



Job Description

Job Title:	Care Navigation Co-ordinator
Responsible to:	Chief Executive
Responsible for:	As assigned
Salary:	£32,000 per annum + 6% pension
Hours:	36 Hours per week
Holiday:	25 days plus bank holidays per annum (pro rata)
Based at:	Various GP Surgeries as assigned
Contract:	Permanent

Purpose of Job

As the Care Navigation Co-ordinator, you will receive referrals and allocate cases to the Multi-Disciplinary Team of healthcare professionals working in the Haringey West Care Closer to Home Integrated Network (CHIN). You are also responsible for the day to day co-ordination of the CHIN team. In particular, you will be responsible for:

1. Receiving referrals and following on from the assessment and care plan, or from interactions with other professionals such as the GP.
2. Focusing on helping residents to make full use of local community and voluntary sector resources available locally.
3. Collating information to ensure that the service has access to the most up to date information and advice including a summary of voluntary and community resources, including activities taking place in and around the homes/schemes and those commissioned as part of Extra Care, so that residents, family, the MDT, general practice teams and other agencies are fully informed of the full range of local opportunities available, to increase their uptake.
4. Establishing and maintaining relationships with the voluntary and community, statutory and other agencies so that you can respond holistically to patients' needs.
5. Working with the CHIN members to develop new opportunities, and problem solve to improve access.

Principal Tasks

Service delivery and co-ordination

1. To take referrals from GPs and other members of the multi-disciplinary team for individual patients.
2. To discuss with the person their needs, based on GP guidance, and to direct them to appropriate services. In addition to sources of direct support and help, this includes wider services and activities that may help to promote patients' health, wellbeing and

independence. Services may be open access or require payment, either through a personal budget or own funds.

3. To provide the patient and their carer where appropriate with a plan on what is recommended and how to access it.
4. To develop knowledge of local services, using existing databases and developing links with service providers, keeping up-to-date with service changes and developments.
5. To inform the GPs and other healthcare professionals about the holistic range of services available in the community and how they can access them directly.
6. To liaise with a range of multi-disciplinary professionals who are involved in a patients' care, ensuring a smooth and coordinated approach, especially where multiple agencies are involved.
7. To support the STP agenda around care planning and case management to support patients in their management of care and avoid unnecessary hospital admissions.
8. To actively participate in practice level multi-disciplinary team meetings.
9. To identify when there is a need for urgent action or for a step-up in care and alert the relevant professional(s)
10. To keep accurate and up-to-date records of contacts with clients, including the use of GP databases such as EMIS (relevant training will be provided).
11. To gather record and collate information, including case studies, in a prescribed format in order to demonstrate the impact of the service. This will include producing quarterly reports for service commissioners.
12. To contribute towards the development of the project, attending meetings and doing presentations as requested by their line manager or CHIN Lead.
13. To work collaboratively with the other Care Navigation Co-ordinators supporting each other and meeting regularly as a team.

Leadership and management of people

14. To be responsible for the day to day co-ordination of the CHIN team.
15. To support and supervise staff and volunteers to ensure performance targets are met.
16. To lead by example, upholding Bridge codes of conduct, policies, working practices.
17. To lead by example by modelling healthy living practices whilst in work.

Income generation and fundraising

18. To support income generation, fundraising applications and tenders to extend or expand the service in line with the Trust's fundraising strategy.

Wider Community involvement

19. To increase the participation and involvement of older people in the activities of the service and other Bridge activities.
20. To contribute to work with local communities to build and sustain community capacity and seeking local solutions to community identified issues and priorities; and ensure that the Trust acts as a 'voice' for local residents.

Wider Partnership working

21. To contribute to initiatives to develop partnerships including developing and maintaining effective working relationships with local residents, Trust service users, voluntary and community groups, statutory and public sector organisations, businesses and funding bodies.
22. To work collaboratively with internal and external partners to identify and secure funding streams and resources to support delivery of the Trust's objectives.

Team working

23. To take part in The Bridge Renewal Trust events and activities as agreed with your line manager.
24. To promote a positive team environment and work well as part of the Trust staff team to co-ordinate activities and resources in order to meet Trust charitable purpose.
25. To use and contribute to the effective use of: outlook, shared drives and the website to ensure good internal communications and a team approach

Customer care

26. To be responsible for promoting high levels of customer care within your own areas of work.

Equality

27. To understand, promote and implement the Trust's equality policy, recognising social and cultural diversity in the delivery of services, access to facilities and volunteer supervision

Safeguarding

28. To understand, promote and implement the Trust's safeguarding policy, recognising that safeguarding is everyone's responsibility.

General

29. To comply with the statutory provisions of all Health and Safety, associated legislations and all Trust policies and procedures including commitment to ethical and environmentally sustainable practices.
30. To be able to work flexible hours to meet the service needs including working evenings and weekends.
31. To undertake appropriate training as and when required.
32. To recognise that the above mentioned responsibilities are neither exclusive nor exhaustive and the post holder may be required to carry out other duties commensurate with the grade of the post.

Disclosure & Barring This post will require a DBS check at Enhanced level.

Person Specification – Care Navigation Co-ordinator

	Criteria	Essential/ Desirable	Assessment Method
1. Qualifications	a) Nationally recognised qualification in social care or similar.	Desirable	AF
	b) Commitment to/evidence of continuous professional development	Essential	AF
2. Experience	a) Experience of working with older people providing person-centred care, preferably in care homes or their own homes.	Essential	AF/I/A
	b) Experience of project or service management including performance monitoring and reporting.	Essential	AF/I
	c) Experience of partnership working, preferably within a multi-disciplinary team working	Essential	AF/I/A
3. Skills, Knowledge & Abilities	a) Excellent listening, verbal and written communication skills.	Essential	I/A
	b) Excellent team working skills including being tactful and diplomatic, and ability to build relationships with people from a wide range of backgrounds.	Essential	I
	c) Ability to plan, organise and prioritise work to meet tight deadlines.	Essential	I
	d) Understanding and knowledge of the equality legislation and health and safety regulations.	Essential	I
	e) Understanding and up-to-date knowledge of policy and practice in Adult Social Care and Health, including the principles of personalisation and social prescribing.	Essential	AF/I
	j) Proficient in the use of Information Communications Technology including MS Office and social media tools.	Essential	AF/I
	l) Readiness to work flexibly, recognising the need to work.	Essential	I
4. Other	a) Willingness to undergo enhanced	Essential	I

requirements	CRB/DBS Disclosure.		
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- AF – application form / supporting statement
- I – interview
- A – assessment exercise