**Royal College of Psychiatrists (RCPsych)**

**Job description (JD) checklist**

A completed checklist is required to accompany each JD submitted for approval (please do not overwrite old forms). The sections you (the employer) should complete are shaded in **GREY** below. Please ensure All sections in the Checklist Criteria section and the ‘employer’ columns **including page/section numbers** are completed to ensure all required items are included in your JD for swift approval.

Once completed please submit **this checklist, plus your JD (in Word doc.x format)** and any supporting documents via our [JD Portal.](https://www.rcpsych.ac.uk/improving-care/workforce/job-description-approval-process/job-description-form) Full guidance on how to do this is available on our [guidance platform](https://rise.articulate.com/share/BLknQ5i2w3RcL3ahLyEFbEfa4U2l4-r0).

|  |
| --- |
| For any further queries please email the  [your local JD Team](https://www.rcpsych.ac.uk/improving-care/workforce/job-description-approval-process/regional-office-contacts) or the Job Description Co-ordinator  |

Please see further information, supporting documents and JD exemplar templates on our [JD approvals web page](https://www.rcpsych.ac.uk/improving-care/workforce/job-description-approval-process) as our checklist is based on the information provided in these.

For RCPsych admin use only

|  |  |
| --- | --- |
| Date Received | **Click or tap to enter a date** |
| Royal College Reference Number |  |
| Region/Nation | **Choose an item** |
| Version History date | **V1 Click or tap to enter a date.** | **V2 Click or tap to enter a date.** | **V3 Click or tap to enter a date.** | **V4 Click or tap to enter a date.** |
| Royal College Checker/RSRs |  |
| Royal College RAs/DRAs |  |
| Date Approved | **Click or tap to enter a date***Insert RCPSych Approval Stamp* |

Basic information about the post – to be completed by Employer

|  |  |
| --- | --- |
| **Employer/Trust** |  |
| **Employer vacancy reference number***(if applicable)* |  |
| **Type of post** *(choose one type)*  | **Choose a Post type** |
| *If post type is other please state here:* |  |
| **Post Title** (*Please make unique to this job & include Service/Ward name to avoid duplication)* |  |
| **Specialty (main)** | **Choose specialty** |
| **Contract type:** *eg substantive/fixed term* |  |
| **Does this post have a trainee attached?** | **Choose an item.** |
| **Programmed Activities (PAs)***The standard for full-time (10 PA) posts would be an allocation of 2.5 SPAs, with all less-than-full-time posts having a proportionate allocation of direct clinical care and SPAs, with a minimum of 1.5 SPAs for the purposes of appraisal and revalidation* | **No. of PAs: Choose No.****DCC: Click to enter decimal number****SPA: Click to enter decimal number** |
| **On Call requirement****Details of rota and payment** | **Yes** [ ]  **No** [ ] **Option to participate** [ ]

|  |  |
| --- | --- |
| **On Call rota** |  |
| **Availability %** |  |
| **Additional PA** |  |

 |
| **Service/Network/Locality information** |  |
| **Full address of main work base** |  |
| **Reason for vacancy**  |  |
| **Date of proposed AAC Panel (if known)** | **Choose Date** |
| **Job Description author and title** | **Name:** **Job Title:**  |
| **Primary contact for this JD**  | **Name:** **E-mail:** **Tel:**  |
| **Secondary contact (if appropriate)**  | **Name:****E-mail:** **Tel:** |

Checklist Criteria – For completion by the Employer and Royal College

For each criterion, the employer should tick the relevant **GREY shaded box** to confirm that the detail is included in the JD and enter the relevant page number(s). If the criteria are not covered the employer should not tick the box but add a comment in the Comments (Employer) column explaining why.

The Royal College RSR/RA/DRA/Checker should tick the peach shaded boxes of the form to indicate that the criteria is covered in line with our [guidance](https://rise.articulate.com/share/SgedtgPaFLbVhF5aF1wbiK-XhYmq4SnY#/lessons/uzAOaHZcIclgKKz94QzSB-_ooSI8YiFW). Please detail any amendments required in the RH general comments column if missing or unclear, adding any extra comments or summary or updates needed, in Sections 24./25.

| Criteria | Employerchecked | Page/Section Nos | Comments (Employer) | RCPsychchecked as included | Comments(RCPsych) |
| --- | --- | --- | --- | --- | --- |
| 1. **Title of Post and Specialty**
 |[ ]   |  |[ ]   |
| 1. **Full address of base**
 |[ ]   |  |[ ]   |
| 1. **Total number of PAs**
 |[ ]   |  |[ ]   |
| 1. **Professional Accountability (e.g. clinical/medical director)**
 |[ ]   |  |[ ]   |
| 1. **Operational Accountability (e.g. Service Manager/Chief Exec)**
 |[ ]   |  |[ ]   |
| 1. **Trust Details**
 |[ ]   |  |[ ]   |
| 1. **Service Details**
 |  |  |  |  |  |
| * Replacement/new post
 |[ ]   |  |[ ]   |
| * Rationale for post development
 |[ ]   |  |[ ]   |
| * Local population needs/demographics
 |[ ]   |  |[ ]   |
| * Workload assessment/referral rates/referral protocols/caseload numbers/other team members responsibilities to manage referrals/caseloads
 |[ ]   |  |[ ]   |
| * Role of this post in relation to the local service (i.e. community/inpatients/liaison etc)
 |[ ]   |  |[ ]   |
| * Any special responsibilities and details of this role
 |[ ]   |  |[ ]   |
| * Detail of other local mental health services
 |[ ]   |  |[ ]   |
| 1. **Support to the post**
 |  |  |  |  |  |
| * Team composition
 |[ ]   |  |[ ]   |
| * CT1-3/Spec Dr/ST4-6 support
 |[ ]   |  |[ ]   |
| * Dedicated secretarial/admin support

[(See RCPSych Guidance Document)](https://www.rcpsych.ac.uk/docs/default-source/improving-care/workforce/rcpsych-office-accomodation-admin-jd-guidance-ps06_16-july21.pdf?sfvrsn=54b4a7d8_2) |[ ]   |  |[ ]   |
| * Office arrangements

[(See RCPSych Guidance Document)](https://www.rcpsych.ac.uk/docs/default-source/improving-care/workforce/rcpsych-office-accomodation-admin-jd-guidance-ps06_16-july21.pdf?sfvrsn=54b4a7d8_2) |[ ]   |  |[ ]   |
| * Access to PC/laptop/phone

[(See RCPSych Guidance Document)](https://www.rcpsych.ac.uk/docs/default-source/improving-care/workforce/rcpsych-office-accomodation-admin-jd-guidance-ps06_16-july21.pdf?sfvrsn=54b4a7d8_2) |[ ]   |  |[ ]   |
| * IT support/informatics

[(See RCPSych Guidance Document)](https://www.rcpsych.ac.uk/docs/default-source/improving-care/workforce/rcpsych-office-accomodation-admin-jd-guidance-ps06_16-july21.pdf?sfvrsn=54b4a7d8_2) |[ ]   |  |[ ]   |
| 1. **CPD and Supervision**
 |  |  |  |  |  |
| * Name of Supervising Consultant for SAS posts
 |[ ]   |  |[ ]   |
| * Name of the Trust SAS lead/SAS Tutor for SAS posts
 |[ ]   |  |[ ]   |
| * Local arrangements for peer review group
 |[ ]   |  |[ ]   |
| * Statement of expectation of good standing for CPD
 |[ ]   |  |[ ]   |
| * Statement and details of Trust support for CPD
 |[ ]   |  |[ ]   |
| * Study Leave details
 |[ ]   |  |[ ]   |
| * Local arrangements for supervision of post holder
 |[ ]   |  |[ ]   |
| 1. **Clinical Leadership**
 |  |  |  |  |  |
| * Trust management/medical management structure
 |[ ]   |  |[ ]   |
| * Local clinical leadership arrangements
 |[ ]   |  |[ ]   |
| * Role of this post in terms of strategic service development/business planning
 |[ ]   |  |[ ]   |
| 1. **Appraisal/re-validation arrangements**
 |[ ]   |  |[ ]   |
| 1. **Job planning arrangements**

Bilateral consultation and negotiation in the event of job content changing |[ ]   |  |[ ]   |
| 1. **Teaching and Training**
 |  |  |  |  |  |
| * For SAS posts - details of opportunities for progression of career including access to local MRCPsych/CESR courses
 |[ ]   |  |[ ]   |
| * Detail of any teaching commitments
 |[ ]   |  |[ ]   |
| * Teaching resources available
 |[ ]   |  |[ ]   |
| * Details of educational/clinical supervision responsibilities
 |[ ]   |  |[ ]   |
| * Educational supervision arrangements in the Trust/tutor role, state name of DME etc.
 |[ ]   |  |[ ]   |
| * Medical School details (if applicable)
 |[ ]   |  |[ ]   |
| 1. **Research/Academic**
 |  |  |  |  |  |
| * Support/availability/resources
 |[ ]   |  |[ ]   |
| * Academic department details
 |[ ]   |  |[ ]   |
| 1. **Clinical Governance**
 |  |  |  |  |  |
| * Management arrangements
 |[ ]   |  |[ ]   |
| * Audit resources/expectations
 |[ ]   |  |[ ]   |
| 1. **Clinical Duties**
 |[ ]   |  |[ ]   |
| * Details of Clinical duties
 |[ ]   |  |[ ]   |
| * No of OP clinics per week and ratio of new patients: follow ups per clinic
 |[ ]   |  |[ ]   |
| * No of day patients and other day care services
 |[ ]   |  |[ ]   |
| * No of beds to cover- is it considered reasonable?
 |[ ]   |  |[ ]   |
| * Any requirement for Section 12 status and /or A/C status or DOL assessor
 |[ ]   |  |[ ]   |
| 1. **On Call Arrangements**
 |[ ]   |  |[ ]   |
| * Frequency and remuneration/banding
 |[ ]   |  |[ ]   |
| * Detail of rota and specialties covered
 |[ ]   |  |[ ]   |
| 1. **Leave and cover arrangements**
 |[ ]   |  |[ ]   |
| 1. **Statement on Equality and Diversity**
 |[ ]   |  |[ ]   |
| 1. **Wellbeing fully covered**
 |  |  |  |  |  |
| * Local Occupational Health (OH) support -

(should include - brief service details including: location, contact details, modalities of access/ self-referral option, confidentiality, resources available via OH)Plus details about OH are disseminated at induction and regularly when in post. |[ ]   |  |[ ]   |
| * Local organisational systems in place to support doctor's wellbeing following serious incidents that involve their patients (e.g. nominated senior colleague support, Balint Groups for consultants, etc)
 |[ ]   |  |[ ]   |
| * Timely job plan review with the line manager when there are proposed workload changes to support safe working and identify the need for any additional support (eg. unexpected request to cover a unit/ward/service in addition to current workload)
 |[ ]   |  |[ ]   |
| * Local initiatives/resources that promote wellbeing

(Include examples of local initiatives/resources that promote wellbeing (eg. stress management courses, resilience training, burnout awareness, mindfulness, physical exercise resources, etc) |[ ]   |  |[ ]   |
| 1. **Timetable/Job Plan**

Clearly outlining daily activities and SPA/DCC[(See RCPSych Guidance Document)](https://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/college-reports/college-report-cr207.pdf?sfvrsn=b2229b95_4) |[ ]   |  |[ ]   |
| * Ring fenced time for weekly supervision of others
 |[ ]   |  |[ ]   |
| * Ring fenced time for CPD at least 1 session
 |[ ]   |  |[ ]   |
| * Ring fenced time for Audit
 |[ ]   |  |[ ]   |
| * Ring fenced time for Admin
 |[ ]   |  |[ ]   |
| 1. **Person Specification**
 |[ ]   |  |[ ]   |
| 1. [**For Welsh posts**](https://www.rcpsych.ac.uk/members/devolved-nations/rcpsych-in-wales/supporting-recruitment/)

**Under the statutory duty to comply with standards 106 and 106A of the Welsh Language Standards (No.7) Regulations 2018:*** Have you assessed the need for Welsh language skills when assessing the requirements for a new or vacant post?
 | [ ]  |  |  | [ ]  |  |
| * Have you identified the post as one where Welsh language is essential, desirable, where Welsh language skills need to be learnt when appointed, or where Welsh language skills are not necessary?
 | [ ]  |  |  |[ ]   |
| * [**For Northern Ireland Consultant posts**](../../03-JD%20Checklists-Exemplars-Approval%20Template%20%26-Information-2021%20onwards/RCPsych%20in%20Northern%20Ireland%20%7C%20Royal%20College%20of%20Psychiatrists)

JDs in Northern Ireland must refer to Consultants having adequate time to fulfil duties under both the MHO (1986) and the MCA (2016) | [ ]  |  |  |[ ]   |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| 1. **Additional Comments Review section - to be completed by RCPsych Checker/Representatives/Assessor(s)**

*Please add any additional comments regarding points not covered in the JD in conjunction with the checklist above including the* ***number of the checklist criteria/page section no’s*** *you are commenting on, as required.*

|  |
| --- |
| Does the Checker/RSR/DRA/RA feel this is a feasible job? Yes [ ]  No [ ]  |

**RSR additional comments (V1)** |
| 1. **Summary of Feedback for amendment**

**RA additional comments (V1)** |
| **Date of Approval:****0000000** | **Approver *(please add your name here)*:**   |