
**Consultant Child and
Adolescent Psychiatrist in
Tyrone and Fermanagh
CAMHS**



WHY YOU SHOULD CONSIDER WORKING FOR WHSCT AND SPECIFICALLY THE WHSCT TYRONE AND FERMANAGH CAMHS SERVICE:

Excellent location and work-life balance

The Tyrone and Fermanagh CAMHS Service supports the population of the WHSCT portion of Tyrone (ie Omagh, Strabane and surrounding towns and townlands – the remainder being supported by the SHSCT from their Dungannon base) and all of Co Fermanagh. The service currently operates out of two bases: one in Rivendell Child and Family Service which is located in the grounds of the Tyrone and Fermanagh Hospital in Omagh (Rivendell) and the other on the second floor of The Hope Centre which is situated in Enniskillen town, County Fermanagh. Staff often work between both of these locations.

Co Tyrone is the largest county in Northern Ireland (UK) and is home to the Sperrin Mountains which is one of the largest uplands in Ireland and has been designated an area of outstanding natural beauty. County Tyrone shares parts of its borders with two Republic of Ireland counties namely County Donegal to the west and Monaghan to the South. Omagh is the county town of Tyrone.

Mount Sawel is the highest mountain in the Sperrins at 678m. The Nobel-winning poet Seamus Heaney grew up on the edge of the Sperrins and found words to suit their subtle splendour. Just outside Omagh there is also the popular Ulster American Folk Park which looks at typical Irish homes in the 1600's and tells the story of emigration to America.

Co Fermanagh is famous for its lakes, particularly Lough Erne, and the Erne waterways are well renowned and cabin cruisers and other boats are common sights on the water as are anglers. Fermanagh attracts holidaymakers from across the world on a consistent basis such is the popularity of the waterways and the scenic surroundings. Enniskillen, the main town in the county, is home to the Castle Coole Estate and Enniskillen Castle. Enniskillen Castle houses The Inniskillings Museum, which is dedicated to the famous The Royal Inniskilling Fusiliers and the 5th Royal Inniskilling Dragoon Guards of the British Army. Other Fermanagh attractions include Belleek Pottery, Castle Archdale, Crom Estate, Devenish Island and the Marble Arch Caves.

The Tyrone and Fermanagh area is not only incredibly picturesque but is conveniently located and there are solid road links between Omagh and Enniskillen and neighbouring areas and indeed the remainder of the province making commuting to and from both bases entirely manageable. The area is favoured by those who like the outdoors and is also very family friendly with many good schools within the locality.

The Western Trust's commitment to its medical workforce

The Western Trust places a high value on its medical workforce who are well supported within clearly defined medical management structures and by our Medical Director, Dr Brendan Lavery, who provides us with excellent leadership and guidance.

The Western Trust understands well the essential role our doctors play in the delivery of care and treatment to our service users and their families/carers and as an organisation like to think that in return for your input and efforts that you will find yourself being warmly supported and encouraged within the trust and that we will be able to work together with you to ensure that you have positive and abundant learning and development experiences whilst you are working with us.

As so many other WHSCT medical colleagues have positively reflected, we will anticipate that you will find working for us both personally and professionally enriching and that you will see your development grow as a member of the Western Trust medical team.

The Western Trust's commitment to Post Graduate Medical Education

The role of Medical Education is to develop competent and caring healthcare practitioners who are capable of providing the highest level of care to their patients.

The Western Trust is a vibrant and exciting place to pursue a medical career and in working as part of the CAMHS department you will have ample and diverse opportunities to pursue a stimulating, challenging and rewarding career.

Through the strength, commitment and tireless efforts of our quality focussed Medical Education Department staff and the leadership of our Director of Post Graduate Medical Education (DME), Dr Athinya Thiraviaraj our recently rebranded MedEdWest department continues to deliver on our long standing tradition of educative and training excellence for medical students, doctors in training and continuing professional development opportunities for our speciality doctors and consultants. The Medical Education Department also continues to cultivate the strong on-going relationships with the universities, NIMDTA and the GMC.

The Trust has close links with Queens University Belfast and University of Ulster and has teaching hospital status on both Acute Hospital sites. The Trust also has educational links with Royal College of Surgeons Ireland (RCSI) and National University of Ireland Galway (NUIG) with teaching status in South West Acute Hospital for RCSI.

Clinical and Educational Supervision is considered to be of upmost importance within the WHSCT and this includes within the CAMHS Service where Consultant

Child and Adolescent Psychiatry staff are deeply committed to the highest standards of postgraduate education and so, alongside a wide range of clinical opportunities, you will have access to structured educational opportunities which will assist with your professional development and your ability to deliver on high quality patient care in line with your professional commitment and goals.

So in coming to work in the Western Trust you can expect to work in an environment that is quality focussed, stimulating, progressive and rewarding and wherein you can expect to receive great support from your Consultant colleagues and all other members of each Multi-Disciplinary Team and where all staff are approachable, listen and will do all that they can to help you both at a professional and human level. It will indeed feel as if you are very much 'at home' here.

Appraisal and Revalidation support for Medical staff

The WHSCT were the first Trust in NI to invest in, develop and implement a fully online Appraisal system and we then lead on the development of the Regional Appraisal System which is now in operation. This meant that doctors were able to ensure that they were satisfactorily meeting clearly defined targets set by the WHSCT and GMC in relation to their practice. Phase 1 of development is now complete and we are presently moving to Phase 2 which will allow us to further enhance and refine how the system supports our doctor's participation in annual appraisal. The vision is that we will eventually have an online 'Professional Portal' that will facilitate annual appraisal for our doctors/dentists, that will have links to relevant guidance and training and any other facilities that our users identify that supports them as a professional.

There is also a fully embedded in trust revalidation and appraisal process which supports all doctors with all of their appraisal and revalidation requirements and which is fully supported through The Medical Director's Office. WHSCT also provide 'Appraisal Training' within the Trust which doctors have found really invaluable when completing appraisals and Specialty doctors are also eligible to apply for appraiser training in order to become medical appraisers themselves. The below diagram details the values and associated behaviours that we expect staff working within Health and Social Care (HSC) to display at all times:

HSC Value	What does this mean?	What does this look like in practice? - Behaviours
Working Together 	<p>We work together for the best outcome for people we care for and support. We work across Health and Social Care and with other external organisations and agencies, recognising that leadership is the responsibility of all.</p>	<ul style="list-style-type: none"> • I work with others and value everyone's contribution • I treat people with respect and dignity • I work as part of a team looking for opportunities to support and help people in both my own and other teams • I actively engage people on issues that affect them • I look for feedback and examples of good practice, aiming to improve where possible
Compassion 	<p>We are sensitive, caring, respectful and understanding towards those we care for and support and our colleagues. We listen carefully to others to better understand and take action to help them and ourselves.</p>	<ul style="list-style-type: none"> • I am sensitive to the different needs and feelings of others and treat people with kindness • I learn from others by listening carefully to them • I look after my own health and well-being so that I can care for and support others
Excellence 	<p>We commit to being the best we can be in our work, aiming to improve and develop services to achieve positive changes. We deliver safe, high-quality, compassionate care and support.</p>	<ul style="list-style-type: none"> • I put the people I care for and support at the centre of all I do to make a difference • I take responsibility for my decisions and actions • I commit to best practice and sharing learning, while continually learning and developing • I try to improve by asking 'could we do this better?'
Openness & Honesty 	<p>We are open and honest with each other and act with integrity and candour.</p>	<ul style="list-style-type: none"> • I am open and honest in order to develop trusting relationships • I ask someone for help when needed • I speak up if I have concerns • I challenge inappropriate or unacceptable behaviour and practice

**CONSULTANT CHILD AND ADOLESCENT PSYCHIATRIST
PERSONNEL SPECIFICATION AND JOB
DESCRIPTION**

DATE:	May 2024
POST AND SPECIALTY:	Consultant Child and Adolescent Psychiatrist in Child and Adolescent Psychiatry – Temporary appointment (1 year)
BASE:	Rivendell Child and Family Clinic, Tyrone and Fermanagh Hospital, OMAGH.
CONTRACT:	<p>Temporary contract.</p> <p>0.5 WTE.</p> <p>Salary: According to Terms and Conditions of service for Consultant Child and Adolescent Psychiatrists in Northern Ireland (2021) (referred to as TCS throughout this document). Further details are provided in the section 'description of the post'.</p>
ACCOUNTABLE PROFESSIONALLY TO:	CAMHS Psychiatry Clinical Lead (Dr Iris Wylie) Medical Director (Dr Brendan Lavery)
ACCOUNTABLE OPERATIONALLY TO:	Assistant Director of Children and Families Directorate (Kevin Duffy)
KEY WORKING RELATIONSHIPS AND LINES OF RESPONSIBILITY:	<p>Team Manager</p> <p>Head Of Service</p> <p>Assistant Director of Women's & Children's Directorate</p> <p>Director Of Women's & Children's Directorate</p> <p>Medical Director</p> <p>Associate Medical Director</p> <p>Chief Executive of WHSCT</p>

PERSONNEL SPECIFICATION

Title of Post: Consultant Child and Adolescent Psychiatrist (Temporary Appointment)

Department/Directorate: Children and Families

Location: Rivendell, Tyrone and Fermanagh Hospital

Date: May 2024

Notes to applicants:

- 1. You must clearly demonstrate on your application form under each question, how you meet the required criteria as failure to do so may result in you not being shortlisted. You should clearly demonstrate this for both the essential and desirable criteria.*
- 2. Shortlisting will be carried out on the basis of the essential criteria set out in Section 1 below, using the information provided by you on your application form.*
- 3. Proof of qualifications and/or professional registration will be required if an offer of employment is made – if you are unable to provide this, the offer may be withdrawn.*

ESSENTIAL CRITERIA		
SECTION 1: The following are ESSENTIAL criteria which will be measured at shortlisting stage and may be further explored at the interview / selection stage. You should therefore make it clear on your application form how meet the following criteria. Failure to do so may result in you not being shortlisted.		
Factor	Criteria	Method of Assessment
Qualifications/ Registration/ Experience	Applicants must have or be eligible for Full registration and Licence to Practice with the General Medical Council. Have achieved CCT in Child and Adolescent Psychiatry or shall have equivalent experience and competencies.	Shortlisted from Application Form
Other	Hold a current full driving licence which is valid for use in the UK and have access to a car on appointment.	Shortlisting by Application Form

	<i>This criteria will be waived in the case of applicants whose disability prohibits driving but who have access to a form of transport approved by the Trust which will permit them to carry out the duties of the post.</i>	
SECTION 2: The following are ESSENTIAL criteria which will be measured during the interview/ selection stage:		
COMMUNICATION	Effective oral and written communication skills.	Interview
CLINICAL SKILLS	<p>Appropriate knowledge base and ability to apply sound clinical judgement to child and adolescent problems.</p> <p>Possess a range of clinical knowledge, skills and information technology expertise.</p> <p>Knowledge and skills relating to the use of psychopharmacological interventions</p> <p>Knowledge and skill in age appropriate psychotherapeutic approaches.</p>	Interview
KNOWLEDGE & SPECIAL INTERESTS	<p>Knowledge and understanding of developments in the Health and Social Services.</p> <p>Knowledge and understanding of clinical governance and the individual responsibilities it implies.</p> <p>Demonstrate understanding of the importance of Quality Improvement initiatives and processes.</p> <p>Knowledge of evidence based approach to clinical care.</p> <p>Knowledge of and embraces the principles of clinical audit and research.</p> <p>Encourages on-going learning and an educative culture, both for self and</p>	Interview

	<p>others.</p> <p>Understands the issues of risk management and of operating within a litigious and complaints culture.</p> <p>Ability to direct and organise teams.</p> <p>Builds strong and effective relationships with patients, families and colleagues with the ability to gain their trust and confidence.</p> <p>Ability to cope with considerable pressure as well as to adapt to constant change and new demands.</p>	
SKILLS & APPTITUDES	<p>Good communication and interpersonal skills.</p> <p>Ability to develop effective and flexible working relationships on an individual and multi-disciplinary basis with all levels of staff.</p> <p>Ability to lead, organise and manage the work of a clinical department and team and engender high standards of care.</p> <p>Ability to effectively train and supervise medical undergraduates and postgraduates.</p> <p>Ability to cope with and effectively organise the workload of a consultant.</p>	
HEALTH	Meets professional health requirements (in line with GMC Standards/Good Medical Practice).	
ELIGIBILITY	Eligibility to work in the UK.	
FITNESS TO PRACTICE	Is up to date and fit to practice safely.	

DESIRABLE CRITERIA		
SECTION 3: the following will ONLY be used where it is necessary to introduce additional job related criteria, and is dependent upon the number of applications received. You should therefore make it clear on your application form how you meet these criteria. Failure to do so may result in you not being shortlisted.		
Factor	Criteria	Method of Assessment
Qualifications	<p>MRC Psych.</p> <p>CCT in Child and Adolescent Psychiatry or equivalent qualification/experience may be considered to be a suitable alternative.</p> <p>Diploma in Child Health / Mental Health</p> <p>Paediatric Experience.</p> <p>Have training in teaching methods.</p> <p>Part II Registration with RQIA or be eligible for same (Mental Health Order).</p>	Shortlisting by Application Form

FURTHER INFORMATION RELATING TO THIS POST

1. JOB DESCRIPTION REVIEW

This Job Description, Personnel Specification and all further attached information has been formally reviewed by WHSCT Medical HR Department and deemed appropriate for the purposes of this temporary recruitment and selection.

2. INTRODUCTION

The Western Health and Social Care Trust was established in April 2007, following the merger of three Trusts, as recommended by the Review of Public Administration (RPA 2006).

The Trust provides a full range of services from two acute hospitals, Altnagelvin Hospital in Derry~Londonderry and South West Acute Hospital in Enniskillen. The Trust also provides Psychiatric services within Grangewood, Derry~Londonderry and the Tyrone and Fermanagh Hospital in Omagh along with the Omagh Hospital and Primary Care Complex with supporting community services.



3. WESTERN TRUST DETAILS

The Western Trust is one of five Health and Social Care (HSC) Trusts in Northern Ireland which provide health and social services across Northern Ireland.

The Western Health and Social Care Trust is a statutory body which is responsible for the delivery of safe and effective health and social care services to a population of approximately 300,000 people across the western part of Northern Ireland, covering a geography that stretches from Limavady in the north to Fermanagh in the south. The Western Trust also provides a range of specialist acute services to the northern part of the Northern Trust and to north Donegal through specific commissioning arrangements. The Western Trust employs approximately 12,000 staff and had an annual income of over £945m in 2020/21.

The Trust provides services across 4,842 sq. km of landmass and delivers services from a number of hospitals, community based settings and directly into individuals' homes. This comprehensive range of services is provided through the following operational Directorates:

- Acute Services,
- Adult Mental Health and Disability Services,
- Primary Care and Older People's Services,
- Women and Children's Services.

The service Directorates are supported by the

- Chief Executive's Office,
- Finance and Contracting Directorate,
- Human Resources Directorate,
- Medical Directorate,

- Performance and Service Improvement Directorate,
- Strategic Capital Development Directorate.

Acute hospital services are delivered in Altnagelvin Hospital, and the South West Acute Hospital (SWAH). Omagh Hospital and Primary Care Complex (OHPCC) provides a range of rehabilitation and palliative care hospital services as well as locally based diagnostic, urgent care and community support services. Lakeview, an Intellectual Disability Hospital, Grangewood, a mental health inpatient unit, and Waterside Hospital, a rehabilitation and mental health facility for older people, are all based in Gransha Park. The Tyrone and Fermanagh Hospital provides a range of acute mental health inpatient services for adults and older people. Social services and many other Trust services are delivered in community-based settings, often in partnership with organisations in the private, community and voluntary sectors.

In support of “Health and Wellbeing 2026 - Delivering Together” the Trust aims to deliver the following outcomes:

- High quality and safe services,
- Services that are financially sustainable and effective,
- Delivery of contracted activity and performance targets
- Supported by a skilled and effective workforce.

4. WHSCT CHILD AND ADOLESCENT MENTAL HEALTH SERVICE (CAMHS)

The Western Trust provides Child and Adolescent Mental Health Services (CAMHS) to the five district council areas in the Western Health and Social Care area: Derry~Londonderry, Limavady, Strabane, Omagh and Fermanagh. The total population is estimated at 300,000 of whom 75,000 approximately are under 18 years of age. Within the Trust, there are currently three locality CAMHS teams: one in the Northern Sector, based in Derry~Londonderry (Woodlea House in Grangewood Site) and two in the Southern Sector (Omagh base, Rivendell in Tyrone and Fermanagh Site, and Fermanagh base in The Hope Centre, Enniskillen).

The CAMHS Multi-Disciplinary Teams are made up of Psychiatrists, Psychologists, Social Workers, Clinical Nurse Specialists and Mental Health Practitioners and the CAMHS service works closely with both statutory and voluntary agencies to ensure the comprehensive and safe delivery of mental health care for its service users and their families/carers.

SOUTHERN SECTOR (where post based)

The service covers the Omagh, Strabane and Fermanagh areas. The Multi-Disciplinary includes .1WTE Consultant Child and Adolescent Psychiatrist (Dr Iris Wylie plus 0.1WTE Clinical Lead role) and 0.8WTE Specialty Doctor (Dr Ruth Foy), a Consultant Clinical Psychologist (who covers both teams), a Clinical Psychologist, 13 Mental Health Practitioners (comprising staff from Mental Health Nursing, Social Work and Psychology backgrounds including a Specialist Eating Disorders Practitioner and 1 Non-Medical Prescriber). The staff group has training in CBT, EMDR and Family Therapy.

There are 2 WTE Primary Mental Health Workers supporting step 2 and a Drug and Alcohol CAMHS practitioner.

NORTHERN SECTOR

This aspect of the service currently covers the Derry~Londonderry and Limavady areas. The Multi-Disciplinary Team in the Northern Sector consists of a 1 WTE Consultant Child and Adolescent Psychiatrist (Drs Mugdha Kamat and Claire Elliott make up this 1WTE compliment), 2 Specialty Doctors (Drs Seamus Mullan and Claire McShane), a Consultant Clinical Psychologist (shared with Southern Sector), a Clinical Psychologist, a Lead Senior Social Worker (shared with southern sector), 16 Mental Health Practitioners (including staff from mental health nursing, social work and psychology backgrounds), a Specialist Complex Behaviour /ADHD Practitioner who is a Non-Medical Prescriber, and a Specialist Eating Disorder Practitioner), a Family Support Worker and Assistant Psychologist. The staff group includes 2 CBT Therapists and a Family Therapist. There are also a number of training posts which include psychology, social work and nursing. A Staff Grade Community Paediatrician joins the team for one day weekly to carry out assessments of complex behaviour problems and monitor ADHD medication.

There are 2 WTE Primary Mental Health workers supporting step 2 and there is a Drug and Alcohol CAMHS practitioner.

CROSS TRUST:

A CBT Psychotherapist provides sessional input to the service, providing opportunities for case discussion, one half day monthly and the service runs a weekly family therapy clinic.

A Consultation Service is also offered on both sectors to professionals outside of CAMHS who wish to discuss mental health concerns regarding the young people in their care.

The WHSCT CAMHS service is actively pursuing a Psychoanalytical Psychotherapist to provide sessional supervision for the team on a monthly basis.

Additional CAMHS trust wide recruitment is underway and so the above is an accurate reflection of current staffing arrangements.

CHILD AND ADOLESCENT PSYCHIATRY COMPONENT WITHIN THE WESTERN HEALTH AND SOCIAL CARE TRUST CAMHS:

There are currently 3.8 WTE Consultant Child & Adolescent Psychiatrists funded within CAMHS. This funding has been realigned to employ 3 Specialty Doctors and fewer Consultant sessions to meet the needs of the service. On occasion there is also a centrally appointed core trainee in the Southern Sector. This core trainee works in CAMHS during the day but is on the local Adult Psychiatry junior doctor on call rota. The CAMHS teams also occasionally have Higher Specialist Child Psychiatry Trainees on placement.

Please see remainder of document for further details.

REFERRALS TO CAMHS:

A referral is received into CAMHS either by post or when it is delivered electronically via CCG. We receive referrals from a number of sources including General Practitioners (GPs), Social Services, Health Visitors, Educational Psychologists, Community Paediatrics and Services for Looked After Children . When received all referrals are comprehensively reviewed and triaged by our Band 7 CAMHS Referral Co-Ordinator.

The referrals which are deemed appropriate for our service are then coded as Routine, Urgent or Emergency based on the clinical information we have available to us. The young person is then placed on the CAMHS waiting list for direct clinical assessment by the most appropriate part of our service (see below) or they are placed on the Consultation Waiting List if this is deemed most appropriate in the first instance.

The service operates a Choice and Partnership (CAPA) approach for its new patients. CAPA is a service transformation model that combines collaborative and participatory practice with those who use our service. The model aims to enhance effectiveness, leadership, skills modelling and demand and capacity management. The Western Trust CAMHS receives on average 2,100 referrals per annum of which 1450 referrals on average are accepted onto our waiting list. These figures have remained relatively consistent in the past 5 years. There is an acknowledgement that referral rates to CAMHS reduced, at least initially, during the Covid-19 pandemic however we have since witnessed a significant increase in the demand for our service.

STRUCTURES WITHIN WHSCT CAMHS SERVICE:

The operational hours for the following elements of the CAMHS service are 9am-5pm Monday- Friday.

CAMHS Step 2

This is the part of the service that deals primarily with the mild-moderate developmental/behavioural difficulties and/or mental health or emotional difficulties. These are likely to be short term referrals. It is also the part of the service that seeks to provide early intervention and education to our many stakeholders.

CAMHS Step 3

This is what we generally refer to as the core part of our CAMHS service. Here we aim to provide a comprehensive service to a wide range of young people and families who are presenting with all manner of moderate-severe and complex emotional, behavioural and Mental Health challenges. It is also the part of the service in which we assess and treat young people with neurodevelopmental challenges eg ADHD.

CAMHS Crisis Service

The Western Trust Crisis service also provides input to the Emergency Units and Acute Medical and Paediatric wards. They also assess urgent and emergency referrals from GPs. This service is currently commissioned for 6 (WTE) Crisis Practitioners.

CAMHS Eating Disorder Service

The Western Trust provides input for those young people who are presenting with eating disorder challenges in both of our trust sectors. Such care predictably has input from medical, nursing and dietitian members of the team and where required the wider Multi-Disciplinary members of the team can become involved in the clinical care of the young person and their family.

It is envisaged that the appointee will have a key role within this part of the service on a sector specific basis. Any additional training that is required to support the appointee in taking up this role will of course be agreed and provided through the normal channels.

CAMHS Consultation Service

On occasion CAMHS receives referrals on young people who are already receiving input from a range of other non-CAMHS services and where there are perhaps complex background challenges. In such instances we may consider offering a Consultation meeting with key stakeholders to discuss the clinical case in more detail which then informs the care delivered to that young person and their family whether their care is assumed by CAMHS or they remain with existing services.

Card Before You Leave Service

We also operate a 9am-1pm Saturday, Sunday and Bank Holiday Card Before You Leave (CBYL) Service. Here young people who have presented to local Emergency Departments or GPs and who have been deemed at 'low risk' can be assessed by CAMHS. Assessments are generally carried out by two members of the CAMHS team who cover the CBYL service on a rota basis. There is no medical cover in place for this aspect of the service.

Regional Inpatient Psychiatric beds – Beechcroft

The Beechcroft Unit in Belfast provides specialist inpatient mental health care for young people up to the age of 18. The unit includes an education provision. This is typically where we will admit to whenever an inpatient admission for assessment +/- treatment is deemed clinically appropriate for any of our WHSCT young people. On occasion young people are admitted to local Adult Mental Health in-patient wards or locality medical/paediatric in-patient beds especially if there are no beds available in Beechcroft. The latter venues may also be used for instance with eating disordered young people who require medical admission/stabilisation. During the course of any such admissions the locality CAMHS team retains clinical responsibility and at present provide daily input to these young people on a Monday to Friday basis.

As required the appointee may have to support such locality orientated in-patient admissions. There is an expectation that such work would be undertaken in an autonomous capacity and that where possible the appointee has or is eligible for Part II registration with RQIA which will allow safe and appropriate use of MHO (Mental Health Order NI, 1986).

Whilst perhaps a demanding aspect to the role, such opportunities can also permit the appointee to develop their experience of assessing and managing high acuity patients in a non-community fashion which can over time add to their experience and expertise.

Details of other local mental health/relevant services CAMHS have links with:

The WHSCT CAMHS Service promotes close working relationships with a range of its key stakeholders in the interest of delivery safe and effective care. As such we maintain close links with the WHSCT Adult Mental Health Service and indeed hold quarterly CAMHS-AMH transition planning meetings and business meetings which are chaired by the AMH Head of Service and attended by senior clinicians from both services. We also maintain close links with the Intellectual Disability CAMHS (ID CAMHS) Service to whom we occasionally have to refer young people, or where they have to refer a child to ourselves. CAMHS staff are also in regular liaison with local Social Services (Gateway, Family Intervention Services and 16+ Social Care Departments), Therapeutic Services for Looked After Children and the WSHCT Child Psychotherapy Service and the WHSCT Family Therapy Service in the course of our clinical work and Consultation Clinic.

We also receive young people who have been under the care of Community Paediatrics to CAMHS for the ongoing assessment and treatment of certain neurodevelopmental disorders eg ADHD and Tic Disorders and because of ongoing complex emotional/behavioural presentations and so are in regular liaison with Paediatric colleagues as well.

Senior CAMHS staff hold regular interface meetings between ourselves and other key stakeholders including WHSCT Children's ASD Service, Educational Psychology Service, other Educative services (eg ETA), Social Services and Youth Justice Service.

5. PSYCHIATRY STAFF AND MEDICAL MANAGEMENT STRUCTURE OF THIS POST:

There are currently 2.0 WTE (1WTE per sector) Consultant Child & Adolescent Psychiatrist posts substantively appointed within WHSCT CAMHS. These Consultants are Dr Mugdha Kamat and Dr Claire Elliott who are based in Woodlea House in Derry and Dr Iris Wylie (Clinical Lead for WHSCT CAMHS, 0.1WTE) who is based in Rivendell, Omagh.

In the Derry~Londonderry based service we also have two experienced 1.6 WTE Specialty Doctors (Drs Seamus Mullan and Claire McShane) appointed on a substantive basis.

In addition to the 1WTE Consultant Child and Adolescent Psychiatrist (Dr Iris Wylie) in post in the Southern Sector of the trust (Tyrone and Fermanagh) we also have a 0.8WTE permanently appointed Specialty Doctor (Dr Ruth Foy).

All three currently appointed Consultant Child and Adolescent Psychiatrists are registered trainers with GMC and NIMDTA and as already outlined are incredibly focused on the quality delivery of Undergraduate and Postgraduate Medical Education and in promoting the professional development of our medical staff and doctors in training. This means they work hard to ensure that the educative, pastoral and career planning needs of all trainees, junior doctors and speciality doctors within CAMHS are actively and appropriately addressed. They are also ambassadors for patient safety and ensure that our trainees and SAS Doctors at all times receive adequate clinical supervision and do not work beyond their clinical competence or compromise patient safety.

All three of our Consultant Psychiatrists have formal roles with our WHSCT Medical Education Department: Dr Mugdha Kamat is the CAMHS Educational Lead and has recently been appointed to the role of Foundation Educational Supervisor (Altnagelvin Hospital), Dr Claire Elliott has also recently been appointed to the role of Foundation Educational Supervisor (Altnagelvin Hospital) and Dr Iris Wylie has been a Foundation Educational Supervisor (South West Acute Hospital) since 2019 and she had previously covered the Associate Director of Post Graduate Medical Education role in an interim capacity. This means, in addition to the above, that the CAMHS Consultant Psychiatrists assist with implementing, monitoring and improving the specialty training programmes within the CAMHS and other departments in conjunction with the Director of Medical Education (DME) and Training Programme Director, and where appropriate, work with the relevant Foundation, Core Programme and GP tutors to ensure any training placement fulfils its programme requirements. They also represent their specialty area/role at training committees, both internally and externally, and ensure, along with the DME Dr Athinyaa Thiraviaraj, that all those involved in training and assessing doctors have received appropriate training and that there is a solid approach at all times to supporting the welfare of our doctors.

As such WHSCT CAMHS always strive to have core trainees, who are centrally appointed, in place on a training basis. The CAMHS teams also have specialist Child and Adolescent Psychiatry trainees on placement on occasion. When we have such trainee doctors in post the Trainee's Clinical Supervisor and other Psychiatrists have a key role in ensuring that they receive adequate clinical exposure, supervision and training and in providing such doctors with informal and formal feedback on their progress eg with respect to their training portfolios. The appointee will therefore be given the opportunity to access additional training to ensure that they are able to fulfil these supportive and educative roles appropriately, safely and confidently as required. They may also wish to engage with the training and accreditation arrangements required to become a Registered Trainer and this again will be supported, where appropriate, by their fellow Consultant Child and Adolescent Psychiatry colleagues.

It is expected that arrangements which monitor standards of care, identify current or potential problems and maintain high standards of governance are both ensured and adhered to by all Psychiatrists employed by WHSCT. The appointee will be professionally accountable to the CAMHS Clinical Lead (Dr Iris Wylie) and the Medical Director (Dr Brendan Lavery) and operationally accountable to the Assistant Director of Children and Families Directorate (Mr Kevin Duffy) and there are clear reporting arrangements in place which will be highlighted at the time of induction.

6. DESCRIPTION OF THE CONSULTANT CHILD AND ADOLESCENT PSYCHIATRIST POST

This Consultant Child and Adolescent Psychiatrist appointee will support their fellow Consultant Child and Adolescent Psychiatrists in providing psychiatric input to the Tyrone and Fermanagh community based (out-patient) Multi-Disciplinary Child and Adolescent Mental Health Service (CAMHS) Team of the Western Health and Social Care Trust (WHSCT) area. They will be based in Rivendell Child and Family Clinic in the Tyrone and Fermanagh Hospital site in OMAGH.

There is flexibility in this post in that a less than 0.5 WTE candidate is able to apply.

GENERAL DUTIES:

The appointee will work as part of a team with a strong multidisciplinary emphasis. The importance of teamwork and good interpersonal / communication skills are emphasised as essential aspects of the post.

General duties also include:

1. Employees of the Trust will be required to promote and support the mission and vision of the service for which they are responsible.
2. At all times demonstrate practice the HSC values of Working Together, Excellence, Openness & Honesty and Compassion
3. Develop and maintain good communication with all levels of management and build partnerships with the wider HPSS, NHS and external organisations in the promotion of the Trust.
4. Carry out their duties and responsibilities in compliance with health and safety policy and statutory regulations.

5. Participate in grievance and disciplinary processes as required.
6. Promote equality of opportunity through his/her own actions and ensure this policy is adhered to by staff within your area of responsibility.
7. At all times provide a caring service and to treat those with whom they come into contact in a courteous and respectful manner
8. Carry out their duties and responsibilities in a manner which assures patient and client safety

GENERAL RESPONSIBILITIES:

HSC Code of Conduct for Employees

The Code sets out the standards of conduct expected of all staff in the Western Health & Social Care Trust and presents standards of conduct and behaviours required during and after employment with the Trust. Professional staff are expected to follow the code of conduct for their own professions as well as this code.

Service Quality

Western Health and Social Care Trust is committed to providing the highest possible quality of service to all patients, clients and community through supporting and contributing to Trust quality initiatives. Employees are expected at all times to provide a caring service and to treat those with whom they come into contact in a courteous and respectful manner.

Personal & Public Involvement

Staff members are expected to involve patients, clients, carers and the wider community where relevant, in developing, planning and delivering our services in a meaningful and effective way, as part of the Trust's ongoing commitment to Personal and Public Involvement (PPI).

Please use the link below to access the PPI standards leaflet for further information.

http://www.publichealth.hscni.net/sites/default/files/PPI_leaflet.pdf

Conduct

Employees must at all times abide by Trust policies and procedures and the terms of their contract of employment. They must conduct themselves with impartiality, integrity, objectivity and honesty and maintain high standards of personal and professional accountability.

Performance

Employees are expected to demonstrate commitment to the Trust by ensuring regular attendance at work and efficient completion of duties.

Risk Management

Employees must ensure that they comply with any risk management responsibilities specific to their post, and as set out in the Trust's Risk Management Strategy.

Governance

The Trust is committed to the development and implementation of systems under Integrated Governance to ensure continuous improvement in the quality of services provided. Employees will be expected to co-operate and work with such systems.

Records Management

All employees of the Trust are legally responsible for all records held, created or used as part of their business within the Trust including patient/client, corporate and administrative records whether paper based or electronic and also including emails. All such records are public records and are accessible to the general public, with limited exceptions, under Freedom of Information Act 2000, the Environmental Information Regulations 2004 and Data Protection legislation. Employees are required to be conversant with the Trust's policy and procedures on records management and to seek advice if in doubt.

Confidentiality

All information concerning patients and staff must be held in the strictest confidence and may not be divulged to any unauthorized person.

Equality & Human Rights

Employees must ensure that equality and human rights issues are addressed within the post holder's area of responsibility in accordance with the Trust's Equality Scheme.

Health and Safety

Employees should note that under Health & Safety at Work Legislation they are required to take all reasonable steps while at work to ensure their own health and safety and the health and safety of those who may be affected by their acts or omissions at work.

Smoking, Alcohol & Health

The Trust operates policies on smoking, alcohol and health.

Environmental Cleanliness

The Trust promotes a culture of cleanliness and has adopted a partnership and collaborative approach that recognises cleanliness as the responsibility of everyone, cascading throughout every level of the organisation.

Infection Prevention & Control

The Trust operates a zero tolerance policy to preventable healthcare associated infections and the post holder is required to comply with all extant infection prevention policies, guidelines, protocols and procedures.

The Trust is an Equal Opportunities Employer.

The duties and responsibilities outlined in the above job description are not intended to be definitive nor restrictive, and may be amended to meet the changing needs of the Trust.

GENERAL MANAGEMENT RESPONSIBILITIES:

- Ensure the appropriate governance and risk management arrangements are in place for the services you are responsible for and take appropriate action to identify and manage risk and to maintain safety of users, staff and others in accordance with relevant regulations, policies and procedures;
- It is essential to ensure that the highest standards of infection prevention and control are maintained to ensure patient and client safety and maintain confidence in the Trust. As a Manager, you must ensure that you implement all instructions/ policy in this area and that all staff are made aware of and fully comply with these;
- Ensure the necessary arrangements are in place in regard to the 'Knowledge and Skills Framework' outlines, where this applies, for the posts for which you have management responsibility and ensure that each member of staff has an annual development and performance review, a personal development plan and that arrangements are in place to ensure that staff have maximum opportunity to progress through gateways in their pay bands and to contribute effectively towards our objectives;
- Promote a culture of continuous service improvement amongst your staff, encouraging their participation and that of service users in reviewing and modernising current services and in service development;
- Make sure you are trained and competent in the relevant policies and procedures which apply to the management of staff and other resources and abide by these policies; seeking advice as necessary from senior management or specialist staff as necessary;

- Communicate effectively with staff and maintain productive working relationships amongst your staff and with others;
- Delegate appropriate responsibility and authority to staff in order to ensure optimum and effective service delivery and decision-making, whilst retaining overall accountability and responsibility for outcomes;
- Promote a culture of learning and development and facilitate arrangements for and participate in training and development of staff as agreed for the performance of their duties. Where training is in accordance with relevant standards make sure you have the relevant competences in order to carry out this responsibility;
- Promote equality of opportunity for all by personal action, both in the management of your staff and in the provision of care to service users in accordance with the Trust's Equality of Opportunity Policy and Equality Scheme;
- Take responsibility for ensuring appropriate standards of environmental cleanliness and for encouraging staff to maintain standards in their work area. Have an awareness of environmental issues and take appropriate action, for example to ensure the efficient use of energy and other resources, recycling etc.;
- Make sure that staff are aware of Trust policies regarding the General Data Protection Regulations (GDPR) and the Data Protection Act 2018, the Freedom of Information Act 2000, the Environmental Information Regulations 2004 and Records Management and that they must not disclose, withhold, retain or dispose of any information unless legally authorised.

MAIN PSYCHIATRIST SPECIFIC DUTIES/RESPONSIBILITIES OF THE POST:

The CAMHS Multi-Disciplinary Team provides a community based Child and Adolescent Mental Health Service throughout the WHSCT. In both the Derry~Londonderry and Tyrone/Fermanagh Multi-Disciplinary CAMHS teams, the responsibility for the care of the patients is distributed among the clinical members.

The CAMHS Child and Adolescent Psychiatrists provide medical assessment and treatment within a model of multi-disciplinary care. CAMHS Psychiatrists are not involved in the assessments of patients who are new to the service, but will rather become involved, where appropriate, in assessing young people who have completed their initial CAMHS assessment with the non-medical members of the team. The need for specific partnership input from a psychiatrist is generally based on clinical need and is agreed through MDT case discussion.

Patients will be allocated to the Consultant Child and Adolescent Psychiatrist following case discussion and such medical assessments will involve the Psychiatrist compiling a detailed patient history and assessment from a number of sources and preparing professional correspondences and reports as necessary to reflect their input, findings and recommendations. They may also have to liaise with other clinical teams both inside and outside of WHSCT in the course of comprehensive clinical care and will have to liaise with General Practitioners (GPs) and Medical Specialists in respect of feedback on their input and in relation to the physical health of patients under their care. They may also have to undertake and source specialist assessments pertinent to their clinical work eg Forensic CAMHS assessment, ASD assessment and may on occasion have to assess young people from outside of out catchment area by virtue of their admission to/temporary residence in local WHSCT settings.

The Psychiatrists will regularly attend and contribute to the weekly Multi-Disciplinary Team meetings and perform medical duties as agreed within that forum or when appropriately designated out-with such meetings. The Psychiatrists are also available for advice and support to the multidisciplinary team as a whole but are not accountable for work undertaken by other clinicians in the team who have clinical supervision arrangements with other professional leads.

The Psychiatrists are responsible for holding and servicing their individual clinical caseload. This will include a number of cases that are co-worked with other members of the CAMHS Multi-Disciplinary Team and will include a range of cases which reflect the complex case profile of those attending the WHSCT CAMHS service. The actual caseload number will be determined by a number of factors including case complexity, full/part time working status, other commitments.

Consultant Child and Adolescent Psychiatrists are also responsible for supporting the supervision arrangements that are in place for our Specialty Doctors.

Whilst the appointee will be based predominantly within Tyrone and Fermanagh Team they may be asked to provide medical input to cover other medical colleagues within the wider service during pre-coordinated holiday/study leave and whenever unexpected absences arise. It is envisaged that this impromptu cover will normally be by telephone or video-link and will only require the doctor to be present at another base within the Trust in exceptional circumstances.

There is no absolute requirement for the applicant or appointee for section 12 (2) status or Part II registration with RQIA however such is desirable.

The WHSCT CAMHS Service does not have a day patient service or other day care services.

7. OTHER INFORMATION PERTINENT TO THE CONSULTANT CHILD AND ADOLESCENT PSYCHIATRIST ROLE

FACILITIES:

The post will be based in the Rivendell CAMHS Service which is situated within the grounds of the Tyrone and Fermanagh Hospital site in Omagh, Co Tyrone. These accommodation arrangements will be kept under review and is subject to change if better arrangements to meet the needs of the population are devised.

The appointee will be provided with use of an office, computer/laptop with internet connection and virtual technology facilities. They will have access to a Trust mobile phone and administrative support on a shared basis within the same building.

The CAMHS service implemented the PARIS computerised data system in 2016 for recording clinical information and is thus now a “paper light” service. All staff are expected to record their clinical notes on the system rather than on paper. Training will be provided in the use of this system for the appointee.

The role does not currently require access to any on call facilities.

INDUCTION PROCESS:

The appointee will have access to the CAMHS Team based induction and wider Trust induction and will be given time to complete mandatory WHSCT training in line with their contractual arrangements.

SUPERVISION:

As already discussed above, CAMHS Specialty Doctors receive regular and predictable supervision from their locality Consultant Child and Adolescent

Psychiatrist. This will potentially be a key role of this appointee and they may be expected to provide clinical supervision in respect of one of our permanently appointed Specialty Doctors. The frequency of such supervision meetings will be determined between the appointee and their supervisee but will likely commence with weekly sessions. This will enable close support and supervision around clinical case management and ensure appropriate pastoral input given that we are a busy mental health service and the nature of the work is often complex and emotive.

Such Clinical Supervisory input would also allow for ongoing consideration of demand and capacity aspects and in ensuring that the Specialty Doctor is carrying an appropriate clinical caseload. As noted above the caseload carried will reflect individual case complexity and the level of psychiatrist input and will give due consideration to their individual job plan arrangements. A typical caseload would be approximately 30 however this is impacted by a number of fluid factors.

The appointee will also have access to support as required from the other members of the CAMHS Psychiatry cohort and in particular Consultant Child and Adolescent Psychiatry colleagues however there is an expectation that the appointee will be trained and equipped to work safely and autonomously and without clinical supervision.

It is also expected that the team of Psychiatrists will be able to provide peer support on a clinical basis and allow for the development of specialist skills that will complement each other and reflect clinical need.

Development of special areas of interest will be considered in accordance with service requirements. Such will be dictated by the job plan and agreed in conjunction with the Child and Adolescent Psychiatry Clinical Lead.

ANNUAL APPRAISAL:

As outlined above the appraisal process is very much valued and promoted by the Western Trust and annual appraisals contribute to the process of revalidation with the GMC.

All doctors are expected to be appraised annually by a Trust appointed Appraiser, preferably from within their speciality and this will be supported through the role of the CAMHS Clinical Lead Dr Iris Wylie.

The appointee will be allocated predictable time within their weekly job plan to work on their appraisal and revalidation documentation. They will also be provided with WHSCT based Appraisal training and where appropriate Appraiser training.

Patient and Colleague feedback as required for Revalidation will be supported and facilitated through WHSCT in conjunction with Beeches Management Centre on a revalidation cycle basis.

OPPORTUNITIES WITHIN/UNIQUE TO THE POST:

The appointee will have the opportunity to work in a well-established Multi-Disciplinary CAMHS Team and to work with experienced Child and Adolescent Psychiatry colleagues who, as already highlighted, are very dedicated to Quality Improvement and Post Graduate Medical Education. The appointee will have many opportunities for professional development.

From a clinical perspective the CAMHS team deal with a wide range of complex emotional, behavioural and mental health presentations and at all times have a significant number of high acuity patients under our care. The appointee will therefore have the opportunity to gain significant experience and expertise in this regard.

We also engage with a range of key stakeholders and so the appointee will have the opportunity to develop their inter-professional communication and wider professional skills.

8. COMMITMENT TO CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

The psychiatrist is encouraged to work within an Annual Personal Development Plan agreed with his / her CPD peer group under the guidelines of the Royal College of Psychiatrists and in liaison with his / her appraiser. The Western Trust will, as part of an annually reviewed and agreed job plan and appraisal, ensure that time off and funding are made available for CPD.

The opportunity for accessing ongoing training and education including CPD Peer Groups, regional study days, internal CPD, Journal Clubs and Royal College of Psychiatrists meetings will be provided in accordance with the Trust Study Leave Policy. The clear expectation will be that the appointee will engage proactively with CPD sufficient to ensure that they maintain themselves IN GOOD STANDING with The Royal College of Psychiatrists in respect of CPD.

A Western Trust CAMHS CPD peer group, with a general membership of 6-8 Child and Adolescent Psychiatrists, meets regularly. The appointee may join this group or access a list of other Northern Ireland CPD groups from the Royal College of Psychiatrists Northern Ireland office.

The appointee is expected to maintain a good working knowledge of the Mental Health Order (NI) 1986 and other legal frameworks applicable to children and young people, as well as keeping abreast of any future developments.

As outlined appropriate appraisal structures are in place for all non-training grade WHSCT doctors and there is access to discretionary and optional points as appropriate and support to meet pay thresholds.

The appointee will have access to a Clinical Lead and mentorship to support their professional and personal development. They will also have access to sufficient breadth and depth of clinical work and relevant professional activities to enable them to achieve and maintain relevant competencies and develop as clinicians.

There may be opportunities for the appointee to get involved with the management aspects of the service, again in the interests of their professional development. They may also be encouraged to attend appropriate Medical Staff Committee forums such as the WSHCT Psychiatry Division and afforded time to attend such meetings. They will also be encouraged to attend Women and Children's Directorate meetings where appropriate.

The appointee will be given time off to attend Trade union duties in the same way as other colleagues.

9. TEACHING AND TRAINING OPPORTUNITIES

The appointee will have access to library facilities in the nearby Tyrone and Fermanagh Hospital and at South West Acute Hospital in Enniskillen. They will also be able to access a repertoire of texts within the Rivendell base and neighbouring Tyrone and Fermanagh Psychiatric Unit medical library facilities (in Cedar Villa).

There are many opportunities for teaching and training when working in WHSCT CAMHS department including attendance at in-house CAMHS teaching and training programmes and through attendance at the weekly Adult Mental Health journal club in Tyrone and Fermanagh Unit. The appointee will also be supported in attending the CAMHS based CBT supervision sessions and relevant regional learning forums including the Regional Psychopharmacology Specialist Interest Group and in attending appropriate quality assured CPD events both locally and nationally in accordance with their identified training and development needs and trust study leave policy and budgetary allocation.

The MedEdWest department also host a weekly teaching programme for all medical staff which supports learning around a range of clinical and professional aspects. The appointee will have full access to the weekly programme for such

sessions and will be encouraged to attend those sessions which appear appropriate to their role and professional development.

The appointee will have regular opportunities to undertake teaching sessions with their immediate CAMHS Multi-Disciplinary Team colleagues, their CAMHS medical colleagues and wider medical/Psychiatry colleagues. They may also have opportunities to teach on the regional MRCPSYCH programme. They will also have opportunities to engage with medical students and trainees whenever they are on placement within the department.

The appointee will be actively encouraged to seek feedback on any educative sessions they undertake to assist with developing their teaching skills. They will also be encouraged to engage with medical teaching skills training through appropriate avenues eg NIMDTA (Northern Ireland Medical and Dental Training Agency) and WHSCT MedEdWest Department.

10. QUALITY IMPROVEMENT

The WHSCT CAMHS Psychiatry Team are hugely focussed on Quality Improvement processes and initiatives. We have all prioritised additional QI related learning and training and are delighted that Dr Claire Elliott, Consultant Child and Adolescent Psychiatrist has completed formal Safety Quality West (SQW) Training in recent years and that she is currently a mentor on that programme. Dr Elliott has also participated in the Lead level Scottish Quality Improvement Leaders Programme and the invaluable enthusiasm and expertise she has developed and brought back to our Psychiatry team and the wider CAMHS service is second to none. Her training in QI methodology and theory and wide experience in undertaking and mentoring QI projects leaves her well placed to guide on, oversee and where appropriate supervise any Quality Improvement projects undertaken by the psychiatry team and wider CAMHS service and we really value having access to her wealth of knowledge and expertise in this regard.

Given this clear commitment to QI the appointee will be actively encouraged and supported in participating in QI related learning and in becoming involved with appropriately supervised QI projects. This can mean for instance the appointee being supported in undertaking clinical audit projects, service evaluation projects or in time being able to participate in specific training and group project completion for instance through the Safety Quality West (SQW) Department.

The Western Trust is also committed to research and audit and have a specific Audit department which can assist trust appointed staff with undertaking appropriate projects. The CAMHS Psychiatry staff also maintain close links with the WHSCT Mental Health Pharmacists who keep us informed of any appropriate regional and national audits pertaining to medications which are relevant to our department.

The Trust's Research and Development Department is part of the Medical Directorate. They are based in the Clinical Translational Research & Innovation Centre (C-TRIC), which is located on the Altnagelvin Hospital site. Their goal is to support and promote high quality clinical research for the health benefits of our population and to play their part in the delivery of research studies, and to align with the regional research and development (R&D) strategy for the Health and Social Care (HSC) sector.

The role of the department is to support and facilitate researchers to undertake high quality research and to provide research governance to ensure the interests of our participants, researchers and staff adhere to the **UK Policy Framework for Health and Social Care Research.**

Research & Development Department
C-TRIC
Altnagelvin Hospital
Glenshane Road
Londonderry BT47 6SB
028 7161 1362
Email: research.office@westerntrust.hscni.net

Lead Contact: Catriona Lavery, Research Nurse Manager
Catriona.Lavery@westerntrust.hscni.net

11. SAMPLE JOB PLAN

The appointee's Job Plan will include and clearly identify protected time for CPD, appraisal and revalidation requirements and also for Quality Improvement/Audit and administrative aspects of their role. The Job Plan will also set out any management responsibilities where appropriate.

The following is a sample job plan for a 0.5WTE contract which highlights **regular weekly** commitments. It does not include activities that occur on an ad hoc basis as these are included in Programmed Activities.

It is indicative only and may be subject to change following discussion with your clinical manager to deliver against service delivery. It is important to appreciate that your job plan on appointment will include details of the expected number of clinical sessions to be delivered, based on a minimum of 42 working weeks per year. Your job plan will also incorporate objectives agreed at your job plan review meeting including agreed service objectives.

	Time	Activity	Hours	
			DCC	SPA
MONDAY	NOT WORKING			
TUESDAY	09:00- 10:00 10:00-17:00	SPA DCC	7	1
WEDNESDAY	NOT WORKING			
THURSDAY	09:00 – 13:00	SPA		4
FRIDAY	09:00- 10.00 10:00 – 17:00	SPA DCC	7	1
SATURDAY			0	0
SUNDAY			0	0
Total			14	6
			3.5 PA 1.5 SPA	
ON-CALL DETAILS				
			N/A	
Unpredictable Emergency On-Call Work			N/A	

Agreed On-call Rota Frequency				N/A
On-call supplement	Frequency	Category A	Category B	N/A
	High Frequency 1:1 to 1:4	8%	3%	
	Medium Frequency 1 in 5 to 1 in 8	5%	2%	
	Low Frequency 1 in 9 or less frequent	3%	1%	

Balance between Direct Clinical Care and Other Programmed Activities

The post holder will have a five programmed activity commitment. The post-holder will have 3.5 programmed activities (14 hours) to direct patient care (DCC). The Trust expects that all consultants undertake a minimum of 1.5 SPA's (6 hours) in their job plan every week.

Flexible working arrangements may be negotiated.

Programmed Activities for additional HPSS responsibilities and external duties will also be allocated for special responsibilities that have been formally approved and/or appointed by the Trust.

JOB PLAN REVIEW

The appointee's Job Plan should be reviewed annually, however can be reviewed earlier at the request of either the appointee or their Clinical Lead.

If it is not possible to agree a Job Plan, either initially or at an annual review, there are agreed procedures for facilitation and appeal with the final decision being binding on both the doctor and the WHSCT.

12. MAIN CONDITIONS OF SERVICE

REMUNERATION

This post will be subject to the Consultant Terms and Conditions of Service (Northern Ireland).

REGISTRATION AND DEFENCE

Registration with the GMC must be maintained. Health and Social Services Employers have assumed responsibility for claims of Medical/Dental negligence against Practitioners occurring in the course of their health service employment. Practitioners are advised to maintain their defense body membership in order to ensure that they are covered for any work, which does not fall within the scope of the indemnity scheme.

PENSION

You will now be automatically enrolled into the Pension Scheme as of your start date.

ANNUAL LEAVE

Annual Leave: 6 weeks plus 2 days leave per annum, arranged with Consultant colleagues and with the agreement of Clinical Lead.

STUDY LEAVE ENTITLEMENT

Study leave is leave that allows time, inside or outside of the workplace, for formal learning that meets the requirements of the curriculum and personalised training objectives. This includes but is not restricted to participation in:

- study (linked to a course or programme)
- research
- teaching
- taking examinations
- attending conferences for educational benefit
- rostered training events

Attendance at statutory and mandatory training (including any local departmental training) is not counted as study leave. This means you do not have to use your study leave to attend obligatory training.

The appointee is entitled to 10 days of study leave per annum. If you are on a contract of employment of less than 12 months' duration you are entitled to study leave on a pro rata basis.

The recommended standard is leave with pay and expenses or time off in lieu with expenses within a maximum of thirty days (including off-duty days falling within the period of leave) in any period of three years for professional purposes within the United Kingdom.

TEACHING

The successful candidate will be expected to be involved in the teaching of undergraduate medical students and the training of junior medical staff.

REVALIDATION

Commitment to the revalidation process ensuring that medical staff are keeping up to date and are fit to practice as per the standards defined by the GMC in Good Medical Practice.

MENTORING

All newly appointed Consultants will be issued with an individualised Induction Programme and Trust Induction as it is mandatory for all aspects of the induction programme to be undertaken.

Arrangements are also in place to seek advice from senior management and specialist staff within the specialty team.

HOME LOCATION

A Consultant is required to reside within a reasonable distance of their principal place of work, to be agreed with the employing organization and must be contactable by telephone.

PRIVATE PRACTICE

Schedule 6 of the Consultant Terms and Conditions of Service (Northern Ireland) 2004 will apply.

MEDICAL

Appointment will be subject to a successful pre-employment health assessment. The candidate shall be required to produce a Certificate of Medical Fitness for Exposure Prone Employment.

CONSULTANT INTERVIEWS

It is recognised that applicants may wish to meet with a senior Trust representative to discuss the Job Description and/or the nature of the post. Please contact Medical HR Dept at Tyrone and Fermanagh Hospital, Omagh, County Tyrone, BT79 0NS, Telephone: (028)-82-835182 who will make the necessary arrangements.

Canvassing, either directly or indirectly, will be an absolute disqualification.

We will review this Job Description and it may include any other duties and responsibilities we determine in consultation with the jobholder. We do not intend it to be rigid and inflexible but rather to provide guidelines within which the jobholder works. Changes in relation to the duties and responsibilities will only take place following consultant and agreement with the post-holder (which should not be unreasonably withheld).

13. OTHER IMPORTANT INFORMATION

Leave and cover arrangements:

As a CAMHS Psychiatry Team we work together to plan for and co-ordinate leave requests in advance between ourselves. We try to ensure that there is always at least one Consultant Child and Adolescent Psychiatrist available across the Trust and one SAS doctor available across the trust on any given day. Most often we work on a more substantial Psychiatry staff compliment than that and the aforementioned minimum really only applies at key times of the year when there is a high demand for leave.

Given however that the Psychiatry team is small in number we do acknowledge that on occasion, when for instance a member of the medical staff team is off on annual leave/study leave/sick leave, there is an expectation that those working will respond to any Psychiatry related queries that cannot wait until the return of the specific member of the Psychiatry team. Such queries are however co-ordinated through the CAMHS Team Managers and Consultant Psychiatry staff and in the main do not impact hugely on other pre-planned activities of our psychiatrists.

Professional Leave:

Professional leave should be used for any work outside of the requirements of the curriculum and/or the employer/host organisation for professional bodies such as Royal Colleges, Faculties or the GMC/GDC.

On-call:

There is presently no daytime on call system in place for WHSCT psychiatry staff and each psychiatrist works to a predictable job plan which involves only site/sector specific commitments.

The Service envisages moving to out of hours in the future.

Out of Hours cover:

As noted above there is presently no out of hours on call commitment for Consultant Child and Adolescent Psychiatrists in WHSCT however it is hoped that this will be established in the future in line with what is required for our service users and in keeping with regional service provision arrangements.

Should this be the case any required changes to work patterns will be appropriately negotiated and determined through the job planning process. Should such OOH input be required we would envisage that such would not require a resident on call status and rather that matters would be dealt with over the phone or in a face to face assessment fashion in very exceptional circumstances. Remuneration would also be considered for any such adjustments to working arrangements.

Whilst our work is largely undertaken at present on a 9am - 5pm basis there are occasions whenever clinical work will spill over by its nature and necessity into the OOH period. Should this ever be the case the additional time worked will be offered back to the appointee on a time off in lieu basis as is the case with all other members of the CAMHS Multi-Disciplinary Team.

Relationships with other Professionals / Agencies:

The appointee will liaise appropriately with other professionals in Health, Social Services and Education and where necessary with local voluntary agencies and other appropriate agencies relevant to this post. Any such interfacing will be expected to comply with the professional standards laid down by GMC, RCPSYCH and WHSCT.

Access to pastoral support and Occupational Health provision:

The WHSCT and the CAMHS Service place a high value on its workforce and there are solid pastoral care arrangements in place for all staff.

The appointee can expect to be well supported within Psychiatry team structures and, in particular, receive pastoral input from their Clinical Lead on a sensitive and confidential basis.

Please see the 'Wellbeing' section below for further information relating to this aspect.

14. WELLBEING

WHSCT has effective local Occupational Health support in place for all of its employees and the appointee will have access to the Occupational Health Department and all that it has to offer on a confidential and timely basis should such input ever be required. They are in a position to self-refer to this service or be referred by their Line Manager (Clinical Lead). The appointee will also have full access to the WHSCT Doctor's Hub which advise on a range of matters pertinent

to its medical staff, including those relating to health and wellbeing. Information pertaining to Occupational Health and Health Assured services will be disseminated at the time of induction and regularly whilst in post so that the appointee has timely access to the details if help seeking is necessary.

WHSCT also takes its commitment to its staff in the event of any serious incident very seriously and understands well that supporting the wellbeing of the appointee after any serious incident that involves patients in their care (eg homicide/suicide) is paramount. In such a circumstance the appointee will be able to access support from a dedicated senior clinician who will provide support and advice as needed after the incident. Details of the senior clinician able to offer this support will be provided via the Medical Directorate at the time of the initial induction.

If there are changes to the pre-agreed workload (eg unexpected cover that sits outside the normally expected cross-cover arrangements) then a timely meeting with the Clinical Lead and Line Manager before such cover starts will enable discussion of the feasibility of the change within the constraints of needing to manage a safe workload. Additional support will be sourced if required and a timely job plan adjustment will be arranged if a new working arrangement is to proceed.

The WHSCT has several initiatives in place to promote and support the wellbeing of its workforce. The appointee will be encouraged to avail of such supports. Examples include lease vehicle scheme, cycle scheme, flexible working, flexible retirement, stress management, coaching/,mentoring, peer group support, work-life balance, confidential Psychological Service and Balint Group attendance is promoted for doctors in training, Consultants and SAS doctors working in Mental Health Services.

15. GENERAL INFORMATION

The appointee will:

- I. Be a member of the Psychiatric Division for the Western Health and Social Care Trust.
- II. Work with local managers and professional colleagues in the efficient delivery of services.
- III. Comply with Trust and Board Health and Safety at Work policies.