

CONSULTANT IN OLD AGE PSYCHIATRY, CMHT KIRKLEES

Job description and person specification

Post and specialty:	Consultant in Old Age Psychiatry, CMHT Kirklees
Base:	Beckside Court, Dewsbury, WF175PW
Contract:	10 programmed activities (part time or job share may be considered) On-call consultant rota for North Kirklees
Accountable professionally to:	Medical Director, Dr Subha Thiyagesh
Accountable operationally to:	Medical clinical lead, Dr Moe Kapoor, who has line management responsibility, and the general manager, Ms Alison Gibbons
Key working relationships and lines of responsibility:	General Manager: Ms Alison Gibbons Medical Clinical Lead: Dr Moe Kapoor Deputy Director of Operations- Calderdale & Kirklees: Chris Lennox Medical Director & Responsible Officer: Dr Subha Thiyagesh Director of Operations: Ms Carol Harris Interim Chief Executive: Mr Mark Brooks
Visiting arrangements (key contact numbers, trust website etc.)	Candidates wishing to find out more about the post are invited to speak to: Dr M Kapoor, Clinical Lead / Consultant Psychiatrist - Tel: 01484 343129 / moe.kapoor2@swyt.nhs.uk Dr S Thiyagesh, Medical Director - Tel: 01924 327138 / subha.thiyagesh@swyt.nhs.uk Candidates are encouraged to visit the department by arrangement with Dr Kapoor Reasonable travel and subsistence expenses will be reimbursed for any one such visit only to those candidates selected for interview. Short listed candidates who visit the Trust on a second occasion, prior to the interview or at the specific request of the Trust Officers will be granted travelling and appropriate subsistence on that occasion also. In the case of candidates travelling from abroad, travelling expenses are normally paid only from the point of entry to the UK.

1. Introduction

We are a specialist NHS Foundation Trust that provides community, mental health and learning disability services to the people of Barnsley, Calderdale, Kirklees and Wakefield. The Trust also provides some medium secure (forensic) services to the whole of Yorkshire and the Humber.



Over 1.2 million people live in Barnsley, Calderdale, Kirklees and Wakefield across urban and rural communities from a range of diverse backgrounds. We aim to match the community's needs with locally sensitive and efficient services and we always keep the person in the centre so that our services are effective and efficient.

Table: Population and Population density for LA's covered by the Trust

District	Area km ²	Population	Population density/km ²
Barnsley	329.1	245,199	745.1
Calderdale	363.92	210,082	577.3
Kirklees	408.61	438,727	1073.7
Wakefield	336.61	345,038	1025.0

We work with other local NHS organisations to provide comprehensive health care to people in our area. We also work closely with local authorities (social care) and with other government departments and voluntary organisations. Working in partnership is very important to us and is vital if we are to continue delivering high quality services for local people.

Working in partnership also means working with the members of our foundation trust, who can have a say in how we run the Trust and how they wish our services to be developed. Around 14,300 local people (including our staff) are members of our Trust.

2. Trust details

South West Yorkshire Mental Health NHS Trust was formed 1st April 2002 and became South West Yorkshire Partnership NHS Foundation Trust on 1st May 2009. This brought together Mental Health & Learning Disabilities Services within the populations of Wakefield, Kirklees and Calderdale.

Through Transforming Community Service (TCS) in early 2011 we acquired further services and now include the population of Barnsley for the provision of Mental Health and Learning Disability Services and also provide Community Physical Health Services in Barnsley and Wellbeing Services in some areas of the Trust.

We have an income in excess of £220million and our services are provided from approximately 85 sites by more than 4,400 clinical and non-clinical staff and cover a combined population of over 1,200,000. The medium secure services are delivered to a wider geographical area.

Services are commissioned by 5 local Clinical Commissioning Groups and 4 Local Authorities (the forensic services is commissioned by NHS England through the Area Team) and are delivered primarily on a locality basis with an overall Trust management structure.

We are committed to a clear leadership and management framework with our Trust Board being responsible for the strategic direction of the organisation and professional leadership and development for medical staff being led by our Medical Director.

Our management structure is based around business delivery units which are led by Ms Carol Harris, Director of Operations:

Forensic & CAMHS & Specialist Services include the service lines of: medium secure; low secure mental health; low secure Learning Disability services; forensic CAMHS; CAMHS; Learning Disability; and ADHD & ASD.

Kirklees & Calderdale services include the service lines of: working age adults acute; working age adult community; and older people.

Barnsley services include the service lines of: community mental health and functional older people; mental health acute; mental health older people & specialist; and community & physical health.

Wakefield services include the service lines of: working age adults and older people acute and working age adult and older people community.

We are all dedicated to:

Our vision
To provide outstanding physical, mental and social care in a modern health and care system

Our mission
We help people to reach their potential and live well in their

Our values

Our behaviours



For more information about us see <http://www.southwestyorkshire.nhs.uk/> and watch our film 'with all of us in mind' at: www.youtube.com/swypt. It features our staff and service users and brings our values and philosophy to life.

3. Service details – Kirklees Older People’s Service (OPS)

Inpatient-service

In-patient services are provided at one site at Priestley Unit, Dewsbury & District Hospital. A 30 bedded area split into a 15 bedded female ward and a 15 bedded male ward, both providing functional and organic beds.

Kirklees Outreach Team (KOT)

The aim of the service is to:

- Provide a timely and effective response to crisis and risk of relapse, and provide intensive home based treatment where this will meet the needs of those in crisis
- Enable people to live within the community, in the residence of their choice for as long as is safe to do so, taking into consideration the use of assistive technologies, care and support from family and/or carers and minimisation of risk to themselves and others
- Reduce frequency and duration of hospital admissions
- Facilitate the timely discharge from hospital of those service users requiring admission
- Promote recovery and prevent relapse.

Gate Keeping - KOT hold a gatekeeping role and function for those people with an open referral to OPS secondary mental health services. This will involve screening all potential admissions to ensure that KOT is considered prior to admission. There are some agreed exemptions to the need for a gatekeeping assessment including planned admission for ECT and commencement of Clozapine therapy.

Patients new to services with no current open referral will be gate kept by the IHBTT.

KOT also have a dedicated in-reach worker – who works closely with the inpatient unit to promote timely discharge. They offer a range of therapeutic interventions and work closely with other agencies. Where medical intervention/advice is required outside normal working hours, KOT will access the on-call psychiatrist.

Memory Monitoring Service

The memory monitoring service provides assessment and management of patients with memory problems regardless of age. The service is responsible for the initiation and monitoring of anti-dementia medication and has limited access to more comprehensive psychometric testing. In addition it signposts to appropriate care packages including referral to day care, CMHT, social services and voluntary services such as Alzheimer’s Society.

Psychology

Psychology input is limited and at present is provided in the memory service for neuropsychological assessment. In KOT for psychological support whilst in crisis. In the CMHT for support with some therapy and formulation. In the inpatient ward.

Care Home Liaison Team

This is a multidisciplinary team that works across Kirklees and provides consultation, assessment, management to the residents of residential and nursing homes as well as education and support to care home staff.

Early Onset Dementia Team

This is a joint team between older peoples services in Kirklees and the Kirklees Social Services that provides assessment and joint care packages for patients with early onset dementia.

Outpatient Facilities

The outpatient facilities are based at Priestley Unit North Kirklees area and Folly Hall base in the centre of Huddersfield.

Social Daycare

Through Kirklees Local Authority and the local VCS services, Most is provided Monday to Friday 9am-5pm.

Single Point of Access (SPA)

SPA is a gatekeeper to secondary care community mental health services and will positively engage people referred to secondary mental health services. SPA is a multi-disciplinary team which undertakes screening, triage and initial assessment for urgent and routine referrals to community mental health services. Appointments will be prioritised on need and can range between seeing someone the same day and /or up to 72hrs after the receipt of a referral.

Following initial triage, SPA staff will either allocate to a service within the mental health community services, signpost out of secondary care mental health services or, if required, refer to IHBTT for a crisis (within 4 hours) assessment.

For those referred into secondary mental health, the Single Point of Access will ensure that they:

- Provide equitable access to mental health services for all patients
- Provide a standardised referral and assessment process
- Are a clear, consistent and accessible route of referral for all referrers
- Increase service quality, productivity and efficiency
- Facilitate positive relationships with referrers
- Assist those referred to find help to live well in their community and consider alternatives to specialist mental health services where appropriate.

The medical staff as part of adult core pathway will contribute towards assessment, formulation and diagnosis. The medical staff will work in collaboration with other professionals within the core pathway as part of the SPA MDT to aid formulation and appropriate signposting of service users.

For details of all our Trust services, go to: <http://www.southwestyorkshire.nhs.uk/our-services/>

4. The post and local working arrangements

We are seeking a consultant psychiatrist to join the North CMHT Older People's Team in Kirklees. This 10PA post has been created as an additional post to deal with an extra demand on the services. North Kirklees area will be split between the two consultant posts.

The Kirklees OPS has been in a process of service review and transformation since December 2010 when the functional model was implemented in full. This process of service transformation is likely to continue in line with the Trusts need to comply with national policy and local commissioning agenda.

There are 2 OPS CMHTs, each covering a geographical sector population of 13-16,000 and operates a single point of entry. Previously CMHTs were supported by 3 consultants which will now be supported by 4 consultants, 2 in North Kirklees and 2 in South Kirklees

The medical staffing of the 2 CMHTs includes:

4 wte consultant psychiatrists (includes this post)

2 wte specialty doctors

1.5 CT1-3 trainees from the West Yorkshire psychiatry rotation / GPSTS rotational training scheme or Trust Grades.

Care Home Liaison Team

The CMHT consultants do not specialise at present, they respond to the medical needs of the service users within their geographical sector, thus inputting into specialised team (Care Home Liaison Team) as and when required. The post holder is not expected to provide regular input to the Care Home Liaison Team as there is a specialty doctor who provides input to the Care Home Liaison Team for 4 sessions. Average referral rate is around 25- 30 patients per month to the team.

The Care Home Liaison Team consists of:

- Band 7/O.T. – 1.00 WTE
- Band 6/CPN – 1.00 WTE
- Band 6/CPN – 1.00 WTE
- Band 6/CPN – 0.49 WTE
- Band 5/CPN 1.00 WTE
- Band 5/CPN 1.00 WTE
- Band 3/HCA – 1.00 WTE
- Band 7/Dietitian also sits within the service but provides service OPS wide - 0.80 WTE

Community Mental Health Team

The post holder will join the North Kirklees CMHT for Older people covering a geographical sector population of 13-16,000 and expected to hold a caseload of approximately 200. There is an equitable caseload between the 2 consultants based on GP patch and referral rates. The post holder will have no responsibility for inpatient except in the event of cross cover.

The post holder will share the input from a specialty doctor and will provide the supervision to the specialty doctor. There is no dedicated junior doctor for this post. The specialty doctor provides input to the CMHT, memory and Kirklees outreach team. She also reviews patients at home and in outpatient clinics.

In addition to reviews in clinic, there are typically 2-3 home visits per week. All referrals are initially seen by a community psychiatric nurse prior to being seen in clinic or at home, unless there is an urgent need to see a doctor in the first instance (e.g. Mental Health Act assessments). Average referral rate is around 50 patients per month to the team.

The North CMHT OPS Team consists of:

- 1 wte Consultant this post-
- 1 wte Consultant – Dr Uwaifo

- 1 wte Specialty doctor - Dr Sarin
- 1 wte Team Manager – Ms Judith Megson
- 5.8 wte Band 6 Nurse - plus 0.91 out to advert
- 1.8 wte Band 5 Nurse
- 2.0 wte Band 3 Health Care Worker- 2.0 HCA
- 1.0 wte Band 6 Occupational Therapist- across NK and SK
- 1.0 wte Band 4 Management Assistant (shared with CHLT)
- 1.4 wte Band 3 Team Secretary
- 1.0 wte Band 4 Med Secretary

Memory services

The post holder has input into the memory service referrals. The Kirklees Memory Service was developed from two separate teams, one from North Kirklees, and another from South Kirklees. The two teams amalgamated to become one central service covering the whole of the Kirklees geographical area.

The team is based at Folly Hall, Huddersfield, but staff also work from Becksid Court, Batley and also hold clinics at Dewsbury District Hospital to accommodate the service user needs. The memory service focus is assessment, diagnosis and treatment with one of the cholinesterase inhibitors to the point of stabilisation.

The multi- disciplinary team consists of:

- Consultant psychiatrists
- Team Manager
- Management assistant
- 2.02 WTE Memory Nurses
- 2.00WTE Advance Nurse Practitioners
- 1.6 WTE Occupational Therapists (Shared with Admiral Nurse Team)
- 2.57WTE Non-Medical Prescribers
- 1.00WTE Team Secretary
- 0.80WTE Consultant Clinical Psychologist

The Kirklees memory service has a dedicated early onset dementia team, made up of x3 nurses, x2 social workers and a support worker.

The memory service receives approximately 120 referrals a month and has a structured clinic plan in place to meet demand. The clinics offered are in the form of home visit, one stop shop, ANP clinics, initial assessment clinic and OT specific assessments to enable service user choice. Assessments are now conducted either by telephone, remotely or face to face.

Kirklees Outreach Team (KOT)

The post holder is expected to provide input to the Kirklees Outreach Team (KOT) alongside the other Consultant Psychiatrist, with an equitable share of the caseload. The specialty doctor also provides input to the team. Kirklees Outreach Team (KOT) has been developed by South West

Yorkshire Partnership NHS Foundation Trust (SWYPFT) to deliver a specialist crisis mental health service for Older People with Mental Health problems (functional or organic).

The service offers intensive home-based treatment as an alternative to hospital admission, thus allowing service users and carers to be supported in the least restrictive environment with the minimum disruption to their lives.

The KOT team consists of:

- Team Manager x 1 (1.0 WTE)
- Band 6 Community Mental Health Practitioners x 8 (7.4 WTE)
- Band 5 Community mental health practitioners x 4 (3.0 WTE)
- Specialist Occupational Therapist x 1 (1.0 WTE)
- Clinical Psychologist x 1 (0.61 WTE)
- Health Care Assistants x 3 (2.2 WTE)

- Management Assistant x 1 (0.33 WTE)
- Team Secretaries x 2 (1.0 WTE)

Referrals:

Typically between 3- 5 each week.

Medical Responsibility

Whilst under the care of KOT, medical management will be the responsibility of the post holder for North Kirklees sector.

Where an existing in-patient is supported during leave periods by the KOT the in-patient psychiatrist retains medical responsibility.

Where medical intervention/advice is required outside normal working hours, KOT will access the on-call psychiatrist.

Consultant psychiatrist colleagues that the post holder will work closely with are as follows:

- North Kirklees CMHT – Dr Imagbe Uwaifo
- Kirklees OPS Inpatient – Dr Adrian Winrow
- Kirklees OPS Inpatient – Dr David Brodie
- Kirklees South CMHT – Dr Moe Kapoor
- Kirklees South CMHT – Dr Viji Saravanan

5. Continuing professional development (CPD)

- There is an expectation for all our consultants to remain in good standing for CPD with the Royal College of Psychiatrists.
- We are committed to supporting CPD in accordance with the Royal College of Psychiatrists guidelines and the post holder is required to belong to an appropriate peer group.
- Appropriate internal and external study leave is supported (averaging 10 days per year and up to 30 days leave over 3 years) and applications should be submitted on the appropriate Trust forms and authorised in accordance with the Trust's Medical Staff Study/Professional Leave Procedures as approved by the Joint Negotiating Committee and obtained on the Trust intranet. Reasonable expenses are paid where incurred as detailed in the procedures.

6. Clinical leadership and medical management

- Professional responsibility for the medical staff lies with the medical director.
- Operational responsibility for the medical staff lies within the Business Delivery Units (BDUs). A Deputy District Director lead the BDU who have a 'Trio' for each of their service lines. The Trios comprise of a medical clinical lead, a general manager and a Quality & Governance Lead.
- Operational accountability for the post holder lies with the medical clinical lead, who has line management responsibility, and the general manager for the service.
- Consultants work as part of a collective leadership model at a team level comprising the team manager and senior clinicians as appropriate.
- While primarily responsible for delivering a quality clinical service, the post holder is also expected to 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.

7. Induction, appraisal and job planning

- Attendance at the Trust's Welcome Event and undertaking a local induction on commencement in post is required.
- Mentoring arrangements can be arranged within the Trust with a number of doctors being trained and experienced. Mentors outside the Trust can also be supported.
- The Trust is committed to medical revalidation and appraisal and the post holder is required to undergo annual appraisals to support the revalidation process and continuous improvement of services. The appraisal process is in accordance with the Trust's Medical Appraisal Policy, as approved by the Joint Negotiating Committee and obtained on the Trust intranet.
- The Responsible Officer for the Trust is the Medical Director, who is supported in the development, implementation and operation of the process by the Associate Medical Director for Revalidation.
- Annual job planning will be undertaken jointly by medical clinical lead and the general manager. The job planning process is in accordance with the Trust's Job Planning Policy, as approved by the Joint Negotiating Committee and obtained on the Trust intranet.

8. Teaching and training

- Doctors in training are placed in the Trust from the Leeds and Wakefield Rotational Training Scheme; the Dewsbury, Halifax and Huddersfield Rotational Training Scheme; the Barnsley and Sheffield Rotational Training Scheme; the Local Vocational (General Practitioner) Training Scheme; or the Foundation Year 1/2 schemes.
- Medical students and trainee physician associates are placed in the Trust from the University of Leeds and the University of Sheffield.
- The Trust is designated as Associated Teaching Trust for The University of Leeds.
- The Trust has the following medical educational/training leadership roles:
 - Director for Medical Education – Medical Director
 - Associate Medical Director for Postgraduate Medical Education – trust-wide
 - SAS Tutor – trust-wide
 - College Tutor - Calderdale & Kirklees
 - College Tutor – Wakefield
 - College Tutor – Barnsley
 - Guardian for Safe Working – trust-wide

- Associate Medical Director for Undergraduate Medical Education – trust-wide
 - Undergraduate Tutor – Barnsley
- Details of the individuals are provided on appointment as appropriate to role and location.

9. Research

- The research and development department, based at Fieldhead in Wakefield, is a single point of contact for all Trust research related enquiries and is responsible for management, facilitation, governance of all the research that happens in the Trust.
- Ideas for research come from those who are working in services and from service users. The emphasis within the Trust is on practice-based research and everyone can be involved.
- The Trust is committed to supporting research and development activities and there are close links to the Comprehensive Local Research Networks and other appropriate organisations engaged in research, e.g local Universities; other NHS Trusts; social care organisations; and appropriate commercial organisations.
- The R&D department give practical guidance and support to anyone who'd like to become more active in research and anyone interested in taking part in or leading on an NIHR clinical research network portfolio study, can contact the clinical research officers for assistance.
- Educational and research links with academic institutions will be encouraged and supported in agreement with the medical director.

10. Clinical governance

- The post holder will be expected to take part in appropriate Quality Improvement activities including audit/service evaluation activities; be involved in the development, review and support the implementation of Trust policies and procedures; and participate in the development of clinical governance and robust clinical risk management systems within their Business Delivery Unit.
- Participation or contribution towards relevant Trust groups, depending on the post holder's interests, is encouraged.

11. Mental Health Act and Responsible Clinician approval

- The post holder would be expected to be approved as a Responsible Clinician or be willing to undertake training to obtain Section 12(2) MHA status and will be expected to renew this approval according to agreed procedures.

12. Secretarial support and office facilities

- The post holder will use a dedicated medical office within the Beckside Court, Bradford Road, Dewsbury, West Yorkshire, WF17 5PW). The office will be shared with 1 other consultant, in line with the Trust's agile working policy.
- Separate bookable offices are available for quiet work, confidential telephone calls, case discussions, supervision and dictation.
- The post holder will have access to relevant agile working equipment to support working at the appropriate locations across the Trust.
- Administrative support is provided on site from a medical secretary. It is expected that the secretary will provide administrative support to the post holder to ensure that College guidance regarding letters and report are met, and to assist the post holder with diary management and non-clinical activities.

13. Clinical duties of post holder

- The post holder will provide Consultant level clinical input predominately to service users from the North Kirklees CMHT sector, assessing and managing service users with higher risk complex presentation and multiple needs and those who require psychiatric management including medication and will occasionally have a care co-ordinating role for some service users.
- Share in the provision of a comprehensive psychiatric service including responsibility for the diagnosis, risk management and treatment of mental disorder including preparing reports for and participating in Mental Health Act and other regulatory processes.
- Provide direct clinical activity for diagnosis, assessment and treatment in the memory clinic to the north Kirklees sector.
- To take clinical responsibility as a Responsible Clinician for the assessment and management of service users within the service.
- Liaise with inpatient service to ensure the smooth transfer and continuity of care and plan aftercare and follow up arrangements as part of discharge planning using CPA (Care Programme Approach) process.
- Undertake Mental Health Act and Mental Capacity Act assessments and reviews as required.
- Comply with statutory duties of the post as required by the Mental Health Act 1983 and the Mental Capacity Act 2005, and to provide clinical leadership to the teams in this area.
- Accept clinical responsibility for service users passing the age of 65 after appropriate discussion with the WAA service and based on the individual needs of the service user and within the Trust transitional protocol.
- The post holder should work flexibly, be accessible and provide appropriate response to service users in the community within the target times of urgent response and those who have to be seen within 14 days.
- To actively participate in the development and management of the pathway and multidisciplinary team.
- Participate in the development of clinical governance and robust clinical risk management systems within the Business Delivery Unit.
- Provide expert advice and a consultation service on clinical issues.
- Provide a second opinion for colleagues for service users from the same or other areas of the Trust and where appropriate and by agreement provide treatment and care.
- Offer a consistent response to referrer/patients regardless of origin of referral in a timely fashion
- Deliver evidence based treatments
- Be a member of joint collaborative forums with representatives from primary care and third sector organisations
- Work closely with primary care providers to improve liaison between primary care and secondary care services
- Act as Approved Clinician (AC) for all patients detained under the Mental Health Act
- Provide continuing clinical responsibility for the patients in his/her charge allowing for all proper delegation and training of members of staff accountable to the post holder
- Provide specialist advice and support to patients, carers and professionals
- Share in the provision of a comprehensive psychiatric service including responsibility for the diagnosis, risk management and treatment of mental disorder including preparing reports for and participating in Mental Health Act and other regulatory processes.
- Provide empathy, reassurance and communicating hopefulness
- Communicate complex and sensitive information to patients, carers and professionals, including information about diagnosis and prognosis, finding ways of enabling patients and their families to understand the information

- To deliver services in a manner that is appropriate, relevant and respectful to all community members, recognising diversity of ethnicity, culture, belief, privilege and capacity
- The post holder should work flexibly, be accessible and provide appropriate response to patients.

14. Teaching and Training duties

- Participation in undergraduate and postgraduate clinical teaching.
- Participation in the training of other disciplines.
- Provide educational supervision of trainees and other disciplines as appropriate.
- Where designated as clinical and/or educational supervisor for doctor in training, the post holder will be required to complete and maintain the appropriate training and appraisal for the role and provide supervision of 1 hour per week, per doctor.
- Where SAS doctor supervisor, the post holder will be expected to provide supervision of 1 hour per week as a minimum.

15. Clinical Governance and Quality Improvement

- Contribute to clinical governance and setting and monitoring standards.
- Participate in clinical audit and quality improvement activities
- Participate in service/team evaluation and the planning of future service developments.

16. General duties (not covered elsewhere)

- Provide professional advice to managers as appropriate.
- Actively participate in the development and management of the multidisciplinary team.
- Horizon scan and support the early adoption of new practice and service models.
- Continually update knowledge and skills in line with advances in the field in order to meet Trusts evolving service objectives.
- Ensure that doctors in training working with the post holder operate within the parameters of the 2016 Junior Doctors Contract and are New Deal and are Working Time Directive compliant.
- Undertake the administrative duties associated with the care of patients.
- Record clinical activity timely, accurately and comprehensively.
- Participate in service and business planning activity for the locality and, as appropriate, for the whole Trust.
- Attend and participate in the academic programme of the Trust, including lectures and seminars as part of the internal CPD programme.
- 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.
- Comply with the Trust's agreed policies, procedures, standing orders and financial instructions, and to take an active role in the financial management of the service and support the medical director and other directors and managers in preparing plans for services.
- Be involved in the development, review and support the implementation of Trust policies and procedures.
- Take a leading role in the efficient use of resources, work effectively within the Trust policies and meets its commissioning expectations.
- Work in close liaison with the other consultant psychiatrists, teams and services within the Business Delivery Unit.
- Liaise and where appropriate work in partnership with staff from other agencies, including social services, primary care, criminal justice agencies, drug and alcohol services, local

educational establishments, private and voluntary agencies as appropriate, in the planning, providing and assessing programmes of care.

- Cooperate with statutory agencies with the responsibility to protect patients and ensure the issues of risk and safety of patients are assessed and any necessary action is implemented.
- Undertake mandatory training.
- Participate in annual appraisal and job planning.
- Maintain professional registration with General Medical Council. Mental Health Act Section 12(2) approval, and abide by professional codes of conduct.
- Recognise, respect and support the equality diversity of staff, colleagues, service users, carers and the public. Contribute to a working environment which promotes and responds positively to difference and diversity.

17. External duties, roles and responsibilities

- The Trust actively supports consultant involvement in regional and national groups subject to discussion and approval through the job planning process.

18. Other duties

- Due to changes in circumstances, e.g. changes in service needs, the post holder may be required to undertake other duties commensurate with the grade as directed by the medical clinical lead/general manager. Any changes to clinical commitments would include a review of the timetable and would take account of the experience of the post holder and the need for any additional training and would be undertaken in line with the Trust's Job Planning Policy. It is expected that the post holder will not unreasonably withhold agreement to any reasonable proposed changes that the Trust might require.

19. Work programme

- 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 six months with the medical clinical lead and general manager 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 and 2.5 to supporting professional activities however the post holder and medical clinical lead could agree otherwise where appropriate. The ratio will be reviewed through the annual job planning process, as supported by the Trust's Job Planning Policy, which can be obtained on the Trust's intranet.
- The work programme is indicative only.

Day	Time	Location	Work	Category	No of PAs
Monday	0900-1300	Beckside/Community	KOT/ Admin/catch-up	DCC	01
	1300-1500	Priestley unit	Urgent visits/ CPA review	DCC	0.5
	1500-1700		Updates/reading/elearning/ supervision	SPA	0.5
	Total				

Tuesday	0900-1300	Priestley unit	Outpatient clinic Mixed clinic (6 follow up appointments-30minutes each or 1 new patient appointment for 1 hour and 4 follow up appointments – 30minutes each) Administrative duties relating to clinic	DCC	01
	1300-1700	Beckside/Community	Home visits/ Admin	DCC	01
	Total				02
Wednesday	0900-1300		CPD-case conferences/journal club/audit/JAPS/PDP meetings	SPA	01
	1300-1500	Priestley unit	Patient related admin- Requesting investigations, answering patient/ family queries, admin from domiciliary visit, report writing.	DCC	0.5
	1500-1700		Updates/reading/elearning/ supervision	SPA	0.5
	Total				02
Thursday	0900-1300	Beckside	Outpatient clinic Mixed clinic (6 follow up appointments-30minutes each or 1 new patient appointment for 1 hour and 4 follow up appointments – 30minutes each) Administrative duties relating to clinic	DCC	01
	1300-1500	Beckside	CMHT / MDT meeting	DCC	0.5
	1500-1700	Beckside	Updates/reading/elearning/supervision	SPA	0.5
	Total				02
Friday	0900-1300	Priestley unit	Memory Clinic (4 memory diagnostic appointments – 40 minutes each) Administrative duties relating to clinic	DCC	01
	1300-1700	Beckside/ community	Urgent DV's/admin	DCC	01
	Total				02
Direct clinical care					7.5
SPA					2.5
TOTAL PAs					10

- The above timetable serves as a guide to the expected workload. The job itself demands a high degree of flexibility and the ability to respond to urgent needs in a timely manner.
- SPA sessions could include: audit, teaching, research, non-clinical administration and non-clinical supervision, peer group and service development activities. Also includes, where appropriate appraiser role and educational/clinical supervisor role.

20. On-call and cover arrangements

- The post holder will participate in the consultant on-call rota for North Kirklees locality which covers adult, older people and learning disabilities services.
- The current on-call commitment is 1:8 (could vary within the appropriate banding - Category A Medium Frequency).
- There is a 2nd on-call tier comprised of Higher Trainees and SAS doctors, which currently provides partial cover and a 1st full shift on-call tier.
- Cross cover for periods of leave and short-term illness is provided on an equity basis by all consultants as detailed in the Trust's Policy and Procedure for Medical Staff Cross Cover Arrangements, as approved by the Joint Negotiating Committee and obtained on the Trust intranet. Cross cover arrangements will be reviewed at annual job plan meeting.

21. Wellbeing support

- The Trust holds Improving Working Lives status and Investor in People accreditation and the staff wellbeing offer is award winning and the personal wellbeing of all staff is very important so a lot of focus is put on making sure all employees are in a good place, feeling positive and happy. Access is made available to occupational health, physiotherapy, counselling, pastoral and spiritual care, as well as creative and sporting activities for all to get involved in.
- The Trust is committed to health & wellbeing of its staff and recognises the importance of supporting individuals involved in a traumatic or stressful incident. Staff who have been involved in such an event may be affected both personally and/or professionally are made aware of what support is available to them in the short and longer term, both internally and externally. It is also recognised that different individuals will have differing responses to the same event and will therefore require different levels of support.
- Timely job plan reviews will take place wherein there is a change to pre-agreed workload.
- The post holder will have an individualised covid risk assessment to identify needs and support required. In-patient facilities are covid risk assessed and appropriate social distancing are in place as per IPC guidance. Appropriate PPEs are provided for safe working practice. The trust supports remote working where it is identified.

22. General terms and conditions

- The appointment is superannuable unless the post holder chooses to opt out of the NHS Pension Scheme
- The successful applicant will be required to provide cover for colleagues on a mutually agreed basis in respect of absence from duty - planned and unplanned, in line with the Cross Cover Policy
- Annual leave entitlement is six weeks, exclusive of statutory and public holidays. This will increase with seniority in line with Consultants Contract. Details of eligibility for all leave, including maternity, paternity and special leave (bereavement, carer, urgent domestic distress etc) can be provided by the Trust's Human Resources department.

- Rehabilitation of Offenders Act - because of the nature of the work of this post, it is exempt from the provisions of Section 4(2) by virtue of the Rehabilitation of Offenders Act 1974 (Exemption) Order 1975. Applicants are, therefore, not entitled to withhold information about convictions, including those which, for other purposes, are 'spent' under the provision of the Act. In the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by the Trust
- All medical appointments are subject to an enhanced satisfactory disclosure with the Disclosure and Barring service (previously Criminal Records Bureau)
- The private residence must be maintained in contact with the public telephone service.
- The successful candidate will be required to live less than thirty minutes by road from their principal work base, unless the Trust agrees that residence at a greater distance is acceptable.

Where house relocation is necessary to comply with the Trust's requirements on place of residence, reasonable expenses may be met by the Trust if agreed by the Director of Human Resources.

- Schedule 9 of the Consultant Terms and Conditions (England 2003) applies to this post, covering private practice. It is the potholder's responsibility to ensure that they are fully aware of the contents of this schedule before undertaking any private practice

Person specification: Consultant in Old Age Psychiatry

Abbreviations for when assessed: Scr: Screening prior to short-listing SL: Short-listing from application form Pres: Presentation to formal panel
AAC: Advisory Appointments Committee Ref: References OH: Occupational health

	ESSENTIAL	WHEN ASSESSED	DESIRABLE	WHEN ASSESSED
QUALIFICATIONS	MB BS or equivalent medical qualification.	Scr	Qualification or higher degree in medical education, clinical research or management. MRCPsych Additional clinical qualifications.	SL Scr SL
ELIGIBILITY	Fully registered with the GMC with a licence to practise at the time of appointment. Included on the GMC Specialist Register for Older People / Dual training OR within six months of gaining CCT. Approved clinician status OR able to achieve within three months of appointment. Approved under S12 OR able to achieve within three months of appointment.	Scr Scr Scr Scr	In good standing with GMC with respect to warning and conditions on practice	Scr Scr
TRANSPORT	Holds and will use valid UK driving licence OR provides evidence of proposed alternative.	Scr		

	ESSENTIAL	WHEN ASSESSED	DESIRABLE	WHEN ASSESSED
CLINICAL SKILLS, KNOWLEDGE & EXPERIENCE	<p>Excellent knowledge in specialty.</p> <p>Excellent clinical skills using bio-psycho-social perspective and wide medical knowledge.</p> <p>Excellent oral and written communication skills in English.</p> <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> <p>Able to provide clinical leadership to a multi-professional team and liaise with a wide variety of agencies</p>	<p>SL, AAC, Ref</p> <p>SL, AAC, Ref</p> <p>SL, AAC, Ref</p> <p>AAC</p> <p>AAC</p> <p>AAC</p> <p>AAC</p>	<p>Wide range of specialist and sub-specialist experience relevant to post within NHS or comparable service</p>	<p>SL, AAC</p>
ACADEMIC SKILLS & 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>SL, Pres, AAC</p> <p>SL, AAC</p> <p>SL, AAC</p>	<p>Able to plan and deliver undergraduate and postgraduate teaching and training relevant to this post</p> <p>Reflected on purpose of CPD undertaken</p> <p>Experienced in clinical research and / or service evaluation</p>	<p>SL, AAC</p> <p>SL, AAC</p> <p>SL, AAC</p>

	Participated in continuous professional development	SL, AAC	Evidence of achievement in education, research, audit and service improvement: awards, prizes, presentations and publications.	SL
	Participated in research or service evaluation.	SL, AAC	Has led clinical audits leading to service change or improved outcomes to patients	SL, AAC
	Able to use and appraise clinical evidence.	SL, AAC, Pres		
	Has actively participated in clinical audit and quality improvement programmes	SL, AAC, Pres		
PROFESSIONAL & PERSONAL ATTRIBUTES	Demonstrates emotional intelligence and leadership skills.	ACC, Ref	Demonstrates proactive leadership.	ACC, Ref
	Able to work flexibly and efficiently prioritise conflicting demands.	ACC, Ref	Demonstrates problem avoidance /solving skills.	ACC, Ref
	Able to effectively manage time and resources within a team.	ACC, Ref	Has cared for close family / friend with mental health needs.	ACC, Ref
	Able to use electronic records.	ACC, Ref		
	Commitment to annual appraisal and revalidation.	ACC, Ref		
PHYSICAL ATTRIBUTES	Engage in Trust Occupational Health initiatives and act in a manner to protect the Health & Safety of patients and staff. For example, having the flu jab (unless medically contraindicated).	AAC	The Trust is a 'Smoke Free Trust' and the post holder would be expected to lead by example as a non-smoker.	AAC
	Ability to undertake the duties and demands of the post.	AAC, Ref, OH		
	A satisfactory sickness record over the previous 2	AAC, Ref		

	<p>years (subject to the need to act with fairness and equality of opportunity, particularly where the sickness is related to a disability and/or pregnancy).</p> <p>Smart professional appearance.</p>	AAC		
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If a candidate is concerned that the person specification may prevent or restrict their application for employment on the grounds of sex, race, age, sexual orientation, religion/belief or disability, they should initially contact the Appointing Officer or the Trust's Human Resources department. The Trust will seek to resolve the issue wherever possible.

