**Claypath and University
Primary Care Network**

**Job Description
Care Coordinator**

Hours of duty: Full-time

Responsible to: PCN Clinical Director

Reports to: Secretarial Team Supervisor

Employer: Claypath and University Medical Group

Pay: £19,279 p.a. WTE

The Care Coordinator will be employed by the Claypath and University Medical Group to work for the Claypath and University Primary Care Network. Direct line management will be provided by the PCN Clinical Director and Secretarial Team Supervisor.

**Job Purpose:**

The Care Coordinator will work within our primary care multi-disciplinary team to improve the experience of patients by ensuring they receive the best possible care and service throughout their primary care patient journey. The role will involve direct work with patients and their families and work closely with practice clinicians, our PCN Social Prescriber, PCN Pharmacy Team, and PCN Clinical Director, secondary health and social care services to co-ordinate key activity including patient access to services, advice and information, and ensuring health and care planning is timely, efficient, and patient-centred.

 There are five main elements to this role:

* direct work with a caseload of patients to ensure they access the best possible care and support, supporting hospital discharge, referrals to specialists, etc;
* developing strong working relationships within the primary care and PCN multi-disciplinary team, as well as with secondary health and social care services and community services providers in order to develop effective care pathways and identify any weak spots to facilitate long term improvement of patient outcomes;
* providing information to the practice and PCN to evidence and influence service improvement;
* undertaking computer population searches in order to target specific groups of patients;
* providing efficient secretarial and administrative support within the primary care team.

The post holder will comply with the organisation’s policies and procedures.

**Main Duties and Responsibilities:**

The Care Coordinator main duties and responsibilities include but are not limited to the following:

* To work with the PCN and member practice colleagues to identify and manage a caseload of patients.
* To help patients manage their needs through answering queries, making and managing appointments.
* To provide coordination and navigation for patients and their carers across health and care services.
* To use healthcare technologies to optimise service delivery, patients’ access, and continuity of care.
* To support the coordination and delivery of multi-disciplinary work. Collaborate with other members of the MDT, patients and their carers when managing and coordinating care.
* To work with the Social Prescribing Link Worker, and other PCN and practice staff, to support patients in line with best practice.
* To undertake computer population searches on the practice patient information system in order to target specific groups of patients;
* To provide efficient and effective support within the primary care secretarial and administrative team.

Additional tasks:

Other duties as dictated by changes in the Primary Care Network and the Claypath and University Medical Group.

**Care Coordinator – Person Specification**

|  |  |  |
| --- | --- | --- |
| **Qualifications** | **Essential** | **Desirable** |
| Educated to GCSE or equivalent, level C in at least Maths and English | √ |  |
| NVQ3 or equivalent and/or relevant basic/first level professional qualification or working towards this |  | √ |
| Demonstrable commitment to professional and personal development | √ |  |

|  |  |  |
| --- | --- | --- |
| **Attributes** | **Essential** | **Desirable** |
| Able to build and maintain relationships whilst maintaining appropriate professional boundaries | √ |  |
| Demonstrate a willingness to participate in shaping the future of the PCN and practice by taking on responsibilities and projects in addition to core workload | √ |  |
| Enthusiasm, drive and the ability to cope in challenging situations | √ |  |
| Works effectively independently and as a member of a team; self- motivated and proactive | √ |  |
| Demonstrate ability to work in a busy environment, ability to deal with both urgent and important tasks and to prioritise effectively whilst also supporting others | √ |  |
| Excellent time keeping | √ |  |

|  |  |  |
| --- | --- | --- |
| **Knowledge and Skills** | **Essential** | **Desirable** |
| Knowledge of Primary Care Networks and General Practice |  | √ |
| Knowledge of the personalized care approach | √ |  |
| Understanding of the determinants of health to include social, economic and environmental factors | √ |  |
| Knowledge of public health issues in the local area |  | √ |
| Knowledge of the needs of patients with long term conditions |  | √ |
| Understanding of, and commitment to, equality, diversity and inclusion | √ |  |
| Knowledge of community development approaches |  | √ |
| Computer literate with the ability to use Microsoft Office programs such as Word and Excel competently as well as being able to undertake data searches of specific populations  | √ |  |
| Ability to undertake computer population searches in order to target specific groups of patients e.g. patients with long term conditions | √ |  |
| Attention to detail, able to work accurately, identifying errors quickly and easily | √ |  |
| Has a planned and organized approach with an ability to prioritise their own workload to meet strict deadlines | √ |  |
| Able to think analytically, anticipating obstacles and thinking ahead; using analytical techniques to draw logical solutions to problems | √ |  |
| Excellent communication skills, verbal and written, with the ability to adjust communication style and content to suit audience | √ |  |
| An excellent understanding of data protection and confidentiality issues | √ |  |
| Able to arrange meetings with multiple individuals with often conflicting priorities | √ |  |

|  |  |  |
| --- | --- | --- |
| **Experience** | **Essential** | **Desirable** |
| Experience in a health or social care profession |  | √ |
| Experience in care coordination or clinical administration | √ |  |
| Experience of secretarial/administrative working | √ |  |
| Experience using clinical systems e.g. EMISWeb | √ |  |
| Experience of supporting people, their families and carers in a related role (can include unpaid work) | √ |  |
| Experience of supporting people with their mental health, either in a paid, unpaid or informal capacity |  | √ |
| Experience in health promotion |  | √ |
| Experience of partnership/collaborative working and of building relationships across a variety of organisations including the voluntary sector |  | √ |

/GPB

4 March, 2021

[END]