Guidance for office accommodation and administrative support for consultant posts

Position Statement PS06/2016
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Royal College of Psychiatrists
London
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Introduction

The Royal College of Psychiatrists provides a range of guidance documents to promote and support the safe and effective recruitment and employment of psychiatrists. In June 2015 the College published a position statement on office accommodation and administrative support for consultant posts, and this statement was revised in January 2016. Following feedback from Employers and College members, we are issuing this revised position statement to clarify what the College regards as good practice.

Consultants are typically based in multi-disciplinary teams, working with a wide range of healthcare professionals, and all team members will have different requirements for working environments at different times.

However, consultant psychiatrists are highly trained and experienced clinicians who are often required to make clinical assessments at short notice in order to determine risk and treatment plans in the most complex patient cases.

The interests and dignity of patients lie at the heart of the work of consultants, and many of their roles and responsibilities (such as speaking to patients and relatives, dictating highly confidential reports and case notes and liaising with other statutory bodies) demand a genuinely confidential space that is immediately available to consultants, even though the patient may not be present.

Furthermore, consultant psychiatrists are senior leaders with diverse roles that often extend beyond their immediate clinical work. These can include specific and unique leadership and management elements, medical education and research, supervision of trainees, etc. These roles require access to a secure, private space at different times if the consultant workforce is to be able to function effectively. It is therefore essential that practical and realistic arrangements are in place which make best use of the consultant’s time.

College recommendations
Office accommodation

1. The College’s strong recommendation is for consultant psychiatrists to be provided with designated private office space, suitably equipped with appropriate information and communications technology.

2. The consultant should be the sole occupier of the office; it should be understood that the designated consultant’s office space is theirs alone for the duration of their working hours.

3. The provision of hot-desks would not meet the College guidance for consultants and job descriptions that propose hot-desking arrangements will not be approved.

4. Where agreed and negotiated in advance, it could be shared only with other consultants (for example, if the consultants job share or work less than full-time). This will allow the consultant(s) to fulfil all of their professional roles and responsibilities in a timely and effective way (point 2 should be considered here).

5. Where provision of a private office for consultants is not practicable, consultants should be provided with a dedicated space which is sufficiently private and resourced to carry out the full range of consultant functions.

6. Such space should include break-out areas, immediately available, where discussions and phone calls can take place in complete confidence.

7. Employers should ensure this arrangement is discussed with the consultant, with regular review, to ensure they are able to practise safely and effectively.

Administrative support

Psychiatrists require a personal assistant to ensure production of letters and reports within the time limits agreed between the employer and commissioners, and to enable them to effectively participate in all their roles and responsibilities.

Employers should organise their administrative support to facilitate this standard, to ensure high-quality communication between the doctor, their patients and colleagues. Consultants would ideally be assisted by a Medical Secretary.

Consultants need a named secretary who can manage diaries and provide support for non-clinical activities, co-ordinating with the consultant. The named secretary should be suitably qualified, accessible and have sufficient time to carry out these duties.

Consultants may also need administrative and IT support around mobile working and clinical database management, given the move to more managed care systems of service delivery, digital working and the
increasing use of databases to support clinical work.

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