

# **Specialty Doctor Chichester Assessment and Treatment Service**

# Job description and person specification

Post and specialty:	Specialty Doctor in General Adult Psychiatry This is an established post. The post holder will provide specialty doctor input to General Adult Services in Coastal West Sussex in a community setting.		
Base:	Chapel Street Clinic Chapel Street Chichester West Sussex PO19 1BX		
Contract:	Number of programmed activities: 10		
Accountable professionally to:	Chief Medical Officer, Dr Claire Woolcock		
Accountable operationally to:	Deputy Service Director Adult West Sussex Paul Beynon		
Key working relationships and lines of responsibility:	Line Manager: Paul Beynon  Service Manager: Marylinda Gororo  Clinical Operations Manager: Fran Martinez  Lead Consultant: TBC  Clinical Lead: TBC  Clinical Director: Dr Claire Tanner  Deputy Service Director: Paul Beynon  Chief Delivery Officer: John Child  SAS Advocate: Dr Susan Hamilton  Chief Medical Officer: Dr Claire Woolcock  Responsible Officer: Dr Aruna Wijetunge  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. The Trust is rated Good overall by the Care Quality Commission (CQC) and is assessed as Outstanding for caring.



# 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.

The Trust delivers services via 5 Care Delivery Services (CDS), tasked with providing overarching leadership for care groups and / or geographical areas. Each CDS is led by an operational director and 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 supports continuous service improvement for patients and carers, is supported by Clinical Academic Groups and aligns with our Trust Values, Organisational Strategy and Clinical Strategy. The Trust strives to provide consistently high-quality services, working in partnership with each other, the people who use our services and other organisations.



#### 3.0 Service details

- West Sussex is situated in the south east England between the sea and the South Downs with a population of around 848,000. The county offers good access to London and is in close proximity to Gatwick Airport. West Sussex is one of the 20% least deprived counties/unitary authorities in England, however about 11% (15,500) of children live in low income families. Life expectancy for both men and women is higher than the England average. The health of people in West Sussex is generally better than the England average.
- 3.2 The Trust is seeking a Specialty Doctor to join the Chichester ATS team. This vacancy has arisen due to a voluntary resignation and the Trust regards this as an opportune moment to develop the functioning of the team.

This post is one example of the commitment of the Trust to develop better provision and capacity for Chichester ATS and the families and carers using the service in challenging times. This post adds to the medical establishment of the team providing a minimum of 1.0 whole time equivalent SAS Doctors for the Chichester ATS.

- 3.3 Chichester Assessment and Treatment Service covers GP surgeries in Chichester and the surrounding areas.
- 3.4 The current multidisciplinary team establishment across the Chichester/Midhurst ATS is as follows:

WTE	Job Title
1.0	General Manager
2.5	Consultants
1.0	SAS doctors (postholder)
2.8	Clinical Psychologist/psychotherapist - band 8
6.8	Nurses - band 6
4.0	Mental health liaison practitioners
1.6	Occupational Therapist
2.0	Occupational therapy tech
4.6	Administrators
2.0	Receptionist
1.5	Telephonist
1.0	Peer Support worker
1.0	Triage co-ordinator



3.5	There are 2.5 consultant psychiatrists working with the team. There are also enhanced community rehabilitation team, early intervention in psychosis team, crisis and home treatment team and Oaklands acute unit consultants in the local area as well as 3 further consultants in Bognor Regis ATS.
3.6	Local community services:
	There are 3 full time Consultant Psychiatrists in Bognor Regis ATS. Our Crisis Team (CRHTT), Mental Health Liaison Team, Acute Services (Oaklands unit), Enhanced Community Rehabilitation team (ECRS) and Early Intervention in Psychosis (EIS) teams have dedicated Consultants and other medical cover and there are Specialist Older Adult Mental Health Services (SOAMHS with its own dedicated medical resource.
	Additional Consultant resource is linked to Specialist Services (Eating Disorder (WSED); Perinatal), Learning Disability and Forensic Services.
	The Assessment and Treatment team are an ageless integrated multidisciplinary teams who provide assessment, treatment and care in geographically defined areas to meet the health and social cares needs of their population.
3.7	The Chichester Crisis Resolution Home Treatment Team (CRHTT) gate-keeps all admissions to the inpatient beds from the community. The Crisis Resolution Service at present does not receive direct referrals from primary care.
	Local in-patient beds are at Oaklands Unit in Chichester. There is 1 acute ward for working age adults, in addition to three low secure wards. The crisis team work from the same site as the Chichester ATS team base.
	Each ward has a separate dedicated in-patient consultant. The successful post holder is expected to liaise closely with them.
3.8	The post holder would have interactions with other local mental health teams. They would be expected to form a working relationship with the acute ward consultants and crisis team as well as relevant third sector organisations, including local drug and alcohol and homeless support services.
3.9	The post holder would be expected to engage in the Trust Wide SAS network, including participation in SAS training and engagement events.
3.1	The post holder will be community-based working 10 PAs in the Chichester ATS and provide reciprocal leave cover for other medics within the service.
	The post holder will support the Mental Health Liaison Practitioners and Assessment and Treatment function. The ATS provides a service during core working hours only (9am to 5pm). There is one MDT member on duty each day, to manage urgent or emergency situations.
	Adult Mental Health Services provide an ageless model for functional mental illness though there is separate Consultant Psychiatrist input for older people with physical complexity or dementia. All job plans will be subject to review as part of service development and career progression.
	Team members are able to carry out comprehensive initial assessments, and are able to formulate initial treatment plans with medical input when necessary. There will be an expectation that the post holder will work closely with senior medics and managers.



3.1	This post is within the Coastal and North West Sussex Care Delivery Service (CDS). The CDS is responsible for the delivery of high-quality services across West Sussex. The service director for adult mental health is Ruth Hillman. The Clinical Director is Dr Claire Tanner.
3.1	The post holder will be expected to provide medical input to the team, as described elsewhere in the job description. They will also be expected to participate in local leadership meetings and work with local operational leads on service development and the improvement of quality of services locally.
3.1	There are approximately 120 referrals to the Chichester ATS per calendar month.
3	Referrals are managed by our Referral Co-ordinators with support from other clinical colleagues and there are waiting time targets for urgent, priority and routine referrals. We have a dedicated urgent/priority telephone line and receive verbal referrals for referrals of this nature and Referral Co-ordinators agree our level of response in consultation with the referrer and patient. The post holder will support referral management and the triage function and will be job planned to allow the post holder to offer medical advice and screen referrals that may require a medical consultation.
	Referrals will be allocated by team leaders to the appropriate team member, depending upon the clinical details of the referral. The post holder will be expected to see referrals requiring medical review, for example patients requiring assessment and diagnosis or medication review. Other team members will see referrals not requiring medical input, either the mental health liaison practitioners or ATS team members.
	The post holder will have access to support to actively manage their caseload from the clinical lead/lead psychiatrist.
3.1	The role of the post holder in the ATS team will be to see new assessments, providing detailed assessments, formulation and risk assessments, to develop management plans and review these in an outpatient setting. The post holder will be expected to review patients already known to the ATS as required, during their journey through the ATS system. The post holder will direct these patient's treatment. The post holder will liaise with local primary care services and provide advice and guidance. They will provide advice to other members of the team including the duty worker. They will provide clinical leadership to the ATS, with fellow psychiatrists.
3.1 5	The post holder would be expected to hold outpatient clinics. The post holder would be provided with clinical supervision by one of the consultants.
	They would also be expected to provide medical cover for the urgent work generated by the ATS with the consultants.
3.1	The ATS team works within the Trusts 2020 vision and in line with the current clinical strategy. The clinical strategy is focused on developing teams, implementing new roles, working towards providing a single point of access for people in crisis, working more effectively with communities, and more integration between community, crisis and acute services with the aim of providing high quality mental health care. The post holder will be expected to work towards these Trust goals.
	Mental Health services in Chichester have close links with primary care and third sector partners.



3.1	The Trust has been rated 'outstanding' in caring by the CQC and 'good' in all other domains. The Trust has strong links with Brighton and Sussex Medical School and regularly hosts students of various disciplines.
	The Trust website can be found here: https://www.sussexpartnership.nhs.uk/
3.1	Chichester ATS has close links to Bognor ATS. The team also works with crisis and in-patient services to support patients during their journey through services.
3.1 9	The post holder would be expected to be involved in and support service development projects occurring locally and to work within the Trusts clinical strategy and towards CDS aims and objectives.
3.2	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.
4.0	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. Specialty Doctors 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 £500 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

There are local peer supervision groups for SAS grade doctors and the post holder would be expected to join one.

All Specialty Doctors have a responsibility for ensuring their own continuing professional development and are expected to register for CPD with the Royal College of Psychiatrists. Specialty Doctor 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.

#### 5.0 Clinical Leadership and medical management

Medical management across the Trust is led by our Chief Medical Officer who is supported by Medical Directors, Associate Medical Directors, Clinical Directors, Clinical Leads and a Chief Pharmacist. The Trust will also be recruiting to the newly created SAS Advocate post, who will promote and improve support for SAS doctors' health and wellbeing.

Quality Improvement is the chosen improvement methodology for this organisation and the post holder will be expected to:



Detail how the post holder will lead on the improvement of quality of care within the team and wider system. Example:

- Develop a clinical leadership role within the multidisciplinary team and across the service as a whole and work with colleagues and management to ensure optimal service delivery.
- Participate in business planning for the locality and, as appropriate, contribution to the broader strategic and planning work of the Trust.
- Lead the improvement of the quality of care within the team and contribute to improving quality across the system.

The post holder will be encouraged to contribute to other relevant management activities within the Directorate and the Trust. This might include participation in clinical governance activities or relevant working groups.

# 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 Aruna Wijetunge, Deputy Chief Medical Officer is the Responsible Officer.

Trust doctors are encouraged, if interested, to become appraisers themselves and training for this role 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 specialty doctors.

#### 7.0 Teaching and training

Sussex Partnership has a strong and progressive Medical Education Team that supports high-quality patient-centred training across the Trust. We recognise that SAS doctors make significant contributions to the advancement of psychiatry in areas of education, leadership, research and governance.



SAS doctor continuing professional education is underpinned by robust Governance arrangements. Our dedicated SAS Tutor is a member of the Medical Education Team and the first point of contact for all SAS Doctors. The SAS Tutor is there to support and offer advice and guidance on career related issues, education and development and the use of SAS funding at a local level.

Everyone benefits from SAS doctors receiving appropriate supporting professional activity time and study leave for revalidation preparation and continuing professional development (CPD). The SAS Tutor works closely with the Medical Education Team to address SAS training needs locally and to offer formal training pathways where appropriate. All SAS doctors have access to internal and external CPD activities / training programmes (including our well established and highly regard Trust Academic Programme) as well as study leave time and funding; this is equivalent to their consultant colleagues and encompasses 10 days of study leave per year and a study budget of £1,500 over a 3 year cycle. As an organisation we regularly organise cross cover or rotate attendance at training days to ensure that all SAS doctors have the opportunity to attend.

The Medical Education Team is proactive in enabling SAS doctors to assume extended Education Roles, such as Educational Supervisor and Simulation Facilitator, in support of our progressive Medical Education Strategy. SAS doctors are invited to collaborate with the Medical Education Department across all of its key work streams including understanding and reducing Differential Attainment in International Medical Graduates, developing and delivering multi-professional Simulation, teaching students from Brighton and Sussex Medical School, Leadership Development and developing innovative teaching strategies including a virtual patient experience.

The Medical Education Team is establishing a SAS Local Faculty Group chaired by the SAS Tutor and attended by the Director of Medical Education and this will focus on:

- Ensuring SAS doctors have access to support and guidance relating to application for Certificate of Eligibility for Specialist Registration (CESR)
- Supporting CESR Applicants to apply for additional funding for personal and professional development activities where available
- Supporting and allocating time to SAS doctors to enable their full participation in the SPFT annual appraisal process including access to appraisee training (and appraiser training where applicable) and the necessary CPD and study leave requirements, which naturally arise from appraisal
- SAS doctor involvement in extended roles (Education Roles, Management Roles; Appraisal Roles; Education Roles)
- The development of the roles of SAS Tutor, SAS Clinical Lead and SAS Mentors (who support professional and personal development needs as well as appropriate support and time to learn new skills)
- The systems and processes for SAS doctors to undertake secondments in line with SPFT policy
- The breadth and depth of clinical work and relevant professional activities to enable the SAS doctors to achieve and maintain relevant competencies and develop as clinicians



Our Medical Education website is updated regularly and provides a valuable resource which covers all aspects of Medical Education. SAS doctors also have access to our full range of virtual and in person Library and Knowledge Services.

#### 8.0 Research

Sussex Partnership is the most active mental health research organisation in the south of England with more than 9000 participants taking part in high quality research studies since 2010. Indeed during 2016/17 we were one of the highest recruiting mental health Trusts in England and have generated over £9 million in income. 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

It is desirable for the post holder to have s12(2) approval or gain this within the first 3 months of the post.

# 10. Secretarial Support and office facilities

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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 from a pool of administrators working for the team. .

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

The post holder will have a designated workspace with lockable storage. For all clinical work, teaching, case discussion, meeting with colleagues, other professionals or families, bookable rooms with access to IT and communication technology are available with advance booking. Regular clinics, reviews and meetings are block booked in advance by the admin team. The post holder will have administrative support to ensure that letters and reports are typed up



and sent out within the time limits agreed between the provider organisation and commissioners.

#### 11. Clinical duties of post holder

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The post holder is required to:

- Attend team meetings, support the triage function of the team, support the duty
  workers with urgent clinical situations, undertake new patient reviews, including
  completing formulations and risk assessments for these patients, be available for
  clinical discussions with team members about patients on the team caseload, hold
  follow up reviews of patients on the postholders case load.
- Provide assessments of new patients and formulate treatment plans.
- Support the triage functions of the team if requested, with medical expertise.
- To use evidence-based treatment and follow local and national guidelines.
- To work collaboratively and liaison with other teams within the Trust, other NHS organisations and third sector providers.
- To use the Mental Health Act, as appropriate, within the course of their duties.
- To work in a collaborative, multi-disciplinary, multi-agency and partnership way.
- To provide medical treatment within a model of multi-disciplinary care
- Attending weekly clinical team meetings and performing medical duties that are decisions of that meeting
- Compiling a patient's history from a number of sources, and preparing case summaries.
- Preparing reports for Mental Health Review Tribunals and Managers' Hearings and giving evidence
- Liaising with other clinical teams within and outside the trust
- Liaising with general practitioners and medical specialists with regards the physical health of the patients
- Assessment of patients out of area on rare occasions.

#### 12. Clinical governance and quality improvement

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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 is a key 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. General Duties

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- 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 Specialty Doctors
- 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 (if appropriate to role), 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

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

#### 15. Other duties

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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

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It is envisaged that the post holder will work 10 programmed activities over 5 days. 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 9 to be devoted to direct clinical care and 1 to supporting professional activities

Specific programmed activity may be agreed in line with both individual and service need.

		AM/ PM	LOCATION		TYPE OF WORK	DCC/SPA
Mon	AM	Chapel	Street	Assess	ments/reviews	DCC
	PM	Chapel	Street	Assess	ments/Admin	DCC
Tues	AM	Chapel	Street	Triage,	team meeting/	DCC
	PM	Chapel	Street	Admin	/urgent staff consultation slots	DCC
Wed	AM	Chapel	Street	Assess	ments/reviews	DCC
	PM	Chapel	Street	Acadeı	mic Programme/SPA activities	SPA
Thurs	AM	Chapel	Street	Assess	ments/reviews	DCC
	PM	Chapel	Street	Admin/urgent staff consultation slots		DCC
Fri	AM	Chapel	Street	Assess	ments/reviews	DCC
	PM	Chapel	Street	Admin	/urgent patient review slots	DCC

**Note**: It must be accepted that the resources available to the Trust are finite and that changes on workload and developments requiring additional resources must have prior agreement through Trust management arrangements.

#### 17. On call and leave cover arrangements

• There is no on-call duty attached to this post.

Leave cover to be agreed with other doctors in the team.

#### 18. Leave and cover arrangements

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The post holder is entitled to 27 days of annual leave plus bank holidays for the first 2 years of their service. 32 days of annual leave plus bank holidays for over 2 years of their service and 34 days plus bank holidays after 7 years of service. 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 specialty doctors and is agreed and authorised using electronic unavailability management software.



# 19. Contract Agreement

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The post will be covered by the terms and conditions of service for Terms and Conditions of Service – Specialty Doctor (England) April 2021 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. Wellbeing

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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.

Contact Information and services provided by Occupational Health can be found on the Trust intranet.

- The Trust recognises that being involved in a serious incident can have a significant impacton a clinician's wellbeing. The following wellbeing systems are available to doctors in such an event:
  - Discussion with Team Leader/Service Manager
  - Discussion with the Clinical Lead or Clinical Director
  - Team Debrief
  - 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
  - Reflective discussion during the annual appraisal meeting
- 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. A list of our ongoing wellbeing activities across the Trust can be found on the Trust intranet.

The Trust has a new SAS Advocate post and appointed, Dr Susan Hamilton, who will promote and improve support for SAS doctors' health and wellbeing.

#### 21. Visiting arrangements

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Candidates are welcome to visit our services and meet the team using the below contact details.

Dr Claire Tanner, <a href="mailto:claire.tanner@spft.nhs.uk">claire.tanner@spft.nhs.uk</a>



Further details about our Trust can be obtained via our website <a href="https://www.sussexpartnership.nhs.uk">www.sussexpartnership.nhs.uk</a>

# 22. Equality & Diversity Statement

**0** 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.



# Person specification/selection criteria for Specialty Doctor

ASSESSMENT STAGE	SCR Screening prior to short-listing	<b>AAC</b> Advisory Appointments Committee	PRES Presentation to AAC panel
ABBREVIATIONS	<b>SL</b> Short-listing from application form	REF 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
	MB BS or equivalent medical qualification.	SCR	Qualification or higher degree in medical education, clinical research or management.	SL
QUALIFICATIONS	4 years at full-time postgraduate training or higher or equivalent experience with at least 2 years in a specialty training programme in a relevant specialty	SCR	MRCPsych	SCR
			Additional clinical qualifications.	SL
	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
ELIGIBILITY			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
	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		
CLINICAL SKILLS, KNOWLEDGE &	Excellent oral and written communication skills in English	SL, AAC, REF		
EXPERIENCE	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		
	Able to deliver undergraduate or postgraduate teaching and training	SL, AAC	Experienced in clinical research and / or service evaluation.	SL, AAC
ACADEMIC SKILLS &	Demonstrate commitment to shared leadership & collaborative working to deliver improvement.	SL, AAC	Evidence of achievement in education, research, audit and service improvement: awards, prizes, presentations and publications.	SL
LIFELONG LEARNING	Participated in continuous professional development	SL, AAC	Has led clinical audits leading to service change or improved outcomes to patients	SL, AAC
	Participated in research or service evaluation.	SL, AAC		
	Able to use and appraise clinical evidence.	SL, AAC		



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,	