

**VALLEY COMMUNITY HEALTHCARE**  
**Job Description**

**POSITION:** Associate Medical Director

**REPORTS TO:** Chief Medical Officer

**HOURS:** 40 HOURS PER WEEK (FULL-TIME)

**FLSA STATUS:** EXEMPT

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**POSITION SUMMARY**

Under the supervision of the Chief Medical Officer (CMO), the Associate Medical Director (AMD) shares responsibility for the day-to-day supervision and oversight of clinical services, as well as providing direct patient care. Working as a collaborative partner with the Chief Medical Officer, the AMD provides real-time analysis and recommendations for improvement in clinical operations across multiple levels. In addition, the position will work closely with VCH leadership at all clinic sites to provide both high quality and efficient health care. The Associate Medical Director may be called upon to represent VCH externally as well. The AMD will demonstrate a commitment to and understanding of VCH Service Excellence Standards in the performance of all duties and responsibilities.

**SPECIFIC DUTIES AND RESPONSIBILITIES UNDER DIRECTION OF THE CHIEF MEDICAL OFFICER**

**1. Clinical**

- Provides direct patient care to patients, with emphasis on the Patient Centered Medical Home model of healthcare delivery per specialty, including adults, children and infants.
- Leads and facilitates implementation of patient centered medical home protocols in clinical practice.
- Assesses and manages acute and chronic medical conditions.
- Performs preventive health maintenance items including but not limited to cancer screening and immunizations.
- Educates patients and family members in health promotion, disease prevention and birth control methods as appropriate.
- Assists in preparation and selection of patient education materials.
- Provides preliminary telephone consultation to patients, when needed. Leads staff in contacting patients for follow-up care as needed depending upon medical necessity or as part of clinic quality improvement projects.
- Helps coordinate efficient flow of patients through the system of care.
- Helps monitor status and quality of referrals placed by clinicians at VCH.
- Provides supervision of the clinical staff.

**2. Administrative**

- Ensures adequate provider staffing is available for all clinical sessions and works with CMO in anticipation of future shortfalls. Addresses site provider needs and assists in Provider Staffing Plan, provider scheduling, and room assignments, as appropriate.

- Helps onboard, trains, coaches, supervises, and disciplines providers under direct supervision, in coordination with the CMO.
  - Works with the HR department and Lead Clinicians in recruiting, screening and hiring of new providers, as directed by the Chief Medical Officer.
  - Monitors providers' productivity and ensures provision of high quality of services.
  - Responsible for monitoring and coaching providers to meet Quality Measure targets and goals.
  - Responsible for the implementation, monitoring, and improvement of the Provider Incentive programs.
  - Participates in the Credentialing and Peer Review Committee and process.
  - Participates in Quality Assurance, peer review, and maintains confidentiality.
  - Participates in Quality improvement committee, performs chart reviews, and implements process improvement programs both system wide and department wide.
  - Leads department specific meetings and administrative tasks as assigned by CMO.
  - Participates or collaborates with marketing and other health education staff on education and patient recruitment health fairs.
  - Maintains current knowledge-base and appropriate licensure.
  - Responsible for meeting productivity goals for all providers and self.
  - Assists in the development of strategic initiatives for the department and VCH.
  - Coordinates with the Director or Nursing on related nursing needs including support of clinical staff such as medical assistants and other staff nurses.
  - Coordinates with Chief Operating Officer (COO) on any issues or needs to improve operational flows.
  - In partnership with the CMO, designs, implements, and re-evaluates ongoing medical/clinical protocols to be followed in the clinic's practice areas.
  - Writes and delivers Annual Performance Appraisals. CMO will review and provide input.
  - Suggests and participates in in-services and other trainings for clinical staff.
  - Prepares/reviews/approves monthly departmental clinician schedule. Responsible for approving all time off requests in compliance with VCC Policies and Procedures.
  - Ensures compliance with license requirements as stated in Title 22.
  - Performs miscellaneous job-related duties as assigned.
3. **Compliance:** Ensures services provided comply with regulatory agency requirements, contractual obligations and funding sources.
- Performs/supervises functions, duties, and services in compliance with regulatory agencies, contractual obligations and funding sources such as CHDP, EWC, Medi-Cal, HCLA, MHLA, FPact, and Title X.
  - Monitors and ensures compliance with clinical evidence based guidelines for General Medicine, Women's Health, Pediatrics, Adolescent Medicine, Family Medicine, and other specialty care provided by VCH providers.
  - Oversees the VCH Clinical Risk Management program to reduce the risk of adverse events and outcomes that could result in harm to patients, medical malpractice or other health or health-related litigation; reviews and updates risk management policies and operating procedures, as needed. Participates in developing and implementing safety programs for clinical and patient care environment. Responsible for the management and processing of FTCA claims-related activities and serves as the claims point of contact.
  - Participates in the review, revision, and implementation of policies and procedures to ensure medical practices are in full compliance with regulatory requirements.
  - Oversees the maintenance of records/documents in accordance with clinic policies and procedures, contractual obligations, regulations, and funding sources.

- Monitors strict adherence to: universal infection precautions as established by the Center for Disease Control and Prevention; Occupational Safety and Health Administration; DHS/OA; and clinic standards.

#### **4. Communication**

- Creates and maintains effective interpersonal relationships with all employees; keeps employees informed of changes which may affect the work environment.
- Communicates effectively with all levels of staff throughout the clinic by consistently utilizing and facilitating effective strategies to encourage collaborative problem solving and decision making.
- Trouble shoots difficult problems or situations and takes independent action to resolve them.
- Through teamwork and accountability exhibits behaviors and attitudes of courtesy and respect for all staff at the clinic in accordance with its mission and values.
- Establishes and maintains effective and positive working relationships with representative of outside agencies, government entities, vendors, as well as other clinical staff, volunteers, and staff; represents the clinic site when appropriate.
- Ensures patient confidentiality and demonstrates complete discretion when discussing patient information.

#### **5. Fiscal management**

- Practices cost-effective medicine by utilizing appropriate and evidence based laboratory, radiological, specialty referral, and prescription orders.
- Completes documentation for clinic sessions in a timely manner ensuring accuracy and completeness to ensure the clinic can collect funds for the services.

#### **Minimum Qualifications:**

These are general guidelines based on the minimum experience normally considered essential to the satisfactory performance of this job. Individual abilities may result in some deviation from these guidelines. To perform effectively in this position, the candidate must have:

- A valid and unrestricted California Medical Board MD or DO license.
- Board certification in Family Medicine, Internal Medicine, Pediatrics, or Obstetrics and Gynecology is strongly preferred.
- Current DEA registration (all schedules) and a minimum of a BLS certificate.
- Competency in providing evaluation and treatment in ambulatory care.
- Exhibits a high level of professionalism.
- Experience in Federally Qualified Health Centers and/or an NCQA recognized Patient Centered Medical Home is preferred.
- Working knowledge of state of the art medical scientific and treatment methods in area of specialty.
- Understanding of current medical, educational, and psychosocial intervention procedures.
- Ability to perform clinical duties within established guidelines in an organized, efficient manner.
- Ability to relate and communicate well to all cultural and ethnic groups in the community including fluency in written and spoken English. Bilingual skills in written and spoken Spanish are preferred.
- Ability to complete and maintain records in accordance with procedures utilizing an electronic health record system.
- General computer skills in Microsoft Office programs (Word, Excel, etc.) and patient medical

- record system.
- Current California driver's license or identification card.

**Physical Demands:**

- Ability to perform physical examination of patients.

**Environment:**

- Risk of exposure to infectious disease

**\*Responsibilities and tasks outlined in this document are not exhaustive and may change as determined by the needs of the company.**

**VALLEY COMMUNITY HEALTHCARE IS AN EQUAL OPPORTUNITY EMPLOYER**

**ACKNOWLEDGEMENT:**

I acknowledge I have received, read, understand and will comply with my job description.

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Employee Printed Name

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Employee Signature

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Date

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Supervisor Signature

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Date