

Alzheimer Society

WATERLOO WELLINGTON

We are hiring!

The Alzheimer Society is the leading not-for-profit health organization working nationwide to improve the quality of life for Canadians living with Alzheimer's disease and other dementias. We support people living with dementia to "Live Their Best Day". The Alzheimer Society Waterloo Wellington (ASWW) offers a variety of services including individual and family counselling, support groups, educational workshops, social/therapeutic programming, and referral services to other supports in their communities.

The **First Link Care Navigator (FLCN)** collaborates with community partners, other ASWW team members to provide client-centred care planning and system navigation to individuals with dementia/cognitive impairment and their care partners living in the Region of Waterloo, Guelph, and/or County of Wellington. The position focuses on assessing the social, emotional, and educational needs of persons with dementia/cognitive impairment and their care partners to develop and implement coordinated plans of support in collaboration with persons with dementia/cognitive impairment and their care partners, making referrals and providing consistent follow-up as required.

The selected candidate for this position will be part of our Programs and Services team and will report to the Director of Programs and Services. This position is based out of our Kitchener office and will work 35 hours/week, 8:30 am – 4 pm, Monday - Friday. After successfully completing probation, this position allows for up to 50% of the work to be done remotely from a home-based office. Evening and other hours as required with weekly schedule adjusted to accommodate.

This a permanent position and compensation range upon hire is \$24 - \$28/hour, depending on education and relevant experience. This position includes 3 weeks vacation scheduled at some point throughout the year. The successful candidate will be eligible for benefits following completion of the probationary period and pension with one year's length of service.

Essential Functions and Responsibilities

Initial Individual/Family Clinical Assessment -- -- FLCN may be the first point of contact for prospective clients with the Programs and Services Team in the organization. To ensure the Society understands the needs of each prospective client, the FLCN meets with individuals with dementia/cognitive impairment and/or their care partners upon referral to the Society to complete the following tasks:

- Review privacy information and consent to receive services.
- Complete assessment interview and develop a plan of care/support.

- Recommend a support/care plan based on the assessment interview and obtain verbal consent to implement the support/care plan.

Plan of Care/Support -- To establish a framework for ensuring each client's needs are addressed by relevant services available through the Society, the FLCN will:

- Complete referrals to programs within the Society and community services as outlined in the plan of care/support.
- Complete follow-up phone calls and visits as needed based on the plan of care/support.
- Screen and register clients for Society programs and services.
- Act as the lead contact for clients and community partners involved in the circle of care.
- Provide for individual and/or family counseling as identified in the plan of care/support.

Pro-active Follow-up – The FLCN will monitor and provide pro-active follow-up for clients and care partners to ensure ongoing collaboration across services/providers and to identify opportunities for new or emerging care options to meet changing needs:

- Lead and organize case conferences as required.
- Provide supports to clients and care partners as they transition through use of different parts of the health, social and residential care systems.

Clinical Documentation -- To provide seamless support to clients among Alzheimer Society staff, the FLCN will:

- Obtain consent to open client files in the Client Information Management System (CIMS) and open the files as required if making initial contact with individual clients on behalf of the Society.
- Complete assessment form and plan of care/support and upload form into the CIMS forms.
- Complete progress notes in the CIMS of follow up involvement with clients after the initial assessment visit.
- Change client files to inactive status when follow up services are not deemed necessary in the immediate future and complete a discharge summary report of the reason for changing files to inactive status or closing files.
- Upon becoming aware that a care partner or person with dementia/cognitive impairment is deceased or will not seek services again for another reason, close the individual's client file in the CIMS with discharge summary report completed.

- Complete documentation and enter in all required statistics in CIMS within three business days.

Community Collaboration/Linkages – The FLCN will participate, collaborate and relationship build with community partners to ensure system effectiveness and to identify opportunities for service collaboration and/or integration:

- Participate on relevant Community tables/committees.
- Link with appropriate health service providers or other community providers to provide support to clients and to increase partnerships in the community.
- Develop relationships with key stakeholders including physicians, health care professionals, health, social and community support service providers to encourage ASWW as the “Lead Agency” for case management, communication, and support with transitions in care.

Quality Assurance -- To ensure effective services are provided, and the Alzheimer Society is accountable for dollars invested in the organization, the FLCN will:

- Enter service units delivered into the CIMS within three business days.
- Provide input for the organizational strategic plan as requested.
- Contribute comments for student evaluations to the student’s supervisor.
- Participate in the development and distribution of social work service evaluation instruments.
- Participate in the knowledge transfer and exchange and collaborate with Societies across Ontario to support the delivery of best practices and ongoing quality improvement.
- Attend First Link® regular teleconferences and training opportunities.

Continuing Competence -- To ensure the FLCN maintains current knowledge of issues related to the position, and possesses the tools required to complete work to a high standard, the FLCN will remain current in relation to the following information:

- Relevant services available in the community to support clients.
- Service and documentation standards for the social work profession.
- Legislative developments related to service provision at the Society.
- Research related to dementia/cognitive impairment and best practices for working with people with dementia/cognitive impairment and their care partners.

Service Coverage -- To ensure local Alzheimer Society offices are a dependable resource for the community, the FLCN will:

- Participate in being available to speak to clients needing more immediate support during regular office hours.
- Provide evening appointments for people with dementia/cognitive impairment and their care partners as needed.

Team Model -- To facilitate Alzheimer Society staff sharing knowledge, expertise, and enthusiasm with each other, the FLCN will:

- Participate in staff, Social Work Team, and Programs and Services Team meetings and ASWW events.
- Work in collaboration with all staff and volunteers.
- Participate in community meetings/committees as assigned.
- Identify strategic partnership opportunities to the Director of Programs and Services.
- Other related duties as required.

Education and Formal Training

- Bachelor of Social Work (B.S.W.) degree with 3 years' experience or Master of Social Work (MSW)

Experience

- Experience working with people with dementia/cognitive impairment and/or their care partners.
- Ability to work in collaboration with all team members at the Society.

Job Specific Competencies

- Knowledge of Alzheimer's disease and other dementias, including early to mid-stage dementia, is required.
- Knowledge of the local Alzheimer Societies programs, community support services and making referrals.
- Familiarity with and commitment to a person-centred approach to service delivery
- Knowledge of local community resources and strategies for facilitating linkages.

General Competencies

- Excellent interpersonal and customer service skills
- Strong written, verbal and listening skills.
- Ability to work independently and as part of a team.
- Excellent organizational, planning and time management skills, including the ability to multi-task.
- High degree of professionalism and integrity
- Ability to use discretion, judgment, and tact in handling sensitive or confidential information or situations.
- Competency with Microsoft Office suite
- Competency with Nesda Trak or Alaycare an asset
- A current, valid driver's license and use of a reliable vehicle for travel in the regions of Waterloo-Wellington for client appointments and meetings.
- A clear police records check for vulnerable persons.

Professional Licenses/Affiliations/Memberships/Certificates

- Current registration with Ontario College of Social Workers and Social Service Workers and in good standing

HOW TO APPLY:

The Alzheimer Society is an equal opportunity employer, and we are dedicated to building a workforce that reflects the diversity of our communities in which we live and serve. We are also committed to inclusive, barrier-free recruitment and selection processes in accordance with the Human Rights Code and AODA and encourage applications from people with disabilities. Accommodations are available on request for candidates taking part in all aspects of the selection process.

Commitment to Equitable Recruitment:

The Alzheimer Society welcomes those who have demonstrated a commitment to upholding the values of equity and social justice and we encourage applications from members of groups that have been historically disadvantaged and marginalized, including First Nations, Metis and Inuit peoples, Indigenous peoples of North America, Black and persons of colour, persons with disabilities, people living with dementia, care partners and those who identify as 2SLGBTQ+.

Please include a cover letter along with your resume when applying, and email your package to Gail Roth, Director of Programs and Services, groth@alzheimerww.ca

This posting will remain open until a successful candidate is hired.

We thank all applicants for their interest in this position and we will be in touch with only those candidates selected for interviews.