

## Role outline

### **Clinical or care lead for Frailty and Care homes**

The purpose of this post is to provide effective leadership and expertise to support the development and delivery of the Bexley frailty, dementia and care homes agendas as well as the interface between acute and community services in admission avoidance and discharge from hospital. You will lead the development of these service areas ensuring evidence-based, best practice is strived for. The post holder will ensure that there are clear lines of communication with all Bexley partner teams to increase knowledge and skills surrounding frailty.

You will be a clinical or a care professional with experience in supporting individuals and their carers living with frailty, dementia and/or people residing in a Care Home. You will provide leadership working with system partners to support prioritisation of service change that will improve frailty pathways, dementia care and the enhanced health in care homes agenda. You will apply your knowledge and skills from hands on experience to bring about positive change for these service areas. The post holder will be a critical member of the Respendent group that works to ensure acute and community services are joined up to maximise the effectiveness of admission avoidance and hospital discharge services.

### **Main responsibilities**

The following are the key requirements identified for this role and the approaches needed for them.

### **Contacts and relationships**

- Positively engage with external agencies and act as advocate for all parts of the system that are involved in joining up health and social care for older people living in Bexley.
- Actively look for potential opportunities with key contacts to improve overall service delivery and performance
- Connect and build trust with colleagues and people living with frailty/dementia and their families/ friends across traditional boundaries - developing strong networks and relationships that work to support and benefit individuals over organisations, places or professional groups.
- Act as an advocate to represent the voice of the person.
- Link with other clinical & care professional leads (including cancer, health inequalities, LTC, medicines optimisation and end of life care) to ensure that services are as integrated, efficient and joined up to optimise outcomes for those receiving services.

### **Decision-making**

- Make sound operational judgements that ensure safe and effective service provision

- Listen with compassion to the needs, hopes and challenges of those they work with and serve, using this understanding to actively involve others in the decisions that affect their lives.
- Support the Integrated commissioner for older people to gather, verify and assess all appropriate and available information to gain an accurate understanding of the current system challenges.

### **Service delivery and outcomes**

- Champion the development of services which improve the care of people living with frailty, dementia and living and dying in Care Homes and facilitate implementation of the Bexley Local Care Partnership (LCP) frailty, dementia and care home agendas.
- To support with the assessment and analysis of data that can help drive changes in local services to ensure equitable and appropriate service development and care, providing evidence for the need for future resources
- Catalyse and embed ways to test and share new and innovative ideas and approaches that improve how we design and deliver care to our population
- Ensure that service delivery is person centred, outcomes focussed and protective of individual service users' dignity
- Support the effective and efficient deployment of resources to achieve agreed outcomes and targets
- Work as a team member developing and maintaining effective working relationships
- Keep up to date with relevant policies and procedures

### **Creativity and innovation**

- Encourage and test new ways of working together, collaborating, and learning from each other to achieve our collective ambition to improve the health and wellbeing of our population
- Seek out and embrace different ideas, perspectives, and challenges - being able to adapt and change course by continually learning from others around them.
- Takes an innovative and creative approach to solving problems
- Considers innovation in the workplace an ongoing responsibility and welcomes change as an integral part of both individual and organisation development
- Acts as a positive role model for innovation and a facilitator for change
- Actively recruit local people to support co-designed developments

### **Planning and organising**

- Develops practical and realistic plans to achieve outcomes/objectives
- Considers the wider implications with regards to skills, resources in achieving plans/ outcomes/objectives
- Ensures appropriate resources and levels of capability to deliver priorities
- Takes responsibility for delivery of plans, outcomes and objectives which may involve coordinating and organising others

### **Communication**

- Actively contribute to a culture of positive communication
- Deliver presentations and training to staff and agencies/ partners within the local care partnership that contributes to service improvement in the care of older people.

### **Personal development**

- Continually develop own clinical knowledge and practice with respect to service speciality
- Maintain professional registration relevant to the role (e.g. SWE, HCPC, GMC, NMC, etc.)

### **Equality and Diversity**

- Act in ways that support equality and value diversity
- Help to develop and maintain an organisational culture that supports equality and diversity.