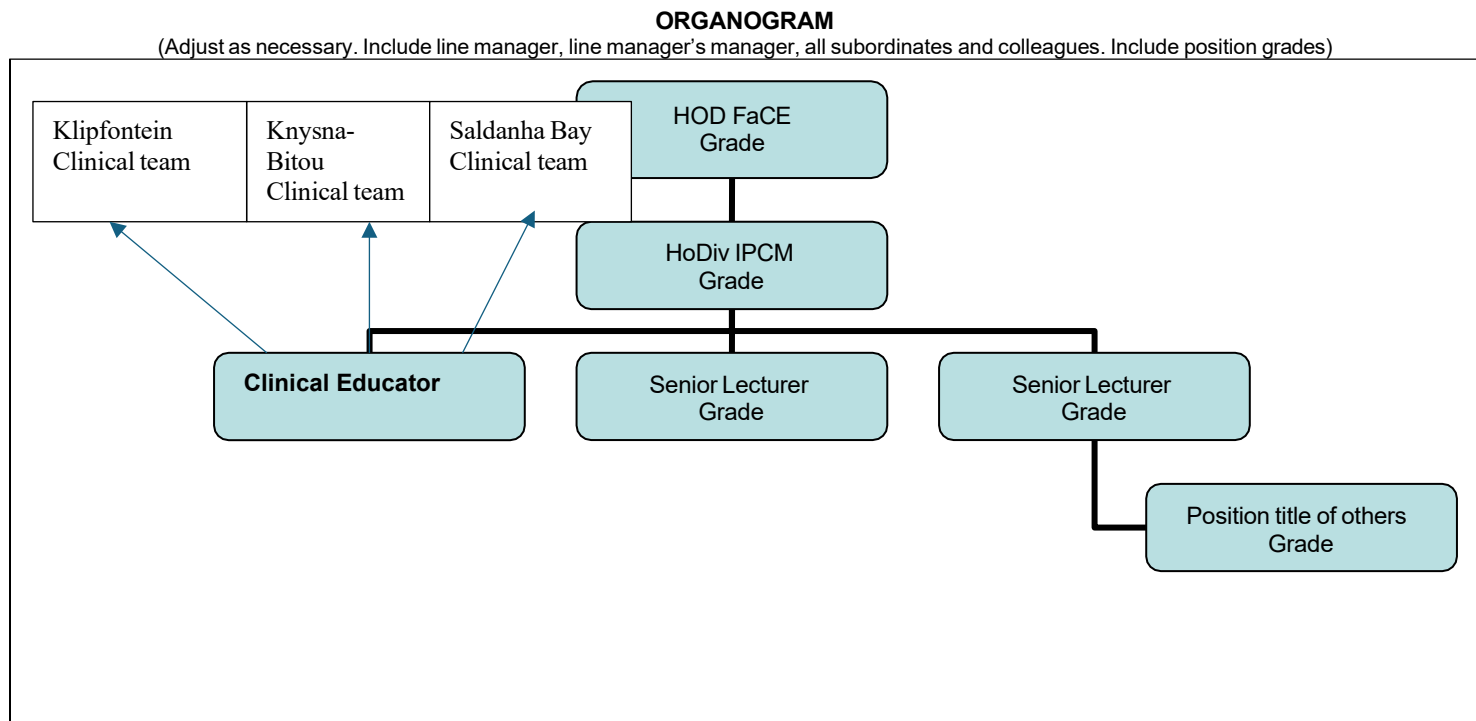


HR191	POSITION DESCRIPTION	 UNIVERSITY OF CAPE TOWN IYUNIVESITHI YASEKAPA • UNIVERSITEIT VAN KAAPSTAD
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- NOTES
- Forms must be downloaded from the UCT website: <https://forms.uct.ac.za/forms.htm>
 - This form serves as a template for the writing of position descriptions.
 - A copy of this form is kept by the line manager and the position holder.

POSITION DETAILS			
Position title	Clinical Educator		
Job title (HR Business Partner to provide)	Clinical Educator		
Position grade (if known)	Clinical Educator	Date last graded (if known)	
Academic faculty / PASS department	Faculty of Health Sciences		
Academic department / PASS unit	Family Community and Emergency Care		
Division / section	Interdisciplinary Palliative care and Medicine		
Date of compilation	May 2025		



PURPOSE

The main purpose of this position is to assist in the integration of palliative care into the Community Orientated Primary Care (COPC) model in the Klipfontein, Saldanha Bay and Knysna/Bitou sub-districts. This will be achieved through formal teaching and training, mentorship and community engagement. This clinical educator needs to be actively working with communities, primary health staff, district hospital staff, the Department of Health and UCT to identify barriers, and enablers to integrate palliative care into the COPC approach. This clinical educator will be actively involved in developing toolkits, standard operating procedures and other innovative approaches to deliver palliative care in the communities. This will require community engagement, site visits, home visits and wider networking with other stakeholders to guide teaching and training. The position holder will also be involved in research and advocacy projects. The position holder will represent palliative care in wider Healthy Futures SA projects.

This will require excellent palliative care knowledge, organisational skills, teaching and training skills and interpersonal skills. Research skills will be advantageous. The position holder needs to be fluent in at least two of the languages spoken in the Western Cape and have the ability to engage with communities at community level.

CONTENT

Key performance areas		% of time spent	Inputs (Responsibilities / activities / processes/ methods used)	Outputs (Expected results)
1	Teaching and training	30%	- Teaching and training of primary health staff and community workers in palliative care. - Participate in training of UCT UG and PG students. - Development of teaching and training materials for teaching and training for CHW and community members. - Advocacy and community training in palliative care - Creating a teaching platform for palliative care in each of the 3 sites	75% Primary care staff and community workers are trained in the 3 sites have basic palliative care skills. - Identifying primary care staff for further training in the CCPN training. 5% staff have intermediate level PC training. 100 community members per site have basic understanding of PC
2	Mentorship and support	20%	- Clinical teams in each site are regularly mentored on complex cases. - Mentoring on home visits. - Support of trained staff in managing gaps in integration of PC into routine services. - Support of the establishment of support groups for community members	- Regular mentorship meeting for primary care staff and CHW's - A support group is established for communities
3	Liaising with communities and advocating palliative care	15%	- Quarterly meetings are held with community groups regarding the care of PC patients. - An PC advocacy programme is held according to community needs. - Regular feedback is provided to the HFSA team regarding community palliative care concerns - Young people from each community are identified for further training in PC and home based care, and supported to gain employment.	- Documented community engagement with a variety of stakeholders including patients and families. - Palliative care days are held in the communities with awareness campaigns. - Young community members enter PC training and become employable.
4	Assist in linking with community-based services	10%	Networking, mapping and maintaining a database of community services for palliative care services from hospital to home.	A mapped plan and database is in place for patients and families across all levels of care which includes physical and psycho-social and spiritual care.
5	Developing primary care standard operating procedures and toolkits for the provision of palliative care	10%	- Support the development of PC community SOPs - Support the development of community toolkits to deliver PC - Liaison with Knowledge Translation Unit	Developed SOPs and toolkits
6	Monitoring and evaluating palliative care in Community Orientated Primary Care and participation in research projects	15%	- Initiate and support the development of appropriate and sustainable monitoring and evaluation tools - Participate in relevant PC research.	- PC services are monitored and evaluated in the 3 sites - Research questions regarding new knowledge of community-based PC services are generated and addressed

MINIMUM REQUIREMENTS

Minimum qualifications	- Registered Professional Nurse or Social Worker - Post graduate qualification in palliative care			
Minimum experience (type and years)	5 years as a registered Professional Nurse/social worker 3 years in palliative care			
Skills	- Nursing/social worker - Community care - Palliative care - Teaching and training			
Knowledge	- Palliative care - Primary Care			
Professional registration or license requirements	Registration with the South African Nursing Council (SANC) as a registered/professional nurse or as a social worker with the South African Council for Social Service Professions (SACSSP/Council)			
Other requirements (If the position requires the handling of cash or finances, other requirements must include 'Ability to handle cash or finances'.)	- Demonstrate previous experience working at the primary care level and home care services. - Organisational skills. - Verbal skills in at least 2 of the languages of the Western Cape - Excellent written communication skills. - Ability to work within an interdisciplinary team - Ability to build and maintain effective partnerships and relationships with internal and external stakeholders. - Access to own transport to visit clinical sites and other off-campus meeting venues and may require overnight stays. Advantageous: - Research skills - A Masters degree relevant to palliative care.			
Competencies (Refer to <u>UCT Competency Framework</u>)	Competence	Level	Competence	Level
	Analytical thinking/ Problem solving	2	Initiating action	2
	Building interpersonal relationships	2	Professional knowledge and skill	2
	Client /Student service and support	2	Individual leadership	2
	Communication	2	Teamwork/collaboration	2
	Client /Student service and support	2	People management	2

SCOPE OF RESPONSIBILITY

Functions responsible for	- Professional palliative care nurse trainer and mentor - Guide and assist in community PC integration - Liaison with communities and NGO teams - Monitoring and evaluation and research
Amount and kind of supervision received	Reports to Head of Division: Interdisciplinary Palliative Care and Medicine
Amount and kind of supervision exercised	Mentors existing CHW and primary care staff.
Decisions which can be made	How and when training and mentorship occurs. How and when community liaison occurs.
Decisions which must be referred	Content of training, interactions with DOH and NGO managers

CONTACTS AND RELATIONSHIPS

Internal to UCT	IPCM staff Family Medicine staff Division of Nursing UCT students
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External to UCT	DOH Hospitals, clinics and social services in the 3 sites NGO Community Members
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