

**AGENDA FOR CHANGE
NHS JOB EVALUATION SCHEME**



JOB DESCRIPTION TEMPLATE

1. JOB IDENTIFICATION

Job Title:	Staff Nurse Band 5
Reports to	Senior Charge Nurse
Department, Ward or Section:	In-patient wards, Out Patients A&E Department, OOH Centre, Broadford Hospital/Portree Hospital
CHP, Directorate or Corporate Department	North & West
Job Reference:	NWOUSLWRSKYENURS01
Last Update	January 2020

2. JOB PURPOSE

The Staff Nurse is responsible for the clinical care he/she provides within the, in-patient ward, A&E Dept, OPD and Out of Hours Centre, ensuring quality and standards of care are implemented as agreed with the Senior Charge Nurse.

To act as the named nurse for a delegated group of patients, planning, implementing and evaluating individualised programmes of care including the negotiation of discharge planning arrangements as part of the multi disciplinary team, ensuring the delivery of high standards of care to patients and their families.

The post holder strives to continually improve care pathways for patients, their carers and families when utilising in patient services in conjunction with other statutory and voluntary services.

3. DIMENSIONS

We have 2 community hospitals covering Skye & Lochalsh providing clinical services over two sites, 26 miles apart, Portree Hospital (PH) located in the North of the Island and Broadford Hospital (BRD) in the South. Nursing staff have a primary base in one site but provide cover to either hospital depending on the needs of the service

Broadford Hospital

Referred patients typically have multiple pathological and complex health and social care needs leading to chronic ill health and acute exacerbation's of conditions. Patients admitted require active medical, nursing and AHP management. Broadford offers a 24 hour Accident and Emergency service and provides the acute medical care for the locality. It has 19 beds. There are also Out patient facilities within the hospital with clinics from visiting Consultants and Specialists.

Portree:

PH has 12 in patient beds providing services to the whole area. Patients require medical care and acute nursing intervention, rehabilitation services, barrier nursing and terminal care. Portree has an urgent care centre providing minor injury and Out of Hours care 24/7. Portree hospital also offers a number of treatment rooms for out patients with visiting consultants/specialists from Raigmore hospital.

Patient care provision across both hospital sites include:

Acute medical – patients who require medical and/or nursing care which cannot be provided in their own homes, either because of the nature of the care required or because of the patient's social circumstances.

Rehabilitation – admission must be for active rehabilitation including post-operative surgical patients and those requiring transfer from the DGH following an acute medical crisis may be accepted for admission.

Terminal care – patients needing care at the end of their lives may choose to be cared for near to their homes and families in the hospital.

Observation/monitoring - some patients may be admitted to the ward from the community for short stay observation, monitoring and/or investigation e.g. blood transfusions, continuous blood pressure monitoring.

Investigation – patients whose condition requires treatment and/or investigation which cannot reasonably be carried out at home.

Out patients – Patients attending the hospital to have consultation with a wide range of visiting specialists.

Chemotherapy service – Care of patients undergoing chemotherapy treatments

Place of Safety - Recognised site for patients needing to be detained under the Mental Health Act, until transfer to a suitable specialist unit can be arranged.

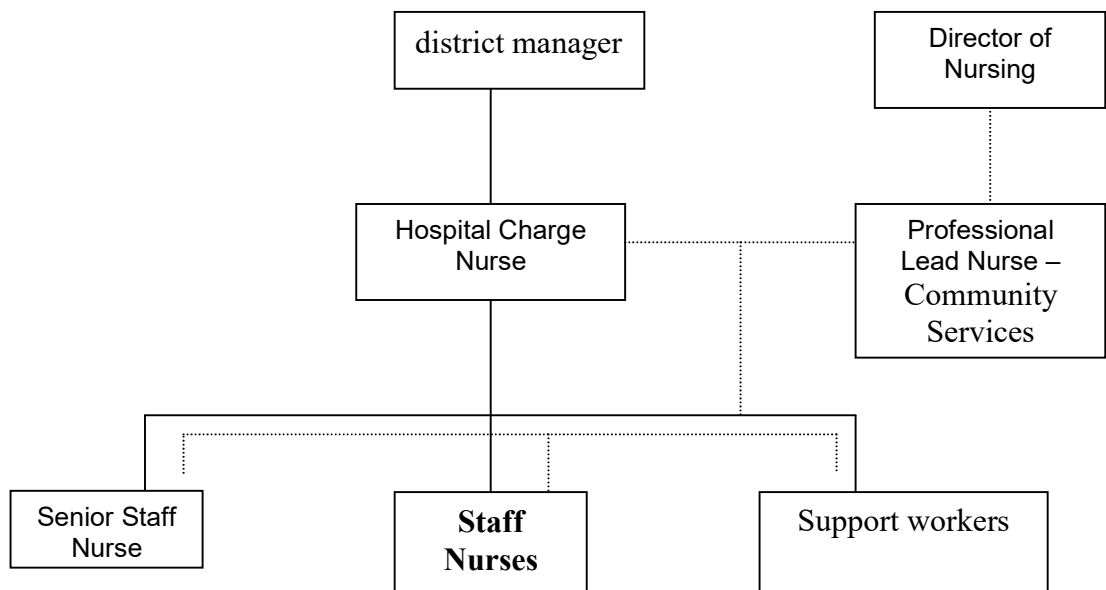
A&E Department – Patients who require immediate medical treatments as a result of injury and accident.

Acute surgical – patients who require surgical investigations and/or intervention.

Recognised site for the management and treatment of Major Incidents

Out of Hours Treatment Centre for Skye and Lochalsh

4. ORGANISATIONAL POSITION



5. ROLE OF THE HOSPITALS

Referred patients typically have multiple pathological and complex health and social care needs leading to chronic ill health and acute exacerbation's of conditions, disability and dependence on carers, families, statutory and voluntary services to remain in the community. Patients admitted require a hospital admission for active medical/surgical nursing and AHP management. Patient's access the level of care required on a need led basis.

Patients are also seen in a day case capacity, as emergencies attending the A&E Dept, attending the OOH's treatment centre, or to be cared for under the Mental Health Act awaiting transfer to a specialist unit

6. KEY RESULT AREAS

Key result areas (Managerial role)

In the absence of the Senior Charge Nurse or senior staff nurse, have responsibility for the hospital nursing team on the shift including implementation of NHS Highland policies and practices e.g., health and safety, infection control, PIN Guidelines and standing financial instructions.

In conjunction with the Domestic Supervisor ensure, a high standard of cleanliness throughout the hospital. Promote good standards of hygiene and in conjunction with the Control of Infection team ensure infection rates are minimised. Includes patients, and visitors with advice and decisions regarding infection control

Identify own education, training and support needs via the PDP and Review process and access clinical supervision and, or action learning.

Facilities management – identifying / reacting to mechanical breakdown, fabric of building, communications failures, security both within the building and immediate environments.

Key result areas (Clinical role)

In conjunction with relevant colleagues and /or senior nurses – agree, implement and audit standards of clinical care to promote evidence - based care and the attainment of healthcare governance requirements.

Demonstrate highly developed clinical nursing skills and act as clinical advisor and educator to team members.

Hold responsibility for a delegated number of clinical caseloads.

Assess the health and social care needs of patients and their carers analysing and synthesising complex physiological measurements, emotional and psychosocial state and environmental settings identifying deviations from normal. Make a nursing diagnosis and plan, implement and evaluate nursing interventions to meet agreed needs and interventions with patients and carers.

Assist patients towards self -care and rehabilitation through the provision of therapeutic, compensatory, educate, facilitative, rehabilitative, advocacy and supportive clinical patient care.
Teach and support relatives and other formal and informal carers.

Maintain and improve professional / clinical knowledge and competence.

Practice within national NHS, NHS Highland and NMC guidance.

Teach and assess students / observers during hospital placements (continuous placements).

The Staff Nurse is accountable for his/her own actions without direct supervision.

7a. EQUIPMENT AND MACHINERY

1. General office equipment including fax machines, computers – e-mail, NHS Highland intranet and WWW internet and basic word processing databases spreadsheets.

2. Assess patient need for:
 Minor aids adaptations
 Mobile hoists

Aids to mobility
Electric profiling beds
Pressure relieving mattresses

3. Utilise technical clinical equipment, calibrating where necessary and checking for faults and ensuring regular maintenance

4. Be aware of the use and location of all equipment in the hospital.

7b. SYSTEMS

Maintain patient records in accordance with NMC guidelines and NHS Highland standards including immediate discharge letter

Completion of PDPs

8. ASSIGNMENT AND REVIEW OF WORK

Responsible for the nursing health care and discharge management of a named group of patients.

In the absence of the Senior Charge Nurse, the post holder has responsibility on his/her shift for the management of the Wards and all other clinical departments, nursing staff team, facilities (including hospital site Out of Hours) and is expected to anticipate problems/needs and take steps to resolve them involving appropriate colleagues such as Assistant General Manager, medical colleagues and Personnel Advisor, Facilities/Hotel Services and community nursing and social work teams. (Most of the above personnel are rarely on-site or readily available).

Identify team development needs and individual staff member training, support and mentorship needs

Professional development is reviewed via Turas.

Accountable for his/her own actions without direct supervision, and responsible for the actions of unqualified staff on the shift.

Expected to work in either of the 2 hospital sites as required.

9. DECISIONS AND JUDGEMENTS

Makes nursing decisions analysing and synthesising unique sets of information using comprehensive knowledge, skills and experience of the clinical service and setting taking account of the guidance of the (Nursing and Midwifery Council) and employers policies and procedures.

Makes clinical decisions in planning and prioritising patient care and delegation to team members. Prioritises patient care between in patient care needs and the care of patients in the A&E dept.

Recognises own limitations in the provision of clinical care and urgency of patient needs referring to other health care professionals accordingly.

Identify need /respond to staff suggestions re operational management of wards.

10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB

The requirement to continually cope with competing clinical demands, (dynamic changes in patients conditions, conflicting needs of both the A&E Dept and the general wards, personnel issues with staff, sudden staff absences, unpredictable nature of referrals, contacts from within and outwith the organisation – managers, other departments, other agencies) daily.

Carrying responsibility on a shift for a service where during out of hours periods (after 5pm, weekends and public holidays) nursing services may be the only service providers on-site.

Distressing circumstances e.g. adverse events, poor outcomes, domestic violence, child protection, abusive patients/visitors, complaints etc

Accompany patients on transfers to other hospitals which can result in being away out with your shift time

Assist with and promote a positive attitude with the management of change, service and practice and unrealistic expectations of staff and patients

Assist with the management of negotiating packages of care with other disciplines/agencies who work within different cultures, different response times and budgetary constraints.

Complexity and logistics of communicating with 11 GP practices, RP's and Consultants all with varying approaches to patient care.

Reporting to the Senior Charge Nurse difficulties in staffs personal circumstances that impact on individual's ability to carry out expected role e.g. family crisis, bereavement, illness.

Exposure to violence and aggression from patients and members of public.

11. COMMUNICATIONS AND RELATIONSHIPS

Establish and maintain professional relationships with nursing colleagues, medical staff, members of the Primary Health Care Team and wider health / social care / voluntary service networks to provide a planned co-ordinated, seamless service for patients/clients. This will include hospitals and healthcare providers in other areas.

Early identification of potential and actual complex and or conflicting perspectives of choice of care options between staff, patients and carers and using negotiation and counselling skills to achieve compromise and defuse possible volatile situations to achieve the best outcome for the patient.

Challenges to effective communication resulting from excessive numbers e.g. many GPs, Consultants and Rural Practitioners / 40 permanent and approx.10 bank nursing staff working a 24-hour shift pattern and within the Out of Hours service.

Observe confidentiality in accordance with NMC and NHS Highland policies.

Deputise for the Senior Charge Nurse in meetings with colleagues at Local Management Team meetings, Operational Management Team meetings, Clinical Forum and Hospital Users Group meetings as directed, (and extraordinary topic specific meetings as required) for the purposes of:

- a) Planning, managing and developing Hospital nursing services and quality of care
- b) Implementing policy changes
- c) Discussing and problem solving challenges in clinical care and team development.

12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB

Physical

Assist patients to move position frequently

Risk assess clinical areas and be inventive to create a safe working environment whilst being sensitive to patients environment and property - regularly

Bend and kneel to work with patients, e.g. dress leg wounds – several times daily

Fine motor skills and dexterity to take blood, administer injections, calibrate equipment – regularly.

Continuous need to walk throughout shift to provide patient care.

Regular and frequent moving and handling physically disabled/ill patients/equipment, e.g. beds, lockers, oxygen cylinders.

Mental

Concentration, decision making and organisational skills to cope with competing demands, (dynamic changes in patients conditions, personnel issues with staff, sudden staff absences, unpredictable nature of referrals, contacts from within and out with the organisation – managers, other departments, other agencies) daily.

Recognising patients' urgent health care needs and making rapid decisions to provide appropriate clinical management - frequently.

Ability to calculate drug dosages and set up syringe pumps/drivers.

Negotiation skills to co-ordinate complex packages of care with a wide range of people and agencies, daily.

Concentration to assess and provide patient care and manage the team with frequent interruptions either in person or by telephone, on a continuous daily basis.

Particular challenges due to communicating with a large number of staff who work in shifts to provide a 24 hour service – ensuring information is transferred accurately and all staff have equitable opportunity to feedback / raise and discuss issues.

Emotional

Emotional demand in relation to family and human dynamics, dealing with people in distress , acute medical crises, trauma, or dying and death, whether that be immediate or following a long period of care (weeks – months), particularly in a close knit community.

Emotional demand to provide care over several long periods of time to patients with chronic disabling

and deteriorating conditions, and their families, particularly in a close knit community.

Coping with unpleasant materials and smells – bodily fluids, excreta, infected wounds – daily

Responding to staffs personal circumstances that impact on individual's ability to carry out expected role e.g. family crisis, bereavement, and illness.

Emotional demands specific to large number of staff and their diverse personalities and personal and professional support needs.

Demands of supporting people in crises such as cancer diagnosis and recurrence, death and dying/bereavement.

13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB

RGN

Minimum of 1 year post registration experience as Staff Nurse and 6 months in this post prior to taking charge on a shift.

Completion of additional relevant training such as TNCC, Stroke awareness training. Learnpro modules
Knowledge of, and ability to interpret and apply all relevant NHS Highland and professional policies, procedures and guidelines

Knowledge of processes involved in health and social policy development and of current policies and their impact on hospital services

Knowledge of the physical, social, emotional, psychological, mental, cultural and societal effects of ageing, disability, and chronic ill health, and, ability to assess an individuals needs and behaviours and plan care within this broad context.

Attendance at yearly training – Basic Life Support, Moving & Handling, Violence & Aggression, COSHH, Intermediate Life Support Course

Competent in all clinical skills and care management relevant to patient care and care planning for discharge.

- Holistic assessment of patients and carers needs
- Negotiating complex inter agency discharge plans and packages of care
- Acute Event/illness management
- Chronic disease management at tertiary preventive and terminal stages specifically related to diabetes, circulatory disease, major neurological conditions, alcohol misuse
- Wound and skin care management and prevention of pressure ulcers
- Management of elimination e.g., promotion of continence and management and symptom control of incontinence – catheterisation: male, female and supra pubic, bowel care.
- Palliative/Terminal care including operation of syringe driver
- Venepuncture, cannulation, IV drug administration
- ECG recording & interpretation
- Administration of Blood transfusions
- Monitoring of Intubated patients in the A&E Dept. (MMH only)
- Organising complex inter hospital transfers
- Basic and Advanced Life Support Skills, for Adults and Children

Teaching patients and carers to self care and provide anticipatory guidance re. disease Progression, symptom management and consequences for lifestyle and quality of life.

- Teaching and assessing junior staff and students
- Communication skills e.g. – liaison, negotiation, counselling skills
- Health Education & Health Promotion
- Assessment of Standards of Infection Control and maintenance of same
- Portering duties – assisting to transfer patients on wheelchairs and trolleys within different

- departments of the hospital
- Mortuary duties – assisting to transfer the deceased into the mortuary fridge. Presenting the deceased for formal identification and viewing by relatives. Maintain a clean, tidy and respectful environment where distressed relatives may visit.

Teaching, supervising, monitoring and supporting junior staff in the achievement of the above skills and any additional new skills appropriate to the clinical setting.

Assuming the role of named nurse for patients where more junior staff have insufficient skill, knowledge or experience.

IT skills – e-mail, basic word processing, databases, excel spreadsheets etc, ability to search inter and intranet, Complete IDLs, Retrieve Laboratory Results and access PAS

Knowledge of and ability to successfully lead and manage change in working practices

Good level of physical health and stamina, large and fine motor fitness and dexterity

14. JOB DESCRIPTION AGREEMENT

I agree that the above Job Description is an accurate reflection of my duties and responsibilities at the date of signing.

Job Holder's Signature:

Date:

Manager's Signature:

Date: