

ERAS coordinator — draft job description

Adapt to your hospital's format. The protected time is the part that matters.

Post title	Reports to	Time commitment	Grade
ERAS Coordinator	Surgical services lead / Medical director	Minimum 0.4 WTE protected — not goodwill in the evenings	Senior nurse or equivalent

Purpose

To hold the ERAS pathway together across disciplines: to keep the protocol current and known, to measure whether it is actually being delivered, to feed that measurement back to the teams that generate it, and to notice when an element quietly stops happening. This last function is the whole job, and it requires someone whose responsibility it is to be looking.

Key responsibilities

☐	Maintain the ERAS protocol; ensure every clinical area has the current version
☐	Collect and report compliance data monthly, broken down by element and by ward
☐	Run the audit cycle end to end, including the re-audit — not just data collection
☐	Present findings in person to clinical teams, with proposed actions, owners and dates
☐	Chair the ERAS meeting and, where one exists, the daily ward huddle
☐	Train new staff at induction — staff turnover is the commonest cause of pathway decay
☐	Maintain the patient education materials and milestone cards
☐	Liaise with pharmacy on the availability of essential ERAS medicines
☐	Escalate resource and supply blockers to the leadership sponsor
☐	Maintain the 30-day outcome dataset: complications, readmissions, reoperations
☐	Own the elements that fall between roles, ensuring each has a named person and a time

Person specification

	Essential	Desirable
Qualifications	Registered nurse or equivalent clinical registration	Quality improvement or clinical audit training
Experience	Substantial perioperative or surgical ward experience; credibility with both surgeons and nurses	Previous audit or QI project taken through to re-audit
Skills	Data collection and basic analysis; able to build and use a run chart; confident presenting to a clinical team	Spreadsheet fluency; teaching experience
Attributes	Persistent; able to raise a concern across a professional hierarchy; able to receive a challenge without defensiveness	Known and trusted across more than one department

Why protected time is not negotiable. A coordinator role done in someone's own time is a role that ends when that person gets tired, and it will. The most common single reason an ERAS programme fails is not clinical disagreement or lack of equipment — it is that nobody had the time to notice it was decaying.