

JOB ANNOUNCEMENT

Position: Quality Assurance, Risk Manager Officer

Program: Tribal Health Administration

Supervisor: Director of Operations

Classification: Exempt

Compensation: \$34.30 per hour (Grade 32, Step 1)

Location: Owyhee Community Health Facility

OPENS: May 7, 2018

CLOSES: Open Until Filled

SPECIFICATIONS: All applications must be fully completed. Any incomplete, undated or unsigned applications will not be processed (Do not refer to the resume in lieu of making required comments on the application) Please attach all required documentation as specified in the Job Announcement. **Failure to attach required documents will disqualify you from consideration for this position.** Employment Applications are available at the Human Resource Department. Any questions regarding this position is to be directed to the Human Resource Department at the above listed telephone number.

Preference for filling vacancies will be given to qualified Indian Applicants in accordance with the Indian Preference Act (Title 25 U.S. Code, Section 472 and 473). However, the Shoshone-Paiute Tribes is an equal opportunity employer and all qualified applicants will be considered in accordance with the provisions of Section 703 (l) of the Title VII of the Civil Rights Act of 1964, as amended.

The Shoshone-Paiute Tribes application form for employment must be received by the Human Resources Office by 5:00 PM of the closing date of this job announcement.

All Interview notifications will be made by certified mail. It is your responsibility to notify HR if your mailing address and/or phone number changes.

In accordance with Shoshone-Paiute Tribes' Resolution No. 00-SPR-31, all new employees are required to pass a pre-employment drug/alcohol test.

THE SHOSHONE-PAIUTE TRIBES RESERVES THE RIGHT TO CONDUCT BACKGROUND CHECKS ON ALL NEW EMPLOYEES. In accordance with Shoshone-Paiute Tribes' Resolution No. 95-SPR-135

SPECIAL CONSIDERATIONS:

This position is subject to suspicion less (random) drug testing and a background check as a condition of employment. This individual has access to sensitive Tribal and personal data. This position oversees the budget process for the Owyhee Community Health Facility and must meet the conditions to be bonded. Additionally, this person periodically operates a tribal vehicle (unless accepted under the provisions of the American Disabilities Act).

Summary of Functions:

Serves as Quality Assurance Officer at the Owyhee Community Health Facility. The incumbent will be responsible to assure that quality assurance/risk management plan and activities are performed. Serves as an advisory to the Tribal Health Administrator and leadership. Incumbent will be responsible for planning, coordinating and integrating the development, implementation, monitoring and evaluation of all quality assurance, accreditation activities and Risk Management programs.

Major Duties and Responsibilities:

- 1) The incumbent will be responsible for coordinating and implementing the programs of quality assurance, including accreditation, and risk management. The incumbent will be responsible for ensuring that organizational plans, policies, protocols, services, evaluation and improvements are established, implemented and evaluated according to established policy and the organization is survey ready at all times.
- 2) Incumbent provides technical assistance to all departments/services regarding the evaluation and improvement of organization services and processes. Is actively involved in all aspects of care, services, support services and administration regarding Quality Assurance and Risk Management activities that impact on the quality of health care.
- 3) Establishes and maintains a policy/procedure, performance improvement, risk management, etc., organizational structure for staff access and updates. Establishes a reminder system to update policies and procedure and other QA and RM documents to stay in compliance.
- 4) Establishes and/or assist the various health care services and disciplines with written standards of care criteria which are specific for their services and personnel. Provides technical and professional direction/consultation regarding retrospective and concurrent patient care evaluation studies.
- 5) Will establish an organizational quality improvement program and risk management plan. This will include a systematic approach for data collection, aggregation and reporting along with assisting departments and services in reviewing data, reporting data and the application of data in accordance to applicable standards. This responsibility will include internal and external benchmarking data, reporting and application.
- 6) Will establish a mechanism for evaluating the efficiency, functions and activities of the organization's structure including departments, committees, meetings, and the governing body. This will include responsibilities, frequencies, communications, accreditation standards and evaluation.
- 7) Will establish a structure, mechanism and assist in developing, monitoring, evaluating, revising and implementing organization, department and service policies and procedures.

- 8) Will establish a mechanism to provide training and education to OCHF personnel relating to quality assurance, accreditation activities and risk management. Will periodically provide information or training to community, professional and special interest groups on a requested and/or as needed basis.
- 9) Will be a member of the Administrative Committee and participate in other upper management committees and meetings as well as attending all appropriate OCHF and community meetings and committees.
- 10) Performs other duties as assigned.

Education and Work Experience

- 1) Bachelor's Degree in a health field. Masters is preferred.
- 2) Minimum of three (3) years' experience in quality assurance, risk management.

Other Significant Factors Relating to the position.

- 1) Experience with and/or knowledge of accreditation standards/requirements such as AAAHC, CMS, FQHC, etc.
- 2) Professional knowledge in a field relating to the health care sciences pertinent to the work of this position (i.e., clinical care professionals such as nursing, medical laboratory technology, radiology, pharmacy).
- 3) Experience in developing, implementing and interpreting policies and procedures
- 4) Comprehensive knowledge of institutional and regional health care systems, to serve as an authority in matters pertaining to health care systems.
- 5) Ability to communicate successfully, both orally and in writing, with a variety of people, health care professionals, and other I.H.S., OCHF employees, tribal health boards, certifying/accrediting commissions and agencies, etc.
- 6) Experience serving as a liaison between groups within an organization, as an effective leader or organizational teams and in coordinating implementation projects.
- 7) Functional knowledge of computer systems in order to collect, sort, analyze and appropriately display data is recommended, but not essential.
- 8) Ability to successfully perform duties such as developing procedures, planning, organizing and monitoring studies involving the analysis of data and preparing reports.
- 9) Knowledge of and ability to interpret standards of accreditation such as AAAHC, CMS, FQHC, etc. and the ability to apply these standards to varying clinical standards.

- 10) Demonstrated leadership ability, especially in a multidisciplinary clinic atmosphere; to negotiate and elicit cooperation.
- 11) Maintain professional knowledge and proficiency in quality assurance, accreditation and certification programs through continuing education courses, conferences, workshops, etc.
- 12) Possess and/or acquire knowledge and familiarity in various health care disciplines.
- 13) Travel (by automobile, plane, chartered and commercial) is required to successfully perform the duties and responsibilities of this position. Incumbent may be required to operate government motor vehicles.

Supervisory Controls:

The Director of Operations will serve as the incumbent's supervisor and establishes overall objectives and sets the parameters of the work. Within the established objectives/parameters independently works out and revises, as needed, methods, process and procedures with professional and other staff. Identifies and seeks innovative approaches to resolution of problems. Keeps supervisor informed concerning status of work and unusual or very difficult problems. Review of work is based on effectiveness of meeting requirements.

Guidelines:

Guidelines consist of IHS manuals, A.M.A. criteria for Long Term, Short Stay and Swing Bed Hospital Review, Joint Commission, Kaiser Guidelines for Comprehensive Q.A. Systems, and other appropriate professional publications and data (Federal and non-Federal).

Guidelines for Quality Assurance programs are AAAHC, CMS, FQHC, Shoshone Paiute Tribes Handbook, OCHF Organization Policies and Procedures.

Complexity:

The work consists of a wide variety of duties involving a broad range of activities and depth of analysis for a highly specialized field of work. Factors considered involve uncertainty in approach and methodology or interpretation and evaluation resulting from elements such as technological developments, conflicting requirements, etc. The work requires originating new techniques, establishing criteria, and developing new information.

Scope & Effect:

The primary purpose of the position is to contribute importantly to the provision of the highest available quality of health care; the work is expected to have an impact on safety, economic efficiency and quality of care. Performance of the duties involves establishing criteria, assessing program effectiveness, investigating or analyzing a variety of conditions, problems or questions which affect a wide range of activities and stimulating responsive action toward the achievement of quality of care.

Physical Demands:

The work requires occasional walking, bending and standing when conducting audits and other related duties.

Work Environment:

The work is performed in an office setting.