



JOB DESCRIPTION

POSITION: Medical Director

STATUS: Exempt; Full time

REPORTS TO: Chief Executive Officer

SUPERVISES: Providers including per diem providers, Director of Nursing, CQI Nurse, CPSP/Health Education Unit Coordinator, and Breast and Cervical Health Case Manager

DEPARTMENT: Medical Services Department

OFFICIAL DUTY STATION: Los Feliz Health Center

SUMMARY: Working closely with CEO and Management Team (MT), key responsibilities of Medical Director are to (1) oversee medical and nursing personnel and operations, including supervising all providers, ensuring risk management and quality of care, and developing and implementing all other medical aspects of the clinic operations; (2) provide leadership and organization to implement APHCV's goals and objectives for medical and clinical operations; and (3) provide strategic input to planning and evaluation process for the organization. Medical Director works closely with Director of Clinic Operations in developing and implementing the overall clinic services, operations, and objectives. Medical Director provides report to APHCV Board of Directors regularly for quality improvement progress. Medical Director also provides direct medical care, thus adheres to two job descriptions: they are (1) physician job description (Refer to Physician Job Description), and (2) Medical Director job description.

APHCV expects all employees to respond to and participate in emergency situation per emergency policies and procedures.

DUTIES AND RESPONSIBILITIES:

1. Oversight of Medical Service and Operations

- a. Oversee operations for patient care by Medical Services Department according to the rules and regulations set by Section 330 program, all other federal and local laws, rules and regulations including Medicaid/Medicare, state and county programs.
- b. Is responsible for the smooth and successful day-to-day clinic operations by Medical Services Department, and thus works closely with Director of Clinic Operations and Director of Nursing in this regard.
- c. Develop, review, and approve Medical Services Department policies and procedures (P and Ps) as needed. Train Medical Department staff and/or other staff on P and Ps as needed.
- d. Service as the Patient Grievance Officer together with Director of Clinic Operations.

2. Set Performance Goal and Monitor for Improvement

- a. Annually define and regularly monitor to improve productivity (provider productivity) of Medical Services Department and finalize with CEO, Director of Clinic Operations and Chief Financial Officer. Take action to improve productivity for Medical Services Department.
- b. Annually define and regularly track performance goals for mental health program, women's breast health program, CPSP program, and Nursing Department. Finalize the goals with CEO, Director of Clinic Operations and Chief Financial Officer.
- c. Annually define and regularly monitor quality of care goals (see 4 Quality Improvement, Quality Control, and Risk Management below).
- d. Direct/participate in internal and external clinic audits and development and implementation of corrective action plan.
- e. Develop policies and procedures for Medical Services Department and ensure staff are trained and follow them.

3. Staff Management

- a. Establish measurable performance expectations (productivity, quality of care, timely completion of medical records and patient care, charting and other administrative duties, etc), provide supervision, coaching, counseling, evaluate and disciplining providers and other Medical Department staff.
- b. Serve as an exemplary model by meeting performance expectations above.
- c. Provide/arrange to provide training needs of his/her staff and the entire workforce as necessary.
- d. Recommend and participate in final determination of disciplinary actions for his/her reports.
- e. Maintain communications about APHCV and Department goals, objectives, changes, expectations to his/her Department staff,
- f. In consultation with Director of Clinic Operations, Chief Financial Officer (CFO), and Director of Nursing, assess need to hire additional provider and any position under his/her direct supervision. When it is confirmed hiring is necessary, communicate to HR specific criteria and timeline for hiring if it is already in the budget. If not, seek CEO approval. Interview candidates, and provide recommendation to CEO for final decision.
- g. Prepare, review and give recommendations and periodic updates of the qualification statements and job description of providers;
- h. Promote a motivational environment for providers and his/her Medical Department staff to work as a cohesive and mutually supportive group.

4. Quality Improvement, Quality Control, and Risk Management

- a. Review periodically, at least every two years and implement a quality improvement (QI Plan), quality control and risk management program including peer review programs through periodic medical chart review. Conduct meetings (such as regular Quality Improvement meetings). Reference data and recommendations from external entities such as Health Care LA IPA report (i.e. service utilization, emergency room service, etc.). Provide QI report to TQM, CEO and Board of Directors regularly.
- b. Annually report year end performance outcomes for QI goals to QI Committee, TQM Committee, CEO and Board of Directors.
- c. Annually develop and submit QI goals to TQM, and then CEO and Board of Directors for approval. Be responsible for meeting the goals.
- d. Annually develop clinic risk management goals to TQM, CEO and Board of Directors

- for approval. Be responsible for meeting the goals and report out to TQM, CEO and Board of Directors at the end of fiscal year.
- e. Ensure that the medical services that APHCV provides are within the scope of services submitted in the Section 330 application.
 - f. Work with HR Department in submitting FTCA application. Ensure FTCA expectations and requirements are met including privileging providers upon hire and documenting and filing such with HR Department.
 - g. Enforce adherence to the rules and regulations and expectations of all funding and government programs, payors, licensing entities and any other regulatory entities as required for patient care.
 - h. Provide medical consultation for other providers regarding patient care.
 - i. Set up a mechanism to review lab results and result disclosure to patients.
 - j. Ensure scheduling of clinical assignments, rotation, call, leave, etc. of medical personnel;
 - k. Institute and manage professional education, in-service training, and orientation of medical staff;
 - l. Review all medical record release requests.

5. Planning:

- a. Provide leadership for developing and expansion the program philosophies and strategies for APHCV. Recommendations must be grounded in the best principles and practices of modern health care management and exhibit a unity of vision and approach consistency with the goal(s) set by the Board of Directors, CEO and the Management Team.
 - b. Participate in and provide clinical perspective to strategic planning and annual planning.
 - c. Participate in the budget planning and recommendations pertinent to medical activities including plans and projections for staff support and equipment as appropriate.
6. Represent APHCV in outside meetings as necessary.
 7. Any other duties assigned by CEO.

PERFORMANCE EXPECTATIONS:

Completion of Annual goals

1. Serve as an exemplary model by meeting performance expectations such as timely completion of medical records (i.e. Master IM list) and seeing patients on time.
2. Meet annual goals noted in the job description.
 - a. Annually define and track productivity (provider productivity) of Medical Services Department and finalize with CEO, Director of Clinic Operations and Chief Financial Officer. Take action to improve productivity for Medical Services Department.
 - b. Annually define and track performance goals for mental health program, women's breast health program, CPSP program, and Nursing Department. Finalize the goals with CEO, Director of Clinic Operations and Chief Financial Officer.
 - c. Annually develop and submit QI goals to TQM, and then CEO and Board of Directors for approval. Be responsible for meeting the goals.
 - d. Annually develop clinic risk management goals to TQM and then CEO and

Board of Directors for approval. Be responsible for meeting the goals.

QUALIFICATIONS:

- A licensed M.D. in the State of California.
- Board Certified in family practice or internal medicine in the State of California.
- Prior experience as Medical Director/leadership for at least 5 years.
- Strong community health orientation and at least three years experience in primary care delivery and administration
- Experience in management skills, quality improvement, and managed care program
- Knowledge of Asian Pacific languages, cultures and health practice
- Demonstrated skills in staff management, supervision, teaching and instruction skills, and organizational development.
- Clear and professional verbal and written communication and meeting facilitation skills.
- Experience working with targeted population and knowledge of related issues.
- Strong organizational skills and demonstrated ability to handle multiple contracts, projects and tasks.
- Ability to work with minimum supervision and also function as a team member.
- Ability to work with people of diverse cultural, educational, socio-economic, and linguistic backgrounds.
- Proficiency in Microsoft Office applications

HR Procedural requirements:

- Legal authorization to work in the United States
- A valid California Driver’s license with clean records and access to insured automobile
- Completion of APHCV Health Assessment Form
- Completion of DOJ background check

PHYSICAL REQUIREMENTS:

Must be able to materially perform the task normally associated with the position including but not limited to: ability to lift up to 40 lbs.

Last updated on: _____

EMPLOYEE ACKNOWLEDGMENT:

I have read my job description and understand its contents. I agree to perform the duties and responsibilities to the best of my ability. If at any time I have questions about its contents, I will discuss with my supervisor any clarification. I have received a copy of this job description and understand that it will be used to evaluate my performance both on an ongoing basis and at regular intervals.

Employee’s Printed Name

Employee’s Signature

Date

Supervisor's Signature

Date