**Job Description: Consultant in Public Health**

**(Scotland, Wales and Northern Ireland)**

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| *This specimen generic job description is intended to assist employers in the UK in establishing Consultant in Public Health (CPH) posts. These senior public health roles are for those who have completed higher specialty training in public health or equivalent and are on the GMC/GDC Specialist Register or UK Public Health (Specialist) Register. Public health is a medical specialty but also has a non-medical route of entry whose members have undergone a postgraduate medical training under the direction of a Medical Royal College. Applicants from both the medical and non-medical route of entry have equal status as public health consultants. Differences in the organisational details of how services are delivered in the UK should be reflected in the job description, but the criteria in the specimen person specification are the recommended minimum requirements for all posts. This provides a framework, but locality and post specific details should be added as indicated.* *The Faculty of Public Health recommends that an outline job plan with indicated programmed activities should be attached to the job description and should include appropriate time for CPD, appraisal and revalidation and other activities such as audit etc*. |
|  |
| Job title: | Consultant in Public Health |
| Employing organisation: | Specify name of e.g. Local Authority, NHS Trust, National Public Health Service for Wales, NHS Board (Scotland), Health & Social Services Board (N Ireland), etc |
| Accountable to: | The postholder will be dually accountable:* professionally to the employing authority [specify]
* managerially to the employing organisation via the line manager, usually the Director of Public Health or equivalent [specify]
 |
| Grade: | NHS Consultant (dependent on experience and qualifications) or NHS Agenda for Change Scale 8d/9/Local Authority Senior Manager (the scale will be dependent on job description grading at local level) Medically qualified individuals (GMC registrants) should be offered the appropriate point on the public health medical consultant pay scale appropriate to their years of seniority and placed on the national Public Health Medicine Consultant TCS. |
| Strategically responsible for: | Many public health consultant roles are change agent roles where the post-holder will expect to be responsible for improving or changing services or environments so as to improve health. They do this from the basis of assessment of need, an understanding of methods of meeting those needs and approaches to getting ownership across organisations and communities. It is helpful to give some broad indication of what problems you are expecting the consultant to solve] |
| Managerially responsible for: | Specify staff by job title for whom postholder is responsible |

1. **Appointment**

This is a full time/part time/job share post for a CPHM/CPH [*specify whether the post is new or a replacement post]* to the *[specify organisation]* based at *[specify location and if appropriate name of host organisation if different from employing organisation]*. *[These posts may be in a variety of organisations including Primary Care Trusts/Local Health Boards, Strategic Health Authorities, NHS Trusts, local or central government or other non-departmental government bodies.]*

1. **Job Summary**

*While the detail of the job outline will differ between employers, it is helpful to provide a short overview of the post. This should capture and detail the seniority and high level of responsibility of the post and demonstrate that the postholder has freedom to act, the breadth of knowledge, skills and expertise required, and the level of mental effort needed. A description of the working relationships, networks and the general working environment should be provided and should indicate whether the postholder will be expected to instigate, develop or maintain these. Local Authorities may wish to add other functions which are traditionally council functions, but which have a close relationship with or contribute to public health.*

In general, the postholder will be expected to be able to cope with multiple and changing demands, and to meet tight deadlines. A high level of intellectual rigour, negotiation and motivation skills and flexibility are required to deal with complex public health issues, to advise and make recommendations regarding services and patient care. A high level of tact and diplomacy is required and an ability to understand other cultures to enable effective working across organisational boundaries and influencing without authority.

The details of the post should be set out below, but it is expected that the postholder:

* will have responsibility for development, implementation and delivery of national, regional and local policies, developing inter-agency and interdisciplinary strategic plans and programmes, with delegated Board or organisational authority to deliver key public health targets
* will provide expert public health advice and leadership to support and inform an evidence-based approach within ethical frameworks for commissioning and developing high quality equitable services, across primary, secondary and social care, and across sectors including local authorities, voluntary organisations, etc
* will develop and utilise information and intelligence systems to underpin public health action across disciplines and organisations, leading collation and interpretation of relevant data
* will *either* manage a team of staff or department *and*/*or* design and deliver a training programme as a major part of the job e.g. training Specialist Registrars in Public Health Medicine and Public Health Specialist Trainees
* will *either* be responsible for the day to day management of a group of staff, *and/or* be responsible for the allocation/placement and supervision of qualified staff or trainees, *and*/*or* be responsible for teaching/delivery of core training on a range of subjects or for specialist training, *and/or* be responsible as a line manager for a single function
* will *either* be an authorised signatory, budget or delegated budget holder (budget/department/service), *and/or* monitor or contribute to the formulation of department/service budgets and financial initiatives *and/or* be a budget holder for a department service
* will *either* lead on public health research, *and/or* commission research audits/projects, *and/or* undertake research or audit.
1. **The employing organisation**

*General information about the employing organisation should be inserted here or in an annex. Details should be given about local NHS organisations, local authorities and other relevant organisations.*

1. **Department/Directorate of Public Health**

**Current staffing**

*Details of current staffing should be provided, and a copy of the current structure and organisational chart of the public health directorate attached. Line management details and/or team management and any training responsibilities should be included.*

**IT, secretarial support and other internal resources**

*List facilities supporting research, equipment for which the postholder is responsible including that used by other people, administrative and secretarial posts, IT, library facilities etc.*

**Training and CPD arrangements**

*Give details about whether the department is approved for the training of public health specialists (Foundation Programme, SHOs, Specialist Registrars in Public Health Medicine, and Public Health Specialist Trainees), the numbers taking part, and any other educational opportunities.*

1. **Management arrangements (amend as appropriate)**

The postholder will be professionally accountable to the employing authority and managerially accountable to the employing authority via their line manager, usually the Director of Public Health or equivalent. Professional appraisal will be required.An initial job plan will be agreed with the successful candidate prior to that individual taking up the post based on the draft job plan attached. This job plan will be reviewed as part of the annual job planning process.

The postholder:

* will manage [*insert number*] staff (including trainees) *(include details of line management duties, recruitment, appraisals, disciplinary and grievance responsibilities and ensure consistency with 1.4 and 1.5 above)*
* will manage budgets *[insert details] (ensure consistency with 1.6 above)*
* will be expected to take part in on call arrangements for communicable disease control/health protection as appropriate depending on local arrangements
* will be expected to deputise for the Director/Head of Department as required
* will manage Specialist Registrars in Public Health Medicine and Public Health Specialis

Trainees (ensure consistency with 1.4 and 1.5 above)

1. **Professional obligations (amend as appropriate)**

The postholder will be expected to:

* participate in the organisation’s staff appraisal scheme and departmental audit, and ensure appraisal and development of any staff for which s/he is responsible
* contribute actively to the training programme for Foundation Year Doctors/SHOs/Specialist Registrars in Public Health Medicine and Public Health Specialist Trainees as appropriate, and to the training of practitioners and primary care professionals within the locality. In agreement with the DPH, becoming an Educational Supervisor. (if the postholder designs and delivers core training, specify as applicable and give details of postholder’s involvement e.g. lead trainer, trainer on a module, develops training for others, etc)
* pursue a programme of CPD/CME, in accordance with Faculty of Public Health requirements, or other recognised body, and undertake revalidation, audit or other measures required to remain on the GMC/GDC Specialist Register or the UK Public Health Register or other specialist register as appropriate. In agreement with the DPH, contribute to the wider the public health professional system by becoming an appraiser or practitioner appraiser for a specified period of time.

Public health consultants work as system leaders at strategic or senior management level or at a senior level of expertise such as epidemiology or health protection. The combination of leadership and managerial skills together with high level of technical skills and knowledge gives them a unique skill set essential for improving the health and wellbeing of populations.

They must be qualified as a public health specialist and be on the GMC, GDC or UKPHR specialist register.

Consultants have the same professional status irrespective of local line management arrangements and have experience in various areas of public health practice.

1. **Key tasks**

*This section should normally be structured around the competency areas for specialist public health practice (www.fph.org.uk) as recognised by the Faculty of Public Health and the UK Voluntary Register Board. It is expected that posts generally will include the vast majority, if not all the range of tasks as set out in both core and defined areas.*

The job description will be subject to review in consultation with the postholder and in the light of the needs of the employing organisation and the development of the speciality of public health and any wider developments in the field of public health.

1. **Work programme**

It is envisaged that the post holder will work XX programmed activities over XX days. Following appointment there will be a meeting at no later than three months with the line manager to review and revise the job plan and objectives of the post holder. The overall split of the programmed activities is 7.5 to be devoted to public health duties and 2.5 to supporting professional activities (as per the Academy of Medical Royal Colleges recommendation). The timetable is indicative only. A formal job plan will be agreed between the post holder and the line manager (usually the DPH) three months after commencing the post and at least annually thereafter.

These professional obligations should be reflected in the job plan. The post-holder may also have external professional responsibilities, e.g. in respect of training or work for the Faculty of Public Health. Time allocation for these additional responsibilities will need to be agreed with the line manager. A suggested draft timetable is below (delete if not required*):*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Day** | **Time** | **Location** | **Work** | **Category** | **No. of PAs** |
| **Monday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **Tuesday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **Wednesday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **Thursday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **Friday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **On- call work** |  |  |  |  | XX |
| **Total PAs** | Public health duties  | XX |
| Supporting professional activities | XX |

1. **On-call and cover arrangements**

Details of on-call rotas, frequency, area/services covered, specialty registrar support, other out-of- hours services.

On-call supplement.

Cover arrangements for post holder and responsibilities for covering colleagues during leave.

1. **Wellbeing**

Effective local occupational health support (confidential, includes modalities of self-referral, promoted regularly at induction and when in post) e.g. The post holder should usually have access to the Occupational Health (OH) Department, (full address, telephone and email). The OH team should have access to a physiotherapist and psychologist, and the post holder may self-refer or be referred through their manager. The post holder should have access to counselling, including face-to-face, and well as legal and financial support and other wellbeing resources. Information about Occupational Health will be disseminated at the induction and regularly when in post to ensure the post holder has timely access to the details if help seeking is necessary.

Availability of local initiatives/resources that promote workforce wellbeing (for example, self- care, work-life balance, stress management, coaching/mentoring, peer group support).

1. **Personal Qualities**

The strategic objective of the post is to (repeat the strategic responsibility).

The post-holder will deal with complex public health and wellbeing challenges in a multi-organisational environment with widely differing governance and finance system and organizational cultures. It is expected that the post-holder will be able to cope with such circumstances as well as multiple and changing demands, and to meet tight deadlines. A high level of intellectual rigour, political awareness and negotiation and motivation skills as well as flexibility and sensitivity are required. The post holder will advise the health and wellbeing board and make recommendations regarding services, residents’ care and wider determinants of health and therefore a high level of tact, diplomacy and leadership is required including the ability work within the local political and at the same time maintain the ability to challenge and advocate for effective working and on specific issues in order to achieve public health outcomes. The achievement of public health outcomes and the successful pursuit of change are the purpose of the job and the metric against which performance will be assessed.

**GENERAL CONDITIONS**

***Terms and conditions of service***

The post is subject to general NHS Terms and Conditions of Service and relevant organisational employment policies.

Those candidates who meet the requirements for appointment as a Consultant in Public Health Medicine will be eligible for the NHS Consultant Contract (*England, Wales, Scotland, NI as appropriate*), salary scale £ [*insert amount*] to £ [*insert amount*].

Those candidates appointed as Consultants in Public Health will be eligible for NHS Agenda for Change Band 8d/9, *[specify scale which will be dependent on job description grading at local level]* (salary scale £ [*insert amount*] to £ [*insert* amount])/Local Authority payscale (£ [*insert* amount] to £ [*insert amount*]),

***On call arrangements***

The postholder may be expected to be on call for health protection and public health and to participate in the communicable disease and environmental hazards control and emergency planning arrangements for [*specify locality*]. Suitable induction will be provided in relation to relevant local arrangements. The post holder should be trained in EPRR and be able to support their organisation’s responsibilities as a Cat 1 responder (including participation in STAC or other rotas depending on local arrangements).

***Indemnity***

As the postholder will only be indemnified for duties undertaken on behalf of *[name of employing organisation]* the postholder is strongly advised to ensure that he/she has appropriate professional defence organisation cover for duties outside the scope of the *[name of employing organisation]* and for private activity within *[name of employing organisation]*. For on call duties provided to other organisations as part of cross cover out of hours arrangements the NHS Litigation Authority has confirmed that those organisations will provide indemnity for the postholder. *These arrangements may differ across the four countries.*

***Flexibility***

The postholder may, with their agreement - which should not reasonably be withheld - be required to undertake other duties which fall within the grading of the post to meet the needs of this new and developing service. The employing organisation is currently working in a climate of great change. It is therefore expected that all staff will develop flexible working practices both within any relevant local public health networks and at other organisational levels as appropriate, to be able to meet the challenges and opportunities of working in public health within the new and existing structures.

***Investors in People (include this paragraph if applicable)***

The employing organisation has made a public commitment to work towards the National Investors in People and Improving Working Lives standards. All Directors and staff will demonstrate their ownership of and their support for these goals through management and corporate action.

***Confidentiality***

A consultant has an obligation not to disclose any information of a confidential nature concerning patients, employees, contractors or the confidential business of the organisation.

***Public Interest Disclosure***

Should a consultant have cause for genuine concern about an issue (including one that would normally be subject to the above paragraph) and believes that disclosure would be in the public interest, he or she should have a right to speak out and be afforded statutory protection and should follow local procedures for disclosure of information in the public interest.

***Data protection***

If required to do so, the postholder will obtain, process and/or use information held on a computer or word processor in a fair and lawful way. The postholder will hold data only for the specified registered purpose and use or disclose data only to authorised persons or organisations as instructed in accordance with the Data Protection Act 2018.

***Health and safety***

Employees must be aware of the responsibilities placed on them by the Health & Safety at Work Act (1974) and its amendments and by food hygiene legislation to ensure that the agreed safety procedures are carried out to maintain a safe condition for employees, patients and visitors.

***Smoking policy (amend as appropriate)***

The employing organisation has a policy that smoking is not allowed in the workplace.

***Equal opportunities policy***

It is the aim of the employing organisation to ensure that no job applicant or employee receives less favourable treatment on grounds of gender, religion, race, colour, sexual orientation, nationality, ethnic or national origins or disability or is placed at a disadvantage by conditions or requirements which cannot be shown to be justifiable. To this end, there is an Equal Opportunities Policy in place and it is for each employee to contribute to its success.

**Appendix 1: Person Specification for Consultant in Public Health**

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| **IMPORTANT: This person specification contains changes introduced in amendments made to the NHS (Appointment of Consultants) Regulations for England, Scotland, Northern Ireland and Wales which came into force during 2005. Further amended in June 2015, and September 2018** |
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| **Education/Qualifications** | ***Essential*** | ***Desirable*** |
| In line with current [legislation](https://www.legislation.gov.uk/uksi/1996/701/regulation/4/made), inclusion in the GMC Full and Specialist Register with a license to practice/GDC Specialist List **or** inclusion in the UK Public Health Register (UKPHR) for Public Health Specialists **at the point of application**. | X |  |
| If included in the GMC Specialist Register/GDC Specialist List in a specialty other than public health medicine/dental public health, candidates must have equivalent training and/or appropriate experience of public health practice | X |  |
| Public health **specialty registrar applicants** who are currently on the UK public health training programme and not yet on the GMC Specialist Register, GDC Specialist List in dental public health or UKPHR **must** provide verifiable signed documentary evidence that they are within 6 months of gaining entry to a register at the date of interview.\* | X |  |
| If an applicant is UK trained in Public Health, they must ALSO be a holder of a Certificate of Completion of Training (CCT), or be within six months of award of CCT by date of interviewIf an applicant is non-UK trained, they will be required to show evidence of equivalence to the UK CCT *[see shortlisting notes below for additional guidance]* | X |  |
| Applicants must meet minimum CPD requirements (i.e. be up to date) in accordance with Faculty of Public Health requirements or other recognised body  | X |  |
| MFPH by examination, by exemption or by assessment, or equivalent | X |  |
| Have documented evidence of current (or past) competence at the level required by the legislative guidance in order to be appointed as an NHS Health Board “Competent Person” for the purposes of the Public Health etc. (Scotland) Act 2008, as set out in the appropriate regulations | X |  |
| Masters in Public Health or equivalent |  | X |

***\*Applicants going through the portfolio registration routes (GMC or UKPHR) are not eligible to be shortlisted for interview until they are included on the register. The six-month rule does not apply to these portfolio route applicants.***

|  |  |  |
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| **Personal qualities [**Recruiters are welcome to refine these criteria to ensure good fit with post concerned] |  |  |
| Able to influence senior members including directors and CEOs | X |  |
| Able to both lead teams and to able to contribute effectively in teams led by junior colleagues | X |  |
| Commitment to work within a political system irrespective of personal political affiliations | X |  |
| **Experience**[Recruiters are welcome to refine these criteria to ensure good fit with post concerned] |  |  |
| Delivery of successful change management programmes across organizational boundaries  | X |  |
| Media experience demonstrating delivery of effective health behaviour or health promotion messages |  | X |
| Experience of using complex information to explain public health issues to a range of audiences | X |  |
| **Skills**[Recruiters are welcome to refine these criteria to ensure good fit with post concerned] |  |  |
| Strategic thinker with proven leadership skills and operational nous | X |  |
| Able to demonstrate and motivate organisations to contribute to improving the public’s health and wellbeing through mainstream activities and within resources | X |  |
| Ability to lead and manage the response successfully in unplanned and unforeseen circumstances | X |  |
| Analytical skills able to utilize both qualitative (including health economics) and quantitative information  | X |  |
| Ability to design, develop, interpret and implement strategies and policies | X |  |
| **Knowledge**[Recruiters are welcome to refine these criteria to ensure good fit with post concerned] |  |  |
| In depth understanding of the health and care system and the relationships with both local national government | X |  |
| In depth knowledge of methods of developing clinical quality assurance, quality improvement, evaluation and evidence based public health practice | X |  |
| Strong and demonstrable understanding of interfaces between health, social care and key partners (dealing with wider determinants of health) | X |  |
| Understanding of the public sector duty and the inequality duty and their application to public health practice | X |  |
| **Equality and diversity** |
| An understanding of and commitment to equality of opportunity and good working relationships, both in terms of day-to-day working practices, but also in relation to management system | X | I |
| **\*Assessment will take place with reference to the following information****A = Application form I = Interview C = Certificate T = Test** |

**Appendix II: FACULTY OF PUBLIC HEALTH COMPETENCIES**

**(Based on the 2022 PH Specialty Training Curriculum)**

All consultants irrespective of their background are expected to be proficient in the competencies set out below.

* 1. **Use of public health intelligence to survey and assess a population’s health and wellbeing**

*To be able to synthesise data from multiple sources on the surveillance or assessment of a population’s health and wellbeing and on the wider environment, so that the evidence can be communicated clearly and inform action planning to improve population health outcomes.*

To be able to synthesise data from multiple sources on the surveillance or assessment of a population’s health and wellbeing and on the wider environment, so that the evidence can be communicated clearly and inform action planning to improve population health outcomes.

* 1. **Assessing the evidence of effectiveness of interventions, programmes and services intended to improve the health or wellbeing of individuals or populations**

*To be able to use a range of resources to generate and communicate appropriately evidenced and informed recommendations for improving population health across operational and strategic health and care settings.*

* 1. **Policy and strategy development and implementation**

*To be able to influence and contribute to the development of policy and lead the development and implementation of a strategy.*

* 1. **Strategic leadership and collaborative working for health**

*To use a range of effective strategic leadership, organisational and management skills, in a variety of complex public health situations and contexts, dealing effectively with uncertainty and the unexpected to achieve public health goals.*

* 1. **Health Improvement, Determinants of Health, and Health Communication**

*To influence and act on the broad determinants, behaviours and environmental factors influencing health at a system, community and individual level to improve and promote the health of current and future generations. To be proactive in addressing health inequalities and prioritising the most vulnerable or disadvantaged groups in the population.*

* 1. **Health Protection**

*To identify, assess and communicate risks associated with hazards relevant to health protection, and to lead and co-ordinate the appropriate public health response. To understand how those risks associated with hazards relevant to health protection may be influenced by climate change and environmental degradation currently and in the future.*

* 1. **Health and Care Public Health**

*To be able to improve the efficiency, effectiveness, safety, reliability, responsiveness, sustainability and equity of health and care services through applying insights from multiple sources including formal research, health surveillance, needs analysis, service monitoring and evaluation.*

* 1. **Academic public health**

*To add an academic perspective to all public health work undertaken. Specifically to be able to critically appraise evidence to inform policy and practice, identify evidence gaps with strategies to address these gaps, undertake research activities of a standard that is publishable in peer-reviewed journals and demonstrate competence in teaching and learning across all areas of public health practice.*

* 1. **Professional, personal and ethical development**

*To be able to shape, pursue actively and evaluate your own personal and professional development, using insight into your own behaviours and attitudes and their impact to modify behaviour and to practise within the framework of the GMC's Good Medical Practice (as used for appraisal and revalidation for consultants in public health) and the UKPHR’s Code of Conduct.*

**10. Integration and application for consultant practice**

*To be able to demonstrate the consistent use of sound judgment to select from a range of advanced public health expertise and skills, and to use them effectively, working at senior organisational levels, to deliver improved population health in complex and unpredictable environments.*

**Appendix III: shortlisting notes**

1. **Applicants in training grades**
	1. Medical and dental applicants

All medical/dental applicants must have Full and Specialist registration (with a license to practice) with the General Medical Council or General Dental Council (GMC/GDC) **or be eligible for registration within six months of interview.** Once a candidate is a holder of the Certificate of Completion of Training (CCT), registration with the relevant register is guaranteed.

Applicants that are UK trained, must ALSO be a holder of a Certificate of Completion of Training (CCT), or be within six months of award of CCT by date of interview demonstrated by a letter from the Training Programme.

* 1. Non-Medical Applicants in training programme

All non-medical applicants on the public health training programme must be registered with the UKPHR **or be registered within six months of the interview**. Applicants must provide proof (confirmation from their Training Programme Director the CCT) at the interview.

1. **Applicants in non-training grades**

Applicants that are non-UK trained, will be required to show evidence of equivalence to the UK CCT.

Applicants from a medical background would normally be expected to have gained full specialist registration with the GMC through the Certificate of Eligibility for Specialist Registration (CESR) route. However, exceptionally, individuals who can demonstrate that they have submitted CESR application to the GMC may be considered for shortlisting.

Applicants from a background other than medicine are expected to have gained full specialist registration with the UKPHR at the point of application.

**Employers are advised that individuals are not eligible for and should not be shortlisted for consultant in public health posts (including DPH posts) until such point as they have gained entry to the GMC Specialist Register/GDC Specialist List in dental public health/UK Public Health (Specialist) Register. Although an applicant may be able to provide documentary evidence that a portfolio application is in progress, no guarantee can be made as to the outcome of an application to the GMC/GDC/UKPHR specialist registers. The exception to this is when the candidate holds the CCT.**

**The above guidance applies to applications for both general and defined specialist registration with the UKPHR. Individuals with defined specialist registration are eligible for consideration for shortlisting for, and appointment to, consultant posts including those at DPH level. In all appointments, employers will wish to ensure that an applicant’s areas of competence meet those required in the person specification.**