

Empowering physicians

Effective job planning
for better patient care

Appendix



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Appendix – Administrative, technical and facilities support

Consultants and specialist doctors require office space at all their working sites, with a designated main site where this will be used more frequently. Office space may be shared, and if appropriate hot desking may be utilised. Additionally, access to confidential space for ad hoc consultations with patients or other members of the team, as well as private study, is required.

Physicians need adequate equipment to provide remote clinical care. Hospital and community healthcare records, and other administrative systems must be accessible from wherever the consultant or specialist doctor is working. Provision to work from home is also appropriate and should be facilitated by remote access to information systems, including electronic patient records, with appropriate security.

Dedicated consulting space is required for all forms of outpatient clinical consultation to ensure confidentiality and an uninterrupted environment. For face-to-face consultation, there should be ready access to examination facilities and equipment, including for some minor procedures. This must include the provision of chaperones and access to interpreting services.

Consultants and specialist doctors should have a named administrative support person; this role may be shared. The 'consultant secretary or personal assistant' should provide available, consistent liaison between colleagues/patients and the consultant or specialist doctor within normal working hours, and can act as an important point of contact and support for patients and families, helping them to navigate pathways and systems. Other responsibilities include coordinating and planning activities across the organisations or departments that the consultant or specialist doctor work, secretarial duties, clinical communications and helping to coordinate all of the consultant or specialist doctor's professional activities.

These secretarial roles have become more dispersed as departments have grown and duties have been shared between staff. This reduction in administrative support has impacted the clinical efficiency of consultants and specialist doctors. As clinical communications become more electronic/automated, this creates the opportunity for more effective administrative and coordination support for the consultant, specialist doctor and department, and dedicated time for patients who require support to navigate complex systems and pathways.

Empowering physicians:
Effective job planning for better patient care was developed through a cross-RCP working group including representatives from medical specialties, regional advisers, the Medical Workforce Unit, censors, new consultants and SAS doctors, led by the clinical vice president. The guidance was informed and supported by the Medical Specialties Board. The document was approved by RCP Council.

Contact: Clinicalvp@rcp.ac.uk

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