

# Consultant in Old Age Psychiatry

CMHT/Memory

Fountain Way, Salisbury, Wiltshire

10 PAs

342-RVN720-IEW



**Endorsed on behalf of the Royal  
College**

SWS17.042C(F)

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# 1. Introduction



Avon and Wiltshire Mental Health Partnership NHS Trust (AWP) provides inpatient and community-based mental health care for people living in Bath and North East Somerset (B&NES), Bristol, North Somerset, South Gloucestershire, Swindon and Wiltshire. We also provide specialist services extending throughout the south west.

We employ over 5,000 dedicated members of staff who deliver services from more than 90 locations, working in approximately 150 teams across a geographical region of 2,200 miles, for a population of approximately 1.8million people.

We are passionate about promoting good mental health and wellbeing. We strive to use the expertise

and resources within our organisation, and through our partnerships, to deliver high quality services that are safe and focused on people's recovery. Our staff are pivotal in everything we do and we are committed to involving them fully in the development of the Trust and our services.

## 2. Trust Details

AWP is a partner in two Integrated Care Systems (ICSs). We work closely with our partners across the Bristol, North Somerset and South Gloucestershire ICS and the Bath and North East Somerset, Swindon and Wiltshire ICS to meet the health and care needs of the local populations.

The organisations that make up an ICS – including commissioners, local authorities, hospitals and community services – take collective responsibility for managing resources, delivering care and improving the health of the population.

AWP operates under 3 divisions mirroring the ICSs areas:

- West Division: Bristol, North Somerset and South Gloucestershire
- East Division: B&NES, Swindon and Wiltshire
- Specialised, Secure and CAMHS Division

AWP provides a wide range of services which include:

- Adult acute inpatient services
- Adult recovery services
- Complete intervention
- Early intervention in psychosis
- Later life inpatient services
- Primary care liaison services
- Learning disabilities services
- Low secure services
- CARS – liaison and diversion
- Pathfinder service
- Veterans mental health service
- Community drug and alcohol
- Criminal justice services
- Deaf mental health service
- ADHD services
- CAMHS

- Medium secure services
- Mother and baby unit
- Autism spectrum services
- Personality disorders service
- Traumatic stress service
- Care home liaison services
- Eating disorder services
- Anxiety services
- Memory services
- Street triage services
- Health based place of safety
- Therapy services
- Electro-convulsive therapy
- IAPT services

## Our Purpose and our values

We are committed to improving the lives of the people we serve with compassion, respect and dignity. Our purpose can only be fulfilled by staying true to our core values which underpin everything we do; they guide our behaviours and can be seen in every interaction we have with patients, staff and stakeholders. We refer to our values as PRIDE:

P	Passion	Doing our best, all of the time
R	Respect	listening, understanding and valuing what service users and carers, staff and stakeholders tell us
I	Integrity	Being open, honest, straightforward and reliable
D	Diversity	Relating to everyone as an individual
E	Excellence	Striving to provide the highest quality support to service users and their families

## Our Strategy and objectives

We are currently developing a five year strategy to reflect the changing needs and strengths within our local populations.

Our strategy has four key objectives:



### Provide outstanding care

We will continually improve and provide high quality, safe care to help people achieve the outcomes that are important to them.



### Develop outstanding people

We will make AWP a great place to work and learn, providing an environment where a skilled, positive and motivated workforce can provide outstanding care.



### Provide sustainable services

We will ensure services are properly resourced to meet rising demand and acuity, and capitalise on opportunity for innovation.



### Delivered in partnership

We will deliver care as a joint endeavour with patients/service users, family, friends and carers, including the voluntary sector.

## Key working relationships and lines of responsibility

Medical Director:	Dr Sarah Constantine
Deputy Medical Director:	Dr Pete Wood
Divisional Medical Director:	Dr Angelika Luehrs
Medical Lead:	Dr Maame Duku Sarfo
Clinical Director:	Saranna Burgess
Associate Director of Operations:	Alex Luke
Clinical Lead:	Celia Moore
Operational Manager:	Jason Everett
Chief Operating Officer:	Matthew Page
Chief Executive:	Dominic Hardisty

## 3. Service Details

Within Wiltshire there are three Community Mental Health Teams (CMHTs) providing care, Community Mental Health Teams (CMHTs) provide care, treatment and support to adults from the age of 18 years and over with a range of mental health needs, including mood disorders, anxiety disorders, psychosis and personality disorders.

## 4. The post and local working arrangements

<b>Post and specialty:</b>	Consultant Psychiatrist in Older Adult Psychiatry
<b>Base:</b>	Fountain Way, Wilton Road, Salisbury, SP2 7FD
<b>Total Number of PAs:</b>	10 PAs per week
<b>Accountable professionally to:</b>	Medical Director
<b>Accountable operationally to:</b>	Medical Lead

The Trust is seeking a consultant psychiatrist to join an established Community Mental Health Team providing services for adults of all ages in the community in Wiltshire. The successful applicant will work with Older Adults within the team with an Older Adult colleague and Adult of Working Age Colleagues. The post is an existing post which has become vacant on the previous incumbent retiring.

**The post holder will work within the Sarum Community Mental Health Team and provide consultation to the South Wiltshire Memory Service and Wiltshire Care Home Liaison Service.** The post holder will serve provide Consultant medical input to a population of approximately

19000 older adults registered with GP practices within the South Wiltshire area.

**This post is supported by** a 0.7 WTE Specialty Doctor working within the Sarum CMHT (the Specialty Doctor works 0.9 WTE but 0.2 WTE are spent with another Consultant).

For a description of each service resources and model please see the relevant section in the Service Description below.

### **Team Referral Rate/ follow ups**

The combined referral rate to the teams for the patch served by the post holder is 7 new patients a week all of whom will be seen by other team members before a decision to seek medical involvement is made through the multidisciplinary team meeting.

On average 5 new patients are assessed by the post holder or specialist doctor within the team each week through outpatients or home visits. Approximately 10-12 follow up contacts are provided by the medical team each week.

### **Sarum CMHT**

This specialist service is based in the Grovely Unit, Fountain Way Hospital. It offers assessment, Intervention and care planning, safeguarding and review of relevant service users as well as signposting and providing optimum choice through working alongside other organisations. The Team has extra clinic capacity in Warminster for better access for clients living in the western side of the patch.

The Team is Ageless and includes Adult and Older Adult specialisms with doctors working within one specialism.

### **How the team works (Older Adult specialism):**

- Based in a suite of clinics and offices in Fountain Way Hospital.
- Operates 5 days a week 9am to 5pm.
- This is the main Team providing care and interventions for service users with older person's needs. Domiciliary care packages are now with the new Wiltshire Council Mental Health Social Work team.
- Access is by assessment of older person's need. Referrals received after assessment by Primary Care Liaison Service or Intensive Service, Memory Service, Care Home Liaison Service or Mental Health Liaison Team based in any of the District General Hospitals serving Wiltshire.
- Adopts a team-based approach to care management, ensuring that each Care Co-ordinator has a team around them for support and ensuring that service users and carers have consistent continuity of care and shared risk management.
- Delivers identified care packages based on Care Clusters with access to specialist support and wrap-around services when required.
- Participates in health promotion activities and liaison with primary care and other referrers with the local health community.
- Works in partnership with Wiltshire Council Mental Health Social Work Team.
- Community Care funding is allocated by the Local Authority via a funding panel.
- Consultants attend the weekly CMHT meeting (Tuesday morning).

The team consists of the following staff:

- 1 Team Manager
- 1 Senior Practitioner
- 3 Older Adult Consultants including this post
  - Sarum CMHT/Memory S 1.0 wte This Post
  - Sarum CMHT/Inpatient 1.0 wte Dr Anthony Gahan
  - Sarum CMHT/Inpatient 1.0 wte Locum
- 2 AOWA Consultants
- 0.9 Older Adult Specialist Dr working with the post holder for 7 sessions a week
- 10 WTE band 6 Care coordinators
- 4 WTE Band 5 RMNs
- 3.6 WTE Band 4 Support Workers
- Additional Therapists including Psychology / OT / Physio / Art Psychotherapy:
  - 2.5 WTE psychologists
  - 2 WTE OTs in the team who are care co-ordinators, and an unfilled 0.5WTE older
  - adult specific post
  - Access to 2 Physiotherapists on the Fountain Way site
  - Art Therapy – 0.2 WTE on site and Art Group on site
- A dedicated admin team.

Team members with the exception of medical staff work across all ages although most workers will have clients drawn mainly from either the adult or working age or the older adult population. The team covers a population of 31000 (2016 figure) over 65 year olds.

All referrals from Primary Care are initially sent to the Primary Care Liaison Service, who work with the patient for a short period. If their needs are ongoing and more complex they are then referred on to the CMHT and are initially assessed by a Duty Worker. If they require medical assessment then the case is discussed with the Consultant who will then see either in a clinic or in the community.

The team currently receives an average of 2-3 Older Adult referrals each week between the consultants (and Specialty Doctor). New referrals are allocated by the team manager on a weekly basis with initial assessment undertaken by members of the nursing team.

The post holder will see patients mainly in outpatient clinics. Number of OP clinics per week and ratio of new patients: follow ups per clinic per week:

4 Mixed Clinics (CMHT and Memory) per week. The clinic does not occur when consultant on leave. Clinics typically consist of one new patient and two follow ups or three follow-ups.

The post holder has one session for community visits which would typically involve 1-2 visits to either new or follow up patients. Visits are also sometimes conducted in unbooked outpatient slots where need dictates.

#### **CMHT Contacts per week for this post:**

##### **Consultant:**

Clinics: Approx. 1 new patient and 3-4 follow ups.

Visits: Approx. 0-1 new patient and 0-1 follow ups.

### **Staff Grade:**

Clinics: Approx. 1 new patient and 3-4 follow ups.

Visits: Approx. 0-1 new patient and 0-1 follow ups.

### **Memory Team South (Memory S)**

The Memory Service provides an assessment and treatment service for service users of all ages with memory disorders. The vast majority of those referred are over 65. The team covers the Sarum CMHT area. The team is colocated with the CMHT and receives referrals through the same pathways. New referrals receive a specialist triage within the Primary Care Liaison service before onwards referral for nursing, psychology and medical assessment as dictated by need. As well as a diagnostic service the team also has a maintenance prescribing function for some of the less commonly used memory enhancers.

The team consists of

- 1.8 WTE Band 6 Registered Mental Nurses (RMNs)
- 1 WTE Band 5 RMN's
- 1 WTE Band 4 Support Workers
- Neuropsychologist working 2 sessions in the Memory S area
- Additional Therapy input (OT and Physiotherapy) available for assessment purposes from CMHT resources (see CMHT)
- Dedicated memory clinic admin

Each consultant provides medical cover for patients who are registered with GP surgeries they cover in their CMHT role.

### **Referrals to the Memory Clinic per week**

There are currently on average 7 referrals per week to the service from the area served by this post area.

Approximately half of these (3-4) require a medical assessment after their initial nurse contact. Service users will be assessed and reviewed within the mixed outpatient clinics as described above in the entry above in CMHT details.

### **Memory Contacts per week for this post:**

Consultant: Approximately 1-2 new patients and 3-4 follow ups per week.

Staff Grade: Approximately 1-2 new patients and 3-4 follow ups per week.

### **Care Home Liaison**

The care home liaison team works with service users within community placements and community hospitals within the CCG area. The team's role is to support homes in managing the needs of cognitively impaired services users who become unwell. The team does not care coordinate but will work with individuals as necessary to prevent admission or to support early discharge.

The team across Wiltshire (based in Warminster) consists of:

- 1 WTE band 7 Team Manager / Nurse Prescriber Wiltshire Wide
- 1 WTE band 7 Clinical Psychologist ( FT from March) Wiltshire Wide
- 5.41 WTE band 6 RMN or OT (1.41 North and East Wiltshire (NEW) area, 2 West Wiltshire area (WW), 1 Sarum area and 1 Wiltshire Wide)

- 5.62 WTE band 4 support workers (1.62 NEW, 2 WW, 2 Sarum)
- 1 WTE band 4 admin based at Shearwater Lodge, Warminster.

The role of the consultant within the team is to offer specialist medical advice to the team either at the team meeting or to assess the patient in their placement. The work flow can be intermittent but the expectation is that the post holder will provide an average of one PA per week to the CHL team.

#### **Role expected of the Consultant in the Teams:**

The Consultant is expected to provide appropriate leadership in the teams along with senior colleagues in other disciplines. They will be available for consultation to team members and will participate in the weekly risk meeting where concerns can be raised by team members about Consultants to get input and advice on management from the team. Consultant will review patients in the outpatient clinic and in the community and will undertake Mental Health Act assessments when necessary. The Consultants will liaise and provide advice to the GPs in the surgeries they take referrals from. Educational supervision will be provided to their trainee doctor

## **5. Clinical duties**

- To have responsibility for the appropriate secondary prevention, diagnosis and treatment of mental illness, minimising disability where possible.
- To have shared responsibility for the proper functioning of the teams.
- To liaise with primary care services in the locality.
- To work mostly with elderly patients over the age of 65. On rare occasions where patients diagnosed with dementia under the age of 65 remain under the care of the CMHT the post holder may be asked to provide medical care for these clients where dementia is the primary problem or the older adult service is better able to meet their needs.

Responsibilities include:

- The assessment of cases referred by PCLS, GPs, consultant colleagues and by members of the Liaison Teams
- Specialist treatment of such patients
- Supervising cases coordinated by medical and other individual members of the teams.
- Clinical support, advice and consultancy to the team
- Attending CMHT team clinical and business meetings and liaison with Memory, CHL and ECT teams.
- These clinical responsibilities will be met by clinic sessions; home visits; care home in-reach sessions; pastoral visits to other hospitals; or whatever approach is most appropriate to the clinical need
- To liaise with other parts of the service and GPs and non NHS organisations wherever applicable.
- To liaise with both AWP and other providers to facilitate the smooth handover of clients between services.
- To prepare Mental Health Act Tribunal reports and participate in Mental Health Tribunal meetings
- To provide medical and AC responsibility for patients from designated GP practices.
- To actively participate in team and personal caseload management and supervision.

- To provide reciprocal cover for colleagues absent on annual leave and study leave, or in emergencies for brief periods of sick leave by individual arrangement with them.

## 6. General duties

- 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.
- To ensure that junior medical staff working with the post holder operate within the parameters of the New Junior Doctor Contract 2016 and are Working Time Directive compliant.
- To undertake the administrative duties associated with the care of patients.
- To undertake administrative duties associated with the running of his/her clinical work.
- 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 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.

## 7. Continued professional development (CPD)

The Trust is committed to training and development as it is recognised that trained and motivated staff are crucial to our success. Whether we are inducting new employees to the Trust or meeting new challenges we recognise the importance of training and continuous professional development.

There are a wide range of training opportunities offered by the Training Department, as well as local and Trustwide academic meetings. The Trust expects consultants within local services and specialities to meet in Personal Development Plan (PDP) groups that comply with Royal College or psychiatry guidelines, in order to develop their own PDPs and keep them up to date, and it provides the time for this within Supporting Professional Activity time. The post holder will be expected to maintain good standing with respect to CPD in accordance with the Royal College of Psychiatrists guidelines. The Medical Education team hold details of PDP groups, and can support new staff in finding a suitable consultant group.

Peer supervision will also take place at regular local peer group meetings. The post holder will be expected to join a local peer group.

The post holder is entitled to study leave in accordance with the Medical and Dental Terms and Conditions of Service which is 30 study days over 3 years. Within AWP, this allowance is normally averaged out as 10 days per year. AWP also offers a study leave budget of £1,500 in a period of 3 years, normally averaged out as £500 per year. Individuals may request to use a greater proportion of their triennial entitlement of leave and budget within a single year, following discussion with their Medical Lead.

## 8. Clinical leadership and medical management

The responsibility for all medical staff within the Trust lies with the Medical Director, Dr Sarah Constantine. She is supported by Dr Pete Wood, Deputy Medical Director for Professional Standards and Dr Suchitra Sabari Girivasan, Deputy Medical Director for Clinical Effectiveness.

Each Directorate is led by a Clinical Director and an Associate Director of Operations. Operational accountability for the post holder lies with the Medical Lead, who has line management responsibility, and the Operational Manager for the service.

The post-holder will be encouraged and supported in developing the appropriate management and leadership skills to fully participate in service developments.

The post-holder will be expected to provide clinical leadership to the multi-disciplinary team and will be encouraged to contribute to other relevant management activities within the Directorate and within AWP.

The post-holder will be expected to attend the Trust's Medical Advisory Group (TMAG), which meets quarterly and includes all medical staff within AWP. This meeting provides a dual function of both education and information sharing. It enable consultants to extend professional advice to the Executive team and for the Executives to consult and inform medical staff of key Trust business.

## 9. Leadership development programme

The leadership development programme is designed for recently appointed Consultants in AWP to help them understand how their leadership behaviours affect the culture in which they work, and to learn more about themselves as leaders. The programme is one year long and consists of a workshop every 2 months, progressing to masterclasses. It concentrates on 3 core areas:

*Self as Leader*

*Leading teams*

*Leading change and transition*

The programme is run by the Advanced Coaching Academy who have extensive experience of working with the NHS, have been in senior leadership positions themselves, and currently run the

Managers Toolkit and coaching training in AWP. The programme includes an individual coaching session at the end of the first module focussing on yourself as a leader.

At the end of the first year of the leadership development programme there will be a series of masterclasses to choose from including:

*Influencing skills for leaders*

*How leaders effectively manage conflict*

*Inclusive leadership*

*Authentic leadership with integrity*

Medical Leads provide individual supervision for Consultants, which is more frequent for newly appointed Consultants to support the transition to being a Consultant in AWP.

## 10. Mentoring

AWP has a mentorship scheme available for newly appointed consultants. The post holder is invited to take up a mentor within our Trust, and upon appointment, the new consultant is invited to contact the Director of Medical Education who will link them in with our database of mentors. Dr Sarah Price is the lead for the mentorship scheme, and she can also be approached for guidance and advice by newly appointed medical staff.

The Trust strongly supports mentorship for newly appointed consultants and the time required for mentorship will be available within the job description and job plan. All consultants are expected to be an active member of a CPD group meeting, Royal College of Psychiatry standards.

## 11. Appraisal and revalidation

All Consultants within the Trust participate in a formal appraisal process and attend an appraisal meeting on an annual basis either with the Medical Lead or an approved Trust appraiser. This is in line with our medical appraisal policy and the good medical practice and guidance from the General Medical Council in preparation for revalidation. The appraisal lead for the Trust and the Medical Education Department hold a list of recognised appraisers within the Trust.

The appraisal process requires all Consultants to use Edgumbe 360 and to provide an on-going portfolio of supporting evidence which conforms to national, General Medical Council and Royal College standards and guidance.

Appraisals link to the job planning process in line with all Trust medical staff. Sufficient support and time will be allocated in the timetable to allow full participation in the Trust's appraisal process (through allocation of SPA) and the necessary CPD and study leave activity that relates to the appraisal development plan will be supported.

In addition all medical staff must also comply with the Trust policies in relation to the process of Revalidation by the GMC. The Responsible Officer for the Trust is Dr Sarah Constantine, Medical Director.

The Trust uses PReP (Premier IT Revalidation e-Portfolio) to organise the appraisal process and facilitate revalidation recommendations by the Responsible Officer. All medical staff will be required to use PReP.

## 12. Job planning

Job planning is undertaken in conformity with the terms and conditions of the new consultant contract. Job planning meetings take place annually between May June and July with a clinical manager, together with a general manager if this is agreed by the consultant. Part of the job planning process will include local delivery unit (LDU) objectives that are based on the Trust's annual objectives. A group meeting with all the consultants in the LDU may take place to discuss these local objectives prior to individual job planning meetings. Job plans are reviewed within 6-9 months.

The job planning process links to appraisals. Each consultant is provide with a line manager and will have a minimum of a yearly job plan review. Should there be a proposed change in the workload, a timely job plan review will be offered to support safe working and identify the need for any additional support.

Job plans are submitted electronically using PReP (Premier IT Revalidation e-Portfolio) the same software that manages the appraisal process. The Trust does not expect consultants to opt out of the Working Time Directive.

## 13. Teaching and training

All medical staff are expected to be accredited as clinical supervisors, and as an education supervisor if directly responsible for a trainee. The post-holder will be expected to undertake the supervision and training of junior and middle grade doctors, Specialist Registrars, multidisciplinary colleagues; where appropriate and medical students from Bristol Medical School and the University of Southampton.

As a junior doctor trainer the post holder will be responsible for their professional supervision and management. Where appropriate, the postholder will be named in the educational contract of junior staff as the person responsible for overseeing their training. The post holder will be expected to be involved and contribute to the regular teaching programme for trainee medical staff and medical students.

The Director of Medical Education; Dr Angelika Luehrs, is supported by 4 Associate DMEs, one Senior Teaching Fellows, 16 Undergraduate and Postgraduate Tutors and 7 FY Leads across the footprint of the Trust. The Trust has 51 Core Trainees, 37 Advanced Trainees, 35 FY1 and FY2 Doctors, and 18 Vocational Training Scheme posts for General Practice (GPVTS) across 9 training locations within the Trust.

## 14. Research

Research is an area of strength in AWP, with the primary source of income being the West of England Clinical Research Network delivering NIHR portfolio research. In recent years AWP has

been nationally commended by NIHR for increasing our level of research activity, and supports circa 1,000-2,000 participants to take part in research each year.

The vision for research within AWP is to shape ourselves towards clinical excellence by conducting research that improves our services and makes a difference to service users, carers and staff. Whilst ensuring we provide as many opportunities for everyone to reduce health inequalities and provide evidence based services. The priority areas for research in AWP are; Research into clinical interventions that have the greatest impact on outcomes and advance services, visible leadership for research trust-wide, research being at the centre of all services, and linking with local, national and government priorities to make things better for service users, carers and staff.

AWP benefits from good collaboration with three local universities (Bristol, UWE and Bath) and is one of the major national centres for research into suicide prevention. Over recent years, AWP has worked with its partner universities and NHS trusts in the region to form Bristol Health Partners, a collaboration of NHS organisations, universities and councils. The Partners' mission is to generate significant health improvements in service delivery in Bristol by integrating, promoting and developing Bristol's strengths in health services, research, innovation and education. AWP has good representation on all health integration teams (HITs) relevant to the Trust.

## **15. Mental Health Act and Responsible Clinician**

The post holder would be expected to be approved as a Responsible Clinician and will be expected to renew this approval according to agreed procedures.

## **16. Administrative support and office accommodation**

The consultant will have access to an appropriately qualified administrative/secretarial support to enable them to effectively participate in all their roles and responsibilities, to manage their diaries and provide support for non-clinical activities. There is a 1.0 WTE Medical Secretary (band 4) whose time is approx. 0.7 WTE for Consultant and 0.3 WTE for Staff Grade and Pharmacist. They are able to delegate tasks to colleagues from the general admin team as need dictates. The named individual will be based at Fountain Way.

The consultant will have a desk in a dedicated office with a phone, computer facilities, access to the internet and IT support.

The Consultant will have access to a private room with a phone and computer facilities for the purposes of seeing patients, carers and families where a confidential, safe and therapeutic environment is necessary. This room is also available for the purposes of supervision and speaking with colleagues about patients in a confidential environment. They will also have access to this private room in order to dictate letters and prepare reports, which usually contain confidential and sensitive information.

A mobile phone and a dedicated laptop will be provided to support mobile working.

## 17. Clinical governance and quality assurance

The Trust is committed to providing high quality, effective care and to this end has a Trust-wide Clinical Governance Committee and locality based Clinical Governance Committees.

It seeks to support Clinical audit and the development of clinical guidelines and protocols, care pathways and care packages based on best evidence. It seeks also to promote continuous education and monitoring of professional performance in order to promote the highest standards of practice.

The post holder will be expected to:

- Contribute to clinical governance and responsibility for setting and monitoring standards
- Participation in clinical audit, and/other local assurance processes.
- Participation in service/team evaluation and the planning of future service developments.

## 18. Quality improvement

- Leads and manages a team in a way that supports the development of a culture of continuous improvement and learning.
- Utilises a quality improvement approach to think systemically about complex problems, develop potential change ideas and test these in practice using a systematic QI methodology.
- Empowers the team to resolve local issues on a daily basis using the tools and method of quality improvement without staff having to seek permission.
- Promotes awareness and understanding of quality improvement, and shares learning and successes from quality improvement work.

## 19. External duties, roles and responsibilities

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

## 20. Other duties

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.

## 21. 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 three months with the clinical manager to review and revise the job plan and objectives of the post-holder. The overall split of programmed activities for a full time post is 7.5 to be devoted to direct clinical care and 2.5 to supporting professional activities ( as per the Royal College of Psychiatrists recommendations). The timetable

is therefore indicative only. A formal job plan will be agreed between the post-holder and medical lead and service manager three months after commencing the post and at least annually thereafter.

## 22. On-call and cover arrangements

On-call is a service requirement of this post. The Swindon and Wiltshire on-call rota is 1 in 25. The on-call work is category A and attracts a 3% supplement with 1 PA per week for extra work undertaken (predictable and unpredictable work) on-call.

Undertaking section 12 assessments is a requirement of on-call. Specialities covered when working on call include general adult psychiatry and old age psychiatry.

Cover for both annual and study leave is reciprocal with other Consultants.

Cover is agreed mutually in advance of each period of leave.

## 23. Wellbeing

### Effective local occupational support

As part of our Health and wellbeing program AWP work in partnership with People Asset Management (PAM OH) to provide our staff with a high quality occupational Health services. PAM OH are SEQOHS accredited (Safe, Effective, Quality, Occupational health Service) and provide a full range of OH services including new employee health assessments, access to a full workplace immunisation programs and manager referrals to support staff and managers during periods of ill health. Staff also have access to a 24/7 "sharps" telephone advice line, and a wealth of health and wellbeing information and resources via both the PAM OH website and the AWP health and wellbeing pages on ourspace.

As a mental health Trust AWP recognise the importance of supporting staff mental wellbeing, a free employee assistance program (EAP) provided by PAM assist gives staff access to 24/7 confidential counselling service, which can be accessed online, via the telephone or face to face, additionally we have our own in-house staff Traumatic stress service which can provide support to staff following a traumatic incident.

### Proactive local organisational systems to support doctors' wellbeing following serious incidents

AWP has a range of sources of psychological wellbeing support that would be available to doctor's following an incident. Following a serious incident a Staff Support Debrief Meeting can be requested for all staff involved and are facilitated by trained AWP staff. In addition, further wellbeing support is available through our Occupational Health service and psychological interventions for post-traumatic stress disorder are available from AWP's Traumatic Stress Service for staff.

### Availability of local initiatives/resources that promote workforce wellbeing

AWP has several ways to support the Health and Wellbeing of staff. There are policies that cover the approach to work life balance such as flexible working and retire and return the flexible approach to retirement. AWP also supports psychical wellbeing through schemes like the cycle to work scheme, our health and wellbeing booklet, vulnerable person's risk assessment and events like the Walking Challenge. Psychological wellbeing is also important and AWP has a range of interventions starting with wellbeing conversations with line manager to a pathway of interventions

such as reflective practice, staff support debriefs and the AWP Traumatic Stress Service for staff. We have an active coaching network and doctors can take part in reciprocal mentoring. There is also peer group support and Balint groups for Consultant/SAS doctors. There are active Health and Wellbeing Groups in each area that you can connect in with and have your voice heard.

## 24. Contract agreement

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

## 25. Leave

Entitlement will be 32 days per annum for full time working, increasing to 34 days on completion of 7 years' service as a Consultant. In addition, there is entitlement to 8 Public/Bank Holidays. For consultants contracted to work less than 10 PAs per week, annual leave, including Public/Bank Holidays will be calculated pro rata.

## 26. Visiting arrangements

We would welcome the opportunity to meet with any interested candidates prior to the interviews or submission of an application. To discuss the post further or to arrange a visit to the hospital or community facilities please contact:

Dr Maame Duku Sarfo

Consultant Psychiatrist, Medical Lead

017722820173

Short listed applicants are encouraged to take the opportunity of discussing the post with the Chief Executive or Medical Director prior to interview.

**Dominic Hardisty**

Chief Executive

Tel: 01225 258241

**Dr Sarah Constantine**

Medical Director

Tel: 01225 258407

**Dr Pete Wood**

Deputy Medical Director

Tel: 01225 258407

## 27. Suggested timetable

Day	Time	Location	Activity	Category	No. of PAs
Monday	AM	Various	Home Visits/Care Home Liaison	DCC	1
	PM	Base	CMHT/Memory Clinic, Salisbury	DCC	1
Tuesday	AM	Base	CMHT Team Meeting Salisbury 9:30 – 10:30 Clinical Admin	DCC	1
	PM	Base	Academic Programme/CPD Group Salisbury Clinical Admin	SPA DCC	0.5 0.5
Wednesday	AM	Base	Memory Team Meeting Salisbury 9.30-10.30 Specialty Doctor Supervision (0.5PA)	DCC	1
	PM	Base	CMHT/Memory Clinic Salisbury	DCC	1
Thursday	AM	Various	CMHT/Memory Clinic Warminster	DCC	1
	PM	Base	Additional agreed activity(optional)	SPA	1
Friday	AM	Base	CMHT/Memory Clinic Salisbury	DCC	1
	PM	Various	CPD/Peer Supervision/Audit	SPA	1

Programmed activity	No of PAs
Direct clinical care (DCC)	7.5
Supporting professional activities (SPA)	2.5
<b>Total Programmed Activities</b>	<b>10</b>
Unpredictable emergency on call work (APA payment)	1

## 28. Population and attractions of area

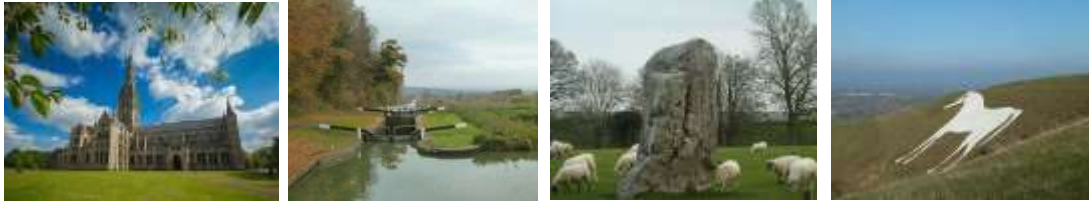
### Population

In Wiltshire, the population size has increased by 8.4% from around 471,000 in 2011 to 510,400 in 2021. There has also been an increase of 30.5% in people aged 65 years and over, an increase of 4.2% in people aged 15 to 64 years and an increase in 0.7% in children aged under 15 years.

Wiltshire's Black and Minority Ethnic (BME) groups made up 4.3% of the population and 10% of children aged under 16 years in Wiltshire are living in relative low income families (Child Health Profile 20/21)

Life expectancy in Wiltshire at aged 65 is higher on average than in England and broadly similar to the South West for both males and females. (JNSA)

### Attractions of area



Wiltshire is a beautiful county of chalk plains with eight White Horse chalk figures on hillsides, river valleys, ancient monuments and world heritage sites including Stonehenge and Avebury.

Trowbridge is the County town of Wiltshire. It is just 25 minutes outside of Bath with excellent transport links and only 40 minutes from the M4 corridor. It is a busy town full of shops, cafes and restaurants. There are country parks, leisure facilities as well as sports clubs such as cricket, rugby and football.

Devizes is the geographical centre of the county of Wiltshire. It is approximately 30 minutes from the M4, and access to the M3 is also straightforward. Devizes is in the heart of the Wiltshire Countryside and is a historic market town with a range of local shops, pubs and restaurants. There is a weekly market as well as regular Farmer's Markets as well as a Food and Wine Festival in July. The Kennet and Avon Canal passes through the town with its famous flight of 29 locks which are easily accessed on foot.

Salisbury Cathedral is famous for having the tallest church spire as well as the largest cloister and contains a clock which is among the oldest working clocks in the world.

The beautiful rural countryside in Wiltshire makes it ideal for walking and other outdoor activities such as cycling and horse riding. There are 8,000 footpaths in the county encompassing short walks to long distance trails. Walking festivals are held annually in Bradford-on-Avon and Corsham.

There is wealth of things to do and places to visit such as historic towns, the National Trust village at Lacock and Stourhead Estate, as well as Longleat and surrounding cities. The area is packed full of history. You will also discover some fantastic eateries from Michelin-Starred to cosy traditional English pubs. There are also a variety of annual music and art festivals.

Wiltshire has twenty-nine county secondary schools, publicly funded, and another thirteen independent secondaries, including Marlborough College, St Mary's Calne, and Dauntsey's, near Devizes. Salisbury has two grammar schools (South Wilts Grammar School for Girls and Bishop Wordsworth's School). There are also excellent schools in Devizes and Trowbridge ranging from Infant, Junior, Secondary, Independent as well as the Devizes Centre and Trowbridge Campus of the Wiltshire College and University Centre.

The county has excellent transport links to London and is in easy travelling distance to the coast. To find out more visit: <https://www.visitwiltshire.co.uk>

## 29. Person Specification

Criteria	Essential	Desirable	How assessed
<b>QUALIFICATIONS</b>	MB BS or equivalent medical qualification.	Relevant Higher Degree e.g MD,PHD,Msc or other additional clinical qualifications  MRCPsych OR MRCPsych equivalent approved by the Royal College of Psychiatrists.  Additional clinical qualifications.	
<b>ELIGIBILITY</b>	Fully registered with the GMC with a licence to practise at the time of appointment.  Included on the GMC Specialist Register OR within six months of gaining CCT.  Approved clinician status OR able to achieve within 3 months of appointment	CCT in Old Age Psychiatry	Application form Documentation
<b>EXPERIENCE</b>	Experience of assessing and treating patients in a community setting.  Knowledge and evidence of participation in CPD.  Evidence of effective multidisciplinary team involvement.		Application form Interview
<b>PERSONAL SKILLS</b>	To possess leadership skills and be able to work collaboratively in a multidisciplinary team.  Ability to manage own time, workload and prioritise clinical work.  Ability to appraise own performance as a Consultant.  Able to demonstrate excellent communication skills, in order to effectively work with patients, carers and staff.  Excellent written and oral communication skills	Evidence of specific achievements that demonstrate leadership skills Flexible and tolerant.  Relaxed when dealing with teams under pressure. Motivational skills.	Application Interview References Discussion Group

	Approachable and compassionate personality with good listening skills.		
<b>CLINICAL SKILLS</b>	Ability to assess and treat psychiatric problems in Older Adults and to deal with crisis situations.		Application Form Interview
<b>KNOWLEDGE</b>	<p>Understanding of the management skills required to function successfully as a Consultant.</p> <p>Awareness of current issues in mental health service provision, policy and legislation.</p> <p>An understanding of the importance of Clinical Governance in NHS organisations and importance in patient care.</p>	<p>Knowledge of alternatives to inpatient admission care approaches.</p> <p>Excellent knowledge of diverse range of interventions.</p>	Application Form Interview
<b>TEACHING</b>	<p>Commitment to and experience of undergraduate and postgraduate learning and teaching.</p> <p>Understand principles of teaching.</p>	<p>Experience as an Educational Supervisor for trainees.</p> <p>Evidence of organisation of further teaching programmes in medical education or multi-professional education.</p>	Application Form Interview
<b>RESEARCH &amp; AUDIT</b>	<p>Experience or involvement in a research project and publication.</p> <p>Ability to supervise junior medical staff undertaking research projects.</p> <p>Experience of carrying out an audit project.</p>	<p>Ability to critically appraise published research.</p> <p>Published audit project.</p>	Application Form Interview
<b>MANAGEMENT</b>	<p>Able to manage priorities.</p> <p>Evidence of management/leadership skills training.</p> <p>Ability to manage risk.</p>	<p>Previous management experience including that of other junior medical staff.</p>	Application Form Interview
<b>APPRAISAL &amp; REVALIDATION</b>	Name and details of current Responsible Officer, where appropriate	Evidence of satisfactory completion of Appraisal within the last 12 months. Copy of Output of Appraisal (Form 4 or equivalent).	Post interview processes
<b>OTHER</b>	<p>Able to fulfil the duties of the post.</p> <p>Independently mobile and willing to travel.</p> <p>Satisfactory pre-employment checks</p>		Application/Interview/Post interview process

## 30. Key terms and benefits

Following is a summary of the main terms and conditions together with the benefits of joining Avon & Wiltshire Mental Health Partnership NHS Trust. Any formal offer of employment will be accompanied by a full statement of terms and conditions.

### Salary

The appointment is at Consultant grade with salary thresholds from £93,666 - £126,281 per annum for a full time post of 10 Programmed Activities (PAs). Part Time employees will receive payment pro rata to the above full time salary range. The starting point on the salary scale will depend on the date on which the doctor was first appointed as an NHS Consultant and may take account of other consultant level experience or factors, which have lengthened consultant training, in accordance with the Terms and Conditions – Consultants (England) 2003. This post is also subject to nationally determined terms and conditions of service. If candidates are in receipt of Discretionary Points or Clinical Excellence Awards these will be honoured.

### Sick Pay

Entitlements are outlined in paragraph 225 – 240 of the TCS.

### Pension

The NHS offers a superannuation scheme, which provides a variety of benefits based on service and final salary. Their pay will be subject to the deductions of contributions in accordance with the scheme's regulations. Membership of the scheme is via automatic enrolment, further details are available on appointment.

### Equal Opportunity & Diversity

Avon and Wiltshire Mental Health Partnership NHS Trust is committed to the fair treatment of all people, regardless of their sex, gender re-assignment, race, colour, ethnicity, ethnic or national origin, citizenship, religion, beliefs, disability, mental health needs, age, domestic circumstances, social class, sexual orientation, ex-offender status, political allegiance or trades union membership. The Trust requires all of its employees to treat all of its stakeholders including colleagues, service users, carers and their visitors with dignity and respect.

### Flexible Working

The Trust is committed to assisting employees to achieve a healthy work/life balance and will consider sympathetically requests for flexible working arrangements, taking into account the impact on colleagues and the service.

### Maternity, Paternity and Special Leave

AWP offers generous maternity leave, after qualifying service, with extended maternity pay together with up to a year's leave with the right to return to your role within the Trust. Paid Partner Leave of two weeks following the birth of a child is also available, as well as Additional Paternity Leave (APL) subject to eligibility. Special Leave is also available when staff are experiencing difficulties for compassionate, domestic, personal or family reasons.

### Relocation Expenses

The successful candidate *may* be eligible to apply for assistance with removal and associated expenses in accordance with the Trust's Relocation Policy.

### **Travel Expenses**

Travel expenses will be in accordance with paragraphs 277 – 308 of the TCS for journeys incurred in performing your duties.

### **Interview Expenses**

Second-class travelling expenses will be reimbursed to shortlisted candidates for costs associated with making a pre-interview visit. Subject to the prior agreement of the Trust, shortlisted candidates who make a second visit may be granted expenses on this occasion also. For candidates travelling from abroad, expenses are payable only from the point of entry into the UK.

### **Two Ticks Disability Symbol**

The Trust is committed to the employment and career development of disabled people. To demonstrate our commitment we use the Two Ticks Disability Symbol awarded by the Employment Service. We guarantee an interview to anyone with a disability who meets the minimum criteria for the post. You do not have to be registered disabled but consider yourself to have a disability.

### **Policies and Procedures**

Trust employees are expected to follow Trust policies, procedures and guidance as well as professional standards and guidelines.

### **Confidentiality**

Much of the work is of a confidential nature. This means that no discussion should take place about the care, needs, or activities of any service user, except in the clear interest of that service user or other members of staff. Staff are reminded that personal information concerning colleagues is also confidential.

### **References**

Candidates are required to submit the names and addresses of three referees, one of whom must be their current or most recent employer. Any offer of employment will be subject to the receipt of three satisfactory references.

### **Occupational Health**

Any offer of appointment will be subject to satisfactory medical clearance by an external Occupational Health provider. This is usually by health questionnaire, but may involve a medical examination.

### **DBS Checks**

The appointment will be subject to clearance from the Disclosure and Barring Service.

### **Induction**

The AWP central and local workplace induction programme will be offered on commencement with the Trust, the content will vary according to individual need. In addition to this all new consultants within the first two months of joining AWP will also be offered a bespoke induction with the Executives. This will be in the form of one to one meetings and will enable new consultants to gain a better understanding of AWP's aims and objectives, the board's approach to strategic leadership and how the board puts this strategy into practice.

### Library services

Avon and Wiltshire Mental Health Partnership Trust (AWP) Library and Knowledge service (LKS) provides library and information services to all staff, students on placement, carers and partner organisations who support our service users across the AWP geographical area.

We support the provision of the highest quality mental health care through access to authoritative, high quality information and resources for clinical decision making, continuing professional development, study and research.

We offer book loans, e-book access, document supply, access to an extensive range of journals and databases, evidence and literature search services, current awareness services and training in digital skills. We also provide support for health and wellbeing, run reading groups and book clubs.

The majority of services are accessible online, whilst physical libraries are available at Callington Road Hospital, Green Lane Hospital Devizes and Fountain Way, Salisbury, offering computer access and quiet study space.