

# **Position Description**

# Post-Custodial Support Case Manager

#### **Position summary**

Reporting to the Program Manager, the Post-Custodial Support Case Manager helps people rebuild their lives after incarceration and supports people released from custody to reduce the risk of harmful AOD use. They help participants reintegrate into the community using a variety of tools and supports such as

- intake and assessment
- transition planning and risk assessment,
- individual counselling and goal setting
- supported referrals for clinical and medical interventions
- referrals for employment, training and housing
- · family and community engagement
- living skills development.

The aim of the program is to reduce risk of harmful AOD use, overdose and suicide, and to decrease re-offending rates.

The role works with people for 3 months prior to exiting centres such as Clarence Correctional Centre or Mid North Coast Correctional Centre and up to 12 months after exiting a correctional centre. This can include those that have exited a correctional centre in other parts of the state who have moved to the mid and north coast of NSW. The role is mobile and operates from an office space and also with participants in correctional centres and in the community.

## Organisational relationships

Direct reports: Nil

#### Internal and external relationships

Internal relationships involves team and staff engagement and collaboration External relationships may include families of choice and carers, HNC, NDIA, Health professionals, clinicians, GP's, agents for housing, Aboriginal and Torres Strait Islander support organisations, Community Mental Health Service Providers and the broader community

Responsibilities	Outcomes				
Pre-release contact					
Make pre-release contact with people due to exit custody.  Build, mentor and model open,	A positive relationship is created with correctional centres to facilitate pre-release contact.  There is contact made and an assessment of				
supportive, trusting, appropriate and effective professional relationships	needs is conducted.  There is positive feedback from participants				
with participants as part of their recovery.	indicating that initial contact has been successful, and support has been offered.				
Provide comprehensive assessment of participant needs and goals, including risk management and safety planning.	Assessments are conducted within accepted timeframes.				
Make contact at the time of release					
Make supported referrals	People released from custody at risk of harmful AOD use are connected to appropriate health and social services, including those associated with cultural and social determinants of health (housing, employment, training, welfare support, MH support connection to Country and community)				
	Participants are supported to engage with community based AOD treatment.				
Support connection with family and	The supports offered are aimed to reduce reoffending, enhance quality of life and instil hope.  There is engagement with family, as appropriate, if				
Provide inclusive services.	consented by the participant.  Culturally inclusive and competent services that meet the needs of all communities, including CALD, Aboriginal and LGBTQIA+ participants is provided.				
Provide counselling support post r	elease				
Offer brief intervention counselling support	Access to culturally safe, trauma informed AOD counselling treatment is supported. This can be individual or group support.				
	A care plan is developed in consultation with participant, carers (if appropriate) and clinical teams and other support providers.				
	Referrals are made to psychiatrists and other Mental Health supports for severe and persistent mental health conditions as appropriate.				
Case Management post release					
Case manage participants for in a holistic manner for optimal outcomes.	Effective case management is conducted taking into consideration different cognitive, behavioural, emotional, social, physical and spiritual needs.				
	There is positive feedback from completing participants about the program delivery.				
	Participants are actively encouraged to engage and remain in the program.				

Responsibilities	Outcomes					
Advocate to improve access to a range of support services.	There is evidence that participants have been supported to access services such as NDIS, living skills programs and income support.					
Provide follow up care coordination of psychosocial needs.	There is evidence that participants are offered support with practical needs such as housing, employment and training.					
	Participants are supported to register and access a GP and other healthcare services and tools to improve physical health and wellbeing.					
	There is evidence that participants are offered support with clinical and medical needs.					
Promote capacity building and resilience.	Participants are supported to seek out and arrange long term support services beyond the duration of the program.					
	Participants are encouraged to build resilience and self-manage their own needs long term.					
Refer families and stakeholders to other services.	Families and stakeholders are referred to other outreach services as appropriate.					
Ensure there is compliance with all requirements.	Legislative, contractual and audit inspection framework requirements are met.					
Occasions of Service (OOS)						
Provide Occasions of Service (OOS) relevant to hours worked.	There is evidence that participants are provided with a reasonable number of Occasions of Service (OOS) which can be conducted in person, via phone or video conferencing. This can comprise of any direct engagement with a participant or any activity that is done in regard to the participant and is usually about 30-60 minutes in length. An average 8-hour day allows for a minimum of five occasions of service. Depending on engagement levels, a full-time case load is generally 15-20 participants, but this can be scaled up or down in line with engagement					
Complete relevant assessments	Assessments such as ATOPS are undertaken in line with case management and care planning.  Measures will be advised by the program manager.					
Representation and Networking						
Develop and maintain a working knowledge of relevant agencies/services.	Connections with Mental Health (MH) and AOD (Alcohol and other Drug) and primary health services and other stakeholders, including carers and other service providers are built and maintained.  Regular travel throughout the footprint of service delivery is required.					
Actively consult with relevant agencies and other service providers, regarding participant progress and participation.	Relevant agencies are provided with appropriate information to support the participant and grant them access to services they need.					

Responsibilities	Outcomes					
Attend interagency and Buttery	Interagency and Buttery meetings are attended as					
networking groups as directed.	appropriate.					
Administration and reporting						
Maintain participant files and	Accurate case notes/ files/paperwork/data					
undertake other administrative tasks	input/reports are maintained and updated.					
as required.  Collect data to support future	Sufficient data is available to ensure there is					
programs.	evidence of the program's effectiveness.					
programo.	There is participation in research projects as					
	required.					
Team support						
Participate in peer and clinical	There is adequate preparation and active					
supervision processes.	participation in peer and clinical supervision.					
Participate in informal and formal	There is active contribution in meetings to reach					
case conferences, staff meetings	key program and clinical decisions.					
and planned meetings.						
Work autonomously and as part of a	A strong work ethic, respect, punctuality and					
team.	commitment to service is demonstrated to ensure					
	all team members are well supported.					
	Assigned tasks are conducted in a timely manner.					
Conord						
General Be compliant with WHS	There is demonstrated compliance with WHS					
requirements and take reasonable	requirements to ensure a safe and healthy					
care to ensure your own safety and	workplace. This includes abiding by the non-					
health and that of others. Abide by	smoking directive at Buttery sites and compliance					
their duty of care provided for in the	with any pandemic directives and protocols.					
legislation. Ensure you do not place	Any injury, hazard or illness are reported					
others at risk by any act or omission.	immediately, where practical, to your					
Ensure you do not interfere with	manager/coordinator.					
safety equipment.  Take an active role in building your	The importance of wellbeing and self-care as a					
resilience and preventing	part of resilience is acknowledged. Strategies are					
psychological injury. Take	implemented to maintain personal wellness and					
reasonable care for your health and	resilience. Clinical supervision or other supports					
safety and that of others who may	are utilised, when needed.					
be affected by your conduct.						
Be compliant with codes, guidelines,	Codes, guidelines, policies, procedures,					
policies, procedures, confidentiality	confidentiality requirements, legislation, Standards					
requirements, legislation and	and quality improvement processes are adhered to					
Standards and proactively engage with Buttery continuous quality	at all times. Changes and improvements are supported.					
improvement.	All mandatory training programs and team					
	meetings are attended.					
	There is mandatory reporting of any suspected					
	incidents of child abuse.					

Support an environment free from	Interactions with colleagues, participants and
discrimination, harassment, bullying	stakeholders are undertaken in a courteous
and model appropriate standards of	manner.
professional behaviour in the	Cultural and linguistic and gender diversity is
workplace.	supported and there is evidence of efforts to
	encourage inclusion.
	There is positive feedback from others regarding
	your interactions.
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Other duties relevant to the role as requested by the Program Manager, and in line with Social and Community, Housing and Disability Services (SCHCDS) employee level 4 competencies.

## **Selection criteria**

#### **Qualifications and checks**

- Diploma level qualification or above in Community Services, Social Work, Mental Health, Justice, Psychology and/or Welfare Studies
- Current and valid Driver's Licence with an ability to travel around the region
- A satisfactory Criminal Record Check and Working with Children Check with capacity to obtain clearance to attend correctional facilities
- Current COVID vaccination and current First Aid certificate

### Professional skills and experience

- Experience working within AOD, criminal justice or another relevant sector with an understanding of complex clinical presentations
- Substantial case work experience to support a range of practical and psychosocial needs and community support for people who have experienced incarceration.
- Demonstrated proficiency using the Microsoft suite, a variety of databases and video conferencing tools such as zoom.
- Demonstrated commitment to cultural diversity, equal employment opportunity, legislative compliance and workplace health and safety
- In line with SCHCDS level 4 classification requirements

### Interpersonal skills

- Strong communication skills and the ability to collaborate as part of team
- Ability to work autonomously and use time effectively
- A reasonable level of resilience to manage psychosocial demands, complex clinical issues and exposure to crisis situations
- Self-reflective with the ability to review own work practices and maintain professional boundaries

# Agreement

These conditions of employment, your duties and location may be varied by The Buttery
during the term of your employment. The position description duties are to read in
conjunction with the terms and conditions that form your contract of employment.

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b١	y the terms	and con	ditions	s stipu	lated.								

Signature	Name	Date