

JOB DESCRIPTION

Job Title:	Senior Occupational Therapist - Rotational
Band	Band 6
Care Group	Women's, Children's, Cancer and Support Services Care Group
Directorate:	Clinical Support Directorate
Department:	OPS (Older Persons Services) Therapies, UHD, In-patients
Location:	Bournemouth Hospital
Accountable to:	Therapy Clinical Leads
Accountable for:	Therapy Assistants, Junior AHPs, Patients
Main Purpose	<ul style="list-style-type: none"> To be a Senior Occupational Therapist working in the Emergency Department, Older Persons Assessment Unit (OPAU), SDEC unit (Same Day Emergency care), Older persons in-patient wards, Older persons Outliers, Interim community Team and Christchurch Day Hospital Outpatient/ Community team. To provide an efficient and effective Occupational Therapy service to patients who are elderly and are likely to have multi-pathology conditions and whose needs may be complex. To develop highly specialised skills in all aspects of rehabilitation, with a specialist interest in care of the elderly rehabilitation and admission avoidance. To contribute to developing and maintaining an effective and evidence based service. To work predominately at Royal Bournemouth Hospital, with rotations across the Bournemouth and Christchurch community, and possibility of cross-site working across University Hospitals Dorset.

General Duties

1. To be a Senior Occupational Therapist in the Emergency Department, Older Persons Assessment/ short stay Unit, Older Persons Medical wards and community teams.
2. To provide an efficient and effective Occupational Therapy Service to patients who are elderly and are likely to have multi-pathology conditions and whose needs may be complex.
3. To assess patient's level of function, set realistic goals, and implement timely Occupational Therapy treatment programmes with the aim of improving independence, function, and quality of life.
4. To expedite the safe and satisfactory discharge of patients, using intermediate care and community services, having a positive impact on the management of beds within the Trust.
5. To support the Teams by providing assessments in patient's homes following discharge from hospital and to signpost any further needs for rehab or care to the appropriate intermediate care services or care agencies.
6. To support the Teams by providing a rapid screening and assessment service to patients attending the emergency department and / or Acute Admissions Unit to prevent unnecessary admissions to hospital.

Communication and Working Relationship Skills

1. To communicate effectively with patients regarding their needs of the service, their treatment goals, likely outcomes, and discharge plans, taking into consideration communication differences and difficulties which may include but not be limited to language differences, sensory loss, dysphasia, cognitive problems and mood disturbances.
2. To communicate sensitive and unwelcome information regarding the patient's clinical needs, problems surrounding discharge and placement within the community.
3. To communicate effectively with the multi-disciplinary team at all stages of the intervention to ensure a unified approach to treatment and optimum patient care.
4. To make appropriate and clear verbal reports to other members of the multi-disciplinary team regarding the Physiotherapy or Occupational Therapy Treatment options, discharge plans and possible outcomes. To communicate with medical staff regarding patients discharge status, based on functional assessments, and the need, or otherwise, for a medical bed.
5. To liaise and communicate effectively with carers and relatives regarding Occupational Therapy Intervention, possible outcomes, discharge plans, home visits, and environmental modifications and equipment required.
6. To teach relatives, informal and formal carers, specific rehabilitation and manual handling techniques, and the use of specialist equipment prior to the patient's discharge, to ensure optimum patient care in the community.
7. To prepare written reports regarding patient's Occupational Therapy treatment, progress and future needs, to team members both within the hospital, in intermediate care and community services
8. Liaise and make appropriate written and verbal referrals to intermediate care and to voluntary and statutory services in the community, communicating verbally within limited timescales to affect a safe discharge in the shortest time possible.
9. To be responsible for the maintenance of contemporaneous patient records following Trust and

departmental policies and ensure compliance by members of own clinical team.

Analytical and Judgemental Skills

1. To work as an autonomous practitioner in the provision of Occupational Therapy (OT) assessment and treatment to patients with a wide variety of diagnosis, who have the potential to be discharged.
2. To use advanced clinical reasoning skills, make sound clinical decisions and communicate these to the MDT, determining whether the patient requires admission or can be discharged.
3. Analyse the results of the assessment to identify specific problems and use them to inform the OT process.
4. To set objective, comprehensive and realistic plans with the patient, agreeing and prioritising proposed actions with them to ensure patient ownership of programme.
5. To evaluate individual OT interventions and analyse patient responses to treatment, adapting the approach to accommodate variations in patient performance.
6. To adopt a problem solving approach to treatment and use appropriate task analysis, teaching approaches, facilitatory techniques and compensatory techniques to overcome barriers to independence.
7. To assess for environmental modifications required to assist the patient in independent living in their own environment.
8. To carry out risk assessments relating to all Occupational Therapy interventions and especially in relation to patient safety in their own environment.
9. To carry out specific multidisciplinary assessments and negotiate with the patient and take action to minimise risks, whilst facilitating patient independence in the community.
10. To make informed clinical decisions under pressure, regarding the most appropriate placement, support needed and community services required for the patient on discharge.

Planning and Organisational Skills

1. Plan and carry out Home Visits, to assess the social and environmental needs of the patients, to facilitate a prompt, safe and satisfactory discharge from hospital.
2. To organise own time, manage and prioritise own caseload and manage clinical risk of own interventions.

Responsibility for Patient/Client Care, Treatment and Therapy

1. To carry out complex assessments, identify a wide range of issues, initiate appropriate OT intervention, and solve problems under pressure and within time constraints.
2. To increase patients function, mobility, and independence using specialist skills, facilitatory methods, compensatory techniques and adaptive equipment.
3. To assess patient's level of function and facilitate a safe and satisfactory discharge when possible, in order to prevent unnecessary admission to hospital.
4. To follow up patients in the community and rapid assessment clinic, who have been identified as

requiring assessment to ensure independence and safety, and prevent re-admission.

5. To carry out initial interviews with patients to establish their needs of the service taking into account the patient's wishes, their diagnosis, prognosis, current functional status, pre-morbid level of independence and social needs.
6. To carry out a variety of baseline assessments this may be informal, formal or standardised.
These assessments will include, but not be limited to:
 - ◆ Personal Care Assessments: washing, dressing grooming, toileting, feeding.
 - ◆ Domestic Activities
 - ◆ Mobility, to include the prescription and issuing of mobility aids
 - ◆ Transfers
 - ◆ Manual Handling Requirements
 - ◆ Functional Communication
 - ◆ Cognition and Perception, mental capacity
 - ◆ Mood and Anxiety
7. To provide holistic advice and treatment, as appropriate to the individual, that broadens the scope of interventions and may include, but not be limited to:
 - Gait re-education
 - Advising on home exercise programmes
 - Issuing orthosis
 - Checking pain levels, swelling, and other complications particularly following accident/application of POP
 - Checking medication compliance
 - Advice regarding continence issues
 - Dietary advice
 - Checking blood pressures (following training)
8. To use a variety of appropriate therapeutic handling, mobility techniques, and equipment to optimise patients independence whilst ensuring the safety of patient, staff, relatives, and carers.
9. To undertake education of patients regarding lifestyle changes required to manage their condition or injury to include energy conservation and management of daily living tasks.

Responsibility for Policy / Service Development

1. Implement Departmental and Trust Policies and Procedures in own work area and ensure they are met by staff responsible to you.

Responsibility for Finance, Equipment and Other Resources

1. To assess for, prescribe, and fit a variety of equipment to facilitate independence in mobility and daily living activities to ensure a safe and satisfactory discharge.
2. To be responsible for the issuing and daily maintenance of departmental equipment ensuring the safety of patients, staff, and carers at all times.
3. To order equipment from the external contract provider to facilitate patient discharge from hospital, to a maximum sum as specified in the contract

Responsibility for Human Resources, e.g. Supervision, Training, HR Advice and Management

1. To carry out appraisals to identify training and development needs.
2. Undertake supervision, formal assessment and training of Occupational Therapy Students on placement who are undertaking a degree course.
3. To take an active role in the training of Occupational Therapy assistants, junior staff and other disciplines, as appropriate.
4. To be responsible for supervision and guidance of more junior staff as required. To allocate work as appropriate and participate in the assessment and evaluation of competence.

Responsibility for Information Resources and Administrative Duties

To complete daily administrative tasks as required by the OPS Therapy Team.

Responsibility for Research and Development

1. Take an active part in the development and ongoing review of the OT. Service and feed back to line managers any possible improvements in service that have been identified.
2. To keep up to date statistics and carry out audits regarding own clinical work. Participate in research projects as required.
3. Ensure the development of personal and professional skills by undertaking regular training activities, actively participating in in-service training and following training attended, disseminate information to relevant staff.
4. Maintain an up to date CPD Portfolio and undertake critical appraisal of current literature to ensure evidence-based practice is integrated into own clinical work and that of the team.

Freedom to Act

To appropriately use the freedom to speak up act for individuals encountered.

Mental, Physical, and Emotional Effort

- 1. Physical effort:**
To carry out patient assessments and treatments including therapeutic and manual handling activities requiring frequent moderate and occasional intense effort during the shift.
- 2. Emotional effort:**
 - (a) To deal sensitively with patients, relatives and carers who have high levels of anxiety and/or aggression caused by pain, dementia or limited ability. Frequently needs to impart unwelcome news re rehabilitation prospects. Occasional exposure to distressing circumstances.
 - (b) To provide support and advice to more junior members of staff, both qualified and unqualified, in dealing with these situations.
- 3. Working conditions:**
The job involves exposure to unpleasant working condition on a regular basis.
e.g : Bodily fluids including sputum, vomit, faeces, urine, fleas and lice. Occasional exposure to verbal and physical aggression.
- 4. Mental effort:**
Concentration required for assessment and treatments.
- 5. Freedom to act:**

Autonomous practitioner. Not directly supervised.

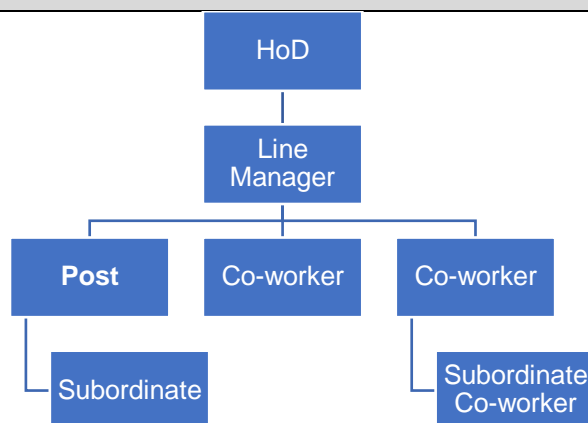
6. Physical Skill:

Uses highly skilled, precision hands on intervention reacting immediately to a patients response (continuously assessed through vision and feeling) by varying the use of manual/therapeutic handling techniques.

Any Other Specific Tasks Required

1. To be responsible and accountable for the delivery of Occupational Therapy assessment and treatment to a high professional standard in accordance with Professional Standards and Code of Ethics laid down by the College of Occupational Therapists being responsible for own activities and that of staff under supervision.
2. To participate in the staff appraisal scheme as an appraisee, establish a personal development plan and fulfil objectives set within the specified timescales.
3. To carry out duties, as appropriate, at the request of the Unit Head Occupational Therapist or Team Leader in charge.
4. To be an active member of the service rota over a seven day period.
5. To participate in on-going clinical development.
6. To provide service cover to all areas of OPS as the service need demands

Organisational Structure of Department



Transforming our Hospital Services in Dorset

This is a very exciting time to join our hospitals in Dorset. We are in line to receive a significant national investment of £201 million to help transform our services and redevelop Poole Hospital and the Royal Bournemouth and Christchurch Hospitals, now merged as University Hospitals Dorset. We have been able to access these national funds because we have such a good plan in Dorset.

Our vision is to join up our services so they can be delivered in a more integrated way. We have a great opportunity together to improve outcomes for patients, make better use of all our resources, and ensure our services can be provided on a sustainable basis.

For developing our workforce, the aim is to establish modern, well-equipped centres of excellence with sustainable roles for staff, standardisation of education and training so that we can attract and retain skilled clinical and non-clinical staff to Dorset. This is a great opportunity for you to be part of the transformation change activity taking place following the merger of two hospital trusts to form University Hospitals Dorset NHS Foundation Trust last October.

Partnership with Bournemouth University

We are proud to be affiliated with Bournemouth University, and working closely in partnership with them, this provides us with the opportunity for establishing joint posts, shared learning and training, sharing facilities, and joint project work.

CONDITIONS OF SERVICE

As laid down by the University Hospitals Dorset NHS Foundation Trust.

Smoking

The Trust has a responsibility to provide a safe and healthy environment for everyone who is working, visiting or living on hospital premises. Smoking is NOT allowed on site except for within the designated smoking areas and shelters for staff and patients.

The Trust will not tolerate smoking in undesignated areas and there is a zero tolerance approach to all staff who continue to do so. We will continue to provide support to staff, patients and visitors who want to give up smoking.

In the interests of promoting responsible healthcare all staff should refrain from smoking when off-site in uniform or wearing an identifying NHS badge in any public place.

Data Protection

All staff are required to comply with the Data Protection Act and the Trust's Data Protection Policy. Staff are responsible for ensuring that any personal data which they hold is kept securely; that personal information is not disclosed either orally or in writing to any unauthorised third party; that personal data is only accessed where there is a legitimate business need and only where such processing is consistent with the purposes for which the data was collected.

Equality and Diversity

The Trust is positively committed to the promotion and management of diversity and equality of opportunity. Equality and diversity is related to the actions and responsibilities of everyone – users of services including patients, clients and carers; work colleagues; employees; people in other organisations; the public in general.

All employees have a responsibility to ensure that they act in ways that support equality and value diversity and must comply with the responsibilities placed upon them by employment legislation and the equality duties.

Health and Safety at Work

Everybody within the Trust has a legal responsibility for the health, safety and welfare of themselves and others at work. These duties are set out within the Health and Safety at Work etc. Act (HASAWA) 1974, the Management of Health and Safety at Work Regulations (MHSAWR) 1999, and in other relevant regulations and guidance notes.

All Staff

In accordance with HASAWA and the Trust Health & Safety policy, all staff have legal responsibilities;

- to take reasonable care for themselves and others that may be affected by their acts/ omissions
- to co-operate with their manager/ supervisor to enable them to carry out their legal duties e.g.
 - shall report all hazards and defects to their line manager/ supervisor
 - shall report all accidents, incidents, near-miss events to their manager/ supervisor and via an adverse incident report (AIR) form (Trust policy)
- to use all work equipment, materials and substances in accordance with any training and instruction provided (e.g. medical devices, chemicals, mechanical aids, machinery, plants, vehicles, and personal protective equipment)
- to ensure they attend all annual mandatory training and attend health and safety training as required for the post.
- to comply with trust and department health, safety & risk policies and procedures
- not to interfere with or misuse anything provided to secure health and safety .e.g. wedge fire doors open, remove first aid equipment, break locks off systems

All Managers/ Heads of Department and Clinical Leaders

In accordance with the Trust's Risk Assessment policy and Risk management strategy, all managers/heads of department and Clinical Leaders are responsible for ensuring that they and their staff, comply with all Trust and department health and safety policies and procedures.

Safeguarding

The University Hospitals Dorset NHS Foundation Trust is fully committed to safeguarding the welfare of all children and young people, and vulnerable adults by taking all reasonable steps to protect them from harm. All staff will receive appropriate training and induction so that they understand their roles and responsibilities and are confident about carrying them out.

Infection prevention and control

The prevention and appropriate management of infection is of paramount importance in the quality and safety of the care of patients, and to the safety of visitors and members of staff. It is the responsibility of all staff to be aware of, assess and minimise these risks and comply fully with Infection Prevention and Control Policies.

The Health Act 2008 establishes a Code of Practice for the Prevention and Control of Health Care Associated Infections. It sets out criteria by which NHS managers ensure that patients are cared for in a clean environment, with a safe water supply, where the risk of Healthcare Associated Infections (HCAI) is kept as low as possible.

Managers, Heads of departments and Clinical Leaders are responsible for ensuring that:

- The necessary equipment and mechanisms are in place to support infection prevention
- health care workers are free of and are protected from exposure to communicable infections during the course of their work, and that all staff are suitably educated in the prevention and control of HCAI

Carbon sustainability

The Trust is committed to continual improvement in minimising the impact of its activities on the environment and expects all members of staff to play their part in achieving this goal and in particular to work towards a 28% reduction in carbon emissions by the end of 2020/21 (based on a 2013 baseline).

DBS/Disclosure and Barring Service (CRB)

As part of our recruitment procedure this post will be subject to a Criminal Record Disclosure. A Disclosure is a document containing information held by the police and government departments. Disclosures provide details of a person's criminal record including convictions, cautions, reprimands and warnings held on the Police National Computer. Where the position involves working with children, Disclosures will also contain details from lists held by the Department of Health and Social Care and the Department for Education and Skills (DfE) of those considered unsuitable for this type of work.

This post is subject to the policies, procedures and rules approved by the Trust and as varied from time to time. All staff are required to familiarise themselves with, and comply with the Trust's policies, procedures, rules or statements of practice. These can be accessed through the Intranet, your Department Manager, or through Human Resources.

Job Description Agreement

All job descriptions which are developed for job matching purposes must be signed by both the line manager and the staff member and the effective date of when the role changed entered. Please see re-grading and job evaluation policy.

Any job descriptions amended or updated through the results of a personal review should also be signed and dated by both the line manager and staff member and a copy retained on the personal file.

Signed..... Date.....Manager

Signed.....Date.....Employee

Review of this Job Description

This job description is intended as an outline indicator of general areas of activity and will be amended in the light of changing service needs. This job description will be reviewed in conjunction with the post holder on an annual basis at appraisal.

Version 4