

STATE OF SOUTH DAKOTA CLASS SPECIFICATION

Class Title: Psychiatric Social Worker

Class Code: 51542

Pay Grade: GJ

A. Purpose:

Provides psychosocial counseling and therapy to patients, families and groups in an institution setting; social services such as discharge planning, collateral contacts, and assessments; serves as a member of the treatment team; and intervenes in the patient's out-of-hospital environment to serve as the primary formal link between the patient, family, and community support systems.

B. Distinguishing Feature:

Psychiatric Social Workers serve a dual purpose, providing counseling and therapy to patients, families, and groups; act as a social worker by developing financial, vocational, legal, social, recreational, and placement resources for patients; and are eligible for competency based endorsement as a Qualified Mental Health Professional (QMHP) from the Department of Human Services.

Human Service Social Workers do not provide psychosocial counseling and therapy.

C. Functions:

(These are examples only; any one position may not include all of the listed examples nor do the listed examples include all functions which may be found in positions of this class.)

1. Serves as a member of a treatment team which designs the treatment program for each patient to ensure the most effective methods of behavior and treatment are used.
 - a. Actively participates in treatment team meetings and physician rounds.
 - b. Reviews case histories, biographies, and other data pertaining to patients in order to determine problems, their causes, and possible remedies.
 - c. Evaluates, monitors and provides input regarding the patient's individualized treatment and progress with behavioral interventions.
 - d. Makes recommendations for changes and additions to the treatment plan direction.
 - e. Collaborates with the treatment team on plan development and to discuss patients' progress and implementation of creative treatment methods.
 - f. Communicates treatment team decisions to community supports, families, and administration.
 - g. Serves as a patient advocate.
2. Develops and conducts therapeutic socio-psychological treatment to enable patients to progress towards recovery from psychological illness.
 - a. Develops and implements appropriate therapeutic treatment modalities for patients across the lifespan.
 - b. Facilitates group and individual treatment sessions to provide insight into the patient's problems and advancement of treatment goals to ensure appropriate treatment.
 - c. Communicates therapeutically with patients, performs communications skills, listening skills and treatment interventions.
 - d. Reports on treatment and progress to the treatment team.

3. Reviews, plans, develops, and executes discharge plans to ensure the patient's well being and security within the community.
 - a. Obtains financial, vocational, legal, social, and recreational resources.
 - b. Makes referrals for placement purposes and services within and outside the facility.
 - c. Provides community awareness training for patients.
 - d. Prepares informational discharge packets for patients.
 - e. Follows up on a select group of discharged patients or patients on leave by interviewing the ex-patient, family, agencies, and employers.
 - f. Visits potential placement facilities to determine whether sufficient resources are available at that location to accommodate the patient.
4. Compiles and prepares accurate social histories, previous treatment information, and patient assessments and shares findings with other members of the treatment team to determine effective treatment and therapies and to identify the patient's needs and goals.
 - a. Interviews the patient, relatives, and others associated with the family.
 - b. Contacts mental health centers and other agencies involved with the patient.
 - c. Assesses the patient's needs and collaborates with a treatment team to develop an effective therapeutic treatment.
 - d. Communicates with the families of patients through visitations, over the telephone, or by mail.
5. Consults with patient's family and/or guardian to inform them of the patient's progress and to promote the patient's best interests to ensure that the family and/or guardian maintain a therapeutic role in the patient's treatment.
6. Establishes and maintains accurate and updated documentation regarding the patient including collateral contacts, progress planning, discharge planning, referrals for services both inside and outside the hospital, and applications for services and resources outside the hospital.
7. Compiles and provides assessments and other information to community mental health centers to assist them in developing and conducting treatments and therapies to outpatients.
8. Conducts and attends training and treatment review seminars to ensure that all staff are adequately trained and informed of new techniques, therapies, or resources.
9. Completes, petitions, and testifies at mental health hearings as a Qualified Mental Health Professional.
10. Performs other work as assigned.

D. Reporting Relationships:

Typically no subordinates report to this position, but the incumbent may provide work direction to direct care staff.

E. Challenges and Problems:

Challenges include finding adequate and appropriate discharge destinations for the severely and mentally ill population and maintaining documentation requirements while still providing an adequate level of care for patients. It is difficult to acquire the large number of community services necessary to set up a thorough, successful discharge plan as well as adapt treatment

and psychosocial therapeutic settings to a patient population with a wide array symptoms and different levels of acuity. It is also difficult to attest to less restrictive environments with limited discharge options available in some situations.

Problems include getting reliable information from unreliable or unwilling patients, families, and communities who are unwilling to accept certain clients.

F. Decision-making Authority:

Decisions include developing individual therapy techniques; curriculum and format of treatments; discharge plans; financial needs; need for family contact; where to obtain finances, clothing, and health care; sanctions on negative behavior; relevant social history information; and appropriate topics, time, and place for in-service training. As a QMHP decisions include the determination of the need for continued admission and/or commitment to psychiatric inpatient care.

Decisions referred include general treatments as established by the consensus of the treatment team, policy and procedure development and interpretation, discharge dates, approval of leave requests, legal issues, ways to resolve department conflicts, medical problems, and treatment imperatives and program philosophies.

G. Contact with Others:

Daily contact with patients to provide assessment and treatment and with the treatment team to assess, inform, and collaborate; and regular contact with family members to inform them of the patient's progress and with community mental health centers to develop and execute discharge planning.

H. Working Conditions:

The incumbent works in an office environment and on units with potentially violent, aggressive, hostile, mentally ill patients. Subject to constant interruptions and physical or verbal assault from patients.

I. Knowledge, Skills and Abilities:

Knowledge of:

- completing petitions for and testifying at mental health hearings;
- social and psychological assessments and treatment techniques;
- ethical standards, principles, and practices of social work, counseling, and human behavior;
- human growth and development and their relationship to social work principles and methods;
- current social, economic, and health trends and services; and the ability to adapt trends to practical program applications and link patients with services needed;
- interviewing and other information gathering techniques;
- state mental health practices and procedures;
- effective teaching techniques;
- record keeping.

Ability to:

- develop cooperative and satisfactory contacts with patients, relatives, physicians, social agencies, community officials, and other administrative officials;
- apply proper interviewing techniques;

- facilitate individual, group and family counseling and therapy;
- create meaningful, concise, and accurate reports and correspondence;
- establish and maintain effective working relationships with diverse populations;
- communicate effectively with a wide variety of people;
- assess social service needs, complete social assessments and social histories, and identify programs or services sufficient to meet those needs;
- restrain combative patients;
- develop effective therapy curriculum;
- be patient and understanding;
- communicate to groups;
- negotiate with various agencies;
- testify in mental health hearings as a Qualified Mental Health Professional.

J. Licenses/Certification:

Eligible to be certified as a Qualified Mental Health Professional (QMHP) per SDCL 27A-1-3.