

Durri Aboriginal Corporation Medical Service

Servicing the Macleay and Nambucca Valleys
ABN 52 730 046 875 ICN 27

With Compliments

Position Application Package

Position Name: Practice Manager

Contact Name: Stuart Cohen

Telephone: 0428083107

General Conditions of Employment

Position: Practice Manager

Award: ATSIHWP + ACCHS Award 2020

Classification: Administration - Grade 8 - Level 4

Salary packaging: To calculate your potential benefit follow the link https://eziway.net.au

Application: Your application should consist of four parts:

1. Completed application form (page 4)

2. Selection Criteria - Your application must answer all of the Selection Criteria essential questions, for example the questions listed 1 to 13 below, or your application will be marked unsuccessful.

Selection Criteria:

Essential:

- 1. Demonstrated ability to lead and develop a high performing clinical team.
- 2. Degree in Health Management and/or Diploma in Practice Management and/or experience in Practice Management.
- 3. Demonstrated experience in managing medical practices, preferably in an ACCHOS within the last 3 years.
- 4. Demonstrated knowledge of RACGP and QIC accreditation.
- 5. Thorough knowledge of PIP, SIP and WIP funding streams claiming and processes.
- 6. Thorough knowledge of MBS items, claiming and processes.
- 7. Knowledge and use of medical software with a preference to Communicare.
- 8. Excellent communication skills, the ability to connect with people, to understand their issues and sensitively deal with difficult issues.
- Demonstrated ability to develop good working relationships with staff at all levels, act with discretion and always maintain confidentiality.
- 10. High level analysis and problems solving skills.
- 11. Demonstrated ability of high level of computer literacy; sound working knowledge of Microsoft Office software.
- 12. Ability to hold all relevant security clearances including the National Police Check and Working with Children clearance.
- 13. Current valid Driver's license, minimum of Class "C" or equivalent.

3. Resume

4. Supporting documents

- Working with children check, qualifications, registration, driver licence, national police check
- Vaccination Declaration Form, Appendix 6
 (Adopted and endorsed by Durri CEO Clinical Governance Committee 10 May 2023)

Click on the links below to Complete NSW Health Undertaking/Declaration Form & find Occupational Assessment, Screening and Vaccination against Infectious Diseases Policy.

This form must be completed by all new workers, students and existing staff applying for new positions or undergoing vaccination and screening requirements outlined in the NSW Health Occupational Assessment, Screening and Vaccination against Specified Infectious Diseases Policy Directive (the "policy directive"). This includes volunteers/facilitators/contractors (including visiting medical officers and agency staff) who provide services for or on behalf of Durri ACMS.

https://www.health.nsw.gov.au/immunisation/Documents/Occupational/appendix-6-declaration.pdf

https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2023 022.pdf

Email your completed application to: Recruitment@durri.org.au

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Post marked confidential to:

Application Human Resources Durri Aboriginal Corporation Medical Service PO Box 136 Kempsey NSW 2440

Closing Date: Tuesday 7 January 2025 - No late applications will be accepted.

Previous applicants are encouraged to apply,

Application Form

Full Name:			
Address:			
Email Address:			
Contact Number:			
Date of Birth:			
Drivers Licence: Yes	□ Class: Expiry date: . No		
Do you identify as Abo	riginal and or Torres Strait Islander?	□ Yes	□ No
Do you identify as having a disability?		□ Yes	□ No
Are you an Australian o	citizen or permanent resident?	□ Yes	□ No
Have you attached you	r Working with Children check?	□ Yes	□ No
WWCC No:			
Have you attached you	ır National Police Check?		
Date of issue:		Yes	No
Have you attached you	ır NSW Health Undertaking/Declaration Fo	orm? □ Yes	□ No
Have you attached your Qualifications?		□ Yes	□ No
Have you attached your registration if applicable?		□ Yes	□ No
Where did you see this	position advertised?		
List two referees (one being a current manager) Referees Referee 1 Refere		eferee 2	
Name:			
Title:			
Organisation:			
Contact Details:			
Email Address:			