

Job Description

Wellbeing Matters Community Connector

Responsible to	Service coordinator
Salary	£25,481 NJC 19
Hours per week	35
Annual Leave per	25 (rising to 30 days after 5 years)
annum	
Main base	Various locations across Salford (currently working from home)
Contract	Fixed term 30 th March 2022 (pending future funding)
Level of DBS check	Enhanced

Main aims of the post

Community Connectors are at the heart of our approach to social prescribing in Salford and we are looking for an enthusiastic, organised and person-centred individual to join our Wellbeing Matters team.

Working with the Social Prescribing Coordinator across Salford you will support individuals city wide to access local groups and activities adapting a strengths based approach in order to ultimately improve their health and wellbeing and connect to their community. In addition to working with individuals, you will be working with your local community to identify and develop opportunities to meet the residents in your area as well as liaising with healthcare professionals to support the service's development.

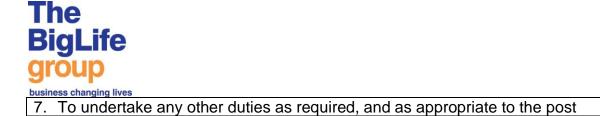
Main duties of the post

- 1. Develop and maintain good communication with people accessing the service to ensure that their strengths, goals and preferences as individuals are met and connect them to relevant services and opportunities within their community to achieve these.
- 2. To manage a caseload of clients developing and maintain effective working relationships with key relevant community-based service providers to ensure



effective and smooth onward referrals e.g. other local voluntary, community and social enterprise organisations 3. Provided assessments for individuals accessing the wellbeing matters programme 4. Build up knowledge of what services are available in the local and wider community and assist with recording this both locally and centrally 5. To work with groups of clients to help them achieve their goals, Identifying local gaps in meeting a specific need and feed this information into delivery team meetings and to the neighbourhood volunteer development worker. 6. Support and assist with the monitoring and evaluation of the programme including producing relevant monitoring reports as well as collecting broader gualitative and outcome data from case studies, focus groups and interviews to understand how or why the delivery approach is impacting on people and the local community. 7. Develop positive working relationships and accept referrals from key health key workers including Care Navigators, GP's, Neighbourhood Enhanced Care Teams. 8. Support project development by raising awareness of the service through training, presentations and events. 9. As part of the wider social prescribing team contribute to the development of the service including the development and maintenance quality assurance and improvement systems that monitor standards and support high-quality service delivery. 10. Monitoring and record key information regarding individual's participation in the programme including tracking their experience and outcomes and provide timely feedback to referral partners. 11. To ensure all statutory responsibilities are followed and reported as required 12. To actively participate in caseload management with your line manager / coordinator

General work related expectations	
1. To work within the Big Life group's values ethos and vis	sion
2. To contribute to the development of the Big Life group	
 To work in accordance with all policies and procedures particularly (but not exclusively) Health and Safety; Info and Safeguarding 	0 0 1 1
 To commit to own personal development and attend tra activities as required 	aining or development
5. To work in accordance with all relevant legislation	
6. To undergo regular supervision and at least an annual	appraisal



Person Specification Wellbeing Matters community Connector

The successful candidate must be able to demonstrate that they meet all of the following points below.

Key – Method of Assessment; A = Application form; I = Interview; T= Test; P= Presentation

Area		Method of assessment
1.Exp	erience	
a.	Experience of working with people facing a range of barriers and social issues	A/I
b.	Experience of managing a caseload of clients and keeping up to date records using a database	A
C.	Experience of working with individuals (1-2-1) and groups of people in different settings to help them achieve their goals	A/I
d.	Experience of working with a range of agencies and organisations to develop effective working relationships	A/I
e.	Experience working with people with multiple needs	A/I
f.	Experience of working effectively with people who may be in a difficult or emotional personal situation	A/I
g.	Experience of working in a person centred way with individuals	I/T



business changing lives				
2.Skil	ls			
a.	Ability to use a client database or the ability to learn how to use a database	Т		
b.	Ability to assist clients to help them define and achieve their goals and aspirations	I/T		
C.	Ability to manage a varied and complex work load effectively	I/T		
d.	Ability to work well across a range of different subject areas such as housing, mental health, education and debt management for example	Т		
e.	Ability to work with staff from a range of agencies and organisations to better integrate services for clients	T/I		
3.Knc	owledge			
a.	Knowledge and understanding of the difficulties faced by people who experience multiple needs.	A/I		
b.	Knowledge of the local area your service is based in (community groups, services available as well as local demographics)	I/T		
4. Edu	ucation			
a.	Ability to learn at level 6, or evidence of substantial professional expertise in a similar role.	A/T		
5. Per	sonal			
a.	Positive outlook and a 'can do' attitude	I/T		
b.	Personal resilience and flexible attitude in the face of difficulties	I/T		
C.	Commitment to working towards the Big Life group's ethos and values, including having a non-judgemental approach	A/I		