

Consultant Psychiatrist Job description and person specification

| Post and specialty: | Consultant in General Adult Psychiatry This is an established post. The post holder will provide Consultant input to General Adult Services in East Sussex in a | | |
|--------------------------------|---|--|--|
| | community setting. | | |
| Base: | St Marys House 52 St Leonards Road Eastbourne East Sussex BN21 3UU | | |
| Contract: | Number of programmed activities: 10 | | |
| Accountable professionally to: | Chief Medical Officer | | |
| Accountable operationally to: | Service Director East Sussex | | |
| | Line Manager : Barbara Crosland | | |
| | General Manager : Barbara Crosland | | |
| | Head of Service : Karen Hoskin | | |
| | Lead Consultant : Mokhtar Isaac | | |
| Key working relationships and | Clinical Lead: Mokhtar Isaac | | |
| lines of responsibility: | Clinical Director: Laura Brummer | | |
| | Service Director : Ruth Hillman | | |
| | Chief Delivery Officer: John Child | | |
| | Chief Medical Officer : Dr Peter Aitken | | |
| | Chief Executive : Jane Padmore | | |



1.0 Introduction

Sussex Partnership NHS Foundation Trust is a large NHS organisation that offers clinical and social care services to children, young people, adults and older adults, with emotional and mental health problems or learning disabilities. Services are provided to the people of Brighton and Hove, East Sussex and West Sussex with Children & Young People's Services provided across Sussex and Hampshire. The Trust operates as part of a wider network of health and social care and works in partnership with both statutory and non-statutory agencies. The Trust benefits from a thriving Sussex-wide psychiatry training scheme where Health Education Kent, Surrey and Sussex provide foundation, GP, core and higher trainees. We work closely with Brighton and Sussex Medical School; a partnership between the Universities of Brighton and Sussex. In 2015 we became a member of the Association of UK University Hospitals, the representative body for university hospitals with major teaching and research interests across the UK and internationally. Our 2020 vision is to provide outstanding care and treatment and the clinical strategy we have developed underpins this by providing a framework to enable sustained improvements in the quality of care we provide. With our partners in the Sustainability and Transformation Partnership, we have developed a compelling case for change in mental health services across the STP which is comprised of 24 organisations and strives to improve the links between health and social care to better serve our communities. In January 2018 the Trust was awarded an overall rating of Good by the Care Quality Commission and was assessed as Outstanding for caring.



2.0 Trust details

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

In 2015 the Trust reorganised the way it delivered services, establishing Care Delivery Services (CDS), tasked with providing overarching leadership for care groups and / or geographical areas. In 2018 we have 7 fully established CDS's. Overall leadership of each CDS is provided by a service director and/or a clinical director, with a multi-disciplinary leadership team (including a range of clinical professions as well as business, finance, HR, IT and estates and facilities support staff) providing additional leadership and governance oversight. The CDS model has helped us continue to improve services for patients and carers and is supported by Clinical Academic Groups and in keeping with our 2020 Vision and Clinical Strategy. Work continues to provide consistently high quality services, working together in partnership with each other, the people who use our services and other organisations.



3.0 Service details

3.1

East Sussex is situated in the south east of England between the sea and the South Downs with a population of around 544,000. The county offers good access to London and is in close proximity to Gatwick Airport. In East Sussex, 19 out of 329 neighbourhoods are among the 10% most deprived areas in England. Income deprivation affects 13% (69,500) of people in the county compared to 10% regionally & 15% nationally. Nearly 32,000 people (6%) live in the most deprived 10% of areas in England. The health of people in East Sussex is varied compared with the England average. About 16% (14,200) of children live in low income families. Life expectancy for both men and women is higher than the England average.

The Trust is seeking a Consultant Psychiatrist to join the Eastbourne Assessment and Treatment Team. This vacancy has arisen due to retirement and the Trust regards this as an opportune moment to develop the functioning of the team.

This post is one example of the commitment of the Trust to develop better provision and capacity for Eastbourne Assessment and Treatment Team and the families and carers using the service in challenging times. This post completes the medical establishment of the team providing a minimum of 3 whole time equivalent Adult Consultant Psychiatrists for the local area. In addition there is odd age psychiatry as part of the Old Age Specialist Community Team within the ATS.

Eastbourne, Seaford, Hailsham, & surrounding villages & High Weald Lewes and Havens
The total population for the Eastbourne area is 89667 and there are 7 wte Consultants
psychiatrists and one Speciality Doctor for adults of working age. The weighted population
age 16-65 is 52415 with a MINI index of 0.8.

3.4 The current multidisciplinary team establishment is as follows:

| WTE | Job Title | |
|-------|--------------------------------|--|
| 1 | General Manager | |
| 1 | Team Leader | |
| 3 | Consultant | |
| 0.6 | Principal Psychologist | |
| 0.6 | Consultant Psychologist | |
| 0.588 | Clinical Psychologist | |
| 5.88 | Nurses | |
| 0.6 | Psychotherapist /Psychotherapy | |
| 3.0 | Occupational Therapist | |



| 0.5 | Senior Occupational Therapist |
|-----|-------------------------------|
| 2.0 | Practitioners |
| 1.0 | Service Manager |

- Dr Baginski Adult West
 - Dr Dichter- Adult East
 - Vacant Post will cover East & West area's
 - Dr Isaac- SOAMHS
 - Dr Attamah SOAMHS
 - Dr Saleem- SOAMHS
 - Dr Corteling- SOAMHS
 - Dr Azim- SOAMHS
 - Dr Abdullahi- SOAMHS

The service takes part in junior doctor rotations for Psychiatry and General Practice. Eastbourne Assessment & Treatment team currently has:

- 2 x GPST2
- 1 x FY2

3.6 Availability of other relevant local mental health services

This post is in East Sussex which has a total population of 300,000. Adult Mental Health Services are provided within functional teams across Assessment and Treatment Centres (ATC) and Acute Care Centres. The division of East Sussex comprise of three localities: Eastbourne, Hailsham & Seaford; High Weald, Lewes & Havens and Hastings & Rother, serving the currently three Clinical Commissioning Groups. This post is within the in Assessment & Treatment service based in Eastbourne, providing adult community mental health care for Eastbourne, Hailsham & Seaford.

The Assessment and treatment teams are staffed by specialist mental health practitioners including Consultant Psychiatrist, Speciality Drs, nurses, occupational therapist, psychologists and doctors and there is a MDT function to allocation of Lead practitioners/care coordinators. Patient seen under the ATC are those who have secondary mental health needs which cannot be met from the primary care mental health service – locally provided by the IAPT service called Health in Mind. There is a strong emphasis on Partnership working with multiple agencies including Vocational Services.

3.7 Services are provided across the Trust area and Acute Services (both inpatient and Urgent Care Services) are located in: Chichester, Worthing, Crawley, Hove, Eastbourne and Hastings.

There are 2 Hospitals in East Sussex that provide acute care for adults

Woodlands in Hastings has

- Abbey Ward 14 beds for female adults
- Castle Ward 9 beds for male adults
- St Raphael 18 beds for older male (although there are 5 beds for older females)



Mental Health Liaison Practitioners who provide short term intervention on this site

Department of Psychiatry

- Bodiam Ward 18 beds for Male Adults
- Amberley Ward 18 Beds for Female Adults
- Heathfield 18 Beds for older Female
- ECT suite is on DOP site
- Mental Health Liaison/ Rapid Response Practitioners who provide short term intervention

Beechwood

16 beds for Dementia

Rehabilitation in East Sussex:

• Amberstone Hospital In Patient and Community Rehab

Amberstone in-patient rehabilitation service is located close to Hailsham, 10 miles from Eastbourne and comprises a 28 bedded unit set within its own grounds in a semi-rural location. The service provides active rehabilitation to service users with complex needs. Referrals are received from acute in patient and urgent care services, community teams and forensic services.

- Community rehab provide AOT and rehab interventions alongside intensive 12
 week support for transition from hospital or in need of more intensive support for
 people with primary diagnosis of psychosis
- 3.8 The post holder would have interactions with other local mental health teams. They would be expected to form a working relationship with the acute ward consultants and crisis team as well as relevant third sector organisations, including local drug and alcohol and homeless support services.

The Trust is divided into Care Service Delivery Services:

Primary care that is Health In Mind

Adults that are integrated services that includes adult mental health & later life and dementia care

Children and younger persons & EIS & Learning Disability

Forensic

Adult Mental Health Services is managed in 2 groups;

- a) Acute Services (including both Inpatient and Urgent Care Services) and
- b) Assessment and Treatment services which has three elements of service that is assessment and treatment Recovery and well being and dementia services.



| 3.9 | The post holder will be part of a Trust wide consultant network. The post holder will be able to access peer support from colleagues in the CRHT & ATS team. |
|-----|---|
| | If newly qualified or new to the Trust the post holder will be offered a mentor. Newly qualified consultants meet regularly with peers and the Chief Medical Officer as a group. |
| 3.1 | The post holder will be community based working 10 PAs based in St Marys House, Eastbourne and provide reciprocal leave cover for other consultants within community services. |
| | Adult Mental Health Services provide an ageless model for functional mental illness though there is separate Consultant Psychiatrist input for older people with a functional disorder and Later Life needs. All job plans will be subject to review as part of service development and career progression. |
| | The post holder is expected to fully embrace New Ways of Working in their clinical practice. Team members are able to carry out comprehensive initial assessments, and are able to formulate initial treatment plans with Consultant input when necessary. There will be an expectation that the post holder will work closely with senior managers. |
| 3.1 | The post holder will be within the East Sussex Adult CDS directorate. The CDS is responsible for the delivery of high quality services across East Sussex. The service director for adult mental health is John Childs. The clinical director is Dr Hamid Naliyawala |
| 3.1 | The trust has developed a clinical strategy as part of our 2020 vision and the post holder would be invited to participate in developments and quality improvements linked to the urgent care pathway. The team at Eastbourne are leading on the Single Point of Access as part of this programme of service development. In addition the CDS have begun the process of developing a business case for a further new in patient service. |
| 3.1 | There are approximately 120 referrals to the Eastbourne ATS per calendar month. Referrals are managed by our Referral Co-ordinators with support from other clinical colleagues and there are waiting time targets for urgent, priority and routine referrals. We have a dedicated urgent/priority telephone line and receive verbal referrals for referrals of this nature and Referral Co-ordinators agree our level of response in consultation with the referrer and patient. The post holder will support referral management and the triage function and will be job planned to allow the post holder to offer medical advice and screen referrals that may require a medical consultation. |
| | Referrals will be allocated by team leaders to the appropriate team member, depending upon the clinical details of the referral. The post holder will be expected to see referrals requiring medical review, for example patients requiring assessment and diagnosis or medication review. Other team members will see referrals not requiring medical input, either the mental health liaison practitioners or ATS team members. |
| | The post holder will have access to support to actively manage their caseload from the clinical lead/lead psychiatrist. |
| 3.1 | The role of the post holder in the ATS team will be to see new assessments, providing detailed assessments, formulation and risk assessments, to develop management plans and review these in an outpatient setting. The post holder will be expected to review patients already known to the ATS as required, during their journey through the ATS system. The post holder |



will direct these patients treatment. The post holder will liaise with local primary care services and provide advice and guidance. They will provide supervision of junior medical staff and provide advice to other members of the team including the duty worker. They will provide senior clinical leadership to the ATS, with fellow consultants.

The post holder will be expected to provide medical leadership in the development of the team and wider working age services, in line with the CDS and Trust goals, in order to provide high quality mental health care for patients.

The number of clinic slots will be agreed with the successful candidate, generally new referrals are given 3 hours to assess and record; open referrals would be allocated 90 minutes to assess and write up; 6 monthly reviews would be allocated 45 minutes; 30 minutes face to face, and 15 minutes recording

Consultants currently hold a caseload of approximately 450 cases, we are working as a service to review this and reduce these. Members of the MDT hold a caseload of approximately 35 (Pro Rata).

The role of the Consultant is to support the MDT with caseload reviews and management, to attend the weekly MDT meeting to discuss existing and new cases and agree appropriate treatment and recovery plans. They will work closely with the Team Lead and Service Manager with Service reviews and development, in line with the service commissioning.

- 3.1 The Trust has a thriving research network.
- The Trust has been rated 'outstanding' in caring by the CQC and 'good' in all other domains. The Trust has strong links with Brighton and Sussex Medical School and regularly hosts students of various disciplines.

The Trust website can be found here: https://www.sussexpartnership.nhs.uk/

The team works within the Trusts 2020 vision and in line with the current clinical strategy.
The clinical strategy is focused on developing teams, implementing new roles, working towards providing a single point of access for people in crisis, working more effectively with communities, and more integration between community, crisis and acute services with the aim of providing high quality mental health care. The post holder will be expected to work towards these Trust goals.

Mental Health services in East Sussex have close links with primary care and ASC.

3.1 Sussex Partnership is committed to participation, meaning that we involve service users, and their carers and supporters, in service decision-making and planning. All employees are expected to contribute to this shared value and to support services in the delivery of its participation strategy.

Clinicians are encouraged to work in a participatory way so that shared decision making and conversations around formulation/diagnosis and ongoing care are a collaborative endeavour with the people who access our service.

It is highly likely that at least one service user or carer will be on the interview panel for this role.



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|-----|--|
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4.0 Continuing professional development (CPD)

The post holder is expected to remain in good standing for CPD with the Royal College of Psychiatrists.

The post holder will be expected to have a plan for such education as is deemed appropriate, considering his or her own needs and those of the service. Consultants are actively encouraged to take their study leave entitlement in line with Royal College Guidelines and to support the development needs identified in their PDP, Peer Group reviews and appraisal. The annual study leave entitlement is £650 per year and up to 10 days per year (30 days every 3 years) subject to approval by the Clinical Lead/Director and the Director of Medical Education, Dr Mel Moss.

Peer supervision is arranged between the consultants working in the locality; West Sussex, East Sussex, Brighton and Hove monthly, multidisciplinary supervision is arranged in the local teams, and ability to discuss cases and service problems occur on a monthly basis in the monthly Pan-Sussex meeting for consultants and SAS grade doctors and (first Wednesday of each month, 2pm-5pm).

All Consultants have a responsibility for ensuring their own continuing professional development and are expected to register for CPD with the Royal College of Psychiatrists. Consultant peer groups are established which the post holder will be expected to join. The Trust is committed to supporting CPD activities both internally and externally.

5.0 Clinical Leadership and medical management

Medical management across the Trust is led by our Chief Medical Officer who is supported by a Deputy Medical Director, three Associate Medical Directors and a Chief Pharmacist.

The post holders' line manager is Laura Brummer, Clinical Director.

Local clinical leadership is provided by the Clinical Lead, Dr Mohktar Isaac and the Clinical Director Abdul Naliyawala. There is a leadership meeting once a month at St Mary's House. The post holder is welcome to attend when able, when unable they would be encouraged to contribute verbally or in writing via the leadership team/ meeting chair.



The post holder will be expected to work collaboratively with managers to achieve the most efficient and effective use of resources. The consultant will be invited to local division meetings of the consultant body during which local issues will be discussed. The post holder will be welcome to attend monthly leadership meetings, contributing to the clinical governance and leadership of the locality.

Quality Improvement is the chosen improvement methodology for this organisation and the post holder will be expected to:

- Develop a clinical leadership role within the multidisciplinary team and across the service as a whole and work with colleagues and management to ensure optimal service delivery.
- Participate in business planning for the locality and, as appropriate, contribution to the broader strategic and planning work of the Trust.
- Lead the improvement of the quality of care within the team and contribute to improving quality across the system.

The post holder will be encouraged to contribute to other relevant management activities within the Directorate and the Trust. This might include participation in clinical governance activities, relevant working groups, or a future medical management post.

6.0 Appraisal & Job Planning

The Trust is committed to ensuring all Trust medical staff is licensed, up to date clinically and fit to practice, in line with national medical revalidation guidance.

The revalidation process includes an annual appraisal and the Trust's Revalidation Policy clearly sets out roles and responsibilities to support this.

The Trust's Revalidation Support office is well established and provides an excellent service in supporting doctors in all aspects of revalidation.

Dr Rick Fraser, Chief Medical Officer is the Responsible Officer.

Trust doctors are encouraged, if interested, to become appraisers themselves and training for this role is offered.

Group and individual job planning is supported by a clearly defined Trust policy and in place not only to meet the contractual requirements of the role but also to provide opportunities for personal and professional development and to help drive quality improvement.

The Trust offers a structured mandatory corporate induction programme to ensure staff feel supported and welcomed into their new role. Local induction will assist to further orientate the post holder to the workplace environment and to their team/service. Mandatory and statutory training is also undertaken as part of the induction process where the post holder will have access to e-learning modules.

The Trust operates an active mentorship programme and learning set for new Consultants.

7.0 Teaching and training

The post holder will be supported via group and individual job planning processes to provide dedicated time in their job plan to:



- Provide training to junior medical staff, and to other professionals on a multidisciplinary basis, and with other mental health organisations where appropriate.
- Participate in the Trust's core education and training programme on Wednesday afternoons, which take place at various sites across the Trust, as well as regional Foundation and Speciality doctor training schemes as required.
- Remain in good standing in relation to CPD & revalidation.
- Provide supervision to junior medical staff in line with the Trust's supervision strategy.
- At times be responsible for individual supervision of a GP vocational Trainee.
- Ensure that the post holder and supervised junior staff are regularly updated on professional developments as required by their professional body.
- Contribute to corporate training initiatives within the Trust.

8.0 Research

Sussex Partnership is the most active mental health research organisation in the south of England with more than 9000 participants taking part in high quality research studies since 2010. Indeed during 2016/17 we were one of the highest recruiting mental health Trusts in England and have generated over £9 million in income. We have strong academic partnerships with Brighton and Sussex Medical School, University of Sussex and University of Brighton particularly, and our reputation for clinical excellence is attracting leading clinical practitioners and researchers to Sussex. We attribute this success to our patients who take part and to staff and clinicians in the Trust, by paying attention to all aspects of the research process, from design of new studies, to delivery of existing research and to the translation of findings into practice.

The Trust academic centre offers first class facilities and is based at the Sussex Education Centre in Hove. The universities provide access to statistical support and advice. At any given time, there are several major studies being undertaken within the Trust. Smaller individual projects are subject to standard screening as well as local ethics committee approval before sign off. The Trust's Chief Medical Officer is the Deputy Chair for the regional Clinical Research Partnership Board.

The post has no specific teaching or research responsibilities other than those which are inherent in clinical duties. However, there are opportunities to use SPA time for teaching or clinical and other basic research through Sussex University and Brighton and Sussex Medical School, where Professor Hugo Critchley is Chair of Psychiatry.

9.0 Mental Health Act and Responsible Clinician Approval

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



10. Secretarial Support and office facilities

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The Trust strives to maximise clinical time for doctors by reducing as much administrative time as possible and a clear structure for admin support has been developed.

The service benefits from an established administrative support team and the post holder will be assigned 1.0 WTE of admin support.

The consultant will have access to their own laptop, mobile phone and functioning of both devices are supported by a centralised IT service.

The consultant will share office space with the other 2 Working Age Consultants based at St Mary's House.

Private bookable rooms are available for supervision.

The post holder has access to the use of clinical rooms and separate administrative office space as well as a locker

11. Clinical duties of post holder

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The post holder is required to:

- For community posts assist with the Triage system of new referrals into the team and assess their needs or signpost to alternative care providers, to attend weekly team meetings and provide supervision of team members/ medical trainee's.
- Management of complex cases.
- Clinical leadership of team.
- Role in assessment of referrals/admissions.
- Care plan and treatment formulation, guidance on evidence-based treatment and effectiveness.
- Liaison and collaborative working with other services/agencies.
- Mental Health Act implementation and ongoing reviews.
- Multi-disciplinary, multi-agency and partnership working.

12. Clinical governance and quality improvement

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The post holder will contribute to the Trust's delivery of its integrated clinical governance and quality improvement agenda along with the National Service Framework modernisation agendas. Specific responsibilities will be agreed in collaboration with colleagues of the multi-disciplinary community and inpatient teams, the general manager, lead consultant and clinical director.

The post holder will be expected to select relevant subjects for audit and achieve data collection targets in line with Care Group objectives and record timely clinical activity data whilst supporting junior medical staff and members of the multi-disciplinary team in undertaking and presenting relevant audit projects.

Participation in service/team evaluation and the planning of future service developments is a key responsibility. The Trust has a Quality Improvement strategy, A Quality Improvement Support Team, an active QI training programme and partnerships with other organisations



including QI Life. The post holder will be expected to be involved in using QI locally and organisationally to improve quality and safety.

The post holder will be expected to maintain responsibility for the setting and monitoring of quality standards including but not limited to; overseeing patient pathways including case allocation and day to day standard of care; monitoring clinical risk and supporting staff to detect and manage risk.

13. General Duties

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- To manage, appraise and give professional supervision to junior medical staff as agreed between consultant colleagues and the medical director and in accordance with the Trust's personnel policies and procedures. This may include assessing competences under the Modernising Medical Careers framework.
- To ensure that junior medical staff working with the post holder operate within the parameters of the New Deal and are Working Time Directive compliant.
- To undertake the administrative duties associated with the care of patients.
- To record clinical activity accurately and comprehensively, and submit this promptly to the Information Department.
- To participate in service and business planning activity for the locality and, as appropriate, for the whole mental health service.
- To participate in annual appraisal for consultants.
- To attend and participate in the academic programme of the Trust, including lectures and seminars as part of the internal CPD programme.
- To maintain professional registration with the General Medical Council, Mental Health Act Section 12(2) approval, and to abide by professional codes of conduct.
- To participate annually in a job plan review with the clinical manager, which will include consultation with a relevant manager in order to ensure that the post is developed to take into account changes in service configuration and delivery associated with modernisation.
- To work with local managers and professional colleagues in ensuring the efficient running of services, and share with consultant colleagues in the medical contribution to management.
- To comply with the Trust's agreed policies, procedures, standing orders and financial
 instructions, and to take an active role in the financial management of the service and
 support the medical director and other managers in preparing plans for services.

14. External duties, roles and responsibilities

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



15. Other duties

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From time to time it may be necessary for the post holder to carry out such other duties as may be assigned, with agreement, by the Trust. It is expected that the post holder will not unreasonably withhold agreement to any reasonable proposed changes that the Trust might make.

16. Work Programme

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It is envisaged that the post holder will work x programmed activities over x days. Following appointment a meeting will take place no later than three months from appointment with the clinical manager to review and revise the job plan and objectives of the post holder. The overall split of the programmed activities is 7.5 to be devoted to direct clinical care and 2.5 to supporting professional activities (as per Royal College of Psychiatrists recommendation). 1.5 programmed activities are allocated for CPD and 1.0 programmed activity for audit, teaching, educational supervision, research, management and service development which will be identified through job planning. Specific programmed activity may be agreed in line with both individual and service need.

| | AM/ PM | LOCATION | TYPE OF WORK | DCC/SPA |
|-------|-----------|----------------------------|-----------------------------|----------------|
| Mon | AM | St Mary's House | OP Clinic | DCC |
| | PM | St Mary's House | Audit/ research and CPD | SPA |
| Tues | AM | St Mary's House | OP Clinic | DCC |
| | PM | St Mary's House | OP Clinic | DCC |
| Wed | AM | St Mary's House | Triage/ Team meeting | DCC |
| | PM | DOP | Academic meeting and CPD | SPA |
| Thurs | AM | St Mary's House | OP Clinic | DCC |
| | PM | St Mary's House/ others | Team meeting/ CPD | ½ SPA/½ DCC |
| Fri | AM | St Mary's House | OP Clinic | DCC |
| | PM | St Mary's House | Supervision/ clinical admin | DCC |

Note: It must be accepted that the resources available to the Trust are finite and that changes on workload and developments requiring additional resources must have prior agreement through Trust management arrangements.

This is a provisional timetable and is subject to change based on service needs and in agreement with the postholder.



17. On call and leave cover arrangements

0 The post holder will be expected to take part in the out of office hours on call rota. A trainee doctor is first on call with the rota.

An availability supplement of a **category A, 3%** of basic salary is paid for this commitment. The average commitment in hours is not considered onerous and is taken by arrangement from the contracted hourly job plan.

The Sussex Mental Health Line telephone service accessed by patients is available on weekdays between 5pm-9pm and 24-hours at weekends. It provides support and information and is staffed by nurses and support workers.

A Trust operational manager is on call each day.

18. Leave and cover arrangements

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The post holder is entitled to 32 days of annual leave plus bank holidays for the first 7 years of their service and 34 days plus bank holidays thereafter and 30 days of study leave over three years. This will be calculated pro-rata for less than full time posts.

Annual leave, study and special leave will be covered within the pool of consultants and is agreed and authorised using electronic unavailability management software.

19. Contract Agreement

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

20. Visiting arrangements

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Candidates are welcome to visit our services and meet the team using the below contact details.

Barbara Crosland, Clinical Operations Manager -

Barbara.crosland@sussexpartnership.nhs.uk

Further details about our Trust can be obtained via our website

www.sussexpartnership.nhs.uk

Add any other Trust/partner website links relevant to the service here.

21. Approval of job description by the Royal College of Psychiatrists

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This job description and person specification was approved by the Royal College of Psychiatrists' regional advisor on 09/04/2020.



Person specification/selection criteria for Consultant Psychiatrist

| ASSESSMENT STAGE | SCR Screening prior to short-listing | AAC Advisory Appointments Committee | PRES Presentation to AAC panel |
|------------------|---|--|--------------------------------|
| ABBREVIATIONS | SL Short-listing from application form | REF References | |
| | | | |

As an Equal Opportunities employer, the Trust welcomes applications from candidates with lived experience of mental health issues.

| | ESSENTIAL | WHEN ASSESSED | DESIRABLE | WHEN ASSESSED |
|----------------|---|------------------|---|------------------|
| | MB BS or equivalent medical qualification. | SCR | Qualification or higher degree in medical education, clinical research or management. | SL |
| QUALIFICATIONS | | | MRCPsych | SCR |
| | | | Additional clinical qualifications. | SL |
| | Fully registered with the GMC with a licence to practise at the time of appointment. | SCR | In good standing with GMC with respect to warning and conditions on practice | SCR |
| ELICIDIUTY | Included on the GMC Specialist Register OR within six months. | SCR | | |
| ELIGIBILITY | Approved clinician status OR able to achieve within 3 months of appointment | SCR | | |
| | Approved under S12 OR able to achieve with 3 months of appointment | SCR | | |
| TRANSPORT | Holds and will use valid UK driving licence OR provides evidence of proposed alternative. | SCR | | |



| | ESSENTIAL | WHEN ASSESSED | DESIRABLE | WHEN ASSESSED |
|-------------------------------------|---|------------------|--|------------------|
| | Excellent knowledge in specialty | SL, AAC, REF | Wide range of specialist and sub-specialist experience relevant to post within NHS or comparable service | SL, AAC |
| | Excellent clinical skills using bio-psycho-social perspective and wide medical knowledge | SL, AAC, REF | | |
| CLINICAL SKILLS, KNOWLEDGE & | Excellent oral and written communication skills in English | SL, AAC, REF | | |
| EXPERIENCE | Able to manage clinical complexity and uncertainty | AAC | | |
| | Makes decisions based on evidence and experience including the contribution of others | AAC | | |
| | Able to meet duties under MHA and MCA | AAC | | |
| | Able to deliver undergraduate or postgraduate teaching and training | SL, PRES, AAC | Able to plan and deliver undergraduate and postgraduate teaching and training relevant to this post | SL, AAC |
| | Ability to work in and lead team | SL, AAC | Reflected on purpose of CPD undertaken | SL, AAC |
| ACADEMIC SKILLS & LIFELONG LEARNING | Demonstrate commitment to shared leadership & collaborative working to deliver improvement. | SL, AAC | Experienced in clinical research and / or service evaluation. | SL, AAC |
| | Participated in continuous professional development | SL, AAC | Evidence of achievement in education, research, audit and service improvement: awards, prizes, presentations and publications. | SL |
| | Participated in research or service evaluation. | SL, AAC | Has led clinical audits leading to service change or improved outcomes to patients | SL, AAC |



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