THE ROLE OF THE PHYSIOTHERAPIST IN AN URGENT COMMUNITY CARE SETTING

Sophie Wallington, Advanced Practitioner in Training
Crisis Response Service, North Manchester Community Services
October 2015
Learning Outcomes

1. Thinking differently about extending the scope of Physiotherapists’ skills within an urgent community care setting

2. What Physiotherapy can offer to an Advanced Nursing world

3. Protecting roles through leadership and accountability in the context of a changing workforce
Crisis Response Service
Community Assessment and Support Service (CASS)
North Manchester Community Services

Urgent Community Care 72 Hour Service
Integrated Health and Social Care delivery model
1-2 hour response
7-day service
Credible alternative to A&E
Direct referrals from:
- Urgent Care
- Ambulance Service
- GP’s
- Health and social care professionals in the community
- Community Alarms
Skills

Clinical Skills
Venepuncture
Skin and Continence Assessments
Dysphagia Assessment
IV Antibiotic Therapy
Point of Care Testing
Non-medical Prescribing
Commissioning Social Care Packages
Equipment Assessment
Acute Respiratory Exacerbations
Pain Management
Cognitive Assessments
Neuro Assessment
Self-Care Facilitation
Mental Capacity and DOLS
Advanced Care Planning
The Physiotherapy ‘Offer’

- Linking physiology and function
- Holistic
- Impact on daily living rather than purely medical or physiological presentation
- Systematic
- Assessment skills – Hands on
- Level and depth of training
- Clinical autonomy – work outside of a hierarchical system
- Clinically competent diagnosticians

The Advanced Practice Role can act as a vehicle for allowing Physiotherapists access to the correct advanced medical knowledge and skills to competently sit at the front of this pathway – with adherence to strong clinical governance.
Timing of Input

Traditionally Physiotherapy assessment and intervention is at the end of a care pathway, with a focus on rehabilitation, more specialised diagnosis and reversibility.

Using a Physiotherapists’ skills right at the start of an assessment from A&E, Urgent Care, Urgent Community care clinical assessment – these very scientific, diagnostic, holistic skills are applied concurrently to the management of medical, nursing and social care issues.

It can often add a different perspective to management and it can aid a speedy recovery as some of the self care elements of Physiotherapy intervention are instilled early on.

This is not a replacement of the traditional role of rehabilitation – more assists in streaming the appropriate patients down the right therapy pathway, and kick starts the process early.
Leadership & Accountability

- Extending the roles of individual team members and role blurring
- Leads
- The most appropriate assessor for the patient
- Ability to troubleshoot unknown issues through extended skill base
- Delegation and direction
- Clinical Governance
- Assistant Practitioner Competencies

Supervision, accountability and delegation of activities to support workers
A guide for registered practitioners and support workers

Intercollegiate Information paper developed by the CSP, RCSLT, BDA and the RCN.

This paper is a result of collaboration between different organisations and individuals. Contributions gratefully received from:
- RCSLT, Royal College of Speech and Language Therapists - Penny Proctor
- BDA, British Dental Association - Professor Samaranayake
- RCN, Royal College of Nursing - Susan Styfling, Penny Brown and Helen Coalfield
- CSP, Chartered Society of Physiotherapy - Catherine French and Sue Hayden-Gilles
- University of Sheffield - Susan Macdonald, Senior research Fellow
Benefits

• Acute hospitals focus on treating those requiring specialist or more complex treatment

• Rapid access to information, advice and treatment

• Better use of highly trained clinicians’ skills and expertise. Offers patients access to the most appropriately trained professional

• Enhances workforce capacity in community services and supports delivery of more care outside hospital, closer to home

• Enable GPs to maximise the use of their medical training and skills in dealing with complex clinical work. Shared care with the GP, with clinical confidence and credibility

• Screening, treatment, prescribing and rehabilitation by non-medical practitioners supports integrated pathways of care

• Direct referral into specialist services and secondary care
Contacts

Crisis Response Physiotherapist, Hannah Harrison Hannah.Lamb@pat.nhs.uk

Clinical Lead Advanced Practitioner, Jason Holland Jason.Holland@pat.nhs.uk

Service Manager, Carol Kavanagh Carol.kavanagh@pat.nhs.uk

Advanced Practitioner in Training, Sophie Wallington, Sophie.Wallington@nhs.net