

Integrated Outreach Team Consultant Psychiatrist Job Description and Person Specification

Post and Speciality	Consultant in General Adult Psychiatry in Bradford Integrated Outreach Team
Contract:	10 programmed activities
Base	Legrams Terrace, Fieldhead
Accountable professionally to:	Medical Director
Accountable operationally to:	Dr Anitha Mukundan, who has line management responsibility, and Deputy Director of Operations: Alix Jeavons
Key working relationships and lines of responsibility:	<p>Clinical Manager: Paul Carr</p> <p>Service Manager: Bernard Hughes</p> <p>Deputy Director of Operations: Alix Jeavons</p> <p>Clinical Director: Dr Himanshu Garg</p> <p>R&D Director: Gregor Russell</p> <p>Medical Director: David Sims</p> <p>Deputy Medical Director: Sarfaraz Shora</p> <p>Associate Medical Director (education) – Dr Mahmood Khan</p> <p>Chief Operating Officer: Kelly Barker</p> <p>Chief Executive: Therese Pattern</p>

1. Introduction

Bradford District Care NHS Foundation Trust (BDCFT or the Trust) consists of an organization of over 2800 staff and provides a range of mental health and community services including

acute and non-acute mental health and learning disability services, district nursing, health visiting as well as other allied health services to a population of 580,000 within the Bradford, Airedale, Wharfedale and Craven localities.



Bradford is a diverse and vibrant city, and if you are

keen to work in an area of phenomenal natural beauty with easy access to all the major cities in the North of England, there is no better place.

This post gives an opportunity to play a central role in the ongoing development of a key team within Bradford community mental health. The Integrated Outreach team was formed in 2019 from a merger of two established teams within the Trust: the Assertive Outreach and Community Drug and Alcohol teams. This merger has provided a new opportunity to build a bespoke service for the Trust, with flexible styles of working and smaller caseloads aiming to provide excellent care for a population within the Trust who are traditionally hard to engage by standard community mental health approaches.

2. Trust details

Bradford District Care NHS Foundation Trust is a provider of award-winning mental health, learning disabilities and community health services to a growing population of 580,000 people across a diverse district comprising urban and rural Bradford, Airedale and Craven. The population is one of the most multicultural in Britain with over 100 languages spoken. The Trust was authorised as a Foundation Trust from 1 May 2015 and became known as Bradford District Care NHS Foundation Trust.

The Trust employs over 2,800 staff who provide healthcare and specialist services to the people living in Bradford, Airedale, Wharfedale and Craven. Our care and clinical expertise is spread over 50 sites and over the last year we provided 61 different services.

These services can be divided into the following main areas:

- Mental health services - EIP / Liaison Teams / In Patients and Community
- Learning disability services
- Community-based physical health services
- Dental services

Our main independent sites are situated at Lynfield Mount Hospital, Bradford and the Airedale Centre for Mental Health, Steeton, whilst our Trust Headquarters is based at New Mill, Saltaire. The Trust also owns and leases a range of community properties including Horton Park Centre, Fieldhead Business Centre, Somerset House, Meridian House, and the Craven Centre at Skipton Hospital.

3. Service details

The Integrated Outreach Team is mainly based at Fieldhead, in Bradford. We have a smaller team covering the Airedale area based at Meridian House Keighley. This is a community service; inpatient care is provided at Lynfield Mount Hospital, Bradford and Airedale Centre for Mental Health, Steeton.

Consultant leadership for the team is currently 1.6 WTE, with responsibilities for client caseload split flexibly between the two consultants. There is a variable caseload of around 180 service users between Bradford and Airedale, generally made up of those service users falling under Clusters 16 and 17. Most present with a psychotic illness and there is a high prevalence of dual diagnosis in our client population. The caseload reflects the pattern of higher than average levels of social deprivation in Bradford and this, combined with the high prevalence of psychosis and substance use means that we are continually challenged to find effective means of improving our engagement approaches.

The consultant clinical responsibilities would be provision of medical assessment and review, monitoring treatment effectiveness, Mental Health Act assessment and responsibility for clients subject to Community Treatment Orders. The successful applicant will also have a responsibility for leadership within the team and ongoing development of a relatively new service within the Trust mental health service.

Referrals are received from other services within the Trust, mainly from CMHT, and a team approach is used to assess these. We have regular meetings during the week and this allows all the team to develop awareness of all service users which aids continuity of care and improves risk management. This also aims to increase quality of care provided and enable discharge or transfer back to CMHT in a timely manner.

4. Local working arrangements

The Trust is seeking a Consultant Psychiatrist to join the Bradford Integrated Outreach Team. This post is currently held by a locum. The post covers the Bradford area, with the expectation of cross cover as needed.

The staffing makeup of the service is:

2 Consultants (1 x 1.0 WTE – this post, 1 x 0.6 WTE)

Currently no training posts but this is something which is planned to be addressed.

1 Team Leader:

11 WTE Care Coordinators, including one ANP, 2 local authority Social Workers and 2 AMHP's

3 Support Workers.

In Aire Wharf Craven (AWC)

2 care coordinators

2 support workers.

0.4 WTE clinical psychologist input.

The team provides practice placements for students from all professional groups represented within the team

5. Continuing professional development (CPD)

The Trust strongly supports consultant professional development and CPD will be available in line with Royal College of Psychiatrists' guidelines. There is a well-established local CPD peer group, each peer group comprises 4-5 consultants (from different specialities) that meet every 3 months. The post holder will take part in annual appraisal in line with the Medical Appraisal Policy and have an annual job plan review. Working closely with Senior Managers the post-holder will be encouraged to develop an area of specialist interest. Consultants on taking up

appointment are encouraged to obtain a mentor (internal or external) using our local Trust arrangements supported by the Deputy Medical Director. The post holder will be expected to comply with continuing professional development and revalidation requirements set by the GMC and the Royal College of Psychiatrists and remain in good standing for CPD with the Royal College of Psychiatrists.

6. Clinical Leadership and Medical Management

The Medical Director is supported by a Deputy Medical Director and an Associate Medical Director and Specialty Medical Leads.

Each CMHT has a multidisciplinary leadership team of which the consultants are an integral part.

The post holder will be a member of the Medical Council, which meets every month.

7. Appraisal and Job Planning

BDCT has a dedicated Revalidation Team which supports you with your appraisals and revalidation readiness. The Revalidation Team is led by a dedicated Responsible Officer. All appraisals are carried out by trained and appraised medical appraisers.

As part of your induction, you will meet the Revalidation Team and our Responsible Officer where you will be provided with a detailed Appraisal & Revalidation Handbook.

As a Trust we aim to minimise the administrative burden of medical appraisals so that you can reflect on your clinical practice, leadership, and career development. The Revalidation Team provides additional support with your appraisals including the below reports to cover the core supporting information required for your appraisal.:

- Significant Events Report
- Compliments & Complaints Report
- Mandatory Training Compliance Report Training Events Attendance Report
- Peer Group Attendance Report.
- Revalidation Tracker

The post holder will be expected to actively engage with the job planning process meeting with their line manager at least once per year to review and agree a job plan in line with contractual requirements in a timely way. This includes timely job plan reviews with the line manager when there are proposed workload changes to support safe working and identify the

need for any additional support (e.g., unexpected request to cover a unit/ward/service in addition to current workload)

As a Trust we are committed to ensuring all doctors have 2PAs (pro rata, no less than 1PA) of protected time for Supporting Professional Activities

The post holder will be required to maintain a good standing with the Royal College of Psychiatrists for their continuing professional development in line with national revalidation requirements evidenced through annual appraisals.

8. Teaching and Training

The Trust currently provides psychiatry placements for over 60 fourth year medical students from the University of Leeds. There has been excellent feedback and recognition from Leeds Medical School in the Trust providing high quality teaching and placements. The post holder will have regular student placements and will have ample opportunities to be involved in teaching medical students. In addition, the post holder will be encouraged to support ESREP (Extended Student Research and Evaluation Projects) projects organized by Leeds Medical School, this is an excellent opportunity to supervise medical students involved in service evaluation or small-scale research projects.

The Trust has an excellent weekly postgraduate teaching and training program and all consultants have protected time to attend. The program consists of junior doctor case presentations, journal club, consultant led serious incident/complex case presentations, audit meetings and invited external presenters. In addition, the Trust CPD lead (Dr. A Pillai) and AMD (Dr. M Khan) organize regular whole day CPD events covering a broad range of topics (Clinical, Management and Leadership) throughout the year.

The post-holder will be required to have recognised training for their Educational and Clinical Supervisor role. The Trusts junior doctor resource includes Foundation doctors (6 FY1 and 6 FY2), GP trainees, Core Trainees (Bradford and Airedale Core Training Scheme) and a number of Higher Trainees. The Royal College Tutors Dr. H Garg (Bradford) and Dr. S Kamath (Airedale) are responsible for junior doctor allocation.

9. Research

The Trust has an active and vibrant Research and Development department, offering support to NIHR Portfolio research projects at any one time. These projects reflect research activity

from across the Trust's clinical areas, and supporting the goals of our research strategy, namely:

- To further increase our capacity and reputation for high quality research.
- To develop and undertake programmes of research that will deliver real benefit to our patients and communities.
- To be at the forefront of evidence based innovative care and services
- To maintain research management that facilitates research, and ensures safety of research participants

Working alongside local research networks, partner organisations, and with National and International University collaborations, BDCFT R&D continues to develop and excellent reputation of the delivery of both interventional and observational research.

The R&D department has strong collaborations with regional and national academic partners including Leeds, York and Bradford Universities. We have a number of consultants who are Principal Investigators for studies and the post holder will be strongly encouraged to take an active part in the many ongoing research projects within the Trust.

The research delivery team consists of experienced research practitioners able to support all activities from assisting with feasibility and study setup, to participant facing work receiving consent and data collection.

The R&D Department also contributes to non-Portfolio research, service development and to Trust wide support for Evidence Based Practice projects.

10. Mental Health Act and Responsible Clinician approval

The post holder would be expected to be approved under S12(2) of the Mental Health Act and as an Approved Clinician. The post holder is expected to maintain this approval whilst working in the post. There will be support through the study leave budget for maintaining this approval.

11. Secretarial Support and Office Facilities

Secretarial support is provided through a medical administrator hub with a clear agreement between administration and medical staff as to the standards expected. Diary management and the interface with professionals and service users is provided by a named medical administrator who works on a basis of 1WTE medical administrator to 3 consultants. In posts

with additional support needs this has been addressed to provide the support required. Typing is provided through a BigHand server accessed by all administrators and actively managed. Trust's agile working policy is supported by provision of portable electronic equipment. Consultants are expected to work from a number of locations, this post will be largely based at the Fieldhead site.

12. Clinical Duties of Post Holder

- Assessment of new referrals.
- Medical review of patients as agreed in multi-disciplinary meetings.
- Attending daily huddle meetings.
- Home visits when required.
- Attending multidisciplinary case review meetings whenever they are arranged.
- Attending weekly team meeting/leadership meetings.
- Attending management and academic meetings:-
 - Once a month – Medical Council.
 - Once in 3 months – Peer Group Meeting.
 - Once a month – Team Quality & Safety Meeting.
- Advice to GP's/Liaison Teams/Hospitals (occasional hospital attendance may be required).
- Preparing reports and attending mental health tribunals for patients on community treatment orders.
- Reviewing and preparing reports for patients subject to Sec 37/41 of the Mental Health Act 1983 if applicable.
- Assisting trust sponsored research projects.
- Supervision of nurse prescribers.
- Giving clinical advice to team members as and when needed.
- Responsibility for assessment of emergencies, including assessment under the Mental Health Act 1983 and Section 136 assessments as part of on-call rota.
- To provide cover to community consultant colleagues on a mutually agreed basis.
- Participation in on-call rota.

13. Training Duties

- Participation in undergraduate and postgraduate clinical teaching.
- Participation in the training of other disciplines.
- Providing educational supervision of trainees and other disciplines.

14. Clinical Governance and Quality Improvement

- Participation in clinical audit and quality improvement activities.
- Participation in service/team evaluation and the planning of future service developments.

15. General Duties

- To undertake the administrative duties associated with the care of patients.
- To record clinical activity accurately and Comprehensively
- To participate in annual appraisal for consultants.
- To maintain professional registration with the General Medical Council, Mental Health Act Section 12(2) approval AC status, and to abide by professional codes of conduct.
- To participate annually in a job plan review.
- Visible leadership to ensure effective and proactive role model as part of our strategic framework.
- To comply with the Trust's agreed policies, procedures including keeping up to date with all mandatory training, 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

16. Leadership Development

- Provide leadership to the multi-disciplinary team alongside the team manager.
- Contribution to service development.
- Contribution to clinical governance and responsibility for setting and maintaining standards.
- Commitment to quality improvement.

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

The post holder will work 10 programmed activities over 5 days. The indicative job plan below indicates the Direct Clinical Activities (DCC 7.5) and Supporting Professional Activities (SPA 2.5) commitments. Following appointment there will be a meeting at no later than three months to review and revise the job plan and objectives of the post holder.

20. On-call and Cover Arrangements

The post holder will participate in the Bradford (out of hours) on-call rota, currently one in twenty pro rata (Cat A, low frequency). Consultants are usually second on-call with a junior doctor based at Lynfield Mount Hospital. On occasions a Higher Trainee in Psychiatry provides second on-call responsibilities. The indicative job plan below indicates the Direct Clinical Activities (DCC 7.5) and Supporting Professional Activities (SPA 2.5) commitments.

21. Contract Agreement

The post will be covered by the terms and conditions of service for Consultants 2003 (England). Contracts have been agreed with the BMA local negotiators, but individuals may wish to discuss this further before acceptance

22. Leave

The post-holder is entitled to 32 days of annual leave per year plus 8 Bank Holidays and The study leave entitlement is 30 days over a period of three years in relation to leave with pay and expenses in the UK, and of those, 10 days leave in any period of three years in relation to leave with pay and expenses granted for overseas study leave. For example, In lieu of on call post holder would get 2 leaves every 3 months which would need to be utilised within that quarter.

23. Weekly Timetable

Example timetable:

Day	Time	Location	Work	Category	No. of PAs
Monday	AM	IOT	RAG complex cases review OPA	DCC	1
	PM	IOT	Urgent OP reviews	DCC	1
Tuesday	AM	IOT	Daily Huddle CPA reviews	DCC	1
	PM	IOT	MHA Tribunal	DCC	1
Wednesday	AM	IOT	Consultation & Supervision to MDT meeting	DCC	1
	PM	New Mill	Case Conference/Audit (1 SPA)	SPA	1
Thursday	AM	SPA	Daily Huddle On consultant discretion- Governance/Management/Res earch/Royal College etc	SPA	1
	PM	CMHT	Outpatient reviews/home visits	DCC	1
Friday	AM	CMHT	Daily Huddle ANP supervision	SPA DCC	0.5 0.5
	PM	CMHT	Admin	DCC	1
Unpredictable / emergency on-call work					
Total PAs	Direct clinical care				7.5
	Supporting professional activities				2.5

24. 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

Appendix 1: Person Specification/selection criteria for consultant

Abbreviations for when assessed:
application form

Scr: Screening prior to short-listing SL: Short-listing from

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. MRCPsych or Additional clinical qualifications.	SL Scr SL
ELIGIBILITY	Certificate of Completion of Training in General Adult Psychiatry (ST6 trainees should be within six months of attainment at the time of the interview) or CESR equivalent. Inclusion on the Specialist Register or eligibility for inclusion Section 12 (2) MHA 1983 approved	Scr	MRCPsych or equivalent MD, Other professional qualification (e.g. MSc)	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	Familiarity with using electronic patient records in clinical practice, IT literacy	SL
	Able to manage clinical complexity and uncertainty	AAC	Willingness to work creatively within the MDT to overcome obstacles to engagement and manage risk	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	Evidence of achievement in education, research, audit and service improvement:	SL	

	Has actively participated in clinical audit and quality improvement programmes	SL, AAC, Pres	awards, prizes, presentations and publications. Has led clinical audits leading to service change or improved outcomes to patients	SL, AAC
--	--	---------------	---	---------