

**MERTON VOLUNTARY SERVICE COUNCIL**  
**Job Description**

Job title: **Social Prescribing Coordinator - Merton**

Responsible to: MVSC Trustee Board

Line managed by: Senior Manager

Hours: 35 per week

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**Aim**

To continue the development and evaluation of the social prescribing service in Merton that:

- Improves the health and wellbeing of patients through providing access to non-medical support that increase self-help, self-management, social engagement and healthy behaviours, and prevent ill health
- Reduces practice clinical workload and increase skill-mix through embedding care navigation within primary care.
- Reduces avoidable costs, including A&E attendances and hospital admissions.

**Key working relationships:**

- Participating General Practices (GPs)
- Public Health
- The Clinical Commissioning Group
- Participating voluntary and community organisations
- The Social Prescribing Implementation Group.

**Key Roles of the Social Prescribing Coordinator**

- To provide personalised information, advice and support to patients and signpost or refer them to appropriate activities, services and support which will help meet their needs.
- To provide support to general practices to embed social prescribing pathway
- To develop, build and maintain effective relationships with and knowledge of local statutory and non-statutory services; local GP practices, voluntary and community organisations, and public sector partners
- Communications and promoting the social prescribing service
- Public sector engagement and consultation, including patients' engagement groups
- Working with the Implementation Group on project design, delivery plan and evaluation framework
- To identify ways in which social prescribing can evolve and be embedded to a greater extent across Merton.

As a Social Prescribing Coordinator and part of our service your work will primarily be delivering from a number of specific general practice (GP) centres in Merton with additional hot-desking space at MVSC.

## **Main Duties and Responsibilities**

### ***Person-centred care and support***

1. Adopt a holistic, person-centred approach to establish people's particular needs, concerns and aspirations.
2. Support those who are using the service and provide a range of accessible and flexible information in a manner that is responsive to individual needs, circumstances and preferences to improve their ability to self-care.
3. Empower service users to maximise the control they have over their lives through enabling them to assess their own abilities, identify goals and take charge of decisions that affect them.
4. Signpost and refer (with consent) people, and where appropriate provide/arrange support, to access local voluntary, community and statutory services to help meet their needs.
5. Develop and maintain systems to keep accurate records relating to the interactions that take place as part of the delivery of the service, contributing to the collection of monitoring information and preparation of progress reports.
6. Treat service users, carers and families with dignity, and respect different cultures, religions, ways of life and other personal characteristics at all times.
7. Respond appropriately to any service user complaints raised, promptly inform managers and follow relevant guidance for complaint handling.

### ***Communication and Collaboration***

8. Work with the participating general practices to establish the pathway for social prescribing, including referral processes, including information management and sharing requirements.
9. Provide ongoing support to staff in primary care to enable effective implementation of the social prescribing pathway.
10. Contribute a voluntary and community sector perspective to the multi-disciplinary assessment of needs and care planning of people referred through GP practices. Acting as a community resource by being a valuable source of knowledge and guidance for local people and professionals.
11. Obtain and maintain information on the range of local services available using MVSC's service directory, and report on any gaps in service that become apparent through the project.
12. Work with a range of local VCS providers of health, well-being and social activities to promote access to services for people referred to the project to build and develop an understanding of community-based statutory and non-statutory services in Merton.
13. Develop, build and maintain strong relationships with healthcare, local authority and voluntary sector services, attend relevant meetings and provide information and feedback on the social prescribing service.
14. Play a key role in promoting awareness and understanding of the service amongst professionals and the public.
15. Improve joint working with other professionals and help to develop integrated models of communication and delivery.
16. Coordinate reference group of local VCS providers and people that have used the service, enabling them to be kept up to date with and to contribute to the development of the project.

### ***Service Quality and Development***

17. Follow agreed processes and protocols for storing and transferring information about service users and ensure that confidentiality is maintained.
18. Collect and report on data enabling evaluation of the progress and outcomes of patients referred through the service, and the impact of VCS services involved in the project.
19. Participate in setting and regularly monitoring and reviewing performance standards.
20. Incorporate service user involvement and feedback in order to evaluate the quality of the service provided and to inform service changes and developments.
21. Identify how the service could be developed and improved and, drawing upon knowledge of service delivery, make suggestions regarding how Social Prescribing could be embedded to a greater extent across Merton.
22. Provide input into relevant programmes of work and utilise and draw upon new resources and tools which could support the effective delivery of the role.
23. Work with MVSC, VCS providers and Healthwatch to recruit, train and support volunteers to contribute to the scheme as appropriate.
24. Respond to key changes within the health and social care field in order to shape and develop service delivery by keeping abreast of the health and social care landscape, including that relating to good practice, policy, legislation and regulations.

### ***General Responsibilities***

25. Abide by the Employee Handbook and the policies and procedures of MVSC and protect MVSC's interest at all times.
26. Advise the Chief Executive or an Honorary Officer of MVSC of any event that could adversely affect MVSC or damage its reputation.
27. Adhere to all relevant policies and procedures, including those relating to Health and Safety, Lone Working, Safeguarding and Equal Opportunities.
28. Undertake any other additional tasks as reasonably deemed appropriate.

## **Person Specification**

### **Qualifications/Experience:**

1. At least 2 years of experience in a role that involves promoting the health and wellbeing of service users in adult health care, social care, public health or voluntary and community context.
2. Experience of adopting a person centred approach in order to meet the needs of service users and of empowering people to make informed choices bearing in mind the options available to them.
3. Experience in developing working relationships in primary care and /or social care contexts.
4. Experience of working with and supporting Volunteers.

### **Skills and Abilities:**

5. Excellent verbal and written communication skills with a variety of partners and stakeholders, including primary care, with confidence in having difficult conversations.
6. Ability to work with and support people with a wide range of health and wellbeing needs and their carers, adopting a flexible and dynamic approach to meeting their needs.
7. Ability to develop and maintain partnerships with a range of professionals and stakeholders.
8. Ability to reflect upon and evaluate ways of working and to identify how services could be developed and improved.
9. Ability to use IT to a level commensurate with the post.
10. Ability to work independently and proactively and to work as a valued member of a team.

### **Knowledge**

11. Knowledge of the wider determinants of health, including social, economic and environmental factors.
12. Understanding of personalisation and the skills required to support self-care.
13. Knowledge and understanding of quality assurance and skills and experience of monitoring and evaluation.
14. An understanding of the principles of confidentiality and how these apply when handling service user information.
15. An understanding of health, social care and voluntary sector service provision, the challenges currently faced and the issues affecting local communities.