

# **NHS Consultant Psychiatrist**

# Job description and person specification

Post and specialty:	Consultant in General Adult Psychiatry This is an established post. The post holder will provide Consultant input to General Adult Services in Brighton & Hove in a community setting.	
Base:	East Brighton Community Mental Health Centre	
Contract:	Number of programmed activities (although applicants are welcomed wishing to work flexibly and, or work reduced hours) - 10	
Accountable professionally to:	Chief Medical Officer Peter Aitken	
Accountable operationally to:	Deputy Service Director Brighton & Hove, Carolyn Woods	
	Line Manager: Alison De Souza General Manager: Mark Melling	
	Deputy Director Brighton Division : Carolyn Woods	
	Clinical Lead Brighton Division: Dr Ali Chalu	
Key working relationships and	Interim Divisional Clinical Director: Simon Browes	
lines of responsibility:	Divisional Managing Director Brighton and Hove: Isabella Davis- Fernandez	
	Chief Operating Officer : John Child	
	Chief Medical Officer Dr Peter Aitken	
	Responsible Officer Dr Peter Aitken	
	Chief Executive : Jane Padmore	



### 1.0 Introduction

Sussex Partnership NHS Foundation Trust is a large NHS organisation that offers clinical and social care services to children, young people, adults and older adults, with emotional and mental health problems or learning disabilities. Services are provided to the people of Brighton and Hove, East Sussex and West Sussex with Children & Young People's Services provided across Sussex and Hampshire. The Trust operates as part of a wider network of health and social care and works in partnership with both statutory and non-statutory agencies. The Trust benefits from a thriving Sussex-wide psychiatry training scheme where Health Education Kent, Surrey and Sussex provide foundation, GP, core and higher trainees. We work closely with Brighton and Sussex Medical School; a partnership between the Universities of Brighton and Sussex. In 2015 we became a member of the Association of UK University Hospitals, the representative body for university hospitals with major teaching and research interests across the UK and internationally. Our vision is to improve the quality of life for the communities we serve. The clinical strategy and organisational strategy we have developed underpin this by providing frameworks to enable sustained improvements in the quality of care we provide. With our partners in the Sustainability and Transformation Partnership, we have developed a compelling case for change in mental health services across the STP which is comprised of 24 organisations and strives to improve the links between health and social care to better serve our communities. In January 2018 the Trust was awarded an overall rating of Good by the Care Quality Commission (CQC) and was assessed as Outstanding for caring. This was maintained in February 2019.



### 2.0 Trust details

Sussex Partnership was formed in April 2006 as an NHS Trust and established as an NHS Foundation Trust with Teaching Trust status in August 2008. We employ approximately 5000 staff, serve a total catchment population of more than 2 million and generate an income of £250 million.

In 2015 the Trust reorganised the way it delivered services, establishing Care Delivery Services (CDS), tasked with providing overarching leadership for care groups and / or geographical areas. In 2018 we have 7 fully established CDS's. Overall leadership of each CDS is provided by a service director and/or a clinical director, with a multi-disciplinary leadership team (including a range of clinical professions as well as business, finance, HR, IT and estates and facilities support staff) providing additional leadership and governance oversight. The CDS model has helped us continue to improve services for patients and carers and is supported by Clinical Academic Groups and in keeping with our Vision, Clinical Strategy and Organisational Strategy. Work continues to provide consistently high quality services, working together in partnership with each other, the people who use our services and other organisations.



### 3.0 Service details

- **3.1 Brighton and Hove** is a vibrant University city situated between the sea and the South Downs with a population of around 289,000. The city offers excellent access to London and is in close proximity to Gatwick Airport. Brighton is proud to be a diverse and inclusive city, and this is reflected in the staff mix employed by SPFT, and by the ethos of the Trust. Brighton & Hove is the 102nd most deprived local authority of the 326 in England according to the 2015 Index of Multiple Deprivation. In 2015, 45% of the population of the city lived in the 40% most deprived areas in England and only 7% in the 20% least deprived areas. The health of people in Brighton and Hove is varied compared with the England average. About 15% (6,600) of children live in low income families. Life expectancy for both men and women is similar to the England average.
- **3.2** The Trust is seeking an NHS Consultant Psychiatrist to join the Assessment and Treatment Service (ATS) East Hub for Brighton & Hove. This vacancy has arisen due to the retirement of the current substantive post holder, and the Trust regards this as an opportune moment to maintain and continuously develop the functioning of the team and the service that we provide.

This post is one example of the commitment of the Trust to develop better provision and capacity for service users, families and carers using the service in challenging times. This post adds to the medical establishment of the team providing over 3.0 whole time equivalent Consultant Psychiatrists for the locality area.

Applicants wishing to job share or work part time are also welcomed to apply. Many of the Consultants working at present in Brighton and Hove work reduced hours, and flexible working is encouraged and supported, to help support staff manage a healthy work life balance.

### 3.3 Detail of the geographical area the post covers

Brighton and Hove Community services are split in to two main teams, East and West ATS, each one further subdivided in to 3 smaller clusters. Each cluster has a geographical patch determined by alignment to a small number of GP surgeries, this helps facilitate good liaison with our Primary Care colleagues. We are also fortunate to have a large array of third sector organisations in Brighton whom we have developed strong links with. This post will be aligned to one of these clusters. East ATS is currently based at Brighton General Hospital, Elm Grove, Brighton. West ATS is currently based at Mill view Hospital and Hove Polyclinic, Nevill Avenue, Hove.

# 3.4 The current multidisciplinary team establishment for East Assessment and Treatment Service is as follows WTE Job Title 1 Service Manager 1 Team Leader 3 Cluster/professional leads 4.0 Consultant



	1.2	Speciality Doctor	
	5.17 Clinical Psychologist		
	10 Nurses		
	2 Music Therapist/Registered Nurse Associate		
	3.8     Occupational Therapists		
	6.8 BHCC Social Workers		
	2.4 Mental Health Being Practitioners (MHWP)		
	3	Support Time Recovery (STR) Workers	
	9	Admin and Clerical staff	
3.5	Psychiatry do	ctor names associated with this team and areas they cover	
	<ul> <li>Ardingly Cluster - Dr. Tim Sales</li> <li>St. Peter's Cluster - Dr. Sabine Munzinger</li> <li>Park Crescent Cluster - vacant - post being recruited into.</li> </ul> SPFT is a teaching Trust, and we have strong links with Brighton and Sussex Medical School (BSMS). Every cluster has trainees attached, including FY doctors, GP trainees, core or higher trainees. We also provide training for medical students and Physician Associate students from BSMS SPFT is a teaching Trust, and we have strong links with Brighton and Sussex Medical School (BSMS).		
3.6	Availability of other relevant local mental health services		
	The postholder will be expected to develop an understanding of the role of other agencies and services, in particular social services and voluntary services working with adults. You will liaise with these and other local services detailed below in 3.8. You may be required to attend meetings with other agencies or different teams within Sussex Partnership.		
3.7	Details of inpatient service facilities		
	There are 5 acute inpatient wards within Mill View Hospital. The post holder will not carry any responsibility for patients when they are under Acute services except when on the on-call rota. There are consultant psychiatrists employed for the inpatient services, and good working relationships exist between Community, Acute and Urgent care colleagues.		
3.8	Teams that su	pport the post holders' team	
	Other services	supporting the Assessment and Treatment team are:	
	• Lighth	ouse - a service for people who have a personality disorder;	
	A shore	rt-term rehab team – provides practical support for up to 3 months.	



	<ul> <li>A long-term rehab team – for patients who require more intensive support than ATS can provide, and who have particular recovery goals.</li> <li>Sussex Eating disorder service (SEDS) – for patients with complex and severe ED.</li> <li>Brighton and Hove Eating Disorder Service (BHEDS) – for less severe ED, GPs can refer directly.</li> <li>Perinatal service – a comprehensive service based at the Royal Sussex County Hospital who provide assessment and treatment for up to 2 years postnatal</li> <li>Neurodevelopmental service – for the assessment and treatment of neurodivergent conditions such as ASC and ADHD</li> <li>Assertive Outreach team - for those who have difficulty in engaging.</li> <li>Group Treatment Service - providing group work for patients within the ATS;</li> <li>Mental Health Homeless team - dedicated to specialising in rough sleepers;</li> <li>Mental Health Rapid Response service (MHRRS) – 24-hour service, which is dedicated to taking phone calls directly from GPs where there is an urgency for an assessment to be carried out immediately or within four hours. Any one residing in Brighton and Hove can self-refer to MHRRS. This also has an independent Nurse Prescriber within the service,</li> <li>SMILCS- Severe Mental Illness Locally Commissioned Services-this team offers a step-down opportunity for people with severe and enduring mental health problems, who are cared for by experienced nurses before being fully discharged to the GP.</li> <li>Crisis resolution Home Treatment Team (CRHTT)</li> <li>Mental Health Liaison Team – based at the Royal Sussex County Hospital</li> <li>HIV liaison services</li> <li>Specialist Psychological services – for specific interventions, such as EMDR</li> <li>Family therapy clinic</li> <li>Immuno-psychiatry clinic – providing additional assessment and treatment advice for mood disorders coupled with co-morbid autoimmune conditions.</li> <li>Neurodivergent Brain Body Clinic- assessing physical healt</li></ul>
	• Street triage – supporting the police in Brighton and Hove to assess individuals in crisis in the
	community when Police assistance has been called for
3.9	Details of Trust-wide consultant network
	In Brighton we have a monthly Medical Advisory Committee where all consultants come together and have the opportunity to strengthen working relationships and discuss relevant topics. There is also a monthly Trust wide Consultant Balint Group. The postholder will be expected to join a Consultant Peer group.
3.10	The operations of the local services to which this consultant post relates: Assessment and Treatment Services (ATS) works across 2 Hubs in Brighton and Hove. This involves closer working with SOAMHS as the Trust has moved to a needs-led rather than an age-led service within Assessment and Treatment hubs.



3.11	<b>Care Delivery Service management and governance arrangements</b> The post-holder is expected to participate in Trust Clinical Governance and is responsible for ensuring that standards are adhered to in their team, through regular clinical audit. Service evaluation and patient feedback should be a regular part of the team's duties in order to plan for future service development.		
3.12	Clinical input and service development time		
	The breakdown for this post is: 7.5 PAs Direct Clinical Care (DCC) and 2.5 PAs for Supporting Professional Activities (SPA).		
3.13	Summary patterns of referral and the systems in place for caseload flow		
	Referrals to the service are received via Triage either as routine 28 day or priority five-day referrals. Triage will screen the referrals and allocate to the relevant service.		
	Each ATS hub is split into three MDT cluster teams, with some triaged for medical assessments, the majority for lead practitioner assessment, and some for psychological assessment.		
3.14	New referral numbers per week; how the team assesses and allocates referrals; expectation of team members and the specialty doctors including types of cases		
	East ATS expects to receive on average 180 new referrals a month which have been screened and accepted into the service by Triage. The ATS provides specialist priority and routine assessments and treatment to patients presenting with a range of complex and unstable mental health and social needs.		
	Each MDT cluster holds a weekly team meeting where cases are normally allocated with the majority of patients being seen for initial assessment by qualified professionals within the team. The Consultant Psychiatrist is expected to provide specialist psychiatric assessment, treatment and aftercare for patients and also be available at short notice to provide consultation and advice to other team members.		
3.15	Expected caseload numbers		
	Each Cluster Team carries a caseload of around 400 patients, of which the consultant psychiatrist will carry a small caseload of around 30 patients. Consultants are encouraged to be accessible to the GPs in their cluster for advice on existing and discharged patients or for discussing new referrals.		
	There will be regular adjustments made across ATS regarding Cluster size to ensure equity of caseloads.		
3.16	Examples of good clinical Trust practice or local services that provide extra resource		
	In January 2018 we were awarded an overall rating of 'good' by the Care Quality Commission (CQC) and assessed 'outstanding' for being caring.		



	The CQC said that patients and carers all gave positive feedback about the care they received, that they felt involved in decisions about their care and that staff considered their wellbeing and experience as a patient.
	They note that there were outstanding examples of practice such as clinical leadership and service user involvement. They also commented that our new leadership team brought an invigorated and open approach to the direction.
	The St Peter's pilot Brighton was identified in The Community Mental Health Framework for Adults and Older Adults (2019) as an area of positive practice in the innovative ways of working section. The Community Mental Health Framework describes how the Long -Term Plan vision for a place-based community mental health model can be realised, and how community services should modernise to offer whole-person, whole-population health approaches, aligned with the new Primary Care Networks.
3.17	For further information on Sussex Partnership, please visit our website which can be accessed here: <u>https://www.sussexpartnership.nhs.uk/</u>
3.18	Other teams and resources that relate to this service (to show how this post fits within the larger Trust service strategy)
	The Assessment and Treatment Service is the umbrella title for community secondary mental health teams which are outlined in section 3.8 above. We work closely with a range of other providers and organisations such as Brighton and Hove City Council; Health and Adult Social Care, Community Roots; a collaborative of third sector providers, Change, Grow, Live (CGL); drug and alcohol service and the Wellbeing service; providing a range of psychological support for people with mild to moderate mental health conditions.
3.19	Involvement in strategic development of team and services
	As part of the NHS Long Term Plan, organisations including Sussex Partnership, Primary Care Networks, Third & Voluntary Sector (VCSE), Social Care and Local Authorities have come together to form part of the Sussex Health & Care Partnership (SHCP). Over the next three years the SHCP will work to develop a mental health system that works for the people who use it, carers and for those who work within it. By putting those who use our services at the centre, we can strengthen the support we offer to help maintain emotional wellbeing and ensure better access to mental health services. These changes will better support people to access the services they need, when they need it in a way that works for them.
	Discussion and planning is underway in each area in regards to Community Transformation and how to strengthen secondary mental health services, with a focus on ATS teams.
	While primarily responsible for delivering a quality service, the Consultant Psychiatrist is also expected to be involved in the strategic development of the team and broader services, and encouraged to develop special interests.
3.20	Service user and carer Participation
	Sussex Partnership is committed to participation, meaning that we involve service users, and their carers and supporters, in service decision-making and planning. All employees are expected to contribute to this shared value and to support services in the delivery of its participation strategy.



Clinicians are encouraged to work in a participatory way so that shared decision making and conversations around formulation/diagnosis and ongoing care are a collaborative endeavour with the people who access our service.
It is highly likely that at least one service user or carer will be on the interview panel for this role.
Continuing professional development (CPD)
The post holder is expected to remain in good standing for CPD with the Royal College of Psychiatrists.
The post holder will be expected to have a plan for such education as is deemed appropriate, considering his or her own needs and those of the service. Consultants are actively encouraged to take their study leave entitlement in line with Royal College Guidelines and to support the development needs identified in their PDP, Peer Group reviews and appraisal. The annual study leave entitlement is £650 per year and up to 10 days per year (30 days every 3 years) subject to approval by the Clinical Lead/Director and the Director of Medical Education, Dr Michael Hobkirk.
Peer supervision is arranged between the consultants working in the locality of Brighton and Hove monthly, multidisciplinary supervision is arranged in the local teams, and ability to discuss cases and service problems occur on a monthly basis in the monthly Pan-Sussex meeting for consultants and SAS grade doctors and (first Wednesday of each month, 2pm-4pm).
All Consultants have a responsibility for ensuring their own continuing professional development and are expected to register for CPD with the Royal College of Psychiatrists. Consultant peer groups are established which the post holder will be expected to join. The Trust is committed to supporting CPD activities both internally and externally.
Clinical Leadership and medical management
Medical management across the Trust is led by our Chief Medical Officer who is supported by Medica Directors, Associate Medical Directors, Clinical Directors, Clinical Leads and a Chief Pharmacist.
Local medical management is undertaken by Clinical Director/Clinical Lead.
The post holder will become a member of the Brighton & Hove Division and attend a weekly multi disciplinary team meeting. The post holder will be expected to work collaboratively with managers to achieve the most efficient and effective use of resources.
The post holder will become a member of the Brighton & Hove Division and attend a weekly mult disciplinary team meeting. The post holder will be expected to work collaboratively with managers to achieve the most efficient and effective use of resources. Quality Improvement is the chosen improvement methodology for this organisation and the post holder will be expected to:
The post holder will become a member of the Brighton & Hove Division and attend a weekly multi disciplinary team meeting. The post holder will be expected to work collaboratively with managers to achieve the most efficient and effective use of resources. Quality Improvement is the chosen improvement methodology for this organisation and the post holder



6.0	Appraisal & Job Planning		
	The Trust is committed to ensuring all Trust medical staff is licensed, up to date clinically and fit to practice, in line with national medical revalidation guidance.		
	The revalidation process includes an annual appraisal and the Trust's Revalidation Policy clearly sets out roles and responsibilities to support this.		
	The Trust's Revalidation Support office is well established and provides an excellent service in supporting doctors in all aspects of revalidation.		
	Dr Peter Aitken is both Chief Medical Officer and Responsible Officer.		
	Trust doctors are encouraged, if interested, to become appraisers themselves and training for this re is offered.		
	Group and individual job planning is supported by a clearly defined Trust policy and in place not only to meet the contractual requirements of the role but also to provide opportunities for personal and professional development and to help drive quality improvement.		
	The Trust offers a structured mandatory corporate induction programme to ensure staff feel supported and welcomed into their new role. Local induction will assist to further orientate the post holder to the workplace environment and to their team/service. Mandatory and statutory training is also undertaken as part of the induction process where the post holder will have access to e-learning modules.		
	The Trust operates an active mentorship programme and learning set for new Consultants.		
7.0	Teaching and training		
	The post holder will be supported via group and individual job planning processes to provide dedicated time in their job plan to:		
	• Provide training to junior medical staff, and to other professionals on a multidisciplinary basis, and with other mental health organisations where appropriate.		
	• Participate in the Trust's core education and training programme on Wednesday afternoons, which take place at various sites across the Trust, as well as regional Foundation and Speciality doctor training schemes as required.		
	• Remain in good standing in relation to CPD & revalidation.		
	• Provide supervision to junior medical staff in line with the Trust's supervision strategy.		
	• At times be responsible for individual supervision of a GP vocational Trainee.		
	• Ensure that the post holder and supervised junior staff are regularly updated on professional developments as required by their professional body.		
	Contribute to corporate training initiatives within the Trust.		



### 8.0 Research

Sussex Partnership is committed to the design, delivery and translation of high quality research in order to improve our services and the experience of our patients. We are consistently one of the most active mental health research organisations in England and were ranked second out of 57 specialist mental health trusts for the number of people involved in research by the National Institute for Health Research (NIHR) in 2018-19. The Trust achieved a 62% increase in the number of people involved in research studies within the last year, having recruited 3,932 research participants in 2018/19 compared to 2,427 in 2017/18. We have strong academic partnerships with Brighton and Sussex Medical School, University of Sussex and University of Brighton particularly, and our reputation for clinical excellence is attracting leading clinical practitioners and researchers to Sussex. We attribute this success to our patients who take part and to staff and clinicians in the Trust, by paying attention to all aspects of the research process, from design of new studies, to delivery of existing research and to the translation of findings into practice.

The Trust academic centre offers first class facilities and is based at the Sussex Education Centre in Hove. The universities provide access to statistical support and advice. At any given time, there are several major studies being undertaken within the Trust. Smaller individual projects are subject to standard screening as well as local ethics committee approval before sign off. The Trust's Chief Medical Officer is the Deputy Chair for the regional Clinical Research Partnership Board.

The post has no specific teaching or research responsibilities other than those which are inherent in clinical duties. However, there are opportunities to use SPA time for teaching or clinical and other basic research through Sussex University and Brighton and Sussex Medical School, where Professor Hugo Critchley is Chair of Psychiatry.

### 9.0 Mental Health Act and Responsible Clinician Approval

The post holder will be expected to be approved as 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.

### 10.0 Secretarial Support and office facilities

The Trust strives to maximise clinical time for doctors by reducing as much administrative time as possible and a clear structure for admin support has been developed.

The service benefits from an established administrative support team and the post holder will be assigned admin support.

The consultant will have access to their own laptop, mobile phone and functioning of both devices are supported by a centralised IT service.

The Consultant will have use of their own office, which will also be bookable space for other clinical staff when not in use by the Consultant (eg during periods of leave)

Private bookable rooms are available for supervision.

The post holder has access to the use of clinical rooms and separate administrative office.



11.0	Clinical duties of post holder		
	<ul> <li>Assessment and Management of complex cases.</li> </ul>		
	<ul> <li>Provide Clinical leadership within the team.</li> </ul>		
	Care plan and treatment formulation, guidance on evidence-based treatment and		
	effectiveness.		
	Liaison and collaborative working with other services/agencies.		
	Mental Health Act implementation.		
	Multi-disciplinary, multi-agency and partnership working.		
	• Administration, audit and training as appropriate and the supervision of Team Members'		
	caseloads		
	Attendance at monthly Peer Supervision Meetings		
	Attendance at mandatory training events		
	Supervision of trainees		
12.0	Clinical governance and quality improvement		
	The post holder will contribute to the Trust's delivery of its integrated clinical governance and quality		
	improvement agenda along with the National Service Framework modernisation agendas. Specific		
	responsibilities will be agreed in collaboration with colleagues of the multi-disciplinary community and		
	inpatient teams, the general manager, lead consultant and clinical director.		
	The post holder will be expected to select relevant subjects for audit and achieve data collection targets		
	in line with Care Group objectives and record timely clinical activity data whilst supporting junior medical		
	staff and members of the multi-disciplinary team in undertaking and presenting relevant audit projects.		
Participation in service/team evaluation and the planning of future service developments			
	responsibility. The Trust has a Quality Improvement strategy, A Quality Improvement Support Team, an		
	active QI training programme and partnerships with other organisations including QI Life. The post		
	holder will be expected to be involved in using QI locally and organisationally to improve quality and		
	safety.		
	The post holder will be expected to maintain responsibility for the setting and monitoring of quality		
	standards including but not limited to; overseeing patient pathways including case allocation and day to		
	day standard of care; monitoring clinical risk and supporting staff to detect and manage risk.		
13.0	General Duties		
	• 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 record clinical activity accurately and comprehensively, and submit this promptly to the		
	Information Department.		



٠	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 for consultants.
- 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 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.
- 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.

### 14.0 External duties, roles and responsibilities

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

### 15.0 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.

### 16.0 Work Programme

It is envisaged that the post holder will work 10 programmed activities. Following appointment a meeting will take place no later than three months from appointment with the clinical 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 Royal College of Psychiatrists recommendation).

1 programmed activity is allocated for CPD and 1.5 programmed activities for audit, teaching, educational supervision, research, management and service development which will be identified through job planning. A specific programmed activity may be agreed in line with both individual and service need.

### **17.0** On call and leave cover arrangements

The post holder will take part in the team based daily rota for emergencies, together with Consultant colleagues and the team speciality doctor. For this daily rota, a member of the multidisciplinary team is first on duty and the doctor will be contacted if required.



	There is an out of office hours Medic on call rota. A trainee doctor is first on call. The substantive post holder will be expected to participate in the out of hours on call rota. A full-time consultant's ratio is 1 on-call every 23 days over the year, performed from home. This will be calculated pro-rata for less than full time posts.	
	The Sussex Mental Health Line telephone service accessed by patients is available on weekdays between 5pm-9pm and 24-hours at weekends. It provides support and information and is staffed by nurses and support workers.	
	A Trust operational manager is on also on call overnight and at Weekends.	
18.0   Leave and cover arrangements		
	The post holder is entitled to 32 days of annual leave plus bank holidays for the first 7 years of their service and 34 days plus bank holidays thereafter and 30 days of study leave over three years. This will be calculated pro-rata for less than full time posts.	
	Annual leave, study and special leave will be covered within the pool of consultants and is agreed and authorised by the General manager using electronic unavailability management software.	
19.0	Contract Agreement	
	The post will be covered by the terms and conditions of service for consultants - England (2003), as amended from time to time.	
	The contract is the national consultant model contract which has been agreed with the BMA, but individuals may wish to discuss this further before acceptance.	
20.0	Wellbeing	
	You work hard to support the health and well-being of patients and service users. We believe you should have access to excellent Occupational Health to improve and maintain your health and well-being.	
	The aim of Occupational Health is to work with managers and staff to promote and improve health and well-being of staff.	
	For more information on the Trust Occupational Health Department please contact Medical Staffing team on 0300 304 0393.	
	For more information on our ongoing wellbeing initiatives please see section 20.3 below.	
20.1	<ul> <li>The Trust recognises that being involved in a serious incident can have a significant impact on a clinician's wellbeing. The following wellbeing systems are available to doctors in such an event:</li> <li>Discussion with Team Leader/Service Manager</li> <li>Discussion with the Clinical Lead or Clinical Director</li> <li>Team Debrief</li> </ul>	
	<ul> <li>All Trust Consultants are encouraged to join a local peer group that meets regularly; serious incident cases can be discussed and peer support sought during such meetings</li> <li>Reflective discussion during the annual appraisal meeting</li> </ul>	



20.2	The Trust's Job Planning Policy is based on guidance set out by the BMA and NHS Employers, as well as the relevant sections of the national Terms and Conditions for the Consultant Contract. It emphasises a partnership approach being taken by the doctor and their manager in this process. Job Planning is part of an annual review cycle but it is recognised that an interim job plan review may be requested (by the doctor or their manager) if duties, responsibilities and accountability arrangements have changed or need to change significantly within the year.
20.3	A list of our ongoing wellbeing activities across the Trust can be found on our careers portal: Working for Us   Sussex Partnership NHS Foundation Trust
21.0	Visiting arrangements
	Candidates are welcome to visit our services and meet the team using the below contact details.
	Mark Melling General Manager Community Services <u>Mark.Melling@spft.nhs.uk</u>
	Dr Ali Chalu Clinical Lead for Community Services <u>Alison.Chalu@spft.nhs.uk</u>
	Further details about our Trust can be obtained via our website www.sussexpartnership.nhs.uk
22.0	<b>Equality, Diversity &amp; Inclusion Statement</b> We recognise that every person is different and we welcome, value and respect these differences. We aim for equality and fairness in everything we do, both as an employer and a healthcare provider. People from all backgrounds are welcome to work here and use our services.
	At Sussex Partnership, we care deeply about hiring, retaining, and developing a workforce that reflects the communities we serve. Our staff networks play a crucial role in exploring relationships trust-wide and advancing opportunities for all staff, helping underrepresented communities continue to feel they belong here.
	More information on our staff networks can be found on our careers portal using the following link: <u>Diversity and Inclusion   SPFT Recruitment (sussexpartnership.nhs.uk)</u>
23.0	Approval of job description by the Royal College of Psychiatrists
	This job description and person specification is subject to approval from the Royal College.





## Person specification/selection criteria for Consultant Psychiatrist

ASSESSMENT STAGE	SCR Screening prior to short-listing	AAC Advisory Appointments Committee	PRES Presentation to AAC panel
ABBREVIATIONS	SL Short-listing from application form	<b>REF</b> References	

### As an Equal Opportunities employer, the Trust welcomes applications from candidates with lived experience of mental health issues.

	ESSENTIAL	WHEN ASSESSED	DESIRABLE	WHEN ASSESSED
QUALIFICATIONS	MB BS or equivalent medical qualification.	SCR	Qualification or higher degree in medical education, clinical research or management.	SL
			MRCPsych	SCR
			Additional clinical qualifications.	SL
ELIGIBILITY	Fully registered with the GMC with a licence to practise at the time of appointment.	SCR	In good standing with GMC with respect to warning and conditions on practice	SCR
	Included on the GMC Specialist Register OR within six months.	SCR		
	Approved clinician status OR able to achieve within 3 months of appointment	SCR		
	Approved under S12 OR able to achieve with 3 months of appointment	SCR		
TRANSPORT	Holds and will use valid UK driving licence OR provides evidence of proposed alternative.	SCR		



	ESSENTIAL	WHEN ASSESSED	DESIRABLE	WHEN ASSESSED
CLINICAL SKILLS, KNOWLEDGE & EXPERIENCE	Excellent knowledge in specialty	SL, AAC, REF	Wide range of specialist and sub-specialist experience relevant to post within NHS or comparable service	SL, AAC
	Excellent clinical skills using bio-psycho-social perspective and wide medical knowledge	SL, AAC, REF		
	Excellent oral and written communication skills in English	SL, AAC, REF		
	Able to manage clinical complexity and uncertainty	AAC		
	Makes decisions based on evidence and experience including the contribution of others	AAC		
	Able to meet duties under MHA and MCA	AAC		
ACADEMIC SKILLS & LIFELONG LEARNING	Able to deliver undergraduate or postgraduate teaching and training	SL, PRES, AAC	Able to plan and deliver undergraduate and postgraduate teaching and training relevant to this post	SL, AAC
	Ability to work in and lead team	SL, AAC	Reflected on purpose of CPD undertaken	SL, AAC
	Demonstrate commitment to shared leadership & collaborative working to deliver improvement.	SL, AAC	Experienced in clinical research and / or service evaluation.	SL, AAC
	Participated in continuous professional development	SL, AAC	Evidence of achievement in education, research, audit and service improvement: awards, prizes, presentations and publications.	SL
	Participated in research or service evaluation.	SL, AAC	Has led clinical audits leading to service change or improved outcomes to patients	SL, AAC



Able to use and appraise clinical evidence.	SL, AAC, PRES	
Has actively participated in clinical audit and quality improvement programmes	SL, AAC, PRES	
Ability to work in a participatory way so that shared decision making and conversations around formulation/diagnosis and ongoing care are a collaborative endeavour with the people who access our service.	SL, AAC, PRES	