

# Alston Wilkes Society

## Job Description

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**Position Title:** Facility Director

**Program:** Residential Reentry Centers

**Reports to (Position):** Director of Adult and  
Youth Residential Programs

**Location:** Florence RRC

**Date Written/Revised:** 6/1/2011

**Job Status:**  Exempt or  Non-exempt  
 Part time or  Full time

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**Job Summary:** The Facility Director, under the direction and supervision of the Director of Adult and Youth Residential Programs, is responsible for all functions related to managing, supporting, and facilitating appropriate services to meet the needs, safety and welfare of the clients. The Facility Director must ensure accountability of clients and overall responsibility of facility operations. The Facility Director must keep the supervisor informed of all aspects of the program/facility. The Facility Director must be available on-site approximately 40 hours per week and perform 24 hour on call crisis services as Staff Duty Officer (SDO) as required.

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### **Primary Duties and Responsibilities:**

1. Be knowledgeable and maintain strict adherence to agency policy and procedures, Statement of Work, and ACA Standards and strive to receive zero deficiencies on internal and FBOP Inspections.
2. Ensure that all additional duties have been properly delegated and that staff have been trained accordingly.
3. Directors will not discipline, counsel in writing or terminate employees without prior approval from the Director of Adult and Youth Residential Programs.
4. Maintain strict accountability of the attendance policy and the dress code.
5. Hold meetings at least monthly with facility staff to foster communication, establish policy, discuss problems, ensure compliance with requirements, and implement programs. Written documentation of all staff meetings shall be maintained.
6. Supervise, evaluate, train, and discipline all employees. Employees must receive initial training upon hire and receive ongoing monthly and annual training.
7. Ensure searches of the facility, vehicles and personal belongings of clients are conducted as needed, but at a minimum of once per month.
8. Ensure the facility is inspected in accordance with local and state fire-building codes as required.
9. Written emergency procedures will be approved and posted annually.
10. Conduct and document evacuation drills monthly leaving no spaces blank on the form.
11. Perform Annual Inspection Certification Test on smoke/fire alarm system
12. Fire extinguishers will be inspected monthly by assigned staff and quarterly by a licensed professional.
13. Ensure that sanitation and safety inspections are being conducted according to the SOW. Ensure that documentation of such remains on file.
14. Comply with all Electrical Safety guidelines.
15. Comply with all guidelines concerning storage, issuance, handling, and accountability of flammable liquids, hazardous chemicals, toxic, and caustic materials used within the facility.
16. Follow proper procedures to practice pest control.

17. Process prompt responses for client referrals.
18. Insure quality and uniform intake procedures are conducted for each client upon arrival.
19. Photograph each client.
20. Take fingerprints of each client.
21. Complete Initial Intake Form.
22. Brief the following: urine surveillance, subsistence collection, medical treatment/screen agreement to abide by posted regulations, consent to release information, emergency/inclement weather procedures, property inventory, disclosure statement, and physical examination (as required).
23. Issue linens/towels and combination locks on hand receipt and ensure that property is returned upon client discharge.
24. Understand client components and the level system.
25. Develop community resources to assist clients.
26. Ensure all Individual Treatment/Program Plans are completed within initial two-weeks and reviewed every 14 days.
27. Accurately collect weekly subsistence.
28. Assist clients in securing full-time employment within two weeks.
29. Provide assistance in locating housing.
30. Provide a Substance Abuse Education course.
31. Provide drug aftercare as required.
32. Conduct urine surveillance; report all unauthorized positive test results to the CCM and the Program Director the day received.
33. Maintain alcohol surveillance each time a client enters the facility and as required.
34. Ensure and maintain a proactive alcohol and drug counseling program.
35. Provide mental health resources.
36. Ensure and monitor journaling program and assessment tools for each client is provided.
37. Provide life/family skills training and group counseling.
38. Involve community in the program
39. Comply with authorized absences by sign-out, pass, furlough, or home confinement procedures.
40. Comply with SOW procedures concerning driving and marriage requests.
41. Provide visiting hours, recreation activities, and access to religious activities.
42. Comply, without any deviation, to the BOP prescribed policy and procedure for inmate discipline; proper documentation will be done in a timely manner and filed appropriately. Expunged cases will be secured in a Master file for one year.
43. Comply with administrative remedy procedures.
44. Comply with food service and medical service requirements.
45. Operate a system of records in accordance with the SOW and the Privacy Act. Security of files/documents is vital.
46. Audit case files at least quarterly to ensure accuracy and completeness of records.
47. Identify in writing, staff that have authorized access to client records.
48. Complete Urine Sampling Program Report.
49. Provide with monthly billing a record of client finances, wages and salaries, number of hours worked, amount and type of deductions, savings, amount of subsistence collected and any financial obligations paid by resident.
50. Establish a formal release plan for sentenced clients and execute appropriate release certificates; no deviation from SOW is permitted.

51. Escape procedures will be strictly followed. The CCM will determine if a client should be identified as an escapee. The CCM, USPO, USM and the Director of Residential and Youth Programs must then be notified immediately.
52. Notify the CCM/USPO immediately when a client becomes seriously ill or requires emergency medical treatment.
53. Seek approval from the CCM before accepting supervision cases. Follow all requirements and keep USPO/CCM notified as required.
54. Respond to all BOP surveys or questionnaires. Organize system of information concerning residents to provide to the BOP if requested.
55. Follow Sexual Abuse/Assault Prevention and Intervention Programs.
56. Safety of clients and staff shall be given highest priority. The use of physical force shall be resorted to only in instances of justifiable self-defense for the prevention of loss or damage to property, and to prevent a resident from self-inflicted harm. Only the degree of force necessary to control the situation is allowed; excessive force is prohibited. Any instances where use of force is required shall be telephonically reported immediately to the CCM and to the AWS Director of Adult and Youth Residential Programs; a written report will follow within 24 hours.
57. Immediately report any property damage, maintenance problems, health and welfare issues or allegations to the Director of Adult and Youth Residential Programs..
58. Control expenses to stay within allocated budget. Any overtime must be approved in advance by the Director of Adult and Youth Residential Programs.
59. Support agency activities.

**Minimum Qualifications:**

Knowledge Of:

- Criminal Justice System

Education and Experience:

- Baccalaureate Degree in a Social or Behavioral Science
- Five years of related administrative experience, with at least one of the years in a supervisory position, and demonstrated administrative ability and leadership.
- An approved writing sample exemplifying clinical documentation will be required for employment

**Licenses, Training and Certification:**

- Valid Class 2 SC Driver’s License
- Proof of Auto Liability Insurance if required
- Proof of education and credentials will be required for employment

**Employee Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Supervisor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_