



## UNION JOB DESCRIPTION

JD933

<b>JOB TITLE:</b>	Social Worker, Primary Care Network	<b>JOB DESCRIPTION NO.:</b>	60434/P.VI.50300.003
<b>CLASSIFICATION:</b>	Social Worker P1	<b>GRID/PAY LEVEL:</b>	H-I-P1
<b>COLLECTIVE AGREEMENT:</b>	Health Science Professionals	<b>HSCIS NO.:</b>	50901
<b>UNION:</b>	BCGEU; CUPE	<b>JOB/CLASS CODE:</b>	50901
<b>PROGRAM/DEPARTMENT:</b>	Primary Health Care & Chronic Disease Management	<b>BENCHMARKS (If Applicable):</b>	
<b>REPORTING TO:</b>	Manager or designate		
<b>FACILITY/SITE:</b>	South Island, Central Island, and North Island Health Services Delivery Areas		

### JOB SUMMARY:

In accordance with the Vision, Purpose, and Values, and strategic direction of the Vancouver Island Health Authority (Island Health) patient and staff safety is a priority and a responsibility shared by everyone; as such, the requirement to continuously improve quality and safety is inherent in all aspects of this position.

The Social Worker works independently as a member of the Primary Care Network team and provides advanced clinical skills and techniques. Acts as a clinical resource in the area of social work, education, and counseling for an identified population of patients living with chronic diseases and/or experiencing difficulty with the social determinants of health (housing, finances, access to health care etc.) in the community. Participates in case management. Provides assessment, care planning, intervention, and consultation where social, economic, emotional or psychological circumstances present barriers to care and/or an optimum level of function for patients.

Travel may be a requirement of this position. Transportation arrangements must meet the operational requirements of Island Health in accordance with the service assignment and may require the use of a personal vehicle.

### TYPICAL DUTIES AND RESPONSIBILITIES:

1. Works closely with the multidisciplinary Primary Care Network team, Specialized Community Services Program, and primary care providers. Develops, implements and evaluates the social determinants of health needs of the identified population. Case finding may occur through chart review; team conversations or referrals from patients/clients, families and/or communities. The goal is to promote and facilitate proactive care for the best possible health outcomes.
2. Provides social work services in the community setting, by:
  - Reviewing primary care provider's charts to capture the identified patient population;
  - Participating in care plan development by assessing and planning to address social determinants of health needs that present barriers to recovery and adaptation;
  - Utilizing a variety of treatment modalities for clients, caregivers and families including providing therapeutic clinical counseling services as appropriate,
  - Cooperating and collaborating with other members of the Primary Care Network in the provision of quality, client-centered care;
  - Facilitating access to a variety of community support services, making referrals as appropriate and providing input and feedback as required;

- Promoting and facilitating effective communication between the Primary Care Network, physician and the patient, caregivers/families;
- Developing support components to care plans that maximize the patient's inclusion, collaboration and communication with patients/caregivers/families, contracted support services, community agencies, and other sources of support for the patient;
- Promoting and facilitating patient independence;
- Promoting and fostering proactive patient care;
- Is a patient advocate;
- Promoting and providing culturally sensitive care and services;
- Reviewing patient records to monitor and evaluate care/treatment outcomes; and
- Maintaining required statistical documentation.

3. Documents all patient encounters and interactions in the primary care providers held patient record and the Primary Care Network records, and communicates that information to the multidisciplinary team as required. Utilizes computerized systems to maintain patient records, including obtaining and entering patient demographics, histories and charts as required, in accordance with policies, procedures and professional practice standards.

4. Acts as a resource person by collegially sharing, demonstrating and providing guidance regarding social work services and interventions to other social workers, students, and other members of the multidisciplinary health care team. Participates in Community of Practice opportunities with others in similar role in Island Health and outside of the Health Authority as able.

5. Refers and provides expert advice and recommendations to agencies and community health services such as cardiac rehabilitation, Community Health Services, mental health, kidney care, and diabetes care.

6. In collaboration with the Manager and other members of the multidisciplinary team, participates in the development of goals and objectives for the Primary Care Network that incorporate the mission, vision, goals, objectives, values, philosophy, policies, and standards of the Vancouver Island Health Authority. Participates in supporting the capacity of other multidisciplinary team members, including teaching and orienting staff and students.

7. Participates in Continuous Quality Improvement by conducting audits, completing appropriate reports, monitoring clinical indicators and satisfaction surveys, providing feedback and following up on risk factors and making recommendations for improvements.

8. Demonstrates personal initiative in maintaining professional currency and skills by participating in relevant educational activities, as required. Provides best practice evidence and research based care by reviewing literature and attending workshops and education sessions as required.

9. Contributes to a safe and healthy working environment by observing universal precautions and infection control procedures; removing obvious hazards; reporting faulty equipment, accidents, injuries and near misses; and adhering to and enforcing rules regarding safety.

10. Performs other related duties as required.

## **QUALIFICATIONS:**

### **Education, Training And Experience**

Bachelor's Degree in Social Work from an accredited university. Current full registration with the British Columbia College of Social Workers. Two years' recent related experience in a healthcare setting working with medically complex clients with concurrent disorders, or a combination of education, training and experience including comprehensive knowledge of chronic health challenges, geriatrics, community health principles, human development, behavior and family/group dynamics; working knowledge of applicable legislation; working knowledge of available programs and services, their interrelationships, and their function in delivering care in the community.

Valid BC Driver's License.

### **Skills And Abilities**

- Demonstrated counseling skills, including crisis, loss and grief counseling.
- Demonstrated ability to determine and deal with changing and emerging situations with patients in a flexible and adaptable manner.
- Demonstrated ability to facilitate and build effective relationships with primary care providers, other disciplines, and community partners that foster a team approach to patient care.
- Has basic computer skills.
- Possesses knowledge of primary health care principles, community development concepts, and the strategic direction of the Vancouver Island Health Authority related to primary health care and chronic disease management practices.
- Has a working knowledge of facilitation, mediation, and conflict resolution skills and techniques.
- Demonstrated analytical and problem solving skills.
- Demonstrated case management, clinical support and consultation skills.
- Demonstrated ability to prioritize, to work independently and to use a cooperative, proactive and facilitative approach to patient care.
- Able to work inter-collegially on a multidisciplinary team, to show initiative and act independently.
- Able to communicate effectively with the team, primary care providers, patients, their families and caregivers.
- Able to act as a clinical resource and educator, utilizing the principles of adult learning.
- Able to prioritize and organize workload.