

Royal Brompton & Harefield NHS Foundation Trust

Job Profile

Clinical Research Fellow in Paediatric Respiratory Medicine

Royal Brompton Hospital

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Royal Brompton & Harefield NHS Foundation Trust

A System of Care

Royal Brompton & Harefield NHS Foundation Trust is an internationally renowned centre for heart and lung services. Our brand identity is strong and clear: delivering the best clinical care and the best research for patients with heart and lung disease.

Heart and Lung diseases are the world's biggest killers and our experts care for patients who come from across the UK and overseas, not only from our local areas.

Our integrated approach to caring for patients from the womb, through childhood, adolescence and into adulthood and old age has been replicated around the world and has gained the Trust an international reputation as a leader in heart and lung diagnosis, treatment, and research.

Research programmes play a vital role at both our hospitals. This is because the most talented medical experts are rarely content with using tried and tested methods to treat their patients. The opportunity to influence the course of modern medicine by developing new treatments is a prospect that attracts them to specialist centres, where research opportunities are a fundamental part of delivering patient care. As well as travelling internationally to lecture and share their knowledge, our clinicians hold prominent positions on influential boards, committees, institutions and professional associations.

Our closest academic partners are the National Heart and Lung Institute in the Faculty of Medicine Imperial College London and, the Harefield Heart Science Centre. Through our clinical research studies we also have active collaborations with hospital and universities across the UK, most notably with Liverpool Heart and Chest Hospital in the Joint Institute for Cardiovascular Medicine and Science. This partnership also reflects the Trust's desire to develop partnerships outside its usual geographical boundaries.

Over the years our experts have been responsible for several major medical breakthroughs – discovering the genetic mutations responsible for the heart condition dilated cardiomyopathy, founding the largest centre for the development of new treatments for cystic fibrosis in Europe and pioneering heart surgery for newborn infants.

Our hospitals do not operate in a vacuum; fully integrated networks of care exist with partner organisations and many of our clinicians have joint appointments with neighbouring trusts.

Our experts promote the principle of 'shared care' through an expanding system of consultant-delivered outreach clinics, at which they see patients at over 30 hospitals across the South East, covering Essex, Sussex, Surrey, Hertfordshire, and Middlesex. This system allows patients to benefit from specialist expertise in their local environment, with inpatient care at our hospitals as needed.

1.0 Trust mission, values and approach.

The Trust's mission is to be the UK's leading specialist centre for heart and lung disease. We will achieve this mission through a strategy of focused growth in aspects of heart and lung treatment, such as congenital heart disease, arrhythmia, heart failure and advanced lung diseases.

Our Approach

- The continual development of leading edge services through clinical refinement and research
- The effective and efficient delivery of core specialist treatment
- The transition of appropriate routine services to other centres to release capacity for new interventions

Remaining an autonomous specialist organisation is central to preserving and building our strong clinical and organisational record. However we are equally convinced of the importance of effective partnerships particularly with major academic bodies to ensure a continuing pipeline of innovations to develop future treatments.

Our Values

At the core of any organisation are its values; belief systems that are reflected in thought and behaviour.

We have three core patient- facing values and four others that support them.

Our three core values are:

- **We Care**
We believe our patients deserve the best possible specialist treatment for their heart and lung condition in a clean, safe place.
- **We respect**
We believe that patients should be treated with respect, dignity and courtesy and they should be well informed and involved in decisions about their care.
- **We are inclusive**
We believe in making sure that our specialist services can be used by everyone who needs them, and we will act on any comments and suggestions that can help us improve the care we offer.

And the following values support us in achieving them:

- **We believe in our staff**
We believe our staff should feel valued and proud of their work and know that we will attract and keep the best people by understanding and supporting them.
- **We are responsible**
We believe in being open about where our money goes, and in making our hospitals environmentally sustainable.

- **We discover**
We believe it is our duty to find and develop new treatments for heart and lung disease, both for today's patients and for future generations.
- **We share our knowledge**
We believe in sharing what we know through teaching, so that what we learn can help patients everywhere.

1.1 Performance and achievements in 2014/2015

Our experts in 2014/15:

Carried out more than 174,000 outpatient, diagnostic and imaging appointments and saw 35,706 inpatients	Scored over 98 per cent from patients in the NHS England Friends and Family Test	Achieved a world first by implanting a Tendyne transcatheter mitral valve system to treat mitral regurgitation (a leaking mitral heart valve)
Performed 2,899 angiograms and 2,344 coronary angioplasties	Fitted 3,395 pacemakers and implantable cardioverter defibrillators (ICDs)	Pioneered homecare support to shorten the length of time patients need to stay in hospital
Recommended by 92 per cent of staff in the NHS England Family & Friends Test	Performed 708 paediatric cardiac procedures and admitted 2,546 children with heart and lung conditions	Conducted 8,473 appointments with paediatric (under 16 years of age) cardiology and respiratory outpatients
Carried out 6,169 inpatient and 8,986 outpatient CT scans	Performed 18,445 echocardiograms at Royal Brompton Hospital and 13,191 at Harefield Hospital	Helped nearly 1,000 cystic fibrosis (CF) patients
Recruited 3,149 patients into more than 175 research studies	Achieved the 18-week NHS standard referral time for admitted patients every month between April 2014 and March 2015	Achieved the 18-week NHS standard referral time for non-admitted patients every month between April 2014 and March 2015

1.2 Range of Services

The Trust provides first-rate clinical services and exceptional research output.

We have an outstanding Research and Development pedigree; with over 500 active research projects across 10 R&D programmes. Every one of these programmes has been consistently

given the top rating by the NHS R&D Directorate. The table below illustrates the inter-relationship between our R&D activity and clinical services.

Several of our clinical services have been formally designated as national services by the Department of Health: Heart and Lung transplantation, Ventricular Assist Devices (LVAD), Pulmonary Hypertension and Primary Ciliary Dyskinesia.

Research Programmes		Clinical Services
Congenital Heart Disease	↔	Adult Congenital Heart Disease Pulmonary Hypertension Paediatric Respiratory Paediatric Congenital Heart Disease Foetal medicine Primary Ciliary Dyskinesia
Chronic Coronary Heart Disease and Atheroma	↔	Acquired Heart Disease
Failing Heart	↔	Heart Failure Heart & Lung Transplant
Critical Care	↔	Critical Care relating to Heart and Lung
Chronic Respiratory Failure	↔	Chronic Obstructive Pulmonary Disease Sleep Ventilation Pulmonary Rehabilitation Lung Volume Reduction
Lung Cancer	↔	Lung and Upper GI cancer services
Severe Respiratory Disease	↔	Interstitial Lung Disease Acute Lung Injury Asthma & Allergy
Occupational and Environmental Medicine	↔	Occupational Lung Disease
Chronic Suppurative Lung Disease	↔	Paediatric and Adult Cystic Fibrosis Non – CF Bronchiectasis Aspergillosis Mycobacterial Infections

1.3 Organisation

The Trust Board is constituted as follows:

Non Executive Members	Executive Members
Interim Chairman, Mr Neil Lerner	Chief Executive, Mr Bob Bell
Mr Andrew Vallance-Owen	Medical Director and Responsible Officer, Dr Mark Mason
Ms Lesley-Anne Alexander	Chief Operating Officer, Mr Robert Craig
Ms Kate Owen	Associate Chief Executive - Finance, Mr Richard Paterson
Professor Kim Fox	Director of Nursing, & Clinical Governance, Mrs Joy Godden
Mr Richard Jones	Director of Service Development, Mr Nicholas Hunt
Mr Philip Dodd	
Mr Luc Bardin	

The Clinical Divisions are: Heart (RBH incorporating Cardiology Radiology and Cardiac

Surgery), Heart (HH incorporating Cardiology, Transplant, Radiology and Cardiac Surgery), Lung (cross-site incorporating Respiratory Medicine, Radiology and Lung Surgery); and Directorates of Paediatrics, Anaesthesia and Critical Care, Laboratory Medicine, Pharmacy and Rehabilitation and Therapies.

Non-clinical directorates are: Human Resources, Finance, Patient Services, Estates & Facilities, Communications and Public Affairs and Business Development & Commissioning.

1.4 Harefield Hospital Site

Harefield Hospital (HH) is a regional centre for cardiology and cardiothoracic surgery, and an international centre for adult heart and heart-lung transplantation. It is one of a small number of UK cardiac centres assisting in development of implantable mechanical ventricular assist devices in the management of end-stage heart failure. It also provides a primary intervention service for acute coronary syndromes to selected Trusts and the London Ambulance Service, in outer West London and the Home Counties. It has approximately 1,185 staff, 180 beds with 5 operating theatres, and 4 catheter laboratories.

1.5 Royal Brompton Hospital Site

The Royal Brompton Hospital (RBH) is a specialist cardiothoracic centre specialising in diseases of the heart and lung, with services for adults (Cardiology, Cardiothoracic Surgery, Radiology, and Thoracic Medicine) and Paediatrics. It has approximately 2,081 staff, 296 beds, 6 operating theatres, 5 catheter laboratories, a private patients' ward and extensive imaging facilities. The hospital has recently opened the Cardiovascular Biomedical Research Unit (BRU) in partnership with Imperial College London. This facility offers a CMR scanner, catheter lab and echocardiography suite for research purposes, as well as state of the art genetic analysis facilities.

A Respiratory Biomedical Research Unit was opened on the RBH site in 2010 offering extensive research facilities for lung disease. Following public consultation, it was agreed that inpatient paediatric surgery and investigations should consolidate at the Royal Brompton Hospital.

1.6 Clinical Governance and Quality

The Trust has an extensive programme of clinical governance and quality led by Mrs Joy Godden, Director of Clinical Governance and Nursing and Dr Richard Grocott-Mason, Medical Director. The programme is delivered through the organisation's systems and processes for monitoring and improving services, including sections for:

- Clinical audit and information
- Clinical risk management
- Research and development office
- Infection prevention and control
- Patient feedback
- Clinical Quality and Improvement

Consultant appraisals form an integral part of the process with each consultant undertaking annual appraisal with their line manager. There is also a programme of mandatory training

undertaken by all staff.

1.7 Regulation

The Trust was assessed by the Care Quality Commission as meeting all of the essential standards of quality and safety, which were inspected during 2012/13.

1.8 Research and Development

Research is a major activity at RBHFT. In pursuing its research role, it is closely likened with its association with the National Heart and Lung Institute (NHLI) which is a constituent division of Imperial College School of Medicine. At the last research assessment exercise, the clinical research carried out jointly between the hospital and NHLI was awarded a 5* rating (the highest possible rating, shared by only two other UK establishments). Consultant staff at Royal Brompton and Harefield NHS Foundation Trust are normally granted honorary status at Senior Lecturer level with the University of London through NHLI and Imperial College.

Over recent years the Trust has opened two Biomedical research units, one Cardiac and one Respiratory, in partnership with Imperial College.

The BRUs undertake pioneering research into heart regeneration, aiming to increase the understanding of poor heart function in people living with cardiomyopathy, arrhythmia, coronary heart disease and heart failure. The Cardiovascular BRU aims to be the leading national and international laboratory for the discovery of genes involved in cardiovascular disease and their use in diagnostic and therapeutic strategies. The BRUs offers cutting edge genomics facilities, using state-of-the-art next generation DNA sequencing, in order to directly focus on the genetic analysis of inherited heart and lung conditions.

At the beginning of 2013, the Research Management Committee established a Research Awareness Working Group to take forward the Trust's research strategic goals. The Working Group brought together the Research Office, Biomedical Research Units, Research Nurses, Communications, Patient and Public Involvement representatives and PALS to identify and execute a time-limited action plan to raise research awareness. New awareness initiatives complement research Patient and Public Involvement (PPI) events already being taken forward by both the Biomedical Research Units (Cardiac and Respiratory). Both BRUs also have patient advisory groups who contribute to BRU research activities by commenting on research proposals, advising researchers on recruitment and helping with public/patient facing material such as information sheets. The BRUs are also planning to start evaluating the impact of their PPI work during 2014.

The two Biomedical Research Units (BRUs) have been awarded five-year funding by the National Institute for Health Research (NIHR). The grant of almost £20 million will allow both the Cardiovascular and Respiratory BRUs to continue pioneering research into some of the most complex heart and lung conditions. During the period July-September 2013, 5 new grants were awarded totalling £657k. It should be noted that the two awards to Professor Eric Alton (£543k in total) are a result of his successful bid to become the Director of the NIHR Respiratory Rare Disease Translational Research Collaboration.

1.9 Imperial College London

The Royal Brompton Trust has established and maintained close links with Imperial College, which was established in 1907 in London's scientific and cultural heartland in South Kensington, as a merger of the Royal College of Science, the City and Guilds College and the Royal School of Mines. St Mary's Hospital Medical School and the National Heart and Lung Institute merged with the College in 1988 and 1995 respectively. Imperial College embodies and delivers world class scholarship, education and research in Science, Engineering and Medicine, with particular regard to their application in industry, commerce and healthcare. We foster interdisciplinary working internally and collaborate widely externally. Consequently, a significant amount of Medical Staff employed by Imperial College hold honorary contracts with the Royal Brompton Trust.

JOB DESCRIPTION

Title: Clinical Research Fellow in Paediatric Respiratory Medicine

Location: Royal Brompton Hospital.

Royal Brompton Hospital is the largest postgraduate specialist heart and lung centre in the United Kingdom. A fundamental strength of the hospital is close collaboration between the various clinical specialities which cover all aspects of heart and lung disease and collaboration on basic science research with the National Heart and Lung Institute (NHLI). The hospital enjoys first rate diagnostic and clinical support service, and services are organised into a clinical directorate structure, with each directorate led by a clinical director.

This post: is for two year the first instance, extendable to up to two years by mutual consent. It is suitable for an individual seeking experience in Paediatric Respiratory Medicine at the equivalent of ST6-8 level or someone post CCT looking to complement their existing training.

Department of Paediatric Respiratory Medicine

Consultants:	Prof Andrew Bush	Prof Jane Davies	Prof Sejal Saglani
	Prof Claire Hogg	Dr Louise Fleming	Dr Ian Balfour-Lynn
	Dr Siobhán Carr	Dr Hui-Leng Tan	Dr Rishi Pabary
	Dr Samatha Sonnappa		

Junior Medical Staff:	3 Specialist Registrars	2x National Grid
	3 Research fellows	(+ visiting short term research posts)
	1 Clinical Fellow	(Sleep and CSLD)
	10 ST1-3	(shared across all paediatric depts)

Clinical Nurse Specialists: 6 CF, 1 PCD, 3 Respiratory / Asthma

Respiratory Physiologists: 6 (3 Sleep)

The Paediatric Unit is part of one of the largest postgraduate specialist heart and lung centres in the UK. The Respiratory Unit houses one of the largest paediatric CF Centres in the UK, is one of four National Centres for the Management of primary ciliary dyskinesia and is also particularly renowned for assessment of difficult asthma, bronchoscopy training and empyema management. It has an active Sleep Unit with a large cohort of children on home non-invasive ventilation (~150). A subgroup of these has neuromuscular weakness and the department works closely with Professor Anita Simonds from the adult sleep/NIV service as well as with the London-wide NIV team based here at RBH. There are 7 out-patient clinics each week - cystic fibrosis (2), sleep (1) and general respiratory (7) with additional monthly asthma, allergy and fortnightly PCD / CSLD clinics.

Higher Specialist Training Syllabus: We offer all obligatory modules apart from acute asthma, and all desirable modules apart from infant lung function, transplant and rehabilitation, with

limited exposure to immune deficiency and tuberculosis. The hospital has very close links with Imperial College through the National Heart and Lung Institute (NHLI).

Paediatric Directorate Facilities

Children's Ward - 24 beds/cots, 4 bedded High Dependency Unit and 5 bedded Day Care Unit

Paediatric Sleep and Ventilation Unit – 4 beds

Cardiorespiratory High dependency Unit - 4 beds

Paediatric Intensive Care Unit and High Dependency -16 beds

Length of post

One year in the first instance, extendable to up to three years by mutual consent

Purpose of post

These posts were originally created in order to cover the expanding out-patient numbers, and to ensure that our on-call rota remains compliant at a 1 in 7, but present a unique opportunity to train future clinical researchers in paediatric respiratory medicine. The posts are therefore ideally suited for respiratory trainees wishing to spend a period in research aimed at completing an MDRes or PhD thesis, with any appropriate agreement from their Deanery with regard to the status of the period as OOPe. We would not exclude applications from trainees who are not in the National Respiratory Grid scheme although that is preferable.

Duties of the Post

The appointee will focus on either asthma or cystic fibrosis

Research – A research project, ideally a 2 year MDRes or 3-year PhD project in asthma or CF. There will be flexibility depending on the candidate's interests, although these should build on expertise and areas of focus within the groups.

Clinical – Attendance at 2 clinics per week. On call 1 in 7. Attendance and presentation at departmental teaching and research meetings. Other duties will include:

Difficult Asthma Fellow: attendance at the weekly difficult asthma meeting,
assessment of steroid response and ensuring the difficult
asthma registry is kept up to date

CF Fellow: participation in collection and curation of CSLD
microbiological strains
share of general laboratory duties

On Call

The fellow shares the managerial responsibility for their own rotas. The post is compliant with the European Working Time Directive. On call rota is non-shift 1 in 7 (from home) with prospective cover.

Education and Training

Weekly Paediatric Teaching Activities at the Royal Brompton Hospital (respiratory in bold).

Mon 8.00-9.00	Combined medical-surgical cardiology meeting
Mon 12.15 – 13.30	CF MDT
Mon 14.00 – 15.00	Echocardiology teaching
Tue 8.00-9.00	Paediatric Cardiology Seminar (including monthly Mortality & Morbidity meeting)
Tues 14.00	Difficult asthma meeting
Tues 16.00- 17.00	Paediatric Respiratory Research meeting (fortnightly)
Wed 8.00-9.00	Respiratory Seminars incl. monthly Journal Club, quarterly bronchoscopy review
Wed 9.30-12.00	Respiratory Consultant teaching ward round
Wed 11.00-12.30	PCD Management meeting (2nd Wed) PCD Diagnostic meeting (4th Wed)
Wed 12.30-1.30	Respiratory Radiology Meeting
Thu 1.15-2.15	Respiratory teaching Seminar for SHOs (run by SpRs)
Thu 1.00-2.00	Biomedical respiratory unit seminar
Thu 2.00-3.00	Multidisciplinary Paediatric Sleep Meeting
Thu 4.00-5.00	Cardiac morphology, seminar room level 4, Chelsea wing
Fri 8.30-9.00	PICU Journal Club / consultant Teaching

The National Heart and Lung Institute has excellent facilities for studying and extensive electronic journal access. The National Heart and Lung Institute is part of Imperial College, which greatly enhances the facilities available for studying and research.

The Royal Brompton Hospital has recently developed its Learning Zone and library.

Numerous postgraduate courses are held in the National Heart and Lung Institute and the Paediatric Department takes an active part. Postgraduate students are attached to the Department and receive tutorials and ward rounds from members of the Department.

Conditions of Service

The post is covered by the Terms and Conditions of Service for Hospital Medical & Dental Staff (England & Wales) and General Whitley Council conditions of service. The Contract of Employment will be held with Royal Brompton & Harefield NHS Trust. Full registration of the General Medical Council will be required.

This job description sets out the key tasks and responsibilities of the post. It is essential that it be regarded with a degree of flexibility, so that changing needs of the service can be met.

Trust mission To be the leading national and international centre for the diagnosis, treatment and care of patients with heart and lung disease, creating and disseminating knowledge through research and education

Patient care	To serve our patients by working with them to determine their needs, viewing the quality of care as being of paramount importance
Research	To translate the outcomes of research into improved patient care by evaluating new ideas and being innovative in how they are applied
Education	To provide education and training for our staff, while encouraging teamwork and valuing each member of the team for their involvement and specialist expertise

Any Further information

Further Information

Professor Jane Davies, Professor of Paediatrics Respiriology & Experimental Medicine and Consultant in Paediatric Respiratory Medicine

Tel: Gina Rivellini (PA) 020 7594 7986

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Dr Louise Fleming, Clinical Senior Lecturer and Consultant in Paediatric Respiratory Medicine

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Tel:

Email: s.saglani@imperial.ac.uk.

PERSON SPECIFICATION

Job Title: Clinical Research Fellow in Paediatric Respiratory Medicine

Department: Paediatrics

Date: November 2016

CRITERIA	D / E	Assessed by
Qualifications / Training		
MBBS or equivalent	E	A / I
MRCPCH or equivalent	E	A / I
Registration with GMC	E	A / I
Experience		
General paediatrics	E	A / I
Tertiary neonatal paediatrics	E	A / I
Paediatric respiratory medicine	D	A / I
Paediatric intensive care or high dependency experience	D	A / I
Skills, Knowledge and Abilities		
Technical and clinical skills required for paediatric respiratory medicine	E	I / R
Shows an approach based on critical enquiry and evidence based medicine	E	I / R
Ability to organise self and others	E	I / R
ALS/PALS/APLS	D	I / R
Research		
Interest in, and an ability to initiate & conduct research	E	A / I / R
Published research	D	A / I
Other		
Builds a strong and effective relationship with patients, their parents and families and colleagues and gain in their confidence and trust	E	I
Is able to cope with pressure as well as adapt to constant change and new demands	E	I
Demonstrates honesty, commitment, and integrity	E	I

Key: E = Essential D = Desirable A = Application I = Interview R = References

Appendix One

HEALTH CLEARANCE

Applicants invited for interview will be asked to complete a medical questionnaire for submission to the Trust's Occupational Health Service.

NB Medical Staff who will be undertaking clinical work will be required to provide written Proof of hepatitis B immunisation and antibody status, BCG and rubella immunisations. In the absence of such evidence the post holder will not be placed on the payroll or undertake clinical work until the evidence is produced to the satisfaction of the Trust.

The Trust requires that any doctor or dentist who directs the use of x-rays for procedures such as cardiac catheterisation, pacemaker insertions, orthopaedic procedures, etc, in patient investigations or administers radioisotopes to patients possesses a certificate as proof of training in accordance with the "Ionising Radiation (Protection of Persons undergoing Medical Examination or Treatment) Regulations 1988", and submits a copy of their certificate to the Medical Staffing Department. Courses to allow Trust medical staff to obtain the certificate are available through the Department of Medical Physics, Churchill.

CLINICAL GOVERNANCE

The post-holder will participate in the clinical audit, clinical effectiveness, risk management, quality improvement and any other clinical governance activities as required by the Trust, Health Authorities, and external accrediting bodies.

PERSONAL AND PROFESSIONAL DEVELOPMENT

The post-holder will be required to keep himself/herself fully up-to-date with their relevant area of practice. Professional or study leave will be granted at the discretion of the Trust, in line with the prevailing Terms and Conditions of Service, to support appropriate study, postgraduate training activities, relevant CME courses and other appropriate personal development needs.

MANAGEMENT

The post-holder will be required to work within the Trust's management policies and procedures, both statutory and internal, accepting that the resources available to the Trust are finite and that all changes in clinical practice or workload, or developments requiring additional resources must have prior agreement with the Trust. He/She will undertake the administrative duties associated with the care of his/her patients, and the running of his/her clinical department under the direction of the Clinical Director.

GENERAL

The post-holder will assume a continuing responsibility for the care of patients in his/her charge and the proper functioning of his/her department.

IMPORTANT GENERAL NOTE

The post-holder must take responsible care of his/her own health and safety and any other personnel who may be affected by his/her omission. Trust policies and regulations must be followed at all times.

INDEMNITY

Under NHS Indemnity, the Trust will take direct responsibility for costs and damages arising from medical negligence where it (as employer) is vicariously liable for the acts and omissions of its medical and dental staff.

Where junior medical staff are involved in the care of private patients in an NHS hospital, they would normally be doing so as part of their contract. It is advisable that junior doctors who are involved in work outside his/her employment should have medical defense cover. This includes Category 2 work, i.e. reports for insurance companies, cremation fees.

Core behaviours for all Trust staff

All staff will commit to:

- Act with honesty and integrity at all times
- Demonstrate respect for others and value diversity
- Focus on the patient and internal and external customer at all times
- Make an active contribution to developing the service
- Learn from and share experience and knowledge
- Keep others informed of issues of importance and relevance
- Consciously review mistakes and successes to improve performance
- Act as ambassadors for their directorate and the Trust
- Be aware of the impact of their own behaviour on others
- Be discreet and aware of issues requiring confidentiality

In addition, all managers and supervisors will:

- Value and recognise the ideas and contributions of all team members
- Coach individuals and teams to perform to the best of their ability
- Delegate work to develop individuals in their roles and realise their potential
- Give ongoing feedback on performance, and effectively manage poor performance
- Provide support and guidance to all team members
- Encourage their team to achieve work/personal life balance
- Actively listen to comments/challenges and respond constructively
- Lead by example, setting high standards
- Ensure that there are sufficient resources for their team and rebalance priorities accordingly
- Provide a safe working environment