

PEACE HOSPICE CARE
Job Description

Palliative and End Of Life Care: Advanced Nurse Practitioner in IPU	
Job Title	In-Patient Unit (IPU) Advanced Nurse Practitioner
Salary Band	Peace Way Band H
Hours per week	37.5 Hours (1.0 FTE); integrated into internal shift rotation
Dept/Location	Inpatient Unit / Clinical
Reporting to:	Palliative Care Consultant
Number of staff managed	<i>Direct reports: None</i> <i>Managed through others: None</i>
Budget responsibility	Support income generation within the IPU
Other information helpful to understand size/scope of job:	<p>The Peace Hospice Care In-Patient Unit has 12 Specialist Palliative and End of Life Care (EOLC) short-stay beds which operates 24 hour/7 days a week. Supported by a multi-professional and skilled-mixed Nursing, Medical, Allied Health Professional, and administration team plus a range of dedicated IPU volunteers.</p> <p>Dependent on experience a developmental post would be considered. Within the one year developmental ANP role the post holder would be supported with a mentor, with opportunities to undertake master level study, to develop their advanced practitioner skills and expand their Specialist Palliative Care Clinical knowledge.</p>

Job Summary / Main Purpose

The Advance Nurse Practitioner in Palliative and End of Life Care (P/EOLC ANP) will:

- Work as a clinically independent and autonomous practitioner, managing a defined group of Palliative/EOLC patients as part of the IPU MDT. As well as leading on nurse-led admissions and discharges, to ensure a responsive coordinated approach to the most effective and safe use of the IPU beds.
- Utilise their Specialist Palliative Care symptom management knowledge, Advanced Communication and Psychological skills to support high levels of decision-making, expert problem-solving abilities and understanding of disease processes.
- Use independent non-medical prescribing authority, to prescribe safe, effective and appropriate medication as defined by current legislative framework.
- Constantly strive to keep up to date with new advanced nursing practice and Palliative care developments, maintaining own CPD, competence and skill level through regular clinical supervision, appraisal, training opportunities and personal development plans.
- Develop close links with the IPU manager and Sisters/Charge Nurse and Practice Development lead working collaboratively on agreed service developments improvement and practice based initiatives.

Clinical Leadership: 65%

The Advanced Nurse Practitioner will assess, plan, prescribe, implement and evaluate care. Practicing at an advanced level of autonomy, utilising specialist skills which are above and beyond what a general nurse is able to do.

Management: 10%

To be responsible for the development and sustainability of Safe, Effective, Responsive, Caring, and Well Led Nurse led interventions within IPU.

Governance and Quality Assurance: 10%

To actively contribute to the PHC Clinical Governance and Quality Assurance processes ensuring safe practice including chair of one of the quality work streams

Education, Learning & Development 10%

To actively contribute as part of SCT to the wider Patient Services workforce and learning and development planning.

Own Professional development 5%

To actively participate in appropriate internal and external educational programmes and demonstrate on-going personal and professional development in accordance with own Appraisal.

Main Duties and Responsibilities:

Clinical Leadership: 65%

1.	Being responsible for the management of the nurse led patient beds , having autonomy to make an independent decision on a patient’s treatment plan based on own judgement, analysis of physical symptoms, toxicity assessment, biochemical markers, interpretation of diagnostics and highly developed specialist knowledge.
2.	Use high levels of precision, dexterity, coordination and sensory skills when: <ul style="list-style-type: none"> • Undertaking physical assessments, diagnostic and therapeutic procedures, and ensure consent to treatment. • Referring patients directly to specialists in other professions.
3.	Be able to recognise, investigate and manage a range of common Palliative/EOLC symptoms, seeking advice and support from the wider MDT, ensuring any concerns are escalated to the consultant on duty.
4.	Utilise both pharmacological and non-pharmacological interventions and onward referral to the expertise of the wider MDT. Ensuring clear action plans are in place that support proactive symptoms management, address patient and families’ psychological, spiritual distress and offer solution focused support for welfare/ practical matters.
5.	Supporting the effective use of IPU clinical short stay beds: <ul style="list-style-type: none"> • Through good communications and flexible working with the Palliative Care Referral Centre and IPU manager and team leads, support the admission and identification of the most appropriate patients into the IPU beds, avoiding unnecessary admissions. • Working with the IPU manager and Sister/Charge nurses facilitate earlier decision making in supporting identification of patients whose preferences are to be discharged home or to another place of care or no longer require specialist intervention. • Proactively and sensitively lead on the coordination of safe nurse led discharge planning. • Contribute to out of hours and weekend cover according to facilitate service needs and 7 day admissions. • As part of the IPU clinical leadership team actively support the agreed income generation plans.
6.	Utilises highly developed analytical and judgemental skills, involving highly complex facts, to recommend/decide on the best course of action/treatment and or implements and evaluates accordingly.
7.	Perform specialist holistic assessments of patient needs and clinical condition. Producing clearly written treatment, and if appropriate escalation plans according to the patients changing health care needs.
8.	Utilise the full suite of agreed patient outcome measures and undertake full reviews and evaluations of the individualised patient’s care plans, ensuring both verbal and written documentation is accurately communicated and recorded.
9.	To work with the Practice Development Lead and the IPU manager to ensure best evidence patient safety practice is followed relating to: <ul style="list-style-type: none"> • Falls prevention & management • Tissue Viability and pressure care • Infection prevention and control • Maintaining Nutritional and hydration needs
10.	Provide a high level of communication by: <ul style="list-style-type: none"> • Liaising with all appropriate members of multi-disciplinary team ensuring seamless coordinated care between our own PHC teams, and other voluntary and statutory health and social care services. • Communicating very sensitive condition related information to patients and relatives, requiring high levels of empathy and reassurance. This includes highly complex information that needs to be conveyed in easily understood language. • Ensuring the provision of appropriate verbal and written patient information, thus empowering the patient to make informed decisions. • As a patient advocate, be able to undertake a mental capacity assessment and if the patient lacks consent ensure all care is planned and delivered in the patient’s best interest. Ensuring the patients LPA or NoK are informed and involved when appropriate. • Initiate discussions with patient/family re advance care planning, preferences for future care and wishes, including DNAR status, shared decision making and preferred place of death. Recognising the importance the patient’s consent is gained so these discussions can be shared.
11.	Work as an independent prescriber enabling timely prescribing, dispensing and administration of appropriate medication for symptom control. With the ability to amend/suspend treatment based on advanced clinical skills.

12.	Providing expert specialist clinical advice for patients, carers and health care professionals, by supporting the triaging of the OOH advice line and clinical enquires within IPU.
13.	Plans and organises own workload in order to meet the needs and changing demands of the service.

Management: 10%

1.	<p>Take responsibility for the management and coordination on the designated nurse led beds.</p> <ul style="list-style-type: none"> Develop agreed criteria, pathways and processes as to which patients are suitable for these beds. Agree with the Consultant and IPU manager the internal pathway/criteria of which patients will be managed within the wider SPC and nurse led beds, including the staffing and interventions required. To have a clear understanding and relationship with the CCG's CHC and Personal budget teams, plus explore other funding opportunities that support the nurse led admissions process, ensuring financial processes are in place. Work with the Communications Team, to ensure the beds are promoted externally, and internally all staff are aware of the pathway.
2.	Have a detailed understanding of the hospice contract arrangements and trust fund applications and potential funding streams, supporting the ANP role and its duties
3.	Working with the Senior Clinical Team support the DoPS and Medical Director by actively contributing and leading on aspects of the agreed clinical services work plan and wider hospice vision, values and business objectives.
4.	Working with the IPU manager to ensure the agreed IPU income generation outcomes are met, with monthly monitoring and reports to the Clinical BAG and CGC committee.
5.	Attend MDT meetings and ward rounds, review patients on a daily basis providing expert advice and direction to the clinical team.
6.	Maintain the safe and effective delivery of care by monitoring and contributing to budgetary or financial initiatives and ensures that safe and effective patient care is maintained within the resources available.
7.	Initiate and facilitate service change through the implementation of evidence based practice. Providing written business cases, in line with the wider PHC business cycle and regular reports to BAG and CGC when required.
8.	Taking responsibility for leading on the regular production of written service reports, evaluation and publicity articles that demonstrate service effectiveness and case of needs.

Governance and Quality Assurance: 10%

1.	Report, document and evaluate the work of the advanced nurse practitioner to demonstrate its importance, both to patients and the hospice. Ensuring the ANP daily activity and impact is measured and demonstrated through excellent data capture reporting and written reports.
2.	Ensure implementation of current best practice, underpinned by national developments in associated services, utilising and interpreting organisational and broad health policies
3.	Work with the Senior Clinical Team and especially the IPU manager and Consultant on the development and maintenance of clinical standards, protocols and guidelines of care which are evidence based within the IPU setting.
4.	Taking the lead/chair of a delegated quality implementation group or other identified quality improvement and assurance actions, making sure the nominated PHC staff are actively involved.
5.	Working with the Medical Director participate and undertake active work-related research, and practice, disseminating findings through learning events, publication and poster presentations.
6.	Be responsible for identification and managing clinical or service risks and incidences that relate to own practice and wider IPU services care delivery. Ensuring they are proactively reported to the IPU Manger and supported with clear plans that demonstrate action taken and learning shared.
7.	Be responsible for reporting any concerns/compliant in accordance to PHC policy ensuring duty of candour best practice is followed and documented.
8.	In liaison with the SCT and external networks, monitor standards and quality of care, through benchmarking, audit and research.
9.	Consider how information technology within the IPU daily practice can be used to enhance the patient care we give, including data collection, analysis and reporting of patient reported outcomes.
10.	Ensure all reasonable precautions for a safe and secure environment for self and others in accordance with Health and Safety legislation are in place, reporting any areas of concern to the IPU manager and own line manager.

Education, Learning & Development: 10%

1.	Utilise highly developed knowledge, training and experience gained from successful completion of a recognised post-registration health professional degree programme, continuous professional development and practical experience relevant to practice.
2.	Working with the SCT and the Practice Development Lead and Learning and Development team, contributing to the planning and delivery of the hospice education informal and formal programme, ensuring it meets the IPU clinical practice learning needs.
3.	Act as a role model with support from the Practice Development Lead and IPU manager and Sisters, to raise understanding and standards of professionalism in the Palliative/EOLC setting.
4.	Support the delivery of the PHC patient involvement and experience strategy, by promoting and undertaking user events, seeking patient/ family feedback, and be involved with the clinical community engagement activities using the findings to influence service improvement.
5.	Promote people's Equality, Diversity and Rights.
6.	Working collaboratively with Learning and Development and Education Team to develop and provide education and training for other health and social care professionals and external partners to enable them to provide a high standard of care for Palliative and EOLC patients.
7.	Use expert knowledge and skills to disseminate information and promote good practice in liaison with the Medical Team/Consultant and SCT
8.	Maintain own knowledge, competence and skill level through regular clinical supervision, appraisal, and personal development plans including appropriate training programmes.
9.	To represent the PHC Clinical services both within and outside the organisation at local, national and international level.

Own Professional development 5%

1.	Maintain up to date skills and knowledge, maintaining awareness of professional issues at an advanced level.
2.	Follows and implements policies within determined parameters and proposes changes to working practices or procedures for own area of practice and which impact beyond own area of practice.
3.	Take responsibility with regard to own personal development including all mandatory training.
4.	Limit actions to those which you feel competent to undertake, including working within the prescribers framework and scope of practice.
5.	Maintain active status on NMC Register and act in accordance with NMC 'Code' and the NMC guidance documents, ensuring responsibility of maintaining active status and revalidation as a registered nurse working as an advanced practitioner.
6.	Comply with Legislation with regards to Health and Safety and Data Protection Act and ensure confidentiality is maintained at all times.

General Responsibilities

1.	To demonstrate Peace Hospice Care's Values at all times, in all interactions with managers, colleagues, staff, volunteers, customers, donors and members of the general public.
2.	Maintain confidentiality with regard to all discussions and activities undertaken on behalf of Peace Hospice Care.
3.	Be aware of the procedure to follow in the event of fire and other emergencies.
4.	To report to your line manager any hazards or accidents that may occur in your working environment and ensure compliance with the terms of the Health & Safety at Work Act.
5.	Ensure that all equipment used by you in the course of your duties is used appropriately, and any faults or breakages are reported immediately.
6.	Participate in the ongoing system of Appraisal. Ensure e-Learning is kept up to date for self and others.
7.	To undertake any other reasonable duties as required.

Peace Hospice Care is committed to Equal Opportunities for all current and potential members of staff and patients. Therefore, the Hospice expects all employees and volunteers to understand, support, and apply this policy through their working practices which requires all individuals to be treated with respect, dignity, courtesy, fairness and consideration.

This job description is not designed to be an exhaustive list of responsibilities and may be modified in the light of development and changing circumstances, according to the needs of the service, and in consultation with the post holder. The post holder should be prepared to undertake any further duties that arise as the post develops. All members of Clinical staff may at times be required to work in other parts of the Hospice, commensurate with the roles and responsibilities laid out in this job description.

Signed (Employer):		Signed (Employee):	
Date:		Date:	

Person Specification: Advanced Nurse Practitioner in IPU		
Each element of the specification should be assessed as follows: A = Application Form; I = Interview; P = Presentation		
QUALIFICATIONS <i>Appropriate professional, educational requirements</i>	ESSENTIAL / DESIRABLE	ASSESSED
RGN with a degree (Master in ANP or willing and ability to work towards)	E	A
Post registration module in Specialist field of work	E	A
Advanced clinical assessment skills, training qualification or willingness to undertake	E	A/I
Evidence of continuous professional development and portfolio of learning	E	I
Leadership or Management Module	E	A
Non-medical prescriber	E	A
Advanced communications skills or Counselling qualification	D	A
Master's degree	D	A
Research Module	D	A
PREVIOUS EXPERIENCE <i>Appropriate experience in order to carry out the role</i>	ESSENTIAL / DESIRABLE	ASSESSED
Significant clinical experience as nurse specialist in Palliative/EOLC or managing long-term conditions	E	A
Recognised as an expert in the field of practice with the ability to clinically assess and diagnose	E	A/I/P
Experience in project management	E	A/I
Evidence of leading service change	E	A/I
Managing a budget	E	A/I
Managing and or leading a team	E	A/I
Audit or research experience	E	A/I
KNOWLEDGE and SKILLS <i>Specific post-related skills and abilities</i>	ESSENTIAL / DESIRABLE	ASSESSED
Advanced Clinical Assessment Skills	E	I
Management of Palliative or Long-Term conditions and complex needs	E	I
Advanced communication skills	E	I
Effective communicator with proven ability to influence all levels of staff	E	I/P
Ability to work autonomously as an independent practitioner	E	I
Proven leadership and team leading skills	E	I
Proven ability to manage and progress own professional development	E	I
Presentation and advanced skills/report writing	E	A/I/P
Able to respond to change and apply themselves to development in practice	E	I
Ability to mentor and teach other professionals/colleagues	E	I
PERSONAL / OTHER QUALITIES	ESSENTIAL / DESIRABLE	ASSESSED
Highly motivated	E	A/I
Committed to continuous service development and quality improvement	E	I
Ability to work under pressure to meet deadlines and targets	E	I
Reliable and supportive	E	I
Ability to synthesise information, consider and evaluate risks and options when making difficult decisions	E	I/P
The ability to understand and always behave, towards patients, visitors and colleagues according to the organisations values	E	I/P
ATTITUDES AND VALUES	ESSENTIAL / DESIRABLE	ASSESSED
A commitment to the vision, values and objectives of Peace Hospice Care	E	I
Understanding and commitment to the Hospice's Equal Opportunities policy	E	I