Title:

Population Health and Quality of Care Improvement Director (PHQCI)

Job Summary:

Reporting directly to the COO the PHQCI is responsible for the day-to-day activities of National Health Services (NHS) to improve population health outcomes and quality of care and demonstrate the value of care provided across our member health centers. This position is also a key member of our NHS health center innovation team that develops implements and evaluates population health, quality and practice transformation strategies to improve the health of the patients, families and communities that we serve.

In Quality Management/Risk Management (QM/RM), PHQCI is responsible for overseeing the Agency’s QM/RM Program, to include e.g. the Health Plan, the Risk Management Plan, the Improving Organization Performance Plan, Program Audits, Clinical Performance Improvement, QM/RM data collection, and analysis, and other QM/RM related projects. Provide active participation in the Joint Commission Ambulatory Care and Patient Centered Medical Home Accreditations. Relay information to QM regarding professional Credentialing and Privileging reporting and other related FTCA areas.

In addition, the person carrying out the duties outlined in this job description will update the Quality Improvement (QI) plan. Execute, monitor, and suggest changes in the QI plan to comply with all contractual agreements with Federal, State and licensing/regulatory agencies. Also, shall be in charge of other duties regarding the quality of care delivered to NHSI users, monitoring the Quality of Care criteria and implementation by NHSI, and coordinate the appropriate staff training in accordance with schedule developed and approved.

Job Duties & Responsibilities:

1. Manages day-to-day activities to improve population health outcomes, quality of care and care value across our member health centers.
2. Participates as a key member health center innovation team in the development, implementation and evaluation of population health, quality and practice transformation strategies.
3. Applies population health and Triple Aim concepts and implements appropriate quality improvement methodologies (such as Model for Improvement, PDCA, Lean or other appropriate methodologies) to assure highest standards of population health and quality improvement infrastructure and performance.
4. Contributes to the development and management grants related to population health and quality improvement, including but not limited to meaningful use, UDS, etc.

5. Collaborates closely with other sources (e.g. HRSA, NACHC, CVC, CVHN, health centers, collaboratives, networks, NextGen, etc.) and NHS in the design and implementation of population health and quality improvement strategies to strengthen data quality, collection, analysis and reporting, as well as electronic health record, health information exchange and other health information technology support for improvement strategies.

6. Participates and/or chairs the respective Committees and meetings as required, such as the Patient Care and Safety Committee, Clinician’s Workgroup, QIP Committee, Performance Improvement, etc.

7. Collaborates with key NHS partners on population health, quality improvement and health system innovation strategies and initiatives.

8. Participates in population health and quality improvement regional and statewide meetings and groups, as requested.

9. Communicates in a professional and timely manner with NHS, member health centers and key partners.

10. Works with NHS members to identify collective training needs related to population health and practice improvement. Assists in development and implementation of training and technical assistance programs for health center leadership and staff.

11. Assures that Quality Improvement and Population Health programs and projects are HIPAA compliant.

12. Collaborates with the CMO to lead NHS Quality plan development and oversight, FTCA, QA compliance.

13. The PHQCI Director leads strategy execution and development of quality improvement plans for all Integrated Clinical Services programs and organization lifestyles (Dental, Primary Care, Behavioral Health, Pharmacy, Laboratory Services, etc.).

14. Primary emphasis is on leading a whole systems view of quality improvement, performance excellence, planning and organizing the resources of all clinical programs, and coordinating the efforts of all subordinate management personnel.

15. Provides a leadership role for managing the development, coordination, implementation and evaluation of quality improvement, accreditation, safety, and risk management activities throughout NHS.

16. Obtain and review reports and data in each particular area and submit results to the executive office on a timely basis as required under:

   (a) UDS/OSPD Requirements
   (b) Clinical performance measures requirements
   (c) Program and Grant expectations
   (d) Licensing and other health regulatory requirements
(e) Applicable Joint Commission expectations

(f) Peer Review and QIP

17. In accordance with the QI plan and QIP process, conduct the necessary reviews in each respective area of monitoring, make suggestions, and make ongoing necessary updates as the need arises. Coordinate the review and approval process by the Board of Directors of the QA Plan every two years. As part of the current process Obtain and review reports and data required under the QI monitoring plan and in accordance with the framework structure, to cover the entire program, “I-9, Section IV of the QI Plan.”

18. Performance Improvement
   a. Maintains and transmits to appropriate parties, records of all Performance Improvement.
   b. Coordinates and facilitates all Performance Improvement activities
   c. Assists with the collection of Performance Improvement data.
   d. Coordinates Plans, and Chairs PI committee.

19. Track, trend and assure compliance with complaints and grievance processes for NHSI.

20. Coordinate the planning, summary, review, and approval process by the Board of Directors of the QA summary annually.

21. Coordinate and recommend NHSI training needs in conjunction with NHSI QA/QI/PI trends and needs. On an annual basis conduct a survey to assess the training needs in each branch and discuss a schedule to be developed, approved, and reported by the branch directors.
   a. In accordance with funding, regulatory agencies or directions from the CEO, there may be a need for new direction or mandatory requirements will be needed to channel to staff such training and direction as may be modified or changed accordingly.
   b. Carrying out any other urgent needs that are identified by Branch Directors as needed for training, communication, or any other decision that is approved by management and includes/excludes any kind of training or modification of training schedule.

22. Other duties as required by the funding agencies, and/or agreed upon by the management staff, as the case may be currently or in the future time that support organizational goals and objectives.

MINIMUM POSITION REQUIREMENTS:

EDUCATION, EXPERIENCE, KNOWLEDGE, SKILLS:

- Masters Degree in public health or health related field and four (4) years progressively responsible QM/RM experience in a hospital or ambulatory clinical setting in lieu of a Nursing license and BSN considered. OR Current California R.N. or L.V.N. License, Public Health Nurse Certificate and Bachelor of Science degree in Nursing from an approved accredited school of Nursing.
• A minimum of two years experience working in population health, quality improvement or related field preferred. Must have knowledge through practical experience, and/or training in the area of:
  ▪ Quality Assurance/Improvement
  ▪ Risk Management
  ▪ Joint Commission Accreditation
  ▪ Clinical Services
  ▪ Patient Flow Systems
• Proficient in the use of Microsoft Office (Word, Excel, and Outlook), ability to work well with other professional and support staff in a professional team oriented environment, and
• Effective and excellent verbal and written communication skills, effective interpersonal and leadership skills, ability to analyze clinical data, ability to prepare written reports, and QM/RM plans, presentations, meeting facilitation and reports.
• Ability to provide QM/RM in-service training and consultation to staff.
• Post-training experience in a community health care setting will be helpful.
• Knowledge of population health, quality of care concepts and methodologies, as well as concepts of community health and social determinants of health.
• Strategic thinker with proven ability to gather and analyze data, assess effectiveness of healthcare systems and work with system partners to develop, implement and evaluate Triple Aim, Lean Six Sigma, etc. improvement strategies.
• Demonstrated track record developing successful grant proposals for foundation, government and/or other funders.
• Proven leader, outstanding interpersonal skills.
• Accountable, self-starter, able to work in a fast paced environment.
• Minimum 1-2 years of experience providing similar services
• Experience working in a primary care medical facility preferred
• Experience working with people from various cultures
• Bilingual Spanish and English fluency required
  • Must be aggressive in developing patient care programs within the clinical policies and program objectives and relating them to the funding requirements.
  • Must obtain a Valid California Drivers License at all times plus proof of insurance, to allow you to be placed in all National Health Services clinics if needed.
• PHYSICAL REQUIREMENTS:
  • Ability to sit, stand, stoop, reach, lift (up to 20 pounds), bend, ect., hand wrist dexterity to utilize computer.
• Vision and hearing required to use computer to attend teleconferences and communicate with employees and members.

Responsible To: Chief Operations Officer (COO)

Classification: Full-time, exempt position, Salary 75,000-90,000

Department Chief: ____________________________

Date: __________

Chief Executive Officer: ____________________________

Date: __________