#### **JOB DESCRIPTION**

|  |
| --- |
| JOB IDENTIFICATION |
| Job Title: Principal Clinical Psychologist Adult Mental Health  and Primary Care Services  Responsible to: Service Lead for Psychology Interventions in Psychosis    Directorate: Health and Social Care Partnership  Operating Division: Fife Wide Community Services  Job Reference:  No of Job Holders 5 |

|  |
| --- |
| 2. JOB PURPOSE |
| To provide an expert/highly specialist clinical psychology service to clients of the adult mental health and primary care service, across all sectors of care working autonomously within professional guidelines and the overall framework of the department’s policies and procedures, including:   * Psychological assessment and therapy; * Advice and consultation on clients’ psychological care to non-psychologist colleagues and to other non-professional carers; * Clinical supervision to other qualified clinical psychologists, cognitive-behaviour therapists, psychology trainees and assistants; * Use of research skills to guide and develop evidence-based clinical practice and to perform service development, service evaluation and clinical audit; * Teaching principles of psychological theory and therapy to other psychologists, trainees and non-psychologist colleagues in health and social care. * To take the lead in service delivery for one or more designated GP practice(s). |

|  |
| --- |
| **3. DIMENSIONS** |
| 1. Provides expert/highly specialist psychological assessment and therapies to clients:  * Across one or more localities * In hospital outpatient clinics and GP practices * On an inpatient basis to patients in one hospital on an “as needed” basis * With a range of psychotic and comorbid disorders (such as depression, generalised anxiety, panic, agoraphobia, obsessive-compulsive disorder, post-traumatic stress disorder, eating disorders, aggressive behaviour, substance abuse, personality disorder and complex psychological problems arising from physical/emotional/sexual abuse and/or neglect). Most clients present with more than one of these disorders.  1. Takes responsibility in conjunction with line manager for the development and delivery of clinical psychology services for service areas. 2. Consults and liaises with other professionals such as GPs, Psychiatrists, Community Psychiatric Nurses, and Social Workers regarding patient care, including development and implementation of Care Plans 3. Conducts research projects (e.g. ongoing investigation of psychotherapy process), including the design, conduct, and dissemination of results through conference presentations and journal publications. 4. Provides consultancy and supervision to assistant and trainee psychologists who are designing and conducting research project. 5. Provides professional development activities to departmental colleagues through presentations such small group workshops and whole department half day teaching sessions. 6. Provides individual and group clinical supervision to colleagues, assistant psychologists, and doctoral trainee psychologists. |

|  |
| --- |
| ORGANISATIONAL POSITION (See attached organisational chart) |
|  |

|  |
| --- |
| 5. ROLE OF SERVICE |
| The Clinical Psychology Service provides a full range of clinical psychology services to alleviate psychological distress and promote the psychological well-being of the people of Fife. This includes not only mental health problems but also the application of psychological approaches to a range of health issues including health related behaviour change and the psychological factors relating to physical ill-health.  The Service provides assessment and treatment for a wide range of psychological, emotional and behavioural problems in adults, children, adolescents, and older people, and advice and support for their families and carers, across all settings, and in relation to all Fife health and social care agencies, education as well as independent and voluntary sector organisations. In addition to direct individual (and group) psychological assessment and treatment psychologists have a major consultative role, provide teaching and supervision for others employed in psychological interventions, provide specialist advice and support to carers and undertake and support relevant research and service evaluation. These services are provided through 8 specialties.  The Adult Mental Health and Primary Care specialty provides a clinical psychology service across Fife to both inpatients and outpatients between the ages of 18-65 who are experiencing one or more psychological disorders. Research and service development as well as policy development are integral parts of the activity of the specialty. It also provides regular teaching, supervision, and professional development to people both within and without the department. |

|  |
| --- |
| 6. KEY RESULT AREAS |
| **Clinical:**   1. To provide a comprehensive clinical psychology service to the population presenting to the PIP service in the designated locality/localities. 2. To take responsibility for the provision of a clinical psychology service in the designated locality/localities, having responsibility for the development of a comprehensive psychology service and drawing on highly specialist knowledge to make decisions regarding urgency, appropriateness and complexity of referrals. To promote and maintain the highest quality, most responsive and most accessible psychology service given available resources. 3. To exercise full clinical responsibility and autonomy in the assessment, treatment and discharge of clients. To manage a personal caseload including highly complex cases with chronic, severe and challenging mental health problems. 4. To provide comprehensive psychological assessments of clients referred to the PIP Service. These are highly specialist assessments based upon the appropriate use, interpretation and integration of complex data from a variety of sources including psychological tests, self-report measures, clinical rating scales, direct and indirect structured observations and semi-structured interviews with clients, family members, and others involved in the client’s care as necessary and appropriate. 5. To routinely assess and manage clients’ risk of suicide and risk of harm to self and others; to provide advice to other professions on psychological aspects of risk assessment and risk management in line with professional and local NHS guidelines. 6. To choose, administer, score and interpret complex neuropsychological tests to assess function as an aid to diagnosis, management and treatment. A high degree of accuracy is required as well as familiarity with the statistical foundations of assessment tools including reliability, validity and the use of normative data. To provide neuropsychological reports to referrers based on the data obtained. 7. To formulate plans for the formal psychological treatment and/or management of a client’s mental health problems, based upon an appropriate conceptual framework of the client’s problems, and employing methods based upon evidence of effectiveness, across the full range of care settings. To evaluate and make decisions about treatment options taking into account both theoretical and therapeutic models and highly complex factors concerning historical and developmental processes that have shaped the individual, family or group. 8. To be responsible for implementing a range of highly specialist psychological interventions for individuals, carers, families and groups, adjusting and refining psychological formulations drawing upon different explanatory models to generate and test a number of provisional hypotheses. 9. To regularly review the evidence base pertaining to clients’ presenting problems to determine the most effective treatment approaches. To be familiar with national (e.g. NICE, SIGN) clinical guidelines on clinical effectiveness and offer treatment consistent with these guidelines. 10. To provide written and verbal clinical reports to the referring agent and relevant others (e.g. educational and social services; clients’ legal representatives), in a skilled and sensitive manner, containing information about the assessment and treatment plans of clients. To provide timely progress reports during the course of both uni- and multi-disciplinary care. 11. To provide highly specialist psychological advice guidance and consultation to other professionals contributing directly to clients’ formulation, diagnosis and treatment plan. 12. To be responsible for contributing directly and indirectly to a psychologically based framework of understanding and care to the benefit of all clients of the service, across all settings and agencies serving people in the designated locality/localities.   **Teaching, training, and supervision:**   1. To provide highly specialist clinical placements for trainee clinical psychologists and MSc psychological therapist trainees, including holding clinical responsibility for the caseload of trainees and ensuring that they acquire the necessary skills, competencies and experience to provide good psychological care for this client group. 2. To assess the clinical competence of trainee clinical psychologists and psychological therapists and provide formal evaluation of their competency to the relevant training bodies (British Psychological Society; Universities of Edinburgh, Dundee, Stirling and others). 3. To provide clinical supervision of Assistant Psychologists, Cognitive Behaviour therapists, and Chartered Clinical Psychologists in both an individual and group format. 4. To contribute highly specialist knowledge and skills to the pre- and post-qualification teaching of clinical psychologists/psychological therapists, as required 5. To provide clinical supervision for junior clinical psychology colleagues and to provide highly specialist clinical supervision to senior colleagues when the post holder has advanced knowledge and experience in a particular area/approach. 6. To provide teaching and training on psychological aspects of care to staff working with the client group across a range of agencies and settings including GP practices and hospital wards. 7. To provide supervision to staff of other professions on psychological aspects of their work as appropriate. 8. To contribute to the continuing professional development of other members of the Adult Psychology team and the area-wide clinical psychology service through workshops and seminars within the department.   **Management, recruitment, policy and service development:**   1. To be responsible for development of the psychology service in consultation with psychology line manager. To plan and prioritise assessment of clients, delivery of treatment and evaluation of outcome to make best use of available resources. 2. To contribute to the development, evaluation and monitoring of the operational policies and services of the specialty, through the deployment of highly developed professional skills in research, service evaluation and audit. 3. To advise both service and professional management on those aspects of the service where psychological and/or organisational matters need addressing. 4. To make proposals for and contribute to policy implementation and service development both within the PIP service and in multi-agency settings in the post-holder’s designated locality/localities. 5. To manage the workloads of assistant and trainee clinical psychologists, within the framework of the team/service’s policies and procedures. 6. To be involved as appropriate in short-listing and interviewing of assistant psychologists and cognitive behaviour therapists or more junior clinical psychologists.   **Research and service evaluation (a major job requirement):**   1. To utilise theory, evidence-based literature and research to support evidence-based practice in work with individuals, groups and teams across the service. 2. To undertake appropriate research including service evaluation and complex audit within the service to help develop service provision. 3. To disseminate the findings of research, clinical service evaluation and audit to the wider profession by contributing to conferences and professional journals. 4. To supervise research projects of trainee and assistant psychologists.   **Continuing professional development:** To develop and maintain the highest personal standards of professional practice, through active participation in internal and external CPD training and development programmes, in consultation with the Head of the Adult Service and the Area Head of ServiceTo receive and make good use of monthly clinical supervision from a clinical psychologist colleague, in common with all clinical psychologists, and in accordance with departmental and British Psychological Society good practice guidelines.  1. To maintain updated knowledge and gain additional highly specialist experience and skills relevant to clinical psychology and/or the service in order to meet agreed goals for continuing professional development. 2. To maintain and develop skills in the area of professional pre- and post-graduate training and clinical supervision.   **General:**   1. To contribute to the development and articulation of best practice in psychology across the service, by continuing to develop the skills of a reflexive and reflective scientist practitioner, taking part in regular professional supervision and appraisal and maintaining an active engagement with current developments in the field of clinical psychology and related disciplines. 2. To maintain the highest standards of clinical record keeping including data entry and recording, report writing and the responsible exercise of professional self-governance in accordance with professional codes of practice of the British Psychological Society and NHS Fife policies and procedures. 3. To manage personal clinical workload and appropriate professional duties and responsibilities to ensure an efficient and effective service. 4. To abide by the Codes of Conduct applicable to all Chartered Clinical Psychologists as required by the British Psychological Society, its Division of Clinical Psychology, and the Health Professions Council. 5. To maintain up to date knowledge of relevant legislation, and national and local policies. 6. To contribute to the general development of the department by attending regularly and participating in department meetings both at a specialty and area level. 7. To comply with the policies of NHS Fife and the Psychology Service, including Health and Safety and the care and management of equipment and materials. |

|  |
| --- |
| 7a. EQUIPMENT AND MACHINERY |
| * Frequent use of computers and Dictaphones * Regular use of tape and CD recording equipment for preparation of patient therapy aids * Regular use of neuropsychological test equipment * Office equipment is regularly used such as photocopiers and paper shredders * Equipment is used for teaching or clinical purposes such as, video   cameras/recorders and data (Powerpoint) projectors |
| **7b. SYSTEMS** |
| * The post-holder is required to maintain accurate and comprehensive clinical notes and consultation records for every client seen as defined in the operational policy, utilising both case files and the services’ electronic patient record system. * The post-holder is required to provide weekly appointment diaries for administrative purposes and complete travel claim forms. * The post-holder is required to provide monthly statistics on client contacts for the departmental data base. * Knowledge and competent use of computer software packages is essential such as:   1. software packages e.g. Microsoft Office for producing text, databases and spreadsheets  2. software packages e.g. SPSS for the storage, manipulation and statistical analysis of data  3. use of online databases and e-library resources for literature reviews  4. software packages related to the operational procedures of GP practices |

|  |
| --- |
| 8. ASSIGNMENT AND REVIEW OF WORK |
| * The post-holder receives referrals and triages them appropriately where s/he takes the lead role in service delivery. * Post-holder is autonomously responsible for managing the designated areas’ waiting lists, planning and scheduling clinical work and generating practice-level service developments in consultation with PIP Service Lead and consistent with departmental strategy. * Post-holder is autonomously responsible for managing personal clinical caseload, including the assessment, treatment and discharge of clients whose care plans are primarily psychologically based * Receives referrals from GP’s, Psychiatrists, Community Psychiatric Nurses, Social Workers, Health Visitors, other professionals, and provides independent reports for these people. * Is required autonomously to anticipate and take steps to resolve problems which occur within the designated practices and areas of clinical work associated with this post. * Post-holder is required to be proactive as well as reactive in ensuring optimal provision of an effective and efficient service. * Post-holder independently generates research activities to determine the effectiveness of clinical interventions. * The work of the post-holder is reviewed both through regular meetings with the designated Service Lead and through an annual formal process (PDP) with the Service Lead. |

|  |
| --- |
| **9. DECISIONS AND JUDGEMENTS** |
| * Full clinical autonomy for decisions concerning prioritisation of own caseload, treatment and discharge of cases. * Judgements and high level interpersonal skills required concerning the most effective method of presenting clinical and professional opinion in settings that may involve significant barriers to acceptance or hostility to these opinions. * Planning and decision-making concerning preparation, High level analytical skills required in analysis of complex psychological factors and comparison of a range of options for accurate formulation and treatment delivery. * Judgements of highly complex information required to negotiate and resolve difficulties and problems which arise in clinical settings. Typical judgements involve appropriateness of particular treatments, referral to other agencies, and most effective method to promote understanding among agencies where psychological opinion may differ from that of other professions. * Presentation and evaluation of professional development and training activities. * Decision-making required to initiate and develop research and supervise colleagues involved in research. * High-level analytical skills used to conduct, evaluate and present research findings. |

|  |
| --- |
| 10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB |
| * Working with a large heterogeneous patient population who require flexibility and adaptability of approach in order to provide them with effective treatment options * Routine requirement to deal with complex and emotionally distressing and challenging situations including working with patients who are anxious, depressed, angry, traumatised, and suicidal. Frequently listening to experiences of trauma, abuse and neglect. * Managing the anxieties, stress and sometimes hostility of carers and other colleagues involved with the patient. * Responding to urgent situations while holding a full caseload and managing other clinical responsibilities. * Focussed and sustained concentration required for long periods of time during clinical work with patients. * Ability to move quickly and seamlessly between different tasks such as work with patients, research activity, and professional development so as to be able to competently meet the demands of each situation. * Working in a variety of settings and the travel time between bases puts demands on time management skills. * Working within different professional networks in primary care and mental health is time-consuming, challenging and at times frustrating. |

|  |
| --- |
| **11. COMMUNICATIONS AND RELATIONSHIPS** |
| **Communication**   * Communicating with patients regularly involves dealing with highly complex and sensitive information. Issues of confidentiality and discretion have to be negotiated regularly and dealt with prudently and judiciously. * Conducting both planned and impromptu telephone conversations with professionals and carers regarding patient treatment needs. These conversations can be the result of a clinical crisis (e.g. suicidal intent) or patient’s personal crisis such as a sudden marital separation. * Patients sometimes present with barriers to communications such as sensory impairments and cognitive impairments. On occasion, an interpreter has had to be present for hearing impaired patients and questionnaires might need to be read out to visually impaired patients. Also, materials sometimes have to be adapted for patients with different cognitive abilities. * Communicating with GPs, other members of the primary care team, CPNs, psychiatrists and social work colleagues regarding patients’ needs to ensure efficiency of service delivery. * Providing written reports as required to GP, psychiatrists, and also solicitors. * Barriers to understanding have to be negotiated. This can occur with professionals working from different models of aetiology such as the difference between the medical model and the biopsychosocial model. Differences must be explored and resolved to maintain effective communication. * Consultancy work is undertaken with colleagues outside the clinical profession to inform patient management. * Teaching/training is provided to psychology trainees, psychology colleagues and other colleagues as required. * Conference presentations and journal publications require ideas to be communicated articulately and coherently. * Regularly email departmental colleagues as well as other professionals.   **Relationships**   * To form and maintain appropriate therapeutic relationships with service users and carers. * Ability to foster productive working relationships with departmental colleagues and colleagues from other professions. Work collaboratively to provide a coordinated and effective service in primary care settings such as GP practices. Communicate on matters of treatment options and optimum service delivery. * Initiate and build relationships with service providers in different contexts such as staff in non-statutory agencies. |

|  |
| --- |
| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** |
| Physical effort:   * Working in different settings requires frequent travel throughout the day. * PC and keyboard skills are required on a regular basis for reports, data entry and analysis, email communication and preparation of teaching material. * Degree of manual dexterity required for administration of neuropsychological tests. * Clinical work requires sustained sitting in restricted situation for several hours. * Carrying patient files and psychological test materials which can be heavy.   Mental effort:   * A high degree of focused concentration and prolonged mental effort is required during patient interviews. * Such concentration and mental effort can also be required in professional and clinical meetings. * Non-clinical aspects of the post (e.g. teaching, training, research) require extensive analytical skills as well as high level abstract thought and conceptualisations.   Emotional demands:   * Sustained attention to the emotional needs and distress of patients is emotionally very demanding. For example, patients often have sexual abuse issues, bereavement issues, and/or anger problems and some of them regularly self-harm. * In the clinical setting the atmosphere can sometimes be hostile, with occasional exposure to verbal or physical aggression. * Conducting clinics in environments such as busy outpatient settings and GP Surgeries and Health Centres introduces distractions and unpredictability which must be managed. |

|  |
| --- |
| 13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB |
| * A good honours degree in psychology that provides eligibility for graduate basis for registration with the British Psychological Society. * An accredited post-graduate doctoral level training in clinical psychology to meet the requirements for eligibility to register as a chartered clinical psychologist with the British Psychological society/ register with the HCPC. * Significant post qualification experience working with adults with psychological problems. * Experience of supervising clinical doctoral trainees. * Ongoing professional development activities as required to continue practicing as a Chartered Clinical Psychologist/remain registered with the HCPC. |

|  |  |
| --- | --- |
| **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:  Head of Department Signature: | Date:  Date: |