



JOB DESCRIPTION

Center Director (Registered Nurse)

THE MISSION

To support caregivers by providing a place of loving, compassionate care for their disabled and aging loved ones, that offers safe, engaging, and reliable adult services focused on keeping families together.

THE TEAM APPROACH

All staff members of Peachtree Christian Health (PCH) will work as a team. Our team goal is to uphold the highest quality adult day health and overnight respite care possible for the participants and their caregivers. Although the Center Director's main job description follows, he/she will always work with the other team members to see that this goal is met.

MAJOR FUNCTION

- A. In the absence of the President assumes responsibility for the effective management and operation of all PCH programs and services.
- B. Responsible for the supervision of all clinical staff.

LINE OF AUTHORITY

Reports to the President

DUTIES

- A. Works with the President to assess the organization's progress in accordance with established mission, goals, and objectives to establish and maintain a quality assurance plan.
- B. Works with the President to maintain standards required for continued certification set forth by the Georgia Department of Community Health, including completing state required documentation.
- C. Supervises and trains (arranges training) for all clinical staff.
- D. Creates care plans for participants and as necessary administers medications/attends to medical needs such as dressing changes, checking blood sugars, etc.
- E. Develops and oversees initial and ongoing assessments of participants, caregivers, and clinical staff to monitor satisfaction, retention, and participation for both internal and external clientele.
- F. Communicates and works effectively with family members/caregivers, participants, staff, and volunteers to create and ensure a life enriching atmosphere that includes dignity, safety, and compassion.
- G. Monitors and accurately documents all safety issues and resolutions.
- H. Works with the President to oversee the selection, supervision, and disengagement of staff and volunteers in accordance with established policies.

3430 Duluth Park Lane • Duluth, GA 30096 • www.pchlec.org • 678-374-1284

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Peachtree Christian Health, Inc. is a 501(C)3 Non-Profit – Tax ID 58-2459238



- I. Works with the Board of Directors and Advisory Board in the following areas:
 - 1. Attends all regular and advisory board meetings and committee meetings.
 - 2. Develops a good relationship with all board members
 - 3. Gains knowledge and understanding of both boards and responsibilities of members and committees.
 - 4. Provides requested information.
- J. Assists the President to develop an annual budget.
- K. Works with Director of Community Relations and operations Manager to gain knowledge and understanding required to develop resources for PCH, including third party payments, fundraising, grants, United Way Allocation Request, etc.
- L. Responsible for applying for, completing, and maintaining current contracts with local entities.
- M. Perform other job-related duties as assigned.

REQUIREMENTS

- A. Participate in CPR and first aid training every two years.
- B. Attend a minimum of one conference or training session per year. Must be willing to travel and participate in overnight training if necessary.
- C. Have current driver’s license and insurance.
- D. Ability to bend, stoop, stretch, lift and push as required in the delivery of participant care.
- E. Adhere to PCH’s attendance/tardiness policy.
- F. Use time wisely.
- G. Respect and adhere to all PCH policies and procedures.

MINIMUM QUALIFICATIONS

- A. Licensed in Georgia as a Registered Nurse.
- B. Should have a minimum of three (3) years experience in administration or supervision.
- C. Must provide a written statement from a physician or physician's assistant certifying good health, including freedom from communicable disease.
- D. Must have three (3) sources of recommendation.

I have read and understand the functions, duties, and requirements of this position.

Employee Signature _____ Date _____

President’s Signature _____ Date _____

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