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Allegheny County Department *of* Human Services

This document contains **sample job descriptions** for:

- Targeted Case Management for SUD (bachelor's degree level)
- Blended Case Manager (bachelor's degree level)
- Crisis Clinician Associate (bachelor's degree level)

Drug & Alcohol Case Manager (Targeted Case Management for SUD)

Provides full range of case management services for clients diagnosed with drug or alcohol problems. This person ensures that these clients have access to services in a continuum of care by identifying, referring, and authorizing appropriate services. Major responsibilities include assessment of client's needs, determining level of care, client service plans, and facilitating the client's treatment to address their problems relative to drug or alcohol usage when warranted. Must develop a rapport with client serving as their advocate, assisting throughout the provisions in their services plan, and monitoring their progress. This employee will also perform the work in accordance with established regulations, policies, procedures, and supervisory review.

DUTIES AND RESPONSIBILITIES

- Conducts interviews utilizing the appropriate assessment practices to obtain the necessary information from client, families for the identification of needed services.
- Determines appropriate level of care based on placement guidelines.
- Determines appropriate funding arrangements and authorizes services for clients with drug or alcohol problems.
- Orients and guides clients through the program, policy, procedures, and treatment processes.
- Updates the client's service plan as needed.
- Coordinates and provide access to available alcohol and other drug or ancillary services, such as housing, childcare, medical or financial services.

- Prepares for, facilitate service planning meetings, and provide follow-up after meetings
- Monitors client treatment progress and performs review
- Prepares written reports and maintains several client records.
- Manages client caseloads and carry out work under the direction of a Supervisor or higher level administrative personnel.

SKILLS AND KNOWLEDGE

- Preferred knowledge, training and experience in social casework principles and methods.
- Knowledge of addiction as a disease and its treatment.
- Ability to provide the client with the correct treatment facilities and human services agencies.
- Ability to interpret regulations, policies, and procedures and apply them accordingly
- Ability to work with people from a variety of diverse agencies, backgrounds, resources, and communities.
- Ability to work with people with a variety of physical, emotional, or mental disabilities.
- Good communication skills.
- Ability to work in a team-oriented atmosphere.
- Ability to plan and organize records, reports, and maintain caseloads in an effective and timely manner.

ESSENTIAL REQUIREMENTS

- Possess Act 33 and 34 Clearances.
- Have a valid Pennsylvania motor vehicle license
- Ability to work independently.
- Willingness to pursue a Certified Allied Addiction Practitioners (CAAP) credential or other similar state certification.

BLENDED SERVICE COORDINATOR

FUNCTIONAL DEFINITION

This individual will provide Service Coordination services carefully calibrated to the level of need of the individual and or family being served. The Service Coordinator will be responsible for the performance of the General Service Coordination duties as well as the specific duties as assigned.

The primary function of the Blended Service Coordination Program is to provide the person with serious mental health issues with professional assessment, service planning, service coordination, and referral and re-evaluation services required for a safe and healthy community life, which is manifested through stability in relationships, education, and mental / physical wellness. Staff are expected to develop enduring relationships with those served, provide persistent outreach, be the central contact point in the system, coordinate care and assist the person in their recovery process.

DUTIES AND RESPONSIBILITIES

The Service Coordinator provides professional coordination of mental health services according to the individual's level of need. Works as a member of a treatment/service team, often taking the lead role, and using considerable discretion and independent judgment in order to promote individuals' mental health recovery. The Blended Service Coordinator serves as a key member of the treatment/service team, assuring often the complex services produce positive outcomes.

1. **Engagement/Developing Enduring Relationships.** Develops relationships with that individual, his/her family and other important people in his/her life as identified and with consent of the individual serviced. This engagement will be persistent and will result in an enduring relationship. The persistence is evident in frequent outreach and genuine concern over a lengthy period of time.
2. **Assessment.** Assesses individual and family strengths and needs in a collaborative method through individual and /or collateral interviews and reviews of social and clinical information provided by other entities. Administers the CANS upon initial intake, within 30 days, every 6 months thereafter or as needed when a life changing event should occur with the individual. The development of an assessment is based on an understanding and trusting relationship, that needs and strengths vary over time and are evaluated in every contact (face to face, telehealth, and phone). This ongoing assessment will be augmented by consultation with other members of the treatment team and any others with relevant knowledge. Ideally the Service Coordinator's information gleaned from the consumer will not be the only source of information for the assessment.
3. **Service Planning.** In close collaboration with the consumer, family members and other service providers, promotes service planning efforts which result in developing, documenting and implementing a comprehensive service plan driven by the individual utilizing all the agreed upon strengths and needs. The services provided then follow the conjointly developed service plan pursuing all of the objectives developed. As strengths and needs change, the Service Coordinator with the consumer, alter the service plan to

meet the changing needs and utilize the new strengths. Plans will be formally reviewed every six months, according to accreditation and state regulations.

4. **Convener/Facilitator**. Convenes and facilitates interdisciplinary service planning meetings or other related team meetings to ensure appropriateness and responsiveness of services in relation to the individual and/or family needs. Whenever possible, the individual, family and others requested by the individual will be present in service planning meetings.
5. **Evaluation.** Evaluates all services received by individuals who are served by the Service Coordination program. Reviews cases, meets with individual's families, members of the treatment team, agency supervisor/manager, advocates, attorneys, school personnel and attends staffing in or out of the office. Advocacy or problem solving is provided when the individuals are not receiving the service described in the service plan unless they no longer want that service.
6. **Linkage to Natural Supports.** Ensures individuals being served needs are met through the utilization of natural supports (family, friends), community and generic services and specialized services (Mental Health, ODS, Peer Support, IEP, OVR, D&A, etc.). Assists individual and family to identify, link, access and coordinate such resources. The involvement of families is highly desirable and will be vary based on the consumer's wishes, the age of the consumer and other unique factors.
7. **Cultural Competence.** Provides culturally competent services and will not discriminate based on individual's racial, religious, sex, sexual orientation, gender identity, age and ethnic background / identification.
8. **Resource Expert.** Investigates new resources and communicates with Directors of prospective resources as a liaison on behalf of the individual being served.
9. **Advocate.** Advocates for and with the individual being served to ensure responsiveness from natural, community generic and specialized services/supports. Advocacy includes providing information, removing barriers, creating options and resolving problems.
10. **Training.** Attends training programs as provided through the State, County and Agency to assure that the incumbent is up to date on new approaches, best practices and recovery-oriented services.
11. **Documentation.**
    - Maintains an accurate and timely record of Service Coordination activity. Records individuals being served and collateral contacts. Updates forms as needed. Reviews charts for compliance with regulations. Prepares for formal audits. Documentation will use the individual's language and describe his/her perspective. Adheres to regulations for each level of Service Coordination in this area.

Crisis Clinician Associate

Description

Under the direction of the Crisis Clinician Supervisor, the Crisis Clinician Associate is responsible for providing clinical services to consumers experiencing a self-identified crisis. Primary responsibility is responding to crisis related situations from community professionals and persons. This includes, but is not limited to, answering questions, obtaining clinical information, scheduling outpatient evaluations, responding to telephone crisis, de-escalation, and documentation of all duties previously mentioned.

Responsibilities

- Successfully participate in and complete Crisis Clinician orientation process.
- Learn to manage a shift caseload safely and successfully, as assigned and coached by the Lead Clinician.
- Work with crisis leadership to develop assessment, de-escalation, documentation, and motivational interviewing skills.
- Learn to utilize the Electronic Medical Record to obtain relevant information and complete documentation.
- Provide supportive counseling to consumers to promote stability by utilizing a person centered, strength-based model of intervention.
- Work efficiently and independently in crisis setting.
- Support consumer and negotiate appropriate referral services.
- Consults with the Clinician II to establish disposition plans.
- Advocates for Consumer admission to Crisis Residential program when appropriate.
- Encourages Consumers to consider admission to Walk-In program for further support and assessment when appropriate.
- Meets documentation expectations and completes all required paperwork.
- Completes face to face crisis assessments.
- Responds to telephone calls from consumer(s), community, and natural supports.
- Manages crisis situations effectively using positive approaches.
- Participate in interdisciplinary activities such as trainings and staff meetings.
- Completes case reviews.
- Helps to manage and support the therapeutic milieu, including safety.

Qualifications

- Bachelor's Degree in Psychology, Counseling or Social Work.
    - Other fields of study may be considered with coursework of at least 12 credits in human services and/or relevant mental health experience

- Consistent ability to respond calmly and effectively, using good clinical judgment to both psychiatric and medical emergencies.
- Recovery-oriented interpersonal relations.
- Ability to work shifts, weekends, holidays, and to assume on call responsibilities.

Licensure, Certifications, And Clearances

- Cardiopulmonary Resuscitation (CPR)
- Comprehensive Crisis Management (CCMC)
- Driver's License
- Act 31 Child Abuse Reporting with renewal
- Act 33 with renewal
- Act 34 with renewal
- Act 73 FBI Clearance with renewal
- OAPSA