

Job description and Person Specification:

Consultant Adult Psychiatrist

Moss House CMHT

Post and specialty:	Consultant Psychiatrist – Moss House CMHT This is a replacement full time post within Moss House Community Mental Health Team. The vacancy has arisen as a result of the previous substantive post holder moving to another post.		
Base:	Moss House, 4 Moss Street, Garston, Liverpool, L19 2NA.		
RCPsych approval details:	NW MERS-CO-NTH-2024-01931 (Approved 27/03/2024) RC PSYCH POST		
Contract:	Number of programmed activities: 10		
Accountable operationally to:	Chief Medical Officer Dr Noir Thomas		
Accountable professionally to:	Dr Rebeca Martinez Clinical Director		



Key working relationships and lines of responsibility:

Line Manager: Dr Olusegun Popoola

Locality Hub Manager: Martina Bellmon

Clinical Director: Dr Rebeca Martinez

Chief Operating Officer for MH D: Donna Robinson

Executive Director of Nursing & Operations: Trish Bennett

Guardian for safe working hours:

Responsible Officer: Dr Noir Thomas

Deputy Chief Medical Officer: Dr Kuben Naidoo

Chief Medical Officer: Dr Noir Thomas

Chief Executive: Joe Rafferty

Trust HQ V7 Building

Kings Business Park Prescot

Merseyside L34 1PJ

0151 473 0303

Line Manager: Dr Olusegun Popoola



INTRODUCTION

Who We Are

Mersey Care NHS Foundation Trust is one of the largest Trusts in the England providing physical and mental health services and serving more than 11 million people.

We offer specialist in-patient and community services that support a physical and mental health and specialist in-patient mental health, learning disability, addiction and brain injury services Child and Adolescent Mental Health Services (CAMHS).

Mersey Care is one of only three trusts in the UK that offer High Secure mental health facilities.

Our Vision

Our vision is to strive for perfect, whole person care that helps people live happier, healthier lives.

Our Mission

We are committed to delivering the **very best possible life-long care** in physical health, mental health, learning disabilities and addictions services. We are passionate about advancing the health of the people and communities we serve. We will achieve this through pursuing **clinical excellence** and **whole-person care**, **involving the people we serve** in every aspect of their care and through prevention and early intervention to help people keep well and **living well at home for longer**.

The care we offer is **built on strong relationships**, and we will work side-by-side with our staff, other organisations, and with people and communities themselves to activate, innovate and continually improve the prevention, treatment and support we provide. Together, we believe we can **exceed expectations of the health, care and wellbeing available** to the people we serve.

Our Values are; Continuous improvement, Accountability, Respect, Enthusiasm and Support.

What We Stand For

Mersey Care believes that service users, carers and staff should all be treated with dignity and respect and be valued as citizens.

Our Strategic Objectives:

Our Services: We will combine clinical excellence with prevention and integration in our services to improve the health of the people and communities we serve.

Our People: More people will choose to work at Mersey Care. We will develop a deeper understanding of the people and communities we serve, and patients will have more control over their health.

Our Resources: We will use our resources – buildings, IT and money – to enable clinical excellence, prevention and integration in our services.

Our future: We will be a good partner and use our clinical and research expertise to tackle inequalities, improve services and outcomes for our populations.



Mersey Care NHS Foundation Trust covers the following areas:



TRUST DETAILS

As of 1 June 2021, we employ over 11,000 staff which makes us one of the largest health care employers in the North West. We provide in-patient facilities for approx. 1,000 patients and this includes one of only 5 in-patient addiction services in the country. Community support is at the heart of our organisation and we provide the biggest IAPT services in the NHS. Since 2012 we have undertaken over 5000 social prescriptions. We service 6 local authorities including Liverpool, Sefton, Knowsley, St Helens, Halton and Warrington. We are one of three providers of High secures services and the largest provider of specialist forensic learning disability services. With a turnover of over 573m we serve a population of over 11m people in the North West and beyond.

Mersey Care CMHT Transformation – Community Excellence Plan

Mersey Care Community services are in an evolving position to align and deliver on the principles of the Community Mental Health Framework though our Community Excellence Program. The Trust is an early implementer site, having won one of the competitive bids awarded by NHS England transformation funds and has already launched the Step Forward service an enhanced psychological intervention service for those individuals with complex needs who require a more intensive structured psychological intervention ensuring that evidence based psychological interventions are delivered in a timely manner to those who need them most.



The aim of the community model is to deliver a whole population approach that is integrated and maximises on the work at the interface between Primary and Secondary care. We have already established these working models in parts of our service which have demonstrated great success in managing both the demand and the need for services at local level by working collaboratively with primary care and other partners. This work results in a reduction of up to 40% of our referrals and has maximised the opportunities for working collaboratively alongside our GP colleagues with those individuals who may experience mental health needs but who do not require to be on the CMHT caseload, consequently caseload sizes are reducing significantly in sites where this work has already been implemented.

Community Mental Health Teams will be aligned to the Primary Care Networks and Integrated Care Teams we will work with smaller secondary care caseloads, utilising structured interventions but will have an active role in delivering a population-based approach. The opportunities for consultants will be to have a varied experience in their post, in work that is dynamic and which will require leadership to engage and work with partners across the boundary of primary and secondary care. Providing care that is consultant led but delivered as part of a multidisciplinary team and maximising on the assets

SERVICE DETAILS

- The Mental Health Division operates a number of adult Community Mental Health Teams (CMHTs) based in several community hub sites across North West of England footprint
- All our adult CMHTs operate within a "functional model" meaning that the post holder will work with community patients only and are not required to maintain responsibility for inpatients, as we have our own dedicated inpatient multi-disciplinary service, with whom CMHTs have excellent working relationships and lines of communication. The greatest advantage to this model being that the post holder can solely focus on CMHT responsibilities with reduced travel between sites.
- The full time post holder will share the team specialty doctor, who is very experienced and has worked in the post for many years. He carries his own caseload of patients from both MDTs. He is Section 12 approved.
- The proposal is that each post holder will have a core trainee (CT1-3).
- Each consultant has access to a medical secretary (band 4) input and support from a local pool of transcriptionists (band 3). There are also designated team secretaries to support the teams regarding MDT meetings, patient reviews, general admin tasks; and an appointments team (PAC) to administer the outpatient clinics.
- The Trust utilizes digital dictation technology for dictating clinical letters which means letters are generated in a timely manner to the GPs following a review. The Clinical records system, Rio, has also recently been updated and MAST has been introduced to support MDTs in caseload monitoring and clinical management.
- Inpatient services for adult patients are based in the Broadoak Unit, Windsor House, Hartley Hospital
 and Clockview where patients are managed by a specialist inpatient teams. The community team is
 expected to liaise closely with the inpatient team during a patient admission to ensure continuity and
 optimised care.



- The majority of referrals to CMHT come through the local place based triage which is multidisciplinary, with dedicated consultant input, which triages and assesses referrals into the service. Only those referrals deemed appropriate for CMHT input following assessment are referred on to the adult CMHTs. The Primary Care Mental Health Team practitioners will often assess, provide brief intervention and signpost elsewhere if CMHT is not felt necessary, which allows CMHTs to focus on patients with serious mental illness and/or high complexity and need.
- The Trust as part of the community transformation programme has developed a primary care based mental health service with emphasis on the availability of psychologically based treatments within primary care with a view to facilitating discharge for patients back into primary care thus creating more manageable and focused caseloads in the future.
- We have a dedicated Crisis Resolution and Home Treatment team (CRHT) who support patients in crisis and/or requiring a period of more intensive support. One of the aims being to avoid the need for hospital admission. This is supported by a fulltime Consultant and multidisciplinary team. CRHT also provide support out of hours.
- In 2018 the CMHTs underwent a review of their caseloads as part of a wider transformation of community mental health. We applied an "inclusion tool" to individual caseloads and were able to discharge significant numbers of patients from our caseloads. Over 50% of the Trust's Adult CMHT patients in clusters 1-4, 7, 11 and 12 had their care reviewed, with approximately 25-30% identified as suitable for Primary Care based management. The tool has also identified patients for nurse led depot clinic management and psychologist managed pathways, which will form key parts of a future CMHT model with less reliance on the current Consultant outpatient clinic based model as the default setting for all care. Moss House has completed some of the caseload management work, however there is further scope to appropriately and safely move more patients to care that is provided within Primary Care settings.
- Staff have access to a well resourced Occupational Health service and will be supported in accessing this via their line manager. Additional support is available in the form of peer support, observed assessments, social events and also staff support services.
- The recently appointed Deputy Chief Medical Officer for patient safety oversees SUI investigations and supports staff following these events.
- The Medical Lead for Medicines Safety will oversee the consistency of prescribing practice across the Division and ensure that prescribing follows an evidence based approach.

The following additional services and teams are available to support CMHT's:

- Acute Services (including 8 x Acute In-Patient Wards, Crisis Resolution Home Treatment Teams, Mental Health Liaison Teams based in the 3 AEDs (Royal Liverpool University Hospital, Aintree University Hospital and Southport District General Hospital) and on the wards. The liaison teams all have designated consultants.
- Criminal Justice Liaison Service (operating within Courts, Police Stations and Prisons)
- Eating Disorder Service
- Acquired Brain Injury Service
- Rathbone Rehabilitation Unit inpatient unit with a dedicated Consultant.



- Psychotherapy Service and Specialist Personality Disorder Hub
- Early Intervention in Psychosis Service
- Older peoples Mental health service including General Hospital Liaison Services Royal Liverpool and Broadgreen University Hospitals Trust, Aintree University Hospital NHS Foundation Trust and Southport and Ormskirk Hospital NHS Trust
- Child and Adolescent Psychiatric Services are provided by Alder Hey Children's NHS Foundation Trust
- Perinatal Team based at Liverpool Women's Hospital with a dedicated psychiatrist and multidisciplinary team.
- Homelessness Outreach Team
- ADHD specialist services
- Asperger's Team
- Learning Disabilities
- Forensic services (LSU, regional MSU and high secure)
- Addiction services

LOCAL WORKING ARRANGEMENTS

- The Trust is seeking a consultant psychiatrist to join Moss House CMHT (1) based at Moss House, Garston (South Liverpool). The vacancy has arisen as a result of the previous substantive post holder moving to another post, and is currently filled with an agency locum. This post is one of two CMHT general adult consultant psychiatrist posts (the other also 1 WTE) within Moss community hub.
- Moss Community Hub serves a catchment area of around 120,000, covering the South areas
 of Liverpool for adults of working age. This is a demographically mixed area overall, but with
 areas of social deprivation including Speke and Netherley and some drug and alcohol-related
 difficulties in an urban environment.
- The post holder will carry no responsibility for inpatients.
- The staff at Moss House Hub are organised in two distinct CMHTs. Both CMHTs consists of:
 - 2 whole time equivalent (WTE) consultant psychiatrists
 - 1 WTE staff grade; F1 Trainee and 1 WTE GP Trainee shared between two consultant teams.
 - 1 WTE medical secretary, Band 4 and 3
 - 1 band 5 per CMHT,
 - 1 x band 7 advanced practitioner



- 8 x band 6 CPNs
- 3 x band 5 CPN2 WTE social workers
- 0.5 WTE senior occupational therapist, Band 6
- 0.8 WTE consultant psychologist
- 1 WTE support time and 1 WTE recovery worker Band 3
- 0.5 WTE assistant practitioner Band 4
- Most new to service assessments are carried out in the New Patient Assessment slots by team trainee
 medics or by other members of the CMHT and Primary Care Mental Health Practitioners. The postholder will provide supervision as required to such assessments.
- There are dedicated slots built into the Consultant clinic list for Clinical Supervision of New Patient
 Assessments by Junior Trainees. Very complex/high risk new to service assessments will be carried
 out by the post-holder in conjunction with other members of the CMHT (approximately 1 per month
 on average).
- The post-holder will be expected to hold clinical responsibility for the full caseload working alongside other members of from the Community Mental Health Team.
- The current team caseload is approximately 400 however this number will vary in time, and as the
 work on the community transformation programme progresses the number of patients held within
 secondary care may decrease.
- Through the Community transformation programme, we will move towards intervention based care, which will include depot pathway, and other clinically indicated pathways to manage patients as part of a wider team, rather than solely dependent upon medical reviews.
- Average numbers of CTO patients is 8 across both teams, although this number varies in time. On average there were 6 MHRT/Managers meetings attended in the last 12 months.
- Junior doctor resource is allocated by the Medical Education department and includes GP+ trainees
 and psychiatry training grade doctors. The Post Holder will be supported to develop Educational
 supervisor Responsibilities for one junior trainee and clinical Supervisor Role for the other trainee.
 There is also a hub manager Martina Bellmon; CMHT Manager Tim Kane.
- Moss House Hub is one of 3 adult MH Hubs in Liverpool comprising multiple MDTs. The Commissioning arrangements are via Cheshire and Mersey ICB.
- While primarily responsible for delivering a quality clinical service, the consultant CMHT psychiatrist
 is also expected to be actively involved in the strategic development of the team as part of wider
 community mental health services of the Local Division.

CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

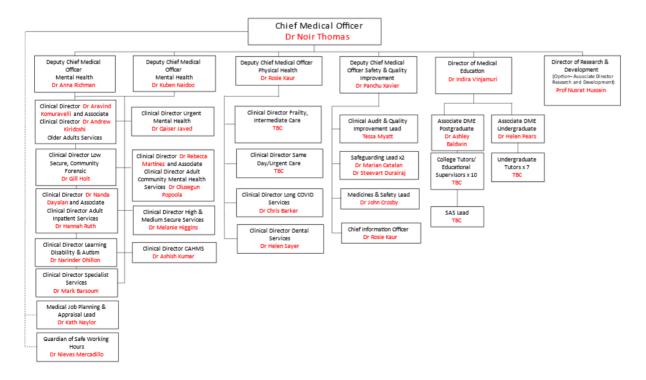
 The Trust supports the participation of all Consultants in the CPD programme of the Royal College of Psychiatrists, with an expectation that all consultants will be in good standing with the College for PDP at all ties.



- The trust supports all consultants to become members of a local CPD peer group. There are well
 established local PDP peer groups and further details will be provided upon appointment by the line
 manager.
- Consultants are encouraged to take their study leave entitlement in line with learning objectives identified in personal development plans.
- The Trust is aware of the need for senior psychiatrists to meet regularly for support and CPD and this is actively encouraged by the Trust Board. In addition to participation with other consultant colleagues in a programme of postgraduate educational meetings, there is a 3yr 30 day study leave allowance supported by a generous designated study budget per Consultant for CPD. Study leave is readily available and supported fully by medical managers.

CLINICAL LEADERSHIP AND MEDICAL MANAGEMENT

- All consultant staff, as clinical leaders, are expected, and will be given opportunities to contribute to the business planning for the Local Division and, as appropriate, contribute to the broader strategic and planning work of the trust.
- The trust has a strong culture of medical leadership and management, and prides itself on the wide range of opportunities and support available to aspiring and established medical managers to further their skills, experience and responsibilities.
- Trust medical management framework:





APPRAISAL AND JOB PLANNING

- The trust has a well organised and full implemented consultant appraisal system and trained appraisers are allocated to consultants by Dr. Noir Thomas Chief medical officer and Responsible Officer.
- For doctors employed by Mersey Care to retain a license to practice they must satisfactorily complete
 the process of revalidation. To ensure that all consultants and specialty doctors will participate in a
 satisfactory annual appraisal that will be sufficient to meet the requirements laid out by the GMC
 toward revalidation, the process of medical appraisal will be subject to methods that assure quality
 control.
- Job planning is conducted annually and led by the post holder's Associate Clinical Director with support from the Clinical Director and Chief Operating Officer as necessary. (please refer to sections below titled Work Programme and draft timetable).
- The doctor's range of work is recorded electronically on software made available by the Trust. This is made available to the medical manager before the job planning meeting. The meeting provides a review of objectives from the previous job plan and a mutually agreed set of objectives for the coming year. Individual job plans will be aligned to Trust, Division, Service Line and personal objectives respectively.
- Newly recruited consultants will attend the Essential Mandatory Trust Induction and be provided with
 a local induction by their Medical Manager. Induction includes training on the Trust's clinical
 information system. A mentoring scheme exists for medical staff in the Trust and is available to all
 doctors, including consultants, for guidance and support for as long as they feel the need for it. This
 is actively encouraged for all newly appointed colleagues in their first Consultant post.

TEACHING AND TRAINING DUTIES

- The successful applicant will be expected to provide clinical supervision and training for any junior doctors based with the team according to the requirements laid down in the contract held between the Trust and the Postgraduate Dean. Each team should regularly provide a clinical attachment for at least one medical student, and Consultants are responsible for leading on their clinical teaching.
- The post holder will receive any necessary training as provided by Mersey Deanery in order to achieve Level One trainer status, which will allow them to act as a clinical supervisor to trainees. Once approved the post holder will have the opportunity to take on the role of educational responsibility for any trainees based with the service. The Trust has a well respected and active Medical Education Department, led by Director of Medical Education Dr Indira Vinjamuri. The Trust has close links to the University of Liverpool and HEENW through the wide participation of its Consultant staff in teaching and Educational roles at all levels. This includes facilitating a large number of clinical placements for medical students attending from University of Liverpool throughout teams within the Trust.
- The post holder will regularly attend the Trust-wide Tuesday morning Virtual Local Academic
 postgraduate programme LAP as part of their weekly SPA sessions. This is well attended by
 Consultants and is a lively meeting. It includes case conferences and journal presentations.
 Occasionally it includes mandatory training slots and guest speakers.



RESEARCH

- Mersey Care NHS Foundation Trust has an active audit culture and the post holder will be involved in audit and supervising junior Doctors' audits. As part of its new "Perfect Care" strategy the Trust is keen to expand and develop existing research opportunities for interested Consultants.
- Mersey Care NHS Foundation Trust and University of Liverpool have teamed up to create the Mental Health Research for Innovation Centre (M-RIC). A ground-breaking research facility based in Liverpool that will impact directly on NHS mental health services.
- Director for research, development and innovation (Prof Nusrat Hussain) leads the trust's R&D and innovation strategy. He takes particular responsibility for the leadership and continued development of The Centre for Perfect Care (CPC) which as innovative service established to support continues improvement with the Trust and wider health system. The Trust is also keen to develop strategically important relationships with the Academic Health Science Network and other major partners.
- There is a well resourced and expanding clinical effectiveness, research and resource library developed within the Trust. It has dedicated spaces at Rathbone Hospital and Ashworth site where there is access to various databases both locally held and Internet based.

MENTAL HEALTH ACT AND RESPONSIBLE CLINICIAN APPROVAL

 The post holder would be expected to be an Approved Clinician or if not already be willing to undertake training to obtain Section 12(2) MHA and will be expected to renew this approval according to agreed procedures.

SECRETARIAL SUPPORT AND OFFICE FACILITIES

• The post holder will have access to band 4 medical secretarial support in post and additional band 3 transcriptionist services as needed by the post holder. There is dedicated office space for the Post holder with internet access and printer. A smart phone and I-Pad/ laptop will be provided.

CLINICAL DUTIES OF POST HOLDER

- Hold Consultant Psychiatrist responsibility for Moss House CMHT
- Be actively involved in the leadership, management and decision making within the Community Mental Health Team
- Utilise a flexible approach to delivery of clinical care so that it best meets the needs of service users and carers.
- Supervise and support team members who carry out assessments of patients referred to the team.
- Carry out comprehensive psychiatric assessments and provide treatment for patients.
- Support MDT staff to manage psychiatric emergencies
- Conduct patient reviews and lead Multidisciplinary reviews, and multi- professional meetings



- Contribute to the development of the service and be actively involved in the critical evaluation of its
 effectiveness over time.
- Ensure that management plans are clearly displayed in the medical records and undertake administrative duties associated with the care of the patient.
- Foster relationships between staff within each organisation, and also with the local Clinical Commissioning Groups.
- To act as team responsible clinician for the purposes of the Mental Health Act 1983 and carry out duties in accordance to the code of practice.
- To carry out comprehensive Risk Assessments and as required participate in Trust's risk management processes such as Health Risk Assessment and Management Meetings (H-RAMM)
- Maintain a high level of effective communication and work flexibly and co- operatively with other parts
 of the service including; inpatient units, other community mental health teams, specialist services and
 primary care.
- Liaison with families / carers other stakeholders and interested parties
- The post holder will be expected to maintain effective communication with IAPT services and other community mental health teams and primary care.
- The post holder would need to have achieved Approved Clinician status, recognised by the Trust, by commencement of clinical duties as they are required to act in this capacity if responsible for CTO patients and any other patients subject to the Mental Health Act as part of the out of hours rota.

CLINICAL GOVERNANCE AND QUALITY IMPROVEMENT

- Programmed activity time will allow for standard setting and audit of the service
- Regular stakeholder meetings
- Partnership Forums involving service user representatives and advocacy
- Involvement with critical incident / serious untoward incident reporting and response
- Protocol development
- Attendance at monthly Consultants' meetings
- Participation in service/team evaluation and the planning of future service developments
- Provide input into the commissioning and strategic planning of high quality services for adults with mental health problems
- The activity of Moss House CMHT will be supported within the reporting arrangements of the Mental Health Division Governance Committee



GENERAL DUTIES

- To manage, appraise and give professional supervision to trainee medical staff as agreed between consultant colleagues and the medical director and in accordance with the Trust's personnel policies and procedures. This may include assessing competences under the Modernising Medical Careers framework.
- To ensure that junior medical staff working with the post holder, operate within the parameters of the New Trainee Doctor contract.
- To undertake the administrative duties associated with the care of patients.
- Ensure that optimal use is made of all resources allocated to the post
- To record clinical activity accurately and comprehensively.
- To participate in service and business planning activity for the locality and, as appropriate, for the whole mental health service.
- To participate in annual appraisal for consultants.
- To attend and participate in the academic programme of the Trust, including lectures and seminars as part of the internal CPD programme.
- To maintain professional registration (licence to practise) 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 modernization.
- Ensure appropriate handover and communication to colleagues during periods of leave.
- 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.

EXTERNAL DUTIES, ROLES AND RESPONSIBILITIES

- The Trust actively supports its consultant staff who may wish to undertake roles outside the Trust that
 are of benefit to medical practice at regional, national and international level, and recognises the value
 of such roles for the reputation, and standing of the Trust.
- Consultants should however undertake such duties only after discussion with colleagues and with the
 agreement of the Clinical Director or Associate Medical Director and should be sensitive to the
 increased workload undertaken by colleagues in support. They must be able to fully account for these
 activities in terms of interest to the Trust, professional society, college or wider NHS.



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, e.g participation in Complaints review and Serious Untoward
incident reviews. 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.
- The overall split of the programmed activities is 7.5 to be devoted to direct clinical care and 2.5 to supporting professional activities (as per the Royal College of Psychiatrists recommendation). The draft timetable below is indicative only.
- A formal job plan will be agreed between the post holder and associate medical director or clinical manager three months after commencing the post and at least annually thereafter.

ON-CALL AND COVER ARRANGEMENTS

- The appointee will take part in the "South" adult on-call Consultant rota covering services based within or linked to Central and South Liverpool footprint. There is a higher trainee ST4-6 first on call at night covering both the North and South rotas, along with one junior trainee just for the South Rota geographical area.
- This rota is currently shared with approximately 15 FTE colleagues, including adult, addictions and learning disability services.
- On-call supplement 1% availability supplement; due to the consistent low intensity, low frequency nature of the rota, it does not qualify for any other additional payments.
- As per 'Terms and Conditions Consultants (England) 2003'. Consultants shall be expected in the normal run of their duties to deputize for absent consultant colleagues (and vice versa) so far as is practicable. (Schedule 2).

CONTRACT AGREEMENT

- The post will be covered by the Terms and Conditions of Service relating to the Consultant Contract (2003). Contracts have been agreed with the BMA local negotiators, but individuals may wish to discuss this further before acceptance.
- Travel Expenses are paid in line with the Terms and Conditions of Service for Hospital Medical and Dental Staff, Doctors in Public Health Medicine and the Community Health Service, Terms and Conditions – Consultants (England) 2003 and the General Whitley Terms and Conditions of Service (England and Wales).



WELLBEING

There is dedicated Occupation Health based at Trust Headquarters. There is psychological support available for all staff. Physiotherapy services are also available at various sites across Mersey Care. A voluntary Consultant peer support service is also in development at Mersey Care NHSFT. There are regular Consultant social events, which have helped inclusion and wellbeing. There is currently a working group on improving Consultant and Doctors' wellbeing. The Trust supports the wellbeing of the postholder after serious incidents that involve patients in their care (e.g. homicide or suicide) with dedicated senior clinician and operational managers providing support and advice as needed after the incident.

EQUALITY, DIVERSITY AND HUMAN RIGHTS

Mersey Care is committed to the principles of Equality and Human Rights. The Trust promotes health equalities for our colleagues, patients, service users, carers, volunteers and visitors to the Trust by identifying and overcoming barriers to access and inclusion within our employment opportunities and across the range of mental and physical health services.

For our communities this means services that are fair, flexible, engaged and responsive to cultural, physical and social difference. We deliver our services via a workforce that is made up of many talented individuals with a large diversity of backgrounds and perspectives, styles and characteristics. We aim to foster an inclusive workplace environment with a welcoming climate in which everyone can reach their full potential.

Mersey Care have adopted a human rights based approach to its clinical and organisational practice by adhering to the underlying core values of Fairness, Respect, Equality, Dignity and Autonomy (FREDA).

LEAVE ARRANGEMENTS

- <u>Annual Leave</u> Under seven year's consultant service 32 days. Over seven year's consultation service 34 days.
- Study & Professional Leave 30 days over three years.
- Cover of Annual and Study Leave will be provided by the Consultants within the South on-call rota area, or other consultants by agreement.

SUGGESTED DRAFT TIMETABLE:

- This timetable is indicative only. A formal job plan will be agreed between the post holder and the lead consultant & Clinical Director three months after commencing the post and at least annually thereafter.
- There is some flexibility in finalising the timetable however any agreed timetable must take account of the needs of service users and coherence of the team.
- The job plan will be subject to annual review according to service need and transformational plans.



Day	Time	Location	Work Category		No. of PAs
Monday	AM	Moss House	Stepped Up Care Meeting Clinical admin	DCC	1
	PM	Moss House	CPA Clinic	DCC	1
Tuesday	AM	Indigo @ Ashworth	Teaching programme Consultant meeting / CPD	SPA	1
	PM	Moss House	Outpatient clinic	DCC	1
Wednesday	AM	Moss House	Urgent Reviews / home visits Admin	DCC	1
	PM	Moss House	MDT Clinical Admin	DCC	1
	AM	Moss House	Outpatient clinic	DCC	1
Thursday	PM	Moss House	Patient Assessment Junior Doctor supervision (F1) Staff Grade Supervision	DCC SPA	½ ½
Friday	AM	Moss House	Outpatient clinic	DCC	1
	PM	Moss House	Team performance / audit meetings / CPD	SPA	1
Unpredictable / emergency on-call work	1:18				
Total PAs	Direct clinical care				
Total FAS	Supporting professional activities				

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



Appendix 1: Person specification/selection criteria for consultant

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

AAC: Advisory Appointments Committee Ref: References Pres: Presentation to 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		
	Demonstrate commitment to shared leadership & collaborative working to deliver improvement.	SL, AAC	Reflected on purpose of CPD undertaken	SL, AAC
	Participated in continuous professional development	SL, AAC		
	Participated in research or service evaluation.	SL, AAC	Experienced in clinical research and / or service evaluation.	SL, AAC