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1/24/19

Carroll County Commissioners

Accepting Applications for the position
of

County Home Superintendent

A full job description can be obtained at
<http://carrollcountyohio.us/public-notices/> or
by emailing jleggett@carrollcountyohio.us.

Resume and application are due by
3:00 p.m. on Friday, February 22, 2019
to the

Carroll County Commissioners
119 S. Lisbon Street, Suite 201
Carrollton, OH 44615

Carroll County is an Equal Opportunity Employer and Provider

CARROLL GOLDEN AGE RETREAT
2202 Kensington Rd. NE
Carrollton, OH 44615
PHONE: 330-627-4665
FAX: 330-627-7772

SUPERINTENDENT
Job Description

County Office: Board of Commissioners

Department: County Home

Immediate Supervisor: Carroll County Commissioners

Positions Supervised: **Assistant Superintendent**
 Activity Director
 Director of Nursing
 Food Service Supervisor
 Head of Housekeeping/Laundry
 Maintenance Supervisor
 Secretary/Accounts Payable Clerk
 Nurse Aid Staff

JOB RESPONSIBILITIES:

Under administrative direction, the Superintendent directs the operation of the County Home facility, supervises staff, acts as the Chief Fiscal Officer and monitors health and safety conditions of the Home.

QUALIFICATIONS:

Completion of secondary education or equivalent professional experience and course work and three (3) to four (4) years' experience working with and assisting senior citizens, or equivalent combination of training and/or experience. Experience in medical field helpful. Good mental and physical health and sense of humor.

WORKING CONDITIONS:

May be required to work a flexible schedule – on call for facility 24 hours – 7 days per week. May be required to use personal vehicle for errands, etc.

An individual who poses a direct threat to the health and safety of himself/herself or others in the workplace will be deemed not qualified for this position.

Overtime: Non-Exempt () Exempt (X) Admin. () Prof. () Exec. ()

COUNTY KNOWLEDGE OF:

- Home policies and procedures*
- State and federal nursing care
- Ohio Revised Code & Administrative procedures re/to classified employment
- Medicare and Medicaid laws, rules and regulations
- Health and safety regulations for public food service
- Public nursing care principles
- Budget administration
- Public finance
- Financial bookkeeping
- Supervisory methods
- State and federal resources*

SKILLS AND ABILITIES TO:

- Develop and maintain effective working relationships with state and community leaders and the public
- Interpret and apply laws, regulations and policies
- Allocate funds based upon availability and facility needs
- Identify qualified employees through screening and interview methods
- Identify employee behavior that requires discipline
- Maintain a positive work environment
- Maintain confidentiality
- Work flexible hours

*May be acquired after hire

% of Time **ILLUSTRATIVE DUTIES:** (The duties listed below are intended to depict tasks performed by this classification)

35% ADMINISTRATION

- >Determines facility needs
- >Participates in long-range planning
- >Determines necessary staffing
- >Plans, develops and implements programs
- >Prepares monthly statements for private pay residents
- >Coordinates services and activities
- >Ensures effective exchange of information with county officials
- >Schedules and attends staff training programs
- >Maintains patient records and legal documents
- >Oversee and schedule meetings periodically for facilities auxiliary funds
- >Responsible to manage campaigns for operational levies

40% SUPERVISION

- >Interviews candidates for positions and recommends hiring
- >Monitors the work of employees and ensures compliance with policies and procedures
- >Ensures work is completed properly and on time
- >Coordinates employee work schedules
- >Reviews employee time sheets and authorizes overtime
- >Evaluates employee performance and maintains proper records
- >Administers discipline
- Ensures effective communication of information to all facility employees
- Provides leadership and guidance to staff in fulfilling their responsibilities

10% FISCAL OPERATIONS

- >Prepares the annual budget for the facility
- Administers facility budget
- Monitors bookkeeping procedures
- Prepares expenditure and income reports
- Controls expenses and ensures budgetary compliance
- Authorizes all major purchases
- Manages resident accounts and payments

10% RESIDENT CARE

- >Approves admission and discharge of residents
- >Arranges medical services through private contractors
- >Monitors activities to ensure quality resident care
- Conducts regular inspections of facility for compliance with state and federal regulations
- Contracts with private contractors to perform major services
- Maintains open communication with residents, family members and visitors
- Plans resident activities with the Activity Coordinator

5% MISCELLANEOUS

- Assists with orders for facility maintenance and repairs
- Attends meetings and serves on temporary committees, as requested
- >Maintains and increases knowledge and skills through attendance at meetings, conferences, training seminars and in-service training sessions
- Performs additional duties and assignments, as required

- >Denotes an essential function of the job
- Performs additional duties and assignments, as required

Signature

Date

CARROLL COUNTY

APPLICATION FOR EMPLOYMENT

Equal access to programs, services and employment is available to all persons. Those applicants requiring accommodation to the application and/or interview process should notify the supervisor of the department at which you are applying. We consider all applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

POSITION			
Position Applied For		Date of Application	
How did you hear about the position?		Date available for work	
What is your desired salary range or rate of pay?			
Type of employment desired	Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>	Seasonal <input type="checkbox"/>

APPLICANT INFORMATION							
Last Name		First		M.I.			
Street Address				Apartment/Unit #			
City		State		ZIP			
Phone		E-mail					
Best time to contact you?							
Have you ever submitted an application to Carroll County?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?			
Have you ever been employed by Carroll County?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?			
Are you legally eligible for employment in the United States?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
If you are under 18, can you furnish a work permit?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Do you have a valid driver's license?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	State/Number:			
Are you able to meet all of the attendance requirements of this position?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Are you able to work overtime if necessary?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Will you travel if the position requires it?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Do you have any friends or relatives currently employed by Carroll County?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, who?			

EDUCATION							
High School		Address					
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
College			Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
Other			Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		

EMPLOYMENT HISTORY

Starting with your most recent employer, provide the following information. Include any relevant volunteer activities, but exclude any organizations that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve National Guard or any other similarly protected status.

Company					Phone			
Address					Supervisor			
Job Title				Ending Salary	\$	May we contact?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Responsibilities								
From		To		Reason for Leaving				

Company					Phone			
Address					Supervisor			
Job Title				Ending Salary	\$	May we contact?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Responsibilities								
From		To		Reason for Leaving				

Company					Phone			
Address					Supervisor			
Job Title				Ending Salary	\$	May we contact?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Responsibilities								
From		To		Reason for Leaving				

Please explain any gaps in employment								
Have you ever been fired or asked to resign from a job?					YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain on separate sheet	

PROFESSIONAL OR TRADE ORGANIZATIONS

Please list any relevant professional or trade organizations of which you are a member. Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve National Guard or any other similarly protected status.

Organization		Office(s) Held	
Organization		Office(s) Held	

REFERENCES

Name		Relationship	
Phone		Email	
Name		Relationship	
Phone		Email	
Name		Relationship	
Phone		Email	

DISCLAIMER AND SIGNATURE

I certify that all information I have provided in order to apply for and obtain employment with Carroll County is true, complete, and correct. I agree and understand that omissions, misstatements, and falsifications will cause forfeiture on my part of all eligibility to any employment with Carroll County and may be cause for rejection of this application, removal of my name from eligibility lists, or discharge from County service, whenever it is discovered. I give Carroll County the right to investigate and verify any information obtained through the application process. Permission is granted and I release from any and all liability any employer, agency or individual assisting Carroll County in providing relevant, job-related information that will assist in this process. I expressly authorize, without reservation, Carroll County, its representatives, members or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application. I hereby waive any and all rights and claims I may have regarding Carroll County, its agents, members or representatives, for seeking, gathering, and using such information and all other persons, corporations, or organizations for furnishing such information about me.

I understand that an offer of employment may be contingent upon the successful completion of a pre-employment background criminal investigation, physical, psychological, polygraph, and/or drug and alcohol screen. If employed, I agree to provide proof of identity, relevant licensure or credentials, and authorization for employment in the United States. If I am hired, I understand that, unless otherwise defined by applicable law, any employment relationship with Carroll County is of an “*at will*” nature, which means that I am free to resign at any time and Carroll County reserves the same right to terminate my employment at any time. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that all conditions of employment including, but not limited to hours, benefits and salary are subject to change by Carroll County at any time. I understand that no representative of Carroll County is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the appropriate Appointing Authority.

DO NOT SIGN UNTIL YOU READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement.

Signature		Date	
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