CONSULTANT, SPECIALTY DOCTOR & ASSOCIATE SPECIALIST GENERIC OBJECTIVES

Introduction

Doctors and dentists in the Consultant, Specialty Doctor and Associate Specialist grades (trained medical and dental staff) have 3 types of objectives:

- Those concerning knowledge and skills - resulting from annual appraisal
- Those concerning service provision – qualitative and/or quantitative
- Those concerning professional attitudes and behaviours – described in this paper

Trained medical and dental staff are expected to conduct their professional practice in ways that are entirely appropriate and these 'generic objectives' (which are based on NHS Lanarkshire and predecessor Trust guidance for all staff) are set out below so that all trained medical and dental staff can be clear about what is required.

Trained medical and dental staff are required to:

Maintain Professional Registration

1) Maintain a GMC/GDC Licence to Practice and comply with requirements where necessary for revalidation and specialist accreditation.

2) Follow the advice given by the General Medical Council and/or General Dental Council in their various publications. In particular, trained medical staff will specifically comply with all of the guidance contained in the GMC's booklet 'Good Medical Practice'' or the GDC booklet "Standards for the Dental team"

3) Participate fully in confidential enquiries with GMC or GDC, whether of a local or national nature as appropriate.

Appraisal

4) Participate fully in the annual appraisal process. The headings to be covered include those in the GMC's guidance 'Good Medical Practice Framework for Appraisal & Revalidation';

    - Knowledge, skills and performance.
    - Safety and quality
    - Communication partnership and team working
    - Maintaining trust

Clinical Governance & Risk Management

5) Take part in systems of quality assurance and quality improvement and fully support NHS Lanarkshire's Quality Strategy and the implementation of Patient Safety Initiatives

   - Ensure compliance with risk management and clinical governance procedures
   - Ensure systems are in place for colleagues to raise concerns about risks to patients
   - Ensure arrangements are made for the continuing care of the patient where necessary
   - Ensure that all staff for whose performance you are responsible, including locums and students, are properly supervised

6) Follow NHSL risk management policies & procedures. All trained medical and dental staff will seek to ensure that NHSL continues to meet health and safety standards by operating safe working practices within current legislation and NHSL Health & Safety policies. They will conduct their duties and professional practices in such a way as to minimise the overall risk of adverse consequences for NHS Lanarkshire.

7) Follow NHSL Guidance on managing Healthcare Acquired Infections including hand hygiene and dress code.

Out of hours duties

8) Work with their Medical Manager (or other agreed scheduler) and colleagues to arrange rotas and work schedules that make optimal use of their professional time and which minimise the likelihood of it being necessary to cancel at short notice any elective activities. All trained medical and dental staffs job-plans take prospective account of time expected to be spent on out of hours duties whilst on-call and otherwise. Where possible, out-of-hours/on-call work should be scheduled to ensure additional compensatory rest to comply with the Working Time Regulations is not normally required. The time allocation in respect of predictable and unpredictable on-call work is stated in individual job-plans together with the assumptions upon which that allocation has been calculated.

General

Be familiar with and support fully the current corporate objectives of NHS Lanarkshire (NHSL) as published annually. These reflect government policy, instructions, targets, guidance etc. NHSL will, through the annual job planning process highlight specific policies and guidance that requires to be incorporated as part of the objective process.
Specific areas may be highlighted in the Board Medical Director's annual communication of the job plan review process. In addition, National and Board guidance may be distributed throughout the year through the Medical Management structure where all Medical and Dental staff will be expected to comply unless doing so would be deemed to contravene GMC or GDC guidance. It is the joint responsibility of the individual and their medical manager to ensure that any necessary change is caught within their local objectives through job plan review.

9) Comply fully with NHS Lanarkshire's Annual Leave and Public Holiday policies. These policies require all trained medical and dental staff to discuss leave arrangements with all affected colleagues well in advance – normally minimum 6 weeks notice – and to secure the agreement of the Clinical Director (or other agreed scheduler) to what is proposed. It is the responsibility of the appropriate Clinical Director (or other agreed scheduler) to ensure that

a) there are adequate numbers to maintain essential departmental functions and specifically a reliable "urgency and emergency" service &

b) scheduled elective commitments are not cancelled at short notice except in case of genuine unforeseen emergency circumstances

Each department should agree guidance on appropriate minimum levels, allowing for exceptionalcircumstances where appropriate. Normally this means that, for example, in departments of 2, 3 and 4, only 1 should be on leave at any one time; in departments of 5, 6, not more than 2 should be on annual leave at any one time; in departments of 7, 8 and 9, not more than 3 should be on annual leave at any one time and so on thereafter. It is, however, expected that each department will agree their own specific minimum levels of staffing to match the intensity of the workflow, etc. from time to time.

This is not to say that other trained medical and dental staff cannot be on annual or study leave for occasional days during their colleagues' leave, but the agreed departmental guidance should not be exceeded for complete weeks of leave without the specific advance agreement of the Site Medical Chief or Associate Medical Director in writing. Trained medical and dental staff will ensure that in taking annual leave there is a proper balance of programmed activities in respect of each category of work wherever possible. For example, it is not acceptable to take all annual leave in respect of DCC commitments only. Monitoring of this aspect of this policy will again be dealt with at Directorate level. When agreeing to the allocation of annual leave, the Clinical Director should take account of existing knowledge regarding vacancies and absences and if the usual allocation is likely to impact on the delivery of planned care but especially scheduled care, this should be discussed with the member of staff applying for leave and, if agreement cannot be reached, this should be escalated via the directorate management structure.

10) Comply fully with NHS Lanarkshire's Staff Learning Leave policy. This policy requires all staff to apply in advance, on the appropriate form, to undertake CPD activities whether expenses are to be incurred or not, and to make the same arrangements for cover as though the time were annual leave (see above). Internal Department and compulsory CPD activities within NHS Lanarkshire do not normally require to be authorised through the same process and will not be counted as part of the normal allocation of study leave of thirty days over a three year period/ten days per annum for medical and dental staff. Such internal courses do, however, still require all trained medical and dental staff to make appropriate arrangements for cover.

The same authorisation processes apply to overseas study leave (where "overseas" is regarded as leave taken outwith the European Union) however while there may be differences in funding the same principles in requesting leave apply. External funding / sponsorships must be declared on the application form and documented at the annual job plan review.

11) Comply fully with the following where applicable;

- The specialty specific guidance on the management of patients presenting for emergency care with respect to prompt initial assessment, regular review and discharge planning
- Escalation policies for the management of situations where there is a mis-match between clinical demand and capacity ranging from Major Incident / Pandemic plans to local departmental contingency plans and Bed Management policies
- Guidance from the Referral Management Service on vetting of referrals and scheduling of outpatient clinics

- Management policies for the outpatient department(s) in the appropriate hospital(s), specifically including minimum periods of notification regarding cancellation of clinics and arrangements for notifying such cancellations and using the Patient Management System and recording clinic outcomes.
- Comply fully with NHSL policies on managing waiting lists including the Access Policy and IP / DC Standard Operational Policy.
- The provisions of the appropriate management policies of the hospital(s) concerned, specifically including minimum periods of notification regarding cancellation of theatre lists and the arrangements for notifying such cancellations. Comply fully with appropriate local management policies regarding booking and management of emergency cases.

12) Attend punctually all programmed activities involving patients or any other staff, so that clinical and educational sessions may commence at the times scheduled. Trained medical and dental staff will not (except in the case of genuine unforeseen emergency) depart from any programmed activity before it has been completed. No doctor should depart from an incomplete clinical activity without making appropriate arrangements for its completion.

13) Comply fully with all agreed local departmental, directorate, operating division or NHSL policies, procedures, instructions, guidance and standing orders, whether or not specifically mentioned in this document.

Communication

14) Individuals should ensure that they follow the communication guidance contained with the GMC's Good Medical Practice at all times, in particular relationships with patients and working with colleagues.

- Ensure that patient records and management plans are regularly documented appropriately within the case record.
- Ensure that all documentation (including clinical records) formally recording their work is clear, accurate and legible
- Work constructively with colleagues and delegate effectively
- Pass on information to colleagues involved in, or taking over, your patients' care

15) Recognise that their communication with patients, GPs, relatives, carers and all other members of staff is a matter of paramount importance. All trained medical and dental staff will therefore ensure that all their communications (verbal and otherwise) are of the highest standard. This will include wearing the identity badge provided.

16) Ensure that a process is in place which results in a competent and legible "Hospital Interim Discharge Summary as agreed for their clinical area which meets appropriate standards (including details of diagnosis, procedure, medication and any immediate required action) being sent to the patient's general practitioner and other appropriate professional colleagues on the day of the discharge of any inpatient or day-case from hospital.

17) Ensure that systems are in place which allow full discharge summaries which contain all of the necessary information to enable coding as per ISD guidelines to be sent to general practitioners and other appropriate professional colleagues within ten working days of the discharge of any in-patient from hospital. Any 'follow-up' letters required e.g. containing test results shall be sent as soon as the information is available.

18) Ensure that letters to the same standard are sent within ten working days of any patient's attendance as a day-case, at an outpatient clinic, at an A&E department or equivalent, unless a shorter period is specified in local service objectives.

19) NHSL and other public bodies increasingly use electronic methods as a means of communication. All trained medical and dental staff should be provided with a secure e-mail address and they should check this on a regular basis and advise the Clinical Director of a suitable alternative if necessary. Adherence to the NHSL's Policies on the usage of electronic communications are mandatory and individuals should make themselves familiar with these. These are available in FirstPort.

Paragraphs 17, 18 & 19 assume that appropriate secretarial support has been agreed and provided.

Team-working

20) Recognise that modern healthcare can only be provided by professional staff working in teams, both within the medical profession and multi-disciplinary. All trained medical and dental staff will acknowledge that they are part of such teams within a complex organisation, and recognise that their actions, or lack of action, may have unintended or deleterious effects on other members of the team or the organisation. They will therefore behave in a manner which will facilitate and support effective team-working.

Service Re-Design

21) Acknowledge the need for NHSL and other local service providers and commissioners to modernise, develop, re-design and re-configure services in order to meet the requirements of and challenges posed by changes in the law, standards, guidance, practices, proven clinical advances, demand, and finance available etc. All Career Grade Medical Staff will participate in such processes and accompanying change-management as required.

Appendix 1.

ALL CAREER GRADE MEDICAL AND DENTAL STAFF – GENERIC OBJECTIVES

Name …… Date . ……..

No.	OBJECTIVES	YES	NO	N/A
	GMC/GDC			
1	Follow GMC/GDC advice of good practice in particular "Good Medical Practice Booklet"			
2	Participate fully in confidential enquiries as appropriate			
	Appraisal			
3	Participate fully in annual appraisal process			
	Clinical Governance and Risk Management			
4	Participate and fully support NHS Lanarkshire's quality assurance and quality improvement strategy			
5	Follow NHSL Risk Management policies and procedures			
	Out of Hours Duties			
6	Work with scheduler and colleagues to arrange rotas and work schedules			
	General			
7	Be familiar with current corporate objectives of NHSL			
8	Comply with guidance on the management of patients presenting for emergency care			
9	Comply fully with Annual Leave and Public Holiday policies			
10	Comply fully with Staff Learning Leave policy			
11	Comply fully in undertaking work in operating theatres, etc			
12	Comply fully with management policies for outpatient departments			
13	Punctual attendance for all programmed activities involving patients or staff			
14	Comply fully with all agreed NHSL policies, procedures, instructions, guidance, etc.			
15	Comply fully with NHSL Access Policy			
16	Comply fully with IP / DC Standard Operational Policy			
	Communication			
17	Recognise importance of high standard of communication with others (patients, relatives)			
18	Ensure Discharge Summary Procedures are in place and legible, interim summaries sent to G.P.'s, etc on time			
19	Ensure full discharge summaries sent to G.P.'s, etc within agreed timescale			
20	Ensure outpatient clinic, day case, A&E attendance letters sent within agreed timescales			
	Team Working			
21	Recognise, facilitate and support effective team working and follow NHSL Employment/Personnel policies as appropriate			
	Service Redesign			
22	Acknowledge need for modernisation and redesign of service and support and participate in such process			

If you have ticked NO to any of the Objectives, please state why: