# Job Description

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| 1. **JOB IDENTIFICATION** | Job Title | Team Leader | |
| Department(s)/Location | Perth & Kinross Older People`s Community Mental Health Teams | |
| Number of Job Holders | 3 | |
| CAJE | SCO6 174 | |
| JOB PURPOSEThe post holder will fulfil a leadership and management role, developing, implementing and evaluating the key functions of the locality Older People’s Community Mental Health Team.The post holder is responsible for maximising service provision, including the delivery of safe and effective clinical practice, ensuring that all local and national guidelines and targets are adhered to and met.The role also provides day to day operational management and professional leadership of the Community Mental Health Nursing Team based within the locality Community Mental Health Team.The Team Leader undertakes a gatekeeping role for patient referral and discharge into the CMHT and is a specialist expert nursing resource for a wide range of primary, secondary and third sector workers.Clinically, the Team Leader will both undertake and delegate the undertaking of mental health assessments to determine comprehensive care packages within a range of community mental health care settings.The Team Leader will act as roistered Duty Worker of a Community Mental Health Team, co-ordinating the multi-disciplinary response to psychiatric emergencies and acting as Health and Safety Lone Worker Coordinator for the multi-disciplinary team. | | | |
| ORGANISATIONAL POSITION **CLINICAL & PROFESSIONAL TEAM MANAGER**  **Community Mental Health Team**  **Business Support**  **Alzheimer Scotland PDS Worker**  **Clinical Psychology**  **Consultant Psychiatrist**  **Occupational Therapy**  **THIS POST --------------------------------------------**  **CHARGE NURSE**  **COMMUNITY MENTAL HEALTH NURSE**  **ASSISTANT PRACTITIONER**  **COMMUNITY SUPPORT WORKERS** | | | |
| SCOPE AND RANGE The Perth & Kinross Older People’s Community Mental Health Teams provide multi-disciplinary interventions to older adults who are experiencing a wide range of mental illness. The CMHT is multi-disciplinary in nature and the post holder will have operational management responsibility for the day to day working of the CMHT. Discipline leads directly manage and deploy their respective staff within the CMHT and as such the Team Leader requires robust levels of engagement skills to ensure the CMHT delivers the service effectively.  The role encompasses direct professional leadership and operational management of the Community Mental Health Nursing Team. There is also a clinical nursing component to the role and the Team Lead will be expected to carry a clinical caseload. | | | |
| 1. **MAIN DUTIES/RESPONSIBILITIES**   **Clinical**  1. Provide assessment and treatment for patients/clients within designated area/team using standardised assessments/outcome measures as appropriate.  2. Apply an advanced level of specialist skills and knowledge of the CMHN process, consolidated through previous experience and training, to patients who may have complex and/or chronic presentation.  3. By applying a high level of clinical reasoning, demonstrate ability to problem solve, monitor, evaluate and modify interventions and their outcomes for patients/clients in order to measure progress and ensure effective intervention.  4. Contribute to multidisciplinary decisions regarding patient/client care and prescribe intervention within care plan which other professionals will follow.  5. Advise and instruct patients/clients/carers, other health care professionals, and external agencies (e.g. social care officer) as appropriate on the principles of CMHN intervention to ensure continuity of approach, e.g. social care officer adhering to CMHN recommendations to ensure maintenance and progression of treatment.  6. Manage clinical risk for own caseload and monitor that of junior staff and provide advice (e.g. appropriateness of discharge).  7. Undertake Duty Worker role including handling in-coming clinical calls (including referral enquiries) and dealing with client/carer/general public enquiries. Input includes problems solving/assisting with concerns over the phone and liaising with other team members as required e.g. when major clinical decisions are required i.e. admission into hospital or compulsory detention under the Mental Health Act (Scotland) (2003).  8. Supervise and monitor the clinical work of a team of community mental health nursing staff including the regular review of care plans, their formulation, implementation and evaluation.  9. Assess and manage clinical emergencies and critical events including the management of challenging and violent behaviour and supervise and support members of the nursing team in their own response and management of such events.  10. Delegate cases requiring community mental health nursing input on the basis of knowledge of staff’s skills and competencies and mindful of the severity and complexity of individual cases.  11. As key-worker, be responsible for co-ordinating and monitoring multi-professional treatment plans for patients and ensure any action plans arising out of reviews of those treatment plans are implemented.  12. Function as a Key Worker for patients requiring the Care Programme Approach.  13. Play a key role in care management and identify and select from a range of health and social agencies those that will assist and improve the mental health care of individuals and groups.  14. To monitor and/or assess service users’ compliance with prescribed medications and to undertake the administration of those medications as necessary, understand complex drug regimes and common side effects and follow UK Nursing and Midwifery Council (UK NMC) Drug Administration Guidelines.  15. To undertake clinical procedures relating to the administration and monitoring of medications and to participate in training relating to those procedures (e.g. Venepuncture, E.C.G. monitoring).  16. Individually develop and maintain good relationships with service users, carers, relatives and fellow health, social, voluntary agency, advocacy and welfare professionals who are involved in care delivery to affect the highest attainable good mental health care and to meet the specific needs of the individuals being cared for.  17. Provide confidential and professionally written reports to initial referrer and/or GP after assessment and throughout the treatment process.  18. Participate and ensure staffs participation in the continuous development, review and maintenance of the Clinical Governance framework for service provision.  19. To be able to complete a comprehensive emergency assessment, formulation and plan of further action as necessary.  **Management**  1. Work collaboratively with a range of clinical managers, professional leads and discipline line managers to implement national and local organisational policies and strategies for the Teams.  2. Co-ordinate the CMHT clinical service to meet service demands and provide safe and effective patient care.  3. Work collaboratively with key stakeholders to deliver safe, effective, person-centred and affordable services in line with service priorities and evidence base in the CMHT clinical area.  4. Lead in the personal development review process for the CMHN Team to promote personal and service developments, ensuring all staff are suitably trained, equipped and fit for practice to deliver a high-quality service which is effective and safe.  5. Develop innovative practice and service delivery models.  6. Identify, coordinate and implement specific clinical governance activities, including evidence based clinical standards, policies and patient pathways for the clinical service.  7. Represent the service at meetings on behalf of the Clinical Manager to promote the service, as appropriate.  8. Ensure the care and professional governance framework is developed and implemented by the CMHT/CMHN Team.  9. Organise and lead CMHT/CMHN meetings to ensure that staff are well informed regarding organisational issues/changes and/or developments and to develop best practice.  10. Provide support to team members on a daily basis and recognise the need to escalate and access additional support from the Clinical Manager and Professional Lead as necessary.  11. Report to the Clinical Manager on matters concerning recruitment and retention, staff induction and workforce planning.  12. Implement and deliver staff supervision and staff appraisal to the Team.  13. Ensure that all incidents are reported correctly and timely and managed effectively.  14. Lead in any Human Resource related issues with line managed staff.  15. Participate in the selection and appointment of staff.  16. Ensure that up-to-date written and electronic nursing records are maintained in accordance with UK NMC/NHS Tayside standards, formally supervising registered community mental health nurses in their record keeping.  17. Respond appropriately to any complaints received from the public/service users in accordance with NHS Tayside Policies and participate in any ongoing investigations.  18. Ensure that service users’ views are sought and conveyed to the appropriate reporting bodies and line management.  19. Be responsible for prioritising own workload so as to effectively manage own time and resources and achieve an appropriate balance between nursing management /leadership role and clinical commitments.  **Professional Responsibilities**  1. The Team Leader will be able to practice within the legal and ethical framework as established by the Nursing &Midwifery Council and national legislation, including mental health, community care and child protection legislation, to ensure patients’ interests and well being are met.  2. Be familiar with all pertinent local, regional and national policies, procedures and guidelines so as to ensure the community mental health nursing team comply with their contents so as the effect the highest standards of care.  3. Provide confidential, professional and possible legally binding written reports to outside agencies (for example Solicitors, Housing Department, Insurance Companies)  4. Participate in regular management supervision with the Clinical Manager.  5. Participate in Annual Appraisal of Performance with the Clinical Manager.  6. Agree with the Clinical Manager a Personal learning Plan in line with the NHS Tayside Framework.  7. Be aware of responsibilities in relation to the Mental Health Act ensuring its legal requirements are being met and the rights of service users are being guarded.  **Education and Research**  1. Be proficient in the accessing and evaluation of current research literature to maintain up-to-date evidence base for community mental health nursing and community mental health teams.  2. Maintain appropriate links to outside agencies and educational institutions that contribute to the development and maintenance of skills for mental health nursing in the community.  3. Act as a mentor for nurses in training and lead/manage the placement of students in the Nursing team | | | |
| 1. **COMMUNICATIONS AND RELATIONSHIPS**   Have the ability to create, develop and maintain positive working relationships within a team of nursing staff calling for the use or highly developed leadership and motivational skills such as diplomacy, negotiation and delegation.  Be able to facilitate organisational changes in the team including the management and resolution of any resistance to that change.  Ability to manage conflict within a nursing team and contribute to the resolution of interdisciplinary conflict.  Be able to encounter and work through, ­usually on a one-to-one basis, highly sensitive, complex and sometimes contentious information relating to a staff member’s performance at work.  Be able to work at all times, both in relation to staff and patient, their carers and relatives such that confidentiality is maintained in accordance with professional (N.M.C.) and local policies.  Encounter and deal effectively with unforeseen situations arising out of the process of community mental health nursing practice where patients and/or significant others may become aggressive and/or develop severely challenging behaviour.  Encounter and work through usually on a one-to-one basis highly complex, highly sensitive and highly contentious information in relation to a patient’s problems during assessment and treatment. for example disclosure of childhood sexual abuse.  Have the ability to develop sound therapeutic working relationships using highly developed skills such as empathy and a non-judgemental approach.  Provide written and verbal reports on community mental health nursing care of patients to referrers (e.g. G.Ps., health visitors) multidisciplinary teams and outside agencies, including solicitors, insurance companies, etc.  To be able to negotiate potential inter-disciplinary conflict in treatment paradigms (e.g. nursing models versus medical models of treatment.)  Employ specialist de-escalation and negotiating skills with patients/their relatives or carers who are difficult to engage in a therapeutic process through mental ill health. | | | |
| 1. **KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB**   Comprehensive evidence of experience in specialist area gaining professional knowledge and experience to a Masters level or equivalent with evidence of ongoing training and reflective practice.  Current RMN registration with the UK Nursing and Midwifery Council.  Evidence of considerable postgraduate experience in a range of mental health arenas.  Evidence of contemporary Continuing Professional Development.  Experience in the supervision of others.  Evidence of leadership skill development and application.  Comprehensive knowledge of clinical guidelines and standards within the specialty of mental health.  Evidence of application of highly specialist practice skills in mental health and applying clinical judgment.  Highly specialist observational and clinical assessment and reasoning skills.  Excellent communication skills including verbal, written and presentation skills.  Evidence of effective team-working/leadership skills and have the ability to motivate and influence others and work using own initiative.  Evidence of well developed listening, communication and interpersonal skills and effective time management skills.  Working knowledge of IT – e.g. word processing, use of internet, database Experience in quality improvement methodology and participation in/ review of research and implementation into practice.  Knowledge and ability to be able to assess persons in a mental health emergency and formulate effective treatment actions by self and others to resolve such emergencies. | | | |
| 1. **SYSTEMS AND EQUIPMENT**   Responsible for safe and competent use and security of equipment, patient appliances, etc. in accordance with departmental guidelines.  Have a working knowledge of relevant IT systems and software packages.  Range of equipment to undertake administration of medicines, ECG, mobile phones.  Competent in the use of patient records/systems and contribute to the development of primary care/multi-agency care plans.  Contribute to single shared assessment processes and communicate with appropriate member(s) of the multi-agency team.  Competent in the use of person-centred approaches to engagement and intervention.  Competent in the use of risk management and health and safety systems, lone working systems  **Responsibility for Records Management**  All records created in the course of the business of NHS Tayside are corporate records and are public records under the terms of the Public Records (Scotland) Act 2011. This includes email messages and other electronic records. It is your responsibility to ensure that you keep appropriate records of your work in NHS Tayside and manage those records in keeping with the NHS Tayside Records Management Policy and with any guidance produced by NHS Tayside specific to your employment. | | | |
| 1. **PHYSICAL DEMANDS OF THE JOB**   **Physical skills**  Keyboard skills used on a daily basis.  Database skills for analysis and audit under Clinical Governance Agenda on a frequent basis.  Travel all the year round including in adverse weather conditions.  Co-ordinating skill for giving of intra-muscular injections in patients’ houses and at clinics.  Moving and handling of confidential case files and equipment required to give I.M. injections (e.g. needles, syringes, medication, storage bins for sharps, sterile swabs).  Yearly update.  De-escalating and breakaway skills to deal with difficult behaviour, maintained by yearly update.  BLS & PMVA skills.  Hand-eye co-ordination required for phlebotomy and clinical observations (B.P., temperature)  **Physical Effort**  Travel for long periods in all weather conditions.  Visiting several patients in one day at different locations, carrying equipment or case notes.  Accompanying patients in social and recreational activities as part of treatment programmes (e.g. walking, shopping, sports).  **Mental Effort**  Frequent concentration required listening to and comprehending highly complex and sensitive issues in one-to-one sessions with patients often several times per day.  Frequently required to shift concentration from one type of activity to another, e.g. clinical to managerial supervision or professional meeting.  On a daily basis required remembering and recalling large amounts of sensitive information from several sources at once in order to maintain accurate medical records and maximise treatment outcomes.  Staff performance monitoring and management.  **Emotional Effort**  Frequently discussing highly sensitive issues such as sexual abuse, relationship problems, family conflict, domestic violence, psychosis, substance misuse, as part of treatment programmes.  Having to attend to any conflict arising out of staff performance and management.  Frequent exposure to a wide range of emotional problems and behavioural difficulties requiring a wide repertoire of responses, skills and judgement.  Often first point of contact or sole contact with psychiatric services for persons, their relatives and carers, with severe and highly complex mental health problems.  Lone working for much of the working day.  **Working Conditions**  Exposure to verbal aggression – often.  Exposure to physically aggressive behaviour owing to the nature of the client group.  Exposure to all weather conditions on a frequent basis**.**  Exposure to (some) clients’ living conditions (e.g. fleas, dirt).  Exposure to hazard of passive smoking in clients’ own homes.  Occasional exposure to high risk locations to fulfil treatment plans**.**  Occasional exposure to high-risk bodily fluids (e.g. patient with HIV requiring blood sample to be taken). | | | |
| 1. **DECISIONS AND JUDGEMENTS**   Discretion to decide how NHS Tayside Policies, Protocols and Standards are best implemented and achieved within a CMHT.  Discretion to manage attendance at work including sickness, absence and annual leave in accordance with NHS Tayside Policy.  Discretion to decide to undertake formal general risk assessments and to forward these to the appropriate person, and to review progress in relation to these.  Discretion to decide how to manage nursing staff performance on a day-to-day basis, to judge when staff performance is not meeting required standards and when a remedial action plan is required.  Decide on the development of nursing staff within a team on a day-to-day basis ensuring they are deployed efficiently and effectively to meet assessed need.  Discretion to create and maintain a waiting list for the Team.  The post-holder will on a day-to-day basis plan, manage and prioritise their own caseload deciding on the frequency of contact with patients, their relatives and carers using their own judgement to adapt to any changed circumstances encountered (e.g.: increased suicide risk)**.**  Work autonomously, usually on a one-to-one basis, with a caseload of patients, their relatives and carers undertaking assessments, formulating, implementing and evaluating treatments plans and discussing progress and outcomes with the multi-disciplinary team**.**  Undertake initial and ongoing risk assessments in relation to patients, their relatives and carers and of any associated environmental factors so as to decide on the location and context of any nursing interventions offered.  Make a judgement as to when confidentiality may need to not be maintained in a patient’s or others best interests.  As rostered Duty Worker for a multi-disciplinary Community Mental Health Team be able to judge the level of multi-disciplinary response required (emergency, urgent, routine) to any written or verbal/telephone referrals.  As rostered Duty Worker for a multi-disciplinary Community Mental Health Team be able to judge the level of multi-disciplinary response required to any psychiatric emergencies and decide on the appropriate response on behalf of the Team to crisis or other situations that may occur based on the knowledge of the roles and responsibilities of all members of the Team. | | | |
| 1. **MOST CHALLENGING/DIFFICULT PARTS OF THE JOB**   Conflict management and resolution within a Community Mental Health Team.  Leading a multi-disciplinary team through change, negotiating service delivery models with a wide range of key stakeholders and maintaining morale at a time of rapid service development.  Gate keeping referrals for the CMHT, monitoring or instigating a waiting list as necessary, and deciding on the best use of resources.  As a case holder having to employ specialist skills to manage a succession of challenging encounters with patients suffering from a wide range of highly complex mental health problems.  Having to contain and manage patients’ psychological distress within time and other therapeutic boundaries.  Having to continually assess risk in relation to patients suffering from mental health problems (e.g. suicide risk).  Challenging beliefs and behaviours which are chronic and enduring, e.g. persistent self-harm.  Developing and maintaining therapeutic working relationships with patients who are treatment resistant.  Maintaining a balance between management and clinical responsibilities.  Acting as rostered Duty Worker for a multi-disciplinary team thus having to deal with a wide range of psychiatric emergencies, referrals within a limited response time, and having the responsibility for being the health and Safety Lone Worker Coordinator for the multi-disciplinary team.  As rostered Duty Worker to be able to judge the level of response required for any multi-disciplinary Lone Worker emergency (e.g. when to activate police response).  Undertaking the process of assessment, formulation and action planning with service users, families, and carers in mental health emergencies. | | | |
| 1. **JOB DESCRIPTION AGREEMENT**   A separate job description will need to be signed off by each postholder to whom the job description applies. | | | |
| **Job Holder’s Signature:** | | | **Date:** |
| **Head of Department’s Signature:** | | | **Date:** |