

# JOB DESCRIPTION / COMPETENCY PROFILE

<b>Job Title</b>	Community Mental Health Nurse (Developmental Role)
<b>Payband/Grade</b>	Band 5 with developmental plan to Band 6 after 24 months (subject to evidence of competency)
<b>Directorate</b>	Working Age Adults
<b>Job Description Reference</b>	WAA-5/6-COM

**My job makes better lives by** providing an accessible, non-stigmatising, localised service that contributes to the continuing care and rehabilitation of people within the locality with established mental health illness.

**Job Overview (Band 5)** to be a core member of the multi-disciplinary team, participating in the provision of on-going assessments, care planning, treatment and support of people with serious and enduring mental health problems and people in crisis to promote health, independence and recovery.

<b>NHS Competencies</b>	<b>B5</b>	<b>B6</b>
Communication	2	2
Personal and People Development	1	2
Health, Safety and Security	1	1
Service Improvement	1	1
Quality	1	2
Equality and Diversity	1	2
IT Skills	2	2
<b>Statutory Requirements</b>		
NMC Registration as RN3 or RNMH		

<b>Personal Competencies</b>	<b>B5</b>	<b>B6</b>
Interpersonal Sensitivity	2	2
Courage	2	2
Teamworking	2	2

<b>Values</b>
Treat People Well
Create Respectful Places
<u>Involve not Ignore</u>
<u>Open, Inclusive and Accountable</u>

## Qualifications required

**Band 6** - Mentor Preparation or Teaching and Assessing in Clinical Practice

## Experience required

**Band 5** – 1 years' experience working with people with mental health (can be pre-qualification)

**Band 6** – 2 year's post qualification experience of working in the community with people with severe and enduring mental health illness.

**Suitable for someone who** is passionate about providing a high quality holistic approach to the care and support provided to clients in the community who have been identified as in need of community nurse support to enable them to exercise choice over their own lives.

[For a better life](#)

## Key Responsibilities

### Band 5

- To discharge professional responsibilities under the Mental Health Act (1983) and revised subsequent act Mental Capacity Act (2005) and the NMC Professional Code of Conduct
- Be accountable and responsible for a defined caseload that reflects the priorities of the local population and carry responsibility for the assessment of care needs; under the supervision of the CPN Clinical Lead.
- To develop, implement and evaluate evidence based programmes of care; set standards of care and liaise with other agencies, particularly in relation to people discharged under the Care Programme Approach.
- Take on the role of care co-ordinator/care manager to service users subject to the Care Programme Approach, as in line with Local and National Policy.
- Participate in the multi-disciplinary assessment of individuals with mental health problems living in the community, by providing a community mental health nursing perspective and expertise
- Ensure that a risk assessment is completed for service users, especially if there is a history of, or a potential for risk.
- To adhere to professional confidentiality standards
- To be aware of the potential for vulnerability to abuse amongst the service users/families, and use of the local policy to inform appropriate personnel in line with safeguarding vulnerable adults and children and SABP Policies
- Ensure that a carer's assessment is offered to carers of service users, as in line with Standard 6 of the National Service Framework.
- Help develop and maintain effective joint working arrangements with colleagues in the community mental health services, residential services, primary health care, social services and voluntary services, thus facilitating the co-ordination and comprehensiveness of provision.
- Utilise the full range of mental health nursing skills to participate in the assessment, care and support of service users.
- Use specialised knowledge, experience and skills in direct clinical work and act as a resource for the team and other agencies. This may include work in rehabilitation, social interventions, development of social networks and accessing other services/resources, mental health promotion, counselling and intercultural therapy, encouraging service user participation at all times.
- Participate in the provision of community mental health nursing advice and consultation to colleagues, community groups and organisations.
- Promote the recovery model to the people who use the service and their carers
- To act in a manner to respect the customs, individuality, values, sexuality and spiritual beliefs, actively supporting the individual to fulfil these.
- Ensure detailed and appropriate records are maintained to demonstrate that contact with people who use services, and their carers', is meaningful and effective.

## **Key Responsibilities**

### **Band 6 (in addition to those responsibilities at Band 5)**

- To lead the clinical management of a care package to individuals who use our services.
- To co-ordinate and monitor the delivery of person centred healthcare to a designated group of people who use our services, using complex clinical decision making where appropriate.
- To deliver individual and group therapy utilising CBT skills.
- To work as a member of the MDT in assessing and planning care and responding to changes in people who use our services health.
- To ensure provision of the necessary physical care to help people who use our services i.e.: personal hygiene, diet and fluid intake, clothing and laundry, personal environment, manual handling, elimination, maintaining rest and sleep and activity, physical observations.
- To ensure provision of therapeutic activities, emotional support and stability to clients to ensure effective engagement whilst maintaining professional boundaries.
- To create, develop and maintain professional supportive relationships with all members of staff with other professionals and agencies to enhance recovery.
- To ensure prescribed physical observations are undertaken as follows: blood pressure, temperature, pulse, respirations, blood sugars, urinalysis, weight and height and act upon exceptions appropriately
- Participate in the education of pre and post registration nursing, social work, psychology, medical and occupational therapy students.
- Supervise junior nurses and other non qualified staff in the service/team.
- To lead the development, maintenance and monitoring of service standards, collect and collate data/ information effectively for the purpose of audit, research and service performance.
- To promote shared decision making with service user/relatives/carers, as appropriate, involvement in all aspects of their care.
- To ensure compliance by self and staff of the Trust's Standing Orders, Standing Financial Instructions, Policies, Procedures and Guidelines, including taking all reasonable steps to manage and promote a healthy working and diverse working environment.
- To participate in clinical governance activities including monitoring standards set within the service.
- To participate in the recruitment and selection of staff

## Development Expectations: Overview.

The person will be allocated a local mentor to support them in the first 6 months. The following is an outline of the development expectations over time for the post. However, it is not exhaustive.

The clinical and managerial supervision process within the Community Nurse teams will monitor and tailor the process to each individual and will monitor progress after 6 months.

It is expected that by the end of the 2 year development period the person will be able to demonstrate meeting the required competencies at a Band 6 level as outlined in the above job description and that the person has taken direct responsibility for that development or communicated difficulties in doing so via the support systems provided.

Time scale	Includes	By the end of the period the nurse will	Details
0-3	Trust induction	Have attended the required trust induction.	Start M and S training
		Achieved access to the required IT	Email, Systm 1, ESR
	Team induction	Become familiar with the trust web and where to find essential information / policies	ESR matrix /team matrix
		Attended or planned for all M and S training requirements.	
		Completed site inductions on all relevant sites	Lone working Operational practice in the sites Sickness, Annual leave
		Developed a specific orientation plan with team members to include visit's to all partner resources	Local resource's, day centres, who what where.
		Made a number of home visits with various staff	Wide MDT range

	CPN induction	<p>Have completed a number of actual initial assessments with other team members</p> <p>Made a number of home visits with nurses in the team.</p> <p>Established a clear supervision and clinical support network</p> <p>Discuss the various areas of specialist knowledge within the mental health nursing field and know which team members can support with this.</p> <p>Specifically become familiar with the CPA process in mental health and have become familiar with people on CPAs</p> <p>Identified any educational needs evident at this stage and planned learning and development or discussed with CPN Clinical Lead</p> <p>Manage caseload of approx. 10 non complex cases, under supervision of CPN Clinical Lead</p>	<p>Nursing practice</p> <p>Support networks and use of resources around us</p> <p>CPA</p> <p>Dementia. Epilepsy, depot meds, diabetes, blood taking, ADHD, Aspergers syndrome, generic care pathways</p> <p>Care coordination</p>
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3-6	First appraisal	<p>Presented initial assessments at allocation.</p> <p>Develop own base line for first appraisal.</p> <p>Start to build a case load of more complex case i.e. cases including social care needs, CTO etc.</p>	<p>Presentation</p> <p>Organisation</p> <p>Time management</p> <p>Care coordination</p>
6- 9	Band 5 case load Generic	<p>Build caseload as deemed appropriate, approximately 15 mixed complexity cases</p> <p>Full responsibility for CPN assessments, care plan, interventions. Show an awareness of risk issues and need to seek counsel from leader or clinical supervisor.</p> <p>Seek placement on Mentorship training course</p>	<p>Must do CPA and full risk assessment process.</p> <p>Course confirmation</p>
9-12	Generic case load 1 <sup>st</sup> appraisal review	<p>Ongoing case load of approximately 20 mixed complexity cases</p> <p>Start to recognise the other MDT roles that team member's hold and other projects they are involved in.</p>	Care coordination
12 – 18	Generic case load and specialist case load	<p>Hold full caseload of between 25-30 cases of mixed complexity, including some highly complex cases</p> <p>Hold an additional team role i.e infection control depot clinic, clozaril clinic etc.</p>	Care coordination

18 – 24	2 <sup>nd</sup> appraisal	<p>Hold full CPN post with a team role and contribute to the national nursing agenda.</p> <p>Complete mentorship training</p>	Certificate
24 months		<p>Specialist interest.</p> <p>Fully competent generic CPN.</p> <p>CPN lead on an area</p> <p>Team role</p> <p>Directorate role if applicable</p>	