

Specialist Doctor Old Age Psychiatry

**(Mental Health Team for Older Adults)**

Information and Job Description



**Scott’s View, Melrose**

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| 1. **The Post**
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A Specialist Doctor post in Old Age Psychiatry is available within the South and East Older Adults Mental Health Team in the Scottish Borders. The successful applicant, accountable to the consultant, will provide senior medical input to the South and East of the Scottish Borders, delivering care and promoting a multi-disciplinary/multi-agency approach.

**Job Title** Specialist Doctor in Old Age Psychiatry

**Type of Post** Old Age Psychiatry with responsibility for the community care of South and East patients. The post includes responsibility for the Community Hospital/Care Home Assessment Team

**Full/Part Time Post** FullTime and Part Time available; Total of 10 Programmed Activities

**Salary Range** £88,118 - £100,011 per annum

**Number of P.A.s** The full time contract will be for 10 Programmed Activities; less than full-time working can be available and by mutual agreement EPA for subspecialty/leadership.

**Catchment Area** South and East Borders community

**Base Hospital** The community team base is located at Poynder View, Kelso Community Hospital

**On-Call** Current rota 1:8. An availability supplement is paid, in accordance with the Terms and Conditions of Service.

**Continuing Professional** To actively engage in local and national Continuing Professional

**Development** Development

**Posts Approved** Approved by the NHS Borders Mental Health Medical Staff Committee and

Royal College of Psychiatrists Regional Adviser.

**Principal Duties**

**Community Mental Health Team Clinical**

* In support the provision of Old Age Psychiatry services in the designated catchment area, and with support from the consultant psychiatrist, taking medical responsibility for outpatients and care home patients above the age of 70.
* To undertake psychiatric and risk assessments, and treatment planning in conjunction with the multi-disciplinary team within both community and inpatient services.
* To promote a multi-disciplinary/multi-agency approach and provide specialist support to Primary Care staff and Mental Health Nurses within the catchment area.
* To be an Approved Medical Practitioner in terms of the Mental Health (Care and Treatment) (Scotland) Act 2003 and undertake the required duties in relation to this.

**Other Duties**

* To take a special interest lead, the nature of which is to be agreed between the post holder and Associate Medical Director.
* To participate in the general psychiatric on-call rota
* To participate in cross cover arrangements for other colleagues during periods of annual leave, study leave and short term sick leave.
* To participate in the training and development of junior/middle grade medical staff, medical students and (where relevant) Physician Associates, including supervision.
* To contribute to the post-graduate teaching programme and to participate in CPD for revalidation

**Liaison With Other Agencies**

* To provide expert advice and forge working links with other stakeholder agencies and groups, including out of area services for Borders patients and primary care

**Management**

* To contribute to the continuing strategic development and evolution of mental health services overall and older adult psychiatric services in particular, in line with national and local guidance, including transformational change
* To actively participate in the NHS Borders Clinical Governance programme, including active involvement in clinical audit, Significant Adverse Event Reviews and complaints management

**Education, Training & Research**

* To provide supervision to the GP, Core Trainee and/or non-consultant grade medical staff within the teams. From time to time there may be an additional ST4-6 attached to the teams for whom appropriate supervision will also be required, depending on the incumbent demonstrating Recognition of Trainer status
* To initiate or participate in relevant research, if desired and as appropriate. There are excellent library facilities available at the Education Centre based in the grounds of the nearby Borders General Hospital, access to the NHS eLibrary from your PC/laptop, and a comprehensive patient information system.
* To participate in Continuing Professional Development and annual appraisal, including 360-degree appraisal.
* To participate in the training and development of staff: medical students on attachments, nursing staff and AHPs.
* To participate in appraisal of colleagues if desired and appropriate, subject to relevant training
* To participate in the local post-graduate programme. There is also an opportunity to become involved in the MRCPsych Teaching Course and the General Practice Psychiatry Course for GP Specialty Trainees in Edinburgh with which the Borders has close links.

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| 1. **Population and Local Information**
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 **2.1 Scottish Borders**

1. Size of Area – 1,826 sq miles (6% of the area of Scotland)
2. Population – 115,000 (2% of the Scottish population)
3. Agriculture, textiles and tourism are the major industries throughout the Borders area.

The Borders covers a large and scenically beautiful area of the Southern Uplands of Scotland. Predominantly rural, it is historically a unique part of the country, the home of the Border Reivers, and where annually each town in the Borders maintains its links with the past during the season of Common Ridings. Seven-a-side rugby originated in Melrose, and the Melrose event in particular draws large crowds in April each year. There is also ready access to cycling, fishing, golf, swimming, shooting, horse riding, cricket, football, hiking and many other activities in addition to extensive cultural groups with music and art societies, drama, and small theatres in, Peebles and Selkirk as well as amateur opera. There are cinemas in Hawick and Galashiels and an arts centre in Peebles, which includes a cinema and live theatre.

The local state schools are first rate; many of the medical staff’s children attend Earlston High School which is always near the top of the state school league tables. There are also private schools available in Edinburgh, and a local private school (St Mary’s) in Melrose for children up to age 13 years. There is a purpose-built nursery in the grounds of the BGH for employees’ children.

There is a train service to central Edinburgh running every thirty minutes (journey time 50 minutes approx). Tweedbank Station is a few minutes walk from the Borders General Hospital. There are rail links to the rest of the country at Berwick Upon Tweed, and Carlisle and there is easy access to Edinburgh Airport (approximately 1 hour 15 minutes) and Newcastle Airport (approximately 1 hour 30 minutes).

As part of our policy there is assistance with temporary housing costs and relocation allowances if applicable. House prices in the Borders Region are significantly less than in major cities and also less than many other rural parts of Britain, particularly in the south.

Please see Websites:

 Scottish Borders Tourist Board - www.scot-borders.co.uk

 Southern Reporter - www.borderstoday.co.uk

 NHS Borders - www.nhsborders.org.uk

 Borders Properties - www.rightmove.co.uk

 **2.2 NHS Borders**

Our Values are at the heart of all that we do:

● Care and Compassion

● Quality and Teamwork

● Dignity and Respect

● Openness, honesty and responsibility

Patients are at the centre of everything we do in our daily working lives at NHS Borders ensuring they are safe and cared for efficiently and effectively by suitably experienced and qualified staff driving quality at the heart of patient care. We are a dynamic and forward thinking team with a wealth of clinical and leadership experience. We aim for an open and honest culture and believe in nurturing future stars in NHS.

Within NHS Borders, decision-making is embedded with an integrated Clinical Executive, part of a natural evolution towards more integrated care, which has seen health and social services within the Borders develop nationally-recognised joint initiatives. The NHS Borders Board covers an area co-terminous with the local authority (Scottish Borders Council) and has developed close and effective links with Scottish Borders Council (SBC), including the creation of an Integrated Joint Board (IJB).

The decision-making framework within NHS Borders is currently being revamped, taking into account what went well at the onset of the covid pandemic. Rapid redesign and mobilisation of services was made possible through clinically-led and managerially enabled decision-making. The aim is for the best of that to be retained and embedded within our structures while ensuring robust governance and a ‘whole system’ approach to include the NHS Clinical Boards, Primary Care and the IJB. There are many initiatives on the horizon affecting the future landscape for Scottish psychiatrists; the close-knit and collaborative nature of the Scottish Borders’ statutory services combined with our highly networked medical psychiatric workforce, puts us in a unique position to ensure those developments result in the best services for those patients most in need.

Clinical Governance (CG) is well established, forming part of the Risk Management of the whole organisation. CG is seen as a positive support to all clinicians with active participation by all professions. There is a wide range of opportunities for the post-holder to be involved in this area of work.

 **2.3 Mental Health Service**

With approximately 300 staff and an annual operational budget of around £16 million, the NHS Borders Mental Health Service provides treatment in a variety of settings, via consultant-led Community Mental Health Teams, a range of community facilities and the in-patient services.

The shared philosophy is that of a personal service based on respect for the individual. It builds on the historic foundations of the therapeutic community principles of Dingleton Hospital and the solidly established community psychiatry approach commenced in the early 1970s. We expect people to achieve their maximum potential when given the appropriate involvement in and responsibility for their own care and recovery. Through our community approach, we are able to intervene early to provide assertive outreach and deliver a range of treatment modalities within the biopsychosocial model which uses the most effective combination of medical interventions (in the broadest sense), cognitive behavioural, psychodynamic, occupational, social and family support.

There is a clear value base within the service that front-line clinicians must be involved in decisions affecting their everyday working practise; there is a range of opportunities for medical staff to get involved through active clinical governance systems, Medical Staff Committee, service operational meetings and a range of project steering groups. The Mental Health Board oversees the delivery of services and includes a wide range of clinical staff alongside managers and a number of senior psychiatrists.

**Mental Health Service for Older Adults**

The Mental Health for Older Adults Service (MHOAS) is a Borders-wide multidisciplinary service, which operates around two team bases: The West / Central Team in Melburn Lodge and the East / South Team based at Poynder View in Kelso. The community teams operate during the hours of 9am to 5pm, Monday to Friday.

The service has also recently developed the Care Home & Community Hospital Assessment Team (CHAT). This team specialises in meeting the needs of older adults with mental illness and dementia, working within care homes and community hospitals across the Scottish Borders. It provides proactive and responsive support to care homes and community hospitals to help them better meet the needs of their residents and inpatients with mental illness and dementia. Interventions include carrying out mental health and memory assessments for residents, advising on the best type of treatment for the individual and advising staff on managing the symptoms and behaviours of people with mental illness and memory problems, like dementia, may experience.

**Referral**

MHOAS provides a Borders-wide specialist Mental Health Service for all people aged over 70, and for those of any age with progressive dementia. MHOAS provides community assessment, often in the patient’s own home, with treatment and ongoing support for those with complex needs. Approximately four fifths of referrals are for dementia assessment, and one fifth for ‘functional’ psychiatric illness. The teams work closely with Primary Care Services, Social Work and the voluntary sector. In 2022 the CHMT received around 740 referrals.

**Inpatient facilities**

A twelve bedded specialist dementia assessment and treatment ward Borders Specialist Dementia Unit (BSDU), and six beds for ‘functionally’ ill older people (Lindean).

**Total current MHOAS Staffing across the Borders**

Medical Staff: Community Team South & East, plus Lindean inpatients; 10 PA Consultant (locum)

Community Team Central & West, plus BSDU inpatients; 10 PA Consultant

Community Team Central & West; 8 PA Specialty Doctor

Inpatient Wards; Full time FY2

Inpatient Wards and Community; Full time PA CT Psychiatric Trainee

Inpatient Wards: Full time Physician Associate

Liaison Psychiatrist within the Borders General Hospital manages the acute liaison work for older adults

Clinical Psychology: 1.0 WTE Consultant Clinical Psychologist

Operational Manger: 1.0 WTE Band 8a

Community Mental Health Teams:

Band 7 2.0 WTE (ANP and Team Manager)

Band 6 8.8 WTE

Band 5 3.0 WTE

Band 3 9.8 WTE

Band 6 OT 1.0 WTE

Band 5 OT 1.0 WTE

Band 3 OTTI 0.48 WTE

Administrative Staff: 1.0 WTE Team leader

3.0 WTE Team Secretary

Care Home and Community Hospital Assessment & Treatment Team (CHAT):

1.0 WTE Team Manager

2.0 WTE Band 6

3.7 WTE Band 5

4.0 WTE Band 3

0.8 WTE Band 6 OT

1.0 WTE 8a Psychology

0.2 WTE Medical (covered by Community consultants)

An office with personal PC/laptop, e-mail and internet access is available in the Team Base with a desk and computer in Poynder and at the outlying Resource Centres. Patients are seen in the community and in health centres and care homes. There is dedicated secretarial time for clinical work and additional administrative time available within Medical Administration to assist with rotas, education programmes, etc.

**Adult Mental Health Services**

Adult Mental Health Services undertook a period of development in the decade following the closure of Dingleton Hospital. The Adult Mental Health Services consist of 3 Community Mental Health Teams (East, South and West) with geographical catchment areas centred on the larger Borders towns (Kelso, Hawick and Galashiels). There is also access to voluntary organisations and supports.

**Referrals**

The teams accept referrals of adults aged 18 to 69 years who present with a range of acute severe general psychiatric disorders, including major mental illness, severe adjustment disorders and emotional and behavioural disturbances requiring psychiatric assessment, and with more specialist patient groups such as dual diagnosis, comorbid neurodevelopmental and eating disorders. Borders CMHTs all provide an assessment and treatment service at a venue within the community or in people’s own homes. The new ‘Single Point of Access’ referral allocation meetings, occurring three times per week, cover the whole of the Borders catchment. There is the capacity for some referrals to be assertively triaged, ensuring patients get the help they need as soon as possible.

Emergency referrals are currently handled by the Borders Crisis Team based in Melrose. Urgent referrals (seen within 5 working days) are dealt by CMHT team members.

**Inpatient Beds**

Nineteen acute admission beds are available at Huntlyburn House, Melrose, in a unit opened in 2001 and fully renovated in 2013. Each adult team has a nominal six beds for individuals requiring 24-hour specialist psychiatric nursing care; one bed is for elective detoxifications for patients under the care of the Borders Addictions Service. The unit runs at an average of 85% occupancy. All bedrooms are single with en-suite facilities; there are 2 sitting rooms with dining areas, additional sitting areas and one external smoking area on the unit.

**Additional Community-based Services for Adults Delivered Through Statutory Sector**

**Renew** is a new development as part of the Primary Care Improvement Plan, providing access to Primary-care level Mental Health Assessment and short-term focussed interventions aimed at early intervention and resolution of a range of mild to moderate depression and anxiety. By taking a person centred approach, the **LAC service** encourages and enables individuals who experience mental health issues or mental illness to live an active, more connected and purposeful life by assisting them to engage in activities within their community. The service also builds capacity within local communities to help fill identified gaps and helps to address issues around stigma and discrimination.

**Voluntary Agencies**

**Health in Mind** provide Re:discover Borders, a befriending service, and run the Wellbeing College providing an educational approach to supporting mental health & wellbeing**. Scottish Association for Mental Health (SAMH) in partnership with NHS Borders** deliver the **Distress Brief Intervention** programme which is part of a Scottish Government pilot and has been extended to cover a younger age range.**Artbeat** provides creative opportunities for those with Mental Health problems and Learning Disabilities to support recovery. **Penumbra** provide housing support to people in their own homes, to build independence in managing and maintaining their tenancies.

**Borders Independent Advocacy Service (BIAS)** deliver1:1 Independent Advocacy to a variety of client groups including mental health. **New Horizons,** a user-led organisation based in Galashiels, provide peer support through weekly groups in different locations across the Borders.

**AA** which haslocal groups in all main towns. **Penumbra Youth Project Community Drug Action Project** which providesinformation, advice and counselling for 16-21 years with drug/alcohol problems (with or without mental health problems). Drop-in centres in Galashiels, Hawick, Eyemouth, Peebles and Kelso. **We Are With You (WAWY),** a community based counselling, information and advice resource for adults with alcohol problems. WAWY also runs a support group for longer-term support/relapse prevention and a programme of group work modules for alcohol-related offenders referred by the Criminal Justice Service. Drug outreach service for 16 yrs plus including: needle exchange; information; counselling; practical support; and support to access employment, education or training.

**Other Mental Health Teams:**

1. **Borders Addictions Service**

The NHS Borders Addiction Service provides a Scottish Borders-wide assessment and treatment service to individuals with drug and alcohol related problems. The team works within a broad philosophy of harm reduction, recognising the right of clients to make informed choices regarding their lifestyles and changes they wish to make within this. Access to detoxification beds is within the acute adult admissions unit (Huntlyburn House); these patients are overseen by the Addictions Psychiatrist. There are drop-in facilities in key locations within the Borders and rapid access to opiate-replacement titration regimes.

1. **Borders Crisis Team**

The Borders Crisis Team (BCT) accepts referrals from GPs, Liaison Psychiatry and CMHTs. It provides intensive community treatment to adults with acute mental health problems, as an alternative to hospital admission where safe and appropriate. The activities of the BCT include: assessment, symptom management, practical help, safety care planning, family work and initial medication monitoring.

There is close liaison between the BCT and the key worker from the referring team who will maintain regular contact during the time the BCT are involved, to ensure continuity of care. Medical responsibility for BCT patients remains with the consultant from the referring Community Mental Health Team. The consultant cover for new cases referred to BCT will be provided by a dedicated consultant.

The service is Borders-wide and operates from 9am to 5pm Monday to Friday. There is weekend cover in conjunction with the on-call trainee psychiatrist. Patients can be visited more than once a day if necessary, particularly in the early stages of involvement. The average length of contact with the BCT is 2-3 weeks. The BCT is staffed during the unscheduled care period to provide a Liaison Psychiatry service along with the on-all trainee doctor, supported by the on-call consultant/specialist doctor who is available to give telephone advice. In this time period they can offer limited support to the BCT caseload.

1. **Child and Adolescent Mental Health Services**

The Child and Adolescent Mental Health Team is based in Selkirk. It provides assessment and treatment of mental health problems relating to children and young people under the age of 18 years, and promotes the understanding of issues affecting the mental health of this age group. Inpatient provision is available at the Young People’s Unit in Edinburgh.

1. **Learning Disability Service**

The Learning Disability Community Service, based in Earlston, provides a service to adults (16+ years) with a learning disability and complex mental health needs.

There are no local inpatient facilities and specialist inpatient beds are accessed out-of-area. An Assertive Outreach Team offers intensive care and assessment at home to avoid unnecessary hospital admission. The Learning Disability Service is part of the regional planning network for South East Scotland and Tayside regions and has operated as a fully integrated (Health and Social Work) Borders-wide service for several years

1. **Liaison Psychiatry Team**

In 2005 a Liaison Psychiatry Team was created to provide a psychiatric service to the Borders General Hospital. Referrals include deliberate self-harm and the whole range of psychiatric disorders which are a consequence of physical illness or contribute to it, including medically unexplained physical symptoms which present in the general hospital setting.

1. **Mental Health Services for Older Adults**

The Mental Health for Older Adults Service (MHOAS) provides a Borders-wide specialist mental health service for all people aged 70 and over and for those below 70 with progressive dementia. The Mental Health for Older Adults Team (MHOAT) is the community team element of the service, providing community assessment, often in the patient’s own home, with treatment and on-going support for those with complex needs.

In-patient facilities include: a dementia assessment and stabilisation ward, the Borders Specialist Dementia Unit, and 6 beds for functionally ill elderly people, Lindean Ward. A specialist Care Home and Community Hospital Assessment Team support the assessment and management of people with high-level needs associated with dementia in those settings, promoting holistic and patient-centred care in a more homely environment.

1. **Rehabilitation Service**

The Community Rehabilitation Team provides a Borders-wide service for around 110 patients with severe and enduring mental health problems (mostly chronic schizophrenia). It accepts referrals of adults from 18 – 69 years from adult CMHTs, CAMHS and other psychiatric services where patients are returning to live within Borders. The referral criteria include: adults with severe and enduring mental health problems, usually with a diagnosis of Schizophrenia, Schizoaffective disorder or severe Bipolar Affective Disorder; complex needs involving the combination of health, social, occupational, employment and educational difficulties; those likely to benefit from active rehabilitation, or who require a level of community input and consistency that cannot be provided by the adult community mental health teams.

An increasing number of referrals have comorbid diagnoses of psychosis and alcohol/substance misuse. The Rehabilitation Team delivers individual care packages to adults across Borders, with a strong emphasis on multi-disciplinary and multi-agency joint working. Dedicated supported accommodation flats are available in Galashiels. The Rehab inpatient unit (East Brig) has 10 beds for patients in early relapse, active rehabilitation and for relapse prevention and has recently opened a supported accommodation facility (Millar House) within Melrose.

 **2.4 Scottish Borders Council**

There are good relationships between NHS Borders and the Local Authority, who continue to work together to implement the Integration Strategy for Mental Health and Older Adults Services.

#####  2.5 Social Services

There is specialist Mental Health Social Work input into all the CMHTs, Community Rehab Team and BAS, fostering excellent working relationships. The MHO service can be contacted 24 hours per day, seven days per week.

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| 1. **Research, Audit, Development and Teaching**
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The Clinical Tutor has responsibility for the local professional development programmes. This role currently incorporates medical student placements and supporting new trainees. The Adult, Older Adult, Child & Adolescent and Learning Disability Services are approved training areas for Basic Specialist Training in Psychiatry and Vocational Training for General Practice.

Research is encouraged and investigative tools, such as MRI, SPECT and CT Scans are accessible at Borders General Hospital. There is an NHS Borders Research and Development Forum.

A clinical library is based on site at Borders General Hospital and there is an internal postgraduate programme with regular external speakers. There are weekly educational seminars, and Mental Health Legislation meetings. The Mental Health and Learning Disability medical staff also participate in the Borders General Hospital Grand Rounds. There is time available to support Significant Adverse Event Reviews and National Quality Standards. The Borders Service is also involved in the Scottish ECT Accreditation Network. The Borders Mental Health Service has close links with Lothian and there are opportunities to become involved in the MRCPsych Teaching Course and the Psychiatry Course for GP Specialty Trainees, based at the Royal Edinburgh Hospital and the NHS Education for Scotland Postgraduate Teaching Unit, also in Edinburgh.

All permanent medical staff are supported with their professional development, according to their individual needs. Mentorship can be provided and senior doctors can access Leadership, Management or other development opportunities depending on their areas of interest and requirements. A weekly peer group meeting provides additional support.

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| 1. **Support Staff and Facilities**
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A dedicated office, laptop, e-mail and internet access is available in the Community Team base. Patients are seen in the community, in local health centres and the BGH. There is dedicated secretarial time within the CMHTs for clinical work and additional administrative time available within Medical Administration to assist with rotas, education programmes, etc. Each doctor has a Smartphone for remote email and calendar access.

The senior doctors in each team have the support of a GPST and Specialty Doctor. A Core Trainee is due to be piloted in the West CMHT. There is a Senior Trainee from the South East Scotland Higher Training Scheme from time to time. A weekly peer meeting for senior doctors is in place; this group acts as a strong, collaborative internal support structure.

The senior medical staff establishment within the Mental Health & Learning Disability Network will be as follows:

Dr Amanda Cotton Associate Medical Director and South CMHT

Vacancy South Community Mental Health Team

Dr Anton Barrington (locum) East Community Mental Health Team

Dr Jennie Higgs West Community Mental Health Team

Dr Rosemary Gordon Borders Addictions Service

Dr Joanna Bredski (p/t) Rehabilitation Team

Dr Jenny Bryden (p/t) Rehabilitation Team

Dr Lucy Calvert (p/t) Mental Health for Older Adults Service

Dr Greg Green (locum) Mental Health for Older Adults Service and East CMHT

Dr Ruth Ashman (p/t) Child & Adolescent Mental Health Service

Dr Leonie Boeing (p/t) Child & Adolescent Mental Health Service

Dr Lucy Russell Child & Adolescent Mental Health Service

Dr Laura Kean (p/t locum) Child & Adolescent and Infant Mental Health Services

Dr Muriel Foreman (p/t) Associate Specialist, CAMHS

Dr Niall Campbell Liaison Psychiatry

Dr Mark Hughes Learning Disability Service

Dr Chammy Sirisena Associate Specialist, Learning Disability Service

Other staff supporting the Mental Health and Learning Disability Services:

Dr Eimear O’Kane (p/t) Specialty Doctor in Personality Disorders

Dr Grace Hill Specialty Doctor, East CMHT

Dr Kimberley Blyth Specialty Doctor, South CMHT

Dr Stan Yordanov Specialty Doctor, Rehabilitation Team

Dr Gemma Berry Specialty Doctor, CAMHS

Dr Dan Prior Specialty Doctor, MHOAS

Emma Morgan Physician Associate, MHOAS

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| 1. **Service, Clinical and Professional Structures**
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The Specialist Doctor will be a member of the Medical Staff Committee within the Mental Health Service and of the NHS Borders Senior Medical Staff Committee. There is a Mental Health Board, which is responsible for the delivery of all Mental Health Services, and accountable to the Executive Team. This is chaired by the Associate Medical Director (Dr Amanda Cotton).

Annual appraisal is undertaken to review personal development, with job planning on an annual basis, with the Associate Medical Director (AMD) overseeing the process.

Within the CMHTs the Consultants and Specialist Doctor have a clinical leadership role and are accountable to the Associate Medical Director. Under development is the direct line management of non-consultant medical and Physician Associate colleagues by the consultant of the relevant clinical area, with a high level of support from the AMD. Line management of other non-medical members of the team is undertaken by the Team Managers of South CMHT and the head of adult psychology, with professional supervision obtained through the relevant professional lines of accountability, ie. Nursing, Psychology, OT, social work, admin, etc.

NHS Borders’ Mental Health and Learning Disability Clinical Boards (which sit under the same senior managerial leadership structure) have been developing a new model of clinical and managerial leadership with the aim of bringing together clinical advice and managerial capability to drive forward clinical service development and improvement in the current tight fiscal climate. Our aim is for the best outcomes for those most in need of our clinical expertise and secondary-care level input. This can’t happen without clinical expertise at the heart of decision-making; we are committed to bringing evidence-based knowledge and clinical governance advice together with key stakeholders (including the vital patient voice) to the fore as we navigate together these difficult times.

Along with the Associate Medical Director, our Medical Director Dr Lynn McCallum is an accessible support for doctors. Dr McCallum is a visible and approachable medical leader who actively demonstrates NHS Borders’ values. Dr McCallum is committed to the highest standards of clinical care and as such is interested in the experience and ideas of doctors (and every staff member, of any background) working within our wider services in order to shape and continually improve our care. Dr McCallum is currently leading on embedding the principles of Values Based Medicine and bringing together highly effective collaborations between the Clinical Boards and Primary Care.

**Section B**

**Job Plan and**

**Conditions of Service**

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| **1. Job Plan** |

**Draft Illustration Job Plan 1, to be agreed with successful candidate**

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|  | am | pm |
| Day 1  | Outpatient clinic, Poynder View or Westport, HawickService Operational Meetings (Teams) | SPA: CPD, Revalidation SPA: Journal Club/Education SessionSPA: Medical Staff Committee  |
| Day 2 | Outpatient clinic, Poynder View | Outpatient clinic, Poynder View |
| Day 3 | Home visits – South/East Community | Clinical communication and administration  |
| Day 4 | South and East CMHT MDT meeting (Teams) | CHAT MDT meeting (Teams) CHAT Community visits  |
| Day 5 | SPA: CPD, Revalidation SPA: Senior Medical Peer Group SPA: Trainee/SD supervisionSPA: Consultant supervision SPA: Clinical leadership development | Clinical administration / urgent advice / patient review slotClinical communication and administration  |

Notes

Current rota for emergency on-call non resident is 1:8. Job plan will be modified if successful candidate is working less than full time commitments. Supporting Professional Activities (SPA) are available and will be agreed for various activities including your own CPD, undergraduate and postgraduate medical education and supervision, audit, committee membership, appraisal and revalidation, service management/development.

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| 1. **Conditions of Service**
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* The Terms and Conditions of Service are from the Specialist Doctor grade Terms & Conditions of Service issued in December 2022.
* The appointment will be made by NHS Borders on the recommendation of a Recruitment Panel.
* The post holder must have Full Registration and Licence to Practice with the General Medical Council. It is the post holder’s responsibility to ensure his/her General Medical Council registration and licence to practice does not lapse.
* The appointed Specialist Doctor will have a continuing responsibility for the care of patients in their charge and, along with the consultant psychiatrist, for the proper functioning of their department. They will also undertake the administrative duties associated with the care of their patients and the running of the department.
* The contract will be for 10 Programmed Activities with any additional annually renewable Extra Programmed Activities to be discussed and mutually agreed with the successful candidate and if these are offered a separate contract would be established with a 3-month notice period from either party.
* The full-time salary, will be on the scale £88,118 - £100,011 per annum with scale placing as appropriate to experience and qualifications. An appropriate availability supplement will be paid for on-call.
* The appointment will be superannuable and subject to the regulations of the National Health Service. Superannuation Scheme and the remuneration will be subject to deduction of contributions accordingly, unless the appointee chooses to opt out of the Scheme.
* Termination of the appointment is subject to three months’ notice on either side.
* Appointment is subject to a satisfactory pre-employment medical.
* Appointment is subject to satisfactory Disclosure (Criminal Records Check).
* The post holder will be expected to live within reasonable travelling time (1 hour and 15 minutes) of the clinical team base.
* The post holder will be expected to participate in personal development review programme and CPD, and the annual appraisal process, including 360-degree appraisal.
* NHS Borders is legally liable for the negligent acts or omissions of the employees in the course of their NHS employment. Medical staff are advised to ensure that they have defence cover for activities not covered by the Board indemnity.
* NHS Borders operates a No Smoking Policy. It is a condition of your employment that you must not smoke whilst you are on duty. Failure to observe this rule could result in disciplinary action. When selecting new staff, NHS Borders does not discriminate against applicants who smoke but applicants who accept an offer of employment will, in doing so, agree to observe the Board's policy on smoking.
* NHS Borders Equal Opportunities Policy affirms that all employees should be offered equal opportunities in employment, irrespective of their age, gender, marital status, race, religion, creed, sexual orientation, colour or disability.
* Assistance with relocation expenses may be given in accordance with the NHS Borders’ Relocation Policy.

### General

* Communication - all staff are expected to take part in Team Meetings and other communication initiatives and to communicate readily with colleagues within NHS Borders.
* Health and Safety - all staff have a responsibility for the health and safety and welfare of themselves and others who may be affected by their acts or omissions. Staff will attend an annual update on health and safety at work and other issues relating to their safety. All incidents at work must be reported.
* Confidentiality/Data Protection - all staff who have access to information covered by the Data Protection Act will abide by the terms of the legislation.
* Standards/Quality and Policies and Procedures - staff will familiarise themselves with all NHS Borders Policies, Procedures or Protocols relating to their service and work within the guidelines.

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| 1. **Person Specification**
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| REQUIREMENTS | ESSENTIAL | DESIRABLE |
| Qualifications / Education | MRC Psych (or equivalent)Full GMC Registration and licence to practiseApplicants should be an Approved Medical Practitioner as under the Mental Health (Care & Treatment)(Scotland) Act 2003 or be willing to gain the approval once in post. | Additional qualifications in a recognised Psychological Therapy.Qualifications or training in geriatric medicine. |
| Experience | Minimum 10 years experience since primary medical qualification including at least 6 years experience in Specialty Doctor or equivalent in Old Age PsychiatryExperience of managing complex presentations in a range of settingsExperience of providing medical leadership to MDT for direct and indirect clinical careExpertise in assessment and management of people with the full range of mental illnesses and disorders including complex comorbidity in various settings  | Experience as a Responsible Medical Officer (RMO) under the Mental Health Care and Treatment (Scotland) Act 2003 or equivalent (eg Mental Health Act England/other jurisdictions)Experience of medical representation/giving expert opinion in complex MDT meetings under the Adults with Incapacity Act, Adult Support and Protection Act or equivalentExperience of using electronic patient records and telemedicineExperience in working in a CMHT, with an emphasis on community work.  |
| Skills and Abilities | Ability to take day to day clinicalresponsibility for autonomous management of patients as expert decision makerRecognition of scope of practice as agreed with service, and competencies, and the need to access supervision when requiredEffective and clear communication with patients, other team members and professionsAbility to risk assess and risk manageManagement of competing demands on timeAbility to work collaboratively with familiesExpert formulation of complex casesAbility to train and supervise junior medical staff/medical students/staff from other disciplinesGood written, verbal and interpersonal communication skills. A commitment to developing services and working in partnership with service users and carers. | Skills in Psychological / Social Therapies Experience of prescribing and monitoring acetyl cholinesterase inhibitors. |
| Clinical Governance | Knowing basic principles and implementation | Undertaken specific projects (audit, risk management etc.) |
| Research | An interest in systematic enquiry | Published research; ongoing projects; poster presentations  |
| Teaching | A commitment to education, training and professional development | Experience in teaching doctors and other disciplines |
| Management | Willingness to develop leadership skills. | Previous line management experience |
| **Applications from candidates with relevant experience and wishing to work towards substantive consultant appointment via CESR will also be considered**   |

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| NHS Values | **Care and Compassion**Expectations* Treat people as though they matter
* Involve people
* Consider people as individuals and acknowledge diversity
* Puts the patient first
* Shows they care
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| NHS Values | **Dignity and Respect**Expectations* Team player
* Manages own attitudes and behaviour
* Addresses concerns with colleague as they arise
* Communicates respectfully, openly and professionally
* Listens and turns that into action
* Sees things form another person’s perspective
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| NHS Values | **Openness, Honesty and Responsibility**Expectations* Takes person responsibility for actions
* Sharing of ideas for improvement
* Observes processes
* Ability to work across boundaries
* Commitment to work to best of their ability
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| NHS Values | **Quality and Teamwork**Expectations* Works as part of a team to support others and improve service provision
* Acknowledges mistakes
* Takes responsibility
* Inspires the team
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1. **Specification of NHS Values**

**Point of contact**

Further informal inquiries and arrangements to visit the service should be made to:

Dr Amanda Cotton

Associate Medical Director

Mental Health Service

Huntlyburn House

Melrose

TD6 9BD

Tel: 01896-827155

Email: Amanda.cotton@borders.scot.nhs.uk