

JOB DESCRIPTION

1. JOB IDENTIFICATION

Job Title: Team Lead Rehabilitation, Midlothian Community Hospital

Responsible to: Clinical Lead OT Midlothian H&SCP

Department(s): Primary Care and Older People Service Midlothian H&SCP

Operating Division: Midlothian Health & Social Care Partnership

Job Reference: 240623

No of Job Holders: 1

2. JOB PURPOSE

Responsible for the clinical leadership and operational management of the Rehabilitation Service provided by Occupational Therapy and Physiotherapy staff based at Midlothian Community Hospital and Polton Street Rehab facility. This will involve providing leadership in the development of the rehabilitation pathway across MHSCP, working with service and Clinical Leads for Occupational Therapy and Physiotherapy. The post-holder will develop and implement service changes and act as a specialist resource .

Responsible for maximising service provision, ensuring operational planning and allocation of resources to ensure delivery of safe and effective clinical practice, in line with local and national guidelines and targets .

To manage a caseload of patients in line with professional boundaries, supporting the clinical teams to provide a fully comprehensive specialist service of assessment, diagnosis, treatment/appropriate management, onward referral and discharge to a complex range of patients referred to the service.

3. DIMENSIONS

Midlothian Community Hospital has 56 beds for rehabilitation. Polton Street is a Midlothian Council Extra Care Housing Complex which includes a rehab facility and intermediate care unit with 40 beds. The post holder will be based at MCH and operationally manage Occupational Therapy and Physiotherapy staff providing rehabilitation on both sites. Clinical Supervision framework will be in place to support clinical team, with input from professional leads.

Staffing Responsibility:

Staffing – Band 6 Occupational Therapists and Band 6 Physiotherapists

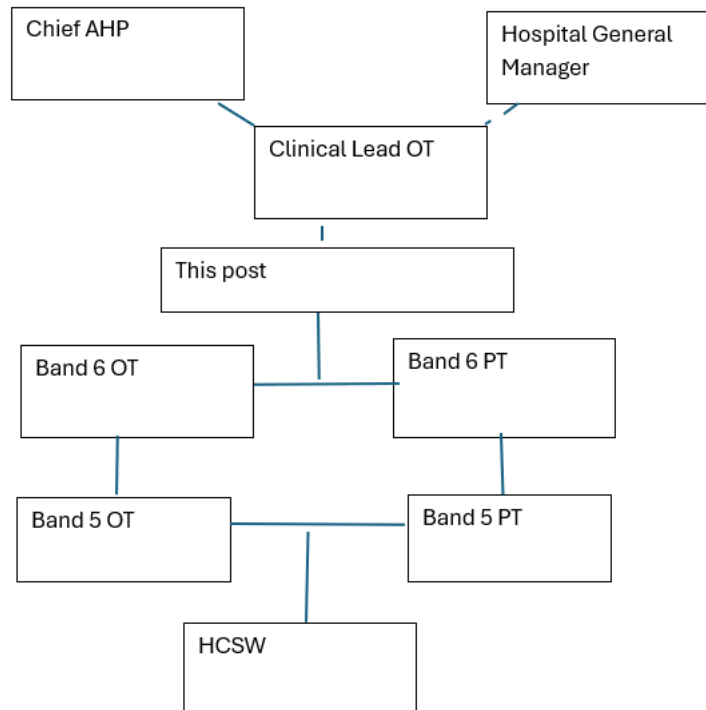
Band 5 Occupational Therapists and Band 5 Physiotherapists
Band 3 Therapy assistants

Financial Responsibility:

Delegated budgetary for staffing, expenses and equipment £400, 000.

The post is employed within NHS Lothian and there is a requirement to work flexibly across Lothian to meet service demands.

4. ORGANISATIONAL CHART



5. ROLE OF DEPARTMENT

The Rehabilitation Team sits within the Midlothian Community Hospital, operationally managed by Primary Care and Older people Service within Midlothian H&SC Partnership.

Key responsibilities of the service are:-

- Provision of specialist assessment and treatment interventions in MCH and Polton Street to promote rehabilitation with safe and effective discharge home.
- Service management, planning and development of the rehabilitation pathway within a defined service budget and a dual-professional framework.
- Development, implementation and management of clinical governance in line with current local and national standards and guidelines.

6. KEY RESULT AREAS

Management

1. Lead and manage change within the rehabilitation team that delivers clinically effective, high quality, safe, person centred care whilst ensuring that clinical, financial and staff governance is achieved and maintained within competing demands of delayed discharge.
2. Day to day management responsibility for physiotherapy and occupational therapy staff including for example recruitment, induction, team meetings, mandatory training, identification of learning and development needs of all members of the team through performance review and personal development plan (PDP), matters of discipline and grievance.
3. Responsible for the development, implementation and updating of the rehabilitation pathway including local procedures, protocols and standards within designated area, ensuring adherence of staff at all times.
4. Liaise and work with the Occupational Therapy and Physiotherapy Clinical Leads in the delivery of the Strategic Delivery Plan and associated Directions for the professions.
5. Analyse activity data to inform service review and design
6. Operate within the Once for Scotland Policies. Resolve and manage complaints in line with NHS Lothian policies and procedures. Understand and share the learning points emerging from the investigation of complaints ensuring action plans are implemented.
7. As appropriate to role, authorised signatory responsibilities including for example signing of staff travel.
8. To deputise for the Clinical Lead in their absence, representing the team at relevant meetings and ensuring effective operational management of the clinical area and opportunities for collaboration across the wider MHSCP system and AHP networks

Clinical

9. To independently prioritise and manage own individual specialist case load providing a full and comprehensive rehabilitation service of assessment, diagnosis, treatment/appropriate management, onward referral and discharge to a complex range of patients requiring the service.
10. Act as a specialist clinical resource for the team to optimise available clinical care including taking responsibility for more complex cases.
11. Demonstrate clinical effectiveness by use of evidence based practice and outcome measures to ensure best practice and standards of service.
12. Lead change to the clinical pathway for rehabilitation whilst prioritising and allocating resources to meet service pressure and demands.
13. To work within all local policies, procedures and protocols and in compliance with professional standards as documented by the Health and Care Professions Council. Patients may include vulnerable adults therefore develop a working knowledge of relevant procedures including, Protection of Vulnerable Adults and other legal frameworks.
14. To support NHS Lothian's values of quality, teamwork, care and compassion, dignity and respect, and openness, honesty and responsibility through the application of appropriate behaviours and attitudes.

Education & Research

15. To provide teaching, specialist training and clinical supervision of the Rehabilitation Team and undergraduate and post graduate students within the team. This will facilitate and create an environment that supports assessment and learning of all staff and enables team members to continuously update, develop and implement current knowledge and skills to meet changing needs of the service. Actively encourage staff to continuously update their knowledge of clinical and technological developments.
16. Participate in projects, research, audit or clinical trials disseminating findings to all members of the multidisciplinary team, adopting and implementing best practice.

7a. EQUIPMENT AND MACHINERY

Ensure that safe working practices and maintenance of departmental equipment and machinery is adhered to by all staff.

Leading reviews of equipment, C.O.S.H.H. and risk assessments.

Ensure Quarterly governance reports completed per team including Health & Safety, Governance and Assurance and Clinical and Care Governance.

Delegating and ensuring that procedures are in place for repairs and replacement of equipment and machinery.

Be competent in the use of a wide range of equipment. Ensure that equipment in use is clean and safe, and regularly monitored for safety as per professional and organisational standards of practice. Ensure that all equipment issued is safe to use and be responsible for the safe and competent use of equipment issued to patients.

The following are examples of equipment which may be used when undertaking the role:

IT Equipment: Laptop/Personal Computer, phones, mobile phone,

Manual Handling equipment: Mechanical Hoists, Samhall turner, Sliding boards, Rope Ladders – to facilitate patient transfers. Walking aids.

- Standardised assessment tools: - Manual handling equipment: - hoists, plinths, slide boards, mobility aids, wheelchairs.
- Adaptive equipment: - bath (fitted and mechanical), toilet, chair, kitchen, bed, rails, banisters.
- Remedial equipment: - tables, splinting equipment, prosthetic and orthotic devices.
- Personal care equipment.
- Domestic equipment: - kettle, microwave, cooker, fridge, toastie machines, food blenders, dishwasher, washing machine, iron.
- Gardening materials: - tools, plants, soil.
- Creative materials: - paints, paper, glass, tiles, wood, pottery wheel, kiln.
- COSHH materials: - glue, varnish, paint, cleaning fluid, grout.
- Sports equipment: - pool table, table tennis, pitch and putt, basketball, rounders, boules, football, croquet, badminton.

Detail of equipment will be held locally and will depend on the work area.

Note: New equipment may be introduced as the organisation and technology develops, however training will be provided.

7b. SYSTEMS

Insert as appropriate to areas and add own examples.

- IT and Communication equipment: -, mobile telephone, Near Me, MS Teams.
- Patient records (e.g., TRAK, MOSAIC and Picture Archiving Communication Systems -PACS),
- Service area systems (e.g., data or statistics collation, referral/allocation process, waiting list management, caseload management, audit/evaluation)
- information systems (e.g. Health Roster, SSTS, eEES)
- Health and Safety and C.O.S.H.H.
- Inventories
- Update department shared drive/intranet site
- Use of intranet to access information within NHS Lothian
- Daily use of e-mail for communication
- M365 - Formatting and populating spreadsheets and databases to produce reports as required. Producing and presenting performance data and service improvements

8. ASSIGNMENT AND REVIEW OF WORK

The post holder is expected to initiate work and developments in their specialist area. This will include prioritisation and the freedom to allocate resources to meet service pressures and demands, delegating clinical and non-clinical tasks where appropriate. The Clinical Lead or Clinical Nurse Manager may also delegate other non-clinical tasks. They will have a Professional Personal Development Plan, which will be reviewed annually by the responsible line manager. Governance of Clinical competence is undertaken by The Physiotherapy and Occupational Therapy Clinical Leads.

The post holder is required to autonomously manage and prioritise their caseload and has sole responsibility for clinical management of a specialist caseload and will act independently within departmental and professional protocols/guidelines.

9. DECISIONS AND JUDGEMENTS

Responsible for own patient caseload and act independently to make complex clinical decisions relating to assessment, differential diagnosis, planning and implementing and evaluating specialist treatment programmes leading to discharge.

Makes decisions in relation to deployment of staff, skill mix, responding to equipment failure and application of policy and procedure to support, guide and direct both staff and patients within area of responsibility.

Recognising and addressing staff performance issues timeously taking corrective action and continuously monitoring to ensure a positive outcome is achieved.

10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB

Managing variable and unpredictable demands of both clinical and managerial workload; in addition develop and support needs of the rehabilitation team within area of responsibility.

Managing provision of service taking account of competing demands of response times, delayed discharge, length of stay, resources and the unpredictability of the environment.

Maintain staff morale and effective team working in the clinical environment to ensure the department maintains a professional and efficient and effective service at all times.

Influence strategic development and the effective management of change within service and/or staff. Provide co-ordination of rapid response to urgent management communications.

11. COMMUNICATIONS AND RELATIONSHIPS

The post holder communicates on a daily basis using highly developed communication skills required to maintain a variety of professional relationships. Communication will be accurate and effective, verbal and non-verbal as appropriate - face to face, through written reports and records, by email, by telephone and digital platforms.

Clinical

Using a range of skills and specialist knowledge, communicate with patients and carers regarding assessment, diagnosis, prognosis and intervention. Interpret highly complex information and modify communication skills to respond to the needs of patients. This will include overcoming barriers: challenging behaviour and conveying sensitive information. Establish robust communication networks with patients/clients, carers, other health workers and agencies.

Management

Co-ordinate response to verbal and written complaints to achieve resolution.

Regular communication with staff through various networks, routinely and to convey sensitive information on an individual and/organisational basis.

Guiding, advising and delegating to senior and junior staff within the service.

Communicate performance issues.

Lead health and safety issues.

Ensure the implementation of and adherence to service and organisational policies.

Lead and develop a culture, which encourages participation in issues of quality e.g. - clinical effectiveness, research and development and evidence based practice.

Educational/Professional

Liaise with universities/colleges to facilitate and maintain the co-ordination/supervision of practice placement education with the service.

Teaching of Rehabilitation speciality to other OT, PT and other professionals and students.

Contribute to local/divisional/national committees/working parties as relevant to the service.

Patients

Provide and receive information regarding assessment, diagnosis, prognosis and treatment to encourage acceptance and compliance.

Patients will have a range of medical and psychosocial problems that require the physiotherapist to utilise motivational and persuasive skills to facilitate rehabilitation both in an individual and group setting. Deal with complaints in a timely manner .escalate and seek support from senior staff as required. Relatives/Carers.

Provide and receive information:

Teach a range of patient management strategies.

Physiotherapy and Occupational Therapy Staff (internal / external).

Negotiate and consult with Physiotherapy Manager regarding service needs and developments, seeking advice where appropriate.

Delegate tasks to physiotherapists, occupational therapists, clinical support workers and administration staff (as appropriate).

Impart information relating to patient transfer to both internal and external colleagues.

Multidisciplinary team within the speciality

Relay on patient assessment findings, patient progress with treatment and suggest other professional input requirements.

Teach rehabilitation strategies to optimise patient care.

Other Agencies (Local Authority, voluntary sector, etc).

Make referrals

Identify and establish contact with appropriate agencies for future patient support e.g. leisure centre, ethnic minority groups, physical abuse groups.

Negotiate and liaise with all appropriate agencies to optimise patient care and ensure efficient service delivery e.g. social work, insurance companies, housing services, employers etc.

12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB

Physical

- Skills to perform a wide range of rehabilitation including manually handling patients (e.g. frequently, on a daily basis), during assessment and treatment for sustained periods of (e.g. up to 60 minutes or more) per treatment session
- Use of specialist equipment – required for day to day use with specific patient's e.g. special seating, standing frames etc.
- Standard keyboard skills – required for daily use of IT equipment.
- Regularly/frequently assess for and demonstrate specialist equipment. This may include sourcing, assembling, dismantling and ensuring the safe use of equipment.

Mental

- High level of concentration required in order to make specialist clinical decisions during all aspects of assessment and treatment taking into account any cultural/ linguistic differences.
- Constant need to be flexible to the demands of the environment including unpredictable work patterns, deadlines and frequent interruptions.
- Make quick judgements, with sound risk assessments which affect the safety of self, patients and others to meet deadlines.

Emotional

- Communicating frequently with distressed/anxious/worried and emotionally demanding patients/relatives.

- Frequent need to impart potentially distressing information regarding the nature of the difficulties and the implications of these.
- Managing patients with challenging behaviours and a range of complex difficulties including the application of appropriate management strategies. Patients may include vulnerable adults and young people under the age of 18 therefore need a working knowledge of relevant procedures including Child Protection, Protection of Vulnerable Adults and other legal frameworks. This can include receiving and acting upon confidential information relating to issues including physical/emotional/sexual abuse and neglect.
- Providing emotional support to junior colleagues and peers.
- Dealing with staff across two professional groups and competency or performance issues.

Environmental

- Exposure to highly unpleasant conditions related to client contact as they arise; including frequent exposure to saliva, body fluids, odours and head lice.
- Exposure to unsuitable and/or unpleasant working conditions including cramped areas not designed for clinical use, unclean homes etc.
- Occasional requirement to travel e.g. to health centres, domiciliary visits and meetings off MCH site. throughout the day (how often, this post seems hospital based).
- Potential exposure to unsafe situations e.g. aggressive behaviour and verbal abuse from patients and relatives, lone working etc.

13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB

- Degree level qualification (SCQF Level 10) in an Allied Health Profession e.g. Physiotherapy or Occupational Therapy
- Registered with the Health and Care Professions Council.
- Evidence of significant post registration professional practice experience to undertake and fulfill the key areas for this post e.g. post graduate experience, post graduate courses in clinical speciality (at SCQF Level 10) short courses.
- Knowledge of national clinical guidelines.
- Evidence of management, education and training i.e. completion of leadership and managerial programmes e.g., Courage to Manage, DLE, Institute of Leadership and Management (ILM).
- Varied ward experience including Care of Elderly Rehab
- Knowledge of change management methodology
- Relevant courses in rehabilitation – this may include orthopaedics, respiratory, neurological
- Up to date with current knowledge, experience and developments in rehabilitation and managing long term conditions
- Experience of pathway development
- Effective communication skills.
- Previous staff supervisory/management experience.
- IT skills.
- Audit experience.

14. JOB DESCRIPTION AGREEMENT

A separate job description will need to be signed off by each jobholder to whom the job description applies.

Job Holder's Signature:

Date:

Head of Department Signature:

Date: