



**FIRST CONTACT CLINICAL**  
ENABLING HEALTHY BEHAVIOUR CHANGE



**Job Title (grade):** Link Worker (Coach)- (Social Prescribing)

**Location:** Newcastle upon Tyne

**Responsible to:** Psychosocial Link Worker

**Pay:** £20,542.80 per annum pro rata

**Job Purpose**

Provide psychosocial interventions to people with long term conditions to support them to develop the knowledge, confidence and skills to manage their health and the impact it has on their day to day life.

To work in a person-centred way, empowering and improving the health and wellbeing of people living with long term conditions; facilitating self-management of their long-term conditions and building social capital, connections and resilience.

To develop working partnerships and knowledge of voluntary and community agencies and activities available to support healthy behaviour change and connecting people with relevant opportunities.

To develop working partnerships and knowledge of relevant statutory, primary care and non-traditional care organisations, and pathways of referral/eligibility criteria into them in order to support healthy behaviour change and to make successful connections based on individual need.

To work in partnership with GP Practices and Health Care teams to encourage and support the development of lasting behaviour changes that underpin improved mental and physical wellbeing.

To participate in record keeping to identify individual achievement and monitor the effectiveness of the service.

To support the Team Lead in the running of the Ways to Wellness Service and the leading of the team.

To line manage the team of link workers in the Ways to Wellness Service. This will include link worker supervision, client record scrutiny, analysis of caseload size and activities, performance management against individual/practice/service based targets and promoting our culture of continuous improvement.

To ensure resources are deployed accordingly across the cluster to ensure adequate service delivery and performance is maintained at all times.

Contribute to the development and delivery of our high-quality behaviour change training programmes.



### **Principal duties and responsibilities**

1. To assist in maintaining a source of information on resources, activities and contacts appropriate to people with long term conditions and actively seek new opportunities to add to this.
2. To take referrals for the service.
3. To engage in promotional opportunities and to engage in discussion with health care professionals to develop new pathways and to encourage referrals into the service.
4. To engage in personalised, goal setting with people who have long term conditions.
5. To provide holistic care to a caseload of people, providing personalised psychosocial interventions including, but not limited to, agenda setting, problem solving, motivational interviewing, goal setting and signposting.
6. To enthusiastically implement a biopsychosocial framework.
7. Have an understanding of the different models of patient engagement such as patient activation and health literacy, and confidently use person-centred outcome measures of these.
8. To work unsupervised in a manner that promotes excellent person care and experience, while recognising professional and organisational requirements and boundaries.
9. To motivate, encourage and support individuals to achieve the goals identified.
10. To ensure effective and appropriate written, verbal and electronic communication within the team, with the people we work with and external agencies.
11. To collect data to monitor and evaluate individual progress and service performance and to maintain patient confidentiality in line with guidance provided.
12. To connect people to appropriate service and support agencies according to their goals, and to recognise the limits of a social prescribing service in supporting long term condition management and behaviour change.
13. To engage in supervision and training with an active commitment to personal development.
14. To contribute to the implementation and monitoring of all policies, procedures and systems as they relate to service delivery.



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15. To undertake any reasonable duties/responsibilities required to meet the needs of the service, with a flexibility to work weekends and evenings if required.
16. To line manage a team of Link Workers (a cluster) in the Ways to Wellness service.
17. To contribute to and organise and manage the team meetings when required.
18. To lead and participate in the case reviews of the Ways to Wellness MIS system both in line management, cluster and team meetings.
19. To contribute to the compilation and production of reports for the Ways to Wellness service, First Contact Clinical Senior Leadership Team, Ways to Wellness Board and GP practices. To update the performance wall.
20. To support the team to implement best practice within the Ways to Wellness service.
21. To support the Link Worker development and appraisal process.
22. To model the best practice and leadership behaviours we desire and to lead and inspire the Link Workers to adopt best practice behaviours and working.

This job description is not intended as an exhaustive list of duties and responsibilities of the post, but reflects the key areas involved. It will be subject to review and amendments in line with developing service needs.

See competency framework for skillset and mindset required to undertake the role.