

#### JOB DESCRIPTION

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| JOB IDENTIFICATION |
| Job Title: Bank Registered Nurse  Responsible to: Staff Bank Manager/ Deputy  Department(s): Staff Bank Service  Directorate: Specialist & Ambulatory Care Services  Operating Division: NHS Forth Valley  Job Reference: |
| 2. JOB PURPOSE |
| As part of a multidisciplinary team the post holder will have responsibility to ensure the delivery of high quality care to patients by the assessment of care needs, the development of programmes of care, the implementation and the evaluation of these programmes. According to agreed competencies the bank nurse may carry out this work in hospital and / or community settings.  In hospital environment in the absence of the ward Charge Nurse the post holder may be required to provide cover to ensure effective operation of the ward. In community settings the post holder will be expected to deliver care to a delegated caseload. |
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| **3. DIMENSIONS** |
| * Would be a member of the multi-disciplinary team, in the role of a bank nurse supporting the team. * In a hospital setting may lead team of other registered and non-registered nursing staff. * Has day-to-day responsibility for managing patients’ funds held at ward level or the safekeeping of patients house keys kept in the community. * Uses NHS supplies cost-effectively. * Has responsibility for the development of care packages for a group of patients. * To work within professional codes of conduct, recognising own limitations and seeking assistance and advice/ training where necessary |

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| 4. ORGANISATIONAL POSITION |
| Deputy Staff Bank Manager  Ward / Community Staff  Bank Staff  Staff Bank Manager  The post holder is responsible to the Ward or Community staff whilst on duty. The post holder is line managed by and professionally accountable to the Staff Bank Manager/ Deputy. |
| 5. ROLE OF DEPARTMENT |
| To provide a supplementary staffing service to clinical areas across NHS Forth Valley. |
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| 6. KEY RESULT AREAS |
| 1. To fully assess patients, plan their care, implement and evaluate programmes of care and consult / involve patient / carers at all stages of the rehabilitation process so patients receive a high standard of clinically effective care. 2. To organise own workload within the team to ensure the patients care needs are met and systems of teamwork are maintained. 3. To lead the nursing team, in the absence of the Charge Nurse / District Nurse/ Health Visitor, and act as a source of advice to ensure smooth organisation so patients and their relatives receive a high standard of prescribed care. 4. To contribute to the arrangements for patient admissions and discharges so that patients are admitted according to procedures and discharges are fully planned and co-ordinated appropriate to the care setting. 5. To implement and maintain, as part of the multidisciplinary team, policies, procedures, standards and protocols of the clinical area, directorate / CHP and division to ensure adherence to, and delivery of the highest level of patient care at all times. 6. To participate in audit systems to monitor the delivery and standards of care given to patients and their families. 7. To contribute to the provision of clinical practice experiences for pre-registration and appropriate post-registration students to ensure that appropriate learning opportunities are provided and students feel supported. 8. To appropriately and efficiently use NHS supplies so resources are used economically. 9. To contribute and assist in the operational management of the clinical area to ensure that staffing resources are utilised efficiently and appropriately. 10. To maintain effective written and verbal communications with patients, relatives and other members of the multidisciplinary team to ensure patient needs are met and appropriate information is shared and documented. In community settings, establish and maintain effective communications and relationships with statutory and voluntary agencies, promoting collaborative working and effective co-ordination of services for individuals and groups. 11. To develop within the post by expanding knowledge and skills to ensure continuous professional development and the delivery of evidence-based practice. |
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| 7a. EQUIPMENT AND MACHINERY |
| The registered nurse is expected to have a knowledge of all equipment used in the clinical area however may not have daily involvement. Examples of equipment and machinery used:  **Specialised:**  Syringe drivers.  Enteral feeding tubes and pumps.  Defibrillator.  Suctioning equipment.  ECG monitors.  Bladder scanner.  Tracheostomies.  **Generic:**  Range of hoist and other manual handling equipment.  Pressure reducing / relieving mattresses, static and electrical.  Wheelchairs and specialist seating.  Syringes / needles / intravenous infusions  Thermometers / sphygmomanometer.  Urinary catheters, continence products.  Wound dressings.  Medical gas delivery systems and oxygen saturation monitors.  Blood glucose monitors.  Weighing scales.  IT equipment. |

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| **7b. SYSTEMS** |
| Nursing staff duty rotas.  Maintenance of patient records and reports.  Patient dependency monitoring.  Audit / questionnaire completion.  In community setting;  Responsible for recording all activity on the Community Information System or appropriate local system.  Responsible for inputting, updating and maintaining a range of information databases e.g. local GP system, and involves sharing information with colleagues both internal and external to the organisation.  Completing timesheets/mileage. |
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| 8. ASSIGNMENT AND REVIEW OF WORK |
| Workload is determined by the needs of the service, and allocated by the Staff Bank Service according to the skills and competencies of the post holder.  On reporting for duty, the post holder will accept delegated duties/ workload by the nurse in charge/ Charge Nurse/ District Nurse / Health Visitor. However, the post holder may have additional responsibility for managing the defined workload, such as taking charge of the ward in the absence of the Charge Nurse and acting as a named nurse for a group of patients. In these circumstances, the post holder will delegate / allocate work to the nursing team in the absence of the nurse in charge/ Charge Nurse / District Nurse / Health Visitor.  The post holder will be responsible to the nurse in charge/ Charge Nurse/ District Nurse/ Health Visitor for the duration of the shift and should expect clinical guidance and on the job professional management. However the post holder is line managed by and professionally accountable to the Staff Bank Manager/ Deputy. |

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| **9. DECISIONS AND JUDGEMENTS** |
| The post holder is expected to clinically assess patients to establish any changes, inform other members of the multidisciplinary team as necessary and plan subsequent care.  The post holder is expected to anticipate problems in meeting patients’ care needs and resolve them autonomously / within the nursing team or seek advice from a more senior nurse.  The post holder makes clinical judgements about the administration of medicines covered by an “as required” prescription.  In the absence of the nurse in charge/ Charge Nurse / District Nurse/ Health Visitor allocates work and deploys staff. |

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| 10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB |
| Being required to work, often at short notice, in a range of clinical areas / locations / community bases, often at times of increased activity or staff shortage and integrating and establishing professional credibility within the team.  Managing the demands of direct and indirect patient care within available resources. To consistently negotiate and balance the different and unpredictable priorities (including in community incorporating allocated additional unplanned visits into workload) and demands from a wide range of professionals and agencies to ensure optimal care is delivered.  Seeking local resolution to complaints from patients and relatives and advising on the formal complaint procedure if required.  In the absence of the nurse in charge/ Charge Nurse / District Nurse/ Health Visitor, providing leadership to ensure the effective and efficient operation of the clinical area.  Managing patients who display challenging behaviour. |

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| **11. COMMUNICATIONS AND RELATIONSHIPS** |
| **Internal:**  The post holder will be expected to communicate and liaise with the patient, their relatives and the multidisciplinary team involved in the provision of care in a caring, compassionate and professional manner. The communication will be in respect of assessment findings, care plan and evaluation. The post holder will deal frequently and regularly with patients who experience barriers to understanding and acceptance. This includes patients with cognitive impairment, learning disability, mental health problems and those with sensory impairment and those with multiple difficulties.  Other nursing staff – patient care, allocation of work, workload issues.  Other relevant departments within the Division e.g. Facilities, Estates, Supplies, Human Resources, Fire Officer, Infection Control, Tissue Viability and other Specialist Nurses.  Staff Organisations.  **External:**  Staff in referring / receiving wards / hospitals.  Community services including Social work, education, housing, institutes of higher education, police, voluntary and charitable agencies other relevant external agencies – regarding patient care.  Practice Education Facilitators regarding pre-registration nursing students. |

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| **12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB** |
| **Physical Skills** (skill level may vary dependant on the clinical area/ patient need):  Administer medicines, injections, syringe drivers, intravenous infusions and blood transfusions.  Administer enteral tube feeding.  Insert urinary catheters.  Apply wound dressings.  Manual handling techniques.  Breakaway and restraint techniques  Keyboard skills.  **Physical Demands**:  Physical manual handling of patient, patient movement with use of mechanical aids  Push wheelchairs and other mobile equipment.  Stand/walk for the majority of shift.  Kneeling and bending frequently and repeatedly and working in cramped and restricted conditions  Travelling in community or between sites  Responding to emergency situations e.g. cardiac arrest, violent incident  **Mental Demands**:  Retention and communication of knowledge and information.  Concentration required when checking documents including prescriptions; writing patient records; and dispensing, calculating doses and administering medication. In the patient’s home there is little opportunity to control the level of background distraction. Single nurse administration of drugs in certain locations / community settings.  Frequent interruptions from patients / relatives / team members or responding to emergency clinical situations necessitating an immediate change of task and reprioritisation of workload.  Concentration required when observing patient behaviours which may be unpredictable.  Additional time and effort required encouraging and educating patients to increase independence, including frequent repetition of instructions.  **Emotional Demands:**  Communicating with distressed / anxious / worried patients and relatives.  Caring for patients and supporting relatives following receipt of bad news.  Supporting junior staff / colleagues in the work environment.  Communicating with and caring for patients where there are barriers to understanding e.g. patients who have reduced understanding and insight due to cognitive impairments.  Dealing with patients with severely challenging behaviour  Caring for the terminally ill.  **Working Conditions:**  Exposure to body fluids, faeces, emptying bed pans/urinals, catheter bags (several times each shift)  Exposure to verbal and physical aggression from patients and relatives / other visitors (in specific specialty areas this may be frequently on a daily basis).  Exposure to infections and temperature variations.  Exposure to tobacco smoke in care areas where patients are permitted to smoke.  May be required to work alone for the majority of the shift/ working week. |

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| 13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB |
| Registered Nurse(1st or 2nd Level) with a minimum of six months post-registration experience  Team-working skills and the ability to work using own initiative.  Effective communication and time management skills.  Ability to work flexibly and adapt to new clinical environments and adapt personal skill set accordingly  Attendance at initial mandatory training and updates annually (or as required) on an ongoing basis |