

## Job description

**Service:** Redbridge and Merton  
**Job Title:** Consultant in Addictions Psychiatry/Clinical Lead  
**Reports to:** Medical Director

### Main purpose of role:

- ▶ The post-holder will contribute to the local service to which they are attached to ensure that substance users consistently receive high quality services that adhere to the best practice guidelines and achieve high professional standards. They will be responsible for contributing to the overall performance of the service to ensure that contractual output targets are achieved. They will be required to record and input client data and information in order that the service operates within contractual, administrative and financial requirements.
- ▶ The post-holder will be required to work flexibly across a number of operational sites as required and work flexibly within an agreed number of hours to maintain the most appropriate level of service provision. This will include some evening and weekend working as determined by service user need.
- ▶ The post-holder will be expected to take responsibility for personal development, identifying personal training needs and participate in regular supervision, appraisal. They will engage fully in the process for revalidation.
- ▶ This post is subject to a Disclosure & Barring service check at an enhanced level.

### 1. Responsibilities

This post-holder will be responsible to the Medical Director and Operational Manager in fulfilling the following duties:

#### 1.1. Good medical care

- ▶ To provide a clinical assessment, including relevant psychiatric and physical investigation, of a wide range of substance misusers presenting to the service.
- ▶ In conjunction with other members of the Multidisciplinary Team to plan and deliver appropriate individually tailored treatment plans.
- ▶ To regularly review and monitor patients' treatment progress (including results of urinalysis and other laboratory investigations).
- ▶ To keep accurate appropriate and up-to-date medical and administrative documentation including computer records.
- ▶ To liaise closely with other relevant professionals and organisations including non-statutory addiction services, adult psychiatric services, general practitioners, medical colleagues, Social Services and Prison Services
- ▶ To operate within guidelines, policies and procedures relevant to the post.
- ▶ To provide clinical advice, liaison and consultation as required to colleagues in primary care, community services and acute specialties in line with new ways of working
- ▶ Engaging with people who have substance misuse problems and providing them with general healthcare and general mental health assessments and contribute to the development of individual care plans.

- ▶ Provide specialist prescribing assessments to opiate, stimulant, tranquilizer and alcohol dependent clients. This may involve assessing patients with NPS or addictions without the component of substance misuse.
- ▶ Initiate appropriate prescribing regimes to clients in line with national legislation and national and local guidance.
- ▶ Provide medical management and reviews of prescribed clients
- ▶ Provide sound evidence-based clinical practice to facilitate effective treatment decisions.
- ▶ Work with other team members to ensure effective administration in terms of record keeping, discharge summaries and correspondence to other relevant bodies. Work with management team to ensure all paperwork is regularly audited.
- ▶ Conduct phlebotomy tests and support nursing team in ensuring that the maximum number of service users are tested for BBVs and vaccinated against Hepatitis A and B.
- ▶ Be an active part of the management team to ensure service and organisational goals are met and that clinical standards are kept high.
- ▶ Support nursing team to titrate patients safely on to a treatment regime and ensure that procedures are constantly reviewed to promote best evidenced based practice in accordance with WDP's clinical guidelines.
- ▶ Support nursing team to offer wound care assessment.
- ▶ Promote understanding in relation to working with individuals suffering from addiction problems.
- ▶ Develop, review and audit care plans, provide health education especially in regard to harm minimisation, blood borne viruses and overdose prevention.
- ▶ Provide training, advice and support to other clinical staff to ensure safe and effective service delivery.
- ▶ Attend multidisciplinary meetings, promoting the nomination of named link workers and actively supporting the implementation of integrated care pathways.
- ▶ Support and develop the provision of GP shared care in the locality where based
- ▶ Represent WDP at a range of meetings with other professionals and agencies in order to evaluate, monitor and develop treatment services for substance misusers and minimise barriers to treatment.
- ▶ Take an active part in the implementation, adherence and development of internal and external clinical governance procedures.
- ▶ Carrying out research which will be of benefit to the DAT, PCT, NTA, DoH etc and the future treatment of patients
- ▶ Utilise evidence-based psychosocial interventions such as motivational interviewing, cognitive behavioural techniques and brief interventions in both one-to-one and group settings to promote engagement in treatment services, encourage self-esteem, well-being, self-responsibility and enhanced motivation.
- ▶ When necessary, covering duties of their colleagues and other junior medical staff, in order to ensure continuity of medical care.
- ▶ To participate in cross-cover arrangements with medical colleagues from other WDP regional services
- ▶ To provide guidance and support as appropriate to newly appointed and less experienced medical colleagues.
- ▶ To provide guidance and support as appropriate to Nurse Independent and Supplementary Prescribers
- ▶ The post holder should also accept that he/she might be required to perform duties in occasional emergencies and unforeseeable circumstances at the request of the Medical Director.

## 1.2. Maintaining good medical practice

- ▶ All doctors are expected to participate in continuing professional development, annual appraisal and revalidation and to join appropriate supervision and PDP groups for the role. Doctors are actively encouraged to take their study leave entitlement in line with Royal College Guidelines and to support the development needs identified in their PDP, Peer Group reviews and appraisal. There is a dedicated study leave budget and a process of approval which considers the individual personal development plan.
- ▶ The post-holder will attend the monthly clinical summit; which includes an academic programme of CPD, and complex case discussions. They will also be able to attend any other CPD activities organised by this group.
- ▶ The post-holder will have an annual (GMC) appraisal with the Medical Director.

## 1.3. Relationships with others

- ▶ To work in partnership with users and carers so that they are fully involved in and empowered to make decisions about their treatment and care.
- ▶ To work constructively with managers and clinical colleagues to maintain effective team working and service improvement.
- ▶ Establish good communication and effective working relationships with all relevant agencies in relation to individual patients and service development
- ▶ Build a knowledge of and links with voluntary and independent service providers locally.

## 2. Training and Educational Supervision

- ▶ To provide clinical supervision, guidance and support to other professionals on a multi-disciplinary basis and with other mental health organisations where appropriate.
- ▶ To remain up to date on professional developments as required by their professional body.

## 3. Audit and health and social care governance

- ▶ The post holder will be expected to participate in clinical audit meetings as well as to participate in clinical audit and other clinical governance activity.
- ▶ In addition to in-house training and regular supervision the post holder will be encouraged to further their experience and qualifications in the field of addiction by attendance at relevant workshops / courses.

## 4. Out of Hours

- ▶ There are currently no on-call commitments. There will be some evening and weekend working as determined by service user need.

### General terms of reference:

In carrying out the above duties the post holder will:

- ▶ Work flexibly across operational sites as required.
- ▶ To contribute to the overall performance of the service to ensure that contractual output targets are achieved.
- ▶ Work flexibly within an agreed number of hours of work to maintain the most appropriate level of service provision.
- ▶ Seek to improve personal performance, contribution, knowledge and skills.
- ▶ Participate in appraisal, supervision and Learning & Development processes.
- ▶ Keep abreast of developments in services, legislation and practice relevant to the relevant client group.
- ▶ Ensure the implementation of all WDP policies.
- ▶ Contribute to maintaining safe systems of work and a safe environment.
- ▶ Undertake other duties appropriate to the grade of the post.
- ▶

## Person Specification

QUALIFICATIONS AND EXPERIENCE	Essential/Desirable
<ul style="list-style-type: none"> <li>▶ Basic Medical Training</li> <li>▶ Full GMC / UK Registration</li> <li>▶ CCT Endorsement for Addictions Psychiatry or significant experience within the field at a senior level</li> <li>▶ MRCPsych or equivalent higher qualification</li> <li>▶ Experience of working in a multi-disciplinary team setting and with other Agencies</li> </ul>	Essential
<ul style="list-style-type: none"> <li>▶ Section 12 approved</li> <li>▶ Evidence of participation in Clinical Audit</li> </ul>	Desirable
KNOWLEDGE, SKILLS AND ATTRIBUTES	
<ul style="list-style-type: none"> <li>▶ Good understanding and knowledge of addiction psychiatry</li> <li>▶ Knowledge of legislation relating to Mental Health</li> <li>▶ Demonstrable evidence of effective communication skills</li> <li>▶ An understanding of the work of other agencies including non statutory services</li> <li>▶ Experience of working with substance misuse and mental health issues and a clear understanding of the need for and ability to deliver quality services.</li> <li>▶ Sound and demonstrable knowledge of clinical prescribing issues.</li> <li>▶ Knowledge of the issues facing substance misusers including appropriate medical interventions, social care and health issues.</li> <li>▶ Ability to assess and care plan service users and formulate written reports as necessary.</li> <li>▶ Community based support practices.</li> <li>▶ Maintain professional boundaries and work effectively with partnership agencies.</li> <li>▶ Demonstrate skills to undertake administrative duties and PC literacy.</li> <li>▶ Experience of contributing to project development.</li> <li>▶ Commitment to anti-discriminatory practice</li> <li>▶ Commitment to the principles of equality and diversity in relation to all people</li> <li>▶ Ability to embrace the principles of recovery</li> </ul>	Essential

<ul style="list-style-type: none"> <li>▶ Commitment to new ways of working</li> <li>▶ Employ a professional, empathetic and non-judgmental attitude towards service users.</li> <li>▶ Communicate confidently and effectively, verbally and in writing.</li> <li>▶ Respond flexibly to the demands of the post.</li> <li>▶ Work as a member of a team.</li> <li>▶ Ability to encourage and support the involvement of other colleagues in service delivery</li> <li>▶ Show a capacity to work alone and the ability to keep calm under pressure.</li> <li>▶ Show commitment to facilitating positive outcomes for service users.</li> <li>▶ Mobility to travel across sites</li> <li>▶ Member of a medical defence association</li> <li>▶ Proven ability to liaise and maintain a professional relationship with a diverse range of people</li> </ul>	
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Amendments: This description accurately reflects the present position; it may be amended and reviewed. Any change will be made following a period of consultation.

## Appendix 5 – Equality Impact Assessment

Equality Impact Assessment			
Measures	Answer		Evidence
Is it likely that this consultation process <b>could</b> have a positive or negative impact on the minority ethnic groups? What evidence (either presumed or otherwise) do you have for this?	Y	N	This consultation is part of a TUPE transfer process and limited to those transferring.
Is it likely that this consultation process <b>could</b> have a positive or negative impact due to gender (including pregnancy and maternity)? What evidence (either presumed or otherwise) do you have for this?	Y	N	This consultation is part of a TUPE transfer process and limited to those transferring.
Is it likely that this consultation process <b>could</b> have a positive or negative impact due to disability? What evidence (either presumed or otherwise) do you have for this?	Y	N	No disabilities have been identified to date but the policy includes a commitment to accommodate disabilities in plans if identified.
Is it likely that this consultation process <b>could</b> have a positive or negative impact on people due to their sexual orientation? What evidence (either presumed or otherwise) do you have for this?	Y	N	This consultation is part of a TUPE transfer process and limited to those transferring.
Is it likely that this consultation process <b>could</b> have a positive or negative impact on people due to their age? What evidence (either presumed or otherwise) do you have for this?	Y	N	This consultation is part of a TUPE transfer process and limited to those transferring.
Is it likely that this consultation process <b>could</b> have a positive or negative impact on people due to their religious belief (or none)? What evidence (either presumed or otherwise) do you have for this?	Y	N	This consultation is part of a TUPE transfer process and limited to those transferring.
Is it likely that this consultation process <b>could</b> have a positive or negative impact on people with dependants/caring responsibilities? What evidence (either presumed or otherwise) do you have for this?	Y	N	This consultation is part of a TUPE transfer process and limited to those transferring.
Is it likely that this consultation process <b>could</b> have a positive or negative impact on people due to them being transgender or transsexual? What evidence (either presumed or otherwise) do you have for this?	Y	N	This consultation is part of a TUPE transfer process and limited to those transferring.
Is it likely that this consultation process <b>could</b> have a positive or negative impact in people due to their marital or civil partnership status? What evidence (either presumed or otherwise) do you have for this?	Y	N	This consultation is part of a TUPE transfer process and limited to those transferring.
Can any adverse impact be justified on the grounds for a particular group? (For example, the policy may be deliberately designed to promote equality for disabled people but may run the risk of this being at the expense of non-disabled people which is permissible under law).	Y	N	This consultation is part of a TUPE transfer process and limited to those transferring.