

JOB DESCRIPTION

Job title:	Heart Failure Nurse Specialist
Grade:	Band 7
Directorate:	East Adult Services
Division:	East Specialist Services
Service:	Heart Failure

1. Job summary

- a) The Community Heart Failure Nurse Specialist will work autonomously with patients in the community but may have clinical support from the primary and secondary care heart failure teams and Cardiologists.
- b) Improve the patient's quality of life as well as their medical and nursing management, in order to reduce unnecessary hospital admission & readmission.
- c) Provide expertise to increase the skills & confidence of other team members and community practitioners in the care and management of heart failure patients and support the use of the NICE Clinical Guidelines for heart failure, local CCG Commissioning Framework guidelines.
- d) Referrals will include patients with a new diagnosis of heart failure and those with an exacerbation of their stable heart failure, depending on local service specification. The service will cover geographical areas appropriate to local service specification.

2. Communication and working relationships

- a) Establish effective communication channels within the whole health economy.
- b) Provide advice and support for all staff and users.
- c) Participate in regular supervision and performance reviews with line manager.



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- d) Take responsibility to communicate the day to day working issues that impact upon the strategic objectives overseen by the steering group.
- e) Explore different methods of communication appropriate to patients' needs.
- f) Participate in networks with other heart failure nurses locally.
- g) Form good working relationships and excellent communication with other members of the Heart Failure team, GPs, Consultants, Patients, Carers and all members of the multidisciplinary team.

3. Key responsibilities

- a) Facilitating the development of evidence based standards, protocols for the service to work to and pathways and audit tools for patients with heart failure to ensure provision of a holistic service for patients & carers.
- b) Determining criteria for referral and discharge to the service from both primary and secondary care.
- c) Establishing the development and management of patients through a combination of nurse led heart failure clinics and home visits, incorporating clinics with primary care teams and early follow up in line with local service specification.
- d) Ensuring the development of data collection in line with NSF and NICE clinical guideline requirements,
- e) Actively participating in the heart failure steering group which will oversee and support the development of the service.
- f) Autonomously manage their own caseload with access to specialist support.
- g) Provide follow up for patients who have been admitted to hospital with heart failure & provide specialist input to patients with a new diagnosis of heart failure, or those with an exacerbation of their heart failure in the community.
- h) Review & optimise medication regimes to ensure patients are receiving appropriate therapy within agreed prescription guidelines, including nurse prescribing.
- i) Be responsible for the assessment of these patients, develop a nursing care plan, and deliver heart failure care according to the patient's individual



management plan. This will include the up titration of medications. Evaluate the effectiveness of these interventions and adjust care accordingly.

- j) Provide health education strategies for patients, carers, team members & other health professionals, focusing on medication and symptom management that meets individual patient need & choice.
- k) Provide a patient held record to empower the patient with their heart failure management.
- l) Develop an individual plan of care through consultations tailored to meet the patients' individual needs. This may include clinic visits, home visits or visits to nursing and residential homes.
- m) Provide specialist heart failure advice and support to other team members and the multidisciplinary team for heart failure patients as they approach the end of their life, drawing on the expertise of the Palliative care team when required.
- n) Collect audit data from this group of patients in line with the NSF, NICE clinical guideline, and local outcomes, these will be used to support effective evaluation of service for monitoring by the Heart Failure Subgroup of the CHD LIG.
- o) Regularly auditing service effectiveness in achieving improved patient outcomes, including reducing unnecessary admissions to secondary care.
- p) Provide ongoing telephone support, accessibility and expert advice to the patient, their carers, and other healthcare professionals.
- q) Work in collaboration with existing services delivering exercise, to develop a holistic programme for those with the potential to benefit.

4. Main tasks

- a) To provide evidence based care for the Heart Failure patient in a clinic or home setting, titrating medication according to NICE guidelines and patient parameters.
- b) To liaise with secondary care and GPs to ensure seamless care.
- c) To refer to, and discharge to, other services within the Trust and to use management plans.



- d) To provide education and support to other members of the multidisciplinary team.
- e) To ensure carers receive support and are signposted to appropriate services.
- f) To ensure excellent end of life care as appropriate.
- g) Act as an expert resource for team members, primary care and community nursing staff on the holistic management of heart failure patients and their carers.
- h) Encourage the expansion of heart failure nursing practice using protocols, prescribing opportunities and the transferability of nursing skills.
- i) Adhere to all Trust policies, national policies, guidelines and evaluations.
- j) Assure the maintenance of adequate documentation and that patient records are up-to-date.
- k) Adhere to the NMC Code of Professional Conduct.
- l) Participates in the Trust supervision strategy including provision of supervision and management of the designated skill mix.
- m) Participates in recruitment, induction and orientation programmes.
- n) Deliver education focusing on evidence-based care for the heart failure patient.
- o) Be able to discuss the diagnosis and implication of heart failure, medication and lifestyle changes and end of life care.
- p) Develop the knowledge and skills of junior team members using an agreed competency framework.
- q) Be responsible for own self-development, in line with PREP requirements, and undertake relevant study to further develop and maintain clinical practice.
- r) Participate in clinical and professional supervision on a regular basis, ensuring learning takes place using a reflective approach.
- s) The post holder may be required to deliver presentations and educational sessions to both small and large groups.



5. Organisation chart



- a) The post holder may have tasks or responsibilities delegated to them, appropriate to their level of competence. They may also be expected to delegate tasks or responsibilities to other staff, as appropriate.
- b) The Delegation Policy sets out the expectation of staff regarding the safe delegation of clinical care and therapeutic interventions to unregistered practitioners and support workers.

6. Flexibility

- a) This job description is intended to provide a broad outline of the role. The post holder may be required to carry out other duties commensurate with their banding and competence.

7. Policies and procedures

- a) The post holder is required to familiarise themselves with all Trust policies and procedures and to comply with these at all times.

8. Confidentiality and data protection

- a) The post holder must maintain the confidentiality of information about patients, staff and other health service business and meet the requirements of the Data Protection Act (2018) and General Data Protection Regulation (2018) at all times.
- b) The post holder must comply with all Trust information and data protection policies at all times. The work of a NHS Foundation Trust is of a confidential nature and any information gained by the post holder in their role must not be communicated to other persons except where required in the recognised course of duty.



9. Health, safety and wellbeing

- a) Employees must be aware of the responsibilities placed on them under the Health and Safety at Work Act (1974) and must follow these in full at all times, including ensuring that they act in line with all agreed procedures at all times in order to maintain a safe environment for patients, visitors and colleagues.
- b) The Trust is committed to support the health and wellbeing of all its employees. The post holder is required to familiarise themselves with the organisation's range of health and wellbeing support, share with their team, and report stress and ill health as early as possible.

10. Equality, diversity and inclusion

- a) The Trust aims to grow inclusive teams in which you feel like you belong, we encourage a culture of learning from different points of view. We want to support you to be courageous and to overcome bias and challenge prejudice.
- b) We are a Level 3 Disability Confident Leader. We go the extra mile to make sure disabled people get a fair chance. As well as paid employment we offer work experience and apprenticeships for disabled people.

11. Use of technology

- a) The Trust is making increased use of computer technology. The majority of employees (both clinical and non-clinical) should expect to use automated information systems in their work in order to improve quality and coordination of services, and enable faster and more certain communication within the Trust. Necessary training will be provided.

12. No smoking policy

- a) SCFT operates a no-smoking policy, in line with government legislation. This applies to all staff, visitors and patients. It is a condition of employment for staff that they do not smoke whilst on duty or in uniform or anywhere on Trust premises. This includes electronic cigarettes.
- b) Whilst we do not discriminate against employing smokers, they are expected to adhere to this policy and all prospective employees should be aware of this.

13. Professional registration

- a) All employees who are required to be a member of a professional body are required to hold relevant registration and must comply with the standards and



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guidelines of their professional practice, education and conduct and must act at all times within the boundary of the code of conduct.

14. Infection prevention and control

- a) Infection prevention and control is everybody's responsibility. All staff, both clinical and non-clinical, are required to adhere to the Trust's Infection Prevention and Control Policy and make every effort to maintain high standards of infection prevention and control at all times thereby reducing the burden of healthcare-associated infections (HCAI).

15. Safeguarding children, young people and vulnerable adults

- a) SCFT is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults, and expects all staff and volunteers to share this commitment. Rigorous recruitment checks are carried out and successful applicants may be required to undertake an Enhanced Disclosure via the Disclosure and Barring Service (DBS).

16. Quality

- a) Excellent care at the heart of the community is our Trust vision. To make sure our care meets this high standard all staff must ensure that the three themes of quality care are provided in every encounter they have with our patients. The three themes are safe care, effective care, and patient-centred care.
- b) All staff, clinical and non-clinical, are expected to ensure that quality is a key consideration in all we do. This includes reviewing practice and being open to feedback on our performance, being open and honest, and seeking to identify, resolve, and appropriately escalate issues and risks.



PERSON SPECIFICATION

This person specification lists the requirements necessary to perform the job. Candidates will be assessed according to the extent to which they meet, or have the potential to meet the specification. It is therefore important that applicants pay close attention to all aspects of the person specification when deciding if their skills, experience and knowledge match these requirements.

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Criteria	Essential or desirable	Method of Assessment
Qualifications and/or Professional Registration		
<ul style="list-style-type: none"> • Ma RGN first level nurse First Level degree or equivalent 	Essential	A/C
<ul style="list-style-type: none"> • Post graduate level degree or equivalent 	Essential	A/C
<ul style="list-style-type: none"> • Mentoring/supervisors Course 	Essential	A/C
<ul style="list-style-type: none"> • Extensive clinical experience of five years or more with 2 years at band 6 in Heart Failure 	Desirable	A/C
<ul style="list-style-type: none"> • Advanced Physical Assessment course 	Essential	A/C
<ul style="list-style-type: none"> • Non-Medical Prescriber or willing to work towards 	Essential	A/I
<ul style="list-style-type: none"> • Masters qualification 	Desirable	A/C
Experience		
<ul style="list-style-type: none"> • Case management experience 	Essential	A/I
<ul style="list-style-type: none"> • Evidence of recent management of heart failure patients 	Essential	A/I
<ul style="list-style-type: none"> • Evidence of up-to-date based knowledge and skills, particularly in in Long term Condition issues 	Essential	I
<ul style="list-style-type: none"> • Evidence of ability to maintain and monitor high standards of care 	Essential	I
<ul style="list-style-type: none"> • Evidence of professional development and knowledge 	Essential	I
<ul style="list-style-type: none"> • Community Nursing 	Desirable	I
Skills and Knowledge		

Criteria	Essential or desirable	Method of Assessment
<ul style="list-style-type: none"> Ability to work in flexible way and respond positively to change Ability to work autonomously and make own decisions Demonstrate a high level of understanding of self and able to identify personal limitation and shows openness to address them Evidence of knowledge and experience of team dynamics/ leadership role Evidence of ability to work with a multidisciplinary team Evidence of knowledge and experience of working between acute and Primary Care settings Evidence of working in partnership and collaboration with other professionals Evidence of ability to maintain good working relationships at all times Evidence of the ability to champion patient issues Ability to appropriately challenge a variety of professionals about an individual's care Evidence of ability to identify training needs of self and team to provide relevant and appropriate experience to all learners Evidence of teaching patients and carers Evidence of advanced communication skills, able to understand blocks to communication and ways of developing strategies to overcome these IT literate 	Essential	I
	Essential	I
	Essential	A/C
	Essential	A/I
	Essential	A/I
	Essential	A/I
	Essential	A/I
	Essential	A/I
	Essential	A/I
	Essential	A/I
	Essential	A/I
	Essential	A/I
	Essential	A/I
	Essential	A/I
Other requirements		
Access to a vehicle to travel between sites	Essential	A/I

Good luck with your application!

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