

RAVENSWOOD FAMILY HEALTH CENTER

JOB TITLE: Quality and Compliance Officer
REPORTS TO: Chief Executive Officer

JOB SUMMARY:

Under the administrative direction of the Chief Executive Officer (CEO), and in collaboration with the Executive Team, the **Quality and Compliance Officer** is responsible for overseeing and monitoring the compliance, quality and risk management activities and programs for RFHC.

The position ensures that the Board of Directors, management and employees are in compliance with the rules and regulations of regulatory agencies, that company policies and procedures are being followed, and that behavior in the organization meets the company's Standards of Conduct. Compliance monitoring responsibilities of federal, state, county and other regulatory expectations include, but are not limited to: clinic licensing and certification, HIPAA, CMS, OSHPD, Health Resources Service Administration (HRSA) and the Bureau of Primary Health Care (BPHC), Health Plan of San Mateo (HPSM) and other health plans, CDC, Vaccines for Children (VFC), and the San Mateo County Health Department.

The Quality and Compliance Officer is the leader of the Total Quality Management process and steering committee and is responsible for overseeing all performance monitoring activities that are of a clinical, safety and quality nature at all sites for the organization. The Quality and Compliance Officer is a member of the Executive Management Team and in his /her compliance role directly reports to the Board of Directors Quality Assurance Committee.

As part of his/her compliance and risk management functions, he/she will perform patient chart audits together with RFHC staff and/or consultants to assess individual and organizational compliance with RFHC policies and procedures, TQM indicators, documentation standards as well as compliance with approved and accepted standards of care. Functions as the designated Safety Officer, he/she will be responsible for RFHC facilities compliance with OSHA, Infection Control, CLIA and MSDS (Material Safety Data Sheets).

Quality Management Duties and Responsibilities (45%)

- Function as the leader of the Total Quality Management (TQM) Steering committee. Responsible for overseeing performance monitoring activities that are of a clinical, safety and quality nature at all sites for the organization.
- Assist in the development and revision of TQM policies and procedures.
- Coordinate monthly TQM dashboard reports on key TQM indicators, and present quarterly to the Board QA committee and Board of Directors.
- Integrate chronic disease and redesign initiatives into overall TQM process. Serve as organizational liaison for external non-clinical quality improvement initiatives (eg. Optimizing Primary Care (OPC),)
- Identify quality improvement training needs for TQM Steering Committee, Executive Team and Management Team. Coordinate and/or provide technical assistance to TQM Steering Committee and improvement project teams, oversee and monitor project plans.
- Communicate TQM goals, objectives, and progress to Board of Directors, Executive and Management Teams, and clinic staff.
- Participates in data information teams and provides input on data needs for indicators and outcome measures for quality initiatives, grants, and regulatory requirements.
- Participate as a team member in the Clinical Quality Management (CQM) committee meetings. Develop and implement an on-going structure for monthly review of relevant issues related to clinical care from patient satisfaction surveys, patient experience reporting, incident reports and sentinel events.

Compliance Duties and Responsibilities (30%):

- Develop, initiate, maintain, and revise compliance policies and procedures for the operation of the Compliance Program and its related activities to prevent illegal, unethical, or improper conduct.

- Establish and provide direction and management of the Compliance Hotline. Review monthly Compliance Hotline reports to evaluate results and trends, review specific reports, and coordinate case management of incidents if necessary. Provide training to all new staff to report suspected fraud and other improprieties to the hotline without fear of retaliation.
- Design, coordinate and conduct investigations on matters related to compliance (eg. respond to the reports of problems, Compliance Hotline calls, or suspected violations). Prepare written reports of investigations with recommendations for corrective action for the CEO, Medical Director, Clinical Operations Director and department managers, as appropriate.
- Develop and coordinate annual internal compliance review and monitoring activities, including periodic departmental and medical records reviews for compliance in medical record documentation, coordination and continuity of care, health prevention, site access and safety, site personnel qualifications and training, safety and infection control, HIPPA, office management practices and other areas as specified by licensing and external regulatory agencies. Develop recommendation for corrective action based on review findings. Follow up on reviews to verify that corrective actions have been implemented.
- Develop a safety checklist and assure monthly safety compliance walkthrough for all facilities. Monitor safety checklist reports.
- Ensure compliance with HIPAA privacy practices and promote activities and education to foster information privacy awareness within the organization.
- Review organizational policies and procedures to ensure compliance with legal, accreditation, and internal standards. Analyze existing policies, identify gaps and recommend new/revised policies and procedures, approval processes, and monitoring methods for departmental use. Review detailed departmental processes and policies and document deficiencies.
- Present new or revised policies and procedures to board of directors for approval
- Serve as organizational liaison for clinic licensing and certification, HRSA, CMS, HSPM, VFC, San Mateo County Health Department, and other external agency audits
- Present external audit reports to CEO and appropriate members of the Executive team and oversee development of and adherence to a corrective action plan for any identified deficiencies.
- In the role as safety officer, participate as a team member on the Disaster Committee. Assist, as needed, in developing the Disaster Plan and training drills.
- Develop, coordinate and participate in educational and training program that focus on the requirements of compliance (OSHA, Infection Control, Workplace Violence, etc), and ensure that all appropriate employees and management are knowledgeable of, and comply with, pertinent federal and state standards

Risk Management Duties and Responsibilities (25%)

- Review and maintain log of all patient experience and incident reports. Report trends and sentinel events to the Board Quality Assurance Committee on a quarterly basis.
- Monitor Patient Experience Hotline and log calls on a daily basis.
- Investigate matters related to complaints and incidents, including conducting internal investigations (eg. responding to patient experience reports, Ravenswood Cares form, and patient experience hotline calls). Prepare written reports of the investigation with recommendations for corrective action for the CEO, Medical Director, Clinical Operations Director and/or department managers.
- Working collaboratively with the Clinical Quality Management Team, analyze patient experience and incident report logs and sentinel events to identify areas for improvement. Prioritize issues in risk assessment based on level of organizational exposure.
- Report incidents resulting in patient injury to Norcal and Triton Group (FTCA) as necessary.
- Conduct quarterly patient satisfaction surveys and report results to Board Quality Assurance committee, department staff and individual providers. Report any unusual or recurring patient care issues that arise from the survey results to the CEO, TQM Steering Committee and Board QA Committee, as appropriate.

QUALIFICATIONS

- Master's degree or higher from an accredited college or university in public health, health administration, business administration, public policy or related field required.
- Minimum 5 years experience in the delivery of ambulatory health care services.
- Strong computer skills in a Windows environment; knowledge of practice management (NextGen) systems a plus

- Ability to communicate effectively with patients, providers, staff and the community
- Current California Driver's License in good standing, a personally owned, currently insured vehicle to drive on work related business.

Qualified applicants should submit their resumes and salary requirements to:

resumes@ravenswoodfhc.org or mail to

Ravenswood Family Health Center
Attn: Human Resources
1798a Bay Road
East Palo Alto, CA 94303
FAX: 650.321.8576

Please note: Only qualified applicants will be contact. Please do not call HR and ask for the status of your application as those calls will NOT be returned.