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**POSITION ANNOUNCEMENT**

**JOB TITLE: Mental Health Clinician**

**PROGRAM: Safe Options Support (SOS) –Team**

**REPORTS TO: Team Leader**

**Job Overview:**

The Licensed Mental Health Professional will play a pivotal role on one of Governor’s newly launched innovative Safe Options Support (SOS) teams, that will provide comprehensive care to street homeless or subway dwelling individuals.

The multi-disciplinary SOS team will consist of a Team leader, Licensed Clinicians, Case Managers, a Licensed Practical Nurse, and a Peer Specialist. The team will support program participants in the community through the application of the highly acclaimed, Critical Time Intervention, evidence-based, model of care.

The Mental Health Clinician’s role will involve community outreach on the streets and subways, coordinating participants needs before and after their move from street to home, enhancing their daily living skills, providing supportive counselling, and advocating on their behalf when faced with discrimination or healthcare inequities. Member choice, harm reduction, non-coercion, flexibility and person-centered core elements are essential to this team.

The SOS teams will continue to follow participants for several months after housing placement to ensure their stability, independence and wellbeing in their new community. The role will require field-based work, periodic on call coverage, and a willingness to work flexible hours.

**This is an exciting opportunity for a clinician who is looking to transform community healthcare in NYC and making long lasting positive changes in the lives of homeless New Yorkers.**

**Minimum Education and Experience Requirements:**  Licensed master’s degree or higher in social work, mental health counseling, nursing or psychology.

**Job Responsibilities:**

* Persistent and assertive outreach and engagement using strength-based approaches beginning either at known “hang-outs” or “Hot spots” within the transit system or during an inpatient hospital admission or emergency department visit;
* Partnering and collaborating with current street outreach teams, local police precincts, local hospitals, the MTA, the Department of Homeless Services and family members/caregivers to identify those in most need of outreach and care;
* Continuously assess the health and social needs of participants through SOS’s conversational and observational assessments and formalized risk assessments tools for those identified as being at high risk;
* Work in collaborations with the centralized SOR Hub to identify available housing and to support participants through the process. Tasks may include completing HRA 2010e, applying for housing, prepping for interviews, follow up with housing providers, and assistance with moving in (day of move) with obtaining housing supplies and learning the neighborhood;
* Participate in hospital discharge planning meetings to identify the best community resources for returning patients;
* Provide short term therapeutic counseling and support to participants pre and post housing;
* Supervise case managers and peers on the SOS team;
* Collects and reports data, as required and work with team leader, data analyst and other SOS teams to use data to inform future care delivery;
* Once housed work with participants and their housing providers to resolve clinical issues that are impacting on the participant’s ability manage, and retain supportive housing;
* Foster relationship with community provides to ensure that recipients are connected with appropriate services as they transition back into the community;
* Appointment navigation including accompaniment to appointments, travel training, reengagement in community care, and addressing barriers to care;
* Facilitating crisis interventions, referrals and hospitalizations as appropriate
* Review documentation and conduct comprehensive psychosocial assessments to determine the medical, psychiatric, housing and other social needs in the community;
* Obtain historical and collateral information from multiple sources to support participants behavioral and physical health needs;
* Monitor, evaluate and record participant progress with respect to care plan goals;
* Attend and participate in team meetings and supervisory sessions;
* Perform other related duties as assigned.

**Essential Knowledge, Skills and Abilities:**

* Experience working with homeless and/or precariously housed populations preferred but not required;
* Knowledge of homeless resources, NYC shelter systems, and MTA transit systems a plus.
* Knowledge of counseling principles and methods for mental illness and substance use disorders ;
* Knowledge of treatment, rehabilitation, and community support programs as they relate to recipient/residents, families, and staff;
* Knowledge of techniques for identifying, assessing, and preventing potentially violent behavior, including crisis management and de-escalation techniques;
* Ability to develop, evaluate, implement, and modify treatment intervention to meet the needs of individual recipients;
* Ability to prepare accurate and timely reports;
* Computer proficiency in Health Information Technology and Microsoft applications such as MS Word, Excel, PowerPoint.

**This job description in no way states or implies that these are the only job-related duties to be performed by the employee. You will be required to follow any other job-related instructions and perform any other job-related duties requested by your supervisor.**

**This position may require travel throughout the five boroughs of New York City.**

Salary: $70,000 plus generous benefits

Email a resume, cover letter and contact information for 3 professional references to:

**Joshua Ayala**

**SOS Team Leader**

**Email: Jayala@acmhnyc.org**

ACMH is committed to the mental and physical wellbeing of vulnerable New Yorkers and is a leader in the provision of outreach and engagement, care management, rehabilitation, and supportive housing.

For more information, visit our website: [www.acmhnyc.org](http://www.acmhnyc.org)