JOB DESCRIPTION / PERFORMANCE EVALUATION

Job Title: Cardiac/Pulmonary Rehabilitation Program Director
Supervised by: Chief Nursing Officer
Prepared by: ______________________________________
Approved by: ___________________
Date: ____________________________________________
Date: ________________

Job Summary: To perform this position successfully, an individual must be able to perform each essential duty satisfactorily. The administrative functions of accountability and responsibility of the position are representative of the knowledge, skill and/or ability required. Also provides direct patient care in Cardiac/Pulmonary Rehabilitation. Nursing responsibilities focus on the preventive and restorative health care needs of the cardiovascular patient.

Verify your state’s scope of practice and risk management issues for this position.

DUTIES AND RESPONSIBILITIES:

3 = Exceeds Performance
2 = Expected Performance
1 = Needs Improvement

Demonstrates Competency in the Following Areas:

Administrative Responsibilities:

- Responsible for the direction of patient care in Cardiac/Pulmonary Rehabilitation. 3 2 1
- Assists in preparing, implementing and monitoring the department budget. 3 2 1
- Provides balance between cost effectiveness and quality care issues. 3 2 1
- Forecasts fiscal impact of trends and current and future technological changes affecting the preparation and implementation of the department budget. 3 2 1
- Initiates corrective action for budget variances. 3 2 1
- Provides guidelines for measuring the quality of patient care, based on accepted standards of nursing practice and cardiac/pulmonary rehabilitation. 3 2 1
- Ensures participation of department staff in the formulation of policies and procedures, annual review and revisions. 3 2 1
- Interprets policies and procedures to all appropriate staff. 3 2 1
- Enforces compliance with policies and procedures, as applicable. 3 2 1
- Determines staffing requirements and patterns, based on scope of services, complexity of patient acuity and fiscal resources. 3 2 1
- Acts as a consultant in selection of staff, determined by hiring policies of the hospital and department, job requirements, qualifications, vacancies, availability and objectives relating to the quality of care to be delivered. 3 2 1
- Ensures all new staff successfully complete required orientation program. 3 2 1
- Completes evaluations and submits two weeks prior to review. New employees are oriented and evaluated at the end of 90 days. 3 2 1
- Schedules and assigns staff to increase efficiency and coordination of department staff according to standards. 3 2 1
PURPOSE:
To provide standard criteria to determine the patient’s eligibility for care, treatment, and services.

POLICY:
- Established guidelines shall be followed for the selection of those patients who may participate in the Cardiac Rehabilitation Program.
- Patients must have a physician referral/prescription to participate in the Cardiac Rehabilitation Program.
- Patients must undergo an exercise test before admission to the Cardiac Rehabilitation Program. The exercise test may be done by the referring physician or the Cardiac Rehabilitation physician.

GUIDELINES:
- Admission to the Cardiac Rehabilitation Program:
  - Recent myocardial infarction
  - Recent acute coronary syndrome or heart failure
  - Recent CABG
  - Post valve surgery
  - Recent PTCA
  - Post heart or heart-lung transplantation
  - Chronic coronary artery disease
  - PTCA
  - Stable angina pectoris
  - Post coronary stenting
POLICY:

- Individuals that may benefit from the Pulmonary Rehabilitation Program shall include, but not be limited to:
  - Chronic Obstructive Pulmonary Disease
  - Pre and post lung surgery
  - Sarcoidosis
  - Idiopathic pulmonary fibrosis
  - Cystic fibrosis

- Goals of a Pulmonary Rehabilitation Program shall include, but not be limited to:
  - To provide the patient education to better understand his/her disease process
  - To help the patient develop methods to cope with his/her disease
  - To promote and maintain the patient’s physical capabilities
  - To discuss the number of hospitalizations

- The Pulmonary Rehabilitation Program shall be individualized for the patient and include the following:
  - Exercise training to improve endurance and muscle strength for both arms and legs
  - Nutritional counseling to support healthy eating and adjust weight if overweight or underweight
  - Education on the individual’s lung disease or condition and how to manage it:
    - Avoiding situations that worsen symptoms
    - Importance of vaccinations
    - Smoking cessation
POLICY:

- Based on the initial assessment and evaluation of the patient’s physical, cognitive, emotional and social status, a Cardiac Rehabilitation Treatment Plan shall be developed and documented in the patient’s medical record.

- The individualized treatment plan shall be reviewed and approved by the referring Physician or Medical Director upon patient admission to the Cardiac Rehabilitation Program and at least every 30 days thereafter until completion of early outpatient (phase #) of Cardiac Rehabilitation Program.

- The Cardiac Rehabilitation Treatment Plan shall include the following components:
  - Current clinical condition of the patient, include current diagnosis
  - Patients’ personal cardiac rehabilitation goals and expectations
  - Cardiac Rehabilitation goals and objectives in relationship to activities of daily living, learning and working
  - Realistic, attainable time frames and measurements for goal/objectives accomplishment
  - The type, amount, frequency, and duration of the items and services furnished under the plan
  - Outline of intervention strategies for exercise therapy and cardiovascular disease risk reduction

- Development of Short-Term Objectives:
  - Defined as achievable within days or weeks, dependent upon patient condition
  - Functionally related
  - Developed with participation from patient and family
  - Developed with participation from other members of the Cardiac Rehabilitation Team, as appropriate
PURPOSE:
To improve the health and well-being of the patient.

POLICY:
All patients shall be screened at the time of the admission to the healthcare organization/medical office for tobacco use status.

PROCEDURE:
- Assessment:
  - Vital signs, including temperature
  - Weight
  - Patient screening for tobacco use status shall include the following:
    - Is the patient currently using tobacco products?
    - If the patient quit using tobacco products, when?
    - Has the patient attempted to stop using tobacco products in the past?
    - Length of cessation
    - Previous use of pharmacologist therapies used in the past, i.e., nicotine patch, nicotine gum
    - Do family members smoke/use other tobacco products?
    - Does patient have history of alcohol abuse?
    - Ask patients, what are the negative outcomes of smoking/using tobacco products?
      - Review the negative outcomes of smoking, i.e., acute and long term health consequences, with the patient.