# **POSITION DESCRIPTION**



This Position Description is a guide and will vary from time to time and between services and/or units to meet changing service needs

The Canterbury District Health Board is committed to the principles of the Treaty of Waitangi and the overarching objectives of the New Zealand health and disability strategies.

## **Organisational Vision**

The CDHB's vision is to improve the health and well being of the people living in Canterbury.

## **Organisational Values**

- Care & respect for others
- Integrity in all we do
- Responsibility for outcomes

**POSITION TITLE:** 

Clinical Assessor, Older Persons Health and Rehabilitation Service Community Service Team

**REPORTS TO (Title):** 

PROFESSIONALLY ACCOUNTABLE:

Clinical Manager, Older Person's Health and Rehabilitation Service Community Service Team. To Professional Leader or Director of Nursing Older Person's Health and Rehabilitation Service

**REPORTS ON A DAILY BASIS TO:** Clinical Manager as above.

## PRINCIPAL OBJECTIVES

To complete a comprehensive clinical (geriatric) assessment of clients' medical, rehabilitation and support needs by using the InterRAI Home Care or Contact Assessment in order to identify issues to be addressed that will promote a person's self determination within their current environment or the environment they wish to be in.

To prioritise these needs in conjunction with the client and the Community Service Team, focussing on a restorative approach by using CDHB Post Assessment Guidelines to develop a Care Plan for the client.

To facilitate referrals to services that will assist in restoring function and eliminating or minimizing the need for ongoing supports i.e. falls prevention programs. Planning and ensuring co-ordination of a package of services to meet their ongoing needs and reviewing this package to ensure that the services continue to meet the needs of the client.

## **FUNCTIONAL RELATIONSHIPS:**

## **INTERNALLY:**

- Interdisciplinary team members
- Professional colleagues and team members

#### **EXTERNALLY:**

- 1 Clients/family/whanau/carers
- 2 Service providers
- 3 Community and service agencies
- 4 Referrers
- 5 General Practitioners and Primary Health Organisations
- 6 Informal providers

## **KEY PERFORMANCE OBJECTIVES:**

Task Expected Result

## To complete InterRAI assessments to OPH&R level of competency

- Clients will be assessed via a comprehensive clinical geriatric assessment.
- Facilitate an assessment/ reassessment/review using the Contact Assessment or full InterRAI Home Care Instrument as required.
- Client/family/whanau will be provided information about the interRAI assessment, care planning and service co-ordination process.
- With the agreement of the client, consult with family/whanau/ caregivers, service providers, general practitioners etc in relation to this assessment.
- Utilise professional skills and knowledge to develop care plan that is focussed on a restorative approach and that eliminates or minimizes the need for ongoing support and promotes quality of life for the client.
- Complete documentation of the assessment process and the outcomes. Liaise as required with other members of the Service Team to develop a Care Plan and a Service Plan that reflects the client's prioritised needs and goals and encourages independence, self-determination and the person's participation to the level of their capacity. Formulate the client's care plan
- Refer on to specialist services as identified by the Service Team and according to Service processes.

Task Expe	cted	resi	ult

## Complete, sign off and co-ordinate Support Plan

- Undertake co-ordination of services in conjunction with administrative staff.
- Identify service delivery options in the identified timeframes.
- Ensure clients understand their options regarding choice of available service providers or reasons why choice is not available.
- The costs of the plan will not exceed the levels set by Planning and Funding (CDHB). If the costs are in excess of the set level, the process for approval will be followed.
- Demonstrate awareness of safe practice, i.e. for client, self and others.
- Knowledge and application of legislation governing obtaining, release, and storage of client information.
- Undertake reviews of Packages of Care as identified via the review process.
- Maintain and disseminate resource information on and up date knowledge of a broad range of services available in the community, means of access to, eligibility for and understand the cost of these resources.

## Task

# To undertake duties associated with the Assessor's professional scope of practice and competency level.

Expected result

- Clients may access relevant interventions/service as required without referral to another professional of the same discipline; e.g. an OT may undertake any relevant OT duties that arise during an assessment visit or a registered nurse is expected to provide appropriate level of nursing input. A Social Worker may help people cope with a crisis, and support them with coping strategies.
- To work within current scope of practice and seek appropriate direction and delegation as required.

# Task Expected Results

## **Complete statistical information requirements**

Complete appointments form in a timely and precise manner and forward to the team administrator.

Task

Task

# Take part in rostered duties relating to the Single Point of Entry referral system.

**Expected Results** 

Be an effective member of the Adult Community Referral Centre duty and triage system, as required.

**Expected Results** 

# Take part in rostered duties relating to assessment in a ward based setting as required

Be effective in assessment of hospital-based clients and liaise with IDT and community staff

Task **Expected Results** 

## **Culturally Safe Practice**

- Demonstrate a commitment to bi-cultural practice
- Evidence of a service which takes into account the socio-cultural values of clients/family /whanau

#### **Tasks**

# Participate in professional development, training, education, appraisal

#### **Expected Results**

- To have a comprehensive understanding and clinical knowledge of the ageing process, care of the elderly and the issues associated with ageing.
- To maintain currency in professional practice within the speciality of gerontology by undertaking relevant professional development that is aligned to the priorities of the Older Person's Service.
- Maintain professional accountability to the appropriate professional leader or Director of Nursing.
- Must maintain the requirements of the appropriate registration authority to hold an annual practising certificate or the requirements to maintain professional competency of the appropriate professional body for those health professionals not under the HPCA.
- Contribute to the professional development of others (including social work students)
- To maintain the competency requirements of the appropriate registration authority or professional body whichever is relevant.
- To meet CDHB's requirements for the appropriate professional group e.g. any credentialing requirements, such as the competency based performance review for nursing, any compulsory training requirements of the service or professional group.
- Undertake professional supervision as per the appropriate professional body's supervision standards
- Must undertake annual performance review process.
- Under take quality improvement and develop own professional expertise in the speciality of gerontology.

**Tasks** 

Participate in developing and maintaining communication with key agencies, service providers and client care groups.

## **Expected Results**

- To give accurate and prompt information while representing the service which promotes the goals and objectives of the service.
- Network with GP Practices and other relevant service providers

## **HEALTH & SAFETY:**

- Observe all Canterbury DHB safe work procedures and instructions
- Ensure your own safety and that of others
- Report any hazards or potential hazard immediately
- Use all protective equipment and wear protective clothing provided
- Make unsafe work situations safe or, if they cannot, inform your supervisor or manager
- Co-operate with the monitoring of workplace hazards and employees health
- Ensure that all accidents or incidents are promptly reported to your manager
- Report early any pain or discomfort
- Take an active role in the Canterbury DHB's rehabilitation plan, to ensure an early and durable return to work
- Seek advice from your manager if you are unsure of any work practice

## QUALITY:

Every staff member within CDHB is responsible for ensuring a quality service is provided in their area of expertise. All staff are to be involved in quality activities and should identify areas of improvement. All staff are to be familiar with and apply the appropriate organisational and divisional policies and procedures.

## **QUALIFICATIONS & EXPERIENCE:**

#### Essential:

- Must have a professional degree / qualification or recognised equivalent New Zealand qualification, or be a Registered Health Practitioner (under the HPCA), or overseas equivalent (Social work, Occupational Therapy, Registered Nurse, or related discipline).
- Must hold and maintain a current annual practising certificate or equivalent as required by the relevant Registration Authority or Professional Body
- Those with a social work qualification be Either registered under the Social Workers Registration Act (2003), or hold a current ANZASW or NZSWRB Certificate of Competency and will become registered within six months, or will complete an ANZASW or NZSWRB Certificate of Competency within six to twelve months and become registered within twelve months.
- Have completed InterRAI Assessment training (or be prepared to complete) to OPHS level
  of competency which is maintained and up to date
- Have the clinical knowledge, judgement and expertise to undertake comprehensive clinical health assessment and to formulate the client's care plan.
- Clinical experience in the speciality area of gerontology.
- Current full New Zealand driver's licence and the ability to drive manual and automatic vehicles
- An understanding and working knowledge of ageing process

#### Desirable:

- Knowledge and understanding of health and/or Mental health changes and the impact on the elderly.
- Ability to work with clients and their family/whanau/carers.
- Ability to effectively organise, update and disseminate information.
- Demonstrate effective management of the allocated workload and required administrative and reporting procedures.
- Positive approach to, and ability to identify strategies for problem solving.
- Received formal training in supervision

## PERSONAL ATTRIBUTES:

## **ESSENTIAL**

## **Key Behaviours:**

- Ability to "work together" in a truthful and helpful manner.
- Ability to "work smarter" by being innovative and proactive.
- Accepts responsibility for actions.
- Knowledge and understanding of health and/or Mental health changes and the impact on the elderly.
- Ability to work with clients and their family/whanau/carers.
- Ability to express self clearly verbal and written.
- Ability to effectively organise, update and disseminate information.
- Able to prioritise and work effectively under pressure.
- Demonstrate effective management of the allocated workload and required administrative and reporting procedures.
- Positive approach to and identified strategies for problem solving.
- Commitment to ongoing professional development

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a copy of this Position Description, which accurately re employed.	flects the role for which I have been
Signature:	_
Date:	_

The intent of this position description is to provide a representative summary of the major duties and responsibilities performed by staff in this job classification. Employees may be requested to perform job-related tasks other than those specified.