

Jewish Renaissance Foundation

Job Description

<u>Title:</u>	Chief Medical Officer/Medical Director
<u>Status:</u>	Part-time/Hourly
<u>Program:</u>	Federally Qualified Health Center
<u>Location:</u>	JRF Community Health Center (JRF-CHC) - Edison, NJ
<u>Reports To:</u>	Chief Executive Officer
<u>Salary:</u>	\$78-\$88/Hourly

Who We Are:

Established in 1996, the Jewish Renaissance Foundation (JRF) is a nonprofit organization that currently serves more than 6,000 people in Middlesex County each year providing support services in the areas of Community Development and Training, Youth and Family Services, Employment Training, Education and Childcare, and Healthcare Services.

Job Summary:

Our FQHC is in immediate need of a Chief Medical Officer to join our small team. We're looking for an MD who can handle the patient-facing responsibilities as effectively as the administrative aspects of the role. Under the direction of the Chief Executive Officer, the Chief Medical Officer/Medical Director (CMO/MD) is responsible for providing leadership and direction to the JRF-CHC. The CMO will work collaboratively with the Executive Team on clinical strategy and direction to ensure execution of the health center's overall goals. The CMO/MD is also responsible for providing direct patient services by delivering quality healthcare in an ambulatory care setting, including adult medicine, pediatric, and GYN services. The CMO/MD may also be directed by the CEO to perform other duties in accordance with funding requirements, contractual agreements, and policies, procedures, and protocols established by HRSA.

Essential Responsibilities:

Operational and Administrative

- Assist Executive Team in ongoing development and implementation of medical policies, practices, and quality improvement procedures.
- Assist Executive Team in designing, implementing and evaluating educational health programs for the patients and clinical staff.
- Assist Executive Team in the completion of reports such as the UDS report, HEDIS measures, PCMH and Meaningful Use.
- Serve as the team lead in the team care delivery model of PCMH. They will be the lead clinician responsible for ensuring care coordination with the team.
- Recommend changes in all clinical and general areas to improve the patient flow, medical records, billing practices, and appointment practices.
- Responsible for reviewing all credentialing files of providers that are requesting and granted privileges; with a strong understanding of the NPDB, OIG and other reports to ensure health center staff are qualified and do not exhibit key factors that would exclude them from practicing within the state.
- Responsible for creating and overseeing the peer review process for all providers, creating a schedule, and ensuring that there are no issues related to chart or medical performance.
- Responsible for the directing and supervising of all clinical staff.
- Maintain an affiliation with professional groups, medical associations, and medical organizations, and represents the FQHC in meetings of these associations and organizations.
- Assist in developing health care plan and review of program requirements, and recommend changes when necessary.
- Assess and communicate recommendations for utilization of space, equipment, personnel and other resources.
- Prepares and submits reports as necessary to any requiring department.
- Involvement in all initiatives, concerns and retention involving patient safety, quality, infection control and risk management and patient service.

- Coordinates efforts for determined public and privately reported metrics that serve to provide benchmarks and establish the health center as a leading care provider.
- Provides service, guidance, and promotion of quality standards through audits, peer review, quality management, and education initiatives.
- Meets with the Medical Staff of other hospitals to effect ease of communications between facilities.
- Deals with clinical system problems, identifying cause and developing action plans for effective resolution.
- Performs other related duties as assigned or requested by upper management.

Clinical Care

- Provide complete, comprehensive, family-oriented outpatient care for patients throughout life cycle, including health examinations and treatment of medical conditions, to include follow-up, in an ambulatory care setting
- Interview patients to obtain medical history, to evaluate and treat patients in accordance with health center policies and procedures to ensure top quality treatment and service
- To manage acute and chronic illness, develop a plan of care, coordinate care and determine the need for case conference
- Make appropriate referrals and coordinate with both internal services of the clinic and/or external agencies for additional services required
- Work closely with Licensed Clinical Social Worker to provide continuity of care for mental health services
- Collaborate with all other Physicians, Nurse Practitioners, Assistants and/or any certified health care professionals who provide care to the facility's patients
- Perform minor procedures such as injections, immunizations, suturing and wound care
- Stabilize sprains and fractures; Order Physical Therapy and referrals to specialists
- Order and interpret diagnostic laboratory tests
- Maintain thorough and accurate records via EMR system, documenting patient evaluation and treatment, prescribing medications, and progress
- Provide clear written and verbal communications to patient and staff
- Adhere to the highest standards of medical practice, ethics, and professionalism at all times.

Qualifications: The ideal candidate will offer:

Education/Experience.

- Board Certified Physician in Family Practice, Pediatrics, or Internal Medicine (Family Practice Preferred)
- Licensure in New Jersey in good standing, or willingness to become licensed in New Jersey.
- Experience in a public health or community clinic setting providing primary care to patients of all ages from low-income economic status.
- Solid knowledge of PCMH accreditation processes.
- Solid knowledge of the UDS report, HEDIS measures, and Meaningful Use.
- Knowledge and ability to use and retrieve reports from an Electronic Medical Record (EMR) system.
- Familiarity with the federal and state rules, regulations, and practices pertaining to a Federally Qualified Health Center highly preferred.
- Authoritative knowledge of the principles of practice, principles of general management and specifically in personnel management and techniques in running a medical practice in a community health center.
- Ability to reach, stoop, walk, and lift 25 pounds.
- Ability to perform essential functions with or without a reasonable accommodation.

Skills/Abilities:

Leadership Skills/Qualities

- The ability to communicate effectively with not only staff, but with Executive Leadership, Chairing Committees for QA, Risk Management, etc. as well as the Board of Directors.
- Observing staff perform various tasks and measuring competency to ensure clinical staff is competent.
 - (i.e. Glucose Monitoring, Strep testing, Vaccine Administration,)
 - Communicating performance utilizing the assessment tools, with the ability to develop corrective action plans to ensure employees are performing at their best.

- The ability to develop policies and procedures necessary for the staff to follow based upon Evidence Based Guidelines outlined in their respective Association/Certification.
- Demonstrated management, leadership and executive capabilities. Enjoys working as a member of a cohesive team, and is good at doing so.
- Ability to teach and educate and to articulate positions effectively. Excels in effective coaching and counseling of employees, as well as definitive mentoring skills.
- The ability to tactfully speak, mentor, train, and discipline staff when necessary and appropriately.
- Ability to interact effectively and professionally with persons from diverse cultural, socioeconomic, education, racial, religious, ethnic and professional backgrounds

Analytical Skills

- Ability to run and interpret clinical, financial and administrative reports from various sources (EMR, budgeting, etc.), and enhance the medical center programs and measures. For example, CMO should be able to run a clinical measure report, analyze a measure that the health center is not meeting and develop a plan to increase the measure and communicate that to individuals on various levels. The knowledge of what a PDSA is and how to utilize it for Quality Assurance Assessments (required quarterly by clinical staff) is necessary to enhance patient satisfaction and outcomes.
- Requires the technical capability to know what reports such as the UDS report, HEDIS measures, PCMH and Meaningful Use reports entail, what data is needed, and how to retrieve the data from the EMR system. It is essential that they know these factors so that they can develop appropriate policies and procedures required for meeting measures and communicate to the staff how to capture the information appropriately within the EMR so that it registers.

Strategic Planning

- The ability to plan the clinical aspects of the organization as they align with the overall goals. Assessing current and future needs of the organization and creating a plan to promote long term growth. Adjusting clinical goals of the organization by analyzing internal data and national benchmarking.

**If you are interested in this position, please send your resume to: jobs@jrfnj.org
Attention: Wilhelya Bosques, Director of Human Resources**



Site Address: 1931 Oak Tree Rd. Edison, NJ 08820
Office Hours: Monday/Thursday 11am-7pm and Tuesday/Wednesday/Friday 9am-5pm
To learn more, visit <http://www.jrfnj.org/chc/>
