

JOB DESCRIPTION**DIRECTOR OF PUBLIC HEALTH - PETERBOROUGH**

Title:	Director of Public Health
Employing Organisation:	Peterborough City Council (PCC)
Accountable to:	Professionally accountable to the Chief Executive of Peterborough City Council (and Secretary of State for Health through Public Health England) Managerially to Executive Director of Adult Social Care and Health and Wellbeing
Hours:	Full time/part-time/job-share
Work base:	Peterborough (Town Hall)
Key Relationships	Cabinet Corporate Management Team (CMT) Local NHS bodies including NHSE Cambridgeshire and Peterborough clinical commissioning group Public Health England Peterborough Health and Wellbeing Board Cambridgeshire and Peterborough Local Resilience Forum (District Authorities)

Statutory functions of the Director of Public Health¹

The Director of Public Health is a statutory chief officer of their authority and the principal adviser on all health matters to elected members and officers, with a leadership role spanning all three domains of public health: health improvement, health protection and healthcare public health. Section 73A(1) of the NHS Act 2006, inserted by section 30 of the Health and Social Care Act 2012, gives the Director of Public Health responsibility for:

- all of their local authority's duties to take steps to improve public health
- any of the Secretary of State's public health protection or health improvement functions that s/he delegates to local authorities, either by arrangement or under regulations – these include services mandated by regulations made under section 6C of the 2006 Act, inserted by section 18 of the 2012 Act
- exercising their local authority's functions in planning for, and responding to, emergencies that present a risk to public health
- their local authority's role in co-operating with the police, the probation service and the prison service to assess the risks posed by violent or sexual offenders
- such other public health functions as the Secretary of State specifies in regulations

¹ See Department of Health, *Directors of Public Health in Local Government: Roles, responsibilities and context* (<https://www.wp.dh.gov.uk/publications/files/2012/10/DsPH-in-local-government-i-roles-and-responsibilities.pdf>) and Department of Health, *Directors of Public Health in Local Government: Guidance on appointing directors of public health from 1 April 2013* (<https://www.wp.dh.gov.uk/publications/files/2012/10/DsPH-in-local-government-ii-guidance-on-appointments.pdf>)

Context

The Director of Public Health post will understand and enhance the health of the people of Peterborough and adopt an approach which:

- Understands the link between economic success and good health and takes a long term approach to strategic improvement in both
- Develops a clear, targeted long term strategy that ensures health and social care, education, housing, jobs and economic policies and infrastructure are shaped in ways which deliver maximum improvements in health and wellbeing
- Minimises the adverse effects of demographic change and potential threats from poor health on the long term competitiveness of PCC. The challenges of a growth in numbers of older people and people with disabilities will require a medium term strategy.
- Identifies need for and oversees delivery of research to identify innovative solutions, specifically targeted at addressing the significant challenges of the diverse population of Peterborough, thereby minimising health inequalities and deprivation and establishing the reputation of Peterborough as a city committed to enhancing the health and wellbeing of its inhabitants.
- Provides strong leadership in the coordination of health protection activities, ensuring there is adequate provision to respond to health emergencies and providing clear and effective advice to health professionals on matters of health protection and public health.

These roles are derived from Government policy and clearly identify the unique contribution which local authorities can make to improve the health and wellbeing of communities through:

- Their statutory responsibilities and powers with respect to health protection and health scrutiny
- The level, distribution and quality of services they directly commission or provide
- Strategic leadership-promoting and supporting partnership working by public and private sector agencies on key priorities such as community safety, alcohol and drugs prevention and treatment
- Community leadership-enabling Members to engage effectively with their communities with respect to health and intelligently holds the NHS and the local authority to account
- Advocacy and influence-national and local policy development

The Director of Public Health is appointed according to procedures that replicate the statutory process for senior appointments to the NHS, including an Advisory Appointment Committee, (Employment Committee).

Specifically in Peterborough, the DPH is part of the senior team leading the organisation and is managerially accountable to the Executive Director of Adult Social Care and Health and Wellbeing. PCC is implementing a model of working for the DPH with the following key elements:

- agreeing, through the Peterborough Health & Wellbeing Board and PCC Corporate Management Team, the public health outcomes to be delivered,
- holding fellow PCC directors to account for the delivery of those PH outcomes

The role of Director of Public Health sits within the Adult Social Care and Health and Wellbeing Directorate.

- **Commissioning Public Health**

Provide focus, clarity and leadership across all directorates in the council as well as partner organisations including health. Set priorities which are focused on delivering evidence-based outcomes, focusing particularly on developing and embedding preventative approaches tackling inequalities through innovation and collaboration, so supporting the principles of the Sustainable Communities Strategy. Provide appropriate direction and challenge to the Commissioning function related to all Public Health Commissioning.

- **Public Health Delivery**
Hold to account all directorates within the authority and partner organisations, evaluate and review activity which contributes to the Public Health agenda.
- **Public Health Intelligence**
The Director of Public Health will be responsible for testing and challenging the Council's wider strategies in relation to public health. The Director of Public Health will oversee population needs analysis, surveillance and research and perform a vital role in testing and challenging the Council's wider strategies and their impact on public health, inequalities and Wellbeing.

Job Purpose

The Director of Public Health is a registered public health specialist (i.e. included in the GMC Specialist Register/GDC Specialist List or UK Public Health Register (UKPHR)).

The Director of Public Health is a statutory member and main source of health advice to the Health and Wellbeing Board. S/he has a statutory responsibility to produce an independent annual report on the health of the population, progress on improving health and reducing inequalities and making recommendations. The Director of Public Health will be a member of the Corporate Management Team and will attend Local Commissioning Forum meetings as appropriate.

The Director of Public Health will provide specialist Public Health direction and leads a team within the local authority responsible for the development of a strategic needs assessment for the local population and for the delivery of:

1. Health Improvement

- developing healthy, sustainable and cohesive communities through Health and Wellbeing Board and the wider Council and partners
- developing healthy lifestyles for individuals and communities
- tackling specific issues based on local needs assessment such as childhood obesity, smoking,
- developing a strategy for reducing health inequalities

2. Health Protection

- dealing with infectious disease threats including food and water borne disease supported by local Public Health England
- preparing for emergencies including pandemic influenza
- providing advice and challenge, especially advising on environmental threats including pollution, noise and contaminated land
- co-chairing the Local Health Resilience Partnership when applicable

3. Health services public health

- population health care, including oversight and promoting population coverage of immunisation and screening programmes
- supporting the commissioning of appropriate, effective, and equitable health care from the NHS locally
- leading the integration of health and social care services

Key Responsibilities:

1. Producing an independent annual report on the health of the population, progress on improving health and reducing inequalities and making recommendations
2. Being principal adviser to Health and Wellbeing Board in developing a Health and Wellbeing Strategy based on the assessed needs of the population and proven interventions to improve health

3. Providing specialist public health advice to commissioners on priorities for health and social care spending and the appropriate configuration of services within and between local authorities.
4. Supporting Local Resilience Forum in developing comprehensive multi agency plans for the anticipated threats to public health
5. Having full access to the papers and other information that they need to inform and support their activity, and day to day responsibility for their authority's ring-fenced public health budget.
6. Being Principal Advisor on all health matters to members and officers across local government.

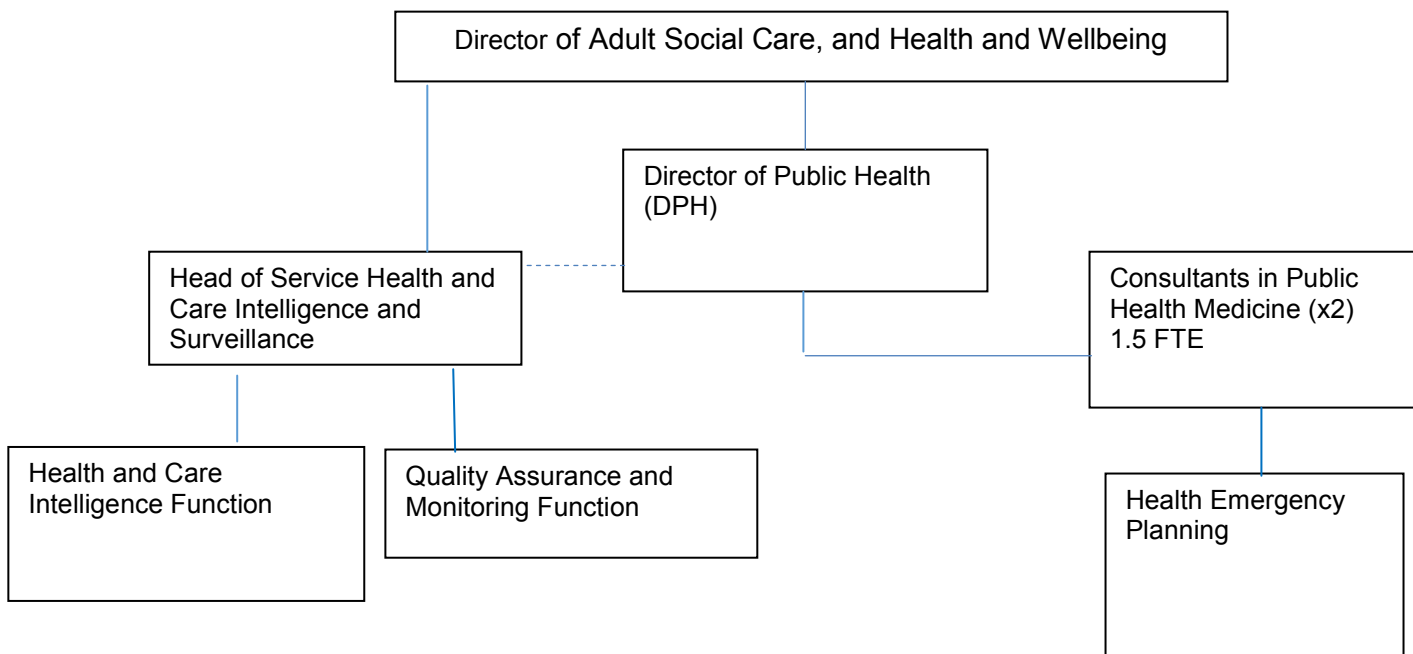
Management arrangements

The Director of Public Health will be professionally accountable to the Council (and Secretary of State for Health through Public Health England) and managerially accountable to the Executive Director Adult Social Care and Health and Wellbeing. Professional appraisal will be required. An initial job plan and clear set of objectives will be agreed with the successful candidate prior to that individual taking up the post. The job plan and objectives will be reviewed as part of the annual job planning process.

The Director of Public Health will:

1. Ensure all management accountabilities are carried out in accordance with applicable policies including but not limited to recruitment, appraisals, disciplinary and grievances
2. Directly manage budgets of £8m, influencing the priorities and spend of partner organisations to achieve public health outcomes.
3. Be expected to take part in on call arrangements for communicable disease control/health protection as appropriate depending on local arrangements
4. Manage Specialty Registrars in Public Health

Public Health and Care Surveillance and Intelligence Division:-



Professional obligations

The Director of Public Health will be expected to:

1. 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.
2. Contribute actively to the training programme for Foundation Year Doctors/Specialty Registrars in Public Health as appropriate, and to the training of practitioners and primary care professionals within the locality.
3. Pursue a programme of CPD, in accordance with Faculty of Public Health requirements, or other recognised body, and undertake revalidation, professional appraisal, audit or other measures required to remain on the GMC/GDC Specialist Register or the UK Public Health (Specialist) Register or other specialist register as appropriate.
4. Practise in accordance with all relevant sections of the General Medical Council's Good Medical Practice (if medically qualified) and the Faculty of Public Health's Good Public Health Practice

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.

Personal Qualities

The Director of Public Health is:

1. A visionary and transformational leader with a full understanding of relationships and culture of organisations that impact on the wider determinants of health as well as health services,
2. Trustworthy and independent professional accountable to Secretary of State through Public Health England as well as to the local population through the Local Authority.
3. Trained and experienced in all areas of public health practice and registered as a public health specialist with the GMC or another appropriate regulatory body and accountable to them for their professional practice including ethical standards
4. Able to demonstrate corporate skills in strategic leadership within an organisation
5. Able to engage, influence and hold fellow directors accountable for the delivery of strategic public health priorities within each directorate.
6. A skilled and trusted communicator at all times particularly in a crisis
7. Strongly committed to teaching and research in collaboration with academic departments
8. Up to date and can demonstrate continuing professional development through appraisal and revalidation as a specialist with GMC or other regulator
9. Highly visible to ensure in-depth knowledge of local communities and better working between the public and local organisations
10. Able to show intellectual rigour and personal credibility to collaborative working and commissioning processes
11. Demonstrably accomplished in improving the health of communities
12. Able to lead across all local authority functions to district councils, NHS bodies, the private sector and the third sector indicating the impact of investment on public health and inequalities

Key tasks

The Health and Social Care Act places new and significant duties on the organisation to improve and protect the health and wellbeing of the residents of Peterborough. This blends well with the existing corporate focus around a preventative approach to delivering services, safeguarding

vulnerable groups, public protection, social and economic regeneration and empowering communities, agencies and businesses to tackle inequalities.

The DPH will act as health champion across the whole of our business and will have lead responsibility for the local authority's public health functions. They will ensure that plans are in place to protect the health of the population, and will be a critical partner in ensuring that there are integrated health and wellbeing services across Peterborough. The DPH will work closely with the Executive Director of Adult Social Care and Health and Wellbeing. The DPH will have sight of and the ability to comment independently on all recommendations being made that touch the Public Health Agenda. The DPH will have early sight of all papers that go to CMT and the local commissioning forum.

Five clear objectives define the Public Health role:

1. To achieve improvements against wider factors that affect health, wellbeing and health inequalities (such as education, housing, employment, etc)
2. To ensure people are helped to live healthy lifestyles, make healthy choices and reduce health inequalities (tackling the issues of smoking, obesity, mental illness, etc)
3. To protect the population's health from major incidents and other threats, while reducing health inequalities (by ensuring adequate emergency planning and robust screening and immunisation programmes)
4. To reduce the numbers of people living with preventable ill health and people dying prematurely, while reducing the gap in health status between communities (including through the provision of mandated healthcare public health advice to the NHS)
5. Production of the joint strategic needs assessment, (JSNA), involving all appropriate organisations to underpin health and wellbeing strategies, having assessed the health needs of the local population in order to improve the physical and mental health and wellbeing of individuals and communities.

To achieve these objectives:

- The strategic and policy aspects of the Public Health function will be delivered through the statutory role of Director of Public Health (DPH), who will be professionally accountable to the Chief Executive (and Secretary of State for Health through Public Health England) and managerially accountable to the Executive Director of Adult Social Care and Health and Wellbeing.
- In response to the strategic policy direction and public health commissioning outcomes set by the DPH within the Health & Wellbeing Board and Corporate Management Team (CMT), the role of delivering against most of these outcomes will be the responsibility of the other directors.

In addition, the DPH will:

7. Produce an independent annual report on the health of the population, progress on improving health and reducing inequalities and making recommendations
8. Be principal adviser to Health and Wellbeing Board in developing a Health and Wellbeing Strategy based on the assessed needs of the population and proven interventions to improve health.

9. Be a member of the Corporate Management Team and will attend Local Commissioning Forum meetings as appropriate.
10. Provide specialist public health advice to commissioners on priorities for health and social care spending and the appropriate configuration of services within and between local authorities.

Support Local Resilience Forum in developing comprehensive multi agency plans for the anticipated threats to public health

- Generic Responsibilities:** To carry out all responsibilities with regard to the Council's Equalities Policy and Procedures and Customer Care Policy.
- To comply with all Health & Safety at work requirements as laid down by the employer.
- Flexibility Clause:** Other duties and responsibilities express and implied which arise from the nature and character of the post within the department (or section) mentioned above or in a comparable post in any of the Organisation's other sections or departments.
- Variation Clause:** This is a description of the job as it is constituted at the date shown. It is the practice of this Authority to periodically examine job descriptions, update them and ensure that they relate to the job performed, or to incorporate any proposed changes in line with the needs of PCC and the development of public health and any wider developments in the field of public health. This procedure will be conducted by the appropriate manager in consultation with the postholder.
- In these circumstances it will be the aim to reach agreement on reasonable changes, but if agreement is not possible the Head of Service reserves the right to make changes to your job description following consultation.

CORE COMPETENCY AREAS

Surveillance and assessment of the population's health and well-being

- To ensure the proper design, development and utilisation of major information and intelligence systems to underpin public health improvement and action for the population across disciplines and organisations.
- To receive, interpret, provide and advise on highly complex epidemiological and statistical information about the health of populations to the Local Authority, NHS and voluntary organisations.
- To ensure the use of the best available evidence base to support the assessment of health needs, health inequalities, health impact assessment and the identification of areas for action within the local population.
- To produce an annual report on the health of the population of Peterborough

Assessing the evidence of effectiveness of health and healthcare interventions, programmes and services

- To provide expert public health advice and leadership to support and inform an evidence-based approach within ethical frameworks for commissioning and develop high quality equitable services, across primary, secondary and social care, and across sectors including local authorities, voluntary organisations and others, in potentially contentious and hostile environments where barriers to acceptance may exist.
- To be responsible for leading on service development, evaluation and quality assurance governance in specific areas and for preparing and adjusting action plans in line with changing needs and changing geographical boundaries.
- To provide expert advice to support evidence based commissioning, prioritisation of services for the population (and in some circumstances for the individual) in order to maximise opportunities for health.

Policy and strategy development and implementation

- To lead on behalf of PCC on the communication, dissemination, implementation and delivery of national, regional and local policies and public health strategies, developing inter-agency and interdisciplinary strategic plans and programmes, with delegated authority to deliver key public health targets.
- To act in an expert advisory capacity on public health knowledge, standards and practice, across the spectrum of public health at Board or equivalent level.
- To be responsible for the development and implementation of multi-agency long-term public health programmes as required, based on identification of areas of potential health improvement, the diversity of local needs and the reduction of inequalities.
- To ensure proper linkages between the health agenda and strategies related to the wider determinants including for example, community safety, the environment and sustainability.

Leadership and collaborative working for health

- To take the lead role on behalf of the PCC in developing inter-agency and interdisciplinary short and long-term strategic plans for securing health improvement both in the general population and in vulnerable groups at high risk of poor health and reduced life expectancy, in partnership with a range of agencies such as those in the statutory, non- statutory, voluntary and private sectors and by taking lead responsibility with a defined local authority. This requires the ability to work cross-directorate and across other agencies and voluntary organisations.
- To work with primary care professionals and community staff to raise awareness of their public health role.
- To lead on the integration of health, social services and voluntary organisations to promote effective joint working to ensure delivery of the wider government targets.
- To influence external agencies in their public health policy decisions by working with complex professional, managerial and population groups and other organisations in the statutory, non-statutory and private sectors.

DEFINED COMPETENCY AREAS

Health Improvement

- To be responsible for designated areas of health improvement programmes, public health surveillance or population screening or geographical areas.
- To take a Executive Director leadership role in specified areas with local communities and vulnerable and hard to reach groups, helping them to take action to tackle longstanding and widening health inequality issues, using community development approaches as appropriate.
- To provide expert knowledge to ensure effective community involvement with regard to all the work of the organisation including commissioning and prioritising high cost services and to ensure that policies and strategies are interpreted, developed and implemented at all levels.

Health Protection

- To take responsibility for safeguarding the health of the population in relation to communicable disease, infection control and environmental health, including delivery of immunisation targets.
- To ensure that effective local arrangements exist for covering the on call rota for the effective control of communicable disease, environmental hazards to health and emergency planning, as detailed in local health protection agreements.
- To communicate effectively and diplomatically with a wide audience including the media and the public to change practice in highly challenging circumstances such as communicable disease outbreaks, chemical incidents, immunisation and screening.

Service Improvement

- To provide expert advice to support evidence based commissioning, prioritisation of health and social care services for the population (and in some circumstances provide highly specialised advice on preferred treatment options or protocols based on the evidence for individual patients) in order to maximise opportunities for health.
- To be responsible for implementation of NICE and National Service Frameworks or equivalent national standards, guidance and frameworks.
- To lead the development of clinical networks, clinical governance and audit.
- To review evidence and providing highly specialised advice on preferred treatment options or protocols based on the evidence for individual patients.

Public Health Intelligence

- To analyse and evaluate quantitative and qualitative data and research evidence from a range of sources to make recommendations and inform decision making which has long term impacts.
- To compare, analyse and interpret highly complex options for running projects identified as key public health priorities, and communicate this information across organisations and the local community.
- To be responsible for the identification and implementation of appropriate health outcome measures, care pathways, protocols and guidelines for service delivery across patient pathways for the local population.
- To work with the information and intelligence arm of Public Health England and other organisations to strengthen local, regional and national public health intelligence and information capacity.

Academic Public Health/Research and Development

- To undertake and commission literature reviews, evaluative research surveys, audits and other research as required to inform equitable service and reduce health inequalities. This may involve taking the lead on R&D public health and related activities
- To develop links with local universities to ensure the work of the organisation is based on a sound research and evidence base.
- To develop public health capacity through contributing to education and training and development within the Directorate, and within the wider NHS and non NHS workforce.

PERSON SPECIFICATION

DIRECTOR OF PUBLIC HEALTH PETERBOROUGH CITY COUNCIL

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.

Education/Qualifications	<i>Essential</i>	<i>Desirable</i>
Inclusion in the GMC Specialist Register/GDC Specialist List or UK Public Health Register(UKPHR)	X	
If included in the GMC/GDC Specialist Register in a specialty other than public health medicine/dental public health, candidates must have equivalent training and/or appropriate experience of public health medicine practice	X	
Public health specialist registrar applicants who are not yet on the GMC Specialist Register/GDC Specialist List in dental public health/UKPHR must provide verifiable signed documentary evidence that they are within 6 months of gaining entry at the date of interview ; all other applicants must provide verifiable signed documentary evidence that they have applied for inclusion in the GMC/GDC/UKPHR specialist registers [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		X
Personal qualities		
Transformational and visionary leader	X	
Commitment to adding public health values to corporate agendas	X	
Strong commitment to public health principles	X	
Able to prioritise work, and work well against a background of change and uncertainty	X	
Adaptable to situations, able to handle people of all capabilities and attitudes	X	
Commitment to team-working, and respect and consideration for the skills of others	X	
Self-motivated, pro-active, and innovative	X	
High standards of professional probity	X	
Experience		
Minimum of three years' experience of public health practice at senior level		X
High level project management skills	X	
Excellent staff and corporate management and development skills	X	
Experience of working in complex political and social environments	X	
Excellent change management skills	X	
Budget management skills	X	
Training and mentoring skills		X
Scientific publications, presentation of papers at conferences, seminars etc		X
Skills		
Strategic thinker with proven leadership skills	X	
Excellent oral and written communication skills (including dealing with the media)	X	
Effective interpersonal, motivational and influencing skills	X	
Ability to respond appropriately in unplanned and unforeseen circumstances	X	
Good presentational skills (written and oral)	X	
Sensible negotiator with practical expectation of what can be achieved	X	
Substantially numerate, with highly developed analytical skills using qualitative and quantitative data	X	
Computer literate	X	
Ability to design, develop, interpret and implement policies	X	
Ability to concentrate for long periods (e.g. analyses, media presentations)	X	
Resource management skills	X	
Knowledge		
High level of understanding of epidemiology and statistics, public health practice, health promotion, health economics and health care evaluation	X	
Full understanding of and commitment to addressing relationships and cultures of organisations that impact on the wider determinants of health	X	
Full understanding of and commitment to delivery of improved health through mainstream NHS activities	X	
Understanding of NHS and local government cultures, structures and policies	X	
Knowledge of methods of developing clinical quality assurance, quality improvement and evidence based clinical and/or public health practice	X	
Understanding of social and political environment	X	
Understanding of interfaces between health and social care	X	

Shortlisting notes

The Faculty of Public Health advises that in order to be shortlisted for a consultant post applicants who are not yet on the GMC Specialist Register/GDC Specialist List in dental public health/UK Public Health Register (UKPHR) must provide verifiable signed documentary evidence that an application for inclusion on one of these specialist registers is in progress as follows:

1. Applicants in training grades

Public health Specialist Registrars and Specialist Trainees in a recognised UK public health training scheme must provide evidence to confirm that they are within **SIX** months of award of their certificate of completion of training (CCT) and inclusion in the GMC Specialist Register/GDC Specialist List in dental public health/UKPHR at the date of interview (i.e. the expected date of award of their CCT must fall no more than six months after the date of interview). *Please note that from January 2005 in England, May 2005 in Scotland and November 2005 in Northern Ireland and Wales, this period has been extended from the three months required previously.* The documentary evidence should be:

Either a RITA Form G (Final Record of Satisfactory Progress) **or** a letter from the postgraduate dean (or Faculty Adviser) specifying the expected date for completion of training (which must be not more than six months after the date of interview).

2. Applicants in non training grades

2.1 Doctors (i.e. medical practitioners)

Doctors outside recognised UK public health training schemes fall into a number of categories:

- those who have trained outside the UK, who may have specialist training and qualifications which they are seeking to have recognised by the General Medical Council (GMC) in order to gain registration with the GMC: these doctors may be shortlisted according to the following 2005 guidance from the Department of Health and Scottish Executive which indicates that *There will be some instances (for example when considering applicants trained outside the UK) where an AAC may choose to interview a candidate prior to [GMC] Specialist Register entry. In these circumstances, it will wish to be satisfied that subsequent Specialist Register entry is likely. Employers should ask the applicant to provide documentary evidence that he/she has submitted an application to the GMC which is eligible for consideration at the time of application (for shortlisting).*
- those who have not completed specialist training in the UK who are seeking entry to the GMC Specialist Register through Article 14 of the European Specialist Medical Qualifications Order (ESMQO), which allows the GMC to consider not only training but also relevant experience: these doctors may have trained in or outside of the UK. **Again, employers should ask the applicant to provide documentary evidence that he/she has submitted an application to the GMC which is eligible for consideration at the time of application (for shortlisting).**

2.2 Applicants from a background other than medicine

- Other than trainees (see 1 above), applicants from a background other than medicine would normally be expected to have gained full registration with the UKPHR. However, exceptionally, individuals who can demonstrate that they have submitted a portfolio application to the UKPHR may be considered for shortlisting. **Suitable evidence will be a letter from the UKPHR acknowledging receipt of the portfolio application.**
- Other than trainees (see 1 above), applicants from a background in public health dentistry must be included in the GDC Specialist List in dental public health. However, those who can demonstrate that they have submitted an application for inclusion on the GDC specialist list in public health dentistry may be considered for shortlisting. **Employers should ask the applicant to provide documentary evidence that he/she has submitted an application to the GDC which is eligible for consideration at the time of application (for shortlisting).**

Employers are advised that individuals should not take up consultant in public health medicine or 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 Register. Although applicants will be able to provide documentary evidence that an application is in progress, no guarantee can be made as to the outcome of an application to the GMC/GDC/UKPHR specialist registers.

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.

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