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| **1.     JOB IDENTIFICATION** |
| Job Title: Advanced  Nurse Practitioner– Hospital at Home West Fife    Responsible to :  Hospital at Home Team Leader  Department(s):  ICASS    Directorate:  H&SCP    Job Reference:    Last Update :  24/08/20 |

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| **2.  JOB PURPOSE** |
| The Advanced Nurse Practitioner (ANP) is an experienced and highly educated Registered Nurse who manages the complete clinical care for their patient, not solely any specific condition. Advanced practice is a level of practice, rather than a type or speciality of practice with advanced level capability across the four pillars of practice.  The ANP’s focus is on the overall management of patients admitted to the hospital at home service and management and treatment of complex or acutely unwell or frail patients within the community. This will include patients in their own home and within the Nursing and Care Homes.  The ANP will demonstrate advanced practice skills in order to assess, treat (including non-medial prescribing) and monitor patients within the community setting. They will support the medical team in clinical decision making, medical reviews and ward round management. Working as part of the multidisciplinary team ANPs can work in or across all clinical settings, dependant on their area of expertise.  The ANP will provide clinical leadership, to promote high professional standards, facilitate learning, provide clinical supervision and mentorship and act as a nurse advisor to members of the Community Nursing Team and the wider Health and Social Care Partnership.  The ANP will have a role in undertaking and participating in research and audit and contribute to the development of new pathways of care as necessary to meet the needs of patients  The ANP will represent NHS Fife ANPs and Community Nursing on local and national working groups as appropriate |

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| **3. DIMENSIONS** |
| To introduce advanced clinical skills to enhance the current community nursing service provision to patients/clients in their own homes, which will include residents within the nursing and residential care home setting. The post holder has some shared responsibility for the operational management of the service in the absence of the Team Lead therefore must work in collaboration with the H@H Team leader, Community Nursing Team leader and wider health and social care partners.  **Clinical Practice**   * Triage patients who are referred ensuring patients are seen according to urgency and need and where appropriate referring the patient to the most appropriate team member for ongoing management and review. * Provide an advanced role in the assessment, treatment (including non-medical prescribing), monitoring and support for frail patients who have complex physical, psychological and social problems. * Provide complete, individualised clinical care to patients within your knowledge and expertise, referring to other Team members as appropriate, ensuring holistic approach is provided and ACP’s are in place. * Provide medical reviews to patients assessed by junior members of the team and support the medical staff. * Manage, organise, coordinate and evaluate a defined caseload and support the caseload management of other members of the H@H Teams. * Facilitate and coordinate admission and discharge to the H@H service and NHS Fife inpatient areas which will include completion of IDL’s. * Refer to other health and social care services and agencies * Liaise with other members of the MDT and partake in MDT meetings to support patients care planning * Facilitate interim ward rounds in the absence of a consultant. * Provide education to patients and colleagues to support self management and provide Anticipatory Care Plans as appropriate. * Clinical supervision will be provided by a consultant within the H@H service.   **Leadership**   * Provide professional leadership through sharing your clinical expertise provide clinical supervision, mentorship and advice to nursing colleagues * Facilitate the delivery of excellent patient care through the promotion of high professional standards and evidence based practice * Support the team lead in the operational management of the service.   **Facilitation of Learning**   * Recognise and facilitate learning needs within the Hospital at home team, and the wider Health and Social Care Partnership. * Provide a learning environment for clinical staff and students from a variety of disciplines, studying at various levels.   **Evidence, Research and Development**   * Provide evidence based care to patients and participate in research as appropriate. * Participate in audit and service feedback to demonstrate safe, effective and person centred service delivery * Review and develop services provided on a regular basis jointly with MDT members. |

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| **4.  ORGANISATIONAL POSITION** |
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| **5.   ROLE OF DEPARTMENT** |
| The main function and objectives of the Hospital at Home team within the Integrated and Community Assessment and Support Service (ICASS) are:  To provide a service for the frail elderly population of Fife (predominantly over 65yrs), which prevents acute hospital admission or facilitates earlier discharge where acute hospital admission has taken place.   * To allow people to have a period of “acute” care within their own home, which will in turn allow the person to recover from a period of illness without needing hospital admission. * To provide consultant-led alternative to hospital admission by delivering treatments at home. * To provide multi-disciplinary comprehensive geriatric assessment (CGA) to rapidly assess coexisting functional, psychological and social needs and optimise their functioning. * To facilitate prompt discharge following acute hospital admission. * To reduce incidence of acute hospital admissions and delayed discharges. * To reduce the incidence of admission to hospital from Care Homes. |

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| **6.  KEY RESULT AREAS** |
| **Clinical Practice**   * Within the context of the presenting condition, undertake a full systemic assessment, mental health assessment, physical examination and social health assessment patients who present with undifferentiated and undiagnosed problems including an advanced review if needed after NP examination. * Assess each patient’s needs and treat accordingly utilising evidence based practice. This will involve utilising highly developed clinical knowledge and advanced decision making skills to facilitate a full analysis and interpretation of the patient’s history, presenting symptoms and results of clinical examination to ensure an accurate diagnosis and subsequent management plan. This involves professional autonomous decisions for which they are accountable and use of skills not usually exercised by nurses such as the clinical examination. * Implement advanced clinical care, incorporating advanced clinical skills such as ECG and x ray interpretation and polypharmacy reviews within agreed protocols and guidelines, and within this make decisions to admit, refer and discharge. * Possess the freedom and authority to request, where indicated using judgement and clinical reasoning, appropriate diagnostic tests / investigations based on differential diagnoses. * Interpret and analyse previously ordered results of tests/investigations and work collaboratively with other healthcare professionals when needed. * Adopt a multi-agency approach to provide person-centred care throughout the continuum of care. * Act on the results to confirm diagnosis and thereby optimise treatment and management outcomes. * Formulate a person-centred care plan for the treatment of the patient, synthesising clinical information based on the patient’s presentation, history, clinical assessment and findings from relevant investigations, using appropriate evidence based practice and recognising cultural diversity and the patient or designee as a full partner in decision making. * Practice as an independent non-medical prescriber, prescribing/ dispensing/ administering within current legislation and in line with medicines reconciliation. * Implement non-pharmacological related interventions/therapies, dependent on situation and technical requirements of care * Responsible for discussion with patients and carers in relation to DNACPR and ensuring ACP are completed. * Freedom and authority to seek admission and discharge from identified clinical areas, dependent on patient need at time of review. This includes the freedom and authority to refer to all appropriate health care professional groups and agencies, working collaboratively with them.   **Leadership**   * Collaborate with the multi-professional team to develop a shared vision of the service. * Act as a role model and resource in expert clinical evidence-based practice applying knowledge of organisational practices and complex systems to improve health care delivery. * Work collaboratively with colleagues to develop effective documentation, pathways, protocols and guidelines for care. * Demonstrate a commitment to share expertise and disseminate information. * Contribute to the development of the team and the service to continuously improve patient care. * Contribute to business continuity, workforce planning and skills profiling to ensure the targeting of resources to meet the needs of the service. * Participate in implementing national standards and frameworks at a local level. * Network locally, regionally, nationally and internationally and seek opportunities to develop the ANP role. * Have an understanding of budgetary constraints and may be required to manage budgets. * Use effective change management skills to initiate and implement service and practice development, making the best use of resources to improve practice and health outcomes. * Lead on the selection, interviewing, appraisal and professional development of team members. * Responsibility for line management of staff ensuring compliance with NHS HR policies as appropriate. * Maintain involvement and active input in multidisciplinary meetings and appropriate local bodies / forums to contribute to practice and service development.   **Facilitation of Learning**   * Develop, maintain and advance personal theoretical knowledge ensuring use of current evidence based literature. * Maintain high standards of clinical competence and professional development through ongoing education and attendance at relevant courses of study. * Develop and maintain a peer network of support, information and learning with other ANPs at a local and national level. * Demonstrate and evidence professional role and competence levels through own professional portfolio and reflective practice. * Contribute to the development and acquisition of advanced nursing practice and skills to enhance and extend the practice of other nurses and health care professionals within the service and beyond * Identify and address the educational needs of patients, families, carers and staff involved in the delivery of care. * Contribute to the teaching and support of junior staff members and students from the multi professional team within relevant educational programmes. * Provide an appropriate learning environment, including mentorship, coaching and preceptorship. * Organise and contribute to relevant educational programmes and in-house study days.   **Evidence, Research and Development**   * Coordinate and participate in ongoing service review and evaluation, including monitoring patient experience and outcomes in order to improve practice. * Demonstrate advanced clinical knowledge and skills in relation to clinical interventions to the multidisciplinary team, working in collaboration with education providers and key stakeholders. * Promote, develop and undertake clinical audit programmes to ensure best practice is delivered in accordance with current local and national policies and guidance. * Initiate and contribute towards research and critically appraise, evaluate and apply knowledge of theoretical frameworks, evidence and recommendations. * Interpret current research findings and implement accordingly to influence best practice. * Participate and actively seek peer review in practice and sound evidence for assurance purposes. * Identify areas of risk and address these through appropriate governance structures and forums. * Advocate and contribute to a working environment that promotes continuous learning and development, evidence based practice and succession planning, as well as identifying learning opportunities at local and national levels. |

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| **7a. EQUIPMENT AND MACHINERY** |
| **7a. Equipment and Machinery**  Responsible and knowledgeable in the safe use of all clinical and non-clinical equipment relevant to the role, checking, maintaining and troubleshooting equipment and report through identified channels.  Blood pressure machine  Glucometer  Stethoscope  Oroscope  Otoscope  Ear Irrigation equipment in line with trust Ear Care Policy  Pulse Oximeter  Doppler  ECG  Bladder Scanner  Omron  Spirometer  Nebuliser  Syringe Driver and other infusion devices  Moving and Handling Equipment  Pressure Relieving Equipment  Resuscitation Equipment  Oxygen cylinder  Fire Equipment |

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| **7b.  SYSTEMS** |
| * IT systems – Clinical portal/ECS/SCI-store/e-mail/TRAK/Docman * Telephone/communication system * Morse - Maintenance of patient care records complying with patient confidentiality * Trakcare * DATIX- manage incident reporting * Internet and Intranet * Immediate Discharge Document * Carestream PACS * iCRIS |

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| **8. ASSIGNMENT AND REVIEW OF WORK** |
| Working as an autonomous practitioner workload will be generated according to referrals received and clinical assignment via the H@H consultant. Referrals are received using a range of referral protocols from multidisciplinary teams in line with legislation and performance indicators set by the Scottish Government Health Department.  Additional work will also be generated from Team lead and Lead Nurse/ICASS Manager.  Work will be carried out and reviewed in accordance with NHS Fife policy and guidelines.  Performance review and appraisal will be carried out by identified line manager and professional nursing lead (if required).  Will have a Professional Personal Development Plan, including an assessment of clinical competence which will be reviewed annually by the responsible line manager and in consultation with the H@H consultant.  Governance of clinical competence is assessed by an appropriately qualified designated clinical lead, demonstrated and evidenced by a relevant, up-to-date professional portfolio. |

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| **9.  DECISIONS AND JUDGEMENTS** |
| Make complex autonomous clinical decisions including analysis, diagnosis, and clinical management, based on an in-depth broad expert knowledge and interpretation of clinical findings.  Prioritisation and delegation of complex caseload.  Responsible for decisions to admit and discharge from the service.  Determine referral protocols and using advanced clinical reasoning skills, make further referrals when it is identified that further clinical intervention is required.  Use own initiative and acts independently within the boundaries of own knowledge and skills liaising appropriately with other clinical specialists. |

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| **10.  MOST CHALLENGING/DIFFICULT PARTS OF THE JOB** |
| Being able to manage the organisation requirements whilst maintaining continuity of care and improving front line patient care.  Managing workload within identified resources and respond to the geographical challenges.  Working autonomously and making advanced clinical decisions.  Leading difficult conversations with patients and families relating to complex conditions, situations and prognosis.  Providing a professional advisory role to a wide variety of contacts e.g. patients, relatives, carers, junior and senior nursing, medical and paramedical colleagues.  Acting as an effective change agent integrating information gained from research and audit into clinical practice. |

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| **11.  COMMUNICATIONS AND RELATIONSHIPS** |
| Communicate verbally and in writing to members of all Health and Social Care teams, including third sector and local authority services as necessary.  The patient, their relatives and the multidisciplinary team involved in the provision of care.  Partnership, Trade Union and Professional Organisation representatives in relation to service and staffing issues.  Acts as a patient /staff advocate through the application of ethical, legal and professional knowledge and skills |

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| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** |
| This section may vary depending on clinical area. Examples may include:  **Physical Skills:**  Administer medicines, injections, syringe drivers, intravenous infusions and blood transfusions.  Administer enteral tube feeding.  Insert urinary catheters.  Apply wound dressings.  Manual handling techniques.  Keyboard skills.  Driving  **Physical Demands:**  Physical manual handling of patient, patient movement with use of mechanical aides  Push wheelchairs and other mobile equipment.  Stand/walk for the majority of shift.  Transportation of equipment e.g oxygen, ECG machine  **Mental Demands:**  Concentration is required at all times when caring for patients and undertaking clinical decision making.  Maintenance of precise and accurate records and report writing.  Frequent interruptions from patients / relatives / team members.  Concentration required when decision-making  **Emotional Demands:**  Communicating with distressed / anxious / worried patients and relatives.  Caring for patients and relatives following receipt of bad news and supporting them in identifying realistic expectations in relation to clinical conditions.  Communicating with and caring for patients who have reduced understanding and insight due to cognitive impairments.  Caring for the terminally ill.  Motivating and supporting junior staff / colleagues in the work environment.  **Working Conditions:**  Exposure to body fluids.  Potential exposure to verbal and physical aggression from patients and relatives / other visitors.  Exposure to infections and temperature variations.  Lone working. |

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| **13.  KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB** |
| ANPs are educated at Masters Level in advanced practice and are assessed as competent in this level of practice. As a clinical leader they have the freedom and authority to act and accept the responsibility and accountability for those actions. This level of practice is characterised by high level autonomous decision making, including assessment, diagnosis and treatment (including prescribing) of patients with complex, multi-dimensional problems. Decisions are made using high level, expert knowledge and skills. This includes the authority to refer, admit and discharge within appropriate clinical areas.  Registered Nurse on the NMC Register  Be recorded as a Non-medical Prescriber (V300) with the NMC  An appropriate Masters level qualification in Advanced Practice which has enabled competence in:   * *Clinical assessment* * *Clinical reasoning, judgement and diagnostic decision making* * *Anatomy and pathophysiology* * *Non medical prescribing- V300* * *Leading, delivering and evaluating care* * *Practice learning/transferable work based learning*   Significant comprehensive post registration experience within a healthcare setting some of which must be at a senior practitioner level  A commitment to lifelong learning and demonstrates evidence of continuing professional development  Can demonstrate experience in managing staff, leading a team, providing education and training and establishing a supportive, learning environment  Successful track record in working in multi-disciplinary team settings and promoting collaborative approaches to delivering excellent patient care  Immediate Life Support |

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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: |