



#### **IDENTIFICATION**

Department		Position Title	
Northwest Territories Health and Social Services Authority		Primary Health Care – Community Nurse Practitioner	
Position Number(s)	Community	Division/Region(s)	
87-12882	Norman Wells	Community Health Centres/Sahtu	

#### **PURPOSE OF THE POSITION**

The Primary Health Care - Community Nurse Practitioner (PHC-CNP) provides residents of Sahtu Communities with advanced health assessment, diagnosis, intervention and follow up care in accordance with Nurse Practitioner acts, regulations, policies, standards, guidelines, mission and the objectives of the Northwest Territories Health and Social Services Authority to ensure residents have access to timely, professional and sustainable health services required to maintain optimal health.

#### **SCOPE**

The Northwest Territories Health and Social Services Authority (NTHSSA) is the single provider of all health and social services in the Northwest Territories (NWT), with the exception of Hay River and Tłı̄ch̄ regions, covering 1.2 million square kilometers and serving approximately 43,000 people, including First Nations, Inuit, Metis, and non-aboriginals. Health and social services includes the full range of primary, secondary and tertiary health services and social services including family services, protection services, care placements, mental health, addictions, and developmental activities, delivered by more than 1,400 health and social services staff.

While the Tłı̄ch̄ Community Services Agency (TCSA) will operate under a separate board and Hay River Health and Social Services Agency (HRHSSA) will in the interim, the NTHSSA will set clinical standards, procedures, guidelines and monitoring for the entire Northwest Territories. Service Agreements will be established with these boards to identify performance requirements and adherence to clinical standards, procedures, guidelines and policies as established by the NTHSSA.

Under the direction of the Minister of Health and Social Services, the NTHSSA is established to move toward one integrated delivery system as part of the government's transformation strategy.

The NTHSSA administers all regional health and social services delivered to 4 Community Health Centers and 1 Community Health Station in the Sahtu Region with approximately 2,900 residents. The NTHSSA provides and supports the delivery of health care services to adults and children on outpatient and outreach basis in order to enhance healthy communities' well-being through excellence, accountability and respect for regional diversity.

Located primarily within the Norman Wells Health and Social Services Facility and reporting directly to the Regional Manager, Community Health Centres, the incumbent will provide comprehensive advanced health assessment, make autonomous nursing and medical diagnoses, develop care plans and provide treatment within the nurse practitioners scope of practice to the 800 of residents of Norman Wells. Within the community the PHC - Community Nurse Practitioner is the clinical leader providing advanced nursing skills direction and leadership within the primary community care team.

The focus of the PHC-CNP's to improve a patient's health and ensure that the patients care needs are met in the context of the patient's psychosocial and physical well-being. Particular emphasis on community development and health promotion as well as advanced knowledge and skills in assessment, nursing and medical diagnosis, intervention, treatment management, drug therapy and referral functions which are shared with physicians, pharmacists and other service providers is essential.

The PHC-CNP will provide advanced clinical practice, education, health promotion and leadership within the community in all areas including but not limited to the following; health promotion, illness and injury prevention, supportive, curative, rehabilitative, palliative and emergency care. The incumbent will also be required to collaborate with communities to increase the capacity for self-care and provide direction as an educator, leader, researcher and advanced clinical practitioner.

Within the overlapping area of practice, the PHC-CNP will perform primary care services for acute illness and injuries and stable chronic health problems commonly encountered in primary care, including; medical diagnosis, ordering and interpreting selected diagnostic tests and therapeutics (selecting, recommending, prescribing and monitoring the effectiveness of selected drugs and interventions). In addition, the will be required to write prescription/treatment orders on order sheets which will be acted upon by other health professionals (i.e. nurses, pharmacists, etc.).

The PHC-CNP will consult with and/or refer to other health professionals as appropriate (i.e. Physician in Yellowknife, physiotherapists, occupational therapists, etc.), or a patient's family physician, 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 PHC-CNP to determine; care that is required approaches or reaches the limits of the scope of practice of the PHC-CNP; it is potentially life-

threatening; or a chronic health problem destabilizes. The degree to which the family physician becomes involved may vary from: providing an opinion and recommendation; an opinion, recommendation and concurrent intervention; and/or accepting transfer of care of a client.

Services may be provided within the Health and Social Services Centre, public settings, and schools, Long Term Care 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.

PHC-CNP may be required to provide on-call coverage on a rotational basis during the evening and weekends to provide emergency nursing care and support to the CHN's and NIC's.

## **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**

- In participation with community members and the primary community care team, develop and implement a variety of programs to address client needs which may include the provision of programs such as adult health clinics, pre and post-natal clinics, school health program, chronic disease clinic, immunization programs and communicable disease surveillance.
- Facilitate the continuity and sustainability of care by involving other members of the primary care team, other departments (i.e. education) family and community members as appropriate.
- Use a holistic and culturally appropriate 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 PHC-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 PHC-CNP (i.e. multi-disciplinary primary community care team).

## **Workplace Health and Safety**

### **Main Activities:**

- Employees of the NTHSSA – Sahtu Region are committed to creating and maintaining a safe and respectful workplace for employees and patients/clients. Building a safe and respectful workplace is everyone's responsibility.
- All Employees have a professional and personal responsibility to perform their duties to health and safety regulations, standards, practices and procedures.
- All stakeholders --management, staff, Union of Northern Workers (UNW) and Workers' Safety and Compensation Commission (WSCC)-- need to ensure our Joint Workplace Health and Safety Committee works effectively with a shared purpose of continuous quality improvement in health and safety.
- All Employees play an active role in Workplace Health and Safety through their daily activities in identifying risk, prevention and accidents, and applying timely corrective measures.

- A healthy workplace, where employees can provide quality service under safe conditions, is the right thing to do.

## **WORKING CONDITIONS**

### **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 20 lbs.).

### **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. The Community of Colville Lake has limited amenities.

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 PHC-CNP 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. 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 PHC-CNP 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 PHC-CNP must be able to make accurate medical diagnosis of common illness, identify critically ill and destabilizing chronically ill patients and apply critical thinking when formalizing evaluations resulting in differential medical diagnosis. In addition, the incumbent must be able to implement appropriate treatment plans based on diagnosis within a PHC-CNP scope of practice.
- The PHC-CNP 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 as defined within the PHC-NP registration requirements by the Registered Nurses Association of the NWT and Nunavut.
- 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 in accordance with standards, policies and guidelines of the Department of HSS, NTHSSA and the RNANT/NU.
- An ability to effectively triage patient's health care needs.
- Knowledge of and an ability to network resources within and outside the NTHSSA (i.e. Social Services, Public Health, medevac 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 advance nursing practice in order to provide current, relevant and

feasible consultation services.

- 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 (part of the professional accountability for code of ethics and standards of practice).
- 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 is commonly acquired through the successful completion of a Nursing Degree, plus a postgraduate education program as a Nurse Practitioner and 2 years directly related nursing experience.

Within the NTHSSA all NPs must be registered as an NP with the RNANT/NU and have completed a satisfactory criminal record check.

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.

Must have a Valid Class 5 Driver's License

**ADDITIONAL REQUIREMENTS**

**NTHSSA - Sahtu Regional Requirements:**

Within the Sahtu Region the PHC-CNP must be able to acquire within a reasonable timeframe and remain current with the following training and/or certifications:

- WHMIS & TDG
- Non-Violent Crisis Intervention
- Standard X-Ray processing
- CPR & AED
- Canadian Triage and Acuity Scale (CTAS)
- Immunization Certificate
- Other internal certification programs (IO's, Lab, Pharmacy, x-ray)
- Non-violent Crisis Intervention
- Cultural Training



- Hand Washing Certificate
- Mental Health First Aid
- Applied Suicide Intervention Skills Training (ASIST)
- Training as required by Accreditation Canada

Within the Sahtu Region Community Health Centre the following training and/or certifications would be a definite asset:

- Canadian Nurse Association Certificates
- PALS
- NRP
- ITLS
- Advanced Cardiac Life Support (ACLS)
- Trauma Nursing Core Course (TNCC)
- Pre-Transportation Patient Preparation Certification (PACKAGING)

**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 if applicable)

- ☐ French required (must identify required level below)

Level required for this Designated Position is:

ORAL EXPRESSION AND COMPREHENSION

Basic (B) ☐ Intermediate (I) ☐ Advanced (A) ☐

READING COMPREHENSION:

Basic (B) ☐ Intermediate (I) ☐ Advanced (A) ☐

WRITING SKILLS:

Basic (B) ☐ Intermediate (I) ☐ Advanced (A) ☐

- ☐ French preferred

**Aboriginal language:** To choose a language, click here.

- ☐ Required
- ☐ Preferred