

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

DATE ESTABLISHED: 08/01/2014

DATE REVISED: 07/30/2018

DATE REVIEWED: 07/30/2018

DATE APPROVED: 07/30/2018

TITLE OF POSITION: Outpatient Counselor – Master’s Degree

POSITION NUMBER: MH-50

PROGRAM: Bay

COMPONENT: Family Services

MINIMUM TRAINING, CREDENTIALS AND EXPERIENCE REQUIRED: Masters Degree from an accredited university or college with a major in counseling, psychology, social work, or human services related discipline (*a human services related discipline is one in which major course work includes the study of human behavior and development*). Prefer individuals with at least two years’ experience working with applicable populations who have mental health, substance abuse, and/or co-occurring disorders or developmental disabilities. Ability to provide individualized, substance use, and co-occurring services to meet the needs of individuals served and their families.

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

SUPERVISOR: Children Services Component Director

POSITIONS SUPERVISED: N/A

WAGE AND HOUR STATUS: Exempt

DESCRIPTION OF DUTIES AND RESPONSIBILITIES: *

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

1. Meet minimum standards for screening of mental health personnel as contained in F.S. 394.4572.
2. Upkeep of quality assurance documentation standards is required at all level.
3. Maintenance of the minimum monthly productivity is expected at each review point (every 6 months or more as applicable).
4. Provide client with an appropriate orientation.

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

5. Collect and analyze data considering the client's age, developmental level, treatment readiness, stage of change, gender, and cultural background, and complete mental health and substance abuse history.
6. Assess for mental health, substance use, and co-occurring disorders.
7. Use clinical data to arrive at a clinically supported and valid DSM diagnosis.
8. Arrive at treatment recommendations and level of care decisions that are appropriate to diagnosis, client's level of functioning, and medical necessity criteria.
9. Complete FARS/CFARS/OMIs in an accurate and timely manner.
10. Develop individualized treatment plans (*TX Plan*) based on assessment, the client's assessed stage of change, and in consultation with the client, family, and or treatment team as appropriate.
11. Address diagnosed mental health, substance use, and co-occurring disorders in the treatment plan.
12. Include the following elements in treatment plans and treatment plan reviews (*TPR*): diagnosis (*updated as needed*), SNAP (*updated as needed*), discharge criteria, and all services provided.
13. Create goals that use consumer's own words, are based on consumer's needs, and that have measurable objectives.
14. Assess treatment and recovery progress, and, in consultation with the client and significant others; make appropriate changes to the treatment plan to ensure progress toward treatment goals. (FTPR, progress notes, changes to treatment plan as indicated by client change).
15. Monitor and document progress of the client in relation to treatment goals and objectives.
16. Complete treatment plans and treatment plan reviews within established timeline.
17. Obtain, track, and update authorizations for services as needed. (example: TBOS, Psychosocial Rehab, etc.).
18. Provide individualized treatment services based on the treatment plan.
19. Provide integrated treatment to individuals assessed as having co-occurring disorders.
20. Provide services based on strengths, needs, abilities, preferences, cultural identity, and language of the client.

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21. Establish rapport with clients and families to foster engagement and develop a therapeutic process.
22. Involve family, social networks, and community systems in the treatment and recovery process as appropriate.
23. Adapt evidence-based practice to the individual needs of the client. *(EBPs include, but not limited to, IDDT Integrated Dual Diagnosis Treatment, Seeking Safety, TFCBT Trauma Focused Cognitive Behavioral Therapy, Motivational Interviewing).*
24. Conduct discharge planning with the client (and involved significant others when available and appropriate), and close client record in EHR.
25. Assess for risk and protective factors and provide services appropriate to identified risk and protective factors.
26. Recognize, respond to, high risk factors including suicidal and homicidal ideation.
27. Recognize, respond to, and defuses volatile or dangerous situations.
28. Provide crisis intervention services as needed.
29. Seek supervision and consultation as needed in regard to client's safety management.
30. Recognize and manage transfer of care and other critical points in treatment (critical risk points include but are not limited to: initial contact; change or transfer of care; change in legal status; change in life events; change in mental status; change in physical condition; change to a less restrictive level of care; discharge from services).
31. Develop appropriate client Personal Safety Plan as needed.
32. Complete documentation within 24 hours of service occurrence.

Physical & Other Requirements:

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

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Other (lift above waist/reaching etc., please explain)	<input checked="" type="checkbox"/> Minimal	<input type="checkbox"/> Moderate	<input type="checkbox"/>
Filing charts	<input checked="" 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 **10** 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Shift Work (PMs/Midnights)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Copy received by:

_____ **Date** _____

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