

MARKETING AND PLANNING COORDINATOR COMPETENCY PROFILE

Name:	Date of hire:
Title:	Employee number:
Other:	Evaluation date:

Key for met/not met categories and self-needs assessment:

1. Able to perform independently
2. Able to perform after review of information
3. Able to perform with assistance only
4. Unable to perform

Time frame:

3 months = 3m
6 months = 6m
1 year = 1 yr

* = Annual evaluation required

Task/Behavior	References: A. Review policy/procedure B. Manufacturer's manual C. Video review D. Skills lab E. Written test F. Self-study packet G. Direct observation	A	B	C	D	E	F	G	Date	Instructor Initials	Time Frame	Met	Not met	Self-needs Assessment
A. DEPARTMENT OVERVIEW														
Tour of (<i>PACE program</i>)	Guided tour										3m			
"PACE" training	PACE manual, P&P manual, Preceptor orientation										3m			
Dress code	Policy #										3m			
Sign in/out	Policy #										3m			
Beeper paging	Preceptor orientation										3m			
Telephone & intercom system	Tour, policy #										3m			
Location of manuals	Guided tour										3m			
Location of complaint/concern log	Guided tour										3m			
Department & in-service meetings	Direct observation										3m			
Review of participants' rights*	P&P manual, mandatory in- service training										3m			
B. DEPARTMENT SAFETY PROCEDURES														
Annual mandatory safety training (includes corporate compliance)*	Safety training manual and video										3m			
Review of emergency procedures and equipment, both medical and non-medical*														
♦ Fire safety procedure*	Disaster manual, P&P										3m			
♦ Disaster plan, evacuation plan*	Disaster manual, P&P										3m			
♦ Location of safety manuals*	Guided tour										3m			
♦ Emergency procedures-"911" system	P&P manual, preceptor ori- entation										3m			
C. INFECTION CONTROL														
Handwashing	Policy #										3m			
Standard precautions*	Policy #										3m			
Disposal of infectious waste	Policy #										3m			
Immunizations ♦ PPD yearly* ♦ Flu vaccination counseling	Policy #										3m			
D. USE OF EQUIPMENT														
Facsimile operation	Policy #													
Digital camera	Policy #													

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Publishing software	Policy #										3m			
Knowledge of graphics, zip drive, camcorder, scanner	Policy #										3m			
Computer and printer (color and laser)	Policy #										3m			
E. PARTICIPANT SPECIFIC COMPETENCIES														
Age specific*	Self-study module										3m			
Cultural sensitivity/diversity*	Self-study module										3m			
F. MANAGEMENT OF INFORMATION														
Participant confidentiality*	Policy #, P&P manual										3m			
Knowledge of prohibited PACE marketing guidelines including:*														
♦ Discrimination of any kind, except that marketing may be directed to individuals eligible for (<i>PACE program</i>) by reason of their age*	PACE protocol, P&P manual, section #										3m			
♦ Activities that could mislead or confuse potential participant or misrepresent (<i>PACE program</i>) or the (<i>State</i>) Medicaid agency *	PACE protocol, P&P manual, section #										3m			
♦ Gifts or payments to induce enrollment	PACE protocol, P&P manual, section #										3m			
♦ Contracting outreach efforts to individuals or organizations whose sole responsibility involves direct contact with the elderly to solicit enrollment*	PACE protocol, P&P manual, section #										3m			
♦ Unsolicited door-to-door marketing*	PACE protocol, P&P manual, section #										3m			
Knowledge of (<i>PACE program</i>) marketing guidelines	P&P manual										3m			
Knowledge of Medicare + Choice guidelines	Preceptor										3m			
Knowledge of legislative issues effecting (<i>PACE program</i>)	Preceptor										6m			
Preparation of marketing strategy for programs	P&P manual, preceptor										6m			

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Preparation of a strategic marketing/advertising plan	Job description										6m			
Knowledge of PACE coverage including:														
♦ Lock-in	Participants' handbook										6m			
♦ Access to emergency care	Participants' handbook										6m			
♦ Urgently needed out-of-area care	Participants' handbook										6m			
♦ Written, understandable description of benefits, rules, procedures, services provided	Participants' handbook										6m			
♦ How and where to obtain services	Participants' handbook										6m			
♦ Restrictions on coverage	Participants' handbook										6m			
♦ Normal and expedited appeal procedures	Participants' handbook										6m			
♦ Moves and extended absences for participants who leave the coverage area	Participants' handbook										6m			
♦ Any other information necessary to enable potential participants to make informed decisions about enrollment	Participants' handbook										6m			
Submission of all marketing materials for approval before distribution	Preceptor										6m			
Coordinates media events	Job description										6m			
Develops internal and external communications (newsletter, brochures, presentation, etc.)	Job description										6m			
Coordination of participant satisfaction survey	Job description, preceptor										6m			
Facilitates consumer advisory council meetings and activities	Preceptor										6m			
Facilitates fund-raising activities per PACE protocol	PACE regulations, preceptor										6m			

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Builds and maintains collaborative relationships with area agencies which provide senior care services and serves as a public relations representative for (PACE program)	Job description										6m			
Acts as liaison between (PACE program) and general public through exhibits and speakers' bureau	Preceptor										6m			
G. QUALITY IMPROVEMENT														
Participation in program QI projects	Management team and/or QI meeting minutes										3m			
Concern/complaint logs	Site supervisor/designee, preceptor										3m			

Date competency profile completed: _____

Action plan initiated: Yes No
(If yes, please add action plan to competency profile.)

I understand that it is my responsibility to notify my immediate supervisor if at any time I am unable to perform the basic competencies required to practice in my assigned clinical area.

Employee signature: _____

Preceptor signature: _____

(Attach the competency profile action plan here.)