

**LIFE MANAGEMENT CENTER OF NORTHWEST FLORIDA, INC.
JOB DESCRIPTION**

DATE ESTABLISHED: 09/26/95
DATE AMENDED: 06/01/15

TITLE OF POSITION: Inpatient/Outpatient Psychiatrist

POSITION NUMBER: 46

MINIMUM TRAINING AND EXPERIENCE REQUIREMENTS:

M.D. or D.O. Degree; Florida license; American Board of Psychiatry and Neurology eligibility

Compliance with minimum standards for screening of mental health personnel as contained in F.S. 394.4572.

SUPERVISOR: CEO

POSITIONS SUPERVISED: Psychiatric Advanced Registered Nurse Practitioners

SALARY MINIMUM: \$200,000 and up depending upon experience and workload.; On-call (\$243 weekday night, \$417 Friday before holiday, \$579 weekends & holidays);

WAGE AND HOUR STATUS: Exempt: (Professional)

DESCRIPTION OF DUTIES AND RESPONSIBILITIES^{1*}

ESSENTIAL FUNCTIONS (Essential functions of this position are listed below. The position also includes additional functions as needed and/or assigned by supervisor.)

INPATIENT CARE

1. Admission evaluation for inpatient psychiatric care.
2. During normal working hours and after normal working hours on-call coverage including telephone consultation and patient evaluation and treatment.
3. Psychiatric evaluation for court and others, including Baker Act.
4. Make rounds, check medication, note progress and condition of all patients under his/her care.
5. Consultation with non-psychiatric physicians.

* Expectations regarding quality and quantity of work are further delineated in the criteria-based performance appraisal.

6. Confer with and advise staff, relatives and other appropriate persons on the care, treatment and prognosis of the patient.
7. Provide medication teaching and education to patients.

OUTPATIENT CARE

1. Psychiatric evaluation and treatment planning.
2. Individual medical psychotherapy and pharmacologic management.
3. Confer with and advise staff, relatives and other appropriate persons on the care, treatment and prognosis of the patient.
4. Provide medication teaching and education to patients.
5. Clinical supervision of Psychiatric Advanced Registered Nurse Practitioners.

CONSULTATION AND EDUCATION

1. Consult with other medical and non-medical personnel on clinical issues and individual patients.

ADMINISTRATIVE AND QUALITY MANAGEMENT

1. Document and report psychiatric services and activities within designated time frames.
2. Maintain compliance with guidelines and requirements of funding and accrediting agencies and professional psychiatric standards.
3. Complete appropriate forms and documentation of services as required for reimbursement.
4. Attend and participate on committees and work groups as assigned.

PROFESSIONAL GROWTH AND DEVELOPMENT

1. Compliance with professional licensing, credentialing and privileging requirements.
2. Compliance with mandatory staff training requirements.

TRAVEL

1. Travel required between clinics, inpatient or other service sites.

Physical & Other Requirements:

Activity	Expectation
Standing	<input checked="" type="checkbox"/> Minimal <input type="checkbox"/> Moderate <input type="checkbox"/> Frequent
<input checked="" type="checkbox"/> Sitting	<input type="checkbox"/> Minimal <input type="checkbox"/> Moderate <input checked="" type="checkbox"/> Frequent
<input checked="" type="checkbox"/> Driving vehicles	<input type="checkbox"/> Minimal <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Frequent
Lifting and/or Carrying	<input checked="" type="checkbox"/> Minimal <input type="checkbox"/> Moderate <input type="checkbox"/> Frequent
Bending and/or Stooping	<input checked="" type="checkbox"/> Minimal <input type="checkbox"/> Moderate <input type="checkbox"/> Frequent
Climbing Stairs and/or Ladders	<input checked="" type="checkbox"/> Minimal <input type="checkbox"/> Moderate <input type="checkbox"/> Frequent
Walking or Moving (between offices, other facilities, etc.)	<input checked="" type="checkbox"/> Minimal <input type="checkbox"/> Moderate <input type="checkbox"/> Frequent
Other (lift above waist/reaching etc., please explain)	<input type="checkbox"/> Minimal <input type="checkbox"/> Moderate <input type="checkbox"/> Frequent

Speaking:

Yes

No

Hearing:

Yes

No

Reading Comprehension:

Yes

No

Repetitive motion with hands, wrists, arms (e.g keyboard, typing, handwriting, etc.)

Yes

No

Ability to lift and carry up to **15** pounds.

Ability to handle stressful situations:

Minimal

Moderate

Frequent

	Infrequent	Occasional	Frequent	N/A*
Travel Same Day	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel Overnight	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Overtime (Non-Exempt only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Holidays/Weekends	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shift Work (PMs/Midnights)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* Not Anticipated

Copy received by:

_____ **DATE:** _____