

DIRECTOR OF HEALTH INFORMATION MANAGEMENT

GENERAL DUTIES:

Manages the daily affairs of the Health Information Management Program, oversees program staff, and provides consultation to the Quality Assurance program.

SPECIFIC DUTIES:

1. Monitors and assures program compliance with internal and external service requirements.
2. Develops, monitors, and assures the achievement of annual program goals and objectives, including program-specific outcomes measures.
3. Devises strategies for tracking and managing unit performance and for compliance with management expectations: creates internal data reports, analyzes reports provided by other sources, and uses data to drive planning and problem solving efforts.
4. Monitors and manages productivity of individual program staff: assigns and delegates program work, assists staff in developing work management skills, and proposes corrective action, where required.
5. Assures that program staff comply with the organization's policies and procedures: models compliance, provides guidance in interpretation, provides feedback and encouragement, demands corrective action when required, documents recurring difficulties, and recommends corrective action when performance problems persist.
6. Schedules unit meetings, as needed, to collect and distribute information, provide feedback and address unit concerns. Keeps unit staff informed of program progress in meeting unit goals and objectives.
7. Encourages positive morale among program staff: provides positive feedback, keeps staff informed of management decisions, responds to staff questions, works to resolve staff complaints, demonstrates positive attitude toward work and work requirements.
8. Works cooperatively with other Program Directors to assure service quality and coordination, solve case-related difficulties, and resolve program-to-program problems or concerns.

9. Keeps apprised of emerging best practices, especially at they relate to health information management, and advocates for the use of best practice techniques in the program.
10. Keeps the Vice President/Chief Operating Officer (COO) apprised of concerns related to program performance, staff performance, or program and service needs; and works with the Vice President/COO to implement problem-solving action.
11. Assists the President/CEO in organization-wide planning and problem solving, acts as program advocate in determining the organizations priorities and procedures, and provides input into the development of the organization's annual plan and budget.
12. Represents the unit in management meetings.
13. Works closely with the Human Resources Manager to screen, interview, and recommend candidates for open positions within the unit to the Vice President/COO.
14. Orients and trains new program staff: devises an orientation schedule, reviews job expectations, assures exposure to agency policies and procedures, completes training in documentation requirements, as they relate to health information management, monitors performance and provides feedback.
15. Assists the Vice President/COO in determining salary recommendations for new hires and annual pay increments for continuing staff based on staff performance.
16. Provides or assures the appropriate supervision for program staff.
17. Evaluates the job performance of program staff on an annual basis, utilizing standard forms and procedures, and provides ongoing encouragement and direction regarding performance improvement.
18. Assures patient medical records in all office locations, whether paper files or electronic records, are maintained in accordance with agency guidelines, ODMH standards, HIPAA requirements, and other applicable laws and regulations.
19. Oversees the operation of the organization's electronic clinical record system: participates on committees and task forces related to system development, identifies and problem solves implementation issues, keeps management informed of issues and concerns with the implementation and use of the electronic clinical record, and assists in training new and current staff on the use of the system.

20. Serves as a member of the agency Quality Assurance Committee: maintains official QA records, coordinates reviews of records for completeness, keeps the committee aware of potential problems or concerns; and assists in training new staff in documentation and Quality Assurance requirements.
21. Manages the organization's document management system: scans materials into electronic patient records, trains office staff in the use of the scanning software and the categorization of scanned materials, keeps management informed of issues and concerns with the use of the document management system, assists in training new staff in the access and use of the document management system.
22. Assures staff access to patient files during regular office hours.
23. Monitors clinical staff compliance with record-keeping requirements, informs staff of needed corrections, assures corrections are made, and keeps supervisors and the QA committee informed of any significant or repeated failure to comply with organizational requirements.
24. Coordinates and assures response to requests for information from outside agencies or professionals.
25. Serves as a consultant to outpost office support staff on items related to the storage, management, and access to health information maintained in outpost offices.
26. Assures that patient records are updated, as necessary, in the management information system.
27. Assures timely and accurate filing of both paper and electronic medical records materials.
28. Oversees the clinical records destruction process.
29. Assures an adequate supply of medical record's forms for use by staff.
30. Assures timely closing of case files.
31. Attends and participates in staff meetings, management meetings, Quality Assurance committee meetings and supervisory sessions, as required, and in other committees, quality improvement teams and task forces, as assigned.
32. Keeps up to date with required organizational trainings; and assures that all program staff are similarly in compliance.

33. Abides by the corporation's policies and procedures, with special attention to the Policy on Patient Rights, the Confidentiality Policy, the Counseling Center's Code of Ethics and the Code of Ethics for his/her particular profession.
34. Scans all client related faxes and mail into electronic health record system and distributes as necessary.
35. Performs other related duties, as assigned, or as necessary for effective and efficient operation of the program and/or the organization.

SUPERVISORY RESPONSIBILITIES:

1. Oversees and administratively supervises the work of all program staff
2. Assures that clerical support staff in other offices who assist with maintaining patient records are in compliance with health information management procedures when dealing with patient medical records

WORKING CONDITIONS:

1. Position is office-based with most duties performed during regularly scheduled business hours.
2. Position requires standing for significant periods of time, plus bending and lifting stacks of medical records

CLINICAL SUPERVISOR: None required

ADMINISTRATIVE SUPERVISOR: Vice President/Chief Operating Officer

POSITION TYPE: Exempt

POSITION CLASSIFICATION: Director of Health Information Management

WORKER CREDENTIALS/CHARACTERISTICS:

1. Credentialed as a RHIT, RHIA or eligible for such certification highly preferred
2. Ability to communicate effectively in written and oral form
3. Basic computer skills in data entry, and an operational knowledge of Microsoft Office applications, sufficient to devise a document, create and utilize a simple spreadsheet and manage a basic database.
4. Experience in providing supervision, or evidence of both an ability and a commitment to develop these skills

5. Experience in management and/or administration, or evidence of both an ability and a commitment to develop these skills
6. Capacity for self-motivation and the ability to deal appropriately with sensitive issues
7. A commitment to quality care including timely and accurate documentation
8. Ability to relate effectively to coworkers at all levels of the organization
9. Ability to assertively demand compliance with records requirements from a variety of professional staff
10. A valid driver's license, evidence of personal automobile insurance and of insurability by the organization's automobile liability insurance carrier; or, in the absence of such documentation, the ability to complete the essential functions of the position within whatever driving and travel restrictions might be imposed by the Center.

PERFORMANCE INDICATORS:

1. Substantial compliance (80%) with the specific program goals included in the approved annual plan
2. Timely and accurate completion of paperwork and assigned program tasks
3. Satisfactory, or better, ratings on the annual performance evaluation
4. Evidence of sincere attempts to provide good customer service

(8/91)

(MDRECORD.JD 8/96 rev.)

(MdRecDir.JD 8/97 rev.)

(MdRecDir.JD 7/99 rev.)

(rev. 7/03)

(rev. 7/05)

(Revised: 9/09)

(Revised: 6/12)

(Revised: 8/13)

(Reviewed: 12/14)

(Revised: 7/15 – Salary Only)

(Revised: 7/17 – Salary Only)

(6/18)

(10/21)