**The Health and Social Care Alliance Scotland**

**Job Description**

Job title Community Links Practitioner

Term Fixed Term until 31 December 2022, with possibility of extension

Salary Approximately £25,408 per annum, depending on experience

Working hours Full-time, 35 hours per week

Employer The Health and Social Care Alliance Scotland

Reporting to Senior CLP

**Key Accountabilities:**

Programme Manager

Director of Corporate Services

Chief Executive

**Key Relationships**

1:1 relationships with people who are in vulnerable situations

Primary care teams

Third sector and community organisations

Local authorities and Health led services

**Role**

The Community Links Practitioner will provide a person-centred service that is responsive to the needs and interests of GP practice population living in an area affected by socio-economic deprivation. They will support them to identify issues that affect their ability to live well. Working collaboratively with the patient, the post holder will support them through decision making processes to help them decide upon the issues that they would like to address and help them to overcome any barriers to addressing these.

Using service improvement methodology, the Community Links Practitioner will support the existing primary care team to adopt a links approach. They will support existing staff in becoming skilled in identifying local services and matching them to the needs of individual patients. Typical examples include social or lunch clubs, self-help groups, befriending organisations, hobby clubs (such as gardening clubs) and employment or voluntary-work agencies.

The Community Links Practitioner will identify community resources and facilitate relationships between these resources and the practice for the benefit of the patient. They will also build relationships and processes with statutory organisations, health services and voluntary organisations such as the Citizens Advice Bureau, Money Advice Service, NHS services and charities.

The aim of the Links Worker Programme is to support people to live well through strengthening connections between community resources and primary care in deprived areas in Scotland.

**Strategic Outcomes of the ALLIANCE**

* Innovation and transformational change across health and social care, driven by person-centred and rights-based approaches and the principles of co-production and self management
* Policy and practice shaped by disabled people, people with long term conditions and unpaid carers, regardless of race, gender, sexual orientation disability, age, religion, or any other status
* Person centred approaches and third sector involvement within the planning and delivery of health, social care, and integrated services

**Responsibilities of the Role**

* Provide a specialist service to patients, who are often experiencing complex social circumstances, using agreed, person-centred principles for monitoring, auditing and evaluating programme delivery. The Health and Social Care Standards; My support, my life are the standards which will guide the CLW in their role. <https://www.gov.scot/Resource/0052/00520693.pdf>
* Negotiate and support access for patients to community-based services and activities that will support them to live well. At times, it might be necessary to sensitively challenge service providers for the benefit of the patient
* Build effective pathways to support and help patients to navigate existing complex pathways
* Work autonomously, to manage their workload, appointments etc.
* Maintain accurate records at the pre-intervention, progress and post-intervention stages
* Deliver reports in an agreed format timeously as requested by the programme management team
* Enable and support the primary care team to build and maintain a comprehensive knowledge of services and activities within Glasgow and local community areas which can be utilised to the best interests of the patient
* Build capacity of the primary care to adopt community orientated approaches. This will be facilitated through service improvement methodology
* Liaise with primary care teams, service providers, and programme management team as required
* Enable people to identify personal outcomes and priorities to improve their health and well-being, to overcome any barriers to addressing these and where appropriate, to link people to relevant local and national support services and activities
* Implement effective pathways for accessing the Community Link Worker service to ensure people face minimal barriers and are offered a 1:1 appointment within an appropriate timescale
* Develop groups and activities where appropriate
* To deliver Alcohol Brief Interventions and contribute towards Local Drug Partnership targets and HSCP targets
* Comply with all policies and procedures
* Undertake any other duties as deemed appropriate by line manager, in order to be able to effectively support people facing complex problems, the post holder will be required to demonstrate a high degree of flexibility and commitment to meeting individual needs.

**Data Protection**

In line with national legislation, and organisational policy, you will ensure that all data is processed in a fair, lawful and transparent way, for the specific registered purpose and will not allow data to be disclosed in any way incompatible with such purpose or to any unauthorised persons or organisations.

**Terms and Conditions**

It is full time, 35 hours a week, and based in Glasgow. The post holder will be required to adopt a flexible approach to working hours as travel / occasional additional hours will be required. However, this will be reimbursed through the organisation’s Time off in Lieu scheme.

**Person Specification**

**Essential**

* At least two years’ experience of working within Community Learning and Development, Social Work, health or related field
* Ability to develop a non-dependent relationship with awareness of personal and professional boundaries, whilst being supportive and respectful of others and non-judgmental
* Resilience
* A solution-focused approach
* Non-discriminatory values
* Knowledge and experience of working with people who are experiencing complex social and emotional circumstances. For example, people who have social, emotional and mental health issues, live in complex life circumstances, experience chronic pain, drug and alcohol misuse or homelessness
* Strong understanding of the challenges faced by people living in areas of deprivation in relation to living well
* Proven and highly effective interpersonal and communication skills in working with people on a 1:1 basis and with organisations
* Excellent influencing, negotiation and motivational skills in order to engage patients and to enable them to take up a wide range of community services and activities
* Excellent networking and information management skills
* Ability to manage time effectively
* Ability to effectively manage priorities
* Good understanding of data protection
* Knowledge of facilitating service improvement
* Ability to work effectively as part of a team and on own initiative
* IT skills in word processing, spreadsheets, email and the internet
* An ability and willingness to travel extensively within the local community and wider area.

**Desirable**

* Experience of working in primary care
* Educated to degree level or equivalent within a relevant field, e.g. community education, public health, community nursing, mental health, with a minimum of two years post qualifying experience
* Relevant post graduate experience or qualification in topics such as health behaviour change or motivational interviewing.

**PVG Scheme Membership is required for this post.**