

Position Description : Community Services Manager.

Qualifications and Requirements	• Relevant tertiary qualification with current AHPRA registration in nursing or allied health field, community services, health/service management, business or a related discipline. • Demonstrated senior leadership experience in community aged care, home care, health, disability or a closely related service environment. • Strong contemporary knowledge of Support at Home and CHSP; knowledge of DVA/Veterans' Home Care is highly desirable. • Demonstrated ability to lead multidisciplinary teams, build accountability, manage performance and develop capability. • Strong operational, financial and commercial acumen, including budgeting, workforce utilisation and service-performance management. • Strong knowledge of aged-care quality, safeguarding, complaints, incidents, risk and continuous-improvement systems. • Ability to interpret legislation, program rules, contracts, funding requirements and performance data and translate them into practical operating systems. • High-level communication and stakeholder-management skills with sound judgement, professional boundaries and the ability to remain constructive under pressure. • Current driver's license and all required aged-care employment screening/checks.
Salary and Conditions	Salary with terms and conditions in accordance with the Village Baxter ANF & HSU Enterprise Agreement and the letter of employment.
Key Responsibilities	Key accountabilities • Lead the end-to-end operational delivery of Support at Home, CHSP, Veterans' Home Care and related community-care services within approved scope and funding arrangements. • Ensure services are safe, person-centred, responsive, culturally appropriate, trauma informed and aligned with client goals, choice, independence and dignity. • Lead, coach and hold accountable managers, care partners, nurses, coordinators and support teams; establish clear expectations, effective supervision and timely performance management. • Maintain strong operational governance across intake, assessment, care planning, service commencement, reviews, clinical escalation, scheduling, funding and billing, and discharge/transition processes.

- Own program performance against budget, service targets, utilisation, labour efficiency, funding requirements and agreed growth objectives.
- Ensure compliance with the Aged Care Act, strengthened Aged Care Quality Standards, Support at Home rules, CHSP requirements, DVA/VHC requirements where applicable, privacy, safeguarding and relevant workplace obligations.
- Monitor incidents, complaints, feedback, risks, audit findings and quality indicators; ensure corrective actions and continuous-improvement initiatives are completed and sustained.
- Manage and support staff with any reportable incidents (SIRS) to the appropriate authorities in the appropriate timeframes.
- Ensure client records, care plans, assessments, progress notes, service agreements and program reporting are accurate, current and audit-ready.
- Develop constructive relationships with clients, families, My Aged Care, DVA, health professionals, referrers, community partners and internal stakeholders.
- Identify opportunities for responsible service growth, improved referral conversion, stronger community partnerships and more efficient service models.
- Provide concise, evidence-based monthly reporting to the Director of Clinical Services and executive, highlighting KPIs, KRIs, material risks, trends, decisions required and corrective actions.
- Contribute to whole-of-organisation leadership, culture and strategic priorities, modelling Village Baxter's CARE values: Connection, Accountability, Respect and Excellence
- Other Duties as directed

Decision-making expectations

- Operate confidently within delegated authority and resolve operational matters at the appropriate management level.
- Escalate matters to the Director of Clinical Services promptly where there is material risk to client safety, compliance, finance, workforce continuity or organisational reputation.
- Use evidence, trend data and professional judgement to identify emerging risks before they become significant failures.

Workplace Health & Safety

- Participates in the risk management program and contributes to a clean, safe work environment to ensure safety of residents/visitors, other staff and self.

	- Ensures staff are trained in the safe completion of tasks required of them. - Reports immediately, any equipment or situation, which is hazardous, or has the potential to be a safety issue. - Participates in problem solving processes to resolve OH&S issues. - Dresses in accordance with the Village Baxter Uniform policy.
Reporting Requirements	Reports directly to the Director of Clinical Services. Monthly reports, meeting attendance
Responsible For	The Community Services Manager is accountable for the overall performance of Village Baxter's community care services. The role translates organisational strategy, regulatory obligations and funding requirements into reliable day-to-day service delivery. It provides consistent leadership to the community care team, develops capability, manages resources and financial performance, maintains quality and compliance, and builds a service model that supports older people to remain safely and independently at home.
Education, training and registration	Personal Responsibility - Police check annually that provides satisfactory assessment of capacity to work in aged care - AHPA Registration - Maintaining vaccination records as required - Membership of professional bodies Mandatory training provided by the Village - Emergency Procedures - Manual Handling - Infection Control - Training as per Ideagen assigned modules Recommended - CPR and first aid - Attendance at training and education session to enable skills and knowledge to be developed.
Performance Appraisal	At 6 months, then annually by the Director of Clinical Services or delegate or as requested by the Village or staff member.

Performance Criteria

Measures of success in the first 12 months

- Stable, accountable community-care leadership structure with clear role ownership and reduced unnecessary escalation to the Director of Clinical Services and CEO.
- Consistent monthly KPI/KRI reporting with early identification of emerging risks.
- Support at Home, CHSP and VHC requirements embedded into operational workflows and audit-ready documentation.
- Improved workforce stability, supervision, and capability.

- Service volumes, utilisation and financial performance tracking to agreed budget and targets.
- Complaints, incidents and quality actions resolved within expected timeframes with demonstrable learning and improvement.
- Emergency Management plans, responses, education, training further developed in conjunction with Risk & Safety Manager
- Updated AEDT and CEDET Documents to reflect improvements
- A credible growth and service-development plan within our preferred catchment area that is supported by referral and community relationships.

KPI domain	Measures	Measurable outcome / target
Client growth & utilisation	Net positive client growth within Village Baxter, St Johns Village and Frankston South/Baxter; Support at Home classification increases/service utilisation; CHSP output against funding targets; VHC service volumes where applicable.	Net client growth: positive quarter on quarter client numbers annual growth target of 3% achieved. SAH: $\geq 85\%$ of available client funding appropriately utilised, subject to client choice and assessed need. CHSP: $\geq 95\%$ of funded service-output target. VHC: maintain or increase service volumes against agreed annual target. Local penetration: quarterly net increase in clients from Village Baxter/St Johns and target catchment.
Financial sustainability	Monthly revenue vs budget; direct labour and brokerage cost performance; contribution/margin; unspent/under-utilised service capacity; debtor performance; budget forecast accuracy.	Revenue and expenditure within $\pm 5\%$ of budget monthly/YTD. Labour and brokerage costs within budget. $\geq 95\%$ of undisputed debtors within agreed payment terms. Forecast variance $\leq 5\%$. Material adverse variances have documented corrective action.
Service delivery	Services delivered as scheduled; missed/late service rate; care-plan reviews completed on time; intake/onboarding cycle time; response time to changed needs.	$\geq 98\%$ of scheduled services delivered. $< 2\%$ missed services, with zero avoidable missed critical services. $\geq 95\%$ of required reviews completed by due date. New clients contacted within 2 business days of referral/acceptance and services commenced within agreed timeframe. Urgent changes in need triaged/escalated same day.
Quality & client experience	Complaints rate and closure time; compliments/client satisfaction; care-plan goal attainment; audit actions	$\geq 90\%$ of complaints acknowledged within required/internal timeframe and closed within 10 days, unless complexity is documented. Client satisfaction $\geq 85\%$.

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	closed on time; continuous-improvement actions completed.	≥95% of audit/quality actions closed by due date. ≥90% of CI actions completed by target date. No repeated significant finding without documented systemic corrective action.
Workforce	Vacancy rate; turnover; unplanned absence; mandatory training compliance; supervision/1:1 completion; performance reviews completed; agency/casual dependence.	Critical vacancies actively managed with agreed recruitment plan. Staff Turnover <15% ≥100% mandatory training compliance with no expired critical competencies. ≥95% scheduled 1:1s/supervision completed. 100% performance reviews completed by due date. Agency usage within approved budget/target.
Compliance & reporting	Statutory/funder reports submitted on time; documentation completeness; policy/audit compliance.	100% statutory and funder reports submitted by due date. ≥95% documentation compliance on internal audit. 100% high-risk audit/compliance findings have corrective actions assigned and monitored. ≥95% actions closed by due date. Zero knowingly unreported material compliance breaches.
Leadership	Manager actions closed by due date; quality of monthly reporting; issues escalated early rather than after failure; cross-functional collaboration; team capability building.	≥90% management actions completed by agreed due date. Monthly report submitted 100% on time, with accurate KPI/KRI analysis and corrective actions. 100% material risks escalated promptly in accordance with escalation framework. Evidence each quarter of cross-functional initiatives and capability development. Reduction over time in avoidable operational escalation to Director/CEO.

Physical and Mental Requirements include, but are not limited to:

Twisting of the back or neck	Lifting weights more than 5 kilos
Bending of the back / knees / neck	Reaching above shoulder height
Reaching over and around things	Pushing objects more than 5kg with wheels (eg Trolley)

Pushing objects more than 5kg without wheels (eg. Chair in)	Sitting for long periods
Standing for long periods	Typing for long periods
Dealing with unpredictable situations	Dealing with high pressure situations
Dealing with difficult and challenging behaviours	Dealing with aggressive clients
Working as part of a close team	Maintaining a calm demeanour when dealing with distressed/difficult people
Operating office machinery and equipment	Managing in emergency medical situations
Driving between Villages and Services	Time management skills
Managing conflict situations confidently	Clear thinking and decision making in high pressure situations
Prioritising skills	Watching computer screen for extended periods
Reading for extended periods	Working in air-conditioned room for extended periods