## DA 281-2 Rev. 04-16

## **Position Description**

Read each heading carefully before proceeding. Make statements simple, brief, and complete. Be certain the form is signed. Send the original to the Office of Personnel Services.  CHECK ONE:   NEW POSITION   EXISTING POSITION  UNCLASSIFIED				Agency Number	
Part 1 - Items 1 through 12 to be completed by department head or personnel office.					
Agency Name     Department for Children and Families	9. Position No. K0234580	10. Budget Program Number		1	
Employee Name (leave blank if position vacant)		11. Present Class Title (if existing position) Adult Protection Specialist		1	
3. Division Family Services		12. Proposed Class Title Adult Protection Specialist			
4. Section Prevention and Protection Services	For	13. Allocation			
5. Unit Adult Protective Services	Use	14. Effective Date		Position Number	
6. Location (address where employee works)	Ву	15. By	Approved		
City Wichita County Sedgwick					
7. (circle appropriate time)	Personnel	16. Audit			
Full time Perm. Inter. Part time Temp. %		Date: Date:	By: By:		
Regular					
8. Regular hours of work: (circle appropriate time)	Office	17. Audit			
FROM: 8 AM/PM To: 5 AM/PM		Date: Date:	By: By:		
PART II - To be completed by department head, personnel office or supervisor of the position.					

18. If this is a request to reallocate a position, briefly describe the reorganization, reassignment of work, new function added by law or other factors which changed the duties and responsibilities of the position:

19. Who is the supervisor of this position? (person who assigns work, gives directions, answers questions and is directly in charge)?

Name

Position Number

Adult Protection Supervisor

Who evaluates the work of an incumbent in this position?

Name Title Position Number

Adult Protection Supervisor

20. a) How much latitude is allowed employee in completing the work? b) What kinds of instructions, methods and guidelines are given to the employee in this position to help do the work? c) State how and in what detail assignments are made.

Extensive latitude is given to independent judgment and initiative. Written and verbal instructions are followed based on Federal and State law, rules, supervisory input, and regulations and regional policies and procedures. Assignments are normally general direction based on broad agency expectations. Many program decisions are made independently or with input from Division staff.

duties):

What is the action being done (use an action verb); to whom or what is the action directed (object of action); why is the action being done (be brief); how is the action being done (be brief). For each task state: Who reviews it? How often? What is it reviewed for?

Number Each Task and Indicate Percent of Time and Identity each function as essential or marginal by placing an E or M next to the % of time for each task. Essential functions are the primary job duties for which the position was created and that an employee must be able to perform, with or without reasonable accommodation. A marginal function is a peripheral, incident of minimal part of the position.

No. Each Task and Indicate Percent of Time	E or M	The person in this position has access to protected health information (PHI) under the provisions of the Heath Information Portability Act of 1996 (HIPPA) Privacy Rule. PHI must be treated in accordance with the provisions of the HIPAA Privacy Regulation including the requirements for safeguarding, releasing and recording the release of such information. The person will receive training in the provision of the HIPAA Privacy Regulations as they relate to the duties of this position and has signed a confidentiality agreement.
		In addition to the tasks listed below, the incumbent is expected to communicate the Mission, Vision and Guiding Principles of the agency to peers, clients and the public; identify personal strengths and developmental needs to increase job performance and long-term career growth. Continually analyze work processes, seek new approaches and make recommendations to enhance efficiency and effectiveness of the agency. Works in a harmonious and cooperative fashion with other staff to provide efficient and effective customer service. Uses free time as available to assist other staff in the completion of work assignments. Contributes to a positive work environment through a positive, helpful, courteous demeanor towards staff, clients, and the general public. Adheres to appropriate standards of conduct regarding the use of leave and reports to work on time.
45%	Е	ASSESSMENT Receives assigned reports when vulnerable adults are suspected of being abuse, neglected, and or exploited as defined in K.S.A. 39-1430 and establishes contact with the involved adult within the assigned timeframe. Makes timely collaborative contacts with law enforcement, medical staff, mental health, and other service providers to assess adult safety per PPS regulation/policy.
		Conducts assessments of alleged abuse, neglect, and/or exploitation, completes and prepares a written assessment within the established time lines. Makes referrals to law enforcement and the court as appropriated, Office of the Attorney General, Kansas Guardianship Program, Area Agencies on Aging, and other community providers. Provides needed protective services to prevent maltreatment of a vulnerable adult.
30%	Е	CASE MANAGEMENT/PRIVATE AGENCIES  Prepares accurate and timely documentation into the Kansas Intake/Investigation Protection System (KIPS). This would include documentation of case activities, consumer based assessments, abuse/neglect/exploitation investigations, findings and required notices, adult service plan, and information gathered during the investigation. Prepares appeal summaries, testifies before appeals hearing officer in reference to agency decisions.
		Actively participates in supervisor conferences and case consultation informing supervisor of significant case development, problems and investigation findings. Attends and participates in regularly scheduled unit/team meetings.
25%	Е	AGENCY/PUBLIC RESPOSIVENESS Responds in a positive, professional manner to clients, community and other professionals. Seeks to resolve differences in a positive manner and within DCF rules, policies, and regulations. Utilizes formal information training opportunities and professional readings to enhance knowledge and skills in assessment, intervention, leadership and teamwork. Completes all other duties as assigned.

<ul><li>( ) Plans, staffs, evaluates, and directs work o</li><li>( ) Delegates authority to carry out work of a</li></ul>		nanagers.
b. List the names, class titles, and position number Name	ers of all persons who are supervised <b>Title</b>	d directly by employee on this position. <b>Position Number</b>
23. Which statement best describes the results of error	or in action or decision of this emplo	oyee?
<ul> <li>( ) Minimal property damage, minor injury, min</li> <li>( ) Moderate loss of time, injury, damage or adv</li> <li>( ) Major program failure, major property loss, or</li> </ul>	erse impact on healthy and welfare	of others.
(X) Loss of life, disruption of operations of a maj Please give examples.		
Failure to provide services in an adequate and timely permanent injury or death of an adult.	manner could result in emotional tr	rauma, or could result in serious harm,
24. For what purpose, with whom and how frequently	y are contacts made with the public,	other employees or officials?
Daily contact with vulnerable adults who are refe employees, including administrative and supervisor general public. Contacts are in person, by teleph procedures and to obtain input for evaluation, change	ry staff, community agencies, governone, or email to provide informat	rnment officials, community leaders, and the tion regarding agency programs, policy, and
25. What hazards, risks or discomforts exist on the jo	b or in the work environment?	
Discomforts and hazard exist due to exposure to wear and safety. Entering homes and other environments rodents and/or offensive odors. There are also hazard normal travel hazards associated with automobile tra	that may be dirty, cluttered, contain is associated with having to ascend a	animals, possibly infested with bugs and
26. List machines or equipment used regularly in the	work of this position. Indicate the f	requency with which they are used:
Daily use of computer system, spreadsheet and Smartphone/cell phone all general office equipment,		
PART III - To be completed by the department ho	ead or personnel office	
27. List the <u>minimum</u> amounts of education and experimental in this position.	erience which you believe to be nece	essary for an employee to begin employment
Education - General		
Four-year degree in a Human Services or Behavioral	Science field of study, or education	determined relevant by the agency.
Education or Training - special or professional	_	
<b>Preferred</b> - One or more of the following:		

Bachelor's in Social Work (Licensed Social Worker) Master's in Professional Counseling (Licensed Professional Coun Master's in Marriage and Family Therapy (Licensed Marriage and Licensed Behavioral Sciences Regulatory Board (BSRB) profession A minimum of 2 years of work experience in children and family	Family Therapist) onal as determined relevant by the agency.				
Licenses, certificates and registrations					
Licenses, certificates and registrations					
Valid Driver's License (must maintain valid driver's license throughout employr Licensed Professional (must maintain license throughout employr					
Special knowledge, skills and abilities					
Experience - length in years and kind					
28. <b>SPECIAL QUALIFICATIONS</b> State any additional qualifications for this position that are necessary either as a physical requirement of an incumbent on the job, a necessary special requirement, a bona fide occupational qualification (BFOQ) or other requirement that does not contradict the education and experience statement on the class specification. A special requirement must be listed here in order to obtain selective certification.					
Must maintain security clearance throughout employment.					
Signature of Employee Date	Signature of Personnel Official Date				
Approved:					
Signature of Supervisor Date	Signature of Agency Head or Date				
Date	Appointing Authority				