

JOB DESCRIPTION

Job title:	Wellbeing Coordinator
Service:	Havering Social Prescribing
Salary:	Grade 3 (lower) point 20-23 (Inclusive of Outer London Weighting)
Hours:	28 hours per week (part-time)
Location:	Havering, London
Responsible to:	Services Manager

Summary of job:

This is a very exciting time to be working in the Social Prescribing arena. It has been identified as a key component of NHS England's Universal Personalised Care objective contained within their Long Term Plan, as well as London's Health Inequalities Strategy for healthy communities, published by the Mayor's Office in 2018. Both strategies recognise the influence of social, emotional, economic and cultural factors on health and well-being and the importance of community connections to improving health and wellbeing, self-care and self-management of long term conditions.

The role is to deliver the Social Prescribing Service to the Marshalls Primary Care Network in Havering. Working with GPs and other health professionals to provide holistic assessments for patients, and with individuals to co-produce bespoke wellbeing plans that focus on "What matters to Me" to address health and wellbeing needs. Taking a holistic approach to an individual's health and wellbeing, connecting people to local VCSE's community groups and networks to create a menu of community groups and assets to link individuals to as part of their wellbeing plan.

The role will work collaboratively with stakeholders and raise the profile of the service in the local area, in order to strengthen community resilience and capacity. Working in partnership with all local agencies to raise awareness of social prescribing, how partnership working can reduce pressure on statutory services, improve health outcomes and enable a holistic and personalised approach to care

Key tasks and responsibilities:

1. To undertake holistic assessments and co-design Health and Well-being Plans with service users, focusing on 'what matters to me' principles, identifying support needs to ensure maximum engagement in improving health and well-being. This will include some home visits when required.
2. As part of the PCN multi-disciplinary team, build relationships with staff in GP practices within the local PCN, attending relevant MDT meetings, giving information and feedback on social prescribing. Train and develop GPs and health teams' knowledge on how to identify patients suitable for social prescribing service on a quarterly basis
3. To provide service users with continuity and a co-ordinated experience of care, remaining point of contact throughout the individual's social prescription.

4. Be proactive in encouraging self-referrals and connecting with all local communities, removing barriers particularly for those communities who may be under-represented in this service. Be a friendly source of information about health, wellbeing and prevention approaches.
5. Help people identify the wider issues that impact on their health and wellbeing, such as debt, poor housing, being unemployed, loneliness and caring responsibilities. Work with the person, their families and carers and consider how they can all be supported through social prescribing.
6. Work with individuals to co-produce a simple personalised support plan to address the person's health and wellbeing needs – based on the person's priorities, interests, values and motivations – including what they can expect from the groups, activities and services they are being connected to and what the person can do for themselves to improve their health and wellbeing.
7. Where appropriate, physically introduce people to community groups, activities and statutory services, following up when necessary to provide additional support to assist them being able to engage.
8. To ensure you have an understanding (appropriate to your role) of, and comply with Family Action's procedures for promoting and safeguarding the welfare of children and vulnerable adults. Seek advice and support from supervisor and/or identified individuals to discuss patient-related concerns and risk (eg abuse, domestic violence, escalated mental health).
9. Forge strong links and collaborative relationships with local VCSE organisations, community and neighbourhood level groups, utilising their networks and building on what is already available to create a menu of community groups and assets. To ensure information on sources of voluntary and community support are up to date at all times to enable effective and accurate signposting and linking of service users with services.
10. To establish and maintain effective liaison with stakeholders including health, voluntary, social and education resources, attending relevant meetings as necessary.
11. Encourage service users who have been connected to community support through social prescribing to volunteer and give their time freely to others, building their skills and confidence and strengthening community resilience.
12. Encourage service users, their families and carers to provide feedback and to share their stories about the impact of social prescribing on their lives.
13. Work with your line manager to undertake continual personal and professional development, taking an active part in regular supervision (as well as clinical supervision).
14. Seek regular feedback about the quality of service and impact of social prescribing on referral agencies.
15. Set up and maintain comprehensive data and evaluation systems, including outcome tools (Well-Being Star, EQ5D, ONS4) and work with MDT and PCN's to ensure that social prescribing referral codes are inputted into clinical systems as per NHSE guidance.
16. Provide quarterly comprehensive outcome focussed reports detailing the progress of the service.

17. To be self-administering and keep timely and accurate records of your work whilst at all times adhering to confidentiality, GDPR, information sharing protocols and provide monitoring information as required.
18. To take part in Family Action's and other organisations' meetings and events to promote, support and celebrate the work of the service and the agencies.
19. To have an understanding of, and comply with Family Action's procedures for promoting and safeguarding the welfare of children and vulnerable adults.
20. To ensure the implementation of Family Action's Equality & Diversity Policy and Ethical Policy in every aspect of your work and positively promote the principles of these policies amongst colleagues, service users and other members of the community.
21. To comply with Family Action's Health and Safety Policy, Data Protection, GDPR Policy and to protect your own and others' health, safety and welfare.
22. To work flexibly as may be required by the needs of the service and carry out any other reasonable duties as required.

Person Specification

1. Professional Health/Social Care/Mental health qualification to at least Degree level; and a genuine commitment to continuing professional development.
2. Proven experience in use of different therapeutic approaches such as Motivational Interviewing techniques, CBT, Solution Focused Therapy, active listening and excellent interpersonal skills.
3. Excellent holistic assessment as well as consultation skills and experience of providing empowering support to adults in a planned and structured way, to improve health, recovery and well-being outcomes.
4. Comprehensive understanding of the social and emotional determinants to health, such as loneliness, depression and anxiety. Knowledge of long-term health conditions and strategies to improve health and wellbeing.
5. Working knowledge of the welfare benefits systems, housing systems and welfare grants in order to quickly sign post service users.
6. Experience of working in a multi-disciplinary team, with confident collaborative relationship building, communication and presentation skills.
7. Excellent knowledge of the Romford area and community resources across Havering. Proven skills in collating information and data on community resources and organising these in up-to-date and accessible formats for a range of different service users from various communities.
8. Ability to speak a second language would be an advantage.
9. Excellent record keeping and written communication skills, and the proven ability to write comprehensive reports for a variety of stakeholders.
10. Excellent IT skills and ability to do own administration—using data base, PowerPoint and other IT packages.
11. A confident and professional approach to working with a variety of stakeholders.
12. A proven understanding and an up to date knowledge and practice of understanding of Working Together to Safeguard Children and Safeguarding Adults, as well as demonstrable ability to work in accordance with local and organisational Safeguarding policies and procedures for all vulnerable groups.
13. The ability to work autonomously and to plan, prioritise, work under pressure and adapt to new models of working.
14. A commitment to equal opportunities and an understanding of the impact of ill health, deprivation, discrimination on communities, families and individuals.
15. Ability to work hours in a flexible way, including evenings and weekends to meet the needs of the service.

16. To be able to evidence Family Action's values at all times, which underpin Family Action's mission of 'building stronger families' by:
- a) Being **people** focused
 - b) Reflecting a '**can do**' approach
 - c) Striving for **excellence** in everything we do
 - d) Having **mutual respect** for everyone we work with, work for and support through our services