Pittsford Volunteer Ambulance  
Director of Operations  

Job Posting

Director of Operations position available (attached Job Description below).

To apply please submit the following:

- Letter of intent stating availability, salary requirements.
- Completed application: see attached or request one from Personnel@pittsfordambulance.org
- A current resume, including all first responder history and management experience.

All applications due by November 28, 2014 to Personnel@pittsfordambulance.org OR

c/o D.O. Search Committee,  
Pittsford Volunteer Ambulance  
40 Tobey Road  
Pittsford, NY 14534
Position Overview

The Director of Operations (D.O.) is accountable for managing the day-to-day operations of Pittsford Volunteer Ambulance. The D.O. is a full time leadership position, accountable to the Board of Directors and reporting to the President of the Board of Directors.

Essential Job Functions

1. Responsible for day-to-day operations of Pittsford Volunteer Ambulance (PVA)
   a. Direction of daily operations including implementation of all agency specific policies and procedures, documentation, and record keeping.
   b. Manage or delegate management of all major incidents or major events in district, utilizing the Incident Command System.
   c. Manages incident report investigation and disciplinary functions as specified in the PVA By-Laws and Rules and Regulations for all members/staff.

2. Appoint and supervise the activities of the Operations Officers including:
   a. Deputy Director of Operations
   b. Medic Supervisor
   c. Training Supervisor
   d. Driver Supervisor
   e. Dispatch Supervisor
   f. Operations staff including: Communications, HIPAA Officer, Health and Safety Officer, QA Coordinator(indirect), IT Coordinator

3. Manage the staff of Volunteers and Contract EMTs
   a. Manage the scheduling and staffing levels to achieve maximum call coverage, utilizing volunteers and contract staff, and deployment of EMS resources.
   b. Promotes unity of volunteer and contract staff to accomplish PVA Mission.
   c. Conduct and document any disciplinary proceedings and development of corrective action plans in accordance with PVA policies.

4. Monitor and maintain compliance with DOH, MLREMS policies, regulations and other governing documents pertinent to emergency ambulance services.
   a. Reviews and updates all documentation and policies to include, but not limited to Rules and Regulations, Department manuals, Mutual Aid Plan, Job Descriptions, and MCI/Rehabilitation Plan on an annual basis.
b. Develops implementation plans, including all regulatory procedures as necessary for emergency ambulance services.
c. Represents PVA in a variety of local, county, state and other meetings.

5. Works with the Treasurer and staff to develop and implement Board approved Capital and Annual Operating Budgets.
   a. Monitors Operations-related expenses including the staffing costs.
   b. Monitors billing information for accuracy.

6. Prepare and presents to the Board, a monthly written Operations report including statistics, progress towards goals, and operating topics under development.
   a. Keep Board President apprised of significant operational issues.
   b. Maintain records of emergency services activities, for coordination with cooperating agencies, to provide data for evaluation of the EMS program and personnel.
   c. Present annual report including progress on Operations goals at the Annual Membership meeting.
   d. Provides input regarding PVA’s IT needs to support maximum operational effectiveness.

7. Participate in agency and community strategic planning efforts.
   a. Works with the Board and appropriate committees to implement the strategic plan tasks.
   b. Develops appropriate tactics to achieve goals and objectives of the PVA Strategic Plan in conjunction with Operations Officers.
   c. Maintain positive relationships with elected or appointed officials, other EMS/Fire officials, community and business representatives, and the public on all aspects of PVA.

Non-essential Job Functions

8. Administrative duties are the prime responsibility; road duties are limited and not considered part of the duty crews for scheduling purposes.

Requirements

9. Education and Experience
   a. Associates Degree or equivalent experience.
   b. Minimum of NYS Department of Health EMT-B EMS certification
   c. Minimum of eight (8) years in EMS service with minimum of five (5) years in EMS Operational and administrative management. Experience in combination, volunteer and career staff, EMS agency preferred.
      i. Experience in managing budgets in excess of one million dollars.
      ii. Experience with an EMS agency with call volumes >2,500 calls/year providing BLS and ALS level service.
      iii. Experience in direct personnel management

   d. Comprehensive knowledge of practices, regulations, methods, and equipment used in EMS Operations according to regional, state and federal standards.

10. Knowledge, Skills and Abilities
a. Comprehensive knowledge of NYS Article 30, DOH Part 800 and DOH Policy statements
b. Must be able to achieve a minimum of Driver and Medic (EMT-B) clearance based on certification within three months of appointment.
c. Must have appropriate Incident Command/Management Training: NIMS 100, 200, 700, 800 within six months and NIMS 300 within 12 months of appointment.
d. Must possess strong communication skills and outstanding interpersonal skills.
e. Must possess, or be able to obtain by time of appointment, a valid NYS driver's license. Must meet insurability requirement of agency insurance carrier.

11. Other Skills/Abilities
   a. Must be able to read, write, and speak the English language.
   b. Computer skills: knowledge of Word, Excel, PowerPoint software.

NOTE: This job description is not intended to be all-inclusive. Employee may perform other related duties as negotiated to meet the ongoing needs of the organization.

The PVA Board of Directors reserves the right to waive any of the minimum qualifications set forth above and to consider any other qualifications or combinations that, in the PVA Board of Directors opinion, will serve as an adequate substitute for those minimum qualifications.
Pittsford Volunteer Ambulance
Application for Director of Operations

PLEASE FILL OUT COMPLETELY AND LEGIBLY, ATTACH A CURRENT RESUME

PERSONAL INFORMATION

Date: ___/___/____

Full Name: ________________________________

Street Address: ____________________________ Apt: __________

City/Town: ________________________________ State: ___ Zip: ________

Home #: (___)___________________________ Work #: ________________

Cellular #: (___)___________________________

How long have you lived at the above address? ______ months

E-Mail Address: _______________________________

Date of Birth: ___/___/____

Drivers License # and Expiration: ________________ Exp: ___/___/____

Emergency Contact: ___________________________ Phone #: ____________

Have You Previously Applied to Pittsford Volunteer Ambulance?

☐ No  ☐ Yes     Date: ____________

Which Emergency Service Agencies do you work with? How Long? What position(s)?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Please list any past or present Emergency Service certifications held: ________________________

________________________________________________________________________
Do you have any physical, mental, or psychological impairment or disability that would interfere with the performance of your duties as Director of Operations? ☐ Yes* ☐ No

*If you answered ‘Yes’ to the above question, you must have a physical examination and a statement from your physician stating any restrictions or limitations in performing the duties of Director of Operations.

Have you ever been convicted or plead guilty to a felony, a misdemeanor, or a reduction of one of these offenses? ☐ Yes* ☐ No *If ‘Yes’ give details below:

REFERENCES

Please list three personal (non-relative) or business references that have known you for at least three years.

Name: ___________________________ Phone #:(____) ____________
Relationship: ___________________________ Best time to call: ____________

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Relationship: ___________________________ Best time to call: ____________

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Relationship: ___________________________ Best time to call: ____________

DISCLAIMER

All information contained and/or obtained herein will remain confidential and will be used only for internal processing. By signing this application I hereby state that all questions have been answered truthfully and without omission, and I further authorize the D.O. Search Committee to verify all of the above statements by any means including a criminal background check. I also understand that willful falsification or omission from this application will subject it to immediate rejection. Acceptance or rejection of an applicant is solely at the discretion of the Membership Committee or officers of Pittsford Volunteer Ambulance. The decision is final with no explanation provided. It is further understood that Pittsford Volunteer Ambulance does not discriminate due to age, sex, race, religion, creed, national origin or sexual orientation. If selected as Director of Operations for Pittsford Volunteer Ambulance, I understand that I must abide by the rules and regulations of the Corporation or relationship may be terminated.

Applicant Signature: ___________________________

Printed Name: ___________________________ Date: ____________

40 Tobey Road * Pittsford, NY 14534-1893 * Phone: (585) 385.2401 * Fax: (585) 385.5894