Education & Compliance Officer Application Package

This package includes the Education & Compliance Officer job description and a JCESA employment application.

Please note the required and preferred qualifications listed in the job description and ensure documentation of any of those qualifications you possess is included with your application submission. For certifications, include copies of the certificates. For education and experience, be sure to include relevant qualifications in your resume or application.

Applications for this position must be received by May 23, 2017. Applications received after this date will not be considered.

Applications for this position may be delivered in one of the following ways:

By e-mail to Capt. Burner at: By mail or in person to:

bburner@jcesa.org JCESA

Attn: Bob Burner 419 Sixteenth Ave Ranson, WV 25438

Interviews are tentatively planned for May 24 through June 2. The start date for this position is July 2.

Page 1 of 3

Job Description: Education & Compliance Officer

Approval: Date:

Summary

The Education and Compliance Officer manages the Agency's training, quality assurance, and HIPAA compliance programs. While on-duty, this position will also serve as a back-up paramedic during times of high volume when resources become depleted.

Supervision Received and Exercised

This position is ranked as a Lieutenant and is supervised by and receives direction from the Captain. This position operates with minimal direct supervision and, therefore, must be able to work independently, make critical decisions, and manage his/her time effectively.

This position does not supervise others.

Pre-Requisite Qualifications

To be eligible for initial or continued appointment to the position of Lieutenant one must:

- Meet all qualification requirements for the position of Paramedic in accordance with JCESA Administrative Policy #1850 (Paramedic Job Description);
- Be certified as a WVOEMS Lead Instructor or Master Instructor at the ALS level;
- Have at least one year of experience coordinating and/or instructing EMS continuing education courses;
- Possess current certification as a CPR (BLS) instructor by a WVOEMS approved institution
- Understand the purpose and process of Quality Assurance reviews and interpretation of aggregate data for Quality Improvement;
- Have a strong understanding of HIPAA and the laws, rules, and best practices relevant to pre-hospital care; and
- Possess strong office technology skills, including the use of Microsoft Office, copy machines, and proprietary databases and applications.

Desired Qualifications

Although not required for appointment, as of the effective date of this policy, the following qualifications are desirable in candidates seeking appointment to the position of Education & Compliance Lieutenant.

- Instructor, coordinator, or faculty status in one or more of the following disciplines: ACLS, AMLS, GEMS, PEPP, PHTLS, and/or TECC
- Two or more years actively coordinating an EMS training program
- Two or more years conducting QA or coordinating a QA program



AP 1862

Page 2 of 3

Job Description: Education & Compliance Officer

Approval: Date:

- One year or more using TargetSolutions as a supplemental training delivery and certification tracking platform
- Experience implementing and/or maintaining a HIPAA compliance program
- College coursework (please include number of credits earned and/or degrees awarded)
- Authorized Fire Service Instructor through RESA or WVU FSE.

Candidates possessing any of these should submit documentation when submitting a written letter of interest (internal candidates) or resume and application (external candidates) during a vacancy announcement period for this position.

Responsibilities

The responsibilities of the Lieutenant include:

- All responsibilities of a paramedic as outlined in JCESA Administrative Policy #1850 (Paramedic Job Description), when functioning as a primary attendant or aide in patient care.
- Training Program
 - Schedule courses based on recertification requirements, provider needs, and issues identified through QA
 - Coordinate all elements of the scheduled course to include; instructor, venue, equipment, supplies, institution approval, credentialing documents, and post-course documentation.
 - o Coordinate and conduct skills evaluation sessions
 - o Deliver additional training through TargetSolutions
 - o Assist employees and volunteers with recertification applications
 - Maintain records in WVOEMS CIS, internal databases, and hardcopy as appropriate
 - Serve as POC and liaison to WVOEMS Education Division
 - Serve as TC Coordinator for ASHI
- Quality Assurance Program
 - o In accordance with the Quality Management Program, review PCRs flagged by volunteer QA officers, randomly review PCRs that have not been flagged, address deficiencies with providers and/or volunteer and/or JCESA officers
 - o Receive and investigate inquiries from medical command
 - o Identify and present cases for review at monthly EMS Chiefs meeting
 - o Serve as liaison to Trauma Coordinators at JMC and BMC

Jefferson County Emergency Services Agency Administrative Policy

AP 1862

Page 3 of 3

Job Description: Education & Compliance Officer

Approval: Date:

- HIPAA Compliance Program
- Other duties as assigned

Additional Position Attributes:

- Status: Non-Exempt
- **Compensation**: If hired from within, the Lieutenant will receive a 5% increase to their base hourly rate as a Paramedic upon appointment. In the event that the Lieutenant returns to the position of Paramedic, whether voluntarily or involuntarily, this increase will be reversed on the effective date of the position change. If an external applicant is hired into this position compensation will be Grade IV and between step A-E, at the discretion of the Director, based on experience and qualifications.
- Location and Hours of Work: This position will be primarily based at Station 11. Generally, the hours and days will be Monday through Thursday from 0800-1800. Hours may be adjusted on Monday and Thursday to accommodate hours spent in the classroom during other times. Such adjustments must be coordinated with the Captain at least two weeks in advance. This position is expected to work 40 hours per week, on average, but no less than 72 and no more than 96 hours per pay period. Overtime (Hours worked in excess of 96 in a pay period) requires approval in advance by the Captain.



EMPLOYMENT APPLICATION

JOB CLASSES FOR WHICH YOU ARE APPLYING (This application cannot be processed without job titles)				FOR OFFICE USE ONLY (DO NOT WRITE IN THESE SPACES)			
			А		R	V-5 ()	V-10 ()
			_				
PLEASE	TYPE (OR PRINT CLEARLY IN INK. INCOMP	LETE OR ILLE	SIBLE A	PPLIC	CATION WILL	NOT BE CONSIDERED
SOC SE	C NO: _		Email <i>l</i>	\ddress:			
NAME: _							
_		Last	First				Middle
ADDRES	SS:	Mailing Address	City			State	 Zip Code
		Mailing Address	City			State	Zip Code
TELEPH	ONE: _	(Area Code) Home Number		Area Coo	le) Ce	ll Number	
		LOYMENT YOU ARE SEEKING:					
□ Pe	rmanent	t Full-Time □ Permar	nent Part-Time				
How di	id you le	earn of the position for which you are app	lying?				
YES	NO						
		Have you ever used another name?	If yes, what nar	ne(s) ha	ve you	ı used?	
		Do you have a valid driver's license?	State:	License	No: _		Class:
		Were you born in West Virginia? If y	es, which Coun	ty?			

AN EQUAL OPPORTUNITY EMPLOYER



EMPLOYMENT APPLICATION

EMPLOYMENT HISTORY

Starting with your present or last employer, please account for your work experience. Please attach any supplemental information you think might be useful. However, be sure you fill out the application fully. **RESUMES MAY BE ATTACHED BUT WILL NOT BE ACCEPTABLE AS A SUBSTITUTE FOR COMPLETING THIS SECTION.**

Employer Name & Address			Employer Phone Number
Type of Business	Name and Title of Supervisor	Your Job Title or Occupation	Salary (Beginning / Ending)
Employment Dates: From To	Employment Status: □ Paid Employment: □ Fu	II-Time □ Part-Time Numbo	er of Hours per Week:
Month/Year Month/Year	□ Volunteer: □ Fu	II-Time Part-Time Number	er of Hours per Week:
Did You Supervise Employees? □ Yes □ No	Date You Began Supervising	List Titles & Number of Employees	s You Supervised
Detailed Description of Duties and R	esponsibilities		
Reason for Leaving			
Employer Name & Address			Employer Phone Number
Type of Business	Name and Title of Supervisor	Your Job Title or Occupation	Salary (Beginning / Ending)
Employment Dates: From To	Employment Status: □ Paid Employment: □ Fu	II-Time □ Part-Time Numbe	er of Hours per Week:
Month/Year Month/Year	□ Volunteer: □ Fu	ll-Time □ Part-Time Numb	er of Hours per Week:
Did You Supervise Employees? □ Yes □ No	Date You Began Supervising	List Titles & Number of Employees	s You Supervised
Detailed Description of Duties and R	l esponsibilities		
Reason for Leaving			

Attach additional sheets as necessary



EMPLOYMENT APPLICATION

Employer Name & Address			Employer Phone Number
Type of Business	Name and Title of Supervisor	Your Job Title or Occupation	Salary (Beginning / Ending)
Employment Dates: From To	Employment Status: □ Paid Employment: □ Fu	II-Time □ Part-Time Number	er of Hours per Week:
Month/Year Month/Year	□ Volunteer: □ Fu	II-Time Part-Time Numb	er of Hours per Week:
Did You Supervise Employees? □ Yes □ No	Date You Began Supervising	List Titles & Number of Employees	s You Supervised
Detailed Description of Duties and Re	l lesponsibilities		
Reason for Leaving			
Employer Name & Address			Employer Phone Number
Employer Name & Address Type of Business	Name and Title of Supervisor	Your Job Title or Occupation	Employer Phone Number Salary (Beginning / Ending)
	Employment Status:		
Type of Business Employment Dates:	Employment Status: □ Paid Employment: □ Fu	II-Time □ Part-Time Numb	Salary (Beginning / Ending)
Type of Business Employment Dates: From To	Employment Status: □ Paid Employment: □ Fu	II-Time □ Part-Time Numb	Salary (Beginning / Ending) er of Hours per Week: er of Hours per Week:
Type of Business Employment Dates: From To Month/Year Month/Year Did You Supervise Employees?	Employment Status: □ Paid Employment: □ Volunteer: □ Date You Began Supervising	II-Time	Salary (Beginning / Ending) er of Hours per Week: er of Hours per Week:
Type of Business Employment Dates: From To Month/Year Did You Supervise Employees? Yes	Employment Status: □ Paid Employment: □ Volunteer: □ Date You Began Supervising	II-Time	Salary (Beginning / Ending) er of Hours per Week: er of Hours per Week:
Type of Business Employment Dates: From To Month/Year Did You Supervise Employees? Yes	Employment Status: □ Paid Employment: □ Volunteer: □ Date You Began Supervising	II-Time	Salary (Beginning / Ending) er of Hours per Week: er of Hours per Week:
Type of Business Employment Dates: From To Month/Year Did You Supervise Employees? Yes	Employment Status: □ Paid Employment: □ Volunteer: □ Date You Began Supervising	II-Time	Salary (Beginning / Ending) er of Hours per Week: er of Hours per Week:
Type of Business Employment Dates: From To Month/Year Did You Supervise Employees? Yes	Employment Status: □ Paid Employment: □ Volunteer: □ Date You Began Supervising	II-Time	Salary (Beginning / Ending) er of Hours per Week: er of Hours per Week:

Attach additional sheets as necessary



EMPLOYMENT APPLICATION

ghest Grade Completed	Name o	f High School/City/State	e	
College Name & Address	Field(s) of Study Major / Minor	Credit Hours Semester / Quarter	Dates of Attendance MM/YY – MM/YY	Type of Degree
Business, Vocational & Technical Schools & Additional Training	Course of Study	Number of Weeks Attended	Dates of Attendance MM/YY – MM/YY	Number of Hours
Schools & Additional Training		Attended	IVIIVI/ T T — IVIIVI/ T T	рег Бау
LITARY SERVICE				
ere you in the U.S. Armed Forces	s? If so, what b	ranch?		
te of Entry (or Entries)				
te of Last Separation				
te or Rank at Discharge	Service Num	nber		
t duties of your military service, i	ncluding special trainin	ıg:		
	the C.I. Dill of Diabte?	If you what training dia	l vou take?	
ve you taken any training under	the G.I. Bill of Rights?	ii yes, what training did		



EMPLOYMENT APPLICATION

PERSONAL	REFERENCES	(Do not list former	employers	or relatives)
I LIVOUIAL	IVEL FIVE INCES			OI I CIALIVOS I

Name			
ivame	1.		2.
Address			
Occupation			
Telephone Number			
experiences, or al	ents would you care to ma pilities you have that you fe t you feel may be help	el would contribute to yo	ications for the position you seek, or other training our working expertise? Please list any addition ing your application.
	•	STATEMENT OF APPLI	ICANT
by me is true and	at this application contains complete to the best of my misrepresentation or falsi	y knowledge and belief.	tions or falsifications and that information given I am aware that should investigation at anytime ect to dismissal.
this application fo	e Jefferson County to make or employment. I release fr s supplying such informatio	om all liability or respons	past employment and all of the facts stated on sibility all persons, places of business, schools,
·			



JEFFERSON COUNTY EMERGENCY SERVICES AGENCY EMPLOYMENT APPLICATION

Supplemental Questionnaire							
Date of Application:							
Position Applied For:							
Name:Last		First	Middle				
Last	'	-IISI	Middle				
Indicate languages you	speak, read and/or write:						
	FLUENT	GOOD	FAIR				
Speak							
Read							
Write							
VOLUNTEER EXPERIE	:NCE						
Job related community	or volunteer experience (if	applicable). Do not lis	t any political affiliations.				
Dates	Dates Organization						
Special Responsibilities							
Dates	Dates Organization						
Special Responsibilities	Special Responsibilities						



EMPLOYMENT APPLICATION

CONVICTIONS

Have you ever been convicted of a felony or misdemeanor or been on parole or probation? Yes □ No If yes, please explain fully. Attach a separate sheet of paper if this space is not adequate List all convictions after your 18 th birthday. (A "yes" answer is not an automatic bar to employment. Each case is considered individually.)
If you need additional space please continue on page 3 of Supplement or additional sheets as needed
SPECIAL SKILLS and QUALIFICATIONS
Summarize special skills and qualifications acquired from employment or other experience:
Describe Specialized Training, Apprenticeship, Skills, and Extra-Curricular Activities:



EMPLOYMENT APPLICATION

Affirmative Action Data Form

PLEASE NOTE: Completion of this form is on <u>a voluntary</u> basis. A decision not to complete this form will not subject you to any adverse treatment.

Jefferson County Emergency Services Agency is striving to ensure equal employment opportunity in its hiring practices. We are asking you to voluntarily help us monitor the effectiveness of our program by answering the questions below.

The information requested below is used solely in connection with affirmative action efforts. All information is requested on a voluntary basis and will be used only in accordance with applicable state, local, and federal laws, including the Americans with Disabilities Act. This form will be filed separately from your application and will be kept confidential. The information provided will not be used to discriminate against you in any way.

Position Title		□ Male	□ Female
Name (last, first, middle)			
Date of Application	Date of Birth		
Ethnic Origin (see note below): White Black Asian or Pacific Islander	□ Hispanic □ American Indian or Alaskan Nati	ve	
Note: Ethnic origin is defined by the Fe	deral Employment Opportunity Commi	ssion as fo	ollows:
White – (not of Hispanic origin) - Persor Africa, or the Middle East (includes all c Indian Subcontinent).			
Black – (not of Hispanic origin) - Persor	ns having origins in any of the Black ra	cial groups	s of Africa.
Hispanic – Persons having origins in the Cuban, and Central or South American,			
Asian or Pacific Islander – Persons hav Asia, the Indian Subcontinent or the Pa		s of the F	ar East, Southeast
American Indian or Alaskan Native – Peand who maintain cultural identification			
Veteran: □ Yes □ No			
If yes, check here if you are a Viet any part of which occurred between Aug a dishonorable discharge).			