

Primary Care Connect POSITION DESCRIPTION

TITLE:	Chronic Conditions Self-Management Worker
CLASSIFICATION:	Dependent upon qualifications and experience
SALARY & CONDITIONS:	Social and Community Service Award
HOURS OF WORK:	52.5 Hours per Fortnight / 0.7 EFT
DEPARTMENT:	Integrated Health Team
COST CENTRE:	CCSM
DIRECT REPORT TO:	Manager Integrated Health
TENURE/STATUS:	Part Time
PERFORMANCE REVIEW:	At 3 months and then annually
APPROVED:	September 2011

MISSION STATEMENT:

To work with our community to provide primary health care services that strengthen the ability of individuals and families to make choices that will improve their health and well being.

BACKGROUND:

PCC is a not-for-profit community based organisation located in Shepparton, servicing the City of Greater Shepparton and Shires of Moira and Strathbogie. Services include, but are not limited to, Gambler's Help, Drug and Alcohol Counselling, Financial Counselling, Community Health Nursing, Parent Education Service, Dietitian and Generalist Counselling.

In a manner that is consistent with the social model of health, Primary Care Connect recognises and endorses the values listed below. As an employee of PCC, you will be expected to demonstrate these values in your day to day activities and interactions, both with your colleagues and when representing PCC externally. Your success in the role will depend on your ability to work harmoniously and effectively with other staff, our clients and our community.

VALUES:

These underpin our active commitment to the advancement of health through community development and advocacy, health promotion and the provision of direct care. A commitment to these values is central to the effective and efficient work performance of PCC employees.

- We value integrity, credibility and respect for the individual
- We respect the knowledge and diversity of our people
- We build partnerships through communication and collaboration
- We take a proactive and evidence based approach to service delivery

Primary Care Connect POSITION DESCRIPTION

- We believe in striving for excellence through continuous improvement and innovation
- We aim to improve our knowledge and understanding of the health and primary care needs of the community

1. POSITION SUMMARY

The Department of Human Services has funded the Early Intervention in Chronic Disease in Community Health (EICD) Program. The program framework includes a number of components delivered in partnership with other key stakeholders. These include: GP Engagement Strategy, PCP service coordination, Early Intervention model in Primary Care Connect and Goulburn Valley Health (GVH).

The CCSM program will target people at level 3 and 4 of the chronic disease hierarchy. The target population is people:

- With a diagnosed chronic disease/s (especially diabetes, chronic heart failure (CHF), chronic obstructive pulmonary disease (COPD), and asthma), and or
- With complex needs, particularly in the elderly, and who are
- Assessed as at risk of progressing towards hospitalisation and requiring a managed and planned approach to reduce risk.

Primary Care Connect and GVH will jointly deliver the CCSM program with workers. In collaboration the implementation will aim to:

- Slow the rate of disease progression (in the context of the person's clinical condition) whilst maximizing their health and well being within the community.
- Improve access to quality integrated multidisciplinary care across the care continuum.
- Facilitate client and carer empowerment through self management programs and approaches,
- Promote and encourage protective behaviours (e.g. health eating, physical activity),
- Actively engage general practitioners as part of a multidisciplinary coordinated approach.
- Reduce inappropriate demand on the acute health care system.

In addition to effective liaison with the clients GP, the worker will also ensure effective coordination with other community health programs at PCC and chronic disease / community health programs at GVH. This is essential to ensure clients have access to relevant services to their health and other needs in the chronic illness hierarchy.

Position Objectives:

- To improve access to quality integrated multidisciplinary care across the care continuum.
- To actively engage, develop and maintain collaborative partnerships with partners of the programs and other community service organisations.
- To contribute to organizational policy and procedural development, by undertaking necessary research into pertinent issues and preparing draft documents, including discussion papers, correspondence and/or reports.
- To ensure the provision of high quality services through the ongoing development and implementation of a robust system of continuous quality improvement.

Primary Care Connect POSITION DESCRIPTION

- Demonstrate the contributions PCC, Rumbalara and Goulburn Valley Health can make to the care and management of people with chronic disease and/or complex needs.
- To facilitate client and carer empowerment through self management programs and approaches.
- To coordinate approaches to health promotion by building upon other programs

2. KEY SELECTION CRITERIA

2.1 ESSENTIAL

- Qualifications and professional registration in a health related discipline such as Social Work / Nursing / Allied Health or Health Promotion
- Current Victorian Drivers License
- Satisfactory National Police Record Check
- Current Working With Children's Check
- Knowledge and understanding of, the particular needs of clients with chronic disease and multidisciplinary approaches to care
- Sound knowledge of community health principles and a commitment to providing primary health services in the community
- An understanding of health promotion principles
- Excellent communication (written and verbal), decision making and negotiation skills
- Skills in motivational interviewing and group facilitation
- Awareness of the needs of a culturally diverse community
- Understanding of team processes and interpersonal skills
- Demonstrated skills and experience in undertaking needs assessment and care planning
- Knowledge, skills and / or experience in facilitating self management or health coaching / education to individuals and groups
- Knowledge and understanding of the role and function of care-coordination
- Demonstrated ability to work effectively and understanding of health service system, including emergency, acute, aged, primary health, mental health, welfare, drug and alcohol and community care services
- Sound experience with working with a range of communities
- Experience in working in a community setting
- Experience at working independently
- Experience in working in a multidisciplinary team setting
- Experience at working within an environment of limited resources
- Experience in completing health assessments
- Basic word processing, PowerPoint and Excel computer skills

3. DUTIES & RESPONSIBILITIES

This position reports to and is supported by the Coordinator Integrated Health.

Chronic Health Management

Primary Care Connect POSITION DESCRIPTION

- Undertake health and social needs assessments of clients using the nominated assessment tools and develop goals and plan to achieve self management and clinical care plan outcomes
- Facilitate commitment to client centred care and a focus on the clients journey, ensuring that the right care is provided at the right time and place
- Facilitate and coordinate mainstream and specialist referrals to health and community services providers
- Recruit eligible clients to the program using various methods or by referral from health providers and community
- Provide a range of services suitable to individual client self management goals and needs including health coaching and self management programs
- Promote and support client participation and responsibility in decisions about their health behaviours, condition management / self management and planning for discharge from the service
- Liaise with refugee and health nurses, allied health, and health promotion worker to establish and maintain agreed referral pathways between programs and to ensure that self management programs compliment and support multidisciplinary care
- Promote and support the adoption of self management principles and practices in other PCC programs, community based programs and community
- Liaise with relevant PCC program staff, EICD team members at PCC, GVH, GVGP Division and PCP Service Coordination project officer to develop single point of entry and service coordination policies, procedures and processes for the EICD program at PCC
- Participate in Aboriginal Health Promotion and Chronic Care Partnership

Health Promotion

- Promote social connection and integration through referrals to established social support and orientation programs
- Participate in health promotion plan implementation
- Ensure consistent information and resources are available to clients, family, carers and other providers about CCSM program

Team and Organisation

- Participate in CCSM team meetings with key workers and relevant program staff at GVH
- Liaise with PCC staff to ensure the CCSM program is well understood, and that service coordination, referral and communication pathways are established and maintained
- Promote positive communication and cooperative relationships within PCC and between GVH, Rumbalara, GPs and PCP to realise the full potential of the CCSM program
- Promote an environment that empowers and motivates team members to achieve PCC and GVH organisational and team objectives for the CCSM program and clients

Organisational Planning and development

Primary Care Connect POSITION DESCRIPTION

Staff are expected to contribute to organisational planning and policy development through input to strategic planning processes and by involvement in staff working parties, workshops and meetings within PCC.

Including:

- To participate in strategic planning within the Families and Counselling team
- To liaise with the community, other health and welfare providers to work towards integrated service delivery
- Development of a work plan to comply with CCSM implementation plan
- Participate in development and review of existing and new policies and procedures for CCSM

Professional Standards/development

- To maintain and develop clinical standards of practice by pursuing internal and external professional development and networking opportunities such as workshops and conferences in particular relating to chronic disease management and self management
- To provide education to assist in the professional development of others within the organisation and within the community regarding chronic disease management and self management
- To participate in student supervision as negotiated within the Manager Health, Families and Counselling in Community Health
- Establish annual service objectives, develop performance indicators and evaluate outcomes. This process will be discussed with your Manager/Coordinator and an Individual Development Plan will be developed which clearly defines your performance indicators.
- Undertake and successfully complete other duties as directed.

4. ORGANISATIONAL INFORMATION

Personal and Professional Development

- Participate in training and development opportunities as appropriate, including all mandatory training.
- Continually develop personally and professionally to meet the changing needs of your position, career and industry, including regular internal clinical supervision.
- Attend compulsory training sessions provided by the organisation.
- Actively participate in the performance management process as required.

Professional and Ethical Behaviour

- Provide prompt and courteous service to clients, colleagues, other stakeholders and the community.
- Maintain confidentiality on all issues relating to the organisation, clients and fellow colleagues.
- Comply with Information and Privacy Legislation and Regulations.
- Ensure work with clients is undertaken in a manner that is empowering, empathic, culturally appropriate and is responsive to individual needs.

Primary Care Connect POSITION DESCRIPTION

- Dress and personal presentation to reflect the organisation and/or industry standards and regulations at all times.
- Actively participate in the Clinical Supervision Process (if applicable).

Administration and Documentation

- Maintain all documentation, including client files, in an accurate, professional and timely manner
- Provide timely and accurate data reports for the organisation and funding bodies as required.
- Effective use of communication systems including: emails, phones, internet, fax, etc

Teamwork and Communication

- Regular attendance at team and staff meetings.
- Participate as an active member of a team
- Work actively and enthusiastically within a team to achieve team goals.
- Resolve any workplace conflict in accordance with organisational policies and procedures.
- Participate in organisation internal committees.

Continuous Quality Improvement

- Ensure the delivery of quality and accountable services to the community.
- Participate in quality improvement activities
- Comply with all organisational policies, procedures and work instructions including the code of conduct for employees, occupational health and safety and the management of organisational resources.

Health Promotion

- Participate and support an integrated approach to health promotion activities within the organisation

Occupational Health and Safety

Whilst the organisation has 'Duty of Care' obligations to its employees, all employees also have 'Duty of Care' obligations to themselves and the organisation. Employees must observe the following Occupational Health and Safety (OHS) responsibilities:

- Participate and contribute in occupational health and safety activities to ensure a safe work environment for clients, community, staff and visitors.
- Ensure that work is carried out in accordance with OHS requirements and standards; in order to prevent work-related injuries and illnesses.
- To work in a manner which does not willfully or negligently place at risk the health or safety of any person including self, nor recklessly interfere with or misuse any item which has been provided in the interest of improving health and safety.
- To comply with all reasonable instructions and procedures and use such equipment, protective clothing and other items provided by the employer in the interest of employee health and safety.
- Report any potential situation that the employee feels may constitute a hazard to the health and safety of employees, clients or any visitor to the organisation.
- Report any workplace incident, accident or other occurrence that has happened, and complete the necessary reporting documentation.

Primary Care Connect POSITION DESCRIPTION

Relationship to Individual Development Plan

This position description operates in conjunction with and forms part of the relevant Individual Development Plan. An initial performance review will take place three months following commencement of employment and then on an annual basis.

I have read, understood and accept the above position description:

Employee Name: _____

Employee Signature: _____ **Date:** _____

Manager Name: _____

Manager Signature: _____ **Date:** _____