Appendix 7: Sample objectives

These examples are provided to stimulate further thinking at an organisational level.

- Some are suitable for all consultants
- Some are specific to consultants with particular responsibilities such as undergraduate medical education
- Some reflect acute hospital environments, and others mental health or community settings.

In each there is:
- an overall statement of the objective
- actions for the consultant
- specific criteria or measures that will help clarify whether the objective is being met
- suggestions for review – where applicable, these should complement the annual review, which occurs during the annual job plan review meeting
- details of the support required to enable the objective to be achieved.
### Sample Objective 1

**Suitable for** | All consultants
---|---

**Objective**
Develop a job plan within agreed number of programmed activities (e.g. reducing number of PAs from 11 to 10)

**Actions to achieve objective**
1. Work with clinical manager to redistribute work within team as far as appropriate
2. Work with team manager to ensure referrals are appropriate
3. Work with locality manager, lead clinician & clinical manager to ensure service criteria are appropriate
4. Work with primary care to enhance capacity to deal with patients in this setting and ensure appropriateness of referrals

**Success criteria/measures**
1. Diary review for job plan review in one year’s time demonstrates appropriate hours being worked or, if not
2. Identify reasons for working excess hours and work with locality manager / clinical manager to develop plans to address this

**Agreed review process and timetable**
Review in 6 months to consider progress against agreed actions and revise accordingly

**Support required**
1. Allocated time to review existing workload and referral patterns
2. Team and locality managers to support the review of service criteria and referral protocols, and caseloads of other staff
3. Other team members to review working patterns and distribution of clinical work
4. Support from Trust managers and admin staff to work with primary care clinicians to refine referral criteria
Sample objective 2

**Suitable for** All consultants

**Objective**
To ensure that CPD meets personal development and service needs

**Actions to achieve objective**
1. Review service requirements with clinical manager
2. Agree and document CPD standards and objectives (these will inform the PDP agreed at appraisal meeting)
3. Ensure college requirements are understood and met as a minimum
4. Submit information to college annually

**Success criteria/measures**
1. CPD record of activities in areas in line with departmental objectives and/or agreed personal objectives
2. Annual certificate or acknowledgement from Royal College

**Agreed review process and timetable**
1. Counter signature of all study leave forms by clinical manager (ongoing)
2. Successful automatic revalidation (5 yearly)

**Support required**
1. Adequate funding for CPD
2. Support to cover clinical work whilst on study leave
**Sample objective 3**

**Suitable for**  All consultants

**Objective**
To complete at least one audit of local activity against national guidance e.g. NICE prescribing guidelines or local priorities as defined by user satisfaction surveys; risk assessment etc.

**Actions to achieve objective**
1. Identify audit priorities within service as agreed locally
2. Agree standards / measures for audit to be undertaken
3. Agree audit methodology with colleagues, including data collection
4. Complete audit
5. With colleagues, identify changes required, develop action plan, and implement changes

**Success criteria/measures**
1. Report of completed audit and action plan developed
2. Changes identified by audit implemented
3. Audit and results presented at team meeting
4. Results shared across directorate, where appropriate

**Agreed review process and timetable**
Audit cycle to be tracked by clinical effectiveness unit database (continuous)

**Support required**
1. Support from Trust clinical audit staff to help develop and carry out audit
2. Management support to develop action plan, and identify resource requirements
Sample objective 4

**Suitable for**
All consultants

**Objective**
To conform to best practice in annual consultant appraisal

**Actions to achieve objective**
1. Book appraisal date with chosen appraiser from the local approved list and to hold the appraisal before 31 March
2. Collate evidence and prepare DH/GMC appraisal documentation (in typed format) to reach appraiser 2 weeks before appraisal
3. Ensure that the outcomes of the appraisal meeting on agreed date, include a signed agreed personal development plan and agreed objectives that fulfil the SMART criteria

**Success criteria/measures**
1. Appraisal held by 31 March
2. Agreed PDP and objectives
3. Forms 1 – 4 returned to Trust appraisal lead by 15 April

**Agreed review process and timetable**
1. Check by clinical manager that appraisals have occurred within directorate (April)
2. Review of PDP and personal objectives by clinical manager - informal (ongoing from April); formal half year review (September)
3. Analysis of appraisal documentation by director of human resources (begins May)

**Support required**
1. Access to training in appraisal (as an appraisee)
2. Trust to ensure training and support for appraisers
3. Allocation of adequate time to prepare for and participate in appraisal
4. Provision of information to support appraisal e.g. clinical quality and activity data, complaints and incidents
Sample objective 5

**Suitable for** Consultants involved with service developments

**Objective**
Contributing to delivery of service development

**Actions to achieve objective**
1. Attend service development/planning meetings
2. Agree specific tasks to be undertaken by consultant
3. Agree service model and protocols etc.

**Success criteria/measures**
1. Participated in development meetings and provided medical advice or input
2. Service development closer to delivery or implemented or reasons for lack of progress clearly understood and documented

**Agreed review process and timetable**
Review at 6 months, and revise actions as necessary, dependent on progress

**Support required**
1. Provision of full information about planned developments
2. Sufficient notice of meetings, timed to fit with clinical commitments
3. Admin support to analyse and present information
Sample objective 6

**Suitable for** Consultants who are educational supervisors

**Objective**
Ensure trainee is working within working time regulations / New Deal limits

**Actions to achieve objective**
1. Review trainee’s timetable with clinical tutor
2. Review own timetable as required (e.g. moving ward reviews, timing of clinics
3. Ensure trainee is aware of working time regulations / New Deal through discussion in educational supervision
4. Ensure trainee completes the working time regulations / New Deal monitoring exercises

**Success criteria/measures**
Trainee has timetable which meets educational needs and is compliant with working time regulations / New Deal

**Agreed review process and timetable**
Review 6 monthly, timing to follow junior doctor monitoring periods

**Support required**
1. Provision of information about the educational and training needs and the specific requirement of working time regulations for junior medical staff
2. Support from Trust managers to facilitate changes to consultant timetable, with particular respect to the support required from other staff
3. Human Resource department to review rotas, and identify staffing requirements
Sample objective 7

<table>
<thead>
<tr>
<th>Suitable for</th>
<th>Consultants who are educational supervisors</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective</strong></td>
<td>Ensure junior doctors are appropriately trained and supervised</td>
</tr>
</tbody>
</table>
| **Actions to achieve objective** | 1. Meet each junior doctor for supervision as agreed according to college guidelines  
2. Ensure junior doctor is informed about the need for annual appraisal to meet revalidation requirements  
3. Support junior doctor in accessing CPD both internal and external  
4. Ensure junior doctors are informed about induction and are encouraged to attend |
| **Success criteria/measures** | 1. Supervisor’s time is timetabled into consultant’s job plan  
2. Junior doctor has recommended amount of CPD |
| **Agreed review process and timetable** | Review in 6 months |
| **Support required**    | 1. Information from Trust clinical tutor on training and educational needs and appraisal requirements of junior doctors  
2. Trust to provide induction programme tailored to the needs of junior doctors  
3. Allocated time within PAs for supporting professional activities  
4. Trust to enable junior doctors to take study leave as appropriate |
Sample objective 8

<table>
<thead>
<tr>
<th>Suitable for</th>
<th>Medical student teaching lead</th>
</tr>
</thead>
</table>

**Objective**

To deliver a high quality and consistent medical student teaching programme which meets learning objectives identified by the school of medicine

**Actions to achieve objective**

1. Identify a teaching programme core team
2. Ensure core team are aware of learning objectives
3. Ensure that core team liaise with all teachers to clarify objectives, methods and responsibilities
4. Ensure that all teachers have access to development opportunities including courses and observation
5. Ensure that student feedback is systematically reviewed
6. Ensure a supportive system of assessment towards the end of the placement

**Success criteria/measures**

1. Named core team
2. Core team meetings to be minuted
3. Explicit guide to learning objectives is adapted
4. “Welcome pack” for all new teachers to the service
5. Record number of cancelled teaching sessions and feedback to core team
6. Register of teacher training activities
7. Annual teaching review to analyse feedback and instigate change

**Agreed review process and timetable**

Annual, at end of academic year

**Support required**

1. Admin support for meetings and for development of teaching materials, timetable, audit of teaching sessions etc
2. All members of core team to have allocated time for their teaching role
3. Access to further training and development for role as teaching lead
4. Access to IT and teaching resources for teaching team
5. Ensure adequate time within supporting professional activities to attend relevant medical school meetings
Sample objective 9

**Suitable for**  Medical student teachers

**Objective**
To participate in the work of the teaching team in order to deliver a high quality and consistent teaching programme

**Actions to achieve objective**
1. Agree timetabling of teaching sessions with core teaching team
2. Deliver teaching in the context of specific learning objective
3. Ensure cover if not available for a named teaching session

**Success criteria/measures**
1. Named sessions in medical student timetable
2. Feedback on a specific teacher to be made available to that teacher
3. Minimise teacher “no-shows”

**Agreed review process and timetable**
Informal ongoing review by head of postgraduate studies

**Support required**
1. Information from Trust teaching lead on teaching topics and learning objectives
2. Timetabling of students to fit with existing clinical commitments
3. Time and support to develop teaching skills. e.g. teaching skills workshops
Sample objective 10

Suitable for
Consultants with community mental health team responsibilities – mental health sector

Objective
Adhere to agreed Trust or team standards in relation to waiting times for assessment

Actions to achieve objective
1. Obtain information on current waiting time and Trust targets e.g. 8 weeks
2. Discuss with locality manager and team causes of long waiting times e.g. DNA rate, lack of junior doctor support, cancelled clinics due to other responsibilities, too many follow up patients
3. Bring to the attention of locality manager any reasons for long waiting times and support him/her to develop plan to address these
4. Implement agreed plan

Success criteria/measures
1. Work within team and with locality manager to review reasons for long waiting times
2. Help develop and implement plans to address these

Agreed review process and timetable
Review progress at 6 months, and decide timescale for implementing action plan, and any additional support required

Support required
1. Information department to provide accurate information on waiting times and other relevant information
2. Support from locality manager to develop and implement plan, including consideration of relevant issues such as roles of other team members, team skill mix and staffing requirements
3. Adequate facilities and admin support for clinics
Sample objective 11

**Suitable for**
All consultants – acute sector

**Objective**
Ensure no clinical assessment delays contribute to 4 hour A&E waits

**Actions to achieve objective**
1. Ensure discharges are managed in a timely manner (see discharge arrangement objective)
2. Ensure junior staff respond in a timely manner to calls to A&E
3. Ensure unnecessary investigations are not carried out in A&E that will delay admission

**Success criteria/measures**
4 hourly wait limit is not breached due to delayed clinical assessment or discharge planning

**Agreed review process and timetable**
Ongoing

**Support required**
1. Managerial support to develop referral protocol between A&E and departments
2. Support from bed manager to facilitate best use of hospital beds
3. Time and support for the development of triage and assessment protocols for patients presenting in A&E
4. Development of discharge protocols and pathways
5. Information to review waiting time and breaches
Sample objective 12

**Suitable for**
All consultants – acute sector

**Objective**
To contribute to the ongoing development of the service

**Actions to achieve objective**
1. Attend departmental business and clinical meetings
2. Participate in developmental work within the department as agreed
3. Contribute to the review of service and outcomes
4. Bring any issues, or areas of concern with possible solutions to the attention of the clinical manager
5. Contribute to the annual business planning cycle

**Success criteria/measures**
1. Consultant participates in business planning, decision making and development of department
2. Issues are raised and addressed, if possible. If this is not possible, this will be known and understood
3. Department development and initiatives include all professionals/team members

**Agreed review process and timetable**
Informal, via clinical manager

**Support required**
1. Time to attend meetings, planned to fit with clinical commitments, with six weeks notice given whenever possible
2. Clarity about specific contribution required from consultant
3. Clinical manager to provide timely information on service changes/developments
4. Information from clinical audit and information departments on service activity and outcomes
Sample objective 13

Suitable for: All consultants – acute sector

Objective
Use discharge arrangements with other agencies (e.g. social services) to ensure appropriate use of in-patient bed

Actions to achieve objective
1. Ensure discharge planning is considered at time or soon after admission
2. Consultant and medical team conduct regular ward rounds to review progress
3. Work with ward staff to ensure discharge plan up-to-date and robust
4. Ensure discharge summaries are sent within agreed timescales

Success criteria/measures
1. Patient discharged from hospital with adequate support
2. Discharge summaries dispatched in a timely manner, within agreed limits

Agreed review process and timetable
Ongoing with clinical team and service manager

Support required
1. Agreed support from Trust and other staff to facilitate discharge e.g. occupational therapy, social services
2. Managers to take action to deal with identified and avoidable obstacles to timely discharge
3. Admin support for timely attention to discharge summaries
Sample objective 14

Suitable for Consultants in laboratory medicine

Objective
Achieve full CPA accreditation for the laboratory

Actions to achieve objective
1. Show evidence of participating in external and internal audit with records of changes implemented
2. Participate fully in multidisciplinary team meetings
3. Maintain and demonstrate good relationships with users of the service
4. Follow safe working practices and laboratory health and safety framework

Success criteria/measures
Full accreditation achieved

Agreed review process and timetable
1. CPA accreditation reviewed every 3 years
2. Maintain documentation with head BMS

Support required
1. Resources to ensure facilities in lab meet requirements e.g. equipment and staff
2. Resources to ensure staff receive training and updating as required
3. Support to audit aspects of lab work e.g. health and safety
4. Managerial and admin support for CPA accreditation