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#### JOB DESCRIPTION

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| JOB IDENTIFICATION |
| Job Title: Responsible to: Department: Directorate: Operating Division: Job Reference:No of Job Holders:Last Update:  | Band 5 Occupational TherapistTeam Lead Occupational Therapist Occupational Therapy Mental HealthMental Health and Learning Disability Services Health and Social Care Partnership – Complex and Critical Care1June 2021 |

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| 2. JOB PURPOSE |
| To provide a high quality Occupational Therapy service within a community and in-patient settings as determined by greatest clinical need. This encompasses assessment, treatment and management of a specialist case load of individuals with mental health needs.To be an active member of the Occupational Therapy Mental Health Team, providing specialist Occupational Therapy input and articulating the Occupational Therapy process and role to the within the wider multidisciplinary team. To participate in the day to day operational running of the OT Mental Health Service.To provide Occupational Therapy interventions on a 1:1 or group basis, ensuring a degree of flexibility to enhance participation and engagement.To work in an integrated multidisciplinary setting with both statutory and voluntary agencies and be responsible for the ongoing assessment, planning, implementation and evaluation of the care of patients with a range of mental health needs, including providing generic mental health assessments, risk assessment, and psychosocial interventions.To provide both formal and informal supervision and mentoring to less experienced or more junior staff within the Mental Health Occupational Therapy Department and wider MDT where identified, as well as to students to assist with their professional development.To contribute to Mental Health Occupational Therapy departmental activities, such as development sessions, audits etc. |

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| **3. DIMENSIONS** |
| The post-holder will provide direct, Occupational Therapy assessment and intervention to individuals referred to the service.The post-holder will use evidence based, client centred approaches, assessments and treatment and communicate with a wide range of professionals and agencies to provide co-ordinated measurable treatment plans with clearly defined treatment aims within the context of meaningful and achieveable wellbeing and recovery goals. The post holder will accurately establish and record needs and communicate with a wide range of professionals and agencies to provide co-ordinated measurable treatment plans with clearly defined goals. The post holder will delegate and oversee intervention from junior Occupational Therapy staff and staff from other agencies.  |
| **4. ORGANISATIONAL POSITION** AHP Clinical Service MangerLead Occupational Therapist Mental HealthBand 7 Occupational Therapy Team LeadBand 6 Occupational Therapist**Band 5 Occupational Therapist**Band 4 Assistant PractitionersBand 3 Clinical Support Workers |

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| 5. ROLE OF DEPARTMENT |
| The Mental Health Directorate provides a comprehensive inpatient, outpatient, day patient and community mental health service to the people of Fife. |

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| 6. KEY RESULT AREAS |
| * Manage a caseload of clients with complex needs identified as those who would benefit from Occupational Therapy treatment.
* With guidance from Band 6 Occupational Therapist, make decisions on case load in relation to prioritisation and management of referrals, and coordinating and making clinical and professional decisions relating to intervention provided.
* Assess the occupational needs of individual clients. Plan, implement and review client centred, graded individual and/or group treatment to achieve measurable progress.
* Work collaboratively with patients to identify goals as part of their overall care.
* Carry out a wide range of Occupational Therapy assessments and mental and physical assessments with individuals and produce reports and treatment plans as a result.
* Be able to communicate assessment findings and results to the wider multi-disciplinary team.
* Report and participate in Mental Health Tribunal system as required.
* Assist in the supervision and appropriate induction of junior Occupational Therapy staff and new staff as required
* Promote and maintain defined standards of care, and documentation in line with the Royal College of Occupational Therapy (RCOT) professional practice standards, and Code of Ethics and Professional Conduct, and the Health and Care Professionals Council (HCPC) standards, relevant legislation and NHS Fife policies, procedures and guidelines.
* Establish safe and therapeutic Occupational Therapist/patient relationships by planning

programmes of complex and diverse therapeutic intervention, in conjunction with multi-disciplinary team, that meet the needs of the individual patient, including physical health promotion, psychological interventions, self-care, every day living skills and meaningful occupation. * Independently and continuously monitor, evaluate and modify treatment and approach in order to measure progress and ensure effectiveness of treatment.
* Display excellent interpersonal skills and apply these to develop therapeutic relationships with clients with complex needs.
* Assist with monitoring physical health issues, physical health screening, including encouraging attendance at appointments.
* Adopt a recovery approach which encompasses the value of hope, agency, opportunity and inclusion.
* Have an awareness of psychiatric medications and the impact these can have on functioning and processing.
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| * Provide and receive formal professional clinical supervision within the established Occupational Therapy Clinical Supervision structure.
* Undertake operational management from CMHT Leader
* Provide and accept informal supervision and support to and from colleagues in establishing and maintaining good and effective working relationships from within the CMHT and Mental Health Occupational Therapy Department
* Be responsible for own professional development and awareness of the evidence base in the field of mental health and Occupational Therapy. Participate in continuing education and health promotion programmes and training.
* After undertaking relevant training, become a Practice Placement Educator for Occupational Therapy students, and assist in the training of students from a variety of Universities and assist colleagues to develop their experience and expertise in this area.
* Be involved in the education of nursing and medical students whilst on placement, by giving tutorials on Occupational Therapy and relevant topics within the placement setting, allowing them to attend and participate in therapeutic sessions with clients to extend their knowledge of other professions and to develop their understanding of team working within the NHS.
* Initiate and contribute to the development of clinical audit programmes.
* Report to the Band 6 Occupational Therapist all relevant matters relating to patient care or any significant issues.
* Take all reasonable measures to ensure the safety of patients and colleagues by completing risk assessments and reporting any factors which may cause undue risk.
* Ensure clear and concise reports and accurate records are maintained and provide accurate and timely reports and discharge summaries to referring agencies.
* Take account of patient’s cultural and religious diversity and ensure the care provided is sensitive to their individual needs.
* Be knowledgeable of legislation relevant to the service e.g. *Mental Health (Care and Treatment) (Scotland) Act 2003, Adults with Incapacity (Scotland) Act 2000.*
* To assist the Team Leader in the completion of staff development and Personal Development Plans.
* To be familiar with and apply all NHS Fife’s Personnel Policies in a fair and consistent manner
* Responsible for participating, developing and leading working groups to develop procedures, systems and practice
* Carry out tasks designated by OT Team Lead and Senior Occupational Therapists as required.
* Actively participate in the review and development of the OT service, taking an active role in departmental audits and developing plans to review practise and implement any changes.
* Expected to give formal and informal presentations to a wide range of groups, undertake poster presentations at conference and co-ordinate training events.
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| 7a. EQUIPMENT AND MACHINERY |
| The post-holder is expected to be competent in the use of clinical and administrative equipment relevant to the post, whilst in the community, or individuals homes. Examples of which include:* Computer and relevant software applications including keyboard and basic IT skills.
* Creating marketing materials, and regular use of email and internet research
* Competency in using online meeting/appointment systems.
* Mobile phone – smart phone
* Dictation
* The post-holder will normally be expected to drive a car in order to undertake their duties.
* Activities of daily living equipment
* Excerise equipment
* Gardening tools and implements
* Dressing, feeding, toileting, kitchen, transfer, bathing and mobility aids

The post holder will be able to use a wide range of equipment during therapeutic interventions, it should be noted that some of these will be carried out within the patients home and staff will therefore be using a wide range of equipment as expected to be found in these areas.  |

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| **7b. SYSTEMS** |
| The post-holder will be familiar and knowledgeable with the application of systems, policies and procedures necessary for the effective delivery of care, examples of which include:* Personally generated notes and the maintenance of patients records
* Legal frameworks in relation to mental health
* Risk assessment tools
* Standardised and non-standardised assessments – Occupational Therapy specific and generic
* Referral and discharge procedures
* Clinical activity monitoring and statistical returns
* Manual and computerised Patient Information Management Systems – Trakcare and Morse
* The storage, transport and administration of medicines in the community in line with the SSUMMP only when necessary and within clinician level of competency
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| * Completion of electronic time sheet, annual leave and absence records
* DATIX reporting
* Learn-pro, TURAs – TURAs Learn
* Recruitment – Jobtrain
* Audit
* Induction
* Health & Safety
* Clinical Supervision
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| 8. ASSIGNMENT AND REVIEW OF WORK |
| * Caseload allocation takes place at relevant allocation and relevant meetings
* The post holder engages in clinical discussion with referrers, advising of the need for specialist referral to Occupational Therapy. Specialised advice is provided which contributes to the overall identification of need and subsequent management of the client.
* Referrals are also generated by members of the MDT. The postholder has autonomy to identify which patients are appropriate for Occupational Therapy.
* The post-holder is accountable to the Team Lead and Band 6 Occupational Therapist for formal performance appraisal through Turas.
* The post holder prioritises referrals and manages own waiting list as required.
* The post-holder contributes to multi-disciplinary assessments as required – Psychological formulations, Nursing assessments, Physiotherapy, Music Therapy and Horticultural Therapy.
* Liases with appropriate agencies and services, working jointly where appropriate and referring individuals on once treatment is completed.
* The post-holder receives caseload supervision of their allocated case load from the Band 6 Occupational Therapist, and both Professional and Operational Management from the OT Team Lead.
* Performance is supervised and monitored by Senior Occupational Therapy staff on an ongoing basis, feeding back to OT Team Lead as required.
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| **9. DECISIONS AND JUDGEMENTS** |
| * Make professional decisions and judgements as to frequency and length of visits required, which can rapidly change with the challenging nature of the patient group and associated risk to themselves and others.
* Gathering and sharing information to inform clinical decision making.
* Required to report and provide verbal and written assessments of individuals seen.
* Prioritise own workload, including the needs of individuals and use objective judgement to to make clinical decisions.
* Make sound professional judgements and take appropriate action in emergency/crisisis situations, in consultation with Band 6 Occupational Therapist and MDT.
* Assess clinical and operational risk on a daily basis. This includes determining clinical risk in foreseen and unforeseen circumstances, especially within community settings, using appropriate course of action for self and junior staff.
* Be fully aware of the issues relating to professional and clinical accountability, legal issues,

role limitations and boundaries whilst balancing duty of care to public safety issues. * Responsible for allocation of work to Occupational Therapy Assistants in response to the clinical complexity of need and level of risk, ensuring work is appropriate and relevant to grade.
* Have responsibility for own performance management, accountable for own actions and reporting back to the OT Team Lead and Band 6 Occupational Therapist.
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| 10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB |
| * Managing the emotional, mental and physical demands of a clinical caseload with varied and complex individual needs, whilst at the same time taking care to safeguard own health and safety as well as that of colleagues and clients
* Managing individuals needs with limited resources.
* To assess and identify with individuals early indications of relapse/distress/challenging behaviour and use de-escalation techniques effectively to prevent an escalation in incidents, such as violence, towards themselves, staff or others and to communicate such indications to other agencies involved in the patients care.
* Lone working and/or working with other professional groups.
* Working within the limitations of compulsory treatment orders in the community whereby the post holder may have to administer treatment to patients who show anger, paranoia and have little insight into their illness. Maintaining a therapeutic relationship and rapport is extremely difficult and challenging aspect of this post.
* Balancing issues of role conflict i.e. managing individual patient care ensuring duty of care aspects at times, acting as advocate for individuals whilst being aware of ‘risk’ and public safety issues along with maintaining confidentiality.
* Facilitating positive risk taking.
* Balancing the demands of Occupational Therapy role and commitments alongside role within the MDT
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| **11. COMMUNICATIONS AND RELATIONSHIPS** |
| The post-holder has an important role in maintaining effective communication (through email, Microsoft Teams, Near Me, telephone and letter) and good working relationships with a wide range of personnel and agencies, examples of which include:**Internal*** In-patients, service user groups and advocates
* Clinical colleagues (Nursing, Psychology, Psychiatrists, Pharmacists, Music Therapists, Horticultural Therapists, Physiotherapy, Speech and Language)
* Social Workers
* Health and Social Care Partnership colleagues

External* Individuals relatives and carers
* Voluntary sector agencies
* Police and criminal justice system
* Clinical services from other health board areas
* Other healthcare providers such as General Practitioners and care homes

**Patients/Clinical*** Record all matters related to individual patient care in a formal record.
* Provide and receive information regarding assessment, diagnosis and treatment, some of which may be of a sensitive or distressing nature.
* Motivate patients with a range of difficulties in daily living to participate in the assessment and treatment process.
* Using tact and diplomacy in communication to avoid confrontation and increase co-operation with patients, some of whom may be in a hostile, aggressive state.
* Educate and negotiate with patients to clarify with them their occupational performance needs.
* Give information, both verbal and written, about agencies (voluntary or statutory) giving advice, voluntary/employment/social support or specialist assistance.
* Deal with verbal complaints.
* Post-holder should be able to maintain communication with individuals via face to face contact, telephone, letter and technological means as part of the therapeutic relationship.
* The post-holder will be required to attend regular clinical meetings, case reviews and organisational meetings and act as care coordinator for the Care Programme Approach.

**Relatives/Carers – Clinical*** Provide and receive information regarding complex and sensitive issues.
* Educate and negotiate with carers in relation to their role in assisting patient manage their mental health issues while respecting the confidentiality of the patient.
* Give information about support agencies and benefits.
* Deal with verbal complaints.
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| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** |
| Physical* Regularly using a computer keyboard and smart phone in the course of working day.
* Driving a car daily, in all weather conditions, in non-emergency situations for home visits, patient transportation and moving between designated sites.
* Regularly coping with the varying demand and conditions of community locations e.g. stairs, farm lanes, etc.
* Variable requirement for moving and handling of patients depending on caseload composition – ranging from minor physical assistance and control, to use of hoists and other mobility equipment.
* Be able to undertake a wide range of activities which may require actions such as crouching, kneeling, twisting, bending or stretching in the course of undertaking e.g., activity sessions.
* Safe and Therapeutic Skills - Minimum training required to Level 3: management of violence/aggression, de-escalation, breakaway techniques and escorting aggressive clients.)
* Operate and transporte small equipment and tools; e.g., in domestic patient rehabilitation/ assessment, creative activities and workshop environments.

**Emotional*** Discuss sensitive issues such as abuse, relationship problems, bereavement, etc.
* Frequent exposure to distressing and/or emotional circumstances due to the nature of the clinical caseload.
* Working daily with individuals who are distressed, depressed, anxious, challenging, thought disordered or memory impaired and who may display verbally or physically aggressive behaviour.
* Support colleagues by providing emotional stability when staff members are in a vulnerable state.
* The post holder at times requires to communicate highly sensitive and distressing information to individuals, carers and others regarding e.g. illness symptoms, prognosis, recall to hospital. Patients and carers often express high emotion, making this aspect more demanding.
* Imparting unwelcome news about the level of treatment that can be offered, the likelihood of achieving a good level of independence in skills and/or the time it may take to achieve or accomplish identified goals.
* Working with individuals who may frequently self harm or attempt suicide.

Mental* Regularly compose and write/dictate reports.
* Concentration and specialised observation skills required when assessing and treating patients.
* High level of concentration and alertness when delivering group and individual sessions on a daily basis
* Be alert to subtle changes within individuals condition.
* Regular use of clinical and analytical skills to complete mental health and risk assessments.
* Coping with frequent interruptions e.g. telephones, unexpected distractions and visitors in individuals homes which may result in the need to terminate, suspend or reschedule therapeutic sessions.
* Verbal aggression, physical threats and/or physical aggression from individuals, partners, carers, using acquired skills to prevent situations from becoming volatile, and where this occurs on a regular basis.
* Ability to manage conflict in relation to individual care and within professional relationships.
* Be able to make quick judgements and decisions in the process of treatment within a variety of different environments.
* Constant awareness of risk and ability to constantly risk assess.
* Dealing regularly with patients who have complex needs, dual diagnosis and with a recurring history of contact with services who have a varying ability to engage in the treatment process.
* Balancing clinical vs. non-clinical priorities

**Environmental*** At times entering situations where potential risk is not known.
* Often undertaking work in disadvantaged and problematic communities.
* Regular exposure to unpleasant/hazardous domestic settings e.g. cigarette smoke, unhygienic conditions, illicit drug and alcohol misuse.
* Daily requirement to travel in rural and urban areas in all weather conditions.
* Called upon to visit people in a wide variety of home settings.

Exposure to a wide variety of unpleasant situations; e.g., inclement weather, hostile home* Providing intervention in community settings. This creates environmental demands on the Occupational Therapist and the client which are outwith their control, potentially affecting clients’ response; e.g., increased crowds, weather, unpredictable stressors for clients.
* Frequent exposure to inclement weather when using public transport with clients during treatment sessions.
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| 13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB |
| * Degree in Occupational Therapy
* Membership with RCOT.
* Professional Registration with the Health and Care Professions Council
* Fieldwork practice educators experience and/or accreditation
* Supervision training and/or experience
* Leadership training or experience
* Having achieved clinical competencies within field and evidenced in CPD
* Experience in the field of mental health both in community and ward settings And ability to demonstrate a high level of understanding of Occupational Therapy within the specific clinical area.
* Awareness of local resources available to individuals in Fife.
* Skills and competencies usually associated with experience in working with individuals with severe and enduring mental illness and sometimes alcohol/drug issues
* Good written and verbal communication skills.
* Knowledge of relevant legislation e.g. Mental Health Act, Adult Support and Protection.
* Professional and personal maturity with good interpersonal skills.
* The ability to adapt to working in and delivering care in a variety of different settings and environments.
* Good time management and personal organisational skills.
* The ability to work effectively within a multi-disciplinary and multi-agency environment.
* To utilise clinical supervision.
* To be able to identify one’s own development needs and set personal development objectives in collaboration with their appraiser.
* A willingness to undertake further training as required for the post.
* Ability to supervise and manage staff, ability to delegate as well as prioritise tasks.
* Management of Violence training level 3 or equivalent
* Demonstrates an ability to reflect on ethical issues and offer guidance to junior staff.
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| **14. JOB DESCRIPTION AGREEMENT** |
| Job Holder’s Signature:Line Managers Signature: | Date:Date |

**PERSON SPECIFICATION**

**Job Title: Band 5 Older Adult OT Mental Health Team**

**Occupational Therapist**

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|  | **ESSENTIAL** | **DESIRABLE** | **HOW TESTED** |
| **EXPERIENCE** | Clinical experience of relevant client group | Experience of multidisciplinary workingAudit experience | ApplicationForm/ Portfolio/interview |
| **TRAINING AND QUALIFICATIONS** | Degree in Occupational Therapy | Post qualification training relevant to clinical field | Application Form |
| **KNOWLEDGE AND SKILLS** | Able to demonstrate a sound understanding of occupational therapy processKnowledge of relevant legislationKnowledge of OT models of practice.Understanding of OT outcome measures relevant to clinical area.Knowledge of relevant legislation and current practice. | Presentation and training skills.Knowledge of the principles of clinical governance and its application. | Interview/ Application Form/ PortfolioApplication FormInterview/application form |
| **OTHER** | **ESSENTIAL** | **DESIRABLE** |  |
|  | Registration with HPC.Commitment to client centred, non-discriminatory practice.Car Driver | Membership of Professional body.Membership of specialist interest group. | Application formInterviewApplication form |

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