#### Form JE 5



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| 1. JOB IDENTIFICATION | |
| Job Title: Highly Specialist Physiotherapist / Team Lead  Responsible to (insert job title): Child Health AHP Service manager  Department(s): Tayside Child Health Physiotherapy Service  Directorate: Allied Health Professions / Acute Directorate  Operating Division: Women Children and Families Division  Job Reference: **SCO6-444(REV24)**  No of Job Holders: 1 | |
| 2. JOB PURPOSE | |
| Autonomously provide highly specialist physiotherapy assessment, diagnosis, treatment, discharge and onward referral of own patient workload.  Plan, deliver and develop the physiotherapy service for the identified clinical area and line manage appropriate staff  Work in a specialist area independently  Lone work in a community setting  Co-ordinate / Supervise / Teach qualified/non-qualified physiotherapy staff, physiotherapy students and other personnel acting as a source of highly specialist advice on an ongoing basis. | |
| **3. DIMENSIONS** | |
| Clinical Activity: The Children and Young People’s Physiotherapy Service provides a service to children and young people aged 0-18yrs of age across Tayside. We have Physio teams in Dundee, Angus and Perth in community and acute locations.  Base: The post holder will have a designated base but could work with children aged 0-18years in any of the following service areas outpatients, inpatients, and community. The post holder will work within a variety of designated NHS and non-NHS sites including hospitals, schools, nurseries and patients’ homes.  Staffing Responsibilities: The post holder will have responsibility to line manage some staff as agreed with line manager which could include Band 6 Physio, Band 5 Physio, and Band 4 & 3 Health Care Support Workers  When working in the community and domiciliary settings, the post holder will work as a lone practitioner.  The post holder is employed within NHS Tayside and there may be a requirement to work flexibly across Tayside to meet service demands following relevant HR policies. | |
| 4. ORGANISATIONAL POSITION | |
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| 5. ROLE OF DEPARTMENT | |
| The Tayside Child Health Physiotherapy Service provides highly-specialist intervention to children, between pre-birth and eighteen years of age, with neurological conditions, developmental delay, genetic conditions, orthopaedic problems and any other condition requiring care in a community or acute setting.  There are five teams of staff delivering the service across Tayside. Staff are based and provide clinical services in.   * Armitstead Child Development Centre / Community Team 0-5yrs, Dundee * Kingspark Special School / Mainstream school Team, Dundee * Angus Community Team based in Whitehills, Forfar * Perth and Kinross Community Team based in Sunflower Centre, PRI, Perth * Acute Team, based in Ninewells Hospital, Dundee   The teams deliver highly specialist treatment to their client group and act as a source of expert advice to MDT across Tayside. Treatment, advice and education is also provided in mainstream schools and nurseries, child and family centres and at home  Perform highly specialist physiotherapeutic assessment of patients with diverse presentations and complex physical and psychological conditions.  Provide a diagnosis/clinical impression, develop and deliver an individualized treatment programme.  Influence patient management decisions through multi-agency working.  Responsible for discharge and/or onward referral of caseload.  Hold responsibility for own caseload and that of the team for a defined area of the service.  Educate, supervise, and assess the performance of students.  Train, supervise, advise, support and performance manage less experienced qualified / nonqualified physiotherapy staff. This will include the use of formal appraisal processes, documentation, caseload and peer reviews.  Undertake all aspects of clinical duties as an autonomous practitioner.  Provide advice and guidance on health promotion, health management and prevention strategies to patients, carers and other healthcare staff.  Responsible for day-to-day management of service area / team including planning, monitoring and evaluating of practice and service delivery, making recommendations to Service Manager.  Lead the implementation of specific changes to practice or contribute to service protocols  After a period of training, participate in the emergency on-call service. | |
| 6. KEY RESULT AREAS | |
| **Clinical**   * Professional and legal accountability for all aspects of work as an independent physiotherapy practitioner. * 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. * Act independently to formulate, implement, evaluate and deliver an individual physiotherapy treatment plan based upon evidence-based practice and treatment options e.g. manual physiotherapy/respiratory/neurological techniques, patient education, exercise classes, electrotherapy, acupuncture * Use highly specialist clinical skills necessary for the assessment and manual treatment of patients. * Maintain patient documentation, records and accurate mandatory statistical information to meet professional and local standards. * Manage own diary including administrative duties in setting up appointments. * Evaluate patient progress, reassess and adapt treatment programmes. * Identify and manage clinical risk within own patient caseload and monitor others / team i.e. less experienced / non-qualified physiotherapy staff. * Provide qualitative and quantitative patient related findings to multi-agency staff to optimize patient care e.g. discharge planning with consultant, case conferences, facilitating hospital admission / discharge * Work as a lone practitioner in community and domiciliary settings*.* * Work independently to provide physiotherapy on-call care to support delivery of the 24-hour service to acutely ill patients e.g. removal of chest secretions using nasopharyngeal suction. * Understand and interpret complex medical information and investigations and alter treatment programme accordingly e.g. measure and monitor blood pressure, x-ray and blood gases. * Work flexibly to provide assistance when required to cover other areas of physiotherapy service * Advise, teach or instruct as appropriate other health professionals and social agencies, patients, relatives and carers.Undertake visits to patients’ home as appropriate for discharge planning / intervention / assessment. * Provide expert advice on area of specialty to physiotherapy colleagues. * Provide training and education to other members of the multi-agency team within specialist area. * Undertake any other duties of a similar nature delegated by senior staff or the Service Manager. | |
| **Professional**   * Maintain and develop competency through Continuing Professional Development, training, maintenance of portfolio and reflective practice. * Adhere to the national, professional and local policies and guidelines as directed by Health Professions Council, Chartered Society of Physiotherapy and NHS Tayside. * Lead and formulate training and induction programmes. Organise and participate in staff meetings; lead, organise and participate in in-service training programmes with colleagues, healthcare staff and other agencies. * Participate in appraisal programme as an appraiser and an appraisee, contributing to Professional Development Planning. * Undertake evaluation of own work through the use of outcome measures, evidence-based practice and departmental audit programmes. * Write legal reports providing accurate and detailed information regarding patient’s diagnosis, treatment and expected outcome, acting in an advisory capacity for less experienced staff. * Demonstrate understanding and participation in all aspects of Clinical Governance.eg lead service audit * Assess patient understanding of treatment proposals, ensure consent has been given and to have an understanding of the legal framework e.g. for patients who lack capacity to consent to treatment. * Apply increasingly complex skills and knowledge in order to maintain professional competence and fitness to practice as a highly specialized physiotherapist. * Participate in research projects being undertaken within service area.   **Managerial**   * Deputise for Service Manager in periods of absence, if required, taking responsibility for operational management of the wider service team, allocating and organizing the work of less experienced qualified/non-qualified physiotherapy staff. * Delegate and supervise an indentified caseload for less experienced qualified / non-qualified physiotherapy staff * Responsible for organizing, planning and prioritizing own and less experienced /non-qualified staff /students caseload to meet service and patient needs. Readjusting plans as situations change or arise. * Represent physiotherapy and/or other health care professions at meetings e.g. representing other members of the Allied Health Professions, managed clinical networks, service re-design. * Initiate and participate in ongoing service review, to ensure that organizational and clinical standards are being met, proposing service changes where appropriate. * Responsibility for managing informal disciplinary matters and disputes. * Keep work area tidy, clean physiotherapy equipment on a daily basis and ensure faulty equipment is reported and withdrawn from use. * Deal with complaints and take appropriate level of action i.e. investigate and report to Line Manager and/or respond to complainant. | |
| **7a. EQUIPMENT**  Responsible for safe and competent use and security of equipment, patient appliances, electrotherapy equipment, hydrotherapy etc. in accordance with departmental guidelines.  Assess for and/or prescribe specialist equipment e.g. manual handling, orthoses, wheelchairs, standing frames, TENS units.  Understand, apply and teach safe use and care of specialist equipment to patients, carers, other healthcare and multi-agency staff. | |
| **7b. SYSTEMS** | |
| Have a working knowledge of relevant IT systems and software packages e.g. Physio tools (exercise programme), electronic IR1s.  Competent in the use of Problem Orientated Medical Records and contribute to the development of multi-agency care plans.  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 mange those records in keeping with the NHS Tayside Records Management Policy and with any guidance produced by NHS Tayside specific to your employment. | |
| 8. ASSIGNMENT AND REVIEW OF WORK | |
| The specialist clinical caseload is generated by the specific needs of each clinical area.  The post holder has responsibility for clinical management of a specialist caseload and will act independently within departmental and professional protocols / guidelines.  Access to clinical supervision is available via a senior therapist as required.  The post holder is responsible for supervising registered staff, clinical support workers, assistant practitioners and students.  The post is managed by the line manager. This includes participation in the departmental Personal Development and Performance Review (appraisal) system.  The post holder is expected to initiate work and developments and evaluate their effectiveness in their specialist area. They will allocate tasks associated with the clinical management / development of the service on a day-to-day basis to other staff.  The Team Lead may also delegate other non-clinical tasks e.g. participate in interview recruitment process, appraisal, patient satisfaction quality assurance. | |
| **9. DECISIONS AND JUDGEMENTS** | |
| Complete discretion over own patient caseload, including prioritization and balancing other patient related and professional demands.  Work autonomously making clinical decisions within scope of practice.  May be asked to participate in single shared assessment and refer to appropriate member of the multi-agency team.  Accept, assess, plan, undertake and complete and/or discontinue physiotherapy interventions as per presenting clinical condition or refer on to other agencies.  Strongly influence patient management decisions through multi-agency working.  Need to use own initiative and ability to react timeously and appropriately to crises. | |
| 10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB | |
| 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.  Participating in multi-agency teams ensuring a professional opinion is expressed which other, more experienced members of the team may not agree.  Identify and deal sensitively with patients whose symptoms are both psychological as well as physical in nature.  Deputise for Service Manager in their absence, as directed, taking responsibility for operational management of the Tayside wide service. | |
| **11. COMMUNICATIONS AND RELATIONSHIPS** | |
| Communicate effectively with patients, families and carers some of whom may have barriers to understanding (e.g. sensory impairment, learning difficulties, language barriers and confusion), using verbal/non-verbal, written and presentation skills as required.  Convey comprehensive detail of care/physiotherapy treatment in a manner appropriate for every individual, emphasizing and reiterating points to ensure a full understanding. 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.  Develop a rapport with patients and carers to encourage their interest and engagement in an activity therefore maximizing its therapeutic benefits.  Communicate assessment and treatment results to the appropriate disciplines verbally and/or in the form of reports and letters e.g. present professional opinion to consultants influencing decisions which will have a direct effect on patient care.  Represent physiotherapy team/service and/or individual patients at multi-agency team meetings e.g. reporting on patient progress.  Explain the role of physiotherapy to a range of professionals and the public; clarify appropriateness of referral, interventions and continuation/discontinuation of treatment.  Give presentations to large audiences using audiovisual and multi-media equipment at local and national events on a regular basis.  Diffuse potentially hostile and antagonistic situations with staff, patients and carers, using highly developed negotiation and interpersonal skills.  Use leadership skills to develop a cohesive team within specialist physiotherapy service area. | |
| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** | |
| **Physical demands** – repeated regularly on a daily basis   * 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. * 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 e.g. suctioning of secretions from chest, manual therapy, acupuncture needling, injection therapy. * Work with patients whose medical condition may make manual/therapeutic handling challenging e.g. dementia, anxiety, pain, limited mobility and patients with alcohol/drug dependency. * Requirement to maintain static postures for therapeutic purposes i.e. kneeling and standing for prolonged lengths of time. * Significant element of walking, climbing stairs, standing and working within confined and awkward spaces. * Move heavy and awkward objects i.e. gym equipment. * Assist patients during treatment e.g. walking and stair practice. This may include sudden and unpredictable changes in direction or movement, faints and falls. * Occasionally work with patients who exhibit physically challenging behaviour.   **Mental Demands - r**epeated regularly on a daily basis   * Alert to unexpected changes in patient’s condition, respond using initiative and clinical reasoning skills to adapt patient management. * Prioritise own and others workload throughout the day. * Periods of particular concentration especially with new and complex patients who may have communication difficulties. * Motivate, encourage and persuade patients to take an active role in their rehabilitation to facilitate optimal outcome. * Travelling daily in an urban or rural environment including adverse weather conditions. * Deal with lone working and sole responsibility for service provision*.* * Interruptions during working day from other staff, patients and carers/relatives e.g. telephone calls, pagers, direct contact. * Respond to group dynamics during exercises classes or group sessions   **Occasionally -**   * Deal with abusive and aggressive situations which may involve patients, carers or other staff.   **Emotional Demands** - repeated regularly on a daily basis   * Deal with patients (and their families) who have long term chronic illness, debility and pain. * Undertake assessment and treatment which may increase pain levels. * Convey information of a sensitive and emotive nature when it is contradictory to patient and carer expectations and desires.   **Frequently –**   * Deal with information which may be of an emotional and distressing nature e.g. domestic abuse history and child protection issues. * Undertake distressing treatment modalities e.g. naso-pharyngeal suction * Deal with patients with terminal or life limiting conditions.   **Occasionally –**   * Deal with death and bereavement.   **Working conditions**  Daily –   * Exposed to bodily fluids (urine, faeces, blood, saliva, vomit, sputum) and infections e.g. MRSA. * Exposed to body odours, fleas and lice. * In domiciliary or community settings, exposed to adverse weather, terrain and unknown working environment e.g. unhygienic housing environment, tobacco smoke and animals. * Work as a lone practitioner e.g. on-call, GP surgeries, domiciliary setting   Occasionally -   * Deal and cope with threat and occurrence of violence, aggression and unpredictable behaviours. | |
| 13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB | |
| Honours degree level or equivalent in Physiotherapy  Current Health Professions Council registration  Previous postgraduate experience in a range of in and outpatient specialties  Minimum of eighteen months of these at specialist paediatric level evidencing thorough clinical and theoretical knowledge  Evidence of Continuing Professional Development and relevant postgraduate training at a Masters level.  Physiotherapy Clinical Educators course (for supervising students)  Evidence of leadership skill development | |
| **14. JOB DESCRIPTION AGREEMENT** | |
| A separate job description will need to be signed off by each job holder to whom the job description applies.  Job Holder’s Signature:  Head of Department Signature:  **(I confirm that the Job Description accurately reflects the duties and**  **responsibilities of the postholder and does not impact upon any other**  **postholders role)** | Date:  Date: |