



Model job description: consultant in transfusion medicine

Consultant posts in transfusion medicine can vary considerably. In some, responsibilities are confined to National Blood transfusion Services ([NHS Blood and Transplant](#) (NHSBT), [Welsh Blood Service](#) (WBS), [Northern Ireland Blood Transfusion Service](#) (NIBTS) and [Scottish National Blood Transfusion Service](#) (SNBTS)); others are joint appointments created between Blood Transfusion Services and a neighbouring employing body. In some cases, the employing body may create posts with a specific remit for transfusion medicine. In the first two instances, it may be appropriate that the post holder has an honorary appointment with a teaching hospital. In other cases, honorary academic contracts may be awarded.

Hospital based posts with an *interest* in transfusion medicine or *responsibility* to lead on blood transfusion are primarily those of Consultant Haematologists and are dealt with elsewhere within the employing body.

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.

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(s): city/town and surrounding area, size of population, etc.

The employing body

In the case of a split-site organisation or joint post, the facilities at each site should be described separately, with the description of the main employer first and the associated organisation second.



The two sections below – ‘Hospital/employing body’ and ‘The transfusion department’ – describe what should be included about the organisation.

Hospital/employing body (as main employing body)

Give a detailed description of the hospital(s) served and its/their work.

Describe the hospital location(s), number of beds, range of clinical services, any planned changes or major developments, special features and management arrangements. Include details of the clinical specialties, whether or not there is an accident and emergency service, details of surgical, medical, paediatric, obstetrics and gynaecology, oncology units, and particularly any relevant specialised regional or supra-regional services. Describe any planned developments.

Give an outline description of the pathology departments and their relationship with each other and the rest of the hospital. Detail satellite hospitals served by the laboratory and any pathology or transfusion networks the laboratory is associated with. This should include any planned or proposed changes in the provision of pathology services.

If relevant, describe the relationship with university/medical school departments or research units.

The transfusion department

Describe the transfusion department, giving a detailed description of the laboratory including its facilities and major equipment. State if the laboratory is outsourced. There should be information on access to special services and reference laboratories e.g. red cell immunohaematology, histocompatibility and immunogenetics, transfusion microbiology, molecular genetics etc.

Administrative arrangements

Where the service is outsourced and a clinical supervision of the service is a requirement of the post there should be a clear statement of the sessions allocated to the hospital and the outsourced transfusion service, and the specific responsibilities within each role.

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.

The departmental management structure and relationship of the transfusion laboratory and transfusion medicine consultant to other pathology specialities should be stated, and a diagram or flowchart included where possible. Where the laboratory service is outsourced clear guidance should be given as to the lines of responsibility and accountability.

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



Provide general information about each organisation, including any specialist units relevant to the post.

The workload statistics and the management arrangements for each organisation should be detailed.

Accreditation and regulatory compliance

State the month and year of [UKAS](#) Ltd accreditation, status of application or anticipated reply and/or completion.

State Medicines and Healthcare products Regulatory Agency (MHRA) compliance status.

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

Laboratory accommodation and equipment

This might include the location and floor space allocated to the transfusion laboratory (or laboratories) and a description of the key items of automated equipment. Include the details of the laboratory information management system (LIMS) and any other interoperable systems (such as electronic blood managements systems, order communications or electronic patient records).

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, details of integration with the current hospital information system (HIS) and the provision of results to external requesters, if any. Please indicate whether the department uses voice recognition and any macropathology imaging systems and whether these are integrated with the LIMS.

Tabulate workload

Where available, describe the most recent year's workload of the transfusion laboratories in terms of both tests performed and components issued. This should be tabulated for ease of presentation.

	Site 1	Site 2
Test		
Group and screen		
Crossmatch		
Antibody investigations		
DAT		
Kleihauer		
Send-aways (e.g. antibody ID, red cell extended phenotype)		



	Site 1	Site 2
Component issues		
Red cells		
Platelets		
Fresh frozen plasma and cryoprecipitate		
Anti-D Ig		

The clinical transfusion service

The description should usually include the structure of the hospital/employing body transfusion team and hospital/employing body transfusion committee with their affiliations and interests. It is also helpful to include a list of all consultant haematologists and their subspecialty interests. Describe the lines of clinical and managerial accountability within the haematology department and the wider division or directorate and/or within the outsourced service. This can be tabulated for ease of presentation and may include a diagram or flowchart.

Staffing

List the consultant staff – full first names and titles, their sessional commitment (whole or part time) and all subspecialty responsibilities. Show this in a table format.

Title, first name, surname	Whole or part time	Subspecialty interest(s)
Hospital/Employing body transfusion team		
Hospital/Employing body transfusion committee		
Haematology department		
Outsourced laboratory (if applicable)		

The number and grade of biomedical scientists delivering the transfusion laboratory service should be included. Also include any trainees, support workers and clerical staff.

The relevant pathology departments with associated consultants and clinical scientists should be listed and tabulated for ease of presentation. Links to universities, medical schools and research units should be included.

It must be stated whether the appointee will have admitting rights, and the availability and number of beds.



The availability and line management of appropriate designated junior staff should be stated, as should the number and status of trainees and rotational training arrangements.

The arrangements for the emergency admission of patients and on-call arrangements should be specified.

Joint appointments – hospital/private laboratory facility

There should be a clear statement of the sessions allocated to the hospital and the transfusion laboratory service, and the specific responsibilities within each role.

General information about each organisation should be provided, including any specialist units relevant to the post.

The workload statistics and the management arrangements for each organisation should be detailed.

Details of further clinical commitments, including on-call work, should be provided.

Facilities provided to support the post-holder, such as office and secretarial/personal assistant support, should be described.

Duties of the post

These are variable and dependent upon the specific role. Responsibility should be focused within a limited number of pre-defined areas of the service.

Common features that should be included the job description:

- strategic role
- involvement in the development of policies and standards
- national professional responsibilities, such as work for the [Joint Professional Advisory Committee \(JPAC\)](#), [BSH Transfusion Task Force](#), [National Blood Transfusion Committee \(NBTC\)](#), [Safety of Blood Tissues and Organs \(SaBTO\)](#), etc.
- ability to influence quality
- role in service enhancements and quality improvements
- teaching/research with an honorary appointment to a teaching hospital or university, if the blood service is the primary employer
- expectations for liaison with hospitals served, or other professional bodies, to provide expert advice
- arrangements for cross-cover and on-call work
- clinical responsibilities



- specific management arrangements for the particular service, with respect to the responsibility for supporting staff and quality assurance.

NHS Blood and Transplant (as main employer)

Give an outline description of the blood service and the scope of the work within the organisation that relates to this post.

Blood services are increasingly organised on functional rather than centre-based lines and the job description should address this. In this introductory outline, state whether there is national integration of consultant workforce, arrangements for research and development and links with other establishments.

Blood transfusion centre-based posts

Describe the functions covered by the blood transfusion centre within the national service and detail the population and hospitals served within the region. Also where relevant, describe the range of diagnostic reference services provided.

Include any satellite facilities under the centre's management, including any hospital transfusion laboratories for which it holds responsibility.

Where present, describe any clinical or academic links with neighbouring hospitals and academic institutions and whether there are any local facilities for research and development.

The description should usually include the departmental or speciality team structure and management arrangements, including names and affiliations of key consultants and clinical scientists with whom the post-holder will interact. Include a diagram or flowchart where possible.

Scope of specific roles that may be included in a Consultant in Transfusion Medicine job description may include the following:

Donor care

Duties include:

- setting standards for and ensuring a high level of donor care
- monitoring effectiveness of and compliance with standards
- may or may not involve responsibilities for apheresis including therapeutic apheresis.

Workload statistics should be provided here.

Transfusion microbiology

Duties include:

- input into policies and procedures for the appropriate investigation of transfusion-transmitted infections (TTIs), and monitoring and reporting of TTIs
- ensuring appropriate counselling, advice and referral for marker-positive donors and policies and procedures for handling donors with false-positive virology markers



- supervising look-back exercises at a local level
- handling potential litigation at a local level, and national level if applicable
- may or may not involve responsibility or involvement in choice of non-mandatory assays and algorithms for confirmatory testing.

Diagnostic reference laboratories

Duties include:

- setting standards for laboratory services and ensuring these are met
- clinical reporting and, as required, advising on referred samples
- developing clinical policies relating to the investigation and support of related clinical conditions
- provision of specialist components including red cell phenotype matched cells
- specialist testing including antibody identification
- providing expert advice to referring clinicians.

Blood components

Duties include:

- responsibility for clinical input into the development and implementation of production of new components
- involvement in clinical trials
- appraisal of hospital and government initiatives and their impact on component requirements
- monitoring the quality of components provided
- providing clinical advice relating to quality problems, e.g. product recall.

Clinical transfusion medicine

Duties include:

- developing policies and procedures for the safe and effective use of blood
- liaising with clinical units to ensure that high standards of transfusion practice are achieved and maintained
- collecting outcome data, e.g. adverse reactions to blood components
- participating in the activities of regional and hospital transfusion committees



- providing expert clinical opinion in quality assurance incident reports in relation to blood transfusion, including issuing reports and advice to hospitals regarding outcome of bacterial screening in association with component recall
- implementing key patient blood management principles in the region and locally.

Therapeutic apheresis

Duties include:

- setting standards for therapeutic cytapheresis and plasma exchange, and ensuring that these are achieved
- delivering therapeutic apheresis services locally and regionally including plasma exchange, cytapheresis, red cell exchange, extracorporeal photopheresis (ECP) and stem cell/mononuclear cell collection for transplant, immunotherapy and gene therapy services
- assessment of patients and in some cases donors, e.g. those of peripheral blood stem cells
- participation in service development, research and furthering best practice within apheresis, including therapeutic apheresis outcome data.

Tissue banking

Duties include:

- setting standards for the selection of tissue donors and ensuring that collection of tissues conforms to the highest standards of practice
- liaising with clinical users of tissue services to assure the appropriate use of tissues
- monitoring the outcome of tissue use and assisting in the reporting of adverse reactions to the use of tissues.

Stem cells and immunotherapy

Duties include:

- involvement in the establishment and implementation of standards for stem cell donor selection and management
- setting standards for stem cell collection procedures and monitoring the outcome of these
- liaising with the apheresis team regarding issues during the harvesting procedure
- providing clinical advice to stem cell and immunotherapy laboratories
- liaising with clinical stem transplant and immunotherapy units
- planning and developing a suitable and safe total plasma volume to process, to ensure an adequate cell dose is collected.



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.

State the responsibility for clinical governance, as well as who has governance responsibility for an outsourced blood transfusion laboratory: the hospital/employing blood transfusion lead consultant or the pathology provider blood transfusion lead consultant.

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 which body it will be with.

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 consultants in the department for each area of activity.

State that the rota will be subject to negotiation between colleagues and 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 programmed activities (PAs) to be allocated to direct clinical care (DCC) and to supporting professional activities (SPAs).

Job plan

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

- DCC, including clinical activity and clinically related activity: 7.5 PAs on average per week.
- SPA, including CPD, audit, teaching and research, and public engagement: 2.5 PAs on average per week.



In the opinion of the Transfusion Medicine Specialty Advisory Committee, 2.0 SPAs is a minimum allocation of SPAs.

All activities should be clearly defined in the job plan, be they flexible or fixed commitments.

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 arrangements for review of the job plans, if and when necessary. Where there is a joint appointment, the main employer should state the arrangements with the associated organisation.

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

This recognises that all consultants require time to maintain and develop professional expertise however that additional supporting activities such as educational supervision, teaching and management may not be evenly distributed within a department.

State the employing body's policy on the provision of professional leave and for incorporating into the job plan external duties for the good of the wider NHS (such as giving external lectures, acting as a Royal College of Pathologists (RCPATH) or university examiner or UKAS inspector, and working for the Department of Health or the relevant medical royal college in various capacities/roles).

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. Also add the on call supplement %/

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, provision of frozen sections and other histology as appropriate.

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 state that it is for the sole use of the appointee. The work space should be compatible with [RCPATH recommendations](#) with respect to the environment, lighting, temperature control, space, storage and flooring.

Describe the secretarial support and equipment provided for the appointee. The recommended minimum is an office, secretarial support, 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 report generation (for example, audiotapes, digital dictation and voice recognition).

State that a modern microscope (if relevant to the post) is available for the appointee and that it is suitable for the work that they will be required to perform. State that the microscope and seating is of ergonomic design and compatible with [RCPath recommendations](#).

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 on [Good Medical Practice](#)

The appointment will be covered by the [NHS's Terms and Conditions of Service for Hospital, Medical and Dental Staff \(England and Wales\)](#)

It will also be covered by the [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 a [statement](#) on [application](#) or otherwise of DBS checks (Disclosure and Barring Service; this was formally known as CRB, Criminal Records Bureau).

For Northern Ireland, this is an [access NI criminal](#) 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](#) 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

Category	Essential	Desirable
Qualification and training	<p>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).</p> <p>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.</p> <p>Applicants that are non-UK trained will be required to show evidence of equivalence to the UK CCT.</p> <p>FRCPATH or evidence of equivalent qualification and M/FRCP or evidence of equivalent qualification.</p>	Other relevant higher qualification.
Experience	<p>Evidence of thorough and broad training and experience in the relevant specialty.</p> <p>Able to demonstrate evidence of commitment and interest in transfusion medicine.</p> <p>Able to take responsibility for delivering service without direct supervision.</p>	Evidence of a special interest that complements those of other consultants and / or clinical scientists in the department.
Knowledge and skills	<p>Knowledge and experience of relevant specialty.</p> <p>Broad range of IT skills.</p> <p>Knowledge of evidence-based practice.</p>	
Communication and language skills	<p>Ability to communicate effectively with clinical colleagues, colleagues in pathology and support staff.</p> <p>Good knowledge of, and ability to use, spoken and written English.</p> <p>Ability to present effectively to an audience, using a variety of methods, and to respond to questions and queries.</p>	
Teaching experience	Evidence of involvement in teaching e.g. undergraduate/postgraduate; lecturing, arranging seminars/small group teaching, etc.	

