

Job Description & Person Specification

Children and Young People Directorate, Oxleas NHS Foundation Trust

Post & Specialty:	Consultant Child & Adolescent Psychiatrist, Bexley CAMHS Getting Risk Support (GRS) Quadrant
Base:	Bexley CAMHS, Park Crescent, Erith, Kent DA8
RCPsych approval details:	LON SE CO-STH- 2022-00710 (Approved) 
Contract:	Number of programmed activities: 10 PAs
Professional Accountability:	Medical Director
Operational Accountability:	Clinical Director & Associate Director
Key working relationships and lines of responsibility:	<p>Quadrant Managers, GRS, Bexley CAMHS</p> <p>Quadrant Clinical Leads, GRS, Bexley CAMHS</p> <p>Clinical Lead, Bexley CAMHS</p> <p>Operational Manager, Bexley CAMHS</p> <p>Clinical Director</p> <p>Bexley CAMHS Lead Psychiatrist</p> <p>Service Manager, CAMHS</p> <p>Children and Young People Service Director</p> <p>Associate Director, CAMHS</p> <p>Responsible Officer</p> <p>Medical Director</p> <p>Chief Executive</p>

Our Activities

Oxleas offers a wide range of health and social care to people living in South East London including: community health care, learning disability services and mental health care such as psychiatry, nursing and psychological therapy.

Our multidisciplinary teams look after people of all ages and we work closely with other parts of the NHS, local authorities and voluntary organisations.

We care for people in many different settings such as hospitals, health centres and in people's homes. We manage hospitals including Queen Mary's Hospital in Sidcup and Memorial Hospital in Greenwich as well as the Bracton Centre, our medium secure unit for people with mental health needs.

We also provide healthcare to prisoners across South East London and Kent. We are one of the largest providers of prison healthcare and work with a range of organisations to give prisoners the physical and mental healthcare they need.

We employ around 3,600 members of staff including nurses, doctors, therapists, healthcare assistants and social workers. We were rated 'Good' across all domains by the CQC in 2017.

As an organisation Oxleas sees itself as offering the best practice in 'needs led technology' that has been implemented through the electronic care records, and an intranet system to support best clinical practice. The trust has a successful track record in submitting bids for new, innovative service developments.

Our purpose

Our purpose is to improve lives by providing the best quality health and social care for our patients and carers. We do this by putting our values into action:

- **We're Kind:** We show consideration, concern and thoughtfulness towards everyone.
- **We're Fair:** We embrace difference, treat everyone with respect and promote diversity, equity and inclusion.
- **We Listen:** We always seek to understand, learn, and improve.
- **We Care:** We work together and innovate to put our service users at the heart of everything we do.

Trust Details

Oxleas NHS Foundation Trust works closely with a variety of partners to ensure that our services are well integrated and wide-ranging.

Oxleas Directorate Structures

Services are organised in the following directorates in line with the drive to implement PbR in mental health:

Directorate	Clinical Director	Service Director
Adult Community Physical Health	Vacant	Sarah Burchell
Adult Community Mental Health	Dr Kemi Mateola	Lorraine Regan
Adult Acute and Crisis Mental Health	Dr Ajay Bhatnagar	Aisling Clifford
Children and Young People's Directorate	Dr Sabitha Sridhar	Lisa Thompson
Forensic and Prison Services	Dr Harneet Hundal and Peter Stevens	Lawrence Mack
Adult Learning Disability Services	Sandra Baum	Lorraine Regan

- **Children and Young People's Directorate**

The Children and Young People's Directorate was formed in 2012 bringing together CAMH Services with Specialist Community and Universal Services across Bexley, Greenwich and Bromley. The philosophy of the directorate is to provide integrated services around the needs of each child, with effective and efficient delivery of all aspects of care.

Care planning around those young people with significant or complex mental health/physical needs is supported. Integration of care pathways around neurodevelopmental disorders is a priority, with the Directorate supporting the view that there is "no wrong door"; services are developed to ensure that children, young people, their families and carers are central to the delivery of services.

Across the C&YP Directorate, Oxleas delivers:

- CAMH services
- Community Paediatrics
- Speech and Language Therapy
- Occupational Therapy
- Physiotherapy
- Music Therapy
- Bluebell House short stay service
- Integrated Children's Service (Greenwich)
- Children's Nursing
- Dietetics
- Audiology
- Looked after Children's Services
- Health visiting
- School nursing

The Clinical Director for the C&YP Directorate is Dr Sabitha Sridhar and the Service Director is Lisa Thompson. Sheena Gohal is the Associate Director for CAMHS, the sub-directorate in which the post operates.

South London and Maudsley NHS Foundation Trust (SLaM) provide a number of child/adolescent services which are available to the CAMHS services in Bexley, Bromley and Greenwich, including a children's psychiatric inpatient unit, adolescent inpatient unit and day care services, OCD, BDD, conduct problems and eating disorder clinics. Other mental health services provided by SLaM include:

- Neuropsychiatry and neuropsychology
- Organic Brain Injury
- Pervasive Developmental Disorders including Asperger's Syndrome
- Mother and Baby Unit:
- Specialist day therapeutic services for patients with personality disorder

- Behaviour Therapy Services
- Refractory illnesses
- Chronic Fatigue Syndrome

The 'South London Partnership' (SLP) New developments in crisis and acute care

The Trust is currently engaged in a number of developments related to improving services for young people with crisis and acute presentations.

Building on existing close partnerships, in 2017, the *South London Partnership* was formed with Oxleas NHSFT, South London and Maudsley FT and South West London and St George's Trust, to deliver New Models of Care for adult forensic patients and for children and young people. The partnership was successful in bidding to become Wave 1 (Adult forensic) and Wave 2 (Tier 4 CAMHS) **New Model of Care** sites in conjunction with NHSE which went live in April and October 2017 respectively.

Since its inception, SLP have focused on adding value and driving improvements in patient experience and outcomes across the south London population. Improvements have included a 93% decrease in out of area placements for young people and enhanced community based interventions (for e.g. DBT services and crisis services) which have reduced the need for hospital admissions. SLP are a provider collaborative from 1st Oct 2020, responsible for managing budgets and the patient pathways for inpatient and crisis care in CAMHS across two Integrated Care systems and 12 CCG's.

Medical Staff in CAMHS (Bexley, Bromley & Greenwich)

BEXLEY CAMHS	
Dr Helen Mann, Consultant Psychiatrist	8 PAs GMH Quadrant (currently Generic Team)
Dr Annette Amodu, Consultant Psychiatrist	1.5 PAs GMH Quadrant (currently LDND Team)
Vacant Post (currently not filled – THIS NEW POST)	10 PAs GRS Quadrant (currently Adolescent Team)
Vacant Post (currently filled by locum)	10 PAs GMH Quadrant (currently LDND Team)
Dr Sabitha Sridhar, Consultant Psychiatrist	4 PAs GMH Quadrant And Clinical Director
Dr Pretesh Shah, Consultant Psychiatrist	10 PAs GRS Quadrant (currently Adolescent Team) & Clinical Lead
ST 4-6 Higher Trainee	GRS Quadrant (currently Adolescent Team)
GREENWICH CAMHS	
Dr Lisa Michelmore, Consultant Psychiatrist	8 PAs Adolescent Team
Dr Alice Debelle, Consultant Psychiatrist	10 PAs Adolescent Team
Dr Femi Balogun, Consultant Psychiatrist	5 PAs LAC/EOC Team
Dr Marie Barbary, Specialty Doctor	4 PAs LAC/EOC Team
Dr Mona Botros, Consultant Psychiatrist	10 PAs LD/Neurodevelopmental Team
Dr Elizabeth Palmer, Consultant Psychiatrist	1 PA Generic Team 3 PA DBT Team
Dr Shahana Hussain, Consultant Psychiatrist	9 PAs Generic Team
Core Trainee	Generic Team

BROMLEY CAMHS	
Dr Francesca Tagliente, Consultant Psychiatrist	8 PAs Generic & LAAC Team
Dr Remus Florea, Consultant Psychiatrist	6 PAs Neurodevelopmental Team 4 PAs Generic Team
Dr Priya Deshpande, Specialty Doctor	7 PAs Generic Team
Dr Mehrak Vaezinejad, Consultant Psychiatrist	8 PAs Neurodevelopmental Team
Dr Natalia Wielgosz, Consultant Psychiatrist	7 PAs Adolescent Team
Dr Ana Rivadulla-Crespo, Consultant Psychiatrist	6 PAs Adolescent Team
Dr Lizzen George, Specialty Doctor	7 PAs Adolescent Team
CAMHS CRISIS & DBT SERVICE	
Dr Nazila Goodarzian Consultant Psychiatrist	8 PAs CAMHS Crisis Team

• **Bexley CAMHS**

The London Borough of Bexley: Key Facts

The London Borough of Bexley has a total population of approximately 232,800 with around 54,000 being children and young people under the age of 18, which is 23% of the population. The number of adolescents for the borough is projected to increase over the next 15 years. The demographic and social characteristics of the area vary remarkably across the districts with a marked north/south divide, with approximately 18.7% of the borough's children living in poverty. Children and young people from minority ethnic groups account for 26% of all children living in the area, compared with 21% in the country as a whole. The largest minority ethnic groups of children and young people in the area are Black/Black British and Asian/Asian British.

CAMHS in Bexley

Transforming Bexley CAMHS

Bexley CAMHS is transforming its service, with a focus on improving services and the collective wellbeing for our Children, Young People, Families and Staff. As part of the transformation, Bexley CAMHS is currently in the process of redesigning its Service Model to align with the Thrive framework, a nationally recognised approach, to help us deliver timely, responsive and needs based mental health interventions for the children and young people in Bexley.

Our vision for a Transformed CAMHS

- Bexley is a place where every child and young person can achieve their full potential.
- We all recognise and value the importance of promoting good mental health and building resilience in children, young people and families.
- Everyone knows where to get help when they need it and is clear about what's on offer.
- No child or young person should be left without help when they are experiencing mental distress or trauma.
- Children and young people should keep getting help until they are confident that they are well enough that they don't need it anymore.

- Every child and young person is treated as an individual, setting their own targets and goals and being able to influence how services develop in future.
- Everyone who works with children will have the skills, capacity and time to deliver the best care for every child and young person.
- Schools will be able to develop “a whole setting” approach to mental health and wellbeing.

Supporting Culture

- Collaboration – across the service and with external partners.
- Continuous Improvement – to optimise service design; respond to patient, family, staff and commissioner needs and improve the quality of the service.
- Focus on Needs of CYP and families - one that responds to needs of children and young people’s emotional and mental health.
- Early intervention – we know early intervention works, it’s also a key part of the Thrive framework.

By joining Bexley CAMHS at this exciting time, you will be able to contribute to the redesign, to help shape the service, new ways of working and become involved in implementation. We encourage this through monthly staff briefings and an ongoing series of staff engagement workshops, to understand staff ideas and perspectives on the design and implementation work. Whether you have previous experience of working within CAMHS or not, we feel everyone can bring a fresh perspective to help shape the future of Bexley CAMHS.

The Bexley CAMH services are based at Children and Young People Service, Park Crescent, Erith, Kent DA8 3EE and Queen Mary’s Hospital, Frogna Avenue, Sidcup, Kent DA14 6LT. Both of these sites are integrated Children and Young People Hubs within the London Borough of Bexley. The strong multidisciplinary teams includes psychiatrists, clinical psychologists, child psychotherapists, social workers, family therapists, occupational therapists, nurses and support workers.

Bexley CAMHS is a specialist mental health service with close links to local partner agencies including community children’s services, acute paediatrics, social services and education. Bexley CAMHS provides a multidisciplinary consultative, assessment, diagnostic and treatment service for children and adolescents from birth to 18, particularly to those at high risk and those with severe and persistent problems. There are small specialist services providing assessment and treatment to Looked After and Adopted Children, Under 5’s and for Learning Disabilities & Neuro-developmental Disorders.

Bexley CAMHS has played a leading part in the development of children’s service and is represented on many of the major planning groups for children’s services within the borough. We are finalising the process of strategic change in associated with partner agencies, alongside CAMHS teams in Bromley and Greenwich, which are also managed by Oxleas. All 3 boroughs received additional transformation funding as part of The Future in Mind Government Taskforce plans.

New posts

Two new posts have been created : one post holder will be based in the Getting Risk Support Quadrant (this post) and one post holder will be based in the Getting More Help Quadrant). Details on the make up of the Quadrants can be found below.

Getting More Help

The Getting More Help (GMH) Quadrant provides for Children, Young People and Families who will benefit from long-term treatment. For Bexley CAMHS, which is a specialist CAMHS service, the majority of patient need is expected to be met by staff working in this quadrant.

This quadrant includes:

- Needs led Case Management
- Needs led Evidence-Based Treatment
- MDT Review
- Additional Clinical Treatment
- Special Interest MDTs (e.g. Neurodevelopmental, Edge of Care/LAAC/U5s etc.)

There is expected to be a hub and spoke model to manage and oversee the work and the MDT reviews for cases in the quadrant. The management and clinical leads for the quadrant will operate a central MDT that oversees the caseload and interventions.

Supporting this central MDT will be a series of Special Interest MDTs or workshops that discuss relevant cases, one of these will be structured around neurodevelopmental disorders and intellectual disabilities and the post holder will be expected to join this MDT and offer specialist input.

There is an intent within this service design to build specialist expertise and flexibility to meet fluctuating pathway demand, with many cases being supported by a combination of specialist and generic skills. The post holder will also be expected to have a caseload reflecting this.

If the post holder had additional expertise they may also be able to join other special interest MDTs e.g. Under 5s and Looked after & adopted Children, Trauma etc.

Services at the Getting More Help quadrant for children and families would consist of:

- Longer, evidence based interventions offering a range of therapeutic interventions such as Cognitive Behavioural Therapy, Family Therapy etc
- Longer, evidence based interventions CYP IAPT Provided primarily by Health Outcomes plus goals based measures

Getting Risk Support

Getting Risk Support is for Children, Young People and Families for whom there is a risk of harm to themselves or others.

This quadrant includes:

- Assessment and MDT (for urgent referrals)
- Needs led Case Management
- Needs led Evidence-based Treatment
- MDT Review
- Additional Clinical Treatment
- Therapeutic Groups

There will be a quadrant MDT that oversees the work and will work with other quadrants, in relation to ongoing intervention and step down from Getting Risk Support.

The focus and importance in this quadrant will be on whole system multi-agency collaboration to manage risk and the need for holistic CYP and Family centred approaches across all agencies.

Services at the Getting Risk Support quadrant for children and families would consist of:

- Offering support to the system around the child / young person and family to enable integrated multi agency approaches with joint accountability or outcomes.
- Safety plans co produced between agencies and young people
- Emphasis on developing personal support network

When the post holder starts in Bexley the service will be in the middle of the implementation of the new design based on the Thrive model. As a result there may be some overlap with the old model of teams. The following includes some information on the existing teams:

Generic Team

The function of the team is as follows:

- i) To provide assessment and uni-disciplinary and multi-disciplinary clinical interventions for children, young people, their families and carers with moderate significant and enduring mental health difficulties. The clinical work is short and longer term provided on an outreach basis, close to home in non-stigmatising settings where appropriate.
- ii) To provide care in partnership with the child's caring network – to advise and support where necessary.
- iii) To provide mental health advice, consultation, training and support to professionals working with children in order to enhance the capacity and capability of those professionals / services to identify mental health problems and provide early intervention of mild to moderate mental health difficulties.

This team provides for children and young people across the age range of birth to 18 who present with severe and enduring mental health difficulties; signs and symptoms of a major psychiatric disorder; active suicidal or self harming ideas, attempted or actual self harm under the age of 13, somatic disorders or psychosomatic difficulties and extreme trauma. A service for under 5's is also provided in accordance with the eligibility criteria.

Learning Disability / Neuro-developmental Team

The function of the team is as follows:

- i) To provide clinical assessment and treatment for children or young people whose primary presentation relates to a learning disability or neuro-developmental disorder including ADHD, ASD or Tourette's, and according to the CAMHS eligibility criteria and the eligibility criteria contained in the Service Specification for the Aiming High Psychology Service. It is envisaged that for children with co-morbidity, there may be the need for joint working across teams.
- ii) To provide mental health advice, consultation, training and support to professionals working with children with learning disabilities and neuro-developmental disorders in order to enhance the capacity and capability of those professionals / services to identify behaviour / mental health problems and provide early intervention of mild to moderate difficulties.

LAAC (Looked-After and Adopted Children) Team

Function of the LAAC team:

- i) To provide mental health assessment and treatment for adopted and looked-after children and young people who have mental health difficulties along with their families and carers. To provide care in partnership with the child's caring network.
- ii) To provide mental health advice, support, consultation and training to professionals and carers involved in working with Looked-After children in order to enhance the capacity and capability of those professionals/carers to be sensitive to the mental health needs of LAC.

The LAAC team to provide a service to all Looked-After children/young people regardless of the placing authority and adopted children. Permanent psychiatry input into LAAC will be planned as part of the new service reconfiguration.

Community Health & Well-Being Service (CHeWS)

This is a new service currently being developed as part of the Bexley Transformation Plan¹

The function of CHeWS:

- i) To provide community outreach from CAMHS professionals, integrated with School Nurses, with links to Health Visitors and GPs.
 - a. Early identification of need and facilitate children and young people being able to access the right support at the right time.
- ii) To provide specialist mental health advice, consultation and training to the network of community children's services and evidence-based, outcomes focussed interventions to children and young people with emerging mental health difficulties.
- iii) Mental health consultation and advice - available to the community of children's services across Bexley, with dedicated named CAMHS professionals allocated to local care networks, clusters of schools and GPs.
- iv) To provide timely advice to facilitate early identification, support community resilience / offer self-help and management strategies, referral, joint assessments and co-working.
- v) In-reach to schools will create a system to support children and young people with psychological difficulties that impact on their learning, attainment and participation in school life.
- vi) To triage (with the use of psycho-metric measures), advise, signpost, provide targeted consultation to parent and school and formulate plans for maintenance/ relapse prevention or step-up/ referral on; the precise nature of this help will be tailored to the needs of the children, young people and the school staff.
- vii) To work with GPs, Social Care, YOS and CAMHS to identify the best ways to structure the liaison so that timely advice, joint assessments / interventions can be available when the need arises.

Adolescent Team

The function of the Adolescent Team:

- i) To provide a rapid response assessment and treatment service with intensive interventions to young people between 13 and 18 years of age, who experience significant or acute mental health difficulties.
- ii) To support young people to remain in the community where possible and for those who are admitted to inpatient care, to facilitate transition to and from community services.
- iii) To provide consultation, support and work in close partnership with professionals and carers in the young person network.
- iv) The team includes 11.6 WTE Adolescent Mental Health staff, including nursing, psychiatry, psychology, psychotherapy, occupational therapy, family therapy and support worker colleagues. The team is headed by the Team Leader, Lead Clinician and the

¹ As of 2015/16

Consultant Psychiatrist. A range of evidenced based clinical interventions is offered in addition to crisis management.

- v) The team uses a Mentalisation Approach to inform the work with young people.

• Professional Responsibilities

The Consultant Psychiatrist will work with all the disciplines in the Getting Risk Support Quadrant (currently the Adolescent team) to provide assessment, consultation, advice and support. The post holder will work with internal and external agencies within the child's network to ensure the best possible clinical outcomes for young people presenting in Crisis and young people requiring intensive support.

Role of psychiatry

The consultant psychiatrist will provide psychiatric assessments and interventions. The post holder will be expected to provide consultation and some clinical supervision to clinicians in the team. The position being advertised (10PAs) is expected to provide approximately 9 to 12 assessments/reviews per week - this will vary depending on the complexity of cases.

The caseload is anticipated to be up to 30 in GRS.

• Continuing Professional Development (CPD)

- Peer Review/Reflective Practice Meetings. These meetings are held once a month, and it is an opportunity for consultant to bring to the body of senior psychiatrists, challenging or complex cases for discussion.
- The post holder is expected to join a Consultant peer group; there are two available for the CAMHS Consultants in the Directorate. The post holder will have regular supervision with senior colleagues in addition to the peer group if required.
- Medical Advisory Committee (MAC). The post holder will be a member of the Trust-wide MAC that meets quarterly. The committee plays an important role in providing professional advice to the Trust management, on operational and strategic matters. It is also a forum to discuss major developments in the Trust.
- The post holder is expected to be in good standing for Royal College of Psychiatrist's CPD
- The trust supports CPD and study leave arrangements are 30 days over 3 years

• Clinical Leadership & Medical Management

The post holder is ultimately responsible to the Chief Executive of the Trust. However, the professional accountability is to the Medical Director, Dr Abi Fadipe. The appraisal and job planning as well as approval of leave and support for the post holder will be the responsibility of the directorate's Clinical Director, Dr Sabitha Sridhar.

The MAC plays an important role in providing professional advice to the Directorate/Trust management, on operational and strategic matters. It is also a forum to discuss major developments in the Directorate/Trust.

• Appraisal & Job Planning

- The Trust has a responsibility to ensure that the medical workforce is up to date, fit to practice and compliant with relevant professional standards that will improve the quality of patient care. Medical revalidation is a statutory requirement for all licensed doctors.
- Appraisals and job plans must be undertaken annually. The Clinical Director, Lead Doctor and Trust designated appraiser(s) will be responsible for conducting the appraisal of doctors in each directorate. Doctors who have clinical or educational supervision responsibility will have a separate educational supervisor appraisal with the Director of Medical Education or a designated educational appraiser.

- The Responsible Officer (RO), Dr Abi Fadipe is accountable to both the GMC and the Trust for ensuring that the systems for appraisal, clinical governance and for gathering and retaining other local relevant supporting information are in place and are effective.
- The Induction Programme for each Consultant will be individually tailored to each post.

• **Teaching & Training**

- The director of Medical Education is Dr Femi Balogun.
- Higher trainees in CAMHS rotate into Oxleas via the South London Training Scheme.
- Core trainees in CAMHS rotate in all psychiatric specialties including CAMHS from the SLT scheme also.
- Academic sessions for higher trainees in CAMHS are organised by SLAM.
- There is the opportunity for the post holder to teach at some of the local weekly teaching programmes for trainees
- There are also opportunities to develop teaching modules for medical students from Kings College and participate in the Trust wide teaching programme for Core Trainees
- Participation in undergraduate and postgraduate clinical teaching
- Participation in the training of other disciplines
- Taking part in continuing medical education within statutory limits.

• **Research**

- Oxleas NHS Trust, as part of consultants' professional development, encourages research and other academic work, including teaching. The Trust has links with the Department of Psychiatry, The Institute of Psychiatry and an eligible candidate will be encouraged to apply for honorary lecturer/senior lecturer status
- Such an appointment will be subject to review by the head of department at the Institute of Psychiatry and GKT in discussion with the candidate and the Clinical Director. One programmed activity will be available for such work, which will be subject to review at annual job planning and appraisal
- The trust has a Medical Library and access to data bases regarding research literature
- Should the candidate have academic or research interests then he/she will be encouraged to have Special Interest Sessions within the Directorate for Service Development and Quality Improvement Work.

• **Mental Health Act & Responsible Clinician Approval**

The post holder would be expected to be a Responsible Clinician or be willing to undertake training to obtain Section 12(2) MHA and will be expected to renew this approval according to agreed procedures.

• **Secretarial Support & Office Facilities**

- There is dedicated team administration support to the post
- The Trust operates a hot-desking policy. There are breakout rooms which are allocated to clinical staff upon request. A laptop will be available and quiet individual offices are also available to use and can be booked by team administration. We no longer have dedicated offices in most of our clinical areas but every Consultant has access to a desk and a dedicated area for direct clinical care work.

• **Clinical Duties**

- Provision of psychiatric care to CYP in the Getting Risk Support Quadrant through evaluation, diagnosis and use of appropriate treatment plans/strategies for children presenting with mental health difficulties
- High quality note keeping and adherence clinical standards on our electronic patient record, RiO

- Contributing to decisions regarding care plans, discharges and treatment of patients in accordance with medical standards
- Consultation to the team around psychiatric issues
- Alongside the clinical leads and team manager ensuring patient throughput within the team
- Working collaboratively with colleagues to ensure delivery of the right treatment for each young person referred in keeping with evidence based practice and CYP IAPT framework
- To manage, appraise and give professional supervision to junior medical staff as agreed between consultant colleagues and the medical director and in accordance with the Trust's personnel policies and procedures. This may include assessing competences under the Modernising Medical Careers framework
- To ensure that junior medical staff working with the post holder operate within the parameters of the New Deal and are Working Time Directive compliant
- To undertake the administrative duties associated with the care of patients
- To participate in annual appraisal for consultants
- To participate annually in a job plan review with the clinical manager, which will include consultation with a relevant manager in order to ensure that the post is developed to take into account changes in service configuration and delivery associated with modernisation
- To work with local managers and professional colleagues in ensuring the efficient running of services, and share with consultant colleagues in the medical contribution to management

• **Training Duties**

- Participation in undergraduate and postgraduate clinical teaching
- Participation in the training of other disciplines
- Providing educational supervision of trainees and other disciplines
- Taking part in continuing medical education

• **Clinical Governance**

- Expected contribution to clinical governance and responsibility for setting and monitoring standards
- Participation in clinical audit or quality improvement projects
- Participation in service/team evaluation and the planning of future service developments.

• **General Duties**

- To undertake the administrative duties associated with the care of patients
- To record clinical activity accurately and comprehensively, and submit this promptly to the Information Department, in keeping with trust policies and procedures
- To participate in service and business planning activity for the locality and, as appropriate, for the whole mental health service
- To participate in annual appraisal
- To attend and participate in the academic programme of the Trust, including lectures and seminars as part of the internal CPD programme
- To maintain professional registration with the General Medical Council, Mental Health Act Section 12(2) approval, and to abide by professional codes of conduct
- To participate annually in a job plan review with the clinical manager, which will include consultation with a relevant manager in order to ensure that the post is developed to take into account changes in service configuration and delivery associated with modernisation
- To comply with the Trust's agreed policies, procedures, standing orders and financial instructions, and to take an active role in the financial management of the service and support the medical director and other managers in preparing plans for services.

• **External Duties, Roles and Responsibilities**

The Trust actively supports the involvement of the medical workforce in regional and national groups subject to discussion and approval with the Medical Director and, as necessary, the Chief Executive Officer.

• **Other Duties**

From time to time it may be necessary for the post holder to carry out such other duties as may be assigned, with agreement, by the Trust. It is expected that the post holder will not unreasonably withhold agreement to any reasonable proposed changes that the Trust might make.

• **Work Programme**

It is envisaged that the post holder will work 10 programmed activities over 5 days. Following appointment there will be a meeting at no later than three months with the psychiatry lead and team manager to review and revise the job plan and objectives of the post holder.

The overall split of the programmed activities is 7.5 to be devoted to direct clinical care and 2.5 to supporting professional activities (as per the Royal College of Psychiatrists recommendation). The timetable is indicative only. A formal job plan will be agreed between the post holder and clinical director three months after commencing the post and at least annually thereafter.

• **On-call & Cover Arrangements**

To participate in the Consultant out of hours on-call rota to cover evenings, weekends and Bank holidays. There is a nurse led out of hours CAMHS crisis team up to 10.00 pm at night every day of the week.

The psychiatry on-call rota has three tiers: foundation, core and GP trainees (on site); Higher trainee/Specialist Registrar (mainly adult and old age, and one to two CAMHS STs); and Consultants (general/adult; CAMHS; forensic; LD). All higher trainees have a comprehensive induction into CAMHS emergencies; core trainees and higher trainees access the CAMHS consultant on the telephone to discuss cases.

The frequency of the on-call is approximately 1 in 14. The on-call provision is for telephone advice only, and there is a 5% supplement of the basic full time salary paid for this.

The post will be covered by the terms and conditions of service for Consultants (England) 2003 as amended from time to time. Contracts have been agreed with the BMA local negotiators, but individuals may wish to discuss this further before acceptance of an offer of appointment.

• **Leave**

The post-holder is entitled to 32 days of annual leave, 34 days after completing a minimum of seven years' service; and 30 days study leave spread over three years.

• **Mentoring**

The post holder will have access to mentoring in accordance with the Trust's Mentoring and Coaching policy. The Trust is committed to facilitating a supportive mentoring scheme for all newly appointed consultants, and actively encourages consultants to participate, both as mentee, and as 'trained' mentor.

All new consultants are encouraged to take up the mentoring opportunity either through their initial induction with the Clinical Director, or at their introductory 'induction' meeting with the Medical Director. The Medical Director holds a list of Trust-trained mentors, and will put

forward a name for the mentee to consider. Further contact is then between the mentee and mentor.

- Draft Timetable [to be finalised at initial job planning meeting]**

Day	Time	Location	Work	Category	No. PAs
Monday	AM	Park Crescent Erith	Clinic	DCC	1
	PM	Park Crescent Erith	Clinical admin	DCC	1
Tuesday	AM	WFH	Audit/Qi/CPD	SPA	1
	PM	WFH	Audit/Qi/CPD	SPA	1
Wednesday	AM	Park Crescent Erith	Team Meeting (MDT)	DCC	1
	PM	Park Crescent Erith	Clinic- reviews/new case	DCC	1
Thursday	AM	Park Crescent Erith	Hub Meeting Management/Peer Group/CAMHS Psychiatry MAC/Teaching	DCC SPA	0.5 0.5
	PM	Park Crescent Erith	Clinic	DCC	1
Friday	AM	Park Crescent Erith	Clinic	DCC	1
	PM	Park Crescent Erith	Clinic	DCC	1
Total PAs	Direct clinical care				7.5
	SPA/CPD				2.5

It is expected that the Consultant will complete up to 8-10 follow ups/reviews a week, and on average one new assessment weekly; this will depend on complexity of cases. The caseload for the Consultant is expected to be approximately 30 cases. Care coordination will be by other members of the quadrant. This will be reviewed as part of job planning within the first 3 months of the role

- Wellbeing**

Employees play a vital role in Oxleas' progress towards our vision of improving lives. Our employees have a direct impact on the clinical outcomes and the experience of our patients. We are clear that when our staff feel well supported and satisfied with their work, the experience of our patients improves. Oxleas' Employee Health Promotion, Prevention and Wellbeing Strategy acknowledges that the work and the health and wellbeing of our employees are interlinked with the Trust's commitment to promoting an organisational

culture where wellbeing is embraced by all our employees. Through the strategy and the supporting action plan, we provide a framework for Oxleas to take a proactive and engaging approach to enhancing the health and wellbeing of our staff. This is achieved through wellbeing initiatives, employee support mechanisms and joint working with staff and their representatives, and local partners to identify and address areas for improvement. By annually undertaking a staff health and wellbeing questionnaire as part of our staff survey, we will work with employees to ensure our organisation identifies and minimises those issues which may impact negatively on staff health. We already have a number of effective policies and procedures in place to support employee health and wellbeing at Oxleas. We will continue our regular review of these to ensure that they support this strategy.

We run a number of Health and Wellbeing events across the trust and local programmes (which incorporates physical and emotional wellbeing) that underpins many of the initiatives. Oxleas recognises that its employees are from a range of backgrounds with different cultures, beliefs, abilities and sexual orientations. We will ensure that any initiatives suggested or implemented take into account these differences so that we do not knowingly preclude any particular group from participating. We provide policies, guidance and support to managers and staff so they have the necessary skills, knowledge and ability to support employees to improve their health and wellbeing. We also ensure that through a variety of means we provide information and support to our employees to increase their awareness of the importance of ensuring their own health and wellbeing. Information on all Wellbeing support is accessible on the Trust's intranet system.

The post holder will have access to the Occupational Health (OH) Department, Queen Mary's Hospital, Acorns Unit, Frogna Avenue, Sidcup, Kent DA14 6LT, 020 3960 5563 oxl-tr.qm-occupationalhealth@nhs.net. The OH team has access to a physiotherapist and psychologist, and the post holder may self-refer or be referred through their manager. The post holder will have access to the 24 hour Care First service, which provides free counselling, including face-to-face, and well as legal and financial support, online CBT and wellbeing resources. Information about Occupational Health and Care First will be disseminated at the Induction and regularly when in post to ensure the post holder has timely access to the details if help seeking is necessary.

Proactive local organisational systems are in place to support doctors' wellbeing following serious incidents whereby a dedicated senior clinician and management will provide support and advice as needed after the incident. Details of the senior clinician able to offer this support will be provided via the Medical Directorate at the time of initial induction. Additionally, a same day referral process to OH is available for employees experiencing a personal serious incident if required.

The post holder will benefit from timely job planning reviews when there are changes in regard to the pre-agreed workload e.g. If there are changes to the pre-agreed workload (e.g. unexpected cover of a different unit/service outside the casual cross-cover arrangement) a timely meeting with the line manager before cover starts will enable discussion of the feasibility of the change within the constraints of needing to manage a safe workload. Additional support will be sourced if required. A timely job plan adjustment will be arranged if a new working arrangement is to proceed.

The trust has several initiatives to support wellbeing that the post holder is encouraged to participate in. These currently include a Leadership Programme for new Consultants, flexible working, flexible retirement, lease vehicle scheme, cycle scheme, eye test scheme, menopause support, gym discounts, wellbeing events, mindfulness events, and the use of free bike sheds and on site showers at some locations. The post holder will form part of a consultant peer group who meet regularly.

Staff Benefits:

Funding for school holiday childcare
Eye test vouchers
free health checks
Annual staff awards
Great learning and development opportunities
A variety of staff networks to support you (Black and minority Ethnic network/Disability Action Group/Lesbian, Gay, Bisexual and Transgender network/Lived Experience Network)
Support from our Staff Partnership Team
Flexible working
Schemes to enable you to have a career break
Training with reserve forces
paid leave and special unpaid leave
Cycle to work scheme
Salary sacrifice lease cars
Electric charging points for EV car users across the trust
Interest free season ticket loan
NHS retail discounts
Pension scheme and life assurance
Pre-retirement courses
Employee wellbeing service (confidential advice, support and counselling)
Carer's leave/Disability leave

• External Duties

The Trust actively supports the involvement of the medical workforce in regional and national groups subject to discussion and approval with the Medical Director and, as necessary, the Chief Executive Officer.

• Special Interests

Should the candidate have academic or research interests then he/she will be encouraged to have Special Interest Sessions within the Directorate for Service Development and Quality Improvement Work

• Royal College of Psychiatrists Approval

This job description is awaiting approval by the Royal College of Psychiatrists' Regional Advisor and will be amended in line with any required recommendations of the College.

Visiting arrangements please contact

Dr Sabitha Sridhar

Clinical Director for C&YP Directorate & Lead Psychiatrist CAMHS

Shamara Bailey

Bexley Operations Manager

Oxl-tr.cypcamhsadmin@nhs.net

The Personnel Related Details - Person Specification

Qualifications and Experience	Essential	Desirable
MBBS or equivalent medical qualification	+	
Membership of the Royal College of Psychiatrists or equivalent		+
Inclusion in or eligibility for inclusion in the Specialist Register	+	
Experience in Neurodevelopmental psychiatry		+
Full GMC Registration with licence to practice at time of appointment	+	
In good standing with GMC with respect to warning and conditions on practice	+	
Approved under s12 mental health Act Approved clinician status	+	
Registered for the Continuing Professional Development Programme in the Royal College of Psychiatrists	+	
Training in the full range of effective therapeutic techniques to include psycho-education, medication and psychological therapies	+	
Basic computer skills, including ability to use e-mail and internet	+	
Membership of a Medical Defence Union	+	
Teaching		
Experience in teaching: Medical students, psychiatric trainees and other professional groups	+	
Experience and interest in multi disciplinary Training		+
Management and Audit		
Participation in Clinical Audit	+	
Management training		+
Management and supervision skills of junior doctors		+
Service Development		
Experience in developing a service component		+
Understanding of leadership		+
Negotiation skills	+	
Understanding of and experience in needs assessment		+
Personal Skills		

Ability to travel around community sites	+	
Holds and will use valid UK driving licence OR provides evidence of proposed alternative	+	
Sense of humour		+
Ability to work within a multi-disciplinary team	+	
Good organisational skills including time management	+	
Good communication skills	+	
Highest level of personal integrity	+	

The Personnel Related Details

CONDITIONS OF EMPLOYMENT FOR MEDICAL STAFF

1. The published Terms and Conditions of Service – Consultants (England) 2003 apply to this post including local Trust policies where applicable.
2. A doctor is required to reside within a distance of thirty minutes or ten miles by road from their principal place of work unless an employing organisation agrees that they may reside at a greater distance
3. The Trust will reimburse employees for official business mileage for a car user or a non-car user via employee expenses claim form.
4. The passing of a medical examination may be condition of appointment.
5. Salary scale: As per terms and conditions.
6. The Consultant must carry out the main responsibilities of this post satisfactorily.
7. Annual leave: 32 days increasing to 34 days.
8. Study leave is for a maximum of 30 days in 3 years (10 days a year) as per terms and conditions.
9. Notice period – permanent staff 3 months.
10. Sick leave/special/compassionate leave is subject to the Trust guidelines.
11. The post-holder must be fully registered with the GMC.
12. Rehabilitation of Offenders Act 1974. Because of the nature of the work for which you are applying, this post is exempt from the provision of section 4 (2) of the Rehabilitation of Offenders Act 1974. Applicants are, therefore, not entitled to withhold information about convictions which for other purposes are spent under provision of the Act. In the event of employment any failure to disclose such convictions could result in dismissal or disciplinary action by the Trust. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the job applies.

INFRASTRUCTURE SUPPORT AND FACILITIES FOR THE POST

Oxleas is committed to the development of working conditions that maximize the effectiveness of their staff and promote positive staff morale. The organisation has won Investors in People awards and has systems of rewarding innovation.

Confidentiality

The Post holder must maintain the confidentiality of information about patients, staff and other health service business in accordance with Trust Policy.

Risk Management

The Post holder will ensure compliance with the Trust's risk management policies and procedures. These describe the Trust's commitment to risk management, the recognition that our aim is to protect patients, staff and visitors from harm and stress and that all staff have a responsibility to minimise risk.

Infection Control

All staff are required to be familiar with the Trusts infection control policies, and national guidance in relation to infection control. All staff whose normal duties are directly or indirectly concerned with patient care must ensure that they complete mandatory infection control training and are compliant with all measures known to be effective in reducing Healthcare Associated Infections.

Equality, Diversity and Human Rights

The Post holder will treat all colleagues, service users, carers and members of the public with respect and dignity regardless of their gender, age, race, religious beliefs, religion, nationality, ethnic origin, social background, sexual orientation, marital status, disability, HIV/Aids status, criminal background and Trade Union status. The Trust has a Policy for Equality and Human Rights and it is the responsibility of all staff to ensure that this is implemented.

Health & Safety

All staff must be aware of the responsibility placed on them by the Health & Safety at Work Act (1974) to ensure that the agreed safety procedures are carried out to maintain a safe condition for employees, patients and visitors.

Professional and NHS Codes of Conduct

You are required to act at all times in accordance with the relevant professional Codes of Conduct and Accountability (including, where applicable, those for Board Members). In addition, all management staff must comply with the 'Code of Conduct for NHS Managers' and 'Standards of Business Conduct for NHS Staff'.

Safeguarding Adults & Children

Safeguarding Adults & Children is everyone's responsibility. Whatever your role within the trust the welfare of Adults & Children should be your paramount consideration. In cases of suspected abuse or neglect the duty of care that member of Oxleas staff owes to a child, will take precedence over any obligation to the parent or other adult.

All members of Oxleas staff who have contact with service users or their families, should be familiar with guidance on Child Protection/Safeguarding Children from their own Professional organisations; the trust and the London Safeguarding Children Procedures. Staff are also required to attend mandatory safeguarding children training.

Financial Management and Control of Resources

All staff are responsible for the security and the property of the Trust, avoiding loss or damage and being economical and efficient in the use of resources.

Staff are required to act in accordance with the rules and regulations as described in the Trust's Policy relating to the Financial Management and Control of Resources'.

Customer Care

It is the aim of the Trust to provide patients and clients with the best possible care. All staff are required to put the patient/client first and do their utmost to meet requests and needs courteously and efficiently.

Personal/Professional Development Planning/Mandatory Training

All staff should have a personal development plan and in conjunction with their manager, should actively determine and pursue agreed training and development needs and opportunities. All staff are required to attend mandatory training as designated by the Trust.

No Smoking

Oxleas NHS Foundation Trust has a no smoking policy. Staff are not permitted to smoke within or on Trust premises.