#### **JOB DESCRIPTION**

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| JOB IDENTIFICATION |
| Job Title: Psychological Interventions in Psychosis Service Lead; Consultant Clinical Psychologist  Responsible to: Head of Adult Mental Health Psychology  Department Psychology  Directorate: Fife Health and Social Care Partnership  Operating Division: Complex and Critical Care  Job Reference: PsyAMHPIP  No of Job Holders: One  Last Update October 2023 |

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| 2. JOB PURPOSE |
| * To provide clinical and professional leadership to the staff of the Adult Mental Health Psychological Interventions in Psychosis (PIP) specialty of the Fife area-wide clinical Psychology Service. * To ensure the systematic provision of a high quality specialist clinical psychology service to adults in Fife with Psychosis, across all sectors of care, in consultation with the Head of Adult Mental Health (AMH) psychology services and the AMH Consultant team. * To work autonomously within professional guidelines and exercise responsibility for the systematic governance of psychological practice within the specialty and to ensure that systems are in place and working effectively for the clinical and professional supervision and support of all other psychologists within the specialty. To be responsible for ensuring clear systems for effective recruitment, professional appraisal and the identification of CPD needs across the specialty. * To contribute to the work of the wider adult mental health psychology service and other relevant services in Fife, through consultancy, training and provision of psychological expertise; contributing to service development work; as well as ensuring provision of psychological assessment and psychological interventions for individuals and groups. * To formulate strategic plans, in conjunction with partner organisations, mental health colleagues and in consultation with the Head of Adult Mental Health psychology, for psychological services within the PIP specialty of the Area Psychology Service and to oversee their implementation. To propose and implement policy and service development changes within the clinical area served by the specialty. * Carry out audit, policy and service development and research activities and/or programmes within the specialty in accordance with clinical governance. * To provide personally a clinical service for a caseload of clients of the PIP specialty. * To undertake and oversee the teaching, training and research work of the PIP specialty. |

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| **3. DIMENSIONS** |
| * This post is part of the Adult Mental Health Psychology Service within the Fife area-wide clinical Psychology Service. * The post holder is responsible for delivering appropriate psychological interventions to people who have psychosis and or bipolar disorder across the full range of service settings: in-patient (including IPCU), day patient and community (including clients’ own homes, residential, nursing homes, & supported accommodation settings). * The post holder will lead on the development and provision of psychological assessment and treatment for this client group in consultation with the Head of the Adult Mental Health psychology service, the AMH Consultant team and mental health colleagues. * Staff responsible to this post-holder currently include: principal clinical psychologists, a highly specialist clinical psychologist, a psychology assistant and psychology trainees. * Referrals are made mainly through the Psychiatric Rehabilitation and Community Mental Health Teams, with some GP referrals. * The specialty has a role in development and delivery of highly specialist psychological intervention approaches, and provision of joint training programmes in these approaches to specialist nursing and other staff, including 3rd Sector agencies for them to implement, with a commitment to ongoing supervision by the psychologists until the nurses/ other staff are proficient in these psychosocial approaches. |

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| 4. ORGANISATIONAL POSITION |
| See attached organisational charts  Director of Fife Psychology Service  Head of Adult Mental Health Psychology  **This Post**  Clinical Psychologists  Psychology Assistants  Trainees |

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| 5. ROLE OF DEPARTMENT |
| The Fife 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 patients’ families and carers. This is conducted across all settings, and in relation to all Fife health and social care agencies and 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.  The PIP Specialty provides evidence-based psychological interventions that are both delivered directly (one-to-one and group) and jointly with and indirectly through other staff. These interventions are designed to help people cope with problems associated with psychosis and related severe and enduring mental health difficulties such as bipolar. The service is Fife-wide and has strong links to multi-disciplinary teams in inpatient mental health settings across Fife, with significant service delivery (direct and indirect) to inpatients. The service is also provided in various community settings across Fife, with some digital delivery.  Research and service development as well as contributing towards policy development are integral parts of the activity of this specialty, which also provides teaching, supervision, and professional development to people both within and beyond the wider Psychology Service. |
| 6. KEY RESULT AREAS |
| Management, recruitment, policy and service development  * To be responsible for the management, coordination and effective delivery of a highly specialised clinical psychology PIP service. * To exercise responsibility for managing the psychological resources available to the PIP psychology specialty both in terms of psychological staff and psychological materials employed in the assessment and the treatment of patients. * To lead, motivate, support and supervise other psychologists in the service; to oversee clinical practice; identify staff training needs within the specialty, and conduct staff appraisal and PDP annual reviews. * To exercise responsibility for the systematic governance of psychological practice within the specialty, including the systematic recording of appraisals, note-keeping practices and the transcribing of records and minutes of appropriate professional meetings. * To initiate and implement service developments and projects within the specialty. * To advise and participate in appropriate psychology recruitment within the specialty and on occasions for the wider Service, and be involved in staff induction in the Psychology Service. * To lead on policy and strategic development within the specialty in consultation with the Head of Adult Mental Health Psychology and also to contribute as a senior clinician to strategic developments within relevant areas. * To manage specific funded initiatives within the specialty with responsibility to prioritise funding by making decisions about best practice and effective service delivery. To meet these responsibilities in consultation with the Head of Adult Mental Health Psychology and the Director of Psychology Service. * To advise on planning and developing the specialty’s test resources and IT resources. * To liaise professionally on a national basis e.g. via Psychology and multi-disciplinary special interest groups. |

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| Clinical To carry a personal clinical caseload which includes:   * To exercise full responsibility and autonomy for the treatment of and discharge of clients whose problems are managed as a psychologically based care plan, ensuring appropriate assessment, formulation and interventions, communicating with the referral agent and others involved with the care on a regular basis. * To provide highly developed specialist psychological assessments of clients referred to the team, based upon the appropriate use, interpretation and integration of complex data from a variety of sources including psychological (and neuropsychological) tests, self-report measures, rating scales direct and indirect structured observations and semi-structured interviews with clients, family members and others involved in the client’s care. * 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 efficacy, across the full range of care settings. * To make highly skilled evaluations and 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. * To be responsible for implementing a range of psychological interventions for individuals, carers, families and groups, within and across teams employed individually and in synthesis, adjusting and refining psychological formulations drawing upon different explanatory models and maintaining a number of provisional hypotheses. * To develop, run and evaluate specially designed treatments and psychosocial intervention programmes to help adults with psychosis, bipolar, or severe and enduring mental health problems, both on a unidisciplinary and multidisciplinary basis. * To use highly developed clinical skills to develop therapeutic relationships with clients who have particular difficulties in relationships as mentioned above, often containing significant distress and anger within therapeutic sessions as they represent frequent responses to significant losses which characterise the client group, e.g. family breakdown, independence etc. * To undertake risk assessment and risk management for relevant individual clients and to provide both general and specialist advice for psychologists and other professionals on psychological aspects of risk assessment and management. * To communicate to a range of involved individuals, professionals and agencies in a highly skilled and sensitive manner, information concerning the assessment, formulation and treatment plans of clients under their care and to monitor and evaluate progress during the course of both uni- and multi-disciplinary care. To acknowledge and to attempt to address barriers to others’ understanding of this information. This includes writing formal psychological reports for range of professionals including formal legal reports, occasionally being required to appear in court as expert witness. * To provide expertise and specialist psychological advice, guidance and consultation to facilitate the effective and appropriate provision of psychological care by all members of the multi-disciplinary team contributing directly to clients’ formulation, diagnosis and treatment plan. * To provide expert consultation about the psychological care of adults with NDD problems to staff and agencies. * To act as care co-ordinator, where appropriate, ensuring the provision of a care package appropriate for the client’s needs, co-ordinating the work of others involved with care, arranging client’s care reviews as required and communicating effectively with the client, his/her family and all others involved in care; and to monitor progress during the course of multi-disciplinary interventions. |
| Teaching, training and supervision  * To ensure appropriate systems for the clinical and professional supervision of qualified and unqualified psychologists across the service/sector. * To provide clinical and professional supervision to qualified and assistant psychologists working in the service/sector. * To provide specialist clinical placements for trainee clinical psychologists, ensuring that they acquire the necessary clinical and research skills to doctoral level where appropriate, and competencies and experience to contribute effectively to good psychological practice. Contribute to the assessment and evaluation of those competencies. * To provide pre and post-qualification teaching of clinical psychology as appropriate, including formal teaching on the University Clinical Psychology doctoral training course. * To continue to develop expertise in the area of professional pre- and post-graduate training and clinical supervision. * To provide specialist advice, consultation and training and (where agreed locally) clinical supervision to other members of the team for their provision of psychologically based interventions to help improve clients’ functioning. |
| Research, audit and service evaluation  * To take the psychology lead, as a senior clinician, in planning and implementing systems for the evaluation, monitoring and development of the service, through the deployment of professional skills in research, service evaluation and audit and ensuring incorporation of psychological frameworks for understanding and provision of high quality care. * To utilise theory, evidence-based literature and research to support evidence-based practice in individual work and work with other team members, families and staff teams. * To undertake appropriate research and provide research advice to other staff undertaking research within the service/sector. * To initiate and implement project management, including complex audit and service evaluation, with colleagues within and across the service to help develop and improve services to people with severe and enduring mental health problems and their families. |
| **Continuing Professional development**   * Maintain and develop up to date knowledge of psychosis research and evidence based practice for assessment and treatment development, and expertise in applications of this knowledge, including neuropsychological assessment and structured clinical risk assessment. * Receive and make appropriate use of clinical supervision with a peer in accordance with professional guidelines. * Receive and make good use of monthly clinical and professional supervision, in the form of formal contact with a senior clinical psychologist and where appropriate other qualified psychologists, in common with all clinical psychologists and in accordance with BPS & HCPC good practice guidelines, to help maintain skills, manage job stress and monitor quality of service provision. |
| General  * To ensure the development, maintenance and dissemination of the highest professional standards of practice, through active participation in internal and external CPD training and development programmes in line with British Psychological Society (BPS) and Health and Care Professions Council (HCPC) guidelines and NHS Fife and Fife Psychology Service policies and guidelines. * To ensure the development and articulation of best practice in psychology within the service area and contribute across the service by exercising 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. * Maintain own CPD and formal records of such in accordance with professional guidelines. * To ensure the highest standards of clinical record keeping including electronic data entry and recording, report writing and the responsible exercise of professional self-governance in accordance with professional codes of practice of the BPS, HCPC, NHS Fife and Fife Psychology Service policies and procedures. * To ensure that all psychologists within the service maintain up to date knowledge of legislation, national and local policies and issues in relation to people with severe and enduring mental health problems. * To contribute with other Consultant Psychologists and Specialty Heads of Service to the development and articulation of best practice in psychology across the Area Psychology Service through regular attendance at Consultants’ meetings and other means. * To contribute to the overall development of the Psychology Service by attending regularly and participating in area service meetings. * To contribute to the development and efficacy of an integrated Adult Mental Health psychology service by attending the AMH Consultant team meetings chaired by the Head of Adult Mental Health. * To comply with policies of NHS Fife and Psychology Service including Health and Safety and the care and management of equipment and materials. |

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| 7a. EQUIPMENT AND MACHINERY |
| Car essential for home visits.  Computer/lap top/PowerPoint projector for database, research, e-mail, Internet, presentations.  Computerised and Audio -visual recording equipment for use in assessment and specialist treatment programmes.  Psychological assessment tests and associated materials.  Expected to have knowledge of manual handling and other equipment within the area. |
| **7b. SYSTEMS** |
| * Maintain confidential Psychology department patient records. * Provide reports in accordance with department guidelines. * Manage of referrals to the specialty, organising priorities of service delivery and maintaining monthly statistical records. * Utilise data systems for audit and analysis of clinical outcomes. * Record personally generated clinical observations, test or research results to be kept in clinical files. * Complete work records e.g. travel claims, clinical contact statistics and discharge database summaries. * Format and populate databases for research and audit purposes. * Use online databases and e-library resources for literature review. |

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| 8. ASSIGNMENT AND REVIEW OF WORK |
| Work is generated from the priorities of the Health and Social Care Partnership, the Directorate and the Psychology service with the post-holder being responsible for prioritising.  As Head of Specialty, the post holder:   * Is responsible for setting the direction of the PIP service activity and priorities, taking account of the wider needs of the relevant services, to best meet the needs of clients. * Is responsible for implementing effective and efficient work practices within the specialty, using the limited resources most appropriately. * Is responsible for ensuring best management of the waiting list, planning, prioritising and scheduling work and generating service developments, referring clients to other agencies and discharging them. * Meets with Head of Adult Mental Health psychology and the Director of the Psychology Service as appropriate to review any issues arising, and attends regularly AMH Consultants meetings and Consultants meetings for the area-wide Psychology Service to contribute to decisions on service issues arising. * The post holder takes part in an annual Personal Development Plan review with the Head of Adult Mental Health psychology and in service strategic planning exercises, taking responsibility for completing and delivering the PIP plan.   As a consultant clinician, in relation to own clinical caseload/patch, the post-holder:   * Works autonomously within professional guidelines and overall frameworks of community and hospital teams, prioritising workload between commitments of service development, clinical work and management. * Receives referrals directly from a variety of sources including Consultant Psychiatrists and other members of the multidisciplinary team, and the wider context e.g. social services and general practice. Provides treatment plans, implements them and is responsible for discharging patients. * Autonomously anticipates problems and / or needs within both the psychology service and own specialty, and take steps to resolve them, proposing changes to working practices or procedures for own area of work and which impact beyond own area of activity within post holder’s specialist service area. * Works collaboratively with colleagues from Psychology and other disciplines within the learning disability and adult mental health specialties to develop the services across Fife. |

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| **9. DECISIONS AND JUDGEMENTS** |
| Post-holder works autonomously and is responsible for decisions related to service provision, prioritising  and reassigning the psychology team workload in response to changing service needs.   * Is responsible for prioritising and managing own workload. * Makes autonomous decisions regarding own working with clients - including   + types of assessment and neuropsychological tests used,   + risk assessment and management,   + formulation of problems,   + contributing to diagnoses where appropriate,   + planning and delivering treatment options,   + evaluating treatment,   + referring to other agencies,   + discharging clients appropriately,   + when and how to work with other agencies,   + writing reports and being referred to by courts for expert opinions regarding clients. * Makes decisions about initiating, developing and running research projects and audits within the department. * Designs specialist training and information packages appropriate to client group, deciding how, what and when supervision and consultation is required. * Makes decisions about psychology staff caseloads, and balance of work duties. * Makes joint decisions about short listing, interviewing and appointing clinical psychologists and assistant psychologists with the Head of Adult Mental Health psychology/Director of Psychology. * Makes decisions about methods of psychology service provision for people with problems and disabilities associated with psychosis, bipolar and severe and enduring mental health problems, based on known best practice, in consultation with colleagues and others as appropriate. * Makes decisions regarding whether confidentiality should be breached, e.g. in issues of incapacity and high risk to self or others. This would be done in accordance with good practice guidelines and the use of appropriate supervision. |

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| 10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB |
| 1. Ensuring reasonably equitable effective service when staff resources are severely constrained – making time/service -rationing decisions to ensure best use of limited resource. 2. Working alone in very emotionally demanding situations, sometimes in clients’ homes, being faced with significant levels of distress and anger, apparently insoluble difficulties with an expectation to solve them. 3. Tackling barriers to intervention such as lack of insight and communication or sensory impairment. 4. Being exposed to the threat of physical or verbal abuse.   5. Attempting to provide excellent clinical service in less than adequate conditions e.g. therapy settings. |

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| **11. COMMUNICATIONS AND RELATIONSHIPS** |
| Communication is a key area.  Post-holder requires:  To communicate clearly, effectively and empathically with clients, their carers, families or involved professionals about their problem, diagnosis, treatment and progress. This involves communicating the complex needs of service users to the client and /or their family members and carers, and staff involved in their care. Difficulties may arise due to communication impairment, the complexity and sensitivity of assessment results, or emotional distress.  To engage and develop therapeutic relationships with clients with a range of levels of ability or disability, and to develop effective and helpful working relationships with community team members and other professionals.  To maintain team relationships over time and work through possible conflicts and confrontations in a productive manner.  To communicate effectively with referrers, agencies and services involved with clients or with planning services and to initiate contact with those agencies as appropriate.  To communicate clearly and effectively verbally and in writing, highly technical, complex, clinically sensitive information to clients, carers and professionals, acknowledging barriers to understanding, and adjusting communications accordingly. Content of communication can include highly sensitive material such as diagnostic information, details of family abuse or offending behaviours.  Ability to communicate effectively in both meetings and in written proposals to contribute local knowledge and professional understanding of the needs and resources of the locality in order to plan and develop services.  Consultancy work is undertaken with clinical colleagues outside the profession such as teaching behavioural principles to inform patient management strategies. The development of good teaching skills is required.  There is a requirement to promote the needs of the service at a local, regional level and within the Psychology Service.  Relationships   * To build and maintain positive therapeutic relationships with a wide range of clients, families and carers. * To build effective and supportive relationships as Lead of specialty with all staff within the psychology team and area service. * Good working relationships are required with primary, secondary and tertiary services, particularly working with a wide multidisciplinary range of staff in hospital and community settings, such as psychiatrists, nurses, OTs, mental health teams, service managers, planners, and with other staff of other statutory agencies including social work and voluntary agencies. * To maintain effective contact and good relationships with various formal regional or national groups concerned with relevant services and in multi-agency strategy and planning groups. |

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| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** |
| **Physical**  Keyboard skills.  Sitting in one position for long periods when seeing patients.  Intense concentration required for clinical sessions and meetings.  Carrying bulky test materials to various clinic venues across Fife.  Travelling across Fife during working day.  **Mental effort**  Sustaining concentration for long periods of time on information from a number of sources, such as clinical sessions with clients, clinical meetings, service planning meetings, telephone consultation with staff and other professionals.  The use of good time management skills, and the ability to deal with frequent telephone calls is essential. Workload can be unpredictable e.g. attendance at meetings is often required at short notice and at times, clients or staff may need to be seen urgently.  **Emotional**  Often required to deal with highly distressing and chronic conditions, where progress may be very slow and require long term commitment.  Dealing with clients and families distressed by the effects of severe and enduring mental illness.  Often required to help other professionals, care staff and relatives deal with highly distressing situations.  Exposed to unpleasant conditions, such as verbal aggression, risk of physical aggression and occasionally exposed to some hazards, for example, clients who have challenging behaviours  Risks associated with lone home visits e.g. verbal and physical aggression and exposure to hazards e.g. passive smoking. |

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| 13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB |
| Qualifications  A good honours degree in Psychology with eligibility for graduate basis registration with British Psychological Society.  A post graduate Doctorate in Clinical |Psychology or equivalent, as accredited by the British Psychological Society and HCPC, including specifically models of psychopathology, clinical psychometrics and neuropsychology, two or more distinct psychological therapies and lifespan developmental psychology.  To have undertaken significant post-qualification CPD / advanced training relevant to the specialty.  To be registered with the HCPC as a practitioner psychologist. Knowledge and experience Assessed substantial experience of working as a qualified clinical psychologist or equivalent, including significant post qualification experience within the designated speciality where the post is located.  Experience of service development both within psychology and in partnership with other agencies.  Experience of exercising full clinical responsibility for clients’ psychological care and treatment, both as a professionally qualified care co-ordinator and also within the context of a multi – disciplinary care plan.  Experience of teaching, training and professional and clinical supervision.  Ability to work collaboratively with a variety of colleagues across a range of health specialties and settings.  Ability to manage and motivate staff.  Experience of research governance and delivering research outcomes.  Ability to use IT and develop further skills as required. |

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| **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:  Director of Psychology Signature: | Date:  Date: |