

NHS Fife

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| **1. Job Identification** |  | **Job Reference** |  |
| Job Title | Specialist Physiotherapist | **No of Job Holders** | 10 |
| Department | Physiotherapy | **Operating Division** | Acute Services |
| Directorate | W,C & CSS | **Reports To** | Designated Senior Physiotherapist |
| Job Location | VHK  | **Accountable to** | Physiotherapy Manager |
| Hours | 37 or pro rata equivalent | **Days** | 5 days over 7 |
| Prepared By | Catriona Bruce | **Last Update** | May 24 |

**2. Purpose of Job**

To provide a high standard of direct clinical care which encompasses physiotherapy assessment, diagnosis, treatment and management of patients in NHS Fife Acute Services.

To deputise for Team Lead Physiotherapist in their absence.

**3. Dimensions**

* Static or confined rotational position in a specialist inpatient area supported by Band 7 staff.
* Case-mix will be predominantly from within specialist area; however some mixed inpatient activity is expected.
* Will require flexible working within working hours and 5 days out of 7.
* Location – Wards and Physiotherapy areas at Queen Margaret and Victoria Hospitals
* Staff Responsibility – Will independently supervise the caseload, clinical education and appraisal of undergraduates, Healthcare Support workers and more junior staff.

**4. Organisational Position**

Physiotherapy Manager

Team Lead

**Specialist**

Physiotherapist

 Experienced

 Rotational

Therapies Services Manager

Physiotherapy Assistants

**5. Role of Department**

The Fife Acute Physiotherapy Service sits with other Allied Health Professional Services in the Women’s, Children’s and Clinical Support Services Directorate within Fife Acute Hospitals and operates across two hospital sites: Victoria Hospital and Queen Margaret Hospital, Dunfermline.

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 across acute and primary care settings.
* Service management, planning and development within a defined budget and a multidisciplinary framework.
* Continuous implementation, management and review of a Clinical Governance Strategy.

**6. Key Result Areas / Main Duties**

**6.1 Clinical**

* Act independently to assess, analyse and provide an accurate clinical diagnosis using developed 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 developed clinical reasoning skills to appropriately plan, implement, continually re-evaluate and progress treatment to maximise patient rehabilitation.
* Act independently to discharge patients from physiotherapy.
* Independently prioritise and monitor own clinical activity.
* Evaluate the effectiveness of own treatments.
* Assess capacity, gain valid informed consent and have the ability to work within a legal framework.
* Independently communicate with and work as part of the MDT involved with a patient at relevant clinics, meetings or case conferences to ensure effective treatment and patient care.
* Maintain patient documentation records and statistical information to reflect the care provided and meets professional and departmental standards.
* Work independently on the emergency respiratory on-call rota to contribute towards 24 hour physiotherapy service to acutely ill patients.

**6.2 Professional**

* Maintain legally required registration under Health and Care Professions Council requirements.
* Maintain Chartered Society of Physiotherapy Quality Assurance Standards.
* Adhere to Chartered Society of Physiotherapy Rules of Professional Conduct.
* 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.

**6.3 Managerial**

* Help identify and evaluate opportunities to improve the service in order to supply the best patient care within the resources available.
* Manage an individual caseload of patients effectively and efficiently.
* Access senior Physiotherapy staff to gain support, advice and direction in management of caseload.
* Independently delegate appropriate tasks, supervise, monitor workload and appraise Technical Instructors, Physiotherapy Assistants and undergraduates.
* Independently supervise, monitor workload and appraise more junior qualified Physiotherapy staff, HCSWs and undergraduates.
* Act as an appraiser on Turas.
* Participate in both departmental staff meeting and peer group meetings.
* Deputise for the senior staff to maintain continuity of service delivery in their absence.
* Assist senior staff in day-to-day management of service e.g. coding and prioritising referrals.

**6.4 Educational**

* Present at and participate in departmental and team in-service training to regularly update own skills and alter practice in order 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 (eg critical appraisal, reflective practice) in the clinical areas on each rotation 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 physiotherapy students.

**6.5 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 own actions support local policies on equality, diversity and human rights.
* Ensure that all physiotherapy equipment is safe to use and be responsible for the safe and competent use of all physiotherapy equipment by patients and their carers.
* Undertake Risk assessment of own practice and workplace activities.

**7. Equipment and Systems**

**7.1 Equipment**

Respiratory Apparatus Nebulisers, Bird, ventilators, ambubag, suction equipment – treatment of chest conditions

Aids Prostheses, orthoses, walking aides – gait education.

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

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

Electrical Apparatus Ultrasonic, interferential, TENS, trophic stimulators, Biodex, Isokinetics -strengthen muscle, reduce pain, promote healing.

Hot/Cold Therapy 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 Trust.

Splinting Materials Thermoplastics

**7.2 Systems**

Computers Patient database/records/referrals. Tiara. Audit purpose. Powerpoint presentations.

Intranet access for organisational communication. Internet access for evidence based practice.

Datix, e-expenses, SCI store, EESS, TURAS, TEAMS

Electronic Patient Physiotherapy record, integrated care pathway,

Notes multidisciplinary nursing records and medical notes as appropriate.

**8. Assignment and Review of Work**

**8.1 Referral**

* A blanket referral system exists on all wards.
* Outpatients may be accepted following written referral from medical practitioners or other qualified healthcare professionals.
* **8.2 Allocation of Work**
* Department responsibility is allocated to the post holder by the senior 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 Band 7 Physiotherapists e.g. attending working groups or committees, interviewing, inducting staff.

**8.3 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 treatment plans from these assessments.
* The post holder will be aware that specific instructions from consultants may determine certain treatments.

**8.4 Advice, Guidance, Supervision**

* Team Lead Physiotherapist will be available to consult on a daily basis as required and will provide both direct and indirect supervision.
* Band 6 non-clinical development is met with an annual training programme
* Physiotherapy managers are available daily for additional guidance, personal and/or professional support either face to face or by telephone.
* Induction and performance review is provided by more senior Physiotherapist/lead clinician

# 9 Decisions and Judgements

**9.1 Decision Making – Post holder**

* Manage his/her own caseload and review appointments.
* Recognises people’s rights and acts in accordance with legislation, policies and procedures.
* Discharge patients from physiotherapy treatment as necessary to suit patient’s needs.
* Refer patients to consultant/GP/other professionals for further investigation/treatment.
* Provide advice, supply, fit or refer on regarding surgical appliances and aids.
* Reporting of equipment faults.
* Call an MDT meeting if required.
* Prioritisation of team’s workload in absence of Team Lead.
* Handling first line conflict situations whilst informing senior staff

**9.2 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

**10. 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 Lead 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.
* Working independently with acutely ill and complex patients whilst on-call with no direct professional support or supervision.
* Responding to constantly changing situations on a daily basis and service demands including prioritisation of workload.
* Handling conflict with patients, carers and colleagues.

**11. 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 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 assistants and undergraduates.
* Reviewing performance of undergraduates and assistants.
* 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, universities etc)**

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

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

## Physical

* Manually handling patients daily for the purposes of treatment. Activities may include bending, crouching, kneeling and repetitive movements often in confined spaces and for sustained periods of 20 minutes per treatment session.
* Utilising manual physiotherapy techniques daily including facilitation of movement requiring specialised levels of dexterity, sensory awareness and co-ordination.
* Handling and using equipment daily – wheelchairs, walking aids and plinths all of which require manipulation and dexterity and frequently manoeuvring in confined spaces.
* Working in conditions which may involve exposure to infection and bodily fluids including sputum, vomit, blood and urine,
* Working in an environment which may involve occasional exposure 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 skills in the absence of the Team Lead

## Emotional

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

**13. Qualification, Training, Experience Required**

**Training**

* Physiotherapy Degree.
* Specialist training, experience in specialist field(s) to post graduate diploma level or equivalent.
* Evidence of experience across specialties gained through broad junior rotations.
* Knowledge, skills and competencies equivalent to 3 years post graduate experience, and 8 months in the specialist clinical area.
* Registered with Health and Care Professions Council
* Evidence of CPD
* Evidence of relevant post graduate training e.g. several short courses

### Skills and abilities

* Organisational
* Team Worker.
* Good communicator.
* Leadership

**14. Job Description Agreement**

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| Job Holders Signature: ……………………………… DateManager’s Signature: ……………………………. ….. Date:  |