

***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  Band 4  AHP Team Lead  Chief AHP  Physiotherapy/ Occupational Therapy  Clyde Sector |
| 1. **JOB PURPOSE** | |
| * Assists qualified physiotherapists and occupational therapists with the delivery and implementation of individual patient treatment programmes, within hospital ward and Therapy areas. * Works independently with patients, within the agreed parameters of appropriately delegated tasks. * Carries out clerical and housekeeping duties including stock monitoring and ordering | |
| 1. **ROLE OF DEPARTMENT** | |
| To provide a high quality, person centred AHP (Allied Health Professional) service by facilitating patients function to achieve a safe and timeous discharge from acute settings, with signposting to relevant services when further intervention/rehabilitation is required.  The service strives to provide an efficient and effective service, which is underpinned with a robust evidence base where available. | |
| 1. **ORGANISATIONAL POSITION** | |
| AHP TEAM LEAD    TEAM LEAD  STATIC BAND 6 PHYSIOTHERAPISTS/ OCCUPATIONAL THERAPISTS  ROTATIONAL BAND 5 PHYSIOTHERAPISTS/OCCUPATIONAL THERAPISTS    **THIS POST**  ASSISTANT PRACTITIONER  (BAND 4) | |
| 1. **SCOPE AND RANGE** | |
| * Has responsibility for organisation, prioritisation and time management of patient caseload, as identified by more senior member of the team. * Works with and without direct supervision, within agreed scope of practice. * Uses specialised technical skills to develop and facilitate a flexible patient centred programme of assessment and treatment. | |
| 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.   + Assists the physiotherapy and/or occupational therapy team in the 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 physiotherapist and/or occupational therapist where required.   + Treats patients individually or in a group in a ward, gym or ADL (activities of daily living) suite environment.   + Act independently to assess, plan, implement, evaluate, treat and progress patient care within scope of practice, to maximise functional independence and rehabilitation potential including decision making regarding discharge from care.   + Delegate appropriate caseload and tasks to band 3 Healthcare support worker (HCSW).   + Undertakes skilled support e.g. mobility treatment progression without the presence of a physiotherapist, transfer and ADL treatment progression without the presence of an occupational therapist.   + Liaises with the physiotherapist and/or occupational therapist as necessary regarding patient care. In particular highlighting any issues out with scope of practice.   + Instructs patients and advises carers, providing direction and guidance on a range of physical therapy, mobility, transfer and ADL activities.   + Undertakes initial information gathering from patients, which may include discussion with relatives/carers and accessing relevant databases/systems.   + 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.   + Documents accurate records of work undertaken and keeps monthly statistics as required, including documenting patient contacts in line with CSP/RCOT and service standards.   + Provides stock maintenance and ordering and other clerical duties e.g. 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   + Checks equipment regularly to ensure that it meets health and safety standards and is fit for use. Repairs are arranged as necessary.   + May be asked to assist with the induction and orientation of new support workers or students or band 5 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*   + Ensures that all Statutory and Mandatory training is kept up to date. | |
| **7a. EQUIPMENT AND MACHINERY** | |
| Use a wide range of equipment during therapeutic interventions. A sample of which is noted below. It should be noted that many interventions may be carried out at home or in local community venues and staff will therefore be using a wide range of equipment as expected to be found in these areas.  * 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. * To understand, ensure safe use of appropriate additional patient care equipment, including wheelchairs and pressure cushions, hoists, stand aids, sliding sheets etc.   **Activities of Daily Living Equipment**   * Dressing, feeding, toileting, kitchen, bathing   **Treatment / Rehabilitation** E.g. Plinths, parallel bars, PPAM aid, upper limb remedial activities **Electronic Assistive Technology**   * E.g. ELINK, lightwriter, communication aids, environmental controls   **Moving and Handling Equipment** E.g. stand aids, hoists, Stedy, walking aids, wheelchairs and specialist seating **Splinting**   * Able to apply a variety of specialist splints i.e. knee extension braces, AFOs, upper limb splints and be aware of the contraindications   **Miscellaneous** E.g. flipcharts, PowerPoint projectors, laptops, TV **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. TOM’s, ACE-III * Demonstrates a working knowledge of relevant IT systems and software packages | |
| 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 physiotherapist and/ or Occupational Therapist. * Using clinical judgement undertakes non-complex interventions to decide how to complete and/ or discontinue treatment, taking into account clinical condition and 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 activities of daily living and will provide advice and recommendations to maximise functional independence and rehabilitation potential including decision making regarding discharge from care. * 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 backfindings to physiotherapist and/or 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 rotational staff and support workers * Seeks advice and guidance from more senior staff | |
| 1. **COMMUNICATIONS AND RELATIONSHIPS** | |
| **Patients and relatives/carers**  * Develops a professional rapport with patients, instilling trust and confidence * 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 e.g. patients with communication difficulties * Utilises appropriate communication methods to encourage patient engagement with treatment programmes, in individual or group settings. * 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 * Provides support, reassurance and encouragement to patients and their relatives/ carers as part of the rehabilitation process. Encourages and motivates patients 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 information regarding discharge planning to patients and relatives/ carers. * Conveys details of physiotherapy/ 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. * Provides advice and guidance to relatives and carers relating to ongoing rehabilitation programmes, discharge planning and onward referrals. * Teach a range of patient management strategies to patients and relatives/ carers. * 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 2 way communication with qualified Physiotherapy/ Occupational Therapy staff on a daily or more frequent basis. * The post holder will receive regular supervision in line with AHP supervision policy, in addition to the annual personal development planning and review * Consults more experienced/ senior staff for advice * Provides appropriate details for transfer of patient for ongoing care elsewhere. * Delegates tasks clearly to support staff * Network with appropriate colleagues * Attends and contributes to general staff meetings   **Multi-professional Team**   * Provide patient assessment findings, progress with treatment and discharge information contributing to discharge planning and decision making regarding future management * Accepts patient related information e.g. from nursing reports and passes this on to the physiotherapist/ occupational therapist   **Other Agencies e.g. Local Authority, Voluntary Sector**   * Makes referrals to appropriate agencies and provides information to support ongoing management * In keeping with policies and standards, maintains strict confidentiality regarding patient and staff information | |
| **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 Physiotherapy/ Occupational Therapy staff i.e. facilitation of movement, upper limb manipulation, sensory stimulation and tone reduction.   **Physical Demands**   * Carrying equipment to patients’ homes/wards of varying size and weight. * Safely manoeuvre patients in trolleys/ wheelchairs. * Stand/ walking for the majority of the working day. * 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 regularly 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   **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 Conditions**     * Exposure to unpleasant odours and body fluids/risk of infection. * Unsanitary houses often unpleasant to carry out home assessments in * 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, lone working in ADL suite, environmental visits and equipment delivery   or check visits. | |
| **10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB** | |
| * Undertake 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. * Able to adapt 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 * Ability to manage intervention within constraints of service * Ability to substantiate clinical reasoning when experiencing a difference of professional opinion in patients care. * Ability to deal with expectations of patients/ carers regarding frustration, aggression, denial and lack of insight. * Develop knowledge and skills in a variety of conditions within the patient groups * Dealing with demanding and uncooperative patients and relatives/carers * Being responsible to several members of staff (both within physiotherapy/ occupational therapy   and other members of the multiprofessional team) with competing demands   * Emotional demands of working with acutely unwell patients | |
| **11. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB** | |
| **Essential**   * Occupational Health Clearance * PVG Membership * High standard of written and verbal communication skills * Computer literate including use of e-mail, Microsoft Office and relevant clinical programmes * Committed to speciality * Ability to work under pressure * Excellent communication skills including public speaking * Interest in the rehabilitation process   **Desirable**   * Evidence of further qualifications * Experience in rehabilitation setting * Decision making * Leadership qualities | |

**PERSON SPECIFICATION**

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|  | **Essential** | **Desirable** |
| Good communicator – verbal and written | ✓ |  |
| Team worker | ✓ |  |
| Computer literate including use of e-mail, Microsoft Office and relevant clinical programmes | ✓ |  |
| Clear interest/ commitment in clinical area | ✓ |  |
| Demonstrates a knowledge of the principles of rehabilitation | ✓ |  |
| Demonstrates understanding and ability to motivate individuals | ✓ |  |
| SVQ level II or equivalent |  | ✓ |
| Previous NHS experience |  | ✓ |
| Experience as a therapy assistant |  | ✓ |