Job description and person specification

Post and specialty:	Consultant Psychiatrist – Norris Green CMHT			
Base:	Norris Green Hub, Falklands Approach, Liverpool L11 5BS			
Contract:	Number of programmed activities: 10 + 1			
Accountable professionally to:	Deputy Medical Director for Workforce : Kuben Naidoo			
Accountable operationally to:	Clinical Director Liverpool: Anna Richman			
	Line Manager : Mark Barsoum			
	Locality Manager : Brian McAdam			
	Deputy Chief Operating Officer Liverpool: Lynn Hughes			
	Clinical Director Liverpool: Anna Richman			
Key working relationships and	Chief Operating Officer for Local Services: Donna Robinson			
lines of responsibility:	Responsible Officer : Noir Thomas			
	Deputy Medical Director Workforce: Kuben Naidoo			
	Deputy Medical Director of Operations : Arun Chidambaram			
	Medical Director : Noir Thomas			
	Chief Executive : Dr Joe Rafferty			
	Deputy Clinical Director : Mark Barsoum			
	Clinical Director: Anna Richman			
Contact details:	Via			
	0151 4730303			

Introduction - Who we are

Mersey Care Foundation Trust provides specialist mental health services in North West England and beyond. We are passionate about mental health and wellbeing and delivering the best possible services for the people we serve.

Our vision is to become the leading organisation in the provision of mental health care, addiction services and learning disability care. Quality, recovery and wellbeing will be at the heart of everything that we do.

Our vision, values and aims

Care has always been at the heart of everything we do. But our ambition now is to deliver Perfect Care and become a leading organization in mental health, addiction and learning disabilities.

Our values are; **C**ontinuous improvement, **A**ccountability, **R**espect, **E**nthusiasm.

What we stand for

Mersey Care believes that service users, carers and staff should all be treated with dignity and respect, and be valued as citizens.

Our Purpose - to see the person, meet the need and challenge the stigma.

Our Vision - to be recognised as the leading organisation in the provision of mental health care, addiction services and learning disability care.

Our Strategy - Our four pronged strategy has one simple goal: to realise our vision to be the leading provider in our field with quality, recovery and wellbeing at the heart of everything we do —

- Perfect Care to continuously improve the quality and productivity of our services;
- Better services to ensure our services meet people's needs effectively, help people recover and are financially viable in the future;
- Partnerships to develop partnerships that deliver improvements in quality, or enhance recovery and wellbeing for people with mental health needs;
- Our organisation to become a highly effective organisation with empowered service users, fully engaged staff and good governance.

An important part of delivering Perfect Care is providing our services in buildings with facilities that are comfortable, modern and support people towards recovery. Mersey Care's ambitious five year estates plan means that by 2020 everyone who uses our services will be cared for in new or refurbished buildings; people who need to be admitted will stay in a single bedroom with an ensuite bathroom.

Clock View Hospital our new state of the art £25million acute mental health inpatient facility opened in 2015 and plans are underway for a second unit to replace inpatient units in central Liverpool and Southport, with similarly modern buildings.

Trust Details

- As of the 1st April 2018 the Trust comprises four Clinical Divisions supported by our Corporate Services
 Division based at our offices in Prescot, Merseyside. Over 8,000 staff serve a population of almost 11
 million people.
- Community and Local Services Divisions provide; community health services to Liverpool CCG and South Sefton CCG residents, in partnership with North West Boroughs Foundation Trust; specialist inpatient and community Mental Health, Learning Disabilities, Addiction management and acquired Brain Injury services for the people of Liverpool, Sefton and Kirkby, Merseyside.
- Secure and Specialist Learning Disability Divisions provide; high secure mental health services for the
 North West of England, the West Midlands and Wales; medium and low secure services more locally
 for men and women with mental disorders; provides secure Learning Disability services across
 Lancashire, Greater Manchester, Cheshire and Merseyside. This is currently delivered from the former
 Calderstones NHS Trust site in Whalley Lancashire
- The clinical divisions are supported by our Corporate Services Division based at our offices in Prescot, Merseyside.

During 2018/19, Mersey Care:

- provided care, treatment and support to 20,621 service users from May 2017 to March 2019 (20,387 in local services and 240 in secure services)
- across over 36 sites both of its own and premises rented from others
- had 760 inpatient beds as at 31 March 2018
- had 351,306 outpatient attendances and contacts
- . (Statistics based on audited figures for 2018/19)
- 2020 is an exciting and challenging year for Mersey Care NHS FT. We are four years through a five
 year programme of organisational and service transformation in order to improve the quality of the
 care that we provide and safely reduce our costs, so that we can continue to invest in meeting
 considerably in new buildings and technology, and very importantly, support our frontline staff to
 continue to improve the service they provide.
- On 1St April 2018 the Trust acquired Liverpool Community Health services following a tender process
 with a plan to deliver a truly integrated Bio-Psycho-Social community health service in Liverpool and
 South Sefton.

Service details

The Local Division operates a total of 18 adult Community Mental Health Teams (CMHTs) based in 7 community hub sites across the North Mersey footprint.

All adult CMHTs operate within a "functional model" meaning that post holders work with community patients only and are not required to maintain responsibility for inpatients, which

instead come under the care of the Inpatient Consultants.

There is an adult Single Point of Access (SPA) Team with its own dedicated Consultant and multidisciplinary team, which triages all referrals into the service. Only those referrals deemed appropriate for CMHT input following assessment are passed on to the adult CMHTs

Crisis and home treatment team is separate and referrals can be made for intensive home treatment, weekend cover and bed management.

The following additional services and teams are available within the Local Division to work alongside CMHTs:

- Acute Services (including 8 x Acute In-Patient Wards, new (during 18/19) Crisis Resolution Home Treatment Teams. ED Mental Health Liaison Teams
- Perinatal mental health team
- Criminal Justice Liaison Service (operated within Courts, Police Stations and Prisons)
- Eating Disorder Service
- A&E Assessment and Liaison Teams based in the Accident and Emergency Departments of Royal Liverpool and Broadgreen University Hospitals Trust, Aintree University Hospital NHS Foundation Trust and Southport and Ormskirk Hospital NHS Trust with consultant psychiatrist input.
- Acquired Brain Injury Service
- Rathbone Rehabilitation Unit (low secure rehabilitation with dedicated Consultant and Junior Doctor)
- Psychotherapy Service and Specialist Personality Disorder Hub
- Early Intervention Service
- Older peoples Mental health service including General Hospital Liaison Services Royal Liverpool and Broadgreen University Hospitals Trust, Aintree University Hospital NHS Foundation Trust and Southport and Ormskirk Hospital NHS Trust
- CHART (Community Housing and Re-enablement team) works with the trust to ensure homeless and potentially homeless people with mental health problems in Sefton have access to appropriate housing, including emergency accommodation and 24-hour intensively supported accommodation.

 Child and Adolescent Psychiatric Services are provided by Alder Hey Children's NHS Foundation Trust

Local working arrangements

The Trust is seeking a consultant psychiatrist to join Norris Green CMHT based at Falklands Approach, L11. The vacancy has arisen as a result of the previous substantive post holder retiring. This post is one of three CMHT general adult consultant psychiatrist posts (the other 2 are also 1 WTE each) within Norris Green hub.

Norris Green Hub serves a catchment area of around 120,000, covering the Mid to North areas of Liverpool for adults of working age. The current post encompasses the Orrell Park and Walton catchment areas. This is a demographically mixed area overall, but with some areas of social deprivation and also some drug and alcohol-related difficulties in an urban environment.

The post holder will carry no responsibility for inpatients.

The staff at Norris Green Hub are organised in three distinct CMHTs. This CMHT consists of:

- 1 whole time equivalent (WTE) consultant psychiatrist (this post)
- 1 WTE core Psychiatric Trainee.
- 0.5 WTE dedicated medical secretary, Band 4 and a full time band 3 shared with the other 2 teams.
- 1 Band 7 team leader
- 5 WTE community psychiatric nurses (band 6 and band 5)
- 7 WTE social workers shared between the 3 teams
- 1 WTE senior occupational therapist, Band 6 shared between the 3 teams
- 1 WTE psychologist.
- 4 WTE support time and recovery workers, Band 3 shared between the 3 teams
- Input from the Hub Lithium Clinic and Health and Well being Clinic.

New referrals average 4 per week from inpatient services, A&E and the access team. Referrals are screened daily and discussed in weekly MDT meeting and allocated to medical review, or CPN input as required.

CPA reviews (total 4-5 per session) take place in the community hub, with some service users being seen at home when indicated. Follow up clinics also currently take place in the Hub, with 5-6, 30min follow up slots, per session.

Most new to service assessments are carried out in the New Patient Assessment slots by team trainee medics or by other members of the CMHT. The post-holder will provide supervision as required to such assessments.

There are dedicated slots built into the Consultant clinic list for Clinical Supervision of New Patient Assessments by Junior Trainees. Very complex/high risk new to service assessments will be carried out by the post-holder in conjunction with other members of the CMHT (approximately 1 per month on average).

The post-holder will be expected to manage a caseload at present of approx. 100 more complex service users subject to the Care Program Approach (CPA), working alongside care coordinators from the Community Mental Health Team. It is expected that following caseload transformation, this number will remain relatively unchanged.

The remainder of the caseload (ie: non-CPA) at present numbers approx. 400 less complex service users. The application of the Trust's caseload inclusion tool in team indicates that this number will reduce to approx. 270-300 going forward, with discharges already in progress. The aim would be to make the post more effective, create time for closer liaison with Primary care, improve quality of referrals into the service and improve quality of training.

The wider CMHT will directly manage an additional 60 maintenance depot patients under a nurse led protocol along with another cohort sitting under nurse lead clinic reviews. The Consultant will operate a consultation, formal supervision and advice model with this group rather than have direct and continuing open episodes.

Average numbers of CTO patients is 12. On average there were 12 MHRT/Managers meetings attended in the last 12 months.

Junior doctor resource is currently one CT trainee. The Post Holder will be supported to develop Educational and Clinical Supervisor Responsibilities for the junior trainee. There is also a hub manager Mr Brian McAdam; CMHT Manager Carla Pearse.

While primarily responsible for delivering a quality clinical service, the consultant CMHT psychiatrist is also expected to be actively involved in the strategic development of the team as part of wider community mental health services of the Local Division..

While primarily responsible for delivering a quality clinical service, the consultant psychiatrist is also expected to be actively involved in taking a strategic lead in on-going developments and support the Trust's strategic aims of delivering "Perfect Care".

The post holder will be included in the on-call rota for Liverpool. This is a rolling and involves daytime cover. The rota is presently 1 in 18.

The Trust is committed to the provision of effective seven day care and endorses the Royal College of Psychiatrists support of the Academy of Royal Medical Colleges paper Seven Day Consultant Present Care and the Government's stance on this issue. There is a 1% supplement available for the on call banding.

a. Clinical

- 1. Consultant psychiatrist responsibility for their CMHT caseload
- 2. To supervise and support team members who carry out assessments of patients referred to the team.
- 3. To carry out comprehensive psychiatric assessments and provide treatment for patients.
- 4. Supporting staff to manage psychiatric emergencies
- 5. To conduct patient reviews and lead Multidisciplinary reviews, CPA reviews and multi-professional meetings
- To be the responsible clinician for the purposes of the Mental Health Act 1983 (amended 2007) and carry out duties in accordance to the code of practice.
- To carry out comprehensive Risk Assessments and participate in Trust's risk management processes such as Health Risk Assessment and Management Meetings (H-RAMM) and Multi Agency Public Protection Arrangement (MAPPA) Meetings
- 8. To provide medical leadership to the team.

b. Liaison

- Maintain high level of effective communication with other parts of the Mental health service across the Trust
- 2. Liaison with families / carers
- 3. Liaison with aspects of the Criminal Justice System regarding patients.
- 4. Liaising with other stakeholders and interested parties.
- 5. The post holder will be expected to maintain effective communication with Access services, community mental health teams, and primary care.

c) Governance

- 1. Programmed activity time will allow for management and audit of the service and reporting of audit programmes.
- 2. Regular stakeholder meetings if required
- 3. Partnership Forums involving service user representatives and advocacy

- 4. Involvement with critical incident / serious untoward incident reporting and response
- 5. Protocol development
- 6. Attendance at twice monthly Consultants meetings

d) Training

- 1. Direct supervision of junior medical staff
- 2. Role in in-house MDT training / education sessions
- 3. Education of other services / professions with relation to CMHT (including all stakeholders)
- 4. Participation in Research and Clinical Audit

e) Service development

1. Work with CMHT transformation within the Trust

Suggested draft timetable:

This is a 10 session post split into 7.5 sessions for Direct Clinical Care and 2.5 sessions for Supporting Professional Activities.

The timetable is indicative only. A formal job plan will be agreed between the post holder and the lead consultant & Clinical Director three months after commencing the post and at least annually thereafter. There is some flexibility in finalising the timetable however any agreed timetable must take account of the needs of service users and coherence of the team.

	Monday	Tuesday	Wednesday	Thursday	Friday
AM	Admin and MHRT work (DCC)	Academic meeting & Consultant meeting	Urgent patient reviews and admin (DCC)	Non-CPA clinic	CPA clinic (DCC)
		(SPA)		(DCC)	
PM	CPA clinic (Community base)	Non-CPA clinic	MDT and clinical admin (DCC)	Clinical admin (DCC) Junior doctor	CPD / audit / team performance (SPA)
	(DCC)	(DCC)		supervision (SPA)	(SPA)

The post holder will have access to allocated office space at Norris Green Hub with a computer with Internet access and a fax. A smart phone and laptop will be provided. Other specific technical support can be negotiated. The post holder will have access to a dedicated 0.5 WTE band 4 medical secretarial and dedicated 0.5 WTE band 3 transcriptionist support in post.

Appraisal, CPD and job planning

The Trust insists on participation in the CPD programme of the Royal College of Psychiatrists, and the post holder must join a local CPD peer group. Consultants are encouraged to take their study leave entitlement in line with learning objectives identified in personal development plans. An annual study leave budget of £450 per consultant is available for use. The post holder will work with a consultant colleague, medical manager or clinical director to draw up a PDP whilst being appraised annually. The trust has a well organised appraisal system and trained appraisers are allocated to consultants by the Responsible Officer.

The Trust is aware of the need for senior psychiatrists to meet regularly for support and CPD. The post holder will be included with other general adult psychiatry colleagues in a programme of postgraduate educational meetings.

Newly recruited consultants will attend the Essential Mandatory Trust Induction and be provided with a local induction by their Medical Manager. Induction includes training on the Trust's clinical information system. A mentoring scheme exists for medical staff in the Trust and is available to all doctors, including consultants, for guidance and support for as long as they feel the need for it. This is actively encouraged for all newly appointed colleagues in their first Consultant post.

The Trust has a well respected and active Medical Education Department, led by Director of Medical Education Dr Indira Vinjamuri. The Trust has close links to the NWHEE through the wide participation of its Consultant staff in teaching and Educational roles at all levels. This includes facilitating a large number of clinical placements for University of Liverpool Medical School medical students throughout teams within the Trust

Job planning is conducted annually and led by the post holder's Lead Consultant with support from the Clinical Director and Chief Operating Officer as necessary. Individual job plans will be aligned to Trust, Division, Service Line and personal objectives respectively.

Teaching and training

The post holder will receive any necessary training as provided by HENW in order to achieve Level One trainer status, which will allow them to act as a clinical supervisor to trainees. Once approved the post holder will have the opportunity to take on the role of clinical and educational supervisor responsibility for the trainees based with the team.

The successful applicant will be expected to provide clinical supervision and training for junior doctors according to the requirements laid down in the contract held between the Trust and the Postgraduate Dean. Each team can provide a clinical attachment for a medical student, and Consultants are responsible for organising their teaching.

The post holder will regularly attend the Tuesday morning postgraduate programme at Mossley Hill Hospital as part of their weekly SPA sessions. This is well attended by Consultants and is a lively meeting. It includes case conferences and journal presentations. One meeting per month is an audit programme with a prize twice a year for the best audit. Occasionally it includes mandatory training slots and guest speakers.

There are established local PDP peer groups. There is a designated budget for Consultant CPD and study leave is readily available and supported.

The Consultant Group has one lunchtime continuing professional development meeting each month. This involves presentations by invited speakers on topics agreed by the Consultant group, or discussions of clinical cases primarily intended for peer support.

There is a well resourced and expanding clinical effectiveness, research and resource library developed within the Trust. It has a dedicated space at Rathbone Hospital site where there is access to various databases both locally held and Internet based.

Research

Mersey Care NHS Trust has an active audit department and the post holder will be involved in audit and supervising junior Doctors' audits.

As part of its new "Perfect Care" strategy the Trust is keen to expand and develop existing research opportunities for interested Consultants. The Trust has appointed an Deputy Medical Director for research, development and innovation (Dr Cecil Kullu) who will lead the implementation of the trust's R&D and innovation strategy. The Deputy Medical Director takes a particular responsibility for the development of the Centre for Perfect Care (CPC). The Trust is also keen to develop strategically important relationships with the Academic Health Science Network and other major partners.

Clinical governance

The activity of the team will be supported within the reporting arrangements of the Local Division Governance Committee which itself will report to the Executive Director of Operations (Mark Hindle). This committee will establish and maintain an effective system of clinical governance across the whole of the Division's activities that support the objectives of the Division and the Trust as a whole. It will do this by creating a structure that is focused on quality, particularly; Safety, Effectiveness, and Patient Experience.

External duties, roles and responsibilities

The Trust actively supports its consultant staff who may wish to undertake roles outside the Trust that are of benefit to medical practice at regional, national and international level, and recognises the value of such roles for the reputation, and standing of the Trust.

Consultants should however undertake such duties only after discussion with colleagues and with the agreement of the Clinical Director or Deputy Medical Director and should be sensitive to the increased workload undertaken by colleagues in support. They must be able to fully account for these activities in terms of interest to the Trust, professional society, college or wider NHS.

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.

On-call and cover arrangements

The post holder will be included in the daily on-call rota for South Liverpool. There is usually always a higher trainee ST4-6 first on call at night. On-call availability supplement is 1% - Band B low frequency, low intensity and has been consistently for many years. The rota is currently shared with approximately 18 FTE colleagues, from adult, addictions and learning disability services.

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

Wellbeing

There is dedicated Occupation Health based at Trust Headquarters. There is psychological support available for all staff. Physiotherapy services are also available at various sites across Mersey Care. A voluntary Consultant peer support service is also in development at Mersey Care NHSFT. There are regular Consultant social events, which have helped inclusion and wellbeing. There is currently a working group on improving Consultant and Doctors' wellbeing.

Leave

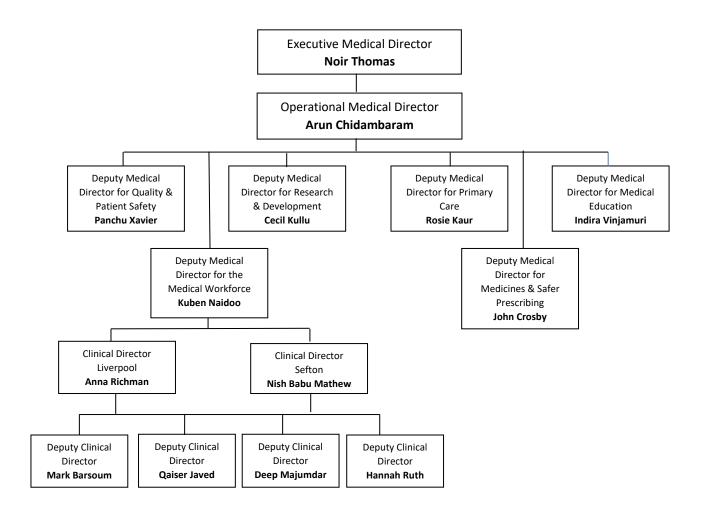
The post-holder is entitled to 32 days annual leave, increasing to 34 days annual leave after seven year's consultant service. The entitlement for study leave is 30 days over three years, including £1500 study leave budget over the three years.

Clinical cover will be provided by the Consultant's inpatient colleagues for all leave.

Approval of this job description by the Royal College of Psychiatrists

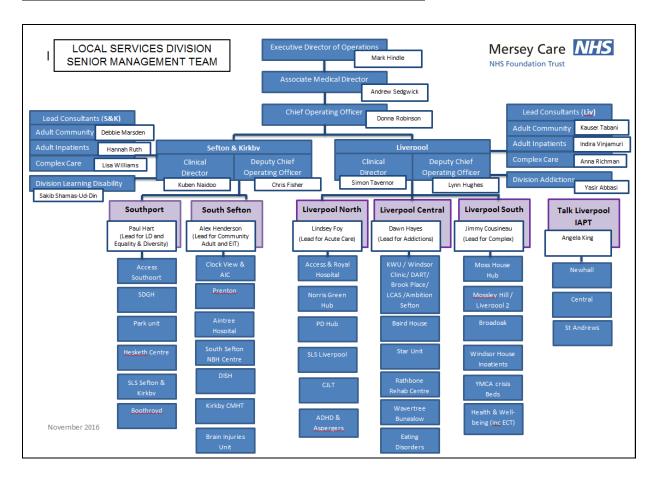
This job description and person specification was approved by the Royal College of Psychiatrists' Regional Advisor on 14/09/2020.

Trust medical / professional management framework:





Local Services Division operational management framework:





Appendix 1: Person specification/selection criteria for consultant

Abbreviations for when assessed: S: Screening prior to short-listing

A: Short-listing from application form

F: Formal Appointments Committee Interview R: References

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



	ESSENTIAL	WHEN ASSESSED	DESIRABLE	WHEN ASSESSED
CLINICAL SKILLS, KNOWLEDGE & EXPERIENCE	Excellent knowledge in specialty of General Adult Psychiatry	AFR	Wide range of specialist and sub-specialist experience relevant to post within NHS or comparable service,	AF
	Excellent clinical skills using bio-psycho-social perspective and wide medical knowledge	AFR		
	Excellent oral and written communication skills in English	AFR		
	Able to manage clinical complexity and uncertainty	F		
	Makes decisions based on evidence and experience including the contribution of others	F		
	Able to meet duties under MHA and MCA	F		
	Ability to work constructively in and to lead a multidisciplinary team	AF		
ACADEMIC SKILLS & LIFELONG LEARNING	Able to deliver undergraduate or postgraduate teaching and training	AF	Able to plan and deliver undergraduate and postgraduate teaching and training relevant to this post	AF
	Participated in continuous professional development	A F	Reflected on purpose of CPD undertaken	A F
	Participated in research or service evaluation.	A F	Experienced in clinical research and / or service evaluation.	A F
	Able to use and appraise clinical evidence.	A F	Evidence of achievement in education, research, audit and service improvement: awards, prizes,	A



		presentations and publications.		
Has actively participated in clinical audit.	A F	Has led clinical audits leading to service change.	ΑF	