**JOB DESCRIPTION FOR RECRUITMENT PURPOSES – Band 8c**

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| **JOB IDENTIFICATION**   |  |  | | --- | --- | | **Job Title:** | **Consultant Clinical/ Counselling Psychologist** | | **Responsible to (insert job title):** |  | | **Department(s):** |  | | **Operating Division** |  | | **Job Reference number (coded):** | **Sco21/JEU054** | | **No of Job Holders:** | **1** | | **Last Update (insert date):** | **March 2025** | |
| **1. JOB PURPOSE**  **Consultant Clinical/ Counselling Psychologists are required;**  To ensure the systematic provision of a high quality clinical/ counselling psychology service within a defined highly specialised service or clinical team.  To work autonomously within professional guidelines and exercise responsibility for the systematic governance of psychological practice within the service/team and to ensure that systems are in place and working effectively for the clinical delivery and professional supervision and support of all other staff within the service/ team for which the post holder has designated responsibility, including clear systems for effective recruitment, professional appraisal, and the identification of CPD needs across the service/sector team.  To act as a highly specialist resource to the wider professional community and, as a major requirement of the job, to carry out research activities, audit, policy and service development. |
| **2*.* ROLE OF DEPARTMENT**  **Please insert relevant service information for the post.**  Acute Psychology   * Acute Psychology comprises clinical health psychology and neuropsychology services, providing a specialist psychology service to patients in designated services who have psychological problems associated with physical illness, disability and brain injury. The Service also aims to contribute to improving the health care system and to influence policy through consultation and advice about psychological aspects of health, illness and related dysfunction.   ICU Psychology Service   * The ICU psychology service input across the General Adult ICUs found in the Glasgow Royal Infirmary, the Queen Elizabeth University Hospital and the Royal Alexandra Hospital. Across these hospital site there are 49 level 3 beds and 44 level 2 beds. * The Guidelines of the Provision of Intensive care version 2.1 (GPICS v 2.1) recommends embedding practitioner psychologists within critcal care teams to address the psychological health needs of patients, families and staff. With 2 years of funding, this is a unique opportunity to develop and embed an ICU psychology service in the largest health board in Scotland. Ongoing funding will be dependent on ongoing service evaluation. * The ICU psychology team will provide specialist assessments, formulation and intervention to both patients and family members as appropriate. This will include involvement in the InS:PIRE programme and therefore potentially with patients following discharge from hospital if required. There will also be a focus on staff, where the prevalence of burnout and staff turnover in ICU can be high. Working with the staff group and the wider system to ensure wellbeing of staff is maximised in the context of this high pressure environment.   *The post holder may be required to provide clinical/ counselling psychology input across the service area and at different bases as required.* |
| **3. ORGANISATIONAL POSITION - please insert relevant organisational chart for the post**  **CONSULTANT CLINICAL/ COUNSELLING PSYCHOLOGIST**  **(THIS POST)**  Professional Lead Acute Psychology  Clinical Service Manager  PRINCIPAL CLINICAL/ COUNSELLING PSYCHOLOGIST  CLINICAL/ COUNSELLING PSYCHOLOGIST AND  ASSISTANT PSYCHOLOGISTS/TRAINEES ASASSIGNED |
| **4. SCOPE AND RANGE**  Psychology Services are responsible for   1. providing a specialist psychology service for all clients of the service. 2. advising management on appropriate policy, systems and programmes to promote effective delivery and quality of all psychologically-based interventions. 3. providing training, or for advising service management on appropriate external training, to all staff within the service involved in the delivery of psychologically-based interventions. 4. providing specialist clinical supervision to staff delivering formal psychological therapies, such as cognitive-behavioural therapy. 5. managing the psychological resources available to the service in terms of staff, including psychologists (trainee clinical psychologists and assistants) and in terms of psychology materials employed in the assessment and the treatment of patients. 6. participating in local management groups and responsible for service development for aspects of psychological care. 7. providing specialist psychological research expertise to the service. |
| **5. MAIN DUTIES/RESPONSIBILITIES**  **Clinical:**   1. To provide highly developed specialist psychological assessments of clients based upon the appropriate use, interpretation and integration of complex data from a variety of sources including psychological and neuropsychological tests, self-report measures, rating scales direct and indirect structured observations and semi-structured interviews with clients, family members and others involved in the client’s care. 2. To formulate plans for the formal psychological treatment and/or management of a client’s mental and/or health problems based upon an appropriate conceptual framework of the client’s problems, and employing methods based upon evidence of efficacy. 3. To be responsible for implementing a range of highly specialist psychological interventions for individuals, carers, families and groups, within and across teams employed individually and in synthesis, adjusting and refining psychological formulations drawing upon different explanatory models and maintaining a number of provisional hypotheses. 4. To make highly skilled evaluations and decisions about treatment options taking into account both theoretical and therapeutic models and highly complex factors concerning historical and developmental processes that have shaped the individual, family or group. 5. To exercise full responsibility and autonomy for the treatment of and discharge of clients whose problems are managed as a psychologically based standard care plan, ensuring appropriate assessment, formulation and interventions, communicating with the referral agent and others involved with the care on a regular basis. 6. To provide expertise and specialist psychological advice, guidance and consultation to other professionals contributing directly to the analysis of clients’ problems and disorders to ensure accurate formulations, reflecting an in-depth causal understanding, diagnosis and treatment plan. 7. To ensure that all members of the wider clinical team have access to a psychologically based framework for the understanding and care of clients of the service, through the provision of advice and consultation and the dissemination of psychological knowledge, research and theory. 8. To undertake risk assessment and risk management for relevant individual clients and to provide both general and specialist consultation and advice for other professionals on psychological aspects of risk assessment and management. 9. To act as designated care co-ordinator, in appropriate cases, ensuring the provision of a care package appropriate for the client’s needs, co-ordinating the work of others involved with care, arranging client’s care reviews as required and communicating effectively with the client, his/her family and all others involved in care; and to monitor progress during the course of multi-disciplinary interventions. 10. To communicate in a highly skilled and sensitive manner, information concerning the assessment, formulation which includes making available an explanation of how the problem developed, an indication of what maintains the problem and factors which may guide treatment options for clients under their care and to monitor and evaluate progress during the course of both uni- and multi-disciplinary care. 11. To provide expertise and advice to facilitate the effective and appropriate provision of psychological care by all members of the team. 12. To provide expert consultation and opinion about the psychological care of the client group to staff and agencies outside the Health Board Area. 13. To give expert advice to the Courts on cases where opinions may differ or in unique situations 14. To take part in regular professional supervision and appraisal and maintain an active engagement with current developments in the field of applied psychology and related disciplines   **Teaching, training and supervision:**  **NB. Clinical supervision: term is specific to Psychology and relates to a process of reviewing clinical practice; leading to the development of practice. Not to be equated with the Job Evaluation definition of supervision.**   1. To ensure appropriate systems for the clinical and professional supervision of qualified and unqualified psychologists across the service. 2. To provide clinical and professional supervision to qualified and assistant psychologists working in the service. 3. To provide supervision for CAAPS Trainees or MSc trainees in psychological therapies. 4. To co-ordinate and provide specialist clinical placements for trainee clinical psychologists, ensuring that they acquire the necessary clinical and research skills to doctoral level where appropriate, and competencies and experience to contribute effectively to good psychological practice, and undertake the assessment and evaluation of those competencies 5. To provide specialist advice, consultation, training and clinical supervision/assessment to other members of the team for their provision of psychologically based interventions to help improve clients’ functioning. 6. To provide pre and post-qualification teaching of clinical psychology. 7. To continue to develop expertise in the area of professional pre and post-graduate training and clinical supervision.   7. To ensure that all psychologists within the service/sector team maintain up to date knowledge of legislation, national and local policies and issues in relation to both the specific client group and mental health.  **Management and Recruitment,**   1. To ensure the delivery of a high quality, best-practice and evidence-based service within area of own responsibility 2. To exercise responsibility for managing the psychological resources available to the sector team/service including line management responsibility for qualified Clinical/ Counselling Psychologists and Assistant/Trainee Clinical Psychologists psychological staff and psychological materials employed in the assessment and the treatment of patients. 3. To exercise responsibility for the systematic governance of psychological practice within the sector team/service and to interpret National Clinical Guidelines such as NICE and SIGN Guidelines and ensure that services are meeting all relevant standards. 4. To manage the resources available to the service in terms of the delivery of psychologically based interventions for clients delivered by non-specialists. 5. To ensure appropriate professional psychology recruitment within the service/sector team. 6. To advise on the skill level required to undertake psychological practice within a service development framework 7. To monitor and evaluate the psychology service provision with the service/clinical team to ensure that it meets required service and practice standards.   **Policy, Planning and Service Development**   1. As a senior clinician to ensure the development of a high quality, responsive and accessible service for clients, their carers and families within the sector team/service, including advising both service and professional management on those aspects of the service where psychological and/or organisational matters need addressing. 2. To plan and implement service developments and projects within the sector team/service that respond to Government initiatives and targets and that have application across other teams and services. For example, the development of innovative service components to reduce waiting times or enhance patient satisfaction and outcomes. 3. To take a lead role in the delivery of Care Pathways which may require changes in psychological practice to meet patients' needs. 4. To take a lead role in the workforce and resource planning for the psychological interventions and therapies component of the wider service/clinical team. 5. To identify gaps or resource issues in the service and to initiate and implement developments.   **IT responsibilities:**  1. Use I.T. systems to record clinical activity, caseload, waiting list etc and to report on the performance of psychologists within the area and on the activity of the service.  2. Undertake the collection, processing, interpretation, reporting of information using appropriate software, including advanced statistical, and presentation packages.  3. Use of IT systems to access the NHS e-library for keeping up-to-date with current developments.  **Research and service evaluation:**   1. As a major job requirement to plan, develop and undertake formal research programmes relevant to the post holder's area of clinical activity and service. 2. To undertake collaborative research activity including the evaluation of, monitoring and development of the service/sector team’s services, through the deployment of professional skills in research, service evaluation and audit. 3. To utilise theory, evidence-based literature and research to support evidence-based practice in individual work, work with other team members and across the service/sector team. |
| **6a. EQUIPMENT & MACHINERY**  1. To use a variety of technological equipment for the purposes of clinical work, e.g. video cameras, audio recorders, video players etc.  2. To exercise responsibility for the appropriate and safe use of specialist psychological equipment within the area including appropriate systems of stock control.  3. Use I.T. systems to maintain up to date records of; clinical activity, caseload, waiting list etc and to report on the performance of psychologists within the service/team.  4. Use specialist psychometric test equipment to identify language, memory, intellectual and other cognitive deficits.    **6b. SYSTEMS**   1. To ensure the highest standards of clinical record keeping including electronic data entry and recording, report writing and the responsible exercise of professional self-governance in accordance with professional codes of practice of the British Psychological Society and Divisional policies and procedures. 2. Use I.T systems to maintain up to date records of clinical activity, caseload, waiting list etc and to report on the performance of psychologists within these areas. 3. Use I.T. systems relevant to clinical interventions, e.g. for scoring psychometric tests. 4. Use management and I.T, systems to ensure adequate performance management information is provided in a timely manner. 5. Use management and IT systems to ensure national workforce data and clinical activity data are provided for e.g. ISD workforce and camhs mapping |
| **7. DECISIONS AND JUDGEMENTS**  Consultant Clinical/ Counselling Psychologists are autonomous Practitioners responsible for their own work and the interpretation of agreed guidelines and policies. The post holder is guided by general health organisational and broad operational Policies which they are required to interpret and initiate appropriate action as required. Specifically the post holder expected to:-  1. Make highly skilled evaluations and decisions about treatment suitability, assessment, formulation, diagnosis, treatment and discharge,  2. Offer expert opinion where this may draw on highly complex and conflicting information.  3. Advise on the development of clinical specialisms and other service developments, making decisions based on the clinical needs of clients, strategic development of the service, the research/evidence base and national policy.  4. Make judgements on the best use of psychology resources and of resources to the service / team, in the area of responsibility, often where there may be significant difference in opinion. This will include making decisions and judgements involving highly complex facts, maybe in unpredictable situations, which require analysis and interpretation of consequences of a range of options.  5**.** The post holder will be an expert in their field and will be required to make judgements in new or unique situations where there is no obvious solution.  6. As a Consultant the post holder will have the freedom to undertake appropriate actions based on their interpretations for example, of relevant clinical and professional policies  Work will be the subject to appraisal meetings with the Professional Lead / Head of Service who will set Key Result Areas and agree a personal development plan for the year. |
| **8. COMMUNICATIONS AND RELATIONSHIPS**  The post holder is required:   * To provide and receive highly complex information in a highly skilled and sensitive manner, concerning the assessment, formulation and treatment plans of clients under their care and to monitor and evaluate progress during the course of both uni- and multi-disciplinary care. * To communicate effectively with patients suffering from severe mental illness, including patients with personality disorders who may exhibit a significant degree of hostility, and antagonism. * To address subjects such as a client’s past sexual abuse, traumatic events, exposure to violence etc. in client’s lives or suggesting management strategies for individuals where there is considerable conflict regarding the approach to adopt. * To manage barriers to acceptance or understanding (e.g. head injury, learning disability, sensory impairment), which need to be overcome using the highest level of interpersonal and communication skills.   The post holder is required to develop and maintain effective communication systems with;   * Clinicians and managers to ensure effective delivery of the service * External agencies including GPs, the Courts, Universities and Social Work * Patient Groups and voluntary bodies * To communicate effectively with patients when significant barriers to communication exist e.g. learning disability, sensory or physical impairment * To undertake formal presentations in public, professional and academic settings. * To maintain communication with wider networks, including national networks, such as the British Psychological Society and its Division of Clinical Psychology or Division of Counselling Psychology, and national special interest groups. |

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| **9. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB**  **Physical:**   * To exercise physical skills requiring dexterity, precision, good hand-eye coordination and speed in administering psychometric tests, with a specific requirement for consistency and accuracy, which are essential for accurate diagnosis. * To use specialist psychometric tests requiring the simultaneous co-ordinated manipulation of test materials and the accurate observation, timing and recording of patient performances and behaviours. * Good keyboard skills are required. * Considerable physical effort is entailed through sitting for hours in a restricted position, e.g. during clinical interview or assessment sessions. These sessions typically extend for a half or full day at a time. * Use a car to make home visits or travel between clinics.   **Mental:**   * Considerable intense mental effort (often attending to multiple sources of information at the same time) is required when concentrating, often for long periods at a time when directly interacting with clients during assessment and therapy sessions. These concentration requirements typically endure over the period of ‘clinics’, which may extend for a half or full day at a time * Intense concentration is also required when using varied and sometimes intricate clinical assessment procedures (e.g. interviews, direct observations of client behaviour or the use of complex psychometric assessment tools   **Emotional:**   * Frequent exposure to highly distressing or emotional circumstances when providing treatment to patients who are seriously mentally ill, and exhibiting challenging behaviour (such as suicidal threats or aggressive and threatening behaviour) * Frequent exposure to highly distressing circumstances as when giving news of life threatening illnesses such as dementia or when hearing personal accounts of involvement with child abuse or domestic breakdown * Considerable emotional demands are presented in listening to or reading about staff or clients’ or their carers’ distress and through exposure to disturbing accounts of serious crimes, sexual abuse or traumas, as well as from actual or threatened aggressive behaviour on the part of clients or carers and occasionally from significant threats of violence from forensic clients and their families. * Emotional demands are routinely experienced in supporting other staff through major challenges at work, including clinical supervision of difficult cases. These include debriefing staff and clients after violent or otherwise traumatic events.   **Environmental:**   * Services to clients are provided in a variety of settings, including clinics, hospital, their own homes, own rooms, hostel accommodation, bed and breakfast, etc. Some of these environments may present exposure to hazards, such as verbal and physical aggression, loud noise, or unpleasant working conditions e.g. bad odours, cigarette smoke, domestic animals, used injecting equipment, etc. |
| **10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB**   * The post involves working with individuals who present significant challenges to those supporting them either through the risks they themselves face or present because of their behaviour or through significant mental health difficulties or serious physical health problems. In addition, there is a need to respond to the sometimes conflicting needs of patients, referrers and staff in a manner that maintains high quality service and staff morale.   + Forming lone judgements and offering expert opinions in relation to highly complex and diverse problems / disorders, often under emotionally charged circumstances.   + Managing a diversity of patient needs and service demands in a context of restricted resources. |

**PERSON SPECIFICATION – Band 8c**

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| **KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB**   |  |  |  | | --- | --- | --- | |  | *ESSENTIAL* | *DESIRABLE* | | **TRAINING & QUALIFICATIONS** | Demonstrates advanced theoretical and practical knowledge as a clinical/ counselling psychologist which requires to be obtained through:-   * Post-graduate doctoral level training in clinical or counselling psychology (or its equivalent before the introduction of doctoral level qualifications) as accredited by the BPS or HCPC, including specifically models of psychopathology, clinical psychometrics and neuropsychology, two or more distinct psychological therapies and lifespan developmental psychology. * Formal training and supervised practice in Cognitive Behaviour Therapy (CBT) across a range of presentations and severity, supervised by a suitably qualified clinical or counselling psychologist. * Post-doctoral training in additional specialised areas of psychological practice of an extensive and substantial nature * Registration with the HCPC as a clinical or counselling psychologist. * Training in clinical practice supervision. | Full membership of the Division of Clinical Psychology, the Division of Counselling Psychology, Division of Health Psychology or the Association of Clinical Psychologists.  Advanced training in other therapeutic modalities relevant to the specialty the post sits in e,g, CFT, ACT, IPT.  Additional supervisors training e.g. 5 year refresher supervisors course run by D.Clin.Psy. and specialist training via NES e.g. CBT, IPT, Group, CTSR.  Completion of clinical leadership and management training, including online modules (e.g. LearnPro) and/or attendance at training events (e.g. at health board level, via NES, ACP, BPS). | | **EXPERIENCE** | Significant clinical or counselling psychology practice experience in NHS or equivalent, supervised by a suitably qualified Clinical or Counselling Psychologist.  Requires experience of working with a wide variety of client groups, across the whole life course and presenting with the full range of clinical severity across the full range of care settings including outpatient, community, primary care, in-patient and residential care settings. This includes skill in maintaining a high degree of professionalism in the face of highly emotive and distressing problems, verbal abuse and the threat of physical abuse.  Experience of exercising full clinical responsibility for clients’ psychological care and treatment, both as an independent practitioner and also within the context of a multi-disciplinary care plan.  Experience of teaching, training and/or professional and clinical supervision. | Substantial and range of experience working in a physical health care setting, including inpatient ward environments.  Substantial and range of experience working with acute physical health presentation.  Substantial experience of working in, and leadership of, psychology service delivery within medically/AHP-led services.  Substantial experience of working across multiple systems to coordinate care for individual and service level requirements e.g. mental health and social care services, rehabilitation services, third sector organisations.  Substantial experience of leading on delivery and development of matched/stepped-care service models.  Experience of leadership in service level research and audit.  Substantial experience of leading and delivering CBT, ACT and CFT via individual and/or group work.  Substantial experience of providing supervision (e.g. MSc/Doctoral trainees, assistants, AHP/MDT staff, CAAPS/other therapists, peer supervision). This may include delegated management experience.  Leading on delivery and development of teaching and training for e.g. in service, national programs (NES), MSc/Doctoral courses. | | **KNOWLEDGE AND SKILLS** | Doctoral level knowledge of research design and methodology, including complex multivariate data analysis as practiced within the field of clinical/ counselling psychology.  Knowledge of legislation and its implications for both clinical practice and professional management in relation to the client group and mental health.  Skills as a Senior Clinician to undertake clinical leadership roles and tasks within multidisciplinary and multi-agency contexts  A high level ability to communicate effectively at both a written and oral level complex, highly technical and clinically sensitive information to clients, their families, carers and a wide range of lay and professional persons within and outside the NHS.  Skills in providing consultation to other professional and non-professional groups.  Evidence of continuing professional development as required by the HCPC. | Highly skilled and confident in communicating complex biopsychosocial formulations to patients, the MD team, and other stakeholders.  Detailed knowledge of clinical speciality relevant to the post.  A detailed knowledge of trauma and how these experiences impact physical health with demonstrated ability to utilise in both direct and in-direct service delivery.  Advanced knowledge and awareness of cognitive functioning, neuropsychological difficulties and neurodiversity, and how this is informs clinical presentation and management.  Advanced knowledge of the influence of full life span on adjustment and coping with physical health presentations.  Advanced knowledge and experience of assessing risk and ability to demonstrate leadership and governance over the policies and procedures in the management of risk.  Ability and confidence to understand and work within the boundaries of physical health psychological interventions and liaise with and demonstrate leadership of pathway development with other services e.g. mental health, 3rd sector as required, for the benefit of patient care.  Strategic planning and leadership of clinical service-based research, audit and development. | | **PERSONAL** | A capacity to establish priorities and organise workload effectively and efficiently  Enthusiasm for a broad range of psychology phenomena, an interest in models of service delivery, and an ability to articulate the value added by psychology services within the context of multi-disciplinary mental health services  Ability to operate effectively within a team based setting at a high level | For self and others the ability to be compassionately aware of and manage the personal impact of working with complex conditions. This may include conditions where the alleviation or eradication of symptoms is not always possible.  Ability to deliver balanced and caring leadership to both enhance service delivery and team culture.  Ability to work respectfully within teams and understand the role of other professions.  Ability to be aware of, and contribute to, the well-being of staff within the multi-disciplinary team, and wider stakeholders. | | **OTHER** | Able to travel to different bases as required. | Openness and flexibility to contribute to wider acute psychology workstreams where required. | |