

ATTACHMENT A



LEAD CONSULTANT JOB DESCRIPTION (4th DRAFT - FEBRUARY 1999)

Introduction

The following job description gives an indication of the role expected of a lead consultant. It is recognised that all consultants contribute to, or take a lead in, many of these tasks and that without the support of consultant colleagues it would be impossible for the lead consultant to fulfil the role below.

With this in mind the primary role of the lead consultant is to act as a focal point within the service to facilitate and promote the delivery of high quality patient centred services.

1. Representation

The lead consultant will:

- a) Act as a focal point for professional communication within the clinical service.
- b) Represent the service as a whole (not just for medical issues).
- c) Act as an advocate for the service.
- d) Be a member of, and attend the meetings of, the Medical Advisory Committee and provide medical and clinical advice to trust management.

2. Budgets

The lead consultant will:

- a) Work with the relevant manager to manage the financial issues/budgets associated with the service.
- b) Where he/she has responsibility for a budget, manage the budget in conjunction with the senior manager/accountant of the service.

3. Service Development

The lead consultant will:

- a) Co-ordinate the provision of clinical/medical input into service development and strategic planning.
- b) Ensure the input of the appropriate clinical evidence base to service planning.

4. Leadership

The lead consultant will:

- a) Provide medical and, where appropriate, clinical leadership.
- b) Promote a culture of service to patients.
- c) Ensure that service to patients is seen as a priority at all times.

5. Quality

The lead consultant will:

- a) Have a major role in promoting the overall quality of the clinical service and reviewing clinical practice within the service.
- b) Have a major role in developing clinically effective practice including the introduction of appropriate clinical guidelines, outcome measures and audit.
- c) Have responsibility for clinical professional standards and addressing any deficiencies.
- d) Ensure that medical staff are aware of their responsibilities for clinical governance.
- e) Be responsible for identifying areas of significant clinical risk and in conjunction with the service manager take measures to minimise these.
- f) Play a leading role in clinical governance.

6. Co-ordination

The lead consultant will:

- a) Collaborate with other professionals/professional groupings to make the best use of resources in caring for patients.

7. Staff Management

The lead consultant will:

- a) Co-ordinate the roles of medical staff within the department in conjunction with the service and other managers.
- b) Co-ordinate the roles of other staff as appropriate and with the agreement of the senior manager of the service.
- c) Review annually the job plans of all consultant medical staff and conduct an annual review of all such staff. This will normally be done with the assistance of the service manager.
- d) Ensure that all other career grade medical staff have an annual job plan review.
- e) Ensure that medical staff are aware of their individual responsibility for updating their professional practice and maintaining CME/CPD.
- f) Facilitate the roles of educational supervisors, college tutors and the community clinical tutor, to ensure:
 - i) that all training grade medical staff work legal rotas.
 - ii) that all training grade staff are released from service commitments to meet their educational requirements.
- g) Ensure that annual, study, special and other leave are co-ordinated and that medical staff within the service make appropriate cover arrangements.

8. Meetings

The lead consultant will arrange such meetings as are required to discharge the above duties.

9. **Media**

Ensure that clinical views are provided to the media as appropriate in conjunction with other Trust staff.

10. **Education**

The lead consultant will:

- a) Support the development of appropriate arrangements to meet the educational needs of medical students attached to the service for clinical training purposes.
- b) Facilitate the process of ensuring that all junior medical staff have an educational supervisor and facilitate the role of educational supervisors.
- c) Where appropriate liaise with the appropriate post-graduate clinical tutors and college tutors.

11. **Circulars**

The lead consultant will ensure the distribution of Government and NHS circulars relating to medical matters and develop mechanisms to put these into practice as appropriate.

12. **Corporate**

The lead consultant will work with the medical director of the trust on corporate issues by mutual agreement.

13. **Complaints**

The lead consultant will assist the service manager in the handling of complaints and medical performance issues.

It is recognised that the above present a major challenge for what is a very part-time role. The above is intended as guidance but where difficulties are experienced in discharging the role it is expected that the postholder would draw these problems to the attention of the appropriate person - manager, medical director, etc. The postholder would not be expected to carry sole responsibility for discharging these functions.

ATTACHMENT B

BREAKDOWN OF WORKING HOURS

NB: For some activities it may be easier/more appropriate to record eg: "2 hours every 3/12".

	<u>Average hours per week</u>
<u>CLINICAL:</u>	
Direct Patient Involvement - face to face
Indirect Clinical e.g.: telephoning GPs, dictation, etc,
Administrative e.g.: interviewing, departmental (non-clinical) meetings
Teaching
Research
Audit
Committees (and associated work) e.g.: Drugs & Therapeutics, etc.
CME
Royal College Duties
<u>LEAD CONSULTANT RESPONSIBILITIES</u>

If you would like to breakdown lead consultant responsibilities into component parts with the hours involved, please feel free to do so.