SECTION ONE: Position Description

Specialist Child & Adolescent Psychiatrist

Child & Adolescent Mental Health
MENTAL HEALTH AND ADDICTION SERVICES

Full-time: Permanent 1 Full Time Equivalent (FTE)
Location: Bay of Plenty DHB
Report to: Clinical Director, Mental Health and Addiction Services

The Bay of Plenty District Health Board
Vision: Healthy, thriving communities
Mission: Enabling communities to achieve good health and independence and ensure access to high quality services.
Values: C Compassion
A Attitude
R Responsiveness
E Excellence

Place In organisation

Medical Director

Clinical Director

Specialist Psychiatrist
Adult

CAMHS

Multi-disciplinary Team

Adult Psychiatry
Position Description
Signed by Clinical Director/DAMHS
Date: October 2012
SECTION TWO:

Description of Post

Specialist Psychiatrist: Child & Adolescent Psychiatry

The appointee to this post will provide specialist input in the area of Child & Adolescent Mental Health Psychiatry, working in the multi-disciplinary community based Child & Adolescent Mental Health team.

The Bay of Plenty District Health Board (BOPDHB) provides mental health and addiction services for a population of 205,000. Three quarters of this population reside in the western BOP and one quarter in the eastern BOP. Western BOP Mental Health and Addiction Services are based in Tauranga on the campus of Tauranga Hospital. Eastern BOP Adult Mental Health and Addiction Services are based in the Whakatane CBD, with the inpatient service 3 km away at Whakatane Hospital.

Child & Adolescent Mental Health Services (CAMHS) are delivered by two teams of equivalent size, one of which services the Western BOP and the other providing service for the Eastern BOP. Each of the teams has psychiatrists who work collaboratively. The psychiatrists work across the community and work is distributed using a geographical model. The psychiatrists provide clinical leadership for the multidisciplinary community teams and work in partnership with the team leader.

In the Eastern BOP, Adult Community Mental Health and Addiction Services (ACMH&AS) are also delivered by two teams each of which has one psychiatrist. The psychiatrists in the Eastern BOP work with the same model across the community and inpatient service described above. Work is also distributed using a geographical model.

BOP DHB has a local branch of the RANZCP (Royal Australian and New Zealand College of Psychiatrists) Upper Central North Island training programme (UCNI). All psychiatry registrar runs are accredited for basic training. Advanced training has been accredited in older persons, adult and child and adolescent psychiatry. There are up to eight registrars working in the service.

BOPDHB provides specialist services for adults, (ACMH&AS); children and young people (CAMHS); older people (MHSOP) and Consultation Liaison Psychiatry (CL) Afterhours the psychiatrist on call may be required to provide assessments and oversight of treatment for patients in these services.

On-call Duties:

The role required participation in the general psychiatry on-call roster. A separate roster operates for the western and eastern BOP. In the western BOP psychiatrists work a roster which is about 1:8. The on call role is supported by an on duty registrar role until midnight and a 24/7 staffed on duty acute service. The afterhours work is usually light.

In Whakatane the after hours service has a single tier roster with psychiatrists or local GPs being on call 0800 - 0800. This roster is supported by an on call service with two staff members available for duty.

The appointee will be part of the Child & Adolescent Mental Health Service. The management and administrative support for the psychiatrist roles is provided from within CAMHS.
The appointee will have the support of the Clinical Co-ordinator for CAMHS and a sector Team Leader in CAMHS. There will also be the support from the Clinical Director. The post-holder will be encouraged to develop a mentoring relationship with a senior colleague in mental health.

The service has a model of clinical partnership which requires the Clinical Co-ordinator to work in partnership with the Consultant. This model is reflected in the senior management structure, ie; Business Leader/Clinical Director/ADON.

### Functional Relationships

- Consultation-Liaison Service BOP DHB
- Child and Adolescent Specialist Service BOP DHB
- BOP Addiction Services
- Maori Health
- Consumer advisors/organizations
- Family/Whanau advisors/organisations
- Adult Community Mental Health Services
- Emergency Department
- General Practitioners
- NGOs/Supported Accommodation providers and community providers of Mental Health & Addiction Services
- Agencies e.g. ACC, WINZ, SupportNet
- Senior Medical Officers

### Review of Job Description

The appointee will meet with the Clinical Director on an annual basis to undertake a performance review. As part of this, the job description will be reviewed and amended by agreement of all parties.

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**SECTION THREE:**

**PART 1:**

<table>
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<th>General Responsibilities as a Specialist Child &amp; Adolescent Psychiatrist</th>
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</table>

**Principal Responsibilities**

A Specialist Child & Adolescent Psychiatrist is required to undertake their clinical responsibilities and to conduct themselves in all matters relating to their employment, in accordance with best practice and relevant ethical and professional standards and guidelines, as determined from time to time by:

- The New Zealand Medical Council,
- The Royal Australian and New Zealand College of Psychiatrists,
- The policies and protocols of the Bay of Plenty District Health Board,
- The Health and Disability Commission,
- The New Zealand Medical Association.

- To provide specialist psychiatric care in accordance with accepted professional standards regarding conduct, ethics and clinical skills;
- To function as part of a multidisciplinary team in the assessment and management of young people and their family/whanau referred to CAMHS;
- To supervise registrars, trainees and other SMO’s as required;
- To liaise with other agencies such as CYFS or Special Education or doctors or departments within the Bay of Plenty DHB where appropriate for the assessment and management of patients;
- To appropriately document clinical work;
- To participate in the on-call after hours roster;
- To contribute to quality improvement initiatives and audit within the Mental Health and Addiction services;
- To work in accordance with the policies, protocols and guidelines of the Bay of Plenty DHB;
- To contribute to the development of the knowledge base of the discipline of psychiatry within the wider organisational context.
PART 2:

**Specific Responsibilities as a Consultant Psychiatrist**

### Clinical Responsibilities

To provide high quality assessment and treatment services within a multidisciplinary team, that are culturally appropriate and in accordance with professional standards and ethics and organisational policy and procedures.

- Provide high quality assessment, formulation and management for young people and their family/whanau seen in clinical practice.
- Comprehensive assessments, treatment goals, psychiatric formulations, diagnoses, ongoing measures and progress notes are clearly documented.
- Works from a collaborative model with the young people and their family/whanau and informed consent is evident.
- Encourages involvement of family/whanau of the care of clients/tangata whaiora.
- Progress is evaluated against agreed treatment goals, and care plans are updated.
- To be accessible by and available for young people and their family/whanau in accordance with the principles of good clinical management.
- Is available for, and works within a multidisciplinary team to maximize treatment efficiency and sharing of skills.
- To actively liaise with other medical or clinical staff, agencies or organisations involved in the delivery of care to clients.
- To involve Maori health services where appropriate in the management of tangata whaiora.

### Cultural Practice

Work in accordance with the principles of the Treaty of Waitangi (Tiriti o Waitangi), and safe cultural clinical practice and respect.

- To embrace working in partnership with Māori
- Demonstrate sensitivity to Maori cultural values in clinical assessments and interventions, and in dealing with the families/whanau and support workers of Maori clients.
- To practice in keeping with a respect for the cultural values of other ethnicities such as Pacific Island and Asian groups.
- Attends relevant training in relation to Treaty of Waitangi/bi-cultural perspectives.
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<tr>
<th>Team Responsibility</th>
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<tr>
<td><strong>To work as part of the team in CAMHS, supporting a multidisciplinary approach and contributing psychiatric/medical expertise to the team.</strong></td>
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<tr>
<td>» To provide a specialist psychiatric perspective in the multi-disciplinary team.</td>
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<td>» To be available for members of the Multi-disciplinary team in the management of more complex clinical, legal or social cases, and to offer leadership in this situation when requested.</td>
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<td>» To assist and support the general clinical standards in the team.</td>
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<tr>
<td>» To work with other members of the Multi-disciplinary Team in the resolution of identified problems or issues creating an impediment to quality clinical practice or team function.</td>
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<td><strong>To work with other specialist Psychiatrists in the maintenance of clinical services and working environment in the DHB.</strong></td>
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<td>» To offer and provide support, advice or opinion when required or requested by specialist colleagues.</td>
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<td>» To contribute to cover for colleagues leave or absence, in a manner which is fair and equitable.</td>
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<tr>
<td>» To provide supervision or oversight or mentoring for colleagues where appropriate.</td>
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<td><strong>Co-operate with other sub-specialty colleagues from across the Midland Region where appropriate.</strong></td>
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<tr>
<td>» To contribute to regional and national fora and meetings with colleagues from CAMHS to further regional co-operation and service initiatives, and consider service gaps in the region.</td>
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SECTION FOUR:

NON-CLINICAL RESPONSIBILITIES:

The Specialist Child & Adolescent Psychiatrist appointed to the post will have a number of non-clinical duties. Non-clinical activities include a number of different responsibilities which are essential tasks but not direct patient care. Non clinical duties may comprise up to 30% of the time available for this role.

Supervision of a registrar is an important role of any Specialist Child & Adolescent Psychiatrist. This involves at least one hour face-to-face supervision/teaching per week, and further clinical supervision in accordance with the training requirements of the registrar as laid down by the RANZCP. Consultants have an important role in providing teaching and education sessions for the registrar training programme, for medical staff and other clinical staff in the DHB.

Every medical specialist is required to maintain their professional standards by participation in Continuing Medical Education, peer review and attendance at conferences or meetings. They also need to undergo credentialing by the Bay of Plenty DHB Credentialing Committee in order to confirm their scope of practice. This needs to occur before an appointment is confirmed and then approximately every five years.

Specialist Psychiatrists have a critical role in promoting quality of service delivery to those clients served by the service.

Non clinical duties may include the following:

» Supervision and oversight of others, in particular a Registrar
» Continuing Medical Education and professional self development
» Quality assurance activities
» Teaching and Grand Round presentations
» Credentialling
» Participation in service development
» Contribution to Reportable Event investigations

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<tr>
<th>Administrative Responsibilities</th>
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**Complies with organisational policies and procedures.**

» Ensure that record keeping, and the record keeping of others working under the employee's general direction meets required legal and policy standards.

» To participate in performance appraisals on an annual basis, and other reviews of practice where necessary.

» Maintain records of supervision and oversight where necessary for RANZCP or NZ Medical Council.

» Maintain accurate records of CME
Legal Responsibilities

To work within the requirements of all relevant legislation.

» To act as a Responsible Clinician as defined by the Mental Health Act.
» To have an excellent understanding of the Mental Health (Compulsory Assessment and Treatment) Act 1992
» To contribute to the education and understanding of other staff in relation to the Mental Health Act.
» Maintain and protect confidentiality, right of access and sharing of information in keeping with the Privacy Act.
» To have excellent knowledge of PPPR and EPoA
» Provide appropriate medical reports to the courts, coroner, Police, Ministry of Transport, LTSA and lawyers as required by law, in keeping with the principles of the Privacy Act.
» To meet the requirements of practice and conduct consistent with the provisions of the Health Practitioners Competence Assurance Act.

Teaching/Education Responsibilities

To contribute to the development of staff skills and training through provision of education and supervision

» To undertake direct, and informal, registrar supervision and teaching.
» To maintain and ensure eligibility and competence as a supervisor as per RANZCP requirements.
» To provide advice and education for other members of the multi-disciplinary team.
» To participate in and contribute to DHB and non-DHB education programmes.
» To support research initiatives.
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<th>Professional Standards</th>
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<td><strong>To regularly review, and ensure the maintenance of personal professional and clinical standards of practice.</strong></td>
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<tr>
<td>» To participate in peer review activities consistent with RANZCP Continuing Professional Development Programme guidelines.</td>
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<td>» To ensure an appropriate level of personal continuing medical education through reading, participating in meetings and attending conferences.</td>
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<td>» To provide evidence of continuing education activities as part of the annual performance review.</td>
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<td>» To meet and adhere to DHB policies regarding required core competencies such as CPR.</td>
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<th>Quality Assurance Activities</th>
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<td><strong>To actively participate in quality improvement initiatives (within the team, within your own discipline and within the wider service/organisation) as is reasonable and within negotiated timeframes.</strong></td>
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<tr>
<td>» To support the quality assurance activities of the CAMHS team and actively contribute to the identification of needed improvements in current service provision, and strategies for introducing these.</td>
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<tr>
<td>» To ensure that personal practice and service provision meet the requirements of the National Mental Health Sector Standards.</td>
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<td>» To actively contribute to risk minimisation activities within the service.</td>
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<td>» To contribute to the clinical committees of the BOP DHB and any national/regional/local projects which are relevant according to expertise, interest and availability.</td>
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<tr>
<td>» To participate in audits and monitoring of clinical service delivery and performance, such as service KPIs.</td>
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<td>» To co-operate with the investigation of and implementation of recommendations from any complaint or similar process.</td>
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SECTION FIVE:

Clinical Leadership:

Specialist Child & Adolescent Psychiatrists are expected to fulfil a clinical leadership role within CAMHS.

The role involves providing leadership within the multi-disciplinary team in a clinical sense, but also includes a role in service planning, recruitment (where appropriate) and liaising with management and other services.

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<th>Clinical Leadership</th>
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<td><strong>Contribute in CAMHS as leader of the Clinical team, in partnership with the Team Leaders/Clinical Coordinator/CD, to the development of the service and to safe and high quality mental health and addiction services.</strong></td>
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<tr>
<td>» To participate and contribute in the development and implementation of strategic and service planning for CAMHS, and to provide clinical direction in planning for these services.</td>
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<tr>
<td>» To provide, in partnership with the Team leaders/Clinical Coordinator/CD, a shared vision and to provide clinical leadership, guidance, and support to direct reports, staff, peers within Mental Health &amp; Addiction Services, and to internal/external key stakeholders.</td>
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<tr>
<td>» To work with CAMHS Clinical Co-ordinator and Team Leaders, and with the Clinical Director and Business Leader, Mental Health and Addiction Services, to ensure clinical staffing is appropriately skilled, selected, and retained.</td>
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<tr>
<td>» To contribute to protocols, guidelines and standard operating procedures in CAMHS to allow for clear definition of the service role and the interactions with other services within Mental Health and Addiction Service.</td>
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SECTION SIX:

**Average Weekly Timetable:**

- The following applies to a full-time 1.0 FTE position
  - Ordinary hours of work will fall between the hours of 0800 and 1700 on week days. The appointee is expected to work eight hours a day. The job sizing is for 80 hours a fortnight.

A suggested timetable is as follows:

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<th></th>
<th>Monday</th>
<th>Tuesday</th>
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<th>Friday</th>
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<tbody>
<tr>
<td>Morning</td>
<td>MDT reviews</td>
<td>MDT reviews</td>
<td>MDT reviews</td>
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<td>Admin</td>
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<td></td>
<td>Administration</td>
<td>Clinic</td>
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<tr>
<td>Lunch</td>
<td>Journal Club</td>
<td>Grand Round</td>
<td></td>
<td>Psychiatrist &amp; Psychologists meeting</td>
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<tr>
<td>Afternoon</td>
<td>Clinic</td>
<td>Peer review, SMO meeting, admin</td>
<td>Clinic</td>
<td>Clinic</td>
<td>Urgent reviews Admin</td>
</tr>
</tbody>
</table>

The above timetable is flexible. There are generally set clinics with the capacity to see urgent cases built into the work schedule. Regular education meetings are timetabled and administration time is included. Judicial hearings are fortnightly. Attendance will be infrequent therefore these are not scheduled in the timetable. On Tuesday afternoon peer review meetings alternate with SMO business meetings from 14:00 – 16:00. This timetable is likely to be altered by the post-holder depending on the commitments of other staff and the evolution of the services.
SECTION SEVEN:

Credentials:

**Essential:** Vocational Registration by the New Zealand Medical Council in the specialty of Psychiatry

Fellowship of RANZCP or equivalent with Certificate of Advanced Training in Child Psychiatry or equivalent.

Current Medical indemnity Insurance

Current and clean drivers licence.

Training and Experience:

**Essential:** Expert clinical knowledge and experience.

**Desirable:** Ability to provide clinical leadership for a multi-disciplinary team.

Commitment to ongoing professional development.

Competencies:

**Essential:** Commitment to high quality and safe clinical service delivery.

Able to function effectively within a multidisciplinary team.

Integrity

Effective relationship management Eficient time management skills.

Accountable for own decisions and results.

Goal oriented and outcome focused.

Effective communicator.

Understands clinical case management and values multidisciplinary team models

Problem solver.

Conflict resolution skills.

Computing skills.

**Desirable:** Skills in leading and managing service provision.
SECTION EIGHT:

Contacts for further information:

Candidates requiring further information are invited to contact the following:

Dr Sue Mackersey
Clinical Director
Mental Health Services
Bay of Plenty District Health Board
P O Box 12024
Tauranga
New Zealand

Ph: 07 579 8313
Email: sue.mackersey@bopdhb.govt.nz