**NHS GREATER GLASGOW AND CLYDE**

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| **1. JOB IDENTIFICATION**   |  |  | | --- | --- | | **Job Title:** | **ADRS Nurse – Band 5** | | **Responsible to:** | **Nurse Team Leader Alcohol and Drug Recovery Service (ADRS)** | | **Department(s):** | **Renfrewshire Alcohol and Drug Recovery Service (ADRS)** | | **Directorate:** | **Renfrewshire Alcohol and Drug Recovery Services (ADRS)** |  |  |  | | --- | --- | | **2.** | **JOB PURPOSE** |  |  | | --- | | As an integral member of the multi-disciplinary team the post-holder will work in partnership demonstrating compassionate caring behaviours to fulfil the key functions of the Alcohol and Drug Recovery Service (ADRS). In particular the post-holder will be responsible for the assessment, formulation, implementation and evaluation of programmes of care using a strength based recovery focused approach that proactively involves the person and optimises self-management. The post holder, after a period of induction, is required to be able to undertake duties without direct supervision as well as supporting and supervising work undertaken by junior members of staff and Healthcare Support Workers. The post holder is responsible for working with patients, carers and other professionals/ agencies in line with legislative frameworks, agreed standards and clinical policies. This involves working in a variety of community environments.  Participating in regular Nurse Supervision and Nurse Line Management are important aspects of the role. Newly qualified nurses are encouraged to participate in the Flying Start scheme.  Supervising the practice of students and junior members of staff, undertaking supervisor/assessor responsibilities as appropriate and contributing to the learning and development of the staff team are important aspects of this role.  Caring is fundamental to nursing services and to all nursing functions. The core values of nursing must underpin the practice of every nurse and drive care that promotes positive and equitable engagement with patients, families and carers as the central focus of practice. | |
| **3. ROLE OF THE DEPARTMENT**  The Alcohol and Drug Recovery Service is multi-disciplinary, composing of Addiction Psychiatry, Medical Officers, Psychologist, ADRS Nurses, Social Care Workers and Business Support staff. The Team aims to ensure delivery of safe and effective care and treatment to individuals attending ADRS.  The Alcohol and Drug Recovery Services function using an integrated approach and aims to:-   * Work with people with complex alcohol and/or drug dependency and associated risks who require longer-term care and treatment, multidisciplinary engagement, and with capacity to provide assertive care and to manage higher levels of risk. * Work in partnership with patients, families and carers, Alcohol and Drug Recovery Services and other agencies to design, implement and oversee comprehensive packages of health and social care needs, to support people with complex alcohol and drug recovery needs.      * Deliver services in a suitable environment that is accessible to the individual. Provide care and treatment based on the individualised assessment of need and governed by the principles of the delivery of the minimum effective level of intervention. * Working to develop a participative, therapeutic relationship and deliver quality health care in an environment where patients feel valued and where confidentiality is respected.   The principle functions of the Team are to provide Alcohol and/or Drug Interventions; provide harm reduction and prevention advice. Promoting physical and mental health wellbeing. Assessing and supporting the patient to adhere to the patient’s recovery plan.  All patients being cared for have a case manager and/or a key worker who is tasked with working closely with their identified patients/carers.  In some cases risk (potentially for a number of reasons) dictates intervention under Mental Health Legislation such as the Adults with Incapacity Act or the Mental Health Care and Treatment Act may be required. |
| **4. ORGANISATIONAL POSITION**  Nurse Director Partnerships  ADRS Service Manager  Lead Professional Nurse Advisor  ADRS Operational Manager  Professional Nurse Advisor  Practice Development Nurse  ADRS Nurse Team Lead  Senior ADRS Nurse  Band 6  **ADRS Nurse**  **Band 5 (this post)**    Healthcare Support Worker  Band 3    **Direct Report**  **Indirect Report** |
| **5. SCOPE AND RANGE**  The post-holder will be expected to work as an integrated member of the multi-disciplinary team to fulfil ADRS key functions:   * + Health and Social Care Needs Assessment   + Interventions for people with complex alcohol/drug needs   + Provide Person Centred Standards of Care   + Promoting and supporting physical and mental health well being and prevention of relapse   + Advice, guidance and signposting   The post-holder will practice within a legal & ethical framework as defined by:   * Nursing & Midwifery Council (NMC) The Code: Professional standards of practice and behaviour for nurses and midwives * National and local policy, guidelines and protocols * Other appropriate legislation which may impact on practice   The post-holders activity as a member of the ADRS Team may involve interfacing with a variety of services typically including:   * Alcohol and Drug Recovery Services * Adult /Older Adult Services * Primary Care Services * Mental Health Services * Various third sector partners   Clinical activity (direct and indirect) will account for no less than 70% of the post-holders time. Clinical activity / caseload capacity will vary depending upon local service arrangements/ patient care needs and will be monitored through caseload management by the direct nurse line manager.  The post holder;   * will be responsible to their direct nurse line manager (refer to section 4 Organisational Position). * carries a responsibility for monitoring the practice of Healthcare Support Workers/ junior members of staff to whom they have delegated aspects of patient care. * is required to utilise available resources to maximum effect whilst effectively meeting the essential demands of patient care. * will contribute towards ADRS key performance indicators. * will be responsible for ensuring continuous professional development to meet regulatory requirements and the ongoing needs of the ADRS Nursing Team. |
| 1. **MAIN DUTIES/RESPONSIBILITIES**   The post-holder will be responsible for: -   |  |  | | --- | --- | | 1. | Functioning as an ADRS Nurse/ key worker within a multi-disciplinary team for a defined patient caseload. The post will predominately involve working on an outreach basis as part of the Mobile Harm Reduction Service including out of hours provision. This will also include prescription delivery, as and when required. | | 2. | The holistic assessment of care needs including risk assessment, planning, implementing and evaluating programmes of care. | | 3. | Carrying out all relevant forms of nursing care pertinent to the needs of individual patients in the least restrictive and disruptive manner as possible. | | 4. | Responding to health promotion needs of patients focusing on improving the mental and physical well-being of patients. | | 5. | Identifying, and responding to the needs of patients which might be related to vulnerability, gender, health, domestic abuse, adult/child protection and/or self harm. | | 6. | Developing therapeutic relationships with patients and carers ensuring that care needs are identified and met within a participative framework demonstrating principles of equality, dignity and respect accounting for spiritual and cultural diversity. Working proactively with other agencies/ services (i.e. interpreter services) to aid effective communication. | | 7. | Working within agreed competency based parameters and undertaking evidence based psychological therapies/ psychological approaches to care with individuals and/ or group settings where required. | | 8. | Administering prescribed medication/ treatments in compliance with NHSGG&C Policy; monitoring effectiveness of prescribed treatments; monitoring and effective management of unwanted side effects. | | 9. | Working in partnership with patients and carers using values based practice to deliver person centred care promoting and supporting physical and mental well being and prevention of relapse. | | 10. | Ensuring that professional nursing practice (and that of others including Healthcare Support Workers to whom duties have been delegated) adheres with NMC The Code and any other appropriate legislation which would impact on patient care and treatment. | | 11. | Supporting the line manager by participating in the maintenance of a robust clinical governance within ADRS which includes establishing and maintaining; effective communication, effective leadership, policies, procedures and operational standards, clinical audit, evidence based practice, a culture of learning and innovation, participating in research activity and strategies to maintain safety and minimise risk of untoward clinical incidents. | | 12. | Participation in regular caseload/ nurse line management and supervision and regular performance appraisal including a Professional Development Plan (PDP). | | 13. | Participating in regular Supervision/ reflective practice. | | 14. | Monitoring the practice of others including Healthcare Support Workers/ junior members of staff to whom aspects of patient care has been delegated, including the provision of relevant support and development where required. | | 15. | Undertaking line management supervision / periodically appraising the performance of junior members of staff including Healthcare Support Workers, supporting their professional development. | | 16. | Support and supervise the practice of learners including student nurse mentorship and contribute to the ongoing quality development of the practice learning environment. | | 17. | Responsible and accountable for identifying and addressing development needs required for ensuring safe, effective, person centred care for self. (Newly registered nurses require to engage in Flying Start ®). | | 18. | Liaison with other statutory and non statutory agencies involved in the care and support of patients in hospital and the community with particular regard to the health and social care interface services. | | 19. | Maintaining high standards of record keeping that accurately reflects contemporaneous risk assessment/ risk management and reflect safe effective person centred care delivery. Following NMC guidance for record keeping. | |  |  | |
| **7a. EQUIPMENT & MACHINERY**  The equipment likely to be used on a regular basis will typically include:   * Computer and associated software most notably Microsoft Office Applications * Telephone, including fire and emergency functions * Various items of clinical equipment to carry out specific health related interventions and procedures |
| **7b. SYSTEMS**  The post holder will be required to have a sound working knowledge of a wide range of local systems which will include:-   * Electronic Patient Information Systems * Care planning and record keeping systems * Fire and emergency procedures * Clinical and managerial policy relevant to the clinical area * Health and Safety Policy relevant to the clinical area * Infection control policies and guidance * Staff appraisal and professional development systems |
| **8. DECISIONS AND JUDGEMENTS**  The post holder will be regularly required to make decisions and judgements related to:-   * Prioritising the nursing care needs and altering priorities as needs dictate. * Identifying the most appropriate nursing interventions required to address specific patient needs. * Recognising and responding to emergency situations in a manner which minimises clinical risk. * Making judgements with regard to enacting the “least restrictive” measures to manage identified complex clinical risks. * Early identification of sudden and gradual changes in the patient’s condition and   responding accordingly in a manner which minimises clinical risk.   * Taking into account of the role and competency of others including Healthcare Support Workers when delegating work. * Making judgements about patient’s ability to participate in the planning and delivery of care and make informed choices in this regard. |
| **9. COMMUNICATIONS AND RELATIONSHIPS**  Internal  The post holder will be expected to communicate and liaise regularly with a wide range of professions and departments including:-   * Patients, carers and/or their representatives * Line manager and all other members of the ADRS multi-disciplinary team * HSCP Health and Social Care interface services * Professional Nurse Advisor /Practice Development Nurse * Practice Educators/Practice Education Facilitators * Care programming   External  The post holder will be expected to communicate and liaise regularly with a wide range of external agencies and professionals including;-   * Social Services * Independent Sector agencies * Housing depts./Associations/Benefits agencies |
| **10. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB**  Physical skills/demands   * Regular use of equipment to undertake clinical duties (physical health monitoring/ medication administration/ venepuncture etc) * Regular use of electronic equipment * Regular undertaking of duties involving visits to people/communities within a geographical remit that requires regular periods of driving as part of the Mobile Harm Reduction Service.   Mental demands   * Regular reading of ADRS information, writing in patient notes and inputting clinical data with accuracy. * Regular time management in terms of meeting and responding to competing clinical priorities. * Regular line management responsibilities for other members of the team   Emotional demands   * Regular management of sensitive personal issues of patients / carers e.g. related to gender, adult/ child protection, domestic abuse * Frequent communication with distressed/ anxious/ worried patients/ relatives * Occasional management of challenging behaviour/ stress and distress/ physical aggressive behaviour * Occasional participation in significant clinical incident (SCI)/ incident reviews   Working conditions   * Regular requirement for outreach working across community environments within Renfrewshire. * Regular requirement to travel to and between appointments which will involve van driving * Frequent exposure to bodily fluids when undertaking clinical duties with patients * Occasional exposure to unpleasant noise/ dirt/ smells associated with working environment |
| **11. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB**   * Effectively assessing and managing clinical risks related to people requiring Alcohol and Drug Recovery Services including suicide, self-harm, capacity and vulnerabilities. * Under supervision, balancing the demands of the Addiction Nursing Role with effective delivery of high quality care to a defined caseload and maintaining therapeutic relationships with a challenging patient group. |
| **12. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB**   |  |  |  | | --- | --- | --- | | **Knowledge, Training & Experience** | **Essential** | **Desirable** | | Registered Nurse – Level 1 NMC registration | √ |  | | Educated to minimum degree level/ or equivalent | √ |  | | Evidence of active and ongoing Continuing Professional Development | √ |  | | Completion of an evidenced based psychological therapies/ psychological approaches to care formal programme of study |  | √ | | Actively working towards postgraduate level/ or equivalent |  | √ | | Completed a recognised mentor preparation programme/ registered mentor |  | √ | | Working knowledge and application of physical and/ or mental health nursing care | √ |  | | Working knowledge and application of risk assessment/ factors impacting on physical/ mental health/ wellness and recovery | √ |  | | Evidence of Supervision/ reflective practice | √ |  | | Knowledge of values based practice | √ |  | | Career development framework evidence of pillars of practice at Level 5 Practice (equivalent):   * Clinical practice – safe effective person centred care * Facilitation of learning * Leadership – applied * Research and development |  | √ | | Evidence of using digital technology/ information systems/ email and basic applications | √ |  | | Experience of working in a community environment |  | √ | | Can evidence in career history, the application of a range of skills and behaviours e.g.   * Organisational skills * Self directing and Self motivating * Effective written and verbal communication skills including negotiation, influencing, persuading, facilitating and conflict resolution skills * Decision making skills | √ |  | | Ability to work flexibly and to prioritise workload and adapt to meet person centred care without direct supervision | √ |  | | Ability to form therapeutic professional relationships with others and work as a member of the wider team | √ |  | | Working knowledge and demonstrable evidence of the NMC Code | √ |  | | Ability to undertake a number of clinical contacts as part of the Mobile Harm Reduction Service. | √ |  | | Current driving licence | √ |  | |