the designated body and that a responsible officer will be allocated, together with arrangements for appraisal and the policy for annual appraisal and review of the job plan.

**Research and development (R&D)**

If relevant, describe the relationship with any local university, particularly with respect to teaching and research, and whether an honorary academic title applies and with which body it will be.

Indicate the opportunities for R&D and how much time will be available for these activities. This should include reference to the existing R&D portfolio or task-led funding of the institution.

**Teaching**

State whether there are any commitments to undergraduate teaching and/or postgraduate training. In departments where specialist registrars are trained, indicate that the department has been approved for this purpose.

**Division of work and job plan**

Describe the proposed rota arrangements and the division of work between the consultants in the department.

State that the rota will be subject to negotiation between colleagues. Clarify the arrangements for mediation should a dispute arise.
Give a proposed job plan that outlines how the consultant’s time will be allocated between various duties. This should make clear the number of PAs to be allocated to direct clinical care and to supporting professional activities.

**Job plan**

Include a provisional job plan and give details for review. For example:

- direct clinical care (DCC; includes clinical activity and clinically related activity): 7.5 PAs on average per week.
- supporting professional activities (includes CPD, CQI, audit, teaching and research, and public engagement): 2.5 PAs on average per week.

Colleague cross-cover for annual, professional and study leave is expected.

The job plan will be reviewed and a performance review carried out by the Clinical Director of Pathology and, through them, the Medical Director of [the employing body].

State the local procedures to be followed if it is not possible to agree a job plan, either following appointment or at annual review.

State the arrangements for review of job plans, if and when necessary.

State the list of external duties accepted and expected – this may include Royal College examination duties, Royal College Specialty Advisory committees, Health Education England duties including all and any duties related to training.

**Out of hours**

The job plan should state whether there is any commitment to provide an out-of-hours service. If such a service is required, show the frequency of the on-call rota and agreed on-call category.

If the on-call commitment is significant, an appropriate number of DCC PAs should be allocated.

State the duties expected while on call; for example, availability for clinical advice and authorisation of laboratory results.

**Leave**

Describe the arrangements for cover of annual and study leave, including whether locum cover is usually provided.

**Facilities for appointee**

Describe the office, location of office and whether it is share or for the sole use of the appointee. The work space should take into consideration the environment, lighting, temperature control, space, storage and flooring.

Describe the secretarial support and equipment provided for the appointee. The recommended minimum is an individual office, 0.5 WTE secretarial support per consultant, a PC with appropriate
software, internet and email access, access to necessary LIMS (state which package is used) and access to current books and journals. State the facilities used for clinic letter generation (for example, audiotapes, digital dictation, voice recognition).

**Digital pathology**
Please indicate if there is a plan for digital pathology service provision. If so, whether this is at planning or implementation stage, the timescale, and the vision for future service provision. Please indicate whether this is envisaged to have a result on the job and workload allocation activities for the appointee and the facilities that may be made available for the appointee (for example, viewing stations, screens, remote login and reporting).

**Main conditions of service**
Insert the standard wording for all consultant posts in the employing body.

**Terms and conditions of service**
The appointee will be required to maintain GMC full and specialist registration with a licence to practise and revalidation, and should follow the [GMC’s guidance](https://www.gmc-uk.org/guidance) on Good Medical Practice.

The appointment will be covered by the [NHS’s Terms and Conditions of Service](https://www.gov.uk/government/publications/nhs-terms-and-conditions-of-service) for Hospital, Medical and Dental Staff (England and Wales) and the [General Whitley Council Conditions of Service](https://www.gov.uk/government/publications/general-whitley-council-conditions-of-service).

Include the standard terms and conditions of service provided by the employing body.

**Disclosure and Barring Service checks**
To include [statement](https://www.gov.uk/government/publications/government-employers-guidance-on-disclosure-and-barring-service) on application or otherwise of DBS checks (Disclosure and Barring Service, formerly known as CRB, Criminal Records Bureau).

For Northern Ireland it is [access NI criminal](https://www.gov.uk/government/publications/national-inspection-agency) disclosure check.

**UK visas and immigration**
Applicants should be aware that regardless of country of origin, their ability to communicate in written and spoken English to the standard required to carry out the post will be assessed during the selection process.

Applications from job seekers who require [Tier 2](https://www.gov.uk/government/publications/tier-2-general) sponsorship to work in the UK are welcome and will be considered alongside all other applications.

**Condition of appointment**
The appointment will be made in accordance with the NHS (Appointment of Consultants) Regulations.

Canvassing of any member of the Advisory Appointments Committee will disqualify the applicant.

**Visiting arrangements**
Give the arrangements for visiting the employing body, either prior to shortlisting or prior to interview.
List the personnel who may be contacted by candidates. This should include the chief executive, medical director, laboratory medicine director and/or head of service. Provide contact details such as telephone number and/or email address, and the name of a personal assistant or secretary if applicable.

**Travelling expenses**

Travelling expenses are paid in accordance with the terms and conditions of the employing body.

Potential applicants wishing to visit the employing body will be reimbursed for two preliminary visits (one informal visit prior to application and one formal visit before interview), plus actual interview expenses. **If a post is offered and subsequently refused, expenses will not be reimbursed.**

Interviewed candidates travelling from outside the UK will be entitled to travelling and subsistence expenses; however, these only apply in respect of the journey from the point of entry in the UK to the interview location.
## Person specification

<table>
<thead>
<tr>
<th>Category</th>
<th>Essential</th>
<th>Desirable</th>
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<tbody>
<tr>
<td>Qualification and training</td>
<td>Full and specialist registration and with a licence to practise with the General Medical Council (GMC) (or be eligible for registration within six months of interview). Applicants that are UK trained must be a holder of a Certificate of Completion of Training (CCT), or be within six months of award of CCT by date of interview. Applicants that are non-UK trained will be required to show evidence of equivalence to the UK CCT. FRCPath or evidence of equivalent qualification.</td>
<td>Other relevant higher qualification. CCT or equivalence in Virology or Infectious Diseases</td>
</tr>
<tr>
<td>Experience</td>
<td>Evidence of thorough and broad training and experience in the relevant specialty. Able to take responsibility for delivering service without direct supervision.</td>
<td>Evidence of a special interest that complements those of other consultants in the department.</td>
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<tr>
<td>Knowledge and skills</td>
<td>Knowledge and experience of relevant specialty. Broad range of IT skills. Knowledge of evidence-based practice.</td>
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<tr>
<td>Communication and language skills</td>
<td>Ability to communicate effectively with clinical colleagues, colleagues in pathology and support staff. Good knowledge of, and ability to use, spoken and written English. Ability to present effectively to an audience, using a variety of methods, and to respond to questions and queries.</td>
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</tbody>
</table>