

### Rehabilitation Psychiatry Consultant

This is a part-time appointment for a consultant to work with inpatients at Anson Road, Victoria Park, Greater Manchester M14 5BY.

The unit is an open rehabilitation facility for up to 17 male patients (single- sex facility). Anticipated average length of stay is 18 months .

The patients will already have been in inpatient services commissioned by Manchester CCG and will be transferred for rehabilitation and recovery work.

#### Job Description

<b>Post and Specialty</b>	Consultant Rehabilitation Psychiatry
<b>Base</b>	3-3A Anson Road rehabilitation unit Victoria Park Greater Manchester M14 5BY
<b>Contract details</b>	Number of programmed activities: 6 PAs Salary £93,666 – £126,281 pro rata  On call commitment on Manchester rota 1:23 pro rata.  The post is offered on a part-time basis
<b>Professionally Accountable to</b>	Chief Medical Officer: Dr Arasu Kuppaswamy Deputy medical director: Dr Tessa Myatt Associate Medical Director: Dr Nishan Bhandary
<b>Operationally Accountable to:</b>	Associate Medical Director: Dr Nishan Bhandary Interim Head of operations: Debra Woodcock
<b>Key working relationships</b>	Line Manager: interim Lead consultant Dr Katherine Barnes Head of Operations: Debra Woodcock  <b>Care Group:</b> Manchester  Associate Medical Director: Dr Nishan Bhandary

	<p>Interim Associate Director of Operations: Bridget Hughes</p> <p>Interim Director of Operations: Mr John Foley</p> <p>Chief Medical Officer and RO: Dr Arasu Kuppuswamy</p> <p>Chief Executive: Jan Ditheridge (Interim)</p> <p>Guardian of Safe Working: Dr Kenny Ross</p>
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## 1. Introduction

Greater Manchester Mental Health NHS Foundation Trust (GMMH) is one of the leading mental health trusts in the UK.

Serving a population of 1.2 million people, the Trust employs around 6,400 people who make a difference across 160 locations. Situated in one of the most exciting and affordable cities in Europe, GMMH provides community and inpatient mental health care, alongside substance misuse services across the North West.

GMMH is one of the most active research trusts in the UK, with one of the highest levels of recruitment to clinical trials for mental health. This puts our staff and service users at the leading edge of new mental health treatments.

We provide inpatient and community-based mental health care for people living in Bolton, the city of Manchester, Salford, Trafford and the borough of Wigan, and a wide range of mental health and substance misuse services across Greater Manchester, the north west of England and beyond. The Trust provides a range of specialist services including prison in reach across the North of England, a specialist centre for mental health and deafness and in patient perinatal mental health care.

Our people enjoy their work, have opportunities to learn and develop their skills and are encouraged to generate new ideas that improve care for our service users.

### Living and working in Greater Manchester

Greater Manchester is one of the world's most innovative, original and exciting places to live and work. From the beauty of the surrounding countryside to the heart of the vibrant inner city with great shopping, entertainment and dining options.

There are great schools, international sports teams and a variety of places for the arts. It is one of the areas spearheading devolution in England. We have easy access to rail, air and road travel including a fast rail service to London and international and domestic flights from Manchester Airport.

Wherever you go you will experience a great northern welcome with people famed for their warmth, humour and generosity.

## 2. Working here

- Largest mental health provider in Greater Manchester with focus on delivering excellent mental health care.
- Posts across rural, suburban and urban settings.
- Standard offer of 2.5 SPAs: 7.5 DCCs (pro rata). **(1.5 SPA: 4.5 DCC's in this post)**
- Support for flexible and less than full-time working.
- Opportunities to pursue a special interest.
- The Trust is highly active in research and innovation and has links with a number of local universities; consultants can engage with research from recruitment through to dedicated research time.
- Clear framework for interested colleagues to develop management and leadership skills and take up positions in leadership and management.

- Access to in-house training including a Recovery Academy.
- Structured and supported approach to appraisal and revalidation.
- Agreed process for career breaks.
- Relocation package.

### **3. Local Area information**

Manchester is a vibrant city with a wealth of nationally acclaimed museums, art galleries and theatres. The city is also known internationally for its music and sporting reputation, and for its shops, restaurants and lively night life.

There are many lifestyle options open to those living in the city, with city centre apartments, semi-urban areas with an arty student atmosphere, and more developed suburbs with excellent schools and housing options.

The city has an excellent transport network with motorways, rail and the International Manchester Airport linking it to many important cities and resorts.

Road and rail links make it easy to get out into the fantastic surrounding countryside, with the National Parks of the Peak District, Lake District and Snowdonia all within easy reach.

Manchester is culturally diverse and we welcome applicants from a similarly diverse range of backgrounds to gradually shift the profile of our workforce to match the population we serve.

There are localities across the city with large communities identifying themselves as of African, Caribbean, Chinese or Indian sub-continent ethnic groups, as well as many smaller ethnic and national groups covering most of the main world religions.

As a result of this diversity there are thriving communities in many parts of the city with voluntary and community groups playing an active role in providing services.

All consultants in the Trust will work with culturally diverse communities, but, in addition, development work with ethnic minorities and associated research programmes may form part of job plans for some posts.

#### **Population information for Manchester**

While Manchester is a well-developed and thriving city, it does have areas of significant deprivation and there is considerable inequality within the city as a whole. In addition, there are relatively high levels of homelessness, drug and alcohol use and other social problems associated with the inner city.

In 2015 population was 530,330. People aged 16-65 counted approximately 377,752 (slightly more men than women).

Traditionally the Mental Health Needs Index (or MINI) has been used to predict population need for mental health services, taking account of measures of deprivation. The national weighted capitation formula gives a total Mental Health Needs Index for Manchester of 1.69 (where the ratio for England as a whole equals 1.00). On this measure, Manchester ranks as having the fifth highest level of mental health need in England, behind Islington, Liverpool, City and Hackney, and Knowsley.

#### **4. Local divisional service**

The GMMH Rehabilitation Division was established in 2018 and is comprised of GMMH and third sector provided services. It provides inpatient based services to Manchester, Salford, and Bolton. We do not have services in Trafford and Wigan. We have over 150 beds across the trust's footprint. We have four high dependency locked units and rest are step down rehab units. As part of service expansion, we have developed a new community based rehab services (HEART) which went operational in June 2022.

GMMH's Rehabilitation Units and those that are delivered in partnership with our third sector colleagues, including:

- Acacia Ward – 17 male bed HDU inpatient ward situated within Park house, North Manchester General Hospital, Crumpsall Manchester (to move to new site).
- Anson Rd – 17 male bed inpatient unit situated in Central Manchester
- Bramley Street – 12 male step-down inpatient unit in Salford (advertised post)
- Copeland Ward – 15 mixed sex bed inpatient HDU ward situated within Meadowbrook Unit, Salford.
- Braeburn House – 28 male bed inpatient HDU unit delivered in partnership with Elysium Healthcare Ltd. in Salford
- Honeysuckle Lodge – 14 female bed inpatient HDU unit delivered in partnership with Alternative Futures Group in Bolton

We also have oversight of Bed Management processes, flow and capacity, for the following third sector ran services:

- Oak Lodge – 12 mixed sex bed inpatient unit in Bolton provided by Alternative Futures Group
- Pendlebury House – 10 mixed sex bed inpatient unit in Salford provided by Turning Point
- Douglas House – 12 mixed sex bed inpatient unit in South Manchester
- Millbrook – 12 mixed sex bed inpatient unit in South Manchester

#### **5. Service details**

##### **Anson Road rehabilitation unit**

Anson Road is an open 17- bedded single sex (male) unit that provides Rehabilitation and recovery for those with severe and during mental illness. It supports service users to move on from more restrictive settings, providing active rehabilitation from a full rehabilitation MDT. Patients have frequently previously started their rehabilitation journey in more restrictive settings, such as high dependency units (Rehab HDU), acute wards or forensic wards, have progressed over time and are at a stage where a less restrictive setting is appropriate to continue their pathway of recovery. Anson road has hospital status, so it is possible for patients detained under the MHA to be managed there.

There is a mix of detained and informal patients, but the restrictions of a locked door are not felt to be necessary.

The unit is staffed with a full multi-disciplinary team including nursing staff, support workers, occupational therapist and psychology input.

The postholder will work alongside the MDT and provide senior medical input into the service. They will also be the Responsible Clinician for those detained under the Mental Health Act. The Consultant will be supported by a staff grade doctor who works within the unit part time.

Out of hours the unit is supported by the junior doctor on call on the Manchester on call rota for physical health issues. Alternatively, if required accessing local acute hospital services could be an alternative.

For Mental Health issues the higher trainee for Manchester would be available for advice and support.

There is scope to access primary care services through their GP within working hours.

## **6. Duties of the post**

The post holder will provide medical leadership to the multidisciplinary team.

They will attend ward rounds during the week at designated times.

The post holder will be the Responsible Clinician and have a role with respect to The Mental Health Act – they will be involved in section 12 work, attend tribunals and section renewal meetings.

The post holder will lead the CPA meetings and be actively involved with the team in care planning and risk assessment.

They will take a lead with regards to capacity assessments and best interest meetings.

Referrals will be received centrally at the rehab bed management by Bolton, Salford and Manchester Commissioning teams, secure services, GMMH Inpatient and OAPS. There is scope for the postholder to attend this meeting.

There may be occasions where consultant is requested to do a second opinion assessment within the rehab division.

The post holder will have access to a secretary and a designated office space.

They will be involved in undergraduate teaching for medical students from Manchester University medical school. There will be an opportunity for involvement in problem base learning and to become an OSCE examiner.

The post holder will be encouraged to attend the weekly MRCPsych teaching course at least 4 times a year. These are on a Wednesday afternoon and include a case conference, journal club and expert teaching.

The post holder will be encouraged to engage in teaching and training for various members of the multidisciplinary team.

The post holder will be expected to contribute to clinical audit and will be able to participate in research.

The post holder will be expected to participate in the Manchester senior on-call rota pro rata; this rota is currently 1 in 23. This will be on the third tier of on-call. The second tier involves doctors who are Section 12 approved. The on call covers general adult. The on call attracts a category A payment.

The post holder will be professionally accountable to the lead consultant (Dr Katherine Barnes) and operationally accountable to Debra Woodcock who is the Head of Operations.

## **7. Secretarial support and office facilities**

The consultant will have a shared secretary and in accordance with the guidance published by the Royal College of Psychiatrists (revised in November 2016).

Each consultant will have his own office and be provided with a desk top or lap top computer for their use. Remote access to the hospital computer system will be supported to enable on-call access to records and e-mails.

## **8. Clinical governance and quality improvement**

Each consultant is expected to take an active part in audit and other quality improvement activities. They are expected to actively contribute to monitoring standards, service and team evaluation and to the development of their service.

Consultants are expected from time to time to support the investigation of clinical issues that may arise in other services in the trust.

## **9. General duties**

It is expected that all consultants will:

- Manage, appraise and give professional supervision to junior medical staff as agreed between consultant colleagues and the associate medical director and in accordance with the Trust's personnel policies and procedures. This may include assessing competences under the Modernising Medical Careers framework.
- Ensure that junior medical staff working with the post holder operate within the parameters of the New Deal and are Working Time Directive compliant.
- Undertake the administrative duties associated with the care of patients.
- Record clinical activity accurately and comprehensively, and submit this promptly to the Information Department.
- Participate in service and business planning activity for the locality and, as appropriate, for the whole mental health service.
- Participate in annual appraisal for consultants.
- Attend and participate in the academic programme of the Trust, including lectures and seminars as part of the internal CPD programme.
- Maintain professional registration with the General Medical Council, Mental Health Act Section 12(2) approval process, and to abide by professional codes of conduct.
- Participate annually in a job plan review with the clinical manager, which will include consultation with a relevant manager in order to ensure that the post is developed to take into account changes in service configuration and delivery associated with modernisation.
- Work with local managers (their lead consultant, associate medical director, deputy operational director and other operational managers) and professional colleagues in

ensuring the efficient running of services, and share with consultant colleagues in the medical contribution to management.

- Comply with the Trust's agreed policies, procedures, standing orders and financial instructions, and to take an active role in the financial management of the service and support the medical director and other managers in preparing plans for services.
- Participate in investigations both when clinical care of one of their patients is being investigated or as a clinical investigator when issues arise in other services within the trust.

The Trust is committed to providing safe and effective care for patients and all staff have a responsibility to contribute to the high standards of care. They must work in partnership to achieve service objectives and promote a culture of working together through good communication, openness and honesty in accordance with NHS duty of candour. They need to:-

- Take a proactive role in identifying risk and acting on the results to resolve problems at source wherever possible bearing in mind resources and priorities and liaising with line management.
- Take part in risk management practices both clinical and non-clinical in line with the Trust's Risk Management Strategy.
- Be open and honest and report actual and potential incidents and participate in developing systems to identify and record respond to near misses.

#### **10. External duties, roles and responsibilities**

The Trust actively supports the involvement of consultants in regional and national groups subject to discussion and approval with the medical director and, as necessary, the chief executive officer.

#### **11. Other duties**

From time to time it may be necessary for the post holder to carry out such other duties as may be assigned, with agreement, by the Trust. It is expected that the post holder will not unreasonably withhold agreement to any reasonable proposed changes that the Trust might make.

#### **12. On call, leave and cover arrangements**

This is three-tier on call, with a core trainee and higher trainee or specialty doctor as first and second on call respectively. The candidate will be expected to participate in the rota with other consultants.

On-call covers general adult psychiatry. There are alternative arrangements for CAMHS, LD, Older Adults, Addictions and Forensic Psychiatry.

Cover arrangement for leave is provided by colleagues from within Rehabilitation. This cover is mainly limited to emergencies.

#### **13. Clinical leadership and medical management**

Chief Medical Officer	Dr Arasu Kuppaswamy
Director of Medical Education	Dr Taseer Kazmi
Deputy Medical Director	Dr Tessa Myatt
Associate Medical Director	Dr Kishen Neelam (Bolton and Wigan)
Associate Medical Director	Dr Neeti Singh (Salford and Trafford)

Associate Medical Director      Dr Nishan Bhandary (Manchester)  
Associate Medical Director      Dr Sandeep Mathews (Specialist Services)  
Associate Director of Research   Dr Damien Longson

Each of the Associate Medical Directors is supported by a number of lead consultants who are the line managers for the consultants in their service.

Associate Medical Directors jointly manage the service with their operational colleagues, the associate operational directors. The management ethos is that of a clinically led, operationally partnered, academically informed service.

The medical managers and leaders take an active part in leading quality improvement. They are active partners in developing services and in business planning of their network and service.

Consultants are expected to lead clinical decision making in the multidisciplinary team to ensure the delivery of high quality care, to develop service clinical priorities in line with national and professional guidance and standards and to engage with service transformation programmes including attendance at Consultant meetings for their service and directorate.

Consultants are expected to undertake delegated management responsibility within the directorate, the nature of which can be negotiated following appointment relative to the aspirations / experience of the appointee and needs of the directorate e.g. audit lead,.

There will be participation in the general administration of the directorate including attendance at appropriate medical committee meetings and meetings relevant to areas of specific management responsibility.

All consultants are members of the Trust Medical Staff Committee that meets bi-monthly. The current chair is Dr R Blattner.

#### **14. Appraisal and job planning**

There is a robust system of appraisal and revalidation which has been quality assured by NHS England and it is firmly embedded in the consultants' annual cycle. All appraisals are undertaken by trained appraisers and there is ample support for appraisees in setting out their portfolio. The Associate Medical Director for Medical Education is responsible for appraisal and is the Responsible Officer for the purposes of revalidation. The trust Responsible Office is Dr Arasu Kuppuswamy who with her team manage appraisal and revalidation in the trust.

All Consultants are expected to undergo annual appraisal and job planning. Job planning is usually conducted annually (or more frequent if required) by the Lead Consultant, and appraisers are chosen from a Trust pool of suitably trained consultants. It is expected that a job review will take place within six months of the appointment of a successful candidate. The appointment is subject to satisfactory medical clearance.

It is expected that appraisal will occur prior to job planning to which it will be linked.

If you are at the beginning of your consultant career, there are some specific features of jobs in GMMH Trust. A mentor from elsewhere in the service will help you with the transition from specialty trainee to consultant. Additional flexibility can be made available for you to complete research

already started, or support you to develop new research ideas. You will be supported to gain the skills to become a consultant trainer

If you are an established consultant looking for a post in a new area, we offer a different range of opportunities: Good support for continuing career development in an active research and teaching environment, opportunities to develop management expertise, excellent support for CPD and an exceptionally wide range of specialist sessional experience

If you are looking for job flexibility we have significant experience in designing part-time and flexible posts. All job plans can be tailored to meet individual needs, but also have a consistent design across the service and across specialties. Therefore, a general consultant model job plan can be adapted pro rata for flexible posts, and can be applied across specialties.

## **15. Teaching and training**

The Trust is a leading provider of both undergraduate and post graduate training. There will be opportunities for regular participation in postgraduate and undergraduate teaching. Greater Manchester Mental Health NHS Foundation Trust has full accreditation by the Royal College of Psychiatrists.

The post holder should participate in both undergraduate and postgraduate teaching, and contribute to inter-disciplinary training and development.

Medical students from the University of Manchester can request special placements in forensic psychiatry in their fourth or final year of training.

Medical students are attached to the Trust throughout the year, for clinical, research and special study modules and all consultants are expected to contribute to the undergraduate teaching programme. Medical students do a 4-week attachment in Psychiatry in the 4<sup>th</sup> year and there are options for special study and research modules. The 4<sup>th</sup> year students are attached to some consultants and many look for some additional clinical experience in psychiatry. Consultants are expected to provide teaching during their attachment.

The Trust has a higher than average number of psychiatry training posts both at core and higher training levels, and most of the consultants are supported in acting as educational and/or clinical supervisors. The post holder will be encouraged to apply to become a trainer, when this is appropriate. Core, Higher and Foundation trainees in Psychiatry are attached to the team. In addition, there is the expectation that ST4-6 trainees pursuing a special interest will be attached where an applicant is eligible for this.

The Trust currently hosts Health Education North West previously known as the NW School of Psychiatry and several of the key training posts across the Region are held by consultants working in the Trust. The current Head of School is Dr Damien Longson.

Consultants are expected to provide one hour of dedicated timetabled clinical supervision per week to support each of their trainees in achieving the competencies required from their placement. (Clinical supervision form part of Direct Clinical Care PAs).

Consultants are expected to attend the weekly academic meeting.

Educational supervision is provided by site tutors.

Some posts take on an active leadership role in education (Site Tutors, Associate Medical Director for Medical Education etc.) and there will be specific programmed activities. allocated for these roles.

## **16. Research**

There are excellent opportunities for clinical research in the Trust and in conjunction with the University. There are close links with the University of Manchester, the University of Central Lancashire and with the University of Salford. The Trust supports research and there are a number of academic appointments within the Trust.

Research is an increasing priority in the Trust, led by Deputy Medical Director Dr Chris Daly. The Trust's strategy is to support high quality research in line with Trust objective to give our service users high quality and effective care, empower service users and carers to be involved in their own care and recovery and encourage excellent and new ideas.

There may be opportunities, subject to qualifications and training and following negotiations with Associate Medical Director and Lead Consultant, for programmed activities to be set aside for research if, these complement and support the developments and direction of the Directorate.

The Trust is one of six key players in the Manchester Academic Health Science Centre. This is a formal relationship between the University and the Greater Manchester Teaching Hospitals to produce innovations in health research. Manchester University has a large research programme with strong links to GMMH Trust. There are many research programmes of international importance and there is a commitment locally to using research to strengthen local services.

## **17. Supervision and Wellbeing**

The successful candidate will be offered clinical and managerial supervision with the lead consultant every two months. Mentorship outside the division but within the trust is also possible if desired by the successful applicant. It is expected that the successful candidate will be an individually practicing clinician, but clinical supervision will always be available on an ad hoc basis by from the lead consultants within the division

The wellbeing of the staff in the division is a priority as set out in the divisions business plans each year. Occupational health support is available via line management and self-referral if required. Details of how to access OH is disseminated at induction to the trust. A schwartz round has been developed to support the staff in the emotional challenges of supporting patients. A post incident debrief can be arranged via trust psychology in the event of a serious incident.

The trust actively supports initiatives that promote wellbeing, including local mindfulness classes and team events such as meals and away days. Occupational therapy support is available through self-referral or via referral from management. Staff will always be proactively supported after any serious incidents by senior clinicians and the Post Incident Debrief Service

## **18. Contract agreement**

The post will be covered by the Consultant Terms and Conditions of Service (2003).

The starting incremental point will be decided by agreement based on prior experience at consultant level. Experience in other countries or in locum posts will be taken into account wherever possible.

Progression through the thresholds will be dependent upon satisfactory performance, as assessed through the job planning and appraisal mechanisms.

A satisfactory medical examination and health assessment is a condition of employment for medical and dental staff within the NHS. The appointment will be subject to medical clearance by the Trust Occupational Health Department and Disclosure and Barring Service (DBS) check.

## 19. Leave

Full timers are entitled up to 32 days (34 days for those with more than seven years' service in the consultant grade) annual leave, plus bank holidays, and up to 10 days of study leave per year. Part timers have pro rata leave. Study is calculated over a three year cycle.

Consultants are expected to provide prospective cover for colleague's leave by prior arrangement, usually one consultant colleague at a time with reciprocal arrangements.

## 20. Work Programme

It is envisaged that the post holder will work 6 programmed activities over 3 days. Following appointment there will be a meeting at no later than three months with the Head of Operations and Lead Consultant to review and revise the job plan and objectives of the post holder. The overall split of the programmed activities is 4.5 PA to be devoted to direct clinical care and 1.5 PA to supporting professional activities (as recommended by the Royal College of Psychiatrists).

A formal job plan will be agreed between the post holder and lead Consultant three months after commencing the post and at least annually thereafter.

## 21. Indicative Job Plan (Days of week may be subject to change dependent on Consultant/Service variables)

Day	Time	Location	Work	Category	No. of PAs
Monday	AM	Anson Road	Weekly service user review		
	PM	Anson road	MHA work		
Tuesday	AM	Anson Road	CPAs, ward reviews	DCC	1
	PM	Anson road	Supervision of staff, Audit Mandatory training		
Wednesday	AM	Anson Road	Admin Referrals meeting	SPA	1
	PM	Anson Road	CPD		

<b>Thursday</b>	AM	Non- working day	Non- working day	DCC	1
	PM	Non-working day	Non-working day		
<b>Friday</b>	AM	Non-working day	Non-working day		
	PM	Non-working day	Non-working day		
<b>Unpredictable/ emergency on- call work</b>			On call 1:23 pro rata	DCC	
<b>Total PAs</b>	Direct clinical care				2
	Supporting professional activities				1

## 22. Person specification

	ESSENTIAL	WHEN ASSESSED	DESIRABLE	WHEN ASSESSED
QUALIFICATIONS	MB BS or equivalent medical qualification.	Scr	Qualification or higher degree in medical education, clinical research or management.	SL
			MRCPsych OR MRCPsych equivalent approved by the Royal College of Psychiatrists. Endorsement in Rehabilitation Psychiatry	Scr
			Additional clinical qualifications.	SL
ELIGIBILITY	Fully registered with the GMC with a licence to practise at the time of appointment.	Scr	In good standing with GMC with respect to warning and conditions on practice	Scr
	Included on the GMC Specialist Register OR within six months.	Scr		
	Approved clinician status OR able to achieve within 3 months of appointment	Scr		
	Approved under S12 OR able to achieve with 3 months of appointment	Scr		
TRANSPORT	Holds and will use valid UK driving licence OR provides evidence of proposed alternative.	Scr		
CLINICAL SKILLS, KNOWLEDGE AND EXPERIENCE	Excellent knowledge in specialty	SL, AAC, Ref	Wide range of specialist and sub-specialist experience relevant to post within NHS or comparable service	SL, AAC
	Excellent clinical skills using bio-psycho-social perspective and wide medical knowledge	SL, AAC, Ref		
	Excellent oral and written communication skills in English	SL, AAC, Ref		

	Able to manage clinical complexity and uncertainty Makes decisions based on evidence and experience including the contribution of others	AAC  AAC		
	Able to meet duties under MHA and MCA	AAC		
ACADEMIC SKILLS AND LIFELONG LEARNING	Able to deliver undergraduate or postgraduate teaching and training	SL, Pres, AAC	Able to plan and deliver undergraduate and postgraduate teaching and training relevant to this post	SL, AAC
	Ability to work in and lead team	SL, AAC	Reflected on purpose of CPD undertaken	SL, AAC
	Demonstrate commitment to shared leadership and collaborative working to deliver improvement.	SL, AAC	Experienced in clinical research and/or service evaluation.	SL, AAC
	Participated in continuous professional development	SL, AAC	Evidence of achievement in education, research, audit and service improvement: awards, prizes, presentations and publications.	SL
	Participated in research or service evaluation.	SL, AAC		
	Able to use and appraise clinical evidence.	SL, AAC, Pres	Has led clinical audits leading to service change or improved outcomes to patients	SL, AAC
	Has actively participated in clinical audit and quality improvement programmes	SL, AAC, Pres		

#### Abbreviations for assessment

- Scr Screening prior o shortlisting
- SL Shortlisting from application form
- AAC Advisory Appointments Committee
- Ref References

Pres Presentation to AAC