

Job description and person specification

Post and specialty:	Specialty Doctor in the Acute Care Pathway in Central Lancashire This post has become available due to the previous post holder leaving the post.
Base:	Royal Preston Hospital
Contract:	Total number of programmed activities: 10 Direct Clinical Care (DCC): 8.0 Supporting Professional Activities (SPA): 2.0
Accountable professionally to:	The post-holder will be responsible to the Chief Medical Officer through the Locality Medical Director, and Associate Medical Director.
Accountable operationally to:	Locality Medical Director: Dr Manoj Rajagopal Locality Director of Operations: Laura Walsh
Key working relationships and lines of responsibility:	Line Manager : Dr Louise Cumming, AMD Locality Medical Director: Dr Manoj Rajagopal Locality Director of Operations: Laura Walsh Locality Nursing Director : Rebekah Roshan Chief Medical Officer/Responsible Officer : Dr David Fearnley Chief Operating Officer: Emma McGuigan Deputy Chief Medical Officer: Dr Gareth Thomas Chief Executive Officer : Chris Oliver

Description of the role

The successful applicant will be based at Royal Preston Hospital and will be working with teams involved in the assessment and provision of care for patients presenting acutely to Mental Health Services as part of the ongoing development of our Acute Care Pathway.

There will be some flexibility to the work based on clinical need though it will include undertaking s136 assessments with Approved Mental Health Professionals and working with the Consultant, Team Leader and Clinical Practitioners from the Preston and Chorley Section 136 and mental health liaison teams

The role is an excellent opportunity to develop and build on existing experience of acute Psychiatry and work with Medical and non-Medical colleagues already established within these parts of our service.

There will be dedicated supervision from a Consultant Psychiatrist.

Whilst primarily responsible for delivering a quality clinical service, the Specialty Doctor can also be actively involved in the strategic development of the team and broader services, being involved with the team manager and locality manager in helping to steer the development of the service in line with the strategic direction of the organisation.

1.0 Service details

1.1 The Central and West Lancashire Locality

The locality covers Preston, Chorley, South Ribble and West Lancashire with a population of approximately 825,500. The city of Preston has a high student population, the University of Central Lancashire has around 32,000 students and Preston College is one of the largest colleges in England. The 2019 Indices of Deprivation revealed that Preston was the 46th most deprived area out of 317 districts and unitary authorities in England. In the West Lancashire area the largest town is Skelmersdale with country and village living the two dominant groups in large parts of the authority. The 2019 Indices of Deprivation placed West Lancashire as the 178th most deprived area out of 317 districts and unitary authorities in England.

Chorley and South Ribble have a joint population of approximately 182,000 and are two of the more affluent districts within Lancashire, with both falling within the 45% least deprived districts in England. Chorley has around 51,600 dwellings of which 86% are owner occupied or private rented with larger proportions of housing stock in the higher council tax bands in comparison to the county average. Figures for life expectancy at birth reveal that the Chorley district has a male figure similar to the national average, but the female average was below the national outturn. In South Ribble 90% of the housing stock is either owner occupied or private rented with a relatively high proportion in council tax band B and C. Figures for life expectancy reveal that South Ribble has a male average that was above the national figure and a female average just above the England and Wales figure.

1.2 Central and West Lancashire Inpatient Services

The inpatient mental health units in Central and West Lancashire are sited in Chorley and Ormskirk. The main mental health hospital is in Blackpool.

The Chorley Inpatient Unit: The Chorley Inpatient Unit at Chorley District General Hospital, Preston Road, Chorley, Lancashire, PR7 1PP. The unit consists of Avenham Ward, a 6 bedded female PICU, Duxbury Ward, a 15 bedded female treatment ward and Worden Ward, a 15 bedded male treatment ward. The 8 bedded specialist Mother and Baby Unit, Ribblesmere is also based at Chorley Hospital.

West Lancashire Inpatient Services: Inpatient services are based at the Scarisbrick Unit, Ormskirk & District General Hospital, Wigan Road, Ormskirk L39 2AZ. The 21 bedded unit of 11 male and 9 female beds is based within the premises of Ormskirk Hospital; it provides care and treatment for adult service users who are showing signs and symptoms of acute functional mental illness.

The Harbour: The Harbour is a 154 bedded mental health hospital situated on Preston New Road (A583) just off junction 4 of the M55 at Blackpool.

The hospital was designed with extensive input from service users and clinicians and is based on good practice guidance and 'safety by design' to ensure that it can provide high quality care. The ethos of the unit is to provide therapeutic care which is empowering, person centered and needs led and focuses on promoting recovery and independence.

The in-patient units in the Harbour consist of:

4 x 18 bedded adult functional wards (2 male & 2 female)

2 x 18 bedded advanced care wards (1 male & 1 female)

2 x 15 bedded dementia wards (1 male & 1 female)

2 x 8 bedded psychiatric intensive care unit (PICU) (1 male & 1 female)

2.0 Other Central & West Lancashire Locality Services

2.1 Older Adult Mental Health Services

The core function of the older adult mental health services is to provide a range of high quality community and in-patient mental health services to people (predominantly aged 65 and over) who are experiencing dementia and/or functional conditions. The service is also available to people under this age whose clinical need would be more appropriately met here. The Trust protocol regarding transition between working-age and older adult services supports this only when based on individual need and patients up to 75 years have their service provided from the adult services if that is most appropriate.

The inpatient provision is arranged around diagnostic requirements with wards for patients with a dementia diagnosis and wards for patients with advanced care needs,

this will often include people who have a degree of physical frailty and medical problems associated with aging as well as a functional mental illness.

2.2 Children and Young People

LSCFT Child and Adolescent Mental Health Services (CAMHS) Tier 3 provide a service for children and young people aged 5-16 who have a range of emotional and behavioural difficulties. The service supports and promotes emotional health and wellbeing. The service offers a wide range of support for young people and their families who have mental health difficulties such as; psychosis, depression, eating disorders, ADHD, self-harm, obsessive compulsive disorders, anxiety etc. The service line is provided by a multidisciplinary team comprising of consultant psychiatrists, psychologists, occupational therapists, family therapists, psychological therapists and a dedicated team of nurses.

2.3 Community Wellbeing

LSCFT provides community services such as community nursing, health visiting, podiatry, sexual health and dentistry.

3.0 Continuing professional development (CPD)

- 3.1 Specialty doctors are expected to maintain personal portfolios in accordance with the requirements of the Royal College of Psychiatrists; to participate in a CPD peer group; and to obtain an annual certificate of “good professional standing for CPD” from the College.
- 3.2 Study leave arrangements for medical staff are in accordance with the new medical staff contract within Lancashire and South Cumbria NHS Foundation Trust.
- 3.3 Regular clinical supervision is an important part of professional development and it is the post holder’s responsibility to access the appropriate levels of supervision and locality peer review group to support and further develop their clinical practice.
- 3.4 All doctors are encouraged and expected to join a peer group for their annual CPD submission and medical appraisal. This can be externally if the doctor is already part of a peer group prior to joining the Trust, or internally within the Trust. There are opportunities to join any of the existing Trust groups. In case there is a number of doctors recruited at one time, colleagues in the medical education can facilitate communication to form a new peer group as necessary.
- 3.5 For all new specialty doctor appointments supervision arrangements are available through the Clinical Director.
- 3.6 In addition to possible academic input into the University, consultants are also expected to contribute to postgraduate psychiatric training as required and to other training initiatives within Lancashire and South Cumbria NHS Foundation Trust.
- 3.7 There is an active local programme of case conferences and journal clubs in the locality. The post holder will be expected to participate in appropriate local programmes as agreed with the supervising consultant. An active research interest would also be encouraged.

4.0 Clinical leadership and medical management

- 4.1 The Trust is committed to the full involvement of clinical staff in the management and development of the service. In the current arrangement a consultant Deputy Associate Medical Director (DAMD) and clinical manager support each part of the service.
- 4.2 The Associate Medical Director (AMD) liaises closely with medical colleagues, the Medical Director and the Clinical Director to provide clinical leadership and direction to the service.
- 4.3 The Trust would encourage the post holder to participate in regional and national groups, activities of the Royal College, GMC, DOH and similar bodies. Such activities have to be discussed and agreed with the Associate Medical Director and have to be approved by the Medical Director in accordance with the relevant Trust policies.
- 4.4 The Trust has an active audit programme and the post holder will be expected to participate in and lead local and Trust-wide audit activity and to be involved in audit training for medical and other disciplines.

5.0 Appraisal and job planning

- 5.1 There is a well-developed programme of annual appraisal and job plan reviews.
- 5.2 The posts are subject to the Trust annual appraisal process leading to revalidation.
- 5.3 There is a Trust policy relating to medical staff appraisals.
- 5.4 It is envisaged that the 10 PAs of a full-time working week will consist of 8.5 PAs direct clinical care and 1.5 PA minimum for CPD and revalidation. This will be subject to job planning and depend on the post holder's other roles such as education or research.

6.0 Corporate Induction Programme

- 6.1 The post holder will be expected to attend the Trust Corporate Induction Programme and the HR team half day bespoke induction.

7.0 Teaching and training

- 7.1 The Trust is committed to promote both undergraduate and postgraduate medical training. The post holder will be expected to engage in both formal and informal education of multidisciplinary colleagues which includes regular participation in the weekly postgraduate training programme at the Lantern Centre which is 17 miles from base.
- 7.2 The post holder may also wish to attend some teaching sessions or deliver teaching at their locality hospital.
- 7.3 The post holder will have access to the library facilities in The Lantern Centre.
- 7.4 The Trust has a special study leave policy for medical staffing and various in-house training activities takes place both at locality and Trust level.

7.5 The Trust has started rolling out a leadership programme for all its senior managers. The post holder will be encouraged to develop her/his leadership skills by participating in one of these programmes.

7.6 The Trust has a range of training events developed 'in-house' to improve management skills.

7.7 Audit: the post holder is expected to conduct or participate in audits aiming to improve the services locally as well as actively participate in the Trust high priority audits and any regional or national audits that the Trust participates in.

8.0 Research

8.1 LSCFT is committed to developing and undertaking research studies that enable us to deliver high quality evidence-based care and services to people in our local community.

8.2 The Trust has a well-staffed Research & Development Department and provides extensive support for staff undertaking commercial trials and non-commercial studies, including developing grant proposals and partner engagement.

8.3 LSCFT has strong collaborations with regional and national academic partners including the Universities of Manchester, Central Lancashire and Lancaster. The Trust is part of the National Institute for Health Research's Clinical Research Network: North West Coast (CRN: NWC), the North West Coast Collaboration for Leadership in Applied Health Research and Care (NWC CLAHRC) and hosts the Innovation Agency in the region. The Trust's strategic research plan involves continuing to develop its reputation for quality research that benefits local services and local people.

8.4 LSCFT has a unique partnership with the neighbouring Lancashire Teaching Hospitals Foundation Trust in a dedicated Clinical Research Facility. This enables both Trusts to work together in delivering complex clinical trials for the benefit of our patients. The post holder will be strongly encouraged to take an active part in some of the many ongoing research projects within the Trust and/or develop their own research projects.

9.0 Mental Health Act and Responsible Clinician approval

9.1 The post holder would be expected to be approved under Section 12(2) MHA and will be expected to renew this approval according to agreed procedures.

10.0 Secretarial support and office facilities

10.1 There is office space at RPH suitably equipped with a laptop, mobile and desk phone however discussion will be held regarding the most appropriate base.

10.2 Secretarial support is provided by the Consultant's full time Band 4 Medical Secretary based at PRPH.

11.0 Clinical duties of post holder

The post holder will have the following important clinical responsibilities:

11.1 To undertake assessments under S136 of the MHA

A specialty doctor is expected to:

- 11.3 Demonstrate an understanding of the interface between physical illness and mental illness; undertake diagnosis and formulation of management plans in complex cases; advise medical teams on appropriate integrated care and assess and manage risk (e.g. suicide risk, violence/aggression, absconding) relating to psychiatric conditions in general hospital settings.
- 11.4 Provide advice on prescribing to medical teams on psychotropic medication; provide expertise, and fulfil a statutory role, in managing medico-legal issues in the general hospital, including application of mental health and mental capacity legislation; understand the medical issues in assessing patients with medically unexplained symptoms and understand the medical issues in mental health problems associated with long-term conditions.
- 11.5 Collaboration with medical colleagues to ensure availability for emergency assessments through the daytime (9am to 5pm) within the locality and also to provide cross-cover during periods of annual/study leave. The post holder would not routinely participate in the locality community daytime rota unless part of a cross-cover agreement.
- 11.6 Assessment and management of patients under the Mental Health Act and Mental Capacity Act.

12.0 Training duties

- 12.1 The post holder will be expected to engage in both formal and informal education of multidisciplinary colleagues.
- 12.2 The post holder will be encouraged to obtain approval as a specialist trainee trainer.
- 12.3 The post holder will be encouraged to participate in the academic and teaching programmes, teaching the medical students and other mental health professionals if they are attached to the clinical team.
- 12.4 The post holder will have access to the library facilities in the Lantern Centre.
- 12.5 Medical undergraduate students: the Trust provides training for undergraduate students from Manchester and Lancaster Universities and the post holder is expected to actively participate in their training programme.

13.0 Clinical governance and quality improvement

- 13.1 Specialty doctors are expected to be aware of the principles of clinical governance and to work towards achieving continuing improvement in all aspects of service delivery in line with the aims of Lancashire and South Cumbria NHS Foundation Trust.

- 13.2 Specialty doctors have the opportunity to contribute to development of guidelines, clinical policies, monitoring and reviewing procedures through membership of the Medical Advisory Committee, Drugs & Therapeutic Committee and Local Negotiating Committee.
- 13.3 The post holder will be expected to ensure, together with other professionals in the service, that clinical audits are carried out as required and that the work is regularly evaluated and reviewed.
- 13.4 The Trust supports the view that whilst clinical audit is fundamentally a quality improvements process it also plays an important role in providing assurances about the quality of services.
- 13.5 The Trust considers that the prime responsibility for auditing clinical care lies with the clinicians who provide that care.

14.0 General duties

- 14.1 To undertake the administrative duties associated with the care of patients.
- 14.2 To record clinical activity accurately, comprehensively and in a timely manner.
- 14.3 To participate in service and business planning activity for the locality and, as appropriate, for the whole mental health service.
- 14.4 To participate in annual appraisal.
- 14.5 To attend and participate in the academic programme of the Trust, including lectures and seminars as part of the internal CPD programme.
- 14.6 To maintain professional registration with the General Medical Council, Mental Health Act Section 12(2) approval, and to abide by professional codes of conduct.
- 14.7 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.
- 14.8 To work with local managers and professional colleagues in ensuring the efficient running of services.
- 14.9 To comply with the Trust's agreed policies, procedures, standing orders and financial instructions.

15.0 External duties, roles and responsibilities

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

16.0 Other duties

- 16.1 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.

17.0 Work programme

- 17.1 It is envisaged that the post holder will work 10 programmed activities over 5 days. Following appointment there will be a meeting at no later than three months with the clinical manager to review and revise the job plan and objectives of the post holder.
- 17.2 The overall split of the programmed activities is 8.0 to be devoted to direct clinical care and 2.0 to supporting professional activities (as per the Royal College of Psychiatrists recommendation).
- 17.3 A formal job plan will be agreed between the post holder and associate medical director or clinical manager three months after commencing the post and at least annually thereafter.

JOB PLAN

Suggested draft timetable:

Day	Time	Location	Work	Category	No. of PAs
Monday	9am -1pm	s136 suite/ RPH liaison team / A&E	Acute Care Pathway work	DCC	1 (4 hours)
	1pm – 5pm	s136 suite/ RPH liaison team / A&E	Acute Care Pathway work	DCC	1 (4 hours)
Tuesday	9am – 1pm	s136 suite/ RPH liaison team / A&E	Acute Care Pathway work	DCC	1 (4 hours)
	1pm – 3pm	s136 suite/ RPH liaison team / A&E	Acute Care Pathway work Clinical admin	DCC	0.5 (2 hours)
	3pm - 5pm		Audit/ Research	SPA	0.5 (2 hours)
Wednesday	9am —1pm	s136 suite/ RPH liaison team / A&E	Acute Care Pathway work	DCC	1 (4 hours)
	1pm – 5pm	Lantern Centre	Academic programme/CPD	SPA	1(4 hours)
Thursday	9am-1pm	s136 suite/ RPH liaison team / A&E	Acute Care Pathway work	DCC	1 (4 hours)
	1pm —3pm	s136 suite/ RPH liaison team / A&E	Acute Care Pathway work	DCC	0.5 (2 hours)
	3pm-5pm		Revalidation activity	SPA	0.5 (2 hours)
Friday	9am – 10am	s136 suite/ RPH liaison team / A&E	Acute Care Pathway work	DCC	1 (4 hours)
	10am-1pm				
	1pm – 3pm	s136 suite/ RPH liaison team / A&E	Acute Care Pathway work	DCC	1 (4 hours)
Total PAs	Direct clinical care				8.0 (32 hours)
	Supporting professional activities				2.0 (8 hours)

18.0 On-call and cover arrangements

- 18.1 The post holder may be required to participate in the out-of-hours duty rota. Out of hours on-call rotas (3 localities) are all 1 in 9 on the 2nd tier subject to planning. This is a full on-call and covers adults and older adults requiring Mental Health Act assessments or assessments in police stations or other environments. The post holder will be remunerated with an extra 2 PAs + 2% availability supplement.
- 18.2 The post holder will be treated at par with existing specialty doctors for on-call remuneration.
- 18.3 There is no requirement to be resident on call. You will be supported by a 1st tier rota (comprising doctors in the CT grade, GPST, FY2 trainees and equivalent Trust grades). These doctors cover the 'Central' locality and provide cover to other sites as well.
- 18.4 It is accepted that the specialty doctor will be asked with other colleagues to provide emergency cover in case of sudden or short-term sickness or emergencies. This is not a reciprocal arrangement and it is aimed to provide continuity of care. Any long-term sickness will normally be covered by separate arrangements as per the Trust policy.
- 19.0 Contract agreement**
- 19.1 The post will be covered by the terms and conditions of service for Hospital Medical and Dental staff (England and Wales) as amended from time to time. Contracts have been agreed with the BMA local negotiators, but individuals may wish to discuss this further before acceptance.
- 20.0 Leave**
- 20.1 The post holder is entitled to up to 33 days of annual leave dependent on seniority per year and 30 days study leave over three years.
- 20.2 The post holder is entitled to 10 days study leave per annum, an allowance which can be utilised over a period of three years with prior approval of the Associate Medical Director and Director of Medical Education.
- 21.0 Wellbeing**
- 21.1 The post holder will have access to the Occupational Health (OH) Department, (Well Being Partners, occhealth@lthtr.nhs.uk, 01772 522276). The post holder may self-refer or be referred through their manager. The post holder will have access to the 24 hour Health Assured service, which provides free counselling, including face-to-face, legal and financial support, online CBT and wellbeing resources. Information about Occupational Health and Health Assured will be disseminated at the induction and regularly when in post to ensure the post holder has timely access to the details if help is necessary.
- 21.2 Supporting the wellbeing of the post holder after serious incidents that involve patients in their care (e.g. homicide or suicide) is paramount and a dedicated senior clinician will provide support and advice as needed after the incident. Details of the senior clinician able to offer this support will be provided via the Medical Directorate at the time of initial induction.

- 21.3 If there are changes to the pre-agreed workload (e.g. unexpected cover of a different unit/service outside the casual cross-cover arrangement) a timely meeting with the line manager before cover starts will enable discussion of the feasibility of the change within the constraints of needing to manage a safe workload. Additional support will be sourced if required. A timely job plan adjustment will be arranged if a new working arrangement is to proceed.
- 21.4 The Trust has several initiatives to support wellbeing that the post holder is encouraged to participate in. These currently include flexible working, flexible retirement, season ticket scheme, lease vehicle scheme, cycle scheme, retail and restaurant discounts, eye test scheme, free health checks, menopause support, gym discounts, wellbeing events, mindfulness courses, wellbeing walks and jogs, and parenting workshops.
- 21.6 The post holder will form part of a peer group who meet regularly.
- 21.7 The Trust has an active mentorship scheme and the post holder will be offered a mentor.

22.0 Visiting arrangements

Applicants or prospective applicants are strongly encouraged to visit the Trust and to meet prospective colleagues.

Informal discussions to discuss the job or arrangements for visiting may be made with:

Locality AMD	Dr Louise Cumming (07971 337673)
Locality Medical Director	Dr Arun Chidambaram (01254 283297)

Lancashire and South Cumbria NHS Foundation Trust
Sceptre Point, Sceptre Way
Walton Summit, Bamber Bridge, Preston, PR5 6AW

23.0 GENERAL TERMS AND CONDITIONS

- 23.1 All terms and conditions of service are in accordance with those detailed in the Specialty Doctor Contract Terms and Conditions (2003), Hospital Medical and Dental Staff (England and Wales), General Whitley Council and where applicable those of the Trust. These may vary from time to time.
- 23.2 The appointee will be expected to work with local managers and professional colleagues in the efficient running of services, and will share with consultant colleagues in the medical contribution to management. Subject to the provision of the Terms and Conditions of Service, he/she 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. The appointee 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 their patients, to be able to contact a specialty doctor when necessary.

- 23.3 The successful candidate will be expected to maintain existing service commitments and comply with Trust performance targets.

24.0 Residence/Removal Expenses

- 24.1 The appointee will be required to live within 10 miles or 30 minutes of their clinical base unless the MD and CEO agree to a greater distance. If the appointee is required to move house to meet the residential clause of the contract, removal expenses may be payable. Terms and Conditions of service state that the “removal expenses shall be reimbursed and grants paid only when the employing authority is satisfied that the removal of the practitioner’s home is required and that the arrangements proposed are reasonable”. Therefore, successful candidates are advised not to enter into contractual agreement until such time as the formal approval of the Trust is confirmed in writing.

25.0 Health & Safety

- 25.1 The Trust recognises its duties under the relevant Health and Safety at Work legislation and to ensure, as far as reasonably practicable, the health, safety and welfare at work of all its employees. All medical and dental staff under contract to the Trust will be expected to be familiar with and adhere to the Health and Safety Policies of the Trust.

26.0 Rehabilitation of Offenders Act 1974

- 26.1 Due to the nature of this work, the post is exempt from the provisions of section 4(2) of the Rehabilitation of Offenders Act 1974 (Exceptions Order) 1975.
- 26.2 Applications for the post are not entitled to withhold information about convictions which for other purposes are ‘spent’ under the provision of the Act, and in the event of employment, any failure to disclose such convictions could result in disciplinary action or dismissal by the Trust. Any information given will be treated in the strictest confidence and will be considered only in relation to an application for a position to which the order applies.

27.0 Professional Standards

- 27.1 The Clinical Director is managerially responsible for all activity in which the specialty doctor works. The Medical Director has overall responsibility for the professional performance of specialty doctors employed by the Trust. All doctors are expected to comply with management arrangements in place, to follow the guidelines on practice laid down by the General Medical Council’s “Maintaining Good Medical Practice”, and to be accountable to the Trust for their actions and the quality of their work.

28.0 Maintaining medical excellence/Responding to Concerns

- 28.1 The LSCFT is committed to provide safe and effective care for patients. To ensure this, there is an agreed procedure for medical staff that enables them to report quickly and confidentially, concerns about conduct, performance or health of medical colleagues (Chief Medical Officer 1996). All medical staff practicing in the Trust should ensure that they are familiar with the procedure and should apply it.

Person Specification – Speciality Doctor

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.	Screening	Qualification or higher degree in medical education, clinical research or management.	Short-listing
			MRCPsych	Screening
			Additional clinical qualifications relevant to the role such as a diploma or MSc in liaison or neuropsychiatry.	Short-listing
ELIGIBILITY	Fully registered with the GMC with a licence to practise at the time of appointment.	Screening	In good standing with GMC with respect to warning and conditions on practice	Screening
	Approved under S12 OR able to achieve with 3 months of appointment	Screening		
TRANSPORT	Holds and will use valid UK driving licence OR provides evidence of proposed alternative.	Screening		

CLINICAL SKILLS, KNOWLEDGE & EXPERIENCE	Experience working in a range of environments within psychiatry including older adults and adults of working age.	Short-listing Interview References	Wide range of specialist and sub-specialist experience relevant to post within NHS or comparable service	Short-listing Interview
	Excellent clinical skills using bio-psycho-social perspective and wide medical knowledge	Short-listing Interview References		
	Excellent oral and written communication skills in English	Interview References Presentation		
	Able to manage clinical complexity and uncertainty.	Interview		
	Makes decisions based on evidence and experience including the contribution of others	Interview		
	Able to meet duties under MHA and MCA	Short-listing References Interview		
ACADEMIC SKILLS & LIFELONG LEARNING	Ability to work in and demonstrate commitment to shared leadership & collaborative working to deliver improvement.	References Interview	Able to deliver undergraduate or postgraduate teaching and training	Short-listing Interview
	Participated in continuous professional development	Short-listing Interview	Reflected on purpose of CPD undertaken	Short-listing Interview
	Able to use and appraise clinical evidence.	Short-listing Interview	Has initiated or led clinical audits leading to service change or improved outcomes to patients	Short-listing Interview
	Has actively participated in clinical audit and quality improvement programmes	Short-listing Interview Presentation		

