**Claypath and University
Primary Care Network**

**Job Description
Social Prescribing Link Worker**

Hours of duty: Part-time (three days p.w.)
Responsible to: Social Prescribing Link Worker/Team Leader, Claypath and University PCN
Employer: Claypath and University Medical Group

Pay: Equivalent to NHS Agenda for Change Band 4

**Job Summary:**
The Social Prescriber Link Worker will be employed by the Claypath and University Medical Group through the Claypath and University Primary Care Network. The post holder will support patients and promote lifestyle changes, preventing ill-health by means of behavioural change techniques. The post holder will involve and support patients to improve their health, wellbeing and social welfare by connecting them to community services and other such organisations and local charities.

Multidisciplinary team working is crucial to ensure an integrated approach to personalised care is achieved. The responsibility of the Social Prescriber Link Worker will be to coordinate and link the care the patient receives and to work collaboratively within the general practice team to meet the needs of the patient.

The Social Prescriber Link Worker will:

* work with patients in the practice or the patient’s home or where appropriate in the community;
* connect patients with non-medical support, such as day centres, charities or community groups;
* deal with patients with one or more long-term conditions;
* support patients with mental health needs;
* empower patients who are lonely or isolated or who have complex social needs which affect their wellbeing;
* link with families, carers and relatives as required;
* reduce demand on statutory services and combat unnecessary GP appointments. .

**Key tasks and responsibilities:**

The following are the key tasks and responsibilities of the Social Prescriber Link Worker. There may, however, be on occasion a requirement to carry out other tasks, depending on factors such as workload and staffing levels:

**Engage with patients:**

- Work with the surgeries in the Primary Care Network and existing groups e.g. Community
 Forums, etc. to identify and engage with patients, families and carers.

- Identify and establish contact with patients, families and carers who may benefit from
 Social Prescriber interventions.

- Develop and maintain relationships with patients, families and carers who are experiencing
 the greatest inequalities in health.

- Promote the equality and value the diversity of the patients, families and carers.

- Understand the support available to patients, families and carers from the community
 action groups, third and voluntary sector, and refer into these and other services as appropriate.

**Manage referrals:**
- Receive referrals for patients with long-term health conditions including mental
 health conditions, obesity, diabetes, respiratory conditions, mobility issues,
 sensory impairment and social isolation.

- The role will require managing and prioritising your own caseload, in accordance with the
 needs, priorities and any urgent support required by an individual patient;

- Proactively contact patients, assessing their needs and offering a personalised approach to
 include face to face meetings, telephone support, as required and home visits as required.

**Improve patient health and wellbeing:**
- Develop trusting relationships by giving patients time and focusing on “what matters to them”;

- Take a holistic approach, based on the person’s priorities and co-produce a personalised
 support plan;

- Provide advice and signposting service for patients, carers and other health professionals.

- Assess, plan, develop, implement and evaluate treatment programmes and individual
 treatment plans that promote health.

- Set goals and develop plans with patients to help them take control of their health and wellbeing;

- Provide information to patients about health and wellbeing and support patients to choose
 appropriate community activities such as exercise groups, self-help groups, debt advice, and
 social organisations.

- Help patients to take up social prescriptions made for them, accompanying them initially to
 events if appropriate.

- Maintain regular contact to address issues as they arise and ensure patients progress and
 achieve their goals;

- Support patients in maintaining their behaviour change.

**Network with local organisations:**
- Engage with the Patient Participation Group, existing community groups and develop
 contacts within local statutory services.

- Work with other service providers e.g. health trainers and community health workers to
 share learning and expertise and develop models of good practice.

- Liaise with a range of organisations to secure uptodate information, publicity materials, tc.

**Be part of the practice Multi-Disciplinary Team:**

- Actively promote social prescribing services within the practice i.e. use of noticeboards, etc.

- Support practice staff with social prescribing referral processes.

- Work in partnership with key staff in the practice, attending relevant meetings, becoming part
 of the wider team, giving information and feedback on social prescribing and developments in
 the local community.

- Work in accordance with the practice’s organisational policies and procedures.

- Attend training courses as required.

**Record keeping:**

- Maintain accurate and timely electronic patient records within EMISWeb.

- Keep all information regarding patients and their families secure and confidential.

- Use accurate READ codes to ensure easy and accurate retrieval for monitoring and audit
 processes. Use templates where appropriate for coding.

**Reporting requirements:**

- Ensure all necessary data and information about patients, users and volunteers is recorded
 accurately and confidentially on the clinical system and with an awareness of GDPR
 requirements.

Work within the Claypath and University Medical Group’s policies regarding confidentiality and maintaining records.

**Other:**

Undertake any other appropriate duties negotiated between the post holder and line manager.

The duties of the post holder may change over time and develop to meet PCN requirements. The job description will be amended after consultation with the post holder and in relation to the individual’s appraisal.

**Person Specification:**

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|  | **Essential** | **Desirable** |
| **Knowledge**  | Knowledge of the needs of vulnerable adults, safeguarding and the associated legal framework.Knowledge of local health and social care provision.Knowledge of funding systems in social care. | Knowledge of public health issues.Familiarity with information systems used in clinical practice.Basic knowledge of Anatomy and Physiology.Understanding of health and social care terminology. |
| **Skills** | Ability to manage and prioritise a caseload.Ability to work flexibly and enthusiastically within a team or on own initiative.Excellent communication skills, both written and verbal.Build relationships with patients, their families and carers.Ability to provide personalised support to individuals, their families and carers.Ability to listen and empathise with people in a non-judgmental way.Able to provide leadership and complete tasks in a timely manner.Able to maintain effective working relationships and promote collaborative working. | Communication of difficult messages to patients and families.Experience of using clinical systems e.g. EMISWeb. |
| **Experience** | Experience of working in a similar role.Experience of working with vulnerable people.Experience of working in health and social care.Experience of coordinating services from diverse providers. | Experience of working in liaison with social care.Experience of seeing patients and carers in a practice based setting or in their own home. |
| **Qualifications** | GCSE Grade C or above in Maths and English, or equivalent qualification. | Qualification in health or social care.Formal safeguarding qualification. |
| **Other** | Full UK Driving Licence.Meet DBS reference standards.Highly motivated.Willingness to work flexible hours when required to meet work demands.Able to demonstrate good time management skills.Undertake additional training relevant to the role. |  |

**/GPB
6 October, 2021**