

**Job Description and Person Specification**

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| **Post and Specialty** | **Consultant in Perinatal Psychiatry**  https://www.leicspart.nhs.uk/service/perinatal-mental-health-service/  This post arises due additional funding on a permanent basis | | | |
| **Royal College of Psychiatrists approval details:** | *Approval details to be completed by RCPsych*  **RCPsych Ref No: XXXXXXXXX**  *RCPSych to insert Approval Stamp* | | | |
| **DBS Level** | Enhanced DBS with Both Adults and Children’s Barred Lists | | | |
| **Base** | Westcotes Health Centre, Fosse Road South, Leicester LE3 0LP | | | |
| **Contract** | Permanent | | | |
| **No. of Programmed Activities** | Total PAs:10 | DCC:7.5 | | SPA: 2.5 |
| **Accountable professionally to** | Medical Director | | | |
| **Accountable operationally to** | Associate Medical Director for Mental Health | | | |
| **Key Working Relationships and lines of responsibility** | Director | | Tanya Hibbert | |
| Associate Medical Director for Mental Health | | Dr Samantha Hamer | |
| Clinical Director for AMH Community Services | | Dr Vesna Acovski | |
| Clinical Director for AMH community services | | Dr Sanjay Rao | |
| Line Manager | | Dr Vesna Acovski | |
| Responsible Officer | | Dr Bhanu Chadalavada | |
| Acting Medical Director | | Dr Bhanu Chadalavada | |
| Deputy Chief Executive | | Angela Hillery | |
| Deputy Chief Executive | | Jean Knight | |

**1. Introduction**

Leicester, Leicestershire, and Rutland (LLR) is rich in culture, heritage and leisure activities, from a vibrant multi -cultural city, to the market towns and rural settings and has a population of over 1 million.

Leicester is home to the state of the art Curve Theatre, as well as large and multi-cultural festivals. The City hosts an annual Pride Parade (Leicester Pride), a Caribbean Carnival, the largest Diwali celebrations outside of India and the largest comedy festival in the UK. The area features award-winning family attractions on your doorstep including Twycross Zoo, the National Space Centre, and Twinlakes Park. Discover Roman ruins, majestic castles and historic events, including the Battle of Bosworth re-enactment at Bosworth Battlefield; or visit the King Richard III visitor centre. Experience top high-street and designer shopping in Leicester or browse the markets in our market towns.

Our central location in the heart of the Midlands makes Leicester, Leicestershire, and Rutland accessible from all directions. It takes just 62 minutes to come to Leicester on a fast, direct train from London.



**Leicester**

**2. Who we are**

We (Leicestershire Partnership NHS Trust) are an integrated mental health, community health and learning disability services provider for all ages. Our 6,500 staff and volunteers provide services through over 100 in-patient and community settings, as well as in people’s homes, across Leicester, Leicestershire and Rutland.

Our collective vision is to create high quality, compassionate care and wellbeing for all –

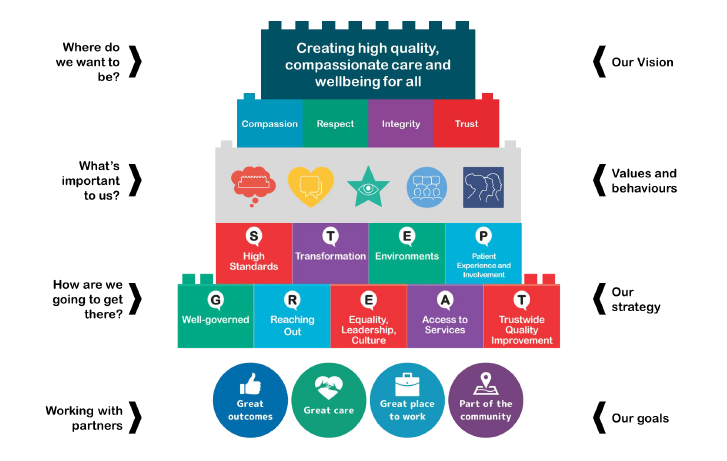
with quality and safety as our number one priority.

**Our strategy: Step up to Great**

Quality and safety for all is our number one priority. We have strengthened our vision and strategy, to make our direction of travel as clear as possible for everyone. This has been brought together using feedback from staff, service users and stakeholders to evolve our work so far into a clearer trust-wide strategy for all areas: Step Up to Great.

Through Step Up to Great we have identified key priority areas to focus on together. Our Step up to Great Mental Health plan for adult and older people’s services is one of these priority areas of transformation. It will be shaped by operational and clinical leaders, in collaboration with our staff, supported by the transformation team to ensure that we put these service improvements into practice over the coming few years. We are clear that by doing this it will help us achieve improvements in the quality and safety of our services. It is about making a real and sustainable difference for our patients and supporting our staff to deliver high standards of care every day.

LPT is also a teaching trust, conducting research and providing training and education for medical, psychology, nursing and therapy students. We work in partnership with a range of educational establishments such as University of Leicester, Demontfort University and Loughborough University to deliver effective pre and post-registration education and learning opportunities



‘Our Chief Executive, Angela Hillery, has worked within the NHS for over 30 years and has held a variety of leadership positions during this time.  She has worked in the NHS for over 30 years, taking up the leadership of Northamptonshire Healthcare Foundation Trust (NHFT) since 2013 and becoming chief executive of LPT since 2019 as a combined role. NHFT and LPT entered into a Group arrangement in April 2021 following a successful buddy relationship.

In March 2023, Angela was named the top NHS CEO in the country by the Health Service Journal (HSJ), having been listed in the HSJ Top 50 for three years prior to this. In June 2023, Angela was awarded a CBE (Commander of the Order of the British Empire) in the first King’s birthday honours list – the highest-ranking Order of the British Empire award, other than a knighthood or damehood.

Angela’s ethos is in her commitment to upholding values and developing compassionate cultures for those we care for and work with.

In 2018 and 2019 under Angela’s leadership, NHFT achieved an overall rating of ‘Outstanding’ from the CQC and also won the 2018 HSJ ‘Trust of the Year’ Award.  LPT is committed to continuous improvement, sharing learning, and adopting best practice.’

As an employee of Leicestershire Partnership NHS Trust, you can expect to receive an excellent benefits package, giving you access to a range of wellbeing opportunities and discounts on products and services. We have an occupational health service to support your health and wellbeing, staff physiotherapy service, confidential counselling service, mentoring for new Consultants, recognition awards for exceptional commitment and long service, corporate discounts for gym membership, health spa and much more.

**Our Leadership Behaviours: It starts with me**

Our leadership behaviours framework set the standards of expectation we aspire to in our daily work. Meeting these standards and developing the capability to exceed them, will not only ensure that we continue to improve and respond flexibly to changing needs as an organisation, but will also help our staff to fulfil their potential, both in terms of personal achievement and career advancement. Our leadership behaviours also promote compassionate conversations, respect and positive working relationships to enable us to support the wellbeing of our workforce, particularly following serious incidents.

The behaviours we expect to see at LPT are:

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See Appendix 1 for further information.

**3. Details of the service and team**

The post holder will be based in Leicester and will be expected to work across the maternity service sites situated at the LRI, Glenfield and General Hospitals, and out-patient work within agreed community settings.

**Service Overview**

The Perinatal Mental Health Team is a specialist secondary mental health team that provides assessment and treatment to women during their pregnancy and up to one year following the birth of their baby. This service is for women living in Leicester, Leicestershire and Rutland who are experiencing an episode of moderate to severe mental health difficulties that is in relation to their perinatal period.

More than one in ten women suffer from a mental illness during pregnancy or within the first year of having a baby. Some of these illnesses would have been present before pregnancy, while some will be new illnesses. It is important for these illnesses to be recognised and treated early.

The Perinatal Mental Health Team are a dedicated and well-established team; they have 3.2 Perinatal Consultant Psychiatrists a

The team will accept referrals from GP’s, Midwives, Health Visitors, CMHT’s, Mother and Baby Units, acute MH Ward referrals and from the Leicestershire Crisis Resolution Team.

The service offers;

* Pre-Conceptual advice
* Outpatient Clinic with a Consultant Psychiatrist/Junior Doctor
* Antenatal Nurse Led Clinics
* Community home visits Ward Referrals for the two main birthing units in Leicester, the Leicester Royal Infirmary and the Leicester General Hospital who have approximately 12,000 births per annum
* Triage assessments at the UHL MINT clinic (x 2 per week at Royal / General)
* Joint work with Locality CMHT’S and Crisis Resolution Team
* Commissioned MBU Beds in Nottingham and Derby

There is a Perinatal Video available to all members of the public that provides an overview of the service. This is complemented by a Service Information leaflet and Nurse Led Clinic information leaflet.

The team will be divided in North and South with equal distribution of medics.

The post holder would be expected to see up to 3 new patients and up to 12 follow ups per week and urgent assessments for the perinatal team as part of having a week on call. This is separate from consultants on-call rota.

**Aims of the Service**

The aims of the service are:

* To provide psychiatric treatment and support to women in Leicester, Leicestershire and Rutland who develop severe mental illness during pregnancy or following delivery of their babies.
* To provide support to women until their babies are two years old.
* To provide pre-conceptual care for women who have pre-existing severe mental illness and care for women who are at risk of developing serious mental illness following delivery.

**Assessment and Treatment**

* The Perinatal Multidisciplinary Team provides a range of evidence based assessment options. The Outpatient Team hold clinics and provide ad-hoc clinics when necessary. The Nurse Led Clinics are held every Wednesday and provide ad-hoc clinics when necessary.
* The Perinatal waiting list management is delivered by the team operating from Westcotes Health centre, Leicester. The team will aim to ensure inappropriate referrals are forwarded to alternative services that best match the needs of the referred patient within the LPT timelines.
* All referrals will be dealt with professionally and the patient will be treated with dignity and respect, with their health, safety and welfare being of paramount importance, while working to ensure a smooth progression of care.
* The Specialist Community Perinatal team, run two nursing staff to attend the scheduled twice per week MINT Clinic, held at the two maternity units at UHL (LRI and LGH). The consultant may also attend joint clinics as required for provision of joint care for complex patients.

Hybrid working with time a the physical CMHT base can be supported. We have trialled current consultants working remotely and have developed the infrastructure needed to support this model of care.

**COMMUNITY TEAM STAFFING**

|  |  |  |
| --- | --- | --- |
| **Community Team** | **Perinatal Mental Health Team** | |
|  | Admin team: Band 4  Band 3  Band 2 | 1 wte |
| 2 wte |
| 2 wte |
|  | Senior Clinical Leads | 4 wte |
|  | Mental Health Practitioners | 12 wte |
|  | Occupational Therapists | 1.85wte |
|  | Clinical Psychologists | 9.33 wte |
|  | Recovery Workers | 1 wte |
|  | Nursey Nurses | 5.6 wte |
| **Junior Doctor Support** | Consultants within the Perinatal team have the opportunity to act as supervisors for junior doctors who can undertake 1-2 supervised clinics per week with the team. The post holder will also be able to submit a job description for a higher training post and will be able to act as supervisor for a higher trainee in the team. | |

Plans for additional Nurse Prescribing clinics to support the CMHT is in progress.

**4. Clinical Duties**

The post holder will be required to work in partnership at both strategic and operational levels with relevant and external stakeholders. The post holder will need to ensure that people who use services, carers and advocates are treated with respect and dignity

* Provide clinical leadership to the MDT responsible for the Consultant's agreed area.
* The Consultant has a continuing responsibility for the care of patients and for the proper functioning of the department. The consultant will liaise with the General Practitioners, hospital and community specialists and other agencies wherever relevant.
* The Consultant will also undertake the administrative duties associated with the care of patients and the running of the clinical department, including the prioritisation of the case load according to need.
* The appointee will be responsible with the other consultants and other professional colleagues for the provision of a comprehensive perinatal mental health service to the district.
* The post holder, who needs to be Section 12 approved under the Mental Health Act, will join the consultant non resident on-call rota which works at the frequency of no less than a one in nine. On Call duties are from 9am to 9am on weekdays and 9am Saturday to 9am Monday on weekends.
* There is a separate daytime (Mon- Fri) perinatal consultant duty rota; this is a weeklong duty (or pro-rata for LTFT) where the consultant is available for urgent assessments in UHL, LPT and the community. The consultant on duty on-call is also expected to provide advice to various professionals and liaise with all necessary services. During this time on-call, the consultant focuses on urgent work only with no routine activities. The occurrence of this duty on-call is 1 in 3 within the perinatal medical team.
* The consultant will contribute to the development of clinical expertise for the benefit of patients and the Service as a whole.
* The post holder will participate in training, teaching, and supervision, as applicable.
* Active participation in clinical research, audit and continuing professional development will be encouraged.
* The post holder will be responsible for offering expert advice on clinical issues, together with the maintenance of long-term case work with individual patients if this is appropriate
* The post holder will participate in the Consultant Appraisal process and fulfil professional requirements for Continuous Professional Development (CPD).

**Specific Perinatal Responsibilities**

* Understanding of the normal psychological changes that take place in pregnancy and in the early postnatal period, in relation to identity, becoming a parent, couple relationship and the developing relationship with the infant from pregnancy onwards.
* Understanding of psychopharmacokinetic and psychopharmacodynamic alterations occurring in pregnancy, the early puerperium and in breastfeeding.
* Understanding of physical problems which may arise during the patient journey through pregnancy and the puerperium, including the physiology and complications of childbirth.
* Understanding of legislation and guidance in relation to child protection and welfare.
* Understanding of embryology, foetal and early infant development.
* Understanding of the normal mother–infant relationship and its development through early childhood.
* Understand the prediction, prevention, detection and management of mental disorder in pregnant and postnatal women, the interrelationship between mental disorder and pregnancy and the postpartum period, and the wider effects of mental disorder on child development and the mother–infant relationship.
* Diagnose and formulate management plans in complex cases, including decisions on prescribing in pregnancy and breastfeeding.
* Assess and manage risk, including suicide risk, in relation to the pregnancy, and risk to children. Deliver care which responds to maternity time scales.
* Provide prescribing advice on psychotropic medication in pregnancy and breastfeeding to women and their families, general psychiatry, maternity and primary care services.
* Provide expert assessment of the mother–infant relationship in the context of acute maternal mental disorder.
* Understanding of policies and national guidelines relating to perinatal psychiatry, and maternal and child health, including those from the Maternal Deaths Enquiry, NICE, Scottish Intercollegiate Guidelines Network (SIGN), and relevant government strategic policy documents.
* Work in a collaborative way with other psychiatric services, maternity services, primary care, health visiting and childcare social work to ensure optimum outcomes for the patient and her child.
* Work by involvement of the woman, and her family where appropriate, as an active partner in treatment, including facilitation of the patient’s ability to make informed decisions about her care and the welfare of her pregnancy/child.

**Specific Leadership responsibilities**

* Awareness of service specification framework and commissioning guidelines as these develop. Leading on the process of revision and accreditation of own and other perinatal services, in accordance with national guidelines.
* Skills in the participation in, and responsibility for, clinical governance activities, including audit of practice in relation to other perinatal specialist services, and encouraging and supporting colleagues in their participation. Liaising with health commissioners and providers to promote an understanding of the epidemiology and needs of the patient group, including updates in evidence-based practice, to inform service development and delivery.
* Advocating for the mental health needs of pregnant and postnatal women and for the promotion of infant health and development in the context of maternal mental illness.
* Developing partnerships between agencies involved in the care of pregnant and postnatal women who experience mental disorder, including primary care, health visits, maternity services, childcare social work, general psychiatry, and the voluntary sector.
* Develop and extend links with East Midlands Perinatal Psychiatry Network, which includes Perinatal Consultants from other local services and actively involve in quality improvement of the service based on evidence.

**5. Job Plan and Timetable**

The precise configuration of activities and duties will need to be negotiated between the post holder and the Clinical Director.

Provisional assessment of Programmed Activities (PA’s) in Job Plan:

Direct Clinical Care:

Out-patients clinics x3 3 PA’s

Urgent/ad hoc clinic/clinical work 1 PA

Referral/allocation meetings 1 PA

MDT meeting 0.5PA

Associated clinical admin and Clinical supervision 2 PA

Supporting Professional Activities:

CPD, administration, research, medical audit 2.5 PA’s

**Total 10 PA’s**

**Perinatal Internal rota during normal working hours:**

There is separate perinatal consultant on-call rota; this is a weeklong duty (pro-rata for LTFT) where the consultant is available for urgent assessments in UHL, LPT and the community. The consultant on-call is also expected to provide advise to various professionals and liaise with all necessary services. During this on-call time, the consultant focuses on urgent work only with no routine activities. The occurrence of this on call is 1 in 3 (or 4) depending on medics’ availability in the team.

**On-Call duties:**

A separate availability supplement will be payable for on call duties, which are currently based on a rota of no more than 1:9 frequency. The availability supplement will be 3% (category A).

There are five Consultant on call rotas to cover Adult East, Adult West, Old Age, CAMHS and Learning Disabilities. There are also two StR rotas and four junior doctor rotas for out of hours provision. The post holder would be allocated to either the Adult East or the Adult West on call rota.

The following specimen timetable illustrates how the consultant timetable may be arranged

within the current framework (subject to negotiation)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Day** | **Time** | **Location** | **Work** | **Category** | **No. of Pas** |
| **Monday** | AM | Westcotes Health Centre | Outpatient clinic – new patient and follow ups/Supervision | DCC | 1 |
| PM | Westcotes Health Centre | Administrative work including Telephone liaison with GP’s and other professionals | DCC | 1 |
| **Tuesday** | AM | Westcotes Health Centre | Outpatient Clinic – new patient and follow ups | DCC | 1 |
| PM | Westcotes Health Centre | MDT  SPA time | DCC  SPA | 0.5  0.5 |
| **Wednesday** | AM | Westcotes Health Centre | Urgent clinic/ad hoc clinical work | DCC | 1 |
| PM | Westcotes Health Centre | Referral meeting | DCC | 1 |
| **Thursday** | AM | Westcotes Health Centre | Outpatient clinic – new patient and follow ups | DCC | 1 |
| PM | Westcotes Health Centre | Administrative work including Telephone liaison with GP’s and other professionals | DCC | 1 |
| **Friday** | AM | Westcotes Health Centre | SPA | SPA | 1 |
| **Friday** | PM | Westcotes Health Centre | SPA | SPA | 1 |
| **Unpredictable / emergency on- call work** |  |  |  |  |  |
| **Total Pas** | Direct clinical care | | | | 7.5 |
| Supporting professional activities | | | | 2.5 |

A formal job plan will be agreed between the appointee and the Clinical Director three months after the commencement date of the post holder. The job plan will then be reviewed annually, following the Appraisal meeting or more frequently when there are changes in regard to the pre-agreed workload. The job plan will be a prospective agreement that sets out a consultant’s duties, responsibilities and objectives for the forthcoming year. The appointee to the post will be supported in arranging an appropriate and suitable mentor.

**6. Management Duties**

* There are no formal management or leadership responsibilities attached to this role but the Trust is keen that Consultants are supported to take on additional key roles and become involved within LPT, dependent on interests and skills. Examples of such roles include Medical Quality Leads, Named Doctor for Adults/Children’s Safeguarding, Suicide Prevention Medical Lead, e-Prescribing Lead and a variety of educational roles.
* The post holder will be required to work with consultant colleagues to arrange prospective cover during periods of planned absence, including reciprocal cover duties.
* The post holder is expected to be actively involved with clinical governance within the service and Trust.
* The post holder will participate in service evaluation and information gathering exercises designed to gain a better understanding of the functioning of the service in order to monitor performance and underpin future service development.

**7. Secretarial support and office facilities**

There will be dedicated secretarial/administrative support for the medical team (consultant and junior medical staff) supported by a team administrative structure.

The post holder will have access to designated private office space which will be equipped with appropriate information and communications technology to include access to Trust clinical systems. The post holder will be provided with a personal computer and/or laptop and mobile telephone.

Support will be provided for any mobile working as appropriate with technical support provided by the Leicestershire Health Informatics Service.

**8. Education – Teaching and Training**

Leicestershire Partnership NHS Trust is a teaching organisation. The Director of Medical Education is Dr Srinivas Suribhatla. The Trust has a dedicated Education Centre near to the Bradgate Mental Health Unit on the Glenfield Hospital site.

There are plenty of opportunities for candidates interested in undergraduate or postgraduate teaching. There are also opportunities for the successful candidate to contribute to the education of students in other professions. There is an active postgraduate training programme in place for trainees.

The 2013 GMC Good Medical Practice document (Domain 3 teaching, training, supporting and assessing 39-43) clearly states that all doctors should be willing to contribute to teaching, training, appraising and assessing doctors and students because these activities are fundamentally important to current and future patient care. LPT is a teaching Trust and Consultants will normally have undergraduate medical students placed with them during clinical duties and are expected to teach alongside clinical service work as part of their duties with time embedded in Direct Clinical Care (DCC) activities to undertake this role.

Medical students based at the University of Leicester follow a standard 5 year programme. . Both ward and outpatient based clinical teaching, as well as tutorial and lecture style teaching is undertaken.

In addition some consultants will undertake additional undergraduate teaching duties which will be recognised as part of their SPA allowance (up to 0.5 PA) and recorded in their job plan**.** They will be recognised as Clinical Teachers where they meet the required criteria.

This teaching can occur in different settings. The clinical teacher will be expected to show evidence of satisfactory performance in this role at appraisal.

**9. Continuous Professional Development (CPD)**

Newly recruited Consultants will attend the mandatory Trust induction and be provided with a local induction within the Service. The Trust encourages new consultants to work with a mentor and will support consultants with this.

It is expected that the post holder will become a member of a PDP support/supervision group, and will take part in appraisal, and be in good standing for CPD with the Royal College of Psychiatrists. The post holder will have access to study leave, and funding for appropriate courses, as agreed by the Trusts’ Study Leave Committee.

Each consultant will have access to funds within the medical educational and professional leave budget and there is an allowance of 30 days over a three-year period to support CPD. The Trust study leave fund and policy is managed by the Medical CPD Committee to include Consultant reps from each service area.

**10. Research and Development**

LPT considers research to be core business for the organisation, and is committed to providing opportunities to both develop, host and collaborate in high quality research as a key driver in improving patient care and outcomes and to help us “Step Up To Great”. The Trust is a “Category A” partner organisation of the NIHR Clinical Research Network, and as such, is obligated to support NIHR Portfolio research where the capacity exists to do so. This often means working with national and international partners as Sponsors, with funding from both commercial and non-commercial agencies. The Trust is also actively participating in the NIHR East Midlands Applied Research Collaborative (ARC), and the NIHR Academic Health Sciences Network (AHSN) as well as local initiatives such as the Leicestershire Academic Health Partnership (LAHP), and the Leicester Centre for Mental Health Research (LCMHR). The expectation is that staff from all disciplines will engage with research at some level, and these partnerships enable us to facilitate such opportunities.

Since the establishment of the research delivery team in 2008, we have enabled over 11,000 participants to take part in these major, portfolio studies. The delivery team and R&D Office are co-located at Swithland House, which has facilities such as interview/meeting rooms, a clinic room, a developing small laboratory space with access to -80 Freezers, centrifuge, ECG etc. The R&D Office and staff support the development of grant applications (in alliance with the NIHR Research Design Service), research training, guidance through research regulation and so on. We encourage research across all clinical and non-clinical settings and disciplines.

The Trust is keen to see the development of further research “beacons” or centres of excellence, to build upon a track record of work in Huntington’s Disease, Dementia, Eating Disorders, CAMHS, Intellectual Disability and so on.

Research and development is explicitly supported in the Trust objectives and clinical strategy.  The Medical Director is the executive lead for research.   The Trust has strong links with all the regional universities (Leicester, De Montfort and Loughborough) and proactively supports Clinical Academic Career pathway developments for all professional groups.  There is a monthly LPT wide research forum, regular themed research workshops to encourage and support clinical research and regular communications of research opportunities.

**11. Quality Improvement in LPT**

Quality Improvement (QI) is a key ‘Step Up To Great’ element within LPT and we are committed to being at the forefront of QI nationally. To do this we need engaged advocates of QI within every level of our staff.

Our six key principles in QI are: one shared approach; improving knowledge and skills; working in partnership; strengthening continuous improvement; sharing good practice; and data for measurement.

Besides the Improvement Knowledge Hub (IKH) Core Team (including an Expert by Experience), we have a wider community of Advisors and Champions drawn from specialties and areas across the Trust; and Sponsors who are from Trust Board level, and who include our Medical Director and Chief Nurse.

We are developing knowledge and skills across the Trust: we have established learning sessions, with a graduated approach from our ‘Quality Improvement in a Box’ series (of interest to all within the Trust), to our annually funded place on the University of Leicester’s Master’s in Quality and Safety in Healthcare.

All potential projects, whatever their methodology, are brought to our weekly IKH Design Huddle, where they are considered by a team of Advisors, including representation from R&D, Patient Involvement, and Governance. In this way, we seek to enhance prior to commencement by signposting to further interested individuals, supporting with resource, and underpinning with online platforms and data collection tools. Once established in this way, projects are encouraged throughout their implementation journey, with a view to publication.

Working with colleagues across LLR we run an annual conference and one-off Masterclasses, with international speakers. We encourage the sharing of good practice at these events, and the presentation of locally grown QI projects.

We have strong links with colleagues from the University of Leicester and the master’s course, and we encourage students on placements in all disciplines to consider undertaking and participating in QI projects of interest.

**12. Appraisal and Revalidation**

All Consultants will maintain appropriate records such that the General Medical Council will grant successful revalidation of fitness to practice at the appropriate time. All consultants are expected to participate in annual appraisal and to undertake a 360° appraisal on a five yearly cycle.

The Trust has a large number of trained appraisers and the Associate Medical Director for Medical Governance, Dr Saquib Muhammad is the Trust appraisal and revalidation lead. The Responsible Officer is the Medical Director.

Education roles are included in the annual NHS appraisal.

**13. Health and Safety**

It is the duty of all employees of the Trust to ensure that a safe working environment and safe working practices are maintained at all times. Any specific duties you are required to fulfil as part of the job you are employed to undertake will be detailed as part of your job description. All employees must comply with the duties imposed on them by the Health and Safety at Work Act 1974, i.e.

* To take responsibility for the Health and Safety of themselves and of other persons who may be affected by their acts or omissions at work.
* To co-operate with their employer as far as is necessary to meet the requirement of the legislation.
* Not to intentionally or recklessly interfere with or misuse anything provided in the interest of health and safety or welfare.

These duties apply to all staff whenever and wherever they are engaged on Trust business.

**14. Terms and Conditions of Service**

The post is covered by the Terms and Conditions of Service for Consultants (England) 2003 as amended from time to time. The following is a summary of the main terms and conditions together with the benefits of joining Leicestershire Partnership NHS Trust.

**Salary:** The commencing salary and subsequent progression through the pay thresholds will be in accordance with schedule 14 of the terms and conditions of service for Consultants (England) 2003. The first pay threshold from 1 April 2024 is £105,504 per annum.

**Annual Leave:** Entitlement will be 32 days per annum for whole time Consultants, increasing to 34 days on completion of 7 years’ service as a consultant. In addition, there is entitlement to 8 Public/Bank Holidays. For consultants contracted to work less than 10 PAs per week, annual leave, including Public/Bank Holidays will be calculated pro rata.

Consultants are expected to provide cover for colleagues for leave and other authorised absences from duty upon a mutually agreed basis.

**Work Life Balance:** The Trust is committed to ensuring that staff are able to achieve a balance between the demands of work and their domestic, personal and family circumstances. We have a range of policies to support this including flexible working, special and compassionate leave, agile working and career breaks.

**Well-being:** Health and well-being support is available to all LPT staff in a variety of forums and formats. Health and well-being activities take place throughout the year with focus on different areas – alcohol awareness, health eating, psychological well-being, menopause, anti-bullying, looking after our carers, social well-being etc. The post holder will have access to the Leicester based occupational health department and may self-refer or be referred through their manager. The post holder will also have access to free counselling services and a staff musculoskeletal physiotherapy service. Information will be provided at induction and regularly when in post.

**Sickness Absence:** The Trust has in place an Attendance Management Policy. Consultants that are absent from work due to sickness will be entitled to sick pay in accordance with Schedule 18 of the Terms and Conditions of Service.

**Relocation Expenses:** The post holder will be required to maintain his/her private residence in contact with the public telephone service and to reside within a distance of 40 minutes or within 25 miles by road from their base unless prior specific approval for a greater distance is given by the Trust. A removal expenses package may be payable to the successful candidate.

**Travelling Expenses:** The post holder must be able to undertake local travel to fulfil the duties of the post and must be able to fulfil on call responsibilities. Travelling, subsistence and other expenses incurred through work will be reimbursed in accordance with Schedule 21 of the Terms and Conditions of Service. Expenses do not form part of Consultant’s pay and are not pensionable.

**Registration:** The Trust requires the Consultant to have and maintain full registration with the General Medical Council and advises medical staff to continue membership of a Medical Defence Organisation or private insurance scheme.

**Rehabilitation of Offenders Act:** The post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order Act 1974. Applicants are therefore not entitled to withhold information about convictions which for other purposes are ‘spent’ under the provisions of the Act and in the event of employment any failure to disclose such convictions could result in dismissal or disciplinary action by the Trust. Any information given will be considered only in relation to an application for positions to which the Order applies. The appointment will also be subject to completion of a satisfactory health screen.

**Policies and Procedures**

All staff should comply with the Trust’s Policies and Procedures. It is the employee’s responsibility to ensure that they are aware of the relevant Policies and Procedures for their area of work. Key Policies and Procedures will be explained as part of local induction arrangements.

**Coronavirus Regulations**

The Health and Social Care Act 2008 (Regulated Activities) (Amendment) (Coronavirus) Regulations 2021 (the Regulations) require all staff working in care homes to be up to date with their COVID vaccination status from 11 November 2021. If these Regulations are relevant to the role that this post relates to, you will be required to provide evidence that your COVID vaccination status is up to date unless you have a valid exemption.

**Safeguarding Children and Adults**

The Trust takes the issues of Safeguarding Children and Adults and addressing domestic violence very seriously. All employees have a responsibility to support the Trust in its duties by adhering to all relevant national and local policies, procedures, practice guidance and professional codes; promptly reporting any concerns to the appropriate authority in line with safeguarding policy and guidance; attending mandatory training on Safeguarding children and adults; being familiar with individual and the Trust’s requirements under relevant legislation.

**Mental Capacity Act**

All clinical staff will be aware of their responsibilities under the Mental capacity Act and will ensure that assessment for Deprivation of Liberty Safeguards is in place for any patient that is deemed to lack capacity to consent to their care and treatment.

**Making Every Contact Count**

All staff are positively encouraged to contribute to improving health for themselves, their patients, service users and colleagues. This happens when, in everyday contact, the opportunity is taken to raise the subject of choosing better health by stopping smoking, reducing alcohol intake, eating more healthily, and becoming more active. The Trust’s Making Every Contact Count programme has further information.

**Data Protection**

In line with national legislation, and the Trust’s policies, you must process all personal data fairly and lawfully, for the specific purpose(s) it was obtained and not disclosed in any way incompatible with such purpose(s) or to any unauthorised persons or organisations, unless a lawful exemption applies.

The post holder must be familiar with and comply with the Trust Policies on Data Protection, Confidentiality and Information Security and requests for personal information.

The post holder must be familiar with and comply with the General Data Protection Regulations 2018 and the Data Protection Act 2018.

Personal Data must be:

* Processed fairly and lawfully.
* Processed for specified purposes.
* Adequate, relevant, and not excessive
* Accurate and kept up to date.
* Not kept for longer than necessary
* Processed in accordance with the rights of data subjects.
* Protected by appropriate security.
* Not transferred outside the EEA without adequate protection

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| **Confidentiality**  The Trust attaches the greatest importance to patient confidentiality and to the confidentiality of personal health data, personal data and other data held and processed by the Trust.  All data should be treated as confidential and should only be disclosed on a need-to-know basis.    Some data may be especially sensitive and is the subject of a specific organisation policy, including information relating to the diagnosis, treatment and/or care of patients and service users, as well as individual staff records.  Under no circumstances should any data be divulged or passed on to any third party who is not specifically authorised to receive such data.  In addition, staff must not access personal information unless authorised to do so as part of their role.  Due to the importance that the organisation attaches to confidentiality, disciplinary action will be considered for any breach of confidentiality.  All members of staff are expected to comply with national legislation and local policy in respect of confidentiality and data protection.  With the increased use of information technology and e-communications, staff should also be aware that safeguards are in place to protect the privacy of individuals when using this mechanism, both inside and outside of work. This includes the use of social media i.e., Facebook, Twitter, Snapchat etc. Where privacy is breached disciplinary action will be considered.  All employees should be mindful of the seven Caldicott principles when dealing with person identifiable information.   1. Justify the purposes of using confidential information. 2. Only use it when absolutely necessary. 3. Use the minimum that is required. 4. Access should be on a strict need to know basis. 5. Everyone must understand his or her responsibilities. 6. Understand and comply with the law. 7. The duty to share information can be as important as the duty to protect patient confidentiality.   If there is any doubt whether or not someone has legitimate access to information, always check before you disclose. |
| **Equality, Diversity, and Inclusion**  We aim to design and provide services and employment practices that meet the diverse needs of our service users and staff, ensuring that none are placed at a disadvantage over others. You will be expected to take into account the provisions of the Equality Act 2010 to advancing equal opportunity. You must act in your role to ensure that no one receives less favourable treatment due to their protected characteristics i.e. age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (gender) or sexual orientation.  In carrying out its functions, you must have due regard to the different needs of different protected equality groups in their area. |
| **Infection Control**  All employees have a responsibility to protect from infection themselves and other people, whether they be patients, other staff or visitors, as well as making all reasonable effort to reduce or prevent the risk of infection in their working environment. All staff have a duty to make themselves familiar with and comply with Infection Prevention and Control Policies and Procedures, carry out duties required by legislation such as the Health and Social Care Act 2008 (updated 2015) (and subsequent legislation), and to attend mandatory training relating to infection prevention and control. |
| **Counter Fraud**  Staff are expected to report any incidences of potential fraud to the Counter Fraud Helpline on 0800 028 40 60. |

**Smoking at Work**

The Trust has a “Smoke Free Policy”, which applies to:

* All persons present in or on any of the Trust grounds and premises.
* All persons travelling in Trust owned vehicles (including lease cars) whilst on official business.
* Privately owned vehicles parked on Trust grounds or when transporting Service Users, Visitors on official Trust business.
* When wearing an NHS uniform.

The post holder may be required to work at any of the other sites within LPT subject to consultation. LPT has to continually modify and improve its service. This will inevitably mean that modification of structures and thus job descriptions may prove necessary. The post holder will be expected to co-operate with changes, which the Chief Executive may wish to introduce, subject to consultation.

**15. Visiting Arrangements**

Candidates are actively encouraged to discuss the post or arrange to visit the Service by contacting the following in the first instance.

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| Dr Vesna Acovski  Consultant Psychiatrist  Clinical Director  Email: Vesna.Acovski@nhs.net | Helen Perfect  Head of Service or Rosie Klair, Service Manager on rosie.klair@nhs.net |

**APPENDIX 1**

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**LPT’s Behaviour Framework**

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|  | **Valuing one another**  We communicate with kindness and respect, valuing everyone’s contribution. |
|  | **Recognising and valuing people’s differences**  We respect everyone equally by helping to create a community that demonstrates unconditional positive attitudes, where people feel they belong, are valued, empowered and proud to work at LPT |
|  | **Working together**  We are supportive, appreciative and encouraging of each other, enabling a positive team spirit which gives the best outcomes for colleagues and patients. |
|  | **Taking personal responsibility**  We give out best at work to deliver the highest standard. |
|  | **Always learning and improving**  We embrace change and actively seek opportunities to keep improving. |

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**APPENDIX 3**

**University of Leicester**

**College of Life Sciences** http://www2.le.ac.uk/colleges/medbiopsych

***Pro Vice-Chancellor, Head of College and Dean of Medicine:***

Professor Thompson Robinson BMedSci MD FRCP FESO.

The University of Leicester, with Leicestershire Partnership NHS Trust, is committed to enhancing the partnership between academia and the NHS in Leicester, Leicestershire, Rutland, and the wider geographical area.  A strong synergy between our organisations is the key to success. Major contributions made by consultant colleagues to the academic mission through research, teaching and education, clinical leadership, enterprise and innovation are recognised by the award of a range of honorary titles from Honorary Fellow through to Honorary Professor.

The mission of the College of Life Sciences is to pursue the highest standards of research, education and training in biomedical and related subjects, and to apply this knowledge and expertise to enhance the quality of life and economic prosperity of populations, both locally and in the wider world. Its considerable academic resources mean that it is widely recognised for its world-leading and internationally excellent research and the quality of its undergraduate and postgraduate teaching.

Based in some of the newest purpose-built and modern facilities in the UK, the College offers a wide range of courses and education in the areas of laboratory, clinical, and population health through the provision of innovative education and globally recognised research. The George Davies Centre is the largest investment in medical teaching and applied research by a UK university in the last decade. Building on the foundations laid at the inception of the medical school in 1975, the College provides an academic and physical environment to enable scientists and clinicians to work together across traditional boundaries to address some of the key outstanding questions in biomedical research, and to engage with increasing effectiveness with commercial and public bodies. We are a thriving community of academic expertise based in laboratory, clinical, health and social science settings.

The high calibre of our academic endeavour is increasingly being recognised, with the latest Research Excellence Framework (REF2021) ranking the University of Leicester 2nd for Clinical Medicine (UoA1), with 95% of our submission ranked world-leading (4-star) or internationally excellent (3-star).  In addition, we were also the 2nd highest rated institution for Sports and Exercise Sciences (UoA24). These results have had a significant impact on our international and national standing; Leicester was ranked 18th (of almost 3,000 medical schools) in both the 2021 and 2022 Shanghai World Ranking, and 5th in the UK (the highest rank for Clinical Medicine outside of the Golden Triangle). In addition, Medicine was ranked 7th in the Complete University Guide 2023; a rise of 18 places.

The College comprises a matrix structure of four Research Departments: Cardiovascular Sciences, Genetics and Genome Biology, Molecular and Cell Biology, Population Health Sciences, Respiratory Sciences; two Teaching Schools: Leicester Medical School, School of Biological Sciences; and two combined Research and Teaching Schools: School of Healthcare and School of Psychology and Vision Sciences.

The University Strategy recognises the Mission of the University as ‘diverse in our make-up and united in our ambition, we change lives through education and research’. Our vision is to provide inspiring education and research working in partnership with our communities to become a truly inclusive theme. Our strategy consists of three themes, World-Changing Research, Research-Inspired Education and Our Citizens, underpinned by our three values of: ***Inclusive***, diverse in our makeup and united in ambition; ***Inspiring***, passionate about inspiring individuals to succeed and realise their ambitions; and ***Impactful***, as Citizens of Change we generate new ideas which deliver impact and empower our community

**World-Changing Research**

The University’s institutional research strategy emphasizes our commitment to research that informs and enhances our teaching and learning, and is underpinned by the core values of excellence, rigour, originality and integrity. A key part of this strategy was the establishment of flagship interdisciplinary Research Institutes, Centres and Networks. We host a number of these within our College around which much of our research is now focused. These include two Institutes: Leicester Institute of Structural and Chemical Biology (Led by Prof John Schwabe) and the Leicester Institute for Precision Health (led by Professor Chris Brightling); and nine Research Centres: Centre for Cancer Research, Centre for Diabetes Research, Centre for Microbial and Infectious Disease, Centre for Environmental Health and Sustainability, Centre for Phage Research, Centre for Lifespan Health and Wellbeing, Centre for Fibrosis Research, Centre for Sarcopenia and Muscle Research, and Centre for Population Health.

The NIHR Biomedical Research Centre (BRC) is a collaboration between the University of Leicester, the University of Loughborough, the University Hospitals of Leicester NHS Trust and the University Hospitals of Northamptonshire NHS Group. A recently awarded expanded BRC with six themes has received a 2.5-fold increase in funding, and brings together the work of: Cardiovascular; Respiratory and Infection; Lifestyle; Personalised Cancer Prevention and Treatment; Environment; and Data innovation for Multiple Long-Term Conditions and Ethnic Health.

The College’s central provision in support of research and teaching includes a Preclinical Research Facility, Core Biotechnology Services (covering bioinformatics, imaging technologies and protein and DNA facilities); a Central Technical Service (supporting teaching laboratories); a Clinical Trials Unit, and the Leicester Drug Discovery and Diagnostics Centre.

The College continues to grow funded research activity with a dual approach of encouraging individuals to win project grants and personal fellowships, and supporting teams to achieve major awards with large strategic initiatives. Examples of Leicester’s infrastructure success include: an NIHR Biomedical Research Centre, an NIHR Global Research Centre, an NIHR Patient Recruitment Centre, an NIHR Applied Research Collaboration (ARC), an NIHR Clinical Research Facility, an Experimental Cancer Medicine Centre, an MRC Impact Accelerator Account, an MRC Midlands Cryo-Electron Microscope Facility, the Midlands Health Data Research UK Substantive Site, a British Heart Foundation Research Accelerator Award, and a Wellcome Doctoral Training Programme for Health Care Professionals.

We are responding to the rapidly changing national and international research landscape that places an increasing emphasis on interdisciplinary and impactful research. For this purpose, we are working closely with our key NHS and other partners, University Hospitals of Leicester NHS Trust, Leicestershire Partnership NHS Trust and University Hospitals of Northamptonshire NHS Group, West Anglia NHS Foundation Trust and LOROS (Hospice Care for Leicester, Leicestershire and Rutland), and growing our industrial engagement with biotech companies and pharma to meet the goals of the Government’s Industrial Strategy and Life Science Sector Deal. In addition, we are building exciting research programmes with partners in overseas countries through the Global Challenges Research Fund. We are also very conscious of the need to play to our institutional and regional strengths, and are engaging closely with Leicester City and County Councils, and the Midlands Health Innovation network of regional Universities.

**Research-Inspired Education**

Our ambition is to deliver a world-class, discovery-led and discovery-enabling learning experience in all teaching. There are programmes in Medicine and a growing range of healthcare professions including Midwifery with Leadership, Nursing with Leadership, Operating Department Practice, Physiotherapy and Radiography; a new Clinical Pharmacy course is also planned.

A new more patient-centred undergraduate curriculum in Medicine was launched in 2016 with long ‘apprenticeship-style’ placement blocks developing student skills as they enter the clinical phase of our course. We are particularly proud that our course has for many years delivered doctors who progress. We have been ranked third in UK medical schools for progression to Core & Specialty training over the past five years.

The course features:

A clinical focus throughout underpinned by excellence in bioscience, and access to one of the largest dissection suites in the UK;

Early clinical experience including a new Healthcare Assistant (HCA) programme in year one;

A strong group-work provision supporting student learning throughout the course;

A wide range of hospital and GP placements with many areas of national excellence;

Excellent intercalated degree opportunities, with particular strengths in our iMSc in Research and a new Masters in Clinical Education; and

Foundation Assistantships in year 5 which has enhanced our graduates preparedness for work as a Foundation doctor

We are also proud of our work widening participation to medicine, and have developed an excellent Medicine with Foundation Year MB ChB which was launched in 2017. This recruits 35 students to an integrated Foundation Year enabling progression onto Year 1 of the MB ChB course. Since 2020, we also have an international joint educational partnership with the Chongqing Medical University, where students gain a Clinical Medicine degree in China and a Bachelor of Sciences in Clinical Sciences from the University of Leicester; spending a year of their course at Leicester.

The Stoneygate Centre of Excellence in Empathic Healthcare was launched in 2022, following a major philanthropic donation to the University. The Centre will be a flagship institute and be world-leading: in the development and delivery of transformational empathy training; in establishing the best means of assessing clinical empathy; and in measuring the impact of empathic healthcare on patient and practitioner outcomes.

In addition there are a broad range of programmes in Biological Sciences and Psychology at both undergraduate and postgraduate levels, including the DClinPsych. A new suite of postgraduate programmes reflecting the areas of research excellence in the College is under development including strengths in epidemiology, diabetes, medical statistics, quality and safety in healthcare, and social sciences in medicine.

**Our Citizens**

We value, nurture and celebrate our people and relationships, ensuring they are inclusive, impactful, sustainable, and influence positive change in our world. Accordingly, we nurture strong partnerships with the NHS and other organisations, including the University Hospitals of Leicester NHS Trust, Leicestershire Partnership NHS Trust and University Hospitals of Northamptonshire NHS Group, West Anglia NHS Foundation Trust and LOROS (Hospice Care for Leicester, Leicestershire and Rutland), that support the delivery of our strategy. Through our NHS relationships, as well as strategic partnerships with the wider community including the Integrated Care System, the Borough, City and County Councils, and other East Midlands Universities (through the Civic University Agreement), we seek to shape policy and influence decision-making locally, regionally and nationally, to improve lives and livelihoods. We work with others to tackle the big issues of today and tomorrow with a focus on climate change, inclusion and wider social impact.

**Psychiatry at the University of Leicester**

The groups leading on research interests within the field of Psychiatry are as follows:

***Social & Epidemiological Psychiatry***

*Professor Traolach “Terry” Brugha*

*Dr Samuel Tromans (Associate Professor)*

*Dr Nandini Chakraborty (Hon Professor)*

*Dr Asit Biswas (Hon Professor)*

*Dr Mohammed Abbas (Hon Associate Professor)*

*Dr Latha Velayudhan (Hon Associate Professor)*

*Dr Reza Kiani (Hon Sen Lec)*

*Alison Drewett (Hon Fellow)*

*Andrew Leaver (Research Collaborator)*

Interests:

* Epidemiology and psychopathology of psychosis, eating disorders, adult autism spectrum disorder, ADHD and common mental disorders
* Aetiology and prevention of common and peri-natal mental disorders
* Policy information and interpretation of large survey datasets
* Validity and reliability of measures of outcome and of determinants including WHO SCAN
* Neuropsychiatric outcome of Covid-19
* Self-harm and suicide
* Smell identification function in Alzheimer's disease (biomarkers)Language and communication in autism
* Huntingdon’s disease

The group has received recent substantial contract research funding through the Department of Health and Social Care and arm’s length NHS agencies in partnership with NatCen Social research and further grant funding to participated in two NIHR clinical trials.

***International Mental Health***

*Professor Vostanis (Emeritus Professor)*

*Professor Dogra (Emeritus Professor)*

*Dr K Karim (Associate Professor)*

*Dr Michelle O’Reilly (Associate Professor of Communication in Mental Health)*

Interests:

* programmes in interventions for and prevention of child psychiatric disorders
* development of evaluations of child mental health services
* multi-agency training in child mental health in primary care settings
* development and evaluation of the psychiatric components of undergraduate medical education

***Psychiatry for the Elderly***

*Professor Elizabeta Mukaetova-Ladinska*

*Professor James Lindesay (Emeritus Professor)*

*Dr Hari Subramaniam (Honorary Senior Lecturer)*

*MHSOP consultants and clinical trainees*

Interests:

* Development and validation of culture fair cognitive tools;
* Multi-comorbidities among older people with dementia;
* Older people use of psychotropics and metabolic syndrome;
* Cognitive impairment post-COVID-19;
* Cognitive profile of HIV encephalopathy.
* Peripheral biomarkers for dementia;
* Diagnosis and management of early onset dementias;
* Successful ageing and resilience;
* Art therapy for dementia;
* Dementia Service development.

***Schizophrenia***

*Professor Mohammed Al-Uzri (Honorary Professor)*

*Professor Reveley (Emeritus Professor)*

Interests:

* neuropsychology, psychophysiology, and treatment of the psychoses and other neuropsychiatric disorders cognition;
* eye movements in psychosis and neuropsychiatric disorders in collaboration with Ophthalmology and Psychology.

Most of the teaching and research accommodation is based at the George Davies Building on the main campus. Academic staff are also based at the Glenfield Hospital Site.

A magnetic resonance imagining scanner at the Leicester Royal Infirmary has available facilities for the quantitative examination of MRI scans. There are also opportunities for collaboration with major research themes in the Department of Health Sciences including Genetic Epidemiology & Biostatistics, Complex Chronic Conditions and Health Services Research, and with other research Departments in the fields of Medicine, Biochemistry and Medical Genetics.

In addition, the School of Psychology & Vision Scienceshttps://le.ac.uk/npbcomprises two interdisciplinary research groups in the areas of human health and well-being (including ageing) and vision science.

Research undertaken aims to align with research priorities in human health and can interface with biomedical research departments within the University’s College of Life Sciences and frontline clinicians in the NHS. There are key interactions with clinical departments and health services, including ENT, Ophthalmology, Neurology, Geriatrics and Psychiatry, a broad interest in human ageing, and collaborations within and beyond Leicester concerning human vision and physical and mental health.

The Health and Wellbeing research group applies a range of epidemiological, quantitative (e.g. psychometric) and qualitative methods to research with human populations and clinical data. Current work includes data science, psychometric assessment, and cognitive decision making around several clinical and population health and well-being variables. Recent work includes harmonising data from 12 birth cohorts to identify health and economic inequalities, decision-making in anti-biotic prescribing, and using well-being to improve the personal care planning of care home residents. The vision science research group employs methods from ophthalmic science, experimental psychology, visual psychophysics and cognitive neuropsychology to investigate structural and functional vision in human participants, both normatively and in relation to disease and disorders of sensory perception, in laboratory and clinical settings.

The University has received recent substantial research funding through NIHR, UK Research Councils (BBSRC, ESRC, MRC) and charities (e.g., Leverhulme Trust, Fight for Sight), as well as funding through Innovate UK to support knowledge exchange and training.

**The Stoneygate Centre for Excellence in Empathic Healthcare**

***Training Development Lead:***

*Dr Rachel Winter (Associate Professor and Honorary Consultant in Old Age Psychiatry)*

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| The Stoneygate Trust and University of Leicester have combined to create a pioneering new Stoneygate Centre for Excellence in Empathic Healthcare.  This unique £10m Centre, co-funded by the University and a philanthropic gift from The Stoneygate Trust, will ensure that medical students and healthcare professionals across the UK are taught about the vital importance of empathy as an integral part of all aspects of their medical training. As part of its work, the new Centre will develop and deliver empathy-focused training for undergraduate and postgraduate healthcare students and professionals in Leicester, with the aim of making this available nationally  The Centre will focus on empathy at all stages in medical training including for example, developing and refining recruitment selection criteria to proactively assess students’ aptitude for empathy when they apply for healthcare degree programmes. It will also further develop complementary outreach programmes to continue to widen access for underrepresented groups to all areas of health and social care education.  The Centre will undertake pioneering research into the impact of empathic care on both patients and practitioners, and campaign for empathy to be placed at the heart of the healthcare system. |

**Teaching**

The principal psychiatry undergraduate teaching responsibility is in the nine-week psychiatry block in the fourth year, working in conjunction with the Leicester Medical School. Consultants in general adult psychiatry usually have a student attached to their firm. Students also spend one-week attachments in Child Psychiatry and Old Age Psychiatry.

There are also contributions to teaching at MSc, MD and PhD levels.