

# POSITION DESCRIPTION

Position Title: Nurse Practitioner / Transitional Nurse Practitioner

**Department:** Geriatric Flying Squad **Location:** War Memorial Hospital

Uniting Purpose: To inspire people, enliven communities & confront injustice

Uniting Values: Imaginative, respectful, compassionate, bold

Classification: Nurse Practitioner OR Clinical Nurse Consultant

Vaccination risk category: A

Award: War Memorial Hospital (Waverley) Nurses Agreement 2011

(Public Health System Nurses and Midwives (State) Award)

**Employment status:** Permanent Full time

**Hours:** Rotating 7 day a week roster

Position reports to: Geriatric Flying Squad Head of Department. Deputy Director and

**Director of Nursing** 

Position Supervises: Nil

**Key relationships:** Geriatric Flying Squad multidisciplinary team, Nurse Practitioner

Governance Committee, Geriatricians, Advanced Trainee (Geriatrics), Nursing and Allied Health teams, Residential Aged Care Facilities, POW Geriatric Outreach Service, Prince of Wales

Community Assessment Unit and Virtual Health Hub

## **POSITION PURPOSE**

The Aged Care Nurse Practitioner (NP) / Transitional Nurse Practitioner (TNP) works within the War Memorial Hospital (WMH) Geriatric Flying Squad (GFS). The service provides advanced clinical assessment, investigation and develop management plans for older people in the community and in residential aged care facilities. The aim of the GFS is to (where appropriate) implement hospital avoidance strategies who are at high risk of emergency department

**War Memorial Hospital** 

ABN 78722 539 923 125 Birrell Street Waverley NSW 2024 T 02 9369 0100 F 02 9387 7018 presentation or readmission to hospital. The NP within the context of the GFS will review and build referral pathways (where appropriate) and liaise with referrers, clients families and other health care providers. This position is based at War Memorial Hospital and includes both day and evening coverage during weekdays and weekends on a rotating 7 day a week roster. The GFS service is currently expanding through Ministry of Health Urgent Care Funding, available until June 2025. This will enable an Allied Health clinician and Nurse Practitioner to provide assessment and management within the GFS service, to the community, 7 days a week and into the after-hours, with the support of the on-call Geriatrician. This will be an important element of the SESLHD Urgent Care Model in providing assessment and management in the older persons home, avoiding unnecessary ambulance use and emergency presentation.

The role of the Nurse Practitioner would be to support this expansion by:

- Working within the SESLHD Urgent Care Service Collaborative Model, providing the older adult community rapid response arm within the northern end of SESLHD.
- Building on the existing GFS service, which has been shown as an effective subacute care and hospital avoidance program for older people living in the community; supporting robust evaluation of the benefits of the expansion.
- Working within the multidisciplinary team of nursing, allied health professionals and the medical team to build the model of care expansion into the community

## **POSITION OBJECTIVES**

- Works within a rapid response, after hours, clinical geriatric response service to older people
  in the community and RACF's within the Northern Sector of the SESLHD that provides
  advanced clinical assessment, intervention and consultation.
- In tandem with the GFS Operational Head of Department & Leadership, collaborates with internal and external health care providers e.g. GP's, NGO's, Community Health Services, Aged Care Facilities, ED's/ASET, emergency services, community health teams, Geriatricians
- Works within a multidisciplinary team to coordinate comprehensive and well rounded care, drawing on the expertise of the medical and allied health professionals
- In tandem with the GFS Operational Head of Department & Leadership, reviews referral data and promotes referral pathways to ensure service indicators and KPI's are met
- Promotion of the acute care service to RACF's, continuing to build on key networks and policy development with participation on state and national working parties and provide leadership in state, national and/or international nursing bodies and/or specialist clinical groups
- The development and delivery of specialty related education programs to facilitate the acquisition of information and clinical knowledge by patients, community members and other health professionals by using new or existing pathways
- Initiates and participates in research and quality improvement activities and utilises findings in the provision of clinical service delivery to ensure that practice is based on most recent and available evidence, with a focus on improved service delivery.
- Plan, implement and evaluate the annual plan for the NP service.

#### **KEY RESPONSIBILITIES**

#### **Definitions**

Advanced practice nursing (APN): APN in the Australian nursing context identifies the additional legislative functions of an endorsed nurse practitioner that are outside the contemporary registered nurse scope of practice. Advanced practice nursing as a nurse

practitioner is a qualitatively different level of advanced nursing practice to that of the registered nurse due to the additional legislative functions and the regulatory requirements. The requirements include a prescribed educational level, a specified advanced nursing practice experience; and continuing professional development.

Scope of practice (ScOP): The scope of nursing practice is that in which nurses are educated, competent to perform and permitted by law. The actual scope of practice of individual practitioners is influenced by the settings in which they practice, the health needs of people, the level of competence and confidence of the nurse and the policy requirements of the service provider. Each NP/TNP must develop an individual ScOP that reflects their expertise and competence. While the ScOP may be similar for NPs working in certain clinical specialties, it must reflect the capabilities, expertise and competence of the individual.

## STANDARD 1

Assesses using diagnostic capability

**Statement 1.1** Conducts comprehensive, relevant and holistic health assessment relevant to the field of geriatric nursing practice.

#### Cues:

- Demonstrates extensive knowledge of human sciences and health assessment
- Demonstrates comprehensive and systematic skill in obtaining relevant, appropriate and accurate data that inform differential diagnoses
- Assesses the complex and/or unstable health care needs of the person receiving care through synthesis and prioritisation of historical and available data
- Assesses the impact of comorbidities, including the effects of co-existing, multiple pathologies and prior treatments in the assessment of the person receiving care
- Demonstrates comprehensive skill in clinical examination including physical, mental health, social, ethnic and cultural dimensions
- Consistently and accurately synthesises and interprets assessment information specifically history, including prior treatment outcomes, physical findings and diagnostic data to identify normal, at risk and abnormal states of health
- Critically evaluates the impact of social determinants on the person and population.

**Statement 1.2** Demonstrates timely and considered use of diagnostic investigations to inform clinical decision making

#### Cues

- Makes decisions about the use of person-focused diagnostic investigations that are informed by clinical findings and research evidence
- Demonstrates accountability in considering access, cost, clinical efficacy and the informed decision of the person receiving care when ordering diagnostic investigations
- Orders and/or performs selected screening and diagnostic investigations
- Is responsible and accountable for the interpretation of results and for following-up the appropriate course of action
- Uses effective communication strategies to inform the person receiving care and relevant health professionals of the health assessment findings and diagnoses.

**Statement 1.3** Applies diagnostic reasoning to formulate diagnoses.

Cues:

- Synthesises knowledge of developmental and life stages, epidemiology, pathophysiology, behavioural sciences, psychopathology, environmental risks, demographics and societal processes when making a diagnosis
- Considers the person's expectations of assessment, diagnosis and cost of health care
- Acts to prevent and/or diagnose urgent and emergent and life threatening situations
- Determines clinical significance in the formulation of an accurate diagnosis from an informed set of differential diagnoses through the integration of the person's history and best available evidence.

## STANDARD 2

Plans care and engages others

Statement 2.1 Translates and integrates evidence into planning care

#### Cues:

- Takes personal responsibility to critically evaluate and integrate relevant research findings into decision making about health care management and interventions
- Ethically explores therapeutic options considering implications for care through the integration of assessment information, the person's informed decision and best available evidence
- Is proactive and analytical in acquiring new knowledge related to nurse practitioner practice.

Statement 2.2 Educates and supports others to enable their active participation in care

#### Cues:

- Respects the rights of the person to make informed decisions throughout their health/illness experience or episode, whilst ensuring access to accurate and appropriately interpreted information
- Uses appropriate teaching/learning strategies to provide diagnostic information that is relevant, theory-based and evidence-informed
- Communicates about health assessment findings and/or diagnoses, including outcomes and prognosis
- Works to meet identified needs for educating others regarding clinical and ongoing care.

**Statement 2.3** Considers quality use of medicines and therapeutic interventions in planning care

## Cues:

- Develops an individual plan of care and communicates this to appropriate members of the healthcare team and relevant agencies
- Exhibits a comprehensive knowledge of pharmacology and pharmacokinetics related to nurse practitioner scope of practice
- Works in partnership with the person receiving care to determine therapeutic goals and options
- Verifies the suitability of evidence-based treatment options including medicines, in regard to commencing, maintaining/titrating or ceasing interventions
- Demonstrates accountability in considering access, cost and clinical efficacy when planning treatment.

**Statement 2.4** Refers and consults for care decisions to obtain optimal outcomes for the person receiving care

## Cues:

- Collaborates with other health professionals to make and accept referrals as appropriate
- Consults with and/or refers to other health services, disability services, aged-care providers and community agencies at any point in the care continuum.

#### STANDARD 3

Prescribes and implements therapeutic interventions

Statement 3.1 Prescribes indicated non-pharmacological and pharmacological interventions

#### Cues:

- Contributes to health literacy by sharing knowledge with the person receiving care to achieve evidence-informed management plan
- Safely prescribes therapeutic interventions based on accurate knowledge of the characteristics and concurrent therapies of the person receiving care
- Demonstrates professional integrity and ethical conduct in relation to therapeutic product manufacturers and pharmaceutical organisations
- Safely and effectively performs evidence-informed invasive/non-invasive interventions for the clinical management and/or prevention of illness, disease, injuries, disorders or conditions
- Interprets and follows-up the findings of screening and diagnostic investigations in an appropriate time frame during the implementation of care.

Statement 3.2 Maintains relationships with people at the centre of care

## Cues:

- Supports, educates, coaches and counsels the person receiving care regarding diagnoses, prognoses and self-management, including their personal responses to illness, injuries, risk factors and therapeutic interventions
- Advises the person receiving care on therapeutic interventions including benefits, potential side effects, unexpected effects, interactions, importance of compliance and recommended follow-up
- Shares information with others in consultation with the person receiving care
- Coordinates care with other health, disability and aged care providers, agencies and community resources
- Discloses the facts of adverse events to the person receiving care and other health professionals; mitigates harm, and reports adverse events to appropriate authorities in keeping with relevant legislation and organisational policy
- Advocates for improved access to health care, the health care system and policy decisions that affect health and quality of life

**Statement 3.3** Practices in accordance with federal, state and territorial legislation and professional regulation governing nurse practitioner practice

#### Cues

- Defines duty of care in accordance with relevant legislation and regulation
- Remains informed of changes to legislation and professional regulations, and implements appropriate alterations to practice in response to such changes

• Contributes to the development of policy and procedures appropriate to context and specialty.

## STANDARD 4

Evaluates outcomes and improves practice

Statement 4.1 Evaluates the outcomes of own practice

#### Cues:

- Monitors, evaluates and documents treatments/ interventions in accordance with persondetermined goals and health care system outcomes
- Considers a plan for appropriately ceasing and/or modifying treatment in consultation with the person receiving care and other members of the health care team
- Applies the best available evidence to identify and select appropriate outcomes measures of practice
- Uses indicators to monitor and measure the effectiveness of strategies, services and interventions to promote safe practice
- Participates in clinical supervision and review
- Implements research-based innovations for improving care
- Contributes to research that addresses identified gaps in the provision of care and/or services.

**Statement 4.2**: Advocates for, participates in, or leads systems that support safe care, partnership and professional growth

## Cues:

- Advocates and provides evidence for expansion to nurse practitioner service where it is believed that such an expansion will improve access to quality and cost-effective health care for specific populations
- Demonstrates clinical leadership in the design and evaluation of services for health promotion, health protection or the prevention of injury and/or illness
- Articulates and promotes the nurse practitioner role in clinical, political and professional contexts
- Acts as an educator and/or mentor to nursing colleagues and others in the healthcare team
- Critiques health care policies for their implications on the nurse practitioner role and the populations for whom they care
- Influences health, disability and aged-care policy and practice through leadership and active participation in workplace and professional organisations.

## **KEY PERFORMANCE INDICATORS**

#### Financial management & awareness:

- Maintenance of accurate and timely data collection to ensure the effective financial sustainability of clinical performance reporting
- In tandem with the GFS Operational Hed of Department & Leadership, continual evaluation of the service to ensure the service is meeting the target population needs and KPI's. Including, but not limited to, number of patients assessed, afterhours activity, referral pathways, ED avoidance, facilitation of direct admissions with bypass of ED

 Demonstrate financial stewardship in relation to staffing, goods and services resource allocation

## Operational processes:

- NP/TNP holds individualised ScOP within which they practice which is reported to and endorsed by the Nurse Practitioner Governance Committee
- Attends 6 monthly WMH Nurse Practitioner Governance Committee meeting
- Practices in accordance with relevant policy documents from MoH and SESLHD (whichever relevant at that time)
- Identifies and adopts innovative clinical practice models, e.g. implementation and evaluation of new treatments, technologies, and therapeutic techniques relating to the aged care specialty
- Supports the continuum of care across care environments promoting hospital avoidance, direct subacute admission and early discharge where appropriate
- Leads in the design and conduct of quality improvement initiatives in tandem with the GFS Operational Head of Department & Leadership,
- Represents the service and actively contributes to required internal committees and National Standards forums

# Client management & engagement (internal & external stakeholders):

- Identify future issues and new directions for the service in collaboration with GFS Department Head & Team Leadership
- Participate in formal processes for the strategic and operational planning for the clinical service
- Provide expert clinical advice to clients, carers, other health care professionals within the aged care specialty and external stake holders
- Develop, facilitates implementation and evaluates care management plans for clients with complex health needs.
- Provide an expert person-centered consultancy practice
- Provides education on complex clinical issues to clients and carers

# People management & teamwork:

- Acts as a role model and expert clinician in the clinical setting.
- Works seamlessly in a multidisciplinary team and values the input of allied health professionals, other nursing staff and the medical team
- Contributes to the operational processes of the department in an equitable manner amongst the team including daily triage and auditing measures
- Contributes to the development and management of clinical processes, e.g. geriatric outreach services health models of care, clinical pathways, policy, procedures and guidelines
- Contributes to the development and delivery of older specialty related education programs
- Model advanced nursing practice through leadership, education delivery, quality improvement initiatives and critical analysis and ethical decision making and mutual respect
- Provide leadership to the nursing profession including education.

# Work Health Safety and Welfare Requirements:

Staff work within, and are supported by, well-designed systems to deliver safe, high-quality clinical care. Staff are responsible for the safety and quality of their own professional practice, and professional codes of conduct. Staff will:

• Actively take part in the development of an organisational culture that enables, and gives priority to, patient safety and quality

- Actively communicate their profession's commitment to the delivery of safe, high-quality health care
- Model professional conduct that is consistent with a commitment to safety and quality at all times
- Embrace opportunities to learn about safety and quality theory and systems
- Embrace opportunities to take part in the management of clinical services
- Encourage, mentor and guide colleagues in the delivery of safe, high-quality care
- Take part in all aspects of the development, implementation, evaluation and monitoring of governance processes

#### PROFESSIONAL SKILLS AND KNOWLEDGE

## Skills & Experience:

- Demonstrated high level knowledge and advanced clinical nursing skills including comprehensive assessment, interpretation of diagnostics, implementation of treatment modalities and relevant referral skills applied to a broad range of challenging, complex and changing situations.
- Demonstrated ability to perform in a clinical leadership role evidenced by participation in practice development activities including mentoring, education, active participation in committees and policy development.
- Demonstrated involvement in research and quality improvement that influence and enhance clinical service delivery and outcomes, models of care and evidenced based practice.
- Demonstrated effective communication and interpersonal skills across a variety of mediums, with an emphasis on service delivery, quality of care and team cohesion.
- Demonstrated ability to undertake clinical service planning in conjunction with the organisation and optimising professional networking.
- Demonstrated ability to work with a high degree of autonomy and accountability while also working collaboratively in a multidisciplinary and multi service environment.
- Computer skills with experience using MS Office programs and electronic filing systems.

## Qualifications:

- Registered Nurse with AHPRA including endorsement as a Nurse Practitioner or working towards same as per the Nursing & Midwifery Board Guidelines on endorsement as a Nurse Practitioner
- Current class C drivers licence

Employee	Managers Name:	
Name:	Title	
Date:	Date:	
Signature:	Signature:	



# JOB DEMANDS CHECKLIST

Job Title: NP/TNP – Aged Care Service/Unit: War Memorial Hospital

Department: Geriatric Flying Squad Manager / Supervisor: GFS Head of

Department

Assessor: Ainsley Chapman Date of Assessment: Jan 2024

Date of Assessment review: Jan 2025

# Definitions:

 $m{\star}$  Denotes a critical requirement of the job

Frequency

	Infrequent – intermittent activity exists for a short time	termittent activity exists for a short time C Cons	
	on a very infrequent basis		when performing the job
0	Occasional - activity exists up to 1/3 of the time when performing the job	R	Repetitive – activity involves repetitive movements
F	Frequent – activity exists between 1/3 and 2/3 of the	N/A	Not applicable – activity is not required to perform the
	time when performing the job		job

CRITICAL *	PHYSICAL DEMANDS - DESCRIPTION (comment)			FREQUENCY					
				0	F	С	R	N/A	
	Citting Democialization								
	Sitting Remaining in a seated position to perform tasks							<b>└</b>	
		ning standing without moving about to perform tasks						<u> </u>	
		even/uneven/slippery, indoors/outdoors, slopes						—	
		Running Floor type: even/uneven/slippery, indoors/outdoors, slopes							
	tasks	from Waist Forward bending from the waist to perform							
		ning from the waist while sitting or standing to perform tasks							
		j in a kneeling posture to perform tasks							
	Squatting/ Crouching Adopting a squatting or crouching posture to perform tasks								
		crawling on knees & hands to perform tasks							
		t Use of leg and or foot to operate machinery							
		ders) Ascend/ descend stairs, ladders, steps, scaffolding							
	Lifting/ Carrying	Light lifting & carrying – 0 – 9kg							
		Moderate lifting & carrying – 10 – 15kg							
		Heavy lifting & carrying – 16kg and above							
	Reaching Arms fully extended forward or raised above shoulder								
	Pushing/ Pulling/ Restraining Using force to hold/restrain or move objects toward or away from body								
	Head/ Neck Posture forward)	•							
		ents Repetitive movements of hands & arms						+	
	Grasping/ Fine Manipulation Gripping, holding, clasping with fingers or hands							+	
		Using ladders, footstools, scaffolding, or other objects to							
	<b>Driving</b> Operating a	ny motor powered vehicle							
CRITICAL *	SENSORY DEMANDS - DESCRIPTION (comment)		FR	FREQUENCY			T		
				0	F	С	R	N/A	
	Sight Use of sight is an integral part of work performance e.g. viewing of X-rays, computer screen								
		aring is an integral part of work performance e.g. telephone							
	Smell Use of smell is an integral part of work performance e.g. working with chemicals								
		s an integral part of work performance e.g. food preparation						+	
	Touch Use of touch is an integral part of work performance							+	

CRITICAL	PSYCHOSOCIAL DEMANDS – DESCRIPTION (comment)		FREQUENCY							
*	Assisting <b>√</b>			F	С	R				
	Distressed people e.g. emergency or grief situations									
	Aggressive & uncooperative people e.g. drug/alcohol, dementia, mental illness									
	Unpredictable people e.g. dementia, mental illness and head injuries									
	Restraining Involvement in physical containment of patients/clients									
	Exposure to distressing situations e.g. child abuse, viewing dead/mutilated									
	bodies									
CRITICAL	ENVIRONMENTAL HAZARDS – DESCRIPTION (comment)		FREQUENCY I O F C							
,					С	R				
	Dust Exposure to atmospheric dust									
	Gases Working with explosive or flammable gases requiring									
	precautionary measures									
	Fumes Exposure to noxious or toxic fumes									
	<b>Liquids</b> Working with corrosive, toxic or poisonous liquids or chemicals									
	requiring PPE									
	Hazardous substances e.g. dry chemicals, glues									
	Noise Environmental/background noise necessitates people to raise their voice									
	to be heard									
	Inadequate lighting Risk of trips, falls or eyestrain									
	Sunlight Risk of sunburn exists from spending more than 10 minutes per work									
	day in sunlight									
	Extreme temperatures Environmental temperatures are < 15°C or > 35°C									
	Confined spaces Areas where only one egress (escape route) exists									
	Slippery or uneven surfaces Greasy or wet floor surfaces, ramps, uneven									
	ground									
	Inadequate housekeeping Obstructions to walkways and work areas cause trips									
	& falls									
	Working at heights Ladders/stepladders/scaffolding are required to perform tasks									
	Biological hazards e.g. exposure to body fluids, bacteria, infectious diseases									
or demands of	Il Position Requirements/Demands Summary: From the checklist, outline the fithe job. This information will then be transferred to the Position Description. Anything that is critical to the job should be included in the position description.					or				
Signature	e of Manager: Date:/	/2	20	••••						
☐ I am a	able to fulfil the above requirements without modification.									
☐ Iam u	ınable to fulfil the above job requirements and need the following mo	difid	catio	ns: 						

Signature of Employee: .....

Date: ...../20.....

N/A

N/A