NHS
Health Education England

# Care Coordinator

## Overview of the role

AfC Band 4

Max reimbursable amount over 12 months (with on cost) - £29,135

Care Coordinators play an important role within a PCN to proactively identify and work with people, including the frail/elderly and those with long-term conditions, to provide coordination and navigation of care and support across health and care services.

Care Coordinators could potentially provide extra time, capacity, and expertise to support patients in preparing for or in following-up clinical conversations they have with primary care professionals. They will work closely with the GPs and other primary care professionals within the PCN to identify and manage a caseload of identified patients, making sure that appropriate support is made available to them and their carers, and ensuring that their changing needs are addressed. This is achieved by bringing together all the information about a person's identified care and support needs and exploring options to meet these within a single personalised care and support plan, based on what matters to the person.

## Funding

From April 2020, this role will be reimbursed at 100% of actual salary plus defined on-costs, up to the maximum reimbursable amount of £29,135 over 12 months.

## Training/Development

Care Coordinators require a strong foundation in enabling and communication skills as set out in the core Curriculum for Personalised Care. These can be achieved via a two day health coaching skills course as set out here. In addition, training to build on this will be available via the from 15th September 2020.

Care coordinators should also access statuary and mandatory training, including but not limited to:

- Principles of information governance, accountability and clinical governance
- Maintenance of accurate and relevant records of agreed care and support needs
- Identify when it is appropriate to share information with carers and do so
- The professional and legal aspects of consent, capacity, and safeguarding

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| | Care Coordinators should be familiar with the six components of the universal model for personalised care with a specific focus on:<br><br>• Support for self-management<br>• Personalised care and support planning<br>• Shared decision making<br>• Social prescribing<br>• Personal Health Budgets |
| **Activities Undertaken**<br><br>• Proactively identify and work with a cohort of people to support their personalised care requirements<br>• Support people to use decision aids in preparation for a shared decision-making conversation<br>• Bring together a person's identified care and support needs and explore their options to meet these into a single personalised care and support plan, in line with person-centred service plan (PCSP) best practice<br>• Help people to manage their need, answering their queries and supporting them to make appointments<br>• Support people to take up training and employment, and to access appropriate benefits where eligible<br>• Raise awareness of shared decision making and decision support tools and assist people to more prepared to have a shared decision-making conversation<br>• Ensure that people have good quality information to help them make choices about their care<br>• Support people to understand their level of knowledge, skills | **Skills and Competencies**<br><br>• Active and empathic listening<br>• Effective questioning<br>• Building trust and rapport<br>• Shared agenda setting<br>• Collaborative goal setting Shared follow up planning<br>• Using simple health literate communication techniques such as teach-back<br>• Structuring conversations using a coaching approach<br>Knowledge of the core concepts and principles of personalised care, shared decision making, patient activation, health behaviour change, self-efficacy, motivation, and assets-based approaches<br><br>**Ongoing development**<br>Some of the following mechanisms should be considered:<br>• Refresher sessions<br>• Buddying with peers<br>• One-to-one support from a practitioner with health coaching experience<br>• Action Learning Sets<br>• E-learning to revisit or deepen training Supervision |

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| and confidence (Patient Activation Measure*) when engaging with their health and wellbeing, including through use of the patient activation measure<br>• Assist people to access self-management education courses, peer support or interventions that support them in their health and wellbeing<br>• Explore and assist people to access personal health budgets where appropriate<br>• Provide coordination and navigation for people and their carers across health and care services, alongside working closely with social prescribing link workers, health and wellbeing coaches and other primary care roles<br>• Support the coordination and delivery of multidisciplinary teams (MDTs) within PCNs<br><br>*The Patient Activation Measure (PAM) helps to measure the spectrum of knowledge, skills and confidence in patients and captures the extent to which people feel engaged and confident in taking care of their condition. | |
| **Supervision**<br><br>Further guidance to follow. | **Educator Providers**<br><br>Further guidance to follow. |
| **Job Description**<br><br>NHSE/I National have developed JD's and recruitment packs - Awaiting approval via BMA and Gateway process. | **Case Studies**<br><br>An introduction to personalised care and core skills and case studies: https://www.e-lfh.org.uk/programmes/person-centred-approaches/ |
| **Additional Resources**<br><br>https://www.england.nhs.uk/wp-content/uploads/2019/01/universal-personalised-care.pdf | |

Personalised care and Support Planning:
https://www.e-lfh.org.uk/programmes/personalised-care-planning/

Information standard - making information accessible:
https://www.e-lfh.org.uk/programmes/the-information-standard/

Introduction to increasing physical activity:
https://www.e-lfh.org.uk/programmes/physical-activity-and-health/

Range of resources on shared decision making:
https://www.e-lfh.org.uk/programmes/shared-decision-making/

Introduction to Personal Health Budgets module:
https://www.e-lfh.org.uk/programmes/personal-health-budgets/

We encourage commissioners to use organisations who have been quality assured or are working towards full accreditation with the Personalised Care Institute. Current assured providers can be found at: https://personalisedcareinstitute.org.uk and through contacting info@personalisedcareinstitute.org.uk.