

CONSULTANT PSYCHIATRIST
Working Age Adult
Northwest Surrey Home Treatment Team
Two Bridges, Chertsey

Post and Specialty:	CONSULTANT PSYCHIATRIST Working Age Adult Northwest Surrey Home Treatment Team		
Base:	Two Bridges, Chertsey		
Contract:	Full-Time salary will be set in accordance with the new Consultant Contract £99,532 - £131,964 Per Annum, and Part-Time will be pro-rotta		
	Total PAs: 10	SPA: 2.5	DCC: 7.5
Accountable professionally to:	Chief Medical Officer		
Accountable operationally to:	Associate Medical Director		
Key working relationships and lines of responsibility:	Service Manager: Nicholas Chiduzu Nicholas.Chiduzu@sabp.nhs.uk Divisional Medical Lead: Dr Shriti Burgul Associate Director: Bradley Platt Associate Medical Director: Dr Shriti Burgul Divisional Director: Sharon Gregory Chief Medical Officer: Dr Emma Whicher Chief Executive: Graham Wareham		

1 Introduction

The HTT provides support and treatment for patients at the threshold of admission. They work with community teams that provide care following the Care Pathways underpinned by clinically focused risk management principles. The goals are clinical progression within a recovery framework.

The current postholder is a Consultant Psychiatrist responsible for providing clinical input and leadership to the North West Home Treatment Team, which covers the Woking, Runnymede, Spelthorne and Elmbridge

localities and working alongside a multidisciplinary team in line with New Ways of Working. The consultant is based at Two Bridges, Chertsey.

2 Trust Details

Surrey and Borders Partnership NHS Foundation Trust is the leading provider of health and social care services for people of all ages with mental health problems, drug and alcohol problems and learning disabilities in Surrey and Northeast Hampshire for people of all ages.

We provide various community services, integrated health and social care, early intervention, and detection programmes, and highly specialised therapy and treatment. Our high-quality care focuses on enabling people to live well with their conditions and to work towards recovery. Over 3,132 people, on average, work with us substantively at Surrey and Borders Partnership to provide our services, which equates to an average of 2,926 whole-time equivalent (WTE) staff. Many of these are highly skilled professionals who work with various partners in the private, public, and voluntary sectors to ensure we deliver high-quality care to our local population of 1.3 million. In addition, we seek to involve and engage people who use our services and their families in our community, and we have just over 7,000 public members of our Foundation Trust.

The Trust has hosted core trainees in psychiatry from HE KSS. There are also HST 4–6-year trainees on rotation from HEKSS, and the trust hosts GPVTS and foundation trainees. In addition, there are opportunities for small-group medical student teaching from Southampton, Brighton, or St. George's Medical Schools. In April 2005, we were established as a health and social care partnership Trust and in May 2008, we became an NHS Foundation Trust, the first mental health and learning disability Trust in the Southeast Coast NHS region to gain this status.

Our Trust's projected 2023/24 financial year income is about £320 million. In previous years, we reported the income for Children and Family Health Surrey; this service now trades within the Trust. We deliver high-quality care across our 140 services registered with the Care Quality Commission. Our services are provided in community settings, hospitals, and residential homes, emphasising local treatment and support close to people's homes wherever possible.

The M25 and M23 pass through the area, giving easy access to both Gatwick and Heathrow airports and the south coast.

3 Service Details

We provide a comprehensive range of services in the community and hospital settings: talking therapies, mental health services for adults, children and adolescents, drug and alcohol, learning disabilities, eating disorders, Foetal Alcohol Spectrum Disorder clinic, forensic and other mental health.

The HTT aims to provide intensive community care underpinned by acute, dynamic, clinically focused risk management principles. The goal is therapeutic containment and clinical progression within a recovery framework. The HTT multidisciplinary team develops individual care plans for each patient to work towards stepping down to less intensive clinical support. In addition to providing excellent psychiatric crisis care, the HTT strives to ensure patients' physical health and well-being are actively managed. The HTT interfaces with Inpatient Acute Services, Triage Services, Section 136 Places of Safety, Community Services, Liaison Services and the Criminal Justice System. In addition, most patients are referred from Community Mental Health Recovery Services and Liaison Services.

HTT offers home visits across Surrey to people aged between 18 to 65 years and suffering from a mental health crisis and for 65+ during weekend hours. HTT assesses whether the people in crisis require hospital admission or can be treated at home, offering an alternative treatment to avoid admissions where possible. If hospitalisation is necessary, HTT will actively plan early discharge from the ward and provide intensive care

following discharge (or during periods of leave). HTT regularly visits the individual until the crisis has been resolved and ongoing care is in place, operating 24 hours a day, 365 days a year.

Four Home Treatment Teams in Surrey are aligned with Four WAA locality services: Northwest Locality, Mid & East Locality, Southwest Locality and North-East Hants & Southwest Locality. The areas covered,

- Northwest - Elmbridge, Runnymede, Spelthorne, Woking
- Mid & East - Epsom and Ewell, Mole Valley, Reigate and Banstead, Tandridge
- South West – Guildford, Waverley
- North-East Hants & Southwest – Hart, Rushmoor, Surrey Heath

The North West HTT serves a total local borough population of approx over 300 000

4 Local Working Arrangements

The Consultant will be employed by Surrey and Borders Partnership NHS Trust and based at Two Bridges, Chertsey, joining the multidisciplinary team. The rationale for appointment to this post is, therefore, to maintain a consultant role in this service.

They will be responsible to the Associate Medical Director for all managerial issues, including job planning.

4.1 Staff within the Northwest HTT consists of,

- | | |
|---|---------------|
| • Consultant Psychiatrist | 1 (This Post) |
| • Band 8 Service Manager | 1 WTE |
| • Specialist Dr | 1 WTE |
| • Band 8 Clinical Psychologist | 0.5WTE |
| • Band 7 Clinical Team Leader | 3 WTE |
| • Band 6 Nurse | 12 WTE |
| • Band 6 Social Worker | 2 WTE |
| • Band 6{5} Nurse | 2 WTE |
| • Band 3 Support Worker | 4 WTE |
| • Admin | 1 WTE |
| • Compliment of Band 3, 5, 6, 7 and 8a nursing staff and Band 3 and 4 administrative staff. | |

4.2 The caseload number can vary between 30 to 40 approximately. Work is shared with all the team members and decided daily. Therefore, maximum patient contact is 3-4 for the medical professional.

4.3 The team will support the Consultant Psychiatrist with,

- Participating in triaging of referrals daily.
- Completing initial assessments.
- Liaising and collaboratively working with other professionals.
- Making referrals to acute services where indicated.
- Social workers are providing safeguarding support.
- Occupational therapists provide assessments and interventions to facilitate holistic care.
- Ongoing monitoring of mental state and risk management.
- Offering parent-infant observations and, where indicated, intervention from nursery nurses.
- Offering 1:1 and group psychology interventions.

All caseloads are reviewed through MDT. The Team Leader/Service Manager is pivotal in ensuring appropriate referrals are accepted within the team in liaison with professional leads and Consultants.

Compliance with all Information Governance requirements is achieved by the team's taking responsibility for the efficient use and allocation of their space, which may include allocating designated space for individuals,

including consultant psychiatrists, based on the established principle that office space is available for others if unoccupied. In addition, bookable and drop-in rooms will ensure that all practitioner office areas offer privacy for activities requiring a higher level of confidentiality. All community hub office spaces are entirely IT-resourced, and consultants are supported to work remotely by providing remote access-enabled laptops and mobile telephony. Administrative support for the consultant is provided by a team administration function overseen by a lead administrator and managed by the team manager in collaboration with the consultant psychiatrist. This, therefore, enables consultant administration needs to be prioritised as appropriate.

4.4 Management Structure:

Graham Wareham is the Chief Executive at the Surrey and Borders Partnership NHS Trust. Clinical services and staff are managed through a Directorate system. Locality and Divisional Managers support Team Leaders and are responsible for running their directorate for its clinical, financial and operative performance. Clinical Governance issues are the responsibility of Clinical Governance Committees headed jointly by the Chief Medical Officer and Chief Nursing Officer.

5 Continuing Professional Development (CPD)

- Undertake training and continuing professional development as necessary in line with the development of the post and as agreed with the line manager as part of the personal development planning process.
- To be registered with the Royal College of Psychiatrists for Continuing Professional Development. This includes achieving and maintaining good standing for CPD in line with the requirements of the Royal College of Psychiatrists.
- It is expected that all consultants will be members of a CPD peer group. These are typically organised locally, and new consultants can join a local group conveniently for their main base. Meetings usually are monthly or bi-monthly.
- The Trust supports consultant CPD activities by providing a local CPD peer group structure, access to study leave, and a study leave budget alongside a local academic programme the post holder is expected to attend. The Department of Medical Education supports these functions.
- Study leave is provided per the Consultant Terms and Conditions of Service. It is applied through the Department of Medical Education, authorised by the CPD peer group in line with Trust guidance.

6 Clinical Leadership and Medical Management

- To show a commitment to New Ways of Working and provide consultation and supervision to team members.
- To work with consultant colleagues and local managers to develop safe, clinically effective, cost-effective service in Surrey.
- The post holder will be expected to work constructively with SABP Trust managers (including the Associate Medical Director) to work with local commissioners and to deliver and develop a strategy to ensure that the Trust remains the provider of choice for liaison services.
- To develop leadership capability aligned with the Trust approach to leadership development for all staff.

There are opportunities for clinical leadership at the local primary care interface meetings attended by local consultant colleagues and GP mental health leads.

7 Appraisal and Job Planning

- To take part in annual appraisal and job planning processes. Currently, the Associate Medical Director conducts the annual job plan review in association with the team coordinator and appraisal is arranged with a trained peer appraiser by mutual agreement.
- Job planning for consultants is undertaken annually, generally during the 1st three months of the year. It is preceded by an appraisal, usually completed by all medical staff in the last three months of the year.
- Appraisal is undertaken by a panel of trained appraisers and is supported by the SARD (Strengthened Appraisal and Revalidation Database) software.
- All consultants must have five sessions of managerial supervision per year and evidence of clinical and administrative management must be presented and discussed as part of the annual appraisal.
- Additionally, the post holder must provide line management to identified staff, ensuring staff have set objectives and personal development plans and appraisals are regularly undertaken.

8 Teaching, Training and Research

The Trust has significantly increased the number of core trainees (CT1-3) from 17 to 40 in psychiatry from Kent, Surrey, and Sussex Deanery. Several ST 4-6 trainees from Southwest London and St. George's Trust are also rotating. However, the management of the higher trainees has now been transferred to the KSS Deanery from London. In addition, there are GPVT trainees. There are opportunities for small-group medical student teaching from Southampton, Brighton, or St. George's Medical Schools. There is a robust academic programme under the direction of the Director of Medical Education, Dr Jeremy Mudunkotuwe. Library facilities and links with the Academic Department of Psychiatry at St. George's Hospital Medical School are available for research and training.

Consultants are encouraged to participate in research. Further information is available from Professor Ramin Nilforooshan, Associate Medical Director for Research in the Trust. If agreed, the Trust will offer support and resources to consultants with research interests that they wish to pursue.

The post holder must undertake audit activities to develop the quality of service provided by the team supported by the Trust's Clinical Audit Department and the identification of Supporting Professional Activity in their job plan. In addition, the Trust is committed to participating in several national audit programmes, including POMH-UK and regular audits to support CQUIN activity, including cardio-metabolic assessment and intervention.

9 Quality Improvement

The post holder must undertake audit activities to develop the quality of service provided by the team supported by the Trust's Clinical Audit Department and the identification of Supporting Professional Activity in their job plan. In addition, the Trust is committed to participating in several national audit programmes, including POMH-UK and regular audits to support CQUIN activity, including cardio-metabolic assessment and intervention.

10 Mental Health Act and Responsible Clinician Approval

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

11 Administrative Support and Office Facilities

There is office provision for the consultant psychiatrist on site and access to IT. In addition, there is administrative support shared with other team members.

Administrative support for the consultant is provided by a team administration function overseen by a lead administrator and managed by the team manager in collaboration with the consultant psychiatrist. This, therefore, enables consultant administration needs to be prioritised as appropriate.

- Library facilities are available at the hospital, and there are links with the Academic Department of Psychiatry at St. George's Hospital Medical School for research and training purposes.
- Desktop PCs are widely available at all sites.
- The Trust is moving to mobile working, with most medical practitioners having dedicated use of a trust-approved laptop with remote access and smartphone usage.
- Flexible working practices and dedicated administrative support will assist with clinics, enabling you to focus on what you do best to deliver high-quality care to children and young people.
- The Trust has standardised on Microsoft Office software, and all clinicians are strongly encouraged to develop computer skills.
- The Trust uses SystemOne for its clinical electronic record-keeping system. Training will be provided if required.
- Bookable and drop-in rooms will ensure that all practitioner office areas offer privacy for activities requiring higher confidentiality.

12 Clinical Duties of Post Holder

- The post holder will be responsible for delivering Consultant psychiatric input and clinical leadership to the multidisciplinary team and acting as a consultant/advisor to the team in line with the developing models of practice under 'New Ways of Working'.
- The post-holder will be expected to work effectively with colleagues from other professional disciplines in the team and deliver services consistent with the Trust policy for the Care Programme Approach.
- The post-holder is also expected to liaise effectively with the other general and specialist teams operating in Surrey to ensure effective handover of care when patients transfer between teams as part of the patient pathway.
- On average, an FT Consultant will have 2-3 outpatient clinics per week as follow-up appointments and approximately 2 to 3 Emergency/Domiciliary visits per week.
- The post-holder will be responsible for delivering consultant psychiatric input to patients referred to and admitted under the care of HTT in line with the agreed service Operational Policy.
- To provide senior medical input to the HTT, ensuring safe and timely service provision for service users.
- The post holder will be expected to consider all safe community treatment options with the multidisciplinary team for treatment before referring patients for in-patient admission.
- To provide intensive and expert intervention and management of service users with acute, chronic, and severe mental illness when in crisis in line with the HTT care pathway.
- To work flexibly and creatively as part of a multidisciplinary team promoting informed risk-taking and anti-discriminatory practice.
- To liaise with both internal and external interfaces concerning admissions and transfers/discharges.
- To liaise with the Consultant Psychiatrists working in the inpatient and community settings concerning admissions and transfers/discharges.
- To provide specialist medical advice and consultation to various health and social care staff as appropriate to promote the effective delivery of person-centred mental health care.
- To ensure high-quality, safe clinical service is provided to all service users by working with MDT, HTT Manager and other senior managers.

- To provide advice and support to the Rapid Response Services and support with Mental Health Act assessments for service users under the care of HTT.
- To ensure excellence in providing medical and psychiatric assessments to all referred service users to the service, including using risk assessment protocols.
- To promote positive risk-taking in MDT along with Team Managers and senior managers and ensure staff members have appropriate supervision and MDT support to enable this.
- To ensure excellence in the delivery of evidence-based treatments.
- To partner with the HTT Manager and be jointly responsible for clinical governance and financial management matters.
- To be involved in the strategic development of the service and to participate in operational and business planning within the HTT alongside senior team colleagues.
- The post holder will be the Line Manager and Clinical Supervisor for the specialist and trainee doctors (if with the team).

12.1 Further aspects of the post

- All Consultants must devote some of their time to supporting professional activities. Therefore, the postholder must allocate weekly SPA sessions according to the trust guidelines.
- To participate, with other Consultants, in management and administrative work as necessary. This will include participation in audits and other aspects of clinical governance.
- To encourage and take on clinical research on negotiation through job planning.
- To attend the weekly Academic Program and provide training and supervision for junior Medical Staff.
- The postholder will ideally be approved under Section 12 of the Mental Health Act (1983) and may be expected to carry out appropriate Mental Health Act responsibilities.
- The Trust provides appraisal training and appraisers to support the postholder's appraisal programme. The post holder will also be expected to develop arrangements for CPD supported by the educational opportunities offered by the Trust. They are also expected to join a CPD peer group with college guidance.

13 Clinical Governance and Quality Assurance

Local clinical governance activities are supported by local Quality Action Groups (QAGs), which provide a monthly forum for locality-based teams to review joint working on clinical governance initiatives and can include a review of serious incidents, learning from complaints and interface issues. Local QAGs are supported by a divisional QAG, which has a role in identifying clinical governance themes across the Division and ensuring dissemination and learning. The post holder must also participate in clinical audits and other clinical governance activities.

14 General Duties

Surrey & Borders Partnership NHS Foundation Trust is committed to valuing and promoting diversity in employment, service delivery practices and its general environment. All leadership posts expect everyone to be responsible for promoting open, inclusive, accessible service provision, staff development and a culture that values and respects difference.

We recognise that everyone is different, and we are committed to achieving equality and fairness for our staff and people who use our services, including those with disabilities, people who are lesbian, gay, bisexual or transgender and those from minority backgrounds.

Our Trust is passionate about developing a culture that values human differences and similarities at every level of the organisation.

We are also committed to ensuring that we:

- Provide accessible and inclusive services to all.
- Eliminate unlawful discrimination, harassment and victimisation.
- Advance equality of opportunity between different groups.
- Foster good relations between other groups.

We have teamed up with Disabled Go to help disabled people plan visits to Trust services with information on our sites and accessibility details. Visit our pages on the Disabled [Go website](#).

- The Trust encourages establishing mentoring arrangements where appropriate, particularly for new consultants. Several experienced medical mentors in the Trust and access to this network can be activated following an initial discussion with the medical manager.
- Undertake audit activities to develop the quality of service provided by the team supported by the Trust's Clinical Audit Department and the identification of Supporting Professional Activity in their job plan. The Trust is committed to participating in several national audit programs, including POMH-UK and regular audits to support CQUIN activity, including cardio-metabolic assessment and intervention.
- To achieve and demonstrate agreed personal and professional development standards within agreed timescales. In addition, to undertake any other duties at the line manager's request, commensurate with the role, including project work and absence cover.
- To contribute to a healthy and safe working environment by adhering to health and safety regulations and Trust policies.
- To contribute to preventing and controlling healthcare-associated infection by adhering to Trust policies and guidelines.

15 External Duties, Roles and Responsibilities

Developing a Special Interest will be encouraged where it is compatible with the priorities of the Trust and the Locality and can be seen as part of the development plan supporting the National Health Service Plan and the National Service Framework for Mental Health. In recent years, the organisation has developed specialist ASD, FASD, ADHD, forensic gatekeeping, and other services such as Affective Disorder and Primary Care Network. These roles can be encouraged through the specialist interests of clinicians. The development of special interest must be discussed with the Associate Medical Director and Clinical Director / Divisional Medical Leads in the first instance.

- No external duties or responsibilities are included in this post. Such responsibilities can be formed through discussion with the medical manager and revision of the job plan.
- No special interest clinical activities are included in this job description. Requests to undertake clinical activities of this type can be made to the responsible medical manager with adjustments made to the job plan in the usual way.

16 Other Duties

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

17 Work Programme

It is envisaged that the post holder will work on 10 programmed activities over 5 days. Following the appointment, there will be a three-month meeting 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 support professional activities (as per the Royal College of Psychiatrists recommendation). However, the timetable is indicative only. A formal job plan will be agreed upon between the post holder and associate medical director or clinical manager three months after commencing the post and at least annually after that.

17.1 Timetable (Provisional)

Day	Time	Location	Work	Category	No. of PAs
Monday	AM	Two Bridges Chertsey	Clinical reviews / MDT meeting Administration Home visits	DCC	1
	PM		Home Visits	DCC	1
Tuesday	AM	Two Bridges Chertsey	Clinical reviews / MDT meeting Administration Trainee Supervision	DCC	1
	PM	Two Bridges Chertsey	Supporting professional activities Auditing	SPA	1
Wednesday	AM	Two Bridges Chertsey	Clinical reviews / MDR meeting/admin	DCC	1
	PM	Two Bridges Chertsey	Clinical reviews/administration	SPA	1
Thursday	AM	Two Bridges Chertsey	Clinical supervision/team meeting	DCC	1
	PM		Home visits	DCC	1
Friday	AM	Two Bridges Chertsey	Academic meeting / PDP / appraisal / CPD (supporting professional activities) / vs. ad hoc urgent work.	DCC	1
	PM		Clinical reviews/administration	DCC / SPA	0.5 / 0.5
Unpredictable / emergency on-call work					
Total PAs	Direct clinical care				7.5
	Supporting professional activities				2.5

The timetable is indicative only. A formal job plan will be agreed upon between the post holder and associate medical director or clinical manager three months after commencing the post and at least annually after that. Full-time consultant posts at SABP are job planned routinely with 7.5 PAs DCC and 2.5 PAs SPA. However, subsequent annual or interim job planning enables re-balancing to 7.5/2.5 and other sessional allocation if additional SPA activities are required that need extra time in the timetable (for example, additional supervisory responsibility, regular additional committee/meeting attendance, enhanced audit role, research investigator responsibilities etc.). Similar provisions apply to part-time consultant posts.

18 On-Call and Cover Arrangements

The consultant will be required to be on the Surrey-wide WAA Consultant on-call Rota, approximately 1:30. A partial Trust-wide Higher Specialist Trainee Rota supports this.

On-call activity is recognised in the job by paying an availability supplement (category A/low frequency). In addition, work on call (principally Mental Health Act assessment work) is separately remunerated through the usual collaborative arrangements mechanism (referring to the position that a doctor can take on behalf of local authorities in this case relating to Section 12 responsibilities with fees agreed and payable through local CCGs). All medical staff working arrangements are subject to the requirements of the European Working Time Directive and related instruments. Compensatory rest for breaches of rest requirements whilst on call can be claimed directly after on-call periods through application to the responsible medical manager.

19 Wellbeing

Occupational health

Our occupational health service aims to promote and maintain the health of all colleagues and prevent work-related health problems. Optima Health will provide our occupational health service and employee assistance programme.

Information about the different services and how they can be accessed is provided below. If you have any concerns about your physical or mental health, please talk to your manager in the first instance. They can then refer you to Optima Health for support.

The Workplace Wellbeing Platform and Optimise offer colleagues a range of resources to promote well-being and identify signs of ill health.

Optima Health will be responsible for providing the following:

- pre-employment health assessments
- Vaccinations
- Managing infection control Risks
- Sharps injuries
- Infection Control
- Pandemic 'Flu, Covid-19 and other pandemic requirements
- Health surveillance and fitness for the task
- Proactive health and well-being support: physio

Vaccination Clinic Locations

Vaccinations are offered at 18 Mole Business Park, Leatherhead and Fern Lodge, Guildford.

Contact the Team

Access occupational health and wellbeing services plus a range of internal resources through the Surrey and Borders dedicated Workplace Wellbeing website. <https://sabp.workplacewellbeing.com/>

Customer Service Helpdesk

The customer service desk is based at the Occupational Health and Safety department and is available from 09:00 to 17:00, Monday to Friday (excluding Bank Holidays).

Telephone: 03300 084 367

Email: SABP@optimahealth.co.uk

The customer service help desk can be contacted to assist in myOHportal, tracking cases, clarifying medical opinions, general health care advice and general pre-employment and pre-referral advice.

Local OH Support Contact Details:
Jane Mountain
Occupational Health Manager
Fern Lodge, Farnham Road Hospital
Jane.mountain@sabp.nhs.uk

20 Contract Agreement

The appointment is subject to the 2003 Consultant Contract and is non-residential. The Salary will be per the Terms and Conditions for Consultant pay scales, and the starting point depends on seniority. Annual leave and study leave are granted according to national conditions. The Post-holder will be expected to follow the Trust's Policies and procedures relevant to the post.

The appointment will be subject to a satisfactory medical clearance and enhanced CRB disclosure before commencement in post. Access to a mentor will be available for anyone in their first Consultant post.

21 Leave

The post-holder is entitled to 27 days of annual leave per year and 30 days of study leave over three years. Annual leave will increase to 32 days based on years in the NHS.

The consultants cover each other during short periods of annual and study leave. Dedicated cover can be arranged with adequate notice for more extended periods of leave.

22 Visiting Arrangements

Please contact.

AMD: Dr Shriti Burgul, shriti.burgul@sabp.nhs.uk

Service Manager: Nicholas Chiduza, Nicholas.Chiduza@sabp.nhs.uk

23 Appendix 1: Person Specification / Selection Criteria for Consultant

Abbreviations for when assessed: Scr: Screening before short-listing

SL: Short-listing from the application form.

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

	Essential	When Assessed	Desirable	When Assessed
Qualifications	<ul style="list-style-type: none"> MB BS or equivalent recognised medical qualification. 	Scr	<ul style="list-style-type: none"> Relevant higher degree, e.g. MD, PhD, MSc or other additional clinical qualifications 	SL
	<ul style="list-style-type: none"> Full medical registration with a license to practice. 	Scr	<ul style="list-style-type: none"> MRCPsych or equivalent 	Scr
	<ul style="list-style-type: none"> Approval under Section 12 of the Mental Health Act(or within 6 to 12 months of the time of interview/assessment) or equivalent 	Scr	<ul style="list-style-type: none"> Management qualification or evidence of an interest in developing leadership skills. 	Scr
Eligibility	<ul style="list-style-type: none"> Fully registered with the GMC with a licence to practise at the time of appointment. 	Scr	<ul style="list-style-type: none"> In good standing with GMC concerning warnings and conditions on practice 	Scr
	<ul style="list-style-type: none"> Included on the GMC Specialist Register OR within six months. 	Scr	<ul style="list-style-type: none"> Approved clinician status OR able to achieve within three months of appointment 	Scr
Transport	<ul style="list-style-type: none"> Holds and will use valid UK driving license OR provides evidence of proposed alternative. 	Scr		
	<ul style="list-style-type: none"> Access to a vehicle for work purposes 	Scr		
	<ul style="list-style-type: none"> Transport to travel between locations and ability to fulfil all duties of the post, 	Scr		

	including on-call, both within the parameters of the Equality Act 2010			
Clinical Skills, Knowledge & Experience	<ul style="list-style-type: none"> Knowledge of Risk Management 	Scr	<ul style="list-style-type: none"> Wide range of specialist and sub-specialist experience relevant to post within NHS or comparable service. 	SL
	<ul style="list-style-type: none"> Knowledge of legislation, Department of Health Guidance and literature and its implications for clinical practice. 	Scr		
	<ul style="list-style-type: none"> Knowledge of NHS strategic vision in the Next Stage Review (High-Quality Care for All) 	Scr	<ul style="list-style-type: none"> Experience in management 	Scr
	<ul style="list-style-type: none"> Ability to use IT, including email and the internet 	Scr		
	<ul style="list-style-type: none"> Excellent clinical skills using bio-psycho-social perspective and wide medical knowledge 	Scr	<ul style="list-style-type: none"> Ability to develop and use complex multimedia materials for presentation in public, professional and academic settings 	Scr
	<ul style="list-style-type: none"> Excellent oral and written communication skills in English 	SL		
	<ul style="list-style-type: none"> Ability to manage clinical complexity and uncertainty 	SL	<ul style="list-style-type: none"> Specific training qualification/certificate or attendance on a recognised teaching course. 	Scr
	<ul style="list-style-type: none"> Make decisions based on evidence and experience, including the contribution of others 	Scr		
	<ul style="list-style-type: none"> Ability to meet duties under MHA and MCA 	Scr	<ul style="list-style-type: none"> Peer review or research publications 	Scr
	<ul style="list-style-type: none"> Experience working with various patient groups presenting with the full range of clinical severity across different care 	Scr		

	settings, including community, inpatient, and specialist teams.			
	<ul style="list-style-type: none"> Evidence of active participation in Continuous Professional Development 	Scr	<ul style="list-style-type: none"> Published audit or research projects 	Scr
	<ul style="list-style-type: none"> Evidence of effective multidisciplinary team involvement and experience 	Scr		
	<ul style="list-style-type: none"> Knowledge of psychiatric provision 	Scr		
	<ul style="list-style-type: none"> Commitment to and experience in undergraduate and postgraduate teaching 	Scr		
	<ul style="list-style-type: none"> Ability to critically appraise published research. 	Scr		
	<ul style="list-style-type: none"> Experience in carrying out a range of audit projects. 	Scr		
Academic Skills & Lifelong Learning	<ul style="list-style-type: none"> Ability to take a clinical leadership role in a multidisciplinary team, ensuring high-quality care. 	Scr	<ul style="list-style-type: none"> Ability to plan and deliver undergraduate and postgraduate teaching and training relevant to this post 	SL
	<ul style="list-style-type: none"> Skills in managing time and prioritising clinical work 	Scr		
	<ul style="list-style-type: none"> Ability to appraise own performance as a Speciality Doctor and reflect on development needs 	Scr		
	<ul style="list-style-type: none"> Skills and sensitivity in negotiating with patients, relatives, and other professionals where opinions differ. 	Scr	<ul style="list-style-type: none"> Reflected on the purpose of CPD undertaken 	Scr

	<ul style="list-style-type: none"> Skills in providing consultation to other professional groups under New Ways of Working 	Scr		
	<ul style="list-style-type: none"> A high-level ability to communicate effectively at both a written and oral level complex and clinically sensitive information to patients, their families, carers and a wide range of lay and professional people within and outside the NHS. 	Scr		
	<ul style="list-style-type: none"> Participated in continuous professional development 	SL	<ul style="list-style-type: none"> Evidence of achievement in education, research, audit, and service improvement: awards, prizes, presentations, and publications. 	Scr
	<ul style="list-style-type: none"> Participated in research or service evaluation 	SL		
	<ul style="list-style-type: none"> Has actively participated in clinical audit and quality improvement programmes. 	SL		