

ST. LOUIS INTEGRATED HEALTH NETWORK

POSITION DESCRIPTION

Position Title: Community Health Worker, Transitions Clinic

Position Purpose:

Reporting to the Justice Initiatives Program Manager, the Community Health Worker (CHW) will navigate community reentrants to the Transitions Clinic, a space devoted to providing physical and behavioral healthcare access to people transitioning home from jail. Community reentrants will be referred to a Community Health Worker by Office of Violence Prevention personnel, jail staff, correctional partners, or through self-referrals prior to release to initiate the relationship between CHW and client and begin developing a release plan. The CHW will also identify resource supports that address social determinant of health needs (including employment assistance, connections to support for opioid use disorder, and more). The CHW will follow community reentrants for up to 12 months – during the most vulnerable months of transition back to the community. The CHW will act as a bridge to help community reentrants stay connected to support. The CHW will work in coordination with the community reentrant and other program stakeholders to complete re-entry wellness planning, navigate to care/resources, promote health and wellness, facilitate continuity of care between the Transitions Clinic and a permanent primary care home, advocate and coach, and support individuals to set and work towards self-identified goals. The CHW will provide ongoing follow up and outreach and complete regular data entry.

About IHN RE-LINK Transitions Services Program:

The purpose of the Re-Entry to Community Linkages (RE-LINK) program is to improve health outcomes for re-entrants in transition from jail and prisons to their communities. The targeted population are primarily reentrants ages 18-45 facing economic and environmental disadvantage that are discharged from jail to the community. The goals of the RE-LINK program are: (1) improved coordination and linkages among criminal justice, public health, social service, and private entities to address health care and health care access of community re-entrants; (2) reduce health disparities experienced by the reentry and justice-involved population; (3) increase access to needed public health, behavioral health, health care coverage, and social services; and (4) reduced recidivism.

The RE-LINK Transitions Services Program is an innovative approach to healthcare provision for formerly incarcerated people. The RE-LINK TSP works to pair community members with a history of incarceration with a specialized healthcare clinic dedicated to the most pressing needs of the justice population. The RE-LINK TSP will be staffed by at least one formerly incarcerated Community Health Worker with lived experience of navigating the healthcare system throughout their own reentry process. By centering the experiences, needs, and strengths of people who have been incarcerated, the RE-LINK TSP strives to address health inequities and transform health systems.

Critical Skills:

- Strong analytical, interpersonal, communication and organization skills.
- Ability to work in a self-directed manner and without close supervision.
- Proficiency with basic technology such as Microsoft 365/OneDrive, Microsoft Word, Microsoft Excel, and Internet browsing software is required.
- Proficiency with data entry and recording client case notes.
- Basic office management skills.
- Detail oriented and organized.

Required Qualifications:

- Must have reliable, personal transportation with valid driver's license.
- Associate's Degree or 2 years of relevant experience required.

Preferred Qualifications:

- Prior experience working with people aged 18-45, people impacted by the criminal legal system, community-based organizations, uninsured and Medicaid population.
- Knowledge of State social service agencies and community resources.
- Knowledge of health education, motivational strategies, trauma-informed care, and an empathetic manner working with the underserved.
- Experience in a nonprofit, social work, criminal justice setting, or related field.
- Prior experience in community health outreach or similar positions within a health care setting.
- Community Health Worker certification. Opportunities to gain certification while employed as the Transitions Clinic Community Health Worker.

Primary Responsibilities:

- Responsible for the implementation of the goals and objectives set forth and adopted by the IHN.
- Executes the day-to-day implementation of the IHN's RE-LINK Transitions Services Program.
- Connect clients leaving St. Louis City jail and state prisons with the Transitions Clinic, which provides primary and behavioral healthcare to people leaving jails and regional prisons.
- Provide outreach, education, referral and follow-up, advocacy, and home visiting services as needed to participants of the IHN RE-LINK Transitions Services Program, primarily people aged 18-45.
- Provides basic health education and information about how to best access and utilize the health and social service system.
- Works together with community reentrants to develop a health and wellness plan with key goals and objectives to facilitate reentry. Coaches and supports community reentrants to set and accomplish wellness goals.
- Coordinates with stakeholders in regional jails to facilitate Medication-Assisted Treatment (MAT) for clients who present with Opioid Use Disorder.

- Facilitates appointments to health and social service organizations. Follows up on appointments or other instructions from health homes and community providers by call, text or home visit. Works to ensure the reentrant attends and has access to scheduled appointments.
- Communicates with providers about barriers to self-management and access to care. Assists with post-hospitalization or emergency department visit follow up.
- Confirms established home plans and post-release support with client families.
- Assists in completing all required forms, agreements, case notes, etc., supplies them to client when appropriate, and keeps proper documentation organized in a system.
- Effectively communicates and coordinates with all program-related stakeholders (Office of Violence Prevention personnel, SLU Health Resource Center personnel, etc.) to facilitate supports before and after release.
- Provides timely and relevant reports to Justice Initiatives Program Manager regarding the status of the goals and objectives established by the IHN on the initiative.
- Collect and document data using the Efforts to Outcomes web-based software.
- Complete data entry in a timely manner.
- Maintains confidentiality and uses only the minimum amount of protected health information (PHI) necessary to accomplish job related responsibilities.
- Attend organizational, community, and partner meetings in a punctual and timely manner.
- Perform other duties as assigned.

Competencies:

Incorporates basic competencies into all aspects of the position, including:

- *Organizational commitment:* aligns own behavior with the needs and priorities of the organization.
- *Service orientation:* has a genuine desire to help others, especially those in need. Derives satisfaction from serving others. Understands people's needs and overcomes obstacles in serving them.
- *Learning orientation:* values and seeks opportunities to learn. Collects and uses information relevant to work-based problems.
- *Attitude toward change:* adapts to and works effectively with a variety of situations, individuals, groups and systems.
- *Personal effectiveness:* takes initiative to do more than the minimum requirements of the job. Expresses self-confidence in stating opinions and when called upon to make decisions.
- *Achievement motivation:* sets challenging objectives and works to continually improve personal performance.
- *Interpersonal and team performance:* builds and maintains positive relationships with people on the job. Listens effectively to understand others.
- *Respect for differences:* recognizes and appreciates differences in style, approach and background.
- *Quality focus:* minimizes errors and maintains high quality by checking or monitoring data and work in a timely manner, and by developing and maintaining systems for organizing work and information. Actively explores ways to improve quality of output.

- *Problem-solving effectiveness:* uses data and analytical thinking to identify problems and develop solutions.
- *Task accomplishment:* acts resourcefully to ensure that work is accomplished within specified time and quality parameters. Is able to focus effectively on more than one task or project at a time.
- *Proven track record and requisite skill set:* has a demonstrated track record and/or possesses the requisite skill set required to accomplish the goals and objectives set forth by the IHN. The skills and expertise required include: an understanding of the delivery of local health care, and an understanding of government, regulations, policy and programs.
- *Leadership:* Exudes confidence in serving as a champion in the formation and implementation of the IHN's objectives.

Reporting Relationships:

The RE-LINK Community Health Worker reports directly to the RE-LINK Justice Initiatives Program Manager.

Additional Information:

Position is full-time, 40 hours per week, non-exempt position.

Employees will be eligible for full benefits including health, retirement and vacation benefits. Candidates who have been impacted by the criminal legal system are strongly encouraged to apply.

Work Environment:

Regular, daily travel to partner sites and external meetings required within a 30-mile radius. Weekend or evening work may be required to fit client needs. Travel is primarily local during the business day, although some out-of-the-area travel may be expected. Rare overnight travel. The employee is constantly required to talk, hear, and operate a computer and mouse. The employee is frequently required to walk, bend, twist, push, pull, reach above shoulder and use hands to finger, handle, or feel. The employee will occasionally lift and/or move up to 15 pounds. Specific vision abilities required by this job include close vision and distance vision.

Starting Salary Range:

\$40,000 - \$44,000, contingent on experience

Application Instructions:

Please send resume, cover letter, and reference list to:

HR@stlouisihn.org

Subject: Transitions Clinic Community Health Worker Position