

Job description and person specification

Post and specialty:	<p>Specialty Doctor with Pennine Home Treatment Team (HTT) East, Daisyfield Mill, Appleby Street, Blackburn.</p> <p>New post to increase Senior medical support to an established and well-functioning HTT managing support and treatment for patients with acute moderate and severe mental health difficulties</p>
Base:	Daisyfield Mill, Appleby Street, Blackburn, BB1 3BL
Contract:	<p>Total number of programmed activities: 10</p> <p>Direct Clinical Care (DCC): 8</p> <p>Supporting Professional Activities (SPA): 2</p> <p>Option for additional 2PAs for the on-call rota</p>
Accountable professionally to:	The post-holder will be responsible to the Chief Medical Officer through the Network Medical Director, Associate Medical Director and HTT Consultants.
Accountable operationally to:	<p>Network Medical Director: Dr Prashant Kukkadapu</p> <p>Locality Director of Operations: Amy Devine</p>
Key working relationships and lines of responsibility:	<p>Line Manager : Dr Haroon Moosa/ Dr Lee Kumalo - HTT East Consultants</p> <p>Associate Medical Director : Dr Euan Robertson</p> <p>Locality Medical Director: Dr Prashant Kukkadapu</p> <p>Locality Director of Operations: Amy Devine</p> <p>Locality Nursing Director : Joanne Schofield</p> <p>Chief Medical Officer/Responsible Officer : Dr David Fearnley</p> <p>Chief Operating Officer: Emma McGuigan</p> <p>Deputy Chief Medical Officer : Dr Gareth Thomas</p> <p>CCIO: Dr Mark Worthington</p> <p>Director of Medical Education: Dr Varinder Singh</p> <p>SAS Tutor: Dr Oladipo Adepoju</p> <p>Chief Executive Officer: Chris Oliver</p>

Description of the role

The successful applicant will be based with Pennine East Home Treatment Team (HTT), working with the team and assessing and providing care for acute Psychiatric outpatients with significant Mental Health disorders.

There will be some flexibility to the work based on clinical need though it will include undertaking routine reviews, urgent assessments and MDT and Consultation work with the HTT alongside the team Consultants. Involvement in management of acute physical health presentations of HTT patients would also be expected.

The role is an excellent opportunity to develop and build on existing experience of Adult Psychiatry in acute presentations and medium-term treatment and management planning and to work with Medical and non-Medical colleagues already established within these parts of our service.

There will be dedicated supervision from a Consultant Psychiatrist.

Administrative support will be available from the Medical Secretary with the team.

Whilst primarily responsible for delivering a quality clinical service, the Specialty Doctor can also be actively involved in the strategic development of the team and broader services, being involved with the Consultant, Team Leader and Service Manager in helping to steer the development of services in line with the strategic direction of the organisation.

The Pennine Lancashire area

Pennine Lancashire Locality serves a catchment area of around 500,000 covering the areas of Burnley, Pendle, Rossendale, Hyndburn and the Ribble Valley and Blackburn with Darwen. Pendle is at the end of the M65 motorway and has good road links in to North Manchester and Yorkshire. The locality has a demographically and geographically diverse catchment area with a population of around 90,000.

Blackburn with Darwen

The unitary authority of Blackburn with Darwen has a multicultural population of around 150,000 with the majority of the boroughs residents living in the towns of Blackburn and Darwen with the remaining residents living in the rural villages and hamlets of Hoddlesden, Edgworth, Belmont, Chapel Town and Tockholes. The borough as a whole has a relatively young age profile. It has a higher than average proportion of young people (0-19) compared to the national figure and conversely, a smaller proportion of older people aged 65 and over. In terms of deprivation the Index of Multiple Deprivation indicates that some areas of Blackburn are in the top 10% most deprived in England and the health of residents is below the national average.

Hyndburn, Rossendale and Ribble Valley

Hyndburn which is made up of Accrington and the urban districts of Church, Clayton-le-Moors, Great Harwood, Oswaldtwistle and Rishton, has a population of around 80,000 and was the 18th most deprived area out of 317 districts and unitary authorities in England. Figures for life expectancy at birth reveal that the Hyndburn district had very low male and female averages in comparison to the national figures and the health of people in Hyndburn is generally worse than the England average.

Rossendale has a population of around 70,000 and is made up of small former mill towns and villages centred on the valley of the River Irwell. The borough is linked by the motorway network to Manchester, Burnley and Blackburn. Bordering Greater Manchester southwards, it is 17.4 miles to Manchester city centre via the Edenfield by-pass and the M66. The area ranked 91st most deprived area out of 317 districts and unitary authorities in England. The Health Profile 2019 reveals that the health of people in Rossendale is below the national average.

The Ribble Valley is predominantly rural and is a relatively affluent area with low population density. It is ranked 282nd of 317 districts in the MDI. It contains the market towns of Clitheroe and Longridge and neighbouring villages, includes most of the Forest of Bowland (AONB) and is close the Yorkshire Dales National Park.

Burnley & Pendle

Burnley has a demographically and geographically diverse catchment area with a population of around 90,000. According to the 2019 index of multiple deprivation Burnley was ranked as the 11th most deprived area out of 317 districts and unitary authorities in England. Burnley and the Burnley district has a large number of employment and support allowance claimants and in comparison to the national average, there is a high percentage of the working age population that is reliant on welfare benefits. The Burnley Health Profile 2019, published by Public Health England, reveals that the health of people in Burnley is significantly worse than the England average. Burnley has a developing student population with part of the UCLAN campus recently moving into the area around the historic Weaver's Triangle in the town.

Pendle is ranked the 36th most deprived area out of 317 districts and unitary authorities in England (The 2019 Indices of Deprivation). Pendle has a rich history and heritage with traditional urban and industrial areas, market towns and rural villages. Part of the Pendle catchment area is classified within the Forest of Bowland, an Area of Outstanding Natural Beauty. Figures for life expectancy reveal that the Pendle district has averages below the national figures and the Pendle Health Profile 2019, published by Public Health England, reveals that the health of people in the area is generally worse than the England average.

Pennine Lancashire Locality Inpatient Services

Pendleview & Hillview, Royal Blackburn Hospital

The inpatient mental health units at Royal Blackburn Hospital comprise of five wards providing 24 hour care for patients between the ages of 18-65 years old.

Each ward has a mixed assessment and treatment function. Ribble (male) and Edisford (female) each have 14 beds, Darwen Ward (male) has 19 beds, Hyndburn Ward (female) has 20 beds.

There is one PICU (Calder Ward) which has 6 beds for patients needing psychiatric intensive care.

Hurstwood Ward is an Older Adult advanced care ward for patients with a combination of high level psychiatric and physical care needs.

Woodview, Whalley

Woodview, Whalley opened in November 2023 on the site of Merseycare Whalley (formerly Calderstones Hospital). It comprises two acute 12 bed wards and an 8 bed Psychiatric Intensive Care Unit on the outskirts of the well-known village of Whalley, in the Ribble Valley in Lancashire.

The Inpatient Restart & Recovery Team work across all wards providing individualised recovery focused treatment plans in collaboration with the patient.

Pennine Lancashire Locality Community Services

START

There are 3 Specialist Triage Assessment and Response Teams (START) one based in each of the main bases (Pendle House, The Mount, Daisyfield Mill). The START teams manage referrals to Mental Health services.

Community Mental Health Teams (CMHTs)

There are 6 CMHTs in Pennine Lancashire. The teams covering Burnley and Pendle are based at Pendle House in Nelson (satellite base Gannow Lane, Burnley). The teams covering Hyndburn, Rossendale and Ribble Valley are based at The Mount in Accrington (satellite base Ballden House, Rossendale). The teams covering Blackburn and Darwen are based at Daisyfield Mill in Blackburn (satellite base Darwen Resource Centre).

Home Treatment Teams (HTT)

There are 2 HTTs in Pennine Lancashire. HTT East are based at Pendle House in Nelson and HTT West at Daisyfield Mill in Blackburn. Each team has 2 Consultant Psychiatrists working within an MDT supporting patients who need acute intensive treatment in the community.

Mental Health Liaison Team (MHLT)

The MHLT is based at Royal Blackburn Hospital and provides cover to Burnley General Hospital to provide rapid assessment for patients on the acute site whether via the Emergency Department or if an inpatient on the wards. The MHLT has dedicated senior Psychiatrists working alongside a well established MH nursing team.

There is a specific team working with patients detained under section 136 MHA and 'contingency beds' with Consultant Psychiatry support.

Other services

Older Adult Mental Health Services provide similar services to Adult Psychiatry for their particular patient group including CMHT, HTT (RITT – Rapid Intervention and treatment Team) and MHLT.

The Early Intervention Service (EIS) has a dedicated team for Pennine Lancashire based at The Mount in Accrington.

Continuing professional development (CPD)

Specialty doctors are expected to maintain personal portfolios in accordance with the requirements of the Royal College of Psychiatrists; to participate in a CPD peer group; and to obtain an annual certificate of “good professional standing for CPD” from the College.

Study leave arrangements for medical staff are in accordance with the new medical staff contract within Lancashire and South Cumbria NHS Foundation Trust.

Regular clinical supervision is an important part of professional development and it is the post holder’s responsibility to access the appropriate levels of supervision and locality peer review group to support and further develop their clinical practice.

All doctors are encouraged and expected to join a peer group for their annual CPD submission and medical appraisal. This can be externally if the doctor is already part of a peer group prior to joining the Trust, or internally within the Trust. There are opportunities to join any of the existing Trust groups. In case there is a number of doctors recruited at one time, colleagues in the medical education can facilitate communication to form a new peer group as necessary.

For all new specialty doctor appointments supervision arrangements are available through the Associate Medical Director.

In addition to possible academic input into the University, consultants are also expected to contribute to postgraduate psychiatric training as required and to other training initiatives within Lancashire and South Cumbria NHS Foundation Trust.

There is an active local programme of case conferences and journal clubs in the locality. The post holder will be expected to participate in appropriate local programmes as agreed with the supervising consultant. An active research interest would also be encouraged.

Certificate of Equivalence for Specialist Registration (CESR)

The trust has an established program to support doctors wishing to attain Specialist Registration via the CESR route including a peer group, CPD and mentorship. The post holder will be supported in accessing this program if they wish to do so.

Clinical leadership and medical management

The Trust is committed to the full involvement of clinical staff in the management and development of the service. In the current arrangement a consultant Deputy Associate Medical Director (DAMD) and clinical manager support each part of the service.

The Associate Medical Director (AMD) liaises closely with medical colleagues, the Network Medical Director and the Chief Medical Officer to provide clinical leadership and direction to the service.

The Trust would encourage the post holder to participate in regional and national groups, activities of the Royal College, GMC, DOH and similar bodies. Such activities have to be discussed and agreed

with the Associate Medical Director and have to be approved by the Chief Medical Officer in accordance with the relevant Trust policies.

The Trust has an active audit programme and the post holder will be expected to participate in and lead local and Trust-wide audit activity and to be involved in audit training for medical and other disciplines.

Appraisal and job planning

There is a well-developed programme of annual appraisal and job plan reviews. The post is subject to the Trust annual appraisal process leading to revalidation. There is a Trust policy relating to medical staff appraisals.

It is envisaged that the 10 PAs of a full-time working week will consist of 8 PAs direct clinical care and 2 PAs of supporting professional activities as per RCPsych recommendations (1.5 SPA for activity needed to maintain revalidation). This will be subject to job planning and depend on the post holder's other roles such as education or research.

Corporate Induction Programme

The post holder will be expected to attend the Trust Corporate Welcome, which currently takes place virtually via MS Teams. There will also be a face to face induction with the Medical Relationship Team, which will last for one or two days, depending on individual needs. This session will include some administrative activities associated with starting at the Trust, as well as some dedicated time for mandatory training. Finally the post holder will be invited to a half day Medical HR bespoke induction so that they have the opportunity to meet members of the team who will be able to discuss a range of topics related to various systems and processes used at the Trust. They will also have the opportunity to ask any questions.

Teaching and training

The Trust is committed to promote both undergraduate and postgraduate medical training. The post holder will be expected to engage in both formal and informal education of multidisciplinary colleagues which includes regular participation in the weekly postgraduate training programme at the Lantern Centre which is 17 miles from base.

The post holder may also wish to attend some teaching sessions or deliver teaching at their locality hospital.

The post holder will have access to the library facilities in The Lantern Centre.

The Trust has a special study leave policy for medical staffing and various in-house training activities takes place both at locality and Trust level.

The Trust has started rolling out a leadership programme for all its senior managers. The post holder will be encouraged to develop her/his leadership skills by participating in one of these programmes.

The Trust has a range of training events developed 'in-house' to improve management skills.

Audit: the post holder is expected to conduct or participate in audits aiming to improve the services locally as well as actively participate in the Trust high priority audits and any regional or national audits that the Trust participates in.

Research

LSCFT is committed to developing and undertaking research studies that enable us to deliver high quality evidence-based care and services to people in our local community.

The Trust has a well-staffed Research & Development Department and provides extensive support for staff undertaking commercial trials and non-commercial studies, including developing grant proposals and partner engagement.

LSCFT has strong collaborations with regional and national academic partners including the Universities of Manchester, Central Lancashire and Lancaster. The Trust is part of the National Institute for Health Research's Clinical Research Network: North West Coast (CRN: NWC), the North West Coast Collaboration for Leadership in Applied Health Research and Care (NWC CLAHRC) and hosts the Innovation Agency in the region. The Trust's strategic research plan involves continuing to develop its reputation for quality research that benefits local services and local people.

LSCFT has a unique partnership with the neighbouring Lancashire Teaching Hospitals Foundation Trust in a dedicated Clinical Research Facility. This enables both Trusts to work together in delivering complex clinical trials for the benefit of our patients. The post holder will be strongly encouraged to take an active part in some of the many ongoing research projects within the Trust and/or develop their own research projects.

Mental Health Act and Responsible Clinician approval

Approval under section 12 (2) of the Mental Health Act would be desirable though if the candidate does not hold this authority then the post may allow the experience and opportunity to apply for this approval.

Secretarial support and office facilities

There is office space at Daisyfield Mill suitably equipped with a laptop, mobile and desk phone.

Secretarial support is provided by the Consultant's full time Band 4 Medical Secretary based at Daisyfield Mill.

Other administrative support is available as required by the HTT Admin team.

Clinical duties of post holder

A specialty doctor is expected to:

- Demonstrate an understanding common Mental Health Conditions, including the interface between physical illness and mental illness; undertake diagnosis and formulation of management plans including in complex cases and assess and manage risk (e.g. suicide risk, violence/aggression, absconding) relating to psychiatric conditions in HTT setting.

- Provide advice on prescribing of psychotropic medication; provide expertise, and fulfil a statutory role, in managing medico-legal issues including application of mental health and mental capacity legislation where appropriate; understand the medical issues in assessing patients with medically unexplained symptoms and understand the medical issues in mental health problems associated with long-term conditions.
- Collaboration with colleagues to enable availability for emergency assessments through the daytime (9am to 5pm). The post holder would not routinely participate in locality inpatient work unless part of a cross-cover agreement.

Training duties

The post holder will be expected to engage in both formal and informal education of multidisciplinary colleagues.

The post holder will be encouraged to obtain approval as a specialist trainee trainer.

The post holder will be encouraged to participate in the academic and teaching programmes, teaching the medical students and other mental health professionals if they are attached to the clinical team.

The post holder will have access to the library facilities in the Lantern Centre.

Medical undergraduate students: the Trust provides training for undergraduate students from Manchester and Lancaster Universities and the post holder is expected to actively participate in their training programme.

Clinical governance and quality improvement

Specialty doctors are expected to be aware of the principles of clinical governance and to work towards achieving continuing improvement in all aspects of service delivery in line with the aims of Lancashire and South Cumbria NHS Foundation Trust.

Specialty doctors have the opportunity to contribute to development of guidelines, clinical policies, monitoring and reviewing procedures through membership of the Medical Advisory Committee, Drugs & Therapeutic Committee and Local Negotiating Committee.

The post holder will be expected to ensure, together with other professionals in the service, that clinical audits are carried out as required and that the work is regularly evaluated and reviewed.

The Trust supports the view that whilst clinical audit is fundamentally a quality improvements process it also plays an important role in providing assurances about the quality of services.

The Trust considers that the prime responsibility for auditing clinical care lies with the clinicians who provide that care.

General duties

- To undertake the administrative duties associated with the care of patients.
- To record clinical activity accurately, comprehensively and in a timely manner.
- To participate in service and business planning activity for the locality and, as appropriate, for the whole mental health service.
- To participate in annual appraisal.
- To attend and participate in the academic programme of the Trust, including lectures and seminars as part of the internal CPD programme.
- To maintain professional registration with the General Medical Council, Mental Health Act Section 12(2) approval, and to abide by professional codes of conduct.
- To participate annually in a job plan review with the clinical manager, which will include consultation with a relevant manager, in order to ensure that the post is developed to take into account changes in service configuration and delivery associated with modernisation.
- To work with local managers and professional colleagues in ensuring the efficient running of services.
- To comply with the Trust's agreed policies, procedures, standing orders and financial instructions.

External duties, roles and responsibilities

The Trust actively supports involvement in regional and national groups subject to discussion and approval with the medical director and, as necessary, the chief executive officer.

Other duties

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

Work programme

It is envisaged that the post holder will work 10 programmed activities over 5 days. Following appointment there will be a meeting at no later than three months with the clinical manager to review and revise the job plan and objectives of the post holder. An additional 2 PA activity would be payable if part of and eligible for the on-call rota.

The overall split of the programmed activities is 8 to be devoted to direct clinical care and 2 to supporting professional activities (as per the Royal College of Psychiatrists recommendation).

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.

JOB PLAN

The weekly timetable shown in the table below is an example of a typical timetable for a Specialty Doctor working with HTT. The exact timetable for the postholder would be discussed and agreed with the HTT Consultant and team and through the Job Planning process.

Day	Time	Work	Category	No. of PAs
Monday	9am -1030am 1030am -1pm	MDT meeting Patient reviews	DCC	1 (4 hours)
	1pm – 5pm	Clinical admin Patient reviews	DCC	1 (4 hours)
Tuesday	9am -1030am 1030am -1pm	MDT meeting Patient reviews	DCC	1 (4 hours)
	1pm – 5pm	Clinical admin Patient reviews		1 (4 hours)
Wednesday	9am -1030am 1030am- 12pm	MDT meeting MDT Consultation	DCC	0.75 (3 hours)
	12pm – 1pm	Supervision	SPA	0.25 (1 hour)
	1pm – 4pm	Teaching/CPD (remain available for urgent clinical work)	SPA	0.75 (3 hours)
	4pm – 5pm	Clinical admin	DCC	0.25 (1 hour)
Thursday	9am -1030am 1030am -1pm	MDT meeting Clinical work	DCC	1 (4 hours)
	1pm – 3pm	CPD/revalidation activity	SPA	0.5 (2 hours)
	3pm – 5pm	Other SPA activity, nature to be determined	SPA	0.5 (2 hours)
Friday	9am -1030am 10am -1pm	MDT meeting Clinical work	DCC	1 (4 hours)
	1pm – 5pm	MHA work/ Clinical Admin/Other clinical meetings	DCC	1 (4 hours)
Total PAs	DCC 9 (32 hours) SPA 2 (8 hours; remain available for urgent clinical work)			

On-call and cover arrangements

The post holder may be able to participate in the out-of-hours duty rota. Out of hours on-call rotas (3 localities) are all 1 in 9 on the 2nd tier subject to planning. This is a full on-call and covers adults and older adults requiring Mental Health Act assessments or assessments in police stations or other environments. The post holder will be remunerated with an extra 2 PAs + 2% availability supplement. The post holder would need section 12(2) approval to participate in the on-call rota.

The post holder will be treated at par with existing specialty doctors for on-call remuneration.

There is no requirement to be resident on call. You will be supported by a 1st tier rota (comprising doctors in the CT grade, GPST, FY2 trainees and equivalent Trust grades). These doctors cover the 'Pennine' locality and provide cover to other sites as well.

It is accepted that the specialty doctor will be asked with other colleagues to provide emergency cover in case of sudden or short-term sickness or emergencies. This is not a reciprocal arrangement and it is aimed to provide continuity of care. Any long-term sickness will normally be covered by separate arrangements as per the Trust policy.

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.

Leave

The post holder is entitled to up to 33 days of annual leave dependent on seniority per year and 30 days study leave over three years.

The post holder is entitled to 10 days study leave per annum, an allowance which can be utilised over a period of three years with prior approval of the Associate Medical Director and Director of Medical Education.

Wellbeing

All staff will have access to the Occupational Health (OH) Department, (Well Service, provided by East Lancashire NHS Trust). The post holder may self refer or be referred through their manager. The post holder will have access to the 24 hour Health Assured service, which provides free counselling, including face-to-face, and well as legal and financial support, online CBT and wellbeing resources. Information about Occupational Health and Health Assured will be disseminated at the induction and regularly when in post to ensure the post holder has timely access to the details if help seeking is necessary.

Supporting the wellbeing of the post holder after serious incidents that involve patients in their care (e.g. homicide or suicide) is paramount, and a dedicated senior clinician will provide support and advice as needed after the incident. Details of the senior clinician able to offer this support will be provided via the Medical Directorate at the time of initial induction.

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

The trust has several initiatives to support wellbeing that the post holder is encouraged to participate in. These currently include flexible working, flexible retirement, season ticket scheme, lease vehicle scheme, cycle scheme, retail and restaurant discounts, eye test scheme, free health checks, menopause support, gym discounts, wellbeing events, mindfulness courses, wellbeing walks and jogs, and parenting workshops. The post holder will form part of a consultant peer group who meet regularly.

Visiting arrangements

Applicants or prospective applicants are strongly encouraged to visit the Trust and to meet prospective colleagues.

Informal discussions to discuss the job or arrangements for visiting may be made with:

HTT Consultants	Dr Lee Kumalo, Dr Haroon Moosa
Consultant /AMD	Dr Euan Robertson (01282 657339)
NMD	Dr Prashant Kukkudapu
Medical Director	Dr David Fearnley (01772 773513)

Lancashire and South Cumbria NHS Foundation Trust
Sceptre Point, Sceptre Way
Walton Summit, Bamber Bridge, Preston, PR5 6AW

Telephone: 01772 773513

GENERAL TERMS AND CONDITIONS

All terms and conditions of service are in accordance with those detailed in the Specialty Doctor Contract Terms and Conditions (2003), Hospital Medical and Dental Staff (England and Wales), General Whitley Council and where applicable those of the Trust. These may vary from time to time.

The appointee will be expected to work with local managers and professional colleagues in the efficient running of services, and will share with consultant colleagues in the medical contribution to management. Subject to the provision of the Terms and Conditions of Service, he/she 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. The appointee 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 their patients, to be able to contact a specialty doctor when necessary.

The successful candidate will be expected to maintain existing service commitments and comply with Trust performance targets.

Residence/Removal Expenses

The appointee will be required to live within 10 miles or 30 minutes of their clinical base unless the Chief Medical Officer and CEO agree to a greater distance. If the appointee is required to move house to meet the residential clause of the contract, removal expenses may be payable. Terms and Conditions of service state that the “removal expenses shall be reimbursed and grants paid only when the employing authority is satisfied that the removal of the practitioner’s home is required and that the arrangements proposed are reasonable”. Therefore, successful candidates are advised not to enter into contractual agreement until such time as the formal approval of the Trust is confirmed in writing.

Health & Safety

The Trust recognises its duties under the relevant Health and Safety at Work legislation and to ensure, as far as reasonably practicable, the health, safety and welfare at work of all its employees. All medical and dental staff under contract to the Trust will be expected to be familiar with and adhere to the Health and Safety Policies of the Trust.

Rehabilitation of Offenders Act 1974

Due to the nature of this work, the post is exempt from the provisions of section 4(2) of the Rehabilitation of Offenders Act 1974 (Exceptions Order) 1975.

Applications for the post are not entitled to withhold information about convictions which for other purposes are ‘spent’ under the provision of the Act, and in the event of employment, any failure to disclose such convictions could result in disciplinary action or dismissal by the Trust. Any information given will be treated in the strictest confidence and will be considered only in relation to an application for a position to which the order applies.

Professional Standards

The Associate Medical Director is managerially responsible for all activity in which the specialty doctor works. The Chief Medical Officer has overall responsibility for the professional performance of specialty doctors employed by the Trust. All doctors are expected to comply with management arrangements in place, to follow the guidelines on practice laid down by the General Medical Council’s “Maintaining Good Medical Practice”, and to be accountable to the Trust for their actions and the quality of their work.

Maintaining medical excellence/Responding to Concerns

LSCFT is committed to provide safe and effective care for patients. To ensure this, there is an agreed procedure for medical staff that enables them to report quickly and confidentially, concerns about conduct, performance or health of medical colleagues (Chief Medical Officer 1996). All medical staff practicing in the Trust should ensure that they are familiar with the procedure and should apply it.

Person Specification –Speciality Doctor

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.	Screening	Qualification or higher degree in medical education, clinical research or management. Section 12(2) MHA approval Approved Clinician status	Short-listing
			MRCPsych	Screening
			Additional clinical qualifications relevant to the role such as a diploma or MSc in liaison or neuropsychiatry.	Short-listing
ELIGIBILITY	Fully registered with the GMC with a licence to practise at the time of appointment.	Screening	In good standing with GMC with respect to warnings and conditions on practice	Screening
TRANSPORT	Holds and will use valid UK driving licence OR provides evidence of proposed alternative.	Screening		

CLINICAL SKILLS, KNOWLEDGE & EXPERIENCE	Experience working in a range of environments within psychiatry including older adults and adults of working age.	Short-listing Interview References	Wide range of specialist and sub-specialist experience relevant to post within NHS or comparable service	Short-listing Interview
	Excellent clinical skills using bio-psycho-social perspective and wide medical knowledge	Short-listing Interview References		
	Excellent oral and written communication skills in English	Interview References Presentation		
	Able to manage clinical complexity and uncertainty.	Interview		
	Makes decisions based on evidence and experience including the contribution of others	Interview		
	Able to meet duties under MHA and MCA	Short-listing References Interview		
ACADEMIC SKILLS & LIFELONG LEARNING	Ability to work in and demonstrate commitment to shared leadership & collaborative working to deliver improvement.	References Interview	Able to deliver undergraduate or postgraduate teaching and training	Short-listing Interview
	Participated in continuous professional development	Short-listing Interview	Reflected on purpose of CPD undertaken	Short-listing Interview
	Able to use and appraise clinical evidence.	Short-listing Interview	Has initiated or led clinical audits leading to service change or improved outcomes to patients	Short-listing Interview
	Has actively participated in clinical audit and quality improvement programmes	Short-listing Interview Presentation		

