SENIOR/SPECIALIST AND ADVANCED PRACTITIONER
JOB PLANNING GUIDANCE
Guidance for Practitioners and line managers

Introduction
This guidance has been produced to assist senior/specialist and advanced practitioners in the development of job planning in the West of Scotland.

Job planning provides the opportunity for practitioners and managers to negotiate a prospective agreement that sets out the practitioner’s duties and responsibilities for the coming year. Job planning has been introduced to help ensure that practitioners are in a position to maintain their expertise and to deliver high quality patient care.

What’s the purpose of job planning?
The job planning process is an opportunity to look at current working practices and to consider alternatives to deliver high quality services. In most cases, the job plan will build upon the practitioners existing commitments.

It is also an opportunity to think about the way the practitioner works and how the service is organised and can be improved.
The process enables the line manager and staff member to:-
• Identify what has affected the Job plan
• Agree what changes to duties may be needed
• Agree a plan for achieving service objectives
• Review personal development needs

The job planning process can sit alongside the Knowledge and Skills Framework (KSF) development review process, and may be undertaken at the same time. Advanced Practitioners should take cognisance of the guidance from the Scottish Government on Supporting the Development of Advanced Nursing Practice (SGHD 2008).

A KSF post outline describes the knowledge and skills which are required to be applied within a post and forms the basis for a development review so that a Personal Development Plan (PDP) can be jointly agreed between the individual member of staff and the ‘reviewer’ (usually the line manager). The development review’s main purpose is to look at the way in which an individual member of staff is developing in relation to the duties and responsibilities of their post and the application of knowledge and skills within the post. The job planning process looks at the work practitioners propose to do on a daily basis so that they can meet their agreed duties, responsibilities and objectives for the coming year. Job plans are flexible and adaptable and therefore should not be viewed as restrictive. Where significant personal or service requirements necessitate, the agreed job plan should be reviewed. For example, if a practitioner were to change their hours, undertake a new course, or if a new service or targets were introduced.
Who should complete a job plan?
Any Senior/Specialist or Advanced Practitioner that is currently recorded by the Information and Statistics Division (ISD), NHS Scotland as being a ‘clinical nurse specialist’ should complete a job plan (see box). Nurse Practitioners are explicitly included in this definition. There may be exceptional reasons why a job plan may not be required, for example if a practitioner is on secondment and not practising in their normal role. Exceptions should be agreed between the practitioner’s line manager and the Senior Nurse for a service.

A clinical nurse specialist is a registered nursing professional who has acquired additional knowledge, skills and experience, together with a professionally and/or academically accredited post-registration qualification (if available) in a clinical specialty. They practice at an advanced level and may have sole responsibility for care episode or defined client/group.

ISD (2007)

Practitioners who feel they meet the definition above, but are not recorded by ISD should, in the first instance, discuss with their line manager and seek to ensure they are recorded.

Probably the most efficient way to complete a job plan is for the practitioner to populate the template (see Appendix 1) and then negotiate the detail with their line manger. The agreed job plan will be kept in the practitioner’s personal file and a copy should be kept by the practitioner. The Senior Nurse and/or Director of Nursing can request to view a practitioner’s job plan as required.

When should the job plan be completed?
The job plan should be reviewed on an annual basis, but may be reviewed more frequently if there are exceptional changes to either the practitioners circumstances or the service’s needs. The practitioner or the line manager can initiate a job plan review. Job planning may be undertaken at the same time as the KSF development review and has strong links with this process.

Practitioners who are new into post should discuss their job plan with their line manager on starting a new post. A tentative job plan could be included with the recruitment paperwork to give prospective applicants an idea of what the job may entail on a day-to-day basis. New job plans should be reviewed at six-months (or before) possibly at the same time as a KSF foundation interim review. Line managers may wish to consider agreeing a ‘foundation’ or ‘training’ job plan for the initial period of a new job. This may include agreed study time and/or placements.

How should I complete my job plan?
There is no absolute right way or wrong way to complete a job plan, however there should be sufficient detail within the plan so that the practitioner and line manager can

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1 It is recognised that ISD currently captures specialist and advanced practitioners as ‘Clinical Nurse Specialists’.
2 The appropriate level of senior nurse would be decided by Board

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agree that the practitioner’s duties, responsibilities and objectives are clear, and can be met within the coming year. An example job plan is contained within Appendix 2 and a blank template can be found in Appendix 1.

Job plans should be based on sessions which are approximately 4 hours long (and include breaks)\(^3\). A full-time practitioner will therefore have 10 sessions in a weekly period. Sessions can be divided into half sessions if this is appropriate. Part-timer practitioners may have one or more partial sessions.

Sessions should be identified as:

- **Clinical** sessions
- **Supporting Professional Activity (SPA)** sessions or
- **Integrated** Clinical and SPA session.

If your senior/advanced practice role is a clinical role you should aim to ensure that an appropriate proportion\(^5\) of your working week relates to clinical activity.

**COMMONLY ASKED QUESTIONS**

**What are clinical sessions?**
Clinical sessions are any session where a practitioner has a direct or indirect impact on patient care.

**Direct clinical sessions** (are where you deliver care yourself) and might include\(^6\):
- Nurse led clinics
- Nurse led care
- Group work with patients
- Health education sessions
- Multidisciplinary clinics
- Ward rounds
- Telephone consultations with patients or carers
- One-to-one patient care
- Clinical supervision

**Indirect clinical sessions** (are where you deliver care through others) and might include\(^6\):
- Advising other members of the multidisciplinary care on specific care matters (this may be face-to-face, via telephone, email or letter).
- Writing guidelines or protocols

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\(^3\) For the occasional post this session based format may not be appropriate. In these circumstances the practitioner should negotiate an alternative format with their line manager.

\(^4\) It is recognised that under Agenda for Change terms and conditions that a full-time working week is 37.5hrs.

\(^5\) The appropriate proportion will be the decision of the local service

\(^6\) The activities listed are examples and are not a exhaustive list
• Clinical management (managing staff on the shop floor to care for patients)
• Handling patient complaints
• Clinical supervision at a distance (e.g. available for advice)
• Multidisciplinary meetings

**What are Supporting Professional Activity sessions?**
Supporting professional Activities the other activities which are central to the role of a senior/specialist or advanced practitioner and include leadership, education and research.

Supporting Professional Activities might include:

• Continuing Professional Development
• Off-duty rostering
• Teaching (inc. in-house or university)
• Audit
• Research
• Job planning
• Contributions to service management and planning
• Clinical governance activities
• And any other supporting professional activity

The final decision about what constitutes a clinical or SPA activity will be decided by your line manager.

**What are integrated clinical and SPA sessions?**
It is recognised that in many senior/advanced nursing roles practitioners it is not always possible to separate clinical and SPA activities into discreet sessions, and that practitioners have to balance clinical and SPA activities during the same session. This is often done during quieter sessions where the practitioner may opportunistically undertake SPA activities when clinical activity is quiet.

Practitioners should indicate on their job plan the relative proportion of clinical to SPA time within an integrated session, although it is recognised that this may be difficult. This should be done in consultation with your line manager.

**What is meant by location?**
On the job plan template it asks for location. Location relates to the area where the clinical or SPA activity is undertaken and may include:

• A specific ward
• A specific clinic or department or treatment room
• A patient’s home
• A specific office
• A meeting room

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7 Local guidance may be available

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• An NHS library
• A university

**How can I estimate the number of patients I might deal with?**
Where it is appropriate the approximate number of patients you might expect to deal with during a clinical session should be indicated. It is recognised that for some practitioners this will be relatively easy to estimate and for others it will be very difficult.

Where patients are seen in a nurse-led clinic, efforts should be made to ensure this information is captured by ISD. Figures from previous clinics can be used to help calculate estimates for the coming year.

It is reasonable to give a range of patients that may be dealt with during a session. If the type of contact varies during a session it would be helpful to document this. For example if 4-6 new patients are seen face-to-face in a clinic, plus 8-10 return patients and a further 2-4 patients are contacted by telephone during a clinical session then this information can be put in the job plan.

Practitioners should take care when estimating patient numbers that average numbers approximately equate to the numbers of patients seen over a one year period

**What are additional activities?**
It is recognised that many senior/advanced practitioners will undertake additional activities on a regular basis, but not on a weekly basis. The type of activity, location and frequency should be listed under additional activities. It should be indicated on the job plan whether the activity is clinical or SPA. Types of additional activity commonly undertaken include:

- CNS meetings (SPA)
- Senior Nurse meetings (SPA)
- Teaching at university (SPA)
- Revising protocols (Clinical)
- Examining students (SPA)
- Managed Clinical Network meetings (SPA)
- Case conferences (Clinical)

For each of these additional activities it should be indicated which of the sessions this activity would replace.

Internal additional activities are activities undertaken for or on behalf of the NHS organisation you are employed by.

External additional activities are activities undertaken for or on behalf of other organisations e.g. Other NHS organisations, professional associations or colleges, universities etc.


APPENDIX 1

NHS xxxxx
SENIOR/SPECIALIST AND ADVANCED PRACTITIONER
JOB PLAN TEMPLATE

Name:        Specialty:

Principal Place of work:

Managerially Accountable to:

Professional Accountable to:

a) timetable of activities which have a specific location and time (e.g. 8am – 8pm Monday-Friday)

<table>
<thead>
<tr>
<th>Session</th>
<th>Day and time</th>
<th>Location</th>
<th>Type of work (Clinical, SPA or Integrated)</th>
<th>Additional Detail</th>
<th>Estimated no. of patients reviewed (if appropriate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Monday Morning session (times)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>Monday Afternoon session (times)</td>
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<td>3</td>
<td>Tuesday Morning session (times)</td>
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<td>4</td>
<td>Tuesday Afternoon session (times)</td>
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<td>5</td>
<td>Wednesday Morning session (times)</td>
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<tr>
<td>6</td>
<td>Wednesday Afternoon session (times)</td>
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<td>7</td>
<td>Thursday Morning session (times)</td>
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<tr>
<td>8</td>
<td>Thursday Afternoon session (times)</td>
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<tr>
<td>9</td>
<td>Friday Morning session (times)</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Friday Afternoon session (times)</td>
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</tr>
</tbody>
</table>
b) Additional Activities (internal)

<table>
<thead>
<tr>
<th>Location</th>
<th>Type of work (Clinical, SPA or Integrated)</th>
<th>Additional Detail</th>
<th>Frequency</th>
<th>Session usually undertaken in</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

c) Additional Activities (External)

<table>
<thead>
<tr>
<th>Location</th>
<th>Type of work (Clinical, SPA or Integrated)</th>
<th>Additional Detail</th>
<th>Frequency</th>
<th>Session usually undertaken in</th>
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</tbody>
</table>
This is an agreed job plan for: .......................................................................................... 

with effect from ........................................................................................................

This job plan will be subject to review at least annually or more often if the re-design of services or changes to staffing resources, working practices or where the practitioner’s circumstances require it.

Signed: ..............................................
Signed: ..............................................

Name: ..............................................
Name: ..............................................

Date: ..............................................
Date: ..............................................
**APPENDIX 2**

**NHS GREATER GLASGOW & CLYDE**
**SENIOR/SPECIALIST AND ADVANCED PRACTITIONER**
**JOB PLAN**

**Name:**

**Specialty:**

**Principal Place of work:**

**Managerially Accountable to:**

**Professional Accountable to:**

d) **timetable of activities which have a specific location and time (e.g. 8am - 8pm Monday-Friday)**

<table>
<thead>
<tr>
<th>Session</th>
<th>Day and time</th>
<th>Location</th>
<th>Type of work (Clinical, SPA or Integrated)</th>
<th>Additional Detail</th>
<th>Estimated no. of patients reviewed (if appropriate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Monday Morning session (8am-12)</td>
<td>Outpatient clinic, GRI</td>
<td>Clinical</td>
<td>Nurse-led pre-op assessment clinic</td>
<td>8-12 patients (face-to-face)</td>
</tr>
<tr>
<td>2</td>
<td>Monday Afternoon session (12-4pm)</td>
<td>Office, GRI</td>
<td>Integrated (50% clinical, 50% SPA)</td>
<td>Write up case notes, write letters to GP, update operating list Managerial tasks - respond to emails, off-duty, etc.</td>
<td>8-12 case notes 4-6 GP letters</td>
</tr>
<tr>
<td>3</td>
<td>Tuesday Morning session (8am-12)</td>
<td>Outpatient clinic, WIG</td>
<td>Clinical</td>
<td>Nurse-led pre-op assessment clinic</td>
<td>8-12 patients (face-to-face)</td>
</tr>
<tr>
<td>4</td>
<td>Tuesday Afternoon session (12-4pm)</td>
<td>Outpatient clinic, WIG</td>
<td>Clinical</td>
<td>Nurse-led pre-op assessment clinic</td>
<td>8-12 patients (face-to-face)</td>
</tr>
<tr>
<td>5</td>
<td>Wednesday Morning session (9am-1)</td>
<td>Seminar Room, Vic</td>
<td>SPA</td>
<td>Teaching (university accredited course)</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Wednesday Afternoon session (1-5pm)</td>
<td>Office, GRI</td>
<td>SPA</td>
<td>Research</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Thursday Morning session (8am-12)</td>
<td>Outpatient clinic, GRI</td>
<td>Clinical</td>
<td>Nurse-led pre-op assessment clinic</td>
<td>8-12 patients (face-to-face)</td>
</tr>
<tr>
<td>8</td>
<td>Thursday Afternoon session (12-4pm)</td>
<td>Outpatient clinic, GRI</td>
<td>Clinical</td>
<td>Nurse-led pre-op assessment clinic</td>
<td>8-12 patients (face-to-face)</td>
</tr>
<tr>
<td>9</td>
<td>Friday Morning session (8am-12)</td>
<td>Outpatient clinic, GRI</td>
<td>Clinical</td>
<td>Nurse-led pre-op assessment clinic</td>
<td>8-12 patients (face-to-face)</td>
</tr>
<tr>
<td>10</td>
<td>Friday Afternoon session (12-4pm)</td>
<td>Outpatient clinic/Office, GRI</td>
<td>Integrated</td>
<td>Nurse-led pre-op assessment clinic Managerial activities</td>
<td>2-3 patients</td>
</tr>
</tbody>
</table>
### Additional Activities (internal)

<table>
<thead>
<tr>
<th>Location</th>
<th>Type of work (Clinical, SPA or Integrated)</th>
<th>Additional Detail</th>
<th>Frequency</th>
<th>Session usually undertaken in</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office, GRI</td>
<td>Clinical</td>
<td>Guideline development</td>
<td>Monthly</td>
<td>5 (if not teaching)</td>
</tr>
<tr>
<td>Seminar room, GRI</td>
<td>SPA</td>
<td>Senior staff meeting</td>
<td>Monthly</td>
<td>5 or 6 (alters monthly)</td>
</tr>
<tr>
<td>Meeting room, Vic</td>
<td>Clinical</td>
<td>MDT meeting</td>
<td>Bi-monthly</td>
<td>2</td>
</tr>
</tbody>
</table>

### Additional Activities (External)

<table>
<thead>
<tr>
<th>Location</th>
<th>Type of work (Clinical, SPA or Integrated)</th>
<th>Additional Detail</th>
<th>Frequency</th>
<th>Session usually undertaken in</th>
</tr>
</thead>
<tbody>
<tr>
<td>University</td>
<td>SPA</td>
<td>Examiner</td>
<td>Twice yearly</td>
<td>6 (but can vary)</td>
</tr>
<tr>
<td>RCN, London</td>
<td>SPA</td>
<td>Committee Member</td>
<td>Four-times a year</td>
<td>Varies, but only go if in a Wednesday or can get cover for clinical session</td>
</tr>
<tr>
<td>Brighton</td>
<td>SPA</td>
<td>Conference</td>
<td>Yearly</td>
<td>9 and 10, if cover can be arranged.</td>
</tr>
</tbody>
</table>
This is an agreed job plan for: .................................................................

with effect from .................................................................

This job plan will be subject to review at least annually or more often if the re-design of services or changes to staffing resources, working practices or where the practitioner’s circumstances require it.

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