**JOB DESCRIPTION **

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| 1. JOB IDENTIFICATION | |
| Job Title: | Nurse Practitioner |
| Responsible to | Team Leader |
| Department(s): | Integrated Community Assessment & Support Team – Hospital at Home |
| Directorate: | Community Services |
| Operating Division: | Health and Social Care Partnership(HSCP) |
| Job Reference: |  |
| No of Job Holders: | 2 |
| Last Update: | February 2024 |
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| 2. JOB PURPOSE |
| * Working within the multi professional Integrated Community Assessment & Support Service (ICASS) you will be responsible and accountable for delivering skilled nursing care, reducing inappropriate admissions to hospital and facilitating earlier discharge from hospital for the HSCP population. * To provide a holistic assessment for patients; plan, implement and evaluate programmes of care to meet individual health needs. * Refer to other health care colleagues and other agencies as required to meet identified needs of patients. * To undertake detailed clinical assessment, diagnosis and treatment of patients within the acute setting and their homes. * To exercise a high degree of professional autonomy whilst working closely as part of a multi-disciplinary team. |

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| **3. DIMENSIONS** |
| To expand the current service provision to patients/clients in their own homes this will include residential care. The Hospital at Home service aims to augment clinical and social provision, the objective being to reduce the requirement for hospital admission and, where appropriate, reduce the length of stay in hospital. The service aims to focus on patients where their acute medical conditions can be managed safely and effectively in their own home.  The post holder has a shared responsibility for the service and to work in collaboration with Acute Services, the Team leader, medical staff and other members of ICASS.  This job involves 7 day working within office hours. |

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| 4. ORGANISATIONAL POSITION: This will vary across the HSCPs |
| ICASS Manager  Consultant  Team Leader  Medical staff  Advanced Nurse Practitioner  Nurse Practitioners  Clinical Support Worker  Allied Health Professionals  Staff Nurse |

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| 5. ROLE OF DEPARTMENT |
| The main function and objectives of the Hospital at Home Team within the Integrated Community Assessment & Support Service (ICASS) are to:   * Provide advanced clinical assessment, plan, implement and evaluate medical and nursing care packages, in partnership with primary and secondary colleagues, social work and the voluntary sector; * Promote health, manage and maintain patients at home with Long Term Conditions * Active involvement in anticipatory care * Support a reduction in hospital admissions or early discharge through delivering acute medical and nursing care at home. * Deliver clinical care within a robust clinical governance framework. * Utilise the skills of the workforce to best meet the needs of the community * To liaise with other ICASS team members & District Nurses * Provide high quality nursing interventions in a safe, efficient and effective manner |

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| 6. KEY RESULT AREAS |
| * To effectively support identification of patients within acute setting suitable for Hospital at Home and support triaging. * To perform a comprehensive geriatric assessment, detailing the differential diagnosis, management plan and the list of investigations, commencing/completing the Hospital at Home clinical assessment/documentation whilst on site in acute setting. * Within the community organise appropriate diagnostic tests ensuring results are available for the virtual ward round. * Within the community present the patients at the virtual ward round ensuring co-ordination and ongoing management of care. * Undertake the advanced clinical assessment, where appropriate, develop, implement and monitor clinical intervention. * Ensuring that services are delivered in an equitable, efficient, effective and safe manner, within a variety of clinical settings. * Within the community recognise and appropriately escalate those patients who require hospital admission. * Maintain accurate up to date clinical records and care plans in accordance with NMC code, NHS Fife policies and guidelines, national legislation, good practice and patient confidentiality. * Undertake a range of clinical duties ensuring all protocols and policies, are implemented and adhered to. * Support patients, relatives and carers in order to achieve optimum health outcomes. * Actively promote self care in conjunction with the patient and carer. * Provide a key role in participating in the delivery of long term condition management. * Within the community, if identified, in the absence of the Team Leader responsible for the day-to-day line management of Hospital at Home staff within your scope of responsibility * Working within multi-agency partnerships to support quality care for all patients. * Initiate and participate in needs assessments, audits and evaluations in line with NHS Fife Policy and local operational procedures. * Initiate and review personal development planning for junior staff where required. * Initiate, establish and maintain good working relationships with patients, carers, ICASS and members of the Primary Health Care Team to support multidisciplinary working. * Work in partnership with other services to meet the needs of patients with complex care needs including preventing admission to hospital and supporting early discharge in line with local operational procedures * To act in accordance with the NMC code and ensure that the highest standard of professional conduct is maintained * Ensure that all risks are identified and managed in line with local operational procedures and NHS Fife guidelines to promote staff and patient safety * Participate in work to support appropriate patient and carer focus and involvement in service developments and evaluations. * Provide mentorship & support to clinical staff and students. * Develop and participate in health education activities, promotion of lifestyles, and prevention of disease to support the Public Health Agenda. * Provide educational support and clinical placement for pre and post-registration students, junior staff and medical students |

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| 7a. EQUIPMENT AND MACHINERY |
| Within the community responsible for ensuring that patient equipment is well maintained regularly serviced and safe to use e.g. manual handling equipment, pressure relieving equipment, aural toileting equipment, syringe driver etc. Assessing patient requirements for equipment on a regular basis. Responsible for all nursing equipment, issuing and replacing. |

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| **7b. SYSTEMS** |
| * MORSE electronic records and Patients care plans. * Anticipatory/advanced Care Planning * Activity Monitoring * Clinical Assessment Systems. * Laboratory Systems – specimen results. * Trakcare or Equivalent – patient administration, discharge details, * Adastra. * Manual Handling Risk Assessment * Incident Reporting - DATIX * NHS Fife policies and procedures * Local operational procedures |

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| 8. ASSIGNMENT AND REVIEW OF WORK |
| Working as an autonomous practitioner workload will be generated according to patient need identified at ward rounds, via Team leader, Community Geriatrician, medical staff.  Work will be carried out and reviewed in accordance with NHS Fife’s Policy.  Performance review and appraisal will be carried out by the Team leader bi monthly and annually as part of PDP. |

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| **9. DECISIONS AND JUDGEMENTS** |
| Assessing and interpreting patient’s condition in both acute and chronic situations, making relevant changes to patient care/management as required.  Recognising deterioration in patient’s condition, requiring further medical intervention and escalating appropriately.  Determining when to refer to other healthcare professionals and statutory and voluntary services.  Co-ordinating and supervising other team members and taking remedial action as required to resolve disputes/staff problems within team, referring to line manager as required.  Resolution of complaints from patient/carers and determining when to refer to Line Manager.  Identification and management of risk, referring to line manager as appropriate. |

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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 within the home. * Being the sole practitioner on site for Hospital at Home and being able to assertively communicate if patient’s needs cannot be managed safely at home. * Managing caseload within identified resources. * Dealing with ever changing clinical procedures and demands especially at short notice. * Developing the leadership role of the Nurse Practitioner to support implementation of changes relating to the development of The Integrated Community Assessment & Support service. * Working autonomously and making advanced clinical decisions. * Request or perform & interpret advanced diagnostic investigations. * Meeting patient/family and organisational expectations * Encouraging patients to manage their own health needs whilst promoting self-care * Lone working in the community |

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| **11. COMMUNICATIONS AND RELATIONSHIPS** |
| The Nurse Practitioner will regularly communicate with various people by face-to- face contact, on the telephone, in written correspondence or by email.  Internal   * The postholder will be expected to communicate and liaise with the patient, their relatives/carers and the multidisciplinary team involved in the provision of care. * Nursing staff/students – patient care, allocation of work, workload issues * Other relevant departments within NHS FIfe e.g. Estates, Supplies, Human Resources, Fire Officer, Infection Control. * Staff Organisations * Consultant * Medical staff. * Team Leader * Lead Nurse * Intermediate Care Team and Discharge Co-ordinator * General Practitioners * Community Nurses. * Specialist Nurses * Fife social care services – home care manager, Social worker   External   * + Hospital Staff re patients admission and discharge and complex case conferences   + Other relevant external agencies – regarding patient care   + Voluntary Services * NHS Bodies * Statutory and voluntary agencies * Pharmacists * Institutes of Higher Education. |

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| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** | |
| **Physical Skills**   * Advanced Clinical assessment skills * Administration of bolus and infusion medications * Maintenance of Peripheral inserted Central Catheter * Wound Management * ECG interpretation * X-Ray interpretation * Immunisation * Administration of injections, intra-venous, intra-muscular, sub-cutaneous & syringe drive infusion - constantly * Insertion of urinary catheter - regularly * Cannulation & Venepuncture * Clinical Nursing Skills, e.g. Compression Therapy, Pulse Oximeter | **Physical Demands**   * Use of manual handling equipment * Driving throughout shift especially in adverse conditions i.e. bad weather, traffic congestion, rural roads etc * Working in a restricted environment e.g. physically cramped conditions * Kneeling and crouching e.g. to dress wounds * Carrying equipment from base to patients home -constantly |
| **Mental Demands**   * Communicating with distressed/ anxious/worried patients/relatives - frequently * Caring for the acutely/ terminally ill - frequently * Caring for patients following receipt of prognosis – occasionally * Staff management – constantly * Management of Workload – constantly * Carrying mobile phone and answering calls when on duty-constantly. * Ability to make autonomous, timely clinical decisions in a patients home- constantly * Concentrating when calculating medications – constant interruptions with patient talking – constantly * Concentrating /dealing with the competing demands of the role-constantly * Medicines management and focus on contraindications for use at home. | Emotional Demands   * Caring for acutely/ terminally ill patients * Dealing with distressed/anxious patients and/or relatives * Working in isolation * Unrealistic expectations from patients and carers * Team issues * Staff support * Having challenging conversations with colleagues |
| **Working Conditions**   * Dealing with exposure to body fluids, faeces, vomit, blood, exudate – constantly. * Exposure to infection -frequently * Exposure to verbal / physical aggression – occasionally * Exposure to passive smoking – occasionally * Exposure to animals of unknown temperament – frequently * Delivering service in differing domiciliary situations, including poor environment - regularly * Delivering service in potentially threatening situations – occasionally * Working alone in community especially at night – constantly | |

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| 13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB |
| * First Level Registered Nurse * First level Degree and / or relevant experience * Recognised Advanced clinical assessment skills module at degree level or above * Evidence of Continuous Professional Development * Ability to travel * Be able to evidence high standards of clinical care delivery * Excellent communication and interpersonal skills * Problem solving skills * Time management skills and ability to manage competing demands. * Demonstrating understanding and implementation of evidence based practice * Ability to work well under pressure * Ability to work on own initiative * Ability to work flexibly as part of a team and also over a locality or geographical area * IT skills * Staff Management/Leadership Skills * Mentorship in line with NMC standards to support learning for pre-registration students and new staff * Clear knowledge of national health agenda and strategies influencing ICASS. * A level of English Language competency and communication skills necessary to perform this role safely and effectively * Non Medical Prescribing |

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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: Date:  Head of Department Signature: Date: |

RECRUITMENT AND SELECTION STANDARDS



PERSON SPECIFICATION FORM

Post Title/Grade: Band 6Date: February 2024

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|  | **ESSENTIAL** | **DESIRABLE** |
| **Qualifications/**  **Training** | * First Level Registered Nurse * First level Degree or relevant experience. * Evidence of continuous professional development. * Clinical Decision Making * Non-medical prescribing | * ECG interpretation * IV Bolus Administration * X-Ray awareness * Comprehensive Geriatric Assessment Monitoring * Mentorship in line with NMC standards to support learning for pre-registration students and new staff |
| **Experience** | * Experience of clinical assessment. * Working as part of multi-disciplinary team. * Substantial experience of working in at least two different clinical environments * Experience teaching/educating students/colleagues etc. | * Previous experience of working within the community. * Experience of working within protocols / algorithims / guidelines. * Budget management. * Lone working. |
| **Skills, Knowledge & Aptitude** | * Excellent communication skills. * Effective decision-making skills. * Triaging of Patients. * Ability to lead and influence. * Ability to interpret and manage clinical conditions * Ability to set priorities and manage competing demands. * Understanding of the importance of confidentiality. * Computer literate. | * Experience of managing and reporting operational risks. * Evidence of recent academic education. * Cannulation & Venepuncture |
| **Other** | * Self motivated and able to use own initiative. * Ability to work within time constraints. * Ability to work effectively as a team member. * Responds flexibly to changing service needs. * Ability to develop new skills. * Ability to work flexibly as service requires * Ability to travel throughout the locality |  |