

# **Southern Illinois University School of Medicine**

## **POSITION DESCRIPTION**

**NAME:** **FLSA STATUS:** EXEMPT

**RANK:** Licensed Clinical Social Worker/Licensed Clinical Professional Counselor

**DEPARTMENT:** Family & Community Medicine

**DIVISION:** SIU Center for Family Medicine FQHC  
Home Base: Taylorville Health Center  
Patient Base through Telehealth: Lincoln and Jacksonville

### **POSITION FUNCTION:**

This position will serve as a Licensed Clinical Social Worker or Licensed Clinical Professional Counselor at the SIU Center for Family Medicine. The position will engage patients at the medical visit, determine the extent of their needs for therapy and/or community assistance and/or referral to psychiatry.

### **ORGANIZATIONAL RELATIONSHIPS:**

This position reports to the Behavioral Health Program Supervisor who in turn reports to the Chief Medical Officer of the Springfield Health Center site.

### **DUTIES AND RESPONSIBILITIES:**

The following information is intended to be representative of the work performed by incumbent in this position and is not all-inclusive. The omission of a specific duty or responsibility will not preclude it from the position if the work is similar, related, or a logical extension of position responsibilities.

Demonstrates, by actions, commitment to the mission and the behavioral standards of SIU School of Medicine. Provides excellent service to both internal and external customers through collaboration and partnership; compassion and respect; integrity and accountability; diversity and inclusion; as well as continuous learning and improvement.

**I. ADMINISTRATION (0%)**

**II. TEACHING (10%)**

- A. Assist in the development of the behavioral science curriculum, goals, and objectives
- B. Teach counseling skills to family medicine residents and medical students in the clinic setting.
- C. Serve as a mentor to behavioral health interns and other interdisciplinary learners.

**III. RESEARCH**

**(5%)**

- A. Perform periodic literature reviews on behavioral science topics to keep abreast of latest developments in the field.
- B. Participate in collaborative departmental research, as opportunities arise.

**IV. SERVICE**

**(85%)**

- A. Provide care to patients in clinic or through telehealth for consult services for mental health therapy.
- B. Provide care and on-going counseling services to patients of Family Medicine and the Medication Assisted Recovery programs.
- C. Provide group therapy as the need arises.
- D. Participate in Center Peer Review and Quality Improvement activities.
- E. Provide emergency services to patients as needed including those who are identified as having no primary care physician.
- F. Serve on department, school, or center committees as needed.
- G. Participate in the development and/or delivery of behavioral science presentations for residents, faculty, and medical students

**AUTHORITY AND RESPONSIBILITY**

- A. Supervisory Controls: The supervisor will assign duties as needed. The employee will be expected to work independently, with occasional consultation from the supervisor.
- B. Guidelines: Guidelines and policies are set by the supervisor and other program faculty.

**MINIMUM QUALIFICATIONS**

- 1. Master Degree in Social Work, Psychology or Counseling
- 2. Licensed or License Eligible to practice Social Work or Professional Counseling in the State of Illinois
- 3. Sensitive to the needs of underrepresented minority populations.

**ENVIRONMENTAL, HEALTH AND SAFETY RESPONSIBILITIES**

Participates in meetings, trainings and other environmental, health and safety activities as required by SIU School of Medicine.

**WORKING CONDITIONS/PHYSICAL DEMANDS**

See attached Physical and Environmental Requirements form.

**SIGNATURES:**

Incumbent \_\_\_\_\_ Date \_\_\_\_\_

Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Bonnie Landwehr, LCSW, Behavioral Health Director

APPROVED:

\_\_\_\_\_  
Amit Sapra, MD, Site Medical Director

Date \_\_\_\_\_

\_\_\_\_\_  
Iris Wesley, CEO, SIU FQHC

Date \_\_\_\_\_

\_\_\_\_\_  
Janet Albers, MD, Chair, Dept of FCM and  
Chief Strategy Officer, SIU FQHC

Date \_\_\_\_\_

# PHYSICAL AND ENVIRONMENTAL REQUIREMENTS

SIU SCHOOL OF MEDICINE

Incumbent: \_\_\_\_\_ Classification: LCSW/LCPC

Position No. (If applicable): SMS.AP.71022.000 Department: Family and Community Medicine/Taylorville-SMS

**WORK ENVIRONMENT: (Check all applicable environments)**

<input checked="" type="checkbox"/> Office	<input type="checkbox"/> Hospital
<input checked="" type="checkbox"/> Clinic	<input type="checkbox"/> Warehouse
<input type="checkbox"/> Research Laboratory	<input type="checkbox"/> Outdoors
<input type="checkbox"/> Other (Be Specific): _____	

PHYSICAL DEMANDS:	Seldom	Occasionally	Frequently	Constantly	N/A
(Indicate frequency of activity during performance of position duties)	(Performed rarely less than 2% of the time)	(Performed less than 25% of the time)	(Performed 26% to 50% of the time)	(Performed 51% or most of the time)	

*(Click on the Physical Demands Definitions button at the bottom of the form for a list of physical demands definitions)*

Reading	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Writing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Speaking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Close visual acuity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Travel	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hearing - Conversation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Hearing - Other Sounds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Stooping	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Squatting	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gross hand manipulation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Fine hand manipulation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Working in dust, fumes, gases, or irritants	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working at heights	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working in extreme cold, heat and/or humidity	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working in close quarters	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Climbing	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Operating motor vehicles	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sitting	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Standing	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Walking	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working above shoulder level	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Twisting	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Kneeling	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pushing or pulling	10 - 20 lbs.				<input type="radio"/>
Carrying	10 - 20 lbs.				<input type="radio"/>
Lifting	10 - 20 lbs.				<input type="radio"/>
Other (Please list): _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I affirm the environmental and physical demands listed on this form are an accurate reflection of the requirements of this position to the best of my knowledge and belief.

I have read, understand and am capable of meeting the physical and environmental demands of this position.

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Supervisor Name: Bonnie Landwehr, LCSW Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_