####  **FHSCP_logo_col_letter**

|  |
| --- |
| JOB IDENTIFICATION |
|  Job Title: Senior Nurse Team Leader – Community Childrens NursingResponsible to (insert job title): Lead Nurse CYPCNSDepartment(s): Children and Young Peoples Community Nursing ServiceDirectorate Children’s Services Fife Wide Division No of Job Holders: 3Last Update (insert date): February 2021 |

|  |
| --- |
| 2. JOB PURPOSE |
| To assist the Lead Nurse in the development and provision of a 24 hr Children and Young Peoples Community Homecare Nursing Service for the acute and chronically sick child throughout Fife.To lead on the operational aspects of the delivery of nursing care to all the children within the caseload of the Special Schools, Out of School Clubs, Continence, Glenmar- Residential Care and respite. |

|  |
| --- |
| **3. DIMENSIONS** |
| Managerial responsibility * Has an in depth understanding of the whole service so the jobholder can deputise for the lead nurse in her absence.
* Manages the caseload of children within the residential unit and homecare packages, ensuring a holistic family centred approach is achieved.
* Directs and promotes audit, research based practices and develops quality standards for the homecare service.
* Line manages a team of registrants and non-registrants for the residential / homecare team.
* Line manages a team of registrants for the special schools.
* Carries responsibility for addressing the needs of the staff that are line managed. (Inc. training needs, staff appraisal, HR issues.)
* Carries continuing responsibility for the deployment of staff involving skill mix and competency base to various community settings ranging between 300 -800 hrs per week. (Inc. homes, residential and respite facilities, special and mainstream schools, out of school clubs) with an accompanying 24 hr on call service. Coordination of bank staff as required
* The work covered can be anywhere within the boundary of Fife.

Clinical * Continues to practice as a nurse to ensure clinical credibility and knowledge base is current for the children looked after.
 |

|  |
| --- |
| 4. ORGANISATIONAL POSITION |
| Being Reviewed |

|  |
| --- |
| 5. ROLE OF DEPARTMENT |
| This service caters for children with a high complexity of need, (this meaning that there is more than one difficulty to be taken into account when caring for the child (eg neurological, respiratory, cardiac difficulties) affecting activities of daily living such as eating, mobilising or intellectual ability. This would indicate them having to be in a hospital setting if not  supported by the CYPCNS service. * The Homecare Team and Special Schools team are divisions / departments of the Children and Young Peoples Community Nursing Service
* The staff have differing levels of skills and abilities so offer support in many different ways.
* The children are referred by any health professional or parent, whereby they have an assessment of need carried out which determines the level of support they require.
* The settings the care is provided in are family homes, special needs and mainstream schools, development centres, respite units and after school facilities.
* It provides through the team specialist advice to parents / carers and other professionals pertaining to the acute or chronically sick child.
 |

|  |
| --- |
| 6. KEY RESULT AREAS |
| * To manage the caseload and coordinate with families/carers, children and multi-agency team members to ensure that the assessment, planning, implementation and evaluation of programmes of care is achieved within the available resources, and to the highest standards.
* Offer specialist advice and guidance to staff, and multiagencies alike on clinical matters pertaining to specific children.

Deputises for the lead nurse as necessary* Responsible for devising the roster for all the packages, and for the on call service and participates in on call for the homecare service.
* The jobholder supports the lead nurse in the recruitment and selection procedures for homecare/respite/residential, special schools nursing service. Out of school clubs and continence, taking the lead for that in the Lead nurse’s absence.
* The jobholder carries responsibility for the development and implementation of teaching and orientation programmes for new members of staff to the team. (Inc. training needs analysis beforehand and ongoing monitoring of competencies and skills)
* Takes an active role in facilitating and teaching theory in classroom settings and practice in the home settings to qualified and unqualified staff, as and when required.
* The jobholder is responsible for developing and implementing a performance management/appraisal system for members of the homecare/respite/residential, special schools / Out of schools club nursing, Continence
* To develop and maintain an environment that fosters open communication and trust with families, children and working colleagues, taking the lead in organising and chairing multi agency meetings specific to the present and future care needs of individual children.
* To supervise the professional work of staff within the team in accordance with:

NMC code of conductDivision policiesSOPSChild protection* To be responsible for and ensure own practice and professional development are carried out in accordance with the above documents.
* Ensure all staff members managed maintains clear and concise records within the settings they are working in.
* Carries responsibility for reviewing and evaluating the efficiency of policies/guidelines and documentation across all areas of responsibility in accordance with CYPCNS governance famework
* To be innovative in future service developments sharing ideas and initiatives with the whole team and following discussion with the lead nurse, take the lead in implementing them.
* To participate in research and clinical audit as directed.
 |

|  |
| --- |
| 7a. EQUIPMENT AND MACHINERY |
| * To have a working knowledge of all the equipment being used within a home or community setting.
* To ensure the safe use of that patient related equipment knowing the systems in place for maintenance and replacement.
 |
| **7b. SYSTEMS** |
| * To maintain accurate patient records
* The ordering of supplies electronically.
* Report writing and preparation of SBARS for service developments
* Contribute timely and accurate data to assist the monitoring and evaluation of the homecare service activity.
 |

|  |
| --- |
| 8. ASSIGNMENT AND REVIEW OF WORK |
| * Work is generated by Primary, Secondary and Tertiary healthcare establishments.
* Work is generated by the needs of the service on a day to day basis and via delegation of specific tasks from the Lead nurse..
* The jobholder works autonomously and has the freedom to act as service needs change. E.g. Redeployment of staff through sickness
* Personal and professional development is undertaken through objective setting and regular supervision.
* The standard and quality of work is reviewed through own professional codes of conduct and Division Policies.
 |

|  |
| --- |
| **9. DECISIONS AND JUDGEMENTS** |
| * The jobholder is expected to make professional and managerial decisions on a daily basis.
* The skills required to assess and interpret the acute or chronic clinical condition of a child

and advising on the appropriate action to take.* Makes decisions relating to the homecare and special schools services in the lead nurses

 absence, such as the management of an incident and supervision of  the process.* Managing people and related issues.
 |
| 10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB |
| * Maintaining the quality of service provision within existing resources
* The diversity of the day-to-day issues that arise.
* No day is the same, one example being the fluctuations of the requirements of the homecare packages. A child who receives 24hr care suddenly requires to access hospital due to illness, those staff need redeploying and knowing where they can go from a skills, abilities and personality perspective, and would they be willing to move at such short notice.
* The geographical area covered, engendering a team spirit in a workforce that is very diverse and spread out.
* Managing people.
* The flexible approach required when going into a families house. They will not always be following or adhering to the standards you wish of them. Consequently, working with these families at the same time as ensuring the child is safe and happy can be challenging.
* Acting as an advocate for the child when they cannot communicate their needs to you in a straightforward manner.
* Working in a multi agency way with all the different ethoses, principles and ways of

 working that accompany that, whilst still ensuring the care is delivered. * Working with and supporting children/families with life limiting conditions, terminal illness, those with complex needs without direct medical backup.
 |
| **11. COMMUNICATIONS AND RELATIONSHIPS** |
| * To establish good relationships with children, parents and professionals. Communication will take place through face to face, on the telephone, electronically or written correspondence.

Internal contacts* Line Manager and working colleagues, - chairing, attendance and contribution at team meetings re clinical, service and policy issues.
* Administrative staff
* GP’s
* Health Visitors, - discussions could be around concerns of a child protection nature.
* Hospitals, - re discharge planning.
* Allied Health professionals

External* Statutory agencies such as social work, education, - chairing, attendance and contribution at multi agency meetings about a child’s future care needs.
* Voluntary agencies such as charities.
* Parents / carers, - discussion and coming to agreement about what they want and what we can offer in the way of support. The use of tact, persuasion and negotiation skills is an integral part of that.
 |

|  |
| --- |
| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** |
| PhysicalMental* Concentration on documentation of various kinds, report writing, off duty, evaluating nursing documents.
* Numerous frequent interruptions to answer personnel issues, family concerns.
* Concentration required prioritising the workload and planning.
* Concentration on assessing children and chairing meetings.

Emotional* Dealing directly with families, supporting them to sort or address concerns they have, such as staff members they are not getting on with to worries at their child’s condition.
* Exposure to verbal or physical aggression due to client group.
* Families coping abilities, can manifest itself through various emotions. Need tact and diplomacy to achieve that.
* Able to deal with discussion of news with families regarding terminal illness, bereavement.
 |

|  |
| --- |
| 13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB |
| * Registered Nurse, Child Branch or Registered Sick Children’s Nurse.
* BSc degree in Community Child Health or Management or equivalent
* Experience of or relevant teaching qualification
* Significant post registration experience.
* Excellent communication and interpersonal skills.
* Ability to work off own initiative
* Time management and problem solving skills.
* Adaptable and flexible to change
* IT skills
* Evidence of continual professional development.
 |

|  |
| --- |
| **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: |