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**Andrew Carter**

**Andrew Carter is a Therapy Assistant Practitioner.**

I currently work as a Band 4 Therapy Assistant Practitioner on the COVID outreach service and am involved in the initial assessment, treatment development and discharge of patient who have been on ITU for their COVID management. Initially on the point of referral, our patients are generally de-conditioned, suffering from global weakness, fatigue, breathlessness, joint pain and some neuropathic pain and cognitive and psychological symptoms. Working with our patients we are able, after months of rehabilitation and relationship building, to reverse many of these symptoms, enabling our patients to often return to a functional pre-COVID life and work.

In 2007 I started by BSc Hons Physiotherapy degree at Coventry University, however due to illness, I was unable to finish my degree. I started at BHH in 2008 as a Band 2 physio assistant with the intent to return to university. However, after making such a large career change, I did not want to go back. I have remained at BHH and although I regret not being able to complete my degree as a physiotherapist, I have never regretted remaining in my post and developing my skills further in my role now as a Therapy Assistant Practitioner.

Following redeployment due to the COVID pandemic the last 2 years has given me the opportunity to up-skill to treat post ITU step-down COVID patients. I have learned about prolonged ITU admissions and the effects this has on people and the post viral effects of COVID. It was particularly interesting to learn from a member of the psychology team who helped us manage patients ITU flash backs and hallucinations. With the second and third wave of COVID patients the respiratory and breathlessness presentation became more prominent and self-directed study about the respiratory system was needed and in-services training from the respiratory physios on breathing pattern disorder.

I attended many online events to help develop an understanding about COVID, fatigue and breathlessness and how other NHS trusts have managed this. All this has helped to give me the confidence to treat and educate this unique group of patients who were in need of a new service. It has made me feel proud and I look forward to coming to work daily.

Courses on leadership have been valuable in enabling me to realise that leadership happens at all levels and is a skill you utilise daily. With the recent focus on AHP support workforce, I have taken a keen interest in ways I can help mentor and develop fellow AHP support workforce at UHB and attended many webinars on the issue.

I have grown and developed as a clinician over the years in my role. Daily, I act as an advocate for my patients and provide them with holistic care. It has been a challenge to re-skill to treat the COVID cohort and I have recently had the opportunity to work collaboratively with BCHC and UHB on a project for educating patients suffering from fatigue and breathlessness after COVID. This has been very enjoyable. I have been able to act as a mentor for some of my fellow AHP support workers and have taken a key role in rolling out a stroke and neuro training program for fellow B3/B4 support workers in the stroke service across the trust.

Being an AHP support worker provides you with the opportunity to care and help other people; be that patients or fellow peers. Gives you the opportunity to work in the NHS and the unique opportunity of MDT working where there are a large variety of career opportunities. It is an exciting time to become an AHP support worker with the new training and career development opportunities on the horizon, enabling people to develop professionally in health care where university may not be an option. It can be a gateway to further alternative careers as a registered health care professional.

I am hoping that the new focus on development of the AHP support workforce will give me new career opportunities to further expand and evolve my skills as a clinician or in supporting my fellow AHP workforce. I would like to see the glass ceiling of B4 being broken for non-registered AHP’s enabling a variety of new career and training opportunities for the future to be developed.