

# TRI-COUNTY HEALTH NETWORK

The logo graphic consists of several overlapping, curved lines in shades of orange, red, and teal, forming a stylized, upward-pointing shape that resembles a mountain range or a network of paths.

**Position:** Social Services Manager  
**Direct Supervision:** Director of Care Coordination  
**Status:** Exempt, Full-Time

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## **JOB SUMMARY:**

The Social Services Manager is responsible for developing and leading the outreach and enrollment team in improving client services in accessing healthy equity programs and defining client growth. The manager will support the outreach and enrollment team and assist clients with completion of applications for benefit programs and financial assistance. The manager will oversee day-to-day operations; train the field team of outreach coordinators and navigators; establish relationships and communicate regularly with stakeholders and funders; promote programs; improve team productivity; increase client participation and improve outcomes.

## **DUTIES AND RESPONSIBILITIES:**

1. Develop and maintain operations processes, manuals for each program, and training curricula to ensure program efficiency, establish best practices, and quality client care is provided.
2. Create a culture and atmosphere that will lead to a high level of employee engagement and satisfaction.
3. Oversee day-to day program operations and supervision of direct team working throughout the region.
4. Develop clear goals, objectives, and metrics for each team member and effectively communicate accountability. Coach, train, and mentor direct team to help them meet goals, objectives, and metrics.
5. Serve as a knowledge source for benefit programs including Supplemental Nutrition Assistance Program (SNAP), Medicaid, Child Health Plan Plus (CHP+), the state insurance marketplace, Colorado Low-income Energy Assistance Program (LEAP) and Energy Outreach Colorado (EOC). Assist outreach team when troubleshooting complicated applications.
6. Assist with outreach and ancillary program support that address health equity including Skippy, New Eyes, and Behavioral Health programming,
7. Act as a working supervisor and remain available to provide coverage for team members that includes maintaining certification as a Health Coverage Guide
8. Oversee the administration of crisis management funds that includes troubleshooting issues, engaging with funders, and generating invoices.
9. Maintain and oversee data collection and prepare reports on outcomes and performance of each program. Develop and submit required program deliverables within prescribed deadlines.
10. Monitor and evaluate performance through data analysis and reports. Adapt programmatic operations to improve efficiencies, satisfaction, and outcomes.
11. Regularly review client satisfaction. Improve client services and adopt best practices. Conduct fact-finding investigation of client grievances, as applicable.

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12. Routinely conduct quality assurance activities through reviews, meetings, reports, and field observation.
13. Ensure confidentiality of all client information and team performance/compliance.
14. Hold individual meetings with direct reports on an at least bi-weekly basis and at least a monthly team meeting to foster communication, collaboration, and belonging.
15. Establish and maintain referral partnerships across the region including with government agencies, school districts, clinics, workforce development centers, chambers of commerce, local small businesses, and other direct service providers.
16. Build referral and workflow processes with external partners to facilitate efficient processes that can quickly meet the needs of clients.
17. Organize and coordinate new initiatives and projects in coordination with external stakeholders, the TCHNetwork team and peers. Develop policies and procedures, as applicable.
18. Any other duties as required to ensure TCHNetwork is successful.

## **REQUIRED EDUCATIONAL AND EXPERIENCE:**

- A relevant four-year degree in relevant field, OR 5 years of an equivalent combination of education and relevant professional experience
- 3 years minimum of experience managing a team of 3+ entry level positions, including staffing and promotion.
- 2 years minimum of successful program management experience.
- Demonstrated ability to prioritize, lead and manage multiple projects simultaneously with minimal supervision, a high degree of self-accountability, and maintain professionalism.
- Experience in a collaborative team environment, delegating workload and responsibilities.
- Excellent verbal and written communication skills.
- Must be proficient in MS Office, including Microsoft Excel, and have aptitude for computers and working with various software platforms.

## **PREFERRED QUALIFICATIONS:**

- Substantial knowledge of one or more of the following: health insurance, economic security programs (e.g., Medicaid, CHP+, SNAP, LEAP), addressing social determinates of health.
- 2 years working in a professional capacity in a rural community or with a non-profit.
- 2 years of outreach strategy or execution experience.
- Knowledge and experience working in/with clinical, social service agencies, public health, schools, and/or parents in rural communities.
- Experience working with disadvantaged/underserved populations and cultural diversity.
- Must demonstrate a good understanding of the Federal, State, and local laws and regulatory guidelines governing Medicaid Programs.
- Bilingual in Spanish and English

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## **PERSONAL ATTRIBUTES:**

- Ability to quickly establish trust, gain rapport, and work effectively.
- Advanced time and/or project management abilities.
- Strong work ethic and collaborative style with internal team members and external partners.
- Internally motivated with an initiative to improve processes.
- Change agent demeanor; must be a flexible thinker, with an ability to adapt to a changing environment.
- Ability to exercise forethought, to look ahead and anticipate needs.
- Excellent critical thinking and consultative problem-solving skills.
- Ability to multi-task and handle stressful situations.
- Ability to meld the deliverable metrics of the programs and meeting the emotional needs of staff, clients, and partners.
- Strong communication and diplomacy skills, including written, oral, and presentation skills.

## **OTHER:**

Requires regular local and regional travel. May require occasional state or national travel. Must have reliable transportation to travel as needed and comfortable traveling in inclement weather. Valid driver's license and car insurance required. Ability to work a flexible schedule including evenings and weekends, as applicable.

## **POSITION LOCATION:**

Field position that requires travel throughout San Miguel, Ouray, Montrose & Delta counties. First 60 days onsite, then 3 days a week, in Telluride or Delta office. No relocation assistance available.

## **COMPENSATION:**

Starting salary is \$50,000 – \$60,000 based on experience

## **DIVERSITY, EQUITY, AND INCLUSION:**

Tri-County Health Network is a nonprofit organization committed to collaborating with our communities to improve healthcare for everyone. Diversity, Equity, and Inclusion is at the core of our mission and work in the region.