



# **NHS HIGHLAND JOB PACK**

## **CONSULTANT PSYCHIATRIST IN ADDICTIONS**

**Argyll and Bute Health and  
Social Care Partnership**

**Job Reference: 155313**

**Closing Date: Midnight Wednesday 2 August 2023**



**APPOINTMENT OF CONSULTANT PSYCHIATRIST IN ADDICTIONS  
ARGYLL AND BUTE**

**INFORMATION PACK**

<b>Section 1</b>	<b>Welcome</b>
<b>Section 2</b>	<b>Advert</b>
<b>Section 3</b>	<b>Job Information</b>
<b>Section 4</b>	<b>Job Plan</b>
<b>Section 5</b>	<b>Person Specification</b>
<b>Section 6</b>	<b>Terms and Conditions</b>

# Section 1 – Welcome

## Introduction

Applications are invited to join our Consultant team on the beautiful West Coast of Scotland. The post allows living and working in an area of outstanding natural beauty, the gateway to the Western Isles, a mecca for outdoor pursuits of all kinds, with a thriving music and arts scene, only 2 hours from Glasgow Airport. If this sounds refreshing, then we are looking for you to join the team here in Argyll and Bute.

This information package contains details relating to the local area, this post and the Terms and Conditions of Service.

NHS Highland is committed to becoming a learning organisation, recognising that staff require access to opportunities to learn, maintain and develop skills and knowledge, and we recognise the importance of valuing and supporting our staff throughout their time here.

We offer:

- Policies to help balance commitments at work and home and flexible family friendly working arrangements
- Excellent training and development opportunities.
- On-site library services at the Centre for Health Sciences
- Access to NHS staff benefits/staff discounts
- Cycle to Work Scheme
- Excellent student support
- Access to NHS Pension scheme

NHS Scotland is committed to encouraging equality and diversity among our workforce and eliminating unlawful discrimination. The aim is for our workforce to be truly representative and for each employee to feel respected and able to give their best. To this end, NHS Scotland welcomes applications from all sections of society.

## Recruitment Process

Applicants are expected to make contact with the department before applying and we would strongly encourage those that are shortlisted to ensure they have spoken to the informal contacts and other relevant senior colleagues. You can ask for a Teams meeting to be set up through the department contact.

**Department Contact:** Paul Morrison, Clinical Lead – [paul.morrison3@nhs.scot](mailto:paul.morrison3@nhs.scot)

## How to Apply

- Applicants should complete an Application Form on the NHS Scotland National Recruitment portal. <https://apply.jobs.scot.nhs.uk/>. Please note we do not accept CVs.
- All candidates and employees are afforded equal opportunities in the recruitment and selection process and in employment irrespective of their age, disability, gender reassignment, marriage or civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation.
- Your personal information will not be sent with the application for shortlisting. The application form will be identified by the candidate number only to ensure that no applicant will be unfairly discriminated against.
- NHS Scotland is exempt from the 1974 Rehabilitation of Offenders Act (Exclusions & Exceptions) (Scotland) Order 2003. As part of any offer of employment in regulated work candidates will be subject to Protection of Vulnerable Groups Scheme membership.

Job reference: 155313

Closing date: Midnight Wednesday 2 August 2023

For further information on NHS Highland, please visit our website on [www.nhshighland.scot.nhs.uk](http://www.nhshighland.scot.nhs.uk)

***PLEASE NOTE - You should apply for this post by completing the application process on Job Train. We suggest you use Internet Browser "Google Chrome" or "Microsoft Edge"  
DO NOT upload a CV as this will not be used for short listing purposes.  
Once you have submitted your application form you will be unable to make any amendments.  
For help to complete an application on Job Train please click [here](#).***

Please contact [nhsh.medicalstaffing@nhs.scot](mailto:nhsh.medicalstaffing@nhs.scot) for any queries regarding submitting your application to the NHS Scotland National Recruitment website.

## Section 2 – Advert

**NHS HIGHLAND**  
**Argyll and Bute**  
**Consultant Psychiatrist in Addictions**  
**Hours 0.8wte - 8PAs/32 hours per week**  
**1:8 on call supplement**  
**£91,474 - £121,548 per annum pro rata**

This is a replacement post within the Argyll and Bute HSCP due to retirement. The post is devoted to the further development of services for individuals experiencing problematic drug and/or alcohol use and offers an opportunity to work with a small group of committed clinicians who deliver an excellent standard of care.

The Argyll and Bute Drug and Alcohol Recovery Service has been an integrated health and social care service since its inception in 2008. There are 13 nurses, 2 social workers and 2 support workers in small teams throughout the area who work in collaboration with local GP services to provide a high standard of care. The post holder would be expected to provide a clinical leadership role within this and provide specialist advice and support to the GPs who are providing opioid replacement therapy within a shared care locally enhanced service.

In addition to this the post holder would be expected to provide supervision to non medical prescribers within the team.

There will be an opportunity to further develop the service to achieve the aims of the Scottish Government Strategy Rights, Respect and Recovery (2018).

The post is for 8 programmed activities (sessions) per week and the post holder will be welcomed into a friendly and forward thinking team of consultants where peer support is valued and protected. Addictions clinics will be in Helensburgh, Dunoon, Rothesay, Oban, Campbeltown and Lochgilphead. Participation in teaching will be possible. Junior support provided both for inpatients and liaison.

Applicants must be on the General Medical Council Specialist Register with a Licence to Practice or within 6 months of obtaining CCT at time of interview.

For further information relating to this post please contact Dr Paul Morrison, Clinical Lead by email [paul.morrison3@nhs.scot](mailto:paul.morrison3@nhs.scot)

For further information on NHS Highland, please visit our website on [www.nhshighland.scot.nhs.uk](http://www.nhshighland.scot.nhs.uk)

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***PLEASE NOTE - You should apply for this post by completing the application process on Job Train. We suggest you use Internet Browser "Google Chrome" or "Microsoft Edge"  
DO NOT upload a CV as this will not be used for short listing purposes.  
Once you have submitted your application form you will be unable to make any amendments.***

## Section 3 – Job Information

### CONSULTANT IN ADDICTIONS ARGYLL AND BUTE HEALTH & SOCIAL CARE PARTNERSHIP

<b>JOB TITLE</b>	Consultant Psychiatrist in Addictions		
<b>DEPARTMENT</b>	Psychiatry		
<b>GRADE</b>	Consultant		
<b>BASE</b>	Argyll and Bute Hospital		
<b>HOURS OF WORK</b>	0.8 W.T.E.		
<b>REPORTS TO</b>	Clinical Director Dr. Paul Morrison		
<b>PREPARED BY</b>	Leslie Mackay	<b>DATE:</b>	27/06/2023

#### 1. INTRODUCTION

The post holder will be based within Argyll and Bute Mental Health services, and will provide the medical lead for Drug and Alcohol Recovery services throughout Argyll and Bute.

#### 2. THE AREA, ITS POPULATION AND SERVICES

Argyll and Bute is predominantly rural and spans a large geographic area with population centres in Helensburgh, Oban, Lochgilphead, Campbeltown, Dunoon and Rothesay.

Argyll and Bute offers an excellent quality of life with particularly good facilities for leisure and recreation but still within easy commuting distance of the central belt and Glasgow airport. There is a frequent ferry service connecting Cowal and Bute with Inverclyde and access to the M8 motorway. Good housing can be bought and schooling (primary and secondary level) is excellent. The Board does not operate a crèche but there are a number of good nurseries in the area.

There are excellent facilities for activities such as golf, hill walking, fishing, sailing and water sports. There are clubs for sports such as rugby, football (indoor and outdoor), athletics, netball, rowing and shinty. The local area boasts some of the finest scenery in the country.

#### 3. DRUG AND ALCOHOL RECOVERY SERVICES

Drug and alcohol recovery services in Argyll and Bute are provided by the Argyll and Bute Drug and Alcohol Recovery Service which is led by the Clinical Services Manager for Community Mental Health and Addictions and overseen by the Senior Manager for Mental Health Services. The Argyll and Bute Drug and Alcohol Recovery Service comprises four locality based services: Helensburgh and Lomond, Cowal and Bute, Oban Lorne and the Isles and Mid Argyll, Kintyre and Islay.

## The Argyll and Bute Drug and Alcohol Recovery Service

Service	Staff	Location
Clinical Services Manager For Community Mental health and Addictions	1.0 w.t.e. Band 8A Leslie Mackay	Comraich Centre, Lochgilphead
Team Leader	1.0 w.t.e Band 7 Shirley McArthur	Victoria Annex, Rothesay
Admin support/medical secretary	0.8 w.t.e. Linda Gibb	Comraich Centre, Lochgilphead
Substance Misuse Liaison Service	1.0 w.t.e. Band 6 Community Addiction Nurse Vacant	Cowal Community Hospital, Dunoon
Helensburgh and Lomond	1.0 w.t.e Band 6 Community Addiction Nurse Robert McNair Nel King 0.5 w.t.e Support Worker Heather Angus	Jeanie Deans Unit, Helensburgh
Cowal and Bute	2.0 w.t.e Band 6 Community Addiction Nurses Neil Munro Lynsey Feeney 1.0 w.t.e Band 5 Community Addiction Nurse Alison McIntyre 1.0 w.t.e Addiction Social Worker Maria Munro	Cowal Community Hospital, Dunoon Victoria Annex, Rothesay

Oban, Lorn and the Islands	1.0 w.t.e Band 6 Community Addiction Nurses  Bev Ison  Vacant  0.5 w.t.e Band 7 Harm Reduction Nurse  Kirsteen Menzies  1.0 w.t.e Addiction Social Worker (Shared with Mid Argyll and Kintyre)  Iona Livingstone  0.5 w.t.e BBV Support Worker  Ewan Trantor	Market Street Centre, Oban
Mid Argyll and Kintyre	w.t.e. Band 6 Community Addiction Nurses  Karen Campbell  Alison Litster  w.t.e. Band 7 Advanced Nurse Practitioner  Hannah Parker  0.5 w.t.e. Band 5 Community Addiction Nurse (Islay)  Jayne Geddes	Comraich Centre, Lochgilphead  Campbeltown Hospital, Campbeltown  Bowmore Hospital, Islay

The service also works alongside housing partners to provide a service to those who are homeless or at risk of homelessness with co-occurring mental health or substance use issues. This is using a Housing First model to wrap services around the person. This is currently funded as 1.0 WTE band 6 nurse covering the whole of Argyll and Bute. This post is currently vacant.

The Substance Misuse Liaison Service is currently funded via Scottish Government additional allocation of funding through the Alcohol and Drug Partnership. In addition to this Public Health provide funding for blood borne virus and sexual health which is administered via the Harm Reduction Services.

Funding via Scottish Government to implement MAT Standards has seen the service develop a Response Service to work alongside the core service. The main focus on this has been to develop standard operating procedures for Standards 1 to 5, initially in the Cowal and Bute area with plans to roll out across all localities. The Response Service consists of 1.0 WTE band 7 Team Leader, 2.0

WTE band 6 nurses, 1.0 WTE band 8a Specialist Pharmacist and supplementary staffing from our third sector partners from We Are With You and Lomond and Argyll Advocacy Service.

A Drug Treatment and Testing Order (DTTO) Service is operated by the Criminal Justice Partnership which covers Argyll and Bute. This is based in Dumbarton with the Addiction Nurses and Social Workers in the DTTO team providing outreach to cover Argyll and Bute.

### **Non Statutory Addiction Services**

Argyll and Bute Council also commission non-statutory services which are integral to the service provision to alcohol and/or drug users. The agency currently providing this service is We Are With You (previously known as Addaction). Their main base is in Dunoon however they have premises and workers throughout Argyll and Bute.

### **Service Development**

The service as it is currently has been operational since 2008 however now requires some redesign to reflect the current Scottish Government Rights, Respect and Recovery Strategy (2018), the updated clinical guidelines on treatment of drug misuse and dependence (2017), MAT Standards (2021) and Alcohol Framework (2018).

The updated guidelines reflect the changing landscape and the evidence and demand for drug and alcohol recovery services within Scotland. This includes an aging cohort of individuals dependent on heroin and therefore the change in needs presented by these individuals, legislative changes in prescribing practice allowing nurses, pharmacists and other allied health professionals to prescribe independently of medical staff, new risks posed by the use of new psychoactive substances, the differing patterns of use and the diverse populations using these substances.

Some of this has already begun with the team having four independent non medical prescribers, two BABCP accredited cognitive behaviour therapists and one advanced nurse practitioner with two further advanced nurse practitioners in training.

Services across Argyll and Bute differ in each locality dependent on primary care provision in each area. The initiation of the Substance Misuse Liaison Service in 2019 has begun the work to embed pathways within primary care, A&E departments, in-patient and maternity services. The core Drug and Alcohol Recovery Service works with local GPs to provide safe alcohol detox, either at home or as in-patient dependent on the individual. The service provides disulfiram initiation and monitoring as well as a range of psychosocial interventions tailored to the individual recovery needs.

In response to the introduction of Medication Assisted Treatment Standards, Argyll and Bute are piloting a new rapid response and assertive outreach service initially in Cowal with plans to roll out to the whole of Argyll and Bute. The successful candidate would have a pivotal role within this development.

## **4. ADULT MENTAL HEALTH SERVICES**

Delivery of the adult general psychiatric service within the Argyll and Bute HSCP is provided from two bases, Lochgilphead and Lomond. Five of the six consultants based at the Argyll and Bute Hospital, Lochgilphead, are responsible for a catchment sector, including elderly, and each has either dual accreditation or special interest responsibility. Both services currently have full approval for training in psychiatry from the Royal College of Psychiatrists and the Royal College of General Practitioners and provide placements for students from Dundee University.

## CURRENT MEDICAL STAFFING

Name	General Sector Responsibility	Special Interest
Dr Roger Blake	Oban	Liaison and Information Technology
Dr Tammy Burmeister	Mid-Argyll	ECT
Dr Vineet Raj	Kintyre and Islay	
Dr Paul Morrison	Cowal and Bute	Management, Research and Clinical Tutor
	Older Age Psychiatry	
This post	Addiction Services	
Dr Hannah Welstead	Psychological Therapies	Psychotherapy
	Child and Adolescent Psychiatry	
Dr Felix Kuaye (Locum) *	Helensburgh	

\*the above locum posts have been held on a long term basis.

## 5. DUTIES OF THE POST

### Clinical Responsibilities

To provide and develop specialist addiction services throughout Argyll and Bute. He or she will have prime medical responsibility for the Argyll and Bute Drug and Alcohol Recovery Service and will actively participate in shaping and developing both drug and alcohol services in Argyll. The treatment setting will clearly depend on the locality, but will be in a variety of outpatient facilities. There is an expectation that the post holder would offer specialist support to their colleagues in in-patient setting. The post holder will lead the continued development of opioid replacement therapy across Argyll and Bute. The post holder will be expected to work closely with colleagues in the Community Drug and Alcohol Recovery Team, in primary care, local authorities and non-statutory services and will help take forward the child welfare and child protection agenda within the addictions service. The post holder will work with the DTTO team to facilitate the entry of patients who are exiting the DTTO service into the appropriate mainstream services in Argyll and Bute. The post holder will be a member of the Argyll and Bute ADP and support its development.

### Contractual Sessional Commitments

Five clinical programmed activities (CPSs) and two Supporting professional activities (SPA's). Model Job plan enclosed.

### On-Call

The post holder will be required to participate in the consultant on-call rota for the Argyll and Bute Hospital based service at 1 in 8. Five Senior House Officers provide first on call.

## **Arrangements for Cover during Absences**

It is expected that the Consultant Psychiatrists will normally cover each other during periods of leave or sickness, ensuring adequate cover for the service at all times. Locum cover will be utilised in the event of any prolonged absences in Helensburgh and Lomond.

## **Audit**

The post holder will be expected to take a lead role in the development of a quality assurance audit programme which will include the introduction of routine clinical audit measures.

## **6. TEACHING, TRAINING AND CPD**

Senior medical staff all contribute to the teaching of Dundee Medical Students (out posted for clinical attachments), psychiatric and vocational SHO trainees, and other disciplines when needed. The clinical tutor for the Argyll and Bute Service is currently Dr Morrison. There is an active academic programme based at the Argyll and Bute Hospital, amplified by opportunities to share learning events with clinical staff throughout the HSCP.

## **Clinical Governance**

Compliance with the requirements of Clinical Governance is an important aspect of clinical life, and this is led by the HSCP Clinical Director. Consultants are expected to comply fully with the requirements of the Royal College of Psychiatrists with regard to Continuing Professional Development, and to participate fully in the process of Consultant Appraisal.

The Clinical Governance Committee meets on a bi-monthly basis and reviews appropriate matters such as audit outcomes, ICP development etc. Clinical governance also features as an agenda item in the monthly consultant meetings and also in the redesign board and project groups.

## **Research**

It is expected that the post holder will undertake research and encourage and supervise research proposals by junior medical staff and other professionals. A mental health research strategy is currently being developed in Highland and we have strong links with Aberdeen University, Stirling University, West of Scotland University and the University of the Highlands and Islands. Research educational meetings occur on a regular basis.

## **Teaching and Training**

Argyll and Bute belongs to the WEST training scheme for specialist training. There are also posts accredited for general practice training. The post holder will be expected to contribute to and develop a teaching programme for those working in the department, including related professionals. There is an active academic programme as well as induction programs for new trainees joining the department.

## **Management**

The post holder will be expected to contribute to various medical and psychiatric committees within the Division and the addictions network. There is an expectation to be involved in the Scottish Addiction Specialists Committee and the opportunity to be involved in the Cross Party Group on Alcohol and Drug Misuse at the Scottish Parliament, Holyrood. In addition to this there is an expectation to take part in the Alcohol and Drug Partnership Drug Related Death Group.

## **Resources Available**

Administrative support at 0.5 WTE is provided, including the usual office facilities. There is a full, staffed medical library at the Vale of Leven District General Hospital and at Argyll & Bute Hospital.

## **7. QUALIFICATIONS AND EXPERIENCE**

The post holder will be expected to be a fully qualified medical practitioner, fully registered with the General Medical Council and a Member of the Royal College of Psychiatrists and hold a certificate of specialist training.

### **ELIGIBILITY SUBSTANTIVE NHS CONSULTANT**

Appointment to a substantive consultant post in the UK National Health Service requires the applicant to be listed on the General Medical Council (GMC) Specialist Register. Doctors with a Certificate of Completion of Training (CCT) or a Certificate of Eligibility for Specialist Registration via the Combine Programme (CESR)(CP) who have completed an approved training programme in the UK and are eligible for entry onto the Specialist Register. Applicants can be short-listed if they are within six months of obtaining a CCT, CESR (CP) and must have written evidence of the confirmed date.

You may be eligible for direct entry onto the Specialist Register if you are a national of an EEA country (or Switzerland) and you have a specialist medical qualification that is acceptable for mutual recognition.

Alternatively, the applicant should possess a Certificate of Eligibility for Specialist Registration (CESR). A CESR enables doctors who have not completed an approved UK training programme to demonstrate their knowledge, skills and experience are equivalent to the relevant CCT curriculum to join the Specialist Register. The CESR application requires you to prepare evidence and it can take six to nine months to process. You should submit your evidence to the GMC who will forward on to the Royal College for consideration. You will be advised that you will hear an outcome within 3 months. You cannot be considered for a substantive appointment during this process, you must be on the specialist register.

Applications from doctors with appropriate specialist training and experience who are not listed on the GMC Specialist Register can be considered for a locum consultant post (up to two years) if no substantive consultant appointment is made. Whilst in locum employment, an application to obtain a CESR and entry onto the Specialist Register can be made.

Further information can be obtained at <https://www.gmc-uk.org/registration-and-licensing/the-medical-register/a-guide-to-the-medical-register/specialist-registration>.

## Section 4 – Job Plan

# NHS Highland Health Board.

This job plan started 01 April 2019.

Job plan is negotiable in discussion with the Clinical Director and the Lead Professional

### Job plan for Dr Addiction Psychiatry, Draft in Psychiatry (A&BH)

## Basic Information

Job plan status	In 'Discussion' stage
Appointment	Part Time
Cycle	Rolling cycle - 2 weeks
Start Week	1
Report date	
Expected number of weeks in attendance	42 weeks
Usual place of work	Argyll & Bute Hospital, Lochgilphead
Alternate employer	None Specified
Contract	New
1 PA of premium time equates to	3 hours
Private practice	No

## Job plan stages

Job plan stages	Comment	Date stage achieved	Who by
In 'Discussion' stage			

## PA Breakdown

	Main Employer PAs	Core PAs	EPA PAs	Total PAs	Core hours	EPA hours	Total hours
Direct Clinical Care (DCC)	7.418	7.418	0.000	7.418	29.36	0:00	29.36
Supporting Professional Activities (SPA)	0.673	0.673	0.000	0.673	2.39	0:00	2.39
Total	8.090	8.090	0.000	8.090	32.15	0:00	32.15

## On-call summary

Rota Name	Location	Weekday Freq	Weekend Freq	Level	Supplement	PAs
On-call Rota	Argyll & Bute Hospital, Lochgilphead	8	8	1	5%	0.245
	Type	Normal	Premium	Cat.	PA	
				Total:	0.245	
	Predictable	0:00	0:00	DCC	0.000	
	Unpredictable	1:00	1:00	DCC	0.245	
The total PAs arising from your on-call work is:		0.245				
Your availability supplement is:		5% (based on the highest supplement from all your rotas)				

## On-call rota details

### On-call Rota (hours entry)

General information	
What is your on-call activity?	On-call Rota
Where does your on-call rota take place in?	Argyll & Bute Hospital, Lochgilphead
What is your on-call classification?	1
Weekday work	

What is the frequency of your weekday on-call work?	1 in 8.00
Do you work your weekday on-call on a specific day?	No fixed day
	<b>Predictable Unpredictable</b>
What are your average hours of emergency work per weekday on-call?	00:00 01:00
How much of this takes place between 20:00 & 08:00? (premium time)	00:00 00:00
How much of your weekday predictable on-call work displaces other activities?	00:00
<b>Weekend work</b> (A weekend is classed as Saturday to Sunday for this rota)	
What is the frequency of your weekend on-call work?	1 in 8.00
	<b>Predictable Unpredictable</b>
What are your average hours of emergency work per weekend on-call?	00:00 01:00
Does your weekend predictable work displace other activities?	No
<b>Other information</b>	
Which objective does this on-call work relate to?	
Comments	

## Sign off

Role: Project Manager	Role: Clinical Director	Role: Unknown
Name: Dr Morrison, Paul (Con)	Name: Mr Watt, Donald	Name: Unknown
Signed:	Signed:	Signed:
Date:	Date:	Date:

## Timetable

### Week 1

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
		Clinic - peripheral 09.00 - 17.00	Clinic - peripheral 09.00 - 17.00	Clinic - peripheral 09.00 - 17.00		

### Week 2

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
		Clinic - peripheral 09.00 - 17.00	Clinic - peripheral 09.00 - 17.00	Clinic - peripheral 09.00 - 17.00		

## Activities

Extra Programmed Activities

Type	Day	Time	Weeks	Activity	Employer	Location	Cat.	Num/Yr	PA	Hours
							Total:	Core EPA	6.000 0.000	24:00 0:00
	Wed	09.00 - 17.00	wks 1-2	Clinical - peripheral. Comments: Community clinic - new patients and returns. MDT meeting. Oban, Market St Centre, or Connell or Campbeltown Hospital/Lochgilthead MACH, Tarbert, Muasdale or Carradale	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilthead.	SPA	42	2.000	8:00
	Thu	09:00 - 17:00	wks 1-2	Clinic - peripheral	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilthead.	DCC	42	2.000	8:00
	Fri	09:00 - 17:00	wks 1-2	Clinic - peripheral	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilthead	DCC	42	2.000	8:00
				No specified day						
		15.00		Personal appraisal / revalidation Comments: Standard allowance	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilthead.	SPA	1	0.089	0.21

Type	Day	Time	Weeks	Activity	Employer	Location	Cat.	Num/Yr	PA	Hours
		10.00		Job planning Comments: Standard allowance	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilphead.	SPA	1	0.060	0.14
		1.00		Undergraduate for mal teaching (yr 4-5 med students)	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilphead.	SPA	10	0.060	0.14
		1.00		Postgraduate for mal teaching (FY's CT and ST doctors)	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilphead.	SPA	10	0.060	0.14
		1.00		PDP Group: Comments: Consultant Peer Review Group. Meets second Friday of each month. If able to attend complete flexible SPA work throughout the day and then try to take the following Monday (an SPA day) off otherwise it is one TOIL	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilphead.	SPA	12	0.071	0.17
		1.00		Meetings - consultant Senior medics meeting. Meets last Friday of each month. If able to attend this meeting complete flexible SPA work throughout the day and then try to take the following Monday (an SPA day) off otherwise this is one day TOIL	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilphead.	SPA	12	0.071	0.17
		2.00		Other SPA (please specify) CBT forums on Friday afternoons every 13 weeks. If able to attend this meeting complete flexible SPA work throughout the day and then try to take the following Monday (SPA) off otherwise it is one day TOIL	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilphead.	SPA	4	0.048	0.11
		2.00		Other SPA (please specify) Case based discussion group	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilphead.	SPA	4	0.048	0.11
		4.00		Committee (Please specify) Scottish Addictions Specialist Committee. Meet every 13 weeks in Stirling	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilphead.	SPA	4	0.095	0.23
		4.00		Admin - general	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilphead.	DCC	42	1.000	4.00
		0.30		In-patient review	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilphead.	DCC	42	0.125	0.30
		2.00		Meetings departmental ABAT meeting on Thursday mornings every 6 weeks	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilphead.	SPA	6	0.071	0.17
		1.00		CBT supervision	NHS Highland Health Board.	Argyll & Bute Hospital, Lochgilphead.	DCC	8	0.048	0.11

## **Board Objectives**

### **Care**

To improve the experience of care and caring for people by:

Minimising the time that individuals have to be away from home and their families to receive care.

Supporting more individuals and their families to make choices about their care, particularly when nearing the end of their life.

Preventing people from falling.

### **People**

To attract staff and improve our staff experience working for the NHS Highland by:

Making NHS Highland the employer of choice.

Ensuring staff are proud of their contribution to delivering safe and effective care.

Increasing the number of staff who feel engaged and valued as part of our team.

### **Quality**

To improve access to and co-ordination of services by:

Improving timely access to the right person who can best meet people's needs.

To increase the number of people who can be supported through modern technology.

To provide timely access to clinically appropriate care.

## Section 5 – Person Specification

**Essential Criteria** - these are attributes without which a candidate would not be able to undertake the full remit of the role. Applicants who do not clearly demonstrate in their application that they possess the essential requirements will normally be eliminated at the short listing stage.

**Desirable Criteria** - these are attributes which would be useful for the candidate to hold. When short listing, these criteria will be considered when more than one applicant meets the essential criteria.

Requirement	Essential	Desirable
1. Qualifications	<p>MB, ChB or equivalent.</p> <p>MRCPsych or Equivalent</p> <p>Mental Health (Care and Treatment)(Scotland) 2003 Section 22 Act Approved Medical Practitioner (AMP) status or commitment to undertake this training at earliest opportunity.</p> <p>Completed appropriate Higher specialist training within addiction psychiatry.</p> <p>CCT/on the Specialist Register or within six months of obtaining it at time of interview.</p> <p>Full driving licence</p>	Interest in telepsychiatry
2. GMC/Specialist Registration	Full registration with GMC	
3. Clinical Experience	<p>Knowledge of Mental Health Act. AWI Act and associated duties. Appropriate degree of training, Experience to consultant level</p> <p>Overall clinical knowledge and experience commensurate with Consultant responsibility.</p> <p>Experience of working in drug and alcohol services</p> <p>Proficient in effective community liaison, eg. with GPs</p>	<p>Experience of general psychiatry senior on-call rota</p> <p>Experience of cognitive and capacity assessment</p>

4. Teaching & Training	Registration for CPD with Royal College of Psychiatrists,  Commitment to maintaining and developing skills.	
5. Research & Audit Experience	Research skills and evidence based training.  Understands principles of audit and experience of using audit in practice	
6. Staff Management	Experience of management training at StR level	
7. Team Working & Interpersonal Skills	Commitment to clinical excellence and team working  Ability to be flexible, cope with stressful situations and undertake appropriate responsibility.  Highly developed communication skills.	Good time management  Initiative.  Leadership skills.
8. Publications		

## Section 6 – Terms and Conditions

This appointment is offered on the terms and conditions of service of the Consultant Contract in accordance with the Hospital Medical & Dental Staff (Scotland) and current General Whitley Council.

Further information can be found here: <http://www.msg.scot.nhs.uk/pay/medical>

Job Title	Consultant Psychiatrist in Addictions
Type of Contract	Part time 0.8wte Permanent
Location	Argyll and Bute, Lochgilphead (base may be negotiable)
Salary	£91,474 - £121,548 per annum pro rata  Placing on the salary scale will be on the minimum point unless the successful applicant has previous experience in a NHS Consultant post or previous non-NHS experience equivalent to that gained in an NHS Consultant post.  Your salary will be credited monthly, in arrears, at 1/12th of the annual rate to an account at a bank/building society of your choice on the 27 <sup>th</sup> of each month.
Arrangement of Duties	See separate Job Plan.
Medical Negligence	NHS Highland takes responsibility for expenses and damages arising from medical negligence where they, as the employer, are vicariously liable for the acts and omissions of their medical and dental staff. However, the appointee is strongly advised to maintain separate medical defence or insurance cover for all work which does not fall within the scope of the Board's indemnity scheme, details of which are given in NHS Circular 1989(PCS) 32.
Registration with General Medical Council	Prior to commencement in post, successful candidates must have full registration with the General Medical Council, a licence to practise, and be eligible for inclusion on the GMC Specialist Register.  Those trained in the UK should have evidence of higher Specialist Training leading to a CCT or be within six months of confirmed entry from the date of interview or obtained specialist registration through CESR (CP). Non UK applicants must demonstrate equivalent training.
Disclosure of Criminal Convictions	Appointment to this post will be made subject to satisfactory screening by Disclosure Scotland. This post is considered to require Registration with the Protecting Vulnerable Groups (PVG) Scheme as it involves substantial access to children and / or vulnerable adults. A PVG Scheme Record will contain details of all convictions on record, whether spent or unspent. This means that even minor convictions, no matter when they occurred will be included in the Scheme Record. It may also contain non conviction information held locally by the police, where this is considered relevant to the post.  Following the selection interview only the "successful" candidate will be subject to registration with the PVG Scheme. Offers of appointment will be made subject to satisfactory PVG Scheme screening and medical fitness. Please note that a commencement date will only be issued once this clearance has been received.

Rehabilitation of Offenders Act 1974	The Rehabilitation of Offenders Act 1974 provides for many people who have been convicted of certain criminal offences the opportunity to have no need to refer to these convictions or the circumstances relating to them in the course of their daily lives. Certain convictions can, therefore, be regarded as “spent” after the lapse of a period of years under the terms of the Act. The National Health Service employment for which you are applying is excluded in the provisions of the Act unless otherwise stated in the job description. If the post is excluded you are required not to withhold information about convictions which for other purposes are “spent” under the provisions of the Act. In the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by your employer. Any information given, however, will be completely confidential and will be considered only in relation to the post for which this application form refers.
Medical Fitness	All prospective members of staff are asked to submit a confidential health questionnaire to the Occupational Health Service. On the basis of this, they may be passed fit, or an appointment for further information or screening may be required. All entrants must be certified medically fit and employment is conditional on such certification. All appointees are expected to comply with NHS Highland’s Immunisation Policy. Those posts classified as Exposure Prone Procedures appointments are dependent on satisfactory proof of immunity or freedom from Hep B infection prior to appointment.
Right to Work	NHS Highland has a legal obligation to ensure that it’s employees, both EEA and non EEA nationals are legally entitled to work in the United Kingdom. Before any person can commence employment within NHS Highland they will need to provide documentation to prove that they are eligible to work in the UK. Non EEA nationals will be required to show evidence that either Entry Clearance or Leave to Remain in the UK has been granted for the work which they are applying to do. Where an individual is subject to immigration control under no circumstances will they be allowed to commence until the right to work in the UK has been verified. You will be required provide appropriate documentation prior to any appointment being made.
Annual Leave & Public Holidays	The leave year shall run from date of taking up appointment and in a full year the postholder will be entitled to 33 days annual leave (pro rata per annum) plus eight statutory and public holidays as agreed by NHS Highland (pro rata per annum).
Superannuation	New entrants to NHS Highland who are aged sixteen but under seventy five will be enrolled automatically into membership of the NHS Pension Scheme.
Notice	The postholder will be required to give and is entitled to receive a minimum of three months notice of termination of employment.
Removal Expenses	Assistance with Removal expenses will be given in accordance with the NHS Highland Long Term Relocation Policy. It is compulsory that you discuss any arrangements relating to your relocation with us before arranging anything. Failure to do so may result in limited or no assistance being given.
Private Residence	If your post includes on-call duties, your private residence shall be maintained in contact with the public telephone service and shall be not more than 10 miles or 30 minutes by road from your hospital base, unless the Board gives specific approval to you residing at a greater distance.

Identity Badge Policy	NHS Highland has a policy that all staff will be issued with and required to wear an Identity Badge at all times when on duty. If your badge needs replacing for any reason you are required to contact the Fire/Security Office, Estates Department to arrange for a replacement. All identity badges are the property of NHS Highland and must be returned when you terminate your employment.
Smoke Free Policy	NHS Highland operates a No Smoking Policy of tobacco products or e-cigarettes in any of our properties, vehicles or grounds. When selecting new staff NHS Highland does not discriminate against applicants who smoke but applicants who accept an offer of employment will in doing so agree to observe and familiarise themselves with NHS Highland's Smokefree policy.
Confidentiality	<p>In the course of your duties you may have access to confidential material about patients, members of staff or other health service business. On no account must information relating to patients be divulged to anyone other than authorised persons - for example medical, nursing or other professional staff, as appropriate who are concerned directly with the care, diagnosis and/or treatment of the patient.</p> <p>If you are in any doubt whatsoever as to the authority of a person or body asking for information of this nature you must seek advice from your superior officer. Similarly no information of a personal or confidential nature concerning individual members of staff should be divulged to anyone without the proper authority having first been given. Failure to observe this rule will be regarded by your employers as serious misconduct, which could result in serious disciplinary action being taken against you including dismissal. The unauthorised disclosure of official business under consideration by the Board Management Team or one of its Committees by an employee is also regarded as a breach of confidence and may lead to disciplinary action.</p>
Scottish Workforce Information Standard System (SWISS)	<p>The information that staff provide will be used for employment purposes and where necessary to comply with legal obligations. The purpose of holding this information is for administration i.e. employment and pay amendments, superannuation, workforce management/planning and other personnel matters in relation to employment. Any requests for information out with the above will only be processed with individual consent (e.g. building society mortgage applications etc.)</p> <p>Staff information will be held securely, and will be accessed at a local, regional and national level to meet the requirements outlined above. Managers may also hold information within your department. There will be no unauthorised access.</p>