

Consultant Psychiatrist Job Description and Person Specification

<p>Post and specialty:</p>	<p>Consultant Psychiatrist with the General Adult Central Lancashire Preston Community Mental Health Team.</p> <p>This is a new existing post that has become vacant due to a change in the service.</p> <p>In keeping with the on-going national and locally driven policy changes in adult psychiatry this job description may be subject to change in the future via the job planning process.</p>
<p>Base:</p>	<p>Preston CMHT, West Strand House, Block C West Strand, Preston, PR1 8UY</p>
<p>Contract:</p>	<p>Number of programmed activities: 10</p>
<p>Accountable professionally to:</p>	<p>Chief Medical Officer: Dr David Fearnley</p>
<p>Accountable operationally to:</p>	<p>Locality Medical Director: Dr Manoj Rajagopal</p>
<p>Key working relationships and lines of responsibility:</p>	<p>Interim Locality Associate Director of Operations : Nicola Smith Interim Team Leads Preston CMHT: Rachel Jones, Phil Robinson Team Lead Preston IRS: Amanda Sullivan Locality Clinical Director : Dr Manoj Rajagopal Responsible Officer : Dr David Fearnley Locality AMD: Dr Louise Cumming Locality Director of Operations : Laura Walsh Deputy Chief Medical Officer : Dr Gareth Thomas Director of Medical Education : Dr Varinder Singh Chief Operating Officer : Emma McGuigan Chief Medical Officer : Dr David Fearnley Chief Executive Officer: Chris Oliver</p> <p>The post holder will be accountable to the Chief Medical Officer via the Locality Medical Director via the Associate Medical Director.</p>

1.0 Service details

1.1 The Central and West Lancashire Locality

The locality covers Preston, Chorley, South Ribble and West Lancashire with a population of approximately 825,500. The city of Preston has a high student population, the University of Central Lancashire has around 32,000 students and Preston College is one of the largest colleges in England. The 2019 Indices of Deprivation revealed that Preston was the 46th most deprived area out of 317 districts and unitary authorities in England. Chorley was ranked the 192nd most deprived. Within South Ribble are Penwortham, Longton, Hutton, Walton-le-Dale, Bamber Bridge, Lostock Hall, Moss Side, and part of Buckshaw Village. In the West Lancashire area the largest town is Skelmersdale with country and village living the two dominant groups in large parts of the authority. The 2019 Indices of Deprivation placed West Lancashire as the 178th most deprived area out of 317 districts and unitary authorities in England.

1.2 Central and West Lancashire Inpatient Services

The inpatient mental health units in Central and West Lancashire are sited in Chorley and Ormskirk. The main mental health hospital is in Blackpool.

The Chorley Inpatient Unit: The Chorley Inpatient Unit at Chorley District General Hospital, Preston Road, Chorley, Lancashire, PR7 1PP. The unit consists of Avenham Ward, a 6 bedded female PICU, Duxbury Ward, a 15 bedded female treatment ward and Worden Ward, a 15 bedded male treatment ward. The 8 bedded specialist Mother and Baby Unit, Ribblesmere is also based at Chorley Hospital.

West Lancashire Inpatient Services: Inpatient services are based at the Scarisbrick Unit, Ormskirk & District General Hospital, Wigan Road, Ormskirk L39 2AZ. The 21 bedded unit of 11 male and 9 female beds is based within the premises of Ormskirk Hospital; it provides care and treatment for adult service users who are showing signs and symptoms of acute functional mental illness.

The Harbour: The Harbour is a 154 bedded mental health hospital situated on Preston New Road (A583) just off junction 4 of the M55 at Blackpool.

The hospital was designed with extensive input from service users and clinicians and is based on good practice guidance and 'safety by design' to ensure that it can provide high quality care. The ethos of the unit is to provide therapeutic care which is empowering, person centered and needs led and focuses on promoting recovery and independence.

The in-patient units in the Harbour consist of:

4 x 18 bedded adult functional wards (2 male & 2 female)

2 x 18 bedded advanced care wards (1 male & 1 female)

2 x 15 bedded dementia wards (1 male & 1 female)

2 x 8 bedded psychiatric intensive care unit (PICU) (1 male & 1 female)

2.0 Other Central & West Lancashire Locality Services

Older Adult Mental Health Services

The core function of the older adult mental health services is to provide a range of high quality community and in-patient mental health services to people (predominantly aged 65 and over) who are experiencing dementia and/or functional conditions. The service is also available to people under this age whose clinical need would be more appropriately met here. The Trust protocol regarding transition between working-age and older adult services supports this only when based on individual need and patients up to 75 years have their service provided from the adult services if that is most appropriate.

The inpatient provision is arranged around diagnostic requirements with wards for patients with a dementia diagnosis and wards for patients with advanced care needs, this will often include people who have a degree of physical frailty and medical problems associated with aging as well as a functional mental illness.

Mental Health Liaison Services

The Adult Mental Health Liaison Team (MHLT) operates within the A&E department and Medical Assessment Wards of Royal Blackburn Hospital and provides a rapid assessment service for individuals aged 16 to 65 as well as assessments and advice for clients who are in-patients on medical wards within the Acute Trust. Liaison psychiatrists specialise in the management of psychiatric problems in the general medical setting. With expertise working at the interface between physical and mental illness, including psychological reactions to physical illness, they are crucial to reducing adverse outcomes associated with hospital admissions, increased costs and lengths of stays.

The Mental Health Liaison Service for Older Adults is a Nurse led service available to inpatients aged 65 years and over who are presenting with Mental Health issues. The service for Older Adults aims to provide a service for older people with a physical illness and co-existent psychiatric disorder (predominantly depression, dementia and delirium), physical symptoms of psychological origin, psychiatric crisis and emergencies and episodes of self-harm.

Children and Young People

LSCFT Child and Adolescent Mental Health Services (CAMHS) Tier 3 provide a service for children and young people aged 5-16 who have a range of emotional and behavioural difficulties. The service supports and promotes emotional health and wellbeing. The service offers a wide range of support for young people and their families who have mental health difficulties such as; psychosis, depression, eating disorders, ADHD, self-harm, obsessive compulsive disorders, anxiety etc. The service line is provided by a multidisciplinary team comprising of consultant psychiatrists, psychologists, occupational therapists, family therapists, psychological therapists and a dedicated team of nurses.

Community Wellbeing

LSCFT provides community services such as community nursing, health visiting, podiatry and dentistry.

General Adult Community Services

Initial Response Service

The overall aim of the IRS Team is to be the point of initial referral and assessment in Preston for people aged 16 years and over presenting with mental health needs. This team will be the first point of contact for GPs for both crisis and non-emergency mental health referrals and will act as the gateway service to those who may require access to specialist mental health services.

This service is based at Royal Preston Hospital.

Community Mental Health Teams

There are different teams covering Preston, Chorley and South Ribble. A range of other professionals with varying level of expertise supports the CMHT: operational managers, nurses, clinical psychologists, social workers, pharmacists, occupational therapists, administrative and secretarial staff.

The services are delivered as part of a Multi-Disciplinary Team (MDT) that works with individual patients. The psychological services provided are comprehensive and include a range of assessments and treatments. The Occupational Therapy services provide a wide range of opportunities for patients.

The teams are located as follows:

Preston CMHT – based at West Strand House, Preston

Chorley CMHT – based at Chorley Health Centre, Chorley

South Ribble CMHT – based at Pathways Mental Health Resource Centre, Bamber Bridge.

Home Based Treatment Team (HBTT)

The Central Lancashire Home Based Treatment Team provides a 24/7 service for people in the Chorley, Preston and Chorley South Ribble area with the main emphasis on preventing hospital admission where appropriate, preventing unnecessary 136 detentions and attendances at A&E departments. Working holistically to support service users within their own homes and remaining in the community as per evidence based practice.

This service is based at Royal Preston Hospital.

3.0 Local working arrangements

The Trust is seeking a 1.0 WTE Consultant Psychiatrist to join the General Adult Psychiatry Preston CMHT Team based at West Strand House, Block C West Strand, Preston, PR1 8UY.

Preston CMHT, which includes Preston East and Preston West CMHT provides services to the adult population of Preston. The Preston CMHT is based at West Strand House, Block C West Strand, Preston, PR1 8UY. The 2 Consultant psychiatrists currently based with Preston CMHT are Dr Louise Cumming and Dr Adel Ghaly. This post will be for an additional 1.0 WTE consultant psychiatrist to work with Preston CMHT with close links into the Preston IRS.

The vacancy has arisen as a result of the previous substantive post holder relocating and a new post being developed. This post is one of 8 CMHT general adult consultant psychiatrist posts (8.0 WTE) within the Central Lancashire locality. The post holder will carry no responsibility for inpatients.

A range of other professionals with varying level of expertise supports the CMHT: operational managers, nurses, clinical psychologists, social workers, pharmacists, occupational therapists, administrative and secretarial staff.

The services are delivered as part of a Multi-Disciplinary Team (MDT) that works with individual patients. The psychological services provided are comprehensive and include a range of assessments and treatments. The Occupational Therapy services provide a wide range of opportunities for patients.

4.0 Current establishment of the combined Preston CMHT

- 3.0 WTE Consultant Psychiatrist (including this post 1.0 WTE Consultant Psychiatrist)
- 2.0 WTE Specialty doctor
- 3.0 WTE Medical Secretary
- 2.0 WTE Band 7 Team Manager
- 13.6 WTE Band 6 MH Practitioners
- 1.0 WTE Band 5 MH practitioner
- 0.4 WTE Band 6 MH practitioner
- 1.2 WTE Band 6 OT
- 0.5 WTE Band 7 Therapist
- 0.5 WTE Band 8B Psychologist
- 2.0WTE Band 3 Community Support Worker
- 1.0WTE Band 7 Pharmacist
- 1.0WTE Band 4 Pharmacy Technician

Team Supervision Arrangements

The arrangement for supervision of the MDT is as follows:

- Team Leader, Psychologist and Senior Occupational Therapist – supervision is provided by the Service Manager.
- Mental Health Nurses, Occupational Therapist and Support Workers – supervision is provided by the Team Leader.

5.0 Team Information

The combined Preston Community Mental Health Team expects to receive on average ten new referrals a week and has in place a rapid assessment triaging service that is multi-disciplinary in nature. On referral to the team, the service user will be allocated to a key worker who is identified as the professional best equipped to meet the needs of the service user for time limited therapeutic interventions. The consultant psychiatrist is expected to carry a compact caseload of the most complex and unstable cases, but will also be available at short notice to provide consultation and advice to other team members. The Consultant Psychiatrist will be available to provide consultation and advice to other team members and to the IRS and approximately 10 cases are discussed with the Consultant in the MDT meeting each week. The Consultant Psychiatrist will also liaise regularly with GP's including to provide advice and guidance on a regular basis. The current CMHT caseload is 892 split between the 3 WTE consultant psychiatrists.

The community posts are usually supported by GPST, CT trainees and trust grade junior doctors. The GPST and CT trainees contribute to a full shift system covering the inpatient units out of hours and their contribution to day time services varies depending on that rota. This post holder would usually provide clinical or educational supervision to one of these trainees.

The main clinical duties are arranged around conducting assessments and clinics for new patients and follow up reviews. This includes patients seen by the trainees in a fully supervised clinic. These figures are for guidance and the post holder is expected to show a high degree of flexibility and co-operation with the team.

The consultant will usually attend brief multi-disciplinary meetings during the week to review the patient progress and to assist with task managements for his/her patients. A more detailed MDT review is held for each patient at least on a yearly basis. The Trust operates an electronic patient record (RiO) for all patients and all staff must ensure these records are maintained accurately and securely. There is electronic access to pathology lab reports via this system.

Inpatient services are provided at the recently refurbished Chorley Hospital Inpatient Unit. The inpatient service is supported by a Home Based Treatment Team service. The Central Lancashire Home Based Treatment Team provides a 24/7 service for people in the Chorley, Preston and Chorley South Ribble area with the main emphasis on preventing hospital admission where appropriate, preventing unnecessary 136 detentions and attendances at A&E departments. The team works holistically to support service users within their own homes and remaining in the community as per evidence based practice.

While primarily responsible for delivering a quality clinical service, the consultant psychiatrist is also expected to be actively involved in the strategic development of the team and broader services, working with the team manager and locality manager in helping to steer the development of the service in line with the strategic direction of the organisation.

6.0 Continuing professional development (CPD)

- 6.1 Consultants 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.
- 6.2 Study leave arrangements for consultant medical staff are in accordance with the new consultant’s contract within Lancashire and South Cumbria NHS Foundation Trust.
- 6.3 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. There is a local peer group that meets every 2 months to support CPD and PDP progress and to present cases for case based discussions.
- 6.4 For all new consultant appointments supervision arrangements are available through the AMD.
- 6.5 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.
- 6.6 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 AMD. An active research interest would also be encouraged.

7.0 Clinical leadership and medical management

- 7.1 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 Associate Medical Director (AMD) and clinical manager support each part of the service.
- 7.2 The AMD liaises closely with medical colleagues, the Medical Director and the Clinical Director to provide clinical leadership and direction to the service.
- 7.3 The core management role of this post is to provide leadership in co-production with the team manager, including:
- 7.4 Participation in ensuring the provision of effective clinical services including implementation of the Patient Charter Standards, implementation of relevant legislation and amendments to The Mental Health Act 1983 and Mental Capacity Act 2007 and management of clinical outcome measures.
- 7.5 Participation in planning, steering and working groups and subjects relevant to special interests or general area of work and contributing in a positive and constructive

manner to the development of services and new innovations for the whole adult community service.

- 7.6 Participation in network and Trust professional groups with responsibility for managing service delivery.
- 7.7 Participation in relevant management training courses as part of personal development and to ensure effective delivery of services.
- 7.8 Developing and maintaining a healthy working relationship with all medical, non-medical, clinical and managerial colleagues in the interest of best outcomes for patients and Trust services.
- 7.9 Participation in and the preparation of reports for serious incident investigations and investigations of poor performance.
- 7.10 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 Medical Director in accordance with the relevant Trust policies.
- 7.11 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.

8.0 Appraisal and job planning

- 8.1 The Trust has a leadership program for all Consultants. The post holder will be encouraged to develop her/his leadership skills by participating in one of these programs.
- 8.2 There is a well-developed programme of annual appraisal and job plan reviews.
- 8.3 The posts are subject to the Trust annual appraisal process leading to revalidation.
- 8.4 There is a Trust policy relating to medical staff appraisals.

9.0 Corporate Induction Programme

- 9.1 The post holder will be expected to attend the Trust Corporate Induction Programme and the team half day bespoke induction.

10.0 Teaching and training

- 10.1 The post holder will be expected to provide supervision to the junior medical staff working with their team and generally participate in the academic and teaching programmes and teaching the medical students and other mental health professionals if they are attached to the clinical team.
- 10.2 The post holder will have access to the library facilities in The Lantern Centre.
- 10.3 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 encourages all consultants to attend and if possible organise similar events according to their interests.

- 10.4 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.
- 10.5 The Trust has a range of training events developed 'in-house' to improve management skills.
- 10.6 Audit: as well as supervising their trainee in audits, the consultant 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.

11.0 Research

- 11.1 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.
- 11.2 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.
- 11.3 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.
- 11.4 We have a number of consultants who are Chief Investigators for studies and grant-holders. 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.

12.0 Mental Health Act and Responsible Clinician approval

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

13.0 Secretarial support and office facilities

- 13.1 There is a designated private office at the CMHT Preston suitably equipped with a laptop, mobile and desk phone. IT support is available by phone, e-mail and the intranet
- 13.2 Secretarial support is provided by a full time Band 4 Medical Secretary based at Preston CMHT.

- 13.3 Other administrative support is available to the consultant psychiatrist as required by the Band 3 Admin Team Administrator and Band 2 Administrative Assistants based with the CMHT.

14.0 Clinical duties of post holder

The post holder will have the following important clinical responsibilities:

- 14.1 Responsible Clinician for a defined caseload.
- 14.2 Assessment of patients referred to the CMHT at service users' homes and in clinic.
- 14.4 Out of Hours Cover.
- 14.5 Advice and guidance to GP's within Preston CMHT catchment area
- 14.6 Attendance at MDT meetings to discuss referrals into the team

Your role will include:

- 14.5 To provide for the mental health needs – including prescribing and monitoring psychotropic medications.
- 14.6 To comply with policies and procedures.
- 14.7 To contribute to the risk assessments.
- 14.8 To provide for the physical health needs of your patients (with support from clinical practitioners, GP and practice nurse providing sessional input, and referring to outside hospitals and specialists).
- 14.9 To provide clinical expertise and clinical leadership to the team; it is expected that the consultant will play a key and active role in the team management and will be responsible for the appropriate clinical key performance indicators of their team.
- 14.10 To support Clinical Governance, Health and Safety and other notional requirements and directives in your clinical area.
- 14.11 To respond to appropriate requests from the Commissioners.
- 14.12 To help implement Trust policies, guidelines and NICE guidelines regarding care and treatment of patients in your clinical area.
- 14.13 To support the team in providing and achieving excellence in care and treatment through regular audit and review of clinical practice.
- 14.14 To support the work of the other relevant clinical teams in the community, especially during the discharge process, and to address interface issues in a constructive and cordial manner.
- 14.15 To relate to the relevant inpatient clinical team regarding your patients to ensure smooth transfer of care and best outcomes.
- 14.16 To provide clinical care/assessments in other clinical areas (including inpatient settings) if requested/directed to do so in an emergency and exceptional circumstances in the interest of patient safety and in the interest of the Trust.
- 14.17 To participate in team governance meetings and accept a shared responsibility for smooth and effective functioning of your clinical team along with the Team Leader.

- 14.18 To help achieve Trust and National targets in order to provide an efficient, clinically effective and evidence-based accessible seamless service to avoid any risk to the Trust's reputation and business.
- 14.19 To provide the medical lead role in the Multi-Disciplinary Team for individual case management.
- 14.20 To liaise with other directorates in the Acute General Hospital and staff within the employing Trust, if relevant, and in the interest of mutual patients.

15.0 Training duties

- 15.1 The post holder will be expected to engage in both formal and informal education of multidisciplinary colleagues. More specifically, fulfilling responsibilities for clinical and education supervision should be supplemented by participation in the weekly local education and postgraduate training programme.
- 15.2 The post holder will be encouraged to obtain approval as a specialist trainee trainer.
- 15.3 The post-holder will be expected to provide supervision to trainees and medical students (if placed with the team).
- 15.4 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.
- 15.5 The post holder will have access to the library facilities in the Lantern Centre.
- 15.6 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.

16.0 Clinical governance and quality improvement

- 16.1 Consultants 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.
- 16.2 Consultants 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.
- 16.3 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.
- 16.4 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.
- 16.5 The Trust considers that the prime responsibility for auditing clinical care lies with the clinicians who provide that care.

17.0 General duties

- 17.1 To manage, appraise and give professional supervision to junior medical staff as agreed with 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.
- 17.2 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.
- 17.3 To undertake the administrative duties associated with the care of patients.
- 17.4 To record clinical activity accurately and comprehensively and submit this promptly to the Information Department.
- 17.5 To participate in service and business planning activity for the locality and as appropriate for the whole mental health service.
- 17.6 To participate in annual appraisal for consultants.
- 17.7 To attend and participate in the academic programme of the Trust, including lectures and seminars as part of the internal CPD programme.
- 17.8 To maintain professional registration with the General Medical Council, Mental Health Act Section 12(2) approval, and to abide by professional codes of conduct.
- 17.9 To participate annually in a job plan review with the clinical manager, this 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.
- 17.10 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.
- 17.11 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.

18.0 External duties, roles and responsibilities

- 18.1 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.

19.0 Other duties

- 19.1 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.

20.0 Work programme

- 20.1 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.

- 20.2 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).
- 20.3 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

Suggested draft timetable: 2.5 SPA, 7.5 DCC

Day	Time	Location	Work	Category	No. of PAs
Monday	9am -1pm	Preston CMHT	MDT, advice and guidance	DCC	1 (4 hours)
	1pm – 4pm	Preston CMHT	Outpatient Clinic,	DCC	1 (4 hours)
	4pm-5pm		Clinic Admin		
Tuesday	9am-12pm	Preston CMHT	MDT/ clinic/ clinic admin	DCC	0.75 (3 hours)
	12pm-1pm	Preston CMHT	Junior doctor supervision	SPA	0.25 (1 hour)
	1pm-5pm	Preston CMHT	Outpatient clinic/ home visits/ clinic admin	DCC	1 (4 hours)
Wednesday	9am-1pm	Preston CMHT	MDT meetings	DCC	0.75 (3 hours)
	12pm – 1pm	Preston CMHT	-Consultants meeting	SPA	0.25 (1 hour)
	1pm – 5pm	Lantern Centre	Teaching/CPD/ appraisal/ audit	SPA	1 (4 hours)
Thursday	9am-1pm	Preston CMHT	Outpatient clinic/ clinic admin	DCC	1 (4 hours)
	1pm-5pm	Preston CMHT	Audit/ appraisal/ research	SPA	1 (4 hours)
Friday	9am – 1pm	Preston CMHT	MDT meeting/ outpatient clinic	DCC	1 (4 hours)
	1pm-5pm	Preston CMHT	Clinical admin	DCC	1 (4 hours)
Total PAs	Direct clinical care				7.5 (30 hours)
	Supporting professional activities				2.5 (10 hours)

21.0 On-call and cover arrangements

- 21.1 The post holder will be expected to take part on the on-call rota out of hours and weekends. This will be remunerated appropriately. The rota covers the general adult psychiatry and older adult psychiatry specialities within the Central Lancashire

locality. The current rota is a minimum of 1:17. This attracts a 3% availability supplement and 0.5 PA.

- 21.2 The post holder will be treated at par with existing consultants for on-call remuneration.
- 21.3 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 'Central' locality and provide cover to other sites as well. You will also be supported by the middle tier cover which comprises of the STs and speciality doctors in North Western Deanery.
- 21.4 It is accepted that the consultant 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.

22.0 Contract agreement

- 22.1 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.

23.0 Leave

- 23.1 Annual leave is in accordance with that detailed in the Consultant Contract Terms and Conditions (2003). Leave cover is provided on a reciprocal basis with colleagues.
- 23.2 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. The Trust has an allocated budget for Consultant training that can be utilised by following the appropriated procedures in the study leave policy.

24.0 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:

Dr Louise Cumming, Consultant Psychiatrist, Preston CMHT (01772 773403)

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

Telephone: 01772 773513

25.0 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 (tbc).

26.0 GENERAL TERMS AND CONDITIONS

- 26.1 All terms and conditions of service are in accordance with those detailed in the Consultant 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.
- 26.2 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 Consultant when necessary.
- 26.3 The successful candidate will be expected to maintain existing service commitments and comply with Trust performance targets.

27.0 Residence/Removal Expenses

- 27.1 The appointee will be required to live within 10 miles or 30 minutes of their clinical base unless the MD 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.

28.0 Health & Safety

- 28.1 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.

29.0 Rehabilitation of Offenders Act 1974

- 29.1 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.
- 29.2 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.

30.0 Professional Standards

30.1 The AMD is managerially responsible for all activity in which the consultant works. The Medical Director has overall responsibility for the professional performance of consultants, employed by the Trust. All consultants 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.

31.0 Maintaining medical excellence/Responding to Concerns

31.1 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.

Employer vacancy reference number	351-MED037CW-24
Royal College JD reference number	
Name of Royal College RSR	
Name of Royal College RA/DRA	
Date of Final Approval	

Appendix 1: Person specification/selection criteria for consultant psychiatrist

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 AAC 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.	SL
			MRCPsych	Scr
			Additional clinical qualifications.	SL
ELIGIBILITY	Fully registered with the GMC with a licence to practise at the time of appointment.	Scr	In good standing with GMC with respect to warning and conditions on practice	Scr
	Included on the GMC Specialist Register OR within six months.	Scr		
	Approved clinician status OR able to achieve within 3 months of appointment	Scr		
	Approved under S12 OR able to achieve with 3 months of appointment	Scr		
TRANSPORT	Holds and will use valid UK driving licence OR provides evidence of proposed alternative.	Scr		

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