#### **JOB DESCRIPTION**

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| JOB IDENTIFICATION |
|  Job Title: Switchboard Operator Responsible to: Switchboard SupervisorDepartment(s): Digital and Information, Health RecordsJob Reference: |

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| 2. JOB PURPOSE |
| To provide an efficient telecommunications service for NHS Fife, ensuring that all procedure and policy relating to this service are carried out correctly and promptly and to carry out administrative, technical and support tasks accordingly. Carry out laid down procedure covering: Emergencies, alarm activation and out of hours on call staff. To operate a digital telephone switchboard, providing first line communications to members of the general public and NHS Fife staff ensuring that an efficient and courteous service is being delivered at all times.  |
| **3. DIMENSIONS** |
|     SCOPE AND RANGE * Centralised Operator services for 15 networked sites throughout Fife
* Call handling in the region of 1,500 to 2,500 calls per normal working day
* Internal Emergency Calls (ie Cardiac Arrest, Fire = 600 per annum
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| 4. ORGANISATIONAL POSITION |
| Health Records ManagerHealth Records Team LeaderHealth Records Daytime Supervisor**Switchboard Supervisor**Health Records Weekend SupervisorDHRS / Scanning / A&E / MIU60 Part TimeSwitchboard Operators 8 WTE and 3 Part Time |

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| 5. ROLE OF DEPARTMENT |
| To develop and deliver a high quality and cost effective Inpatient and Emergency Service, through effective planning and efficient operational management. A high quality and cost effective patient centred service in line with the requirements of the division’s business and strategic planning objectives.To provide and deliver efficient 24/7 cover over various teams to meet the business needs. |
| 6. KEY RESULT AREAS |
| 1. Answer incoming and facilitate outgoing calls efficiently and courteously to ensure the smooth transfer of calls to clinical and non-clinical staff and departments within all sites covered by the Telecoms Centre.
2. Initiate procedures for cardiac arrest, paediatric neo-natal, obstetric and gynae emergency calls to ensure the prompt response to a request for urgent medical assistance and record the call details and follow up action if required.
3. Initiate procedures on fire alarms for all sites, currently 10 Hospitals and College of Nursing. Ensuring that the emergency services are contacted and details of the alarms passed on correctly and ensure that the relevant staff are contacted for that area and ensure that all personnel have attended emergency, taking remedial action in the event of failure of the procedure and record details of calls.
4. Initiate procedure for Major Incident plan, VIP ensuring the timeous implementation of this procedure.
5. Initiate procedures on various alarm systems within telecoms centre covering boilers, intruder, personal attack, blood bank and medical gases and ensure that relevant personnel are contacted.
6. Initiate procedure for urgent assistance at ward level, this involves contacting security and the police if requested and follow up action if required.
7. Operating the internal paging system at multiple hospital sites to ensure the correct passage of the caller to the person they are looking for.
8. Compile on a nightly basis the on-call information for medical and nursing and support staff. The provision of this information is paramount enabling the information of on-call personnel to be used by clinical and non clinical staff throughout the hospital. Also used to contact on call personnel for GP’s, dental triage.
9. Assess caller’s needs in relation to medical requirements. This facilitates dealing with highly distressed callers, often suicidal and with acute mental health conditions.
10. Updating personnel and location information on the operator consoles.
11. Monitoring of all external call requests from internal staff are actually official hospital business calls and not personal.
12. Reporting any switchboard system faults to service providers and if faults are of a serious nature, to the Switchboard Supervisor or Health Records Manager.
13. Carry out daily testing of all emergency pagers for all sites, recording any faults ensuring that all medical personnel are contactable in the event of an emergency.
14. Contact on-call estates manager to report any fires, intruders for all Health Centres/Clinics.
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| 7a. EQUIPMENT AND MACHINERY |
| Desktop PC Applications, MS Office Applications, MS Office 365, Intranet/Internet, Remote Access System |

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| **7b. SYSTEMS** |
| Computerised Switchboard – ArcMicrosoft Office 365Multitone paging system Patient Administration SystemMicrotech ScannersPhotocopierWinmag Alarm systemPersonal duty of care is required for own equipment and shared & complex equipment.  |

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| 8. ASSIGNMENT AND REVIEW OF WORK |
| Workload will be generated by daily service requirements over a 24 hour period. Supervisor monitors work performance.There will be a requirement to progress through a training programme ensuring all aspects of the role and responsibilities are carried out. This will involve working out with normal hours where colleagues will provide support, guidance and feedback with updates to Supervisor.Switchboard are part of an integrated service and staff are required to have a flexible approach in supporting their colleagues in the various teams within the 24/7 service which includes Digital Health Records Support/A&E/MIU and ScanningTaking part in peer development helping each other when difficulties arise, only if the problem cannot be resolved, the involvement of the Supervisor will then be sought for assistance |

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| **9. DECISIONS AND JUDGEMENTS** |
| Operators are required to use their own initiative when dealing with initial calls ensuring that callers are being routed to the appropriate departments. This can be difficult when callers are unsure who they want and operators are required to use tact and diplomacy when having to illicit information from the callers and then deciding which department to route the calls to.The operator has to show confidence in what he/she does and how it is done and also be polite and courteous at all times and have the ability to listen sympathetically as often people are contacting the hospital about a forthcoming appointment, a relative may be an inpatient or are contacting the hospital because they have been informed of a bereavement.There will be occasions when the postholder is unsupervised, therefore there will be a requirement to use own initiative depending on the circumstances. |

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| 10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB |
| Ensuring that an efficient service is maintained whilst meeting the expectations of the users.Dealing with distressed callers, e.g. callers requiring medical help, suicidal callers.Dealing with initial complaints from irate callers.Working within the procedures laid down by departments. E.g. following laid down emergency and call out procedures.Dealing with all emergency calls while remaining calm and in control.Having to use own initiative when no supervisor available.Working under pressure. |

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| **11. COMMUNICATIONS AND RELATIONSHIPS** |
| **Internal:** A good relationship is essential in the smooth running of the department on a day to day basis to provide an effective service. We must be able to work in collaboration with colleagues within the switchboard, passing on relevant information to ensure that all operators are aware of any changes in on-call or procedural changes etc. An effective changeover is essential between shifts so that the next person coming onto the shift is made aware of again any changes or special requirements for that shift to ensure a prompt service are provided at all times. To have a good working relationship with all departments within all sites keeping up-to-date with any changes in areas covered by the switchboard, currently Queen Margaret Hospital, Victoria Hospital, Lynebank, Whyteman's Brae, St Andrews and Adamson. The responsibility of the department and the Switchboard at VHK is now the central point for call answering for NHS Fife Hospitals. * **WITH OTHERS**

Dealing with all departments e.g. changes to rotas, reporting alarms, recording any updates and changes. Reporting and recording any faults reported to third party maintainers i.e. Telecomsel, Multitone etc. - Orally and record in faults logbook.Dealing with members of the public requires a great deal of empathy and reassurance when calming distressed persons down during emergency, i.e. persons trapped in lifts, anxious relatives unsure of whereabouts of family members or friends, dealing with suicidal callers etc.Tact is required when questioning callers to illicit which departments or services callers require, e.g. caller may have a difficulty in passing information due to having a personal or intimate condition.Callers may have difficulty in communicating with the operator, i.e. English is not always first language this can be frustrating to caller and operator, this requires a great deal of patience, callers maybe under the influence of substances, drink or drugs this requires tact and diplomacy to be used.Dealing with irate callers in the first instance requires the operator to use tact and diplomacy to diffuse the situation and route the caller to appropriate department without any further distress to the caller or the operator. |

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| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** |
| **Physical Demands:**Sitting continually in restricted position**Mental and Emotional Demands:**Intense concentration required when dealing with emergency calls ensuring that correct and immediate response by right people. Continuous concentration required throughout the shift to ensure callers are being routed to the correct departments. This can be difficult due to working in a noisy environmentThe service is maintained 24/7. Dealing with demanding and distressing calls, while remaining calm and in control of the situation at all times, this can lead to emotional and mental pressures, i.e. dealing over the phone with anxious relatives, suicidal callers, and callers who do not have English as their first language.**Working Conditions**Standard keyboard skills Continuous VDU use.Continuous use of headsets. |

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| 13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB |
| 1. Previous experience of a busy switchboard environment, although this is not essential but is desirable (full training provided on commencement).
2. The ability to use own initiative mixed with the knowledge and experience to provide the best possible service to system users.
3. Must be able to listen and put aside any emotions that may arise for a sensitive situation, providing the best possible service to the caller. Examples of sensitive calls are relatives regarding bereavement within hospital, parents calling for missing children, or patients that are suicidal or have mental health issues. Must be compassionate.
4. A good understanding of computer technology with the ability to access various computer programmes.
5. Must be able to cope under pressure, often alone and to be able to react and prioritise actions accordingly
6. The ability to communicate effectively with the general public, staff at all levels in the organisation.
7. An understanding of the hospital organisation and procedures
8. Mandatory Induction Standards and Code of Conduct for Healthcare Support Workers – NHS Circular CEL(2010)23.

Your performance must comply with the “Mandatory Inductions Standards for Health Care Support Workers in Scotland” 2009; and with the Code of Conduct for Health Care Support Workers, both as amended from time to time, which will be issued with your contract (further copies can be obtained from Human Resources). Failure to adhere to the Standards or to comply with the code may result in poor performance measures or disciplinary action and could lead to dismissal; or if you are self-employed, such failure will be deemed to be a breach of an essential term of your contract, allowing us to terminate with or without notice. |

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| **14. JOB DESCRIPTION AGREEMENT** |
| A separate job description will need to be signed off by each jobholder to whom the job description applies. Job Holder’s Signature: Head of Department Signature: | Date:Date: |

**History:**

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| Version | Date | Comment |
| V1.0 | November 2009 | - |
| V1.1 | September 2018 | Updated to reflect current eHealth status/scope.  |
| V1.2 | November 2020 | Updated to reflect business needs/integrated service |