

Program Director

1. Researches funding opportunities and writes, prepares and directs the submission of funding proposals, grant applications and required records and reports. In coordination with Community Bridges' development department, provides effective public relations outreach and materials that promote and enhance relationships with the media, community organizations, the business sector, government, and the general public. (4)
2. Provides information to individuals and families about the Medi-Cal program and refers to Medi-Cal eligibility sites. (4)
3. Coordinates Medi-Cal covered health services for a client. (6)
4. Arranges transportation if client has a physical or mental limitation. (6)
5. Responsible for the development and implementation of participant advocacy and wrap around services, programming, and activities. Participates in and actively supports site-based events and activities. (15, 17)
6. Seeks counsel and assistance from standing committees, partners, and key volunteers to ensure organizational effectiveness. Participates in community strategic planning processes by being the expert on family support strategies and techniques. (15,17)
7. Informs, recommends and assists to ensure community input on behalf of Community Bridges to help improve and/or further develop programs and operations. (15, 17)
8. In coordination with Community Bridges' development department, leads the community fund development activities for the FRC program and its sites, meeting or exceeding the annual fundraising goals. (15,17)
9. Participates in statewide and local planning and advocacy efforts aimed at maintaining, developing and/or expanding family services as appropriate. (15, 17)
10. Prepares proposals for expansion and enhancement of health and Medi-Cal services to clients and families based on intra and interagency coordination and collaboration. (15,17)

Program Director

11. Complete daily Medi-Cal Administrative Activities (MAA) time survey. (20)

12. Attends training related to the performance of MAA. (20)

Employee Signature (please sign in blue ink)

Date

Employee Name (printed)