

Child & Adolescent Consultant Psychiatrist

Job description and person specification

Post and specialty:	<p>Consultant in Child & Adolescent Psychiatry</p> <p>The post holder will provide Consultant Psychiatrist input to Children & Young People's Services in Sussex, in an inpatient setting, at Chalkhill working as part of the acute psychiatric (Tier 4) consultant team.</p>
Base:	<p>Chalkhill c/o Princess Royal Hospital Lewes Road Haywards Heath West Sussex RH16 4NQ</p>
Contract:	Number of programmed activities: 10
Accountable professionally to:	Interim Chief Medical Officer, Dr Claire Woolcock
Accountable operationally to:	Head of service: Nicola Chailey
Key working relationships and lines of responsibility:	<p>Line Manager: Nicola Chailey</p> <p>General Manager: Peter Joyce</p> <p>Head of Service: Nicola Chailey</p> <p>Associate Medical Director and Lead Psychiatrist (one role) - CHYPS Sussex: Dr Sarah Jonas</p> <p>Clinical Lead: Kate Stammers</p> <p>Clinical Director: Alison Wallis</p> <p>Service Director: Rachel Walker</p> <p>Chief Delivery Officer: John Child</p> <p>Chief Medical Officer: Dr Claire Woolcock</p> <p>Responsible Officer: Dr Aruna Wijetunge</p> <p>Chief Executive: Jane Padmore</p>

1.0 Introduction

Sussex Partnership NHS Foundation Trust is a large NHS organisation that offers clinical and social care services to children, young people, adults and older adults, with emotional and mental health problems or learning disabilities. Services are provided to the people of Brighton and Hove, East Sussex and West Sussex with Children & Young People's Services provided across Sussex and Hampshire. The Trust operates as part of a wider network of health and social care and works in partnership with both statutory and non-statutory agencies. The Trust benefits from a thriving Sussex-wide psychiatry training scheme where Health Education Kent, Surrey and Sussex provide foundation, GP, core and higher trainees. We work closely with Brighton and Sussex Medical School; a partnership between the Universities of Brighton and Sussex. In 2015 we became a member of the Association of UK University Hospitals, the representative body for university hospitals with major teaching and research interests across the UK and internationally. Our vision is *to improve the quality of life for the communities we serve*. The clinical strategy and organisational strategy we have developed underpin this by providing frameworks to enable sustained improvements in the quality of care we provide. With our Integrated Care System partners, we have developed a compelling case for change in mental health services which strives to improve the links between health and social care to better serve our communities. The Trust is rated by the Care Quality Commission as *Good* for being safe, effective, responsive and well-led and as *Outstanding* for caring.



2.0 Trust details

Sussex Partnership was formed in April 2006 as an NHS Trust and established as an NHS Foundation Trust with Teaching Trust status in August 2008. We employ approximately 5000 staff, serve a total catchment population of more than 2 million and generate an income of £250 million.

The Trust delivers services via 5 Care Delivery Services (CDS), tasked with providing overarching leadership for care groups and / or geographical areas. Each CDS is led by an operational director and a clinical director, with a multi-disciplinary leadership team (including a range of clinical professions as well as business, finance, HR, IT and estates and facilities support staff) providing additional leadership and governance oversight. The CDS model supports continuous service improvement for patients and carers, is supported by Clinical Academic Groups and aligns with our Trust Values, Organisational Strategy and Clinical Strategy. The Trust strives to provide consistently high-quality services, working in partnership with each other, the people who use our services and other organisations.

3.0	Service details
3.1	<p>West Sussex is situated in the south east England between the sea and the South Downs with a population of around 848,000. The county offers good access to London and is in close proximity to Gatwick Airport. West Sussex is one of the 20% least deprived counties/unitary authorities in England, however about 11% (15,500) of children live in low income families. Life expectancy for both men and women is higher than the England average. The health of people in West Sussex is generally better than the England average.</p> <p>Brighton and Hove is a vibrant city situated between the sea and the South Downs with a population of around 289,000. The city offers excellent access to London and is in close proximity to Gatwick Airport. Brighton & Hove is the 102nd most deprived local authority of the 326 in England according to the 2015 Index of Multiple Deprivation. In 2015, 45% of the population of the city lived in the 40% most deprived areas in England and only 7% in the 20% least deprived areas. The health of people in Brighton and Hove is varied compared with the England average. About 15% (6,600) of children live in low income families. Life expectancy for both men and women is similar to the England average.</p> <p>East Sussex is situated in the south east of England between the sea and the South Downs with a population of around 549,000. The county offers good access to London and is in close proximity to Gatwick Airport. In East Sussex, 19 out of 329 neighbourhoods are among the 10% most deprived areas in England. Income deprivation affects 12% (64,600) of people in the county compared to 10% regionally & 15% nationally. Nearly 32,000 people (6%) live in the most deprived 10% of areas in England. The health of people in East Sussex is varied compared with the England average. About 16% (14,993) of children live in low income families. Life expectancy for both men and women is higher than the England average.</p>
3.2	<p>The Trust is seeking a Consultant Psychiatrist to work with the multidisciplinary team at Chalkhill general adolescent in-patient unit and provide clinical leadership alongside senior MDT colleagues. This vacancy has arisen due to the post-holder retiring.</p>
3.3	<p>Our current Tier 4 CAMHS provision consists of:</p> <p>Chalkhill General Adolescent Unit – a 16 bedded unit based in the grounds of the Princess Royal Hospital in Haywards Heath which works alongside a 4-5 patient day service. The in-patient unit currently caters for 13-18 yr olds in accordance with the NHSE Tier 4 GAU specification. Options appraisal for the building of a psychiatric intensive care unit (PICU) are also underway). Additionally there are plans for a day service for those with eating disorders based in Brighton which will be operational in the next few months.</p> <p>Urgent Help Service (UHS) - UHS provide mental health crisis care for under 18s presenting across Sussex. Their clinical model is of home/community visits, including in-reach into paediatric/acute hospital settings to which young people in crisis have been admitted (alongside A&E Liaison teams). Some of their crisis resolution work involves intervening when young people are being detained in Places of Safety across Sussex, with a view to avoiding admission to a T4 CAMHS setting where possible/appropriate. UHS sits at the acute end of</p>

	<p>the community pathway, interfacing with T4 CAMHS. At present UHS provides crisis resolution. The UHS provides crisis intervention through a multidisciplinary mental health approach, working across extended hours, and over 7 days. The UHS are the access assessors for referrals to Tier 4 CAMHS beds of young people from Sussex. They also provide support for discharge from such.</p> <p>The post-holder will have pro-rata responsibilities for the in-patient cohort of young people with a part time (5 sessions) consultant colleague. It is expected that they will offer consultation, support to the multi-disciplinary team and direct clinical contact with the young people and their parent/ carers accessing this service.</p> <p>The post-holder will supervise the psychiatric team shared pro-rata with the part-time in-patient consultant colleague. This requires one hour per week for FY2, CT and ST and 0.75 hours per week for SAS doctors. The post-holder and in-patient consultant colleague will work in close liaison with the newly appointed Urgent and Emergency Care consultant psychiatrist (1 WTE; 50% development role) and will join them to provide cross cover for CAMHS Acute Services (Tier 4, and urgent and emergency pathway) with the other consultants working in these teams.</p>
<p>3.4</p>	<p>The multidisciplinary team establishment for the ward includes nursing and support staff, a ward manager and matron, administration staff, a principal clinical psychologist (and recruitment underway for an additional band 7), two FTE OT (band 5 and band 6), a 0.5 FTE dietician (shared with SFEDS) and a social worker (1 WTE; appointment in process) and a FTE systemic therapist (8a; 1WTE; recruitment ongoing).</p> <p>The post-holder will be expected to work together in close collaboration to ensure a cohesive and high quality service provision for young people and their families.</p>
<p>3.5</p>	<p>In-patient Psychiatric team:</p> <ul style="list-style-type: none"> • Lucy Allsopp - currently 1.0 WTE as in-patient Consultant psychiatrist at Chalkhill (retiring at end of February 2022). • Kris Lancefield - Consultant - Inpatient West Sussex; 0.6 WTE • Liam Young - Urgent and Emergency Care (started September 2021) 1.0 WTE • Current vacancy - Consultant Psychiatrist – Sussex Family Eating Disorder Service (SFEDS) • Paola Tosetto - SAS Doctor - (in-patient) 0.75 WTE • Isabel Terrell - LAS Ward Doctor (in-patient) 0.6WTE <p>Additionally there are FY2 and CT training places which are usually filled by trainees (with the FY2 present throughout the week apart from the academic afternoon and the CT taking part in an on call shift rota covering West Sussex in-patient units/ Princess Royal A and E department). There is an ST post on the newly convened KSS ST CAP rotation and this post will be filled again in February 2022.</p>

<p>3.6</p>	<p>Details of Trust-wide consultant network.</p> <p>Sussex Partnership is a large Trust covering West Sussex, East Sussex, Brighton and Hove and Hampshire. There is a wide Consultant network within the Trust. Consultants meet regularly both locally and in wider network meetings.</p> <p>Consultants and Speciality Doctors in the Children and Young People Service meet regularly (once a month) to discuss:</p> <ul style="list-style-type: none"> • Providing and developing excellent evidence-based services • Providing clinical leadership to MDT • Service transformation • A possibility for supervision of difficult clinical cases, • Development and training for consultant and SAS doctors in Children and Young People Service (ChYPS) Care Delivery Service (CDS). • Professional support <p>This meeting is for all Doctors to attend, details of this meeting will be emailed to you upon starting.</p>
<p>3.7</p>	<p>The operations of the local services to which this consultant post relates:</p> <p>The Child and Young People Service (ChYPS) Care Delivery Service (CDS) provides a full range of outpatient and inpatient services for children and adolescents.</p> <p>Alongside the in-patient, and urgent and emergency components of CAMHS Acute services, specialist CAMHS provides a range of community services. These include generic community CAMHS MDTs in a range of clinic settings across East and West Sussex and Brighton and Hove, a pan-Sussex community eating disorder team for under 18s, plus a range of smaller teams with highly specialised functions (including LD CAMHS, LAC services, B&H CAOT Assertive outreach Team).</p> <p>Each community team also has a small Home Treatment team/resource (HTT) - This is an extended service element of all community CAMHS teams. The aim is to provide home based interventions (rather than treatment) for Children and Young People (CYP) and their families across Sussex for up to twelve weeks, providing intensive home treatment interventions where the mental health needs of the young person cannot be met solely in local community CAMHS and where the CYP is at risk of A&E attendance. The aim is to prevent need for urgent and emergency care.</p> <p>Young people between the ages of 14 and 18 are seen by EIP teams if presenting with psychosis. There is a mental health in-reach team to Lansdowne Secure Children’s Home provided by East Sussex CC, and a FCAMHS community team.</p> <p>Additionally, there are integrated jointly commissioned teams involving SPFT and other agencies. working with young people who are on the edge of care, looked after / adopted , and those with needs covered by transforming care.</p> <p>The post holder will be expected to work in partnership with children, young people and their carers so that they are fully involved in and empowered to make decisions about their treatment and care. It remains a priority to establish and maintain good communication and</p>

	<p>effective working relationships with referrers and to work closely with other agencies e.g. Health, Children’s Services, Police and YOS in relation to individual patients and service development. It will be important for the post holder to build a knowledge of and links with voluntary and independent service providers locally.</p> <p>All Consultant Psychiatrists, senior clinicians of other professions, and clinical managers will be expected to embrace the multi-disciplinary working culture of the Service. In addition, the post holder will be expected to participate in integrated multi-disciplinary leadership development programmes which support multi-disciplinary team and inter-agency partnership working.</p>
3.8	<p>Care Delivery Service management and governance arrangements:</p> <p>The Consultant will be a member of the Sussex CAMHS Consultant group and will be expected to engage in specific locality meetings between managers and Consultants as agreed with the Lead Consultant.</p> <p>The Trust is committed to a strong management and professional partnership to manage and govern all services and this is reflected in the management structure at all levels within the organisation.</p>
3.9	<p>Clinical input:</p> <p>The consultant post provides psychiatric input, consultation and leadership to the multidisciplinary team in the form of direct clinical assessment and treatment, contribution to MDT ward rounds, daily acute care meetings, care programme approach meetings and senior leadership at Local leadership and Provider collaborative quarterly contract meetings. There will be strong links with UHS which will require close liaison and discussion of referrals. The post holder will be expected to provide expert advice to other agencies, training for varied professional groups and contribute to local service development.</p>
3.1 1	<p>Acceptance Criteria</p> <p>These are as detailed in the Tier 4 NHSE specification.</p> <p>We are commissioned by the Kent and Sussex Provider Collaborative which went live in October 2021 and have good and supportive relationships with their team and the case managers who have close links with the unit. The staffing shortages additionally impacted by the pandemic have meant that there have been varied contractual considerations so that the number of beds matches, wherever possible, the staffing constraints. There is a highly developed and managerially supported recruitment plan.</p>
3.1 2	<p>Examples of good clinical Trust practice or local services that provide extra resource:</p> <p>In January 2018 we were awarded an overall rating of ‘good’ by the Care Quality Commission (CQC) and assessed ‘outstanding’ for being caring. This new rating follows an inspection of the Trust’s services in Autumn 2017.</p>

	<p>The organisation had previously been assessed as ‘requires improvement’ in September 2016.</p> <p>The CQC said that patients and carers all gave positive feedback about the care they received, that they felt involved in decisions about their care and that staff considered their wellbeing and experience as a patient.</p> <p>They note that there were outstanding examples of practice such as clinical leadership and service user involvement. They also commented that our new leadership team brought an invigorated and open approach to the direction.</p>
<p>3.1 4</p>	<p>References to Trust, NHS England/CCG websites; for example, local specialist services and beacon sites:</p> <p>For further information on Sussex ChYPS please visit our website which can be accessed here: https://sussexcamhs.nhs.uk</p> <p>For further information on Chalkhill and the current day service provision: https://www.sussexpartnership.nhs.uk/service-chalkhill</p>
<p>3.1 5</p>	<p>Other teams and resources that relate to this service:</p> <p>Sussex Partnership NHS Foundation Trust provides specialist CAMHS teams and for Looked After Children, Adopted Children, Children with a Learning Disability and young people in the Youth Justice System. There are also integrated Mental Health School Support Teams.</p> <p>The trust also provides a forensic CAMHS service, forensic services for adults, early intervention in psychosis (EIP) teams and Adult Mental Health Services.</p> <p>There are clear transition protocols for individuals moving between these services and teams collaborate to develop specific pathways or projects.</p>
<p>3.1 6</p>	<p>SPFT is the lead provider for the Kent and Sussex Provider Collaborative who took over the commissioning and governance roles of NHSE/I with regard to Tier 4 CAMHS from October 2021.</p> <p>Nationally, it is anticipated that greater collaboration between regional Tier 4 providers, developed and defined clinical treatment models within such units, and improved interfaces with community CAMHS will allow for reduced bed usage. The savings made can be kept by the PC and invested in admission alternatives.</p> <p>There is an active collaboration between the Sussex ICS and the ChYPS CDS and the Provider Collaborative.</p>
<p>3.1 7</p>	<p>Sussex Partnership is committed to participation, meaning that we involve service users, and their carers, and supporters, in service decision-making and planning. All employees are expected to contribute to this shared value and to support services in the delivery of its participation strategy.</p>

	<p>Clinicians are encouraged to work in a participatory way so that shared decision making and conversations around formulation/diagnosis and ongoing care are a collaborative endeavour with the people who access our service.</p> <p>The Provider Collaborative has recently appointed a Participation worker and will be promoting training and resource for a growing group of Experts by Experience who will be involved with their process including participation in Board meetings.</p> <p>It is highly likely that at least one service user or carer will be on the interview panel for this role.</p>
<p>4.0</p>	<p>Continuing professional development (CPD)</p> <p>The post holder is expected to remain in good standing for CPD with the Royal College of Psychiatrists.</p> <p>The post holder will be expected to have a plan for such education as is deemed appropriate, considering his or her own needs and those of the service. Consultants are actively encouraged to take their study leave entitlement in line with Royal College Guidelines and to support the development needs identified in their PDP, Peer Group reviews and appraisal. The annual study leave entitlement is £650 per year and up to 10 days per year (30 days every 3 years) subject to approval by the ChYPS Clinical Lead, Head of Service and the Director of Medical Education, Dr Michael Hobkirk.</p> <p>Peer supervision is arranged between the consultants working in Sussex CAMHS, and with colleagues working in similar services across Sussex and Hampshire. There are established PDP groups within Sussex and an acute psychiatry / Tier 4 PDP group (NHS and Independent sector units) running across Sussex and Kent and this includes all Tier 4 colleagues appointed. It is anticipated that the post holder will join this peer network. Multidisciplinary supervision is arranged in the team, and the ability to discuss cases and service problems occurs on a monthly basis in the monthly Pan-Sussex meeting for consultants, Associate Specialists, SAS grade doctors and higher trainees.</p> <p>All Consultants have a responsibility for ensuring their own continuing professional development and are expected to register for CPD with the Royal College of Psychiatrists. Consultant peer groups are established which the post holder will be expected to join. The Trust is committed to supporting CPD activities both internally and externally.</p>
<p>5.0</p>	<p>Clinical Leadership and medical management</p> <p>Medical management across the Trust is led by our Chief Medical Officer who is supported by a Deputy Chief Medical Officer, Associate Medical Directors, Clinical Directors, Clinical Leads and a Chief Pharmacist.</p> <p>Local medical management is undertaken by the Lead Psychiatrist and AMD for Sussex CAMHS.</p> <p>The post holder will become a member of Acute Services within CAMHS, and attend a monthly Local Leadership Team (LLT) in proportion with hours worked. The post holder will be expected to work collaboratively with managers to achieve the most efficient and effective use of resources. One Consultant represents Acute Services at the CAMHS Senior</p>

	<p>Leadership team (SLT) and the Trust wide Lead psychiatrist also attends the Senior Leadership Team chaired by the Heads of Service/Clinical Lead.</p> <p>Quality Improvement is the chosen improvement methodology for this organisation and the post holder will be expected to:</p> <ul style="list-style-type: none"> • Develop a clinical leadership role within the multidisciplinary team and across the service as a whole and work with colleagues and management to ensure optimal service delivery. • Lead on business planning for the enhanced day service and intensive home treatment team and offer a significant contribution to the broader strategic and planning work of the Trust. • Lead the improvement of the quality of care within the team and contribute to improving quality across the system. <p>The post holder will be encouraged to contribute to other relevant management activities within the Directorate and the Trust. This might include participation in clinical governance activities, relevant working groups, or a future medical management post.</p>
<p>6.0</p>	<p>Appraisal & Job Planning</p> <p>The Trust is committed to ensuring all Trust medical staff is licensed, up to date clinically and fit to practice, in line with national medical revalidation guidance.</p> <p>The revalidation process includes an annual appraisal and the Trust’s Revalidation Policy clearly sets out roles and responsibilities to support this.</p> <p>The Trust’s Revalidation Support office is well established and provides an excellent service in supporting doctors in all aspects of revalidation.</p> <p>Dr Aruna Wijetunge, Deputy Chief Medical Officer is the Responsible Officer.</p> <p>Trust doctors are encouraged, if interested, to become appraisers themselves and training for this role is offered.</p> <p>Group and individual job planning is supported by a clearly defined Trust policy and in place not only to meet the contractual requirements of the role but also to provide opportunities for personal and professional development and to help drive quality improvement.</p> <p>The Trust offers a structured mandatory corporate induction programme to ensure staff feel supported and welcomed into their new role. Local induction will assist to further orientate the post holder to the workplace environment and to their team/service. Mandatory and statutory training is also undertaken as part of the induction process where the post holder will have access to e-learning modules.</p> <p>The Trust operates an active mentorship programme and learning set for new Consultants.</p>
<p>7.0</p>	<p>Teaching and training</p> <p>The post holder will be supported via group and individual job planning processes to provide dedicated time in their job plan to:</p>

	<ul style="list-style-type: none">• Provide training to junior medical staff (including medical students), and to other professionals on a multidisciplinary basis, and with other mental health organisations where appropriate. There are currently FY2, CT and ST placements available at Chalkhill in addition to the SAS doctor roles previously detailed.• Contribute to the region's Higher Training Scheme in Child and Adolescent Psychiatry, through the academic programme for this scheme, and by becoming a clinical, and if appropriate, educational supervisor for higher trainees.• Participate in local Foundation and Speciality doctor training schemes as required.• Remain in good standing in relation to CPD & revalidation.• Provide supervision to junior medical staff in line with the Trust's supervision strategy.• At times be responsible for individual supervision of a GP vocational Trainee.• Ensure that the post holder and supervised junior staff are regularly updated on professional developments as required by their professional body.• Contribute to corporate training initiatives within the Trust.
8.0	Research <p>Sussex Partnership is committed to the design, delivery and translation of high quality research in order to improve our services and the experience of our patients. We are consistently one of the most active mental health research organisations in England and were ranked second out of 57 specialist mental health trusts for the number of people involved in research by the National Institute for Health Research (NIHR) in 2018-19. The Trust achieved a 62% increase in the number of people involved in research studies within the last year, having recruited 3,932 research participants in 2018/19 compared to 2,427 in 2017/18. We have strong academic partnerships with Brighton and Sussex Medical School, University of Sussex and University of Brighton particularly, and our reputation for clinical excellence is attracting leading clinical practitioners and researchers to Sussex. We attribute this success to our patients who take part and to staff and clinicians in the Trust, by paying attention to all aspects of the research process, from design of new studies, to delivery of existing research and to the translation of findings into practice.</p> <p>The Trust academic centre offers first class facilities and is based at the Sussex Education Centre in Hove. The universities provide access to statistical support and advice. At any given time, there are several major studies being undertaken within the Trust. Smaller individual projects are subject to standard screening as well as local ethics committee approval before sign off. The Trust's Chief Medical Officer is the Deputy Chair for the regional Clinical Research Partnership Board.</p> <p>The post has no specific teaching or research responsibilities other than those which are inherent in clinical duties. However, there are opportunities to use SPA time for teaching or clinical and other basic research through Sussex University and Brighton and Sussex Medical School, where Professor Hugo Critchley is Chair of Psychiatry.</p>

9.0	<p>Mental Health Act and Responsible Clinician Approval</p> <p>The post holder will 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.</p>
10.0	<p>Secretarial Support and office facilities</p> <p>The Trust strives to maximise clinical time for doctors by reducing as much administrative time as possible and a clear structure for admin support has been developed.</p> <p>The service benefits from an established administrative support team and the post holder shares a 1.6 WTE band 4 medical PA with the other in-patient consultant. CPA meetings have separate provision (1 WTE; recruitment in progress).</p> <p>The consultant will have access to their own laptop, mobile phone and functioning of both devices are supported by a centralised IT service.</p> <p>The consultant will have an office base at Chalkhill.</p> <p>Private bookable rooms are available for supervision.</p> <p>The post holder has access to the use of clinical rooms and separate administrative office space as well as a locker.</p>
11.0	<p>Clinical duties of post holder</p> <p>The post holder is required to:</p> <ul style="list-style-type: none"> • contribute to the management of complex cases, including medication management • provide clinical leadership of the team • support the assessment of referrals by advising team members and seeing certain young people as required • support care and safety planning and treatment formulation, providing guidance on evidence-based treatment and effectiveness • offer liaison and collaborative working with other services/agencies • contribute to effective Mental Health Act implementation • support multi-disciplinary, multi-agency and partnership working • provide clinical supervision for non-consultant medical staff working with the team
12.0	<p>Clinical governance and quality improvement</p> <p>The post holder will contribute to the Trust's delivery of its integrated clinical governance and quality improvement agenda along with the National Service Framework modernisation agendas. Specific responsibilities will be agreed in collaboration with colleagues of the multi-disciplinary community and inpatient teams, the general manager, lead consultant and clinical director.</p> <p>The post holder will be expected to select relevant subjects for audit and achieve data collection targets in line with Care Group objectives and record timely clinical activity data</p>

	<p>whilst supporting junior medical staff and members of the multi-disciplinary team in undertaking and presenting relevant audit projects.</p> <p>Participation in service/team evaluation and the planning of future service developments is a key responsibility. The Trust has a Quality Improvement strategy, A Quality Improvement Support Team, an active QI training programme and partnerships with other organisations including QI Life. The post holder will be expected to be involved in using QI locally and organisationally to improve quality and safety.</p> <p>The post holder will be expected to maintain responsibility for the setting and monitoring of quality standards including but not limited to; overseeing patient pathways including case allocation and day to day standard of care; monitoring clinical risk and supporting staff to detect and manage risk.</p>
<p>13. 0</p>	<p>General Duties</p> <ul style="list-style-type: none"> • 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.
<p>14. 0</p>	<p>External duties, roles and responsibilities</p>

	The Trust actively supports the involvement of the consultant body in regional and national groups subject to discussion and approval with the Chief Medical Officer and, as necessary, the Chief Executive Officer.			
15.0	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.			
16.0	Work Programme			
	It is envisaged that the post holder will work 10 programmed activities over 5 days. Following appointment a meeting will take place no later than three months from appointment 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 PA for direct clinical care and 2.5PA for supporting professional activities which would include revalidation activities, development and clinical leadership, audit, teaching, educational supervision, research, management and service development which will be identified through job planning. Specific programmed activity may be agreed in line with both individual and service need. (as per Royal College of Psychiatrists recommendation)			
	A provisional timetable is set out below:			
	AM/PM	LOCATION	TYPE OF WORK	DCC/SPA
Mon	AM	Chalkhill	Acute care meeting; CPA meetings; consultation; team meetings; supervision of trainees	DCC
	PM	Chalkhill		DCC
Tues	AM	Off site and contactable by phone or on site depending on activity	Research, QI, teaching, revalidation	SPA
	PM			SPA
Wed	AM	Chalkhill	Acute care meeting; Ward round	DCC
	PM	Chalkhill	CPA meetings; consultation; assessment and admin.	DCC
Thurs	AM	Chalkhill	Acute care meeting; Ward round; formulation meeting	DCC

		PM	Chalkhill	Monthly Local leadership team meeting; CPA; supervision of trainees	DCC
	Fri	AM	Chalkhill	Acute care meeting; PC clinical activity panel; CPA;	DCC
		PM	Chalkhill	CPA; consultation; liaison with MDT.	DCC
<p>Note: It must be accepted that the resources available to the Trust are finite and that changes on workload and developments requiring additional resources must have prior agreement through Trust management arrangements.</p>					
17.0	<p>On call and leave cover arrangements</p> <p>The post holder will contribute to the team’s daily clinical care including consultation or direct contact if required.</p> <p>The post holder will be expected to take part in the out of office hours on call rota, which covers Sussex CAMHS and is supported by the Urgent Help Service, who work 9am-8pm Monday to Friday and 10am-6pm on weekends and bank holidays. This is a 1 in 9 pro rata commitment which has recently been modified to ensure that a maximum of one weekday or week end is worked at a time pro rata. There is flexibility for swapping duties within the consultant group. These duties include allowance for compensatory rest agreed during contracted hours following each on-call.</p> <p>An availability supplement of a category A, 3% of basic salary is paid for this commitment. The average commitment in hours is not considered onerous and is taken by arrangement from the contracted hourly job plan.</p> <p>The Sussex Mental Health Line telephone service accessed by patients is available on weekdays between 5pm-9pm and 24-hours at weekends. It provides support and information and is staffed by nurses and support workers.</p> <p>A Trust operational manager is on call each day and night.</p>				
18.0	<p>Leave and cover arrangements</p> <p>The post holder is entitled to 32 days of annual leave plus bank holidays for the first 7 years of their service and 34 days plus bank holidays thereafter and 30 days of study leave over three years. This will be calculated pro-rata for less than full time posts.</p> <p>Annual leave, study and special leave will be covered within the cross-cover arrangements with inpatient, Urgent and Emergency care and SFEDS CAMHS consultant colleagues and is agreed and authorised using electronic unavailability management software.</p>				

<p>19.0</p>	<p>Contract Agreement</p> <p>The post will be covered by the terms and conditions of service for consultants - England (2003), as amended from time to time.</p> <p>The contract is the national consultant model contract which has been agreed with the BMA, but individuals may wish to discuss this further before acceptance</p>
<p>20.0</p>	<p>Wellbeing</p> <p>You work hard to support the health and well-being of patients and service users. We believe you should have access to excellent Occupational Health to improve and maintain your health and well-being.</p> <p>The aim of Occupational Health is to work with managers and staff to promote and improve health and well-being of staff. For more information on the Trust Occupational Health Department please contact Medical Staffing team on 0300 304 0393.</p> <p>For more information on our ongoing wellbeing initiatives please see section 20.3 below.</p>
<p>20.1</p>	<p>The Trust recognises that being involved in a serious incident can have a significant impact on a clinician's wellbeing. The following wellbeing systems are available to doctors in such an event:</p> <ul style="list-style-type: none"> • Discussion with Team Leader/Service Manager • Discussion with the Clinical Lead or Clinical Director • Team Debrief • All Trust Consultants are encouraged to join a local peer group that meets regularly; serious incident cases can be discussed and peer support sought during such meetings • Reflective discussion during the annual appraisal meeting
<p>20.2</p>	<p>The Trust's Job Planning Policy is based on guidance set out by the BMA and NHS Employers, as well as the relevant sections of the national Terms and Conditions for the Consultant Contract. It emphasises a partnership approach being taken by the doctor and their manager in this process. Job Planning is part of an annual review cycle but it is recognised that an interim job plan review may be requested (by the doctor or their manager) if duties, responsibilities and accountability arrangements have changed or need to change significantly within the year.</p>
<p>20.3</p>	<p>A list of our ongoing wellbeing activities across the Trust can be found on our careers portal: Working for Us Sussex Partnership NHS Foundation Trust</p>
<p>21.0</p>	<p>Visiting arrangements</p> <p>Candidates are welcome to visit our services and meet the team using the below contact details.</p> <p>Dr Sarah Jonas – Associate Medical Director and Lead Consultant Psychiatrist</p>

	<p>07880182941 Sarah.jonas@spft.nhs.uk</p> <p>Further details about our Trust can be obtained via our website www.sussexpartnership.nhs.uk https://sussexcamhs.nhs.uk</p>
22. 0	<p>Equality, Diversity & Inclusion Statement</p> <p>We recognise that every person is different and we welcome, value and respect these differences. We aim for equality and fairness in everything we do, both as an employer and a healthcare provider. People from all backgrounds are welcome to work here and use our services.</p> <p>At Sussex Partnership, we care deeply about hiring, retaining, and developing a workforce that reflects the communities we serve. Our staff networks play a crucial role in exploring relationships trust-wide and advancing opportunities for all staff, helping underrepresented communities continue to feel they belong here.</p> <p>More information on our staff networks can be found on our careers portal using the following link: Diversity and Inclusion SPFT Recruitment (sussexpartnership.nhs.uk)</p>
23. 0	<p>Approval of job description by the Royal College of Psychiatrists</p> <p>This job description and person specification is pending approval by the Royal College of Psychiatrists' regional advisor</p>

Person specification/selection criteria for Consultant Psychiatrist

ASSESSMENT STAGE ABBREVIATIONS	SCR Screening prior to short-listing SL Short-listing from application form	AAC Advisory Appointments Committee REF References	PRES Presentation to AAC panel
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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 or equivalent	SCR		
	CCT in Child and adolescent psychiatry or equivalent	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	Experience of service development/service improvement	SL, AAC
	Excellent oral and written communication skills in English	SL, AAC, REF		
	Able to manage clinical complexity and uncertainty	AAC		
	Makes decisions based on evidence and experience including the contribution of others	AAC		
	Able to meet duties under MHA and MCA	AAC		
ACADEMIC SKILLS & LIFELONG LEARNING	Able to deliver undergraduate or postgraduate teaching and training	SL, PRES, AAC	Able to plan and deliver undergraduate and postgraduate teaching and training relevant to this post	SL, AAC
	Ability to work in and lead team	SL, AAC	Reflected on purpose of CPD undertaken	SL, AAC
	Demonstrate commitment to shared leadership & collaborative working to deliver improvement.	SL, AAC	Experienced in clinical research and / or service evaluation.	SL, AAC
	Participated in continuous professional development	SL, AAC	Evidence of achievement in education, research, audit and service improvement: awards, prizes, presentations and publications.	SL
	Participated in research or service evaluation.	SL, AAC	Has led clinical audits leading to service change or improved outcomes to patients	SL, AAC

Able to use and appraise clinical evidence.	SL, AAC, PRES		
Has actively participated in clinical audit and quality improvement programmes	SL, AAC, PRES		
Ability to work in a participatory way so that shared decision making and conversations around formulation/diagnosis and ongoing care are a collaborative endeavour with the people who access our service.	SL, AAC, PRES		