

Appendix GG: Job Positions

The Job Positions are included on the following page as a pre-printed technical insert.

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TITLE:	Vice President of Operations	DATE LAST UPDATED:	5/30/2017
POSITION CODE:	VPO	EXECUTIVE:	President
FLSA STATUS:	Exempt	DEPARTMENT LEADERSHIP:	President
DEPARTMENT:	Executive	DEPARTMENT CODE:	EX
DESCRIPTION: <p>The Vice President of Operations, will plan, direct, organize, and control the activities of the various Operations divisions of the company. Oversee all Operations functions, including service provision, and community outreach, clinical compliance, financial performance of operations, and will lead the company towards the achievement of its operational objectives. Working with the President, the incumbent will represent the company in the community, with major customers, government agencies, stakeholders, regulatory bodies, individuals served and the public.</p>		PHYSICAL REQUIREMENTS: <p>Reliable transportation to drive to other CareStar offices, as business requires.</p> <p>Able to lift, push, and pull light to moderate loads of approximately 35lbs.</p>	
Job Description			
ROLES AND RESPONSIBILITIES <ul style="list-style-type: none"> • Adheres to the CareStar Rule in performance of job responsibilities. • Understands and complies with CareStar Policies and Procedures. • Maintains confidentiality as related to patient information. Any disclosures of confidential information made unlawfully outside the proper course of duty will be treated as a serious disciplinary offense. • Follows the Acceptable Use Policy while using any information systems owned or controlled by CareStar, Inc. • Maintains positive working relationships with key decision makers and management of our customers and prospective customers. • Develops and communicates strategy, reviews and approves plans for services, use of technology, new processes, expenditures, clinical guidelines, and personnel utilization. • Reviews performance against operating and financial strategies, plans and standards, provides strategic direction to team from reports on interpretation of results and approves changes in plan direction. • Presents monthly reports on performance as requested by the President. • Develops and recommends company policy within Operations. 			

- Defines strategy and sets objectives in each area of authority, develops specific short-term and long-term plans and programs, together with supporting budget requests and financial estimates.
- Works with President and Executive Management team to carry out CareStar Strategic Plan.
- Reviews and approves projects that involve major functional changes within the Department's functional areas.
- Issues specific annual objectives to immediate subordinates and reviews the accomplishment of these objectives.
- Selects and manages qualified personnel in all positions reporting directly to Operations.
- Directs, monitors, and appraises the performance of reporting personnel and ensures the necessary coordination between activities.
- Identifies training needs, develops subordinates, recommends and implements effective personnel action.
- Coordinates activities of assigned personnel with those of other company departments, seeks mutual agreement on problems involving other departments.
- Consults with other members of management responsible for policy or action, ensures compliance within area of responsibility, makes recommendations for improving effectiveness of policies and procedures.
- Creates, reviews and endorses or revises budget proposals received for area of responsibility, submits budgets for assigned activities in accordance with the budget procedure, approves budget expenses up to authorized dollar amounts.
- Provides orientation and on-the-job training for subordinates and ensures that the authority and responsibility for each position is defined and understood.
- Adheres to, meets and/or exceeds all budgeting requirements.
- Oversees contract compliance for all operational requirements.
- Serves on work groups, community groups, committees, or other task forces and attends meetings as requested.
- Participates in sales presentations, RFPs, RFIs and other proposals.
- Performs other projects and duties as assigned.

QUALIFICATIONS AND EDUCATION REQUIREMENTS

- Bachelor's Degree in a clinical area or equivalent from a licensed institution.
- Master's Degree is desirable.
- Prior track record of business success including experience at the executive level, preferably ten (10) years or more total experience.
- Minimum of two (2) years of administrative responsibility in an organization, preferably within programs CareStar manages.
- Strong advocate and proponent of CareStar Mission and Values.
- Familiarity with suite of Microsoft Office programs.
- Valid driver's license and car insurance as required by State law.

This job description is intended to describe the general nature and level of the position. It is not intended to be construed as an exhaustive list of all responsibilities, tasks, and skills to perform the essential functions of the job.



TITLE:	Quality Improvement Supervisor	DATE LAST UPDATED:	6/1/2017
POSITION CODE:	QIS	EXECUTIVE:	Vice President, Operations
FLSA STATUS:	Exempt	DEPARTMENT LEADERSHIP:	Manager, Quality Improvement
DEPARTMENT:	Operations	DEPARTMENT CODE:	OP-All

DESCRIPTION:

The Quality Improvement Supervisor will develop and implement continuous quality improvement activities across CareStar's programs and services.

PHYSICAL REQUIREMENTS:

Able to sit, stand, bend, and stoop for extended periods of time for filing.

Able to lift, push, and pull light to moderate loads of approximately 35lbs.

Job Description
ROLES AND RESPONSIBILITIES

- Adheres to the CareStar Rule in performance of job responsibilities.
- Understands and complies with CareStar Policies and Procedures.
- Maintains confidentiality as related to patient information. Any disclosures of confidential information made unlawfully outside the proper course of duty will be treated as a serious disciplinary offense.
- Follows the Acceptable Use Policy while using any information systems owned or controlled by CareStar, Inc.
- Directly supervises, manages, and oversees staff, including hiring and providing performance evaluations, salary recommendations, and individual development goals and objectives.
- Oversees quality improvement activities in assigned area of the State, such as data collection, monitoring, and reporting quality improvement functions.
- Leads and/or participates in key committees associated with continuous quality improvement, staff education, and/or consumer health and safety issues.
- Collaborates with Directors to design and conduct reviews of select processes and/or areas of operation to measure performance on quality and compliance indicators; assimilates data from these reviews, provides recommendations for improvement and presents findings to senior management.
- Develops and implements quality improvement related processes and tools such as chart audits, consumer satisfaction surveys, focused reviews, ongoing data monitoring mechanisms, etc.
- Monitors compliance of After-Hours requirements, including the review of the On-Call Log for complete and appropriate responses; oversees the preparation of summary records for annual reviews; monitors and facilitates reporting of incidents per protocols.

- Coordinates/oversees After Hours coverage and supervises After-Hours Coordinators and additional CareStar staff, as assigned.
- Develops and maintains systems for collecting, recording, tracking, trending, and analyzing consumer and other quality outcome data for use and benefits statewide, or within a CareStar department or department subsection as assigned.
- Serves on work groups, community groups, committees, or other task forces and attends meetings as requested.
- Participates in sales presentations, RFPs, RFIs and other proposals.
- Performs other projects and duties as assigned.

QUALIFICATIONS AND EDUCATION REQUIREMENTS

- Licensed Social Worker, Licensed Independent Social Worker, Registered Nurse and at least 36 months of experience in the home and community-based services within the last 10 years; OR Bachelor's Degree in Business, Nursing, Social Services, or related field and at least 60 months of program management or program analysis experience.
- Experience with continuous quality improvement principles, data analysis and basic statistics.
- Supervisory experience preferred.
- Strong organizational, critical thinking, and problem solving skills.
- Effective oral and written communication skills.
- Familiarity with suite of Microsoft Office programs.
- Valid driver's license and car insurance as required by State law.

This job description is intended to describe the general nature and level of the position. It is not intended to be construed as an exhaustive list of all responsibilities, tasks, and skills to perform the essential functions of the job.



TITLE:	Director of Clinical Services	DATE LAST UPDATED:	6/12/2017
POSITION CODE:	DCS	EXECUTIVE:	President
FLSA STATUS:	Exempt	DEPARTMENT LEADERSHIP:	Vice President of Operations
DEPARTMENT:	Operations	DEPARTMENT CODE:	OP-All
DESCRIPTION: <p>The Director of Clinical Services has oversight responsibility for the provisions of case management and direct services. He/She provides direction, support, training and mentoring to facilitate the compliance with all program rules and contractual requirements, achieve consistency in the application, operationalization, and effective implementation of program rules, foster adherence to CareStar policies and procedures, and promote optimal service delivery. Primary oversight responsibilities include intake and eligibility, case management, and home modifications. Director must ensure that clinical services are effective and in compliance with the terms of all case management contract(s) held between CareStar and other clients of CareStar case management services.</p>		PHYSICAL REQUIREMENTS: <p>Reliable transportation to travel within assigned region as business requires.</p> <p>Able to lift, push, and pull light to moderate loads of approximately 35lbs.</p>	
Job Description			
ROLES AND RESPONSIBILITIES <ul style="list-style-type: none"> • Adheres to the CareStar Rule in performance of job responsibilities. • Understands and complies with the CareStar Policies and Procedures. • Maintains confidentiality as related to patient information. Any disclosures of confidential information made unlawfully outside the proper course of duty will be treated as a serious disciplinary offense. • Follows the Acceptable Use Policy while using any information systems owned or controlled by CareStar, Inc. • Participates with management team in strategic planning and business development. • Participates in the development of company budget and manages operations in accord with budget. • Directly supervises the clinical managerial team or applicable agency to ensure that clinical services/practices meet all expectations/standards. 			

- Responsible for planning, operationalizing, implementation and evaluation of any initiatives necessary to meet the needs of consumers, clinical and support staff, and applicable agencies as well as to meet contractual guidelines.
- Provides oversight for outside agency clinical operations.
- Develops the planning and presenting of in-service/training for clinical staff development ensuring that all clinical staff complete an orientation process and receive ongoing training as needed.
- Directly oversees high-risk situations or problematic cases.
- Analyzes data and processes and leads quality improvement activities for Clinical Services.
- Serves as liaison with applicable agencies on contractual requirements.
- Serves on work groups, community groups, committees, or other task forces and attends meetings as requested.
- Participates in sales presentations, RFPs, RFIs and other proposals.
- Performs other projects and duties as assigned.

QUALIFICATIONS AND EDUCATION REQUIREMENTS

- Minimum of Bachelor of Science/Bachelor of Arts Degree in Nursing, Social Services or related field as well as maintains the minimum training curriculum and educational and experience requirements of the specified program.
- Experience performing as a manager in a program of similar size and scope within the last five years.
- Meets program and State specific standards for the positions with preference given to individuals holding certifications. Familiar with the quality improvement process.
- Minimum of two years of leadership experience with demonstrated ability to motivate, lead and develop staff.
- Experience involving direct contact with consumers.
- Experience that demonstrated vision, creativity, and planning as well as project development and evaluation.
- Excellent verbal and written communication skills.
- Knowledge of and experience with consumers with physical and/or developmental disabilities.
- Experience involving home healthcare.
- Knowledge of/and experience with Medicare and Medicaid.
- Experience with Quality Assurance Programs.
- Ability to utilize outcome oriented quality measures.
- Knowledge of community resources: medical, educational, rehabilitation, mental retardation/developmental disabilities, etc.
- Twenty four (24) months of experience in data analysis and/or data trending and/or accounting or financial analysis desirable.
- Familiarity with suite of Microsoft Office programs.
- Valid driver's license and car insurance as required by State law.

This job description is intended to describe the general nature and level of the position. It is not intended to be construed as an exhaustive list of all responsibilities, tasks, and skills to perform the essential functions of the job.



TITLE:	Case Manager	DATE LAST UPDATED:	5/30/2017
POSITION CODE:	CM	EXECUTIVE:	Vice President, Operations
FLSA STATUS:	Exempt	DEPARTMENT LEADERSHIP:	Program Director
DEPARTMENT:	Operations	DEPARTMENT CODE:	OP-All

DESCRIPTION:

The Case Manager, assists and enables individuals/participants to remain in the least restrictive environment, while maintaining the greatest amount of independence and human dignity; assists the participant with access to and coordination of services to enable the individual to receive a range of appropriate services in a planned, coordinated, efficient and effective manner; promotes and supports the participant's preferences, values, and the right to self-determination.

PHYSICAL REQUIREMENTS:

Reliable transportation to travel within assigned region as business requires.

Ability to conduct visits to homes and facilities of unknown environmental conditions, requiring: climbing stairs, traversing uneven terrain and/or gravel, and tolerating temperature extremes and inclement weather.

Able to lift, push, and pull light to moderate loads of approximately 35lbs.

Job Description

ROLES AND RESPONSIBILITIES

- Adheres to the CareStar Rule in performance of job responsibilities.
- Understands and complies with CareStar Policies and Procedures.
- Maintains confidentiality as related to patient information. Any disclosures of confidential information made unlawfully outside the proper course of duty will be treated as a serious disciplinary offense.
- Follows the Acceptable Use Policy while using any information systems owned or controlled by CareStar, Inc.
- Understands, complies with and makes individual centered decisions based on all required areas of specific programs that apply to case management services.
- Approves funds for utilization of available services, while meeting all qualifications and standards as specified by the program; develops annual cost budgets.
- Remains current, through continuing education and utilizes knowledge base of Medicare, Medicaid, insurance and state administered waivers as well as the Americans with Disabilities Act,
- Functions as the team leader in the development and implementation of the consumer's care plan, including the authorization of the amount, scope and duration of services.

- Completes home visits and/or appropriate contacts and monitors services, in compliance with CareStar Case Management and assessment expectations and the rules specified in the assigned program.
- Conducts Person-Centered Planning Process, health and safety, social and environmental assessments, and annual Level of Care in accordance with established guidelines, including ensuring cultural considerations are addressed in the service planning process.
- Incident report completion, submission and follow-ups using State approved process. Identifies and reports high-risk situations with consumer and independently takes appropriate action to mitigate health risks to the individual.
- Appropriately documents analysis and decisions for all consumer and case-related contracts; documents appropriate case management services to include the approved provider; Disseminates information and forms to the individual and the informal support team.
- Participates in quality management reviews, audits and Program Eligibility and Assessment Tool (PEAT) review activities as requested.
- Attends orientation, trainings, in-services, consumer care conferences, and staff meetings as determined by regulatory standards and management.
- Serves on work groups, community groups, committees, or other task forces and attends meetings as requested.
- Participates in sales presentations, RFPs, RFIs and other proposals.
- Participates in 24-hour on-call rotation responsibilities as assigned.
- Performs other projects and duties as assigned.

QUALIFICATIONS AND EDUCATION REQUIREMENTS

- Requirements will vary from program to program, but may include:
 - Active license as a Licensed Social Worker, Licensed Independent Social Worker or Registered Nurse; AND/OR
 - Bachelor's Degree in Nursing, Social Services or related field with a minimum of 2 years of full time direct service experience. Experience must be relevant to the program.
- Will demonstrate strong critical thinking and problem solving skills and flexibility in relationship to job requirements.
- Will possess effective communication (oral and written) and interpersonal skills with respect for others, including individuals, coworkers and other professionals within a diverse work environment.
- Will be available to meet the needs/requirements of staff, coworkers and individuals during CareStar's standard business hours.
- Will possess computer skills sufficient to enter information electronically, to use CareStar's website and email and to demonstrate familiarity with suite of Microsoft Office programs.
- Valid driver's license and car insurance as required by State law.

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