



Pennine Care
NHS Foundation Trust

Living Well Consultant Psychiatrist

Candidate Information Pack

September 2023

Welcome

Dear Candidate

Thank you for your interest in the important role of Consultant Psychiatrist with the Living Well team.

We are looking for a consultant psychiatrist to work with our newly developed living well hubs.

Our nearly 4,000 dedicated staff have big ambitions, and you will play a pivotal role in helping us to achieve them.

You will be joining us at an exciting time, and we have much to be proud of at Pennine Care. Alongside our refreshed Trust strategy we recently launched our new clinical strategy which is strongly focused on developing high quality care, underpinned with an enabling and supportive culture.

Building on the long and successful history of partnership working in Greater Manchester, the transformation of our community mental health services is one of our biggest priorities, and we have a real opportunity together, with our partners, to drive transformational change in our population's health and to improve their mental health and wellbeing. Your role will be central to supporting the development and delivery of services to move towards a new place-based, multidisciplinary service across health and social care aligned with primary care networks.

Working as part of a diverse team, you will serve as an inspiring leader, supporting clinicians within the locality to deliver outstanding patient care and outcomes, and working with our partners to improve health and reduce inequalities. Using your rich leadership experience, you will support us to deliver high quality care and work with our partners to make the best use of our collective resources to improve health and reduce inequalities.

An inclusive, values-driven collaborative person, you will be a medical leader looking to bring your skills and experience into an organization already well on their improvement journey within the attractive health and care system of Greater Manchester.

We welcome interest from the most diverse range of potential candidates. Most important will be your values driven leadership style, appreciation of the importance of an engaging and psychologically safe culture, your ability to work closely with stakeholders to deliver change, your strong interpersonal skills and ability to build credibility with clinicians and partners, your high levels of resilience, energy and optimism and ability to create a positive sense of hope for the future.

If you are excited by the challenges and opportunities that this role presents and are inspired to join us, please contact

Kind regards

Anthony Hassall
Chief Executive Officer

About Us

We're proud to provide mental health, learning disability, and autism services to people across Greater Manchester and beyond.

We serve a population of 1.3 million and our vision is a happier and more hopeful life for everyone in our communities.

More than 3,800 dedicated and skilled staff deliver care from 88 different locations in six boroughs:

- Bury
- Glossop
- Oldham
- Rochdale
- Stockport
- Tameside

Our mental health teams provide care and treatment for people with mild to moderate conditions such as depression, anxiety or dementia, or more serious mental health illnesses such as schizophrenia and bi-polar disorder.

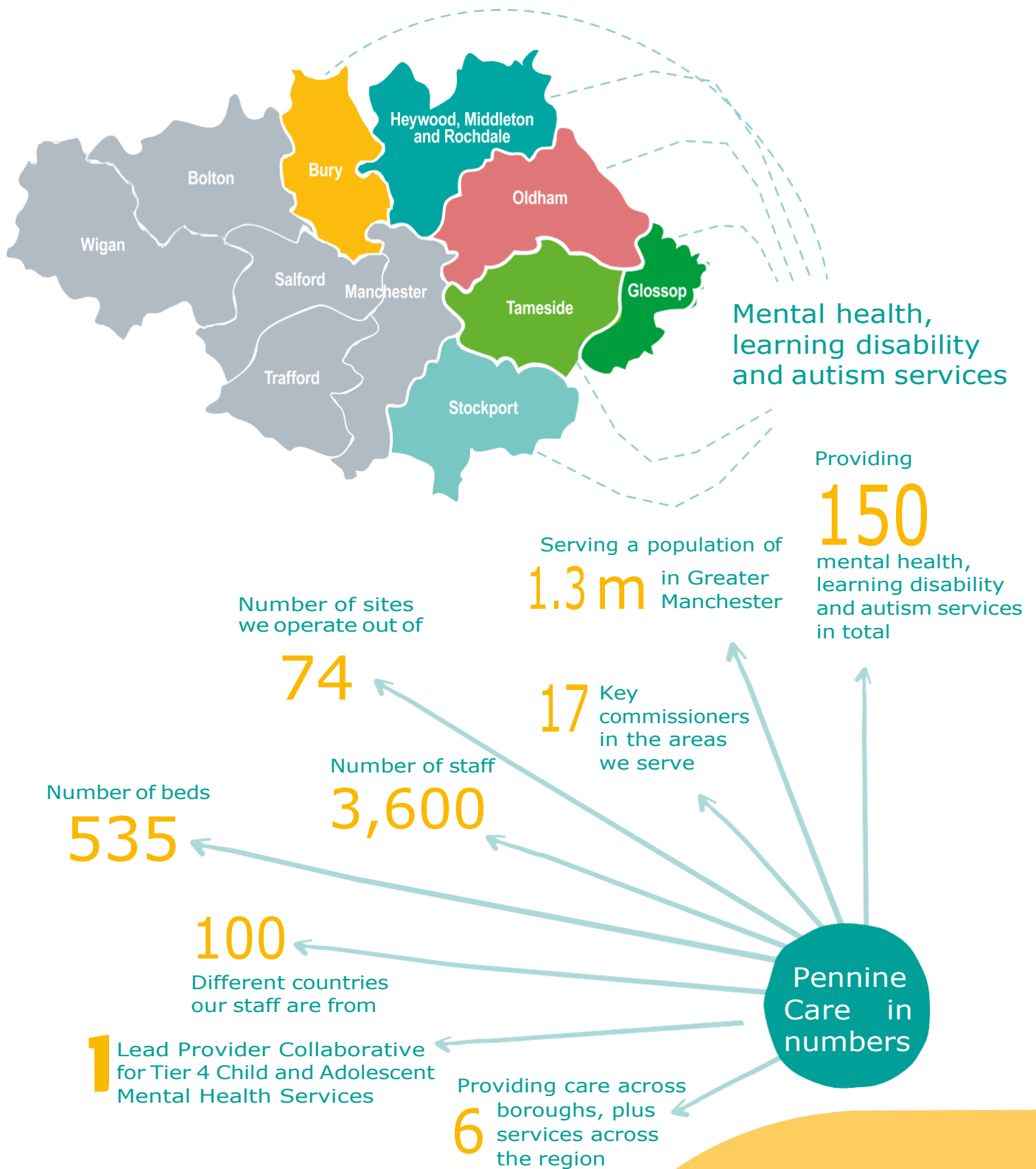
We run talking therapies, drug and alcohol services, psychiatric intensive care, rehabilitation services, military veterans' services and many more.

Our learning disability services are for people with a moderate to profound level of learning disability, such as those with downs syndrome.

In the latest NHS staff survey, we were ranked as the best place to work out of all the mental health and learning disability trusts in the North West.

Our updated [strategy](#) (2022-2025) confirms our commitment to being a specialist mental health, learning disability and autism provider, while recognising the impact of the pandemic and the changes within the health and social care system.

The Trust in numbers



Our values

Our values reflect who we are and how we do things.

We have built easy ways to encourage our staff to live by these values to bring them to life and have seen these embedded into the organisation since they were agreed in 2019. This has been supported by a set of behaviours, as well as

recruitment, annual appraisals and training. We will continue to invest in our values, recognising the importance to our organisational culture, through the organisational development plan and leadership strategy.

Kindness



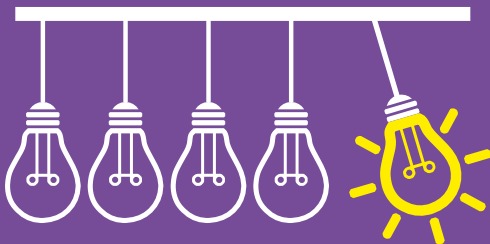
We believe that care and compassion underpin everything

Fairness



We treat everyone fairly

Ingenuity



We are resourceful and innovative

Determination



We are courageous and ambitious for what we can achieve together

Job description

JOB TITLE:	Consultant Psychiatrist in Living Well		
ACCOUNTABLE TO:	Dr Ankur Khanna		
LOCATION:	Fairfield General Hospital		
JOB PURPOSE	This is a new post, established to support the Community Transformation Programme and lead on the Living Well Team in Bury		
Post and specialty:	Consultant Psychiatrist in Living Well This is a new post established to support Living Well teams. There will be one in each of the 5 Pennine Care Boroughs.		
Royal College of Psychiatrists approval details:	<i>Awaiting RCPsych Approval</i> RCPsych Ref No: XXXXXXXXXX (to be advised by RCPsych upon submission) <i>RCPsych to insert Approval Stamp</i>		
Base:	Fairfield General Hospital, Rochdale Old Road, Bury BL9 7TD		
Contract:	The post is a permanent post employed by Pennine Care NHS Foundation Trust Part-time or job share may be considered.		
	Total PAs: 10	SPA: 2.5	DCC: 7.5
Accountable professionally to:	Medical Director- Dr Simon Sandhu		
Accountable operationally to:	Clinical Director-Dr Ankur Khanna		
Key working relationships and lines of responsibility:	Line Manager: Dr Ankur Khanna Team Lead: tba Locality Manager: Rachel Osborne Clinical Director: Dr Ankur Khanna Associate Medical Director: Dr Sarmad Nadeem Responsible Officer: Dr Simon Sandhu Head of Service: n/a		

Deputy Medical Director: Dr Nilika Perera Director of Operations: Sarah Preedy Medical Director: Dr Simon Sandhu Chief Executive: Anthony Hassell
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1. Service Details

The NHS Long Term Plan identified a priority to transform community mental health via a “new community-based offer that will include access to psychological therapies, improved physical health care, employment support, personalised, and trauma informed care”.

The Community Mental Health Framework for Adults and Older Adults describes a place-based model for community mental health, aligning community mental health services with primary care networks (PCNs), creating ‘new and integrated models of primary and community mental health care’. This will enable:

- a) More and higher-quality care to be provided at a local community level (of 30,000 and 50,000 people, the population of a Primary Care Network’s geographical footprint).
- b) More targeted, intensive, and longer-term input for people with more complex needs will be provided at the wider community or “place” level (of around 250,000–500,000 people).

In transforming our Community Mental Health offer, GM is building on the work undertaken in Locality and Tameside since 2018 to scale up the Living Well model to the PCN-based model.

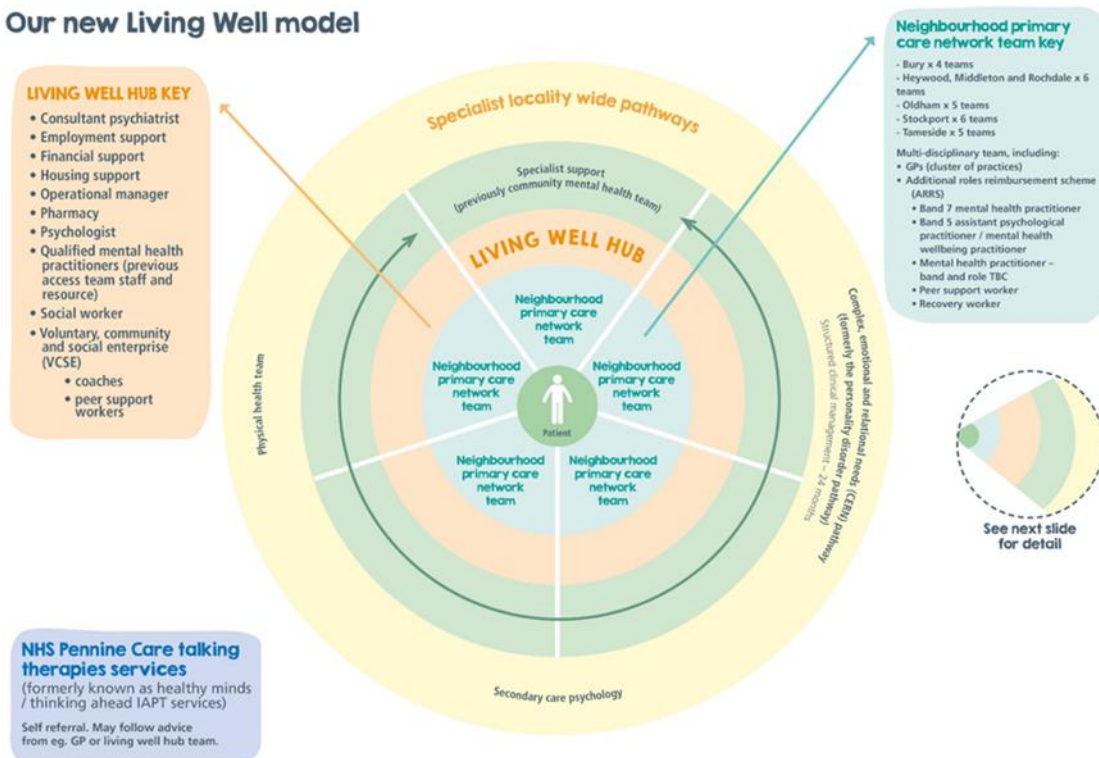
So, in the future this will see the same number of Living Well teams in each locality as the number of PCNs in that locality. There will then be one (possibly 2 in Manchester) ‘Specialist Complex Needs Team’ in each locality.

This will see a transitional process where some people currently supported in CMHTs will be supported in the PCN Living Well Teams and those people with more complex needs being supported in the new specialist complex needs team. This will in turn see existing CMHT staffing be deployed across both elements of this new Community Mental Health model.

Living Well teams will include an Operational Manager, Psychiatrist, Psychologist, Social Worker (Safeguarding lead) and a balanced complement of VCSE staff. Localities can then also decide which other roles to include within the team e.g. Pharmacy, Employment support, Housing support, MH coaches, Well-being workers.

The core Living Well principles are based on access, responsiveness, strengths-based approaches, trauma informed enquiry and care utilising solution focussed interventions and trauma specific interventions.

Our new Living Well model



In the future, Living Well hopes to offer:

- Access for all individuals who are experiencing mental health issues or distress.
- A true co design and co-production model, with lived experience at the heart of Living Well.
- A conversational approach and proportionate response based on individual need.
- Person centred care and person led conversations.
- 'My Story My Plan' based on personal, social and community strengths, formulation, and safety planning. This will include a wider resource of maps to support community connections, structured day, anxiety management, distress tolerance and many more.
- Access to numerous VCSE organisation that enhance the Living Well offer through integrated working reduction in referrals and hand offs, joint working and warm handovers, to break down barriers to community integration.
- A strengths-based approach building on personal, social and community strengths.
- A trauma informed service, where trauma enquiry is embedded.
- A solution focussed service.
- An open honest culture, where all staff and peer mentor strengths are valued.

Local Working Arrangements

The Living Well psychiatrist will offer expert advice to GP's for patients not currently open to secondary care mental health services. The service will advise about medication, signposting to other services and specialities, as well as clinical management and diagnostic advice. The service will be provided on a daily basis, Monday to Friday

The post holder will work with the Living Well in Bury service, working across Bury as a

Consultant Psychiatrist, providing clinical leadership to the multidisciplinary team.

This will involve:

- Assessment of new referrals, especially cases with significant complexity or multiple diagnoses.
- Diagnosis of mental disorders in patients under the care of Living Well in Locality where this is felt to be required for their care.
- Support care planning, formulation, and risk management for patients when under the Living Well service
- Initiation or alternation of medication treatment for mental illness in patients under the care of Living Well in Locality.
- Use of the MHA when required for patients under the care of the team.
- Supporting the team in gatekeeping appropriate referrals to urgent care and the CMHTs.
- Attendance at MDT and wider network meeting.
- Service user clinic – MDT (managing complexity) and PCN (preventing step up into CMHT by offering a medical review).
- Clinic for staff to meet on a 1-1 and discuss complex cases and gain advice, support, and a formulation session to enhance the 'my story my plan'.
- Support ongoing Service developments.
- Support the wider Living Well and community transformation design.
- Provide in-house training to staff.
- Providing advice and supervision to the Living Well Team.
- Direct assessments of patients where necessary. These will include patients for whom primary care providers require diagnostic clarification or guidance on management and those who may require secondary mental health services due to the nature of their condition or concern about risk. It is anticipated that this will involve direct assessment of a limited number of new patients per week. This will usually be in an outpatient clinic setting, with occasional home visits in exceptional cases.
- Providing telephone and written advice to GP colleagues.
- Collaborative working with a variety of health, social care, and 3rd sector partners.
- Clinical leadership of the team.
- Undergraduate teaching for medical students.
- Contribute to clinical audit/QI projects and will be able to participate in research.

As this is a new and innovative service it is anticipated that some work would be managerial and consist of developing and expanding the team, delivering training to new team members, and championing the service with other stakeholders. As this is a new service the number of referrals is yet to be determined.

Although some complex patients may require being seen more than once, it is not anticipated that the position will not involve holding a caseload. The caseload will be held by the MDT.

The post-holder will be professionally accountable to the Clinical Director

In Bury the aim is to have the following roles in the Living Well team:

- Mental Health Practitioners

- Mental Health Wellbeing Practitioners
- Peer Workers
- Recovery Workers
- Psychologist
- Operational Lead
- Older Adult Mental Health Practitioner
- Administrators

2. Continuing professional development (CPD)

Continuing Professional Development (CPD) is actively encouraged and is seen as an integral component of the post. The Trust will support continuing professional development in terms of reasonable payment for courses and study leave. The post holder will be expected to be in good standing with the Royal College of Psychiatrists for CPD. They will be expected to join a peer review group and participate in annual personal development planning, as described by the College and in line with the process of revalidation as specified by the GMC. All consultants in the Trust have access to the online CPD modules offered by the Royal College of Psychiatrists.

Director of Medical Education is Dr Adeola Akinola
Medical Director is Dr Simon Sandhu and is the Responsible officer.

Study Leave

An allowance of 30 days with a budget of £1000 per annum is allocated. This is over a 3-year period.

Mentoring

Consultants new to the Trust or those in their first post as a consultant, will be expected to identify a more experienced colleague as a mentor. This may be someone working in another department or Trust, providing it is realistic, to expect the mentoring role to develop. Several consultants in the Trust are willing and able to act as mentors if needed. In addition, the post holder's line manager will meet on a regular basis during their first year in post to offer guidance and support.

Clinical leadership and medical management

Clinical Director – Dr Ankur Khanna
Associate Medical Director North – Dr Sarmad Nadeem
Medical Director – Dr Simon Sandhu

3. Appraisal and job planning

The post holder shall engage with yearly appraisal via the online system SARD and have a choice of joining the local CPD group. The trust expects that the post holder will have a certificate of good standing with the RCPsych.

- In addition to these principal areas of clinical work, the post holder will have other responsibilities including:
- Compliance with legal obligations covering clinical practice (e.g., Mental Health Act and Code of Practice, Mental Capacity Act and The Children Act etc.)
- Compliance with proper and safe discharge procedures for inpatients (e.g. in line with the Department of Health Guidelines on Discharge and Caring for people: The Care Programme Approach)
- A commitment to ensuring that people from all ethnic groups have equitable access to appropriate services.
- Ensuring successful multidisciplinary working.
- Maintaining good relationships with General Practitioners, the Integrated Care Board, Social Services, and VCSFE partners.
- Compliance with procedures whereby doctors report concerns about the professional conduct of competence of medical colleagues.
- Compliance with Trust procedures that involve users in their care.
- Participating in medical and multidisciplinary audit and other procedures for Clinical Governance.
- Participating in the teaching of medical students attached to the service.
- Participating in the Academic Programme
- Compliance with the regulations of the Royal College of Psychiatrists on continuing medical education.
- Compliance with confidentiality as advised by professional and Department of Health.

4. Guidelines

Consultants have continuing responsibility for the care of patients in their charge and for the proper functioning of their departments. They are expected to undertake the administrative duties associated with the care of their patients and the running of their clinical departments. All consultants take responsibility, both singly and corporately, for the management of junior medical staff. In particular, they are responsible for approving and helping to monitor annual and study leave for their own junior staff, and for assisting the Lead Consultant in arranging locum staff when needed. Consultants are part of the management structure within the Unit. It is expected that the post holder will take an active part in the weekly meetings of the consultant group.

5. Teaching and training

The post holder will have the option to support CPD activities with a trust wide, Wednesday afternoon 1-3pm teaching programme. This will consist of a 1-hour CPD slot, case presentations, journal club, expert led one hour teaching, and teaching to supplement MRCPsych course for trainees.

Teaching commitments by the post holder will be as part of the departmental offer and wider MDT teaching and supervision to the staff they lead within the team.

The post holder will be expected to perform weekly supervision to the middle grade and any junior doctors within the team.

Trust Director of Medical Education is Dr Adeola Akinola.

6. Research

The Trust actively encourages the involvement of staff in research, and several projects are underway with the support of local clinicians. The trust actively supports audit and clinical governance. There is a trust wide audit department to offer support. Several consultants from the Trust carry out external duties, for example by taking part in Royal College committees, teaching on university courses, or examining for the College or for medical schools. These activities enrich the clinical and teaching environment of the Trust as a whole, and are strongly encouraged, providing they are compatible with the delivery of the clinical service.

7. Mental Health Act and Responsible Clinician approval

The post holder would be expected to be approved as a Responsible Clinician and Section 12(2) MHA approved and will be expected to renew according to agreed procedures.

8. Secretarial support and office facilities

Dedicated secretary/Admin Support:

There will be full-time Medical Secretary to complete admin work and in addition to the full-time medical secretary there is the medical manager admin to support with processing of Annual leave/Study leave.

Office Arrangements:

The Consultant will be provided with dedicated private office space within the locality, which will be sufficiently private and resourced to carry out the full range of consultant functions and will include break-out areas, immediately available, where discussions and phone calls can take place in complete confidence.

Access to PC/Laptop/Phone:

The Consultant will be provided with laptop, dictation software and a mobile phone.

IT Support/Informatics:

The consultant will be provided with the appropriate IT support which can link to printers, the Trust network, the internal e-mail system digital dictation and the Internet.

9. Clinical duties of postholder

Clinical duties:

- GP's have rapid access to specialist advice to support the clinical management of patients presenting with mental health needs in primary care.
- Timely advice and guidance is available to GP's when initiating or considering review of medication treatment plan/s.
- Referral & signposting advice for GP's when considering the need for secondary care mental health services or diagnostic assessment.
- Assessment of patients referred to the Oldham Living Well team.
- Diagnosis and the formulation of management plans.
- To develop psychiatric formulations and diagnoses in conjunction with LW Service

team members

- Assessment and management of risk including of vulnerability, suicide risk, risks to health and safety and risk of harm to others.
- Become involved in Mental Health Act work.
- Work in a collaborative way with multidisciplinary teams including external partners.
- Work in partnership with local GPs and the mental health practitioners that support them.
- Provide clinical support for the other members of the team.
- To initiate and monitor prescriptions of relevant psychiatric medications for a range of complex mental health issues working with non-medical prescribers in the LW service.
- Support staff to achieve NMP and support development of NMP role in MDT/PCN.

Leadership role:

- Lead clinical decision making in the multidisciplinary team to ensure the delivery of high-quality care.
- Support positive interface with CMHT and PCN.
- Develop service clinical priorities in line with national and professional guidance and standards.
- Engage with service development and transformation programmes as Locality is one of the four national innovation sights leading the living well model and its impact on the community transformation agenda.

Attendance at Consultant meetings for their service and directorate

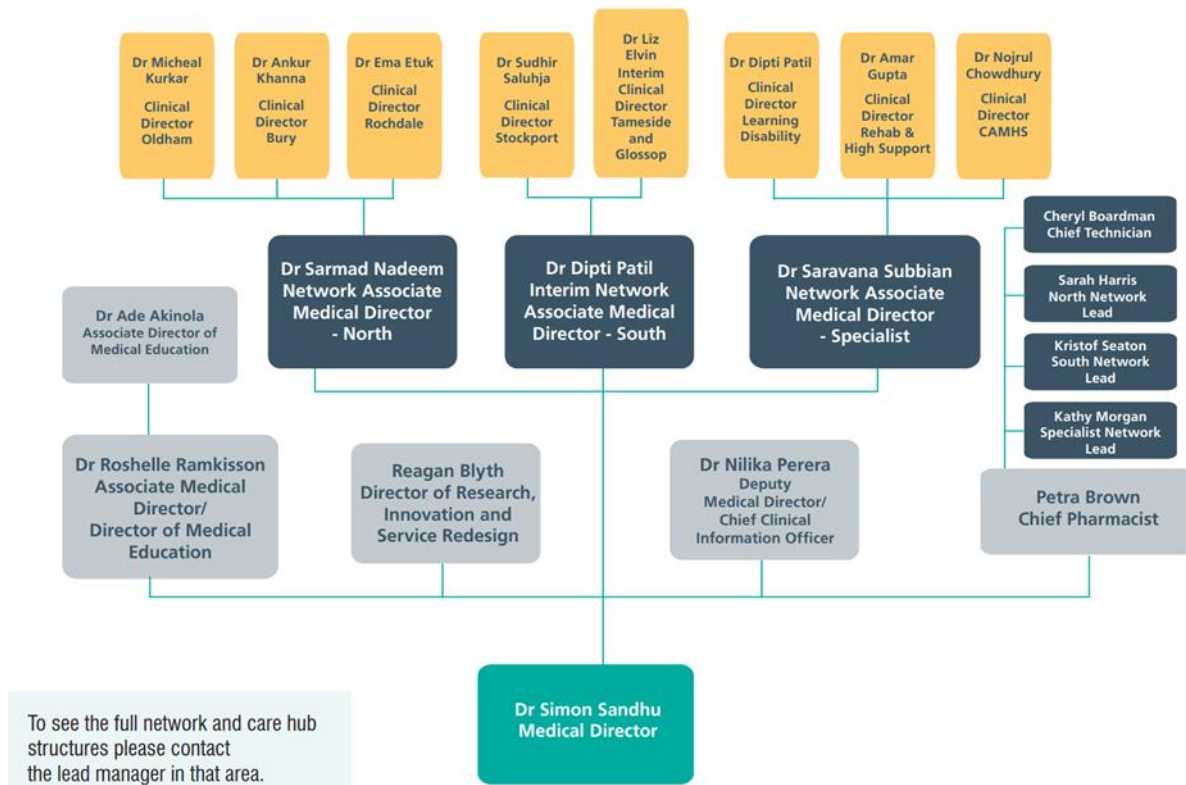
Educational role:

- Provide clinical supervision for psychiatric trainees in achieving competencies in core general psychiatry and providing teaching sessions as required to the whole team

10. Training duties

The post holder will be expected to participate in the supervision and teaching of junior psychiatric medical staff. The post holder will provide educational leadership to improve the understanding and management of mental disorders. They will work with the Medical Education teams within the Trust to provide high quality training to various groups including medical teams, nursing staff and other professionals as required.

11. Clinical governance and quality assurance



12. Quality improvement

The Consultant will manage the Living Well team in a way that supports the development of a culture of continuous improvement and learning, utilises a quality improvement approach to think systemically about complex problems, develop potential change ideas and test these in practice using a systematic QI methodology.

The Consultant will empower the team to resolve local issues on a daily basis, using the tools and method of quality improvement without staff having to seek permission.

Promoting awareness and understanding of quality improvement, and sharing learning and successes from quality improvement work.

13. 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.
- 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. 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 medical director and, as necessary, the chief executive officer.

15. 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 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 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 the Royal College of Psychiatrists recommendation). The timetable is indicative only. A formal job plan will be agreed between the post holder and associate medical director or clinical manager three months after commencing the post and at least annually thereafter.

Suggested draft timetable:

Total = 7.5 Programmed Activities D.C.C.
 2.5 Programmed Activities S.P.A.

<i>9. Proposed Job Plan –Day</i>	Time	Location	Work	Hours	No of PAs	DCC/ SPA
Monday	9-1	Living Well hub	MDT meeting/case formulation	4	1	DCC
	1-5	Office	SPA activity	4	1	SPA
Tuesday	9-1	Living Well hub	Clinics	4	1	DCC
	1-5	Living Well hub	Audit / QI activities	4	1	SPA
Wednesday	9-1	Living Well hub	Liaison with GPs	4	1	DCC
	1-3 3-5	Office	CPD Admin	4	0.5 0.5	SPA DCC
Thursday	9-1	Living Well hub	Clinics	4	1	DCC
	1-5	Living Well hub	MDT meeting/case formulation	4	1	DCC
Friday	9-1	Office	Liaison with GPs	2	1.0	DCC

	1-5	Office	Emergency Clinic	2	0.5	DCC
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17. On-call and cover arrangements

There are 2 On call systems-day and night. Day on call has a minimum workload consisting of one day 9-5pm once every two weeks mainly for queries and as a source of final backup. Given there is now a liaison service (from Aug 2023) and each clinical team has cross cover it is very rare that calls actually come through to the local consultant oncall.

There is a 1 in 31 North division on call which is non-resident and supported by a full tier middle grade and junior doctor cover. The North Division rota covers on call work Monday to Friday 5pm to 9 am the following day as well as on call work at weekends from 9am Saturday to 9 am Monday. This rota covers patients who are normally seen within the working age and older age groups only. The area covered includes Bury, Rochdale (incl. Heywood and Middleton) and Oldham.

Time spent working whilst on-call is offset by a day of leave after an on-call day. This time in lieu is to compensate for work done whilst on call. The on-call supplement is category A 3%. The post holder would be expected to have received Approved Clinician training and to maintain Approved Clinician status. He/she would be expected to have working clinical knowledge and experience in relation to The Mental Health Act and Capacity Act.

This rota is released at the start of the year hence it is easily planned around with the next working day off as rest. Itsd likely that the rota shall increase in numbers are recruitment is expected to increase the number of consultants available

18. Wellbeing

Occupational health support is available through the Staff Wellbeing Service www.penninecare.nhs.uk/nhs-staff-wellbeing. This confidential service provides virtual, face to face, individual and group support and can be accessed through self-referral. Activities such as mindfulness, yoga and seminars on dealing with stress, work life balance are also available.

In addition, the Greater Manchester Resilience hub www.penninecare.nhs.uk/mcrhub-covid19 offers similar for those adversely effected by the pandemic.

Details regarding this support are shared at induction and on a regular basis.

Pennine Care has its own in-house staff wellbeing service that can provide brief intervention work and access to an occupational health service. These services can be accessed by referral by manager or self-referral on the trust intranet. They can provide support regarding the promotion of wellbeing such as stress management, mindfulness courses, resilience intervention and wider courses.

All referrals are clinically triaged by email within 72 hours and currently an assessment is usually arranged within approximately 3 weeks. We then have variable waiting times for allocation to a clinician, these are currently between 2 and 12 weeks depending on which therapy you will receive.

Local Support

The consultant body meets every week on a Wednesday afternoon where cases and issues can be discussed. The clinical Director and wider medical management team can support individuals' wellbeing around incidents, pastoral care, clinical dilemmas, and wider support of any nature.

19. Contract agreement

The post will be covered by the terms and conditions of service for Hospital Medical and Dental staff (England and Wales) 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.

20. Leave

Consultant colleagues are expected to provide each other with cross cover for annual leave, study leave, professional leave, and compassionate leave. The post holder is entitled to annual leave (30 days a year and an additional 2 days after 7 years in the grade) and study leave (30 days over 3 years) will be in line with the terms and conditions of service for hospital medical staff.

21. Visiting arrangements

Clinical Director – Dr Ankur Khanna
Associate Medical Director north – Dr Sarmad Nadeem
Medical Director – Dr Simon Sandhu
Rachel Osborne – Associate Director Bury

22. Approval of this job description by the Royal College of Psychiatrists

This job description and person specification was approved by the Royal College of Psychiatrists' regional advisor on DD/MM/YYYY.

23. Statement on Equality and Diversity

Pennine Care is committed to adherence to all government guidelines around equality and diversity. The post holder will be expected to work with professional colleagues and local managers in the efficient running of services and will share with consultant colleagues in the medical contribution to the management of the service, in line with the Terms and Conditions of Service. The appointee is expected to observe the Trust's agreed policies and procedures, drawn up in consultation with the profession on clinical matters, and to follow

the standing orders and financial instructions of the Trust. Where, the management of the staff of the Trust is concerned, the post holder will be expected to follow the local and national employment and personnel policies and procedures. He/she will be expected to make sure that there are adequate arrangements for hospital staff involved in the care of the patients to be able to contact him/her when necessary. The post holder is expected to comply with Trust policy and management instructions regarding Health and Safety and to bring to the attention of the Trust anything that endangers themselves or others. The post owner would be expected to travel to a variety of sites within the Trust footprint so should ideally have access to a car with a valid current driving license. The Trust will provide support available for non-drivers due to disability in line with the equality act A draft job plan for the posts (above) has been prepared in accordance with paragraphs 30A, 30 and 61 of the Terms and Conditions of Service for hospital medical staff and will be agreed with the Consultant after appointment. This job description and work programme is subject to regular review with the Chief Executive of Pennine Care NHS Foundation Trust.

Appendix 1: Living Well Person Specification/selection criteria for consultant

Abbreviations for when assessed: Scr: Screening prior to short-listing SL: Short-listing from application form

AAC: Advisory Appointments Committee

Ref: References

Pres: Presentation to AA panel 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. MRCPsych Additional clinical qualifications.	SL Scr SL
ELIGIBILITY	Fully registered with the GMC with a licence to practice at the time of appointment. Included on the GMC Specialist Register OR within six months. Approved clinician status OR able to achieve within 3 months of appointment. Approved under S12 OR able to achieve with 3 months of appointment	Scr Scr Scr Scr	In good standing with GMC with respect to warning and conditions on practice	Scr

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

