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| JOB IDENTIFICATION |
|  Job Title: Patient NavigatorResponsible to Systemic Anti-Cancer Therapy Nurse Consultant Haematology Advanced Clinical Nurse Specialist (ACNS) and  Advanced Nurse Practitioner (ANP)Department(s): Haematology TeamDirectorate: Medical DirectorateOperating Division: Acute ServicesJob Reference:No of Job Holders: 1 Last Update: 10/05/2025 |
| 2. JOB PURPOSE |
| The post holder will be an identified and consistent point of contact for people within a speciality team to manage the patient pathway, taking into consideration all aspects of that pathway.Working under the guidance of a registered health professional, this role supports individuals who have been assessed as having non complex needs. The aim of this role is to make sure patients affected by a Haematology condition can access the right help at the right time. The post holder will coordinate patients care by navigating health and social care systems on their behalf The Patient Navigator will be expected to:* Coordinate care by providing a single point of access, including rapid re-entry into the system
* Provide appropriate advice and escalate to a registered practitioner where required
* Coordinate access to the right information and education resources to support people in making decisions
* Develop a partnership approach in order to empower patients
* Communicate with empathy, understanding , diplomacy honesty and integrity
* Tracking the progress of patients through their pathway of care including through the diagnostic phase, pursuing results and ensuring that all results are managed appropriately to avoid potential delay.
* Patients may present through various routes and recording and tracking must be in accordance with cancer management framework
* Ensuring all patients receive appointments and next steps in their pathway in a timely fashion whilst overseeing any other aspect of managing the patient pathway. Maintain and update relevant databases as required.
* Liaising with departments in hospitals within the Trust and through to tertiary centres to ensure patients are treated in a timely manner;
* To support patients and their carers re-access specialist services without delay should they need to do so
* Carry a defined caseload to provide structured support and co-ordination of needs, under the direction of the Haematology ANPs and ACNS. They will work closely with other clinical teams, partnership agencies and Information Services to assist in the coordination of patient care and support.
* Ensure that the journey of each Haematology patient runs smoothly and is progressed in a seamless manner .
* Track the progress of patients awaiting investigation and results.
* Record key data items to assist in monitoring the care of patients. Collation, input and preparation of data for submission
* To lead in the performance of the Haematology team, contributing to the management of patient experience, patient targets, reducing waiting times and prevention of readmission
* To work closely with the Haematology Nurses and Audit Facilitator collecting and reporting audit data for local and National agencies
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| **3. DIMENSIONS** |
| The Patient Navigator will play an integral role in the Haematology team. This role offers the opportunity to help shape services as well as providing direct patient engagement and support. Your ability to think beyond the norm, embrace change and be open to new ways of working are essential for this forward focused service. The ideal candidates will be confident, enthusiastic, dynamic and self-motivated with the ability to display advanced IT, administrative and organisational skills. Competence in data collation and input across a broad range of systems will also be required. Excellent communication and negotiation skills to deal with complex situations with service users and clinicians either over the phone or face-to-face; within the hospitals and with GP’s and other community-based staff. |

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| 4. ORGANISATIONAL POSITION |
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| **5. ROLE OF DEPARTMENT****Clinical Haematology**The haematology department is part of the South of Scotland Cancer Managed ClinicalNetwork (SCAN). The department investigates and manages lymphomas and bone marrow malignancies such as acute and chronic leukaemia, myeloproliferative (MPN) andmyelodysplastic disorders. British Committee for Standards in haematology (BCSH) Level2a care is provided. Outpatient clinics are held daily. Haematology inpatients are managed on ward 34 VHK which has 14 single bedded rooms and an additional 2 beds within a bay. Our haematology / oncology day unit where systemic anti-cancer therapy (SACT) and Supportive treatments are administered, is located adjacent to the in-patient area. The Clinical Haematology Team consists of 5 WTE consultants, 1 rotating Specialist registrar, 1 Speciality Doctor in haematology, 5 Advanced Nurse Practitioner and 1 Advanced Clinical Nurse Specialist (MPN). Cases requiring autologous transplantation or radiotherapy are referred for the procedure to the Edinburgh Cancer centre. For allogenic transplants from sibling and unrelated donors and car T therapy, patients are referred to the Glasgow Bone Marrow Transplant Centre. Haemostasis and thrombosis including the regional haemophilia centre, is based in Edinburgh. **Fife Area Laboratory Service** The regional laboratory is on the VHK site. The Laboratory Services employ approximately 170 staff. The department provides a comprehensive laboratory diagnostic service in haematology including blood transfusion, clinical biochemistry, cellular pathology and microbiology on a Fife-wide basis. The Department of Haematology with Blood Transfusion and the Department of Clinical Biochemistry Laboratory service are located in South Laboratories, a new purpose-built laboratory facility which opened in January 2012. The annual workload for haematology is approximately 380,000 requests with an average 9% year-on year increase in workload. The department has full accreditation through UKAS ISO 15189 (2012); the Blood Bank operations are compliant with the requirements of the MHRA Blood Safety and Quality Regulations, 205/50. |

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| 6. KEY RESULT AREAS |
| **Person-centred care*** To actively seek an understanding of the perspective, preferences and what matters most to individual patients and their families/carers in relation to their holistic needs
* To offer personalised care and support, which is developed in partnership with the patient (and their carers), which ensures services are wrapped around and respond to the specific needs of the individual as much as possible.
* To manage the expectations of patients and carers through clear explanations and information where elements of care may need to be more ‘prescriptive’
* To provide coordinated care and support through the patient’s pathway
* To treat patients and their families/carers with dignity and respect at all times, recognising their well-being and wider social and cultural background
* To demonstrate high levels of integrity, sensitivity and compassion in all aspects of the role which supports the development of trusting, meaningful partnerships with patients and their families/carers
* To adapt the style of communication to meet the needs of differing individuals – taking in to account first language, cultural, sensory, learning or other needs; using a range of communication methods and systems – taking action to resolve problems when communication fails
* To utilise ‘every contact counts’ opportunities to provide individually tailored information and advice which promotes patient self-management. Through the use of motivational skills and techniques, and health education – to “support people to recognise and develop their own strengths and abilities to enable them to live an independent and fulfilling life”; and to make informed health related choices and decisions
* To work closely with colleagues across a range of widespread local support resources (including the voluntary sector), to ensure the needs of patients are effectively addressed and by appropriately skilled staff
* To support and lead initiatives that measure patient and carer experience (including the National Cancer Patient Experience Survey); working with the wider team to develop and implement actions which draw on the learning and reflection gained
* To act as an advocate and role model for person centred care across all components of the pathway to positively influence the approach and behaviours of other care/support providers

**Navigation*** To act as a single point of contact for patients (and carers) throughout their pathway/ journey, supporting the delivery of a seamless, high quality and efficient service
* To coordinate and facilitate safe and effective transitions of care between hospital and home.
* To help navigate patients through key pathway steps, signposting to additional sources of information and advice where needed
* Liaise with other departments and organisation to ensure that investigations, opinions and treatments are sought in a timely fashion
* To help reduce patient cancellations, non-attendance for tests and clinic appointments, therefore influencing progress through the site specific rapid diagnostic pathway
* To provide general information to patients (and carers), as well as specifically agreed basic levels of ‘clinical’ information (e.g. explanations about tests) of relevance to their pathway and in accordance with agreements and protocol
* To support effective communication between primary and secondary care teams by providing accurate, up to date general advice/ information related to a patient’s care or needs – ensuring this is done with the patient’s permission and involvement
* To undertake a range of administrative duties which facilitate and support co-ordination of care and pathway steps, including assisting in the arrangement of appointments, tests, admissions etc., ensuring effective communication with patients to promote understanding, provide information, minimise anxiety and foster engagement.
* To work collaboratively with Haematology Services (specifically MDT coordinators and trackers), clinical and operational teams in the navigation and delivery of pathway steps.
* To escalate issues of pathway delay in a timely fashion and in accordance with pathway milestones and organisational procedures.
* Where relevant, to attend the organisation’s PTL (patient led tracking meeting) in order to provide feedback on pathway problems (individual or collective) and receive direction/actions to unlock pathway bottlenecks
* To assume specific, delegated duties within the pathway as dictated by service and organisational need and which are commensurate with the role. This may include assisting specialist registered staff in the delivery of clinical interventions (under the direct supervision of appropriately qualified staff and in accordance to protocols and guidelines). For example, providing support to a patient through a diagnostic biopsy procedure being undertaken by an appropriate healthcare professional
* To maintain accurate documentation related to patient care and interactions – both written and electronic and to comply with all organisational policies relating to information governance, data sharing and confidentiality
* To actively engage in service improvement actions across the Haematology pathway which maximize patient experience and outcomes
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| 7a. EQUIPMENT AND MACHINERY |
| IT equipmentTelephone |
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| **7b. SYSTEMS** |
| Very good understanding of, and ability to use, a variety of systems and packages is required, e.g.: * Comprehensive knowledge of a variety of systems and packages is desirable e.g.
* Microsoft Word - letters, minutes, leaflets
* Microsoft Excel – setting up of spreadsheets and formulas
* Email (NHS Mail)
* Microsoft PowerPoint – presentations
* Patient Administration System – TRAK
* Clinical Portal/SCI gateway
* SCI Store/Masterlabs/Lab Centre
* CRIS
* Internet
* Business objects- tracking patients, retrieving daily reports from TRAK
* Other external systems

Contribute user knowledge in development of new patient management systems to ensure that the requirements of good quality data are met. |
| 8. ASSIGNMENT AND REVIEW OF WORK |
| The broad aims of the workload will be established through the cancer clinical nurse specialist work plan, which in turn will in part be subject to requirements set by the Scottish GovernmentOnce objectives are set with the ANPs/ACNS, within these broad aims, the post holder will be expected to use their own initiative and be self directed and work independently as requiredThe post holder will report to the ACNS/ANPs and will be line managed by the SACT Nurse Consultant/ Clinical Nurse Manager. The post holder will support the specialist nurses with responsibility for interpreting and establishing policy and strategyThe post is subject to annual objective setting and appraisal. |
| **9. DECISIONS AND JUDGEMENTS** |
| * The post holder will be required to report on relevant aspects of patient conditions
* The post holder will be required to decide on the correct level, type and timing of support and engagement according to individual need
* Prioritise own workload and the needs of patients, and use objective judgement to inform decisions
* The post holder may be working with patients without the direct supervision of qualified staff and will be expected to respond safely and appropriately to situations which arise

The post holder is required to assess risk and take appropriate actions within the limits of the practitioner’s competency, knowledge and experience* The patient navigator requires a good level of personal initiative and motivation to balance the demands of the job within tight deadlines.
* Must be able to work independently, exercising own judgement and able to solve problems occurring but able to refer to others for guidance.
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| 10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB |
| * Development of effective working relationships to ensure cooperation and confidence of clinical and non-clinical staff is very important – the postholder needs good interpersonal skills and the confidence to deal with staff at all levels
* The postholder needs to have very good organisational skills to establish efficient routine methods which will ensure accurate and timely management and monitoring of patients referred through Multi Disciplinary Meetings
* High standards of care are required to ensure that data is handled in ways meeting legal requirements for data protection and confidentiality and that results are disseminated appropriately and sensitively.
* Communicating with individuals (and their families) who have a Haematological diagnosis in highly emotive situations.
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| **11. COMMUNICATIONS AND RELATIONSHIPS** |
| **Communications**It is essential to this role for the postholder to establish and maintain good communication and working relationships with a wide range of NHS staff * Communicate verbally and in writing to members of Health and Social Care teams, including third sector and local authority services as necessary. The patient, their relatives and the multidisciplinary teams involved in the provision of care
* Provides advice, education and encouragement to individuals and their families.
* Apply knowledge of clinical conditions to facilitate effective communications with patients and others involved in their care.
* Liaise with the senior clinicians regarding the management of complex cases, communicating and discussing these as appropriate.
* Receive information directly relevant to patient care and encourage/advise on a range of patient management strategies
* Deal with verbal complaints and challenging behaviour, including aggression either in person or via telephone and refer up to line manager
* Participate in meetings, email and telephone conversations ensuring a two-way flow of information.
* Disseminate service information as appropriate
* Advise and negotiate with senior staff/nurse specialist/ANPs regarding service review and development for their areas of responsibility
* Promote and share ideas
* Liaise with other members of the multi disciplinary team, for purposes of receiving guidance and advice for the exchange of information to ensure clinically effective care.
* Apply knowledge of clinical conditions to contribute to multidisciplinary case conferences.
* Feedback patient information regarding treatment, progress, presentation and response to intervention.
* Share practice skills with other staff, students and contribute to clinical education as possible within area of expertise and as required.
* Utilise team support for emotional and challenging patients/situations.
* Liaise with a third party agencies for example ICJ/Maggie’s Centre for ongoing support and advice
* Engage with the general public and service users in consultation as required
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| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** |
| **Physical Skills and Demands*** Sitting for long periods of time; standing in clinics, walking with patients, bending
* Advanced keyboard skills required; prolonged period using mouse and VDU
* Requirement to attend meetings across the region

**Mental Effort:*** Problem-solving, organisational abilities: to ensure smooth transition between of service
* Heavy workload – highly deadline driven – need to balance conflicting demands
* Frequent concentration pattern interruptions
* Long periods of concentration both listening to patients and entering data into databases.

Checking data quality **Emotional Effort:*** Difficult subject matter – frequent exposure to distressing information about cancer patients
* Resilience for dealing with challenge by senior staff
* Discussing sensitive and distressing issues

**Working Conditions:*** Requirement to use a PC for long period of time
* Occasional exposure to verbal aggression at times with no immediate/available support.
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| 13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB |
| * Educated to National 5 level with a minimum of five National 5 or equivalent qualification/ experience.
* Be in possession of European Computer Driving Licence or equivalent skills.
* Hold an SVQ 3 In Health or Social Care. Experience of patient or customer engagement.
* Track record of influencing & engaging staff.
* Proven experience of working to tight and strict deadlines.
* Management of complex administrative process.
* Experience of data entry and extraction from NHS IT systems
* Demonstrable experience of working in a similar role or within a similar service area.
* Excellent written and verbal communication skills
* Excellent time management and personal organisational skills
* The ability to work in a multi-disciplinary and multi-agency environment
* Previous experience of working within the NHS and and/or social care and working with multi-disciplinary teams and/or in isolation.
* Have completed Communication Skills Training or willingness to undertake training.
* Takes personal responsibility for life-long learning and personal development through a range of activities including mandatory training, clinical supervision, and appraisal and actively engages with learning and development opportunities offered by the Board

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