EXTENDED SCOPE PHYSIOTHERAPIST - ORTHOPAEDICS
Queen Elizabeth University Hospital

Job Reference: 0000052510G
Closing Date: 13 July 2018

www.nhsggc.org.uk
Dear applicant,

Thank you for your interest in this post and for taking the time to read this information pack. We hope this exciting and rewarding role catches your imagination and that you are encouraged to apply.

As the largest Health Board in Scotland, NHS Greater Glasgow and Clyde plays a vital role in the education and training of doctors, nurses and other health professionals, working closely with local universities and colleges. It also provides the full range of community hospital services. The Board has an annual turnover of £3.337 billion per year. It serves a population of 1.14 million people and employs 39,286 staff.

The following is included in this information pack to help you with your application:
- Job description
- Person specification
- A summary of the terms and conditions for the post
- Agenda for Change pay bands and points
- The application process
- Guidance for completing your application form
- Working for NHS Greater Glasgow and Clyde

If you have a disability or long-term health problem, the Board is committed to offering reasonable adjustments throughout the recruitment process and employment. If you require further information or support, please contact Recruitment Services.

We very much look forward to receiving your application.

Recruitment Services
JOB IDENTIFICATION

Job Title: Extended Scope Physiotherapist Practitioner (ESP): Orthopaedics

Responsible and Accountable: Clinical Director, Orthopaedics, Chief AHP south, ESP team lead

Department(s): Orthopaedic Clinics and Physiotherapy Departments

JOB PURPOSE

- To work as an autonomous expert musculo skeletal practitioner within the orthopaedic clinic setting, utilising highly developed specialist knowledge to work out-with the normal scope of physiotherapy practice, delivering a 'one-stop' model of Orthopaedic management for patients referred for a specialist opinion.
- To provide highly specialised clinical diagnosis and determine appropriate orthopaedic management needs e.g. listing for surgical operation, onward referral to other medical specialities, and identification of rehabilitation needs or discharge.
- To independently triage referrals to the orthopaedic service, determining patients’ assessment needs, level of urgency and ensure listing onto the most appropriate clinic.
- To maintain a physiotherapy clinical caseload of patients with complex musculoskeletal conditions and management needs.
- To provide advanced clinical opinion to managers which assists the strategic direction of the orthopaedic and physiotherapy services across the whole organisation utilising the principles of clinical governance.
- To act as a source of clinical expertise on the management of musculoskeletal disorders within the physiotherapy service, orthopaedic teams and to other health care professions

ORGANISATIONAL POSITION

Service Line Manager
Professional Line Manager
Musculo-skeletal Link
Communication links

AHP Lead, Surgery and Anaesthetics
Team Lead Physio
Extended Scope Physiotherapist Practitioner (ESP): Orthopaedics
Orthopaedic Inpatient SGH/VIC
Musculoskeletal Outpatient Department
- Highly Specialist Physiotherapist
- Experienced Rotational Physiotherapist
- Physiotherapist Rotational
- Technical Instructor

Professional Lead Physiotherapist
SCOPe AND RANGE

- To have freedom and authority to plan, co-ordinate and deliver a streamlined one stop care for patients referred to the orthopaedic service by working independently as part of the orthopaedic team.
- Working out with normal scope of physiotherapy: to have freedom and authority to request and interpret necessary specialist investigations e.g. MRI, X-ray, nerve conduction studies or haematology to confirm a clinical diagnosis and determine optimal future patient management plan.
- To inform patients of risks, benefits, and outcomes of surgical procedures from the up-to-date literature of such procedures, and with patient verbal consent, place on waiting list for surgical intervention.
- To continually demonstrate necessary clinical competency of expert extended scope practice through established competency framework i.e. case study reviews with consultants and examination of practice through direct observation and questioning.
- To function as a ‘gatekeeper’ for patients attending for physiotherapy but requiring more specialised orthopaedic opinion, which may include further investigation and/or operation.
- To be an expert clinical lead and resource, using advanced clinical reasoning skills, to provide specialist support and advice to physiotherapy and other clinical staff within and outside the organisation whilst maintaining a clinical caseload of highly complex patients as an autonomous practitioner.
- To identify clinical research, audit and data collection priorities within area of expertise to drive clinical development strategy.
- To regularly present developments in the service at local and national level.

MAIN DUTIES/RESPONSIBILITIES

Clinical

- To act independently, often as the sole contact a patient has with the orthopaedic specialty, and be accountable and fully responsible for their management.
- To assess and analyse highly complex clinical / non-clinical information and through the process of advanced clinical reasoning thereby provide a comprehensive orthopaedic diagnosis and determine appropriate future management for individual patients. This frequently includes patients with highly complex presentations.
- To request and interpret the results of specialist investigations (e.g. x-rays, blood tests, MRI, EMG) to assist the formulation of diagnosis and plan patient management.
- To discharge patients to other departments and medical colleagues within or outside the trust as necessary based on investigation results and expert clinical assessment e.g. referral to oncology, rheumatology, physiotherapy and pain clinic.
- To use highly developed specialised knowledge of Orthopaedic surgical procedures to determine patient requirement for surgical intervention and list for appropriate procedure.
- To identify potential surgical risks, due to co-morbidities, and refer onward for medical opinion e.g. vascular, cardiology and respiratory, and utilise the information to list suitable patients for surgery.
- To provide written orthopaedic reports following patient assessment, outlining clinical findings, diagnosis, specialist clinical opinion and recommendations to medical colleagues and all referral sources.
- To provide highly specialist opinion to patients, carers, relatives, occupational health departments, other health care professionals and medical colleagues to co-ordinate overall patient management.
To manage own caseload of physiotherapy patients presenting with complex musculoskeletal conditions utilising expert assessment and treatment skills.

Within physiotherapy department, provide expert opinion on diagnosis and clinical management of musculoskeletal conditions for physiotherapy staff and instigate orthopaedic intervention if required.

To be aware of the boundaries of own extended practice, and to manage the associated clinical risk effectively at all times.

To ensure safe and competent use of specialised skill in line with national guidelines e.g. manipulation, acupuncture and joint injection.

To propose the use of novel equipment, which will develop practice, to the clinical lead and management team, and to contribute to the appraisal and evaluation of any new equipment used in the clinical setting (e.g. KT1000 knee ligament arthrometer).

To identify and audit appropriate outcome measures and service impact measures, which accurately evaluate patient response and service development needs.

To be professionally and legally responsible and accountable for all aspects of the practitioner’s professional activities.

To comply with Divisional and Departmental policies in addition to complying with Chartered Society of Physiotherapy Professional Standards and Code of Conduct.

Managerial

To be independently responsible for triage of orthopaedic referrals to ensure that patients referred for orthopaedic opinion are seen at the most appropriate clinic.

To have a lead role and responsibility for adapting ESP clinic service provision in order to ensure the orthopaedic service meets national waiting time targets.

To develop and lead new and innovative pathways of care to ensure patients receive timely access to specialist services e.g. acute knee clinic.

May assist the management team in the recruitment of staff as a clinical specialist panel member within and out with the division.

To flexibly manage responsibility for own highly complex clinical caseload, departmental and external teaching, service development and quality assurance.

Service development

To provide specialist clinical opinion, as required, in the development of clinical policy and service development within the physiotherapy and orthopaedic departments.

To instigate and lead new innovative developments which impact on other services e.g. acute knee clinic, injection clinic.

Maintain and contribute to the responsibility and accountability for monitoring and adapting service provision within the Orthopaedic Directorate to ensure efficient and effective service delivery.

To ensure that Orthopaedic Extended Scope Physiotherapy (ESP) service responds to and supports national and local directives, e.g. Scottish Executive waiting time targets, service redesign in collaboration with the Centre for Change and Innovation (CCI), the National framework for service change (NSF), and National Institute for Clinical Effectiveness (NICE).

To contribute to cross boundary working and promote the role of the ESP across the organisation, district and nationally.

Plan the future development and ensure the progress of the extended scope physiotherapy service with the Orthopaedic Consultants and physiotherapy managers.
Education
To take an active role in special interest groups relevant to the area of musculoskeletal physiotherapy and extended scope of practice and lead training/study sessions. To assist the clinical lead physiotherapist and senior physiotherapists in cascading information from these groups and incorporating their priorities into local practice.
To provide highly specialist advice clinical teaching and training to peers, medical colleagues and other health professionals within the clinical areas, across trust and out with the organisation (e.g. GPs, A & E staff, SHO’s, external ESPs.) to promote knowledge of physiotherapy or alternative management options to enhance patient care.
To provide spontaneous and planned expert clinical leadership and support to staff within the orthopaedic department and physiotherapy out patient departments to facilitate their learning and further development of their clinical reasoning skills.
To act as a PDP advisor and undertake staff PDP reviews within physiotherapy in conjunction with the management team.
Lead, undertake and support clinical research to extend professional practice, devise or test new clinical benchmarks, outcome measures and clinical indicators
Disseminate and facilitate the communication of recent and relevant orthopaedic and musculoskeletal research between the orthopaedic and physiotherapy services.
To use and individualised Continuous Professional Development (CPD) portfolio to guide KSF review and personal development plan.
To ensure that clinical practice incorporates current research and evidence based practice.

Research
- To use knowledge of current evidence and practice to identify, facilitate and carry out clinical audit/research, thus improving provision of care and ongoing development of the service in both the orthopaedic and physiotherapy environment.
- Participate in joint research/audit ventures with specialist medical colleagues identifying areas of research need and therefore developing clinical guidance and improving provision of service e.g. continued passive motion (Randomised Controlled Trial), Anterior Cruciate Ligament (ACL) rehabilitation and Topaz Trial.
- To disseminate the results of audit/research and expert practice at local, regional, national and occasionally international level and pursue publication.
- Ongoing collection of information to large database enabling regular complex audit reports to be compiled for orthopaedic and physiotherapy services.

SYSTEMS AND EQUIPMENT
- To be responsible for maintenance of accurate written records using Problem Orientated Medical Records (POMR) system and/ or use of a computerised diary. This will also include comprehensive progress and discharge reports to medical referrers, and/ or medico-legal and disability reports.
- To demonstrate a working knowledge of relevant IT systems and software packages as required; e.g. Patient Information Systems (CIS), Physio Tools, Greater Glasgow Back Pain Service (GGBPS) database and Patient records / medical notes Biochemistry and haematology results, X-ray, MRI, ultrasound, bone scan reports, Nerve conduction test results Medline and relevant literature search databases
- To daily update and maintain accurate statistical information in specialist area using databases as necessary to inform management team and drive audit programme.
To understand and ensure safe use of Physiotherapy equipment including:

- **Walking Aids**: mobilators, zimmers, delta frames, elbow crutches, quadrapods, sticks, specialist, walking frames.
- **Manual Handling Equipment**: mechanical hoists, sliding boards, glide-sheets, turning discs, stand aid etc.
- **Electrical Equipment**: TENS units, muscle stimulators, EMG biofeedback units, ultrasound, laser, Interferential, curapulse, short wave diathermy, continuous passive movement machines.
- **Supports**: Full range of appliances and orthoses.
- **Rehabilitation Equipment**: Treadmill, exercise bicycles, steppers, isokinetic equipment, multi-gym, weights, traction bed, plinths, parallel bars, balance boards, gymnastic balls, wobble cushions, blocks, stairs, full range of small exercise equipment.
- **Thermal Equipment**: Hot packs, Ice, cryocuff.
- **Acupuncture**: needles, sharp boxes.
- **Measurement Equipment**: pressure biofeedback, goniometer, dynometer.
- **IT Equipment**: Personal computer, data projector.

**DECISIONS AND JUDGEMENTS**

- Assessment and analysis of highly complex clinical and non-clinical information, utilising highly advanced clinical reasoning, to provide a comprehensive specialist clinical diagnosis for individual patients, thus determining their future management e.g. list for surgery, referral to other specialities or discharge.
- In physiotherapy setting, upon reaching diagnosis, use highly developed clinical reasoning and highly advanced therapeutic skills, to decide appropriate goals and treatment plan.
- Working out-with scope of practice to arrange appropriate further investigation e.g. MRI, haematological investigation, and interpret results to confirm diagnosis and decide future management requirements.
- Take full responsibility for requesting and interpreting appropriate x-rays (which are not formally reported) in relation to orthopaedic assessment and diagnosis. Only requesting formal reporting when sinister or unusual pathology is apparent.
- To provide an expert opinion regarding suitability for orthopaedic intervention (e.g. surgery), to GP’s, other medical specialities and physiotherapy colleagues.
- Responsibility for ESP orthopaedic service provision to assist orthopaedic service responds to waiting list demands and meets national waiting time targets. Frequently having to re-evaluate and adapt clinic time-tables/templates.
- Provide an expert clinical resource to colleagues in physiotherapy department and frequently provide expert opinion as to whether continued physiotherapy treatment, further investigations or orthopaedic surgical intervention is required.

**COMMUNICATIONS AND RELATIONSHIPS**

**Patients and Relatives/Carers**

- To provide appropriate advice on future management based on highly developed specialist knowledge, for patients with complex chronic conditions for which there are no further surgical management options e.g. failed back surgery or medically unfit for surgery.
- On a daily basis, to use expert knowledge and highly developed inter-personal and communication skills to communicate highly complex, sensitive and often contentious or potentially distressing information to patients, relatives and carers regarding diagnosis, prognosis and outcome of orthopaedic management e.g. unsuitability for surgery, chronic illness requiring self management.
To expertly and effectively communicate the advantages and risks of orthopaedic surgery to the patient, relative and/or carer, and explain the procedure of the required surgery at a level of understanding sympathetic to the patient prior to listing them for surgery.

To utilise highly developed communication and interpersonal skills to change a patient’s attitudinal and behavioural beliefs towards their condition and facilitate an active patient role in their overall management. e.g. patients with chronic pain, obesity/weight management problems, or where surgical intervention is not possible.

To convey comprehensive detail of patient treatment care appropriately for every individual, taking into consideration their physical, emotional and cognitive ability, emphasising and reiterating points to ensure a full understanding. This includes negotiation, motivation, non-verbal or written skills and the ability to explain complex information and terminology in lay terms.

To utilise expert communication and negotiation skills in order to exert change in patient’s belief and expectations that they traditionally would have been seen by an orthopaedic consultant.

Identifies and modifies the most appropriate communication method, to convey complex and sensitive information to patients and carers, where there may be barriers to communication e.g. language barriers requiring the use of interpreters.

Occasionally required to diffuse potentially hostile and antagonistic situations with patients and relatives using highly developed negotiation and interpersonal skills in an emotive atmosphere.

To compile medical and legal reports.

Multi-professional Team

On a daily basis, effectively liaise with Orthopaedic Consultants, other speciality Consultants e.g., Cardiologists, Rheumatologists etc, medical colleagues, Clinic personnel, Radiology Staff, Administration and Clerical staff, Management Teams, and Physiotherapy colleagues to ensure delivery of streamlined ‘one-stop’ patient care.

To provide and receive highly complex, sensitive information relating to a patient’s diagnosis and management plan with medical colleagues at times where evidence underpinning practice may be conflicting, and negotiate when various management options are available.

To engage in high level theoretical and clinical discussion with specialist orthopaedic colleagues.

Through effective communication implement and develop new models of orthopaedic care in an environment of potential resistance offered by staff accustomed to traditional medical models of care.

Provide highly specialist comprehensive written reports summarising patient assessment, diagnosis and recommendation for ongoing management in order to inform referral source and/or patient GP.

Effectively impart expert clinical knowledge and advice to Physiotherapy colleagues within and out with the trust to assist and guide appropriate patient management.

To impart complex/advanced information to highly specialised medical colleagues and MDT members using a variety of communication methods e.g. ‘weekly orthopaedic directorate- and education meetings’ and ‘monthly orthopaedic audit meetings’.

To advise patients, employers and occupational health departments on the appropriate time to return to work, sport and other activities.
Service Delivery
- To communicate any new developments in service delivery with service users such as Physiotherapists, GP’s, A&E staff and other specialities.
- To promote the ESP role and service delivery at district, national and occasional international level e.g. Centre for Change Innovation Out-patient Programme, involvement with Scottish Executive and international conference presentation.
- When required, respond appropriately to verbal and written complaints within the orthopaedic directorate and be well versed in the Trust’s formal complaint’s procedure.
- Represent ESP service in MDT steering groups e.g. Back Pain Pathways.

PHYSICAL SKILLS/DEMANDS OF THE JOB

Physical
- To demonstrate the highly developed dexterity, co-ordination and palpatory sensory skills necessary for assessment and manual treatment of patients, including complex manual therapy techniques e.g. spinal manipulation, therapeutic handling and use of specialised physiotherapy equipment. **Frequent**
- To carry out repeated musculoskeletal assessments, on a daily basis, involving manual handling. This requires moderate physical effort in confined clinic space with added potential strain from fixed plinth heights, no natural light or ventilation. **Frequent**
- Assisting with patient transfers to and from clinic area and on/off assessment plinth. **Frequent**
- Setting up and use of both gym and electrotherapy equipment in the out-patient physiotherapy department **Frequent**
- Significant element of walking and standing for majority of the working day. **Frequent**
- Daily short periods of time using IT equipment – requiring self awareness of postures and positioning of equipment. **Frequent**.

Mental
- To work in an environment where daily there is a frequent, highly varied, complex caseload. Therefore there is the need for prolonged and intense concentration during assessment/examination, synthesis and assimilation of various sources of information, for each patient, during the clinic session. (3.5 hours). **Frequent**
- To work in an environment where there is a high degree of unpredictability causing prolonged mental effort e.g. orthopaedic clinic time demands due to factors out with control including delay with patients waiting for x-ray, patient transport. **Frequent**
- To work in an environment where as an ESP the daily working patterns are frequently disrupted by demands from patients, medical staff, clinic staff, students, and administrative support staff often requiring immediate decisive action. **Frequent**

Emotional
- To display expertise in sensitively explaining the results of investigations including the possible need for surgery and poor prognosis (**Frequent**) and existence of possible fatal pathology e.g. tumour. (**occasional**)  
- To utilise the highest ability of knowledge and expertise in the management of patients with chronic conditions who have high expectations and demands of the orthopaedic service. Occasionally where required, be able to diffuse anxious and aggressive behaviour.
when patient’s expectations do not match the orthopaedic opinion/outcome. **Frequent**

Dealing with:
- Patients who have chronic and/or progressive condition **Frequent**
- Dealing with friends/family **Frequent**
- Patients who are in pain (acute and chronic) **Frequent**
- Anxious, distressed, emotionally labile patients **Frequent**
- Patients who are depressed **Frequent**
- Patients who have severe injury/loss of function **Frequent**
- Undertaking distressing examination assessment techniques and administering treatment, which may increase pain levels **Frequent**

**Working Conditions**
- Direct exposure to open wounds **Occasional**
- Direct exposure to body fluids e.g. urine, faeces, blood, sputum **Occasional**
- Direct exposure to transmissible diseases and infections **Occasional**
- Dealing with abusive patients or carers – this may be physical or verbal **Occasional**

**MOST CHALLENGING/DIFFICULT PARTS OF THE JOB**
- Accountability and sole responsibility regarding patient diagnosis and management plan e.g. listing for surgery, onward referral to another speciality, discharging from clinic. ESP’s frequently are the sole contact that a patient has within the orthopaedic service when seeking an expert opinion.
- The level of clinical reasoning and decision making involved in synthesizing and analysing all the clinical and non clinical information, ranging from examination, blood results, x-rays etc, in order to determine diagnosis and best management options.
- Working within many different orthopaedic consultant teams with their differing opinions and preferences towards patient care
- Balancing clinic demands of time pressure, through put of patients, external factors e.g. radiology/patient transport with need to maintain evidence based practise and research priorities.
- Dealing and challenging pre-conceived opinions, attitudes and beliefs of other health professionals regarding ESP’s seeing patients previously seen by orthopaedic consultants.
- Participating in multi-disciplinary teams, discussions ensuring a professional opinion is expressed, which other experienced members of the team may not agree with.
- Dealing with patients pre-conceived expectations of orthopaedic appointment and outcome e.g. lack of awareness of extended scope practitioner role, no surgical intervention required.

**KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB**
- Degree or diploma leading to Physiotherapy HPC registration.
- Current HPC registration.
- Minimum of 7 years of post-graduate experience.
- Minimum of 5 years experience in musculoskeletal outpatients, with at least 3-4 years at Senior I level.
- Evidence of specialist post-graduate courses/CPD relevant to the specialty i.e. Society of Orthopaedic Medicine, McKenzie, MACP.
- Advanced knowledge and expertise in a wide range of musculoskeletal and medical conditions.
• To display highest level of clinical knowledge and experience in musculo-skeletal assessment, examination, clinical reasoning and management.

• Highly advanced knowledge of complex pain syndromes.
• To have in-depth knowledge of the indications and contraindications for orthopaedic surgical intervention and the risks and benefits of such surgical procedures.
• To have highly developed inter-personal and communication skills.
• To have, further improve and develop extensive knowledge of complex multiple pathologies and numerous specialist services e.g. Rheumatology, Specialist Pain Management Programme.
• In order to function as an autonomous highly specialised practitioner, additional formalised extensive in-house and accredited external training will be required to develop specialist knowledge of orthopaedic conditions and their management (see box below).

Examples of Additional Training Required:
• Radiology requesting and x-ray interpretation
• Surgical procedures, risks and complications
• Nerve Conduction Studies
• Injection Therapy
• Haematology (blood requests)
• Vascular Assessments

• Maintenance of expert physiotherapeutic skill level to fulfil roles of clinical expert, resource and clinical educator.
• To utilise highly advanced clinical effectiveness and research skills combined with highly specialised clinical knowledge base to guide and drive practice development and level of excellence within both physiotherapy and orthopaedic departments.
• Completion of statutory annual training requirements e.g. fire safety, moving and handling and immediate life support.
• Competent knowledge of IT e.g. Power point, Internet, data base management, statistic analysis, literature searches.
Person Specification:

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<th>Qualifications / Training</th>
<th>Essential</th>
<th>Desirable</th>
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<tr>
<td>Diploma / Degree Physiotherapy</td>
<td>HPC Registration</td>
<td>• Validated training at MSc or equivalent relevant to the field.</td>
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<td>Evidence of specialist postgraduate courses / CPD relevant to the specialty. i.e. Cyriax, MACP</td>
<td>• Clinical Educators/Supervisors Course</td>
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<td>• Publications within the field, in peer recognised journals/periodicals</td>
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<th>Experience</th>
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<td>Minimum of 7 years post-graduate experience. 5 years in musculo-skeletal and 3-4yrs at Senior I level within this specialty.</td>
<td>Minimum of 8 years post-graduate experience, with a minimum 5yrs working at Senior I level within the designated area.</td>
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<td>Evidence of clinical expertise in practice within the specialty.</td>
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<th>Knowledge, skills and Abilities</th>
<th>Essential</th>
<th>Desirable</th>
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<tr>
<td>Extensive knowledge and experience of musculo-skeletal physiotherapy practice.</td>
<td>Audit experience</td>
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<td>In-depth knowledge of Orthopaedic Practice.</td>
<td>Presentation skills</td>
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<td>Excellent Interpersonal and Communication Skills</td>
<td>Proven Research experience</td>
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<td>Evidence of Critical appraisal skills. Ability to identify research needs</td>
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<td>High standard of organisational and managerial skills</td>
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<td>Realistic Awareness of competencies and willingness to seek advice/assistance.</td>
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<td>Working knowledge of IT e.g. word processing, internet use and database management.</td>
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<th>Personal Qualities</th>
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<td>Clear vision of role /commitment to speciality</td>
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<td>Confident / motivated / driven and enthusiastic</td>
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<td>Experience of multi-professional working</td>
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<td>Committed to personal and team development</td>
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<td>Forward thinking</td>
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Summary of terms and conditions

The terms and conditions of service are those approved and amended from time to time by the National Agenda for Change Terms and Conditions Agreement.

Job title: Extended Scope Physiotherapist - Orthopaedics
Job reference number: 0000052510G
Closing date: 13 July 2018
Vacancy enquiries to: For information specific to the role, contact: Lynn Smyth, 0141 211 5854
Agenda for Change band: Band 7
Salary: Please refer to Agenda for Change Payscale on the following page. All values are per annum (pro rata where applicable). Please note candidates new to the NHS should expect to start at the entry point of the payscale shown.
Hours: 37.50 hours per week
Base: Queen Elizabeth University Hospital
Contract type: Permanent
Annual leave: The basic annual leave entitlement in a full year commencing 1st April to 31st March is 27 Days on appointment, rising to 29 days after five years and 33 days after 10 years. Leave entitlement is pro rata where applicable.
Superannuation: All employees are automatically enrolled in the Scottish Public Pensions Agency.
Healthcare Support Workers: All NHS Scotland postholders that are not governed by a regulatory or professional body are considered to be healthcare support workers. On appointment, you will be expected to comply with the NHS Scotland Mandatory Induction Standards and Code of Conduct for Healthcare Support Workers.

Healthcare Support Workers are expected at all times to practice competencies that demonstrate insight, understanding and mutual respect of patients, their families, carers and work colleagues. Whether in a clinical or non-clinical role the post holder is expected at all times to be an exemplar of person centred care, embracing their Code of Conduct to a high standard as part of an integrated health professional team.

Smokefree policy: NHS Greater Glasgow and Clyde operates a smokefree policy on all premises and grounds.
Equal opportunities: NHS Greater Glasgow and Clyde is as an equal opportunities employer.
# Agenda for Change pay bands and points

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<th>Band 1</th>
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The Application Process

Please ensure you read the Job Description and Person Specification along with the guidance notes on completing your application form. The hiring manager will shortlist an application for interview based on its content, therefore it is in your best interests to ensure you submit a fully and appropriately completed application.

You will receive confirmation that your application submission has been received when you submit your online application form. When we begin to process your application, you will receive an email from NHS Greater Glasgow and Clyde confirming receipt. If you have not received a confirmation email within 3 days working days from the closing date, please email nhsggcrecruitment@nhs.net.

Unfortunately, due to the volume of applications NHS Greater Glasgow and Clyde receive, we are unable to write to applicants who are not successfully shortlisted for interview. Accordingly, if you have not received an invitation for interview within six weeks of the closing date please assume on this occasion you have been unsuccessful. We hope this will not deter you from applying again.

We will use several methods of communication to advise you of each stage of the recruitment process this includes: email, letter, SMS text, or telephone. It is essential that you regularly check your email and your phone to see if we have been in contact with you to update you on the progress of your application. Please ensure your email account does not treat NHS Greater Glasgow and Clyde email as spam or junk by adjusting the necessary settings.

Please ensure you retain a copy of the job description and person specification for the post you are applying for – you will need this to help you prepare if you are selected for interview.

Please retain details of the job reference number – you will need this if contacting NHS Greater Glasgow and Clyde Recruitment Services.

Should you require further information or assistance in relation to your application please visit www.nhsggc.org.uk/recruitment or email your enquiry to nhsggcrecruitment@nhs.net. Please ensure you have the job reference number to hand.

For details on what happens once you have submitted your application, please visit the NHS Greater Glasgow and Clyde – recruitment guidance for applicants.
Guidance for completing your application form

Completion of the application form is the first stage in the recruitment process, and if you are successful, will form the basis of your employment record. Complete and accurate information is essential. Please note: If you knowingly withhold or provide false or misleading information, this may result in your application being rejected, or if appointed, may result in dismissal from your post.

Your application form plays a vital role in the recruitment and selection process. The information you provide us with in your application form will be used to decide whether you are shortlisted to attend an interview. Only those applicants who can clearly demonstrate in their application form how they meet the minimum essential requirements for the post as specified in the job description and person specification will be considered for interview selection.

Applicants should read the candidate information pack and job description for the post prior to completing the online application form.

When completing the online application form applicants should read the instructions in each section and note the following:

- the application form has an automatic time out mechanisms, therefore you should click on the "save" button as you go through the application form or copy and paste from another document, to avoid losing content.
- please do not use any special characters (i.e. £, #, &, %) when completing your application. You are permitted to use the '@' symbol.

It is recommended that you complete all relevant sections of the application form. It does not matter how long ago your last employment was, if you have an employment history please list it.

If you have not previously been employed, please use the “Present or Most Recent Post” section to detail what you have been doing (i.e. full time student / parent / carer).
Please note that you can list unpaid work including work placements and volunteer work in your employment history.

NHS Greater Glasgow and Clyde do not accept Curriculum Vitaees (CV), unless a CV has been specifically requested as part of the recruitment process.

By completing and submitting an application for this post you give your consent for NHS Greater Glasgow and Clyde to commence pre-employment checks, including reference checks, once your formal conditional offer of employment is made to you. Click Here for more information. For details on NHS Greater Glasgow and Clyde’s pre-employment check procedures, please visit the NHS Greater Glasgow and Clyde – recruitment guidance for applicants.
Part A (Personal information), Part B (Declarations), Part C (Application Details)
The job description provides information about the main duties and responsibilities of the post being advertised. It also describes the purpose of the post. Please ensure that your application form clearly demonstrates how your skills / knowledge / experience can be utilised in the role.
The job description and person specification also specify the requirements or criteria (knowledge, skills, experience, abilities and qualifications) that are essential or desirable to perform the duties outlined. Please ensure in your application that you demonstrate how you meet the minimum essential criteria and where applicable, the desirable criteria for the role.

Certain posts in NHS Scotland are exempt from the 1974 Rehabilitation of Offenders Act (Exclusions & Exceptions) (Scotland) Order 2003. Click Here for more information. If the advertisement for this position has declared that we require a Disclosure Scotland PVG Scheme Membership / Disclosure Scotland Check, you must declare any previous convictions, classed as either “spent” or “unspent”, including criminal convictions received outside the United Kingdom.

The Asylum and Immigration Act 1996 states that it is a criminal offence to employ a person who is not entitled to work in the United Kingdom (UK). Consequently, before NHS Greater Glasgow and Clyde offers employment, the prospective employee must provide evidence, that he/she is entitled to work in the UK. All applicants regardless of nationality will be asked to provide evidence of eligibility to live and work in the UK.

As a Disability Confident Employer, NHS Greater Glasgow and Clyde operates a Guarantee Interview Scheme for disabled applicants. Candidates who have declared a disability and who meet the minimum essential criteria outlined within the job description / person specification will be guaranteed an interview.

You must provide full and complete employment references including a work email address (personal email address for employment references may not be acceptable) covering a minimum period of the last three years. Employment referees should be listed in chronological order – that is the most recent first. If you have had more than two employers in the last three years we will require additional references. Character referees should only be used in the event that you cannot provide two employer references covering the last three years.

Any gaps in employment history must be detailed within your supporting statement and will be explored carefully with you at the interview stage.

If you have an employment history of less than three years, you should provide full details of an academic referee or other person who is not a friend, is not related to you or involved in any financial arrangement with you to provide a personal reference.
If you have had no previous employment or have been self-employed you should provide details of two personal referees as outlined above and where applicable evidence to confirm your status (i.e. letter from Jobcentre Plus, academic record or evidence from HM Revenue & Customs) if you are shortlisted for interview.

Your application form provides you with an opportunity to provide a supporting statement. This section is one of the most important in the application form as the information that is provided here will be evaluated and used to decide if you are invited to attend interview. This section gives you the opportunity to describe and demonstrate the particular qualifications, skills, abilities, knowledge, relevant experience and other qualities that make you a good candidate for the post.

Part D (Equal Opportunities)
This part of the form is optional and the information you provide in this section exercises no part of the selection process. It is treated in confidence and only the Recruitment Service or Human Resources staff can access this information for the purpose of recording and compliance monitoring, to ensure our workforce is balanced and represents the best candidates from all parts of society regardless of age, disability, gender reassignment, marriage or civil partnership, pregnancy or maternity status, race, religion or belief, sex, sexual orientation and/or socio-economic status.

Data Protection legislation
The information supplied by your application will only be processed by authorised NHS Greater Glasgow and Clyde personnel involved in relevant stages of the recruitment process. Applications submitted via the NHS Scotland Application form will be imported into the NHS Greater Glasgow and Clyde recruitment system. The information you provide will be retained by NHS Greater Glasgow and Clyde and will be used for the purpose of processing your application and for statistical and audit purposes. NHS Greater Glasgow and Clyde will process the information for the stated purposes in regards your application for employment. If your application is unsuccessful, your information will be retained securely for 12 months from the completion of the recruitment process and then confidentially destroyed.
Working for NHS Greater Glasgow and Clyde

About us
NHS Greater Glasgow and Clyde is the largest health board and provider of healthcare in Scotland and one of the largest health care providers in the UK.

NHS Greater Glasgow and Clyde’s purpose is to:

“Deliver effective and high quality health services, to act to improve the health of our population and to do everything we can to address the wider social determinants of health which cause health inequalities.”

The Board works in close partnership with other NHS organisations, local authorities and other agencies including the third sector to ensure that social work, education, housing, employment and environmental services unite effectively and efficiently with the NHS in tackling inequalities and underlying health problems in local communities.

The future shape of health and social care provision is changing following the move to establish new statutory Partnerships between NHS and Local Authorities, responsible for the planning and delivery of Health and Social care for local populations. This requires the development of very different relationships between primary care, mental health services, community and acute services.

NHS GGC serves a population of 1.2 million (over 1/5 of the population of Scotland) with services provided by 39,000 staff.

The geographical area covered includes: Glasgow City, West Dunbartonshire, Inverclyde, Renfrewshire, East Renfrewshire, East Dunbartonshire and North Glasgow (Stepps-Moodiesburn corridor).

Our services
NHS Greater Glasgow and Clyde provides a full range of Secondary and Tertiary Clinical services, Primary Care, Mental Health and Community services included in which are a number of world-class specialist services.

Find out more about NHS Greater Glasgow and Clyde at www.nhsggc.org.uk.

If you want to know more about the NHS Scotland, visit www.show.scot.nhs.uk.

If you are successful in your application to join us, you will be working within one of our Acute, Primary and Community Care Services. These services are in turn supported by a range of Corporate Service functions including Administration, eHealth, Finance, Human Resources, Public Health, Corporate Planning, Facilities and Estates.
• Click Here to find out more about our Community Services
• Click Here to find out more about our Mental Health Services
• Click here to find out more about the services in your area

**Employee benefits**
We offer all our staff excellent benefits including;

• NHS Superannuation pension scheme,
• Child Care Vouchers,
• Bursaries to support education and training,
• Interest free loans to purchase Zonecards for trains, buses, underground and some ferries
• Cycle to work interest-free loans to purchase bicycles and equipment

For more information on the benefits available to NHS Greater Glasgow and Clyde staff, visit [www.healthservicediscounts.com](http://www.healthservicediscounts.com).

**Further information**
For further information on any aspect of the recruitment process or for further details on working within NHS Greater Glasgow and Clyde contact:

NHS Greater Glasgow and Clyde
**Recruitment Services**
West Glasgow Ambulatory Care Hospital
Dalnair Street
Glasgow
G3 8SJ

Tel: +44 (0)141 278 2700
Email: nhsggcrecruitment@nhs.net