

Position Description Senior Care Coordinator

Position Title	Senior Care Coordinator
Location	Birtinya; with travel required across NCACCH service region/s
Employment Status	Full time; 36 hours p/w
Position Report To	General Manager – Health Services
Position Responsible for	Nil
	Dependent on qualifications & experience
Remuneration	Salary sacrifice entitlement available
	Employer contribution to superannuation (12.75%)
Application Opening Date	20 th August 2024
Application Closing Date	8 th September 2024

NCACCH Background Statement

North Coast Aboriginal Corporation for Community Health (NCACCH) is a not for profit, community-controlled health corporation and is funded by the Australian Government's Department of Health (DoH), Central Queensland, Wide Bay & Sunshine Coast PHN and the Queensland Government Department of Health.

NCACCH is an innovative leader in Aboriginal and Torres Strait Islander healthcare, providing a range of services and programs through its hybrid Brokerage and Aboriginal Medical Service (AMS) model for health service delivery. NCACCH maintains contracts with over 800 primary and allied health professionals across the region.

With the purpose of providing a holistic and comprehensive primary health care service NCACCH seeks to improve health and social outcomes to our community through:

- Provision of access to a full regional network of health care professionals
- Encouraging choice for individual Indigenous community members. And through exercising
 this choice, building cultural sensitivity and inclusiveness across the community while
 simultaneously promoting market competition between health care service providers as
 they seek to attract Indigenous clients; and
- Utilising its Aboriginal Medical Service and partnerships with primary healthcare and other specialised services, as a proactive strategy in delivering community wide "Closing the Gap" health status improvement initiatives.

Our Vision: To improve the health and wellbeing of our community through the provision of culturally safe, responsive and inclusive services.

Purpose of the Position

The Senior Care Coordinator is part of the Clinical Services team and reports directly to the Clinical Services Lead. The primary function of this position is to provide appropriate and relevant information and care coordination services for clients living with chronic conditions under the NCACCH Chronic Disease Management Program. With a goal of achieving self-management, the Senior Care Coordinator will engage in productive and respectful relationships with clients while providing support to access appropriate services. In addition, the Senior Care Coordinator is responsible for providing relevant clinical advice and support to the Clinical Services Lead, leading clinical team meetings and providing clinical oversight and guidance for the other care coordinators/clinical services staff.

The Senior Care Coordinator is expected to operate with the highest level of integrity, accountability, and professionalism in accordance with NCACCH's values and Code of Conduct. In addition, this position will focus on ensuring the efficiency and effectiveness of the organisation's service delivery. They will support continuous improvement through encouraging innovation and best practice, within NCACCH's current quality management systems.

This position is guided by standards mandated by the Nursing and Midwifery Board (AHPRA).

These standards have been implemented into the Duty Statement of this role and are an attachment to this Position Description. These standards substantiate the scope of this role and expected standards for practice.

Selection Criteria

Essential:

- Extensive experience within an Aboriginal and Torres Strait Islander Community Controlled Health Service (ACCHO) or similar
- Demonstrated experience providing follow-up care services for patients and families who are identified as being at risk and/or have a chronic condition
- Experience supervising and coordinating teams with the ability to plan, coordinate and delegate workloads to meet business objectives
- Demonstrated ability to recognise individual communication needs and to adapt messages and approaches accordingly
- Strong knowledge of Aboriginal and/or Torres Strait Islander culture, health and health disparities between Aboriginal and non-Indigenous population across South-East Queensland
- Proven case management skills and experience providing follow-up care services for clients with a focus on self-management
- Well-developed project management skills, including the ability to deliver under pressure, meet deadlines and manage competing work priorities
- Highly developed interpersonal and communication skills with the ability to liaise, consult
 and negotiate positive program outcomes in collaboration with both internal and external
 stakeholders.

- Self-motivated, highly organised with strong initiative and proven ability to work autonomously
- Competent using health information databases, both PC and web-based programs and applications, including MS Office suite and ability to learn other relevant systems as required.

Desirable:

- Strong connections to Aboriginal and Torres Strait Islander communities and stakeholders across the Sunshine Coast and Gympie regions.
- Knowledge of local, state, and national health policies, resources, and organisations.
- Understanding of the social determinants of health and how these impact on health behaviours
- Ability to interpret and utilise available health data and literature to establish an evidence base for both existing and proposed programs and services.

Aboriginal and Torres Strait Islander applicants are strongly encouraged to apply.

Mandatory Qualifications/Professional Registrations and Licences

- Tertiary qualification in Nursing
- Current C Class Drivers Licence (QLD)
- Current AHPRA Registration & Professional Indemnity Insurance
- Current Suitability 'Blue Card' for working with children and young people unless an exempt professional
- First Aid Certificate
- Satisfactory Police Check no Serious /Criminal/Court Record

General Role Requirements

- Work out of normal hours of duty, including some weekends, will be required
- Travel across the region will be required

Mandatory Vaccinations

• Full vaccination against COVID-19 as per NCACCH policy. Evidence that is required for this includes, myGov record or immunisation history statement.

Duty Statement

Position Title	Senior Care Coordinator
Reviewed	10 May 2024
Supervision	General Manager – Health Services

Summary of Duties

In accordance with the relevant policies of NCACCH, the procedures developed under these policies, program guidelines and subject to directions of the Clinical Services Lead, the Senior Care Coordinator will assist to coordinate a range of clinical services programs to improve the health and wellbeing of Aboriginal and Torres Strait Islander people.

In co-operation with and subject to direction of the Clinical Services Lead, Operations Manager and Chief Executive Officer, the Senior Care Coordinator will carry out the following duties:

Care Coordination

- Under the Integrated Team Care (ITC) guidelines, provide care coordination/health advocate services to clients living with chronic conditions, with a focus on diabetes, respiratory, cancer, renal and cardiovascular conditions
- Support clients to access appropriate support and specialist services with the aim of achieving self-management for clients with chronic condition/s
- Supports evidence-based learning environment and participates in learning activities, including clinical supervision with an appropriate supervisor, for self and others
- Support clinical duties undertaken by NCACCH Health Workers
- Contribute proactively to the team environment, providing guidance, support and required backfill for team members
- Engage in productive and respectful relationships with Aboriginal and Torres Strait Islander people living with chronic conditions, their families, and networks
- Complete all associated administrative tasks in accordance with internal policies, procedures and timeframes
- To obtain baseline health and continued specific observation data of participants
- Collaborate with other organisations to facilitate access and a continuum of care in the community
- Ensure Chronic Disease Management Program (CDMP) guidelines are followed and deliverables are achieved, including any reporting requirements

Education and Promotion of Health Literacy

- Provide education for patients and families on the roles of various providers involved in their care, reasons for referral and importance of follow up care
- Support patients and families with information, resources and advice in response to specific requests and/or identified need

Working closely with the Community Health Services and Chronic Disease Management
Teams to identify opportunities for individual, family and community education to build
knowledge about wellbeing including healthy life choices, risk factors, chronic conditions,
breadth and availability of health care and related services

Collaborate

- Work collaboratively and holistically within a multidisciplinary team environment to engage patients and families in the management of their wellbeing from a social, cultural, physical, and emotional perspective
- Provide support and guidance to non-Aboriginal and/or Torres Strait Islander colleagues on cultural ways/societal factors which may influence or require consideration when working with patients and families

Service Provision

- At times, this role may require you to perform the following services:
 - Provide culturally effective first point of medical engagement including, triage assessments, taking of medical history/detail/s
 - Provide routine screening services to patients including blood pressures, blood sugar levels, temperatures including the appropriate reporting and recording requirements
 - Perform best practice service delivery within scope of practice, observing universal precautions and follow standing orders / guidelines in the absence of a Medical Officer
 - Provide treatment and care to all patients under the direction of the GP, including immunization of all babies, children & adults in line with the Australian Immunization Handbook including the appropriate reporting and recording requirements
 - Conduct comprehensive Child and Adult Health checks in line with NCACCH policy and procedures and national guideline recommendations
 - Provide wound care and assessment
 - Liaise and coordinate treatment, care and follow up through consultation with other visiting allied health/specialists, hospitals and agencies
 - Attend home visits with GP if required
 - Primary responsibility for monitoring and ensuring maintenance of cold chain systems and other medical storage systems & clinical equipment

Service Development and Improvement

- Actively participate in and lead regular clinic meetings, case conferencing, continuous quality improvement meetings, reporting and activities as required
- Identify opportunities, attend and contribute to local and regional service development and quality improvement forums
- Analysis and identification of quality improvement opportunities from direct input, feedback from patients, families and community, as well as information drawn from the electronic Patient Information Management System

Relationship Management

 Foster productive working relationships with other NCACCH staff to achieve seamless support services

- Actively seek to build and maintain strong working relationships with local networks, government departments, other service providers and suppliers to promote NCACCH and remain abreast of emerging issues
- Encourage cross-functional collaboration to achieve the best outcome for the organisation and community

Information Management

- Undertake reporting activities together with other relevant documentation within the scope of your role
- Participate in business planning processes, policy and procedure formulation and improvement within your area of responsibility
- Maintain accurate record keeping systems as part of the ongoing evaluation and efficient management for programs and services

Excellence:

- Seek to understand your role in the larger organisation context
- Comply with and contribute to continuous improvement of all NCACCH policies, procedures and processes
- Proactively investigate new perspectives, attitudes and behaviours and take steps to evaluate and improve your own and organisational performance
- Deliver a high level of customer service, including the timely provision of agreed services to patients and other key stakeholders where applicable
- Maintain own competencies and participate in professional development programs
- Participate in scheduled performance development check- Ins and review processes
- Contribute to effective team performance which ensures NCACCH continues to deliver the best service to community in line with program specific accreditations and ISO 9001 standards

Safety:

- Report any work-related personal injuries/illness or incidents, safety hazards, malfunction of any machinery, plant or equipment
- Wear/use and maintain/care for personal protective clothing and/or equipment provided and report any defects
- Use lifting equipment and assistive devices as required
- Participate in rehabilitation process if injured or ill due to work
- Demonstrate leadership in NCACCH Work Health Safety goals and objectives remaining compliant with WHS Legislation and NCACCH policies and procedures
- Carry out your duties safely in accordance with your ability and competence

Legal Obligation:

 All relevant health professionals who, in the course of their duties, formulate a reasonable suspicion that a child or young person has been abused or neglected in their home/community

- environment, have a legislative and a duty of care obligation to immediately report such concerns to the Department of Child Safety
- In line with the Nursing and Midwifery Board of Australia, the Senior Care Coordinator is required to perform the following:
 - o Meets all required *Nursing Standards for Practice* while performing role duties.
 - Maintains responsibility for his/her actions and remains accountable in providing delegated nursing care.
 - Maintains responsibility for ongoing self and professional development to maintain knowledge base through life-long learning and continue to demonstrate the types of core nursing activities that a Registered Nurse would be expected to undertake on entry to practice.

Other duties consistent with the position where required and/or requested by your Manager. NCACCH can direct you to carry out duties which it considers are within your level of skill, competence, and training at any time.

Please note that the duties outlined in this Position Description are not exhaustive and are only an indication of the work of the role.

NCACCH reserves the right to vary the Position Description.