#### **APPENDIX 5**

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#### **JOB DESCRIPTION**

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| 1. JOB IDENTIFICATION |
|  Job Title: Assistant Practitioner (Mental Health/LD)Responsible to (insert job title): Senior Charge NurseDepartment(s): Inpatient Service AreasDirectorate: Mental Health/Learning DisabilityOperating Division: Royal Edinburgh and Associated ServicesJob Reference: L-GEN-NM-REAS-AP No of Job Holders: MultipleLast Update (insert date):[NB: please do not use an auto-update function] |
| 2. JOB PURPOSE |
| To work in support of registered nurses in the assessment, planning, implementation and evaluation of care to patients, without the direct supervision of a registered practitioner.As part of a multidisciplinary team, the post holder will deliver a range of care duties and interventions for patients some of which may be ongoing, delegated by a registered nurse or other relevant professional.They will also provide support and education directly to carers. May supervise/assess clinical support workers.May participate in case conferences and case review meetings, e.g. safeguarding. |

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| **3. DIMENSIONS** |
| The post holder will support the delivery of care patients under the supervision of a registered practitioner.Financial Responsibility:Maintain stock levels of all supplies.Be aware of the resources available and the need to work within the financial envelope. Staffing Responsibility:Supervision of junior staff (non registered practitioners).The post holder is employed within NHS Lothian and there may be a requirement to work flexibly across Lothian to meet service demands. |
| 4. ORGANISATIONAL POSITION |
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| 5. ROLE OF DEPARTMENT |
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| 6. KEY RESULT AREAS |
| Clinical1. To support NHS Lothian’s values of quality, teamwork, care and compassion, dignity and respect, and openness, honesty and responsibility through the demonstration of appropriate behaviours, attitudes and opinions.
2. Under the delegation of the Registered Mental Health/Learning Disability Nurse and within scope of role, participate in the assessment of patient needs E.g undertaking the initial admission process to identify immediate care needs and preparing initial care plan; describing findings and communicating relevant information to Registered Nurse to inform more comprehensive care and treatment planning; assessing effectiveness of interventions at point of care delivery and adjusting intervention if needed to reflect immediate needs of patient.
3. Implement and evaluate programmes of care and education on a 1:1 and Group basis for patients or carers and consult/involve patient/carers at all stages of the patient journey to gain feedback and ensure patients receive a high standard of rights based, trauma informed person centred nursing care.
4. To carry out a range of clinical duties with minimal/no direct supervision, adopting a holistic approach to care to ensure the physical healthcare needs of patients are met. This m ay include completion of NEWS, Glucose Blood monitoring; phlebotomy; MUST and onward referral to dietetics; Waterlow; PEG feeding; falls risk screening and intervention; wound management; medication side effects monitoring; continence management; ECG recording NB: this list is not exhaustive and will vary depending on clinical service area of work.
5. Followng discussion with Registered Nurse plan and organise own workload in planning home/community based visits and reprioritising as required to ensure the interests of  patients are met.  E.g supporting patients on passes out of the hospital to implement aspects of the care plan and assess their preparedness for discharge; supporting patients in their transition to new living arrangements/introduction of new care providers; carrying out home visits with patients/and carers to assess their living circumstances and abilities. Liaising with other agencies on living needs e.g social work, housing.
6. To have an awareness of potential risks within the working environment, assessing these at all times, and work within the defined policies, procedures, standards and protocols to ensure maintenance of safe working practices for self, patients, carers  and wider public.
7. Develop and maintain effective communication with patients, relatives, carers and other members of the multidisciplinary team, ensuring any observed changes in the patient’s condition or relevant events are effectively communicated both verbally and in writing in accordance with agreed standards for documentation.
8. Escalate any clinical issue/concerns to registered practitioners and refer patients, relatives/carers to a registered practitioner for any questions/concerns they may have on the patient’s condition or treatment plans or for any suggestions or complaints that they wish to raise.
9. Recognise and respond appropriately to deteriorating patient or clinical emergencies such as propensity for violence and aggression; suicidality; physical emergencies such as anaphylaxis, seizures etc utilising knowledge and skills learnt to assist in emergency situations. This will include level 3 Management of violence and aggression; first aid; CPR.
10. Participate in audit systems to monitor the delivery and standards of care given to patients and their families. E.g PCAT Audits; patient experience and feedback; Quality Improvement initiatives.
11. To work within defined legislation, standards, protocols, policies and procedures for mental health, capacity, vulnerable adults, safeguarding and NHS Lothian as well as the standards set in the Health Care Support Workers Code of Conduct to ensure the delivery of the highest level of patient care at all times.
12. Develop the role by using evidence based practice and continuously improve own knowledge and practice through CPD, reflective practice, supervision.
13. To co-operate with and maintain good working relationships with colleagues and the public. Have an empathetic approach to patients, carers and relatives, answering any queries, suggestions or concerns they may have where possible, referring them to the registered nurse where appropriate.
14. To maintain up to date written and electronic records and reporting and escalating as required, informing the registered nurse of any changes or outcomes of clinical interventions undertaken including any observed change in the patients condition. Recording any changes/treatments administered/action taken to comply with local, Professional and Health service standards.  Maintain patient confidentiality at all times.
15. Actively support new staff and learners within the department to meet competencies within scope of the role and level of training.  This will include responsibility for the induction of Band 2 / Band 3 Healthcare Support Workers and Clinical Support workers to the team; delegating of their tasks and providing supervision of direct patient care; participating in their appraisal with the Registered Nurse.
16. To maintain stock levels of all supplies and carry out housekeeping duties to support and maintain the safe and effective running of the department in order to promote effective and efficient use of resources. This will require an awareness of the budget allocation for the ward/dept and ensuring efficiency in stock controls.
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| 7a. EQUIPMENT AND MACHINERY |
| The postholder will be expected to be responsible and knowledgeable in the safe use of all clinical and non clinical equipment used within the area ensuring this is checked and maintained and where problem are identified these resolved so that all equipment is fit for purpose.The following are examples of equipment which will be used when undertaking the role: Manual Handling equipment:Stand-aid, full body hoist, bath hoist, glide sheets, pat slide, banana board (dependent upon clinical service area of work).Communication aids:Telephone, computers, picture mats; teleconferencing.Medical Equipment :Glucometer, Blood pressure and temperature monitoring equipment, blood collection systems, ECG monitor.Personal Safety Equipment.Pin Point alarms; Identicom lone working.Fire Alarm.Other:Nurse call system, various walking aids, raised toilet seats, electric bath, wheelchairs, trolleys, weighing scales, height measurement tool, specialist mattresses.This list is not exhaustive.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.Datix for adverse event reporting.TRAK for patient records and clinical risk assessment.TURAS.eExpenses.Tableau Dashboard for performance monitoring.PECOS for ordering supplies and equipment.Other clinical records.eESS Training records.Internet, intranet, Microsoft Office software.eLearning platforms.PCAT Audit tool.Pin Point Staff Alarm.Electronic security systems.Fire Alarm System.Lone Working Identicom system.Health and Safety system (e.g. environmental risk assessments).Note: New systems may be introduced as the organisation and technology develops, however training will be provided. |
| 8. ASSIGNMENT AND REVIEW OF WORK |
| The daily/weekly workload will be assigned and delegated by a Registered Mental Health/Learning Disability Nurse.The post-holder will be expected to plan any delegated home  ommunity visits within safe limits to best meet interest of patients and wider ward activity guided by standard operating procedures (SOPs) or best practice and established precedents, working with minimum or no direct supervision from the registered nurse. This may be 3-4 times per week, however,  generally someone is available for reference  The post holder will be responsible to a Registered Mental Health Nurse for clinical guidance, supervision and professional management. Work review and formal appraisal of performance will be carried out by the appropriate Registerd Nurse line manager. |
| **9. DECISIONS AND JUDGEMENTS** |
| In partnership with the registered practitioner discuss, plan and prioritise daily workload. Within competency, clinically assess and analyse a number of clinical options to establish any changes to the patients, inform other members of the multidisciplinary team as necessary and carry out subsequent agreed and delegated plan of care.Provide an overview of interactions/interventions with individual patients and carers, report to registered practitioner any deterioration or improvement in condition/life events/adverse events/relevant information by agreed route of escalation.Work at all times within own scope of practice, recognising when to seek help /advice from registered practitioner.Be able to make judgements, decisions and respond appropriately to unpredictable/emergency situations by taking effective action – this could be on a daily basis. |

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| 10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB |
| In partnership with the registered practitioner discuss, plan and prioritise daily workload. Within competency, clinically assess and analyse a number of clinical options to establish any changes to the patients, inform other members of the multidisciplinary team as necessary and carry out subsequent agreed and delegated plan of care.Provide an overview of interactions/interventions with individual patients and carers, report to registered practitioner any deterioration or improvement in condition/life events/adverse events/relevant information by agreed route of escalation.Work at all times within own scope of practice, recognising when to seek help /advice from registered practitioner.Be able to make judgements, decisions and respond appropriately to unpredictable/emergency situations by taking effective action – this could be on a daily basis. |
| **11. COMMUNICATIONS AND RELATIONSHIPS** |
| The post holder will:Communicate on a daily basis with the patient, their relatives, the multidisciplinary team, internal and external agencies involved with the provision of care using effective verbal, non verbal and written communication.Communicate with patients/clients using empathy and reassurane where there is barriers to understanding, with mental illness or/and intellectual disabilities who are frequently distressed, thought disordered, coginitively impaired, hostile or antagonistic.Communicate with the nursing team regarding patient’s care, allocation of work, workload issues and personal development.Communicating effectively with carers/relatives.Provide advice, guidance and instruction to junior staff. |
| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** |
| Physical Skills and Demands:  Skills to undertake safe management of violence and aggression to level 3 physical restraint.Skills required to undertake clinical interventions e.g. administer sub-cutaneous fluids; application of lotions and emollients, wound management including applying dressings, blood glucose monitoring.Manouvering wheelchairs.Venepuncture.PC skills.Manual handling skills.Vital Signs monitoring.PEG tube balloon maintenance.End of life care.(this list is not exhaustive and will vary depending on clinical area).Physical Demands:Manual handling on a daily basis including e.g. safely manoeuvre patients some of whom may be highly dependant, manoeuvring wheelchairs, hoists, moving clinical equipment.Regularly kneeling and bending for short periods e.g during physical restraint. Stairs – frequently.Stand/walking for the majority of shift.Sitting for long periods at PCs to complete documentation sets.Mental Demands:Maintaining high levels of patient interaction on a daily basis and concentration required when observing patients behaviours and presenting conditions which are often unpredictable and undertaking clinical duties whilst providing ongoing risk assessment.Engaging in 1:1 conversations and interventions with patient’s up to one hour at a time and undertaking group work with patients/carers. Maintaining high levels of concentration on a daily basis when checking documents / case notes and documentary observation whilst subject to frequent interruptions from patients / relatives / team members.Acting expediently and appropriately by escalating to appropriate staff when responding to crisis situations.Dealing with frequently changing situations and unpredictable events (e.g. new patients admitted to ward; violence and aggression; falls; patient illness) prioritising demands of clinical and non-clinical workload.Constant awareness of risk factors.Emotional Demands:Communicating with psychotic, intellectually impaired; cognitively impaired; distressed; anxious; worried patients and their relatives/carers; supporting relatives/carers.Exposure to highly sensitive and distressing information in respect of patient social histories and Trauma experiences and presenting mental state.Supporting new staff and learners.Unpredictable work environment.Environmental: Frequent exposure to episodes of verbal and physical aggression and violence from patients.Working in conditions, which involve daily exposure to bodily fluids including sputum, vomit, urine, faeces, open wounds and exudates.Unpredictable environments in home and community settings.Travel and work outdoors in inclement weather.Lone working. |
| 13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB |
| Educated to SCQF level 6/7 or equivalent.Educated to SCQF Level 8 e.g. completion of Professional Development Award (PDA) plus completion of an agreed period of mentorship and demonstration of up to date competencies for any additional skills required to undertake role within the clinical area.Effective team player.Effective written and verbal communication skills.Effective interpersonal skills.Experience of carrying out delegated responsibilities and working without direct supervision.Experience of working with people with complex mental, intellectual or physical needs.Awareness of equality and diversity needs of patients and staff.Organisational and time management skills.IT literacy skills.Management of Violence and Aggression Training to level 3. |
| **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: |