JOB DESCRIPTION

TITLE: ASSESSMENT WORKER I - LONG TERM CARE ACCESS (LTCA)

DEFINITION: Under the joint supervision of an Assessment Supervisor and a Nurse Consultant in Long Term Care Access, this position is responsible for the comprehensive assessment, level of care determination, preliminary care planning and limited follow-up of individuals age 18 and over who seek community based long term care services or admission to a nursing home, personal care home, or domiciliary care home.

QUALIFICATIONS:

Education:
- Bachelor's degree in Social Work or related behavioral science, or
- Master's degree in Social Work or related field.

Experience:
- Minimum of three years social work experience, preferably in the areas of aging, community health, nursing home or hospital discharge planning, or six months experience as an Assessment Worker Trainee with an over-all rating of “exceeds most expectations” performance evaluation.
- No experience necessary for Master's degree applicants.

Personal Characteristics:
- Well organized with high energy level.
- Well developed communication and interpersonal skills.
- Ability to quickly acquire needed knowledge and manage a high volume of clientele and paperwork with attention to productivity.
- High level of flexibility.

Additional Requirements:
- Valid driver's license, good driving record and access to a fully insured car.
- Drug testing.
- Criminal history clearance.
- Second language abilities preferred.

GOALS:
To provide each applicant with an expeditious, comprehensive assessment with a resultant recommendation of level of care and locus of care provided in the least restrictive available program or facility.

To ensure that all applications for long term care medical assistance benefits are accurately processed according to established time frames. The Assessment Worker I maintains the highest level of professional ethics, continually seeking opportunities for increased knowledge, growth.
DUTIES AND FUNCTIONS:

a. Completes a weekly minimum of 7 standardized Pennsylvania Department of Aging assessments, Functional Needs measurements and financial screening tools for consumers seeking Nursing Home, Personal Care Home or Domiciliary placement or long term care services through the community based programs of Pennsylvania Department of Aging (Options, Waiver, and Family Care Giver Support), as well as additional programs not available through PCA, including: Attendant Care Waiver, Office of Social Program's Independence Waiver and the Long Term Care Capitated Assistance Program.

b. Makes appropriate level of care determinations based on the comprehensive assessment and information received from physician, family, friends, and referral source and applicant's preferences. Consults with Assessment Supervisor and Nurse Consultant as necessary to make this determination.

c. Evaluates the availability and appropriateness of community based long term care programs or facilities to best meet applicant's needs and makes the most appropriate, least restrictive, locus of care decision with consideration of applicant's preferences.

d. Develops a preliminary care plan based on locus of care determination and arranges for needed services for 21 days (case to LTCO 7 days from start of services).

e. Transfers to appropriate long term care program or refers to its waiting list if one exists and ensures each applicant being placed on a waiting list is referred to, or made aware of, alternative entitlements, services or agencies.

f. Orders home delivered meals for eligible applicants who are being placed on a waiting list and monitors continued need on an on-going basis.

g. Encourages self-advocacy by applicants and their families through legislative postcard campaign to eliminate or reduce waiting lists.

h. Completes bi-annual reassessments for certain programs and conducts re-evaluations for appropriateness of level of care decisions as necessary.

i. Completes new Functional Needs Measurements to ensure appropriate placement on waiting list, as requested.

j. Completes the Pre-admission Screening/Annual Resident Review (PASARR) process for individuals identified with mental illness, mental retardation, or other related disability as required by the Omnibus Reconciliation Act of 1987 (OBRA).

k. Conducts one of three standardized Department of Welfare Medical Assistance financial application forms for applicants.
l. Advocates and follows up on DPW’s final disposition of applications to assure appropriate placement and or service needs are met.

m. Conducts annual recertification of financial eligibility.

n. Inputs and maintains data in a consumer based automated system on a timely and accurate basis and assures accurate completion of reports.

o. Interfaces with all PCA Long Term Care programs, County Assistance Office, providers and referral sources in a professional and cooperative manner.

p. Attends staff, team and in-service meetings on a monthly basis and other trainings or meetings as required.

q. Participates in on-going problem solving, program evaluation and development with team and all staff.

r. Represents agency and program policies, procedures and objectives to applicants, referral sources, providers and the public.

s. Performs other duties as assigned.

**PERFORMANCE:**

**Examples of performance measures:**
- Accuracy and thorough use of assessment tools.
- Timeliness and accuracy of level/locus of care decisions.
- Timeliness and accuracy of DPW financial applications.
- Accuracy and completeness of data entry.
- Ability to explain long term care alternatives to applicants and their families.

**Customers:**
- Disabled individuals over the age of 18.
- Older persons and families.
- Agencies and institutions.
- General public.

**Salary - $34,217.00**