

## **JOB DESCRIPTION**

**OLD AGE CONSULTANT IN PSYCHIATRY**

**10 PA**

**Mixed Inpatient and Outpatient**

## **Introduction**

Pennine Care NHS Foundation Trust is seeking to make a full-time appointment to this post working with the Community. This is a replacement post due to vacancy.

Psychiatry team based at the Irwell unit, Fairfield Hospital, Bury.

This is a substantive appointment 10PA.

### **1. Title of Post: Old Age Consultant in Psychiatry 10 PA Mixed Inpatient and Outpatient**

### **2. Full Address of Base:**

The base is the Ribchester Centre 18 Parsons Lane, Bury BL9 0JT

### **3. Total Number of PAs:**

10

### **4. Professional Accountability:**

Medical Director, Dr Simon Sandhu; the Network Associate Medical Director, North Division Dr Sarmad Nadeem and the Lead Clinical Director for Bury, Dr Ankur Khanna.

### **5. Operational Accountability & Staff list:**

Dr Ankur Khanna Clinical Director & Inpatient consultant South Ward male working age.

Dr Adeola Akinola Deputy Director of medical Education, Inpatient consultant female working age North Ward.

Dr Sarmad Nadeem, Associate Medical Director, CMHT Consultant.

Dr Nicola Cowdery, Site tutor, CMHT consultant adults

Dr Neil Crossley HTT consultant

Dr Alistair Stewart EIT consultant

Dr Jennifer Watson Old Age consultant psychiatrist

Dr Kenneth Lee liaison Psychiatrist – Aug 2023

Dr Thomas Hopkin SAS

## **6. Trust Details: Pennine Care NHS Foundation Trust**

Trust HQ 225 Old Street, Ashton under – lyne

Lancs

OL6 7SR

### **Specialised Mental Health Trust**

There are few careers as rewarding as those in the NHS, or that give you the opportunity to work with such a variety of people.

At Pennine Care, we actively recruit people of all ages, backgrounds, and levels of experience as this helps us understand the different needs of our patients and provide the best possible service.

Whichever area of the Trust you join, you become part of a talented, passionate team of people, committed to providing the best care and treatment to patients. You will also enjoy one of the most competitive and flexible benefits packages offered by any employer in the UK.

As a Trust we are committed to being a great place to work which means we place a great deal of importance on the experience of our staff. We are committed to:

- Effective recruitment and retention of our staff
- Developing new roles and ways of working to ensure a flexible and innovative approach to staffing
- Equality of opportunity and having a workforce that represents the communities we serve
- Continual training, development and learning for all staff
- Achieving a work-life balance and creating positive staff experiences which

support wellbeing

- Offer a great working environment and an attractive range of benefits.

The Trust made the list of the top 120 best places to work in 2015, as compiled by HSJ and Nursing Times, in association with NHS Employers.

The list is a celebration of NHS organisations that have worked hard to promote great staff engagement and create an environment where people can enjoy their work.

The development of a Specialist Mental Health Trust was designed to enable the maximum benefits to be achieved for service users, their carers and families, and staff working in the Trust. It has also facilitated further integration of health and social care by bringing together a critical mass of mental health professionals.

### Areas Served



Pennine Care Trust aims to deliver mental health through services based in each Borough and in conjunction with local Commissioners and local Social Service departments.

The expectation is that the pooling of expertise, the diffusion of good practice and Trust-wide resourcing of specialised services will gradually benefit all the local services. Governance structures are well developed in each of the boroughs with good central co-ordination.

Pennine Care NHS Foundation Trust was established in April 2002 and provides mental health and learning disability services to a population of approximately 1.2 million people throughout the boroughs of Bury, Rochdale, Oldham, Tameside & Glossop and Stockport within Greater Manchester. Services are organized on a borough basis through close working relationships with the clinical commissioning groups (CCG's) and this continues with the transition to the Integrated Care Systems (ICS). Governance structures are well developed and emphasise local ownership with central coordination with the ethos of clinically lead and expertly managed. Our employees enjoy their work, have opportunities to learn and develop their skills and are encouraged to generate new ideas that improve care for our service users. Living and working in Greater Manchester Greater Manchester is one of the world's most innovative, original and exciting places to live and work. From the beauty of the surrounding countryside to the vibrant inner city with a great transport links within the UK and further afield.

2. Trust details Our services are provided by approximately 2600 staff across both clinical and non-clinical workforce. Services delivered across the trust are outlined below. The Trust provides a range of core services for people who have a mental illness requiring secondary care mental health specialists. In more recent years and with the on-going community transformation work the trust also provides services within primary care and local neighbourhood teams. The trust structure is split into the north division and south division. The south division of the trust is the boroughs of Stockport and Tameside & Glossop with the North Division comprising of Bury, Rochdale and Oldham. Each division has an Associate Medical Director, a Director of Quality Nursing and Allied Health Care Professionals and a Network Director of Operations.

This triumvirate structure is then replicated in each borough. The types of services provided are: • Adult inpatient and community services • Older people's inpatient and community services • Community based Child and Adolescent Mental Health Service • Tertiary Child and Adolescent In-patient services • Psychiatric Intensive Care • In-patient rehabilitation services • Primary care neighbourhood teams • Primary care psychological medicine services include long-covid service

Main Trust In-patient sites: Royal Oldham Hospital, Oldham; Tameside General Hospital, Ashton-under-Lyne Birch Hill Hospital; Rochdale Fairfield General Hospital, Bury; Stepping Hill Hospital, Stockport; Trust Headquarters: Ashton-under-Lyne.

## **7. Service Details:**

This is a replacement post; the previous Consultant left the Trust.

### **The Area**

Bury is a busy town north of Manchester with a total population of approximately 193,800. According to 2021 census, the older adult population is 35,400 which represents 18.3% of the entire population.

Bury is ranked 122nd most deprived of 326 Local Authority districts, and Bury CCG is ranked 100 of 209, meaning Bury is ranked around the middle for deprivation at LA and CCG level.

Bury was ranked 114 of the 326 Local Authority districts this means that the borough has become slightly less relatively deprived over the intervening five years. The health of people in Bury is varied compared with the England average. Life expectancy for both men and women is lower than the England average. Life expectancy is 9.6 years lower for men and 7.8 years lower for women in the most deprived areas of Bury than in the least deprived areas. The rate of alcohol-specific hospital stays among those under 18 is 34. This represents 15 stays per year.

The rate of alcohol-related harm hospital stays is 587\*, better than the

average for England. This represents 1,055 stays per year. The rate of self-harm hospital stays is 173, better than the average for England. This represents 325 stays per year. The rate of smoking related deaths is 337, worse than the average for England. This represents 332 deaths per year. For older people with dementia Bury does well in terms of recorded prevalence and had the fifth highest recorded rate in the country in 2020/21. 4.63% of all over 65s registered with a GP practice against an England average of 3.9%. Diagnosis rates for dementia in 2021 were good as was the quality rating for residential care and nursing home beds. However, annual reviews of people's dementia care plans is poor - only 26% of plans are annual reviewed (England average is 39.7%). Bury also had the 12th worst direct standardised mortality rate in England in 2020/21.

### **Community Mental Health Team**

There is one General Adult CMHT within Bury. The team bases at Humphrey House and have been running a generic service targeted to people with severe mental illnesses.

The Older Adult CMHT and Community Liaison Team (CLT) is based at the Ribchester Centre. The CMHT provides assessment and care for Older Adults with severe mental illnesses, including dementia. The CLT works closely with social services to support patients in the community with delirium. They also assess patients in care homes.

### **Early Intervention Team**

Based at Humphrey House, the EIT is entirely staffed by experienced community staff and works in tandem with the sector team. The team is covered by a 0.6 consultant cover dedicated to the EIT.

### **Access & Crisis Team / Home Treatment Team**

These are based in the same building as the inpatient unit. Currently, they consist of practitioners at all levels (qualified nursing staff, Social Workers,



and an Advanced Practitioner), and administrative staff.

They provide a local service from 8 AM to 9 PM.

### **The Liaison Team**

The Team is based in the Accident & Emergency Department at Fairfield General Hospital, Bury, and provides 24-hour emergency psychiatric cover.

From August 2023, a general adult consultant liaison Psychiatrist has been appointed to commence with a Staff grade psychiatrist as well as a complement of allied staff.

The Older Adult Inpatient Liaison Team assess patients admitted to the wards at Fairfield General Hospital. The consultant is supported by a core trainee and FY1.

### **Other Sections of Mental Health Directorate**

#### **Old Age Psychiatry**

Two full-time Consultants are in the post, and they are supported by two full-time trainees in this developing service. The service takes new patients aged 65 and over and is characterized by an outreach approach, with patients assessed and reviewed in their homes. There are 10 female organic beds for the treatment of acutely ill patients. Funding has recently been secured for 0.6 WTE HIT team provision to be set up in 2023/24

### **Team**

Dr Ankur Khanna Clinical Director & Inpatient consultant South Ward male working age.

Dr Adeola Akinola Deputy Director of medical Education, Inpatient consultant female working age North Ward.

Dr Sarmad Nadeem, Associate Medical Director, CMHT Consultant.

Dr Nicola Cowdery, Site tutor, CMHT consultant adults

Dr Neil Crossley HTT consultant

Dr Alistair Stewart EIT consultant

Dr Jennifer Watson Old Age consultant psychiatrist

Dr Thomas Hopkin Speciality Doctor

**Title: Consultant in Psychiatry**

**Relationships: Employing Authority: Pennine Care NHS Foundation Trust**

**Post : Old Age Consultant in Psychiatry s12 and AC approval is a prerequisite.**

**Sites** Ramsbottom Ward. Fairfield hospital 10 Bedded female Organic Ward

Ribchester Centre 18 Parsons Lane, Bury

### **Duties of the Post:**

#### **Clinical Duties:**

In conjunction with the other consultant, the appointee will provide Consultant psychiatric care in a comprehensive service for all community patients aged 65+ in the Sector. The postholder will share access to all facilities within the service and work closely with members of the multi-disciplinary team. The appointee will be RC/AC for inpatients, alongside the other consultant.

The postholder is expected to be the RC/AC for community patients. There will be some patients who are on a Community Treatment Order. There are currently no patients on CTO's in Older Adult Services. On occasion (on average 5-10 times a year) there may be a Mental Health Act assessment in the daytime.

Relationships with others. The post holder should continue to develop good reciprocal liaison relationships with clinicians in the Acute Trust, Pennine Care and primary care colleagues, to help promote good pathways of care and mutual learning.

Social Services and Voluntary Sector. Close communications with regular review meetings are necessary to co-ordinate efficient liaison and ensure that patients receive the most appropriate services without unnecessary duplication of effort. The post holder will communicate effectively with the local Social Services work to improve integration and foster good relationships between the Social Services and Hospital teams.

**Team      Dr Jennifer Watson, Consultant Psychiatrist**

**OPCMHT:**

**Band 7 Team manager 1x 1WTE**

**Band 8a Clinical psychologist 1x 1WTE**

**Band 6 CPNs - 6 x 1WTE**

**1x 0.4 WTE**

**1x 0.6 WTE**

**1x 0.8 WTE**

**Band 5 OT - 1x WTE (vacant)**

**Band 3 Memory service support worker- 1x 18hrs**

**1x 0.6 WTE (Vacant)**

**Band 3 Admin- 1x 1WTE**

**1x 0.6 WTE**

**OP Community Liaison:**

**Band 6 Community Liaison Practitioners- 3 x 1WTE**

**1x 0.4 WTE**

**1x 0.6 WTE**

## Band 3 Admin- 1x 1WTE

### JOB PLAN

Monday	Tuesday	Wednesday	Thursday	Friday
Ramsbottom Ward Round	Clinical Admin	Clinical Admin	Supervision of GP (+) OPC Clinic	Supervision of GP (+) OPC Clinic
		Supervision CT trainee		Ramsbottom Ward Handover
	CMHT MEETING		Allocation meeting	
Ribchester Centre Consultant OPC Clinic + Supervision of Junior Doctor Clinic	Ribchester Centre Consultant OPC Clinic + Supervision of Junior Doctor Clinic	Consultants Meeting	Ribchester Centre Consultant OPC Clinic	Supervision GP (+)
		SPA Teaching		SPA

The job plan will reflect the nature of the post. The details of the job plan will vary as the service develops and will include sessions for clinical care, supervision, skill sharing/ education, planning. Below is an example of a timetable, the exact timings, and venues to be decided once the post holder is in place.

There will be a timely job plan review 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)

This will be open to bilateral negotiation.

### Education & training

The post holder will be expected to participate in the supervision and teaching of junior psychiatric medical staff. The post holder will provide educational leadership to Fairfield Hospital to improve the understanding and management of mental disorders. They will work with the Education teams within the acute Trust to provide high quality training to various groups including medical teams, nursing staff and other professionals, as required.

### Management

The post holder will attend relevant project planning meetings as well as other Pennine Care, CCG and ICS events that support the delivery of the project.

### Service Development

The post holder will take an active role in developing the service area of work with the

support of the rest of the team, Pennine Care, the Northern Care Alliance, and local commissioners. Liaison Mental Health services are expanding across the Trust. There is a monthly Liaison Mental Health Steering group co-chaired by the Trust Clinical Lead for liaison (Dr Sarah Burlinson) and Associate Medical Director for the North Division (Karen Maneely) which the post holder will be invited to attend.

### **Evaluation**

Clinician and patient rated outcome measures, patient rated experience measures and health care utilization data will be collected to support accreditation by Psychiatric Liaison Accreditation Network (PLAN), which Pennine Care have recently joined.

### **SALARY RANGE**

Salary and terms and conditions of service are those of Hospital Medical and Dentist staff (England and Wales) and General Whitley Council Conditions of Service, as amended from time to time.

### **EMPLOYER**

The post holder will be employed by Pennine Care NHS Foundation Trust:

Pennine Care NHS Foundation Trust, 225 Old Street, Ashton-under-Lyne, Lancashire, OL6 7SR.

#### **8. Support to the Post:**

- Team Composition: Older Adult CMHT see above section
- One full time CT1-3 or GPST and one 0.4 WTE GPST
- Dedicated secretary/Admin Support:

A full time dedicated named Admin support is available. Justine Gobett. There will be full-time Medical Secretary to complete admin work and Clinical Medical Director Admin to support processing of Annual leave/Study leave. There will also be 22 hours a week Medical Admin to manage diaries and provide support for non-clinical activities. This support has been designed in accordance with RCpsych standard for office and admin support.

- Office Arrangements:

The Consultant will be provided with dedicated private office space within the Ribchester Clinic, which will be sufficiently private and resourced to carry out the full range of consultant functions and will include break-out areas.

- Access to PC/Laptop/Phone:

The Consultant will be provided with laptop, dictation software and a mobile phone.

- IT Support/Informatics:

The consultant will be provided with the appropriate IT support which can link to printers, the Trust network, the internal e-mail system digital dictation and the Internet.

## **9. CPD and Supervision:**

Continuing Professional Development (CPD) is actively encouraged and is seen as an integral component of the post. The Trust will support continuing professional development in terms of reasonable payment for courses and study leave. The post holder will be expected to be in good standing with the Royal College of Psychiatrists for CPD. They will be expected to join a peer review group and participate in annual personal development planning, as described by the College and in line with the process of revalidation as specified by the GMC. Dr Adeola Akinola is responsible for coordinating the continuing professional development (CPD) peer group for most general adult

psychiatry consultants within the Department of Psychiatry. All consultants in the Trust have access to the online CPD modules offered by the Royal College of Psychiatrists.

Director of Medical Education is Dr Adeola Akinola

Medical Director is Dr Simon Sandhu and is the Responsible officer.

### **Study Leave**

An allowance of 30 days with a budget of £1000 per annum is allocated. This is over a 3-year period.

### **Mentoring**

Consultants new to the Trust or those in their first post as a consultant, will be expected to identify a more experienced colleague as a mentor. This may be someone working in another department or Trust, providing it is realistic, to expect the mentoring role to develop. Several consultants in the Trust are willing and able to act as mentors if needed. In addition, the post holder's line manager will meet on a regular basis during their first year in post to offer guidance and support.

**10. Clinical Leadership:**  
See above

**11. Appraisal/Re-validation arrangements:**  
The Post holder shall engage with yearly appraisal via the online system SARD and have a choice of joining the local CPD group. The trust expects that the post holder will have a certificate of good standing with the RCPsych.

- 12. Job Planning Arrangements**
- Compliance with legal obligations covering clinical practice (e.g. Mental Health Act and Code of Practice, Mental Capacity Act and The Children Act etc.)
  - Compliance with proper and safe discharge procedures for inpatients (e.g. in line with the Department of Health Guidelines on Discharge and Caring for people: The Care Programme Approach)
  - A commitment to ensuring that people from all ethnic groups have equitable access to appropriate services.
  - Ensuring successful multidisciplinary working



- Maintaining good relationships with General Practitioners, the Clinical Commissioning Group (CCG), Social Services, and voluntary sector organizations
  - Compliance with procedures whereby doctors report concerns about the professional conduct or competence of medical colleagues
  - Compliance with Trust procedures that involve users in their care
  - Participating in medical and multidisciplinary audit and other procedures for Clinical Governance
  - Participating in the teaching of medical students attached to the service
  - Participating in the Academic Programme organized by the Local Tutor
  - Compliance with the regulations of the Royal College of Psychiatrists on continuing medical education
  - Compliance with confidentiality as advised by professional and Department of Health Guidelines
- Consultants have continuing responsibility for the care of patients in their charge and for the proper functioning of their departments. They are expected to undertake the administrative duties associated with the care of their patients and the running of their clinical departments. All consultants take responsibility, both singly and corporately, for the management of junior medical staff. In particular, they are responsible for approving and helping to monitor annual and study leave for their own junior staff, and for assisting the Lead Consultant in arranging locum staff when needed. Consultants are part of the management structure within the Unit. It is expected that the post holder will take an active part in the weekly meetings of the Bury consultant group and in particular will liaise closely with colleagues in general adult psychiatry.

### **13. Teaching and Training:**

The post holder will have the option to support CPD activities with a trust wide Wednesday afternoon 1pm -3pm teaching programme consisting of 1-hour CPD slot, Case Presentations, Journal club, Expert led one hour teaching and Teaching to supplement MRCPsych course for trainees.

Teaching commitments by the post holder will be as part of the departmental offer and wider MDT teaching and supervision to the staff they lead within the team.

The post holder will be expected to perform weekly supervision to the middle grade and any junior doctors within the team.

Trust DME is Dr Adeola Akinola and the local tutor is Dr Cowdery.

Bury has students performing shadowing, special study components.

#### **14. Research/Academic:**

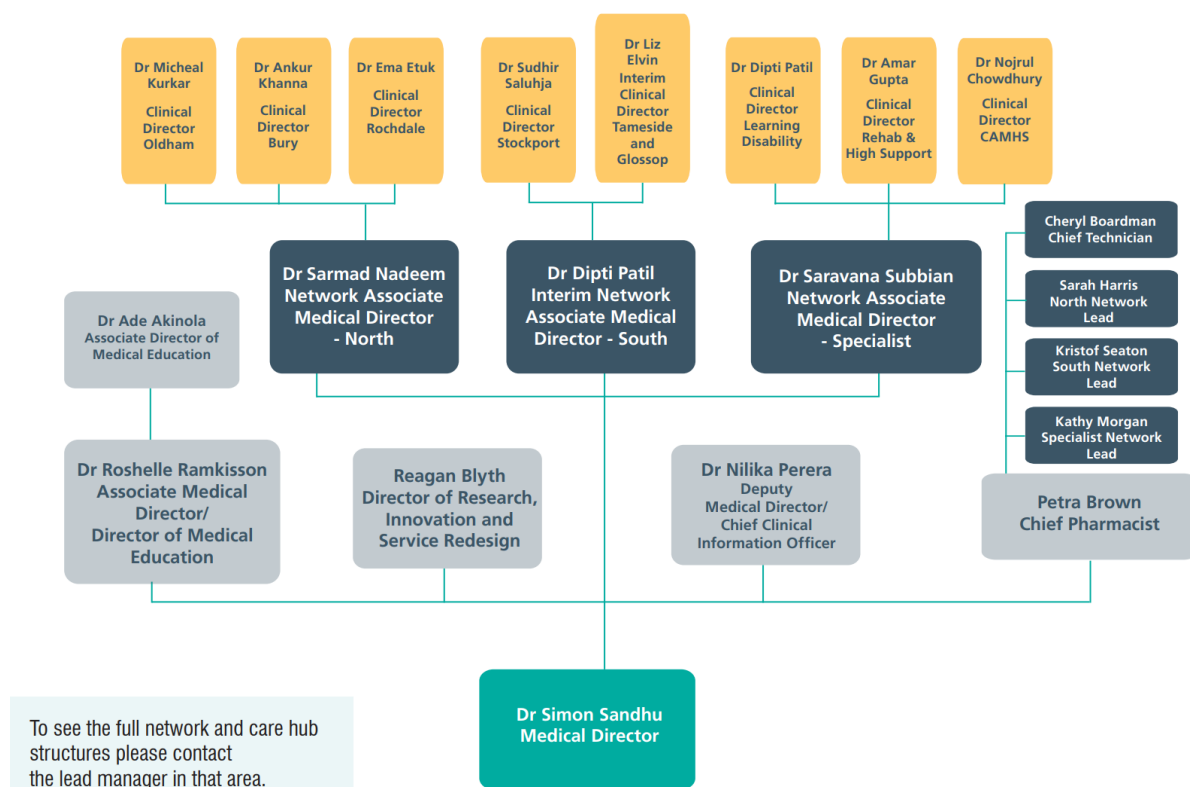
The Trust actively encourages the involvement of staff in research, and several projects are underway with the support of local clinicians.

The trust actively supports audit and clinical governance. There is a trust wide audit department to offer support.

Several consultants from the Trust carry out external duties, for example by taking part in Royal College committees, teaching on university courses, or examining for the College or for medical schools. These activities enrich the clinical and teaching environment of the Trust as a whole, and are strongly encouraged, providing they are compatible with the delivery of the clinical service.

#### **15. Clinical Governance:**

**Line Manager :** Dr Ankur Khanna, Clinical Director for Bury



## RESPONSIBILITY

The post holder will be responsible to the Medical Director, Dr Simon Sanhu and will be directly managed by and operationally accountable to the Clinical Director in Bury Dr Ankur Khanna. Their responsibilities as educational or clinical supervisor are primarily the concern of the Site Tutor. Yearly appraisal and job planning will be provided, and discussion regarding the best process for this will be agreed with the post holder.

### 17. On-Call Arrangements:

There are 2 On call systems-day and night. Day on call has a minimum workload consisting of one day 9-5pm once every two weeks mainly for queries and section 136 assessment for out of area patients which is very rare. Vast majority of patients are seen by individual teams.

There is a 1 in 31 North division on call which is non-resident and supported by a full tier middle grade and junior doctor cover. The North Division rota covers on call work Monday to Friday 5pm to 9 am the following day as well as on call work at weekends from 9am Saturday to 9 am Monday. This rota covers patients who are normally seen within the working age and older age groups only. The area covered includes Bury, Rochdale (incl. Heywood and Middleton) and Oldham.

Time spent working whilst on-call is offset by a day of leave after an on call day. This time in lieu is to compensate for work done whilst on call. The on-call supplement is category A 3%. The post holder would be expected to have received Approved Clinician training and to maintain Approved Clinician status. He/she would be expected to have working clinical knowledge and experience in relation to The Mental Health Act and Capacity Act.

**18. Leave and Cover Arrangements:**

Consultant colleagues are expected to provide each other with cross cover for annual leave, study leave, professional leave, and compassionate leave. The post holder is entitled to annual leave (30 days a year and an additional 2 days after 7 years in the grade) and study leave (30 days over 3 years) will be in line with the terms and conditions of service for hospital medical staff. As far as possible, cross cover will be provided between the 2 consultants based with the team in first instance but on the rare occasion where this is not practical it will be provided by sector consultants.

**19. Statement on Equality and Diversity:**

Pennine Care is committed to adherence to all government guidelines around equality and diversity

The post holder will be expected to work with professional colleagues and local managers in the efficient running of services and will share with consultant colleagues in the medical contribution to the management of the service, in line with the Terms and Conditions of Service. The appointee is expected to observe the Trust's agreed policies and procedures, drawn up in consultation with the profession on clinical matters, and to follow the standing orders and financial instructions of the Trust. Where, the management of the staff of the Trust is concerned, the post holder will be expected to follow the local and national employment and personnel policies and procedures. He/she will be expected to make sure that there are adequate arrangements for hospital staff involved in the care of the patients to be able to contact him/her when necessary. The post holder is expected to comply with Trust policy and management instructions regarding Health and Safety and to bring to the attention of the Trust anything that endangers themselves or others. The post owner would be expected to travel to a variety of sites

within the Trust footprint so should ideally have access to a car with a valid current driving license. The Trust will provide support available for non-drivers due to disability in line with the equality act A draft job plan for the posts (above) has been prepared in accordance with paragraphs 30A, 30 and 61 of the Terms and Conditions of Service for hospital medical staff and will be agreed with the Consultant after appointment. This job description and work programme is subject to regular review with the Chief Executive of Pennine Care NHS Foundation Trust.

## **20. Wellbeing:**

### **Local Occupational Health Support**

Occupational health support is available through the Staff Wellbeing Service [www.penninecare.nhs.uk/nhs-staff-wellbeing](http://www.penninecare.nhs.uk/nhs-staff-wellbeing).

This confidential service provides virtual, face to face, individual and group support and can be accessed through self-referral.

Activities such as mindfulness, yoga and seminars on dealing with stress, work life balance are also available.

In addition, the Greater Manchester Resilience hub [www.penninecare.nhs.uk/mcrhub-covid19](http://www.penninecare.nhs.uk/mcrhub-covid19) offers similar for those adversely effected by the pandemic

Details regarding this support are shared at induction and on a regular basis.

Pennine Care has its own in-house staff wellbeing service that can provide brief intervention work and access to an occupational health service. These services can be accessed by referral by manager or self-referral on the trust intranet. They can provide support regarding the promotion of wellbeing such as stress management, mindfulness courses, resilience intervention and wider courses.

All referrals are clinically triaged by email within 72 hours and currently an assessment is usually arranged within approximately 3 weeks. We then have variable waiting times for allocation to a clinician, these are currently between 2 and 12 weeks depending on which therapy you will receive.

### **Local Support**

The consultant body meets every week on a Wednesday afternoon where cases and issues can be discussed. The clinical Director and wider medical management team can support individuals' wellbeing around incidents, pastoral care, clinical dilemmas, and wider support of any nature

## 21. Timetable/Job Plan:

Total = 7.5 Programmed Activities D.C.C.  
2.5 Programmed Activities S.P.A.

## JOB PLAN

Monday	Tuesday	Wednesday	Thursday	Friday
Ramsbottom Ward Round	Clinical Admin	Clinical Admin	Supervision of GP (+) OPC Clinic	Supervision of GP (+) OPC Clinic
		Supervision CT trainee		Ramsbottom Ward Handover
	CMHT MEETING		Allocation meeting	
Ribchester Centre Consultant OPC Clinic + Supervision of Junior Doctor Clinic	Ribchester Centre Consultant OPC Clinic + Supervision of Junior Doctor Clinic	Consultants Meeting	Ribchester Centre  Consultant OPC Clinic	Supervision GP (+)
		SPA Teaching		SPA

## 22. PERSON SPECIFICATION

Essential	Desirable
Satisfactory medical screening prior to taking up appointment	
MBChB or equivalent	Possession of MRCPsych or equivalent qualification. Other postgraduate degrees e.g. MSc, MD, MRCP etc.
Must be on the GMC Specialist Register or be eligible to be on the GMC Specialist Register  Higher psychiatric training or its equivalent.	Possession of CCT <i>or</i> be within 6 months of achieving this  CCT in Older Adult Psychiatry
Section 12 (2) Approval under Mental Health Act 1983 or be eligible for approval. Approved Clinician status (or eligible for same)	Experience in detention of patients under The MHA (1983) Experience of writing reports for the Mental Health Review Tribunals.
Evidence of teaching and training abilities.	Current or past educational supervisor of a basic trainee and a specialist registrar.
	Use of a car or access to a means of mobility to travel across the Trust footprint in line with service needs
Commitment to share the work of the department with colleagues, to	Evidence of leading the development of services elsewhere.

develop and improve the service as a whole, and to the organisational philosophy.	An interest in management and service development.
Registered for CPD with the Royal College of Psychiatrists.	In 'Good professional standing for CPD'.
Good communication skills.	Enthusiasm, demonstration of initiative and innovation.
Evidence of audit activity.	Published audit and published research.
Available to participate in on-call rota	