

KLAMATH COUNTY SCHOOL DISTRICT

JOB DESCRIPTION

TITLE:	School Social Worker	
REQUIREMENTS:	Approved for employment through an Oregon School based fingerprint screening. TSPC Licensure of licensure eligible for: School Social Worker	REPORTS TO: School Administrators and Federal Programs
EDUCATION:	Bachelor's Degree or Higher Appropriate Endorsements	FLSA Status: Exempt
LENGTH OF WORK YEAR:	195 Days Per School Year	
EVALUATION:	Performance of this job will be evaluated annually in accordance with Klamath County School District policies.	
GENERAL JOB DESCRIPTION:	<p>Primary Function: The school social worker works in conjunction with district leadership to manage the district's elementary social-emotional program, provide services to students, and support school staff to reduce learning distractions and provide for students' social-emotional needs. The school social worker:</p> <p>District Planning</p> <ul style="list-style-type: none"> • Assists in the formulation of procedures, curriculum, and social-emotional program objectives which directly affect the welfare of students, parents, and teachers. • Assists in the acquisition of services that agencies provide to students and families via the schools. • Plans duties of classified social skills learning facilitators and leads the group to successfully provide services to schools. <p>Student Services</p> <ul style="list-style-type: none"> • Provides individual or group counseling for children who are experiencing problems in the school community. • Assists families with connecting to community services that may support the remediation of behavioral and social-emotional problems. • Facilitates communication between parents and schools regarding behavior and social-emotional issues. <p>Staff Support</p> <ul style="list-style-type: none"> • Provides collaboration and consultation with administration and educators regarding student problems. • Coordinates plans and actions to reduce behavioral and social-emotional issues. • Facilitates involvement of community agencies in efforts toward the remediation of student problems in schools. • Provides professional development to staff regarding trauma, social-emotional learning, outside resources, and other topics. <p>Physical ability to adhere to OSHA and district safety regulations. Work within the district's communicable disease control plan (blood borne pathogens) and be aware of the existence and potential exposure to hazardous chemicals as identified on the MSDS sheets. This position is considered a safety sensitive position.</p>	

ESSENTIAL JOB RESPONSIBILITIES

See Key Duties Below.

KEY DUTIES:

The Initial, Continuing or Transitional School Social Worker License authorizes the holder to perform the following duties:

- (1) Assess home, school, personal, and community factors that may affect a student's learning;
- (2) Identify and provide intervention strategies for children and their families, including counseling, case management and crisis intervention;
- (3) Consult with teachers, administrators and other school staff regarding social and emotional needs of students; and

(4) Coordinate family, school and community resources on behalf of students.

Stat. Auth.: ORS 342

Stats. Implemented: ORS 342.120 – 342.430, 342.455 – 342.495, 342.553

Hist.: TSPC 10-2010, f. 12-30-10, cert. ef. 1-1-11

PHYSICAL REQUIREMENTS (Mark appropriate box)

LIFTING					
Pounds	Never	Seldom 1-5%	Occasionally 6-33%	Frequently 34-66%	Continuously 67-100%
1-10 lbs.				5-10 lbs.	
11-20 lbs.			15-20 lbs.		
21-50 lbs.		35 lbs.			
51-75 lbs.	X				
76-100 lbs.	X				
> 100 lbs.	X				
Maximum amount lifted by worker without assistance: 35 lbs.					
If required, lifts over <u>35</u> lbs. are performed with two or more people or lift devices.					

CARRYING					
Pounds	Never	Seldom 1-5%	Occasionally 6-33%	Frequently 34-66%	Continuously 67-100%
1-10 lbs.				5-10 lbs.	
11-20 lbs.			15-20 lbs.		
21-50 lbs.		35 lbs.			
51-75 lbs.	X				
76-100 lbs.	X				
> 100 lbs.	X				
Maximum amount carried by worker without assistance: 20 lbs.					
If required, carrying over <u>20</u> lbs. are performed with two or more people or lift devices.					

PUSHING/PULLING FORCE TO BE EXERTED					
Pounds	Never	Seldom 1-5%	Occasionally 6-33%	Frequently 34-66%	Continuously 67-100%
1-10 lbs.				5-10 lbs.	
11-20 lbs.			15-20 lbs.		
21-50 lbs.	X				
51-75 lbs.	X				
76-100 lbs.	X				
> 100 lbs.	X				
Maximum weight of object pushed/pulled by worker: > 100 lbs. Moving Furniture					
Distance: <u>5-20 feet</u> Type of Surface: (i.e. level, carpet, tile): <u>Vinyl Floor</u>					

ENVIRONMENT (WORK CONDITIONS)
Works Inside <u>95</u> % of the time / Works Outside <u>5</u> % of the time.
Temperature Extremes: No
Works on or around moving machinery or mechanical parts: No

OTHER PHYSICAL DEMANDS					
Activity	Never	Seldom 1-5%	Occasionally 6-33%	Frequently 34-66%	Continuously 67-100%
Bend/Stoop			X		
Twist			X		
Crouch/Squat		X			
Kneel		X			

Crawl	X				
Walk-Level Surface			Walking		Standing
Walk-Uneven Surface			Walking		Standing
Climb Steps			X		
Climb Ladder			X		
Work at Heights		X			
Reach at or Above Shoulder		X	X		
Reach Below Shoulder		X			
Use of Arms				X	
Use of Wrists				X	
Use of Hands				X	
Grasping/Squeezing				X	
Operate Foot Controls	X				

ENDURANCE							
Activity	Never	Seldom 1-5%	Occasionally 6-33%	Frequently 34-66%	Continuously 67-100%	Total Hours At One Time	Total Hours In A Work Day
Sitting			X			1	2
Standing				X		1	6
Walking				X		1	6
Change Positions			X				

NOTE: This is not necessarily an exhaustive or all-inclusive list of responsibilities, skills, duties, requirements, efforts, functions or working conditions associated with the job. This job description is not a contract of employment or a promise or guarantee of any specific terms or conditions of employment. The school district may add to, modify or delete any aspect of this job (or the position itself) at any time as it deems advisable.

I have read and understand this job description and attest to my ability to perform the essential functions of the position:

_____ Employee Signature _____ Date
 Print Employee Name

Employer Representative (Immediate Supervisor):

_____ Title _____ Signature _____ Date
 Print Name

Prepared by: _____ Date: _____
 Director of Human Resources

In the event of an on the job injury:

For physician to complete:

Is this job appropriate? Yes No Date of Release: _____

If not released to regular work at this time, please provide an "ANTICIPATED" DATE: _____

_____ Date
 Physician's Signature