YALE NEW HAVEN HOSPITAL
JOB DESCRIPTION

VERSION 1 : 10-SEP-13 (APPROVED)

TITLE:	**ONCOLOGY NURSE COORD**	**POSITION NUM (CODE):**	**(001594)**
DEPARTMENT:	**GLOBAL**	**DEPT NUM (CODE):**	**(00000)**
SCHEDULE:	**EXY**	**GRADE:**	**24B**
REPORTS TO:	**CLINICAL PROGRAM MGR-NETWORK**	**FLSA STATUS:**	**EXEMPT**

To be part of our organization, every employee should understand and share in the YNHHS Vision, support our Mission, and live our Values. These values-integrity, patient-centered, respect, accountability, and compassion - must guide what we do, as individuals and professionals, every day.

SUMMARY

The Oncology Nurse Coordinator for Network Care Centers (ONC-NCC) serves as the leader for a designated network practice site, is a decision-maker for day-to-day operations across disciplines (including nursing, pharmacy, laboratory, access, and HIM staff) , and an integral member of the care team at that patient care location. The ONC-NCC is responsible for ensuring: 1) safe patient care delivery that adheres to SCH care standards, 2) smooth and efficient operations and patient flow according to established policy and process, 3) adherence to regulatory requirements for clinical practice, documentation and environment of care, 4) a superior patient experience as evidenced by patient satisfaction scores that meet or exceed established thresholds, and 5) clinical competency of nursing personnel in accordance with outlined performance expectations. The incumbent meets performance expectations through setting and reprioritizing daily workloads, tasks reassignment as needed, communication among disciplines, reporting of critical events to Medical Director and CPM, management of patient complaints and other leadership interventions. Reporting directly to the Clinical Program Manager (CPM) for Network Care Centers, the ONC-NCC span of control extends to all staff within the assigned network practice site. The ONC-NCC serves as a point of contact for the practice site and collaborates with the Medical Director for the site, , the Patient Safety and Quality Coordinator (PSQC) and Oncology Service Line Educator (OSLE) and other lead personnel in the execution of position responsibilities. In addition, the ONC-NCC is expected to manage a modified patient assignment. Other key roles of this provider are to execute seamless patient care delivery, to role model service excellence behaviors, and to serve as a guide and resource for nursing staff, facilitating the achievement of competency in the delivery of optimal patient care and continuing professional growth.
EEO/AA/Disability/Veteran.

RESPONSIBILITIES

1. Clinical Program Coordination and Support

1.1 Reviews daily schedule to ensure appropriate assignments and adequate staffing to support the volume and clinical workload; recommends nursing staffing adjustments based on workload assessment to CPM or APSM;; negotiates with peer coordinators when necessary to effect required staffing adjustments; reports staffing concerns in non-nursing areas to the appropriate leads and the CPM.

1.2 Serves a liaison among and between physicians, clinical and administrative staff to ensure interdisciplinary understanding and effect problem resolution; promotes effective communication and teamwork across disciplines; follows up on corrective action plans to ensure resolution of identified issues.

1.3 Contributes to employee performance appraisals for nursing personnel assigned to the practice site; assists with candidate interviews,hiring, and disciplinary actions as directed by CPM; provides feedback on non-nursing staff to appropriate lead personnel.

1.4 Assists SLE in identifying staff learning needs, delivering clinical content to and precepting staff on established core competencies, new and advanced skills as they are incorporated into the clinical practice; regularly monitors adherence to SCH standards, policy and procedure and reports discrepancies to CPM and other lead personnel.

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RESPONSIBILITIES

1.5 Participates in the identification and monitoring of program quality metrics relevant to patient care delivery and practice site operations in collaboration with the CPM and the PSQC; works with all physicians and staff to develop and implement performance improvement action plans as directed; reports findings on selected metrics regularly to Medical Director and CPM.

1.6 Assists CPM in the development and implementation of clinical tools relevant to patient care delivery and practice site operations; evaluates tool effectiveness and reports to CPM.

1.7 Ensures adherence to regulatory requirements for clinical practice, documentation and the environment of care at the assigned practice site; assists CPM and PSQC in the preparation for regulatory agency reviews and site visits.

1.8 Role models service excellence behaviors, identifies and takes action to resolve demonstrated discrepancies; manages patient complaints on site and in collaboration with Patient Relations and, when necessary, the CPM and Medical Director; accurately identifies, reports/refers issues that are complex or unsuccessfully resolved to CPM and Medical Director.

1.9 Works with CPM and Medical Director to generate agendas for and conduct regularly scheduled and specially called staff meetings.

1.10 Serves as an ambassador for the assigned care center, representing the Care Center and its unique features to internal and external communities.

2. Clinical Practice: Patient/Family Assessment (Initial and Ongoing)

2.1 Completes an Initial Nursing Assessment on new patients. Collects Level II* patient data for new patients using established assessment form by the third I visit to assess patient/family current and projected future needs. Note: Level II patient data includes physical and psychosocial history, current medical status, medication review, teaching/learning evaluation, pain assessment, risk assessments for falls, neglect and abuse and harm to self.

2.2 Analyzes new patient data compiled to confirm completeness/accuracy; identifies and communicates gaps to ensure that all required data is available prior to initial consultative visit; orchestrates scheduling of new patient visits.

2.3 Evaluates patient/family responses to medical, nursing and supportive care interventions at regular intervals (e.g., following initial consultative visit, proposed treatment plan, initiation or modification of therapeutic plan, during and following treatment episodes) for an assigned population.

2.4 Communicates initial and significant follow-up assessment findings to appropriate team members and documents according to policy.

2.5 Makes follow-up contacts (eg, by phone, email and visit) to promote patient/family understanding of the plan of care, evaluate adherence levels and reinforce education provided during visits to the practice site.

2.6 Documents patient/family response to information provided and communicates to the appropriate team members.

2.7 Coaches patient/family through diagnostic and therapeutic experiences to minimize anxiety and ensure adherence to medical plan; provides warm handoffs at various points but maintains contact with patient/family and point of care managers as patients move along the continuum.

3. Clinical Practice: Direct Care Delivery and Care Coordination

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RESPONSIBILITIES

3.1 Participates in patient/family treatment planning meetings with MD as requested by patient and/or physician; accompanies patient/family during medical visits as desired by patient and as schedule permits.

3.2 Administers chemotherapy/biotherapy, premedications and other medications as prescribed by a physician or advanced practice provider after validating patient identification, determining that patient meets established criteria, and orders verification in accordance with established standards of care.

3.3 Responds in a timely manner and in accordance with established policy and patient care protocols to patient symptoms and complications demonstrated during and immediately following treatment periods.

3.4 Responds to patient/family telephone contacts according to assessment findings, physician direction and/or established standards of care; prescription renewal or initiation requires a physician signature.

3.5 Uses findings of assessment data, team-based interactions and established triggers to initiate referrals for supportive care (eg, social work, nutrition, rehabilitation, psychological services) and community agency assistance (eg, home care, support groups, etc). Monitors and reports response to consultative intervention(s).

3.6 Anticipates and/or identifies potential logistical, financial, personal barriers to patient adherence to visit schedule and therapeutic plan; makes other team members aware and interfaces with family members and any relevant internal and external providers to troubleshoot/develop a plan to minimize or eliminate obstacles.

4. Clinical Practice: Patient/Family Education

4.1 Develops a patient/family education plan based on assessment findings relevant to teaching learning topics, styles and the identification of special needs and preferences.

4.2 Provides patient/family instruction related to disease, treatment, potential adverse effects, symptom self-identification and management, parameters for distinguishing between what can be self-managed and what requires disease team intervention, how to contact the team.

4.3 Provides selected handout materials to patients/families to reinforce verbal instruction

4.4 Makes follow-up contacts (eg, by phone, email and visit) to ensure patient/family understanding of the plan of care, evaluate adherence levels and reinforce education provided

4.5 Documents patient/family response to information provided and communicates to the appropriate team members.

4.6 Coaches patient/family through diagnostic and therapeutic experiences to minimize anxiety and ensure adherence to medical plan; provides warm handoffs at various points but maintains contact with patient/family and point of care managers as patients move along the continuum.

5. Professional Development

5.1 Sets and strives to meet annual goals for professional development

5.2 Achieves/maintains oncology nursing certification and other relevant certifications; keeps current mandatory self learning modules.

5.3 Keeps abreast of new and emerging clinical information relevant to practice and leadership skills through active participation in continuing education opportunities including local, regional and national meetings, presentation and publishing .

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RESPONSIBILITIES

5.4 Actively participates in hospital and care center committees (eg, clinical practice council, focus group sessions, etc) and clinical projects designed to enhance patient care delivery, patient satisfaction, cost efficiency and clinical operations.

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REQUIREMENTS

EDUCATION (number of years and type required to perform the position duties):
BSN required

EXPERIENCE (number of years and type required to meet an acceptable level of performance):
3 years oncology or surgical nursing experience.

SPECIAL SKILLS:

Connecticut RN License; Oncology Nursing Society certification (OCN, AOCN) and chemo-biotherapy certification highly preferred.

ACCOUNTABILITY (how this position is held accountable for such as goals achievement, budget adherence, or other areas of accountability):

This position is held accountable for collaboration and consultation, education, clinical practice, and research through yearly written evaluations.

In personal and job-related decisions and actions, consistently demonstrates the values of integrity (doing the right thing), patient-centered (putting patients and families first), respect (valuing all people and embracing all differences), accountability (being responsible and taking action), and compassion (being empathetic).

COMPLEXITY (describe planning, problem solving, decision making, creative activity, or other special factors inherent in the responsibilities of this position):

This position requires understanding of and expertise in managing ambulatory oncology patients, decision-making, delegation, and leadership skills.

LICENSURE/CERTIFICATION:
Connecticut RN License

INFORMATIONAL

SPECIAL WORKING CONDITIONS AND PHYSICAL DEMAND:

Departmental Approval:	Lisa Arneth	Date:	
Human Resources Approval:	Lisa Arneth	Date:	09/10/2013