

Peer Support Worker – Care Coordination Service

Position Details

This position is responsible for ensuring the Care Coordination Service for adults with chronic disease achieves its objectives in line with the program schedule and model of service deliver set out by Footprints in conjunction with Brisbane South Primary Health Network (PHN).

The Care Coordination Service aims to make a real difference to outcomes for adults who:

- Have one or two chronic conditions (where mental health is not the primary presenting condition)
- Experience bio-psychosocial risk factors
- Not frequently hospitalised
- Aged 40 years and over
- Live within the specified statistical area level (Beenleigh, Browns Plains, Loganlea-Carbrook and Springwood-Kingston).

Employer	Footprints in Brisbane Inc. (Footprints)	Program Area	Mental Health Services
Location	Kingston	Salary Range	As per Award rates
Status	Fixed Term Full time	Hours/FTE	0.8 FTE
Industrial Instrument	Social, Community, Home Care and Disability Services Industry Award 2010	Classification Level	Level 3
Reporting relationships	This role reports to the Team Leader – Care Coordination Service		

Responsibilities

Key Responsibilities
<ul style="list-style-type: none"> ▪ Provide direct outreach, psychosocial support and practical assistance to consumers referred to the Care Coordination team under direct guidance of the Team Leader/Service Navigator ▪ Provide ongoing support and mentoring to consumers, carers and supportive others where needed ▪ Work with adults with chronic health conditions and bio-psychosocial risk factors to identify, link to and coordinate services and supports they need ▪ Collaborate with a range of organisations and primary health care providers to coordinate and integrate services to deliver supports that address consumers' needs ▪ Introduce and encourage focus on health and wellbeing concepts and strategies to enable consumers to self-manage their condition ▪ Provide information and facilitate connection between the consumer's services and supports relating to identified needs ▪ Attend internal and external meetings, including committee meetings ▪ Participate in relevant data collection, reflection processes and evaluation ▪ Actively participate in adopting a culture and language of hope and optimism ▪ Present Recovery concepts to the consumer drawing on personal experiences actively and constructively as living evidence there is hope <p>General</p> <ul style="list-style-type: none"> ▪ Follow all organisational policies and procedures ▪ Participate in monthly professional supervision sessions, and ongoing learning and development activities ▪ Promote and maintain a safe and healthy work place, ensuring adherence to WHS policies and procedures ▪ Work within the vision, mission and values of Footprints

Knowledge and Skills

Essential

- Have a lived experience, and or of someone accessing, or supporting someone as a carer to access health services, and is sufficiently progressed and comfortable in your recovery journey to be able to articulate the concepts and principles of recovery
- Capacity to undertake the role without undue impact on your health, through effective strategies to maintain wellness
- Demonstrated experience and understanding of the provision of support services to people living with chronic health conditions and bio-psychosocial risk factors
- Ability to be respectful, calm and encouraging towards consumers and have patience and understanding of others' recovery journey, including the ability to set boundaries and be self-aware
- Ability to show initiative, think critically and make judgments based on sound reason and the information/evidence presented
- Demonstrated capacity to encourage and support individuals to engage in meaningful activities
- Good written and verbal communication skills, and computer literacy
- Current class C driver license, Yellow Card, and satisfactory national police check

Desirable

- Current First Aid Certificate