

## **JOB DESCRIPTION**

**Post Title:**            **Diabetes Specialist Nurse- Development Post**

**Current Grade:**     **Band 6**

**Responsible to:**    **Lead Diabetes Specialist Nurse**

**Hours:**              **37.5 hours per week**

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### **Job Summary**

To support the development and implementation of the diabetes service in line with public health initiatives, across the Borough of Lewisham to improve the quality of diabetes care.

1. To work as a team player within the framework of the community diabetes service, providing evidence based practice.
2. Support on all aspects pertaining to the management of diabetes, reducing cardiovascular risk, working as part of the community diabetes team.
3. To support the community diabetes team to deliver education and training to multi-professionals, voluntary organisations as well as people with diabetes.
4. Manage a caseload of patients with diabetes to educate towards self-management, prevention, early detection and treatment of diabetic complications.
5. Promote effective communication across primary and secondary care interface to ensure a seamless, equitable, quality service is provided for all people with diabetes in Lewisham.

## **ROLES AND RESPONSIBILITIES**

### **PROFESSIONAL**

1. Practice in accordance with the NMC Professional Conduct and Practice.
2. To provide evidence based care, assessment, advice and guidance on the management of diabetes for patients/carers within service level pathways and in line with local guidelines.
3. Support activities undertaken with the community diabetes team, whilst providing ongoing team support.
4. Maintain and further develop expertise within diabetes specialist field.
5. Participate in research-based practice to develop and maintain a high professional standard of care and expertise.
6. Support the development, initiation and monitoring of ongoing audit programmes against guidelines, to identify gaps in service delivery and guide practice development.
7. To participate in reflective practice as per Lewisham PCT policy.

### **CLINICAL**

1. Support the delivery of community diabetes clinics and clinics in practices where the practitioner with a special interest has been working.
2. To manage a defined caseload, prioritising work accordingly, including referral and liaison to appropriate professionals/agencies.
3. Undertake assessment and management of cardiovascular risk factors and early diabetic nephropathy, liaising with the GP at the practice or the community diabetes team as necessary, knowing when and where to refer for further intervention.
4. Screen the 'at risk' diabetic foot, give foot care advice to those people with feet graded as low risk and know how to refer people with feet graded as 'at risk', 'high risk' or an 'active foot problem'.
5. Provide ongoing follow up care and support (home visits/ telephone support) for people with diabetes, their families and carers.
6. Provide clinical, psychological, and social support to people with diabetes, their relatives and carers at all stages of the disease.

7. Work effectively within a multi-professional community team and working closely with the hospital team, providing care, education and support to adults with diabetes, their families, and carers.
8. After a suitable period of support necessary to gain the acquired competencies, have the authority to adjust and advise patients on their oral anti diabetic medication and insulin, within agreed protocols, and in discussion with the diabetes specialist nurse or GPwSI or consultant physician /nurse in diabetes when necessary.
9. Facilitate effective communication between primary and secondary service sectors to ensure quality of care and reduce duplication of service delivery.
10. To support community diabetes team in providing education, advice and support for nursing and residential care homes, mental health and social care services.
11. To demonstrate, teach and supervise the nursing care that can be safely delegated to the patient/carer giving support as necessary.

## **EDUCATIONAL**

1. Participate in delivering structured education programmes for people with diabetes and for all primary care professionals involved in the care and management of people with diabetes.
2. Participate in the development of appropriate material to facilitate the education of people with diabetes and health care professionals.
3. Participate in audit of education and training provided in diabetes management and care.
4. To support the community team to deliver informal and formal education sessions for the public to promote awareness and knowledge about diabetes, its prevention, early detection and management.
5. Educate students and new staff on the role of the community diabetes team and develop their knowledge and skills in diabetes management and risk reduction for diabetes related complications.
6. Deliver education and training sessions on diabetes for other agencies and groups as required.

## **MANAGERIAL**

1. Support in maintaining and updating primary care diabetes services to inform the banding placement of practices, in line with the diabetes NSF delivery strategy.
2. Support the writing of policies, guidelines and care pathways for diabetes management to inform public health initiatives and health promotion activities, as well as promoting evidence-based practice.
3. Maintain accurate records, submitting statistical returns and support the compiling of reports as required.
4. Support the transfer of care for patients currently attending hospital outpatient clinics to primary care when it has been identified appropriate by the community diabetes team.
5. To maintain all aspects of the Lewisham PCT clinical governance strategy.

## **CONFIDENTIALITY**

In the course of your employment you will have access to confidential information relating to PCT business. You are required to exercise due consideration in the way you use such information and should not act in any way, which might be prejudicial to the PCT's interests. Information that may be included in the category, which requires extra consideration, covers both access to the general business of the PCT and information regarding individuals. If you are in any doubt regarding the use of information in the pursuit of your duties you should seek advice from your Line Manager before communicating such information to any third party.

## **DATA PROTECTION**

The PCT is registered under the Data Protection Act 1984. You must not at any time use the personal data held by the PCT for a purpose not described in the Register entry or disclose such data to a third party. If you are in any doubt regarding what you should or should not do in connection with the Data Protection Act then you must contact your Line Manager.

## **HEALTH AND SAFETY**

Employees must be aware of the responsibility placed on them under the Health and Safety at Work Act (1974) to maintain a healthy and safe working environment for both staff and visitors. Employees also have a duty to observe obligations under the PCTS Health and safety policies and to maintain awareness of safe practices and assessment of risk in accordance with the Risk Management Strategy.

## **FINANCIAL REGULATIONS**

All staff are responsible for the security of the property of the PCT, avoiding loss or damage of property, and being economical and efficient in the use of resources. Staff should conform to the requirements of the Standing Orders, Standing Financial Instructions or other financial procedures including the Code of Conduct and Accountability and the Fraud and Corruption Policy.

## **GENERAL**

The postholder may be required to work at any of the PCT's sites in line with the service needs.

The postholder must at all times carry out his/her responsibilities with due regard to the PCTs Equal Opportunities Policy.

This job description describes responsibilities, as they are currently required. It is anticipated that duties will change over time and the job description may need to be reviewed in the future.

All staff have a responsibility to participate in the PCT's Performance Appraisal Scheme and to contribute to their own development and the development of any staff that they are responsible for appraising.

## PERSON SPECIFICATION

<b>Post:</b>	<b>Community Diabetes Specialist Nurse Development Post</b>	
<b>Department:</b>	<b>Community Diabetes Team</b>	
<b>Grade:</b>	<b>Band 6</b>	
<b>HEADINGS</b>	<b>ESSENTIAL QUALITIES</b>	<b>DESIRABLE QUALITIES</b>
<b>Education &amp; Qualifications</b>	First level nursing registration  Evidence of continuing professional development	Community Specialist Practitioner qualification e.g. PN/ DN  Graduate in Nursing or Health related studies  Counselling skills course  ENB 998 or equivalent teaching qualification  Accredited diabetes course or equivalent diabetes qualification
<b>Experience &amp; Abilities</b>	Extensive post registration experience  Clinical experience of managing people with diabetes  Work as an effective team player within a multi professional team  Primary care /community care experience	Experience of supervising junior staff/ nursing students  Ability to screen for the at risk diabetic foot. Able to give foot care advice to those with feet graded at low risk  Experience of assessment and management of early diabetic nephropathy

		Experience of assessment and management of cardiovascular risk factors.
<b>Skills</b>	<p>Excellent interpersonal skills</p> <p>Ability to work on own initiative</p> <p>Demonstrates effective teaching and presentation skills</p> <p>Organise and prioritise against competing service needs</p> <p>Work autonomously and participate in service developments</p> <p>Assessment and management of cardiovascular risk factors</p> <p>Demonstrates well developed verbal &amp; written communication skills</p> <p>IT skills – Word and email</p> <p>Participate in the audit cycle</p>	<p>Understanding of IT diabetes database &amp; templates</p> <p>Facilitation skills</p> <p>EMIS</p> <p>Powerpoint, excel</p>
<b>Knowledge</b>	<p>DoH and NICE policies, guidelines that influence diabetes service provision &amp; other related areas of clinical practice</p> <p>Knowledge of diabetes NSF and its impact on strategic service developments &amp; patient outcomes</p> <p>Good understanding of services and processes involved in primary/community care</p> <p>Implementing evidence based practice</p> <p>Clear understanding of Clinical Governance</p>	

<b>Personal Qualities</b>	Has initiative and enthusiasm  Assertive positive outlook  Approachable and friendly  Self-motivated  Flexible approach to work  Ability to meet deadlines and prioritise work under pressure  Work closely within a multi professional team  Demonstrate clear understanding Of issues surrounding equality and diversity	
	Car Driver	
<b>PERSON SPECIFICATION UPDATED BY:   Community Diabetes Team</b>		
<b>DATE:</b>		



