

CONSULTANT IN GENERAL ADULT (IN-PATIENT) PSYCHIATRY Job description and person specification

Post and specialty:	Consultant in General Adult (In-patient) Psychiatry
Base:	Priestley Unit, Dewsbury and District Hospital, Dewsbury
	10 Programmed Activities plus 1 additional PA subject to annual job plan review for flexibility and acuity
Contract:	(part time or job share may be considered)
	On-call consultant rota for North Kirklees
Accountable professionally to:	Medical Director
Accountable operationally to:	Medical clinical lead, Dr Manoj Mathen, who has line management responsibility, and the general manager, Ms Deborah Eastwood for the service
	Ward/Team Manager: Ms Emily Coll
	General Manager: Ms Deborah Eastwood
	Medical Clinical Lead: Dr Manoj Mathen
Key working relationships and	Deputy District Director – Calderdale & Kirklees: Ms Chris Lennox
lines of responsibility:	Director of Operations: Ms Carol Harris
	Medical Director: Dr Subha Thiyagesh
	Responsible Officer: Dr Adrian Berry
	Chief Executive: Mr Mark Brooks (interim)
	Candidates wishing to find out more about the post are invited to speak to:
	Dr M Mathen, Clinical Lead / Consultant Psychiatrist - Tel: 01422 222827 / manoj.mathen3@swyt.nhs.uk
Key contacts:	Dr S Thiyagesh, Medical Director – Tel: 01924 316305 / subha.thiyagesh@swyt.nhs.uk
	Candidates are encouraged to visit the department by arrangement with Dr Mathen
	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 km²	Population	Population density/km ²
Barnsley	329.1	239,319	727.2
Calderdale	363.92	208,402	572.7
Kirklees	408.61	434,231	1062.9
Wakefield	336.61	333,759	991.5

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 r.

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; ADHD & ASD.

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

Barnsley services includes 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 community"

Our values Our behaviours You can see our values.. ...in how we behave every day Lask questions and listen before acting We put the person first and I make careful decisions and think of my impact on others in the centre I show compassion for others, and for myself Lcollaborate and seek involvement We know that families and carers matter I ask for ideas and opinions and always say thanks I share what I know and respect the info I am given respectful, I keep promises and take responsibility for my actions open, honest and transparent I see diversity as a strength I give clear feedback and meet expectations We improve and aim to be outstanding I actively seek and share ideas I am responsible with resources We are relevant today and ready for tomorrow I work well with others to make improvements

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/swypft. It features our staff and service users and brings our values and philosophy to life

3. Service details – Kirklees Inpatient Service

The Dewsbury (North Kirklees) and Huddersfield (South Kirklees) localities provides services to the residents of Kirklees Metropolitan District which covers a geographical area of 408 square kilometres and has an approximate population of 423,000 (estimate 239,600 aged 18-64 and 57,500 aged 65 and over). The localities are covered by two Clinical Commissioning Groups, North Kirklees and Greater Huddersfield. Acute Services are provided by 2 Trusts, Calderdale & Huddersfield NHS Foundation Trust and Mid Yorkshire NHS Trust.

Most of Kirklees consists of old mill towns such as Huddersfield, Dewsbury, Batley, Cleckheaton and Holmfirth, although there are a few country villages, such as Denby Dale and Emley.

Some parts of Kirklees suffer from high levels of deprivation, such as the east end of Huddersfield and also large areas of Dewsbury and Batley. Kirklees has the highest level of ethnic minorities (approximately 27%) within the Trust's area, with the majority living within the communities located in North Kirklees.

A wide variety of housing is available within the area and there is a mixed education system with Local Authority nursery, primary and comprehensive and selective schools, together with independent primary and secondary education, through to the University of Huddersfield.

The M62 crosses the north of the District, close to Huddersfield and the M1 travels up the east of the District, close to Dewsbury, both provide easy links to the other. The frequent Trans-Pennine service provides a fast link to Huddersfield and Dewsbury from York, Leeds, Manchester, and Liverpool and connections to the main inter-city east and west coast routes make it easy to get to Kirklees from all parts of Britain.

Acute Admissions

The working age adults acute in-patient service beds are located on 2 sites: Ward 18, Priestly Unit Dewsbury & District Hospital which has 23 beds and Ashdale Ward, The Dales Unit, Calderdale Royal Hospital, Halifax which has 24 beds.

Intensive Home Based Treatment Team (IHBTT)

This team operates 24 hours service and deals with crisis referrals from primary and secondary, liaison with medical services and self-harm assessments. The service acts as a single point of entry and gatekeeper to the inpatient bed bases.

The IHBTT team is based in south Kirklees (Huddersfield).

Enfield Down

Enfield Down provides Kirklees wide inpatient treatment and rehabilitation in a non-secure environment for: patients with high dependency or complex needs but who can be managed in an open environment or nursing intervention to achieve optimum functioning; patients who are treatment resistant, but who would be reviewed regularly through CPA; and individuals working with active wellness and recovery action planning (WRAP) plans who need short-term support/ respite in hospital avoidance beds. Enfield Down is part of working age adult services but accepts referrals from people over 65 on a needs led basis, these people then transfer into WAA services and are looked after by the Enfield Down team which is multi professional and includes a consultant psychiatrist.

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 14 days after the receipt of a referral.

Following initial assessment, SPA staff will either allocate to a service within the Integrated Care Pathway, 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.

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 11PA (10+1, additional 1PA subject to annual job plan review) substantive consultant psychiatrist to join the Kirklees Adult Inpatient Team in Kirklees. This is a replacement post in an established inpatient ward team.

The Inpatient service adopts a strong multidisciplinary team approach to risk assessment and management and offers intensive as well as comprehensive care to their patients. The ward team strongly advocate a person centred care delivery for the service users and carers and the active involvement of their carers and advocacy/translator services through the CPA process. In accordance with the Guiding principles of Mental Health Act, the team is dedicated to providing treatment in the least restrictive manner.

The service is provided on an equitable basis and is sensitive to the individual's circumstances and beliefs. The service believes that clients and carers have the right to be involved in both the individual care and continued service development, and endeavours to work with both clients and their carers to achieve this. Every team member works to provide a professional, accountable and co-ordinated service, ensuring the continuity of high-quality care, and the effective transition between the Inpatient services, Intensive home based treatment team, Community Mental Health Teams and other services in response to the needs of service users.

The Kirklees District is currently operating a SPA (Single Point of Access) for all referrals to Working Age Adult services. This provides a single point of access to these services for both urgent and non-urgent referrals, and CMHTs.

The post holder will be based at Ward 18, Priestley Unit at Dewsbury and District Hospital and be supported by a full time Specialty doctor, also based on Ward 18. Two junior doctors will be dedicated for Ward 18 to cover ward duties between 9am and 5pm on working days. They also participate in on call commitments out of hours and provide emergency cover for 3 other wards when required.

The post holder will provide Consultant medical input to the Inpatient Team and work closely with the IHBHT Team and the Community Mental Health Teams within the Kirklees locality.

The ward is a 23 bedded inpatient ward, this being the post holder's regular caseload. The ward is currently a mixed gender accommodation and the Trust is working towards moving to a single gender accommodation and reduced bed base.

The average number of new admissions per week is approximately 4-6 and the post holder will have a shared caseload with the full Clinical Team. The average number of discharges per month is 15.25. The average length of stay is 39.75 days. There were 34 mental health act tribunals in last 12 months. The percentage of delayed transfer of care is under 2%.

The wider clinical team consists of:
Nursing staff:
1.0 wte Ward Manager
8.84 wte Registered nurses
20.12 wte Health care assistants
0.96 WTE Nursing Associate
0.8 wte activity worker
1.0 wte admin staff

Occupational Therapy Team: 1 wte Band 6 practitioner 1 wte Band 5 practitioner 3 wte OT assistants

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

- Kirklees intensive home based treatment Dr Karthik Shetty
- Calderdale intensive home based treatment Dr Chandrashekar Bachu
- Kirklees Enfield Down rehabilitation unit Dr Sarah Williams
- Calderdale rehabilitation unit Dr Sara Davies
- Various consultants based in community mental health teams across Calderdale and Kirklees

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.
- Local peer group arrangements are self-selected to ensure that the peer group process is both constructive and relevant to the level of seniority/experience of the post holder.
- Appropriate internal and external study/professional 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.
- Support to attend the JAPS (joint academic psychiatric seminar), a monthly meeting for all
 psychiatrists with a wide range of clinical and educational topics, providing a good
 opportunity for networking and CPD a lunch is provided for those in attendance.

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). The Director of Operations leads the BDUs and is supported in each by a deputy director, who has a 'Trio' for each of their service lines. The Trios comprise of a medical clinical lead, a general manager and a practice governance coach.
- 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 other managers 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 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:
 - o Director of Medical Education Medical Director
 - Associate Medical Director for Postgraduate Medical Education trust-wide
 - o SAS Tutor trust-wide
 - o College Tutor Calderdale & Kirklees
 - College Tutor Wakefield
 - College Tutor Barnsley
 - Guardian for Safe Working trust-wide
 - Associate Medical Director for Undergraduate Medical Education Calderdale & Kirklees
 - 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. Mental Health Act and Responsible Clinician approval

The post holder would be expected to be approved as an Approved Clinician or be willing to
undertake training to obtain Section 12(2) MHA and will be expected to renew this approval
according to agreed procedures. Should the postholder not have the required MHA
approvals in place at the point of them starting in post, the Trust will identify an Approved
Clinician to support with arrangements for S12/AC work during the intervening period.

11. Secretarial support and office facilities

- The post holder will have their own dedicated medical office within the Priestly Unit (Dewsbury and District Hospital, Halifax Rd, Dewsbury WF13 4HS).
- Administrative support is provided on site from the team's medical secretary based at
 Priestley Unit, ward administrator and ward clerk. It is expected that the administrative
 support 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. The post holder will be provided a dedicated laptop
 with VPN access and a smartphone to facilitate their duties and to support agile working.

12. Clinical duties of post holder

- Provide medical leadership to ensure effective clinical assessment, management and the
 delivery of care to the service users from Kirklees by providing diagnostic assessment
 and treatment for service users referred to the service.
- Work effectively with the Intensive Home Based Treatment Team as part of an acute care pathway to facilitate timely discharge from hospital and maintain continuity of care.
- To undertake ward reviews in collaboration with the care coordinators, best interest meetings, bed management meeting to review progress on treatment and discharge. This is done in collaboration with the Community Mental Health Team, Intensive Support service and ward managers. The Intensive Support service consists of multi-disciplinary staff with input from specialist sector psychiatrists. Whilst under the care of the Intensive Support service in the community medical management will be the responsibility of the relevant sector psychiatrist. Where an existing in-patient is supported during leave periods by the Intensive Support service, the in-patient psychiatrist retains medical responsibility.

- Liaise with the single point of access to ensure the appropriate clinical course of action and to provide advice for the safe alternatives to hospital admissions when appropriate.
- Liaise with community teams to ensure the smooth transfer and continuity of care, plan aftercare, and follow up arrangements for inpatients as part of a multidisciplinary team, following the Care Programme Approach (CPA) process.
- Provide continuing clinical responsibility as a Responsible Clinician for service users in his/her charge allowing for all proper delegation and training of members of staff accountable to the post holder.
- Become involved in developing the service further and working closely with other teams to improve the Clinical Care and User Experience on Ward 18 drawing on both knowledge and Evidence Based Practice.
- Provide diagnostic assessment and treatment through scheduled Inpatient activities for service users.
- Liaise with the different community services and agencies to ensure the smooth transfer and continuity of care and plan aftercare and follow up arrangements as part of discharge planning using the CPA (Care Programme Approach) process.
- Provide liaison and leadership with the community teams to ensure safe discharge of service users in keeping with current established clinical practices, statutory and trust requirements.
- Liaise with pharmacy and other trust bodies regarding the safe and effective use of treatments consistent with established clinical practice, statutory and Trust requirements.
- Collaborate with other multidisciplinary team colleagues and general managers in the planning and development of the local psychiatric services.
- 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.
- Provide expert advice and a consultation service on clinical issues.
- Provide clinical supervision and management of the junior medical staff and other staff as appropriate to ensure service needs are met.
- 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 leadership to the teams in this area.
- 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.
- Offer a consistent response to referrer/patients regardless of origin of referral in a timely fashion
- Deliver evidence based treatments

13. 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.
- 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.

14. 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.

15. 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.
- Where post holder has a supervisory role for a doctor in training, ensure that they 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.
- Work in close liaison with the other Consultant Psychiatrists (including Liaison Consultant at the district hospital), teams and services within the BDU
- 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.

16. 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.

17. 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.

18. Work programme

- It is envisaged that the post holder will work 11 programmed activities over 5 days.
- An additional 1 APA will be paid to the post holder to respond effectively and flexibly to the needs of the ward within current core job planned hours. This additional PA will be subject to review through annual job plan process.
- 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.
- There would be bilateral consultation and negotiation in the event of the job content changing, in line with the Job Planning Policy

Day	Time	Location	Work	Category	No. of PAs
	AM	Ward 18	Ward reviews	DCC	1
Monday	PM	Priestly Unit	Administration Professional meetings	DCC	1
	AM	Ward 18	Ward Reviews	DCC	1
Tuesday	PM	Priestly Unit	SPA Supervision of junior trainees	SPA	1

Wednesday	AM	Various	Supporting Professional Activities including: • Weekly educational sessions • Monthly JAPS (Joint Academic Psychiatric Seminars) • 4 x pa Medical Staff Committee	SPA	1
	PM	Priestly Unit	Mental Health Act work Tribunal	DCC	1
	AM	Ward 18	Ward reviews	DCC	1
Thursday	PM	Priestly Unit	Ward work	DCC	1
	AM	Ward 18	Ward reviews	DCC	1
Friday					
-	PM	Priestly Unit	Administrative work SPA	DCC SPA	0.5 0.5
Saturday			Depending on on-call rota		
Sunday			Depending on on-call rota		
Predictable emergency on- call work	Variable	On-site, at home, on the telephone and/or travelling to and from site	1:7 on-call rota		
Unpredictable / emergency on-call work			Sometimes covering on-call and ward cover based on emergency requirements.		
	Direct clinical care			7.5	
Total PAs	Supporting professional activities				2.5

- 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.

19. 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 1:7 (could vary within the appropriate banding Category A Medium Frequency (5%)).
- 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.
- Changes in on-call rotas may occur in future due to service re-engineering and consultation with the post holder will be undertaken.
- 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.
- Cross cover will be provided by the three north Kirklees consultants in the community and the Kirklees IHBTT consultant.

20. 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.

21. 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
- The current salary scale for Consultants is £95,144-£114,003. Negotiated in line with the Consultants Contract
- 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 general adult in-patient psychiatry

Abbreviations for when assessed: SL: Short-listing from application form P: Presentation to formal panel

I: Advisory Appointments Committee R: References

	ESSENTIAL	WHEN ASSESSED	DESIRABLE	WHEN ASSESSED
QUALIFICATIONS	MB BS or equivalent medical qualification.	SL	Qualification or higher degree in medical education, clinical research or management.	SL
			MRCPsych	SL
			Additional clinical qualifications.	SL
ELIGIBILITY	Fully registered with the GMC with a licence to practise at the time of appointment.	SL	In good standing with GMC with respect to warning and conditions on practice	SL
	Included on the GMC Specialist Register for general adult psychiatry OR within six months of gaining CCT.	SL		
	Approved clinician status OR able to achieve within three months of appointment.	SL		
	Approved under S12 OR able to achieve within three months of appointment.	SL		
TRANSPORT			Holds and will use valid UK driving licence	1

	ESSENTIAL	WHEN ASSESSED	DESIRABLE	WHEN ASSESSED
CLINICAL SKILLS, KNOWLEDGE & EXPERIENCE	Excellent knowledge in specialty.	SL/I/R	Wide range of specialist and sub-specialist experience relevant to post within NHS or comparable service	SL/I
	Excellent clinical skills using bio-psycho-social perspective and wide medical knowledge.	SL/I/R		
	Excellent oral and written communication skills in English.	SL/I/R		
	Able to manage clinical complexity and uncertainty.	1		
	Makes decisions based on evidence and experience including the contribution of others.	1		
	Able to meet duties under MHA and MCA.	I		
	Able to provide clinical leadership to a multi- professional team and liaise with a wide variety of agencies	1		
ACADEMIC SKILLS & LIFELONG LEARNING	Able to deliver undergraduate or postgraduate teaching and training	P/I	Able to plan and deliver undergraduate and postgraduate teaching and training relevant to this post	SL/I
	Ability to work in and lead team	I/R	Reflected on purpose of CPD undertaken	ı
	Demonstrate commitment to shared leadership and collaborative working to deliver improvement	SL/I	Experienced in clinical research and / or service evaluation	I

	Participated in continuous professional development	SL/I	Evidence of achievement in education, research, audit and service improvement: awards, prizes, presentations and publications.	SL/I
	Participated in research or service evaluation.	SL/I	Has led clinical audits leading to service change or improved outcomes to patients	SL/I
	Able to use and appraise clinical evidence.	I/R		
	Has actively participated in clinical audit and quality improvement programmes	I/R		
PROFESSIONAL & PERSONAL	Demonstrates emotional intelligence and leadership skills.	I/R	Demonstrates proactive leadership.	I/R
ATTRIBUTES	Able to work flexibly and efficiently prioritise conflicting demands.	I/R	Demonstrates problem solving skills. Has cared for close family / friend with mental health needs.	I/R SI/I
	Able to effectively manage time and resources within a team.	I/R		
	Able to use electronic records.	I/R		
	Commitment to annual appraisal and revalidation.	I/R		
PHYSICAL ATTRIBUTES	Smart professional appearance.	I		

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.

