



Job Description

Post Title:	Clinical Nurse Specialist, Multiple Sclerosis (CNM 2)
Post Status:	Permanent Contract
Department	Neurocent Department
Location:	Beaumont Hospital, Dublin 9
Reports to:	Directorate Nurse Manager
Salary:	Appointment will be made on Clinical Nurse Manager 2 Grade (€48,089-€56,852) at a point in line with Government pay policy.
Hours of work:	Full time 39 hours per week
Closing Date:	12 Noon on Monday 25 th September 2017

Position Summary:

Multiple Sclerosis typically affects individuals in the prime of their lives, and is more common in women. The condition is characterised in some cases by initial relapses and remissions, with associated evolving disability, and in others by progressive disability from the outset. Patients with MS require support in coming to terms with the diagnosis of a chronic illness with an uncertain prognosis. They face the prospect of both intermittent and progressive loss of neurological function over a period of time, and the associated social and personal consequences of this loss. The role of the MS specialist nurse is to provide information and support at the time of initial diagnosis and when therapies are being commenced; to facilitate access to hospital and community based services, to provide a link for patients to the hospital-based services, and to interface between the medical services and those provided by voluntary organizations.

Principal Duties and Responsibilities:

CLINICAL FOCUS

Patient Management

In Multiple Sclerosis, the main thrust of care should be to enable the patient to live as full and normal a life as possible. The emphasis should be on maintaining optimum quality of life, whether the person is minimally or severely disabled.

The approach of the MS nurse should be flexible and supportive. Patients with MS can have long periods of stability or remission, during which they may require minimal input. However, at the time of diagnosis, when commencing new treatments, during relapses, and in patients with severe disability, the early intervention by the clinical specialist nurse can contribute significantly to the quality of care and patients quality of life.

This involvement of the specialist nurse will also contribute to the preservation of a positive attitude by the patient and the carer and to the ability of the patient to access appropriate services.

The approach by the Multiple Sclerosis nurse towards care of MS patients can be defined in terms of the implications of the disease:-



1. At the time of Diagnosis

The specialist nurse is an integral part of the team and is important in ensuring continuity of care. Her main roles are as follows:-

- To ensure that the patient and family are provided with adequate information, and with sufficient practical and emotional support at the time of diagnosis. This important interaction between the patient and the medical profession should take place in an appropriate setting, with adequate time for questions. On many occasions, patients are more comfortable and relaxed discussing particular issues with the nurse than with other members of the medical team. The nurse often remains with the patient and family members at the end of the formal interview, to clarify points surrounding the diagnosis.
- To provide support and information about the condition. This is achieved by being present at the time that the diagnosis is discussed, and by being available by telephone, to follow up. The nurse has access to explanatory material from the MS Society which she provides to patients as required.

To provide information and education on disease modifying therapy (DMT) if this is being commenced

- To arrange appropriate referral to relevant medical and paramedical specialists where required. The nurse has a well-developed relationship with the clinical professional services, both within the Hospital and in the community.
- To provide referral to and co-operation with the appropriate voluntary organisation.

2. In terms of symptom management during the different phases of the disease

The MS Nurse specialist provides information to both patients and colleagues regarding the management of relapses, and in the management of fixed deficits including:-

- Weakness and spasticity nursing management of Intrathecal Baclofen Pumps
- Continence care including bowel and bladder dysfunction
- Mood disturbance, depression and coping difficulties
- Bulbar dysfunction
- Emotional lability
- Pain
- Visual disturbance

3. In terms of ability of patients with MS to engage in activities of daily living

The MS nurse liaises with and co-ordinates hospital and community based rehabilitation that addresses the following:-

- Problems with disease modifying therapy (DMT), including drug reactions, monitoring protocols etc
- Problems with continence and management of bowel issues.
- Access to community occupational therapy for advice about changes to living space
- Access to hospital based and community based physiotherapy for management of gait disturbance and spasticity
- Access to neuropsychology, psychiatry and allied services for management of mood disorders and cognitive decline
- Access to appropriate counselling services
- Liaison with community and voluntary bodies



4. In terms of loss of employment, earnings and social standing

The nurse facilitates services that cater for the following:-

- Liase closely with medical social work team.
- Requirement for information on status and access to benefits in the event of loss of employment
- Redeployment in workplace and ultimately early retirement
- Requirement for support through the general medical service, including the provision on a long term illness care
- Reduced income and its effects on the patient and family

5. In terms of social interactions

The nurse has extensive communication with the families and associates of patients with MS and assist in managing the following:-

- Effects of diagnosis and disease progression on partner and family
- Effects of diagnosis and disease progression on school going children
- Stigma of disease
- Burden of disease for primary carer in patients with severe disability

Hospital Based Care

Many patients with MS require hospitalisation at some stage of their condition. The MS specialist nurse plays an integral role in the management of patients and in the smooth transfer from hospital based to community based services.

Inpatients

The MS nurse is available to physicians at the time of diagnosis of patients with MS. Where possible, she attends the meeting in the hospital at which the patient is told of their diagnosis, and where appropriate she facilitates their early attendance to the relevant clinic post discharge. Education around a new DMT is provided where appropriate.

Neurology Day Unit

The MS nurse also sees MS patients in the day unit at the time of relapse assessment, for DMT pre-assessment and education, at the time of Fampyra assessment etc.

Outpatients

The multidisciplinary clinic provides a focal point for the medical management of patients with MS, and works in parallel with rehabilitation services. The clinic is attended by a multidisciplinary team including neurology, physiotherapy, and occupational therapy. The Community Care Officer from the MS Society also attends the clinic. There is same day access to speech and language therapy, psychiatry and medical social work.

The role of the MS nurse is to provide a combination of clinical expertise and patient support service in conjunction with the medical staff of the clinic, and the MS Society.

Patients who require an urgent review of their condition can be 'fast tracked' to the next MS clinic by contacting the MS nurse. If the patient's condition is deteriorating at a rate that requires emergency review, the nurse can overbook the patient to the next available general neurology clinic (usually within 5 days), or can advise the patient to consult their general practitioner with a view to referral to casualty.

A number of MS patients also follow up in several general neurology clinics which the MS nurse attends each week.

Home Care

Following diagnosis, the nurse ensures that there is a seamless transfer to the community services where required. She remains in close contact with the patient and family and is available as a resource at times of acute relapse, or sub-acute decline. Where necessary, the nurse assists in accessing the necessary equipment to maintain quality of life, and activities of daily living to the highest degree possible. She arranges that appropriate support is provided in a timely fashion by the community based general medical services.



Respite Care

Patients with disabling MS should have access to respite care, either under the direction of the neurologist, or a rehabilitation physician. As the co-ordinator of the multidisciplinary team, the nurse is in a position to advise on the necessity of respite care. For the patient, this permits medication review, intensive physiotherapy, occupational therapy assessment and the construction of custom-made appliances and management of depression and anxiety. For the carer, regular respite is necessary to ensure the continuance of care at home and to prevent burnout.

Day Care

Patients with severe disabling MS should have access to day care. This is necessary for those whose mobility is severely limited. Day care services can provide an essential social outlet and can facilitate the provision of other services including psychological support and counselling and interaction with other individuals in similar circumstances. The liaison nurse assists in identifying patients who would benefit from day care, and provides a liaison service between the patient, the community services, medical social services and the hospital based multidisciplinary team.

Telephone Service

Provision of a dedicated telephone support line available to patients and professionals.

Selection Criteria:

Selection criteria outline the qualifications, skills, knowledge and/or experience that the successful candidate would need to demonstrate for successful discharge of the responsibilities of the post.

Applications will be assessed on the basis of how well candidates satisfy these criteria.

Mandatory:

- Registered in the General Register of Nurses maintained by An Bord Altranais.
- A minimum of 5 years post registration experience, with a minimum of 2 years in relevant area.

Desirable:

- A relevant post-graduate qualification desirable.
- Management course desirable.



Beaumont Hospital

Ospidéal Beaumont



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Further Information for Candidates

Supplementary information:

The Hospital	www.beaumont.ie
Management Unit:	www.beaumont.ie/hr

Informal Enquiries ONLY to:

Name:	Sharon Trehy
Title:	Directorate Nurse Manager
Email address:	sharontrehy@beaumont.ie
Telephone:	01 8098337

Application Procedure:

Candidates should submit a full curriculum vitae to include the names and contact details of 2 referees (email addresses if possible) to recruitmentoffice@beaumont.ie, referencing the job vacancy in the subject line.

A short listing exercise may be carried out on the basis of information supplied in your application. The criteria for ranking and or short listing are based on the requirements of the post as outlined in the eligibility criteria and skills, competencies and/or knowledge section of this job specification.