

TOGETHER WE CAN

BECOME OUTSTANDING



Avon and Wiltshire
Mental Health Partnership
NHS Trust

Consultant in General Adult Psychiatry

Mental Health Bristol Assessment and Recovery South

Petherton Resource Centre, Bristol

10 PAs

RVN006-BNSSG-IN



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the Royal College

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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 Lead: | Dr Dan Hodgson |
| Medical Lead: | Dr Ivan Nikolov |
| Clinical Director: | Dr Eva Dietrich |
| Associate Director of Operations: | Paula May |
| Clinical Lead: | Liz Bessant |
| Operational Manager: | Sarah Thorne |
| Chief Operating Officer: | Matthew Page |
| Chief Executive: | Dominic Hardisty |

3. Service Details

Mental Health Bristol is a formal partnership of local providers of health and social care in Bristol including AWP. Mental Health Bristol consists of: Avon & Wiltshire Mental Health Partnership NHS Trust; Second Step; Missing Link; Off the Record; Nilaari; Brunelcare; Wellspring Healthy Living Centre; Knowle West Health Park Company; Southmead Development Trust; and SARI.

The AWP Assessment and Recovery teams are currently based at Petherton Resource Centre, Speedwell Centre and Greenways Centre. The Assessment and Recovery (A&R) Service part of the service delivery is provided by Mental Health Bristol.

The Assessment and Recovery services are structured to increase the amount of 'contacts' staff have with service users, to improve access to the service by integration within communities and GP settings. They provide a service for all adults over the age of 18, and in transition from CAMHS, except those who are only diagnosed with dementia. The service operates from 8am to 8pm, 365 days per year. Community services comprise a partnership of working at a variety of community based sites including service user homes and at community resources. However, it is expected that only a third of contacts will take place at these premises and staff will spend more of their working day away from the office. Staff will have access to and be expected to work from partner organisation sites including GP practices, community resource bases, and where appropriate public spaces. It is expected that the post holder will be based at the team base although will have access to a variety of community team bases, including GP practices and voluntary sector organisations.

The Assessment and Recovery teams co-locate and work closely with a locality Crisis team and also accommodate colleagues from the Complex Psychological Interventions Service. Within each Assessment and Recovery Team the staff composition and skill mix will reflect specific local clinical needs; including Older Adult, Frail and vulnerable, Youth transition, Dual diagnosis, and Non-medical Prescribing. All service users will have either a Recovery Navigator or Care Coordinator supporting them throughout their time in the recovery service. Across the Bristol Assessment and Recovery Services there will be 75 Recovery Navigator posts.

Consultant medical staff link closely to GPs for advice and guidance on diagnostic assessment, specialist prescribing and care pathways referrals. The teams are divided into 3 'GP clusters' which operate as 3 sub-teams, meeting regularly weekly or ad hoc. The Older Adult staff form a separate team that cover all GP practices across the city. They use whole team approaches to work with people with intensive needs and complexity, providing additional contact, supervision and ad hoc advice and support.

For adults of working age each GP cluster has a Link Consultant Psychiatrist (this post) who will also work closely linking with around 5-6 GP practices.

The South Assessment and Recovery team has a total caseload of approximately 900 service users with complex longer term needs including many with addiction problems, homelessness, LD, criminal justice and forensic patients. The team embraces the multidisciplinary approach integrating Mental Health Nurses, Occupational Therapists, mental health workers and Recovery Navigators with a total of about 70 within the team. There is 1 Non-Medical Prescriber in the team, who holds dedicated clinics.

They also work closely with our Psychological Therapies Service and there are dedicated clinical psychologists who are co-located within the team and regularly participate in the multidisciplinary work. The team also care-coordinates service users previously managed in Assertive Outreach teams (prior to their incorporation within Recovery teams).

4. The post and local working arrangements

| | |
|---|---|
| Post and speciality: | Consultant Psychiatrist in General Adult Psychiatry |
| Base: | Petherton Resource Centre, Bristol |
| Number of programmed activities: | 10 PAs per week |
| Accountable professionally to: | Medical Director |
| Accountable operationally to: | Medical Lead |

The Trust is seeking a consultant psychiatrist to join the Bristol Mental Health Assessment and Recovery South Team. This is a replacement post integrated into Bristol Mental Health Services. The post holder will provide medical input in to one of the three Workstreams in the South Bristol Assessment & Recovery team based at Petherton Resource Centre.

The doctors are integral members and clinical leaders of the team and comprise 3.0 WTE General Adult Consultants, 0.6 WTE Later Life Consultant, 1 WTE SAS doctor, 1 WTE Crisis Consultant. The later life consultant will work alongside all of the doctors in the recovery teams. We have a part-time Clinical Academic Consultant with links to Bristol University and special interest in Affective Disorders. There are well established PDP groups in the Bristol Locality where the Consultants participate in Peer supervision, and the Consultant will be encouraged to join one.

Medical Management supervision and Line Management are provided by the Medical Lead, who reports to Divisional Medical Lead and Clinical Director BNSSG (Bristol, North Somerset and South Gloucestershire).

The post holder will be expected to undertake 2 new assessments and 2 medical follow up assessments per week (WTE) to support the assessment function of the team. In addition, on average per week there are about 10 Recovery medical appointments, arranged in 2 clinic blocks (allowing a degree of flexibility).

The team comprises of:

1 WTE General Adult Consultant

0.6 WTE General Adult Consultant

0.6 WTE General Adult Consultant

1 WTE General Adult Consultant (this post)

0.6 WTE Later Life Consultant

SAS: 1 WTE (who provides flexible support to work streams, supervision arrangements to be agreed locally).

Band 7 Team Ward Manager 1.0 WTE

Band 7 Senior Practitioner 3.0 WTE

Band 6 Registered Practitioners (Nurses, Social workers, OT) 20 WTE

Band 5 1 WTE

Band 4 Recovery Navigator 20 WTE

Medical Secretary 2 WTE

Team admin 3 WTE

Crisis Spokes

1 WTE General Adult Consultant

Band 7 1 WTE Senior Practitioner

Band 6 5 WTE

Band 5 2 WTE

Recovery Navigator 6 WTE

The team's case load

The team's case load is about 900.

Team referral rate/ admission rates

On average the team receives 35 new referrals each week. These clinical activity levels are estimates and there is a robust mechanism to review the clinical activity of the consultant and the model as part of job-planning.

The post is supported by GP and FY2 trainees, Higher Trainees and medical students making for a strong, friendly and lively medical base within the team.

5. Clinical duties

- The Consultant will deliver direct interventions to service users at a level of intensity according to need including those service users who require an assertive approach and are difficult to engage. This will include on-going assessment, diagnoses (including review and clarification) and treatment of mental and physical health needs.
- The Consultant will supervise the medical team that provides medical care and act as RC for service users in Supervised Community Treatment, in collaboration with other teams and Consultants.
- Responsible for the mental health care of service users in line with New Ways of Working, monitoring and evaluating service delivery and care through regular reviews.
- Collaboratively work with the acute care teams to provide Consultant input to acute care service coordination and the acute care pathways management meetings by meeting the needs of the service user and enabling timely access to intensive services and working collaboratively with the intensive team to ensure that CPA planning and aftercare arrangements are in place for service users discharged from inpatient care.
- To actively participate in team and personal caseload management and supervision.
- The Consultant will provide assessments for referrals from primary care and other agreed non-secondary care services (including agreed self-referral for previous service users with 'Rapid Re-access' plans). They will be expected to provide high level clinical assessments to guide the future care plan of the service user in a bio-psycho-social context.
- The Consultant will be responsible for taking a lead role in embedding the new MHB (Mental Health Battery for young adults) philosophy and culture changes within Primary care, working with GP's to promote Recovery.
- The Consultant will provide regular supervision for other team members' assessments of new referrals through regular input into daily multidisciplinary 'assessment supervision meetings'.
- To participate in MHA assessments where appropriate as well as facilitating CTO discussions.
- The Consultant has a duty to collaborate with key personnel to ensure the patient's smooth transition through any changes in the care pathway
- The Consultant is expected to contribute to the development of recovery services in line with best practice and nationally accredited standards.
- Responsible with the recovery service team members for the identification, monitoring and evaluating of the care package and care cluster delivery for individual service users, identifying service users who require access to specialist services and/or require stepping up or down to other services.
- A small caseload may be held by the Consultant of non CPA cases as clinically appropriate (less than 10). This is a guide only and will be regularly reviewed with the expectation that the Consultant works flexibly to support the team. This will be reviewed in job-planning.
- Understand and participate in the maintenance, monitoring and evaluation of service specific performance indicators and targets.
- The post holder will be expected to support the Medical Lead and Clinical leads and participate in strategic development both within the local service and the wider Trust this includes engagement in the consultation regarding moving to provide appropriate medical support for weekend working and 8am-8pm working. This will be subject to a formal HR process.
- The Consultant is expected to provide visible and clear leadership at team level. The Consultant will also be expected to provide leadership and liaison with primary care in particular focusing upon health promotion and step down procedures and rapid access.
- To support and participate in Clinical Governance and Audit.

- To comply with all Trust policies including equal opportunities' policies and to promote equality of access to healthcare at all times.
- The post holder will be encouraged to develop an area of special clinical interest in line with service needs. This may be practice based research. The post holder will be encouraged to develop this in the area of primary care liaison and service development regarding best practice for assessment procedures within the team.
- The Trust actively encourages continuing professional development and in view of this, appropriate study leave and expenses will be supported by the Trust.

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.

There is a study leave allowance for Consultants of 30 days over 3 years. Study leave and expenses are approved by the Director for Medical Education.

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 Edgcombe 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 provided 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 Fellow, 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 or be willing to undertake training to obtain Section 12(2) MHA and will be expected to renew this approval according to agreed procedures.

16. Administrative support and office accommodation

The consultant will have access to 1 wte 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. The named individual will be based at Petherton Resource Centre.

The consultant will have the use of a private dedicated room with a desk, computer facilities, access to the internet and IT support, for all aspects of their work (mainly clinical, but also including remote/video consultations and Team Meetings, PDP, administration and supervision) whenever they are in the building. These rooms will be block booked in advance on the Consultants behalf. These rooms will be available for other team members to use when the consultant is not in the building. The Consultant will also use a shared office with dedicated desk and PC. A mobile phone, bleep and a dedicated laptop will be provided to support mobile working.

The junior trainees have access to their own office which is shared with higher trainees and SAS doctors.

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 requirement of this post.

The on-call commitment is currently 1:25 but this will be subject to change from the 1st August 2023. The on-call commitment is not pro-rata for part time consultants. It is designated as Category

A with a 3% on-call supplement. The remuneration for predictable and non-predictable on-call clinical activity is currently under review.

The rota covers adults of working age and older people, including inpatient units, in South Gloucestershire, Bristol and North Somerset. The Consultant will not provide cover for Child and Adolescent, Learning Disability, and Forensic Services as these specialties are covered by a separate rota.

Senior trainees also participate in this rota and are supervised by the consultant on-call. Consultants will be expected to have a handover (by phone) with on call juniors and discuss a care plan for all new admissions over the weekend.

The consultant on-call rotas are subject to review.

Consultant cover is provided by named colleagues from within the team and its adjoining teams. There will be 5 consultants working in each of the Recovery Teams who cross-cover one another for both annual and study leave.

Cover is agreed mutually in advance of each 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 Ivan Nikolov, Bristol Medical Lead on 01275 796291 or 07717 540851.

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 | Clinical work/Patient review | DCC | 1 |
| | PM | Base | CPD/Trust Approved SPA | SPA | 1 |
| Tuesday | AM | Various | New Assessment | DCC | 1 |
| | PM | Base | Assessment feedback meeting/Admin | DCC | 1 |
| Wednesday | AM | Base | Workstream MDT/Caseload reviews | DCC | 1 |
| | PM | Base | CPD/Audit/Revalidation | SPA | 1 |
| Thursday | AM | Various | Clinical work/Patient reviews | DCC | 1 |
| | PM | Base | Junior Doctor Supervision /Admin | SPA/DCC | 0.5 each |
| Friday | AM | Various | Clinical work/Home visit | DCC | 1 |
| | PM | Base | Admin | DCC | 1 |

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

28. Population and attractions of area

Population

Bristol has a population of 472,400 making it the largest city in the South West of England and the 7th largest city in England. It is one of England's eight 'Core cities', meaning it is one of the eight largest city economies outside of London. It is one of the UK's leading green cities. Bristol has a unique population, which brings with it a diverse range of challenges.

Some wards of Bristol are amongst the most deprived in the country. A few are among the most affluent. 16% of Bristol's population belongs to a Black & Minority Ethnic (BME) group, including a large immigrant Somali population. The Office of National Statistics (ONS) estimate that around 7,500 people per year access NHS specialist mental health services in Bristol. 49.6% of the Bristol population are Male and 50.4% are female. The 2021 Census reflected and increase in all age groups within Bristol except 0-4, reflecting a decade of falling birth rates, and people aged 80 and over.

Attractions of area



Named best place to live in the UK in 2017 and described as ‘a small city that feels like a big city’, Bristol is an ideal combination of extraordinary culture, impressive schools, buzzing culinary scene, exciting redevelopment and community spirit." (*The Sunday Times*).

Bristol is lively yet laid back, mixing its rich maritime heritage with an innovative dynamic culture making it the most interesting city outside of London. It has a creative and independent spirit which can be experienced throughout the city, from its colourful street art and huge selection of independent traders, to its very own currency, the Bristol Pound. Bristol is also one of the most family friendly cities in the UK, packed with activities and award-winning attractions such as the Harbourside with Bristol Aquarium, At-Bristol and Brunel’s SS Great Britain.

The city is ideally placed with both seaside and countryside on its doorstep. It has fantastic transport links being connected by road from London to Wales by the M4 motorway, and from Birmingham to Exeter by the M5 motorway. There are two principal railway stations in Bristol they are Bristol Parkway and Bristol Temple Meads. The city is also served by its own airport with many European destinations.

To find out more visit:

www.visitbristol.co.uk

29. Person Specification

| Criteria | Essential | Desirable | How assessed |
|------------------------|--|---|--|
| QUALIFICATIONS | 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. | |
| ELIGIBILITY | 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 Approved under S12 OR able to achieve with 3 months of appointment | CCT in General Adult Psychiatry | Application form Documentation |
| EXPERIENCE | 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 |
| PERSONAL SKILLS | 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. | 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 |

| | | | |
|-------------------------------------|--|--|--|
| | Excellent written and oral communication skills Approachable and compassionate personality with good listening skills. | | |
| CLINICAL SKILLS | Ability to assess and treat psychiatric problems in Adults of working age and to deal with crisis situations. | | Application Form Interview |
| KNOWLEDGE | Understanding of the management skills required to function successfully as a Consultant. Awareness of current issues in mental health service provision, policy and legislation. An understanding of the importance of Clinical Governance in NHS organisations and importance in patient care. | Knowledge of alternatives to inpatient admission care approaches. Excellent knowledge of diverse range of interventions. | Application Form Interview |
| TEACHING | Commitment to and experience of undergraduate and postgraduate learning and teaching. Understand principles of teaching. | Experience as an Educational Supervisor for trainees. Evidence of organisation of further teaching programmes in medical education or multi-professional education. | Application Form Interview |
| RESEARCH & AUDIT | Experience or involvement in a research project and publication. Ability to supervise junior medical staff undertaking research projects. Experience of carrying out an audit project. | Ability to critically appraise published research. Published audit project. | Application Form Interview |
| MANAGEMENT | Able to manage priorities. Evidence of management/leadership skills training. Ability to manage risk. | Previous management experience including that of other junior medical staff. | Application Form Interview |
| APPRAISAL & REVALIDATION | 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 |
| OTHER | Able to fulfil the duties of the post. Independently mobile and willing to travel. Satisfactory pre-employment checks | | 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 £88,364 - £119,133 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 Baring 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 boards approach to strategic leadership and how the board puts this strategy of 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.