



Job Title: **Financial Support Link Worker**
Working Hours: 37.5 hours per week, Full Time
Contract: Fixed Term or Secondment
(15 months)
Responsible to: GP Federation

1. Background

The NHS Long Term Plan describes the prominent role Primary Care Networks will play in delivering proactive, personalised and more integrated health and social care for their local populations. This will require collaborative working between organisations including GP practices, acute and community health, social care organisations and the voluntary and community sector.

- South Southwark PCN in 2019/20 is made up of all GP Practices in Camberwell, Peckham and Dulwich, approximately 174,000 patients, supported by their GP Federation, Improving Health (IHL).
- North Southwark PCN in 2020/21 is made up of all GP Practices in Bermondsey, Rotherhithe, Borough and Walworth, approximately 190,000 patients, supported by their GP Federation, Quay Health Solutions.

Both PCNs have established a team of Social Prescribing Link Workers who operate across their network providing dedicated support to general practice and our local population.

As the Government's furlough scheme and other protections for households come to an end, it is likely that we will witness a significant rise in financial difficulties and debt problems. With funding from Guy's and St Thomas' Charity, our Primary Care Network will be piloting a new neighbourhood-based approach to create a healthcare pathway from GP surgeries (and other local services) to financial support.

We have created a new role (Financial Support Link Worker) to support residents in the Peckham and Bermondsey neighbourhoods. We are looking for an enthusiastic Social Prescriber Link Worker with expertise in financial support.

2. Job summary

Based within Southwark's Social Prescribing teams, the new Financial Support Link Worker (FSLW) will

- Take referrals from local GPs surgeries and other services, providing 1:1 support and assistance to people with complex needs and develop personalised plans to tackle their debt and financial liabilities.
- Assess whether there is a need for the Council, local housing associations and other creditors to suspend any debt recovery action and then liaise directly with these organisations to achieve this, wherever possible.
- Help residents facing financial crisis to access emergency grants and other forms of assistance, and will be responsible for drawing up longer-term plans that will maximise income and deal with any financial or debt problems they may have.
- Monitor, continuously improve and evaluate this approach/project, working with PCN leads
- Develop strong relationships with statutory and voluntary sector organisations to put in place appropriate support and arrangements for local residents
- Participate in the development work of the wider pilot project being led by Centre for Fairer Credit

3. Key responsibilities

The Financial Support Link Worker will be embedded within and work as part of the Social Prescribing team.

Key responsibilities of this role are to:

3.1 Deliver personalised 1:1 support

- Provide personalised support to patients with complex needs: the nature of patient needs will vary
- Take a holistic approach, based on the service user's priorities and the wider determinants of health to make a personalised support plan together in order to improve health and wellbeing – patients identified will be those that require financial support
- Manage a caseload, to enable a sufficient level of intervention and prioritisation of urgent needs
- Ensure care and support received is recorded and shared (with patient consent) with all appropriate health and care providers.
- Introduce or reconnect people to community groups and statutory services, for longer term provision of support, as required.

Key Tasks Include:

- Meeting people on a one-to-one basis; giving people time to tell their stories and focus on 'what matters to me,' developing/inputting into a personalised support plan together.
- Making home visits, where appropriate, within organisations' policies and procedures.
- 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.
- Help service users maintain or regain independence through living skills, adaptations, enablement approaches and simple safeguards.
- Once the appropriate support is in place, passing the management of the service user to those with whom they are engaged. This will be done in a planned manner, with the option of further engagement with the link worker, if required

3.2 Build relationships with, and good knowledge of, statutory sector, Voluntary Community Sector (VCS) organisations and community groups

- Draw on the strengths and capacities of our local communities, enabling a good understanding of local VCS organisations and community groups
- Develop strong links and work in partnership with local agencies to encourage effective joint working to best support needs of residents.
- Support the ongoing development of a comprehensive Directory of Services, which enables a rich understanding of the resources and services available for local residents.

Key Tasks include:

- Forging strong links and relationships with local statutory services, VCS organisations, community and neighbourhood level groups.
- Ensure that local community groups and VCS organisations being referred to have basic procedures in place for ensuring that vulnerable individuals are safe and, where there are safeguarding concerns, work with all partners to deal appropriately with issues.
- Work closely with GP practices within the PCN 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).
- Research local organisations and services providing support for residents, ensure information held is accurate and update the Directory of services regularly

3.3 Set up, establish role, embed within and receive referrals from the Peckham Neighbourhood

- Work with the PCN to agree appropriate referral criteria and processes.
- Establish connections and relationships with local health and care provider organisations to understand landscape, ethos, ways of working and how you will work with a multidisciplinary team.
- Build an understanding of local processes and referral pathways
- Share the learning that you gain from best practice, appropriate guidance and local examples

Key Tasks Include:

- Building relationships with key staff in GP practices and within the wider PCN.
- Attend relevant meetings giving information and feedback on the work you are doing
- Maintain strong working relationships with and understanding of local services
- Seek regular feedback about the quality of service and impact
- Feedback to services and organisations about how you have engaged with each person following a referral and whether any follow-up is required.

Duties may vary from time to time, without changing the general character of the post or the level of responsibility.

4. Person Specification

	Criteria	Essential	Desirable
Qualifications and Training	Educated to minimum of NVQ Level 3, advanced Level or equivalent qualifications or working towards.	X	
	Demonstrable commitment to professional and personal development of themselves and colleagues.	X	
	Training in motivational coaching and interviewing, or equivalent experience.		X
Experience	At least 2 years' experience of providing one to one support to vulnerable people, including those with physical and mental health issues (including unpaid work).	X	
	Experience of working closely with and developing relationships with a wide range of stakeholders across organisations and sectors, including health and voluntary and community sector	X	
	Knowledge and/or experience of working with a variety of social issues, e.g. housing, benefits, carers, etc.	X	
	Experience of signposting to other organisations to ensure that patients are navigated through the system.	X	
	Experience of data collection and providing monitoring information to assess the impact of services and assist staff development.		X
	Ability to listen, empathise with people and provide person-centered support in a non-judgmental way.	X	
	Able to get along with people from all backgrounds and communities, respecting lifestyles and diversity.	X	
	Able to support people in a way that inspires trust and confidence, motivating others to reach their potential.	X	
	Ability to identify risk and assess/manage risk when working with individuals.	X	

	Demonstrates personal accountability, emotional resilience and works well under pressure.	X	
	Ability to organise, plan and priorities on own initiative, including when under pressure and meeting deadlines	X	
	Ability to work flexibly and enthusiastically within a team or on own initiative.	X	
	Knowledge of and ability to work with policies and procedures, including confidentiality, safeguarding, lone working, information governance, and health and safety.	X	
Skills and Knowledge	Self-starter - comfortable working autonomously in the community and feeding back to the necessary organisations, as appropriate.	X	
	A good understanding of the financial challenges facing citizens	X	
	Experience of working with clients who have issues with Debt	X	
	Knowledge and experience of welfare rights work	X	
	Ability to advocate on behalf of client with other agencies	X	
	Ability to problem-solve when researching the best potential options for support/services.	X	
	Ability to work well in a team – working with a variety of different service providers across the neighbourhood to contribute to social prescribing goals – support and coaching other volunteers/navigators.	X	
	Understanding of the wider determinants of health, including social, economic and environmental factors and their impact on communities.	X	
	Knowledge of IT systems including ability to use word processing tools, emails and the internet to create simple plans and report.	X	
	Ability to communicate effectively, both verbally and in writing.	X	
	Knowledge of VCS and community services in the locality.	X	x
	Willingness to work flexible hours when required, to meet work demands.	X	
	Ability to travel across the locality on a regular basis, including visiting people in their own homes	X	

Equality and Diversity

- Recognising the rights of patients, carers, relatives and colleagues and respecting their needs, beliefs, privacy and dignity.
- Not discriminating against patients, carers, relatives or colleagues on the grounds of any of the protected characteristics in the Equality Act 2010 (or its amendments or later legislation).
- Respecting the rights of patients to accept or refuse treatment or a care provider.

Personal/Professional Development

- Participate in an annual individual performance review, including taking responsibility for maintaining a record of own personal and/or professional development,
- Participate in any training programme implemented by the PCN,
- Continuing Professional Development in line with professional registration and identified within Personal Development Plan,

Confidentiality

Confidentiality in relation to patient data must be maintained at all times. In the course of seeking treatment, patients entrust us with or allow us to gather sensitive information relating to their health or other matters. They do so in confidence and have the right to expect that staff will respect their privacy and act appropriately.

In the performance of the duties outlined in this job description, the post holder may have access to information relating to patients and/or their carers, practice staff and other healthcare workers. The post holder may also have access to information relating to the Practice. All such information from any source is to be regarded as strictly confidential.

Information relating to patients, carers, colleagues, other healthcare workers or the business of the Practice may only be divulged to authorised persons in accordance with Practice policies and procedures relating to confidentiality and the protection of personal and sensitive data.

Health & Safety:

The post holder will assist in promoting and maintaining their own and others' health, safety and security as defined in the organisations Health and Safety policy, including use of personal security systems within the workplace, according to organisation guidelines, identifying risks involved in work activities and undertaking such activities in such a way as to manage those risks, making effective use of training to update knowledge and skills, using appropriate infection control procedures and maintaining work areas in a tidy and safe way and free from hazards and reporting potential risks when identified.

DBS Disclosure

This post is exempt from the Rehabilitation of Offenders Act 1974. You must therefore disclose all spent and unspent convictions, cautions, reprimands and final warnings. If you are offered the post, we will need to obtain a satisfactory DBS disclosure for you. The main duties and responsibilities shown above are not exhaustive but should merely be regarded as a guide. The post-holder will be expected to conduct any reasonable activities according to the business needs at that time. These will be subject to periodic review and may be amended to meet the challenging needs of the business. The post-holder will be expected to participate in this process and the company would aim to reach agreement to changes.