

SPECIALISMS

Antisocial Behaviour
Anxiety
Bipolar
Capacity
Depression
Domestic Violence
Drug/Alcohol/Substance Misuse
Mood Disorder
OCD
Personality Disorders
Postnatal Depression
Psychosis
Post Traumatic Stress Disorder
Risk
Schizophrenia
Self Harm
Sexual Abuse Victims
Trauma
Victims of Torture
Suicidal Ideation
Case Disposal
Insanity
Diminished Responsibility

CASE TYPES

Clinical Negligence
Criminal
Fitness to Plead
Forensic
Immigration & Asylum
Risk Assessments
Second Opinion
Testamentary Capacity

GMC Number: 6107622 (Fully registered with licence to practice)

MDS member, AC approved, Approved under Section 12

MEDICO-LEGAL EXPERIENCE

I am a Consultant in Forensic Psychiatry with a special interest in working with patients with a history of personality disorder, self-harm, aggression and violence, especially in females. I have vast experience in completing medico-legal reports covering matters such as Inquests, Immigration, Personal Injury and Clinical Negligence, Capacity assessments, Second Opinions, Criminal and Forensic including Fitness to Plead, Case Disposal and Parole, Diminished Responsibility and Insanity, and Risk Assessment.

I am also on the panel of expert witnesses at the GMC which involves completing reports on a variety of fitness related matters. I have been preparing reports for over 5 years and on average prepare 25 reports per year.

Languages Spoken for Assessments

English, Hindi and Urdu.

QUALIFICATIONS

Executive MBA Warwick Business School

April 2019- ongoing

Pursing executive MBA at the world reputed Warwick Business School, with a view to learning evidence based management and leadership skills, and apply them in practice. In line with this, I am currently working on a quality management project, which aims to identify and address areas of improvement as identified by the commissioners of our service.


PGDip Medical Leadership in Clinical Settings KSS Deanery/ University of Brighton

Sept 12 – August 2015


As a part of this programme I carried out work place based projects- including a service evaluation and improvement project aimed at improving physical healthcare of patients in a medium secure unit. I have also had the experience of writing a business case as an assignment for one of the modules. I also gained an understanding of the various aspects of clinical commissioning, and completed an assignment, which looked into clinical commissioning for improved productivity in mental health.

MRCPsych Royal College of psychiatrists August 2011

MBBS Ravindra Nath Tagore Medical College, January 2005, Rajasthan, India

 office@expertinmind.co.uk

 +44 (0) 1424 4441430

 Expert in Mind, Unit G03
High Weald House, Glovers End,
Bexhill, East Sussex, TN39 5ES

PREVIOUS APPOINTMENTS

Consultant Forensic Psychiatrist (Substantive)
Cygnets Hospital Stevenage

January 2017- December 2019

Responsible for up to 21 female patients admitted on medium and low secure wards.

Locum Consultant Forensic Psychiatrist
Cardiff and Vale University Health Board

August 2016- November 2016

I was responsible for day to day care of eight to inpatients admitted to the low secure ward and I also had a caseload of forensic community outreach patients (mostly conditionally discharged).

Locum Consultant Forensic Psychiatrist
Eric Shepherd Forensic Services

February 2016- July 2016

I was the responsible clinician for 20 patients admitted on medium and low secure learning disability wards.

Locum Consultant Forensic Psychiatrist
Robin Pinto Unit (Low Secure), Luton

Oct 2015- January 2016

I was responsible for the day to day care of the male patients admitted on the low secure ward. I also provided one session each at Inreach Team, HMP Bedford and Yarlswood Immigration Detention Centre, respectively.

Locum Consultant Psychiatrist
Mersey care NHS Trust

Sept 2015 to Oct 2015

This was a locum position where in I worked for the community psychiatry team. My role involved leading and supporting the community team in looking after the patients.

Locum Consultant Forensic Psychiatrist

April 15- Aug 2015

Southview Low Secure Unit and Community Outreach
Sussex Partnership NHS Trust

I was responsible for day to day care of eight to nine inpatients admitted to the low secure ward and I also had a caseload of forensic community outreach patients (most of them conditionally discharged).

Speciality Registrar Year 6 (Full Time)

Feb 15- March 15

Broadmoor High Secure Hospital

This was a brief role (prior to commencing as consultant) in which I worked on a high secure high dependency mental illness ward. I was responsible for day to day care of the patients who were acutely unwell and presented a risk to self and those around them. I reviewed their mental state and physical health, and devised further management plan in collaboration with my team. Most often this included prescription of rapid tranquilization whilst ensuring patient's physical health was closely monitored. I worked alongside the MDT in making decisions regarding patients who had been in seclusion or long term segregation. I wrote reports for, and gave evidence at tribunals. I also assessed patients for admission to Broadmoor Hospital and provided comprehensive reports to the admission panel. I was also involved in a quality improvement project aimed at improving quality of care of patients who were in long term segregation.



Speciality Registrar Year 6 (Full Time)

Aug 14- Feb 15

Forensic Psychiatry
Southview Low Secure Unit
Sussex Partnership NHS Trust

This was a six month placement on a low secure ward where I was responsible for day to day care of the patients, including physical and mental health. I enjoyed the challenge of having extra responsibilities in absence of my consultant, which involved chairing ward rounds, CPA and 117 meetings, and taking appropriate decisions whilst bearing in mind patient's views and team opinion. I also had the opportunity to write reports for, and give evidence at the managers' hearing and First Tier Tribunal. I gained experience in writing psychiatric reports on instructions from Courts and Solicitors. I wrote reports on matters such as fitness to plead and stand trial, presence of mental disorder and personality disorder, not guilty by reasons of insanity and advice on case disposal.

As a part of this placement I spent one day a week at the local prison, HMP Lewes. This involved conducting a ward round for inmates admitted on the health care wing. These were inmates who were admitted for assessment and treatment of mental health condition. My role was to identify their treatment needs and formulate appropriate care plans such as- treatment with medication, referral to psychology and/ or arranging transfer to secure hospitals.

I also conducted an outpatient clinic which involved carrying out new assessments and follow ups.

I also gained experience in community forensic psychiatry, which involved follow up of patients discharged from the secure inpatient settings and assessing new referrals received from general community mental health teams and probation services for risk assessment or case management.

Speciality Registrar (ST5)

Feb 14- Aug 14

Trevor Gibbens Unit (Medium Secure)
Kent and Medway NHS Trust

This placement was on a male medium secure rehabilitation ward. I worked alongside the clinical team for a smooth and safe transition of our patients into the community.

My role involved identifying outstanding treatment requirements and liaising with outside agencies involved in patients' care. I conducted ward rounds and chaired CPA meetings in absence on my supervisor. I completed HCR 20 risk assessments for our patients. I also gave written and oral evidence at the Mental Health Tribunals. I assessed patients referred by the community teams for risk assessments. I also worked out of hours on a 1:6 on call rota, which included assessment of acutely unwell patients detained under Section 136.

Speciality Registrar (ST5)

Aug 13- Feb 14

Broadmoor Hospital
West London Mental Health NHS Trust

I was placed on an acute high secure admissions ward where I worked alongside the clinical team in assessment and management of newly admitted acutely unwell patients. This involved managing acute crisis situation such managing severely disturbed patients. Most of these patients required management in seclusion and prescription of rapid tranquilization. I made sure my patients were physically well and at times this involved constant liaison with the hospital GP and practice nurses. I carried out pre-admission assessments including writing comprehensive reports and risk assessments. I worked alongside my colleagues in identifying treatment needs of the patients and lead the clinical team on various patients' related matters in absence of my supervisor. I made application for SOAD (Second opinion for treatment) for patients who would refuse treatment and on rare occasions used section 62 in cases of emergency. I gave evidence at Crown Court with recommendations for 37/41 for one of our patients who was convicted of a sexual offence. I gave written and oral evidence at the tribunal. I delivered teaching for medical students and fellow colleagues. I also organised a seminar on medical education in psychiatry- recruitment and retention whilst in this placement.

Speciality Registrar (ST4)

Aug 12- Aug 13

Medium Secure Acute, Sub Acute and PICU
Trevor Gibbens Unit

This was my first placement in my higher training rotation in Forensic Psychiatry where I worked on an acute medium secure admissions ward and Intensive Care Unit. I was responsible for the day to day care of the patients. I carried out admission and risk assessments on patients referred to us by outside agencies. I worked alongside the clinical team in identifying patient needs, conducting a thorough risk assessment and devising management plan. I also worked on a 1:6 out of hours on call rota. I assessed patients under the Mental Health Act. I also conducted teaching sessions for the medical students.

Other previous appointments

Dates	Hospital	Post	Supervising Consultant
February 12— August 12	High Secure MI and PD Rehab Broadmoor Hospital Crawthorne	Core Trainee 3	Dr Morris Vinestock Consultant Forensic Psychiatrist
August 11— February 12	General Adult Psychiatry Northwick Park Hospital CNWL NHS Trust	Core Trainee 3	Dr Mary Green Consultant Psychiatrist
August 10— February 11	Old Age Psychiatry St Charles Hospital CNWL NHS Trust	Core Trainee 3	Dr Con Kelly Consultant Psychiatrist
February 10— August 10	Child & Adolescent Psychiatry Knowsley CAMHS Liverpool	Core Trainee 2	Dr Tessa Myatt Consultant Psychiatrist
August 09— February 10	High Secure M1/PS Admissions Ashworth Hospital	Core Trainee 2	Dr Noir Thomas Consultant Forensic Psychiatrist
February 09— August 09	Older People CMHT Mersey Care NHS Trust Liverpool	Core Trainee 1	Dr B Majumdar Consultant Psychiatrist

Dates	Hospital	Post	Supervising Consultant
August 09— February 09	General Adult Psychiatry Arundel House CMHT Mersey Care NHS Trust	Core Trainee 1	Dr Ruth McCutcheon Consultant Psychiatrist
February 08— August 08	General Adult Psychiatry Ladywell Unit Lewisham Hospital, London	Senior House Officer	Dr Ranga Rao Consultant Psychiatrist
August 07— February 08	General Adult Psychiatry Ladywell Unit, Lewisham Hospital, London	ST1 Locum	Dr Jerson Pereira Consultant Psychiatrist
October 06— August 07	General Adult Psychiatry Ladywell Unity Lewisham Hospital	Senior House Officer	Dr Ranga Rao Consultant Psychiatrist
March 06— September 06	General Adult and Old Age Psychiatry Avon and Wiltshire NHS Trust	Clinical Attachment	Dr Malti Sarin, Dr Roger Bullock Dr Priya Sud
March 05— October 05	Department of Medicine Divisional Railway Hospital Jaipur, India	Senior House Officer	Dr Purohit
January 04— December 04	Medicine, Surgery, Psychiatry, Skin, Orthopaedics, G&O, PSM, M.B. Hospital, Udaipur, India	PRHO Rotation	Dr AK. Gupta, Principal and Controller

RESEARCH

I pursued research as my special interest during my higher training. I spent one day a week on a research project with the College Centre for Quality Improvement (CCQI), Royal College of Psychiatrists under the supervision of Professor Mike Crawford. The project was called "Controlled evaluation of a quality network for low secure mental health services". This was a two-armed, parallel group, pragmatic, randomised controlled trial of early or late participation in low secure quality network.

Services that were randomised to late participation in the quality network had an opportunity to join the network 12 months after randomisation. I joined this project in 2012 during my higher training rotation. In the beginning of the project I helped with the finalisation of the research questionnaires for data collection.

In the subsequent period my role had been in collecting data from low secure units in various parts of the country. This had involved collecting information from patients, managers, front line clinical staff and completing an environmental checklist. The final data is being analysed. The study has so far resulted in two publications.



PUBLICATIONS

Impact of a peer-review network on the quality of inpatient low secure mental health services: cluster randomised control trial
Published in BMC Health Research, 2018 (Third Author)

Impact of peer-led quality improvement networks on quality of inpatient mental health care: study protocol for a cluster randomized controlled trial
Published in the BMC Psychiatry, September 2016 (Third Author)

Quality of low secure forensic services in the UK: Development and use of the Quality of Environment in Low secure Services (QELS) checklist
Published in the Journal of Forensic Psychiatry and Psychology, March 2016 (Third Author)

I have received acknowledgment in a review article- "Buprenorphine prescribing for heroin dependence: safety as a selling point?" submitted by my consultant, Dr Whelan to the Journal of Neurosciences in Rural Practice.

PRESENTATIONS

Oral Presentation: Self harming behaviours in female patients: to treat, not to treat or when to treat?
Presented at the Cygnet Hospital Conference on the 20th February 2018. The presentation involved factual evidence based information on self-harming behaviours and medico-legal dilemmas.

Oral presentation: "Quality of low secure forensic services in England and Wales: Development and findings from use of the Quality of Environment in Low secure Services (QELS) checklist" study at the 4th Health Education Excellence Conference at Hammersmith Hospital, London on 2th June 2015.

Suicide and Homicide Prevention: An evaluation of Clinical Risk Assessments and Risk Management Plans.
Presented at the research conference organised by the Kent and Medway NHS Trust- July 2014

Breakdown of inner city older adult CMHT- A mapping and tracking analysis- Presented at Faculty of old age Psychiatry annual meeting- March 2011

Ethnic variation in high secure personality disorder services: Are we biased?
Presented at Faculty of Forensic psychiatry annual meeting, Dublin- Feb 2010

Establishing pregnancy status: How good are we?
Accepted for presentation at Second European Psychiatric Congress, Moscow- Oct. 2009

CLINICAL AUDIT/QUALITY IMPROVEMENT

- SERVQUAL Survey (2019)- Carried out a service quality evaluation by conducting a SERVQUAL survey of commissioner's feedback in relation to five dimensions of our service, i.e. tangibles, reliability, responsiveness, empathy and assurance. The out of the survey showed several areas which needed to be improved. The plan is to implement relevant changes, and re-survey after 6 months, and then repeat it at regular intervals to identify trends/ patterns.
- Audit of standards of drug chart prescriptions- January 2016
- Physical health and examination- Aug 2013
- Audit of the documentation of Mental State Examination- July 2012
- Audit of Risk screening forms- July 2011
- NICE guidelines on Borderline Personality Disorder- Jan 2010
- NICE dementia guidelines- July 2009
- Audit of section 17 leave- Jan. 2009
- Audit of physical examination and risk assessment- July 2008
- Hand Hygiene Audit, June06- Audit of the standard of hand hygiene in wards.
- Crisis Home Treatment Audit, May06- Audit of the services of Swindon crisis team against the set standards.

In all these audits I drafted the audit tool, collected and analyzed the data and presented the findings and suggested recommendations to be followed at the audit/ departmental meetings. All the Re Audits showed an improvement in the standard of the practice as compared to the results in previous audit.

TEACHING EXPERIENCE

- May 2017- Presented a landmark case at the local CPD meeting at Cygnet Hospital Stevenage
- Supervising junior doctors of Associate Specialist grade in my current role.
- In October 2014 I attended a one-day workshop organised by the MRCPsych CASC Panel. In this workshop I was involved in making of professional CASC videos for training of CASC Examiners.
- Throughout my training programme, I engaged in providing ward and outpatient clinic based teaching to the undergraduate medical students from institutes such as University of Brighton and Kings College. I allocated cases, assessed their presentation and gave feedback. I also conducted their mini CEX evaluation. Our firm was highly recommended by the medical students and one of the students was considering career in psychiatry. I was also involved in conducting of mock CASC exams for CASC candidates.
- December 2010- I attended a 1 day course on " Teaching skills for future clinical supervisors", organised by the Royal college of Psychiatrists.



MANAGEMENT & LEADERSHIP EXPERIENCE

- Pursuing MBA (Masters of Business Administration) at the world class Warwick Business School (Ranked No 2 in the UK and No 10 in the world). My aim is to develop evidence based management and leadership skills by applying theory into practice. I am currently studying operations management and I am hoping to apply learnings into a practical project at my current hospital.
- Currently working alongside senior management at Cygnet Hospital Stevenage in implementing a CQC report action plan.
- Designed and wrote the doctors induction book for the new doctors at Cygnet Hospital Stevenage. In my current role I have redesigned the hospital ward round template and its recording by the MDT. Our senior management has accepted this new design, which allows more comprehensive recording of patients' progress and saves admin time.
- Undertook a quality improvement project at Broadmoor High Secure Hospital. Project was aimed at improving the quality of care given to the patients admitted in long term segregation.
- Written a business case for forensic outreach team whilst working at Trevor Gibbons Unit.
- Previous service improvement project aimed at improved physical health care of patients.
- Worked as the SHO representative during my core training. I held regular meetings with the colleagues and escalated the identified issues up to the clinical lead and the managers.
- I led the RNT Medical College student welfare council, 2001 -2002 as general secretary and organised various events including seminars, exhibition, cultural and sports programmes.

COURSES AND CONFERENCE

- 2019** AC Approval training
- 2018** DBT Intensive Training (I am also a member of the DBT consult)
- 2018** Forensic Faculty Conference (UK)
- 2018** Mandatory Trainings
- 2017** BIPA (British Indian Psychiatric Association) Conference, Derbyshire
- 2016** Faculty of Forensic Psychiatrists annual conference, Glasgow
- 2015** AC approval introductory training
- 2014** Forensic Psychiatry Trainees Conference, Liverpool
- 2014** Psychopathy Checklist- Revised training
- 2013** Risk of sexual violence protocol (RSVP) training
- 2013** HCR 20 Risk Screening Training

MISCELLANEOUS

2012- Participated as a performing volunteer in the NHS segment of the London Olympics 2012.
2011- 2013- Worked as a visiting physician for the British Territorial Army (B Company, Edgware).
My role was to carry out healthcare checks for new recruits and running an outpatient clinic for the cadets.

General Attributes

I am a resilient, enthusiastic, hardworking, punctual and reliable person. I am compassionate and considerate towards patients and their relatives, and committed to providing a high quality care. I communicate effectively with patients and colleagues, and able recognize personal limitations and the need for a second opinion of a colleague.

References on request