## Kent & Medway NHS & Social Care Partnership Trust Kent Forensic Psychiatry Service

## Forensic Psychiatry Higher Specialist Training Post (ST4-6)

Job Description - October 2020

#### Base

Trevor Gibbens Unit, Maidstone

#### **Trainer**

Dr Michael Kingham

## **Opportunity**

This post represents an excellent opportunity to gain experience of the clinical management and aftercare of patients discharged from secure inpatient services into the community by joining the Forensic Outreach and Liaison Service (FOLS), preparing court reports, preparing risk assessments for patients referred by secondary care (both non-secure inpatient services and community mental health teams), as well as becoming involved in a Criminal Justice Liaison and Diversion Service (CJLDS). The Trevor Gibbens Unit also offers experience in male and female adult medium secure inpatient services and step-down (controlled-access) inpatient services. The precise nature of the post and job plan will be tailored to the trainee's specific training needs.

## Introduction to the Kent Forensic Psychiatry Service

The Kent Forensic Psychiatry Service (KFPS) is part of the Forensic and Specialist Care Group at Kent and Medway NHS and Social Care Partnership Trust (KMPT). KFPS provides the NHS forensic mental health service for the county of Kent and the unitary authority of Medway. Kent and Medway has a population of approximately 1.7 million, which includes urban and variably populated rural areas. Socio-economic status is also variable, with the most relatively deprived areas being the Medway towns, Thanet and Dover. KFPS is based at the Trevor Gibbens Unit, the regional secure unit for Kent and Medway, at the Maidstone acute hospital site. The Trevor Gibbens Unit provides an inpatient service with medium secure intensive care, acute, rehabilitation and step-down places for 62 patients, 47 men and 15 women.

KFPS accepts tertiary referrals from Kent and Medway. Referrals come from courts, prisons, probation service, general adult and older adult psychiatry teams, secure units (including psychiatric intensive care units), and special hospitals. The service provides clinical assessments and makes recommendations, particularly in the context of clinical risk assessment and management of individuals with a mental disorder, for inpatient or outpatient care and treatment. The service admits patients to the Trevor Gibbens Unit and has an access assessment role for transferring patients to secure hospitals beyond Kent and Medway, for whom the service retains a monitoring role. KMPT is a member

of the Kent, Surrey, Sussex Provider Collaborative for Adult Secure Services, with eight other organisations providing forensic and secure care, which commenced in July 2018 and has the aim of improving care pathways for patients into secure care (or alternative provisions), within secure care (in terms of the quality of care and treatment provided) through to their timely discharge to appropriate aftercare from community provisions. Dr Kingham is the clinical director of this Provider Collaborative.

KFPS liaises with independent sector secure hospitals and high secure hospitals for patients from Kent and Medway, to ensure that an appropriate care pathway is followed for each individual.

The Trevor Gibbens Unit is the base for a Forensic Outreach and Liaison Service (FOLS) which became fully operational in April 2019 and which is commissioned to manage 92 outpatients. FOLS provides expert management of patients in the community in Kent and Medway who have forensic 'caseness', the majority of whom are conditionally discharged restricted patients, individuals discharged from hospital who are subject to 'life licence', having been discharged by a mental health tribunal and released by the Parole Board and patients discharged from a secure service subject to a Community Treatment Order under section 17A of the amended Mental Health Act 1983 who present a risk to other people in relapse.

KFPS operates a commissioned Criminal Justice Liaison and Diversion Service (CJLDS), operating in police custody suites throughout Kent and Medway 12 hours a day, 365 days a year and also in the magistrates' courts in Kent and Medway.

KFPS cooperates with Multi-Agency Public Protection Arrangements (MAPPA), responding to referrals from the Level 3 Multi-Agency Public Protection Panel (MAPPP).

KFPS has a 20 bed male low secure unit in Dartford, the Allington Centre, at the Little Brook Hospital site, which also has a male secure learning disability inpatient unit, Tarentfort Unit, and a step-down rehabilitation ward, Brookfield.

The Care Group also includes the Trust's specialist services, but the post-holder will not be expected to provide any routine or emergency cover to these areas.

Prisons in Kent and Medway are served by a prison in-reach service from outside the Trust. It provides a primary and secondary care mental health service to all adult prisoners and young offenders in Kent. The prison in-reach service refers patients to KFPS for a forensic psychiatry opinion or admission to secure hospital provisions when commissioning responsibility lies with a Kent Clinical Commissioning Group (CCG). Appropriate communication is maintained between KFPS and Kent and Medway prisons for the offender population.

## The multi-disciplinary team at the Trevor Gibbens Unit

The Trevor Gibbens Unit has a full multi-disciplinary clinical team. A general practitioner conducts a weekly clinic within the unit. The nursing team has approximately 40 trained staff and 50 nursing assistants and is actively recruiting. Occupational therapists and other professionals form a therapeutic activities team which provides a comprehensive service to inpatients and a limited outpatient service. A psychology team provides individual and group treatment for inpatients, particularly

focusing on offending behaviour work and related issues. A social work team has a dual inpatient and outpatient role.

There are five inpatient clinical teams at the Trevor Gibbens Unit. Each is led by a responsible clinician who is a consultant forensic psychiatrist. Consultants have multiple roles, including a geographical locality for liaising with counterparts in secondary care and providing representation in committees within the Unit, service, Trust, partner organisations and national initiatives. One consultant is clinical director for the Kent Forensic Psychiatry Service.

All clinical teams have a secretary and full administrative support.

A consultant forensic psychiatrist monitors the progress and care pathway of patients placed at secure hospitals beyond Kent and Medway, supported by - and supporting - NHS England.

The Forensic Outreach and Liaison Service (FOLS) has three consultant forensic psychiatrists, for whom the FOLS component to their post is a part-time commitment as they have other responsibilities. FOLS has a comprehensive multi-disciplinary clinical team and work closely with co-located social workers employed by the Local Authority.

## Core components of the post

Under consultant clinical supervision, a selection of the following via an agreed placement and job planning process:

- Management of outpatients of the Forensic Outreach and Liaison Service (FOLS) based at the Trevor Gibbens Unit, the majority of whom will be under the care of Dr Kingham, but could be under the care of either of the other two FOLS consultants, Dr Olajubu and Dr Pyott. Responsibilities will be monitoring the clinical condition and risk assessment of community patients via outpatient appointments and/or home visits, making clinical decisions, assisting in formulating care plans and risk assessments according to the Care Programme Approach and preparing reports for the Ministry of Justice Mental Health Casework Section (for conditionally discharged restricted patients), Associate Hospital Managers' Hearings (for patients subject to a Community Treatment Order) and the Mental Health Tribunal. Additional or alternative opportunities may be available, negotiated by discussion with Dr Kingham, to address outstanding training needs of the post-holder, for example, experience of the inpatient medium secure and step-down service at the Trevor Gibbens Unit.
- Providing medical cover, including attendance, for the CJLDS in Kent and Medway provided by KFPS. This entails giving telephone advice and/or interviewing a detainee and making immediate clinical management decisions. This will include liaising with police, giving evidence (written/oral) to magistrates' courts, referring to partners in primary and secondary care, signposting/referring to other services/agencies and conducting Mental Health Act assessments.
- Medico-legal work: assessments for courts, Parole Board and probation service, participating in multi-disciplinary and multi-agency case conferences concerning mentally disordered offenders in prison, hospital and the community. This will involve cooperating with the Multi-Agency Public Protection Arrangements. Court

reports may attract separate additional remuneration according to a Service Level Agreement between KFPS and Her Majesty's Court Service in Kent.

- Receiving referrals from and providing assessments for patients admitted to other secure psychiatric hospitals (low, medium and high secure).
- Assessing patients (both inpatients and community patients) referred by secondary
  care mental health services for advice on risk assessment/management. The post
  holder will have the opportunity to carry out assessments in a wide variety of
  settings, including supported accommodation, care homes general psychiatric
  hospitals and at the Trevor Gibbens Unit. These assessments are frequently
  conducted jointly with a colleague from an appropriate discipline and may involve
  interviews with the family and other professionals.
- Attending a monthly locality 'high risk forum' convened by a community mental health team and providing advice in relation to patients with forensic 'caseness'.
- Conducting assessments for admission to a secure service, the majority being in custodial and hospital settings, although may include community assessments in relation to recall to hospital for FOLS patients who are either conditionally discharged or subject to a Community Treatment Order.
- Participating in Care Programme Approach review and other professionals' meetings at the Trevor Gibbens Unit for inpatients whose discharge from hospital is being planned, to enable seamless provision of care and treatment between the inpatient and FOLS teams.
- According to the post-holder's educational needs, participation in medical management activities.

#### Additional information

Secretarial support and shared office space will be made available. The post holder will have ready access to telephone and computer, with an individual email and Trust intranet/internet account. Separate facilities are provided on site for clinical interviews with inpatients and outpatients, and another office is also available for administrative work.

The post holder will be expected to participate in a 1 in 7 'second tier' on-call rota for general and forensic psychiatry, acting in a senior role but with a nominated duty consultant providing cover, including acting responsible clinician cover. Duties include providing advice, support and Mental Health Act assessment cover to Maidstone Hospital Accident and Emergency Department (assisting the liaison psychiatry service) and at Priority House, the local psychiatric hospital on the same site (which has a section 136 suite) and support to the junior psychiatric trainee who provides 'first tier' cover. When on-call, the post holder should be available to attend in Maidstone within a reasonable time. If they can demonstrate that this is the case, then it may be possible to be on-call from home, even beyond the standard 10 mile limit.

Students in all disciplines and at various grades rotate through the Trevor Gibbens Unit, including GKT medical students whom ST4-6 doctors are encouraged to support and teach. The post also offers the opportunity to teach ST1-3 doctors, non-career grade doctors, other members of the multi-disciplinary clinical team, police station staff and court staff on general psychiatric topics. The post holder will also have the opportunity to teach general psychiatric trainees as part of the regular Tuesday morning academic programme at Maidstone Hospital Postgraduate Medical Centre and to participate in MRCPsych teaching. The postgraduate centre has a medical library

with a substantial mental health publication collection, together with Medline and Psychlit search facilities.

#### Induction

At the beginning of the placement the post holder will take part in an induction programme if they have not worked at the Trust before. They will be introduced to the workplace and informed of the requirements of the post, including the nature of the on-call commitment. They will formulate, with the educational supervisor, an individual learning plan for the placement.

## **Supervision**

Supervision will take place at a frequency of once weekly.

Dr Kingham will provide clinical and educational supervision for this post, but the other consultants are also available to provide clinical supervision, and will generally do so for patients referred for risk assessment for their locality. When the post holder is on call, the consultant on-call will provide clinical supervision - the consultant forensic psychiatrist on call for patients under the care of KFPS and the general adult consultant psychiatrist for other patients.

When advice is sought, the name of the clinical supervisor and the advice given must be clearly documented in the patient's clinical record.

## **Duties and opportunities**

The duties of the post, performance criteria and the learning opportunities available are set out following the structure of the psychiatry specialty curriculum (as approved by PMETB, 2006) which in turn is based on the headings of the GMC's Good Medical Practice

## 1. Providing a good standard of practice and care

Undertake clinical assessment of patients with mental disorder within a forensic mental health context, according to the core components of the post described in bullet points above.

Acquire a "caseload" of a limited number of patients, taking responsibility for their clinical management under the supervision of the consultant.

Conduct approximately one new assessment a fortnight under the supervision of a consultant. Generally, this will be a patient who has been referred for a court report or for a risk assessment by partners in secondary care, but may be from another clinical and/or forensic setting. Patients will be allocated at the weekly referrals meeting. Provide feedback to the meeting on the outcome of the assessment.

Under consultant supervision, provide medical cover one day a week for CJLDS. As well as providing telephone advice, rarely this may entail visiting a police custody suite or magistrates' court to assist a forensic community psychiatric nurse in

assessing and managing a detainee, including making a medical recommendation for admission to hospital under the terms of the Mental Health Act.

Maintain legible, contemporaneous and useful clinical records for all patients.

#### 2. Decisions about access to care

Use the outcomes of clinical assessment to enable effective patient management.

Under the supervision of the clinical supervisor and in collaboration with the care coordinator, arrange multi-modal care and treatment for community patients, and make recommendations for care and treatment for individuals assessed within the criminal justice system and for other mental health service providers. Make referrals to other professionals as appropriate, following discussion with the clinical supervisor.

## 3. Treatment in emergencies

Within the core duties of the post, emergency psychiatry is likely to be encountered most frequently within the police custody setting. Otherwise, it is within on-call duties that the post holder is most likely to encounter psychiatric emergencies.

When on call, provide senior medical cover to a basic specialist trainee and conduct assessments for patients presenting at Maidstone Hospital Accident and Emergency Department (assisting the liaison psychiatry service) and Priority House (which has a section 136 suite), the local psychiatric hospital on the same site. Advice from the on-call consultant is readily available, from the consultant forensic psychiatrist for work undertaken at the Trevor Gibbens Unit and the consultant psychiatrist for work undertaken at Maidstone Hospital and Priority House.

## 4. Maintaining good medical practice

Maintain and use systems to update knowledge and its application to aspects of professional practice:

During the placement, follow the higher specialist training curriculum and *attend the* course provided by the Training Programme. Maintain an up-to-date learning portfolio to bring to meetings with the educational supervisor. As a minimum, this will be at the beginning, mid-term and at the end of the placement.

Attend mandatory training provided by the Trust and take appropriate study leave opportunities.

Apply the philosophy and strategy which guides the Kent Forensic Psychiatry Service, and adhere to the principles of clinical governance, quality and excellence. Abide by the Trust Values.

# 5. Maintaining performance

Participate in the workplace-based assessment programme of the Psychiatry Specialty Training Curriculum and use feedback from this process to inform critical self-awareness. Discuss these assessments with the educational supervisor.

Participate in clinical audit under the direction of the educational supervisor.

## 6. Teaching and training, appraising and assessing

Participate in teaching within the local academic programme for CT1-3 doctors and the occasional teaching of medical students, help identify and obtain consent from suitable patients for the students to interview to develop their clinical skills, listen to clinical presentations and discuss the patients they have seen.

Appraise colleagues within accepted appraisal frameworks, including completing workplace-based assessments for CT1-3 doctors.

Provide teaching to the multi-disciplinary team as appropriate.

## 7. Relationships with patients

Maintain a professional doctor-patient partnership.

Wherever possible, obtain informed consent from patients. Observe rules on patient confidentiality at all times. Share information appropriately with colleagues, under the guidance of the clinical supervisors.

## 8. Dealing with problems in professional practice

Bring any problems with the conduct or performance of a colleague to the attention of the educational supervisor or another consultant.

Cooperate fully with any complaints procedure or formal enquiry.

Cooperate fully with any formal inquiry or inquest into a patient's death.

Early in the placement, discuss the provisions of NHS indemnity insurance and any additional indemnity insurance, with the educational supervisor.

## 9. Working with colleagues

Continuously promote value-based non-prejudicial practice. Maintain a legal, ethical and fair approach towards working with colleagues and respect diversity.

Work effectively as a member and a leader of the multi-disciplinary team, communicate effectively and demonstrate appropriate leadership.

As a full member of the Kent Forensic Psychiatry Service multi-disciplinary clinical team, discuss the experience of working with other disciplines in meetings with the educational supervisor.

Appropriately assume, delegate and devolve responsibility.

Access advice, assistance and second opinions when delegating and making referrals.

As well as keeping clinical records, the post holder will discuss patients' care and treatment with other members of the multi-disciplinary team within the Kent Forensic Psychiatry Service and outside. They will provide written reports on patients to other professionals involved in patient care and for the Courts when preparing a medico-legal report.

Educational and clinical supervisors will provide guidance as to the level of responsibility to assume in individual clinical situations. Obtain advice and assistance if unsure.

## 10. Maintaining probity

Ensure that reports, evidence and documents are complete, honest and accurate. Record patient contacts on the Trust's electronic patient record within 24 hours of the contact. Generally, medico-legal reports should be provided within two weeks of the interview unless further information is needed, in which case the Court should be informed of this. Outpatient letters should be sent within one week of the consultation. For police custody liaison and diversion work, a brief summary should be available on the day of assessment.

Unless instructed otherwise, reports for risk assessments and legal reports must be checked by one of the post holder's clinical supervisors before being sent out.

Properly manage financial and commercial dealings. Do not accept any gift from patients, or solicit any fee or payment from a patient or third party without agreement from the educational supervisor or one of the clinical supervisors. Do not meet with any representatives of the pharmaceutical industry during work time, unless this is at a post-graduate meeting that has been organised within ABPI guidelines.

Avoid conflicts of interest and advise others on preventing and dealing with conflicts of interest. Inform the educational supervisor of any real or potential conflict of interest.

Maintain medical confidentiality under all circumstances unless there is an immediate need to override confidentiality in accordance with current guidance. Any non-urgent overriding of clinical confidentiality should be discussed first with the educational supervisor or one of the clinical supervisors.

#### 11. Health

Ensure that your health and the health of others do not put patients at risk.

Obtain advice and treatment for mental and physical health problems. Comply with the Trust's occupational health policy.

Dr Michael Kingham Consultant Forensic Psychiatrist

# DR KINGHAM'S HIGHER SPECIALIST TRAINEE TIMETABLE (EXAMPLE)

	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>
<u>am</u>	9.00 - 11.00  FOLS Case Management meeting and group reflective supervision  FOLS work	10.00 TGU Referrals meeting 12.00 Supervision	External assessment (and related administration)	CJLDS cover and supporting activity (eg clinical audit)	Masters Degree/ Special interest
рm	FOLS patient interviews, administration and report writing.  Occasional attendance at management meetings (for medical management experience)	FOLS work	High risk forum (Maidstone or Medway)  OR external assessment (and related administration)  OR FOLS work	CJLDS cover and FOLS work	Masters Degree/ Special Interest

This timetable is flexible, according to service and trainee commitments.

# **DR KINGHAM'S TIMETABLE**

	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>
am	8.00 - 9.00 Specialty Doctor supervision	Provider Collaborative	FOLS work	Provider Collaborative	Provider Collaborative
	9.00 - 11.00 FOLS Case Management meeting and group reflective supervision. FOLS work	work  10.00 Referrals Meeting  1200 ST4-6 Supervision	Or external assessment	work	work and FOLS referral meeting
pm	FOLS work	Provider Collaborative work	FOLS work  OR external assessment	Provider Collaborative work	FOLS work / clinical administration / appraisal and revalidation activity.