



JOB DESCRIPTION

1

Consultant Psychiatrist

Old Age Psychiatry: Cornwall villa (Treatment ward) and
Enfield Community Mental Health Team for Older Adults
(CMHTOP)
Full Time 10 Pas

Cornwall villa ward and Emerald House
Chase Farm Hospital
Enfield , EN2 8JL

Updated March 2024

					
We are kind	We are respectful	We work together	We keep things simple	We empower	We are proudly diverse
We show empathy and compassion for one another so we feel supported and safe	We treat one another fairly, with courtesy and honesty, so we feel valued and appreciated	We work as one team across the Partnership and beyond so we feel supported, connected and better able to do our part	We make it easy to do things once, so we are clear and able to focus on doing our job well	We seek ways to continuously improve so we feel motivated and trusted to do our best work well	We celebrate our diversity and ensure inclusivity with opportunities open to all, so we can bring our authentic self to work

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ABBREVIATIONS	
AC	Approved Clinician
BEH	Barnet, Enfield & Haringey
BEHMHT	Barnet, Enfield & Haringey Mental Health Trust
CRHTT	Crisis Resolution & Home Treatment Team
CRT	Crisis Resolution Team
CMHTOP	Community Mental Health Team for Older People
CPD	Continuous professional development
DCC	Direct Clinical Care
HBPoS	Health Based Place of Safety
NLMHP	North London Mental Health Partnership
PA	Programmed activity
RC	Responsible Clinician
SPA	Supporting programmed activity

1. The Job advertisement

Post and specialty:	<p>Consultant Psychiatrist in Old Age Psychiatry</p> <p>Barnet, Enfield and Haringey Mental Health NHS Trust (BEH MHT) is recruiting a full-time consultant psychiatrist into a post in an established Enfield Older Adult Service due to the previous post-holder partially retiring and moving to a different service within Enfield.</p> <p>The post is split between 2 services: Cornwall Villa ward (13 bedded mixed sex step-down treatment ward for older adults) and the Enfield Community Mental Health Team for Older Adults at Chase Farm Hospital in Enfield.</p>
Base:	<p>Cornwall Villa ward and Emerald House</p> <p>Chase Farm Hospital</p> <p>Enfield</p> <p>EN2 8JL</p>
Contract:	<p>Number of programmed activities: 10 PA</p> <p>7.5 PA DCC, 2.5 PA SPA</p>
RCPsych JD approval:	<p>Submitted for RCPsych approval in March 2024 – response awaited. Ref LON CEN-CO-STH-2024-01944.</p>
Accountable professionally to:	<p>Medical Director: Dr Khalid Aziz</p> <p>Chief Medical Officer: Dr Vincent Kirchner</p>
Accountable operationally to:	<p>Clinical Director, BEH Hospital Services: Dr Ed Beveridge</p> <p>Clinical Director, Enfield Community Services: Dr Antonio Albanese</p>
Key working relationships and lines of responsibility:	<p>Line Manager: Dr Ed Beveridge/Dr Antonio Albanese</p> <p>Team Lead/Manager (Cornwall villa): Fred Asa</p> <p>Team Lead/Manager (Enfield CMHTOP): Sarah French</p> <p>Modern Matron: Gyebi Antwi</p> <p>Senior Service Lead: Stephen Godfrey</p> <p>Enfield Managing Director: Josephine Carroll</p> <p>Medical Director: Dr Khalid Aziz</p> <p>Chief Medical Officer: Dr Vincent Kirchner</p> <p>Chief Operating Officer: Natalie Fox</p> <p>Chief Executive: Jinjer Kandola</p>
Contacts for enquiries and visits:	<p>Dr Ekaterina Doukova – ekaterina.doukova@nhs.net</p> <p>Dr Ed Beveridge – ed.beveridge@nhs.net</p> <p>Dr Antonio Albanese - antonio.albanese1@nhs.net</p> <p>Telephone: 07741 552448 (Luke de Senneville, Business Support Manager – will arrange calls and visits)</p>

2. Introduction and circumstances of availability of post

Barnet, Enfield and Haringey Mental Health NHS Trust seeks to appoint an enthusiastic full-time old age consultant psychiatrist to the Enfield Older Adult Services - working between the Enfield Community Mental Health Team for Older People (CMHTOP) and Cornwall villa ward (13 bedded mixed sex step-down treatment ward for older adults) at Chase Farm Hospital in Enfield. The post is available since as the current substantive consultant is partially retiring and moving to another part of the Enfield Older Adult Service.

This post offers 10 Programmed Activities per week – 7.5 PAs for direct clinical care (DCC) and up to 2.5 PAs for supporting professional activity (SPA). The post holder will be required to provide clinical and professional leadership and to take part in related management activities. As a senior clinician, the post holder will have an integral role in the performance of the team, further development of the service, and the development of clinical pathways and priorities.

3. About Barnet, Enfield and Haringey NHS Mental Health Trust

At Barnet, Enfield and Haringey Mental Health NHS Trust (BEHMHT) we provide integrated mental health services to the people of North Central London, as well as some services regionally and nationally.

We employ more than 3,600 staff, which makes us one of the largest employers in our area. Last year we supported more than 134,952 people; approximately 2,312 patients and service users on our wards and over 132,640 in the community. In 2021-22 our budgeted expenditure was £393 million. We provide our services to children, adults, and older people from over 20 sites. We support people to overcome the hurdles they face with their health and wellbeing. We support them to get back into the community and to live as independently as they can. We aim to give people the skills they need to look after themselves with our support in the community. When they need a higher level of care, we provide that on our wards. The wards are found at Edgware Community Hospital, Barnet Hospital, Chase Farm Hospital and St. Ann's Hospital.

We provide a wide range of local and more specialist mental health services, including helping people with personality disorders, drug and alcohol recovery, children's mental health issues, dementia, eating disorders, learning disabilities, and suicide prevention.

We also run the North London Forensic Service (NLFS), which the Care Quality Commission (CQC) has rated as Outstanding. This service treats and cares for people in the criminal

justice system who have mental health conditions. NLFS is also embedded in Pentonville, Wormwood Scrubs and Brixton prisons in London, and Springhill and Grendon prisons in Buckinghamshire.

The Trust has entered a partnership with Camden and Islington Foundation NHS trust. On April 2022 marked the first anniversary of work starting between our Trust and neighbouring Camden and Islington NHS Foundation Trust to build a strong, working partnership. The ambition for our partnership is to make a real difference to our service users, local residents and staff. The postholder will have opportunities to take part in new partnership strategic meetings to develop the North Central London service.

4. Service Details

Community Older Adult Services in Enfield consist of a single Community Mental Health Team for Older People (CMHTOP) that is divided into 4 sub-teams. Each sub-team has a consultant psychiatrist allocated to a geographical area/part of Enfield and allocated GP practices within this. The Enfield Intensive Support Team is part of the Enfield CMHTOP whilst the Enfield Memory Service is a separate service.

The older adult inpatient wards for BEH-MHT are based at Chase Farm Hospital in Enfield and consist of 3 wards:

- The Oaks** (20 bedded acute admission and treatment ward for older adults)
- Cornwall villa** (13 bedded mixed sex step down treatment ward for older adults) taking patients only from the Oaks
- Silver Birches** (13 bedded acute admission and treatment ward for older adults with dementia)

The post holder will be split between Cornwall villa ward and one of the 4 sub-teams of the Enfield CMHTOP.

The Enfield Crisis Resolution and Home Treatment Team holds a caseload between on average 30-40 clients. The team works closely with acute adult services in Enfield but will also assess older adult inpatient for input on discharge should this be indicated and appropriate.

The Hawthorn Recovery Day Unit is another service for older adults based in Enfield that can offer additional step down and step up support to inpatients as well patients under the Enfield CMHTOP.

The Enfield Consultant body is a close-knit group of 15 colleagues, mostly holding substantive posts, which meet regularly in formal and informal meetings scheduled on a weekly basis via MS teams on a Monday. Various issues are discussed i.e. local and trust-wide managerial issues, vacancies, training concerns, etc. The Clinical Directors (CDs) and Enfield Associate Clinical Director (ACD) regularly attend this meeting and

update the consultant body. Consultants are actively encouraged and supportive to take on management and leadership roles and to contribute to the broader strategic planning of the Trust. There are regular trust academic conferences (trust wide academic program on Wednesday afternoons via MS Teams) and trust corporate conferences (twice yearly).

The consultant group has an established culture of mutual support, collaborative working and shared decision making. In addition to this, the partnership holds joint Medical and Clinical Advisory Groups for all consultants, currently virtual and 2-monthly although this program is subject to review. Finally, consultants working in acute/hospital services have quarterly acute consultant forums led by the CD and ACDs, where issues around acute care can be discussed informally.

Consultants are expected to regularly attend the weekly consultant meeting and the weekly academic program. Whilst several CPD peer groups have formed within Enfield, the consultants are also encouraged to seek peer groups outside the organization as an opportunity to network and share experience with colleagues from other services. A monthly Balint-Group for consultants is planned to re-start very soon following the new appointment of a consultant psychotherapist. This gives opportunity to conduct in-depth case-based discussions (CbD) required for annual appraisals and revalidation. New consultants (up to five years following appointments) are encouraged to link in as a group and are supported by the Medical Leads during their induction. New consultants are also encouraged to make use of the Start Well program facilitated by the Royal College of Psychiatrists. All new consultants are given the opportunity to seek a mentor within or outside the organization as part of their job plan.

The post also comes at a time of extra resources being made available to the community services to have a broader remit to engage clients who are traditionally caught between primary and secondary care, offer help at the point of crisis (with the aim of cutting waiting times) and offering evidence based psychological treatment and physical health monitoring in line with national standards. The increased recruitment of voluntary care sector staff is with the awareness that clinical care accounts for only 20% of health outcomes, while socioeconomic, behavioural, and environmental factors determine the remaining 80%.

5. Enfield CMHTOP and Cornwall Villa Ward: activity and establishment

The post-holder will act as the clinical lead for the multi-disciplinary team (MDT) of both teams, working in close collaboration with the team managers and other senior clinicians in the team. Principal duties will include: Senior clinical leadership and responsibility for the medical care of patients under the care of these teams.

5.a Enfield CMHTOP

The team is divided into 4 sub-teams each with a separate geographical area and GP practices. This is a diverse multicultural area of North London with a high proportion of older adults and care homes. The Enfield CMHTOP is a multidisciplinary team delivering a community service to older adults (over 65) with both functional and organic mental illness. The team also accepts referrals for adults under 65 with a dementia diagnosis. Over 65s known to the working age adult teams may be referred at any time for assessment on the basis of frailty. The post holder will screen all referrals (approximately 40-50 a month) coming into the Enfield CMHTOP and allocate them to The Enfield Memory Service, if they are for memory assessment, or allocate them for the CMHTOP-to be discussed in the weekly referral/allocation meeting. There are an average of approximately 6 new assessments per week (this does not include memory assessments which are undertaken separately by The Enfield Memory Service). The Enfield CMHTOP does not have a waiting list for new assessment and patients are offered an assessment within 1 week of the referral/allocation meeting. They may be seen on home visits or in the fortnightly outpatient clinic. The vast majority of referrals coming into the service are from local GP's, with a small percentage coming from the local General Hospital Mental Health Liaison Services. There is also a separate local Care Home Assessment Team who may receive onward referrals regarding care home residents in the borough. The consultant will also provide support and guidance to multidisciplinary staff within the CMHTOP. The average full time care coordinator has a case load of approximately 23 patients. On average there is approximately 1 patient subject to CTO in each of the four Enfield CMHTOP sub-teams and it is unusual for any of our patients to be subject to a forensic section. The team has both CT1-3 and HT4-6 trainees who give 0.5 and 0.4 sessions per week to the team working alongside one of the consultants.

5.b Cornwall Villa ward

This is a 13 bedded mixed sex step-down treatment ward. The ward takes transfers of patients from the Oaks (BEH-MHT acute admission and treatment ward) only who require a longer period of treatment in hospital. No direct admissions are taken from the community or from other acute medical settings. Inpatients will be from the boroughs of Barnet, Enfield and Haringey. The MDT provides further assessment and treatment for patients that present with functional mental illnesses. Presentations cover the whole spectrum of diagnoses, including schizophrenia, schizoaffective disorder, bipolar affective disorder, depressive and anxiety disorder and some personality disorders. These are often complicated by physical comorbidities and sometimes substance misuse. Some patients

may have treatment resistant psychosis including severe negative symptoms and often require prescription of complex medication regimes or ECT which is currently available at Chase Farm Hospital. On average, 50-75% of inpatients are detained under the MHA.

In terms of ward activity, the following information is available – there has been an increase in activity since the same time last year consistent with improved patient flow and reduced length of stay.

The post holder will supervise two trainees – a GP trainee and a CT1-3 core psychiatry trainee once they have taken up the substantive post. There is also a ST4-6 higher psychiatry trainee that works on Cornwall villa but supervision is provided by another consultant in the Enfield CMHTOP.

The skill mix in the ward team consists of:

- Ward Manager (B7), 1.0 WTE
- Deputy Ward Managers (B6), 2.0 WTE
- Consultant Psychiatrist, 0.5 WTE
- ST4-6 Trainee Dr 0.4 WTE
- CT1-3 Trainee Dr 0.5 WTE
- GP Trainee Dr 0.5 WTE
- Psychiatric Nurses (B5), 9 WTE
- Nursing Assistants (B3), 9 WTE
- Occupational therapist (B6), 0.4 WTE
- Therapy instructor (B4), 0.8 WTE
- Music Therapist (B7), 0.2 WTE
- Art Therapist (B6), 0.1 WTE
- Psychologist 0.2, WTE
- Ward administrator, 1.0 WTE
- Ward Pharmacist – shared with other wards

6. Local Working Arrangements

The consultants working in the Enfield CMHTOP and Older Adult Inpatient Wards provide annual leave cover for each other and share the responsibility of supervising several trainees doctors working in the services.

There is good collegiate support from the older adult services in Enfield. There is a healthy umbrella of managerial support from the Clinical Director for Enfield (Dr Antonio Albanese), the Clinical Director for Hospital Services (Dr Ed Beveridge), the Modern Matron for Chase Farm Hospital (Gyebi Antwi), Older Adult Senior Service Lead (Stephen Godfrey), Associate Director of Nursing, Enfield Division, (Chipo Sambani) and

Managing Director for Enfield (Josephine Carroll), all of whom bring a wealth of experience as well as an informal, “can-do” approach to the team.

7. Continuous Professional Development (CPD)

The post-holder will be expected to remain in good standing for CPD with the Royal College of Psychiatrists. Consultants in BEH have made local arrangements for CPD peer groups, which welcome new consultants joining the workforce. A trust-wide academic teaching program for doctors takes place via MS Teams on Wednesday afternoons. Active contribution to this teaching program by consultants employed by the Trust is encouraged. CPD is supported by the Trust librarian Team Leader, Magdalini Vasileiou who holds sessions at the local St Ann’s Medical Library and also supports signposting to on-line resources and conducts literature searches. The Trust follows a study leave policy supporting doctors in accessing study leave time according to national guidance. Funding for study leave agreed in job planning is subject to completion of mandatory training and approval by the relevant Clinical Director. Consultants are entitled to 10 days of study leave per year, with access to a budget of £700 per year to the costs of courses/conferences/travel/accommodation (statutory courses e.g. AC approval/reapproval can be claimed separately from this).

8. Clinical leadership and medical management

The medical management of the Trust is increasingly co-authored between BEH and C&I, and inpatient services have support from the local borough as well as inpatient service directorate. Chief Medical Officer is Dr Vincent Kirchner and he is supported by the Medical Director for adult and older adult service, Dr Khalid Aziz.

The Trust actively supports the involvement of the consultant body in regional and national groups, subject to discussion and approval with the Medical Director and, as necessary, the Chief Executive Officer.

9. Appraisal and job planning

The Trust is committed to the implementation of the annual consultant appraisal, outlined in the NHS Executive Advance Letters (MD) 6/00 and (MD) 5/01. The Trust uses the L2P software for the appraisal process. Appraisal and revalidation lead is Dr Koye Odutoye. The Responsible Officer for revalidation is Dr Vincent Kirchner.

Consultants joining the Trust will be offered a formal job planning meeting within three months of joining the work force. Job planning meetings are held by the presence of

the clinical director (and service director if appropriate) with a job plan being reached collaboratively between the post holder, their line manager and the service director. The Trust is committed to annual reviews of job plans with a view to ensure that job plans are realistic and offer a productive balance between clinical care, service development needs and personal developmental goals of the post-holder.

Consultants joining the Trust will participate in a two-day trust-wide induction. Furthermore, they will be offered an individually arranged local induction program, during which they will meet local managers and colleagues, with whom they will share an interface.

10. Teaching and training

As a teaching organization BEH Mental Health Trust actively promotes high standards in training in all professions. Director of Medical Education Dr Lubna Anwar has responsibility for Medical Training and Education across the Partnership. The Trust has strong links with the Department of Psychiatry and Behavioral Sciences in UCL in the provision of undergraduate and postgraduate training. Core Trainees and Higher Trainees are part of the North Central London Training Schemes. The post-holder will be encouraged to achieve the competencies to hold the role of Clinical Supervisor of Core Trainees. Gaining the competencies will be supported by the Department of Medical Education.

In due course the post-holder will be supported to take on the role of Educational Supervisor. Educational Supervisors are supervised by the Director of Medical Education and are responsible for up to 6 trainees per supervisor.

The post-holder will have opportunities to contribute to training of medical students from UCL University as well as St Georges University (Grenada) and the post-graduate psychiatric training through the MRCPsych Training Program hosted by UCL.

The Trust is committed to the development of its medical staff. Dr Lauren Huzzey (usually based at Chase Farm Hospital) is the BEH tutor for SASG doctors.

11. Research

The Research & Development Department for the trust is based in St. Ann's Hospital. The director of Research and Development for the Trust is Dr Artemis Igoumenou (covered for maternity leave by Lynis Lewis, Senior Director of Research and Development, NOCLOR). The R&D department is based at St Ann's hospital.

The Trust is a member of the UCLPartners (UCLP) Academic Health Science Network, which allows collaboration in research, innovation, and improvement with colleagues in Northeast London, Essex, Hertfordshire, and Bedfordshire. The current clinical lead for Mental Health at UCLP is Dr Ed Beveridge, also clinical Director for Hospital Services at BEHMHT

The Trust is actively supporting participation in clinical studies. The Trust in the past has recruited into the RADAR study and ECLIPSE study and currently is recruiting into the ODESSI trial - a Randomized Controlled Trial (RCT) exploring the feasibility of implementation of the Open Dialogue Model in an NHS setting. This large multi-centre trial was initiated by the Northeast London Foundation Trust (NELFT) in collaboration with the University College London (UCL) and funded by the Department of Health. In April 2020, a substantive ESRC grant for a three-year anthropological study into the implementation of Peer Supported Open Dialogue in Haringey (A-POD study, SOAS University, London) was approved.

The Trust works closely with NOCLOR to deliver on high quality research. At any given time, there are between 20-25 research projects running in the Trust. Professor Elizabeth Sampson and Associate Professor Artemis Igoumenou, both from UCL, lead on Dementia Research, and Rehabilitation Research respectively. Dr Lauren Huzzey is the Dementia Specialty Lead for North Thames Clinical Research Network. For candidates interested in research, the use of SPA sessions for research can be negotiated with their clinical director. Consultants have access to free research courses, research design advice and support for recruitment if their study is on NIHR portfolio through NOCLOR.

12. Secretarial support and office facilities

The post-holder will have access to secretarial and administrative support from the team at Chase Farm Hospital. There is a full time ward administrator on Cornwall villa and further admin support as part of the Enfield CMHTOP. The post-holder will have a designated individual office with facility for storage of confidential information and allowing space to give supervision. This will be in Emerald House. The clinical work will take place in dedicated clinical rooms on Cornwall villa ward as well as in Emerald house in Chase Farm Hospital.

The Trust electronic recording system is RiO. Appropriate IT support is available to all staff. BEH Mental Health Trust supplies senior clinical staff with Trust laptops and internet enabled mobile phones to facilitate remote access and mobile working.

13. Clinical governance and quality improvement

Consultants have a leading role in on-going Quality Improvement and contribute to local and trust-wide clinical governance and serious incident investigation structures in the Trust. Consultants are expected and supported to actively participate in the full range of QI activities including clinical audit, and the partnership has a quality improvement team who can facilitate this. QI is a core enabler of the trust's day to day operations, quality assurance and service improvement, for example the "Brilliant Basics" programme which uses a QI approach to address core clinical areas across the partnership. The post holder will have SPA time in their timetable which can be used for QI or other research and development activities.

Incident reporting takes place through the Trust ULYSSES system. The partnership is currently implementing the new NHSE Patient Safety Incident Response Framework (PSIRF) and the post holder will be encouraged to engage in reviews, investigations and learning from incidents.

About the job

14. Clinical duties of post holder

The post holder will be expected to provide clinical leadership for the MDT on Cornwall villa ward as well as the Enfield CMHTOP. The post-holder will be expected:

- To manage 13 older adult inpatients (male and female) with a variety of psychiatric diagnoses, many of whom will be detained under a section of the Mental Health Act (MHA).
- To provide clinical leadership for the team, direct clinical assessments and consultations for patients under the care of the Enfield CMHTOP for the sub-team the consultant will be responsible for.
- Medical input and leadership in weekly MDT referral/allocation/team meetings.
- To conduct assessments, request investigations and contribute to formulation of unwell psychiatric inpatients.
- To formulate treatment plans and oversee implementation and evaluation of these treatment plans.
- To contribute to management of patient flow with a view to manage bed capacity effectively and avoid or flag up potential delayed transfers of care.
- To comply with all legal obligations covering clinical practice e.g. Mental Health Act and Code of Practice, safeguarding procedures.
- To complete relevant paperwork, including maintaining the electronic record and participating in routine outcome monitoring of clinical work.
- To teach and supervise medical staff and other professionals in all aspects of

psychiatric care.

- To participate in the trust-wide day-time consultant psychiatrist second on-call Rota for Health Based Place of Safety situated at Chase Farm Hospital (1:32) and the trust wide on call rota (see section 20, below).
- To participate in the MDT Meetings on the ward twice weekly and once weekly in the Enfield CMHTOP as well as other regular ward or team meetings including staff supervision. To undertake other duties, as negotiated, that contribute to the good functioning of the clinical team.
- To take part in weekly Enfield Older Adult discharge planning meetings and other regular meetings around patient flow involving locality and system colleagues.
- To provide clinical and professional leadership within the post and take part in management activities and governance processes related to the post or the wider service within which it is embedded.
- As a senior clinician, to have an integral role in the performance of the team, further development of the service, and the development of the clinical pathways and priorities of the service.

15. General duties

- To manage, appraise and give professional supervision to junior medical staff as agreed with the medical director and in accordance with the Trust's policies and procedures.
- To ensure that junior doctors working with them are compliant with the Working Time Directive.
- To comply with procedures whereby doctors report concerns about professional conduct or competence of medical or other colleagues.
- To comply with the principles of practice laid out by the General Medical Council and the Royal College of Psychiatrists.
- To maintain professional registration with the General Medical Council (GMC), Mental Health Act Section 12(2) approval, and to abide by professional codes of conduct.
- To demonstrate compliance with legal obligations covering clinical practice e.g. Mental Health Act and Code of Practice, Mental Capacity Act, The Children Act.
- To participate in annual appraisal for consultants.
- To participate annually in a job plan review with the relevant Clinical Director and Service Manager or Managing Director.
- To attend and participate in the academic program of the Trust, including lectures and seminars of the internal CPD program.
- To comply with the regulations of the Royal College of Psychiatrists on Continuing Medical Education (CPD).

- 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 comply with confidentiality as advised by professional and Department of Health Guidelines.
- To comply with proper and safe discharge procedures for in-patients in line with relevant partnership and national guidelines.
- To comply with Trust procedures that involve users in their care.
- To comply with Trust procedures about responsibility to carers.
- To commit to ensuring that people from all ethnic groups have equitable access to appropriate services.
- To ensure successful multi-disciplinary working.
- 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 services and support the medical director and other managers in preparing plans for services.
- To maintain good relationships with general practitioners, the CCG, Social Services, and voluntary sector organizations.

16. Training duties

Consultants in BEHMT are encouraged to contribute to undergraduate and postgraduate clinical teaching. This can include teaching of medical students and core trainees or contributions to the academic program. There is currently a Core Psychiatry Trainee (CT1-3) allocated to Cornwall villa and the Enfield CMHTOP. There is also a Higher Psychiatry Trainee (ST4-6) allocated to Cornwall villa but they are supervised by another consultant. There is a GP trainee allocated to Cornwall villa. The post holder would be encouraged to generate interest in recruiting more trainees to the team to facilitate an environment of ongoing learning, and would be supported to develop their competencies as a trainer including through their study leave and budget.

17. Other duties

From time to time it may be necessary for the post holder to carry out 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.

18. Work program and incentive

It is envisaged that the post holder will work ten programmed activities (PA) per week.

Following appointment there will be a meeting at no later than three months with the Clinical Director to review and revise the job plan and objectives of the post holder. The overall split of the programmed activities is 7.5 to be devoted to direct clinical care (DCC) and 2.5 to supporting professional activities (SPA). The timetable below is indicative only. A formal job plan will be agreed between the post holder, CD for BEH hospital services/Enfield Community Services and the Enfield Service Director three months after commencing the post and at least annually thereafter. There is also an option of home working in the timetable depending on clinical commitments on the ward.

In the event of any changes to the work plan or workload (for example service changes or if the post holder to help with additional cover) then a timely job plan review will be arranged including discussion of any additional support or resource required.

19. Suggested job plan and timetable

Please note this is indicative only – the post holder will determine their exact timetable with CD and local colleagues after starting the post.

Day	Time *	Location (<i>note any off-site agreements and or travel</i>)	Activity / frequency	Categorization	No. of PAs	Comment
			e.g. ward round, clinic	DCC/SPA (<i>see further codes in principles</i>)		
Monday	AM	Enfield CMHTOP	Clinical work Home visits	1.0 DCC	1	
	PM	Cornwall villa	MHA Work Trainee supervision x2	1.0 DCC	1	
Tuesday	AM	Cornwall villa	Safety huddle MDT ward round Clinical reviews	1.0 DCC	1	
	PM	Cornwall villa	Ward round Clinical reviews MHA work	1.0 DCC	1	
Wednesday	AM	Enfield CMHTOP	Referrals meeting Management and QI	0.5 DCC 0.5 SPA	1	
	PM	Chase Farm Hospital/Home	CPD	1.0 SPA	1	
Thursday	AM	Enfield CMHTOP	Clinical work Fortnightly clinic	1.0 DCC	1	
	PM	Chase Farm Hospital/Hom	CPD	1.0 SPA	1	
Friday	AM	Cornwall villa	Safety huddle MDT ward round Clinical reviews	1.0 DCC	1	
	PM	Cornwall villa	Ward round Clinical reviews MHA work	1.0 DCC	1	
Sat						
Sun						

Job Plan Weekly Summary

	PA's	SPA / Other	PA's
Clinics (number per year if annualized)	N/A	Continuing Professional Development CPD	1.0
Ward Rounds	4 PA	Educational Programmed Activity EPA	0.5
MDT's	4.5 PA	Research Programmed Activity RPA	N/A
Admin	2 PA	Management Programmed Activity MPA (Clinical leadership)	1.0
On-call*	1:30-40	Additional NHS Responsibilities/Extended Roles AR	
		TOTAL SPA	2.5 PA
TOTAL DCC	7.5 PA	TOTAL JOB PLAN	10 PA

**Refer to Schedule 5 Terms and Conditions Consultants England 2003 and Rota frequency commitment for guidance and application as well as any supporting diary card information undertaken.*

20. On-call, leave and cover arrangements

The postholder would be expected to participate in the Trust wide consultant on-call rota. This is currently approximately 1:40 - Category A (3%) low intensity. Disciplines covered include General Adult Psychiatry (the three inpatient units within BEH, Chase Farm Health Based Place of Safety and liaison teams in Barnet General and North Middlesex University Hospitals) and Psychiatry of Old Age at Chase Farm. On call consultants are supported by a full-shift CT rota at each BEH Hospital Site (Edgware Hospital, St Ann's Hospital and Chase Farm Hospital) and a full-shift ST/middle grade rota for the trust. Consultant shifts alternate between first on call and second on call (primarily rostered as a backup in the event of illness or unforeseen circumstances) meaning that there are two consultants on call per shift out of hours. Forensic and child and adolescent services have separate on call consultant cover arrangements.

Annual Leave entitlement will be **33 days or 35 days (with 7 or more years length of service as a consultant)** per annum for full time working. In addition, there is entitlement to 8 Public/Bank Holidays. For doctors contracted to work part time annual leave, including Public/Bank Holidays will be calculated pro rata.

21. Contract Agreement

The post will be covered by the terms and conditions of service for Hospital Medical and Dental staff (England and Wales) as amended from time to time. Contracts have been arranged with the BMA local negotiators, but individuals may wish to discuss this further before acceptance.

22. Remuneration and benefits

Basic Pay and Pay Thresholds - determined in accordance with the terms and conditions of the Consultant Contract: **currently £93,666 - £126,281 per annum** plus London Weighting of £2,162 per annum. Part-time consultants will be paid pro-rata to the thresholds described above based on the number of agreed weekly Programmed Activities.

The Trust is entitled at any time to deduct from the post-holder's salary, or any other monies payable to the post-holder by the Trust, any overpayment of salary or wages, under-deduction of charges, over-payment of holiday entitlement or any other sum which the post-holder may owe to the Trust and, if this is insufficient, the Trust may require payment of the balance.

Superannuation Scheme

The post-holder will be entitled to join or remain in the NHS Superannuation Scheme, which provides:

- A pension and an option to exchange part of pension to cash at retirement, up to 25% of capital value
- Life assurance cover
- Voluntary early retirement benefits
- Ill-health retirement benefits
- Redundancy benefits
- Family benefits
- Option to increase benefits

All pension benefits are based on salary and length of membership of the scheme.

No contribution will be made by the Trust to personal pension plans for those who opt out of the NHS scheme.

Period of Notice: To terminate employment a period of 3 months notice on either side will be required.

23. Equality, Diversity and Inclusion

It is the aim of the Trust to ensure that no job applicant or employee receives less favourable treatment on the grounds of sex, sexual orientation, marital/partnership status, race, religion, age, creed, colour, ethnic origin, disability, part time working status and real or suspected HIV/AIDS status and is not placed at a disadvantage by conditions or requirements which cannot be shown to be justifiable. To this end the Trust has a Diversity in the Workplace Policy and it is for each employee to contribute to its success.

As a minimum the post holder would be expected to complete mandatory training in relation to such topics as Safeguarding, Information Governance and Equality and Diversity.

Employees must be aware of the responsibilities placed on them under the Health and Safety at Work Act (1974), to ensure that agreed safety procedures are carried out to maintain a safe environment for employees, patients and visitors.

24. Support and wellbeing

Support: Local organisational systems are in place to support doctors' wellbeing following serious incidents that involve their patients. This includes nominated senior colleague support, consultant peer group meetings/Balint Groups and suicide reflection groups. A Balint consultant group meets monthly in conjunction with the monthly consultants meeting.

Wellbeing: The post holder will have access to the Occupational Health (OH) Department, (St Ann's Hospital, London N15 3TH, telephone 0208 702 6641, email northmid.behoccupationalhealth@nhs.net). The post holder may self-refer or be referred through their manager.

General support and advice: 020 8702 6330 - the post holder can call this number to ask about pay, leave and any other non-clinical information. This line will be staffed 9am-5pm, Monday to Friday by the Workforce and other corporate services teams.

Psychological support: 020 8702 4050 - the post holder can call this number if they are feeling anxious about the current context whether it relates to work or outside of work and they want to speak to someone confidentially other than their line manager or colleagues. This confidential line is staffed by a rota of BEH psychological therapists at set times in the day: 9-10am and 1-2pm, Monday to Friday (excluding Bank Holidays) and will automatically switch through to the next available clinician.

Outside of these times, the post holder can call our Employee Assistance Programme which provides a range of support including counselling and is available 24/7 on 0800 174319.

Supporting the wellbeing of the post holder after serious incidents that involve patients in their care (e.g., homicide or suicide) is paramount, and our borough Clinical Director or Professional Medical Lead can provide support and advice as needed after the incident.

About Barnet, Enfield & Haringey Mental Health NHS Trust and North London Mental Health Partnership

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25. About BEH MHT (Barnet, Enfield and Haringey Mental Health NHS Trust)

Formed in 2001 through the merger of its predecessor organizations, Barnet, Enfield and Haringey Mental Health NHS Trust (BEHMHT) continues to innovate and develop at a fast pace. We are a large mental health trust in London with an annual budget of £337 million and employing more than 3,300 staff. We serve a population of 1.2 million and operate from over 20 main sites in the community. In 2020-21 the trust cared for more than 126,176 people: approximately 2,800 patients on our wards and over 128,388 service users in the community.

We provide a wide range of local and more specialist mental health services, including helping people with serious mental illness (SMI), personality disorders, drug and alcohol recovery, children's mental health issues, dementia, eating disorders, learning disabilities, ADHD and suicide prevention.

A CQC inspection in 2019 rated the Trust as "good" for the first time and again "good" in February 2022, reflecting the dynamism and drive of the developments of the past few years, but also the dedication and resilience of staff during the last years of COVID19. Colleagues joining the Trust will have ongoing opportunity to contribute and shape the service during an exciting period of change and consolidation and the clinical director will be happy to involve them proactively in improving and developing the service in line with partnership strategy.

We also run the North London Forensic Service (NLFS), which the Care Quality Commission (CQC) has rated as Outstanding. This service treats and cares for people in the criminal justice system who have mental health conditions. NLFS is also embedded in Pentonville, Wormwood Scrubs and Brixton prisons in London, and Springhill and Grendon prisons in Buckinghamshire

We have a vibrant magazine which represents the diverse, innovative and friendly nature of our trust. <http://staff.beh-mht.nhs.uk/communications/trust-matters-magazine.htm>

The Trust has entered a partnership with Camden and Islington Foundation NHS trust. April 2022 marked the first anniversary of work starting between our Trust and neighbouring Camden and Islington NHS Foundation Trust to build a strong, working partnership. The ambition for the partnership is to make a real difference to our service users, local residents and staff. The postholder will have opportunities to take part in new partnership strategic meetings to develop the North Central London service. Our CEO, Jinjer Kandola MBE has been appointed to be joint CEO for both BEH and Camden and Islington Trust, bringing the two organisations ever closer together, allowing for the joint expertise on Joint Mental Health Provider Review, increased innovation and reduction in barriers with joint initiatives.

We are really proud of our staff and host yearly awards for staff to celebrate their achievements and we frequently have winners at HSJ awards. We are constantly striving to improve the network and systems for maintaining and enhancing the wellbeing of our staff as well as supporting those should they be in need.

We are delighted with the expansion of our peer support programme within the trust having successfully recruited peers support workers to many of our community and inpatient services. We are also investing heavily in voluntary and community sector organizations to deliver mental health support services such as Community such as the 'Wellbeing Together Consortium, Inclusion Barnet, Meridian Wellbeing and Mind in Barnet in Barnet, Mind in Enfield (supported by Alpha specialists), Enfield Voluntary Action and Saheli in Enfield and Hestia and Tottenham Talking in Haringey. The Trust is also proud of its apprenticeship programmes and offers excellent opportunities for career progressions within management roles and specialization.

Our Partnership Vision:

Better Mental Health. Better Lives. Better Communities

Our Partnership Values:



26. North London Mental Health Partnership (NLMHP) Strategy

Barnet, Enfield and Haringey Mental Health NHS Trust and neighbouring Camden and Islington NHS Foundation Trust are working together in a formal Partnership, with a single Chair, Chief Executive and Partnership Executive Team. Our new Partnership Strategy was launched in May 2023. To give our Partnership a clear identify, we are now called the North London Mental Health Partnership and there are plans to seek incorporation as a single entity in the future.

Our new Partnership Strategy sets out how, by working closely together, we can:

- Improve outcomes for our service users, sharing best practice to improve the quality of care and ensure our services are delivered consistently in each borough
- Remove competition between our two Trusts and address mutual challenges collaboratively
- Be a united and powerful voice, nationally and locally, to champion mental health and mental health services in North London, and be at the forefront of national policy developments to highlight the rights and needs of our service users
- Provide more career development opportunities for our staff through our bigger scale and greater range of services
- Provide a single leadership team that works with all of our stakeholders at System, Borough and Neighbourhood level
- Create a new, shared culture and set of values, aimed at providing care that is preventative, compassionate, personalised and trauma-informed
- Make efficiencies through economies of scale and reinvesting resources where they are most needed

By working together closely as the North London Mental Health Partnership, our two Trusts can achieve more for our service users, their carers, our staff and our local communities than we can by working separately. We will continue to engage our service users, carers, staff, partners and local people in co-producing the culture of the Partnership as it develops further, taking the best of both organisations.

Our Five-Year Strategy

Our Purpose

Working with our communities to improve mental health

Our Vision

Better Mental Health. **Better Lives.** **Better Communities**

What is the impact?

People are treated in the right place and at the right time for their needs, and are involved in decisions relating to their care



Aim 1:
We will provide consistently high quality care, closer to home



Aim 2:
With our partners in North London and each Borough we will ensure equity of outcome for all

What is the impact?

The gap in outcomes between people from different backgrounds will be reduced

Our Strategic Aims



Aim 3:
We will offer great places to work, providing staff with a supportive environment to deliver outstanding care



Aim 4:
We will be more effective as an organisation by pioneering research, Quality Improvement and technology

What is the impact?

Staff like the culture at work, they feel they have a consistent team around them, and they have opportunities to develop their career

What is the impact?

The care we offer will use the latest best practice to improve outcomes for all

May 2023

Our Strategic Objectives for 2023/24

We will provide high quality inpatient care in facilities in North London to any service user who needs it

We will be responsive, co-producing care with all our service users and carers, and ensuring all service users have ease of access to the care and support they need

We will lead the improvement of children and young people's mental health care with partners across North London

We will have buildings and estate that provide the most therapeutic environments for care and treatment of service users and for staff to work in



Aim 1:
We will provide consistently high quality care, closer to home



Aim 2:
With our partners in North London and each Borough we will ensure equity of outcome for all

We will extend our work with local communities and voluntary groups to address health inequalities and improve population health

We will improve outcomes for everyone who uses our services, reducing unwarranted variation and ensuring consistency in the delivery of care

We will reduce disparities in care delivery, such as the over-representation of some ethnicities in the use of the Mental Health Act and other restrictive practices

Our Strategic Aims



Aim 3:
We will offer great places to work, providing staff with a supportive environment to deliver outstanding care



Aim 4:
We will be more effective as an organisation by pioneering research, Quality Improvement and technology

We will create a culture where staff are able to bring their authentic self to work and feel truly supported with learning and career development opportunities

As a local anchor institution, we will work with partners, such as educational providers, and our communities to facilitate routes into jobs with us for local people

We will make demonstrable progress towards having leadership and management teams that represent the communities we serve

We will create a learning culture, empowering our teams to undertake research and QI projects and convert these into the delivery of best practice, developing innovative services, and enabling local patients' access to the latest treatment options

We will transform the delivery, efficiency and effectiveness of our organisation through the use of data, technology and implementation of best practice

27. NLMHP Clinical Strategy (including strategy for acute care)

North London Mental Health Partnership is in the process of finalizing its clinical strategy, which includes specific strategic objectives for older adult services which align with current evidence and policy drivers. This element of the strategy was authored jointly by the clinical directors for hospital services in both parts of the partnership. As well as ensuring a consistent, evidence based clinical model, other key priorities include:

- Meeting local needs (using population health intelligence)
- Productivity
- Use of data
- Securing and growing the workforce
- Taking every opportunity to use digital solutions to transform care
- Research, innovation and Quality Improvement
- Meeting challenges including demand and demographic change, workforce and skill mix, estates, net zero and resilience.

28. The Trust Board

The Trust Board consists of eight Non-Executive Directors and eight Executive Directors. The Non-Executive directors are not employees and are not involved in the day-to-day running of the Trust. Non-Executive directors hold other senior positions outside of the Trust and bring knowledge, experience and expertise from other fields, such as accounting, management and organizations outside of the NHS. Their role is to contribute (collectively with the executive directors) to the strategic direction, leadership and management of the Trust, to provide challenge to the executive directors and to bring an independent perspective to the Trust Board.

The executive directors are full-time employees of the Trust and are the most senior managers responsible for its day-to-day running. They decide the future strategy and direction of the Trust, are accountable to independent regulators, and are responsible for ensuring clinical and corporate effectiveness. Each executive director has their own area of responsibility. Chief Executive Jinjer Kandola started in her role in 2018 and has since established a track record of successful transformation. Up to date information on Trust Board members can be found at

<http://www.beh-mht.nhs.uk/trust-board-profiles.htm>.

29. Visiting Arrangements

Persons qualified and interested in applying for the advertised post are encouraged to obtain further information via the Trust website (<http://www.beh-mht.nhs.uk>) or to contact our service in person. Further information regarding the advertised post can be obtained from the Associate Clinical Director for Enfield, Dr Ekaterina (Kate) Doukova, (ekaterina.doukova@nhs.net) or the Clinical Director for Hospital Services, Dr Ed Beveridge, (ed.beveridge@nhs.net) or the Clinical Director for Enfield Community Services, Dr Antonio Albanese, (antonio.albanese1@nhs.net). The Enfield Service Lead for Older Adult Services, Stephen Godfrey (stephen.godfrey1@nhs.net) can also be contacted.

30. Approval of this job description by the Royal College of Psychiatrists

This job description and person specification was submitted for approval by the Royal College of Psychiatrists regional advisor in **March 2024**. Approval is awaited.

31. Person specification/Selection Criteria

	Essential	Desirable
Qualifications	MB BS or equivalent qualification	Qualifications or higher degree in medical education, clinical research or management Open Dialogue Training Additional clinical qualification
Eligibility	Full Registration with the General Medical Council (GMC) with a current licence to practise from the GMC at intended start date Included on the GMC Specialist Register OR within six months Approved clinician status OR able to achieve within 3 months of appointment Section 12 Approved or able to achieve within three months of appointment	In good standing with GMC with respect to warning and conditions on practice
Transport	Holds and will use valid UK driving licence OR provides evidence of proposed alternative	
Clinical skills, knowledge and experience	Excellent knowledge in specialty Excellent clinical skills using bio-psycho-social perspective and wide medical knowledge Excellent oral and written communication skills in English	Wide range of specialist and sub-specialist experience relevant to post within NHS or comparable service

	<p>Able to manage clinical complexity and uncertainty</p> <p>Makes decisions based on evidence and experience including the contribution of others</p> <p>Able to meet duties under MHA and MCA</p>	
Academic Skills and lifelong learning	<p>Able to deliver undergraduate or postgraduate teaching and training</p> <p>Ability to work in and lead team</p> <p>Demonstrate commitment to shared leadership and collaborative working to deliver improvement.</p> <p>Participated in research or service evaluation.</p> <p>Able to use and appraise clinical evidence</p> <p>Has actively participated in clinical audit/quality improvement programmes.</p>	<p>Able to plan and deliver undergraduate and postgraduate teaching and training relevant to this post</p> <p>Reflect on purpose of CPD undertaken</p> <p>Experienced in clinical research and/or service evaluation</p> <p>Evidence of achievement in education, research, audit and service improvement: awards, prizes, presentations and publications.</p> <p>Has led clinical audits leading to service change or improved outcomes to patients</p>
Information Technology Experience & Skills	<p>Basic computer skills, including ability to use e-mail and Internet</p>	<p>Experience in data gathering and management</p>

32. Other key information about working at BEHMHT/NLMHP

Conflict of Interest

All applicants to any post within the Trust are required to declare involvement directly with any firm, company or organisation which has a contract with the Trust. Failure to do so may result in an application being rejected or, if discovered after appointment that such information was withheld, this may lead to dismissal.

Mobility

As an employee of this organization you may be asked to carry out duties at any of its establishments, at any time throughout the duration of your contract.

Customer Awareness

Barnet, Enfield & Haringey Mental Health NHS Trust expects its employees to communicate to colleagues, patients and visitors in a polite and courteous manner at all times.

Criminal Record

In view of the nature of the work, this post is exempt from the provision of Section 4 (2) of the Rehabilitation Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exemption order 1975). Applicants are therefore not entitled to withhold any information about convictions including those which for other purposes are “spent” under the provisions of the Act. You are therefore required to declare any pending prosecutions, convictions or cautions you may have, even if they would otherwise be regarded as “spent” under this Act. In event of employment, failure to disclose such convictions could result in dismissal or disciplinary action by the Authority. Relevant information should be sent to the Trust’s Medical Director, in an envelope marked for his personal attention and will be completely confidential and be considered only in relation to an application for positions to which the order applies.

If the post you are applying for also involves substantial access to children, the Trust is entitled, under arrangements introduced for the protection of children, to check with the police for the existence and content of any criminal record of the successful applicant. Information received from the police will be kept in strict confidence and will be destroyed immediately the selection process is completed.

This disclosure of a criminal record, or other information, will not debar you from appointment unless the selection panel considers the conviction renders you unsuitable for appointment. In making the decision the Trust will consider the nature of the offence, how long ago and what age you were when it was committed and any other factors which

may be relevant, including appropriate considerations in relation to the Trust's published Equal Opportunities Policy.

Failure to declare a conviction, caution or bind-over may, however, disqualify you from appointment, or result in summary dismissal/disciplinary action if the discrepancy comes to light. If you would like to discuss in confidence the effect any conviction might have on your application, please contact a Senior Officer in the Personnel Department for advice.

Safeguarding Children and Vulnerable Adults

Safeguarding is everyone's responsibility, and all employees are required to act in such a way that at all times safeguards the health and wellbeing of children and vulnerable adults. Familiarisation with, and adherence to, the appropriate organisational Safeguarding Policies and any associated guidance is an essential requirement of all employees as is participation in related mandatory/statutory training. All employees must ensure that they understand and act in accordance with this clause. If you do not understand exactly how this clause relates to you personally then you must ensure that you seek clarification from your immediate manager as a matter of urgency. Equally, all managers have a responsibility to ensure that their team members understand their individual responsibilities with regard to Safeguarding Children and Vulnerable Adults.

Health

If successful in being appointed to a post, all employees MUST report to the Occupational Health Department within two weeks of starting in post. All Employees who perform "exposure prone procedures" should be immunised against Hepatitis B. Antibody response should be checked on a regular basis. Failure to attend for review with the Occupational Health Department or failure to comply with the regulations pertaining to Hepatitis B may result in an employee being suspended from duty. For further information, either contact the HR Department or the Occupational Health Department. All matters discussed will remain confidential.

Infection Control

All staff will be expected at all times to practice in accordance with the infection control standard specified in the policies of the organisation.

Risk Management

All staff have a responsibility to manage risk within their sphere of responsibility.

No Smoking

BEH-MHT operates a "No Smoking Policy" which does not allow smoking at work or on any Trust property.

Personal Property

The Trust cannot accept liability for loss or damage to personal property on official premises by burglary, fire, theft or otherwise. Staff are therefore advised to take out an insurance policy to cover personal property.

Private Practice

All Consultants undertaking private practice should adhere to the national Code of Conduct for Private Practice.

Standards of Business Conduct for NHS Staff and Codes of Conduct

You are required to act at all times in accordance with the relevant professional Codes of Conduct and Accountability (including, where applicable, those for Board Members). In addition, all management staff must comply with the Code of Conduct for NHS Managers. All staff are required to act in accordance with the rules and regulations as described in the organisation's Standing Orders and Standing Financial Instructions.

The organisation reserves the right to report any activity, incident or suspicion of behaviour likely to be deemed a breach of a professional code of conduct to the appropriate professional body. This decision as to whether such a report will be made will only be taken by the appropriate service Director after he/she has fully considered the available facts. At all times, the safety of the public, staff and the reputation of the employing organisation and the wider NHS will be key points for consideration before any report is made.

Mandatory Training

All staff are required to attend any training designated by the organisation and/or service as mandatory (compulsory) for the position held or to provide evidence of previous, recent equivalent training at a level appropriate to the post held.

Satisfactory Clearances

For all posts where the appointment is subject to satisfactory clearance via the Criminal Records Bureau or Independent Safeguarding Authority, or any other successor agency, it should be clearly understood that the postholder must maintain satisfactory clearance status throughout his/her employment in the post.

Professional Registration

With respect to any post for which the appointment is subject to holding a specific professional registration, as set out in the person specification for the post, it should be clearly understood that the postholder must maintain

Improving Working Lives

The Trust is committed to Improving Working Lives of all staff and wherever possible will endeavour to accommodate requests for specific working patterns taking into account service needs.

Staff Involvement

Barnet, Enfield & Haringey Mental Health NHS Trust is in the process of applying to become a Foundation Trust. Staff are encouraged to participate in the application process.

The Trust, in turn, is committed to involving staff at all levels in the development of the organisation. It continually strives to improve internal communication systems and encourage staff involvement in organisation and service developments – including business planning – to enable its staff to influence discussions which affect them and their working conditions.

Policies and Procedures

All employees, at all times are subject to the policies and procedures of this organisation.

Confidentiality and Data Protection

In accordance with the Data Protection Act (1998), the Trust is authorised, if required to do so, to obtain, process and/or use information held on a computer in a fair and lawful way. The Trust is authorised to hold data only for the specific registered purpose.

Barnet, Enfield & Haringey Mental Health Trust attaches the greatest importance to patient confidentiality and to the confidentiality of personal health data, and other data held and processed by the Trust. All data should be treated as confidential and should only be disclosed on a need to know basis. Some data may be particularly sensitive and is the subject of a specific Trust policy, including information relating to the diagnosis, treatment and/or care of patients, individual staff records and details of contract prices and terms.

Under no circumstances should any data be divulged or passed on to any third party who is not specifically authorised to receive such data. Due to the importance that the Trust attaches to confidentiality, disciplinary action will be taken for any breach of confidentiality. All members of staff are expected to comply with national legislation and local policy in respect of confidentiality and data protection. All employees should be mindful of the six-information management Caldicott principles when dealing with Trust data and person identifiable information.