**NHS FORTH VALLEY**

**JOB DESCRIPTION**

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| 1. JOB IDENTIFICATION |
| Job Title: Clinical / Counselling Psychologist, Forth Valley Responsible to: Manager of Adult Psychological Therapies Service NHS Forth Valley  Department: Adult Psychological Therapies Service  Job Reference: **G-FV-AHP-CP-001** |

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| 2. JOB PURPOSE |
| To provide a clinical/counselling psychology service within the highly specialised area of adult mental health to clients referred by GPs and others in Forth Valley.  To provide highly specialist psychological assessment and therapy and offer advice and consultation on clients’ psychological care to other psychologists, other health and social care professionals and to other, non-professional carers.  To provide clinical and professional supervision to assistant psychologists. |
| ORGANISATIONAL POSITION AND ROLE OF DEPARTMENT |
| HEAD OF SERVICE CONSULTANT CLINICAL/COUNSELLING PSYCHOLOGIST  **THIS POST**  ASSISTANT PSYCHOLOGISTS  MSc PSYCHOLOGICAL THERAPISTS  The Adult Psychological Therapies Service provides psychological advice and help for the population of NHS Forth Valley. It provides input at the levels of Health Promotion, Primary, Secondary and Tertiary care. Patients are assessed and treated, training is given and advice tendered to: Learning Disability Teams, Mental Health Teams including Community CMHTs and Rehabilitation, and Primary Health Care Teams. Members of the Service see individual patients and their families within team settings and also within the outpatient psychology bases in Falkirk and Stirling Community Hospitals.  The Service contributes to work with voluntary agencies and members serve on joint groups with the three Local Authorities and with voluntary agencies.  Training is being broadened and Forth Valley contributes to the East and West of Scotland Doctoral Training Courses. Members of the Service contribute to national training also through NHS Education for Scotland initiatives and working groups.  The staff team is made up of Clinical Psychologists, Counselling Psychologists, Clinical Associates in Applied Psychology, Nurse Therapists, Psychological Therapists and Counsellors. |
| DIMENSIONS |
| * To provide a high quality specialist psychological service to clients referred by GPs and others to the Adult Psychological Therapies Service, Forth Valley, across all sectors of care. * To advise members of the team who provide psychologically based care and treatment. * To work autonomously within professional guidelines and exercise responsibility for the systematic governance of psychological practice within the service/team. * To utilise research skills for audit, policy and service development and research. * To be involved in proposing and implementing policy changes within the Adult Psychological Therapies Service. |

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| 5. KEY DUTIES AND RESPONSIBILITIES |
| **Clinical**   * To exercise full autonomous professional responsibility for the assessment, treatment and discharge of clients. * To provide highly specialist psychological assessments of clients referred to the services specified above, based upon the appropriate use, interpretation and integration of highly complex, often emotive, sensitive and contentious 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 and implement specialist care 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. Often there will be various different therapeutic approaches that need to be considered with the ultimate choice being a matter of exercising expert opinion. * To be responsible for implementing a range of psychological interventions for individuals, carers 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 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. * To provide expert psychological advice, guidance and consultation to other professionals contributing directly to clients’ formulation, diagnosis and treatment plan. To use tact and diplomacy as and when advice conflicts with other expert opinion. * To act as care co-ordinator, where appropriate, ensuring the provision of a care package relevant to the client’s needs, co-ordinating the work of others involved with care, arranging client’s care reviews as necessary.   The sections below cover three main components of psychological work common to most qualified posts: assessment, formulation and intervention.  ***Assessment***   * Psychological assessment involves collecting information about a patient’s thoughts, behaviours, emotions, physical symptoms, relationships and lifestyle. * Highly developed empathic skills are necessary, especially with patients who may have difficulty with developing trust (e.g. because of a history of abuse). * Assessment requires sustained concentration to ensure information is accurately understood. The psychologist also needs to attend to a patient’s demeanour and body language. They also need to be aware of their own reactions to the patient as this can give important information about how the person may be feeling and also how they may relate to other people. * At times it will be necessary to intervene during the assessment (e.g. if a person is clearly becoming distressed or disassociated). In addition the psychologist will give active feedback and advice during the session. * The type of information required is always personal and in many cases it is very distressing and emotional (e.g. child abuse, relationship breakdown, post-traumatic stress disorder). * Information gained from third parties (e.g. GPs, paid carers, family members) may conflict with the patient’s own view and a high level of interpersonal / communication skill is needed to manage this conflict effectively. At times patients may be hostile or antagonistic (e.g. in cases of anger management, child abuse, substance abuse or family breakdown). * Neuropsychological assessment requires the ability to manipulate a range of physical objects in conditions where speed and accuracy are important, whilst simultaneously recording a patient’s responses. These physical skills are developed during doctoral training and clinical experience.   ***Formulation***   * Psychological formulation is the process by which a psychologist combines the wide range of information they have obtained during assessment with their psychological knowledge and experience. * Different psychological theories and therapies place different emphasis on different aspects. For instance psychodynamic theories stress the importance of both early relationships and unconscious processes in the development of later psychological difficulties whereas cognitive behavioural theories tend to focus more on how current thoughts, beliefs and attitudes can have an impact on what we do and how we feel. * Formulation is like a jigsaw puzzle, but one where there are several possible solutions, depending on which psychological theory or theories you use. There are many possible answers and expert opinion will often differ on which is the best one to choose. * The choice of formulation and subsequent intervention is a judgment requiring many competing factors to be considered, including knowledge of the patient, awareness of our own strengths and weaknesses and practical considerations of time available and patient preference.   ***Intervention***   * There is a wide range of psychological interventions (e.g. cognitive behavioural therapy). * Within each broad treatment there are an even larger range of specific techniques. For instance cognitive behavioural treatment can involve the use of anxiety management techniques (including breathing strategies), activity scheduling, thought diaries and behavioural experiments. * Psychologists exercise autonomous clinical judgement in choosing which types of intervention and techniques to use. These choices often have to be reviewed on a regular basis, with adjustments made according to how patients progress. * Most of the skills used in assessment and formulation are used during the intervention stage. Motivational and persuasive skills become particularly important during intervention, especially for patients with depression or chronic fatigue syndrome.   **Teaching, Training, And Supervision**   * To provide clinical and professional supervision to assistant psychologists. * To provide advice, consultation and training to staff working with the client group across a range of agencies and settings, where appropriate. * To develop skills in the area of professional post-graduate teaching, training and supervision and to provide supervision to other multi-disciplinary staff’s psychological work, as appropriate. * To receive regular clinical professional supervision from a senior psychologist and, where appropriate, other senior professional colleagues.   **Management, Recruitment, Policy And Service Development**   * To contribute to the development, evaluation and monitoring of the team’s operational policies and services, through the deployment of professional skills in research, service evaluation and audit. * To advise both service and professional management on those aspects of the service and wider organisation where psychological organisational matters need addressing (e.g. stress at work policy). * To be involved, when required in short-listing and interviewing assistant psychologists. * To plan and organise a broad range of complex activities including direct patient care, innovative treatment programmes, teaching, training and consultancy.   **Research, Audit and Service Evaluation**   * To review, on an ongoing basis, the evidence base and underlying psychological theories pertaining to a range of relevant psychological problems in order to utilise the most effective approaches. * To utilise theory, evidence-based literature and research to support evidence-based practice in individual work and work with other team members. * To undertake appropriate research and provide research advice to other staff undertaking research. To seek publication and be involved in other methods of dissemination of relevant research findings. * To undertake project management, including complex audits and service evaluation, with colleagues within the service to help develop service provision. * To use and where appropriate develop validated psychometric measures to assess the outcome of clinical work. * To implement complex audit and service evaluation, with colleagues and across the service to facilitate the development and improvement of services.   General     * To contribute to the development and maintenance of the highest professional standards of practice, through active participation in internal and external Continuing Professional Development training and development programmes, in consultation with the post-holder’s professional and service manager(s). * 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. * To maintain up to date knowledge of legislation, national and local policies and issues in relation to both the specific client group and mental health. |
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| 6. SYSTEMS AND EQUIPMENT |
| * Maintains a high level of specialist expertise in the use of psychological tests and assessment methods, which require doctoral training, and incorporates developments in these as they are introduced in clinical practice. * Has a working knowledge of computer-based technology including patient information management systems, word processing, spreadsheets, database and statistics applications, e-mail and Internet. * Undertakes computer analysis of audit and research results (including information compiled by self and others) using statistical packages taught during undergraduate and doctoral degrees. * Conforms to the Service’s systems of information management for patient records, activity data, and mileage and expenses information. * Maintains 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 British Psychological Society, HCPC and NHS FV policies and procedures. |

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| 7. ASSIGNMENT AND REVIEW OF WORK |
| * Autonomous responsibility for caseload management, patient assessment, intervention and discharge. * In common with all psychologists responsible for receiving clinical supervision in accordance with good practice guidelines. * Annual appraisal and ongoing professional advice provided by senior psychologist * To assign and review clinical work of Assistant Psychologists. |

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| 8. COMMUNICATIONS AND WORKING RELATIONSHIPS |
| * Liaises with GPs and consultants in relevant specialities (e.g. psychiatry and neurology) offering expert psychological advice. * Legal work and court attendance as necessary, as expert witness. * Working with staff from other disciplines in the planning and implementation of psychological programmes. * Regular provision of highly specialist, often sensitive, contentious and emotive written psychological reports on patients to GPs and other referrers. * Communicating with patients who are suffering from psychological problems such as anxiety, depression, anger and the consequences of childhood sexual abuse on a both physical (e.g. cognitive impairment, lack of concentration) and psychological causes (e.g. unwillingness to hear painful or personally challenging information). * The post holder communicates psychological opinion to GPs on a regular basis verbally or by letter. |
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| **9A. PHYSICAL DEMANDS OF THE JOB** |
| * Sitting in a constrained position for extended periods of time daily (typically 60 minutes) during interviews while actively listening. This occurs on a regular basis (typically 4 to 6 times a day). * Neuropsychological assessment requires the ability to manipulate a range of physical objects in conditions where a high degree of speed and accuracy are important, whilst simultaneously recording a client’s / patient’s responses. These physical skills are developed during doctoral training and clinical experience. * The only physical effort required is carrying heavy case notes to and from clinics in health centres. |
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| 9B. MENTAL/EMOTIONAL DEMANDS OF THE JOB |
| Several times a day, the post holder is expected to concentrate intensely for periods of typically 60 minutes, in a highly emotionally charged atmosphere, with clients who are often extremely distressed and displaying emotions such as depression, anxiety and anger.  * At times, particularly when working with people with couples with relationship difficulties or individual with anger problems there is exposure to verbal aggression. Physical aggression is only rarely encountered. * To deal with frequent, daily exposure to highly distressing and emotional circumstances, for example childhood sexual abuse, current violence or abuse, suicidal thoughts, recent trauma (e.g. road traffic accidents, combat), which arise from the demanding and challenging nature of the work with this population. |
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| 10. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB |
| The post holder requires to have:-   * First academic degree at Honours level in Psychology * Doctorate or equivalent in Clinical Psychology or Counselling Psychology, which includes supervised clinical practice and advanced research training as a requirement. * HCPC Registration as an Applied Psychologist. * In order to remain eligible to practice the post holder must complete 40 hours of continuing professional development each year. Elements include short courses and continuing peer review. |

# PERSON SPECIFICATION

**Job title:** - **CLINICAL/COUNSELLING PSYCHOLOGIST**

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|  | ESSENTIAL | | DESIRABLE |
| **TRAINING & QUALIFICATIONS** | Undergraduate degree in Psychology with GBR.  Postgraduate doctorate or equivalent in Clinical or Counselling Psychology.  Supervision training.  Registration with the HCPC as a Practitioner Psychologist. | |  |
| EXPERIENCE | | Experience of working with a wide variety of client groups, across the whole life course and presenting with the full range of clinical severity across the full range of care settings including outpatient, community, primary care, in-patient and residential care settings. Also maintaining a high degree of professionalism in the face of highly emotive and distressing problems, verbal abuse and the threat of physical abuse.  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 multidisciplinary care plan.  Experience of multidisciplinary working. | Experience of assessing and treating clients across the full range of care settings.  Experience of the application of psychology in different cultural contexts. |
| **KNOWLEDGE AND SKILLS** | Skills in the use of complex methods of psychological assessment, intervention and management frequently requiring sustained and intense concentration.  Well developed skills in the ability to communicate effectively, orally and in writing, highly technical, and clinically sensitive information to clients, their families, carers and other professional colleagues both within and outside the NHS.    Skills in providing consultation to other professional and non-professional groups.  Doctoral level knowledge of research design and methodology, including complex multivariate data analysis as practised within the field of clinical psychology.  Knowledge of legislation in relation to the client group and mental health.  Evidence of continuing professional development as recommended by the BPS/HCPC | | Well-developed knowledge of the theory and practice of specialised psychological therapies in specific difficult to treat groups (e.g. personality disorder, dual diagnoses, people with additional disabilities etc).  Knowledge of the theory and practice of highly specialised psychological therapies and assessment methodologies. |
| OTHER | Ability to identify provide and promote appropriate means of support to carers and staff exposed to highly distressing situations and severely challenging behaviours.  Ability to identify, and employ, as appropriate, clinical governance mechanisms for the support and maintenance of clinical practice in the face of regular exposure to highly emotive material and challenging behaviour.  Ability to develop and use complex multi-media materials for presentations in public, professional and academic settings. | | Experience of working within a multicultural framework. |