

JOB DESCRIPTION

Position Title: Chief Medical Officer
Department: Corporate/Medical Staff
Reports To: Chief Executive Officer
Directs: Medical Staff
EEOC: Professional
FLSA Status: Exempt
Salary Range: DOE

Function:

Reporting to the Chief Executive Officer, the Chief Medical Officer for Community Health Alliance of Pasadena is a key member of the executive team whose primary role is to inspire and lead the clinical staff for the our growing Health Center. The goal of the CMO is to ensure timely access to high quality medical care for ChapCare patients through clinical systems improvements, recruitment and retention of providers, supervision of site Associate Medical Leads, and oversight of the quality improvement initiatives. Provides reports to Board of Directors regarding clinical activities. In addition, the Chief Medical Officer provides clinical expertise and leadership in the design and implementation of new projects and innovations at the Health Center.

ChapCare's Expectations of all Employees

- Adheres to all 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 her/his 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

Management Responsibilities (approximately 20-24 hours a week)

- Provides leadership and expertise for Community Health Center quality and clinical effectiveness. The CMO will evaluate and optimize the care management approach, process of disease management, patient satisfaction, patient safety and develop processes to assure appropriateness of care including length of stay and ancillary resource utilization.
- Provides an environment of quality and cost improvement that is data driven and develops systems to review utilization of resources and objectively measure outcomes of care in the inpatient and outpatient settings. Monitors individual Provider and group

patterns, presents data, analysis and interpretation to providers and staff and Board committees for review.

- Assures that quality management programs are carried out in all clinical areas through the development and implementation of effective disease management programs, clinical protocols and guidelines, other decision tools, and review of the outcomes. Develops a performance database incorporating HRSA and other key quality indicators to provide leadership necessary to meet regulatory requirements and guidelines.
- Partners and collaborates with the provider staff and management team, facilitating teamwork and shared goals. Help represent provider staff viewpoints to administration and relay administrative views to provider staff.
- Develops a clinical decision support system to access utilization, quality and cost data. Provides strategic leadership by focusing teams and organization units on visions and distinctive strategies that result in excellent short and long-term performance in clinical, service and financial outcomes. Integrate evidence-based clinical practices wherever possible, building this into new and existing patient care delivery systems.
- Provides on-going counsel and advice to the Chief Executive Officer and Board of Directors on provider matters. Facilitates, intervenes and moderates all major provider-provider, provider-patient, and provider-staff concerns in collaboration with other appropriate provider staff and executive team members.
- Establishes and maintains an ongoing program to orient and develop expertise for provider staff members and Division Chiefs (example, Dental Director). Develops and prioritizes goals/objectives and work plans, including the definition and measurement of outcomes, which are consistent with the overall organizational strategy and mission.
- Leads the Quality Review Committee in achievement of clinical outcomes, and achieving best practice goals. Work closely with the Nursing Director and Chief Operating Officer to achieve effective care management processes and develop new initiatives to improve clinical quality.
- Provides oversight and leadership for all provider education programs. The program will assure strong and continued relationships with University-based professional schools.
- Implements organizational structure which promote shared accountability, high achievement and compliance with applicable laws and regulations; this to include electronic linkages and care delivery tools.
- Ensures provider staff development plans and programs are implemented and maintained as required by policy.
- Integrates clinical care quality and management with nursing, operations and finance; partners with members of the senior management team in this endeavor.

Clinical Duties (approximately 12 – 20 hours a week)

- Provides for the diagnosis and treatment of health center patients within the scope of his/her license to practice medicine.
- Provides follow-up on patients seen including chart notations, lab review, and referrals to specialists.
- Provides back-up for mid-level providers on site, or by phone during the day or after hours.

Qualifications:

- Active California medical license, preferably in Family Practice, OB experience preferred, and good standing with the Medical Quality Control Board of the State of California.
- Maintains hospital privileges at Huntington Hospital and Glendale Adventist Hospital
- Minimum 5-years experience in a leadership position
- Demonstrable leadership role and achievement in a complex healthcare delivery system.
- Experience in fiscal accountability and budgeting.
- Knowledge and experience of quality infrastructure is needed, including how to develop and implement decision tools, clinical protocols and guidelines, care management programs, and outcome measurement assessments.
- Needs working knowledge of information technology, including statistical analysis, clinical epidemiology, and medical informatics; understanding of best practices and how to successfully introduce information technology into clinical practice.
- Spanish fluency preferred

Attributes Sought:

- A philosophy of collaboration and teamwork.
- A demonstrable track record in forging physician/management relations.
- Clinical credibility with physician constituencies.
- A mission-driven individual who can embrace and commit to Mission and Core Values; articulate about stewardship.
- A philosophy of management by walking around, and high visibility in the clinical forum.
- A self-starter, results-oriented personality.
- High tolerance for complex, ambiguous, and ever-shifting environments, including a matrix management structure.

- Excellent interpersonal and communication skills, with the ability to build consensus given a high premium; noticeable skills in engaging physicians and finding synergies; an interactive style which is pleasant.
- The ability to relate well to a wide variety of individuals.
- Comfortable working in groups, forming teams of physicians and management, with an ease in working with other diverse groupings.
- Understanding of how to create change through influence and not through direct authority.
- Evidence of showing firmness of resolve with both Administration and the providers.
- Strong persuasive abilities.
- Demonstrated results in spanning the dichotomy between practicing providers (physicians, mid-level practitioners, dentists, etc.) and Administration effectively.
- Analytical with the ability to draw conclusions from the data.
- Has the attitude of prioritization not scarcity.
- The ability to hear, to understand, to reflect, and to mediate on issues.
- An appreciation of the importance of the clinical team, and what nursing, patient care departments and operations brings to the patient care endeavor, and the strength of that clinical partnership.
- A sense of humor and the ability to generate optimism in fellow team members.

EXPECTATIONS:

In the first eighteen months to two years, significant progress should be demonstrated in the following areas:

- Trust will continue to have increased between administration and the provider staff and there will be a stronger sense of collaboration and partnership in the patient care enterprise.
- Integration of the position of the Chief Medical Officer as a key and co-equal member of the senior management team.
- Effective working relationship with provider staff leaders.
- Promote honoring of a culture of consensus, but streamline decisions through collaboration and a matrix structure in conjunction with the medical staff leadership.
- Clinical excellence will be further recognized and affirmed through quantifiable metrics in performance.
- There should be a stronger sense that Administration is mindful of provider issues when setting direction and policy.
- There will be measurable improvement in provider and patient satisfaction.



- Be an advocate for the provider staff vantage point in promoting collaboration with Administration and the Board of Directors.

Amount of travel and any other special conditions or requirements

- Must have valid California driver's license and access to insured vehicle in working order.

Hours per day or week: A minimum of 40 hours per week is required.

Physical Demands/Working Conditions

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee may be required to drive to all ChapCare facilities as needed. The ability to sit for extended periods of time. The employee must occasionally lift and/or move up to 25 pounds.

Travel, generally within the Greater San Gabriel Valley and/or Greater Los Angeles, may be required on an occasional basis. Attend in state and out of state conference may be required.