

# Sample Job Description

## Rheumatology Band 5 Physiotherapist

### Job Summary

To be completed...

### Capabilities

#### 1. Screening

Uses rheumatology-specific screening questions in assessment in an MSK setting and is aware of the features that raise suspicion of inflammatory conditions – e.g. prolonged morning stiffness, diurnal pattern, swelling, enthesitis, dactylitis, family history and link to other inflammatory conditions (psoriasis, inflammatory bowel disease, uveitis).

Where suspicion of an inflammatory presentation occurs, consults urgently with senior colleagues for rheumatology screening support and referral guidance, e.g. the local specialist rheumatology physiotherapist or clinicians within MSK triage clinic, FCPs or GPs with Extended Roles.

#### 2. Investigations

Practices looking at imaging and blood test results requested and interpreted by other team members, asks for support where results appear abnormal. Aware that normal results can still be relevant.

#### 3. Physiotherapy Interventions

Understands the role of physiotherapy interventions for frequently seen rheumatology conditions, e.g. RA, OA, AxSpA, hypermobility, fibromyalgia, osteoporosis.

Demonstrates basic understanding of the musculoskeletal components of the more commonly seen rheumatological conditions. Can explain these to patients and carers.



Provides advice on restoring function, including graded return to normal activity, navigation to self-management resources, modifying activity and in relation to work abilities and tasks.

Able to assess the educational needs of patients and their carers in relation to frequently seen rheumatology conditions. Able to provide tailored education using appropriate modes of delivery and relevant resources. Evaluates the effectiveness of these interventions.

Uses a structured assessment to identify aspects that may influence individuals with rheumatology conditions including clinical characteristics, co-morbidities, limits to activity and participation, work ability and personal and environmental factors.

Demonstrates the communication skills to cope with and respond to the challenges to effective communication regularly seen in rheumatology presentations e.g. pain, chronic sleep deprivation, fear, uncertainty, acceptance, mental wellbeing and psychosocial problems.

Can complete a BASMI assessment of an AxSpA patient, explaining the relevance of the measurements and using the data attained in combination with other elements of the assessment (including the rest of the Bath scores) to modify/create an agreed management plan.

Works in partnership with individuals to explore suitability of rehabilitation interventions, including social prescribing e.g. referring individuals to a range of local non-clinical services such as community-based exercise programmes where appropriate (Escape Pain, NASS/NRAS/ROS groups and online/virtual support etc.).

Prescribes condition-specific personal rehabilitation programmes to help individuals enhance, restore and maintain their mobility, function and independence, including considering the use of digital technology (e.g. apps and wearables) to support concordance.

Advises on the expected benefits and limitations of different physiotherapy interventions used in managing rheumatology conditions, providing evidence-informed information and advice on the advantages and disadvantages of specific interventions in the context of other management options considering the person's circumstances and using a shared decision-making approach.

Advises on and instigates a management plan for frequently seen rheumatology conditions and their symptoms. Instigating this may be through referral to others with relevant capabilities (MDT working).

Recognises and promotes the importance of patient-centred organisations, expert patients, support groups, social networks, and communities for patients and their carers in managing rheumatology conditions.

#### 4. Condition Management

Is familiar with national and international guidance and recommendations for common rheumatological conditions, e.g. NICE, SIGN, BSR, EULAR.

Can recognise normal mechanical and inflammatory MSK signs including stiffness, laxity/hypermobility, joint swelling, enthesitis and dactylitis.

Develops an understanding of the complex nature of pain and pain mechanisms (both as discrete issues and as a part of a rheumatological condition) and can explain this in patient-specific and patient appropriate language.

Is aware of the agreed treatment pathways and protocols used across the rheumatology MDT and contributes to their implementation.

Acts on day to day interactions with rheumatology patients to encourage changes in behaviour that will have a positive impact on their health and wellbeing i.e. 'Making Every Contact Count'. Advises on the effects of lifestyle associated problems such as smoking, alcohol, obesity, sedentary behaviour and inactivity on rheumatology conditions and their pharmacological and non-pharmacological management. Where appropriate, promotes change or refers to relevant services.

#### 5. Non-Clinical

Understands the role that research has to play in changing physiotherapy practice and develops a basic understanding of the role of research in the broader, medical management of rheumatology conditions.