**Director of Compliance, Quality, and Risk Management Job Description**

[CHC] is seeking a dynamic individual with leadership skills to implement various programs and serve as the organization’s Compliance Officer, HIPAA Privacy Officer and Risk Officer. The position focuses on multiple areas including Quality Improvement, Risk Management and Corporate Compliance.

**JOB SUMMARY:** The Compliance, Quality and Risk Management Director (CQRD) provides leadership and expertise to ensure continuous compliance with Federal, State and local regulatory requirements, and to ensure the delivery of safe, high quality patient care services. This role is responsible to lead the organization in safety practices, systems thinking, accountability and good resource stewardship, and will socialize best practices throughout the organization. This position will supervise the Quality Program Manager and Data Analyst roles.

# ESSENTIAL DUTIES:

**Compliance**

1. Oversees a corporate compliance program and ensures staff, Board members and others associated with [CHC] receive the appropriate training and education.
2. Develops and maintains a written corporate compliance plan, Standards of Conduct and annual evaluation of the plan’s effectiveness; ensures that all elements of a compliance program are addressed.
3. Develops and maintains policies and procedures for [CHC], developing a document management system of [CHC]’s policies and procedures to ensure timely review and approval by department leaders and Board of Directors.
4. Develops and maintains up-to-date knowledge of corporate compliance requirements and related law and regulations as mandated or recommended by the OIG, CMS, HIPAA, HRSA and other agencies: attends outside corporate compliance trainings provided by NACHC and/or other agencies.
5. Maintains knowledge of [CHC]’s grants requirements and contracts and organizational strategies to assess impact on compliance and risk program accountabilities.
6. Serves as a resource and guide to all staff and especially to leadership staff on compliance, quality and risk management matters through education, data reporting and effective communication.
7. Performs and supports external and internal compliance audits; ensures that corrective action plans are documented in a timely manner and effectively implemented.
8. Oversees investigations relating to reports of known or suspected violations of the corporate compliance program or the Code of Conduct.
9. In consultation with the CEO, submits mandatory notification of known or suspected corporate compliance violations to the appropriate regulatory agencies.
10. Manages the Emergency Management Program including facilitating the annual Hazard Vulnerability Analysis and updating the Emergency Management Plan and Business Continuity Plan as required. Assures organization meets CMS and HRSA requirements for Emergency Management Program. Assures staff training in emergency management relative to the organization’s internal and external risks.
11. Partners with HR team to assure credentialing and privileging processes are completed per HRSA Compliance Manual.
12. The CQRD is expected to identify areas of opportunity and is authorized to implement actions to ensure achievement of the objectives of an effective compliance program.

# Quality

1. Oversees a corporate wide quality improvement program inclusive of all staff.
2. Oversees, supports and evaluates the work of the Quality Program Manager (QPM) who is responsible to develop and maintain a written quality improvement plan and annual evaluation of the plan’s effectiveness.
3. Responsible for developing a just culture for employees, where reporting of incidents is encouraged in order to facilitate a culture of continuous improvement and create a safe environment for employees and patients.
4. Models and leads the organization in identifying and learning best practices for safety, systems thinking, accountability, good resource stewardship and socializes best practices for process improvement.
5. Supervises the Quality Program Manager, ensuring all QPM job functions are supported.
6. Supervises the Data Analyst, ensuring all Data Analyst job functions are supported.
7. Directs and partners with the QPM and Data Analyst to develop and maintain a performance measurement work plan and reporting calendar to ensure timely data collection, aggregation, analysis, and reporting of established performance measures related to key operational and clinical processes and outcomes.
8. Ensures, in collaboration with Data Analyst and QPM, the management of electronic storage of quality improvement reports to promote ongoing access for key stakeholders.

# Risk Management

1. Oversees a corporate wide risk management program, develops, and maintains a written corporate risk management plan and annual evaluation of the plans’ effectiveness.
2. Collaborates with the Chief Health Officer (CHO) in the investigation of clinical events including sentinel events, sentinel event near misses, and significant adverse events; leads and/or participates in the development of root cause analyses as directed by the CHO.
3. Leads the [CHC] team to identify potentially harmful environmental and system issues and develops processes for mitigating risk in a timely manner.
4. Develops and maintains policies and procedures related to the corporate risk management program.
5. Oversees and evaluates processes for internal incident reporting.
6. Serves as the Risk Manager and Malpractice Claims Manager for the organization. Responsible for the daily monitoring and oversight of all risk management activities, including malpractice claims management, which may be delegated to risk management and compliance staff.
7. Serves as chair of the Risk and Safety Committee and appropriately escalates organizational risk to executive leadership and Board of Directors.
8. Leads an annual Risk Assessment to identify specific high-risk areas of the organization.
9. Manages reputational risk in partnership with communications manager. Review patient satisfaction scores and direct Quality Program Manager in addressing issues related to reputational risk.
10. The CQRD collaborates extensively with executive and leadership staff to achieve the objectives of an effective compliance, quality and risk management program and works with legal counsel, in collaboration with the CEO, when appropriate.
11. Monitors the effectiveness of the Compliance, Risk Management and Quality Programs, taking appropriate steps to improve its effectiveness.
12. In collaboration with the CAO, reports to the BOD on a regular basis on the effectiveness of the Compliance, Risk Management and Quality Programs. Provides compliance training to BOD related to HRSA grant requirements and other state and federal compliance.
13. Serves as subject matter expert on insurance policies for [CHC]. Evaluates policies for appropriate level of coverage annually, serves as liaison to insurance broker, and is responsible for submitting insurance claims once approved by the CEO.

# OTHER DUTIES AND RESPONSIBILITIES:

* + Serves on various committees where compliance, quality, risk management oversight and collaboration are needed and requested.
	+ Attends required internal meetings, trainings, and events.
	+ Other duties as assigned.

# JOB QUALIFICATION AND SKILLS:

* + A combination of formal education and years of experience related to compliance, quality and risk management will be considered. A minimum of 5 years’ experience in regulatory compliance, quality and risk management required; 10 years preferred.
	+ Certification in Healthcare Compliance is required (HCCA preferred, other certifications will be considered). Additional certifications in Risk Management and Clinical Quality Management desired.
	+ Experience managing projects, including development and implementation of policies, procedure and workflows.
	+ Experience with Federal Programs such as Federally Qualified Health Centers (FQHC), 340B program, FTCA, HIPAA.
	+ Demonstrated leadership skills including excellent oral and written communication skills.
	+ Strong knowledge of healthcare clinical fundamentals, patient safety standards, and performance improvement standards.
	+ Strong knowledge of CQI tools and techniques, ability to perform data analytics, and lead performance improvement teams.
	+ Experience managing projects, including development and implementation of policies, procedures, and workflows.
	+ High ethical standards and an appropriate professional demeanor.
	+ Ability to prioritize and organize workload, balancing multiple projects as well as competing priorities and demands; ability to work under pressure in a fast-paced environment.
	+ Excellent interpersonal skills to work effectively with all levels of employees, management, regulators, and vendors.
	+ Ability to maintain confidentiality and navigate sensitive matters related to organization, employee, and senior leadership situations.
	+ Collaborative leadership skills and ability to influence and work well with others.
	+ Ability to focus on detail and explain detailed information in a manner understandable to various target audiences. Experience with SBAR style writing preferred.
	+ Excellent communication, assessment, and problem-solving skills.
	+ Thorough knowledge of and ability to reinforce HIPAA Privacy requirements.

# PRINCIPAL WORKING RELATIONSHIPS:

* Executive Staff
* Leadership Staff
* Board of Directors
* QI/QA Staff
* Grants Manager
* IT Director
* HR Director
* Communications Manager
* External Legal Counsel
* State and Federal governmental entities
* State Primary Care Association
* Community Members and other Healthcare Providers/Practices