**Claypath and University
Primary Care Network**

**Job Description
First Contact Physiotherapist**

Hours of duty: Full-time/Part-time

Responsible to: Primary Care Network Clinical Director

Employer: Claypath and University Medical Group

Pay: £38,890 - £44,250 p.a. WTE (within NHS Agenda for Change Band 7)

The First Contact Physiotherapist will be employed by the Claypath and University Medical Group through the Claypath and University Primary Care Network. Direct line management and supervision will be provided by the PCN Clinical Director.

**Job Purpose:**

First Contact Physiotherapists operate at an advanced level of clinical practice, with skills to assess, diagnose, treat and manage musculoskeletal (MSK) problems and undifferentiated conditions. This involves seeing patients, without prior referral from their GP, to establish a rapid and accurate diagnosis and management plan, thus streamlining pathways of care. The First Contact Physiotherapist will work independently in clinical practice and will not require day to day supervision. Patients can either self-refer or be referred by PCN and practice multi-disciplinary team members.

The post holder will comply with the organisation’s policies and procedures.

**Main Duties and responsibilities:**

a. To work as part of a multi-disciplinary team in a patient facing role, using expert knowledge of Musculoskeletal (MSK) issues, to create stronger links for wider MSK services through clinical leadership, teaching and evaluation skills.

b. To assess, diagnose, triage and manage patients, taking responsibility for the management of a complex caseload.

c. To receive patients who self-refer (where systems permit) or from a clinical professional within the PCN or practice multi-disciplinary team.

d. To progress and request investigations (such as x-rays and blood tests) and referrals to facilitate diagnosis and choice of treatment regime, understanding the limitations of investigations, interpret and act on results and feedback to aid diagnosis and the management plans of patients.

e. To develop integrated and tailored care programmes in partnership with patients and provide a range of first line treatment options, including self-management and referral to rehabilitation focused services and social prescribing provision. The programmes will facilitate behavioural change, optimize patients’ physical activity and mobility, support fulfilment of personal goals and independence and reduce the need for pharmacological interventions.

f. To develop relationships and a collaborative working approach within the PCN and practice multi-disciplinary team supporting the integration of pathways in primary care.

g. To develop and make use of scope of practice, including skills relating to independent prescribing, injection therapy and investigation.

h. To provide learning opportunities for the whole multi-professional team within primary care, as determined by the PCN. To work across the multi-disciplinary team to develop and evaluate more effective and streamlined clinical pathways and services.

i. To liaise with secondary care MSK services, community care MSK services and local social and community interventions as required, to support the management of patients in primary care.

j. Using professional judgement, to take responsibility for making and justifying decisions in unpredictable situations, including in the context of incomplete/contradictory information.

k. To manage complex interactions, including working with patients with psychosocial and mental health needs, referring to social prescribing when appropriate.

l. To communicate effectively and appropriately, with patients and carers, complex and sensitive information regarding diagnosis, pathology, prognosis and treatment choices supporting personalized care.

m. To implement all aspects of effective clinical governance for own practice, including undertaking regular audit and evaluation, supervision and training.

n. To be accountable for decisions and actions via Health and Care Professions Council (HCPC) registration, supported by a professional culture of peer networking/review and engagement in evidence-based practice.

o. To encourage collaborative working across the health economy and be a key contributor to the PCN providing leadership and support on MSK clinical and service development across the network.

p. To support regional and national research and audit programmes to evaluate and improve the effectiveness of the FCP programme. This will include communicating outcomes and integrating findings into own and wider service practice and pathway development.

q. To develop integrated and tailored care programmes in partnership with patients through:

* effective shared decision making with a range of first line management options (appropriate for the person’s level of activation);
* assessing levels of Patient Activation to confirm levels of knowledge, skills and confidence to self-manage and to evaluate and improve the effectiveness of self-management support interventions, particularly for those at low levels of activation; and
* agreeing appropriate support for self-management through referral to rehabilitation focused services and social prescribing provision. These programmes will facilitate behavioural change, optimize patient’s physical activity and mobility, support fulfilment of personal goals and independence and reduce the need for pharmacological interventions.

Additional tasks:

Other duties as dictated by changes in the Primary Care Network and the Claypath and University Medical Group.

**First Contact Physiotherapist Person Specification:**

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| ***Qualifications and Training*** |
| **Essential** | **Desirable** |
| * Completed an undergraduate degree in Physiotherapy
 | * Minimum 4 years postgraduate experience with at least 2 years at specialist MSK level
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| * HPC Registration
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| * Evidence of postgraduate training to Masters equivalent level
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| * Relevant student training course or qualification
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| **Experience and Knowledge** |
| **Essential** | **Desirable** |
| * Hold IRMER training and competency for requesting x-ray investigations
 | * Membership of professional body and specialist interest group
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| * Sound evidence of CPD and reflective practice
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| * Sound knowledge of current best practice in specialist physiotherapy area
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| * Knowledge of professional ethics and their application in practice
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| * Sound knowledge and understanding of health, safety and risk management
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| ***Skills and Abilities*** |
| **Essential** | **Desirable** |
| * Excellent communication skills (verbal and non-verbal)
 | * Supervisory skills and/or first line management experience
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| * Excellent group working and team working skills
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| * Audit and/or research skills
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| * Knowledge and application of the principles of clinical governance
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| * Good computer skills
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| * Developed analytical and problem solving skills
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| * Ability to reflect and critically appraise own performance and that of others
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| * Ability to organize and respond to complex information, and work under pressure
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| * Good interpersonal and organizational skills
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/GPB

September, 2020