

Community Health Alliance of Pasadena (ChapCare) Job Description



Title: Quality Improvement Manager
Department: Administrative

Job Summary

This role will report directly to the Chief Deputy Director and indirectly to Chief Care Officer. The Quality Improvement Manager manages the performance of ChapCare's quality improvement activities, provider quality reviews, establishes and monitors quality improvement goals, organizes outcomes research. Primary responsibilities will be managing clinical improvement initiatives, ensuring compliance with requirements and promoting improved health care outcomes. This position is an integral part of improving overall clinical quality measures as it relates to CMS Medicare STARS; coordinating the Patient Centered Medical Home and Meaningful Use certification processes; oversee the development of clinical and operational reports; clinical compliance with HEDIS measures; Care Coordination program. Assist ChapCare staff in the preparation of public and private grant proposals and grant renewal applications. In addition to working with clinical quality improvement programs, this position will also work closely with other key areas such as risk/revenue management to ensure program efficiencies and streamlined provider communication, collaboration and education as applicable.

ChapCare's Expectations of all Employees

- Adheres to all of ChapCare's Policies and Procedures
- Conducts self in a manner that represents ChapCare's core values at all times
- Maintains a positive and respectful attitude with all work-related contacts
- Communicates regularly with his/her immediate supervisor about Departmental and ChapCare concerns
- Consistently reports to work prepared to perform the duties of the position
- Meets productivity standards and performs duties as workload necessitates
- Responds and participate to emergency situation per emergency policies and procedures

Essential Duties and Responsibilities

- In Collaboration with the CCO and Deputy Director ensure Quality Improvement (QI) Plans meet clinical standards of care and achieve the desired outcomes.
- Supervise the overall performance of staff in the Quality Improvement (QI) Department.
- Develops and Implements Interventions to improve performance on key Medi-Cal Measures. Works closely with medical operations on Quality Improvement efforts for Annual QI Program and Evaluation.
- Becomes an expert in company quality initiatives, as well as the products, functions, marketing and/or service policies and procedures that support those initiatives.
- Assist in the development of Quality Improvement initiatives in the clinic as identified by HRSA, NCQA, Health Plans, Independent Physician Association, and CMS to achieve Meaningful Use, Patient Centered Medical Home recognition, and UDS clinical quality goals. Oversee the generation of QI reports, track quality improvement activities and outcomes quarterly to the QI committee to ensure measurable improvements in clinical and operational outcomes and customer satisfaction. Participate in Quality Improvement Committee meetings. QI work plan as needed. Prepare PDSA's on operational and clinical issues identified by Quality Improvement Committee or Practice Management Team.

- Prepare documentation and coordinate the application submission process for NCQA's Patient Centered Medical Home certification for all clinic sites. Work with staff to prepare policies/procedures, screen shots of PCMH factors, population management rosters to coordinate the care management of patients, and reports that measure performance in various preventive and chronic care clinical measures. Monitor clinic workflow/documentation and make recommendations to the Operations team as to the integration of the PCMH approach into daily operations. Train appropriate staff in PCMH and deploy PDSA cycle as required.
- Responsible for overseeing the production of all monthly, quarterly, final reports, and re-funding applications, to funding agencies to ensure reports are submitted in a timely manner (e.g. California Community Foundation, Northeast Valley Homeless Corporation's health care for the homeless grant, and California Family Health Council's family planning grant).
- Keep abreast of industry changes and serves as a subject matter expert on programs affecting quality, population health, and incentive programs.
- Assists in writing grant applications including needs assessment, program plan, goals, outcome measures and gathering supporting documents and work with relevant program staff to complete grant.
- Oversee program evaluation activities across the health centers, with a focus on reports required for funded grant or contract programs (e.g. UDS, Improvement Collaboration Programs, HRSA Service Area Competition clinical outcome measures and others as assigned). Advise clinic departments on best practices for evaluation, including appropriate process, outcome, and impact evaluation measures for new and existing programs and services. Develop a system of tracking and reporting clinical and operational measures relating to different grants. Track all grant outcomes and indicators and measure program impact for funded grants.
- Attend and represent ChapCare in various network collaborative initiatives (Northeast Valley Health Corp. Homeless Network (NEVHC)), Pasadena Housing and Homeless Network, San Gabriel Valley Consortium on Homelessness meetings and other community meetings and conferences as needed.
- Conduct all patient satisfaction survey at all clinic sites, outreach sites, and patient focus groups, analyze and write summary reports to present to the Board and QI committee.

Qualifications

- Master's degree in Public Health preferred. Experience in quality improvement, grant writing, behavioral science research, health education, or program coordination experience at community based clinic setting preferred.
- Extensive knowledge and at least four years of experience in diverse areas of health program development and evaluation that includes writing of grant proposals, development of evaluation tools, and evaluation of health programs, data analysis.
- Demonstrated knowledge of grant application process and writing grant applications.
- Ability to take the initiative and utilize innovative techniques and creativity in preparing grant applications that align with the clinic's overall strategic plan.
- Ability to develop, write, and implement grants and ability to track grant outcomes and provide necessary documentation to support grant requirements.
- Ability to work under pressure to meet deadlines for grant opportunities.
- Experienced in producing business or clinical report documents from source databases.
- Familiarity with reporting tools including Business Objects, Clarity, Crystal Reports and database structure.
- Excellent knowledge of community health needs, data analysis skills, program evaluation methods, program planning tools/methods, as well as public and community health models and frameworks.
- Excellent organizational and interpersonal skills.
- Excellent communications skills, including interpersonal, writing and presentation skills.
- Bilingual English/Spanish preferred.