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| ADDICTIONS & SUPPORTIVE ACCOMMODATION SERVICES |  |

#### JOB DESCRIPTION

**Designation: Director (Clinical) – Bridge Programme**

**Responsible to:** National Operations Manager

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| **Role:** | The Director/Manager is responsible for:   * Upholding and supporting The Salvation Army’s mission and Christian Ethos * Working in accordance with The Salvation Army’s organisation structures, policy and procedures. * Effective management and operation of the centre. * The financial performance of the centre. * The community relations with external service providers and funding providers. * Clinical oversight for Taranaki Bridge * Manage Residential Support Workers Shifts and Property * Participate in Health & Safety Meetings with Quality Coordinator * Coordinate Guest Speakers * Oversight of Spiritual Awareness |

## Functional relationships: National Management Team

## Centre Management Team

## Senior Case Worker

## Quality Coordinator

## Clients

Client Family/Whanau

All Staff

Referral Agencies

Alcohol and Drug providers

Mental Health Service Providers

DHB Funding and Planning

External Presenters

Probation

**Key Task areas:** 1 The Salvation Army Mission

2 Model of Treatment, policies and procedures.

3 Cultural Safety

4 Clients / Family / Whanau.

5 Leadership.

6 Business Management

1. Risk Management.

8 Staff Management

9 Property Management

10 Privacy

11 Quality Programme

12 Professional Development.

**Measurement criteria:** Attached.

**Other duties:** Notwithstanding any respective definition or classification of employment, the employee may be required to undertake other lawfully permitted duties.

**Limitations on authority:** The Manager/Director operates within the overall philosophy and policies of The Salvation Army Bridge Programme and recognises the role and authority of the National Director.

New styles of group work, counselling approaches or activities likely to affect clinical quality and/or effectiveness are to be discussed with the National Director or referred to the National Quality Improvement Working Party.

Significant modification of the existing service requires approval by the National Director prior to implementation.

**Hours of work:** As per Brief of appointment / individual employment contract.

**Person specification:** Attached.

**Key result areas and measurement criteria:**

| **Key Task Areas** | **Key Measurement Criteria** | **Performance Measure** |
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| **1. The Salvation Army Mission** | * 1. Committed to upholding and supporting The Salvation Army Mission and Christian ethos.   2. Integrating The Salvation Army Mission into the centre   3. Providing oversight to the delivery of Spiritual Awareness | * 1. Supports The Salvation Army Mission and Christian ethos.   1.2 Direct observations, peer and client feedback  1.3 Client feedback |
| **2. Clients / Family / Whanau** | 2.1 Mission Statement and Bridge Charter is reflected throughout the centre’s systems, practices and daily routines  2.2 Client/Family/Whanau surveys are conducted at least annually with effective follow-up. | 2.1 Mission Statement and Bridge Charter is evident in the running of the centre  2.2 Client/Family/Whanau surveys |
| **3. Model of Treatment, Policies and**  **Procedures** | 3.1 Commitment to working within and ensuring that staff work within the framework of The Salvation Army Model of Treatment  3.2 The Salvation Army's Bridge Programme national and local policies and procedures are implemented and adhered to. | 3.1 Familiar with Model of Treatment  3.2 Policy / Procedures adhered to. |
| **4. Cultural Safety** | 4.1 Commitment to the principles of the Treaty of Waitangi as they apply to The Salvation Army Bridge Programme  4.2 Clients receive care without discrimination on the basis of race, culture, health, sexual orientation or age.  4.3 Cultural Supervision on a monthly bases | 4.1 Able to demonstrate knowledge and application of principles of the Treaty of Waitangi  4.2 Client Feedback, peer feedback  4.3 Staff sign attendance of development record. |
| **5. Leadership** | 5.1 Personnel are motivated to succeed in their role by clear direction, open communication, effective coordination, appropriate delegation and professional standards of conduct and presentation.  5.2 Works with Management Team to plan and coordinate the overall organisation and day-to-day running of the centre.   * 1. The Management Team meet at least monthly to review operational and strategic requirements and operate as a team.   2. Provide Clinical oversight.   3. Continuous Management cover exists.   4. Ensure House Manager and Support Worker available for awake shifts   5. Covering Clinical groups / 1:1 casework as required | 5.1 Feedback from staff  5.2 Management team is identified.  5.3 Management Team meeting minutes  5.4 Service provided in accordance with funding  5.5 On call duty  5.6 There is an effective roster system in place with adequate staff cover  5.7 Programme is covered |
| **6. Business Management** | 6.1 A Business Plan is developed annually in conjunction with the budget and reviewed quarterly.  6.2 The Director accepts accountability for budget planning and annual operating budget. Purchases are controlled. Variations from budget have reasonable explanations.  6.3 Financial returns filed and monthly reports are analysed as received.  6.4 Internal financial audit requirements and recommendations are promptly and effective addressed.  6.5 Quarterly Managers KPI Reports are submitted to the National Director within specified timeframes  6,6 Contractual performance monitoring returns are undertaken and sent to National Office within specified time frames  6.7 Financial Report presentations to Mercy Hospital and Claremont Recovery Trust  6.8 Strategic Plan implementation | 6.1 Business Plan and reviews  6.2 Budget is maintained  6.3 Reports received and an analysis is evident.  6.4. Recommendations have been implemented.  6.5. Quarterly KPI reports are received at National Office.  6.6 Performance monitoring returns are received at National Office.  6.7 Evidenced by reports presented on time  6.8 Evidenced by achieving action points on plan |
| **7. Risk Management** | 7.1 Building security is implemented to ensure clients / staff safety is maintained.  7.2 A current fire evacuation scheme approved by the New Zealand Fire Service is maintained. All staff are aware of and trained in fire evacuation procedures. Fire drills are conducted satisfactorily at six month intervals.  7.3 The Manager meets the requirements set out in The *Salvation Army’s Building Act 1991 Compliance Manual Maintenance Procedures*  7.4 An effective Infection Control programme operates.  7.5 A current Business Continuity Plan and Civil Defence Emergency Plan are maintained and are known to staff.  7.6 A safe food management programme is operational  7.7 An effective occupational safety and health programme operates in accordance with legislation and The Salvation Army’s Occupational Health and Safety policy/procedures.  7.8 Achieving Audit requirements | 7.1 Building security is evident  7.2 Fire scheme is approved and implemented.  7.3 Maintenance procedures are documented  7.4 Infection Control Programme is evident  7.5 Business Continuity Plan evident  7.6 Operational safe food management programme in place.  7.7 Health and Safety programme evident.  7.8 No repeat CARs (Correct Actions Required) |
| **8. Staff Management** | 8.1 Recruitment and appointment of staff is completed as per policy  8.2 All staff undertake an orientation programme  8.3 Up to date duty / task lists are available for each position  8.4 All staff undertakes performance reviews on a planned basis.  8.5 A efficient staff roster system operates where appropriate to meet the needs of the clients.  8.6 Annual leave is approved on a planned basis known to staff.  8.7 Timesheets are certified correct either by the Manager or as delegated  8.8 Disciplinary and dismissal procedures are properly initiated and progressed when justified as per the relevant Employment Agreement and is discussion with the National Director  8.9 Volunteers are utilised in accordance with Official Minute. | 8.1 Staff are recruited, all staff have an employment agreement and job descriptions.  Draft  8.2 Orientation Programmes are documented in staff file.  8.3 Duty / Task list are in place for each position  8.4 Staff performance review programme evident  8.5 Effective rosters in place  8.7 Annual leave plan evident.  8.7. Timesheets are processed.  8.8 Disciplinary and dismissal procedures are adhered to.  8.9 Volunteers utilised as per Official Minute. |
| **9.Property Management** | 9.1 A maintenance programme operates for buildings, plant, furniture and grounds. Official Minute PRO is adhered to  9.2. The grounds are safe, well maintained and attractive  9.3 Building exterior and interior are aesthetically pleasing.  9.4. The vehicle/s are maintained in a safe and sound running condition with current warrant of fitness and registration. | 9.1 Maintenance programme evident  9.2 Grounds well maintained.  .  9.4 Vehicle/s well maintained. |
| **10. Privacy** | 10.1 The Manager acts as the Privacy Officer for the centre and ensures that the principles of the Privacy Act 1993 and the Health Information Privacy Cole 1994 are upheld. | 10.1 clients and staff can name Privacy Officer. Privacy within centred is upheld. |
| **11. Quality Programme** | 11.1 A culture of continuous quality improvement is provided.  11.2 An annual quality plan is developed and implemented in consultation with staff.  11.3 Contracted quality requirements are fulfilled and audits demonstrate that required standard of service is being achieved  11.4 An internal auditing programme is implanted and corrective actions are documented and followed through.  11.5 Complaints are processed and responded to as per policy within set timeframes. | 11.1 Culture of continuous quality improvement evident.  11.2 Quality Plan  11.3 Contract Audit Reports, certification and surveillance audit reports  11.4 Internal Audit programme evident.  11.5 Complaints register. |
| **12. Professional Development** | 12.1 Demonstrates commitment to continuing professional development relevant to the service.  12.2 knowledge of legislation and regulatory requirement is current and implement.  12.3 Obtains regular professional supervision.  12.4 Undertake an annual performance review. | 12.1 Development plan  12.2 Centre operates with in legislative and regulatory requirements.  12.3 Supervision Reports  12.4 Performance Review documented |
| **13. On Call Duty** | 13.1 Available for on call consultation  13.2 Shift cover as required |  |

I ……………………………………………… declare that I have read and understood and agree with the

(please print)

Job description for the position of Clinical Director/Manager within the Bridge Programme and accept it fully.

Signed: Clinical Director/Manager Date:

Signed: National Director Date:

For The Salvation Army

**DIRECTOR (Clinical)**

**IDEAL PERSON SPECIFICATION**

* Degree in Addictions or related field i.e. Nursing, Social Work, Occupational Therapy
* Professional Registration

1. Relevant experience in management
2. Commitment to continuing professional development relevant to Alcohol and Drug studies
3. Relevant experience in, working with people with addictions, individually, in groups and with their significant others
4. Ability to relate to people with addictions with sensitivity, caring, and patience
5. Good written and oral communication skills, including ability to write adequate records and reports
6. Computer literate
7. Tact, discretion, and confidentiality
8. Commitment to quality improvement processes
9. Works well as a team member. Good working relationships with staff
10. Self-organising: good organising and administration skills
11. Cultural awareness
12. Understanding of, respect for, and ability to work with The Salvation Army’s mission, principles, and Christian ethos
13. Good health and physical fitness
14. Flexibility
15. Sense of humour