POSITION DESCRIPTION

Position Title: Breast Health Specialist Date:

Department: Surgery Written By: Human Resources

Reports To: Ambulatory Supervisor Facility: UHC - Breast Care Center

I. POSITION SUMMARY:

The Breast Health Specialist provides nursing care and breast health instruction for breast cancer patients and their families in a holistic effort and in partnership with other health care professionals. He/she collaborates with the Breast Care Center Steering Group and other leaders in in the assessment, planning, implantation and evaluation of Breast Care Services both within the Breast Care Center, and the community. These services will be consistent with the Breast Care Center strategic initiatives and mission.

II. REPORTING RELATIONSHIPS:

The Breast Health Specialist reports to the Director of the Breast Care Center and the Ambulatory Supervisor for Surgery.

III. FREEDOM TO ACT/ACCOUNTABILITY:

IV. WORKING RELATIONSHIPS/CONTACTS:

A majority of time will be devoted to case management of breast cancer patients, working with referring providers and the community to asure service quality.

As a leader, he/she will be expected to work in a manner which is consistent with the principles of the Breast Care Center. The Breast Health Specialist is responsible to the Breast Care Center Steering Group and staff.

V. DIMENSIONS:

Direct reports FTE's (Number offull-time employees directly supervised)

Indirect reports FTE's (Number indirectly supervised)

Budget revenue \$ (Amount of income generated by this position)
Budget expense \$ (Authorized amount of spending by this position)

Other:

VI. POSITION REQUIREMENTS:

• Education:

Registered Nurse with Bachelor's Degree in Nursing required, currently licensed in the State of Certification and/or experience in Oncology preferred.

Breast Health

Experience:

Three to five years comprehensive outpatient medical management experience.

Knowledge:

Demonstrated abilities should include competency in communication, empathic listening, patient teaching and professional judgement as well as clinical competence, constructive leadership and the ability to work effectively with groups.

Special Skills/Equipment:

Physical demands include light physical effort, lifting/carrying up to 25 pounds. Demands sitting, standing, walking, bending, climbing, twisting, reaching above/out/below, simple grasping, use of hands and legs, the ability to see fine details, hear normal speech, use of telephone and talking.

Working conditions include exposure to unpleasant elements (illness). Subject to varying and unpredictable situations. Subject to long and irregular hours.

OSHA Exposure to Blood borne pathogens: Category I

Age Specific Standards do not apply.

VII. CAREER LADDER:

VIII. OSHA EXPOSURE, PHYSICAL DEMANDS AND WORKING CONDITIONS:

Refer to Attachments I and 11

IX. OTHER INFORMATION:

Confidentiality: It is an expectation that all employees at	will protect the confidentiality of all patient care,
personnel, and business/financial information. Employees wi	ll demonstrate their confidentiality knowledge through the use
of a self-study information package and test.	

Compliance: Employees will complete required competencies, annual mandatory training requirements and adhere to the code of conduct as described in the Compliance Plan and brochure. In addition, the individual in this position can provide care and support to all age groups or patients in his/her assigned practice/work area based on physical/psychosocial, educational, safety and related criteria.

Disclaimer: The above statements are intended to describe the general nature and level of work being performed. They are not intended to be construed as an exhaustive list of all responsibilities, duties and skills required of personnel so classified.

X. APPROVALS:	
Department Director or Above	Date
Human Resources	Date

XI. PRINCIPAL ACCOUNTABILITIES:

1. Clinical Care

- a) collaborates physicians and other health care providers in planning individualized care for breast cancer patients b) provides a clear link to the patient throughout the system to assume patient understanding of the multi-disciplinary approach of the Breast Care Center
- c) collaborates with the Director of the Breast Care Center and intervenes with patients regarding specific health care issues
- d) provides or organizes educational and counseling services for breast cancer patients and their families related to
 ____ community health care services and other resources
- e) participates in the formation of breast cancer support groups for patients and families

2. Quality and Systems Improvement

- a) responsible for the service quality provided related to all providers working within the Breast Care Center
- b) develops systems supporting the transition to a multi-disciplinary clinic
- c) provides link to administrative support systems within
- d) develops systems to support research efforts

3. Employee Development

a) promotes a culture of continuous learning and professional growth and development

4. Community Health Planning

- a) develops systems to evaluate and educate community health members regarding both prevention and treatment of breast disease
- b) collaborates with health care providers to create programmative initiatives

5. Strategic Planning

a) participates in development of Breast Care Center strategic initiatives

6. Education

- a) assesses both individual and community educational needs through communication with various health care professionals, patients surveys and feedback from women.
- b) works with team members and available resources (Community Health Improvement, Women's Health Care Service and other health care services) to develop community outreach programs and participates in the implementation of these programs
- c) develops and maintains educational information which meet the learning needs to different types of women

7. Core Competencies

- a) organizational commitment: demonstrates a professional demeanor and sense of personal responsibility toward the Breast Care Center and
- b) customer orientation: understand and champion the diverse needs and agendas of all customers, in a balanced manner
- c) performance focus: set and attempt to surpass personal and goals
- d) self management: works toward the continuing growth and development of self while remaining aware of the potential impact on others
- e) team orientation: works cooperatively with others, be part of a team and work together collaboratively

interpersonal communication: exhibit effective communication with others while maintaining an open attitude and commitment to listen and respond

- g) team management: manage and facilitate group action and cooperation
- h) bias for action: takes action, as opposed to waiting, in order to effect immediate change, resolve problems or get results
- i) organizational influence: influences others outside way

in a planned and well-informed

- j) ownership building: encourages employees toward independent responsibility and decision making
- k) talent building: creates and promotes performance focused development of employees
- 1) strategic orientation: maintains a long-term, broadly based perspective on the business
- m) conceptual thinking: indentifies patterns and issues by using creative, conceptual or inductive reasoning
- n) analytical thinking: thinks and plans logically, making sure issues are thoroughly evaluated
- o) change leadership: alerts, energizes and inspires individuals and groups to the need for change and demonstrates leadership in the change process
- p) tolerance for ambiguity: copes proactively when faced with uncertainty and a lack of clarity
- 8. Models _ values in the performance of work duties
 - a) Demonstrates integrity, caring and compassion when working with patients, families and staff.
 - Can be counted upon to perform duties as promised.
 - Is trusted to perform responsibilities without undo supervision.
 - Treats patients, families, visitors and staff with dignity and respect.
 - Protects the confidentiality of all patient care, personnel, and business/financial information.
 - b) Demonstrates concern for the community at large in performance of job duties.
 - Takes steps to ensure that laws and regulations regarding the practice of health care are followed.
 - Participates in organization wide and community service activities.
 - Communicates a positive image about

to the community.

- c) Strives for excellence, continually learning, improving personal work and facilitates staff contribution toward continuous improvement.
- d) Uses finite resources wisely.
 - Reduces waste in materials used to perform duties.
 - Uses work time productively.
 - Reports to work on time and is ready to perform job duties.
 - Adheres to - Standards for attendance.

FINAL STEP FOR COMPLETING PRINCIPAL ACCOUNTABILITIES

In order to comply with Federal Law regarding the Americans with Disabilities Act (ADA), a determination must be made as to whether principal accountabilities are considered to be essential or non-essential.

Essential accountabilities are key accountabilities that must be performed with or without accommodation. For accountabilities to be considered essential they must meet one or more of the following requirements:

The performance of this function is the reason that the job exits.

There are limited employees among whom the performance of this function can be distributed.

This function is highly specialized. Employees are hired for the skill/ability to perform this function.

D Failure to perform this function may have serious consequences.

Non-essential accountabilities, while important, do not meet the requirements listed above and can be reassigned to another individual.

By law, must distinguish between essential and non-essential accountabilities. As a final step, return to section XI of the position description, and designate those accountabilities that you consider to be <u>NON-ESSENTIAL</u> by placing two asterisks (**) following each description of accountability

Attachment I (Please include with the completed Position Description) EXPOSURE CATEGORIES FOR OSHA

Please review the exposure categories for OSHA listed below and indicate the category appropriate for the position in the box below:

OSHA EXPOSURE CATEGORY: I

Exposure Determination:

Exposure (or potential exposure) to Hepatitis B (HBV) and Human Immunodeficiency Virus (HIV) is defined in terms of actual (or potential) skin, mucous membrane, or parental contact with blood, body fluids, or tissues. Each position is categorized according to likelihood of exposure. Protective equipment shall be readily available. Employees shall be educated in the appropriate use of protective equipment according to their job classifications.

<u>Category I.</u> Tasks involving exposure to blood, body fluids, or tissues:

All procedures or other job related tasks that involve an inherent potential for mucous membrane or skin contact with blood, body fluids, or tissues, or a potential for spills or splashes of them are Category I tasks. Use of appropriate protective measures is required for every employee engaged in Category I tasks. All Category 1 tasks do not involve the same type or degree of risk and therefore all do not require the same kind or extent of protection. Specific combinations of clothing and equipment are tailored for specific tasks. Minimum levels of protection in most cases include use of appropriate gloves. If there is the potential for splashes, protective eyewear or face shields should be worn. If there is potential for clothing being soaked with blood, protective gowns or aprons should be worn.

Category II. Tasks that involve no exposure to blood, body fluids, or tissues, but employment may require performing unplanned Category I tasks:

The normal work routine involves no exposure to blood, body fluids, or tissues but exposure or potential exposure may be required as a condition of employment. Appropriate protective equipment (e.g., gloves, protective eyeglasses, masks, or gowns will be readily available to every employee engaged in Category II tasks. Employees need not be wearing protective equipment, but should be prepared to use appropriate protective garb on short notice.

All employees engaged in Category I and 11 exposure tasks are offered hepatitis B vaccine through Employee Health Services.

<u>Category III.</u> Tasks that involve no exposure to blood, body fluids, or tissues, and Category I tasks are not a condition of employment:

The normal work routine involves no exposure to blood, body fluids, or tissues (although situations can be imagined or hypothesized under which anyone, anywhere, might encounter potential exposure to body fluids). Persons who perform these duties are not called upon as part of their employment to perform or assist in emergency medical care or first aid or to be potentially exposed in some other way. Tasks that involve handling of implements or utensils, use of public or shared bathroom facilities or telephones, and personal contacts such as handshaking are Category III tasks.

If Category I and II tasks do not exist in the department, then no specific personal hygiene or protective measures are required. However, these employees should be aware of the risk factors associated with transmission of HBV and HIV so that they can recognize situations which pose increased potential for exposure and know how to avoid or minimize personal risk.

Attachment 11

PHYSICAL DEMANDS AND WORKING CONDITIONS

(Please include with the completed position description)

JOB TITLE: JOB CODE:

A. Weight-Related Functions and Categories

 11-24 Ibs Lifting
 a. 0 to 10 lbs.
 e. 35 to 50 lbs.

 11-24 Ibs Carrying
 b. 1 1 to 24 lbs.
 f. 51 to 74 lbs.

 11-24 Ibs Pushing/Pulling
 c. 25 to 34 lbs.
 g. over 74 lbs.

B. General Functions

True Sitting True Climbing True Reaching Above

True Standing False Kneeling True Reaching Out
True Walking False Crouching True Reaching Below

False Driving True Twisting

True Bending False Balancing

C. Hand and Foot Manipulations

Hand ManipulationFoot ManipulationTrue Simple GraspingFalseFoot Controls

False Firm Grasping False Repeat Movement

False Firm Manipulation False Use of Leg

False Pushing/Pulling False Use of Hand

D. Sensory Functions

False Far Vision False Depth Vision True Telephone
False Near Vision True See Fine Details False Overhead Paging

False Color Vision True Hear Normal Speech True Talking

E. Environmental Conditions

False Infectious Diseases False Hazardous or Moving Equipment

False Chemical Agents False Unprotected Heights

False Dust, Fumes or Gases False Noisy Environment

False Extremes in Temperature/Humidity

VERIFIED BY: DATE:

(Supervisor's Name)