

# **Consultant Psychiatrist Job Description and Person Specification**

### **Consultant Psychiatrist**

## **General Adult Liaison Psychiatry**

Post and Specialty:	This is a full-time consultant post (10 programmed activities) to work in General Adult Liaison Psychiatry and Psychological Medicine for Nottinghamshire Healthcare NHS Foundation Trust within Nottingham University Hospitals NHS Foundation Trust. There is also space within this post to develop an interest in Neuropsychiatry.			
	Candidates who work less than full time are also encouraged to apply.			
	This is a full-time (10 sessions) permanent replacement post following the departure of a previous consultant. The post will provide liaison psychiatry to the acute hospital with outpatient clinics for psychological medicine.			
	The Liaison Psychiatry service is currently undergoing transformation and this is an exciting time for the new post holder to progress and develop the service as we look at evolving liaison psychiatry, psychological medicine and potentially neuropsychiatric services across Nottingham and Nottinghamshire.			
Base:	Department of Psychological Medicine, B-Floor, South block, Queens Medical Centre, Derby Road, Nottingham, NG7 2UH			
RCPsych approval details:	TRENT-CO-NTH-2023-01500 (Approved)			
Contract:	Number of programmed activities: 10 (DCC 7.5 PA and SPA 2.5 PA)			
Accountable professionally to:	Medical Director – Dr Sue Elcock			
Accountable operationally to:	Lead Consultant – Dr Sarah Wilson			
Key working relationships and lines of responsibility:	Clinical Director: Lead Consultant: Operational Manager: Responsible Officer: General Manager: Medical Director:	Rebecca Foxhall Dr Sarah Wilson Chris Majid Dr Sue Elcock Emma Hutton Dr Sue Elcock		
	Associate Medical Director:	Dr Kiran Jeenkeri		



Chief Executive: Ifti Maj	id
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#### 1 Introduction

Nottinghamshire Healthcare is one of the largest mental health trusts in the country, serving a population of over one million people across Nottinghamshire, including the provision of healthcare services from Rampton Hospital, one of the country's three high-secure hospitals. This provides interested trainees with unique training opportunities in forensic psychiatry.

The Trust also has strong academic links with the University of Nottingham and the Institute of Mental Health, home of the Mental Health Research Network hub for East Midlands and South Yorkshire. The Trust is supporting the Royal College of Psychiatry's campaign to encourage medical students to specialise in psychiatry. You can find out more by visiting <u>the College's website</u>.

#### 2. Trust Details

Nottinghamshire Healthcare provides integrated healthcare services, including mental health, intellectual disability and physical health services. Over 10,000 dedicated staff provide these services in a variety of settings, ranging from the community through to acute wards, as well as secure settings. The Trust manages two medium secure units, Arnold Lodge in Leicester and Wathwood Hospital in Rotherham, and the high secure Rampton Hospital near Retford. It also provides healthcare in prisons across the East Midlands. Its budget for 2023/24 is £628.2 million.

The Trust is committed to a sustainable future and works hard to reduce its carbon footprint and environmental impact across all of its many services.

The core local area the Trust covers is Nottingham and Nottinghamshire with a combined population of around 1.1 million people.

There are large variations in the levels of deprivation across our local area. In 2019, Nottingham City was the 11th most deprived district in the country, life expectancy in the City is below the England average, with approximately three years less for men and two years less for women (Nottingham: 77.0 men; 81.1 women. England: 79.5 men; 83.1 women) JSNA Nottingham and JSNA Nottinghamshire.

Healthy life expectancy for both men and women in Nottingham is also significantly lower than the England average with men living 5.9 years less in good health and women 8.8 years less. In Nottinghamshire, deprivation levels are very varied, with some communities having the highest levels of deprivation in England and some with the lowest. Areas with the highest levels are mainly in Ashfield, Mansfield and Newark and Sherwood.

In the Census 2021, the percentage of people for whom their day-to-day activities were limited a lot due to a long-term health problem or disability was significantly higher in Nottinghamshire (8.5%) compared with the East Midlands (7.7%) or England (7.3%) with the highest levels in Ashfield (10.1%), Bassetlaw (9.1%) and Mansfield (10.3%). The most common long-term conditions are hypertension, common mental health disorders, asthma, chronic kidney disease, diabetes and coronary heart disease.

In Nottinghamshire, our population is predicted to continue to age with the number of 65-84 year olds increasing between 2017-2032 by over 30% and 85+ year olds by over 76% (JSNA Nottinghamshire). Older people are more likely to experience disability and long-term illnesses.

According to the 2021 Census, 42.7% of the City's population are from Black and Minority Ethnic (BME)



groups, which are defined as everyone who is not White British. This is an increase from 34.6% in 2021.

In the UK, poor access to mental health services is a real barrier to black adults getting the help they need as they are the least likely ethnic group to report getting medication, therapy or counselling. Black people in the UK are also less likely to have the involvement of GPs leading up to a first episode of psychosis than white patients.

#### **Board Level Directors**

Chair of the Board	Paul Devlin
Chief Executive	Ifti Majid
Executive Director: Clinical Governance & Medical Affairs	Dr Sue Elcock
Executive Director: Finance & Facilities	Alison Wyld
Executive Director: Forensic Services	Dr Sue Elcock
Executive Director: People & Culture Services	Jen Guiver
Executive Director: Corporate Governance	Nabil Jamshed
Executive Director: Strategy & Partnerships	Jan Sensier
Executive Director: Local Mental Health Services (Interim)	Becky Sutton
Executive Director: Deputy Chief Executive	Anne-Maria Newham
Executive Director: Nursing, AHPs & Quality (Interim)	Anne-Maria Newham
Five other Non-executive Directors	

#### 3. Service Details

The Trust covers the whole of the county of Nottinghamshire in the provision of mental health services to children, adults and older people.

This is an exciting time to come and join our medical workforce and have the opportunity to shape the provision of care to patients.

This is a substantive full-time post in Liaison Psychiatry which has become available due to a previous post holder moving to a different post. The post holder will be one of 4 senior psychiatrists working within Liaison Psychiatry (3 Consultants and one Associate Specialist) covering all general adult patients admitted to the acute hospitals of Nottingham University Hospitals NHS Trust (QMC and Nottingham City Hospital) and offering outpatient psychological medicine services to patients within Nottingham City and South Nottinghamshire. The teams works closely with the Older People's Liaison Psychiatry Team which has two Old-Age Liaison Consultant Psychiatrists and is also based at NUH, covering the same areas for patients aged 65 and over, and some younger patients with a confirmed diagnosis of dementia.

The Team is based in the Department of Psychological Medicine, B Floor, South block, Queens Medical Centre, Derby Road, Nottingham, NG7 2UH.

The service works 24/7 365 days a year. Consultant input is Monday to Friday 9-5pm with cover from the on-call rota. Within this time there will be an expectation of clinical input to the acute hospital wards and emergency department, along with outpatient clinics. There will be time within the role for service development, including the development of neuropsychiatric services alongside the existing psychological medicine service.

The team is well-established with some extremely experienced and dedicated clinicians. The service has recently undergone transformational change, moving from the Adult Mental Health (AMH) to the Mental Health Services for Older People (MHSOP) Directorate in line with Liaison Psychiatry Services across the county. Within this directorate, Liaison Psychiatry is managed by a team of clinicians with



many years of experience within Liaison Psychiatry across multiple sites.

The team meets the recommended requirements for a comprehensive PLAN accredited Liaison service in combination with the Older People's Liaison Psychiatry Team. The well-established team includes 2.6 consultant psychiatrists, a full-time associate specialist, a band 7 clinical team manager, 2 band 7 clinical nurse specialists, a trainee advanced clinical practitioner, 20.6 band 6 mental health liaison nurses, 1 band 5 nurse, 0.6 consultant cognitive behavioural therapist. In addition to this, the Older People's Liaison Psychiatry Team includes 1.4 consultant psychiatrists, a band 7 clinical team manager, a band 7 clinical nurse specialist a trainee advanced clinical practitioner, 9 band 6 mental health liaison clinicians and 1 band 5 nurse. The working age team receives around 600 referrals a month from both the emergency department and acute inpatient wards. As per PLAN guidelines the team has a one-hour response to the emergency department and 24-hour response to the wards. The vast majority of initial assessments are carried out by the band 6 nurses, who can then discuss cases and request advice or further input from senior nurses and consultants.

The psychological medicine element of the post is an outpatient-based service. Referrals are received from specialist areas within the hospital and clinics are run by both nurses and medics, providing assessment and brief psychological interventions for persistent physical symptoms, medically unexplained symptoms and psychological assessment (for example for dermatology patients prior to commencing Roaccutane).

The workload is split fairly across the medical team with cases allocated on a daily basis, as and when referrals come in and senior medical advice and input is required.

The role will involve liaising and working with colleagues across the acute hospital, as well as with other mental health services locally including CAMHS, MHSOP, Perinatal, Forensic and Intellectual Disabilities. There will also be a need to develop good working relationships with the CRHT teams, Local Mental Health Teams, Inpatient Services and Third Sector Services.

As NUH is a major trauma centre and tertiary referral centre for a number of specialities, there will also be a need to liaise with services outside of Nottingham, most commonly Derbyshire, Leicestershire and Lincolnshire, but also services further afield. NUH provides tertiary services for neurology, cardiology, renal medicine, neuro-rehabilitation, maxillofacial surgery and hepatobiliary surgery among other specialities. There is scope within this role to develop a specialist interest in liaison psychiatry of specific systems and areas.

The role does not currently involve participation in Section 136 assessments, as patients brought to the emergency department under Section 136 are discussed with the local 136 assessment suite, who liaise with the local authority to arrange MHA assessments using a separate pool of section 12 approved doctors. Consultant liaison psychiatrists are not expected to get involved in MHA assessments triggered by Section 136, unless there are exceptional circumstances.

The post holder will share cross cover arrangements with the Liaison Psychiatry consultant colleagues and associate specialist in General Adult Liaison Psychiatry for annual and study leave.

The service has been PLAN accredited since October 2011. There will be an expectation to work to maintain or improve our PLAN accreditation level.

There are plenty of teaching opportunities to our colleagues in the Acute Trust and our trust, to junior doctors and other disciplines within our Trust and to medical students at the University of Nottingham.



The following Psychiatric Services serve the Nottingham and Nottinghamshire area:

- Alcohol & Addiction
- Child and Adolescent Mental Health Services
- Forensic Mental Health Services
- Adult Mental Health
- Mental Health Services for Older People
- Psychotherapy
- Perinatal Psychiatry
- Specialist Eating Disorders Service
- Personality Disorders Network
- Specialist Gender Clinic
- Intellectual and Developmental Disabilities Service
- Integrated Offender Healthcare
- Community Healthcare via Health Partnerships and Bassetlaw Health Partnerships

#### 4. Local Working Arrangements

#### Line Management, Job Plan and Leave Cover

The team consists of:

- 2.6 whole time equivalent (WTE) Consultant Psychiatrist (Including this post)
- 1 WTE Associate Specialist Psychiatrist
- 1 WTE Trainee Advanced Clinical Practitioner
- 1 WTE Clinical Team Manager, Band 7
- 2 WTE Clinical Nurse Specialists, Band 7
- 20.6 WTE Mental Health Liaison Nurses
- 0.6 WTE Consultant CBT Psychologist
- 1 WTE Admin Lead, Band 4
- 4 WTE Medical Secretary, Band 3
- 2 WTE Team Administrators/Receptionists, Band 2

Other Consultant Colleagues based in General Adult Liaison Psychiatry at NUH are: Dr Tanzeel Ansari

Dr Graham Worwood

Dr Hani Ghanem (associate specialist)

The Older People's Team who work closely with the working age team consists of:

- 1.4 WTE Consultant Psychiatrist.
- 1 WTE Trainee Advanced Clinical Practitioner
- 1 WTE Clinical Team Manager, Band 7
- 1 WTE Clinical Nurse Specialist, Band 7
- 9 WTE Mental Health Liaison Clinicians
- 1 WTE Admin Lead, Band 4
- 2 WTE Medical Secretary, Band 3

Other Consultant Colleagues based in Older People's Liaison Psychiatry at NUH are: Dr Sarah Wilson Dr Manisha Ray



Dr Kehinde Junaid Professor Martin Orrell Professor Rowan Harwood (geriatrician).

There are junior doctors working within Liaison Psychiatry which include CT and ST trainees. The post holder will be able to apply for CT or ST trainees to be posted with them for training and this will depend on allocation and demand for the post. There are also current arrangements in place to give GP trainees and F2 trainees a full week with the department during their psychiatry rotation, and they will require supervision along with the other consultant colleagues. The post holder will jointly share the supervision of trainees.

This is a substantive fulltime post in Liaison Psychiatry. The consultant will have 7.5 PAs for direct clinical care including clinical admin. The key part of their role will be to provide clinical leadership to the team and assessing, treating and following patients up as appropriate. There will be an opportunity to develop specialist neuropsychiatric services within the Trust. These areas will be flexible to the post holders experience.

The remaining 2.5 PAs are for supporting professional activities (SPAs) and the post holder will have flexibility to take on a variety of things such as teaching, training, research, continuing professional development/audit, and leadership activities. There is no expectation that they will take them all on. The specific job plan and allocation of PAs will be developed with the Lead Consultant, and in discussion with consultant colleagues and managers in the sector.

The post holder would support the whole MDT by providing clinical leadership to the team and assessing, treating and following patients up as appropriate. Each day and week is different in how this is best achieved but to summarise; the department is a very busy liaison psychiatry department in a large acute teaching hospital trust. The Team together sees approximately 600 new referrals per month and offers follow up appointments where appropriate. The service covers a teaching hospital with a current bed base of 1650 and approximately 550 ED attendances a day. Patients can be referred from the ED or any ward in the hospital. We also offer an outpatient service for complex liaison patients (such as mixed medical and psychiatric and medically unexplained symptoms patients amongst others). On top of consultant support – such as case discussion/ supervision of all members of the MDT and seeing cases that require consultant input.

As a fulltime post there would normally be 2-3 clinics per week taking patients from outpatient referrals from the Acute Trust of from follow-ups seen by the MDT team on the wards or ED. At the most these clinics would offer one new and four follow-up assessments.

There are no special responsibilities associated with the post.

Other duties for the post holder include:

- To participate in the clinical governance framework in Liaison Psychiatry and the wider Trust.
- To supervise junior medical colleagues and support staff.
- To take an active service planning role at local level.
- To participate in clinical audit.
- Teach medical students of the University of Nottingham.
- Contribute to the business planning and service development of Liaison Psychiatry

In addition the post holder will be expected to:

- Ensure excellence in the provision of medical and psychiatric assessments to all referred patients to the service.
- To deliver evidence-based treatments.



- To act as a source of support, advice and information to current or prospective patients and their carers, referrers, team members and other professionals.
- Ensure clinical activities are documented on the Trust electronic record system (RIO) and assist in the collection of clinical outcome data.
- Contribute to clinical audit, clinical governance and clinical research within the team. They will be expected to contribute to regular audit of outcomes of the service.
- All doctors are expected to participate fully in the Trust Clinical Governance Programme, including active involvement in Clinical Audit, assessment of Untoward Incidents and Complaints management. Continuing Professional Development and Performance Assessment including annual appraisals are also a requirement of the post.
- The post holder will be a member of a Peer group. The post-holder will be expected to participate in revalidation as agreed by the Trust in its Terms and Conditions of Service.
- The post holder will carry a mobile during work hours and be contactable by members of the team.

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, being involved with the team manager and service manager in helping to steer the development of the service in line with the strategic direction of the organisation.

#### 5. Continuing Professional Development (CPD)

Trust support for CPD activities, including study leave arrangements and appropriate funding. The Consultant will be supported to join a peer group as appropriate to their needs. Each Consultant will have a personal development plan for the year, formulated within their peer group. The appointee would be expected to undertake continuing professional development in line with the recommendations of the Royal College of Psychiatrists and the Trust will undertake to allow time and fund such educational activities as required.

The expectation is that the post holder will remain in good standing for CPD with the Royal College of Psychiatrists.

The Trust offers study leave of up to 30 days over a 3 year period. This can be utilised for CPD events, subject to approval by the Associate Medical Director and Clinical Director. There is also a modest fund available of £1200 per year to support these activities.

#### 6. Clinical Leadership and Medical Management

- The Consultant will participate in business planning for the team and, as appropriate, contribution to the broader strategic and planning work of the service and the Trust.
- The Consultant will be expected to lead improvements in the quality of care within the team and contribute to improving quality across the system with the team manager and clinical lead in the teams.

#### 7. Appraisal and Job Planning

- The Trust has committed to the implementation of annual consultant appraisal.
- There is annual job planning with Clinical Directors/Lead Consultants. In addition to this an initial meeting will take place on commencement of the role to agree an indicative job plan which can be informally reviewed quarterly prior to the formal job planning meeting if required t ensure positive working conditions.



- Trust processes support appraisal, link to revalidation; the Medical Director is the named Responsible Officer. The Appraisal Lead is Dr James Ellison who does regular sessions with Consultants helping with appraisals, revalidation and CPD support.
- There is a new starter Trust induction programme for all staff and a new Consultant induction programme and mentoring scheme/arrangements.
- All new consultants will be offered an induction meeting with the Medical Director at which mentoring will be discussed. Mentoring will also be available for any Consultant in the Trust on request. Those individuals requiring a mentor should contact the Medical Director who will facilitate the appointment of a mentor. The Trust has a policy on Mentoring Consultants.

#### 8. Teaching and Training

The Trust delivers training as part of the North School of Psychiatry, East Midlands Healthcare Workforce Deanery. The Head of School for Health Education East Midlands is Dr Debasis Das. The Trust's Director of Medical Education is Dr Kehinde Junaid, responsible for the delivery of education to doctors at all levels.

An integral part of the post holder's duties will be consultation to medical colleagues and teaching and supervision of junior medical staff both within the service and from the training scheme. There are also medical students placed in the department.

Teaching support will be via the medical education team managed by the DME, the university of Nottingham undergrad and colleagues.

There are also opportunities for:

- Trust-wide teaching.
- Participation in undergraduate and postgraduate clinical teaching.
- Participation in the training of other disciplines.
- Providing educational supervision of trainees and other disciplines this will be renumerated via the medical education department, usually as additional sessional work.
- Taking part in continuing medical education within statutory limits.
- Supervising the CT and ST doctors.

#### 9. Research



We have close links with the Institute of Mental Health (IMH) and the University of Nottingham. Since its formation in 2006, the Institute has established a track record of success, with achievements in pioneering education provision and innovative, service-facing, inter-disciplinary research.

The IMH currently receives approximately £46 million in external research grants and is one of the UK's prime locations for interdisciplinary research in mental health with 33 full time and associate professors.

Particular strengths of the Institute are reflected in its eight Centres of Excellence:

• ADHD and neurodevelopmental disorders across the lifespan - advancing the translation of



research into practice;

- Dementia tackling one of the biggest health challenges facing the population;
- Education providing accredited and non-accredited training delivered by experts in their field;
- Health and Justice improving the understanding of and provision for mentally disordered offenders;
- Mental Health and Human Rights officially launched in 2018;
- Mood Disorders advancing leading edge research into conditions such as depression and bipolar disorder;
- Social Futures transforming how service users, carers and professionals work together in a new community of understanding;
- Translational Neuroimaging building on recent advances in neuroscience, diagnosis and treatment.

The Institute also hosts:

- The Cochrane Schizophrenia Group for the evaluation of the prevention, treatment and rehabilitation of people with psychotic illnesses;
- MindTech a National Institute for Health Research (NIHR) Healthcare Technology Co-operative focused on the development of new technology for mental healthcare;
- The NIHR Collaboration for Leadership in Applied Health Research and Care East Midlands (CLAHRC-EM).

There are a number of clinical lecturer posts for those wishing to pursue a career in academic psychiatry.

#### 10. Mental Health Act and Responsible Clinician Approval

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. There may be occasions where you are required to be the Responsible Clinician for patients detained under the MHA to the acute hospital, and this approval is required as part of the on-call arrangements.

#### 11. Secretarial Support and Office Facilities

There is secretarial support, currently four medical secretaries and an admin lead (Ellie Gorman). There is a dedicated consultant office with full IT facilities which takes into account the need for confidentiality, security of information and supervision requirements of the post, within the Department of Psychological Medicine at QMC where this post is based. The Associate Specialist Psychiatrist is based at the City Hospital with a dedicated office on the City Hospital site. There is also a shared office space at City Hospital for both the working age and older people's liaison psychiatry teams.

All IT equipment (Laptop/Mobile Phone) will be provided by the Trust on commencement of the post.

#### 12. Clinical Duties of Post Holder

An integral part of the post holder's duties will be consultation to medical colleagues and teaching and supervision of junior medical staff. The post holder will also offer consultation to nursing colleagues in Liaison Psychiatry.

Most initial assessments are carried out by the liaison nurses or other clinicians within the team, but consultant input will be required for complex cases in the Emergency Department and on wards. Consultant outpatient clinics will also be required for psychological medicine assessment and reviews.



Other duties include:

- To participate in the clinical governance framework in DPM and the wider Trust.
- To supervise junior medical colleagues and support staff.
- To take an active service planning role at local level.
- To participate in clinical audit.
- Teach medical students of the University of Nottingham.
- Contribute to the business planning and service development of Liaison Psychiatry.

#### 13. Training Duties

An integral part of the post holder's duties will be consultation to medical colleagues and teaching and supervision of junior medical staff both within the service and from the training scheme. There are also medical students placed with the service to gain experience of liaison psychiatry.

There are also opportunities for:

- Trust-wide teaching.
- Participation in undergraduate and postgraduate clinical teaching.
- Participation in the training of other disciplines.
- Providing educational supervision of trainees and other disciplines.
- Providing education and training to medical colleagues and other disciplines within the acute hospital.
- Taking part in continuing medical education within statutory limits.
- Supervising the CT and ST doctor if allocated.

#### 14. Clinical Governance and Quality Assurance

The consultant would be expected to contribute to effective clinical governance within the team and alongside the team manager and service leads to take responsibility for setting and monitoring standards.

All consultants are expected to participation in clinical audit and quality improvement activities within the team and to engage in service/team evaluation and the planning of future service developments.

Line management is provided by Clinical Directors in collaboration with the Clinical Leads/Lead Consultant who can support with day to day issues and caseload queries.

There is opportunity to participate in incident and complaint investigations, support can be offered with this and there is a Clinical Governance lead for the division who leads on these.

#### 15. Quality Improvement

The consultant would be expected to contribute to effective clinical governance within the team and alongside the team manager and service leads to take responsibility for setting and monitoring standards.

All consultants are expected to participate in clinical audit and quality improvement activities within the team and to engage in service/team evaluation and the planning of future service developments.

#### 16. General Duties

• To manage, appraise and give professional supervision to junior medical staff as agreed



between consultant colleagues and the medical director and in accordance with the Trust's personnel policies and procedures. This may include assessing competences under the Modernising Medical Careers framework

- To ensure that junior medical staff working with the post holder operate within the parameters of the New Deal and are Working Time Directive compliant
- To undertake the administrative duties associated with the care of patients
- To record clinical activity accurately and comprehensively, and submit this promptly to the Information Department
- To participate in service and business planning activity for the locality and, as appropriate, for the whole mental health service
- To participate in annual appraisal for consultants
- To attend and participate in the academic programme of the Trust, including lectures and seminars as part of the internal CPD programme
- To maintain professional registration with the General Medical Council, Mental Health Act Section 12(2) approval, and to abide by professional codes of conduct
- To participate annually in a job plan review with the clinical manager, which will include consultation with a relevant manager in order to ensure that the post is developed to take into account changes in service configuration and delivery associated with modernisation
- To work with local managers and professional colleagues in ensuring the efficient running of services, and share with consultant colleagues in the medical contribution to management
- To comply with the Trust's agreed policies, procedures, standing orders and financial instructions, and to take an active role in the financial management of the service and support the Medical Director and other managers in preparing plans for services.
- There is no expectation to carry out Section 136 assessments in the Emergency Department at present.
- There is an expectation to hold 2-3 outpatient clinics each week, with a maximum of one new and four follow-up appointments per clinic.

#### 17. External Duties, Roles and Responsibilities

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

#### 18. 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.

#### 19. Work Programme

It is envisaged that the post holder will work 10 programmed activities over 5 days per week. Following appointment there will be a meeting at no later than three months with the clinical manager to review and revise the job plan and objectives of the post holder. The overall split of the programmed activities is 7.5 to be devoted to direct clinical care and 2.5 to supporting professional activities (as per the Royal College of Psychiatrists recommendation). The timetable is indicative only. A formal job plan will be agreed between the post holder and associate medical director or clinical manager three months after commencing the post and at least annually thereafter.



#### 20. On-call and Cover Arrangements

The post holder will work alongside sector colleagues to provide daytime medical cover. The out-ofhours on-call responsibilities will consist of participating in the South Nottinghamshire AMH Consultant 24-hours Rota. For this post the on call is 1 in 25 pro rata. There is a night-time Specialist Trainee rota and Junior level rota. The on-call commitment for this post is rated Category B, low intensity. The remuneration for this is 1%.

Out-of-hours MHA Assessments (including those triggered by Section 136) are generally undertaken by the higher specialist trainees.

The post holder will share cross cover arrangements with the Liaison Psychiatry consultant colleagues and associate specialist in General Adult Liaison Psychiatry for annual and study leave.

#### 21. Wellbeing

Wellbeing support and 1-1s are available and encouraged with the Clinical Directors and with team leads. The trust has a staff wellbeing team and a robust occupational health and staff counselling offer. These services are confidential and are accessible via self-referral or referral from line managers.

The service promotes a positive, open and engaging culture that is supportive and facilitative, there are clear communication channels and escalation processes should support be needed that is not felt to be forthcoming. If workload changes in relation to Job Plans this can be discussed and scheduled job planning meetings can be brought forwards to support these discussions. We recognise the importance of ensuring a healthy work/ life balance in supporting positive well-being and where appropriate to service need flexibility around working hours/ clinic times can be negotiated. Where these changes happen when there isn't a job planning meeting scheduled we are able to bring these meetings forwards as needed.

There are monthly Consultant group meetings for peer support, supervision and learning.

The trust offer regular mindfulness courses to staff and have regular wellbeing 'pop up' events offering a range of holistic therapies. The trust also operate a trauma informed way of working and as such offer diffusion and debriefing to staff involved in critical incidents.

The trust is committed to supporting the development of staff and if requested development mechanisms such as mentoring and coaching can be facilitated in addition to the supportive measures mentioned above.

#### 22. 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.

#### Safeguarding

All employees are responsible for taking all reasonable measures to ensure that the risks of harm to children and vulnerable adults are minimised. They should take all appropriate actions to address concerns, working to agreed local policies and procedures including the guidance on Safeguarding, in partnership with other relevant agencies. This includes accessing appropriate training, advice, and support

#### **Disclosure and Barring Services**



Where this post relates to the types of work, activity, employment or profession as set out in The Exceptions Order made under the Rehabilitation of Offender Act 1974; the post will be subject to a DBS Disclosure check at the point of recruitment and thereafter, as the Trust determines appropriate. The level of the check will be determined by the type of activities undertaken and the level of contact the post holder will have with children and/or adults in receipt of health services

#### **Infection Control**

All employees of Nottinghamshire Healthcare NHS Foundation Trust have an individual responsibility to have knowledge of and employ the basic principles of infection prevention and control practice. All employees must comply with Infection Prevention and control mandatory training requirements specific to their role

#### **Equality and Diversity**

All employees of Nottinghamshire Healthcare NHS Foundation Trust have an individual responsibility to have knowledge of and employ the basic principles of infection prevention and control practice. All employees must comply with Infection Prevention and control mandatory training requirements specific to their role

#### **Sustainability**

It is the responsibility of all staff to minimise the Trust's environmental impact wherever possible. This will include recycling, switching off lights, computers, monitors and equipment when not in use. Helping to reduce paper waste by minimising printing/copying and reducing water usage, reporting faults and heating/cooling concerns promptly and minimising travel. Where the role includes the ordering and use of supplies or equipment the post holder will consider the environmental impact of purchases.

#### 23. Leave

The post-holder is entitled to 32 days of annual leave per year rising to 34 days after seven years' service.

There is an allowance of 30 days study leave over three years for approved courses for which appropriate expenses up to £1200 a year are paid.

#### 24. Visiting Arrangements

For informal visits please contact Dr Sarah Wilson (Consultant Psychiatrist & Medical Lead)

🖀 0115 924 9924 Ext: 83885

@ sarah.wilson@doctors.org.uk

#### 25. Draft Timetable

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	DCC ED and ward assessments/ad min	SPA Supervision, audit, medical student teaching	SPA Journal club, Peer group meetings, SMSC meetings CPD	DCC ED and Ward assessments/ admin	DCC Clinic and Admin



		DCC Urgent and Emergency Reviews			
Afternoon	DCC Clinic & Admin	DCC Team MDT and Admin	SPA CPD, management, service development, specialist interest development	DCC Clinic & admin	DCC Emergency/Urge nt Reviews

### 26. 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 18/01/2024.



# 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
	Able to use and appraise clinical evidence	SL, AAC, Pres	Evidence of achievement in education, research, audit and service improvement: awards, prizes, presentations and publications	SL
	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