

# **ALDER HEY CHILDREN'S NHS FOUNDATION TRUST**

## **CONSULTANT PAEDIATRICIAN IN ALLERGY – FULL TIME**

### **JOB DESCRIPTION**

#### **1. INTRODUCTION**

This is a permanent new full time 10 PA post in Paediatric Allergy which will be based within Alder Hey Childrens NHS Foundation Trust providing tertiary care and supporting the development of allergy provision at a primary and secondary care level.

Alder Hey has had limited service provision at a tertiary level with specialist input provided by the Adult Allergy Consultant from another Trust. This post provides the opportunity to develop a dedicated Consultant Paediatric Allergist role building on our present provision expanding the range of specialist services and also supporting the ongoing development of skills and expertise at a Tier 1 and 2 level.

The post holder will be required to work across the North West Allergy Network in conjunction with a fellow post holder in Manchester Childrens to advance allergy provision through a networked approach within the North West region. The successful candidate will need to demonstrate strong communication and organisational skills as well as expertise and clinical competence in the management of children and young people with allergies.

#### **PAEDIATRIC ALLERGY SERVICE**

##### **Allergy Service is currently provided by:**

- Dr Tina Dixon - Adult Allergist with special interest in Paediatric Allergy. Based at Broadgreen and Liverpool Royal Hospital. One clinic per week. Dr Dixon provides a tertiary level service and specialises in the very complex patients as well as Drug Allergies and SLIT.
- Chris Doyle – Advanced Nurse Practitioner – Asthma & Allergy. Two clinics per week + one A&E Rapid Access Allergy and Asthma Clinic. Oversees weekly Open Food Challenges on the day case ward.
- Dr David Lacy – General Paediatrician with a special interest in Paediatric Respiratory Medicine and Paediatric Allergy. Based at Arrowe Park Hospital. One clinic per month.
- Dr Madeleine Pison – General Paediatrician with an interest in paediatric allergy. Based at Alder Hey – one clinic per week
- Dr James Mwenechanya - General Paediatrician with an interest in paediatric allergy. Based at Alder Hey – one clinic per week
- Dr Nasim Mahmoud – General Paediatrician with an interest in paediatric allergy. Based at Alder Hey – one clinic per week

##### **Current service provision:**

- Clinical assessment – referrals local/regional. At present each clinic has five patients (two/three new + 2/3 follow ups) per clinic.
- Skin Prick testing – supported by associate nurse specialist
- IgE/RAST (Immunocap)
- Protocols - food allergy/chronic urticaria/rhinitis
- EpiPen training
- Food challenges
- School/nursery advice

- Follow up: all confirmed food allergy patients
- Audit

There are monthly meetings for those clinicians based at Alder Hey and three monthly meetings for the whole team. Guidelines and protocols are regularly reviewed and updated.

The North West Allergy Group has been set up and twice yearly meetings are held to discuss educational issues, develop regional protocols and plan the regional service.

## **2. DUTIES OF THE POST**

There is a major requirement for a full time Paediatric Allergist to build on the existing service which has been mainly delivered by general paediatrics. In conjunction with a Nurse Consultant post which is being developed the main duties of the post will be as follows:

### ***Need for Lead Tertiary Specialist within Alder Hey in Paediatric Allergy***

There is a requirement for full time tertiary allergist in order to provide clinical care for complex allergy patients, patients with drug allergy within outpatient and day care settings. This is particularly relevant in view of Dr Dixon's retirement in the next 5 years. This post would enable the service would be able to expand to develop a Sub Cutaneous Immunotherapy Service (SCIT and SLIT). The postholder will lead and oversee the service for food challenges allowing for the expansion of the current service. With the support of the MDT, including a dietician, there may also be an opportunity to perform Double Blind placebo controlled Food Challenges which are the gold standard of food challenges but too time consuming to consider at present time. Drug and anaesthetic challenges are also an area which could be developed. Clinical management of allergy related conditions such as rhinitis (allergic and non-allergic), eczema, asthma and GIT related disorders (e.g. Eosinophilic oesophagitis) could also be refined and multidisciplinary clinics established.

### ***Developing capability within secondary care***

The Consultant would provide support to the current General Paediatricians with an interest in allergy and to a Nurse Consultant post. There will be a requirement to support joint outreach paediatric allergy clinics in key secondary paediatric district general hospitals with general paediatricians with an interest in allergy to optimise care of children regionally. This post would also provide an opportunity for regional general paediatricians to sit in on clinics at Alder Hey in order to gain understanding and experience in the management of more complex allergic conditions.

### ***Networking – Locally***

They would organise regular paediatric allergy updates for paediatricians in training and with an interest to maintain a current knowledge base of these key paediatric health care professionals.

### ***Networking - Nationally***

They would ensure regular attendance at National and International Meetings, enabling the department be kept up to date with current research and practice, raising our profile at a wider forum, and in time presenting our own research, audit and protocols.

### ***Developing capability within primary care***

This post holder would provide educational support for GPs and Practice Nurses to enable them to provide a paediatric allergy service at primary care level.

### ***Supporting medical training***

The Consultant would provide medical students with training and education in paediatric allergy.

### ***Audit***

This post would enable the department to perform regular and systematic audit both locally and regionally.

***Research***

A full time paediatric allergist would be able to capitalise on the presence of the Medicines for Children Local Research Network and undertake research projects at both a local and national level.

***Protocols/pathways***

The post holder would ensure that our local protocols and pathways are complete, kept up to date with current national guidance and disseminate them regionally.

***Education***

Part of the educational remit (in addition to those already mentioned above) would be for example to run a Diploma in Allergy Course in conjunction with Education for Health (based in Warwick) but run locally (as is currently done with the Warwick Asthma course).

### 3. PROVISIONALJOB PLAN

#### Work Programme

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>AM</b>	Clinical Admin 1.0 DCC	Allergy Clinic 1.0 DCC	Day Case management 0.5 DCC Clinical Admin 0.5 DCC	*Clinic with General Paediatrician with interest in Allergy 1.0 DCC	Teaching / CPD 1.0 SPA
<b>PM</b>	Research / Audit/CPD 1 SPA	Allergy Clinic (Anaphylaxis) 1.0 DCC	Service Development 1.0 SPA	Clinical Admin 1.0 DCC	Allergy Clinic 1.0 DCC

#### Planned activities

Clinics 4 DCC  
 Day case management 0.5 DCC  
 Clinical Administration 2.5 DCC  
 Research/Audit 1 SPA  
 Teaching/CPD 1.0 SPA  
 Service Development 1.0 SPA

Total of 7 DCC and 3 SPA = 10 PAs

\*There will be a weekly clinic with a General Paediatrician with an interest in Allergy to develop local knowledge and expertise. These will consist of 2 Alder Hey clinics with general paediatricians and 2 DGH clinics with these Tier 2 centres to be identified by network.

This is a draft job plan and therefore sessional allocation to outpatient clinics may vary. It is envisaged that the post holder will very much focus on development of the service within the first year both at the tertiary centre and in regard to developing local capability within Tier 2 services. After this, the job plan may be adjusted to reflect the service needs.

The Trust has produced guidance to direct the use of Supporting Professional Activities (SPAs). It has identified that all consultants must undertake 1.5 core SPAs which support e.g. mandatory training, appraisal and job planning, teaching and training. A further 1 non-core SPA will be agreed for the following areas of work e.g. research, major service development activities, regional and national projects. Further information can be provided.

There will be no general paediatric commitment and no general paediatric on-call commitment. It is planned for the post to reside within the Respiratory/ID/Immunology Team for peer support.

The job plan is subject to annual review with the Assistant Medical Director with any changes being agreed within the department.

#### **4. RESEARCH**

The Trust has a comprehensive research programme and all consultants are encouraged to be involved. The overall responsibility for the Trust's Research Strategy lies with Barry Pizer and Matthew Peak (Joint Directors of Research). The Research and Development Directorate ensures that research is incorporated into the management infrastructure and is part of the Trust's overall service plan and strategy. The Trust's Research and Development Manager, along with research group leaders, promote research within the overall strategic aims. A number of operational groups and key individuals facilitate the planning coordination and support of research.

Areas of direct relevance to child health in which there exists a critical mass of expertise are focused around research subject groups. The Research and Development Manager, research group leaders and a nurse lecturer practitioner also provide support to new initiatives which fall outside the strategic focus, especially those with potential to develop into programmes of research.

Quality assurance of all Trust-based research is achieved through peer review of all proposals by the Research Committee. The Trust runs a number of evidence-based medicine research teaching sessions and Research Awareness Day Workshops which are open to all Trust staff disciplines.

#### **5. TEACHING**

The Trust provides a significant number of placements for Undergraduate Medical Students from the University of Liverpool: in excess of 600 are placed with the Trust each year. A problem-based curriculum is in place and students from years 2, 3, 4 and 5 attend placements. The Trust also offers a wide range of special study modules for students.

Postgraduate teaching is co-ordinated by the Postgraduate Tutor, his/her deputies and the staff in the Education Centre. There is a curriculum for all grades of doctors in training. There is also a large amount of multidisciplinary teaching and individual clinical teams provide teaching for their juniors.

The post holder will be expected to be involved in the teaching of undergraduate students in clinics, on ward rounds and in problem based-learning sessions, and to contribute to postgraduate teaching on the SHO and SpR (or MMC equivalent) teaching programme.

#### **6. AUDIT AND CLINICAL GOVERNANCE**

The appointee will be expected to participate in audits and the development of protocols and care pathways specific to the service.

Consultants are expected to be aware of the principles of clinical governance and to contribute to the aims of the Trust in achieving continuing improvement in all aspects of delivery of the service.

#### **7. CONTINUING PROFESSIONAL DEVELOPMENT**

Consultants are expected to maintain their personal portfolios in accordance with the requirements of the Royal College of Paediatrics and Child Health, including the acquisition of the appropriate CPD points. The Trust has introduced an Appraisal system for all consultants which includes a review of Continuing Professional Development.

**FURTHER INFORMATION**

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