PROFESSIONAL QUALIFICATIONS
The following qualifications are required:

(a) Registration as a specialist in the Specialist Division of the Register of Medical Practitioners maintained by the Medical Council in Ireland in the specialty of anaesthesia or one of the specialties of surgery or medicine

and

(b) Including two years certified postgraduate training in intensive care medicine and possession of the Fellowship of the Joint Faculty of Intensive Care Medicine of Ireland or its equivalent.

PARTICULARS OF POST:
This is a temporary whole time Type B Contract post at the Mater Misericordiae University Hospital for a one-year period. The following conditions will apply:

1 The appointment is temporary, full-time post for a one-year period.

2 The person appointed shall be on probation for one month.

3 Annual leave entitlement is 31 working days per annum with pro-rata entitlements for periods less than one year. It will be necessary to ensure that this leave is taken so that on receipt of notification, the Chairperson of the Division of Anesthesia, Medicine or Surgery and the Director of Intensive Care may make appropriate cover and other arrangements.

4 The regulations of the Voluntary Hospitals Superannuation Scheme (including the Spouses and Children’s Pension Scheme) will apply.

5 The terms, conditions and benefits of the new Consultants 2008 Contract (as of 1 July 2013), approved by the Department of Health will apply.

6 This post has a teaching association with University College, Dublin.
Acceptance of the Medical and Administrative structures of the Mater Misericordiae University Hospital, as detailed in the Constitution of the hospital is necessary.

The person appointed shall abide by the Ethical Policy approved by the Board of Management, of the Mater Misericordiae University Hospital.

All applications for special annual leave shall be, in addition, forwarded to the Medical Executive and the Executive Board of Management of the Mater Misericordiae University Hospital for consideration. No special leave may be taken without the prior approval of the Executive Board of Management of the Hospital.

In the event of resignation a minimum of one months’ notice must be given in writing.

The person appointed on reaching 65 years shall cease to hold office.

The scheduled commitment in respect of this post is –
- Mater Misericordiae University Hospital - 29 hours per week
- National Rehabilitation Hospital – 10 hours per week

**CONSULTANT IN INTENSIVE CARE MEDICINE – OUTLINE:**

The Intensive Care Medicine (ICM) service in the Mater Hospital was established by the Hospital in response to the development of the National Cardiac Surgery Unit and the increased number of critically ill patients being cared for by the hospital. Two separate intensive care units (general and cardiac surgery) were amalgamated and enlarged in 1994 to give us our present facility of 17 Intensive Care Unit (ICU) and 12 High Dependency Unit (HDU) beds. The present multidisciplinary ICU/HDU has over 2000 admissions annually, bed occupancy of 100% and an average length of stay of 4.4 days.

The Mater Intensive Care service is General in nature, admitting, on a 24 hour basis, critically ill patients from all disciplines within the Mater (and Rotunda) Hospitals and those referred from outside the hospital. There is a prioritised service to the national Cardiothoracic and Acute Spinal Injury services and to supra-regional services such as Vascular Surgery. The ICU is approved for postgraduate training in ICM by the Joint Faculty of Intensive Care Medicine of Ireland (JFICMI) and the College of Intensive Care Medicine (Aus/NZ) and also for the UCD / Mater postgraduate nursing diploma training by An Bord Altranais.

The Mater Hospital ICM service has a central role in the provision of acute medical care for cardiothoracic surgery patients (including heart and lung transplant patients), spinal injury patients, general, vascular, hepatobiliary, and major head and neck surgery patients, cardiology, respiratory medicine, endocrine, haematology and oncology patients. The ICM service provides continuity of consultant led care of all patients in ICU and HDU. The Intensive Care consultants take responsibility for the Critical Care provided to patients and a substantial component of the global clinical responsibility – in conjunction with admitting clinicians.
The ICM service provides a consult service for unstable patients in the Emergency Department and the general hospital wards. The service has an integral role in the Trauma Team for the Accident and Emergency Department and Cardiac Arrest Team for the entire hospital. The ICM service leads the weekly consultant-led tracheostomy ward round to review all post-ICU tracheostomy patients in the hospital and to guide NIV weaning and tracheostomy decannulation.

In an effort to match international recommendations there are two Intensivists on clinical duty each day to keep doctor/patient ratio at 1:15 (1:12 is recommended). Originally, all junior doctors in the ICM service were Anaesthesia trainees, but in the past number of years Internal Medicine trainees (SHO rotation), ED trainees and Respiratory Medicine trainees (SpR rotation) have contributed to the service. All qualify for approved ICM training modules with their parent Colleges and Training Supervisory and Accreditation Authorities. Those doctors with a career interest in ICM qualify for and take the Diploma exam of the JFICMI or of the European Society of Intensive Care Medicine.

The new consultant will be expected to play an integral and full role in the clinical intensive care service and be active in developing associated administrative, teaching, audit and research activity. He/she will be required to participate in a roster which provides comprehensive care and responsibility for referred critically ill patients. The emergency roster is supplemented by consultant anaesthetists with an interest in intensive care but the new consultant – together (currently) with six other consultants - will be expected to participate as one of the hospital’s primary Intensive Care Medicine consultants providing a majority sessional commitment to Intensive Care.

The new Consultant in Intensive Care Medicine will be expected to integrate fully with the present team of Consultants in Intensive Care Medicine and the supporting Consultant Anaesthetists with a special interest in ICM.

The Mater is the National Centre for Spinal Cord Injuries (SCI) and a large proportion of these patients will have their initial acute management in the ICU, particularly for cervical cord injuries. The normal patient flow is from ICU to HDU to Spinal Unit within the Mater and then to the National Rehab Hospital. Patients with high cervical lesions who are ventilator dependent are currently unable to complete this last step from Spinal Unit to NRH. The new post holder will facilitate the initiation of a pathway, via education and training, to allow such transfers to occur.

**DUTIES:**
The person appointed will, in respect of the service commitment to the hospital be required to:

Carry out the duties of a Consultant Intensivist at the Mater Misericordiae Hospital and the National Rehabilitation Hospital, Dun Laoghaire. These duties are outlined below and will be specified on behalf of the Hospital by the Division of Anaesthesia via the Chairperson and Director of Intensive Care and will include:
Mater Hospital

1. Manage, as required, patients in Intensive Care, High Dependency Unit, or such other departments as deemed necessary. Intensive Care work will entail, in liaison with the Director of Intensive Care, participation in an Intensive Care Medicine roster.

2. The provision of a consultative service as required.

3. A Consultant Intensivist with Specialist Registration in Anaesthesia shall provide anaesthesia services for assigned operating lists.

4. Experience with ECLS, heart/lung transplant desirable but not mandatory

5. A Consultant Intensivist with Specialist Registration in Medicine or Surgery shall provide consultant expertise in
   - Ward Rounds
   - Out-Patient Clinics
   - Operative Surgical Lists (if appropriate).
   - On-call commitment
   - Consultation

or other areas deemed appropriate by the hospital.

This will be in accordance with a primary commitment to the intensive care department / duty rota and as negotiated with the relevant division of medicine or surgery and subspecialty area.

6. The provision, if appropriate of staff training in Cardiopulmonary Resuscitation. This may entail liaison with the Chairperson of the CPR Committee and the CPR Teaching Centre at the Mater Hospital.

7. To participate on the emergency duty rosters of the Mater Misericordiae Hospital.

8. Organise and participate in undergraduate teaching. Organise and participate in the postgraduate teaching and conferences of the hospitals for Medical, Nursing and other staff. Update himself/herself in education and service technological and other advances.

9. Engage in Research Administration and Audit. This may entail liaison with the University Department of Anaesthesia/Professor of Anaesthesia at U.C.D. or other research departments

10. Participate in the Administration of the Department of Intensive Care Medicine, the Division of Anaesthesia, and of the hospital.

11. Cover of fellow Consultants during holiday, sickness and other approved absence.
National Rehabilitation Hospital

For ventilator dependent patients with spinal cord injury, admission to the National Rehabilitation Hospital and subsequent discharge requires the development of a specialist pathway. Considering both the pre-admission planning and discharge preparation required, this pathway spans a number of phases of hospital care, as proposed in the HSE Integrated Care Pathway for Spinal Cord Injury developed by the National Clinical Program for Rehabilitation Medicine.

A programmatic national approach is required to plan for and resource the needs of the long term ventilated SCI patient encompassing both high level spinal cord patients and subgroups. The new post holders will engage with this programmatic development with particular reference to the cervical spinal cord injury patient.

The role of the CCM will need to support the continuum of care from the Mater Spinal Unit, into National Rehabilitation Hospital and onto long term placement.
APPLICATION

1 Each candidate shall submit, as references, the names and addresses of at least four responsible persons to whom he/she is well known, but not related. Two, at least, shall be from a recent or current employer.

2 Canvassing directly or indirectly by or on behalf of any candidate will automatically disqualify such candidate.

3 Copies of professional and education certificates should be submitted with Curriculum Vitae. Originals of these documents may be required at interview.

4 Consultants appointed to the staff of the hospital may not accept other medical appointments without the prior written approval of the University Hospital. The Hospital Board will not be responsible for any expenses a candidate may incur in attendance for interview.

5 Curriculum Vitae (fourteen unbound copies) including particulars of age, qualifications, publications etc. should be forwarded to the Honorary Secretary, Medical Council, Mater Misericordiae University Hospital, Eccles Street, Dublin 7 by Friday 1st December 2017.