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#### **JOB DESCRIPTION**

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| 1. JOB IDENTIFICATION | |
| Job Title: Advanced Neonatal Nurse Practitioner  Responsible to: Clinical Nurse Manager  Department: Neonatal Services  Directorate: Women & Children  Operating Division: Acute  Job Reference: 163371  No of Job Holders: 4  Last Update: March 2022 | |
| 2. JOB PURPOSE | |
| To provide and promote safe and effective clinical care of the newborn across the service in partnership with individuals, families, carers, and stakeholders, utilising advanced knowledge and skills to make complex autonomous decisions regarding diagnosis and treatment of the newborn.  To act as an inspirational leader and role model in the delivery of high standards of clinical care which are responsive to the needs of service provision and service users.  To advocate and contribute towards a positive learning culture which enables individuals and teams to continuously develop and improve patient care.  To engage with local systems, processes, quality improvement collaborations and key internal and external change drivers to facilitate service evaluation and continuous practice development. | |
| **3. DIMENSIONS** | |
| The role encompasses NHS Education for Scotland’s ‘Four Pillars of Advanced Practice’: clinical practice, leadership, facilitation of learning, and evidence, research & development.  The post holder covers Neonatal Services at the Royal Infirmary of Edinburgh (RIE) and St John’s Hospital (SJH) on a rotational basis.  On both sites, the post holder works exclusively on the junior tier medical rota, undertaking junior tier duties.  At the RIE the post holder works 24/7 on a shift basis with a middle grade doctor or senior ANNP in the building at all times.  At SJH the post holder works week day shifts only, with a Consultant Paediatrician in the building at all times.  Patient Group:  The patient group consists of babies requiring intensive, high dependency, special care and normal care, their parents and/or carers. This includes babies referred from the community setting who are under the care of the midwifery or neonatal community outreach teams.  Care is provided in a variety of settings including the Neonatal Unit (NNU) at the RIE, the Special Care Baby Unit (SCBU) at SJH, Labour Ward and Post Natal Wards on both sites and the Lothian Birth Centre.  The NNU at the RIE has 39 cots: 9 intensive care, 8 high dependency and 22 special care. There are approximately 800 babies admitted to the Unit annually. SCBU at SJH has 10 cots: 2 high dependency and 8 special care. There are approximately 250 babies admitted annually.  There are approximately 7000 babies born annually at the RIE and 2500 at SJH. Between 10-12% of babies will require some form of specialist care.  Staffing Responsibilities:  The post holder supports ANNPs in training and Tier 1 medical staff on rotation to Neonatal Services.  Financial Responsibilities:  The post holder is not responsible for overall management of the budget but needs to be aware of the available financial resources and the need to work within the financial envelope. | |
| 4. ORGANISATIONAL POSITION | |
| Director of Midwifery  Associate Director of Midwifery    Clinical Nurse Manager Consultant Neonatologist/Paediatrician      Senior Advanced Neonatal Nurse Practitioner Middle Tier Medical Staff  **Advanced Neonatal Nurse Practitioner** Junior Tier Medical Staff  **(This Post)**    Key- - - - - Represents professional accountability | |
| 5. ROLE OF DEPARTMENT | |
| Neonatal Services provide individualised, family centred care for the premature and/or sick newborn, the well newborn and their families/carers. The NNU at the RIE provides intensive, high dependency and special care for the newborn. The unit serves the City of Edinburgh and the districts of East and Mid Lothian as well as providing tertiary services for South East Scotland, Fife and other centres out with the region when no intensive care cot is available locally. SCBU at SJH serves the district of West Lothian and provides high dependency and special care as well as short term intensive care prior to patient transfer.  Care is delivered in both hospital and community settings with a dedicated community team providing support for infants at home following discharge from the service.  In addition to clinical activity the Neonatal Unit at the RIE is a major international centre for under/ post-graduate teaching/training and research in the field of Neonatology. Academic and NHS Research & Development activity is viewed as an essential component of its strategic objectives. Working in conjunction with academic partners, research charities/organisations and clinical specialties, the unit is proactive in initiating, and developing research. | |
| 6. KEY RESULT AREAS | |
| **Clinical Practice**  1. Demonstrate comprehensive knowledge of physiology and pathophysiology in a range of neonatal clinical conditions and disease processes in order to formulate a comprehensive holistic management plan which optimises outcomes for neonates with common conditions.  2. Apply advanced knowledge, clinical reasoning, and decision-making skills to perform a comprehensive assessment and initiate treatment and therapies including resuscitation of the newborn and in emergency situations.  3. Collaborate effectively with service users and the multi-disciplinary team to continuously assess, evaluate and adapt management plans to augment care delivery and outcomes, demonstrating insight and awareness of the risk and complexity associated with clinical interventions.  4. As an Independent Prescriber, prescribe and administer oral & topical medicines, intravenous fluids and intravenous medicines in response to clinical findings.  5. Act as a clinical role model and advocate delivering high standards of neonatal care which are responsive to the needs of service provision and service users.  6. Demonstrate professional judgement and emotional intelligence in order to recognise when additional support is required. Access the relevant clinical and psychosocial support for self, the multidisciplinary team and service users. Leadership 7. Pro-actively foster good working relationships between the ANNP team, the medical team and the nursing team to ensure there is role clarity in the provision of high quality care.  8. Participate in relevant local and national initiatives to support continuous improvements to practice.  9. Utilise effective prioritisation, problem solving and delegation skills to manage own and team time effectively.  10. Act as an inspirational leader by motivating and encouraging staff to enhance their knowledge and clinical skills and further their professional development to support the provision of the highest standards of care.  11. Support peer review processes within the wider multi-disciplinary team.  **Facilitation of Learning**  12. Demonstrate knowledge of teaching and learning theories in relation to adult learning, change theory, coaching and role modelling in order to promote and participate in work based training and educational opportunities for both nursing and medical staff.  13. Participate in the delivery of educational programmes to develop and improve clinical capability and improve patient outcomes, utilising appropriate evaluation tools and feedback from teaching opportunities for self-development.  **Evidence, Research & Development**  14. Support/perform local clinical audits/research ensuring contemporary knowledge of key local, regional, national and international change drivers to support continuous quality improvements to practice.  15. Contribute towards the development and implementation of standards, policies, clinical guidelines and documentation processes, as part of a robust governance system.  16. Promote and contribute to the development of advanced neonatal nurse practice to support the development and progression of advanced clinical practice within the workplace and organisation.  17. Support NHS Lothian’s values of quality, teamwork, care and compassion, dignity and respect, and openness, honesty and responsibility through the application of appropriate behaviours and attitudes. | |
| 7a. EQUIPMENT AND MACHINERY | |
| The following are examples of equipment which will be used when undertaking the role:  Incubator, infant warmers and resuscitaires  Ventilators, CPAP drivers and high flow oxygen therapy devices for the provision of respiratory support  Cerebral function analysing monitor (CFAM),  INOvent for the delivery of nitric oxide therapy  Near Infrared Spectroscopy (NIRS) for the monitoring of cerebral oxygenation  Criticool for the provision of therapeutic hypothermia  Neonatal transport shuttle for the transfer of babies to other departments  Infusion devices  Multiparameter monitors  Blood gas analyser  **Note:** New equipment may be introduced as the organisation and technology develops, however training will be provided. | |
| **7b. SYSTEMS** | |
| The following are examples of systems which will be used when undertaking the role:  Local Patient Administration Systems (Badger Neonatal and TRAK) to maintain accurate and up to date clinical records complying with patient confidentiality and provide data for core surveillance.  DATIX for the reporting and review of incidents  A range of information databases to input and analyse data  PACS for the electronic viewing of radiology images  Internet/intranet/e-mail  **Note:** New systems may be introduced as the organisation and technology develops, however training will be provided. | |
| 8. ASSIGNMENT AND REVIEW OF WORK | |
| The clinical workload is generated from maternity and neonatal services across Scotland through various referral protocols, in line with legislation and performance indicators set by the Scottish Government Health Department.  The post holder works within broad occupational, local and national policies and guidelines.  The post is self-directed, organising own workload within the team to meet the demands of the service.  The post holder will have a nominated Consultant supervisor/mentor who will provide educational and clinical supervision. The post holder will meet with their Consultant supervisor at a minimum of every 4 months to discuss progress and to receive feedback.  The post holder will compile a portfolio of evidence and reflection as well as a personal professional development plan (PDP) as described in the ‘Advanced Neonatal Practitioners in Lothian, Professional Development and Competency Framework’ to enable them to consider their progress to date and identify their needs and goals for the future. Feedback will be sought annually by a multisource feedback exercise. These documents will form the basis for discussion at an annual appraisal undertaken by the Clinical Nurse Manager and a designated Consultant Neonatologist (not the Consultant supervisor).  Governance of clinical competence is undertaken by the Director of Midwifery and the Neonatal Consultants. The Director of Midwifery will provide professional advice, the Consultants will manage assessment of clinical competence. | |
| **9. DECISIONS AND JUDGEMENTS** | |
| Makes complex autonomous clinical decisions in the management of the newborn including analysis, diagnosis, and clinical management, based on an in-depth broad expert knowledge and interpretation of clinical and other findings such as laboratory investigations and x-rays.  Using advanced clinical reasoning skills, makes referrals to Clinicians/Specialists when it is identified that further clinical intervention is required.  Uses own initiative and acts independently within the boundaries of own knowledge and skills.  Seeks advice and support from peers and senior colleagues when required. | |
| 10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB | |
| Managing the competing demands of the role.  Managing an unpredictable workload as well as activity and demand from across the national neonatal service.  Managing unexpected clinical emergencies.  Working in both a Special Care Baby Unit in a District General Hospital and a Neonatal Intensive Care Unit in a Tertiary Referral Centre where both workload and access to support can differ. | |
| **11. COMMUNICATIONS AND RELATIONSHIPS** | |
| Communicates verbally, electronically and in writing with members of the multidisciplinary team involved in the provision of care - members of primary and secondary health care teams, specialist services, social care; statutory and non-statutory services with the ability to express professional views within both individual and group settings.  Communicates sensitive, complex clinical condition related information to parents, relatives and carers.  Acts as a patient /staff advocate through the application of ethical, legal and professional knowledge and skills.  Presents at in house education/training sessions for nursing staff and junior medical staff as well peer review sessions with senior colleagues.  Presents and receives complex case histories and management summaries of care on ward rounds. | |
| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** | |
| **Physical Skills and Effort:**  The following are examples of physical skills, this is not an exhaustive list:  Insertion of intravenous cannulae, central lines, umbilical venous and arterial lines  Resuscitation of the newborn  Intubation  Examination of the newborn  Placement of gastric and jejunal tubes  Insertion of urinary catheters.  Lumbar punctures  Blood cultures  Administration of medicines, injections, intravenous infusions and blood transfusions.  Keyboard and IT skills  **Mental Effort:**  Concentration required when caring for patients, making clinical decisions, maintaining precise and accurate clinical records and undertaking complex clinical procedures on babies whose birth weights range from 450g – 4.5Kg.  May be subject to frequent interruptions from parents / relatives / team members and as a result of the unpredictable workload.  **Emotional Effort:**  Communicating with distressed, anxious and worried parents and relatives.  Caring for parents and relatives following receipt of bad news.  Caring for the terminally ill baby.  Communicating with bereaved parents.  Communicating with parents who have reduced understanding and insight due to language barriers or cognitive impairments.  **Environmental Conditions:**  Frequent exposure to body fluids.  Potential exposure to verbal and physical aggression from parents and relatives / other visitors.  Exposure to infections and temperature variations. | |
| 13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB | |
| Registered Nurse (Child/Adult)/Midwife currently practicing in neonatal intensive care and able to demonstrate the required competencies and skills for the role.  Advanced Practice Qualification (Neonatal) at SCQF Level 11  Neonatal Life Support (NLS) certificate  Independent Prescriber  Knowledge of all guidelines and referral pathways relating to Child Protection/Domestic Abuse  Effective communication skills  Time management skills/ability to prioritise workload.  Excellent team working skills as well as an ability to work using own initiative  Effective leadership and management skills  Experience in clinical teaching  Evidence of effective problem solving skills.  Evidence of participation in audit/research  IT Skills. | |
| **14. JOB DESCRIPTION AGREEMENT** | |
| A separate job description will need to be signed off by each job holder to whom the job description applies.  Job Holder’s Signature:  Head of Department Signature: | Date:  Date: |