COMTREA BOARD OF DIRECTORS MEETING AGENDA
Monday, July 11, 2016

A Meeting Open
B Mission Statement
COMTREA’s mission is to be an innovative, effective, and responsive comprehensive health center which exists to serve those in need; we believe that our clients are entitled to the best professional care, in the most comfortable surroundings, at the most reasonable price possible. This we pledge to do.
C Approval of Agenda Items Added or Deleted
D Approval of Minutes
   (a) June 13, 2016
E CEO’s Report
   (a) ACO Participation
   (b) Primary Care Restructure
   (c) HRSA Supplemental Funding for IT Infrastructure
   (d) Update - Board Members use FQHC Services
   (e) KPI Dashboard
   (f) Volunteers
   (g) Warriors in Transition Program
F Financials
G Action Items (Anything that requires a vote)
   (a) Policy Approvals
   (b) Manual Approvals
   (c) Position Approvals
   (d) Credentialing & Privileging
   (e) QIQA Coordinating Council Report
H Discussion Items (Informational; no action taken)
   (a) Building and Grounds
   (b) Community Relations – Fundraising, Foundation Division Program/EVP or VP Reports
   (c) Questions on information previously reported?
I Board Member Recruitment Discussion
J Old Business
K Next Scheduled Board Meeting
   (a) August 8, 2015
S Closed Session – Personnel and Legal
Board Meeting Minutes

Meeting Date: 07/11/2016  Time: 7:30 am

Chairperson/President/Facilitator: Jerry Rogers, Chairperson

Attendees: Jerry Rogers (Board Chair); Kathryn Ellis (Board Vice Chair - Community Development and Fundraising Committee Chair); Elizabeth Diveley (Board Secretary) Stan Stratton (Board Treasurer); Martha Maxwell (CMHFB Chair); Jane Sullivan; Cliff Lane; Audrey Mitchell; Vicky James, Ken Waller, Dr. Steven Crawford; Mark Mertens; Katherine Hardy-Senkel and Kyle Gowen.

Not in Attendance: Dayle Burgdorf and John Lamping.

Staff in Attendance: Susan M. Curfman, MA (President & CEO); Tracy Wiecking (COO); Amy Rhodes (CFO); Margo Pigg (EVP Adult Behavioral Health Services); Nathan Suter (Clinical Director-Oral Health); Patty Vanek (AVP Primary Care); Kevin Turner (PC Medical Director) Ghada Sultani-Hoffman (EVP Children & Youth Behavioral Health Services); Kim Elbl (VP of Marketing); Donna Harris Brekel (VP of HR) and Katy Murray (AVP Corporate Compliance/QM).

Jerry Rogers called the meeting to order at 7:30 am.

Agenda Item #1 Approval of Agenda

Recommendations: There were no additions or revisions to the Agenda.

"I Kathy Ellis, move we approve the Agenda as presented". Cliff Lane seconded the motion.

The motion carried.

Agenda Item #2 Approval of the June 13, 2016 Board Meeting Minutes

There were no corrections or additions to the June 13, 2016 Board Meeting Minutes.

Recommendations: "I Kathy Ellis, move that we approve the June 13, 2016 Board Meeting Minutes". Cliff Lane seconded the motion. The motion carried.
Action Items

1. Mr. Rogers signed the final versions of the June 13, 2016 Board Meeting Minutes.
   Committee member(s) responsible: Jerry Rogers

Agenda Item #3 CEO's Report

1. ACO Participation: Sue Curfman discussed MissouriHealth+’s Medicare ACO program. It is very similar to our other payer arrangements, in which MHP Health Centers enter into a network deal with a payer (Medicare in this instance). Traditional fee for service payments continue to go directly to the Health Centers, but we have an opportunity to earn incentive revenue based on our ability to increase clinical quality scores and decrease cost. At the end of the year, if incentive dollars are earned, they are distributed with all of the Health Centers that participate. In addition to the opportunity for additional revenue, we will also receive claims data for Medicare patients that are assigned to the ACO, which will give us a wealth of new information to conduct population health management. There is no cost to participate, although we have been asked to focus some care management resources on the Medicare patients that are assigned to us through the ACO. Sue Curfman reported that these initiatives are the same as some of the Qualis recommendations and those of the Primary Care Medical Center Home project.

2. Primary Care Restructure: Ms. Curfman reported that the timing of this partnership with MissouriHealth+ seems to have presented itself at an opportune time. Ms. Curfman reported she had been meeting with leadership in Primary Care to discuss restructuring the division to mimic the model oral health has. The change in roles for the employees she described would be budget neutral or revenue producing. She distributed four job descriptions for the Executive Board to review.

3. HRSA Supplemental Funding: HRSA has been given $2,000,000 to distribute for IT infrastructure. Fifty two thousand dollars would be available to COMTREA. Ms. Curfman reported that the Agency is looking into a data warehouse to be paid for by those funds.
4. **Board Members Using FQHC Services:** Ms. Curfman reported that there are currently 6 Board Members or their dependents using COMTREA services.

5. **KPI Dashboard:** Ms. Curfman distributed and reviewed what she hoped to be the final version of a key performance indicators dashboard that she will present to the Board at each meeting.

6. **Volunteers:** Ms. Curfman reported that the Agency was donated 301 hours by volunteers in the month of June. In Fiscal Year 16 COMTREA received close to $98,793 in volunteer time.

7. **Warriors in Transition Program:** Ms. Curfman introduced Kelly Ramey, an employee working to bring the equine program “Warriors in Transition” to Bridle Ridge. She gave a 5 minute overview of the program. There were no questions regarding the program as presented.

**Agenda Item #4 Financial Report**
Amy Rhodes discussed the financial report. She noted that accounts receivable were high due in part to the Medicaid dental billings having to be rebilled and MIL tax revenues, those should soon be received and help decrease the amount. She noted that she was very concerned about the low cash reserves of the Agency.

**Recommendations:** “I, Mark Mertens, move that the Board approve the attached financials for the month of May, 2016.” Elizabeth Diveley seconded the motion. The motion carried.

Jerry Rogers discussed the need to elect a co-treasurer to assist Stan Stratton in his role as Treasurer. Jerry recommended appointing John Lamping for this position.

**Recommendations:** “I Mark Mertens, move that the Board allow for amendment of the Bylaws to allow for a Co-Treasurer and additionally move that John Lamping be appointed to this position.” Cliff Lane seconded the motion. The motion carried.

**Agenda Item #5 Action Items**
1. **Policy Approvals:** Katy Murray presented requested changes to policy G4.6 Credentialing and Privileging Procedures Appendix, Section C. Dental Board requirements and updates to name designations were the only changes being made to the policy.
**Recommendations:** “I, Kathy Ellis move that the Board Approve the revision to G4 6, Credentialing and Privileging Procedure Appendix, Section C to reflect the changes discussed.” Stan Stratton seconded the motion. The motion carried.

Katy Murray reported that a new Medication Refill Policy was being proposed to ensure that patients receiving medications keep their appointments so they can be properly assessed before medications are refilled.

**Recommendations:** “I Beth Diveley, move that the Board approve the addition of the Medication Refill Policy to the Medical Manual.” Ken Waller seconded the motion. The motion carried.

2. **Manual Approvals:** Sue Curfman reported that the canine program Tails with Tales had completed its Policy and Procedure Manual for approval by the Board. Kathy Ellis reiterated that this program was consistent with the mission and she approved of the steps being taken to re-focus animal assisted therapy on COMTREA’s mission.

**Recommendations:** “I Audrey Mitchell, move that the Board approve the Tails with Tales Policy and Procedure Manual as presented.” Cliff Lane seconded the motion. The motion carried.

3. **Position Approvals:** Sue Curfman requested approval of two new positions for approval related to the restructuring of Primary Care. She also informed the Board of changes to two existing positions, the Health Services Operations Manager and Digital Marketing Associate.

**Recommendations:** “I Ken Waller, move that the Board approve the AVP-HCH and Chronic Disease Management Position and the EHR Clinical Liaison Position not previously included in the budget and the changes to the existing positions as discussed.”
4. **Credentialing and Privileging:** The Board reviewed the list of new staff and interns requiring privileges during the month of May. The list composed of the following individuals:

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Jill Ellsworth</td>
<td>Nurse Practitioner</td>
<td>CHC</td>
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<td>6/28/2016</td>
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<td>Ashley Holzmark</td>
<td>Dental Assistant</td>
<td>CHC</td>
<td>Approved</td>
<td>6/28/2016</td>
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**Current Staff Re-Privileged (during the month of June 2016)**

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<td>Therapist/PLPC</td>
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<td>6/28/2016</td>
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<td>Stacy Beaird</td>
<td>Case Manager/LMSW</td>
<td>Adult</td>
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<td>6/28/2016</td>
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</table>
5. **QIQA Coordinating Council Report:** Vicky James reported on the recent QIQA Meeting she attended. Noting the Patient/Family Advisory Council was sending out request for members, the patient satisfaction and patient experience surveys were being conducted and that primary care and oral health quality measures were being reviewed monthly.

**Recommendations:** "I, Vicky James, move that the Board accept this report and these staff as presented by the QIQA committee." Audrey Mitchell seconded the motion. The motion carried.

**Action Items**

1. Jerry Rogers signed the HR Credentialing and Re-Privileging Report Committee member(s) responsible: Jerry Rogers

**Agenda Item #6 Discussion Items**

1. **Building and Grounds:**
   a. Tracy Wiecking reported that the Annexation of A Safe Place had been approved by the City and now would be seeking approval from the County. Cliff Lane has started this process. He sought out the owner of the lot next door to the annex as a possible location for new parking. The owner was not interested in leasing but would sell for $75,000. Mr. Wiecking noted that there is contamination in the soil several feet down and this would be a significant cost to correct.

2. **Community Relations:** Kim Elbl reported that the CAC Golf Tournament was still looking for teams and items to raffle. Donations or players were to be directed to her. Friends of a Safe Place also had their first official board meeting on June 27th. The final portion of the 501(c) 3 application soon and she is hopeful the foundation will be completely established in the next 2 to 3 months.

3. **Division Program/EVP or VP Reports:**
a. Oral Health: Dr. Suter reported that Senator Blunt would be visiting the Valley Middle School location on September 9th. Board members were welcomed to attend.

b. Children & Youth: Ghada again expressed her disappointment with the Mercy Foundation's denial of the school based health clinic applications she had submitted. She stressed to the Board that the Agency must still move forward with this initiative, even if the timeline had to be extended, as it is the best way to reach those children that need our care the most.

c. Adult Behavioral Health: Margo reported that the CCBHC Application had been submitted. She also informed the Board that the appeals submitted for VOCA funding had been denied. This denial would still allow the agency to move forward with a few positions, however the forensic interviewer and request for rent was not approved.

Agenda Item #7 Board Member Recruitment Discussion
Jerry Rogers reported that we were still missing a Board Member from the second district. Ken Waller discussed the reappointment of JCCMHFB Members and the end date of those appointed terms would be changed to the end of the fiscal year.

Kathy Ellis reminded the Board that the MPCA Conference is Branson was coming up in September. She encouraged all Board members to attend. Anyone interested was instructed to contact Laura Casey.

Agenda Item #8 Closed Session – Personnel and Legal: “I Stan Stratton, move that the Board enter into closed session.” Kathy Ellis seconded the motion. The motion was carried by a voice vote from: Jerry Rogers (Board Chair); Kathryn Ellis (Board Vice Chair - Community Development and Fundraising Committee Chair); Elizabeth Divenley (Board Secretary) Stan Stratton (Board Treasurer); Martha Maxwell (CMHFB Chair); Jane Sullivan; Cliff Lane; Audrey Mitchell; Vicky James, Ken Waller, Dr. Steven Crawford; Mark Mertens; Katherine Hardy-Senkel and Kyle Gowen.
Agenda Item #9  Adjournment

Discussion: No further business to discuss.

Recommendations: With there being no further business to discuss, Mark Mertens moved for adjournment. Vicky James seconded the motion. The motion carried.

Notes: FY17, the Board will meet every 2nd Monday of the month at 7:30 am in the Arnold Suburban Office, Anderson Building.

Next Meeting Date: 8/8/2016  Time: 7:30 am  Location: Arnold Suburban Office

☐ Minutes approved

(Signature of Committee Chair)  

Date: 8-10-16

Adapted and revised from sample-ECRI Institute 2012
July 11, 2016
Board Meeting

COMTREA Anderson Building
Arnold, MO

AGENDA

- 7:30 am – Meeting Open
- Approval of Agenda and Minutes
- CEO’s Report
- Financials
- Action Items
- Discussion Items
- Board Member Recruitment Discussion
- Old Business
- Closed Session
- Closing
Approval of Agenda and Meeting Minutes

CEO’s Report

- ACO Participation
- Primary Care Restructure
- HRSA Supplemental Funding for IT Infrastructure
- Update – Board Members using FQHC Services
- KPI Dashboard
- Volunteers
- Warriors in Transition Program
Volunteers

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<th>JAN</th>
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- COMTREA has received close to $98,793 in volunteer time in the 2015-2016 FY.

FINANCIAL REPORT

CASH ON HAND
$ 1,613,751.00

ACCOUNTS RECEIVABLE
$4,405,117.91

MOTION: "As a member of the Finance Committee, I ________, move that the Board approve the attached financials for the month of May, 2016."
Action Items

Policy Approvals

G4.6 Credentialing and Privileging Procedures Appendix, Section C.

1. Bi-Annual renewal of credentials and re-privileging adds yearly Dental Board Requirement.

2. Name designation from QSAP to QAP has been made in policy and privileging forms. The Division of Behavioral Health (DBH) is removing the word “abuse” whenever possible, therefore the DBH is formally changing the term “Qualified Substance Abuse Professional” or “QSAP” to “Qualified Addiction Professional” or “QAP.” This is a change in name only and will be reflected in the revised Code of State Regulation under review. COMTREA is revising its G4.6 Credentialing and Privileging Policy and forms to support the DBH term change.

3. Change in title from “Credentialing and Privileging Specialist to HR Recruitment Specialist.”

Motion: “I, _____ move that the Board approve the revision to G4 6, Credentialing and Privileging Procedure to reflect the changes discussed.”
Policy Approvals

Medical Manual – Medication Refill Policy

New policy

Motion: “I, _____ move that the Board approve the addition of the Medication Refill Policy to the Medical Manual as presented.”

Manual Approval

Policy and Procedure Manual for Tails with Tales Canine Program

Motion: “I, _____ move that the Board approve the Tails with Tales Policy and Procedure Manual as presented.”

Position Approvals

New Positions
• AVP – HCH and Chronic Disease Management
• EHR Clinical Liaison

Changes to Existing Positions
• Health Services Operations Manager – change from AVP of PC
• Digital Marketing Associate

Motion: “I, _____ move that the Board approve the AVP – HCH and Chronic Disease Management Position and EHR Clinical Liaison Position not previously included in the budget and the changes to existing positions as discussed.”
### CREDENTIALING & PRIVILEGING

**New Staff / Interns Requiring Privileging (during the month of June 2016)**

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**Current Staff Re-Privileged (during the month of June 2016)**

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### QIQA COORDINATING COUNCIL REPORT

- Patient/Family Advisory Council Update
- MPCA Clinical Quality Awards Update
- Patient Satisfaction Survey
- Patient Experience Survey
- UDS Report
- Peer Reviews
- Primary Care and Oral Health Quality Measures
- Board Member/Patient Count

**MOTION:** "I, ____, move that the Board accept this report as presented by the QA/QI committee."
Discussion Items

Building & Grounds

- **“A” Building** - HVAC units are in place. Counters are being placed.
- **A Safe Place** - We have applied for annexation to the city of Pevely through their Planning and Zoning Board. We will meet with them on July 5th to formally review our application and receive proper zoning. Signage has been placed on the property announcing our intent to annex and the public hearing date.
- **Fox Service Center** - Architect has completed the RFPs for contractors and submitted final plans to the City of Arnold and Rock Creek Fire District.
- **Valley** - We have submitted all required documentation for approval of renovation. We are waiting to hear back from HRSA. We reviewed plans for “final” placement of security and plumbing request and drawings are complete. We will schedule a “final” review next week.
- **Northwest Office** - We reviewed plans for expansion and ready to submit.
- **“B” Building** - The architect reviewed plans/procedures for expansion of waiting room.
- **Hickory Plaza** - After reviewing the difficulty and potential expense of adding parking to the rear of the building, we are looking at alternatives.
- **Additional parking in Festus** - Mark Mertens requested we look at leasing parking space in the vacated lot next to the Fire House on N. Mill Street. Tim Meyers owns the property. He is not interested in leasing the property. He is asking $75,000 for it and has paperwork from the EPA stating the soil contamination is 4 feet deep.
Marketing/Fundraising/Community Relations

- We are meeting with Robert Green in Gasconade County regarding a third party 5k/half marathon on Saturday, April 29, in Owensville.

- The CAC will be hosting its 11th annual golf tournament on Friday, August 19 at Union Hills Golf Course. We are currently soliciting for hole sponsorships which are $125 and teams which are $400 per team or $100 per player. We also need items and or themed gift baskets for the basket raffle. Contact Kim Elbl at keibl@comtreao.org for additional information or to make a donation.

- Friends of A Safe Place Foundation had its first official board meeting on June 27. The foundation will be submitting the final portion of the 501 C 3 application and hopes to be completely established in the next 2 to 3 months. The foundation is also seeking members for an Advisory Committee that will assist the board with fundraising efforts.

- On July 7 there was a meeting with EMD Consulting from St. Louis to begin the feasibility study and develop a timeline for the capital campaign that will fund the transitional housing project for A Safe Place.

Leadership Council Reports

1. Updates from Reports?
2. Questions from Board?
Board Member Recruitment Discussion

Old Business?
May 2016 KPI Dashboard

# Visits/Encounters per Provider FTE/day

Total Visits, Cancellations and No Shows

- CPR/Adult Counsel
- Keaton Center
- A & D Adult OP
- Court Services
- ASP Shelter
- Counsel Youth
- School Services
- Susan Nuckols
- Adol OP
- Healthcare Home
- Primary Care
- Oral Health
- FQHC BH Psychiatric
- CAC

Legend:
- Total Visits
- # Cancellations
- # No Shows
B.R.A.V.E.

Bridle Ridge Acres Veteran Equine Program

Warriors In Transition

Charting a Course for Successful Returns, Reunions and Reintegration
OVERVIEW

- Warriors in Transition© (WiT) begins with a two-day equine facilitated workshop which is followed up by eight personalized one hour billable therapy sessions.

- WiT was developed in 2008 to assist both active duty military & recent veterans, their families and caregivers navigate the challenges of repeated deployment cycles and the eventual transition back to civilian life.

- Terry Murray, a veteran himself, took the lead in creating the evidence-based program with input from Linda Kohanov, best selling author and founder of The EponaQuest Foundation. Since that time, the workshop has been conducted and expanded to include Arizona, Florida, Hawaii and Colorado and Missouri.

- WiT is based on Experiential Learning Methodology, employing horses as teachers.

WHY HORSES?

- Horses are prey animals and highly sensitive to their surroundings. They naturally sense and reflect emotions, intention and non-verbal communication; all key elements in developing Emotional Intelligence.

- Horses have the ability to live in a state of hyper-vigilance without being in a constant state of hyper-arousal. A skill they easily transfer to humans.
PROGRAM DESCRIPTION
A Phased Approach - Phase I

The WIT experience begins with a group of up to six Veterans meeting for a two-day experiential learning workshop. I call this phase 'cracking of the egg' because it is during this workshop where the participant begins to form new neuro pathways, experiences connection and realizations that may have been buried for years come to their awareness. All happening naturally through the instant and non-judgmental feedback the horse provides.

Key areas explored during the workshop include:

- Building Emotional Intelligence
- Understanding Body Language (non-verbal awareness)
- Using emotions as information which allows the participant the experience sitting with an uncomfortable emotion without panicking. Horses do this naturally, and easily transfer this skill to humans.
- Setting and maintaining healthy boundaries

Phase II
Transitioning From Unit to An Individual

Phase II provides the veteran a safe and supportive environment where he/she can practice the techniques and tools learned during the workshop. And importantly allows space and time needed for deeper processing guided by a licensed therapist.

- Phase II is an eight week individualized continuation of the program focused on the unique needs of each participant.
- Each participant receives eight one hour billable individual counseling session(s) provided by Lisa Krytoseck, JD, MHA, LPC.
- These individual sessions allow the participant the space to safely practice and integrate the tools learned and insights gained during the group experience.
- This integration period is what makes our program truly life changing for the veteran.
PHASE III
LEADERSHIP IN PRACTICE – GIVING BACK

Once the Veteran has successfully completed Phases I & II they often ask for more! They have felt a sense of community, personal transformation and want to give back. Veterans are GREAT VOLUNTEERS and are GREAT AT SPREADING THE WORD!!

Phase III offers two tracks. The Veteran can choose one, both or none of these...

1. **Buddy** program for the next WiT workshop group. This group is essential to form as who better can model new behaviors as the Veteran who has successfully completed the program.

2. **Horsmanship/Leadership** program. Continue working with the horses by learning basic horsemanship skills based on the handling philosophy learned in Phase I. These veterans can return to be horse-handlers for future workshop groups.

COMMUNITY SUPPORT

- Bridle Ridge Acres is developing a liaison relationship with the Veteran population through a newly formed Veteran’s Committee.

- Bridle Ridge Acres is reaching out to establish relationships within the Jefferson County Veteran’s Court.
FUNDING

The approximate cost for one Veteran to attend the two-day program is $500. We plan to raise this money by fundraising and scholarship activities.

- The combination of fundraising and scholarships at $500 per session, assuming 6 participants per cycle and 7 cycles annually would generate $21,000.

The individual therapy sessions, Phase II, are billable through traditional payer sources.

- Again, assuming six participants, seven cycles annually, the revenue from the therapy sessions would be $25,200/year.
- That would be either 42 unique individuals or a combination of some repeating.

ON A PERSONAL NOTE

There have been so many stories of personal transformation from Veterans who have attended my workshops. EVERY TIME I hear at least one Veteran say:

- "I was able to sleep through the night for the first time in years, without my meds after yesterday's workshop".
- "I was given my sense of pride back"
- "I had a spiritual awakening"
- "I want more!"
**MISSION**
Cometrea's mission is to be an INNOVATIVE, EFFECTIVE, and RESPONSIVE comprehensive health center which exists to SERVE THOSE IN NEED.
we believe that our clients are entitled to the BEST PROFESSIONAL CARE, in the MOST COMFORTABLE SURROUNDINGS, at the MOST REASONABLE PRICE POSSIBLE.

**Warriors in Transition Program**

**INNOVATIVE, EFFECTIVE, and RESPONSIVE**
- Proven methodology combined with groundbreaking equine-assisted psychotherapy interventions.
- Experiential framework designed to allow clients the latitude to discover, learn, and grow from the horse-human relationship.

**SERVING THOSE IN NEED:**
- The focus of WIT is the Veterans population.
- Program structure is adaptable for use with other vulnerable populations.

**BEST PROFESSIONAL CARE**
- Services are delivered by highly trained specialists.
- Licensed and certified Mental Health Practitioners.
- Certified Equine Specialists.

**MOST COMFORTABLE SURROUNDINGS**
- Services will be provided in the healing environment of a therapeutic farm.

**MOST REASONABLE PRICE POSSIBLE**
- WIT will be funded through a combination of traditional reimbursement sources and fundraising efforts.

**QUESTIONS?**
Subject: Medication Refill Policy

Section 1: Purpose:

A. To educate patients on the importance of keeping their appointments to get the meds without interruption
B. To educate patients on the importance of canceling their appointment in a timely manner, if, for whatever reason, could not keep the scheduled appointment

Section 2:

A. Those patients show responsibility by cancelling the scheduled appointment in a timely manner, shall be provided another follow up appointment and enough meds until then.
B. Those who missed the appointment without informing Comtrex, shall not receive refill meds; instead a new appointment shall be provided with the same provider in an open slot available or in a specially designed no-show clinic slot of that provider.
C. Those providers who need a specific no show clinic time each of their working days, shall be provided one full hour for those who work 8 hours and half-an-hour for those working lesser hours, each day.
D. In any unusual situation, the prescribing provider shall override the above policy

Approval: Approved by COMTREA Board (sent for 7/18/2016 Board Meeting)
Effective Date: 8/1/2016
Revision Date:
Review Date:
1. G4.6 Credentialing and Privileging Procedures Appendix, section c. Bi-Annual renewal of credentials and re-privileging adds yearly Dental Board Requirement and

2. Name designation from QSAP to QAP has been made in policy and privileging forms. See below.

1. Added Dental Requirement:

Every Two Years: The Privileging Committee will review all Medical Staff, both Primary Care and Medical Behavioral Health and Dental staff for re-privileging as they are due. HS Credentialing and Privileging Specialist will insure the appropriate credentials are current using the following checklists:

- Credentialing/Re-credentialing Checklist for Licensed Independent Practitioners, FMPRS0117 and
- Credentialing/Re-credentialing Checklist for Other Licensed Providers, FMPRS0118

Yearly, as directed by Missouri Dental Board, registration is required for both Dentist and Dental Hygienist notifying the Dental Board of those individuals working in public health. The Credentialing Specialist is responsible for this activity and provides copies for the notifications to Human Resources staff for placement in the individuals credentialing files.

The AVP Corporate Compliance/QM will provide the results of the agency quarterly Medical Peer Reviews and more frequent Medical Chart Audits to Human Resources staff. HR will provide the annual performance reviews and, if any, specific performance improvement data. Each Medical Staff, Primary Care, Oral Health or Medical Behavioral Health staff will complete the Application for Clinical Privileges by Specialty Form, FMPRS0119-0135 and send it to the medical directors for review and approval. The Privileging Committee will meet quarterly to review the applications and submit to the Board of Directors (column one) and CEO (column two) for final review and approval.

2. Name Change

The Division of Behavioral Health (DBH) is removing the word “abuse” whenever possible, therefore the DBH is formally changing the term “Qualified Substance Abuse Professional” or “QSAP” to “Qualified Addiction Professional” or “QAP.” This is a change in name only and will be reflected in the revised Code of State Regulation under review. COMTREA is revising its G4.6 Credentialing and Privileging Policy and forms to support the DBH term change.

<table>
<thead>
<tr>
<th>A. CREDENTIALING OR PRIVILEGING ACTIVITY</th>
<th>“LICENSED OR CERTIFIED HEALTH CARE PRACTITIONER”</th>
<th>“UNLICENSED OR CERTIFIED MENTAL HEALTH CPS OR SUBSTANCE ABUSE PRACTITIONER”</th>
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<tbody>
<tr>
<td>ACTIVITY</td>
<td>Licensed Independent Practitioner (LIP)</td>
<td>Mental Health CPS/Substance Abuse Practitioner not providing services, nor billing, within the Scope of the FQHC Grant but recognized by the Missouri</td>
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<tr>
<th>Examples of Staff</th>
<th>Department of Mental Health CPS/ADA Standards</th>
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<tbody>
<tr>
<td>Dental Hygienist, Dentist, LCSW, LMFT, LPC, NP, PA, Physician, Psychiatrist</td>
<td>ADA Educator, CM, CRPS, CSS, MACSAPP, MRSS, MSAPA, PLPC</td>
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<tr>
<td>CMA, Dental Assistant, LPN, MA, RN, <strong>QAP formerly CADC</strong>, Registered Dietician</td>
<td><strong>QAP formerly CCJP, CDP, CCP-D, CRAADC, CRADC, RSAP</strong>, RASAC I/II, LMSW</td>
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<tr>
<th>C. RENEWAL OR REVISION OF PRIVILEGES</th>
<th>Licensed Independent Practitioner (LIP)</th>
<th>Other licensed or certified practitioner</th>
<th>Mental Health CPS/Substance Abuse Practitioner not providing services, nor billing, within the Scope of the FQHC Grant but recognized by the Missouri Department of Mental Health CPS/ADA Standards</th>
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<td>Examples of Staff</td>
<td>Physician, Dentist, NP, PA, Psychiatrist.</td>
<td>RN, LPN, CMA, MA, Dental Hygienist, Dental Assistant, Registered Dietician, LCSW <strong>QAP formerly CADC</strong></td>
<td>ADA Educator, CM, CRPS, CSS, MACSAPP, MRSS, MSAPA, PLPC <strong>QAP formerly CCJP, CDP, CCP-D, CRAADC, CRADC, RSAP</strong>, RASAC I/II, LMSW</td>
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The Privileging Form states “QAP - Qualified Addiction Professionals Credentials (CADC, CRADC, CRAADC, CCJP, CDP, CCP-D, RSAP-P, and RSAP are no longer offered but considered a QAP)”
Job Title: Electronic Health Records (EHR) Clinical Liaison

Department: Information & Communications Technology (ICT) Division: Operations

Location: Festus Reports To: AVP of ICT

Effective Date: Schedule: M – F, 8:30 a.m. – 5 p.m.

Job Summary: The position will act as a liaison to providers, clinicians, information and communication technologies (IT), and other staff in the development, implementation and training of electronic health records systems.

Essential Job Functions:
1) Assist in the evaluation, selection, development, implementation and maintenance of electronic health records systems, as needed.
2) Train and be available to provide assistance to providers, clinicians, and other staff in the utilization of the EHR.
3) Develop templates for the EHR, as necessary.
4) Provide assistance in quality initiatives.
5) Additionally, the Liaison would develop, implement and provide leadership to special clinical initiatives.
6) Other duties as assigned.

Qualifications: Licensed Clinical Social Work or Practicing Counselor.

Education: Masters of Clinical Social Work, Counseling, or equivalent field.

Experience: Experience and knowledge of clinical requirements and workflows, and healthcare information systems, and electronic health records.

Skills: Experience in working with electronic health records systems; customer relations; information technologies; communication, organization and planning skills.

Supervisory Responsibility: Some direct and matrix supervision.
COMMUNITY TREATMENT INC

AVP Primary Care Health Home and Chronic Disease Management Programs

Department: Adult- Health Care Home
FLSA Status: Exempt
Grade/Level: Regular
Job Status: Full Time
Amount of Travel Required: 15%
Reports To: Medical Director

POSITION SUMMARY
This position is responsible for the implementation of Primary Care participation in the Missouri Health and Accountable Care Organization (ACO). Facilitate the Primary Care Home Health start-up with the anticipation of transitioning to Director of Health Home within one calendar year. This position will oversee the day to day clinical operations of the comprehensive care management, care coordination, clinical quality data management of the current chronic disease programs and the overall provision and coordination of services to assigned clients.

To provide clinical and administrative assistance to the members of the clinical staff at primary health care clinic locations as assigned. The Registered Nurse is a member of a health care team, which includes, a provider, a Registered Nurse (RN) and/or a Licensed Practical Nurse (LPN), Patient Care Coordinator, Licensed Clinical Social Worker (LCSW) and a Medical Assistant (MA) that has been signed a panel of clients. Participation goal in this care team model is to provide clients with an ongoing relationship with the team and continuity of care through all stages of care.

This position will analyze, report and track data generated within the specified technology program and coordinate client enrollment into the HCH services; will monitor the inclusion of effective health care strategies in client treatment plans; provide consultation and education to the clinical staff; evaluate outcomes; distribute pertinent client health information to members of the treatment team; will provide ongoing support to the staff in adopting a “treatment of the whole person” culture, combining behavioral and medical health care to provide holistic care of the individual.

ESSENTIAL FUNCTIONS Reasonable Accommodations Statement
To accomplish this job successfully, an individual must be able to perform, with or without reasonable accommodation, each essential function satisfactorily. Reasonable accommodations may be made to help enable qualified individuals with disabilities to perform the essential functions.

Essential Functions Statement(s)
- Handles Health Care Program QI-QA needs including data collection, analyzing and reporting for the Primary Care Health Home and Missouri Health Plus ACO programs.
- Reviews and analyzes trends pertinent to delivery of health home services.
- Develop and lead Performance Improvement teams to improve quality driven measures.
- Pro-actively support Patient Centered Medical Home initiatives.
- Reviews reports monthly to assist with determining focused audits. Ensures appropriate record documentation for all members of the case management team.
- Assesses, plans, evaluates the outcomes of care in collaboration with members of the interdisciplinary care team to facilitate patient care.
- Provides supervision to clinical personnel in their assigned area of the PCHH Department.
- Participates in developing strategies that result in a positive community image and ensuring these services contribute to meeting the vision and mission of COMTREA as well as meeting requirements of other applicable federal, state, and local regulatory and/or accrediting agencies.
- Identify related risk management quality concerns and report to the Medical Services Director.
- Manages and monitors database on care management population. Collaborate with clinicians and nursing staff in identifying appropriate patients for care management.
• Provide technical assistance to Nurse Care Managers on use of Cyber Access, Athena Net, DRVS and running Patient Profile Reports.
• Develop, assess, and adjust care plans as necessary and promote desired outcomes.
• Work in a Nurse Care Manager role with a maximum empanelment population that does not exceed the .5 FTE recommendation.
• Maintain databases on care managed population.
• Participate in meetings and committees as directed by Medical Services Director to report on health education and assurance of collaboration on improving health outcomes.
• Assume role of designated COMTREA liaison with ACO Learning Collaborative within Missouri Health Plus.

POSITION QUALIFICATIONS Competency Statement(s)
• Planning - Assess the ability to develop a plan to complete the work in a timely manner.
• Problem Solving - Ability to find a solution for or to deal proactively with work-related problems.
• Knowledge - Appraise familiarity with techniques and procedures needed to complete the work.
• Coaching and Development - Ability to provide guidance and feedback to help others strengthen specific knowledge/skill areas.
• Judgment - The ability to formulate a sound decision using the available information.
• Organized - Possessing the trait of being organized or following a systematic method of performing a task.

SKILLS & ABILITIES
Education: Associate Degree or Certificate Program; Bachelor's Degree preferred
Experience: 2 plus years of experience in clinical nursing- inpatient or outpatient
Computer Skills: Basic Computer Knowledge
Certifications & Licenses:
Other Requirements: Missouri RN License

PHYSICAL DEMANDS
N (Not Applicable) Activity is not applicable to this position.
O (Occasionally) Position requires this activity up to 33% of the time (0 - 2.5+ hrs/day)
F (Frequently) Position requires this activity from 33% - 66% of the time (2.5 - 5.5+ hrs/day)
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10 lbs or less O
11-20 lbs O
21-50 lbs N
51-100 lbs N
Over 100 lbs N
12 lbs or less O
13-25 lbs N
26-40 lbs N
41-100 lbs N

Employee Signature: ____________________________ Date: ____________________________

Supervisor
Signature: ____________________________ Date: ____________________________
COMTREA

Comprehensive Health Center

COMMUNITY TREATMENT INC

Health Services Operations Manager

Department: Medical Services
FLSA Status: Exempt
Grade/Level: 
Job Type: Regular
Work Schedule: 

Job Status: Full Time
Reports To: Medical Director
Amount of Travel Required: As needed
Positions Supervised: None

POSITION SUMMARY
Oversees the day-to-day operations within primary care with attention to consistency of workflow processes, policies and efficiencies of the primary care team. Perform broad responsibilities for data collecting and reporting functions including integration with QA/QI meetings. Manage the procurement and supplies for multiple primary care sites.

ESSENTIAL FUNCTIONS Reasonable Accommodations Statement
To accomplish this job successfully, an individual must be able to perform, with or without reasonable accommodation, each essential function satisfactorily. Reasonable accommodations may be made to help enable qualified individuals with disabilities to perform the essential functions.

Essential Functions Statement(s)
• Support role to Office Managers and LPNs/Clinical Managers (MA Supervisors) to evaluate work activities of medical assistants within the Primary Care areas to ensure consistency of patient services, primary care procedures and policies being practiced.
• Participate in recruitment and hiring process for new primary care staff positions
• Work with Compliance Officer to ensure meeting all federal and state regulatory requirements are being met within health centers
• Participate in policy development and/or revisions when appropriate
• Assist in future growth plans of primary care within organization
• Participate in annual UDS data collection and reporting.
• Involvement in QA/QI council monthly meetings and assume reporting liaison role
• Work with patient care coordinators to ensure continuity of care for patients and develop work flows for best practice
• Oversee registration and attestation for all qualified staff in the Meaningful Use Incentive Program
• Develop and provide progress reports to providers and educate/train on meeting required measures.
• Monitor Patient Centered Health Home services and train staff on PCMH standards and elements.
• Ensure provider and staff timeliness in chart audits and peer reviews.
• Establish, organize, and implement a system for ordering medical supplies and single order submission to purchasing department.
• Involvement in primary care quality measures and data tracking with monthly/quarterly report generations in collaborative role with Medical Director.
• Keep in-tact compliance of ongoing recognition standards of Patient Centered Medical Home requirements
• Other duties as assigned

POSITION QUALIFICATIONS Competency Statement(s)
• Human Relations - Assess the ability to establish and maintain rapport with personal contacts.
• Teamwork - Assess the ability to work with others, when appropriate, to attain organizational goals and objectives.
• Judgment - The ability to formulate a sound decision using the available information.
• Initiative - Ability to make decisions or take actions to solve a problem or reach a goal.
• Leadership - Ability to influence others to perform their jobs effectively and to be responsible for making decisions.
• Accountability - The extent to which an individual is willing to accept responsibility.

SKILLS & ABILITIES

Education: Bachelor's Degree (four year college or technical school): Preferred

Experience: 3 plus years of experience in health care management in a primary care setting. Quality Management experience within health care a

Computer Skills: Basic Computer Knowledge

PHYSICAL DEMANDS

N (Not Applicable) Activity is not applicable to this position.
O (Occasionally) Position requires this activity up to 33% of the time (0 - 2.5+ hrs/day)
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Employee Signature: ______________________________________________________________________ Date: ______________________________________________________________________
Supervisor Signature: ______________________________________________________________________ Date: ______________________________________________________________________

The company has reviewed this job description to ensure that essential functions and basic duties have been included. It is intended to provide guidelines for job expectations and the employee's ability to perform the position described. It is not intended to be construed as an exhaustive list of all functions, responsibilities, skills and abilities. Additional functions and requirements may be assigned by supervisors as deemed appropriate. This document does not represent a contract of employment, and the company reserves the right to change this job description and/or assign tasks for the employee to perform, as the company may deem appropriate.
COMMUNITY TREATMENT INC
Digital Marketing Associate

Department: IT
FLSA Status: Non-Exempt
Grade/Level: 
Job Type: Regular
Work Schedule: 
Job Status: Part Time
Reports To: AVP - Operations
Amount of Travel Required: None
Positions Supervised: None

POSITION SUMMARY
The Digital Marketing Associate will design, produce and monitor digital content for the web and social media including posts, web updates and images. Implement and maintain digital content, including posts, web updates and images. Plan and manage the daily digital marketing components that contribute to the overall mission of COMTREA while maintaining a positive image for the agency.

ESSENTIAL FUNCTIONS
Reasonable Accommodations Statement
To accomplish this job successfully, an individual must be able to perform, with or without reasonable accommodation, each essential function satisfactorily. Reasonable accommodations may be made to help enable qualified individuals with disabilities to perform the essential functions.

Essential Functions Statement(s)

• Maintain and monitor consistency of agency presence on various social media platforms.
• Create content for social media based on community sentiment, special events, agency-wide initiatives, and agency announcements.
• Serve as knowledge leader regarding social media trends and best practices.
• Stays abreast with current digital marketing trends and develops new ideas on how to promote the agency.
• Assists with other marketing and promotional activities as needed.
• Assist with the update of web content and design.
• Other duties as assigned.

POSITION QUALIFICATIONS
Competency Statement(s)

• Accuracy - Ability to perform work accurately and thoroughly.
• Communication, Written - Ability to communicate in writing clearly and concisely.
• Communication, Oral - Verbal expression of communication (with clarity) so others understand clearly the message of intent. Receives and processes feedback also with clarity and clear understanding.
• Detail Oriented - Ability to pay attention to the minute details of a project or task.
• Creative - Ability to think in such a way as to produce a new concept or idea.
• Innovative - Ability to look beyond the standard solutions.
• Technical Aptitude - Ability to comprehend complex technical topics and specialized information.
• Sales Ability - Ability to use appropriate interpersonal styles and communication methods to gain acceptance of a product, service, or idea.

SKILLS & ABILITIES
Education: Associate's Degree (two year college or technical school) Required, Field of
Study: Marketing, Communications, Digital Media, or related field.

Experience: 2-4 years work experience in digital marketing

Computer Skills: Microsoft Office along with knowledge of all Social Media Platforms.

Certifications & Licenses:

Other Requirements:

**PHYSICAL DEMANDS**

- **N (Not Applicable)** Activity is not applicable to this position.
- **O (Occasionally)** Position requires this activity up to 33% of the time (0 - 2.5+ hrs/day)
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**Other Physical Requirements**

**WORK ENVIRONMENT**

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Employee Signature: ___________________________ Date: ________________

Supervisor
Signature: ___________________________ Date: ________________

The company has reviewed this job description to ensure that essential functions and basic duties have been included. It is intended to provide guidelines for job expectations and the employee's ability to perform the position described. It is not intended to be construed as an exhaustive list of all functions, responsibilities, skills and abilities. Additional functions and requirements may be assigned by supervision as deemed appropriate. This document does not represent a contract of employment, and the company reserves the right to change this job description and/or assign tasks for the employee to perform, as the company may deem appropriate.