

## ADVOCATE II

This is lead advocacy work for residents in facilities for the retarded and patients in state institutions to assure that patient rights are observed and quality care is provided.

Employees spend the majority of time in the same role as the Advocate I, but they also coordinate monitoring and consultative services to facility/institutional staff and management to inform them about legislation and policies governing patients' rights. The lead role sometimes includes establishing goals and objectives, setting priorities, assigning projects, training new staff, evaluating staff performance, discussing work problems, and participating in the selection of advocacy staff. Employees are assigned to monitor specific residential/institutional divisions or units and provide advocacy services in addition to the lead role.

### I. DIFFICULTY OF WORK:

Variety and Scope - Teaches advocacy to staff, residents/patients, and employees about patients' rights; monitors patients'/residents' treatment schedule and living quarters; investigates allegations of abuse or neglect; recommends improvements in treatment procedures, renovations, staffing, or facility problems. Meets with the Director to plan advocacy services; consults with and provides liaison to the Human Rights Committee; coordinates and trains other advocates.

Intricacy - Ensures that procedures and treatment plans for patients/residents are followed; interprets statutes and policies to advocacy staff, patients, facility staff, and management; recommends and negotiates improvements with unit or facility management.

Subject Matter Complexity - Work requires thorough understanding of legislation dealing with patients' rights, policies on restraint and seclusion, and therapeutic intervention; considerable skill in interviewing and negotiating for appropriate improvements; and general knowledge of planning, budgeting, training, and other lead functions.

Guidelines - Include N. C. Patients' Rights Laws, Intermediate Care Facility and/or JCAH regulations, N. C. Mental Health Laws, State Personnel policies on disciplinary actions, division and facility policies, professional research, and consultation with peers in other agencies.

### II. RESPONSIBILITY:

Nature of Instructions - Conducts daily work through responding to referrals and complaints independently; facility director and Human Rights Committee assigns projects infrequently.

Nature of Review - Work receives general administrative review on a periodic basis and on-going technical review as judged by the success of the improvements or actions recommended.

Scope of Decisions - Work decisions directly impact upon patients/ residents, staff, and supervisors of assigned units; lead role affects facility/institution and division advocacy policies.

Consequence of Decisions - Ranges from minor changes in patients' schedules to major modifications in treatment programs to disciplinary actions against staff; lead role affects overall direction and effectiveness of facility advocacy program.

III. INTERPERSONAL COMMUNICATIONS:

Scope of Contacts - Include subordinates, mentally retarded residents, or emotionally disturbed patients, families and guardians, paraprofessional and professional staffs, unit and facility management, division consultants, concerned citizens, and the news media.

Nature and Purpose - To inform of patients' rights, interpret policies and laws, investigate allegations of neglect or abuse, recommend and negotiate necessary improvements.

IV. OTHER WORK DEMANDS:

Hazards - On occasion patient/resident could be disruptive but other staff is available.

Work Conditions - Stressful situations are typical due to resistance and resentment since role is viewed as threat to some staff and managers; physical and environmental elements vary widely depending upon nature of unit, but will usually be mildly disagreeable.

V. JOB REQUIREMENTS:

Knowledges, Skills, and Abilities - Thorough knowledge of N. C. Patients' Rights Laws, Intermediate Care Facility regulations, N. C. Mental Health Laws, State Personnel policies on disciplinary actions, division and facility policies; considerable skill in interviewing and negotiating independently; ability to plan and coordinate facility advocacy program; ability to investigate allegations or complaints, analyze findings and recommend feasible solutions; ability to analyze data gathered, compile report on findings, and present to treatment team, management, or interpret situation to news media; ability to gain the confidence of patients and to work effectively with them, and to maintain effective working relationships with unit supervisors and staff.

Minimum Training and Experience - Graduation from a four-year college with a major in a human service field and three years of experience in providing diagnostic and treatment or advocacy services for the developmentally disabled or mentally ill as required for the particular job; or graduation for a four-year college with a major in a human service related field and four years of human services experience (e.g. child welfare) providing skills in investigating abuse and neglect, interviewing techniques, and similar functions; or a master's degree and two years of the above experience; or an equivalent combination of training and experience.

Administering the Class - Applicants possessing a law degree and one year of experience in an advocacy or hearing officer role, or in working with laws affecting the handicapped, or as a practicing attorney may be hired at the entry rate for the class.