A. MEMBER POSITION DESCRIPTION



AMBASSADOR PROGRAM DEVELOPER

Member Name: Start & End Dates:

Program Name: Iowa Community Corps

Member Term: Quarter Time

Service Location: Healthiest State Initiative Living Allowance:

Connection to Purpose and Goals of AmeriCorps Program: The lowa Community Corps AmeriCorps program helps build strong communities by responding to public health needs through food security and resource navigation efforts. Iowa Community Corps members support community-based organizations by improving the capacity, quality, and cultural competency of the services they provide. Iowa Community Corps members also build human infrastructure for organizations through volunteer and community engagement. Lastly, Iowa Community Corps members receive training and professional development to help build a strong workforce of Community Health Workers in Iowa.

To help address food insecurity and the growing rate of diet-related chronic conditions, the lowa Healthiest State Initiative launched the Double Up Food Bucks (DUFB) program. Double Up Food Bucks helps low-income lowans bring home more healthy food by matching SNAP dollars spent on fresh fruits and vegetables. The AmeriCorps position would support the development of an Ambassador program to increase the engagement of SNAP participants and DUFB participating locations.

Description of anticipated service schedule: Description of anticipated service schedule: Member will serve an anticipated 33 hours per week over 10 weeks. Member will serve between 9am to 5pm, Monday thru Friday. Member may serve other days and time as needed and agreed upon.

Member may <u>not</u> serve hours on New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day. This includes checking emails, self-directed training, or teleservice. Specific service may be allowed if the program or host site has a planned event and prior approval is received from Volunteer Iowa.

Sick or personal days are allowed, but member loses possible days to earn the required number of hours needed to successfully complete the term of service. There are additional benefits offered if the member has a compelling personal circumstance.

Iowa Community Corps - Related Service Activities:

- Attend program orientation and monthly training/check-ins with AmeriCorps Program Planner
- Complete the Community Health Worker Professional Training Program
- Submit monthly progress report to ensure Community Health Worker Professional Skills program completion
- Submit mid and final term evaluation reports
- Submit timesheets within three days of the end of the pay period
- By the end of your term, create a sustainability plan that summarizes your capacity building activities and lays out a plan to sustain them after your exit from the program.

Position/Site Specific Member Service Activities:

- Identify best practices for implementing an ambassador pilot program to support DUFB participants
 - Review policies, procedures, and practices of a minimum of 5 nutrition incentive program/food security related support programs
 - Connect with a minimum of 5 facilitators of nutrition incentive/food security related support programs to discuss program successes and challenges
 - Review a minimum of 5 existing promotional materials in support of nutrition incentive/food security related programs
 - Compile information into a document to identify best practices for a DUFB Ambassador Program

- Collaborate with DUFB partners and HSI to develop Ambassador Program
 - O Connect with a minimum of 3 partners who participate in the DUFB program to serve as ambassadors
 - Observe 2-3 DUFB sites and volunteers during the season
 - Identify a minimum of 5 innovative and engaging ways to promote DUFB and encourage sign-ups
 - O Develop an implementation plan for the DUFB Ambassador Program
- Develop a training program for DUFB Ambassador Program
 - Collaborate with Director of Healthy Incentives to design a minimum of 1 set of training materials for Ambassador Program. Materials can include training sessions, info sheets, fliers, and more.
 - o Design a minimum of 3 participant recruitment materials for health care clinics and social service providers
 - O Distribute and review recruitment materials with a minimum of 3 health care clinics and social service providers. Educate staff at each organization on necessary information to communicate to new
 - Facilitate a minimum of 2 training sessions with HSI Team and partners.
- Volunteers recruited and/or managed by AmeriCorps members will not participate in prohibited activities as outlined in the approved grant.
- Members may engage in other allowable activities that are not specifically outlined in the position description, but that support the AmeriCorps program design, and which will help the Program meet its goals. Under no circumstances will members be asked to perform prohibited activities.

Desired Skills/Qualifications:

- Ability to travel to different sites within the state of lowa
- Proficient knowledge of Microsoft Word, Excel, and Powerpoint
- Ability to read and interpret documents and analyze for professional reports
- Ability to life 25lbs
- Occasional sitting, standing, and walking may be required to perform duties

Eligibility	Criteria:
_ _ _	Be 18 years or older at the start of service (no upper age limit) Pass a national service criminal history check prior to first day of service Hold one of the following citizenship statuses: US citizen, US national, or Lawful Permanent Resident Certify that they have or will obtain the diploma/GED
Benefits:	
	Education Award received upon successful completion of their term of service.
	Living Allowance
	Community Health Worker Certification upon successful completion of Community Health Worker Professional Skills Training Program
	Student loan forbearance and interest payments for eligible loans
Performa	ance Evaluation & Reporting Requirements:
	Two Member Performance Evaluation requirements during the term
	Regular submission of member timesheets
	Submission of Sustainability Plan
	Submission of Community Health Worker Training Progress Reports

Program Contact Name:		
Member Initials:	Date:	Page 2 of 3

AMERICORPS PROGRAM CONTACT INFORMATION & SIGNATURES

Mailing Address: Email & Phone Number:					
Tember Signature		Program Representative Signature			
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Member Initials: _____ Date: ____