**Job Title: Frailty Clinical Lead**

**Hours of work:** 4 hours per week (working time flexible)

**Contract Length:** 12**-**month fixed term

**Remuneration:** Commensurate with professional registration

**Responsible to:** Borough Clinical Lead for Training Hub (TH)

**Accountable to:** Borough TH Programme Manager

**Location:** This role will be hosted in Barnet

**Job Summary**

This is an exciting opportunity to support your local Training Hub team in providing clinical leadership to the training hub and primary care networks (PCN) enabling frailty care in general practice and primary care. The Training Hub is seeking clinicians interested in developing the borough approach to frailty and care home clinical pathways, support a borough approach education and workshops in this clinical area.

The post holder will be responsible for liaising and providing a network of support to clinicians delivering frailty care, providing support to the borough clinical leadership and PCNs who are developing changes to the frailty pathway as well as its impact in managing the Long-Term Conditions Locally Commissioned Service (LTC LCS). This post should offer support to the borough leadership on identifying issues, working with PCN workforce and the training hub team.

**Frailty**

Every year more than one in three people over 65 suffer a fall, which can cause serious injury and even death. The costs to the NHS and social care from hip fractures alone are an estimated £6 million per day or £2.3 billion per year.

Falls are the main cause of a person losing their independence and going into long term care. After a fall, the fear of falling can lead to more inactivity, loss of strength, loss of confidence, and a greater risk of further falls and a greater risk of death. Frailty care has developed significantly over the last few years and Barnet Borough has a significant frailty population both in care homes and living independently.

**A new model of care for patients with or at risk of developing Long Term Conditions.**

General Practice across North Central London (NCL) is being supported to adopt a new model of care for managing long term conditions (LTCs) through implementation of the new NCL LTC LCS. The NCL Training Hub has been commissioned to support practices to be ready to deliver the LTC LCS for October 2023 as part of a Practice Preparatory period. Practices will now be mobilising the model of care and case finding approaches to the LTC LCS.

Practices are currently supported to work through the business and clinical requirements of the programme during the Practice Mobilisation period (October to April 2024). Although this role is not directly related to the LTC LCS, given the commonality of processes for LTC and Frailty, this role will play a beneficial role in supporting general practice in managing both frailty and the LTC LCS.

**About Barnet Training Hub**

Barnet Primary Care Training Hub was first established in 2014 (previously known as Barnet Community Education Provider Network/CEPN) with a remit to improve the health, wellbeing, and care available to people in Barnet through strengthening the health and care workforce.

Barnet has a diverse population, with some relatively deprived areas and other more affluent areas. Barnet is the largest borough in London with about 425,000 residents, with a largely elderly population. The population is served by approximately 50 general practice surgeries which are grouped together by 7 primary care networks (PCNs).

There are approximately 80 registered nursing and care homes in the borough and many people move to Barnet to reside in these homes. Many immigrants have moved to parts of Barnet too, including young families with children.

Barnet Primary Care Training Hub comprises of a network of more than 30 stakeholders working together across health and care sectors and disciplines.

The main stakeholders are Royal Free NHS Foundation Trust (the local acute trust), NSHE Department for Workforce, Training and Education, Central London Community Healthcare Trust (the community provider), the Barnet Integrated Care Partnership, patient group, Barnet Federated GPs CIC, Middlesex Local Pharmacy Committee, Local Medical Committee, Public Health, Barnet Enfield and Haringey Mental Health Trust and Barnet social care.

**Responsibilities**

1. **Frailty Lead Specific responsibilities**
   1. Frailty Medicine pathway - Provide support and clinical leadership to the access of frailty education. Creating a shared learning space as well as providing connectivity to PCN clinical directors, other PCN staff and the primary care practice workforce. Supporting PCN clinical directors and the training hub in unifying strategic goals.
   2. Training Hub Strategy – Work with the borough faculty, which support all workstreams and educational pathways delivering on NSHE Department for Workforce, Training and Education recommendations. Provide a link to other borough leadership roles in assisting primary care networks.
   3. Local Team ICB roles – Provide leadership and feedback to the local ICB team. Work with the local team ICB clinical lead roles in frailty medicine and facilitate improvement in the clinical pathways for frailty care delivery. Clinical leadership will be targeted at PCNs, practices, community teams and care homes to share learning and implement successful changes to primary care delivery.
   4. Primary Care pathway Education – Work with borough-based Training Hub team, the cabinet working at borough level, PCN clinical directors and practice teams to create primary care pathway education for frailty care.
2. **Policy & Service Development**
   1. Work with boroughs and providers to understand requirements and make recommendations to tailor the service which would enable localised and fit for purpose service delivery.
   2. Make recommendations for changes and improvements to service delivery as appropriate.
   3. Develop and maintain a good knowledge of emerging policies from NHS, particularly regarding workforce development.
3. **System connectivity** 
   1. Ensure educational synergies identified and capitalised upon, including prevention of duplication of activities.
   2. Support development of best practice for educators across NCL
   3. Through faculty steering group develop an NCL educator provider network –NHSE WTE, HEIs, further education institutions to ensure information sharing and co-creating educator development/support.
4. **Key Working Relationships**
   1. Work with a broad range of internal and external stakeholders, including:
      * Local ICB Primary Care teams
      * Barnet Training Hub and Barnet General Practice Federation
      * NCL Training Hub Social Care Team
      * Place (i.e., borough) Partnerships (including training hub faculty meetings, borough Cabinet meetings and borough delivery partnerships where appropriate
      * Primary Care Networks (PCNs) & General Practice
      * NHSE WTE Local Medical Committee (LMC)
   2. Develop and maintain excellent relationships with providers across care settings, education providers and other partners to ensure continuous development of new career pathways, development, and implementation of new ways of working and relevant recruitment and retention strategies.
   3. Participate in relevant internal and external working groups/projects, services, and initiatives which may be highly complex, sensitive, political, and contain contentious information with the aim of providing information and analytical advice to the teams.
5. **Team Support**

Support staff within the wider team to ensure that they can deliver the objectives for the programme and for NCL Training Hub

1. **Confidentiality / Data Protection / Freedom of Information**

Post holders must maintain the confidentiality of information about patients, staff, and other health service business in accordance with the Data Protection Act of 1998. Post holders must not, without prior permission, disclose any information regarding patients or staff. Moreover, the Data Protection Act 1998 also renders an individual liable for prosecution in the event of unauthorised disclosure of information.

1. **Equal Opportunities**

Post holders must at all times fulfil their responsibilities with regard to equality laws.

1. **Health and Safety**

Employees must be aware of the responsibilities placed on them under the Health and Safety at Work Act (1974), and to ensure that agreed safety procedures are carried out to maintain a safe environment for employees, patients and visitors.

1. **Risk Management**

All post holders have a responsibility to report risks such as clinical and non-clinical accidents or incidents promptly. They are expected to be familiar with the risk management strategy and emergency procedures and attendance at training as required.

1. **Infection Control**

Infection Control is everyone’s responsibility. All staff, both clinical and non-clinical, are required to adhere to the Hygiene Code (2006), Infection Prevention and Control Policies and make every effort to maintain high standards of infection control at all times thereby reducing the burden of Healthcare Associated Infections including MRSA.

1. **Safeguarding**

Within their sphere of competence, each member of staff is responsible for promoting and safeguarding the welfare of the children, young people and / or vulnerable adults for whom they are responsible or may come into contact with, in the job role.

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| **PERSON SPECIFICATION - Borough Clinical Lead for LTC Training** | | | |
| **ATTRIBUTES** | **ESSENTIAL** | **DESIRABLE** | **ASSESSMENT\*** |
| **Education /**  **Qualifications** | * 1. Registered Healthcare Professional regularly providing 3+ sessions of Primary Care in NCL   2. Not subject to interim suspension or investigations |  | * 1. AF & HR   2. AF & HR |
| **Experience** | 2.1 Experience in clinical leadership roles, organising delivery of services or systems or similar equivalent clinical pathways.  2.2 Experience in liaising with key contacts across primary care.  2.3 Using webinars to communicate the groups and audiences.  2.4 Meeting management, including agendas and note taking.  2.5 Developing communications materials e.g., Power Point presentations to convey information | 2.6 Experience of working with peers in a care homes, and delivering frailty education or clinical equivalent. | 2.1 AF & IV  2.2 AF & IV  2.3 AF & IV  2.4 AF & IV  2.5 AF & IV  2.6 AF & IV |
| **Knowledge** | 3.1 Good working knowledge of frailty and care home clinical pathways in primary care and new ARRS roles.  3.2 Knowledge of the NHS, its structures, and processes, including an understanding of the multi-professional workforce agenda.  3.3 Awareness and understanding of the healthcare landscape in North Central London and NCL ICB pathways. | 3.4 A working interest in frailty pathways. | 3.1 AF & IV  3.2 AF & IV  3.3 AF & IV  3.4 AF & IV |
| **Skills & Aptitudes** | 4.1 Proactive, ability to think and plan prioritising own workload.  4.2 Excellent verbal and written communication skills, including using MS Teams  4.3 Ability to work as part of a team as well as independently.  4.4 Attention to detail and high level of accuracy.  4.5 Ability to adapt working to changing programme requirements.  4.6 Educational expertise and small group facilitation skills  4.7 Commitment to new ways of working and workforce transformation.  4.8 Value personalised care as an approach to improve patient engagement and health outcomes. |  | 4.1 AF & IV  4.2 AF & IV  4.3 AF & IV  4.4 AF & IV    4.5 AF & IV  4.6 AF & IV  4.7 AF & IV  4.8 AF & IV  4.9 AF & IV |
| **\*Assessment**  **AF = Application Form / I = Interview / HR = Human Resources** | | | |