Greenwich & Bexley Community Hospice
Job Description

Job Title: Clinical Nurse Specialist Palliative Care (Bank)

Band 7

Establishment: Greenwich & Bexley Community Hospice
185 Bostall Hill
Abbey Wood
London, SE2 0GB

Responsible to: Lead for Specialist Community Services

Accountable to: Director of Care Services

Job Summary

The Clinical Nurse Specialist will deliver and facilitate evidence-based specialist palliative care to patients with any diagnosis at the end of their life and to their carers/families.

Establish and develop relationships with those involved in delivering health and social care to patients at the end of life and their families/carers in all settings

Provide information and specialist advice on all facets of palliative care (eg symptom management, practical and emotional support), to patients, their families/carers and other professionals involved in their care.

Actively disseminate best practice through example, education and training, professional development and learning, participation in nursing research and audit, publication and conference presentations.

Work cohesively as part of the multiprofessional team.

As part of the nursing team, participate in delivery of out of hours telephone advice (24 hours) and contribute to the seven day a week visiting service in the community.

Key Responsibilities**:**

Clinical Practice & Leadership

To provide a high standard of holistic and individualised patient care to patients with palliative care needs by:

- Acting as a role model for others to emulate, exhibiting high standards of professional behaviour and competence and providing leadership, support, advice and education to colleagues caring for people at the end of life in all settings.

- Making expert assessments of patients and carers, identifying their psychological, physical, social, practical and spiritual needs in accordance with Hospice philosophy and demonstrating and applying an in depth knowledge of the options for achieving control of symptoms to develop a plan of care to meet their needs

- Participating in the 7 day a week visiting service in the community, working Saturdays, Sundays and Bank Holidays to cover a rota.

- Participating in the Team's 24 hour telephone on call service from home, providing specialist advice to professionals in the hospital or community and to patients and carers/families on the caseload.

- Taking responsibility for a defined share of the Team's caseload, including prioritisation of new referrals for assessment and identification of patients who may be appropriate for discharge from the caseload.

- In consultation with the multiprofessional team and those professionals who are involved in the patient's care, reviewing patients independently, initiating changes as required.

- Acting as a reflective practitioner, applying evidence based practice and critical thinking to all practices and processes of care.

- Working collaboratively day with other professionals involved in the patient's care in any setting, to provide a co-ordinated, high quality service. This will involve working with statutory, independent, charitable and voluntary agencies in health and social services.

- Prioritising own workload according to the day to day needs of the service.

- Providing guidance, support, advice and information to patients and their family / carers throughout their illness. Know when to refer on to other professionals for additional guidance, support, advice and information.

- Promoting patient autonomy, providing information, empowering them and acting as an advocate so that the individual is able to make informed choices about their own care.

- Participating in developing guidelines and protocols to deliver a quality comprehensive, evidence-based and patient-focused service for patients and families

- Ensuring that all necessary written documentation including the Electronic Patient Record is completed in a timely way and that appropriate data is collected

- Participating in own clinical supervision.

- As required by the Lead for Specialist Community Services and the Director of Care Services, representing the Hospice at external groups to further develop palliative care in Greenwich and Bexley, SE London and Nationally.

Communication

- Fostering positive and supportive working relations with all members of the Hospital, Hospice, Social Care and Primary Healthcare Teams.

- Participating in multidisciplinary meetings relating to the care of patients and their families/carers as required.

- Promoting and practicing excellent communication skills with patients, family and members of the multi-disciplinary team.

- Contributing positively to the development of Greenwich and Bexley Community Hospice as an anti discriminatory organisation, actively promoting equality and diversity.

Quality

- Monitoring standards of care and reporting issues back using Hospice clinical governance structures.

- Within the multidisciplinary team, working to ensure that patient dignity is respected at all times both before and after death, including acting as the patient's advocate.

- Participating in Hospice forums for discussion of research and audit programmes, including contributing to the design and management of practice based audit.

Grief & Loss

- Supporting colleagues in managing loss including providing support for distressed patients, bereaved relatives, students and staff.

- Supporting and educating colleagues in issues surrounding tissue and organ donation.

- Supporting people who are bereaved and Identifying those who are at risk in bereavement, or as they anticipate loss, where required referring them on to appropriate professionals within the team and externally.

Education & Training

- Identifying, assessing and helping to meet the information needs of the patient and their family/carers

- Identifying own and others' learning and professional development needs, liaising with the Lead for Specialist Community Services and attending training (seminars, courses and study days), as appropriate according to individual performance review

- Attending a programme of mandatory training each year.

- Participating in teaching members of the MDT, through practice, modelling, teaching, and mentorship, ensuring that colleagues are supported to develop their skills in end of life care and to enhance their professional development.

- Acting as a preceptor to novices taking up roles within the field of specialist palliative care, and as a mentor to nurses undertaking further studies in palliative care or educational visits/placements with the Team.

Research and Audit

- Participating in audit of services on a regular basis so that patient care is continuously reviewed and improved.

- Using up-to-date research / evidence to deliver patient care, disseminating this knowledge to all members of the multi-professional team.

- Identifying areas of practice within the speciality that would benefit from audit or research and in liaison with the Lead Nurse for Specialist Community Services, initiate such enquiry, sharing findings outside the Team through presentations, publication and teaching.

- Being aware of current clinical/research trials being conducted within own specialist area and to be able to inform patients about these.

Additional Information

The post holder will –

- Work within the NMC's Code of Conduct.

- Be familiar with and adhere to all Hospice, Trust and Community policies and procedures.

- Actively promote the Hospice.

- At all times respect confidentiality and in particular the confidentiality of all personal data stored, in line with the requirements of the Data Protection Act

- Be aware of and adhere to individual responsibilities under the Health and Safety at Work Act 1974 and to take reasonable care of their own health and safety and that of others who may be affected by their acts or omissions. Identify and report, as necessary, any untoward accident, incident or potentially hazardous environment.

The post holder may be required to work in and from any Hospice or associated Company premises.

This job description is intended as an outline of the general areas of activity and will be amended from time to time in the light of the changing needs of the organisation. It will then be reviewed in association with the jobholder(s)

The postholder has a personal duty of care in relationship to equipment and resources, and is not required to be a budget holder.

This job description is an outline of the duties of the post and is not meant to be a detailed summary. Other duties may be required according to the needs of the Hospice.

Person Specification

	Essential	Desirable
Education and Qualifications	• Registered Nurse • Degree in relevant area or completing within next 6 - 9 months. • Evidence of further study in Palliative Care	• Masters level study in appropriate area • Advanced Communications Skills Course (Maguire or similar) • Independent prescriber • Teaching qualification • Clinical assessment skills
Experience	• Evidence of having worked in a senior role in a specialist palliative care setting. • Experience of specialist palliative care practice in at least one of these settings: hospital, hospice and/or community • Experience of delivering teaching/ training	• Experience of working with multiple stakeholders • Experience of working in the community/with community nurses and GPs • Oncology nursing experience • Working with people with long term conditions or dementia
Skills, Knowledge and abilities	• Knowledge of use of tools for Advanced Care Planning (at the end of life) • Evidence of contributing to policy making and standard setting. • Awareness of health and safety procedures and how they affect people in the workplace. • Understanding of loss and grief and its impact on individuals and families and their social networks • Working knowledge of relevant statutory and voluntary agencies and organisational structures • A knowledge of the issues related to provision of specialist palliative care in a variety of settings (care homes, home, hospital) and an understanding of some of the challenges that may arise. • Knowledge of current	• Research skills • Clinical assessment skills • Able to demonstrate effective working with members of a variety of professional groups at varying levels of seniority across a number of different organisations

	legislation and policy relevant to end of life care. • Excellent communication skills • Participation in audit or research. • Computer literacy with knowledge of Windows based applications	
Aptitude, Personal Characteristics	• Ability to work independently and as a member of the multi-disciplinary team • Able to manage time and meet deadlines • Assertive and developed influencing or persuasive skills. • Excellent problem–solving skills • Approachable and adaptable, committed to teamwork. • Motivated and enthusiastic. • Ability to manage the emotional impact of working with the dying and bereaved • Demonstrable commitment to anti-discriminatory practice and equal opportunities • A flexible approach to work including an ability to work evenings and weekends. • Ability to undertake training and direct own learning.	
Other	• A valid UK driving licence and access to own car for daily use • Broadband connection at home available to use for work (on call)	