

Clinical Nurse Specialist Care of the Frail Older Person

Job Specification, Terms & Conditions

Job Title and	Clinical Nurse Specialist (CNSp.) Care of the Frail Older Person
Grade	
Grade Code	Grade Code 2632
Closing Date	
Proposed	
Interview Date(s)	
Taking up	To be agreed at job offer stage
Appointment Location of Post	
Location of Post	
Organisational Area	
Details of Service	
Reporting Relationship	The post holder is professionally accountable to the Director of Nursing (DON) or designated deputy.
Purpose of the Post	Ireland is experiencing substantial growth in the older population. The number of people aged over 65 years increased by 14% between 2006 and 2011, An additional increase of 17% is predicted between 2011 and 2016, and a further 17% by 2021 ¹ . The National Clinical Programme for Older People ' <i>Specialist Geriatric Services Model of Care</i> ' highlights the need to change health care practices in response to the needs of the older population ² .
	 This model of care recommends that older people should have access, if required, to the following services in secondary care: Dedicated in-patient Specialist Geriatric Wards (SGW); Specialist Geriatric Teams (SGT); A Comprehensive Geriatric Assessment for all those identified as frail, at risk, older people to fully assess their individual needs and the range of services they require; Access to in-patient rehabilitation facilities; Ambulatory day hospital services; and Improved links with community based services (residential care and home supports).
	The application of specialty focused knowledge and skills of the Clinical Nurse Specialist (CNSp.) Care of the Frail Older Person (hereafter referred to as CNSp.) will provide for the care and on-going management of patients with conditions relating to frailty and old age. The post holder will be required to work as a key member of the frail older person team in the hospital providing physical, psychological and emotional support to older people and their families/carers throughout their disease trajectory. She / he will act as a liaison between Services for Older People in <i>name hospital</i> , Primary Care, Community services and other agencies. The appointment of the CNSp is an essential element in the provision of effective, high quality,
	seamless integrated care for frail older people with complex health care needs with a multidimensional and multidisciplinary input for acutely ill frail older persons as they move through the acute sector and home again. The CNSp. will deliver care in line with the five core concepts of the role set out in the Framework for the Establishment of Clinical Nurse/Midwife Specialist Posts, 4th eq National
Role	Council for the Professional Development of Nursing and Midwifery (NCNM) 2008 ³
	• The person holding this post is required to support the principle that the care of the

Responsibilities	 patient comes first at all times and will approach their work with the flexibility and enthusiasm necessary to make this principle a reality for every patient to the greatest possible degree Maintain throughout the hospital awareness of the primacy of the patient in relation to all hospital activities. Performance management systems are part of the role and participation in the Group's performance management programme The post holder's practice is based on the five core concepts of the CNSp. role as defined by the NCNM (2008) in order to fulfil the role. The concepts are:
	 Clinical Focus Patient/Client Advocate Education and Training Audit and Research Consultant
	Clinical Focus
	The CNSp. will have a strong patient focus whereby the specialty defines itself as nursing and subscribes to the overall purpose, functions and ethical standards of nursing. The clinical practice role may be divided into direct and indirect care. Direct care comprises of the assessment, planning, delivery and evaluation of care to patients, their families and/or carer. Indirect care relates to activities that influence others in their provision of direct care.
	Direct Care
	The CNSp. will:
	 Provide a specialist nursing service for patients with frailty that requires support and treatment through the continuum of care. Early identification and assessment of the older person in ED/AMU with recognised frailty syndromes.
	 Undertake a comprehensive patient assessment to include physical, psychological, social and spiritual elements of care.
	Identify the services required for older patients with frailty ensuring diagnostics and rehabilitation are achieved promptly.
	 Liaison with the Specialist Geriatric Team ensuring that the most appropriate patients are admitted directly under the care of specialist team.
	 Provision of expert advice to those patients not under the care of the specialist service. Use outcomes of assessment to develop plans of care in conjunction with the team, the patient, family and/or carer as appropriate.
	 Monitor and evaluate the patient's response to treatment and amend the plan of care accordingly as appropriate.
	 Make alterations in the management of the patient's conditions in collaboration with the Multidisciplinary Team (MDT) and the patient in line with agreed pathways and policies, procedures, protocols and guidelines (PPPGs).
	 Accept appropriate referrals from colleagues within the team. Act as a support for the staff caring for the frail older adult at ward level with proactive
	 involvement in discharge planning. Co-ordinate investigations, treatment, therapies and patient follow-up.
	 Communicate with patient, family and/or carer as appropriate, to assess the patient's needs and provide relevant support, information, education, advice and counselling as required.
	 Work collaboratively with the patient's GP and other MDT colleagues in Primary and Secondary Care, to provide a seamless service delivery to the patients, family and/or carer as appropriate.

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 Participate in medication reconciliation taking cognisance of poly-pharmacy and support medical and pharmacy staff with medication reviews and medication management.
 Identify health promotion priorities for the patient, family and/or carer and support patient self-care in line with best evidence. This will include the provision of educational and health promotion material which is comprehensive, easy to understand and meets patients' needs.
Indirect Care
 Participate in case review with MDT colleagues. Take a proactive role in the formulation and provision of evidence based PPPGs relating to care of the older person. Take a lead role in ensuring the service for older people is in line with best practice guidelines and the Standards for Safer Better Healthcare (HIQA 2012) Use a case management approach to patients with complex needs in collaboration with MDT colleagues
Patient/Client Advocate
 Communicate, negotiate and represent patient's values and decisions in relation to their condition in collaboration with MDT colleagues. Develop and support the concept of advocacy particularly in relation to patient
 participation in decision making thereby enabling informed choice of treatment options. Respect and maintain the privacy, dignity and confidentiality of the patient, family and/or carer. Establish, maintain and improve procedures for collaboration and cooperation between
 Establish, maintain and improve procedures for conaboration and cooperation between Acute Services, Primary Care and Voluntary Organisations. Proactively challenge any interaction which fails to deliver a quality service to patients. Comply with Health Service Executive (HSE 2015) Complaints Policy.
Education & Training
 Education of healthcare professional colleagues particularly in the ED/AMU/ and hospital wards on the importance of early ambulatory management and a home first focus.
 Maintain clinical competence in the management of older people, keeping up-to-date with relevant research to ensure the implementation of evidence based practice. Provide patients, their families and/or carers with appropriate information and other supportive interventions to increase their knowledge, skill and confidence in managing their condition.
 Contribute to the design, development, and implementation of age related resources for patients, families and/or carers. Participate in training programmes for nursing, MDT colleagues and key stakeholders
 as appropriate. Create exchange of learning opportunities within the MDT in relation to evidence based care delivery through journal clubs, conferences etc. Develop and maintain links with Centres for Nursing & Midwifery Education (CNME's), the Nursing and Midwifery Planning and Development Units (NMPDU's) and relevant third level Higher Education Institutes (HEI's) in the design, development and delivery of gerontological educational programmes.
Audit & Research
 Establish and maintain a register of frail older people within the CNSp. caseload across the acute sector and into the community – (statutory, voluntary and private providers)
 Maintain a record of clinically relevant data aligned to national KPI's as directed and advised by DON, NCPOP) for Older People and senior management. Identify, initiate and conduct nursing and MDT audit and research projects relevant to

	the area of practice-
	 Identify, critically analyse, disseminate and integrate best evidence relating to care of
	the older person.
	• Evaluate audit results and research findings to identify areas for quality improvement in
	collaboration with nursing management and MDT colleagues.
	Contribute to nursing research on all aspects of care of the older person.
	Consultant
	Provide leadership in clinical practice and act as a resource and role model for
	 specialist practice. Generate and contribute to the development of clinical standards and guidelines and
	support the implementation.
	Use specialist knowledge to support and enhance generalist nursing practice.
	Develop collaborative working relationships with colleague CNSp.s/Registered
	Advanced Nurse Practitioners/MDT as appropriate, developing person centred care pathways to promote the integrated model of care delivery.
	 With the support of the DON, attend integrated care planning meetings as required.
	• Develop and maintain relationships with specialist services in voluntary organisations which support patients in the community.
	 Liaise with other health service providers in the development and on-going delivery of the NCPOP "Specialist Geriatric Service" – Model of Care.
	Key Performance Indicators
	 The identification and development of Key Performance Indicators (KPIs) for the CNSp. service which are congruent with the hospital's KPI targets and that of the NCPOP "Specialist Geriatric Service" –Model of Care for Older People.
	 The development of Action Plans to address KPI targets.
	 The management and delivery of KPIs as a routine and core business objective.
Health and Safety	These duties must be performed in accordance with local organisational and the HSE health and safety polices. In carrying out these duties the employee must ensure that effective safety procedures are in place to comply with the Health, Safety and Welfare at Work Act (2005) ⁴ . Staff must carry out their duties in a safe and responsible manner in line with the local policy documents and as set out in the local safety statement which must be read and understood.
	Quality, Risk and Safety Responsibilities
	Participate and cooperate with legislative and regulatory requirements with regard to
	quality, risk and safety.
	 Participate and cooperate with local quality, risk and safety initiatives as required. Participate and cooperate with internal and external evaluations of the organisation's structures, services and processes as required, including but not limited to, The National Hygiene Audit, National Decontamination Audit, Health and Safety Audits and other audits specified by the HSE or other regulatory authorities.
	• To initiate, support and implement quality improvement initiatives in their area which are in keeping with local organisational quality, risk and safety requirements.
	 Contribute to the development of PPPGs and safe professional practice and adhere to relevant legislation, regulations and standards.
	 Ensure completion of incident/near miss forms and clinical risk reporting. Adhere to department policies in relation to the care and safety of any equipment
	supplied and used to carry out the responsibilities of the role of CNSp. in care of the
	older person.
	Specific Responsibility for Best Practice in Hygiene
	Hygiene in healthcare is defined as "the practice that serves to keep people and the
	environment clean and prevent infection. It involves preserving ones health, preventing the spread of disease and recognising, evaluating and controlling health hazards"(HSE 2006) ^{5.} It is the responsibility of all staff to ensure compliance with local organisational hygiene

	standards, guidelines and practices.
<u>Management /</u> <u>Administration</u> :	 The CNSp. will: Provide an efficient, effective and high quality service, respecting the needs of each patient, family and/or carer. Effectively manage time and caseload in order to meet changing and developing service needs. Continually monitor the service to ensure it reflects current needs. Implement and manage identified changes. Ensure that confidentiality in relation to patient records is maintained. Represent the specialist service at local, national and international meetings as required. Maintain accurate and contemporaneous records and data on all matters pertaining to the planning, management, delivery and evaluation of care and ensure that this service is in line with HSE requirements. Contribute to the service planning process as appropriate and as directed by DON. To support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service. The above Job Description is not intended to be a comprehensive list of all duties involved and consequently, the post holder may be required to perform other duties as appropriate to the development of the post while in office.
	PERSONAL SPECIFICATION
Eligibility Criteria	Candidates must have at the latest date for receipt of completed applications for the post:
Qualifications	 Be a registered nurse on the live Register of Nurses kept by An Bord Altranais agus Cnáimhseachais na hÉireann (Nursing and Midwifery Board of Ireland)
	And
	 The person must be registered in the division in which the application is being made. And
	• The person must have undertaken formal recognised post-registration education relevant to his/her area of specialist practice (Care of the Older Adult/Gerontology) at level 8 or above on the Quality and Qualifications Ireland (QQI) <i>National Framework of Qualifications</i> (NFQ) framework ⁶ (major award) prior to application.
	And
	Note: It is the policy of the HSE to require nurses and midwives to certify registration with NMBI annually by way of the Patient Safety Assurance Certification (PSAC).
Experience	I. Have extensive experience and clinical expertise i.e. a minimum of 5 years post registration experience in the division of the register in which the applicant is currently practising
	And
	II. Have a minimum of 2 years experience in the specialist area (caring for the older person in a relevant setting (acute/community setting as appropriate).
	And
	III. Have the ability to practice safely and effectively fulfilling his/her professional

	And
	IV. Must demonstrate evidence of continuing professional development.
Post Specific Requirements	Be a Registered Nurse Prescriber or agree to undertake (within an agreed timeframe as specified by the DON) the Certificate in Nurse Prescribing of Medicinal Products.
Essential skills, competencies and/or knowledge	Professional Knowledge:
and/or knowledge	The CNSp. will:
	 Practice in accordance with relevant legislation and with regard to The Scope of Nursing & Midwifery Practice Framework (Bórd Altranais agus Cnáimhseachais na hÉireann, 2015)⁷ and the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (Bórd Altranais agus Cnáimhseachais na hÉireann) (NMBI 2014)⁸ Maintain a high standard of professional behaviour and is professionally accountable for actions/omissions. Take measures to develop and maintain the competences required for professional practice. Adhere to national, regional and local HSE PPPGs and legislation.
	• Adhere to appropriate lines of authority within the nurse management structure.
	Demonstrate:
	 An in-depth knowledge of the role of the CNSp. Care of the Older Person. Demonstrate knowledge of the biological, physical, changes commonly associated with ageing and understand the concept of frailty on old age. The ability to undertake a comprehensive assessment of the older adult, including taking an accurate history of their condition and presenting problem. The ability to employ appropriate diagnostic interventions and quality of life scales to support clinical decision making. The ability to formulate a plan of care based on findings and evidence based standards of care and practice guidelines. The ability to follow up and evaluate a plan of care. Knowledge of health promotion principles/coaching/self-management strategies that will enable people to take greater control over decisions and actions that affect their health and wellbeing. An understanding of the principles of clinical governance and risk management as they apply directly to the CNSp. role and the wider health service. Evidence of teaching in the clinical area. A working knowledge of audit and research processes. Evidence of computer skills including use of Microsoft Word, Excel, E-mail.
	 Communication & Interpersonal Skills Demonstrate: Effective communication skills. Ability to build and maintain relationships particularly in the context of MDT working. Ability to present information in a clear and concise manner. Ability to manage groups through the learning process. Ability to provide constructive feedback to encourage future learning. Effective presentation skills.
	Organisation & Management skills:

	 Demonstrate: Evidence of effective organisational skills including awareness of appropriate resource management.
	 Ability to attain designated targets, manage deadlines and multiple tasks. Ability to be self-directed, work on own initiative.
	• A willingness to be flexible in response to changing local/organisational requirements.
	Building & Maintaining Relationships including Team and Leadership skills
	Demonstrate:
	 Leadership, change management and team management skills including the ability to work with MDT colleagues.
	Commitment to providing a quality service:
	Demonstrate:
	 Awareness and respect for the patient's views in relation to their care. Commitment to providing a quality service.
	Evidence of motivation by on-going professional development.
	Analysing & Decision Making
	Demonstrate:
	Effective analytical, problem solving and decision making skills
Other requirements specific to the	To develop services for older people in line with the NCPOP "Specialist Geriatric Service" – Model of Care for Older People.
post	A ranking and (or chartlicting eversion may be carried out on the basis of information ourplied
Campaign Specific Selection Process Ranking / Shortlisting /	A ranking and / or shortlisting exercise may be carried out on the basis of information supplied in your application form. The criteria for ranking and / or shortlisting are based on the requirements of the post as outlined in the eligibility criteria and skills, competencies and / or knowledge section of this job specification. Therefore it is very important that you think about your experience in light of those requirements.
Interview	Failure to include information regarding these requirements may result in you not being called forward to the next stage of the selection process.
	Those successful at the ranking stage of this process (where applied) will be placed on an order of merit and will be called to interview in 'bands' depending on the service needs of the organisation.
Code of Practice	The Health Service Executive will run this campaign in compliance with the Code of Practice prepared by the Commission for Public Service Appointments (CPSA). The Code of Practice sets out how the core principles of probity, merit, equity and fairness might be applied on a principle basis. The Code also specifies the responsibilities placed on candidates, facilities for feedback to applicants on matters relating to their application when requested, and outlines procedures in relation to requests for a review of the recruitment and selection process and review in relation to allegations of a breach of the Code of Practice. Additional information on the HSE's review process is available in the document posted with each vacancy entitled "Code of Practice, information for candidates".
	Codes of practice are published by the CPSA and are available on <u>www.hse.ie/eng/staff/jobs</u> in the document posted with each vacancy entitled "Code of Practice, information for candidates or on <u>www.cpsa.ie</u> .
The reform program	nme outlined for the Health Services may impact on this role and as structures change the
job specification ma	

This job specification is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive nor restrictive and is subject to periodic review with the employee concerned.



Clinical Nurse Specialist Care of the Older Person Terms and Conditions of Employment

Tenure	This appointment is permanent / specified purpose, whole-time / part-time and pensionable.
	Appointment as an employee of the Health Service Executive is governed by the Health Act 2004 and the Public Service Management (Recruitment and Appointment) Act 2004.
Remuneration	The Salary Scale (as at 01/01/10) for the post is:
	Euro 47,089 – 47,886 – 48,559 – 49,659 – 50,874 – 52,067 – 53,260 – 54,604 – 55,852 (pro rata)
Working Week	The standard working week applying to the post is 39hrs (pro rata)
	HSE Circular 003-2009 "Matching Working Patterns to Service Needs (Extended Working Day / Week Arrangements); Framework for Implementation of Clause 30.4 of Towards 2016" applies. Under the terms of this circular, all new entrants and staff appointed to promotional posts from Dec 16 th 2008 will be required to work agreed roster / on call arrangements as advised by their line manager. Contracted hours of work are liable to change between the hours of 8am-8pm over seven days to meet the requirements for extended day services in accordance with the terms of the Framework Agreement (Implementation of Clause 30.4 of Towards 2016).
Annual Leave	The annual leave associated with the post is to be confirmed at job offer stage.
Superannuation	Membership of the HSE Employee Superannuation Scheme applies to this appointment. Existing Members who transferred to the HSE on 1 st January 2005 pursuant to Section 60 of the Health Act 2004 are entitled to superannuation benefit terms under the HSE Scheme which are no less favourable to those to which they were entitled at 31 st December 2004. Appointees to posts in the Mental Health Services which formerly attracted fast accrual of service should note that the terms of Section 65 of the Mental Treatment Act 1945 do not apply to New Entrant Public Servants as defined by Section 12 of the Public Service Superannuation (Miscellaneous Provisions) Act 2004.
Probation	Every appointment of a person who is not already a permanent officer of the Health Service Executive or of a Local Authority shall be subject to a probationary period of 12 months as stipulated in the Department of Health Circular No.10/71.
Protection of Persons Reporting Child Abuse Act 1998	As this post is one of those designated under the Protection of Persons Reporting Child Abuse Act 1998, appointment to this post appoints one as a designated officer in accordance with Section 2 of the Act. You will remain a designated officer for the duration of your appointment to your current post or for the duration of your appointment to such other post as is included in the categories specified in the Ministerial Direction. You will receive full information on your responsibilities under the Act on appointment.
Infection Control	Have a working knowledge of HIQA Standards as they apply to the role for example, Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc.

References

- 1. Central Statistics Office 2013. *Population and labour force projections 2016-2046*. Stationery Office: Dublin, April 2013
- 2. Health Service Executive (2012) National Clinical Programme for Older People, Specialist Geriatric Services Model of Care Part 1: Acute Service Provision
- 3. National Council for the Professional Development of Nursing and Midwifery (2008) *Framework* for the Establishment of Clinical Nurse/Midwife Specialist Posts 4th Ed NCNM, Dublin <u>www.lenus.ie/publications</u>
- 4. Health and Safety Authority (2005) Safety, Health and Welfare at Work Act ISBN No. 1-84496-028-5
- 5. Health Service Executive (2006) National Hospitals Office *Cleaning Manual* for Acute Hospitals <u>http://www.hse.ie/eng/services/publications/Hospitals/HSE National Cleaning Standards Manu</u> <u>al.pdf</u>
- 6. Quality and Qualifications Ireland (QQI) *National Framework of Qualifications* <u>http://www.qqi.ie/Pages/National-Framework-of-Qualifications-(NFQ).aspx</u>
- 7. Bórd Altranais agus Cnáimhseachais na hÉireann (2015) *Scope of Nursing and Midwifery Practice Framework* <u>www.nursingboard.ie</u>
- 8. Bórd Altranais agus Cnáimhseachais na hÉireann (2014) Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives. NMBI, Dublin