NHS TAYSIDE – AGENDA FOR CHANGE

JOB DESCRIPTION

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| 1. **JOB IDENTIFICATION**   Sco6 - 708 | Job Title | Highly Specialist Physiotherapist |
| Department(s)/Location | Physiotherapy service, KCHCCC / NWH |
| Number of job holders | 3 |
| 1. **JOB PURPOSE**   The physiotherapy service in Dundee covers Ninewells and Royal Victoria Hospitals, and King Cross Health and Community Care Service  The Physiotherapy service is divided into specialist teams, each team is responsible for service delivery to the patients in their specialist area.   * + Autonomously provide highly specialist physiotherapy assessment, diagnosis, treatment, discharge and onward referral of own patient workload.   + Teach qualified/non-qualified physiotherapy staff, physiotherapy students and other personnel acting as a source of specialist advice as appropriate.   The Pelvic & Obstetric team work across Angus, Ninewells and Kings Cross Health and Community Care Centre | | |
| 1. **ORGANISATIONAL POSITION**   Line Manager  Team Leader Physiotherapy (1.4wte)  Equivalent Grades – 1.2wte    Postholder:    Band 6 qualified staff (1.4wte) | | |
| 1. **SCOPE AND RANGE**   Highly specialized physiotherapist within Pelvic & Obstetric Physiotherapy team providing highly  specialist duties for patients. This includes the treatment of bladder and bowel dysfunction in males and females     1. Perform highly specialist physiotherapeutic assessment of patients with diverse presentations and complex physical and psychological conditions. 2. Provide a diagnosis/clinical impression, develop and deliver an individualized treatment programme. 3. Influence patient management decisions through multi-agency working. 4. Responsible for discharge and/or onward referral of caseload. 5. Hold responsibility for own caseload and a defined area of the service. 6. Supervise, educate and assess the performance of physiotherapy students. 7. Undertake all aspects of clinical duties as an autonomous practitioner. 8. Provide advice and guidance on health promotion, health management and prevention strategies to patients, carers and other healthcare staff. 9. In absence of team leads, Undertake lead role in day to day management of service area including monitoring and evaluating of practice and service delivery, making recommendations to Clinical Lead or Line Manager. 10. After a period of training, participate in the emergency on-call service. | | |
| 1. **MAIN DUTIES/RESPONSIBILITIES**   **Clinical**   1. Professional and legal accountability for all aspects of work as an independent physiotherapy practitioner. 2. Undertake highly specialist clinical assessment of patients including those with diverse or complex presentations/multiple pathologies; interpret and analyse clinical and non-clinical data, use developed clinical reasoning skills and manual assessment techniques. 3. Act independently to formulate, implement, evaluate and deliver an individual physiotherapy treatment plan based upon evidence based practice and treatment options eg manual physiotherapy/respiratory/neurological techniques, patient education, electrotherapy, acupuncture. 4. Use highly specialist clinical skills necessary for the assessment and manual treatment of patients. 5. Maintain patient documentation, records and accurate mandatory statistical information to meet professional and local standards. 6. Evaluate patient progress, reassess and adapt treatment programmes. 7. Identify and manage clinical risk within own patient caseload and monitor others ie non-qualified physiotherapy staff. 8. Provide qualitative and quantitative patient related findings to multi-agency staff to optimize patient care eg discharge planning with consultant, case conferences, facilitating hospital admission. 9. Work independently to provide physiotherapy on-call care to support delivery of the 24 hour service to acutely ill patients eg removal of chest secretions using nasopharyngeal suction. 10. Understand and interpret complex medical information and investigations and alter treatment programme accordingly eg measure and monitor blood pressure, x-ray and blood gases, biochemistry results. 11. Work flexibly to provide assistance when required to cover other areas of physiotherapy service. 12. Advise, teach or instruct as appropriate other health professionals and social agencies, patients, relatives and carers. 13. Undertake visits to patient’s home from hospital with other health/social staff with a view to patient’s discharge home. 14. Provide expert advice on area of specialty to physiotherapy colleagues. 15. Provide training and education to other members of the multi-agency team within specialist area. 16. Undertake any other duties of a similar nature delegated by senior staff or the Service Manager.   **Professional**   1. Maintain and develop competency through Continuing Professional Development, training, maintenance of portfolio and reflective practice. 2. Adhere to the national, professional and local policies and guidelines as directed by HCPC, Chartered Society of Physiotherapy and NHS Tayside. 3. Lead and formulate training and induction programmes. This may include organizing and participating in staff meetings; lead, organize and participate in in-service training programmes with colleagues, healthcare staff and other agencies. 4. Participate in appraisal programme as an appraisee, contributing to Professional Development Planning. 5. Undertake evaluation of own work through the use of outcome measures, evidence-based practice and departmental audit programmes. 6. Write legal reports providing accurate and detailed information regarding patient’s diagnosis, treatment and expected outcome. 7. Demonstrate understanding and participation in all aspects of Clinical Governance. 8. Assess patient understanding of treatment proposals, ensure consent has been given and to have an understanding of the legal framework eg for patients who lack capacity to consent to treatment. 9. Apply increasingly complex skills and knowledge in order to maintain professional competence and fitness to practice as a highly specialized physiotherapist. 10. Participate in research projects being undertaken within service area.   **Managerial**   1. Deputise for more senior staff in periods of absence, if required, taking responsibility for operational management of the team, allocating and organizing the work of less experienced qualified/non-qualified physiotherapy staff. 2. Responsible for organizing, planning and prioritizing own and other staff/students caseload to meet service and patient needs. Readjusting plans as situations change or arise. 3. May be required to represent physiotherapy and/or other health care professions at clinical meetings eg representing other members of the Allied Health Professions. 4. Initiate and participate in ongoing service review, to ensure that organizational and clinical standards are being met, proposing service changes where appropriate. 5. Responsibility for managing informal disciplinary matters and disputes. 6. Keep work area tidy, clean physiotherapy equipment on a daily basis and ensure faulty equipment is reported and withdrawn from use. 7. Deal with complaints and take appropriate level of action ie investigate and report to Line Manager and/or respond to complainant. | | |

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| 1. **COMMUNICATIONS AND RELATIONSHIPS** 2. Communicate effectively with patients, families and carers some of whom may have barriers to understanding (eg sensory impairment, learning difficulties, language barriers and confusion), using verbal/non-verbal, written and presentation skills as required. 3. Convey comprehensive detail of care/physiotherapy treatment in a manner appropriate for every individual, emphasizing and reiterating points to ensure a full understanding. 4. Instruct, reassure, encourage and guide patients, carers and multi-agency staff throughout the treatment programme. This information may be sensitive or contradictory to patient and carer expectations. 5. Develop a rapport with patients and carers to encourage their interest and engagement in an activity therefore maximizing its therapeutic benefits. 6. Communicate assessment and treatment results to the appropriate disciplines verbally and/or in the form of reports and letters eg present professional opinion to consultants influencing decisions which will have a direct effect on patient care. 7. Represent physiotherapy team/service and/or individual patients at multi-agency team meetings eg reporting on patient progress. 8. Explain the role of physiotherapy to a range of professionals and the public; clarify appropriateness of referral, interventions and continuation/discontinuation of treatment. 9. Give presentations to large audiences using audiovisual and multi-media equipment at local and national events on a regular basis. 10. Diffuse potentially hostile and antagonistic situations with staff, patients and carers, using highly developed negotiation and interpersonal skills. |
| 1. **KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB** 2. Honours degree level or equivalent in Physiotherapy 3. Current Health Professions Council registration 4. Previous postgraduate experience in a range of in and outpatient specialties 5. Minimum of eighteen months of these at specialist level evidencing thorough clinical and theoretical knowledge 6. Evidence of Continuing Professional Development and relevant postgraduate training at a Masters level 7. Physiotherapy Clinical Educators course (for supervising students) 8. Evidence of leadership skill development |

**ESSENTIAL ADDITIONAL INFORMATION**

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| 1. **SYSTEMS AND EQUIPMENT** 2. Responsible for safe and competent use and security of equipment, patient appliances, electrotherapy equipment etc. in accordance with departmental guidelines. 3. Assess for and/or prescribe specialist equipment eg manual handling, orthoses, wheelchairs, standing frames, TENS units, walking aids. 4. Understand, apply and teach safe use and care of specialist equipment to patients, carers, other healthcare and multi-agency staff. 5. Have a working knowledge of relevant IT systems and software packages eg Physio tools (exercise programme), electronic Datix. 6. Competent in the use of Problem Orientated Medical Records and contribute to the development of multi-agency care plans. 7. Contribute to Single Shared Assessment process and communicate with appropriate member(s) of the multi-agency team.   **Responsibility for Records Management**  All records created in the course of the business of NHS Tayside are corporate records and are public records under the terms of the Public Records (Scotland) Act 2011. This includes email messages and other electronic records. It is your responsibility to ensure that you keep appropriate records of your work in NHS Tayside and manage those records in keeping with the NHS Tayside Records Management Policy and with any guidance produced by NHS Tayside specific to your employment. |
| 1. **PHYSICAL DEMANDS OF THE JOB**   **Physical demands** – repeated regularly on a daily basis   1. manual handling of patients with or without handling equipment for purposes of rehabilitation and therapeutic positioning. This may include assisting the very immobile, obese, unwilling and challenging patients from lying to sitting, sitting to standing and back in one treatment session (approximately half an hour per patient), repeated passive lifting of lower limb for assessment purposes. 2. use of highly specialist manual physiotherapy techniques including facilitation of movement and manipulation techniques. A specialist level of dexterity, sensory, co-ordination skills and precision are essential in treatment techniques eg suctioning of secretions from chest, manual therapy, acupuncture needling. 3. work with patients whose medical condition may make manual/therapeutic handling challenging eg dementia, confusion, anxiety, pain, limited mobility and patients with alcohol/drug dependency. 4. requirement to maintain static postures for therapeutic purposes ie kneeling and standing for prolonged lengths of time. 5. significant element of walking, climbing stairs, standing and working within confined and awkward spaces. 6. move heavy and awkward objects ie gym equipment. 7. assist patients during treatment eg walking and stair practice. This may include sudden and unpredictable changes in direction or movement, faints and falls.   Occasionally -   1. work with patients who exhibit physically challenging behaviour.   **Mental Demands - r**epeated regularly on a daily basis   1. alert to unexpected changes in patient’s condition, respond using initiative and clinical reasoning skills to adapt patient management. 2. prioritise own and others workload throughout the day. 3. periods of particular concentration especially with new and complex patients who may have communication difficulties. 4. Encourage and persuade patients to take an active role in their rehabilitation to facilitate optimal outcome. 5. interruptions during working day from other staff, patients and carers/relatives eg telephone calls, pagers, direct contact.   Occasionally -   1. deal with abusive and aggressive situations which may involve patients, carers or other staff. 2. respond to group dynamics during exercises classes or group sessions.   **Emotional Demands**  - repeated regularly on a daily basis   1. deal with patients (and their families) who have long term chronic illness, debility and pain, or who may be terminally ill or have life limiting conditions. 2. undertake assessment and treatment which may increase pain levels. 3. convey information of a sensitive and emotive nature when it is contradictory to patient and carer expectations and desires.   Frequently –   1. deal with information which may be of an emotional and distressing nature eg domestic abuse history and   child protection issues information relating to reduced life expectancy.   1. undertake distressing treatment modalities eg naso-pharyngeal suction. 2. deal with death and bereavement.   **Working conditions**  Daily –   * 1. exposed to bodily fluids (urine, faeces, blood, saliva, vomit, sputum) and infections eg MRSA.   2. exposed to body odours, fleas and lice.   Occasionally -   * 1. deal and cope with threat and occurrence of violence, aggression and unpredictable behaviours.   2. work as a lone practitioner eg on-call, domicillary setting. |
| 1. **DECISIONS AND JUDGEMENTS** 2. Complete discretion over own patient caseload, including prioritization and balancing other patient related and professional demands. 3. Work autonomously making clinical decisions within scope of practice. 4. Accept, assess, plan, undertake and complete and/or discontinue physiotherapy interventions as per presenting clinical condition or refer on to other agencies. 5. Strongly influence patient management decisions through multi-agency working. 6. Need to use own initiative and ability to react timeously and appropriately to crises. 7. Participate in single shared assessment and refer to appropriate member of the multi-agency team. |
| 1. **MOST CHALLENGING/DIFFICULT PARTS OF THE JOB** 2. Undertake a physically and mentally demanding job whilst taking care to safeguard own health and safety as well as that of patients and colleagues whilst working with a diverse clinical caseload. 3. Participating in multi-agency teams ensuring a professional opinion is expressed which other, more experienced members of the team may not agree. |
| 1. **JOB DESCRIPTION AGREEMENT**   The job description will need to be signed off using the attached sheet by each postholder to whom the job description applies . |