 

 Integrated Community Care Services

**Job Description**

 Band 6 Inpatient Specialist Physiotherapist

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| **1. Job Identification** |  | **Job Reference** |  |
| Job Title | Specialist Physiotherapist –In-Patient | **No of Job Holders** | 4 |
| Department | Physiotherapy | **West Division** | QMH |
| Directorate | Integrated Community Care | **Reports To** | Designated Team Lead Physiotherapist |
| Job Location | Queen Margaret Hospital,  | **Accountable to** | Integrated Teams Manager |
| Hours | 20 hours | **Days** | Negotiable |
| Prepared By | Adapted by Nicole Whyte from document created by Amanda Wong Operation Lead Physiotherapist -  | **Last Update** | May 2024 |

1. **Purpose of Job**
* To provide a high standard of direct clinical care which encompasses physiotherapy assessment, diagnosis, treatment and management of patients in Fife Health and Social Care Partnership – Integrated Care Services
* To deputise for Team Leader in their absence.
1. **Dimensions**
* Positioned within Queen Margaret Hospital, inpatient wards
* Includes (but not limited to) orthopaedic, neurological and vascular conditions. This includes frailty, falls, stroke, dementia and delirium.
* Location – QMH, ward setting, may be required to work in the Community Health and Wellbeing Hub in Whitefield Assessment and Rehabilitation Centre
* Staff Responsibility – independently supervise the caseload and clinical education of undergraduate and pre-registration students. Independently supervise, manage the workload and appraise junior physiotherapy staff and physiotherapy clinical support workers
1. **Organisational Position**

Clinical Services Manager

Integrated Teams Manager

Team Lead Physiotherapist

**Experienced Specialist Physiotherapist**

Physiotherapist

Physiotherapy Support Worker

1. **Role of Department**

 The Fife Health and Social Care Partnership – Integrated Community Care

 physiotherapy service is based in Queen Margaret Hospital and provides input

 into inpatient and Community Health and Wellbeing Hub locations. It supports

 physiotherapy activity in Acute Services through Band 5 rotation and works

 closely with Intermediate Care Team physiotherapists in West Fife.

 Key Responsibilities of the service are:

* Provision of physiotherapy care to a diverse range of clinical conditions and patient types in a variety of environments rehabilitation settings.
* Service management, planning and development within a defined budget and a multidisciplinary framework.
* Continuous implementation, management and review of a clinical governance strategy.

 **Key Result Areas / Main Duties**

 **Clinical**

* Act independently to assess, analyse and provide an accurate clinical diagnosis using advanced clinical reasoning skills and specialist knowledge for individual patients to determine their need for physiotherapy intervention.
* These patients may have a complex presentation or problems
* Act independently using well developed clinical reasoning skills to appropriately plan, implement, continually re-evaluate and progress treatment to maximise patient rehabilitation and care.
* Independently select appropriate physiotherapy techniques from a broad range of clinical skills.
* Act independently to discharge patients from physiotherapy and/or arrange appropriate follow up care.
* Independently prioritise and monitor own clinical activity.
* Independently evaluate the effectiveness of own treatments.
* Independently communicate with and work as part of the multidisciplinary team involved with a patient at relevant clinics, meetings, ward rounds, case conferences or ad hoc to ensure effective treatment and patient care.
* Maintain patient documentation records and statistical information to reflect the care provided and meet professional and departmental standards.

 **Professional**

* Maintain legally required registration under Health and Care Professions Council (HCPC) requirements.
* Maintain Chartered Society of Physiotherapy Quality Assurance Standards.
* Adhere to Chartered Society of Physiotherapy Code of Professional Values and Behaviour.
* Independently provide evidence of Continuous Professional Development.
* Support the Physiotherapy Service Clinical Governance Strategy by active participation in the evaluation of practice through different routes e.g. research, studies and audit.

 **Managerial**

* Help identify and evaluate opportunities to improve the service to supply the best patient care within the resources available.
* Manage an individual caseload and/or ward of patients effectively and efficiently.
* Access Lead physiotherapy staff to gain support, advice and direction in management of caseload.
* Independently delegate appropriate tasks to junior physiotherapists, clinical support workers and pre-registration students.
* Jointly, but with experience, may independently supervise, monitor workload and appraise junior physiotherapy staff, physiotherapy support workers and pre-registration students.
* Participate in both departmental staff meetings and peer group meetings.
* Deputise for the Team Leader to maintain continuity of service delivery in their absence.

 **Educational**

* Present at and participate in departmental and team in-service training to regularly update own skills and develop practice to provide the most effective treatment possible.
* Produce and present a project annually which meets service objectives and personal development.
* Participate in staff appraisal to promote personal development plan and identify learning needs.
* Further develop current specialist knowledge of evidence-based practice (e.g. critical appraisal, reflective practice) in the clinical areas to ensure the provision of up to date effective and efficient patient care.
* Assist in the teaching of nursing, medical, other multidisciplinary team members and others to promote knowledge of physiotherapy management to enhance patient care.
* Undertake clinical training of pre-registration physiotherapy students.

 **Health & Safety**

* Ensure that practices and procedures are carried out within the regulations of the Health & Safety at Work Act and contribute towards the formulation of safe working practices.
* Take reasonable care of own safety and that of other staff, patients and carers.
* Independently complete the reporting of accidents, incidents or near misses.
* Ensure that all acute physiotherapy equipment is safe to use and be responsible for the education of safe and competent use of all physiotherapy equipment by patients and their carers.
* Undertake risk assessment of own practice and workplace activities.
1. **Equipment and Systems**

**6.1 Equipment**

Aids Prostheses, orthoses, walking aids – gait education.

Gym Apparatus. bicycle, parallel bars, weights pulleys, Arjo walker, tilt table, PPAM aids – muscle strengthening, endurance

training, joint stabilisation, improving range of movement, gait re-education.

Electrical Apparatus TENS, FES

Hot/Cold Therapy Ice, heat packs, reduce swelling and inflammation, pain relief.

Hydrotherapy Using equipment and water to facilitate rehabilitation.

Manual Handling Eqpt Hoists, sliding sheets, transfer boards, handling belts, and other manual handling equipment – to promote Minimal Manual Handling Policy of Division.

**6.2 Systems**

Computers Trakcare, Health and Social Care portal, Patient database/records (morse) Physiotools Audit purpose. Powerpoint presentations. Intranet access for organisational communication. Internet access for Evidence based practice.

Hand written patient Physiotherapy patient record, integrated care pathway,

notes multidisciplinary nursing records and medical notes as appropriate.

Patient information Exercises and information handouts.

 **Assignment and Review of Work**

 **Referral**

* An open referral system exists in the Hub and wards, otherwise a specific referral system is detailed. Out patients are referred by consultants, GPs or other healthcare practitioners.

 **Allocation of Work**

* Workload responsibilities are allocated to the post holder by the team lead physiotherapist. The post-holder is then responsible for decision making around which patients are appropriate for physiotherapy and manages his/her own caseload.
* Non-clinical tasks will be delegated to the post holder by lead physiotherapists e.g. attending working groups or committees, interviewing, inducting staff.

 **Instructions**

* Patients are referred on an “assess and treat” basis.
* Patients are assessed holistically taking into account their physical and psycho-social problems.
* The post holder will formulate appropriate problem lists and treatment plans from these assessments.
* The post holder will be aware that specific instructions from consultants may determine certain treatments.

 **Advice, Guidance, Supervision**

* Team lead physiotherapists /lead clinicians will be available to consult on a daily basis as required and will provide both direct and indirect supervision.
* Non-clinical development is met with an ongoing training programme
* The rehabilitation manager is available daily for additional guidance, personal and/or professional support either face to face or by telephone.
* Induction is provided by the team lead physiotherapist/lead clinician
* Professional lead support

**Decisions and Judgements**

 **Decision Making – Post holder**

* Manage his/her own caseload and review appointments.
* Discharge patients from physiotherapy treatment as necessary to suit patient’s needs.
* Refer patients back to consultant/GP/other professionals for further investigation/treatment.
* Advise, supply, fit or refer on regarding surgical appliances and aids.
* Reporting of equipment faults.
* Call a MDT meeting if required.
* Prioritisation of team’s workload in absence of team leader/lead clinician.
* Handling first line conflict situations whilst informing senior staff

 **Decision Making – Refer to Senior Staff**

* Changes to department practices/procedures.
* Recommendation regarding equipment purchase, replacement.
* Request for annual leave.
* Highly complex patient management cases where post holder is unsure of any aspect of patient management.
* Complex personnel issues e.g. staff conflict.
* Formal complaints/complex conflict

 **Most Challenging Aspect of Job**

* Managing a wide range of complex conditions.
* Managing own caseload and time in accordance with patients’ and service needs.
* Managing undergraduates and assistant staff workload and performance.
* Supporting clinical and non-clinical development of junior staff through joint working, tutorials and feedback.
* Deputising for the Team leader in their absence through additional responsibility.
* Communicating with consultants, GPs, relatives and other members of the multidisciplinary team.
* Actively participating and presenting clinical findings in ward rounds and case conferences formally and ad hoc.
* Undertaking a mentally and physically demanding job whilst taking care to safeguard their own health and safety and that of their patients and colleagues.
* Responding to constantly changing situations daily and service demands including prioritisation of workload.
* Exposure to periods of lone working in the community.
* Handling conflict with patients, carers and colleagues.

**Communication and Working Relationships with:**

 The post holder communicates on an on-going and daily basis, accurately and

 effectively, verbally and non-verbally as appropriate, face to face, by e-mail and

 by telephone with:

 **Patients**

* Providing and receiving information regarding assessment, diagnosis, prognosis and treatment to encourage compliance and maximise rehabilitation.
* Complex patients will require the physiotherapist to utilise a range of developed communication skills including motivation, persuasion and anxiety management to facilitate rehabilitation both in an individual and group setting.
* Utilising professional interpersonal skills to deal sensitively with patients who have mental health, behavioural, social and communication difficulties.

 **Carers/relatives**

* Providing and receiving information regarding patient care.
* Advising, guiding and teaching a range of patient management strategies.

 **Physiotherapy Staff**

* Consulting senior staff for advice, guidance and exchange of accurate clinical and other information.
* Guiding, advising and delegating tasks to juniors, support workers and pre-registration students.
* Reviewing performance of pre-registration students and support workers and at times juniors.
* Working alongside and intervening as appropriate to guide educate and develop junior staff.
* Providing concise patient information to physiotherapy colleagues both within and out with the service, on the transfer of patient care.

 **Other Health Professionals**

* Relaying patient information regarding assessment, treatment, progress and discharge planning.
* Contributing to the multi-disciplinary team discussion and decision making including discharge planning and appropriate referral to other professional services.
* Explaining, clarifying and demonstrating physiotherapy management strategies to optimise individual patient care.

 **Other Agencies (Local Authority, voluntary sector etc)**

* Identifying and establishing contact with appropriate agencies for future patient care.

 **Physical, Mental and Emotional Demands of the Job**

 **Physical**

* Manually handling patients daily for the purposes of treatment, including very immobile, obese, unwilling patients for sustained periods of up to 20 minutes or more per treatment session. Activities may include bending, crouching, kneeling and repetitive movements often in confined spaces.
* Utilising manual physiotherapy techniques daily including facilitation of movement requiring specialised levels of dexterity, sensory awareness and co-ordination.
* Handling and using equipment daily – hoists, walking aids, wheelchairs, specialist beds and tilt tables all of which require manipulation and dexterity and frequently manoeuvring in confined spaces.
* Working in conditions which may involve daily exposure to infection and bodily fluids including sputum, vomit, blood and urine.
* Working in an environment which may involve daily exposure to fleas and lice and to verbal and physical aggression e.g. swearing, punching, biting and scratching.

 **Mental**

* Maintaining high levels of concentration when assessing and treating patients, attending meetings, analysing documentation and presenting reports.
* Dealing with unpredictable events (e.g. falls, patient illness) and interruptions which may include assisting colleagues and requests for information.
* Exercise increased management role in the absence of a senior /lead clinician

 **Emotional**

* Managing patients who may be terminally ill or have long term degenerative conditions, deteriorating prognosis and/or difficult social, emotional, behavioural, communication or mental health status - weekly.
* Dealing with carers and/or family who may be distressed, angry or confused -frequently.
* Imparting unwelcome information to patients, carers and family regarding rehabilitation prospects - frequently.
* Dealing with challenges and at times complex feedback when undertaking performance review.

 **Qualification, Training, Experience Required**

 **Qualification**

* Physiotherapy degree or equivalent and a level of competency expected after a significant postgraduate clinical experience.
* Completion of a wide range and variety of in-patient rotations including Acute Respiratory (Medical and Surgical), ITU, Stroke, General Medical, Orthopaedics, MSK Out-Patients and Elderly Medicine
* Registration with Health and Care Professions Council (HCPC)
* Evidence of relevant post graduate training e.g. several short courses.
* Evidence of CPD
* Communication Skills
* Organisational Skills
* Team Worker
* **14. Job Description Agreement**

Job Holders Signature: ……………………………………….... Date: ……………………………

Manager’s Signature: ………………………………………….. Date: ……………………………