

POSITION DESCRIPTION / PERFORMANCE EVALUATION

Job Title: Peer Health Coach

Reports To: Integrated Care Practice Manager

Team Number: 9319

Salary Grade: B

Total Number Supervised: NA

Exempt **Nonexempt**

FTE: .25

Title of Positions Supervised: NA

JOB SUMMARY:

Under the supervision of the Integrated Care Practice Manager, the Peer Health Coach is responsible to coordinate care with physical health providers and serve as client advocates. Peer Health Coach will help the peer to remove personal and environmental obstacles to health care access. Peer Health Coach provide a set of non-clinical activities that engage, educate and offer support to individuals, their family members, and caregivers to connect them to prevention, diagnosis, timely treatment, and follow-up.

Provide intensive one on one services for each client, with at least monthly contacts or more for those needing additional support.

- Coordinate physician visits and other medical appointments.
- Encouraging a stable and regular relationship with a primary care provider.
- Assist clients in obtaining preventative screening (including pain management, diabetes, heart disease and asthma)
- Offer self-management workshops and educate clients around nutrition, healthy eating and physical activity.
- Provide education about medical conditions and recovery strategies.
- Arrange transportation to and from medical services.
- Facilitate communication with health care providers.
- Participate in site-based staff meetings and interdisciplinary project teams
- Responsibility to comply with all pertinent regulations under the PBHCI Grant.

MINIMUM REQUIREMENTS-EDUCATION AND CREDENTIALS:

- High school diploma or equivalent

MINIMUM REQUIREMENTS-EXPERIENCE AND SKILLS:

- Accurately type 20+ words per minute
- No longer in need of MH services or receiving services externally or open to ■ for services no higher than Health Maintenance (Level 1)
- Familiarity with Microsoft Operating Systems and programs including Outlook
- Excellent customer service skills
- Good verbal and written communication skills
- Ability to develop professional working relationships with partner agencies
- Ability to work with individuals from diverse backgrounds

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I have received, read and understand the Position Description/Performance Evaluation.

Name/Signature

Date

- Demonstrated ability to maintain personal wellness and recovery tools

WORKING CONDITIONS

CHECK APPROPRIATE BOX FOR EACH OF THE FOLLOWING ITEMS TO BEST DESCRIBE THE EXTENT OF THE SPECIFIC ACTIVITY PERFORMED BY THE STAFF MEMBER IN THIS POSITION.

PHYSICAL DEMANDS

On-the-job time is spent in the following physical activities
Show the amount of time by checking the appropriate boxes below.

	— Amount of Time —			
	None	up to 1/3	1/3 to 2/3	More than 2/3
Stand:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walk:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sit:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Talk or hear:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Use hands to finger, handle or feel:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Push/Pull:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stoop, kneel, crouch or crawl:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reach with hands and arms:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Taste or smell:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

This job requires that weight be lifted or force be exerted. Show how much and how often by checking the appropriate boxes below.

	— Amount of Time —			
	None	up to 1/3	1/3 to 2/3	More than 2/3
Up to 10 pounds:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Up to 25 pounds:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Up to 50 pounds:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Up to 100 pounds:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More than 100 pounds:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

This job has special vision requirements. Check all that apply.

- Close Vision (corrected clear vision at 20 inches or less)
- Distance Vision (corrected clear vision at 20 feet or more)
- Color Vision (ability to identify and distinguish colors)
- Peripheral Vision (ability to observe an area that can be seen up and down or to the left and right while eyes are fixed on a given point)
- Depth Perception (three-dimensional vision; ability to judge distances and spatial relationships)
- Ability to Adjust Focus (ability to adjust eye to bring an object into sharp focus)
- No Special Vision Requirements

Specific demands not listed elsewhere, such as:

- CPR Positioning
- Seclusion and Restraint
- Provision of Care
- Other _____
- Other _____
- Other _____

DRIVING

(Anytime the use of a vehicle (personal vehicle or vehicle) is necessary for the completion of regular job duties, including traveling between facilities for any business reason)

- 1 – Essential to job function vehicle
- 2 – May need to drive for job Personal vehicle
- 3 – Not required

ENVIRONMENT

This job requires exposure to the following environmental conditions. Show the amount of time by checking the appropriate boxes below.

	— Amount of Time —			
	None	up to 1/3	1/3 to 2/3	More than 2/3
High risk for Communicable disease (excluding common ailments):	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fumes or airborne particles:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Toxic or caustic chemicals:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outdoor weather conditions:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Risk of electrical shock:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The typical noise level for the work environment is:
Check all that apply.

- Very Quiet Loud Noise
- Quiet Very Loud Noise
- Moderate Noise

Hearing:

- Ability to hear alarms on equipment
- Ability to hear patient call
- Ability to hear instructions from physician/department staff

REPETITIVE MOTION ACTIONS

	— Number of Hours —				
	0	1-2	3-4	5-6	7+
Repetitive use of foot control					
A. Right only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Left Only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Both	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Repetitive use of hands					
A. Right only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Left Only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Both	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grasping: simple/light					
A. Right only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Left Only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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C. Both

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Grasping: firm/heavy

A. Right only

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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B. Left Only

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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C. Both

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Fine Dexterity

A. Right only

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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B. Left Only

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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C. Both

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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DUTIES AND RESPONSIBILITIES

E = Consistently Exceeds Performance Standard **M** = Fully Meets Performance Standard **NI** = Needs Improvement
Please provide brief comments to explain ratings of E and NI.

<u>Demonstrates Competency in the Following Areas (JOB RESPONSIBILITIES):</u>	<u>E</u>	<u>M</u>	<u>NI</u>
1. Coordinate care with physical health providers and serve as client advocates	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Comments:			
2. Assist the peer to remove personal and environmental obstacles to health care access.	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Comments:			
3. Provide a set of non-clinical activities that engage, educate and offer support to individuals, their family members, and caregivers to connect them to prevention, diagnosis, timely treatment, and follow-up.	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Comments:			
4. Maintains current knowledge and information on community resources. Provides and assists with the completion of client forms within the scope of position.	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Comments:			
5. Provides quality and internal and external customer services. Promotes an environment that fosters a team effort and client care as the overriding priority; Exemplifies the concept of customer service through making the consumer and referring agency's experience both positive and professional.	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Comments:			
6. Respects and maintains professional boundaries and confidentiality at all times.	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Comments:			
7. Appropriately applies key concepts and philosophies of █ Services when working with clients in a strengths-based solution focused approach.	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Comments:			
8. Supports the mission and goals of the organization with a commitment to excellence. Represents the organization in a positive and professional manner in the community.	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Comments:			
9. Performs other duties as assigned.	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Comments:			

<u>Core Customer Service Competencies (REPEAT):</u>	<u>E</u>	<u>M</u>	<u>NI</u>
Respectful	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Consistently interacts with internal and external clients/customers, other employees with professionalism, respect and dignity even in difficult situations.			
Takes initiative to correct problems or concerns, instituting temporary measures if necessary while seeking permanent solutions within scope of authority.			
Properly and consistently maintains confidentiality.			
Maintains high ethical standards in the performance of duties and interaction with internal and external clients/customers and other employees.			
Safeguards organizational property and equipment and uses assigned property and equipment in a manner that promotes timely customer service.			
Demonstrates professional and cooperative support of other staff members regardless of position or department.			
Engaged	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Contributes to team tasks and endeavors with enthusiasm.			
Sets example of excellent customer service for others.			
Takes reasonable risks and ownership of results.			
Prepared	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Demonstrates commitment to understanding internal and external client/customer expectations and consistently meets or exceeds those expectations.			
Understands the organization's mission and goals. Knows own role in support of the mission.			
Writes effectively and ensures all written communications are appropriate for intended audience, error-free and convey the message desired.			
Expedient	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Consistently responds to internal and external client/customer needs and concerns with a sense of urgency.			
Verbal/Written Communications: Always communicates in a professional and timely manner. Answers phone calls promptly. Returns all phone calls within a reasonable timeframe. Leaves clear and concise voice messages. Acknowledges emails in a timely manner. Takes care when addressing email messages and utilizes "Reply All" only when necessary and appropriate.			

<u>Core Customer Service Competencies (REPEAT):</u>	<u>E</u>	<u>M</u>	<u>NI</u>
Thoughtful	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Demonstrates effective, customer-focused communication skills including, but not limited to: active listening, making eye contact, asking questions to promote understanding, positive body language, and greeting people by name when possible.			
Acknowledges excellent customer services in other employees.			
<u>For Supervisory Staff:</u> Trains, mentors and monitors staff on effective customer service skills and practices. Addresses and corrects deficiencies, acknowledges excellence.	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
<u>For Supervisory Staff:</u> Ensures behaviors and practices support and accept diversity. Promotes workplace free of harassment and discrimination.	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Total Points			
Use this space for optional comments on any of the above rated Core Competencies.			

PERFORMANCE EVALUATION SUMMARY

STAFF MEMBER NAME: _____

EVALUATION PERIOD: _____ to _____

Overall Performance Evaluation Rating: _____

Overall Average:

1.51 – 2.0 exceeds standards

.81 – 1.5 meets standards

0 - .8 needs improvement

$\frac{\text{_____}}{\text{_____}} = \text{_____}$
Total Points Total No. of Factors Rated Overall Average

Note: an overall score of 0 - .8 requires a performance improvement plan. See below

Supervisor's Comments:

Performance Improvement Plan (if applicable):

Staff Member's Comments (optional):

Staff Member Signature

Date

My signature denotes the evaluation has been reviewed and discussed with me, not that I necessarily agree or disagree with the content.

Supervisor Signature

Date

Senior Management Signature (Director, VP, SVP)

Date