JOB DESCRIPTION

Title: Director of Quality Assurance and Improvement
Director of Infection Control
Compliance Officer
HIPAA Coordinator

Responsible to: Nursing Home Administrator

Definition:

1. Under the direction of the Administrator, is responsible for assessing, coordinating, developing, and directing the Quality Assurance and Improvement Program for the facility in accordance with State and Federal regulations.
2. Under the direction of the Administrator, is responsible for assessing, coordinating, developing, and directing the Infection Control Program for the facility in accordance with State and Federal regulations.
3. Under the direction of the Administrator, is responsible for assessing, coordinating, developing, and directing the Corporate Compliance and HIPAA Compliance Program.

Delegation of Authority:

The authority, accountability and responsibility, necessary for assigned duties according to this job description is delegated through the administrator.

Qualifications:

1. Must be, as a minimum, a graduate of an accredited Registered Professional Nursing Program.
2. Must possess a current unencumbered license to practice as a RN in the state of Pennsylvania.
3. Must have satisfactory personal and work related references.
4. Must have excellent knowledge of medical terminology and nursing methods and practices.
5. Must have as a minimum, one (1) year experience as a Supervisor in a hospital, long-term care facility, or other related health care facility.
6. Must demonstrate excellent communication skills.
7. Must possess the ability to plan, organize, develop, implement and interpret the programs, goals, objectives, policies, and procedures, etc., that are necessary for providing quality care.
8. Must have as a minimum, one (1) year experience in Infection Control.
9. Must have as a minimum, one (1) year experience in Quality Assurance and Improvement.
Desired:

2. Knowledge of OSHA regulations.
4. Demonstrated competence in management and leadership skills.
5. Minimum one (1) year experience in caring for the aged and chronically ill.
6. Computer skills including: access, excel, power point and word.

Duties and Responsibilities:

A. Committee Functions:

1. Serves on committees as assigned.
2. Serves as an administrative member of the safety committee.
3. Serves as a member of the safety subcommittee that reviews employee accidents and incidents.
4. Makes oral and written reports/recommendations to the Administrator, as necessary/required, concerning the operation of programs or services in the facility.
5. Serves as the Chairperson of the Quality Assurance and Improvement Committee.
6. Serves as a liaison among subcommittees, to focus on quality improvement in the ongoing operation of the facility.
7. Schedules required Infection Control meetings.
8. Serves as a member of the restraint reduction committee.

B. Quality Assurance and Improvement:

1. Plans, organizes, and directs the Quality Assurance and Improvement (QA and I) programs and activities in accordance with current rules, regulations, and guidelines that govern the long-term care facility.
2. Evaluates programs and makes changes as necessary for improvements.
3. Communicates revised plans and changes to facility management.
4. Performs concurrent review studies and prepares resulting reports as required.
5. Establishes and maintains tracking systems for recommendations of groups involved in quality assurance.
6. Develops, implements, and coordinates appropriate plans of action to correct/identify deficiencies.
7. Performs administrative requirements such as completing necessary forms, reports, etc., for submission to the Administrator as required.
8. Represents the facility at and participates in any meetings as directed.
9. Develops follow-up procedures for monitoring identified problem areas.
10. Develops monitoring tools, criteria, standards, assessment methodologies, evaluation and selection of priority concerns for other committees and departments that impact upon
resident care and safety.
11. Implements recommendations from the quality assessment and improvement committee as they relate to the quality assurance program.
12. Participates and assists in departmental studies and projects as assigned or that may become necessary.
13. Makes rounds of the facility to ensure quality standards are met and communicates the results of these findings to the appropriate manager.

C. Glucometers and CLIA Waiver:

1. Coordinates the Clinical Laboratory Improvement Amendment (CLIA) waiver and submits yearly documentation for blood glucose quality control checks.
2. Develops policies and procedures for finger stick blood glucose monitoring.
4. Provides education for new staff related to glucometers and their use.

D. Infection Control Program:

1. Directs infection prevention and control program through the collection and analysis of infection data; product/procedure evaluation; consultation on infection risk assessment, prevention and control strategies, education efforts directed at interventions to reduce infection risks; implementation of changes mandated by regulatory and licensing agencies; application of epidemiological principles to include activities directed at improving resident outcomes and provision of high quality services in a cost-efficient manner.
2. Acts as a resource for infection prevention and control in the facility.
3. Provides education for new employees on infection prevention and control practices in long term care and bloodborne pathogens.
4. Provides inservicing at Annual Education Day on infection prevention and control practices and bloodborne pathogens for employees.
5. Ensures that nursing personnel follow established infection prevention and control practices and procedures through regular rounds on nursing units.
6. Ensures that ancillary personnel follow established infection prevention and control practices and procedures through regular rounds in all areas of the facility.
7. Prepares required infection prevention and control reports.
8. Maintains facility-wide surveillance as determined by QA and I Committee and the Medical Director.
10. Provides education for residents and families on bloodborne pathogens, infection prevention and control and tuberculosis as needed.
11. Maintains current infection prevention and control knowledge and practice through educational opportunities and quarterly attendance at meetings for the Association for Infection Control and Epidemiology (APIC).
13. Monitors the incidence of residents with communicable diseases such as tuberculosis or chickenpox.
14. Reviews and updates facility Tuberculosis policies and procedures.
15. Applies and reads PPD skin tests when needed.
16. Administers Hepatitis B vaccinations when needed.
17. Directs resident immunization program for influenza and pneumonia.
18. Develops plans to identify and respond to acts of bioterrorism and evaluating unusual disease clusters for evidence of bioterrorism.
19. Works with contractors and the facilities maintenance department to ensure that construction debris does not infiltrate residents care areas.
20. Provides routine consultations to staff, residents and families on biohazards and infection control.

E. Corporate Compliance Officer and Health Insurance Portability and Accountability (HIPAA) Coordinator:

1. Serves as the focal point for corporate compliance and HIPAA activities.
2. Oversees and monitors implementation of the compliance program and HIPAA privacy and security programs.

F. Physician Credentialing:

1. Completes primary credentialing on all physicians.
2. Initiates and completes recredentialing on all physicians.
3. Maintains individual files on each physician with credentials.
4. Monitors quality improvement activities on each physician.
5. Develops and updates policies and procedures for credentialing physicians.

G. Policy and Procedure Development

1. Will develop, initiate and review polices mentioned above to include:
   a. Quality assurance and improvement
   b. Exposure
   c. Physician credentialing
   d. Glucometers
   e. Tuberculosis
   f. Bioterrorism
   g. Infection control
   h. Compliance
   i. HIPAA
   j. Others as assigned
2. Will advise, develop and consult with DON /ADON on Nursing Policy and Procedures as needed.
4. Will advise, develop and initiate policies for HIPAA compliance as needed.
5. Will advise Director of Safety Committee on annual review of Disaster Manual.

H. Miscellaneous Duties:

1. Able to coordinate and take over responsibilities for general orientation and annual education day when needed.
2. Performs routine monthly audits of all facility medication carts for autostop or expired medications.
3. Nursing medication error tracking for QA and I purposes.
4. Calibrates bladder scanner on a semi-annual basis.

I. Working Conditions:

1. Works in well-lighted/ventilated office areas, as well as throughout the building.
2. Sits, stands, bends, lifts, and moves intermittently during working hours.
3. Is subject to frequent interruptions.
4. Is involved with physicians, residents, family members, personnel, visitors, government agencies/personnel, contractors, etc. under all conditions and circumstances.
5. Is subject to hostile and emotionally upset residents, family members, personnel and visitors.
6. Communicates with medical staff, nursing staff, and other department supervisors.
7. Is willing to work beyond normal working hours and on weekends and holidays when necessary, as well as in other positions as needed.
8. Is involved in community/civic health matters and projects as appropriate.
9. Attends and participates in continuing educational programs.
10. Is subject to falls, burns from equipment, odors, etc. throughout the workday.
11. Is subject to exposure from infectious waste, diseases, conditions, etc., including exposure to the AIDS and Hepatitis B and C viruses.

J. Specific Requirements:

1. Must be able to read, write and speak the English language in an understandable manner.
2. Must possess the ability to make independent decisions when circumstances warrant such action.
3. Must possess the ability to deal tactfully with personnel, residents, family members, visitors, government agencies/personnel and the general public.
4. Must be knowledgeable of nursing and medical practices, as well as laws, regulations, and guidelines pertaining to long-term care administration.
5. Must possess leadership and supervisory ability and the willingness to work harmoniously with professional and non-professional personnel.
6. Must possess the ability to plan, organize, develop, implement, and interpret the
programs goals, objectives, policies and procedures, etc., that are necessary for providing quality care.
6. Must have be enthusiastic, tactful and have a cheerful disposition.
7. Must be able to handle difficult residents and families.
8. Must be willing to seek out new methods and principles and be willing to incorporate them into existing facility and nursing practices.

K. Physical Requirements:

1. Must be able to move intermittently throughout the workday.
2. Must be able to cope with the mental and emotional stress of the position.
3. Must possess sight/hearing senses, or use prosthetics that will enable these senses to function adequately so that the requirement so this position can be fully met.
4. Must function independently, have flexibility, personal integrity, and the ability to work effectively with residents, families, personnel and support agencies.
5. Must be in good general health and demonstrate emotional stability.
6. Must be able to lift a minimum of 50 pounds.
7. Must be willing to perform tasks that may involve exposure to blood or body fluids.
8. Push/pull medication carts weighing approximately 50-75 pounds.

RESIDENT AND STAFF SAFETY:

Employees are responsible for actively participating in Valley View Nursing Center resident and staff safety improvement. Employees have the responsibility to: Identify processes or systems that could potentially lead to errors and adverse events. Know and follow organizational and department policies and procedures applicable to assigned duties. Avoid taking shortcuts or encouraging others in the organization to shortcut established policies and procedures as a means of facilitating resident care. Use sound judgement and awareness of potential hazards before taking action. Participate in required departmental and organizational resident and staff safety programs. Promptly report serious events and incidents in accordance with established facility policy and procedure. Assume responsibility for one’s own professional development and education to improve individual performance and facility resident safety. Work safely, as a condition of continued employment.

HIPAA Privacy Requirements

The Employee acknowledges and agrees that while performing job responsibilities for Valley View Nursing Center, the employee may create, receive, or review certain Resident Protected Health Information (PHI), as such term is defined in the Health Insurance Portability and Accountability Act of 1996 and the regulations promulgated thereon (The “HIPAA Privacy Rule”). The Employee further agrees to use and/or disclose PHI only as permitted or required to do
their job, to use all reasonable efforts to maintain the security of the PHI, and to prevent the unauthorized use and/or disclosure of the PHI. Employee also understands and agrees to maintain PHI as confidential, and not divulge such information to any unauthorized third party for which PHI was not intended.

Acknowledgement:

I have read the above job description and fully understand the requirement set forth therein. I hereby accept this position and agree to abide by requirements set forth and will perform all duties and responsibilities to the best of my ability.
I understand that as a result of my employment, I may be exposed to the AIDS and Hepatitis B and C viruses.

I further understand that my employment is at-will, and thereby understand that by employment may be terminated at-will by the facility or myself, and such termination can be made with or without notice.

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Date

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Director of Quality Assurance and Infection Control

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Date

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Administrator

Initiated: 4/2000
Reviewed: 6/02, 10/05, 6/06