CASES

JOB DESCRIPTION

Job Title: Licensed Practical Nurse (LPN) Case Coordinator – Manhattan LINK

Reports to: Team Leader

Overview: Manhattan LINK is a new program at CASES. LINK will serve annually over 500 adults (16 years and above) with serious mental illness (SMI) involved in the criminal justice system. This includes individuals returning to the community after serving a jail sentence, probation and parole clients, participants receiving alternative to incarceration (ATI) services through the Manhattan Mental Health Court, judicial diversion, and plea agreements monitored by Manhattan Criminal and Supreme Court judges. LINK offers community clinical, case management and rehabilitation services to support participants to successfully exit the justice system, engage in recovery and progress toward self-sufficiency. LINK provides six months of community-based field case management services to participants that live in Manhattan, Brooklyn, Bronx and Queens. The LPN works as an integral part of the program under the direction of the Team Leader. The LPN manages a caseload to ensure participants access medical care, mental health and substance use treatment services. The LPN conducts services offsite in the community throughout NYC escorting participants to appointments to link to services and working collaboratively with health, mental health and substance abuse treatment providers.

Responsibilities:

- Review and monitor health assessments, lab results and physical healthcare information received from Rikers Island for participants with high medical alerts to support engagement in outpatient medical care, specialist services, and participant overall health
- Manage active caseload of 25-30 participants at any given time and provide an average of 65-70 face-to-face units of service per month in community locations determined by the participant's service needs
- Assist in the referral to Health Home care managers once participant has Medicaid and support the single care plan by providing pertinent information about the individual's health status and current medical treatment needs
- Provide guidance to all staff on the health care needs of LINK participants that need to be included in service plans
- Facilitate participant education on prevention, health, wellness, diet, HIV/AIDS education, smoking cessation and recovery
- During screening obtain information: a) to establish the degree of medical risk, medical care and interventions required to promote positive health

outcomes, and, b) to support program staff to integrate primary care/medical needs
- Provide education to staff on physical health issues and medical care protocols
- Act as advocate and liaison for participants to secure medical care and other community supports that promote integrated physical and mental health wellness
- Contribute to effective medication management procedures in collaboration with shelter staff, supportive housing providers, rehabs and other providers offering transitional housing to LINK participants
- Support the LINK staff to ensure all participants have primary care providers and receive annual physicals and dental examinations
- Use motivational interviewing and a recovery-oriented approach and ensure referrals address all needs (health, mental health, substance use needs and psychosocial needs) and participants are offered integrated services
- Provide individual health counseling as needed
- Administer IM's as per orders as needed while participants are transitioning to mental health and primary care to reduce participant utilization of ERs for services after release from jail
- Monitor vital signs and side effects of medications and reports findings to housing and treatment providers engaging participants in services
- Evaluate, on a continuing basis, nursing intervention and expected outcomes
- Involve family, significant others, landlords and housing providers in service provision with participant consent
- Build in review and evaluation points and modify the delivery of services in the light of feedback from participants and relevant others to ensure effective transition of participant's care to long-term primary care provider
- Complete screenings, progress notes, and significant data
- Provide culturally-competent services in accordance with CASES policies and practice
- Any other duties as required by team leader and director

Qualifications:

- Licensed Practical Nurse (LPN) with current New York State license
- At least three years of experience working with people with serious mental illness and co-occurring substance use disorders
- Extensive knowledge of NYC healthcare, community treatment, support services and resources for Medicaid recipients
- Ability to work effectively with diverse team and remain highly organized and self-motivated
- Proficient in computers and fluency in Spanish preferred

CASES HEADQUARTERS
151 LAWRENCE STREET, 3RD FLOOR
BROOKLYN, NY 11201
PHONE NUMBER: 212.553.6300
FAX NUMBER: 212.553.6379

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Salary: $50,000 (fulltime Monday to Friday 35 hour per week)

How to apply: E-mail cover letter and resume in PDF or Word format only to casesjobs@cases.org. Please list the title of the position you are applying for in the subject line. No phone calls please. Only applicants selected for interviews will be contacted.

CASES is proud to be an Equal Opportunity Employer. Employment with CASES is based solely on qualifications and competence for a particular position, without regard to race, color, ethnic or national origin, age, religion, creed, gender, sexual orientation, disability, or marital, military, or citizenship status. We also actively recruit individuals with prior involvement in the criminal justice system.

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