**Region 9 Lead-Community Health Worker**

1. **Position Summary:**

Reports to the Community Health & Outreach Supervisor. The Lead community health worker will supervise a team of Community Health Workers (4); will hire and train, evaluate, offer capacity building assistance, and guidance on “the ground” with community engagement and other activities that will reach priority populations within vulnerable communities. The Lead will work along the four pillars of the Ending the HIV Epidemic Strategy; Diagnose, Treat, Prevent and Respond.

1. **Minimum Qualifications:**

Bachelor’s Degree

One year of experience working or volunteering with community based programs in Public Health Region 9 Parishes**:** Washington, Saint Tammany, Saint Helena and Tangipahoa Parishes

Ability to work with people of diverse lifestyles required. Prior experience working in an HIV service, HIV prevention, healthcare, mental health, or substance abuse rehabilitation program preferred.

1. **REQUIRED KNOWLEDGE, SKILLS, ABILITITIES/COMPETENCIES TYPICALLY NEEDED TO PERFORM THIS JOB SUCCESSFULLY:**
2. Ability to communicate with individuals to educate and facilitate problem solving
3. Strong commitment to the (Region 9) community and its members.
4. Ability to work with community members from diverse backgrounds.
5. Ability to work independently.
6. Familiar with operation of electronic office machines (phones, copier, and fax).
7. Proficient computer experience required; working knowledge of Microsoft Office Software, including RedCAP.
8. **Required Licenses/Certifications:**

No Required License/Certification.

1. **Position Responsibilities:**

An incumbent assigned this classification will perform some or all of the following universal essential functions approximately 95 percent of his/her time:

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| 40 % | **Community Advocacy**1. Advocate for local health and social needs for the priority neighborhood residents and community members
2. Help clients in utilizing resources, including scheduling appointments, and assisting with completion of applications for programs for which they may be eligible
3. Assist clients in accessing health related services, including but not limited to: obtaining a medical home, providing instruction on appropriate use of the medical home, overcoming barriers to obtaining needed medical care and social services
4. Facilitate communication and coordinate services between providers
5. Motivate patients to be active, engaged participants in their health
6. Facilitate communication and client empowerment in interactions with health care/social service systems
7. Effectively work with people (staff, clients, doctors, agencies, etc.) from diverse backgrounds in reducing cultural and socio-economic barriers between clients and institutions
8. Build and maintain positive working relationships with the clients, providers, nurse case managers, agency representatives, supervisors and office staff
9. Document activities, service plans, and results in an effective manner while strictly adhering to the policies and procedures in place
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| 20% | **Intra- and inter-agency collaboration (Testing & Case Management)**1. Provide rapid testing in the field and in the office; and linkage to care after proper training and certification.
2. Work as part of a team to coordinate patient care across health systems and to navigate community resources
3. Collaborate with clinical team to inform quality improvement efforts.
4. Conduct casework interviews to identify patient’s psychosocial, economic and physical needs
5. Address needs by referring into and/or directly contacting existing community programs and social support organizations, such as shelters, substance abuse programs, job assistance programs, etc.
6. Assist patients in completing governmental applications such as Medicaid, Medicare, SNAP, etc.
7. Maintain list of up-to date community resources for clinic and community use
8. Conduct home visits for clients who need additional assistance when appropriate.
9. Accurately and appropriately document communications, observations, interventions and referrals in RedCAP
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| 30% | **Community health education and outreach** 1. Disseminate information relevant to the priority neighborhoods at community events and conferences
2. Assist with outreach efforts to inform individuals, families, and local agencies about health and wellness services offered by the collaborative partner agencies.
3. Distribute culturally appropriate health information resources and refer patients to additional education resources.
4. Assist with coordinating group health education sessions and outreach events on topics of interest to the community and/or clinic population.
5. Assist with staffing health fair events
6. Develop, track and maintain database of community outreach activities for grant reporting purposes
7. Participate in local community health worker network meetings and community health improvement activities.
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| 9% | **Medical Visit Support**1. Responsible for communication support between patient and provider
2. Assist patient with filling out documents or forms
3. Responsible for ensuring patient understand follow-up care, medication needs, and health education forms as needed.
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| 1% | **Other**1. Continuously expand knowledge and understanding of community resources, services and programs provided; human relations and the procedures used in dealing with the public as part of a service or program; volunteer resources and the practices associated with using volunteers, operations, functions, policies and procedures associated with the department or program area, procedures and resources available to handle new, unusual or different situations
2. Perform other duties as requested or required, whether or not specifically mentioned in this job description.
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1. **Universal Performance Standards:**

**Completes** all assigned duties by established deadlines and in accordance with established or defined protocols, policies, and procedures.

**Apprises** supervisor of issues that might impede timely completion of assigned duties and/or departmental projects.

**Exercises** sound judgment and discretion at all times and maintains cooperative working relationships with both internal and external constituencies and co-workers.

**Exhibits** a willingness to perform other duties as requested or required efficiently and timely.

1. **Conditions of Employment:**
* Complete initial background check and drug screening.
* Participates in random drug screenings.
* Adhere to all related agency and regulatory requirements, including HIPPA.
* Adhere to Employer policies and procedures.
* Adhere to schedule and time management demands.
* Maintain objectivity in assessing situations and proposing solutions.
* Complete required agency, program, and software training.
* Maintain continuing education requirements.
* Attend staff meetings unless excused.
1. **Approximate Work Time Distribution**

Position is considered full-time with a minimum 40 hours of work per week.

1. **General Work Environment**

Approximately 30% of work shall be completed in an office setting. Periods of standing, sitting, using computers, scanning documents, talking on the phone, interacting with related agency representatives, and interacting with potential clients is expected.

Ability to move about the work location, with or without assistance, is required.

Up to 70 % of work time may be spent travelling off campus or spent working before or after posted office hours and on weekends.

Send Resume and cover letter to:

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