

NHS Lothian Primary and Community Division

Job Description

1. Job Identification

Job Title: Senior Prosthetist

Responsible to: Prosthetics Team Lead

Department(s): Southeast Mobility And Rehabilitation Technology (SMART) Services

Directorate: Rehabilitation Services

Operating Division: Edinburgh Health & Social Care Partnership

Job Reference: 040595

No of Job Holders: 4.1 wte

Last Update: December 2017

2. Job Purpose

The prosthetist is responsible for providing high quality specialist life long prosthetics care to patients with amputation/s or congenital limb loss, in a clinical environment. This service should be patient centered and ensure clinical and cost effectiveness. The post holder manages their own clinical case load. Progression in responsibility is subject to attaining satisfactory performance, measured by current NHS policy and procedure such as Personal Development Performance and Review.

3. Dimensions

Service Activities

The prosthetics service provides upper and lower limb prosthetics services to approximately 25% of Scotland's population. The inpatients for this service are mainly based at Astley Ainslie Hospital whilst outpatients, approximately 1500, come mainly from Lothian, Fife, the Borders, Forth Valley and some West of Scotland Health Boards. The service has an average number of outpatient appointments per year of 3000.

This service provides medical clinics, ward rounds and multidisciplinary clinics where all new patients and referrals, approximately 100 per year, are assessed. This post holder works as part of a multidisciplinary team. Established patients are reviewed routinely under the direction of their assigned prosthetist and referred to clinics as required.

Patient referrals are received by the service from:

- Primary patient referrals from Astley Ainslie Hospital or other hospitals.
- Self referrals from existing patients and or carers.
- Referrals from General Practitioners, Consultants and other Health Care Professionals.

Scottish Specialist Prosthetics Service

The SMART Centre Prosthetics Service, in conjunction with WESTMARC Prosthetics Services in NHS Greater Glasgow & Clyde, provides the Specialist Prosthetics Services (SPS) for veterans and civilians in Scotland. This involves the prescription and fitting of advanced and State Of The Art (SOTA) prosthetics components and techniques within an agreed eligibility criteria. Patients are referred to the SPS and agreed at a monthly MDT. Patients are referred to this service from any of the 5 centres (Glasgow, Edinburgh, Dundee, Aberdeen or Inverness) in Scotland and typically, although not exclusively, the SMART Prosthetics Service can expect to see 50% of the activity for this service, mainly patients referred from the SMART centre in addition to those from the TORT centre in Dundee and the MARS centre in Aberdeen.

This service works within a total component and staff budget of approximately £2,523,000 and receives approximately 103 new referrals per year.

4. ORGANISATIONAL POSITION

Organisation chart attached.

5. ROLE OF DEPARTMENT

The Southeast Mobility and Rehabilitation Technology (SMART) Centre is one of 5 centres in Scotland (Edinburgh, Aberdeen, Dundee, Glasgow and Inverness) providing Rehabilitation Technology Services. The SMART Centre services are based in the Astley Ainslie Hospital and cover Lothian, Fife and the Borders (approx. 25% of Scotland's population). It is part of the Rehabilitation Service which is managed in Edinburgh Health and Social Care Partnership.

The SMART Centre provides services for adults and children who have a permanent disability affecting their mobility. These include mobility and postural services (wheelchairs and special seating), prosthetics, orthotics and bioengineering services, electronic assistive technologies, blue badge independent mobility assessment (Edinburgh only), special needs design service, a disabled living centre and gait analysis service. The SMART Centre is also one of two centres in Scotland providing a national Specialist Prosthetics Service.

In addition the SMART Centre provides the National Scottish Driving Assessment Service as well as hosting various other clinical services such as, podiatry, spinal injuries clinic, spasticity management clinic and other outpatient clinics.

The SMART Centre operates clinics on a daily basis and as an out patient facility sees approximately 20,000 patients per year. In addition SMART clinicians and technicians attend satellite clinics throughout Lothian, Fife and Borders and also provide home visits for their patients.

The department has its own specialist workshops and stores on site. SMART workshops provide in-house manufacturing and (outsourced) modified medical devices across the range of activities mentioned above.

There are around 100 members of staff across a range of professions within the SMART Centre and in addition there are other specialist consultants/doctors who support clinical activity in the SMART Services.

6. KEY RESULT AREAS

1. The post holder is responsible for all aspects of prosthetics patient care for own caseload, ie patients from designated clinics or other sources such as emergencies or wards rounds, as delegated by the Principal Prosthetist, applying British Association of Prosthetists and Orthotists professional and clinical guidelines as a minimum.
2. The post holder makes clinical decisions regarding the patients life long care and is required to plan, evaluate, implement and develop patient care. This includes assessing patients' needs, identifying appropriate treatment, casting or digitising the residual limb and modifying the mould to specify the design in order to manufacture an appropriate custom prosthesis, according to department guidelines and protocols. The post holder is accountable for the completed manufactured device. The postholder is responsible for identifying the changing needs of the patient, for example arranges review appointments based on the individual patients requirements or casts for a new socket when this is clinically or technically indicated.
3. The post holder is responsible for referring patients to a medical clinic, for example if the patient presents with residual limb pain. The post holder is responsible for referring to the prosthetics clinic, for example if the patient requires a change of prescription or a second opinion is required. The post holder is also responsible for seeking advice/guidance from and involving the Principal Prosthetist or the Head of Prosthetics Services when appropriate.
4. The post holder is responsible and accountable for identifying, requesting and supervising technical staff support when dealing directly with patients, for example when repairing a prosthesis or shaping a cosmetic foam.
5. To communicate and provide professional advice as required to patients, carers, referrers and appropriate individuals in the multidisciplinary team.
6. To participate in service development, clinical governance, audit and research as required by the Principal Prosthetist/Head of Prosthetic Services.
7. To support the Principal Prosthetist in carrying out and organising service development/improvement.
8. To supervise and assist junior members of staff as directed by the Principal Prosthetist.
9. Demonstrate that you are undertaking Continuing Professional Development in accordance with British Association of Prosthetists and Orthotists Best Practice guidelines and Rehabilitation Engineering Services/Division policy. As part of the Division Appraisal System, be able to identify your own training and educational needs and to seek out appropriate courses for approval by the Principal Prosthetist as part of your own continuing professional development needs.

10. The post holder is responsible for keeping up to date with clinical and technical techniques in order to decide an appropriate custom socket design and select components from a wide range of prosthetics manufacturers.
11. To co-ordinate and deliver training and education to medical postgraduates, other staff and placement students as delegated by the Principal Prosthetist. This may involve the formulation of programmes and participation in teaching by presentation or other means. This may include providing supervision for placement students.
12. To ensure compliance and implementation with SMART Services/Division policies and procedures such as Quality Control and Health & Safety.

Points 1 - 6 = 90%

Points 7 - 12 = 10%

The above percentages are guidelines to the average times spent on each area and may alter subject to the service requirements.

7a. EQUIPMENT AND MACHINERY

The post holder must be fully conversant in the use of equipment within the clinical and technical environment that is used to treat patients and to manufacture and adjust prostheses, and to document every clinical contact. These include the following;

Casting Equipment: (frequent/daily use)

- Casting jigs, pressure/vacuum casting apparatus, plaster of Paris bandages, mandrels, rectification tools, Computer Aided Design system (Tracer CAD).

Manual Hand Tools: (frequent/ daily use)

- Stanley and leather knives, scalpels, allen keys, plaster shears, spanners, screwdrivers, hacksaws, torque wrenches, measuring tapes/sticks.

Electric Hand Tools: (frequent use)

- Jigsaw, electric drills, industrial heat gun, electric cast cutter.

Workshop Machine Equipment:

- Industrial routers, industrial sewing machine (frequent use)
- vertical belt sander, pillar drill, band saw (infrequent/occasional use)

Clinical/manual handling equipment

- Hoist (infrequent/occasional use)
- Trolley for transporting goods (frequent use)

I.T Equipment: (frequent use)

- Computer, telephone, facsimile, printer, photocopier
- Access to the Internet is used for research, and enquiries for technical and professional issues

7b. SYSTEMS

Paper based systems

- Workshop and department systems e.g. completing worksheets with instructions for the manufacture of medical device. Frequent basis (daily use).
- Updating and maintaining own Continual Professional Development using system provided by professional body, the British Association of Prosthetists and Orthotists. Infrequent basis (weekly – monthly).
- Own travel expense claim forms, annual leave cards, training requests, and other policies and procedures for example, promoting attendance at work paperwork.

IT Systems

- Responsible for maintaining own patient records on the ReTIS system following any episode of patient contact or care, using the departments systems. Frequent basis (daily use).
- The post holder frequently uses email for communication (daily). Microsoft word and Excel PC packages are occasionally used for general reports, letters and communication. The internet is used frequently (weekly/monthly) for research and keeping up to date with professional and technical issues. Microsoft power point is used on an occasional basis for presentations.
- Computer Aided Design for data capture (Tracer CAD) on a frequent basis (monthly).

Quality System

Responsible for implementing and adhering to SMART Quality System.

8. ASSIGNMENT AND REVIEW OF WORK

The post holder works as an autonomous practitioner responsible for their own work and has an individual duty of care to the patient. Work is not generally checked or supervised directly. The post holder is clinically accountable for all their prosthetics treatment and must adhere to Quality Control Systems in place.

Work is generated by post holder following routine review of patient or from new referrals and must adhere to departmental protocols and procedures. This may include the generation of work for the Prosthetics Technicians, for example, the post holder provides detailed instructions for the Technician to manufacture/repair the prostheses in workshop, correctly completing the Job charts according to Quality system and specifying which parts are required.

The post holder also receives clinical or non clinical related work generated by the Principal Prosthetist or the Head of Prosthetics Services for example conducting a case mix review, audit projects or assisting with complaints.

The post holder is managed by the Head of Prosthetics Services who provides clinical guidance, supervision, work review and formal appraisal of performance. This will take the form of regular meetings at which meetings notes will be recorded. In addition, information and instruction may be exchanged in written and electronic format. Additional and short notice meetings may also be required. The post holder will seek authorisation, advice and guidance from the Head of Prosthetic Services as appropriate.

9. DECISIONS AND JUDGEMENTS

- Prioritise patients based on clinical need.
- Manage and prioritise clinical prosthetic treatment of own patient caseload within department guidelines. This includes providing detailed prescriptions to technical staff and other allied health professionals, and advice as required, to patients, carers, relatives, and other appropriate individuals.
- Make autonomous decisions regarding prosthetics care, for example, arranging review appointments based on the individual patients needs or casting for a new socket if this is clinically or technically indicated.
- Refer patients to clinics as appropriate, for example, the medical clinic for medical input or the prosthetics clinic if a change of prescription or a second opinion is indicated.
- The post holder is expected to anticipate patient's problems and resolve them ensuring good communication at all times.
- Discretion required during prosthetics clinics when liaising with other health care professionals regarding patient care.

10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB

- Providing care and communicating with new and/or existing patients and their relatives, who might be in a very emotional state of mind about losing a limb and may also have barriers to communication such as cognitive impairment.
- The emotional and stressful demands of providing care to and supporting patients and their relatives with expectations which cannot or have not been met by the service – this may be due to the patient's clinical/technical complexity or non compliance, abusive or aggressive behaviour from the patient and/or relatives.
- Delivering care in a time sensitive environment, dealing with emergency situations and unpredictable treatment sessions whilst responding sensitively to emotional pressures from patients or their relatives to meet their personal deadlines for example holidays.

11. COMMUNICATIONS AND RELATIONSHIPS

Internal:

- Patients and/or relatives and carers regarding all aspects of their prosthetics care.
- Other members of the multidisciplinary team for example, Consultant, Doctor, Nurse, other Allied Health Professionals and Technicians regarding appropriate aspects of the patients prosthetics care.
- SMART Prosthetists, for input into specific clinical situations and as part of team discussions e.g. to discuss general clinical related issues to ensure a consistent team approach.
 - The Principal Prosthetist for all operational management issues and general clinical assistance.

- The Head of Prosthetics Services for major clinical issues such as change of prescription or to discuss complex clinical issues and for line management.
- Department administrative staff for appointments and administration.
- Other clinical and technical staff within the department for example Clinical Bioengineers or the Head of Technical Services/Lead Technician if the patient or the medical device required the involvement of both services.
- Other relevant departments within the division, e.g. Estates, Supplies, Training Department, Human Resources, Fire Officer.

External:

- Private Prosthetics companies regarding clinical and technical issues and for information and advice concerning their products.
- Liaise with peer groups.
- Attendance and participation on committees, forums and groups as requested by the Head of Prosthetics Services for example, the SMART amputee integration group, the SMART Housekeeping group, the Lothian Allied Health Professions Advisory Committee (LAHPAC) or the Scottish Rehabilitation Engineering & Technology Prosthetic Sub-Group (SCOTRET PSG)
- Inform the appropriate agency, such as IRIC in writing of any prosthetics component failures.

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

Physical Skills:

- The individual must be physically able to fulfil the job duties, which entails highly developed hand casting skills, where a degree of precision and speed are required, as well as good levels of hand, eye, and sensory co-ordination.
- Keyboard skills.

Physical Demands:

- Working in confined or problematic spaces for example casting or examining patients in their wheelchair, on a plinth or between parallel bars.
- Patient assessment (manual handling and physical examination),
- Casting (concentrated effort for a period of time while exerting a constant pressure. This involves the prosthetist being in an awkward body position).
- Rectifying (lifting, moving and handling large quantities of liquid plaster, manoeuvring positive plaster mould and physical exertion of modifying positive plaster mould).
- Manufacturing and adjusting prostheses.
- Using appropriate manual handling equipment for example trolley for transporting heavy items.
- Frequent periods of static sitting when writing patient notes or working on PC.
- Frequent requirements for standing.

Mental Demands:

- Retention and communication of knowledge and information.
- Problem solving.
 - Frequent requirement for prolonged concentration for example when updating patient notes.
 - Working within time scales and deadlines for example producing cast work on time for workshop manufacture.

- Working in a time sensitive environment whilst ensuring good communication and that the patients needs are met, for example the patient's prosthesis requires repairing within the time scale of their transport arriving to collect them.

Emotional Demands:

- Regular exposure to distressing or emotional circumstances, for example patient healthcare issues and circumstances.
- The stress when dealing with abusive or aggressive behaviour from the patient and/or relatives for various reasons.
- The stress when providing lifelong prosthetic care to a clinically and emotionally demanding client group.
- The stress when providing care to and supporting patients and relatives when the service's best endeavours have not or cannot meet the expectations or needs of the patient.
- The stress when dealing with patient or service complaints either in a face to face situation or verbally or written.

Working Conditions:

Office

- Frequently working in an office environment for example in a limited workspace, indoor lighting and using computer equipment.

Plaster room and workshop areas

- Potentially hazardous working environment with exposure to chemical and performed foams, glue, plaster of paris dust, carbon fibre, resins, glass fibre fragments noise pollution from industrial machinery and extraction units.

Clinic areas

- Exposure to body fluids, for example blood, sweat, urine, faeces
- Exposure to open wounds
- Exposure to infections, for example MRSA
- Exposure to verbal/physical aggression

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

Minimum required to undertake the role:

The post holder must be State Registered with Health Professions Council.

The post holder must have obtained an Honours Degree from the Prosthetic and Orthotic Schools at the Universities of Strathclyde or Salford, or have obtained an equivalent qualification which allows State Registration.

The post holder should preferably be a member of the British Association of Prosthetists and Orthotists.

The post holder will have two years post graduate experience as a minimum and preferably a broad experience in providing prosthetic care.

Highly developed and effective communication and time management skills.

Highly developed and effective clinical and problem solving skills especially when dealing with a complex clinical situation. Verbal motivational skills are also required to aid patient's rehabilitation and encourage compliance.

Team working skills and the ability to work in a team environment with mixed professions.

Evidence of ongoing continuing professional development.

Up to date working knowledge of clinical and technical techniques and available componentry.

14. JOB DESCRIPTION AGREEMENT

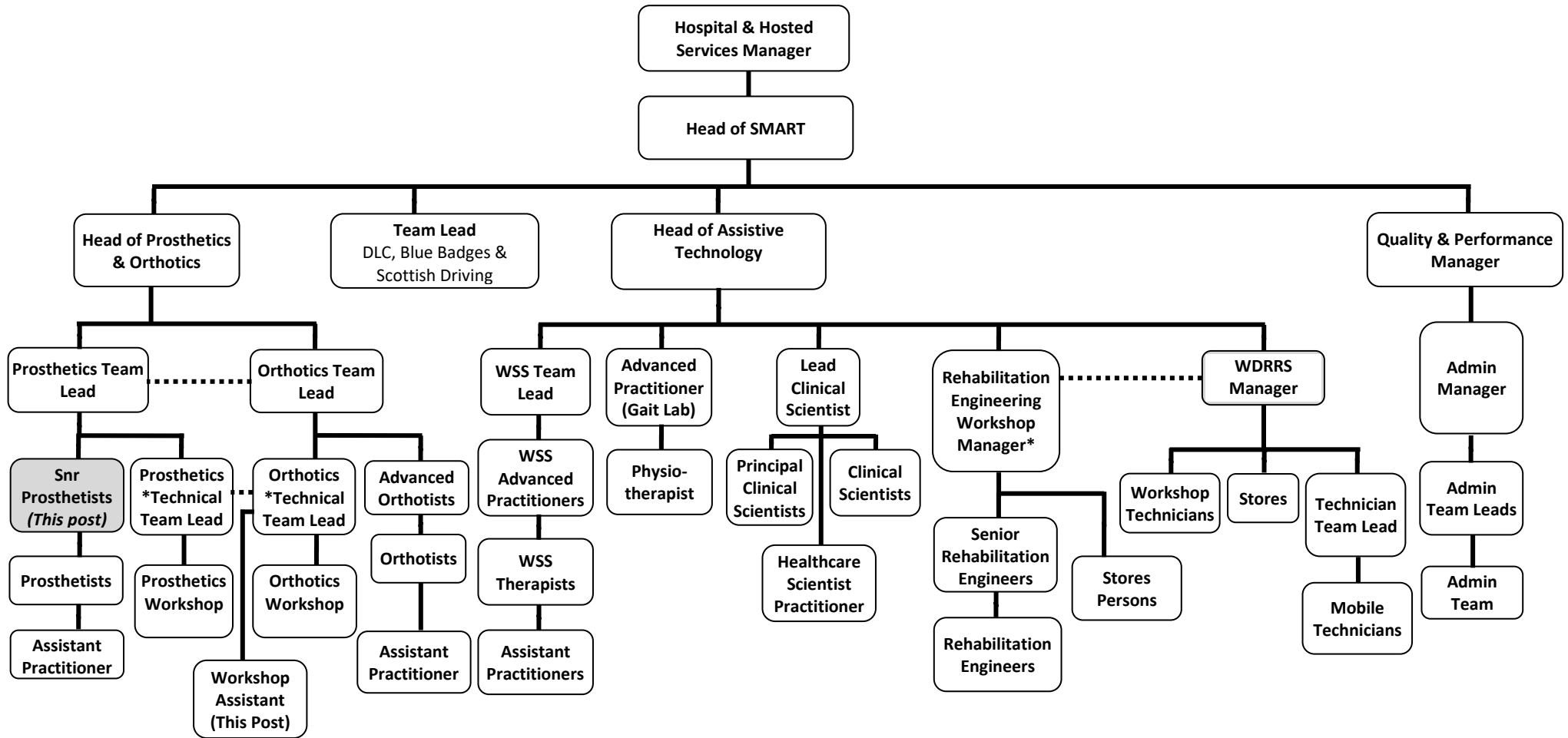
Job Holder's Signature:

Date:

Head of Department Signature:

Date:

Organisational Chart



— Direct report structure
 Cover Arrangements

* Rotational Stores post will be operationally managed by Rehabilitation Workshop Operations Manager and Prosthetics and Orthotics Technical Team Leads