

Bundle Charitable Funds Committee 15 September 2020

3.2.1 Trainee Haematology Clinical Nurse Specialist Proposal for Ceredigion and Pembrokeshire

Presenter: Chair

Final V2 CharitableFundsCommitteeSBAR Haem posts Sept 2020

Job Description



PWYLLGOR CRONFA ELUSENNOL CHARITABLE FUNDS COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	15 September 2020
TEITL YR ADRODDIAD: TITLE OF REPORT:	Trainee Haematology Clinical Nurse Specialist Proposal for Ceredigion and Pembrokeshire
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Keith Jones Director of Secondary Care
SWYDDOG ADRODD: REPORTING OFFICER:	Gina Beard, Lead Cancer Nurse Andrea Stiens, Pathology Manager

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

The Ceredigion Clinical Haematology service at Bronglais General Hospital (BGH) is in a fragile position due to its geographical distance from the rest of the Hywel Dda University Health Board (HDdUHB). There is currently a single Haematology Clinical Nurse Specialist (CNS) based at Ceredigion, and there has been a failure to recruit to the substantive Haematology Consultant post. The service in Ceredigion is supported by 3 days of a locum Consultant Haematologist and remote cover from Consultant Haematologists at the other HDdUHB sites.

Pembrokeshire Clinical Haematology Service is supported by two Consultant Haematologists on site at Withybush General Hospital (WGH). There is a single Haematology CNS at Pembrokeshire.

Within Carmarthenshire there are currently two substantive Consultant Haematologists, supported by locum haematologists. This service is supported by two further CNS posts.

Haematology is a complex speciality. The current Haematology CNS Team have many years of experience in this speciality.

An application for a Trainee CNS Haematology post was submitted for Ceredigion by HDdUHB and approved by the Macmillan Cancer Support Charity (Macmillan) for funding. It was welcomed by Macmillan as a creative and impressive project to future proof a service, with the source of ongoing funding at the end of the project period identified from its outset, thus avoiding the cost pressures around charity funded posts historically on HDdUHB.

Unfortunately, due to COVID-19 and the impact of this on external third sector organisations, Macmillan has recently withdrawn the approved funding for the Ceredigion post. This SBAR requests that the Charitable Funds Committee considers funding trainee CNS posts for Ceredigion and Pembrokeshire for a 3 year period from HDdUHB's oncology and haematology charitable funds. 50% matched funding for the Pembrokeshire element has been approved by a local external charity (Withybush Cancer Day Unit Appeal Fund) should this proposal be approved.

Should funding be agreed, it is intended that the Ceredigion post will be advertised as soon as possible with the Pembrokeshire post being advertised in early 2021.

Cefndir / Background

The Macmillan Cancer Workforce in Wales Census (2017)¹ identified the following relevant findings:

- 42% of specialist cancer nurses in Wales are aged 50 and over.
- Haematology specialist nurses in Wales had a vacancy rate of 12.2 vacancies per 100 filled roles at the time of the census, the UK rate being 3.2 vacancies per 100 filled posts. Haematology was the speciality with the highest vacancy rate.

As noted above, current haematology service provision within HDdUHB is fragile and these two posts are intended to assist with future proofing the service.

The HDdUHB Haematology CNS Team act as key workers for patients with an urgent suspected haematological cancer from the point of suspicion and referral to secondary care diagnostic services. If a cancer diagnosis is confirmed, the key worker will support the patient through breaking bad news, liaising with treatment teams during this phase and support through recovery and survivorship where this is appropriate. A haematological cancer diagnosis will often be an incurable although treatable diagnosis, and building a strong therapeutic relationship with the cancer patient is a part of the key worker role that will be maintained through to end of life care.

With the possibility of retirements within the current HDdUHB Haematology CNS workforce over coming years this proposal supports utilising the experience that exists within the current team to train future additions to the CNS workforce. As such, there is a developmental opportunity to provide a supported trainee post at Pembrokeshire and Ceredigion. It is proposed that two Annex 21 trainee Band 7 posts are funded for 22.5 hours per week for 3 years with key competencies and gateways built in which would allow the posts to progress to a substantive Band 7 at the end of the 3 year period.

Recruitment pressures

Recruitment of experienced CNS', particularly in the Ceredigion area, has historically been challenging. The location and geography of the community means that there are limited pools of registered nurses from which to recruit. Ceredigion is a neighbour to the counties of Powys and Gwynedd. Powys does not have any acute hospitals. Gwynedd has three, however all are located more than 2 hours' drive from BGH. As a result, the recruitment of experienced nurses with advanced practice skills relies on either the successful candidate's willingness to relocate, or a suitable candidate being identified from within the current employment pool in Ceredigion. HDdUHB, therefore, continues to pursue opportunities to invest in the local nursing workforce to anticipate the future needs of the local service. For this reason, this developmental opportunity is being presented as the best option, and an option whereby HDdUHB can have a level of control. It is a creative approach to sustainability that cannot be funded from within the existing staffing budget, due to the reliance on each trainee working within a period of flexibility and with the ability to be supernumerary. This is above and beyond what the mainstream NHS could fund and support and therefore should be considered suitable for the application for charitable funding.

Sustainability/Exit Strategy

Following the 3 trainee years of charitable funding, the substantive funding for these posts at qualified Band 7 rate would look to be realised through potential retirements within the CNS Team. This may be in terms of complete retirement, therefore providing a full time opportunity for the developed trainee nurse, or as a job share in the event of a retire and return situation, with the trainees continuing on a 22.5 hours contract as fully trained CNS'.

If there were no reduction in hours within the current workforce at the point that charitable funding ceased there would be a risk of a cost pressure within the service. However, the skills gained through the training period of these posts would also lend themselves to CNS roles within Oncology, Acute Oncology and any of the four treatment units within HDdUHB. Therefore the potential for redeployment, even for a temporary term, is strong. The trainee CNS contract would incorporate a commitment to work in other transferable clinical areas within HDdUHB should there not be available Haematology CNS hours at the end of the trainee period.

There has been workforce engagement from the Lead Cancer Nurse with the HDdUHB Haematology CNS Team. The Team understands the commitment of this proposal and their part in the training process and sustainability of the future posts.

The Value of the Haematology CNS Role

The Macmillan Wales Cancer Patient Experience Survey² demonstrates that patients with blood cancers were markedly less likely to understand the explanation of what was wrong with them when the cancer was diagnosed (56% compared to between 69% and 82% in other groups).

Throughout the care pathway, the survey demonstrated that patients with access to a CNS reported a significantly better experience.

The ongoing provision and sustainability of the CNS role for patients with a haematological cancer will maintain and provide the opportunity to improve the patient experience in HDdUHB.

The table below captures the number of newly diagnosed patients per county within HDdUHB over a 12 month period (April 2019 – March 2020).

Diagnosis	BGH	GGH	PPH	WGH	Grand Total
Acute Leukaemia	1	4	1	3	9
Haematological (Other)	33	59	33	53	178

In the above table, acute leukaemia is separated from other haematological malignancies because while the numbers are low per county, the treatment is aggressive and the required support is intense and specific. This patient group are also jointly managed with the University Hospital of Wales, Cardiff. This means there is a need for very close, cross UHB collaboration between CNS' at each site.

Most other haematological conditions are chronic. People with a haematological malignancy often experience a fluctuating illness trajectory, spanning many years. The stability of their clinical condition can be unpredictable. Approximately 7% of people with a haematological malignancy admitted to hospital will become critically ill (Gordon et al 2005³). However, it is not uncommon for these patients to recover from close to death deterioration which can be successfully treated in many instances (Hung Y-S et al⁴). Conversely, in some situations deterioration can be rapid, leading to swift changes in the goals of care from curative to palliative (Button, E., Chan, R.J., Chambers, S. et al 2017⁵).

Therefore the figures above do not fully capture the case load of each Haematological CNS per county as many patients will remain on the case load for several years, and the intensity of the support required will be unpredictable and can vary from minimal to intense.

Asesiad / Assessment

A job description for the post is attached.

Benefits

Benefits of the posts are summarised below:

- Ensure the sustainability of the haematology service in our more rural localities (mainly Ceredigion and Pembrokeshire);
- Will significantly improve the patient experience throughout their care pathway as noted in the “Macmillan Wales Cancer Patient Experience Survey”;
- Will draw on the existing HDdUHB resources in terms of the experience of current CNS post holders.

Risks

Risks if these posts are not funded are summarised below:

- Future retirements within the current Haematology CNS workforce may result in a recruitment gap leaving a patient group with significant and unpredictable clinical needs without CNS support.
- Even after undertaking a recruitment drive, there is a risk that there would be no suitable candidates to fill the posts and the period of lack of support for the patient group would be extended indefinitely.
- The support of other haematology patients across other HDdUHB sites would be affected as there would be a need for CNS’ to provide urgent and reactive support to patients in all counties in the event of recruitment failure.
- The patient experience would be significantly negatively affected by the lack of a cancer key worker.
- Without the support of an experienced haematological CNS at an acute site, the acute medical and nursing teams may misinterpret an episode of reversible critical illness that requires escalation with a rapid deterioration indicative of end of life, or vice versa.
- The opportunity for advanced care planning for haematological patients may be overlooked.
- The support available for loved ones and carers of people affected by a haematological diagnosis would be deficient.

Costs

- **22.5 hours** as set out below via Annex 21 guidance – Trainee post will be expected to take up to 3 years and will therefore be paid at category (iii): 65% of the maximum Band 7 rate.

<https://www.nhsemployers.org/tchandbook/annex-21-to-25/annex-21-arrangements-for-pay-and-banding-of-trainees>

- **Study Costs** - Potential costs for masters level module in haematology (should this not be covered by central HDdUHB higher award budget) – estimated £1,500 (including travel and accommodation).
- **Set up costs** (laptop, phone etc.) - estimated £1000.
- **Travel costs** to support visiting other UHB sites and educational visits to Tertiary Treating Centres etc. - £1000 per annum.

	Pay 0.6 WTE	Study Costs	Set up costs	Travel costs	Total
Year 1	£21,780		£1000	£1000	£23,780
Year 2	£22,433*	£1500		£1000	£24,933
Year 3	£23,106*			£1000	£24,106

£72,819 per CNS post

*Assumed annual increases at 3%

Available funds

Fund number	Fund name	Available balance	Required amount
T808	Ceredigion Clinical Support Haematology	£14,871.00	£5000
T915	Pembrokeshire Clinical Support Haematology	£12,411.00	£5000
T865	Ceredigion Cancer Services	£220,370.00	£67,819
T905	Pembrokeshire Cancer Services	£114,808.00	£31,409
*External Charity	Withybush Hospital Cancer Day Unit Appeal	50% of cost of Pembrokeshire Trainee CNS post	£36,409 approved by trustees

*An application was made to Withybush Hospital Cancer Day Unit Appeal, an external charity in Pembrokeshire that supports the needs of haematology and oncology patients within the county. This charity was asked to consider providing 50% support for the Pembrokeshire element of this project. This was approved by the charity trustees and is reliant on the proposal receiving full approval at HDdUHB Charitable Funds Committee.

It is proposed that £5,000 from each of the Clinical Haematology charitable funds (Ceredigion and Pembrokeshire) be applied to this proposal and the remainder from the Cancer Services Oncology fund. The Cancer Services charitable funds receive donations in relation to the Chemotherapy Day Units at each site and the inpatient wards where haematology patients are accommodated (Ward 10 at WGH and Meurig ward at BGH) with support from the local Haematology CNS.

To conclude, the ongoing provision and sustainability of the CNS role for patients with a haematological condition will maintain, and provide the opportunity to improve, the patient experience in Ceredigion and Pembrokeshire, and strengthen the cross HDdUHB Clinical Haematology Service.

In terms of eligibility for charitable funding, the charity's eligibility criteria confirms the following:

Eligible charitable expenditure:

Staff posts for a limited time period (maximum of three years) where no other source of funding exists. E.g. projects piloting new models of care or part of a wider service development offering the most effective use of the funds available. Applications must outline the benefits to patients and the wider NHS and include a detailed exit strategy.

It is therefore considered that this request is an eligible request for charitable funding with details of the exit strategy for the posts outlined earlier in the main body of the report.

Argymhelliad / Recommendation

The Charitable Funds Committee is requested to consider funding the above mentioned posts for the next 3 years.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	6.19 The following thresholds are approved in the Charitable Funds Procedure: <i>"Expenditure less than £5,000 shall only need approval by the nominated fund manager. All expenditure in excess of £5,000 and up to £25,000 will require the approval of the Deputy Director of Operations on behalf of the Charitable Funds Operations Sub-Committee. All expenditure in excess of £25,000 and up to £50,000 will require the approval of an Executive Director. Expenditure in excess of £50,000 will require the approval of the Charitable Funds Committee"</i> . 6.21 It also states that the following expenditure types require Committee approval: <ul style="list-style-type: none"> ▪ <i>"Research & development expenditure"</i> ▪ <i>"Pay expenditure"</i> ▪ <i>"Training including conferences/seminars etc requiring attendance of participants outside the UK"</i>
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	USC: Pathology Risk Register Reference 834 Risk: High/Moderate Service resilience within the clinical haematology sub speciality
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	2.1 Managing Risk and Promoting Health and Safety 2.8 Blood Management 3.1 Safe and Clinically Effective Care 3.3 Quality Improvement, Research and Innovation
Amcanion Strategol y BIP: UHB Strategic Objectives:	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS 5. Offer a diverse range of employment opportunities which support people to fulfill their potential

Gwybodaeth Ychwanegol:
Further Information:

<p>Ar sail tystiolaeth: Evidence Base:</p>	<p>Hywel Dda University Health Board Cancer Development Plan</p> <ol style="list-style-type: none"> https://www.macmillan.org.uk/_images/cancer-workforce-in-wales-census-of-cancer-palliative-and-chemotherapy-speciality-nurses-and-support-workers-2017_tcm9-326409.pdf Macmillan Wales Cancer Patient Experience Survey https://gov.wales/sites/default/files/publications/2019-01/wales-cancer-patient-experience-survey-2016.pdf Gordon A, et al. 2005 Incidence and outcome of critical illness amongst hospitalised patients with haematological malignancy: a prospective observational study of ward and intensive care unit based care. <i>Anaesthesia</i>. 60(4):340-7. Hung Y-S, et al. 2013 Characteristics of patients with hematologic malignancies who received palliative care consultation services in a medical centre. <i>American journal of Hospital Palliative Medicine</i> 30(8):773-80. Button,E., Chan, R.J., Chambers, S et al 2017 A systematic review of prognostic factors at the end of life for people with a haematological malignancy. <i>BMC Cancer</i> 17, 213.
<p>Rhestr Termau: Glossary of Terms:</p>	<p>Contained within the body of the report.</p>
<p>Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Cronfa Elusennol: Parties / Committees consulted prior to Charitable Funds Committee:</p>	<p>Triumvate Team at Withybush General Hospital and Bronglais General Hospital Head of Hywel Dda Health Charities Cancer Service Delivery Manager Pathology Services Manager Senior Equality and Diversity Officer</p>

<p>Effaith: (rhaid cwblhau) Impact: (must be completed)</p>	
<p>Ariannol / Gwerth am Arian: Financial / Service:</p>	<p>As noted in the body of this report.</p>
<p>Ansawdd / Gofal Claf: Quality / Patient Care:</p>	<p>Patient care will be impacted as the proposal safeguards the role of the key worker and adds to the sustainability of the service.</p> <p>The posts will improve the patient experience. These key workers will support the patient through breaking bad news, liaising with treatment teams during this phase and support through recovery and survivorship where this is appropriate</p>

	<p>The posts will significantly improve the patient experience throughout their care pathway as noted in the “Macmillan Wales Cancer Patient Experience Survey”.</p>
<p>Gweithlu: Workforce:</p>	<p>The current CNS Team across HDdUHB will have an increase of 0.6 wte x 2 posts for the 3 years of trainee period, however these posts will have a supernumerary status.</p> <p>These will be substantive posts as the ongoing funding following the trainee period will derive from current CNS retirement.</p> <p>Training requirements have been identified and included in the job description. Training will also be provided to enable these posts to eventually become full Band 7 roles.</p>
<p>Risg: Risk:</p>	<p>See risks of not being approved in body of the report.</p> <p>Risks should the project be approved: Successful trainee may be trained up and then obtain a job in a different health board.</p> <p>Mitigation: An expectation to remain employed within HDdUHB for 2 years following the end of the trainee period will be included in the trainee contract of employment. While this will not be enforceable, it will enable due consideration by the trainee. Any higher level educational courses funded by HDdUHB already carry a fee payback penalty if the learner was to leave employment within a defined period:</p> <p>Before completion of qualification 100% Within 1 year of completion 75% Between 1 and 2 years of completion 50% More than 2 years after completion 0%</p> <p>CNS retirement during training period leaving trainee with compromised support. Mitigation: Other CNS’ within HDdUHB would need to be engaged to support ongoing trainee needs.</p> <p>No reduction in current CNS hours due to retirement resulting in no release of funds at the end of the trainee period. Mitigation: cost pressure may exist within budget or redeployment necessary – see Sustainability/ Exit Strategy section within main body of paper</p>

Cyfreithiol: Legal:	<p>Health Board standards will be followed re: Welsh language, etc. As this is a service development/improvement, a legal challenge would be unlikely.</p>
Enw Da: Reputational:	<p>Unlikely to meet public/patient opposition/political activity as posts will improve patient experience and service sustainability and improvement. Staff response to proposal is likely to be a positive one.</p>
Gyfrinachedd: Privacy:	<p>These postholders will process patient data within the existing framework of the CNS service and patient clinical databases, etc and within HDdUHB existing information governance with no external stakeholders.</p>
Cydraddoldeb: Equality:	<p>Funding for Trainee Haematology Clinical Nurse Specialist posts in Bronglais General Hospital and Withybush General Hospital would assist HDdUHB to provide an equitable service for patients in the catchment area. A more locally based service would avoid them having to travel further afield to access services, which would be particularly beneficial to those who experience, or who are at risk of socio-economic deprivation. This would be in line with the general duties of the Equality Act 2010, particularly to advance equality and prevent discrimination in this case, particularly on the grounds of disability) also the new proposed socio-economic duty which is due to come into force in Wales later in 2020.</p>



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CAJE REFERENCE **HD2015/0188**

DATE APPROVED **06/03/2020**

JOB DESCRIPTION

JOB DETAILS

Job Title: Clinical Nurse Specialist in Haematology

Pay Band: 7

Directorate: Pathology

Department: Haematology

ORGANISATIONAL ARRANGEMENTS

Managerial Accountable to: Lead Cancer Nurse

Reports to: Lead Cancer Nurse

Professionally Responsible to: Lead Cancer Nurse

Responsible For:

JOB SUMMARY / PURPOSE

To provide professional and clinical leadership and expertise in the speciality of haematology-, acting as a resource for education and training.

To offer an individualised service to patients with haematological conditions -whether inpatient or outpatient- respecting their diverse cultural and ethnic backgrounds.

To provide direct psychological & informational support and advice to patients with haematological conditions and their families throughout the various stages of the care pathway, i.e. pre-diagnosis, diagnosis, treatment (invasive therapies/ chemotherapy / radiotherapy / active symptom control), follow-up and –where appropriate- bereavement care.

In conjunction with other team members, to explore and discuss treatment options with patients, carers and professionals.

To liaise effectively with all members of the multi-professional healthcare team to contribute to the achievement of a co-ordinated specialist service.

To provide advice and support to non-specialist members of the multidisciplinary team involved in caring for patients with haematological conditions and their families throughout the various stages of the care pathway.

MAIN DUTIES AND RESPONSIBILITIES

In conjunction with the multidisciplinary team, to develop and sustain a high quality service in the care of patients with haematological conditions.

To contribute to the production or updating of relevant clinical protocols where appropriate.

To support patients in both ward-based and outpatient settings, whilst also providing telephone advice and support for the patient / carer at home.

To act as a patient advocate as appropriate.

To attend relevant clinics for those patients with haematological conditions.

Establish/maintain nurse led clinics -whereby the problems and needs of patients and their carers are appropriately channelled.

To offer support, advice & information to patients with haematological conditions and their families, from diagnosis through all the stages of the disease and in conjunction with Specialist Palliative Care Teams as appropriate.

To assess & identify the psychological needs of this client group.

Where appropriate, to refer on to other professionals offering psychological support.

To contribute to team clinical decision-making, particularly through attendance of multi-disciplinary meetings for haematology

To liaise with members of the multidisciplinary team regarding the care and treatment of patients, in order to optimise health outcomes.

To discuss treatment for haematological- conditions with the patient / carer in appropriate depth -with sensitivity, knowledge and expertise.

With the relevant skills & training, to contribute to the administration of required treatments (including chemotherapy) to patients- both within the day-unit and in the inpatient area.

To acknowledge the limits of your professional competence and only undertake practice & accept responsibilities for those activities in which you are competent.

To develop assessment tools that will ensure an appropriate level of nursing intervention so that patients who present with the most complex needs are referred to the appropriate specialist.

To refer to fellow professionals as needed.

To respect and maintain patient confidentiality and privacy.

To respect the cultural and ethnic backgrounds of all patients.

To acknowledge the importance of support for self; accessing personal clinical supervision.

To act as the key worker and undertake a holistic needs assessment for all haematology patients.

Professional

To contribute to the haematology peer review process in conjunction with members of the MDT and achieve national standards of care through the implementation of standards and collation of evidence Peer Review

To contribute to action's required in the delivery of the Health board's Cancer Plan

To familiarise and continuously update yourself with Statutory, Health Board & local Cancer / Clinical Haematology policies, procedures & protocols.

To facilitate a high quality specialist service through monitoring & audit and the maintenance of other quality initiatives agreed by the Health Board.

To set, monitor and review standards of care on a regular basis, through the formation of clinical care pathways.

To ensure the active inclusion of the views of patients & carers in the monitoring and development of service provision.

To utilise information systems to aid regular audit of the clinical role and to provide an annual activity analysis and speciality report.

To identify and intervene proactively where circumstances contribute to an unsafe environment for patients and staff. To bring such instances to the attention of relevant personnel.

To provide a leadership role model, demonstrating expert knowledge and high standards of clinical practice.

To maintain accurate records of the clinical service while ensuring that confidentiality of information is adhered to.

To submit an annual report on the service to the Health Board

To organise own work and manage own caseload and practice, identifying and maintaining supportive networks for self and relevant staff members.

To ensure that the service or components of the service are covered in the absence of the post holder.

To actively participate in relevant meetings/for a, both within & outside the Health Board, to ensure an awareness of national & local guidance, directives and developments.

To identify requirements to carry forward this specialist role, in order to implement and manage the service provided and to develop the role according to patients' needs and the resources available.

To implement new initiatives where possible or required and to run a cost-effective service, demonstrating specialist knowledge and high standards of nursing care whilst working within available resources.

To participate with other team members in service planning and the service review process as appropriate

To follow Health Board procedure as required in giving information to relevant personnel regarding the notification of clinical risk incidents related to patients, staff or visitors.

To act in accordance with the Nursing and Midwifery Council Code of Professional Practice for Nurses/Midwives and Health Visitors and the Scope of Professional Practice.

To be accountable for his/her practice and to take every reasonable opportunity to sustain and improve his/her professional competence.

To adhere to Health Board policies and service guidelines & protocols.

Management and Leadership Responsibility

To contribute to the education and training of appropriate health professionals and in particular to develop nurses' skills with regard to the care of those with haematological conditions

To act as a role model to staff.

To identify the specific educational needs of individual patients & carers in relation to the care & management of Haematological conditions , and then facilitate meeting these needs.

To develop resource and teaching packs for both patients and staff.

To raise awareness of the educational needs of patients and carers, particularly in relation to public attitudes to cancer, sexuality and body image, and how these relate to political, social, economic and ethical issues.

To recognise own need for continual education & skill updating in cancer treatment and care & to take measures to meet these needs.

To maintain own professional development through annual appraisal of clinical performance and the production of a professional development plan ..

To complete mandatory training as determined by the Health Board.

Workforce Development / Education and Training

To utilise research findings in the delivery of specialist patient care and to disseminate relevant information to staff.

To identify areas of nursing practice within the speciality needing to be researched.

To participate in, support, and be aware of clinical research trails for patients with haematological malignancies, including specific protocols and treatment plans.

To contribute to and -where possible- undertake and publish nursing research.

To advise the Haematology team of the implications of any research study underway or to be established, and advise on nursing and other resource implications.

Quality

Develop and implement change relating to research and audit findings.

Assist in the development and implementation of care guidelines and protocols that are reflective of current local and national policies both within the specialist nursing team and the multidisciplinary team.

Equality and Diversity

Work within the Hywel Dda Health Board's Equality & Diversity policy.

General

To undertake relevant courses to develop role.

To provide education and practical management support to multidisciplinary teams across the primary and secondary care interface. Promoting at all times a high quality equitable standard of care.

Provision of an empathetic client centered service.

PERSON SPECIFICATION

	Essential	Desirable
Qualifications and	RGN on the practising register	Accredited chemotherapy

Based on JD HD2015/0188 APPROVED 14/01/2016

Training	Working towards Masters in haematology with equivalent experience.	course Management Course
Experience	Haematology Nursing experience to masters level Counselling skills and experience	Management Counselling Certificate
Knowledge	Up-to-date knowledge of current professional issues Knowledge of Haematological-conditions and treatments An understanding of audit, research and evidence based nursing care An understanding of resource management Knowledge of clinical governance issues	Knowledge of the principals of palliative care
Personal Qualities	Ability to embrace the following personal values and behaviours on a daily basis - <ul style="list-style-type: none"> • Dignity, Respect and Fairness • Integrity, Openness and Honesty • Caring, Kindness and Compassion Ability to demonstrate a commitment to our organisational values - <ul style="list-style-type: none"> • Working together to be the best we can be • Striving to develop and deliver excellent services • Putting people at the heart of everything we do Excellent verbal, written, interpersonal and communication skills	Welsh Speaker Developing support groups Evidence of liaising with Primary Health Care Teams and resources Knowledge of statistics and report writing Teaching experience at all levels Research course and experience Experience of clinical supervision

	<p>Clinical skills and experience of Haematological Cancers</p> <p>Patient advocacy</p> <p>Ability to conduct own projects successfully and follow them through</p> <p>Computer skills</p> <p>Evidence of clinical leadership qualities</p> <p>Ability to prioritise and organise workload</p> <p>Ability to work alone and as a member of the multi professional team</p> <p>Evidence of excellent documentation</p> <p>Ability to clinically lead and influence staff</p> <p>Ability to communicate patient information and education</p> <p>Experience in planning and delivering education sessions</p> <p>Evidence of own updating and academic education</p> <p>Knowledge of current clinical and nursing research related to cancer</p> <p>Ability to critically analyse data</p> <p>Ability to carry out audit</p> <p>Maturity/Self awareness</p> <p>Creative, lateral thinker</p> <p>Sensitivity based on knowledge</p> <p>Flexible and positive approach to work</p>	
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	Enthusiasm and self-motivation	
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GENERIC STATEMENTS

NHS CODE OF CONDUCT FOR MANAGERS

** For Managers only:

The post holder will be expected to adhere to the standards laid down in the NHS Code of Conduct for Managers and at all times act in a manner that reflects and promotes the values of the HB.

The post holder must ensure all activity and service objectives are effectively met in compliance with HBs standing orders and SFIs, scheme of delegated authority and employment legislation.

REGISTERED HEALTH PROFESSIONAL

** For Registered Health Professionals only:

All staff who are members of a regulatory body must comply with standards of professional practice/conduct. It is the postholders responsibility to ensure they are both familiar with and adhere to these requirements.

HEALTHCARE SUPPORT WORKERS

** For Healthcare Support Workers only:

All healthcare support workers should be familiar with and must comply with the Code of Conduct for Healthcare Support Workers in Wales.

COMPETENCE

The post holder is required to participate in the Hywel Dda PDR process and work towards meeting identified development needs.

The postholder is required to demonstrate on-going continuous professional development.

At no time should the postholder work outside their defined level of competence. If the postholder has concerns regarding this they should immediately discuss this with their Manager/Supervisor/Consultant. The postholder has the responsibility to inform those supervising their duties if they are not competent to perform a duty.

TEAM BRIEF

The post holder is required to actively participate in Hywel Dda Team Briefing in order to aid communication within the Health Board.

Managers and supervisors will regularly deliver the Team Brief verbally to their own staff teams by means of a Core Brief and additional departmental information.

RISK MANAGEMENT/HEALTH & SAFETY

The postholder has a responsibility to themselves and others in relation to managing risk, health and safety and will be required to work within the policies and procedures laid down by the Hywel Dda. All staff have a responsibility to access occupational health, other staff support services and/or any relevant others in times of need and advice.

Based on JD HD2015/0188 APPROVED 14/01/2016

The postholder has the responsibility for monitoring the progress on action plans in relation to risk, health and safety.

The postholder has the responsibility for the development of risk profiles and a risk register within their area of responsibility.

The postholder has the responsibility for developing systems to monitor performance against agreed performance indicators.

HARRASSMENT & BULLYING

The HB condemns all forms of harassment and bullying and is actively seeking to promote a workplace where employees are treated with dignity, respect and without bias. All staff is requested to report any form of harassment and bullying to their line manager or to any Director of the HB.

RECORDS MANAGEMENT

The postholder has the responsibility for timely and accurate record keeping and where appropriate in accordance with professional guidelines.

The postholder has the responsibility for the creation and maintenance of records in accordance with Hywel Dda policy and the data protection act.

FLEXIBILITY STATEMENT

The developing and rapidly changing nature of the organisation will require considerable flexibility from the post holder. This job description indicates the main functions and responsibilities for the post and is not intended to be a fully inclusive list and the duties and responsibilities specified in this job description are subject to change as the needs of the HB evolve. On agreement with the post holder, this job description will be amended, as necessary, in the event of future organisational and professional changes and/or personal development.

CONFIDENTIALITY

All staff may have access to confidential information about patients, staff or health service business. On no account must such information be divulged to anyone who is not authorised to receive it. Confidentiality of information must be preserved at all times whether at or away from work. Any breach of such confidentiality is considered a serious disciplinary offence, which is liable to dismissal and /or prosecution under current statutory legislation (Data Protection Act) and the HB Disciplinary Policy.

EQUAL OPPORTUNITIES

It is the aim of the Hywel Dda HB to ensure that no job applicant or employee receives less favourable treatment on grounds of gender, religion, race, colour, sexual orientation, nationality, ethnic or national origins or is placed at a disadvantage by conditions or requirements which cannot be shown to be justifiable. To this end, the HB has an Equal Opportunities Policy and it is for each employee to contribute to its success.

OUTSIDE EMPLOYMENT/OUTSIDE INTERESTS

Any other work or outside interests must not conflict with the duties and responsibilities of your attendance for work as an employee of the HB.

ENVIRONMENTAL

The Hywel Dda Health Board is committed to its environmental responsibilities. The Board recognizes that its activities, including energy consumption, waste generation, transportation emissions, water use and resource consumption, have a significant impact on the environment. As an integral part of its commitment to ensure high quality patient care, all staff have a responsibility to adhere to environmental policy and procedure at both an organisational level and within their own area of work to ensure legal compliance. Staff will do their utmost to minimize the environmental impacts of Health Board activities and services, and seek to continually improve operations to minimize their environmental effects. Staff should take note of relevant communications and attend mandatory training when required.

SMOKE FREE POLICY

All Health Board sites and premises and grounds are designated as smoke free areas. This policy applies to all staff, contractors/service providers, patients*, visitors and the public.

*Those patients staying in residential mental health units will be exempt under the Smoke-Free Premises (etc) Wales Regulations 2007.

SAFEGUARDING ADULTS AND CHILDREN

Every employee of the Health Board, whatever their job, role, profession, status or place of work, paid or voluntary, has a responsibility for Safeguarding both adults and children. Staff must:

- Understand the nature of abuse and how children and adults might be at risk of harm and neglect.
- Understand their own safeguarding responsibilities and what actions they may need to take.
- Know where they can access local policies and procedures in relation to Safeguarding Children and Safeguarding Adults.
- Report allegations or suspicions of abuse to their line manager, including suspicions about a colleague or manager, irrespective of their status, profession or authority. This includes whistle-blowing
- Know how to make a Safeguarding referral to Social Services and/or the Police for both adults and children to report allegations or if they have concerns.
- Know what services, advice and support are available locally to vulnerable children and adults and how to access help needed.

INFECTION CONTROL

"The document Commitment to Purpose: Eliminating Preventable Healthcare Associated Infection: A Framework of actions for healthcare organisations in Wales stipulates that all staff must understand their responsibility and accountability for Infection Prevention & Control and the Health Board must be assured of this on an ongoing basis".

IP&C is the personal and individual responsibility of all Health Board staff. All staff have a responsibility to protect and safeguard patients, service users, visitors and employees against the risk of acquiring healthcare associated infections.

This responsibility includes being aware of the content of and consistently observing, Health Board Infection Prevention & Control Policies and procedures; and best practice guidance in order to maintain high standards of Infection Prevention & control.

GENERAL

The postholder needs to ensure they are familiar with their terms and conditions of service.