

TOGETHER WE CAN

BECOME OUTSTANDING



Avon and Wiltshire
Mental Health Partnership
NHS Trust

Consultant in Addiction Psychiatry

Specialist Drug & Alcohol Services (SDAS)

Acer Unit, Dorset SDAS & South West Gambling Services

Bristol

7PAs

Ref: 342-RVN028-SSC-PP



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RCPsych Approval : Pending

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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 southwest.

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
Medical Lead:	Dr Panos Prevezanos
Clinical Lead:	Rachel Heron
Operational Manager:	Alex Chapman
SDAS Services Manager:	Noreen Mughal
Chief Operating Officer:	Matthew Page
Chief Executive:	Dominic Hardisty

3. Service Details

Bristol Specialist Drug & Alcohol Service (BSDAS)

BSDAS is an NHS drug treatment service that provides specialist interventions for drug and alcohol users in Bristol serving a population of about 500,000 people. It is part of Bristol's Recovery Orientated Alcohol and Drug Service (ROADS), which is commissioned by the Public Health department at Bristol City Council. ROADS is delivered in partnership by Bristol Drugs Project (BDP), Developing Health & Independence (DHI) and BSDAS. Primary care services for substance misuse treatment in Bristol are well developed with a very high level of GP involvement in substitute prescribing supported by a shared care scheme.

Our philosophy is for an integrated service model that provides rapid, evidence-based, individualised, recovery focused treatment to our service users. The service believes that clients have the right to high quality care for their problematic drug and alcohol misuse alongside their mental health needs. It also believes that, by addressing their problems service users are enabled to assume greater control of their lives and fulfil their own unique potential.

BSDAS offers assessment and evidence-based treatment interventions to drug and alcohol users. Treatments provided by the service include pharmacological and psychosocial interventions, specialist psychological therapies, group work, community and inpatient detoxification. Treatment interventions are delivered in accordance with an established set of operational policies and procedures, including detailed care pathways and structured treatment programs.

The Acer Unit is an addictions inpatient detox and stabilization ward based on the Southmead Hospital site. There are 5 beds currently commissioned for ROADS service users in Bristol. Acer has 3 to 4 new admissions per week for inpatient detoxes from alcohol, opioids and other drugs as well as drug stabilisations for the most chaotic users. Beds can also be purchased from other areas in the southwest, including areas outside of AWP services.

The consultant would be expected to provide overall clinical leadership to the Acer Unit. This would include involvement in ward rounds and clinical supervision of other doctors. There is a 0.7 WTE Specialist Doctor who leads the day-to-day medical work on Acer and there are also trainee doctors regularly based on the Unit. Indeed, the Acer Unit provides excellent opportunities for teaching and training in addiction medicine to medical students, postgraduate doctors in training and other healthcare professionals.

Dorset REACH Specialist Drug & Alcohol Services (SDAS)

The SDAS team fits into the wider drug and alcohol treatment system commissioned by Public Health Dorset. AWP are subcontracted by Exeter Drugs Project (EDP) to provide the specialist prescribing element in West Dorset. SDAS works in conjunction with EDP who provide elements of case-management and psychosocial programs. There are separate case-managers employed by other organisations that are either partners or stakeholders in the treatment system.

All providers in the drug and alcohol treatment system share a common electronic patient record called HALO to aid intra agency communication and patient management. Referrals are via the case-managers who decide if specialist input is needed. This referral system is managed through joint meetings with stakeholders and partners and via the MDT. All referrals for specialist prescribing need to be seen by an independent non-medical prescriber (NMP). The recovery support workers have the highest caseloads but are supported by the prescribers. Prescribers are expected to have much smaller, but more complex patients, on their caseloads. The consultant will provide clinical support to the NMP's but will not usually be expected to carry a caseload.

The consultant would be expected to provide clinical leadership to the Dorset REACH SDAS services. This would include involvement with MDTs and clinical supervision to the non-medical prescribers, although this would not be line management. The consultant would be expected to work with the service manager to liaise with commissioners and continue service development. The consultant would be able to work remotely via Microsoft Teams which is rolled out across AWP.

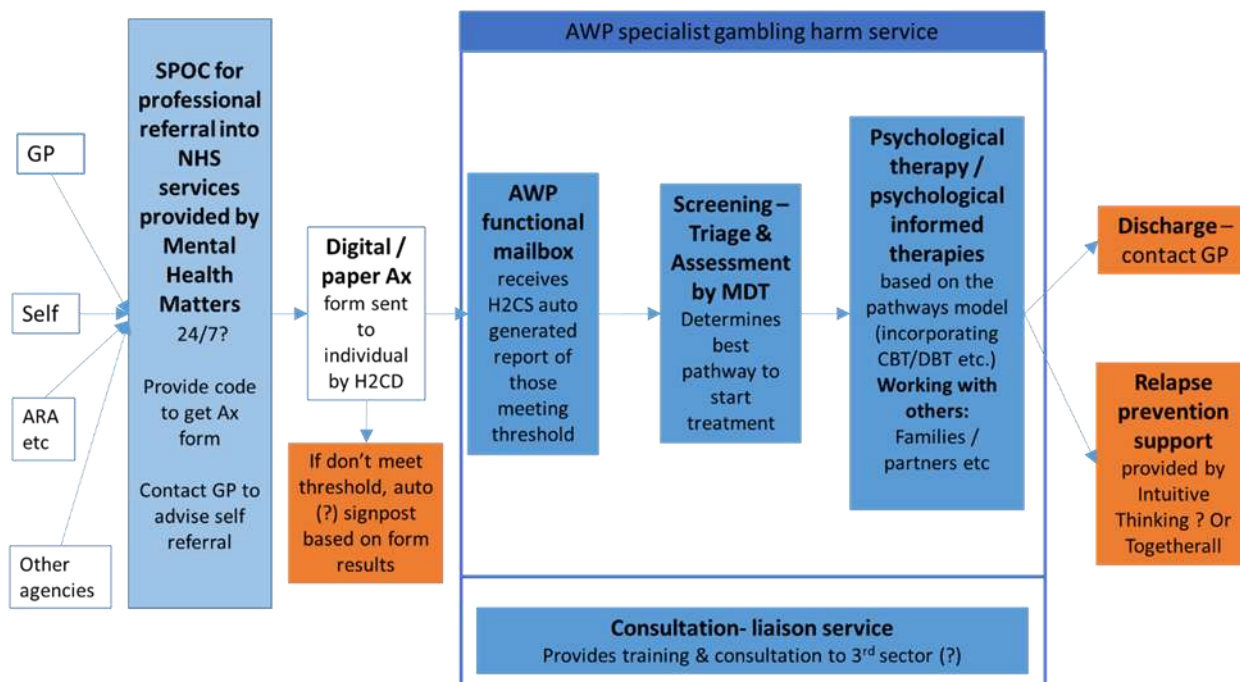
Specialised Southwest Gambling Harms Service

In response to the rising clinical need to support Gambling harms, AWP Specialised Services have been commissioned to develop a new Specialised Southwest Gambling Harms Service to help support and provide treatment for people who want help with their gambling. The service will be a collaboration of a number of providers and is an exciting and developing field to work in with national collaborations and space to innovate therapeutic interventions for service users.

The Gambling Harms Service will offer specialist psychological interventions that will be trauma informed, incorporating both psychological therapies and psychologically informed interventions provided by both NHS and voluntary sector partners. Working in collaboration with Service Users and Carers will be key to achieving this. A Band 8c Clinical Psychologist will provide clinical leadership to this new service, including the development of pathways and the clinical model, working in collaboration with the Service manager, as well as the team and national experts. The consultant would be expected to support the lead clinical psychologist in developing the service by providing consultative medical input, which would be an innovative role and key to developing and implementing the service.

Development of the service began in April 2023 and although it will be launched in phases, the service will eventually aim to provide treatment and intervention to 400 patients per annum. The core interventions provided by the specialist gambling harms service will be mostly virtual, ensuring that all service users and carers across the Southwest have equitable access to the service. The initial service hub will be in Bristol; identified as the Local Authority with the highest prevalence of individuals that gamble and experience negative consequences, also having the highest number of individuals using support/advice or treatment services.

The proposed pathway for the Gambling Harms Service is as follows:



4. The post and local working arrangements

Post and speciality:

Consultant Addiction Psychiatrist

Base:

Acer Unit, Southmead Hospital, Westbury-On-Trym, Bristol BS10 5NB

Total Number of PAs:

7 PAs per week

Accountable professionally to:

Medical Director

Accountable operationally to:

Medical Lead

We are seeking a Consultant Addiction Psychiatrist to join the Acer inpatient detoxification unit in Bristol and to provide medical support to Dorset Specialist Drug and Alcohol Services (SDAS) and the Specialised Southwest Gambling Harms Service.

This substantive post has become vacant due to the current incumbent retiring. The post has been developed to extend the medical support offered by the service, which is developing rapidly in response to national and local treatment strategies with the aim of providing a more seamless service to problematic drug and alcohol users.

SDAS Medical staff do not generally carry a caseload but act to support practitioners within the service by performing assessments and treatment reviews, as well as providing advice and liaison

to our other partner providers and professionals across the healthcare system such as GPs, general hospitals and mental health services.

The consultant would be at the top of the supervision pyramid and as such would be expected to provide clinical support and occasional group supervision to the medical and non-medical prescribers of the services. The consultant in turn would be line managed by the trust specialised services medical lead and also be involved with peer clinical supervision with the other SDAS Consultants.

AWP also provides drug and alcohol services in other areas including Bristol, South Gloucestershire and BaNES. There is some interaction with these services in terms of shared protocols and procedures and cross cover. The consultant would be expected to work with the service manager to liaise with commissioners and continue service development. The consultant would also be able to work remotely via Microsoft Teams, which is rolled out across AWP.

5. Clinical duties

- To be the consultant and clinical lead for the Acer Unit in Bristol.
- To provide senior medical support to the SDAS team in Dorset REACH.
- To provide senior medical support to the Specialised Southwest Gambling Harms Service.
- Regular attendance at MDT meetings including the weekly ward round on the Acer Unit.
- To provide support and input into new patient assessments, patient reviews and prescribing duties of controlled drugs; mainly opioid substitute treatment (OST). Patient assessments are primary for problem opioid or alcohol users but would also include any other drugs such as cocaine, cannabis, ketamine, MDMA, or any other Novel Psychoactive Substances (NPS). Very occasionally assessments may be for other behavioural addictions.
- Ensure effective and timely documentation and communication of clinical decision making and management plans.
- Supporting Dorset SDAS multi-disciplinary team members in their practice by being available for 1:1 advice.
- Prescription management as a shared responsibility with keyworkers.
- To actively participate in team and personal caseload management and supervision.
- Clinical supervision of any junior medical staff and non-medical prescribers.
- To liaise with other parts of the drug and alcohol treatment systems, GP's and secondary care services as well as non-NHS organisations where applicable.
- To provide medical support for other SDAS services in the absence of their consultant.

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, 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 enables 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:

6,

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 holds a list of recognised appraisers within the Trust.

The appraisal process requires all Consultants to use Edgecumbe 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 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 as possible 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 appropriately qualified administrative/secretarial support through a named administrator based at the Acer Unit, the Gambling Service and Dorset SDAS, to enable them to effectively participate in all their roles and responsibilities, to manage their diaries and provide support for non-clinical activities.

The consultant will have a desk in a shared 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 to dictate letters and prepare reports, which usually contain confidential and sensitive information.

A mobile phone, bleep 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 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 7 programmed activities over 3.5 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.

Cover for annual and study leave is reciprocal with one of the other senior specialist doctors or Consultants within SDAS and 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 service. 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 Panos Prevezanos – Medical Lead, AWP Specialised Services (panos.prevezanos@nhs.net)

Shortlisted 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	Non-working half day.			
	PM	Remote	SPA - CPD	SPA	1
Tuesday	AM	Non-working day.			
	PM				
Wednesday	AM	Remote/Base	Dorset SDAS	DCC	1
	PM	Remote/Base	Service Development, Teaching, Audit etc	SPA	1
Thursday	AM	Base	Inpatient work, Acer Unit Admin	DCC	1
	PM	Remote/Base	Gambling Service	DCC	1
Friday	AM	Base	Inpatient work, Acer Unit Junior Doctor Supervision	DCC	1
	PM	Remote/Base	Dorset SDAS Gambling Service	DCC DCC	0.5 0.5

Programmed activity	No of PAs
Direct clinical care (DCC)	5
Supporting professional activities (SPA)	2
Total Programmed Activities	7
Unpredictable emergency on call work (APA payment)	1

The timetable above is an example only. The job plan and timetable will be agreed with the Medical lead and Service Manager after appointment and will be reviewed annually.

28. Population and attractions of area

Population

Bristol has a population of 472,400 making it the largest city in the Southwest 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 an addiction setting. Knowledge and evidence of participation in CPD. Evidence of effective multidisciplinary team involvement. Specialist training and an endorsement in addiction psychiatry.		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

	<p>Excellent written and oral communication skills</p> <p>Approachable and compassionate personality with good listening skills.</p>		
CLINICAL SKILLS	<p>Ability to assess and treat psychiatric problems in persons with addictive disorders and to deal with crisis situations.</p> <p>Experience of working with dual diagnosis, feel confident to direct care and recovery plans for dual diagnosis patients and develop joint management plans with mental health teams.</p>		Application Form Interview
KNOWLEDGE	<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
TEACHING	<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
RESEARCH & AUDIT	<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
MANAGEMENT	<p>Able to manage priorities.</p> <p>Evidence of management/leadership skills training.</p> <p>Ability to manage risk.</p>	<p>Previous management experience, service development and service change.</p> <p>Experience of managing junior medical staff.</p>	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 £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 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 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.