



IDENTIFICATION

Department	Position Title	
Northwest Territories Health and Social Services Authority	Primary Health Care (PHC) Nurse Practitioner Fort Resolution	
Position Number(s)	Community	Division/Region(s)
57-12749	Fort Resolution	Community Health/Yellowknife/ Yellowknife

PURPOSE OF THE POSITION

The primary care Nurse Practitioner (NP) is an autonomous practitioner who will provide clients with health assessment, diagnosis, interventions and appropriate follow up care in accordance with acts, regulations, policies, standards, guidelines, mission and objectives of the Northwest Territories Health and Social Services Authority (NTHSSA) to ensure clients receive timely health assessment and diagnosis, optimum support and continuity of care.

SCOPE

Northwest Territories Health and Social Services Authority (NTHSSA) administers all public health, home care and general physician services throughout Yellowknife, Dettah and N'Dilo, as well as all regional health and social services delivered in Fort Resolution and Lutsel K'e. NTHSSA provides and supports the delivery of community based health and social services to adults and children in order to enhance the health and well-being of communities through excellence, accountability and respect for regional diversity.

Located within the Fort Resolution Community Health Centre, the NP reports administratively to the Nurse-in-Charge Fort Resolution. Clinically the NP reports to the NTHSSA Manager, NP Program and is a member of a NTHSSA team of NP's with varying levels of experience, skills and abilities. This team of NP's may be working within a variety of government and non-government community based locations in Yellowknife, Dettah, N'Dilo, Fort Resolution and Lutsel K'e and the hospital in Yellowknife.

The NP is an autonomous practitioner who provides comprehensive health assessment, make diagnoses and develop interventions within the nurse practitioner's scope of practice. The NP

will collaborate with the NIC, Community Health Nurses, social workers, Community Health Representatives, physicians, nursing staff, other professionals to provide primary care to individuals and families.

As an autonomous practitioner, the NP will provide comprehensive nursing care to clients including; health promotion, illness and injury prevention, supportive, curative, rehabilitative and palliative care. The incumbent will also be required to collaborate with community health care providers to increase the capacity for self-care and direction as an educator, leader, researcher and advanced clinical practitioner.

The NP will perform primary care services for acute illness and injuries and stable chronic health problems commonly encountered in primary care, including; diagnosis, ordering and interpreting selected diagnostic tests and therapeutics (selecting, recommending, prescribing and monitoring the effectiveness of selected drugs and interventions).

The NP will consult and/or refer to other health professionals as appropriate at any point in the assessment of the client, or when planning, implementing or evaluating client care when the client's condition is such that: diagnosis and/or treatment plan is unclear or beyond the scope of the NP to determine; care that is required approaches or reaches the limits of the scope of practice of the NP; it is potentially life-threatening; or a chronic health problem destabilizes. The degree to which the physician becomes involved may vary from: providing an opinion and recommendation; an opinion, recommendation and concurrent intervention; and/or assuming primary responsibility for the care of the client.

Services may be provided within the Community Health Centre, public settings, and schools or in a patient's home (i.e. elderly population) and are intended to promote a healthy way of life, and decrease the incidence of death and disease and injury. Services may be provided on an individual basis or as part of a multi-disciplinary team.

The NP will be required to participate as a member of the nursing team to provide on-call coverage on a rotational basis during the evening and weekends to provide emergency nursing care.

RESPONSIBILITIES

- 1. Provide advanced clinical health assessment, diagnosis, nursing care and services to clients (individuals, families and groups) on a routine and emergency basis to promote a healthy lifestyle, to prevent and/or reduce incidence of disease, disability and death to support rehabilitation and to restore health or to support the client to die comfortably and with dignity.**
 - Systematically assess individual health status through the collection of an appropriate history, performance of physical assessment and the ordering and interpretation of diagnostic tests.

- Establish a nursing and medical diagnosis through analysis and synthesis of data from multiple sources and communicate health findings and establish a plan of care with client.
- Develop a plan of care based on client need, independently or in consultation with a physician and other members of the primary community care team.
- Implement a comprehensive care plan, which may include independent prescribing and dispensing of pharmaceuticals in accordance with established Acts, regulations, policies, practices and safety procedures as well as non-pharmacological interventions.
- Incorporate appropriate complementary and traditional therapies that the client may be using or wish to use, if safe and no contradictions.
- Refer clients to other members of the primary community care team as determined by the client's needs and scope of practice. Communicate and plan ongoing care with other members of the primary community care team.
- Conduct family assessments to identify the broader implications for health within the family in a way that is culturally appropriate.
- Maintain dialogue with patients and family about the patient's condition and future plans as appropriate.
- Provide periodic review and monitoring to assist clients, with stable conditions, to manage their health status.
- Review progress with the client and evaluate the care management outcomes.
- Recognize need for crisis intervention and counseling for common, emergent or urgent psychosocial conditions/situations and take the necessary action.
- Recognize the cultural diversity of the community and incorporate this into the planning and delivery of services.
- Advocate for and respect the dignity and self-respect of patients.
- Promote the autonomy of patients and help them to express their health needs and values to obtain appropriate information and services.
- Safeguard the trust of patients that information learned in the context of a professional relationship is shared outside the health care team only with the patient's permission or as legally required, and within the health care team on an appropriate need to know basis.
- Apply and promote principles of equity and fairness to assist patients in receiving unbiased treatment and a share of health services and resources proportionate to their needs.
- Act in a manner consistent with their professional responsibilities and standards of practice.

2. Develop, facilitate, implement and modify patient and family education/teaching based on the needs of the patient.

- Develop and implement a variety of interventions to address client needs.
- Facilitate the continuity and sustainability of care by referring to other members of the primary care team, other departments (i.e. education), and family and community members as appropriate.
- Use a holistic approach to facilitate learning of client and their families in relation to client illness or injury (i.e. self-care, health promotion, etc.).

- Assess the patient for physical and psychological needs, their knowledge of their health, disease process and learning needs.
 - Develop, revise and evaluate on an ongoing basis, educational resources necessary to support patients.
- 3. In collaboration and partnership with clients and other primary community care team members and agencies, conduct health surveillance and preventative activities that may improve the health of the population.**
- Conduct and participate in community needs assessment and based on the results, and in collaboration with stakeholders, prioritize and develop culturally sensitive health promotion strategies.
 - Understand, support and promote community participation in decision-making and ownership of constructive changes to enhance the community's health.
 - Promote healthy public policy.
 - Evaluate and modify community health programs in partnership with community members.
- 4. Provide expert and specialized knowledge of primary health care related to nursing in the NWT and also provide functional direction and leadership for enhancing the integrated Service Delivery Model.**
- Articulate the role of the CNP to clients, general public and primary community care team.
 - Provide coaching and clinical leadership to peers, students and other members of the health care team to develop skill levels necessary to achieve the standard of care (i.e. including but not limited to being a preceptor or mentor for nursing staff, students or other members of the primary community care team).
 - Collaborate with family physicians, nursing colleagues and other members of the primary community care team to advocate health care environments that are conducive to ethical practice and to the health and well-being of patients and others in the setting.
 - Facilitate and foster active communication, collaboration and linkages between key stakeholders, within and outside the community.
 - Orientation of new employees to unit specific programs and mandate.
 - Participate in research and special project initiatives that contribute to evidence based practice. This includes reviewing literature on current clinical practice, recommending changes to clinical practice standards, protocols and procedures based on an assessment of evidence and analysis of resources to implement change.
 - Participates in committees and task forces as related to the role of the CNP (i.e. multi-disciplinary primary community care team).

WORKING CONDITIONS

*(Working Conditions identify the **unusual and unavoidable**, externally imposed conditions under which the work must be performed and which create hardship for the incumbent.)*

Physical Demands

From time to time (1-2 times per week at 10 minutes per incident) the incumbent will be required to lift, carry or support patients during the provision of patient care. This includes incapacitated patients within the Health Centre and emergency patients coming to the Health Centre. In addition, on a regular basis the incumbent will be required to lift and move medical equipment and other supplies (often in excess of 20lbs).

Environmental Conditions

For entire shifts the incumbent will have moderate levels of exposure to communicable diseases (i.e. TB), blood (i.e. drawn from patients in sick clinic and during the processing of body fluids for transportation to the Laboratory), body fluid, hazardous materials (sharps, toxic cleaning and sterilizing solutions), loud noises and offensive or noxious odors that can result in potential health risks to the incumbent.

As a result of living in an isolated, northern community, the incumbent may be required to travel on small planes and on ice or winter roads when traveling to or from the community.

In addition, the incumbent will be exposed to temperature extremes when traveling between heated buildings and patient homes, etc.

Sensory Demands

50% - 75% of the incumbents day will be spent providing direct patient care where the incumbent will be required to use the combined senses of touch, sight, smell and hearing during assessment and provision of care in controlled (i.e. clinic) and occasionally uncontrolled setting (i.e. client's home). These sensory demands can be further challenged by emergency situations in poor conditions (i.e. outside, in small planes, in vehicles, etc.)

Mental Demands

The NP experiences constant demands from residents within the community who may require NP care at any time (day or night) that may cause a significant disruption to the incumbent's family and social life. In addition, the incumbent is also subject to disruption in lifestyle due to approximately 1:3 days on-call per month. It is normal for the individual on standby to be called back into work (several times a day and night), which causes significant stress on the incumbent's family and social life.

In addition, within the health care setting there can be significant lack of control over the work pace, with frequent interruptions (work is often dictated by external factors) that may lead to mental fatigue or stress.

From time to time Community Health Centres may be required to provide nursing services to abusive patients, individuals under the influence of drugs or alcohol and RCMP escorts. The NP may be kicked, pushed, grabbed or verbally assaulted. These incidents may occur while the incumbent is on duty as well as when off duty (within a small community it is difficult to separate the individual from the position). As a result, there is a very real concern for safety and well-being which may cause extreme levels of stress on the incumbent both during and after working hours.

The responsibility to make decisions in emergency situation in isolation from a hospital or other backup services may cause stress on the PHC - CNP. Other workplace factors that impact patient care may also be cause for stress (i.e. including but not limited to shortages in staff, shortages in supplies, weather related delays, patient non-compliance, etc.).

KNOWLEDGE, SKILLS AND ABILITIES

- The NP must have advanced knowledge of and an ability to apply advanced nursing processes (assessment, planning, implementation and evaluation) and advanced nursing practice to ensure that the all patients' physical, emotional, psycho-social, spiritual, educational and daily living needs are met.
- An ability to educate patients and their families (where applicable) on appropriate self-care methods and techniques.
- An ability to provide emergency care and treatment, as the position is required to perform advanced nursing functions beyond basic nursing training. This would include using standards, policies and guidelines of the Department of H&SS, NTHSSA and the RNANT/NU.
- Knowledge of and an ability to network resources within and outside Stanton (i.e. Social Services, Public Health, medivac teams etc.) in order to ensure support of patients and their families.
- Knowledge of best practices in primary health care and particularly public/community health.
- Conceptual understanding of the model of integrated community care delivery, and the application of nurse practitioner competencies to multidisciplinary practice settings.
- Sensitivity to the cultural, social and political issues in the NWT.
- An ability to critique research studies and apply to practice where applicable/appropriate.
- Knowledge of all applicable GNWT legislation and regulations, standards, policies and guidelines related to advanced nursing practice in order to provide current, relevant and feasible consultation services.
- Seasoned knowledge of management and an ability to coordinate a wide variety of activities and objectives.
- Ability to contribute to the satisfaction and goodwill of clients, colleagues and co-workers is essential to the position. The incumbent must have the ability to deal with caregivers and health care workers in situations of extreme stress and cope with these situations diplomatically and with empathy.

- An ability to facilitate creative problem solving using a situational approach incorporating conceptual, analytical, interpretive, evaluative, intuitive and constructive thinking skills.
- The incumbent must be aware of the importance of confidentiality and be able to keep personal and medical information private and confidential at all times.
- Knowledge of and ability to operate word processing applications (i.e. Microsoft Word) in order to complete training materials and presentations, electronic mail to send and receive correspondence and the internet in order to conduct on-line research.

Typically, the above qualifications would be attained by:

This level of knowledge, skills, and abilities is typically attained through the successful completion of a Nursing Degree, certification as a Nurse Practitioner and 2 years of recent nursing experience.

ADDITIONAL REQUIREMENTS

Yellowknife Regional Requirements

The NP must be able to acquire within a reasonable time frame, and remain current with, the following training and certifications:

- WHMIS
- CPR
- Transportation of Dangerous Goods,
- Standard X-ray processing (chest and extremities), and
- Pharmaceutical process and procedures
- Immunization Certification
- IAP, CPR, PALS, BTLS and TNCC would be an asset, as well as training in emergency response.
- Canadian Nursing Association Certifications are an asset.

In addition the NP must have:

- Completed a satisfactory criminal record check
- Proof of current immunization status
- Active registration with the RNANT/NU
- Active registration as a Nurse Practitioner with the RNANT/NU.

It is expected that the NP must maintain current knowledge and enhance competencies relevant to primary community care practice through professional development activities, peer review and other continuing strategies.

It is expected that the PHC - CNP must maintain current knowledge and enhance competencies relevant to primary community care practice through professional development activities, peer review and other continuing competency strategies.

Position Security (check one)

- ☐ No criminal records check required
- ☒ Position of Trust – criminal records check required
- ☐ Highly sensitive position – requires verification of identity and a criminal records check

French language (check one)

- ☐ French required
- ☐ French preferred
- ☒ French not required