# Job Description: Homeless hospital discharge nurse – Band 7

***This template gives guidance and recommendations for essential points that could be included in a job description for a Band 7 Nurse in a Pathway team.***

## Job purpose

*Homeless hospital discharge teams*

The homeless hospital discharge service provides enhanced inpatient care, and ensures safe, appropriate and sustainable hospital discharges that meet the needs of patients currently experiencing homelessness.

In detail the service aims to:

* + effectively engage the patient in all relevant services / support,
  + maximise the benefit of the attendance / admission for the patient from a health and social care perspective,
  + link the patient into all necessary health and social care and support pending discharge,
  + advocate for the patient to receive assessment, treatment or services when this is required
  + safeguard patients effectively
  + ensure a safe and effective discharge to accommodation (where this is possible)
  + stop the revolving door

The service works with a variety of hospital, statutory and voluntary partners to achieve these objectives.

The service also aims to bring a wider influence to hospital, housing and social care system to proactively identify and better respond to the needs of currently homeless and otherwise disenfranchised people.

*Nurse role*

The Band 7 nurse is an operational manager and lead for the service, and also contributes senior clinical knowledge and expertise. The nurse is also a role model for inclusion health practice in the organisation.

As a key part of a multi-disciplinary intervention, the nurse assists patients identified within the organisation as experiencing homelessness to improve and maintain their health, by identifying and managing (or influencing the system to manage) unmet health, housing and social care needs. Unmet needs include e.g. physical health care problems, mental health problems, addictions problems, communication difficulties, disabilities, mental capacity issues, safeguarding, missed primary care screening or interventions that are not being met due to any eligibility and legal complexities. Patients often present with tri-morbidity (the co-concurrence of physical health, mental health and addictions problems) and other multiple complex needs, and may have non-engagement issues and/or challenging behaviour patterns.

On a day to day basis the nurse is responsible for the clinical governance of the service, and identifies areas for quality improvement and ensures adverse trends are identified, reported and managed.

The nurse is a key player in delivering system change within the organisation including taking a lead on teaching around inclusion health within the organisation.

## Key responsibilities

**Clinical responsibilities**

* To contribute expert clinical skills and knowledge to the service
* To be a role model for other staff on the service, delivering inclusive practice at all times
* To triage and clinically prioritise patients on the service effectively
* To oversee the care of all patients managed by the service and review all patients on the service with respect to unmet need and the development of effective discharge plans
* To ensure all patients have the benefits of their admission maximised
* To advise other staff members on the management and effective discharge of patients as necessary
* To effectively engage patients from a variety of disenfranchised backgrounds
* To utilise strategies to manage challenging behaviour in patients as necessary
* To independently undertake effective comprehensive holistic health, housing and social care assessments for patient including independent assessments of risk
* To take time to listen to patients who may have highly distressing personal circumstances and stories to understand their needs
* To utilise strategies to improve communication with patients e.g. accessing Language Line, taking time to explain leaflets and letters etc
* To utilise strategies to work to minimise the impact of disability on patients e.g. identifying the need for a walking aid, or new wheelchair etc
* To provide subsistence support to patients as required in line with service policy
* To manage service funds to support subsistence support as required
* To develop effective discharge plans for patients and work to achieve effective discharges for all patients on the service
* To make appropriate referrals for patients as necessary
* To record work all work undertaken with patients in an accurate and timely manner in all relevant clinical databases, enabling effective integrated care, and the collection of monitoring and evaluation data and ensure other staff do the same
* To identify the need for and undertake e.g. mental capacity assessments, safeguarding referrals, challenges to NHS charging decisions within the caseload as necessary
* To clinically advocate and negotiate on behalf of clients with senior staff without generating conflict
* To convene case conferences / case reviews as necessary
* To motivate and empower patients to make changes around their health
* To deliver effective health promotion, harm reduction and suicide prevention interventions in line with ‘making every contact count’
* To proactively identify adverse trends in the population e.g. increases in deaths in the population, increases in self-discharge, poor clinical practice within the hospital in respect of the client group
* To identify clinical skill deficits within the team, and report on / manage these deficits as required
* To clinically supervise staff on the team in line with reflective practice principles

**Management responsibilities:**

* To act an operational lead for the service
* To act as a role model for inclusion health practice within the organisation
* To manage the service caseload on behalf of the service
* To line manage other staff within the service as necessary (including staff from other organisations if required)
* To lead on the development and provision of relevant teaching programmes within the organisation
* To manage student teaching as required
* To produce team resources e.g. leaflets, posters etc as required
* To undertake clinical audits as required
* To lead on the delivery of specific service targets e.g. GP registration for patients, ensuring correct contact details are registered for patients
* To lead on the monitoring and reporting of the performance of the service as required e.g. by maintaining Excel data sheets in addition to clinical notes
* To lead on the collection of service user feedback for the service
* To ensure quality clinical records and data capture are maintained on the service
* To monitor and report on the performance of the service as required
* To proactively identify adverse trends, and lead service improvements and developments as required

**Partnership responsibilities:**

* To be a senior representative for the service in a variety of contexts
* To work collaboratively with hospital, statutory and voluntary sector partners at all times in order to improve patient pathways
* To independently develop relationships with partnership organisations as required
* To support / manage partnership staff within the team as necessary
* To attend and/or attend multi-agency meetings as required and lead as necessary

**Professional responsibilities:**

* To comply with all local NHS Trust policies
* To ensure mandatory training is up to date
* To ensuring nursing registration is up to date, and revalidation requirements are met
* To proactively identify and address own learning needs in relation to specialist role

## Person Specification

**Experience**

Essential:

* extensive clinical experience in a relevant discipline
* experience of being a role model for staff
* experience of successfully line managing staff
* experience of successfully managing poor performance
* experience of motivating staff
* experience of monitoring team performance against key performance indicators
* experience of successfully managing a fast-moving clinical case load that involves triage and prisonisation
* experience of working successfully with patients with non-engagement issues
* experience of working successfully with challenging behaviour
* extensive experience of managing patients with communication barriers and disabilities
* extensive experience of managing patients with mental capacity and/or safeguarding issues
* extensive experience of working daily with multiple patients with highly distressing personal circumstances and stories
* experience of maintaining boundaries
* experience of delivering harm reduction interventions
* experience of suicide prevention practice
* experience of successfully clinically advocating for patients with senior staff in a wide variety of situations without generating conflict
* experience of multidisciplinary working
* experience of delivering clinical audits
* experience of delivering successful partnership working
* experience of designing and deliver teaching programmes
* experience of running student nurse programmes

Desirable:

* extensive clinical experience in inclusion health
* experience of regularly using motivational interviewing techniques
* experience of managing and directing the work of a multidisciplinary team
* experience of managing staff from other organisations
* experience of independently producing reports on team activity and performance
* experience of setting up, and maintaining relationships with a wide variety of relevant community partners
* experience of undertaking service user feedback exercise
* experience of delivering service development initiatives independently

**Knowledge**

Essential:

* Nursing qualification
* At least degree level education or equivalent
* Management training
* Post basic qualification in a relevant clinical discipline
* NMC approved mentorship course
* good generalist clinical knowledge spanning physical health and mental health
* good clinical knowledge in inclusion health
* good knowledge of the social determinants of heath and how this directly effects patients
* good knowledge of how to work successfully with patients with communication barriers e.g. language, literacy, cognition, behaviour
* good knowledge of how to work successfully with patients with disabilities e.g. physical disabilities, learning disabilities etc
* cultural competence training
* good knowledge of how to assess mental capacity and cognition effectively
* good knowledge of how to apply safeguarding legislation effectively
* good knowledge around addictions and sequelae of addictions
* good knowledge around harm reduction
* good knowledge around suicide prevention
* knowledge around public health interventions
* good knowledge around rights to healthcare and NHS charging
* knowledge around quality improvement in an NHS context
* good knowledge regarding the support options available for people experiencing homelessness
* good knowledge around data sharing legislation
* knowledge and understanding of the clinical governance responsibilities of a service operational lead

Desirable:

* specialist knowledge regarding the effective management of patients with personality disorder / complex trauma
* Leadership training
* expert knowledge around rights to healthcare and NHS charging
* knowledge regarding rights to housing, housing options and local authority processes
* knowledge regarding the support options available for people experiencing homelessness in the local community
* knowledge on immigration status and its impact on welfare rights
* knowledge about the management of change

**Skills and abilities**

Essential:

* warm, friendly manner
* excellent oral and written communication skills
* excellent general organisational skills
* team worker
* confident to problem solve and make independent decisions
* ability to lead the service and be role model for staff
* ability to take clinical governance responsibility for the service
* ability to manage the service caseload, triaging and prioritising effectively
* ability to manage personal stress levels effectively
* ability to manage conflict effectively
* ability to work in a rapidly changing environment, highly adaptable
* ability to maintain a positive attitude in difficult circumstances
* ability to independently undertake an effective comprehensive holistic health, housing and social care assessment for a patient including the independent assessment of clinical risk
* ability to work daily with multiple patients with highly distressing personal circumstances and stories
* ability to maintain boundaries with patients
* ability to interpret and manage highly complex information
* ability to set up and develop relationships with hospital, statutory and voluntary sector partners
* ability to clinical advocate and negotiate on behalf of a client with senior staff without generating conflict
* ability to effectively use motivational interviewing techniques with clients
* demonstrated ability to design teaching programmes and large teach groups of people effectively
* ability to identify the need for and independently undertake clinical audits
* ability to produce reports on team performance
* ability to undertake service user feedback exercises
* ability to use a wide variety of resources Microsoft programmes to develop team resources as necessary – e.g. leaflets, posters, Powerpoint presentations
* ability to proactively identify areas for quality improvement
* self-motivated
* ability to identify and address own learning needs, and to reflect on own practice

Desirable

* expert motivational interviewing skills
* demonstrated ability to work successfully with patients with personality disorder and complex trauma
* ability to culture change / systems leadership
* ability to deliver service development initiatives independently

**Values**

* Belief in the structural causes of homelessness
* Commitment to improving the health of homeless and other multiply excluded patients
* Commitment to addressing social exclusion
* Commitment to promoting independence and patient choice
* Understanding of and commitment to equal opportunities in service delivery
* Commitment to evidence-based practice
* Committed to continuing professional development