

**COUNTY OF SOLANO**  
**QUALITY ASSURANCE MANAGER**

**DEFINITION**

Develops and implements a quality management program for Mental Health Services, to include ensuring compliance with accreditation guidelines and industry standards for behavioral health services, ensuring compliance with federal, state and local laws and regulations, managing a centralized mental health medical records unit, and certifying contract agency providers for Short-Doyle/Medi-Cal services.

**CLASS CHARACTERISTICS**

This single position classification is characterized by the responsibility for managing the Quality Assurance Program of a large human service agency to meet state, federal, and local regulations. Incumbent assumes responsibility for program development and management including responsibility for the development and implementation of goals, objectives, policies and priorities for all assigned operations and activities.

**SUPERVISION RECEIVED AND EXERCISED**

Receives direction from the Health & Social Services Deputy Director of Mental Health.

Provides supervision to clerical, professional, and supervisory staff.

**EXAMPLES OF DUTIES** - *Duties may include but are not limited to the following:*

Supervises, directs, and evaluates assigned staff, processing employee concerns and problems, directing work, counseling, disciplining, and completing employee performance appraisals; conducts interviews, checks references, and makes hiring recommendations.

Coordinates daily work activities: organizes, prioritizes, and assigns work; monitors status of work in progress and inspects completed work; confers with assigned staff, assists with complex/problem situations, and provides technical expertise.

Provides principle staff support, and staffs the Quality Leadership Committee (QLC) and chairs Quality Improvement Committee; develops annual quality workplan; performs annual evaluation and proposes revisions to program description and workplan; provides templates for committee workplans and minutes; develops work plan and annual QLC calendar with timetable for committee reports and data analysis reports; provides data analysis and charts review findings and other information.

Certifies and re-certifies contract agency providers to provide Short-Doyle/Medi-Cal services; reviews Short-Doyle/Medi-Cal certification applications for accuracy/completeness and begins certification process; performs site reviews; identifies areas needing plans of correction; notifies State Department of Mental Health of certification status of contracted agency providers; coordinates training for contractors.

Maintains current policies and procedures manual for Mental Health Services; identifies needs and/or responds to requests for new/revised policies and procedures; reviews draft policies and procedures and approves final draft for circulation; obtains review and approval from Mental Health Director and administrative team; assures final adoption.

Assists committee chairs to develop committee workplans and annual QLC calendar; assures that committee minutes and reports are regularly provided to QLC.

Develops and evaluates annual utilization management program; identifies charts scheduled for upcoming review; reviews utilization review summary report to identify areas of compliance or non-compliance, acknowledge system strengths, and make recommendations for improvement.

Develops process and calendar for utilization review; provides oversight, reviews/analyzes data through committee process, and reports findings and recommendations to QLC; provides technical assistance to technical and clinical reviewers; develops training for technical and clinical reviewers.

Oversees coordination of medication monitoring; identifies charts scheduled for upcoming review; reviews and analyzes data through committee process; reports findings and recommendations to QLC.

Oversees site reviews and chart reviews for contracted individual providers; reviews and analyzes findings through committee process; reports findings and recommendations to QLC.

Oversees license verification of internal providers; reviews credentialing, re-credentialing, and license verification data through committee process; reports findings and recommendations to QLC.

Manages centralized mental health medical records unit; assures medical records provide timely, accurate documentation of services delivered; ensures security and confidentiality of medical records and compliance with policies and procedures; assures timely access of client information; provides general oversight for chart preparation, retention and destruction schedules, releases of information, and other actions; monitors productivity of central medical records unit and redistributes workload as needed.

Develops and implements documentation standards for internal/external providers.

Develops tools to support the Quality Management program.

Develops and oversees quarterly quality management trainings; oversees, develops, and/or provides additional staff trainings as required; prepares and assembles training materials.

Oversees clinical forms development for new/revised forms; responsible for final adoption of forms.

Oversees contracts; tracks contractual usage and makes recommendations for continuing needs.

Reviews unbilled Medicaid claims reports to identify Medi-Cal claims blocked by automated system due to missing authorization.

Assists in developing budget for area of assignment; monitors expenditures to ensure compliance with approved budget.

Attends various meetings and makes presentations as needed; creates, gathers, reads, photocopies, and distributes materials for meetings.

Prepares or completes various forms, reports, correspondence, and other documents.

Monitors inventory of office equipment, training materials, forms, and supplies; ensures availability of adequate materials to conduct training sessions and work activities; initiates orders for new/replacement materials.

### **JOB RELATED AND ESSENTIAL QUALIFICATIONS**

#### **Knowledge of:**

Policies, procedures, and activities of the County and of departmental practices as they pertain to the performance of duties relating to the position; agency goals and purposes; terminology, principles, and methods utilized within the department.

Laws, ordinances, standards, and regulations pertaining to specific duties and responsibilities of the position.

Principles, practices, procedures, and professional standards associated with quality assurance program management, utilization review program management, and quality assurance and utilization review processes; techniques involved in evaluating the effectiveness of the peer evaluation process and utilization process.

Principles, practices, procedures, terminology, and professional standards associated with medical records management.

Techniques involved in evaluating the effectiveness of recordkeeping systems.

Federal, state, and local financing and the effect of such financing in relation to maintenance of medical records and the utilization review process.

Theories of human growth and development and psychopathology.

Principles and practices of employee supervision and training.

Computers and software programs typically used in the position; computerized data collection, retrieval, and analysis.

**Skills to:**

Operates a personal computer and other general office equipment.

**Ability to:**

Comprehend, interpret, explain, and apply a variety of complex laws, regulations, procedures, and other information related to quality assurance and records administration.

Understand program objectives in relation to departmental goals and procedures.

Plan, organize, and manage a quality assurance and records management program.

Evaluate program effectiveness.

Identify and evaluate the need for developing proposed changes in program practices and procedures.

Supervise, advise, consult with, and train other individuals engaged in quality assurance and records administration.

Effectively communicate and interact with subordinates, supervisors, department managers, the general public, outside agencies, and all other groups involved in the activities of the department; communicate effectively with people of diverse socioeconomic backgrounds and temperaments; secure cooperation and teamwork among professional and support staff.

Make decisions and independent judgments; use independent judgment and work with little direct supervision as situations warrant.

Collect and analyze data to draw logical conclusions and make appropriate recommendations.

Prepare narrative and statistical reports; maintain accurate records and document actions taken.

Research regulations, procedures and/or technical reference materials.

**Experience and Education/Training**

**Experience:**

Two (2) years previous experience and/or training involving quality management program coordination, delivery of health care services, utilization management program coordination,

quality assurance and quality control processes, utilization review processes, medical records management, clinical practices/procedures, project coordination, leading/facilitation of committees and groups, training, interpretation and implementation of policies/regulations, and supervision.

**Education/Training:**

Bachelor's degree is required in Social Work or Business Administration, Sociology, Health Care Administration or related field.

**SPECIAL REQUIREMENTS**

Possession of a valid Class C California Driver's License is required.

**SUPPLEMENTAL INFORMATION**

Independent travel is required.

**ADA COMPLIANCE**

**Physical Ability:** Tasks require the ability to exert light physical effort in sedentary to light work, but which may involve some lifting, carrying, pushing and/or pulling of objects and materials of light weight (5-10 pounds). Tasks may involve extended periods of time at a keyboard or work station.

**Sensory Requirements:** Some tasks require visual perception and discrimination. Some tasks require oral communications ability.

**Environmental Factors:** Essential functions are regularly performed without exposure to adverse environmental conditions.

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Director of Human Resources

**Established Date:** April 1990

**Revised Date:** February 2003

**Revised Date:** May 23, 2003

**BOS Date:** June 30, 2003