

Towards Successful Consultant Recruitment, Appointment and Retention

Consultant Recruitment Group
January 2016

The Director-General identified the need to address operational and administrative barriers to successful consultant recruitment and retention

McCraith (2013-2016)

Aimed at

- Improving graduate retention in the public health system
- Planning for future service needs
- Realising maximum benefit from investment in education

STRATEGIC REVIEW OF MEDICAL TRAINING AND CAREER STRUCTURE 3 REPORTS,
FINAL (25 Recommendations) June 2014

2 Reviews:

International models of career structure for medical specialists,
Mentoring in postgraduate medical education and specialist training

4 Progress Reports: Feb '15, July '15, Feb '16, Nov '16

“With regard to the current multi-step Consultant appointment process, the Working Group recommends that it should be re-designed and modernised as a matter of priority. A systems and service-wide approach to posts – both new and replacement – should be incorporated, that better balances local autonomy and national coordination – in line with the Hospital Group structures.”

Some contributing factors to inefficiencies in the Consultant appointment process included:

Looked at

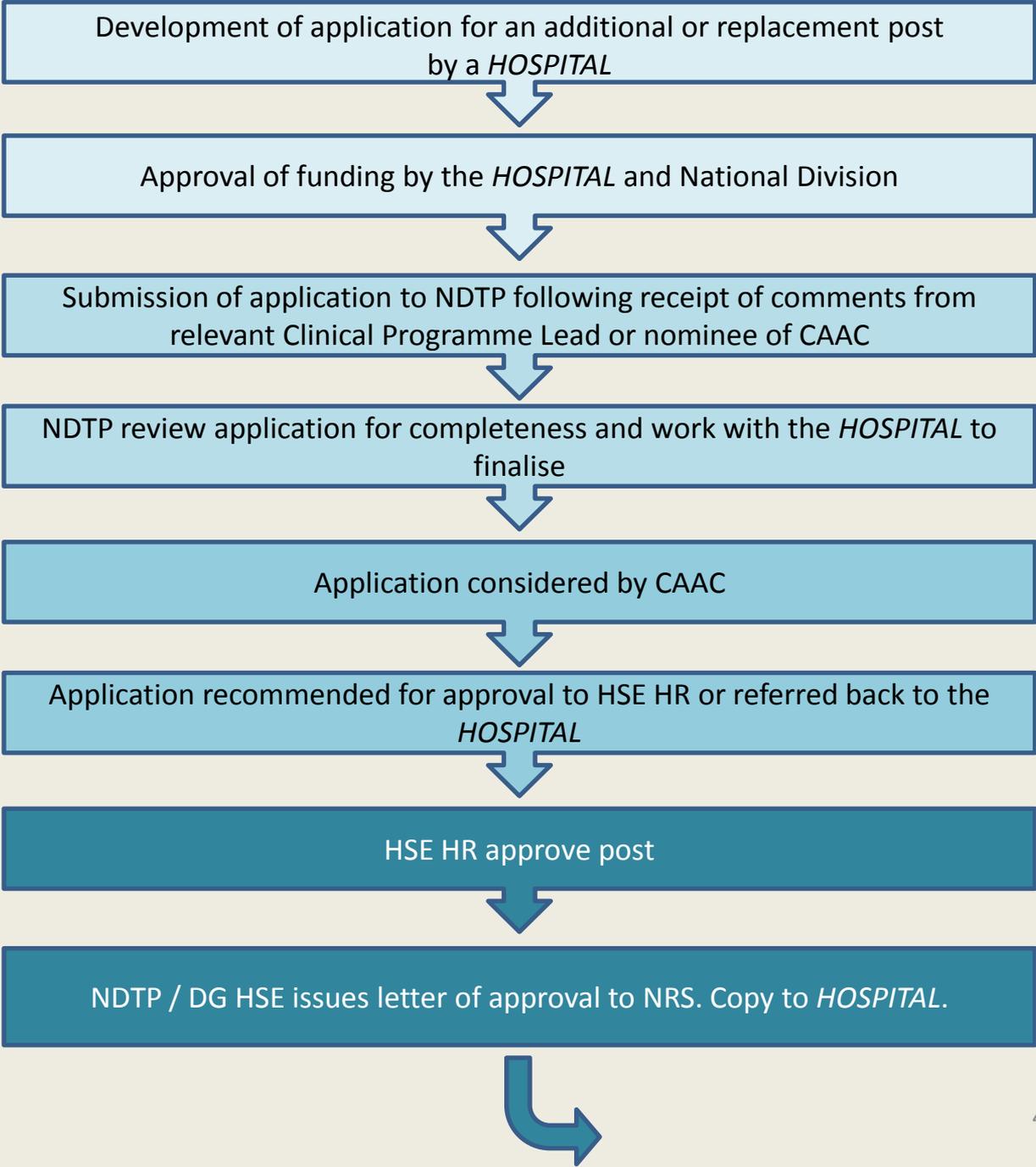
- Often inadequate planning, strategic alignment or funding of posts.
- No clear link between the creation of posts and the availability of potential candidates.
- Candidates could not easily access information on forthcoming opportunities.
- Employers took lengthy periods to progress applications to approve replacement posts.
- Inadequate job planning and allocation of resources.
- Once approved there were further delays before posts were advertised.
- Such delays often required appointment of locums.
- Lack of clarity regarding opportunities for flexible working.
- Once posts were offered candidates often delayed taking up appointment.
- New Consultants experienced inconsistent induction processes and limited resources
- Poorly utilised probation and appraisal processes.

Not looked at

- *Remuneration, manpower, working conditions, health service configuration, focussed training, role substitution etc.*

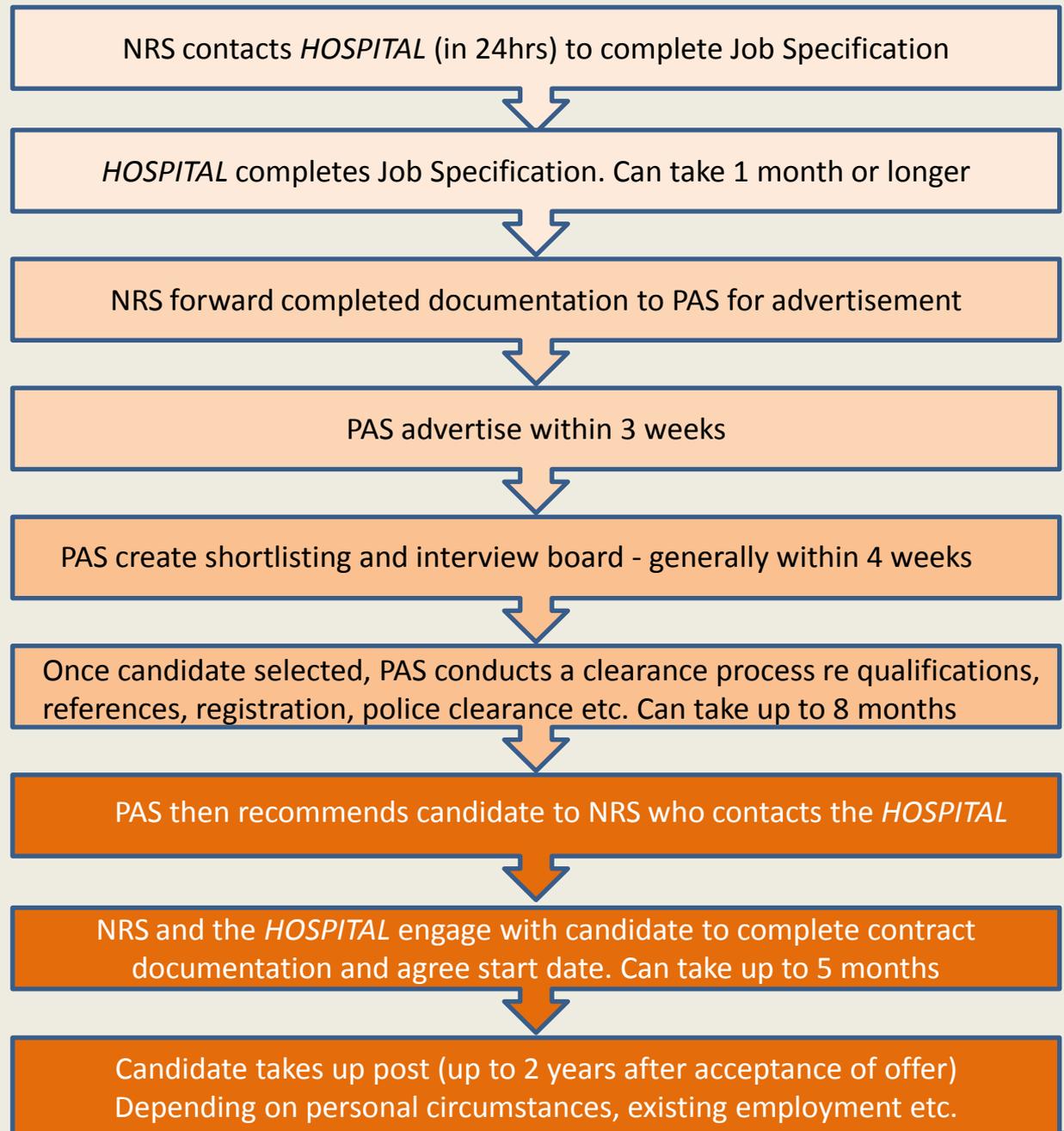
The Consultant Appointment Journey PART 1

- HOSPITAL*
 - Hospital
 - Agency
 - Group
 - CHO
 - Mental Health Service
- NDTP
 - CAU
 - CAAC
 - Workforce
 - NCHDs
- NRS
- HSE HR
- DG HSE



The Consultant Appointment Journey PART 2

NRS
PAS



Contemporary Context

- HSE is facing unprecedented challenges and demands.
- Consultants are fundamental to the delivery of good quality medical care.
- A consultant provided service is a national policy. (*Hanly 2003*)
- Working as a coordinated clinical and management teams is now a pre-requisite.
- Consultant planning and appointment is an important part of managing resources.
- Consultants should play a leadership role in training and management.
- A more differentiated consultant career structure is required to allow for research, teaching, quality improvement and other roles. (*McCraith 2014*)
- Not all consultants can be involved in all activities at the same time, but the system should allow them to be undertaken across teams and at different intervals.
- The HSE acknowledges healthcare's absolute dependence on consultants being involved in these roles.

Application, Approval and Recruitment process before implementation

Application, Approval and Recruitment process after implementation

Disconnect between posts and training programmes. Limited engagement with trainees/ candidates on opportunities

↑Links between posts, workforce planning and training programmes. ↑Engagement with candidates and ↑proleptic opportunities

HOSPITALS submit 1) applications to CAAC, once approved 2) then further documentation to NRS

All documentation is now part of a single pack, submitted at the start of the process

CAAC and NRS documentation is lengthy, complex and not available to candidates

Documentation shortened. Letter of Approval and 'Approved Consultant Appointment' document available to candidates

Documentation often omitted strategic plan, job description or necessary resources to perform duties of post

Now includes strategic plan, job description, work practice plan and identifies resources needed

No set timescale for advertising posts

Should advertise within 2 weeks of approval

PAS may wait weeks before receiving details of Interview Boards

Interview Board nominees required before advertisement

Inconsistent or absent induction, probation, appraisal processes

Standardised and formal induction, probation, appraisal processes

Limited, out of date guidance on process for approval of and recruitment to Consultant post

Comprehensive guidance on each aspect of the process available to employers, applicants and appointees

NEW

Proposed
↓
Approved Consultant Appointment Document
(including Job Plan and Statement of Resources)

33 new recommendations

Towards Successful Consultant Recruitment, Appointment and Retention

The Whole Package

1. Main: Overview, Background and 33 Proposals, Implementation timelines and responsible stakeholders
2. Consultant Appointment Document/Form (Proposed » Approved)
3. Clinical Programme Assessment Form

Documents:

1. Job Planning and Resources to Support Consultant Appointment
2. On Induction
3. On Probation
4. On Consultant Appraisal
5. Consultant recruitment in the Mental Health Services
6. Guidance Document
 - Guidance for Employers
 - Guidance for Applicants
 - Guidance for Consultants after appointment

Guidance for Employers

- What is a Consultant?
- Consultant Contract and Contract Type
- Regulation of Consultant posts by the HSE
- Requirement to seek approval before making a Consultant appointment
- Assignment of regulatory functions within HSE
- Committees advising HSE on Consultant appointments
- How is the need for a Consultant post identified?
- Proposed / Approved Consultant Appointment document
- Job Planning and resources to support Consultant appointment
- Evaluation of applications
- Applications for temporary or locum Consultant posts
- Qualifications for Consultant appointments
- Issuing of HSE approval for Consultant posts

Guidance for Applicants

- Treatment as a new entrant
- Qualifications for Consultant appointments
- Eligibility to compete for a Consultant post
- Proleptic appointments
- Recruitment Standards
- The recruitment process
 - Advertisement
 - Informal enquiries
 - Application and application documentation
 - Selection Boards: Short-listing and Interview Boards
 - The interview process
 - Validation of proposed appointee
 - Recommendation
 - Timeframes and start date
 - Appointment
- Induction
 - What is Induction?
 - Policy and guidance
 - Aims of an effective Induction
 - Benefits of an effective Induction
 - Roles and responsibilities
 - Induction schedule for the new Consultant

Guidance for Consultants after appointment

Probation

- Purpose of probation
- Application of probation to Consultants
- Reviews during probation
- Extension of probation
- The end of the probationary period
- Serious misconduct during probation
- Termination

Appraisal

- What is appraisal?
- Why introduce appraisal for Consultants now?
- What is in it for me?
- How will appraisal work?
- Who will appraise me?

Movement between Type of Contract / Category of post

Restructuring of Consultant posts

Expression of interest to transfer between Consultant posts

Change of title of Consultant posts

Exit interviews

Acknowledgements

Committee

Stakeholders

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