

***NHS GREATER GLASGOW AND CLYDE***

# JOB DESCRIPTION

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| 1. **JOB IDENTIFICATION** | |
| **Job Title:**  **Grade:**  **Responsible to:**  **Accountable to:**  **Department(s):**  **Directorate:** | Assistant Practitioner – Cancer Older Peoples Service. Temporary post – 18 months  Band 4 / Fulltime (37 hours)  COPS Clinical Specialist Occupational Therapist  Chief AHP  Cancer Older Peoples Service/Occupational Therapy  Regional services |
| 1. **JOB PURPOSE** | |
| A unique opportunity has arisen for an Assistant Practitioner to join the Cancer Older Peoples Service at the Beatson West of Scotland Cancer Centre and will support an exciting project being completed there. The post will be part of the existing Beatson West of Scotland Cancer Centre COPS team working with inpatients and outpatients. This project involves a holistic MDT approach to older peoples services within cancer care, aiming to support service users alongside their primary healthcare team. This unique AP role will have inpatient, outpatient and project components which in turn will offer a variety of learning opportunities and progressive ways to work with this patient cohort.  The Assistant Practitioner is an integral member of the multidisciplinary team (MDT) providing essential support to professional and senior staff. The post holder will be delegated appropriate clinical and non-clinical tasks by a qualified Occupational Therapist, Clinical Nurse Specialist and Geriatricians within the team. It is expected that the practitioner will work independently with patients, within the agreed parameters of a defined intervention plan, as well as carrying out clerical and admin tasks e.g. appointment scheduling and data entry. Training, supervision and support will be provided to enable the practitioner to work within their agreed competence levels. The post holder will be expected to participate and assist in the development and implementation of data gathering for the newly changed service and to be an active member of the team at both the outpatient clinics, hospital wards and sometimes third party facilities.  . | |
| 1. **ROLE OF DEPARTMENT** | |
| The Cancer Older Peoples Service provides inpatient and outpatient care at the Beatson West of Scotland Cancer Centre (BWoSCC). These services seek to provide a high quality patient-centred service to those living with a cancer diagnosis in the West of Scotland. We aim to provide a high quality, person centred service to achieve a safe and timeous discharge for those receiving Cancer treatment as an inpatient, with signposting to relevant services when further intervention/rehabilitation is required. Throughout our outpatient clinics we complete comprehensive geriatric assessments which assist with managing symptoms, implementing social support, assessing for equipment, polypharmacy reviews and onward referrals in the community.  The Beatson West of Scotland Cancer Centre’s (BWoSCC) key ward responsibilities is to provide assessment, diagnosis and treatment to a diverse range of conditions including; management of spinal cord compression and neurological rehabilitation, complex pain management, general physical rehabilitation, input to the Stem Cell Transplant unit, acute respiratory care, and working alongside palliative care and other multi-disciplinary teams. The COPS team within Oncology services is an innovative team involved in service development, audit and research, and provides numerous opportunities for staff development. The patient cohort for the COPS team is over 65 years of age.  The partially Macmillan funded Cancer Older Peoples Service which was introduced in 2015, aims to optimise patients’ physical, mental, emotional and social function to give patients an opportunity to get the best from their treatment or increase quality of life with a cancer diagnosis, in line with the current evidence and government guidelines. Patients can be seen during any point of their journey including before, during and after their treatment to optimise their overall function with behavioural change, shared goal setting, equipment implementation and expert sign posting. Our interventions are underpinned with a robust evidence base with an aim of integrating evidence regarding combining comprehensive geriatric assessments into standard practice/ securing substantive funding. | |
| 1. **ORGANISATIONAL POSITION** | |
| PROJECT LEAD  AHP TEAM LEAD    TEAM LEAD  STATIC BAND 6 PHYSIOTHERAPISTS/ OCUPATIONAL THERAPISTS  ROTATIONAL BAND 5 PHYSIOTHERAPISTS/OCCUPATIONAL THERAPISTS  **THIS POST**  ASSISTANT PRACTITIONER  (BAND 4)  THERAPY SUPPORT WORKER | |
| 1. **SCOPE AND RANGE** | |
| * Have responsibility for organisation, prioritisation and time management of patient caseload, as identified by senior members of the team and underpinned by core competencies. * Use specialised technical skills to coordinate, participate in the planning and facilitate a flexible, patient centred programme of therapeutic activities. * Work with and without direct supervision, within agreed scope of practice and reports back outcomes to senior staff including the patient’s acceptance, participation, responsiveness and progress. * Document any other changes noted in relation to the wider treatment plan. * Utilises effective communication skills with patients, relatives, professionals and other agencies. * To demonstrate a flexible approach and deliver wider support for the service, which can include patient administration duties, patient appointments, electronic data recording and literature searching. | |
| 1. **MAIN DUTIES/RESPONSIBILITIES** | |
| * + Is legally accountable and responsible for all aspects of own work including direct and indirect patient care, within scope of practice.   + Gains valid consent for each intervention and has the ability to work within a legal framework with patients who lack the capacity to consent. * Through competency framework demonstrate an understanding of occupational therapy in the oncology setting and apply this using specific technical knowledge.   + Assists in the multidisciplinary rehabilitation of patients to maximise functional independence and rehabilitation potential.   + Manages own caseload and is responsible for assessing patient progress and reporting back to the occupational therapist where required. In particular highlighting any issues out with scope of practice. * To assess risk and manage it effectively. * Move and handle patients in accordance with divisional policy.   + Delivery of clinical interventions using highly skilled technical and specialised support work to engage patients in therapeutic activities.e.g. carrying out specific outcome measures and implementing OT equipment as appropriate.   + To implement occupational therapy equipment after discussion with the occupational therapist and progress and regress these within the clinical context of the patient.   + Treats patients in a clinic setting, ward or virtually via telephone or video call utilising the Attend Anywhere/ Near Me Platform or equivalent. * Where required accompany professional staff to assist in treatment of patients as indicated by the appropriate professional. * Access community services in keeping with agreed intervention plan e.g. refer on to third sector services such as Live Active, Macmillan Move More and Maggie’s Centre etc. as appropriate. * Assist in Health promoting activities, within a pre-set framework adopting a holistic approach and may incorporate aspects of cognitive or psychological advice within a clearly defined scope. * To distribute information in standard leaflets as agreed and directed by service.   + Undertakes initial information gathering from patients, which may include discussion with relatives/carers and accessing relevant databases/systems. * To identify social care issues i.e. financial, social isolation, personal safety and refer on appropriately.   + Contributes to development of patient care by attending relevant team, departmental or other appropriate meetings. * Works as a member of a multi-professional team to ensure effective communication and delivery of care. To liaise with medical and nursing staff regarding patient referrals /updates on progress.   + Documents accurate records of work undertaken and keeps monthly statistics as required, including documenting patient contacts in line with RCOT and service standards. * Carries out clerical and admin tasks including appointment scheduling, photocopying and filing.   + Collates and enters statistical data for service audit/development purposes onto the relevant database or appropriate record store.   + Contributes to department tidiness in line with infection control and health and safety, cleans AHP equipment regularly meeting ICT standards.   + May be asked to assist with the induction and orientation of new support workers, students or other band 4 staff.   + Regularly attends and occasionally delivers AHP departmental and specialty team in-service training programme to promote own personal development   + Develops and maintains a record of Continuing Professional Development activities, which reflects training and experience equivalent to *HNC level or SVQ level III* including core competencies*.*   + Ensures that all Statutory and Mandatory training is kept up to date.   + To adhere to professional code of conduct for support staff and all other relevant policies and procedures. * To exercise good personal time management, punctuality and consistent reliable attendance. * In keeping with policies and standards, maintains strict confidentiality regarding patient and staff information. | |
| **7a. EQUIPMENT AND MACHINERY** | |
| Use a wide range of equipment E.g. various walking aids and manual handling equipment such as hoist, sliding boards and stand aids and IT equipment (such as PowerPoint projectors, laptops, printer/ photocopier).To take responsibility for the maintenance, repair and infection control of equipment owned by the Physiotherapy and Occupational Therapy service.To understand, appropriately select and monitor the safe use of equipment including special orders and to make referrals where necessary. An up to date knowledge on the range and type of equipment is required, as is a working knowledge of health and safety procedures. **7b. SYSTEMS**   * Use a variety of standardised assessments to give a consistent baseline assessment for review of treatment and measurement of effectiveness of outcome e.g. MOCA, G8 Score, MMSE * Demonstrates a working knowledge of relevant IT systems and software packages- e.g. Microsoft excel. * Patient record system (Trakcare and clinical portal), check results etc. | |
| 1. **DECISIONS AND JUDGEMENTS** | |
| * Using clinical judgement in conjunction with department guidance and service needs evaluate the appropriateness of referrals and action these as appropriate, including referring back to occupational therapist. * Using clinical judgement undertakes non-complex interventions to decide how to complete and/ or discontinue treatment, taking into account clinical condition, comorbidities and possible treatment side effects using a holistic approach to care. * Works autonomously making clinical decisions within agreed parameters and scope of practice. * Will risk assess patient’s function within a range of physical activities and will provide advice and recommendations to maximise functional independence and physical fitness including decision making regarding discharge from care and onward referral. * Advises relevant personnel regarding ongoing treatment and progress throughout the episode of care to discharge.  Recognises changes in patients’ general condition affecting suitability for treatment and feeds back findings to occupational therapist.  * Undertakes basic risk assessment regarding patient condition and environment to ensure patient and staff safety. * Prioritises and balances clinical and non-clinical demands. * Allocates caseloads and delegates appropriate tasks to other team members and students. * Seeks advice and guidance from more senior staff. * Participates in the planning, reviewing and development of the service within clinical area. | |
| 1. **COMMUNICATIONS AND RELATIONSHIPS** | |
| **Patients and relatives/carers**  * To form professional and therapeutic relationships with patients and carers and communicate/ direct them in a way that respects their views, autonomy and culture. * Communicates basic clinical information effectively and appropriately with patients and their carers, using a range of verbal, non-verbal and written skills. This may involve conveying clinical terminology into lay terms or use of interpreters. * Utilises appropriate communication methods to encourage patient engagement with treatment programmes both virtually and in person. * Identifies and modifies the most appropriate communication method depending on the individual requirements e.g. hearing or visual impairments, cognitive impairment, learning difficulties, language differences, disinterest or perceptual problems * Encourages and motivates patients and their relatives/ carers using a range of management strategies to maximise outcome recognising those who are in pain, cognitively impaired or those who are afraid or reluctant and require reassurance, motivation and persuasion to engage with treatment. * Conveys details of occupational therapy treatment programmes in a manner and at a rate which is appropriate for every individual, emphasising and reiterating points as and when necessary to ensure a full understanding. * Listens effectively to patients and carers needs and concerns and reacts or intervenes appropriately * Demonstrates effective communication strategies to deal with anxious patients and relatives/ carers, in stressful or emotional situations   **Physiotherapy/Occupational Therapy Staff (Internal/ External)**   * Has effective two way communication with qualified Physiotherapy/ Occupational Therapy staff on a daily or more frequent basis. * Consults more experienced/ senior staff for advice. * Provides appropriate details for transfer of patient for ongoing management elsewhere. * Delegates tasks clearly to other team members * Network with appropriate colleagues. * Attends and contributes to general staff meetings. * The post holder will receive regular supervision in line with AHP supervision policy, in addition to the annual personal development planning and review.   **Multi-professional Team**   * Report on patient assessment findings, progress with treatment and discharge information to various members of the MDT as required including physiotherapists, clinical nurse specialists and consultants, outlining decision making regarding future management. * Accepts patient related information e.g. from nursing reports and passes this on to the COPS team or reflects accurately in own documentation.   **Other Agencies e.g. Local Authority, Voluntary Sector, charity**   * Provide information to support ongoing management, e.g. Community Rehab. Teams, Hospice. * Makes referrals e.g. social work community care, physical disability teams, and other relevant external agencies. * Promotes to role and services of Macmillan Cancer Support as appropriate to patients and fellow clinicians. | |
| **PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** | |
| **Physical Skills**   * Moving and therapeutic handling of patients. This may include assisting patients who have significant physical, cognitive or behavioural impairments. * Effective use of equipment such as hoists/ stand aids that require manipulation, dexterity and strength, often manoeuvring within confined spaces. * Therapeutic handling as directed by Occupational Therapist i.e. ADL assessments, equipment assessment, sensory stimulation and cognitive assessments.   **Physical Demands**   * Carrying equipment to wards/ clinics of varying size and weight. * Safely manoeuvre patients in trolleys/ wheelchairs. * Stand/ walking for the majority of the working day however may also have prolonged time spent sitting during clinics/ virtual consultations/ admin duties. * Therapeutic handling e.g. the physical exertion/endurance required to seat and position complex patients or transfer using mechanical aid. * Working in confined spaces, kneeling for periods of time. * Ability to accommodate unpredictable patient movements. * Equipment adjustments. * May include driving. * Regular housekeeping tasks such as cleaning. * May need to adopt static postures for lengthy periods while assisting patients. * Prolonged period in Personal Protective Equipment. * Periods spent using IT equipment – requires awareness of own posture, seating, etc.   **Mental Demands**   * Prolonged concentration required when assessing and treating patients. * Flexibility required to deal with unpredictable nature of the job. * Often have to make quick, on the spot decisions, with outcome affecting safety of self, team   or patients.   * Constant awareness of risk, continually risk assessing. * Working with cognitively impaired patients. * Using acquired skills to prevent situations from becoming volatile. * Balancing clinical versus non-clinical priorities. * Supporting other members of staff on a daily basis. * Dealing with unpredictable work patterns/ interruptions. * Motivating patients to participate in therapy in individual or group settings. * Dealing with many and varied medical conditions, particularly Oncology.   **Emotional Demands**   * Working with bereaved relatives. * Dealing with death and bereavement. * Dealing with challenging behaviours including working with people demonstrating verbal   and/ or physical aggression and potential for self-harm.   * Discussing sensitive issues with patients, relatives or carers. * Treating terminally ill patients with varying degrees of acceptance of illness. * Working with patients who are in pain. * Working with patients under Adults with Incapacity Act, detained under Mental Health Act,   Scotland and/or in police custody.   * Working with patients disclosing abuse. * Supporting other members of staff on a daily basis. * Working within an Oncology setting with patients who may have a poor prognosis, adverse clinical outcomes or complex social circumstances which can be extremely emotive.   **Working Conditions**     * Exposure to unpleasant odours and body fluids/risk of infection. * Risk of exposure to fleas, head lice, scabies. * May be exposed to antisocial localities and abusive patients or carers whilst working alone in   the community.   * Exposure to transmittable diseases and infections. * Occasional exposure to violence and aggression.   **Lone Worker**   * Following a risk assessment, some lone working e.g. in admin areas or working from home. | |
| **10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB** | |
| * Undertaking a mentally and physically demanding job, whilst at the same time take care to safeguard their own health and safety as well as colleagues and patients. * Adapting to variable and unpredictable demands of both clinical and non-clinical workload, in addition to developing and supporting needs of the team e.g. moving to another clinical area to cover for staff shortages. * Managing interventions within constraints of service. * Substantiating clinical reasoning when experiencing a difference of professional opinion in patients care. * Dealing with expectations of patients/ carers regarding frustration, aggression, denial and lack of insight. * Motivating and encouraging patients who are potentially emotionally distressed following a cancer diagnosis. * Developing knowledge and skills of a variety of conditions within the patient groups. * Dealing with demanding and uncooperative patients and relatives/carers. * Emotional demands of working with cancer patients. * Working within a newly established and evolving service. * Challenges associated with the Covid-19 pandemic. | |
| **11. PERSONAL SPECIFICATION** | |
| |  |  |  | | --- | --- | --- | |  | **Essential** | **Desirable** | | Qualifications/ Training | Occupational Health Clearance.  PVG Membership. | SVQ level II or equivalent.  Evidence of further qualifications. | | Experience | Experience working within health and social care or equivalent caring role.  Experience working in a team. | Experience in rehabilitation setting.  Experience of physical activity behaviour change.  NHS experience. | | Knowledge, skills and Abilities | Health/ safety/ risk awareness.  Basic numeric and literacy skills.  Accurate and effective observation skills.  Computer literate including use of e-mail, Microsoft Office and relevant clinical programmes.  High standard of written and verbal communication skills. | A knowledge of the principles of rehabilitation and exercise.  Decision making skills.  Knowledge of Macmillan services across GG&C and the West of Scotland. | | Personal Qualities | Ability to demonstrate understanding of professional conduct.  Confident/motivated/enthusiastic.  Ability to work under pressure.  Ability to work independently within a supportive environment.  Committed to team values and behaviours.  Ability to motivate others. |  | | |