

## **HOSPITAL RISK ASSESSMENT AND COMPLIANCE OFFICER**

### **DEFINITION**

Under administrative direction, plans, organizes, directs, and coordinates various functions, operations and activities pertaining to risk assessment and compliance at Natividad Medical Center (NMC); develops, coordinates and administers systematic hospital risk assessment and compliance programs; develops and administers goals, objectives, policies, and procedures; participates in hospital-wide strategic development and planning processes; and performs other duties as assigned.

### **DISTINGUISHING CHARACTERISTICS**

This is a single-position class that reports to the Chief Executive Officer at NMC. The incumbent performs responsible and complex program management and administrative duties and serves as a member of the hospital's executive management team to ensure that assigned programs, functions, and operations conform to organizational goals and objectives. Duties include significant responsibility for formulating and administering policies and procedures for assigned areas, as well as providing specialized management support and expertise to superiors. Assigned operations and functions include the planning, development, coordination, and administration of systematic risk assessment and compliance programs.

This position is further distinguished from the County Risk Manager who has County-wide responsibility for enterprise risk management programs and activities including risk control and financing, workers compensation, general liability and occupational health and safety. The Hospital Risk Assessment and Compliance Officer will work closely and confer with the County Risk Manager on issues related to NMC risk and compliance programs and mitigation strategies.

### **EXAMPLES OF DUTIES**

Nothing in this specification restricts management's right to assign or reassign duties and responsibilities to this job at any time.

#### **Department Risk Assessment**

1. Plans, organizes, directs, and coordinates departmental risk assessment activities.
2. Receives, reviews, and takes appropriate action on information regarding potential and actual compensatory events within specified time frames; records, collects, documents and maintains data; provides County Risk Management, insurance carriers and/or legal counsel with all requested information and documents related to potential or pending litigation; works with County Risk Management, insurance carriers and/or legal counsel to coordinate investigations, process/defend claims against the hospital, and assist in the in the evaluation of claims.
3. Researches liability exposures and recommends actions to minimize financial loss; collects, evaluates, and distributes data regarding incidents, claims, profiles, losses and other risk management reports; directs and coordinates the release of records in response to subpoenas, court orders, attorney requests, and other inquiries from outside sources.
4. Maintains risk statistics in compliance with regulatory bodies, ensuring integrity and security of all parties named in potential or real litigation; maintains accurate and current files on all medical-legal claims.
5. Acts as a liaison between County Risk Management, legal counsel, and hospital executives in matters pertaining to claims management.

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6. Completes NMC-specific insurance renewal information and provides County Risk Manager materials as requested for renewal of insurance policies/contracts; provides insurance information to outside agencies as authorized.
7. Coordinates with Medical Staff Services to ensure that all independent practitioners submit proof of adequate insurance.
8. In coordination with County Risk Manager and legal counsel, serves as a resource to address medical/legal inquiries of/from physicians, nurses, administrators, and others regarding emergent patient care issues and loss control.
9. Reviews contracts and agreements, including leases, construction agreements and purchase orders, for risk exposure and insurance coverage purposes; confers with County Risk Manager to determine appropriateness of such coverage's relative to County liability exposures
10. Prepares analytical reports outlining trends/patterns/findings and corrective action recommendations; helps ensure NMC compliance with regulatory reporting requirements; composes complex correspondence, including letters and memoranda of a sensitive nature.
11. Reviews, revises and/or develops departmental risk management and related departmental policies and procedures for executive approval in order to reduce the frequency of compensatory occurrences and to maintain adherence to current standards and requirements; researches, develops, and recommends methods to minimize loss through system/process changes.
12. Develops and implements educational programs for staff related to departmental risk issues, including timely identification and communication of potential and actual risk threats.

### Compliance Program Management

13. Plans, organizes, directs, and coordinates departmental compliance program activities to help ensure that hospital practices, policies and procedures comply with County, State and Federal law as well as hospital standards and ethics.
14. Identifies and establishes NMC's departmental standards to which employees will be held and the types of conduct which the compliance program is designed to eliminate; develops systems and methods for program implementation and evaluation; develops, implements, and audits program processes.
15. Develops, initiates, maintains, and revises policies and procedures for the general operation of the hospital compliance program and its related activities to prevent illegal, unethical or improper conduct; manages the day-to-day operations of the program; identifies the necessary participants in the compliance plan development and administration process; estimates resources necessary to accomplish the implementation of the program.
16. Monitors the legal compliance of hospital policies and procedures and recommends corrective actions as appropriate; investigates and resolves compliance violations and complaints; identifies policy and compliance issues and proposes solutions.
17. Coordinates the communication of compliance standards to all hospital employees; works with hospital department managers as appropriate to develop an effective compliance training program, including appropriate introductory training for new employees and ongoing training for all employees and managers.
18. Directs the preparation of special and recurring departmental reports and analytical studies on complex compliance-related issues; monitors and conducts periodic audits and activities at greatest risk to ensure proper compliance.

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19. Provides ongoing support, coaching and advice to hospital executive and management staff regarding compliance matters; works collaboratively with hospital management and staff to design systems and processes to assist them in addressing and preventing potential compliance issues.
20. Acts as an independent reviewer to ensure that departmental compliance issues/concerns within the hospital are being appropriately evaluated, investigated, and resolved; develops/implements corrective action plans for resolution of problematic issues.

### General Duties

21. Stays abreast of legislation, trends, and issues pertaining to assigned areas; reviews court decisions, proposed legislation, and new program/policy; confers with County Risk Manager and legal Counsel regarding impacts of legislation and court decisions; recommends and implements hospital strategies.
22. Ensures that all assigned functions comply with The Joint Commission standards as well as the requirements of other regulatory agencies.
23. Responds to concerns and/or complaints from patients, the public, medical staff, and/or other hospital managers pertaining to assigned areas in order to maintain positive customer relations; researches and investigates issues; prepares written or oral responses as needed.
24. Participates in organizational strategic planning activities; serves on committees and task forces to address specific issues and/or represent the department as assigned; attends meetings and conferences as assigned; participates on task forces and committees as assigned.
25. Prepares and administers assigned budgets; monitors, evaluates, and approves operational expenditures within limits of authority; performs cost/benefit analyses as appropriate; plans and estimates future costs including capital expenditures as appropriate; justifies requests for new equipment and/or personnel.
26. Conducts meetings and gives presentations.
27. Conducts special studies and projects as assigned; researches and analyzes information; prepares statistical and narrative reports and documents as needed.
28. Performs other duties as assigned.

## **QUALIFICATIONS**

A combination of experience, education, and/or training which substantially demonstrates the following knowledge, skills and abilities:

### Knowledge, Skills and Abilities

#### Thorough knowledge of:

1. Local, State and Federal laws, rules, regulations, and ordinances pertaining to acute care hospital operations and risk management.
2. The Joint Commission requirements and standards for acute care hospitals.
3. Principles, practices, and techniques of risk and compliance management, including program planning, fiscal/financial analysis, basic accounting, claims administration, liability/loss prevention and program implementation, administration and evaluation.
4. Effective research techniques utilize in the analysis of risk and organizational compliance.
5. Best practices in developing and administering compliance programs.
6. The principles and practices of accident prevention, including knowledge of basic State and Federal occupational safety requirements.

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7. Insurance company policies and procedures regarding claims, indemnification provisions, insurance pooling, reserves and actuarial studies.
8. Principles, practices, and techniques of policy development.
9. Report writing and basic statistics.
10. Principles and practices of business administration, including planning and organizing work, fiscal management, administrative problem solving, strategic planning and goal setting, and the implementation of effective solutions.
11. Methods of quality control and quality improvement in a health care administrative setting.

### Working knowledge of:

1. The organization and functions of County government.
2. The principles and practices of project management, including planning, organizing, coordinating, scheduling, and oversight of project progress.
3. Computer-based business applications, including those commonly used for word processing, database management, spreadsheets, e-mail communication, and Internet access.
4. Standard billing, reimbursement and insurance practices common to the health care industry, including those pertaining to Medi-Cal and Medicare.

### Some knowledge of:

1. Typical acute care hospital practices and routines.
2. Medical terminology.

### Skill and ability to:

1. Plan, organize, direct, and coordinate risk assessment and compliance activities within an acute care hospital.
2. Read, understand, and apply relevant County, State and Federal statutes, rules, ordinances, codes, regulations, administrative orders, and other governing regulations.
3. Plan, develop and implement effective risk and compliance policies and procedures in accordance with hospital goals and objectives
4. Evaluate the quality and effectiveness of the risk and compliance programs and activities and make necessary improvements.
5. Collect, interpret, and evaluate narrative and statistical data pertaining to administrative functions; prepare complex reports, memoranda, and other written materials.
6. Establish and control an operating budget.
7. Utilize standard business equipment.
8. Analyze and resolve problems and complaints.
9. Assess and prioritize multiple tasks, projects, and demands.
10. Assess and investigate sensitive and complex administrative and operational issues, evaluate alternatives and make logical recommendations based on findings.
11. Communicate clearly and concisely, both orally and in writing; effectively present information to groups and individuals.
12. Establish and maintain cooperative working relationships with others including physicians, nurses, administrators, attorneys, managers, and insurance carriers.
13. Maintain excellent public relations and provide courteous customer service.

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### **REQUIRED CONDITIONS OF EMPLOYMENT**

As a condition of employment, the incumbent will be required to:

Possess a valid California Class C driver's license or provide suitable transportation that is approved by the appointing authority.

### **EXAMPLES OF EXPERIENCE/EDUCATION/TRAINING**

The knowledge, skills and abilities listed above may be acquired through various types of experience, education or training, typically:

#### **Experience**

Five years of increasingly responsible professional or analytical experience in a health care institution that included responsibility for administering and monitoring risk management programs and/or compliance activities, including at least one year in an acute care hospital setting. Experience should clearly demonstrate skill in administering healthcare risk and/or compliance program functions and activities.

#### **Education/Training:**

Completion of course work from an accredited college or university leading to a bachelor's degree in health care administration, business administration, public administration, finance, health science, or a closely related field.

#### **Certification:**

Professional certification as a Certified Healthcare Compliance Professional (CHCP) from the American Institute of Healthcare Management, AND/OR certification as a Certified Professional in Healthcare Risk Management (CPHRM) from the American Hospital Association is preferred.

### **PHYSICAL AND SENSORY REQUIREMENTS**

The physical and sensory requirements for this classification include:

1. Ability to sit for extended periods of time at a desk.
2. Ability to move about the office.
3. Ability to frequently lift up to 10 pounds (e.g., books, binders, paperwork).
4. Physical dexterity sufficient to use a computer for preparing documents and communicating electronically.
5. Ability to drive a motor vehicle to meetings at various locations.
6. Ability to see well enough to read standard text and data on an electronic screen of a computer terminal and to read text on papers, books and forms.
7. Ability to hear normal speech, in-person and over the telephone, even in a noisy environment.
8. Ability to orally communicate with people in-person and/or over the telephone, even in a noisy environment.
9. Ability to constantly make decisions and concentrate.
10. Ability to work in an environment with occasional exposure to grief and death.
11. Ability to work in an environment with occasional risk of exposure to biohazards, infectious organisms, and hazardous chemicals.

## Hospital Risk Assessment and Compliance Officer

### CLASS HISTORY

Class Code: 14M32  
Established Date: December 2008  
Revised Date: new  
Former Title: new

### CLASS DATA

Job Group: 3  
EEO Category: P  
Work Comp. Code: 9043  
Bargaining/Employee Unit: X  
FLSA: E  
MOCO OT: N

Prepared by: CPS Human Resource Services

Approved by:

/s/Janine Bouyea  
NMC Human Resources Administrator

08/24/2009  
Date