**Sam Jones Uro-ncology CNS**

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| **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **Telephone & Email response:**  Check inpatient list, prioritise if inpatient visit required  **AM Oncology Clinic (consultant):**  Outpatients new Outpatients follow up Physical Assessment-specialist assessment Symptom control (specialist) Promoting self-management Psychological assessment Supporting clinical choice and meeting information needs Social assessment Referrals **Clinical Admin**  **Urology Clinic: x1 Clinician**  Physical Assessment-specialist assessment Symptom control (specialist) Promoting self-management Psychological assessment Supporting clinical choice and meeting information needs Social assessment Referrals  **Clinical Admin**  **PM: Oncology Clinic** Physical Assessment-specialist assessment Symptom control (specialist) Promoting self-management Psychological assessment  Supporting clinical choice and meeting information needs Social assessment  Referrals **Clinical Admin**  **Urology Clinic: x1** Clinician(1st/3rd/5th): Physical Assessment-specialist assessment Symptom control (specialist) Promoting self-management  Psychological assessment Supporting clinical choice and meeting information needs Social assessment Referrals **Clinical Admin**  **Review Inpatients**: Symptom control, psychological, family meetings, informal teaching, referrals etc  **Telephone response work** Assessment, rescue work, prevention of unscheduled care  **Email response**: patients/consultants. Booking clerks/ health care professionals **Non clinical admin** | **Telephone & Email response**  **Oncology Clinic:**  Outpatients new &  follow up Physical Assessment-specialist assessment Symptom control (specialist) Promoting self-management Psychological assessment Supporting clinical choice and meeting information needs Social assessment, Referrals **Clinical Admin**  **Urology Clinics x 4 clinicians:**  Outpatients new Outpatients follow up Physical Assessment-specialist assessment Symptom control (specialist) Promoting self-management Psychological assessment Supporting clinical choice and meeting information needs Social assessment Referrals **Clinical Admin**  **Nurse Led Stable PSA Clinic:** 2-2.50pm men coming in for OPA, 3-4pm **Telephone clinic.** Assessing men with stable disease that have previously undergone surgery, DXT, Brachytherapy, or on long term hormone therapy. Psycho-sexual Physical Assessment-specialist assessment Symptom control (specialist) Promoting self-management Psychological assessment Prescribing medications  Requesting investigations  **Telephone & Email response work**  Assessment, rescue work, prevention of unscheduled care | **Telephone & Email response:**  **Review Inpatients**: Symptom control, psychological assessment  family meetings, informal teaching, referrals  **Service Development/management**  **Sourcing educational days/courses/conferences.**  **Clinical Admin & Non clinical admin** including routine chasing up  **Performing procedures (TWOC)**  **Telephone Response work** Assessment, rescue work, prevention of unscheduled care  **Network MDT 3-4pm** Brokering care  **Review Inpatients**: Symptom control, psychological, family meetings, informal teaching, referrals etc Check MDT List  **MDT preparations**. Brokering of investigations/reporting  TSSG/CNS/AOCNS meetings 2nd Wednesday of the month: Leadership work-monitoring standards, vigilance & role modelling Informal and formal teaching  **Professional activity** ie regular meetings/journal clubs/grand rounds etc Service development/management  **Telephone Response work** Assessment, rescue work, prevention of unscheduled care  **Email response:** patients/consultants. Booking clerks/ health care professionals **Non clinical admin** | **Telephone (urgent only) response work**  **08.30- 10.15 MDT** Meet with other team members to discuss new patients and review current patients with progressive disease Review results & act on findings, Patient advocate **Case management** Handover from MDT referrals, investigations, follow-up, liaison with HC professionals etc . Brokering of investigations and reporting. Case management work.  **Email response work & MDT Non clinical admin**  **Oncology Clinic:** Physical Assessment-specialist assessment, Symptom control (specialist) Promoting self-management  Psychological assessment Supporting clinical choice and meeting information needs  Social assessment Referrals **Clinical Admin**  **Only Urgent Telephone response** work Assessment, rescue work, prevention of unscheduled care  **Email response:** patients/consultants. Booking clerks/ health care professionals | **Telephone & email response:**  **Nurse Led TURBT Clinic** (am 2nd/4th)  Outpatients new  Outpatients follow up  Physical Assessment-specialist assessment  Communicating significant news Symptom control (specialist) Promoting self-management Psychological assessment Supporting clinical choice and meeting information needs Social assessment  **Case management** Handover from MDT referrals, investigations, follow-up, liaison with HC professionals etc . Brokering of investigations and reporting. Case management work.    **14:00 – 16:00 Nurse Led TURBT Clinic (1st/3rd PM)**  **Urology Clinic: x1 Clinician:** Physical Assessment-specialist assessment  Symptom control (specialist)  Promoting self-management  Psychological assessment  Supporting clinical choice and meeting information needs Social assessment  **Only Urgent Telephone response** work Assessment, rescue work, prevention of unscheduled care  Email response |

**Ad hoc** Visit wards/DTC/Day Unit as requested to review patients & meet new patients. TSSG/CNS/AOCNS meetings 2nd Wednesday of the month Clinical Governance meeting every 3 months Flexi clinics run most days and although we are not in attendance can be bleeped. Trial without catheter(TWOC) adhoc Living Well study day 3-4 times a year from Nov 2013.