

# Steps to making a difference as a new consultant



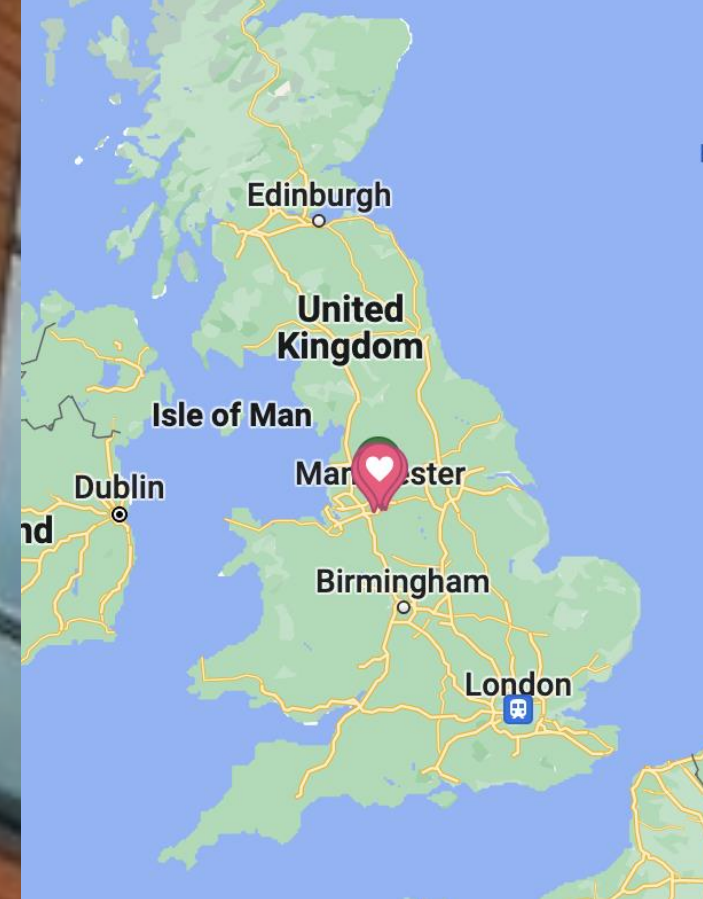
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# Disclosures

- Speaker fees for GSK, UCB
- Consulting for PTC Therapeutics
- Advisory Board member for Astra Zeneca and Pfizer
- Data and Science Monitoring Board chair for Horizon Therapeutics
- Grant funding from Pfizer



**NHS**  
**Northern Care Alliance**  
NHS Foundation Trust

# Salford Royal Neuromuscular clinic



<http://bit.ly/2ZPXKP9>

# Introduction to the Role of a Medical Consultant

- **Definition:**
  - A consultant leads clinical teams, ensures high-quality patient care, and contributes to medical practice innovation
- **Key Responsibilities:**
  - Clinical leadership and decision-making
  - Mentoring and educating junior staff
  - Advocating for patients and improving clinical outcomes

# What's your USP / unique combination?

- USS
- Education
- Sub-speciality interest
- Procedures
- Non-medical skills
- Quality improvement
- Management
- Research

# Flexibility: Adaptability is Key

- **Unpredictable Elements:**
  - Helping out when available and being prepared for the unexpected.
  - Managing unscheduled patients in outpatient clinics and dealing with delays in patient appointments.
  - Covering for unplanned absences (staff or patient-related).
  - Handling continuous interruptions (nurses, residents, urgent queries)
- **Job Planning:**
  - Understand that job planning may shift depending on departmental needs.
  - Flexibility with patient allocations and clinic adjustments.

# What are consultants looking at when employing colleagues in the future

- How ST's conduct themselves
  - consultants have an all-seeing eye
  - interactions with secretaries / clerks / nurses v important
- Show some initiative
  - safe pair of hands...keep the lines of communication open informed
  - impresses /reassures
- Intellectual discussions



# Your training is not just about WPBAs, it's about developing independent thought and initiative

- What would I do if I was the consultant?
- Ask a clinical question you won't get a straight answer....what is your proposed plan? Teamwork
- Who would you like to emulate?
- Keep up to date with the literature





# What do I actually do?

- Usually work from about 0800-1800
- Mainly outpatient based
- Troubleshoot
- Mandatory training
- Clinical/educational supervisor
- Support/nurture colleagues, keep morale up
- Phone/email advice
- High cost drugs prescriptions
- Service development/audit/QI/clin governance
- Clinical trial work
- Lots of admin/email
- Enjoy my job

# My job plan

	Details	Current	
DCC	Monday pm clinic	1.000	
	Wed am clinic	1.000	
	Clinical admin associated with clinic	0.500	
	Advice and Guidance	0.250	
	Clinical queries	0.500	
	Neuromuscular MDT	0.500	
	Prescriptions	0.500	
	X-ray meeting	0.250	
	Metrics meeting	0.250	
	Ward round	0.167	
	Clinical trial work	0.500	
	Consultant of the day/weekday referrals	0.220	
	<b>Total</b>		<b>5.417</b>
SPA	Core SpA	1.000	
	UG teaching	0.580	
	Educational supervision	0.250	
	Departmental meeting	0.250	
	Audit lead	0.250	
	Audit/AI work	0.250	
	Appraisor work (x2)	0.110	
			<b>2.690</b>
UoM	Contracted activities		<b>5.000</b>
		<b>Total</b>	<b>13.107</b>

# Equality

- Unconscious bias
- Snap judgements (applies to staff and patients)
- Speak up when see biased behaviour in others
- Respect
- Some voices not always heard

The screenshot shows a web browser window displaying the Lean In website. The page title is "50 Ways to Fight Bias card activity, buy or download today — Lean In". The navigation menu includes "LEAN IN", "FOR WOMEN", "FOR ALLIES", "FOR COMPANIES", "ISSUES", "LEAN IN CIRCLES", "ABOUT US", and "Sign In". The main content area features the heading "50 WAYS TO FIGHT BIAS" and a description: "The cards highlight 50 specific examples of gender bias in the workplace, encourage participants to brainstorm solutions together, and offer research-backed recommendations for what to do." Below this, there are three options for purchasing or downloading the cards, each with a "FREE" or "\$35 (at cost)" price tag. A "More resources for 50 Ways" section includes links for "Bring it to your company", "Learn more about the program", "Read FAQs", and "Give us feedback". On the right side, a large orange card is displayed, titled "SITUATION EVERYDAY INTERACTIONS SET 1". The card text reads: "Someone complains to you that a new dad on the team is taking too much of his allotted family leave." Below the situation, there is a "WHY IT MATTERS" section with a paragraph of text. A "Flip card" button is visible in the top right corner of the card.

# Negative aspect to look out for

- Not keeping it real!
- Hearing negative feedback from multiple patients
- Criticising other colleagues
- Professional discourtesy
- Lack of accessibility
- Raising voice in the workplace
- Dominating meetings

# Learning from Previous Experiences

- **Building on Success:**
  - Reflect on what worked well in previous teams or roles.
  - MDT discussions e.g. for difficult-to-treat cases.
- **Team Collaboration:**
  - Look for ways to apply these positive experiences in your new environment.

# Understanding and Clarifying Your New Role

- **Key Questions:**
  - Will you be seeing a new patient population or taking on a cohort of existing patients?
  - Will you inherit specialty clinics from a previous consultant?
  - Balancing new patient slots vs. follow-up (FU) slots
  - Is there an opportunity to develop a special interest within your role?
- **Practical Considerations:**
  - If you plan to work less than full-time, communicate this early
  - On-call rota management and ensuring a fair allocation of duties.

# Adaptability in Management Meetings and MDTs

- **Understanding Team Dynamics:**
  - Recognize the roles of different team members (doctors, nurses, allied health professionals)
  - Stay open to learning from your team and respecting diverse perspectives.
- **Leadership in MDT:**
  - Participate actively, listen to colleagues, and build consensus on clinical decisions.

# Contributing Your Clinical Opinion

- **Offering Your Opinion:**
  - Don't be afraid to voice your clinical opinion, even if more senior colleagues are present
  - Understand the overall team consensus and how others approach clinical decisions
- **Learning from Others:**
  - Seek feedback from colleagues—consultants often appreciate being asked for their input
  - Can be good way to strike up conversation



# The Do's and Don't's of Being a New Consultant

- **Avoiding Overload:**
  - If you're transitioning from an ST role, don't assume trainee-level duties; it may be helpful to act up during the final stages of training
  - Don't overcommit to every request—practice saying 'no' when necessary
- **Managing Administrative Tasks:**
  - Don't take on administrative work that can be delegated (e.g., chasing results or correspondence)
  - Respect the boundaries of your role and manage your time effectively

# Job Planning: Ensuring Flexibility and Fairness

- **Flexible Job Planning:**
  - Understand job planning templates and how to allocate clinical time (e.g., triage, remote working, advice and guidance)
  - Ensure job plans meet national standards
  - Be proactive in discussing flexible working options and on-call rotas
- **Clinical Appraisal & Revalidation:**
  - Prepare for annual appraisals (e.g., PREP) and the RCP revalidation process
  - Stay up-to-date with educational requirements, including mandatory training.

# Managing Clinics, Waiting Lists, and Follow-Up Slots

- Effective use of follow-up (FU) slots and managing cancellations when on leave
- Managing outpatient waiting lists (OWLs)
- Balancing new vs. FU patients
- Triage and allocation for new and follow-up patients.

# Supervision, Education, and Mentorship

- **Educational Supervision:**
  - Understand the difference between clinical and educational supervision
  - Education supervisor course is typically not curriculum-based, but clinical supervision is
  - Take time to understand your role in teaching and supervision as a new consultant
- **Mentorship:**
  - Seek informal mentorship from more experienced consultants and colleagues

# HR Considerations for Consultants

- **Practical HR Issues:**
  - Buying back leave and car lease options
  - Salary sacrifice schemes and managing mandatory training requirements
  - Understand holiday and study leave arrangements

# Time management

- Plan your working day the day before
- Do you work better at midnight/5am?
- Activities task-driven (80:20)
- Vary your day to stay productive
- To do lists / reminders

Deadline

- Global inequalities in Cyprus - Museum Supp.
- James - STATA do file for MYONET.
- Complete disclosures for SRAFT. - AZ<sup>(B)</sup>.
- Job planning
- Job diary - BMA - Lind.
- At global / HQQ teams.
- One page plan for my own future.
- Draft email Adelphi to RUG.
- Reorganise meeting with Steve.
- Arrange coffee with Darren - protection
- Change in IP administration my own's over time
- Check that rest of leave is sorted at Alex.
- GSK Talk to organize.
- Andy Mammes genetics - HMCA - O/W James

# Time management (2)

- **Prioritize Key Tasks:**
  - **Identify urgent vs. important tasks:** Focus on clinical care and essential administrative duties first.
  - Delegate tasks when possible (e.g., follow-up letters, routine patient checks).
  - Use **time-blocking** for scheduled clinical work, meetings, teaching, and personal time.
- **Managing Interruptions:**
  - Create boundaries for handling unexpected interruptions (e.g., urgent queries, non-clinical distractions)
  - Set aside designated times for urgent phone calls or quick meetings.



Progress for appraisal starting 08/12/2023 in Appraisal cycle: 2024/25

Use the links below to update your progress:



- Complete
- In progress
- Action required
- No immediate action required
- No action required

It is important that you use your appraisal meeting to address the areas covered by your main priorities. [Read more](#)

**Alerts (0)** ^

No new alerts

**Tasks (2)** ^

**Appraiser tasks**

Input Form (23/09/2024): [Edit](#)

**Job Plan User tasks**

Changes in your Signed Off Job plan for [2023/2024](#)

**Messages (0)** ^

No new messages

**Appraisal** < >

08/12/2023 -

Appraiser: Dr Sonya RAVENSCROFT ✓

Meeting: [Not set yet](#)

Due: 31st December 2024

Scope of work: [View](#)

Supporting information: 4 v

PDP: [Open](#)

Input form: [Not submitted](#)

Output form: Not submitted

Next Jobplan Process Due Date: 21/08/2024

Name of designated body: Salford Royal NHS Foundation Trust

**Educational appraisal** ^

Clinical supervisor / educational supervisor	
1. Ensuring safe and effective patient care through training	<a href="#">Submitted</a>
2. Establishing and maintaining an environment for learning	<a href="#">Submitted</a>
3. Teaching and facilitating learning	<a href="#">Submitted</a>
4. Enhancing learning through assessment	<a href="#">Submitted</a>

**Access** ^

The following people have read access to the open parts of your portfolio:

Person	Role
Dr Rob NIPAH	Revalidation Lead
Dr Sonya RAVENSCROFT	Appraiser
Dr Suresh Chandran	Revalidation Lead
Dr Vinod Gadiyar	Revalidation Lead
Julie Smith	Revalidation Lead
Lesley Kiernan	Revalidation Lead
Mr David G ROSS	Responsible officer



# Can research help as a consultant?

- Building up other skills outside of ST training
  - organising
  - time management
  - writing
  - critical appraisal
  - statistics
  - presentations
- Personal satisfaction – asking questions in clinical practice
- ‘Making a difference’
- Clinical trials – Col, recruiting patients
- Mentoring trainees
- Networking - get to know people who matter

# Maintaining a Healthy Work-Life Balance

- **Balancing Work, Home, and Self:**
  - Avoid working outside of set hours unless absolutely necessary
  - Prioritize personal wellbeing alongside clinical responsibilities
  - Avoid activating emails on your phone outside working hours
  - Use the time management principle of "**marbles in the jar**" — don't say 'yes' to everything at once

## Pickle Jar Theory



**Jar:** Refers to daily Routine  
• Time  
• Life

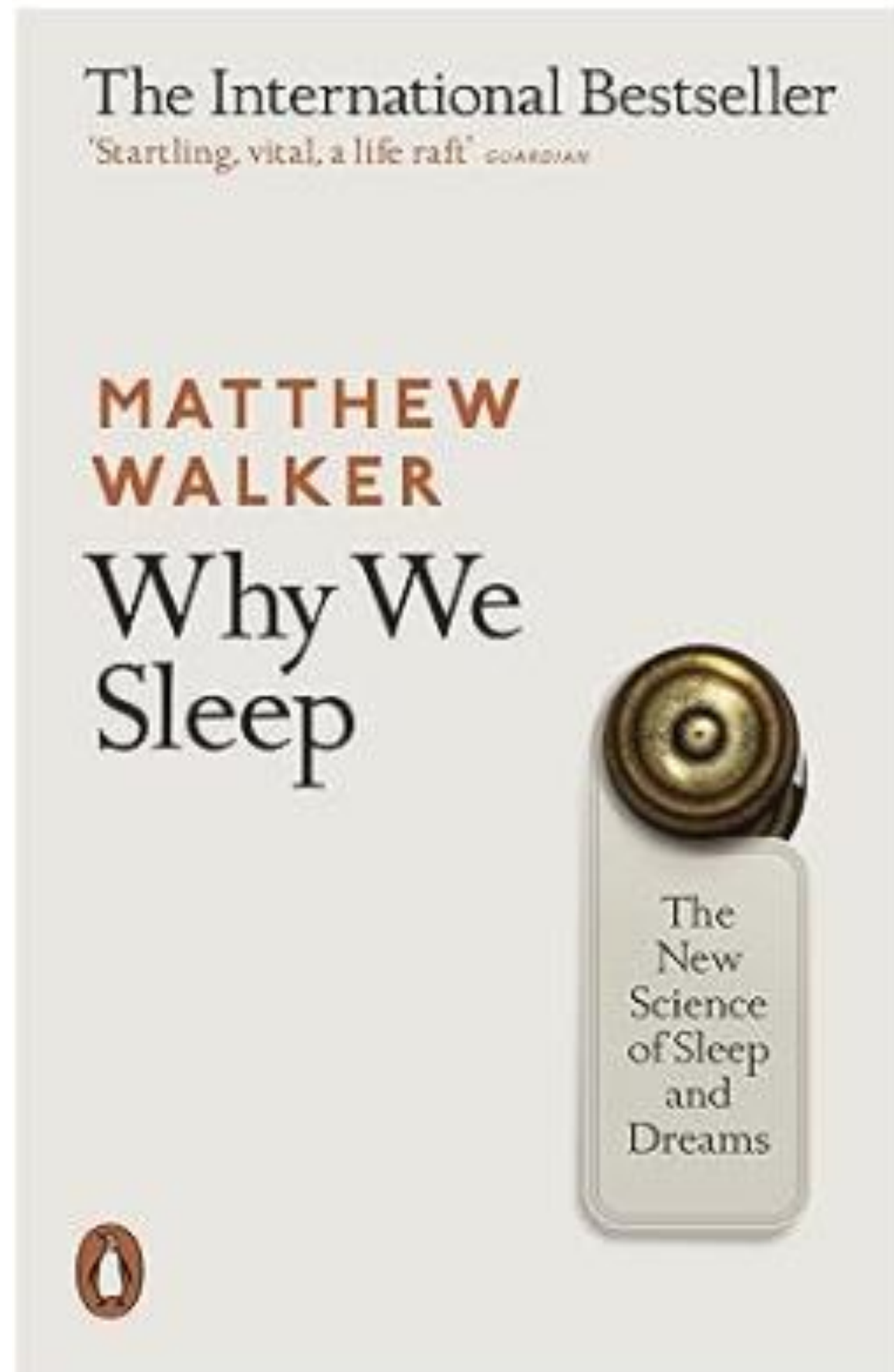
**Rocks:** Refers to important tasks  
• priorities  
• importance

**Pebbles:** Refers to smaller task with lower urgency  
• urgencies  
• small tasks

**Sand:** Refers to important tasks and source of distraction  
• Distraction  
• Leisure



# Sleep



- **Restorative Function:** Sleep is crucial for physical health, mental well-being, and cognitive performance
- **Memory and Learning:** Sleep strengthens memories and supports learning by consolidating information
- **Emotional Regulation:** Adequate sleep helps manage emotions and reduces stress
- **Deep Sleep & REM:**
  - **Deep sleep** (Slow-wave sleep) supports physical recovery.
  - **REM sleep** is vital for emotional processing and creativity.
- **Consequences of Sleep Deprivation:**
  - Impaired cognitive function, weakened immune system, increased risk of chronic diseases (heart disease, diabetes), mental health issues (depression, anxiety).
- **Sleep Hygiene Tips:**
  - Maintain a regular sleep schedule, create a dark and quiet environment, limit caffeine and screen time before bed.

# Concluding remarks

- **Key Takeaways:**
  - Flexibility, proactive role clarification, and ongoing learning are essential for success
  - A new consultant should focus on collaboration, leadership, and maintaining a balanced approach to work and life
- **Inspiration:**
  - As a new consultant, you have the opportunity to lead, innovate, and influence patient care and your team's development!
  - Good luck!

Thank you!

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