


Community Health Nurse – 04 – Nurse in Charge		Job Description				
	Status:	Supervisor:	Wages:			
	Part-Time	Director of Nursing				
	Department:	Location:				
	Revision Date:	Effective Date:				
	February 9, 2017					
<b>Employee's statement:</b> I have read and understood this job description and I acknowledge that I am competent and capable undertaking the position it describes.						
<hr/> <table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">Employee name (printed)</td> <td style="width: 33%; text-align: center;">Employee signature</td> <td style="width: 33%; text-align: center;">Date</td> </tr> </table>				Employee name (printed)	Employee signature	Date
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<b>Supervisor's statement:</b> This work description accurately describes the activities and demands of the position.						
<hr/> <table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">Supervisor name (printed):</td> <td style="width: 33%; text-align: center;">Supervisor signature:</td> <td style="width: 33%; text-align: center;">Date</td> </tr> </table>				Supervisor name (printed):	Supervisor signature:	Date
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## Position Summary

This position is responsible for the leadership of a comprehensive range of core nursing functions and services in First Nations communities. This includes a broad set of program areas including community/public health, primary care and home care, through promotion and maintenance of the health of individuals, families groups, communities and populations. Successful candidates value the principles of primary health care and focus on promoting health, preventing disease and injury, protecting population health as well as when required a focus on curative, urgent and emergent care, rehabilitation and supportive or palliative care.

The Nurse in Charge provides professional guidance and assistance to community leaders and other community health care team members in acquiring the knowledge and skills necessary for First Nations to assume control and manage their community health programs. The Nurse in Charge plays a key role in fostering and developing an interdisciplinary patient centered model of care. In this model the Nurse in Charge ensures strong coordination between a variety of health workers so that clients receive the services they need from the appropriate service provider at the appropriate time.

## Key Activities

1. Manages, plans, implements, delivers and evaluates community/ public health, primary care and home care programs and services for a nursing station in a First Nations community and ensures nursing care and practice standards are being implemented in the delivery of these programs and services.
2. Provides professional support, leadership, mentoring, advice on policy, practice and programs and direct supervision to Keewaytinook Okimakanak employed nurses.
3. Works in partnership with the community Health Director to provide professional support, mentoring, advice on policy, practice, and programs to health care and administrative staff working in facility based or community based health services in a First Nations community. This will include seeking to build a relationship with the Health Director that allows the Nurse in Charge to assign some duties and participate in the assessment of the quality of work of community employed health workers.
4. Provides professional support, advice, assistance and consultation on all nursing matters to First Nation leadership and communities to build capacity.
5. Applies and utilizes key nursing knowledge and critical thinking to choose options and to plan, implement and evaluate programs and interventions to address health issues, taking into account relevant evidence, legislation, regulations and policies.
6. Collects, assesses, analyzes and applies information from various data sources to make evidence-informed decisions for nursing services, assessment of health needs, program planning, and priority setting for the community with individuals, families, groups and community leadership and interprets information for professional, non professional and community audiences
7. Uses evidence and research to influence health policies, programs and practice and synthesize nursing and health knowledge from a broad range of theories, models and frameworks to address the health status of populations, inequities in health, determinants of health, strategies for health promotion, disease and injury prevention, health protection, case management, as well as the factors that influence the delivery and use of nursing and health services
8. Advocates for public policy and services that promote, and protect the health and well being of individuals, families, groups and communities.
9. Involves individuals, families, groups and communities as active partners to take action to address health inequities and foster a self management care approach for chronic conditions
10. Advocates for and uses culturally relevant and appropriate approaches when building relationships and providing nursing services
11. Builds capacity, improves performance and enhances the quality of the working environment by sharing knowledge, expertise and experience with colleagues, students, First Nations and other members of the health team
12. Leads and participates in collaborative, interdisciplinary and intersectoral partnerships to enhance the health of individuals, families groups and populations in a First Nations community.
13. Advocates for and uses culturally relevant and appropriate approaches when building relationships and providing nursing services. These approaches take into account the historical context that affects First Nations health including government policies, residential schools, treaties, intergenerational trauma, and the findings of the Truth and Reconciliation Commission.

## Skill

### Intellectual Skill

The work requires knowledge of:

1. Nursing management concepts, theories and principles and practices in order to manage a health facility and supervise and evaluate the nursing practice of one or more Keewaytinook Okimakanak employed community health nurses.
2. Facility organization, reporting structures, documentation, record keeping, operations and the roles and responsibilities of employees within the health service is required to manage the day to day operations of the facility.
3. Human resources management to determine human resources requirements and to manage professional nursing, non-professional and administrative staff in a community health setting.
4. Evidence-based clinical nursing practice, including, as required, current concepts of primary care nursing, for the delivery of treatment services including clinical treatment practices, techniques of intervention, disease symptoms and identification, trauma management requiring knowledge and skill in observing, assessing and diagnosing illnesses and injuries.
5. Health status of populations, inequities in health, the determinants of health and illness, principals of primary health care, strategies for health promotion, disease and injury prevention, health protection, curative, urgent and emergent care, rehabilitation and supportive or palliative care.
6. Concepts, principles practices and theories relating to community/public health and home care nursing to plan, implement and evaluate program and services for the clients.
7. Relevant sources of information and data, and knowledge of interpreting and analyzing the data, for professional, non professional and community audiences as well, to make evidence informed decisions on program and client service planning, development and evaluation
8. Principles of epidemiology, case management and clinical practice guidelines as relevant for domain of practice
9. First Nation culturally - relevant and appropriate approaches to address health needs that recognise the history and traditional perspectives of First Nations that has impacted health and well being
10. First Nation governance structures and organizations (Chief and Council, Tribal Councils, and other levels) in order to assist in communications and understanding on how decisions are made and assist clients in accessing services.
11. Provincial legislation relevant to the delivery of health care to ensure that legal requirements are being met
12. An understanding of the scope of practice of each relevant provincial regulatory body
13. Relevant sections and reporting requirements of the following in order to ensure compliance and client/safety and protection: Provincial child and adult welfare legislation; protection and mental health legislation; the Health Protection and Promotion Act; controlled substances legislation; privacy legislation
14. Relevant sections of provincial and federal legislation that affect storage, retention, and handling of confidential medical information. This knowledge also ensures that legal

- requirements are being met in addition to ensuring client confidentiality
15. Theories, principles, procedures and policies for maintaining and using diagnostics, sterilization, infection control and medical equipment to maintain client safety
  16. Federal legislation pertaining to the transportation and disposal of biomedical and hazardous wastes. This knowledge ensures compliance with environmental safety standards.
  17. Communication strategies when conducting health information sessions to individual clients for the purpose of explaining complicated treatment options, and/or planning for complex medical conditions with a need to overcome language differences and cultural factors and explain complicated medical health information as simply and clearly as possible while respecting the community's values and sensitivities

### **Physical Skill**

1. Acute auditory, visual, and sensory skills are required when conducting client ie individual family and/or community health assessments during the course of service provision and care. In urgent or emergency situations, life-saving techniques must be performed with precision and speed using all of the senses.
2. Equilibrium and coordination are required when positioning clients in readiness for medical transportation in emergency situations and in the provision of care in various moving modes of transport when travelling with client over land, air and water.
3. Manual dexterity is required to ensure precision and accuracy when performing clinical skills such as immunization, prepare and administer precise doses of medications, suturing, and venipunctures, hypodermoclysis, and wound care. Proficiency and speed are important factors in an emergency situation.
4. Physical dexterity, visual acuity, hearing accuracy, and hand-eye coordination are required to use medical instruments such as otoscopes, ophthalmoscope, sphygmomanometers, audiometers, various types of blood glucose meters, wound care devices such as doplers, foot care equipment, application of splints, slings and other supportive devices, in an expeditious and safe manner. This includes the dexterity to maintain and calibrate instruments.

### **Effort**

#### **Intellectual Effort**

Intellectual Effort is required to:

1. Develop, implement, coordinate, and evaluate comprehensive range of core nursing functions and services in a First Nation community, in program areas of community/ public health, primary care and home care.
2. Manage and administer the work of the facility and assigned financial and human resources.
3. Assess nursing competencies and practices as part of the continuous quality improvement program, decide when intervention is necessary and recommend learning opportunities and remedial action.
4. Identify and anticipate emerging issues, changing priorities and practices to address problems and have the ability to shift from a system-wide community approach (macro)

- to an urgent, direct-care individual approach (micro)
5. Identify and inform regional management of potential political, media, health and safety issues affecting delivery of the community's health services and develop recommendations for action.
  6. Respond decisively and quickly to emerging opportunities or risks by observing, monitoring and processing information as well as changing health status of clients
  7. Integrate best and promising practices, new legislation, regulations, and policies into practice to ensure safe and appropriate care is provided to the client in a culturally relevant manner.
  8. Coach, challenge and provide opportunity for capacity building with non regulated health workers.
  9. Inspire a commitment to excellence in care, communication and relationships with the health team, community leadership and First Nation employers
  10. Cultivate effective relationships and network with other departments, clients, regional employees and other levels of government departments
  11. Incorporate a variety of diverse practices that include traditional and/or alternative health care practices in conjunction with western, and mainstream health care practices where appropriate
  12. Translate complex medical terminologies and health information into language and concepts that can be easily understood and applicable for the target population when teaching health information and explaining care plans.
  13. Analyze and research information on best practice for new programs and implement and adapt them to ensure they are culturally appropriate for the client population.

### **Physical Effort**

Physical effort is required:

1. To lift, carry and set up presentation and teaching/learning materials for health education and promotion activities
2. To maneuver and lift clients (up to 100 kilograms) with varying degrees of consciousness, mobility, size, and weight, for examination, service such as bed baths or whirlpool baths or medivac. To lift infants and small children (weighing up to 17 kilograms) and occasionally assist with lifting or moving of elderly or debilitated clients. Lifting is for short time periods and potentially could be required 5 – 10 times per day.
3. To kneel or bend daily when examining and caring for clients in the health facility, home environment, or any other location. The duration depends on the medical circumstances and condition of the client but could range from two minutes to two hours.
4. When lifting medical supplies into vehicles and unloading and putting them into storage at health facilities. This activity may occur monthly and the average weights of these medical supplies are about 20-kilograms. This activity could last from a few minutes to one hour depending on the amount of supplies and the type of transportation needed.
5. When doing home visits and driving or walking in all types of weather and terrain to the client's home while carrying a medical bag with supplies and equipment. The medical bag is carried for a short period of time and may weigh up to 15 kilograms. This is a daily activity of approximately one hour in duration; however, frequency and distance may vary according to location.
6. During emergency situations when sitting, standing or running for moderate periods of time while telephoning, taking notes, and setting up equipment.

7. When administering CPR (cardio pulmonary resuscitation). CPR, once started, must be continued for the duration of the emergency which could last from fifteen minutes to an hour or more.

## **Responsibility**

### **Human Resources**

1. Manages the health facility team (including Keewaytinook Okimakanak-employed nurses and other Keewaytinook Okimakanak employed staff) engaged in the delivery of integrated community health programs. Assessment of community health needs, coordinates, schedules and assigns work, authorizes leave and set priorities, monitors the work; manages and evaluates performance and initiates or takes corrective action, initiate requests for staffing; resolves staff relations issues at the local level and recommends corrective action, advises on professional development; recommends training, establishes and promotes a safe and healthy work environment, informs staff of health requirements at the worksite.
2. Establishes and promotes a safe and healthy work environment and informs community health nurses and other health unit staff of health and safety requirements at the work site.
3. Provides professional guidance and advice to First Nation health program managers and Band employed health care staff relating to community health programs.
4. Chairs and facilitates meetings or committees involving other health facility staff, colleagues, managers and other professionals in the community.
5. Collaborates with visiting health professionals, such as Environmental Health Officer, Dental Therapists, in the treatment of clients and promoting health education to the First Nations community.

### **Financial Resources**

1. Responsible for monitoring health facilities budget, overtime costs, supplies and advising management of variances; financial planning and forecasting of expenditures for health facility and advising management of potential areas of concern and recommendations.
2. Uses Keewaytinook Okimakanak credit cards and calling cards for approved purchases. Verifies goods and services have been received and forwards invoices for processing.
3. Incurs and accounts for expenditures when on travel status, within standards established by Keewaytinook Okimakanak's travel policies.

### **Technical Resources**

1. Operation and maintenance of office equipment such as personal computers, peripheral equipment, software, fax machines, and files.
2. Custody and security of personal protective equipment, client education teaching materials, reference books and professional periodicals, health and confidential client medical records for own use and use by other medical professionals, medical supplies and equipment including over-the-counter drugs and pharmaceuticals including vaccines

- and controlled drugs used in patient care, and collection and disposal of medical waste.
3. Routine re-stocking of supplies and equipment as well as speedy replenishment of trauma and emergency items. Assistance in carrying out inventory and re-ordering of medical supplies.
  4. Processing of requests for equipment maintenance. Conducting routine maintenance and calibration of medical equipment. Medical supplies and equipment are replaceable, but may be costly and difficult to replace due to geographical location.
  5. Use and maintenance of assigned government vehicle used for duty travel.

## **Working Conditions**

### **Physical Environment**

1. Wearing appropriate medical safeguards such as gloves and masks in order to maintain infection control precautions and to ensure incumbent does not come in contact with any body fluids; appropriate clothing (such as parkas, boots, etc.) to suit extreme cold or hot weather conditions.
2. Work in a health facility which lacks air conditioning or sufficient space. Health facilities and accommodations may experience occasional electrical outages as well as sewage or water supply/safety problems.

### **Psychological Environment**

1. The model of community health nursing is based on a person's self-determination of choices that lead to healthy lifestyles. There may be ethical stress in maintaining respect for client choices while supporting individuals, families, and groups to take responsibility for their own health care.
2. Working conditions require dealing with: lack of control over the pace of work, meeting inflexible deadlines, managing critical time frames during emergencies, responding to concurrent demands and pressures from clients, families, community members, and leadership,
3. The work also requires dealing with critical situations which may involve life and death. These situations may evoke strong emotional reactions that have the potential to affect one's coping abilities. These reactions can occur in nurses regardless of whether they were directly involved in the critical incident or work in the community where this event occurred. Such stress may require debriefing and counseling intervention with the nursing staff by the Occupational Critical Incident Stress Management (OCISM) Team in order to prevent serious psychological illness.
4. The work may require dealing with distressed, angry or at times confrontational individuals.

## **Education and Experience**

1. Registered Nurse (RN) certification in good standing with the College of Nurses of Ontario.
2. A minimum of 4 years of full time clinical practice work experience in emergency or primary health care.

3. At least 1 year of experience in a management role or a combination of management training and experience working in the context of a remote and isolated First Nations community.
4. Clinical practice experience in remote or isolated communities and with First Nations populations are considered an asset.
5. Excellent verbal and written communication skills in English.
6. Ability to speak Cree, Oji-Cree, or Ojibway is an asset.
7. Familiarity with Microsoft Office tools and a willingness to learn and use other software including electronic charting tools.
8. Excellent report writing skills.
9. Willingness and ability to travel.