SOUTHMEAD DEVELOPMENT TRUST

Job Description

Post:	Link Worker – North Bristol
Job Purpose:	To empower people to take control of their health and wellbeing whilst reducing health inequalities by addressing the wider determinants of health (such as debt, poor housing and physical inactivity) by increasing people's active involvement with their local communities. Working closely with GP practices and other healthcare professionals, Link Workers will aim to address issues that may be causing or exacerbating health problems – following a holistic approach to connect people to community groups and statutory services for practical and emotional support. Link workers also support existing groups to be accessible and sustainable and help people to start new community groups, working collaboratively with all local partners and being responsible for building and maintaining strong relationships with statutory services, community groups and other stakeholders – including practice staff at local GP surgeries.
Responsible to:	Social Prescribing Link Worker Manager
Salary:	£21,089 pro rata
Hours:	1 x full time (37 hours) 1 x part time (22.5 hours)
Location:	The Link Worker will work from GP practices and community centres across North Bristol, with additional hot-desking space at The Greenway Centre in Southmead.

Key tasks and responsibilities

1. **Provide personalised support**
    a. Using motivational interviewing and other techniques, provide personalised information, advice and support to primary care patients and signpost or refer (with consent) individuals to appropriate activities, services and support which will help meet their needs, circumstances and preferences.
    b. Work alongside those referred (participants) to address the barriers to participation and things which are negatively affecting their wellbeing. This includes addressing the wider determinants of health, including debt, poor housing, un/under-employment, physical inactivity, etc.

c. Empower participants to maximise the control the have over their lives through enabling them to assess their own abilities, identify goals, take charge of decisions which affect them and improve their ability to self-care. This will involve co-producing action plans and facilitating their follow-through.
d. Where appropriate, physically introduce people to community groups, activities and statutory services, ensuring they are comfortable. Follow up to ensure they are happy, able to engage, included and receiving good support.
e. Effectively manage and prioritise a caseload of participants (up to 250 per year, offering 6 sessions to each) ensuring ambitious performance targets and project objectives are met. This will be done in accordance with the needs, priorities and any urgent support required by individuals and will include home visits where appropriate.

2. **Referrals**
   a. Promote social prescribing, its role in self-management, and the wider determinants of health
   b. Build relationships with key staff in GP practices within the local Primary Care Network (PCN), attending relevant meetings, becoming part of the wider network team, giving information and feedback on social prescribing
   c. Be proactive in developing links with all local agencies to encourage referrals, recognizing what they need to be confident in the service to make appropriate referrals
   d. Work in partnership with all local agencies to raise awareness of social prescribing and how partnership working can reduce pressure on statutory services, improve health outcomes and enable a holistic approach to care.
   e. Provide referral agencies with regular updates about social prescribing, including training for staff, and seek regular feedback about quality of service an impact on referral agencies
   f. Be proactive in encouraging self-referrals and connecting with all local communities, particularly those communities that statutory agencies may find hard to reach

3. **Support community groups and VCSE organisations**
   a. Develop supportive relationships with local VCSE organisations, community groups and statutory services, to make timely, appropriate and supported referrals for the person being introduced
   b. Forge strong links with the above to utilise their existing networks and build on what’s already available to create a map of community groups or assets
   c. Promote micro-commissioning and small grants amongst these networks if available, and support community and neighbourhood level groups to access them
   d. Work with commissioners and local partners to identify unmet needs within the community and gaps in community provision – developing new groups and services where needed
   e. Encourage local residents to volunteer in order to build their skills and confidence, and strengthen community resilience – including peer support such as setting up new community groups. Facilitate groups as/when required.
   f. Support volunteers who are part of the social prescribing team – including induction and day-to-day support.

4. **Data capture**
    a. Keep accurate records relating to the interactions that take place as part of the delivery of the service, contributing to the collection of monitoring information and preparation of progress reports.
    b. Follow agreed processes and protocols for receiving, storing and transferring information about patients and ensure that confidentiality is maintained – completing all necessary administration in a timely and comprehensive manner.
    c. As appropriate, work closely with GP practices to ensure that social prescribing referral codes are inputted to EMIS and that the person's use of the NHS can be tracked, adhering to data protection legislation and data sharing agreements with the clinical commissioning group (CCG)

5. **Professional development**
    a. Work with your line manager to undertake continual personal and professional development, taking an active part in reviewing and developing the roles and responsibilities
    b. Access regular clinical supervision, to enable you to deal effectively with the difficult issues that people present

6. **General**
    a. Work as part of the team to seek feedback and continually improve the service
    b. Work in close partnership with other SDT projects to ensure joined-up working and smooth referral routes.
    c. Maintain a professional attitude and conduct at all times.
    d. Have a Flexible approach to working which will include occasional evenings and weekends.
    e. Undertake any other additional tasks as reasonably deemed appropriate.

Person Specification: Social Prescribing Link Worker – North Bristol			
	ESSENTIAL	**DESIRABLE**	**EVIDENCE**
Qualifications	• Educated to a minimum of level 3 (e.g. A levels, NVQ3)	• Relevant Health or wellbeing related qualification • Trained in Motivational Interviewing	Application Form
Experience	• At least 2 years' experience in a role that involves promoting health and wellbeing in adult health care, social care, public health or a voluntary and community context. • Experience of working holistically, on a one-to-one basis, with people with poor mental health and wellbeing. • Experience of the change process and eliciting and maintaining changes in behaviours. • Experience of implementing monitoring and evaluation systems and reporting to funders and other stakeholders. • Experience of working from an asset based approach, building on existing community and personal assets. • Experience of working with the VCSE sector, including with volunteers and small community groups. • Experience of partnership/collaborative working and of building relationships across a variety of organisations.	• Proven track record of working successfully with GPs, health providers and community groups to deliver measureable improvements in health outcomes • Experience of using social prescribing in areas of high social and health inequalities	Application Form Interview

Person Specification: Social Prescribing Link Worker – North Bristol			
	ESSENTIAL	**DESIRABLE**	**EVIDENCE**
Specific Skills/ Knowledge	• Genuine passion, empathy and desire to support residents to lead healthier and happier lives and to motivate others to reach their potential. • Ability to listen, empathise with people and provide person-centred support in a non-judgemental way, respecting lifestyles and diversity and inspiring trust and confidence. • Excellent written and verbal communication skills. • Confidence in having difficult conversations. • Ability to develop and maintain partnerships with a range of professionals and stakeholders, promoting collaborative working and finding creative solutions to community issues. • Excellent IT skills, including word processing, spreadsheets, email, web research. • Ability to work independently and proactively on own initiative and to work flexibly and enthusiastically as a valued member of a team. • Excellent organisation skills, with the ability to complete administration tasks effectively and efficiently and to organise, plan and prioritise on own initiative, including when under pressure and meeting deadlines. • Understanding of health inequalities/social determinants of health and knowledge of community based interventions that support residents to lead healthier and happier lives.	• Up-to-date knowledge of developments in the public health, social care and clinical (CCG/NHS) services landscape. • An understanding of health, social care and voluntary sector provision, the challenges currently faced and the issues affecting local communities. • Knowledge of the personalised care approach. • Knowledge and understanding of the benefit system, including applications.	Application Form Interview

Person Specification: Social Prescribing Link Worker – North Bristol			
	ESSENTIAL	**DESIRABLE**	**EVIDENCE**
	• Knowledge of and ability to work to policies and procedures, including confidentiality, safeguarding lone working, information governance and health and safety. • Knowledge and understanding of quality assurance and skills and experience of monitoring and evaluation. • Knowledge of community development approaches.		
Other	• Commitment to reducing health inequalities and proactively working to reach people from all communities. • Demonstrates personal accountability, emotional resilience and works well under pressure. • A willingness to undertake any other duties commensurate with the post. • Willingness and ability to work outside normal office hours and across multiple sites.	• Knowledge of North Bristol and the issues facing local residents, including knowledge of VCSE and community services in the locality.	Application Form Interview