

RISK MANAGER - WCMC

DISTINGUISHING FEATURES OF THE CLASS: Under general supervision, an incumbent of this position directs, manages and coordinates the risk management function at the Westchester Medical Center to prevent or minimize risk of operational exposure and losses to property. Responsibilities include overseeing the investigations of incidents, to identify potential or existing risks or liabilities for financial losses; investigate claims and incident reports; develop and implement risk control; review and monitor the effectiveness of existing practices and procedures, making appropriate recommendations as needed. Supervision is exercised over professional and support staff. Does related work as required.

EXAMPLES OF WORK: (Illustrative Only)

Determines risks of operational exposure at the Medical Center and attempts to eliminate or minimize such risks;

Administers the Medical Center's Insurance Program across all lines of coverage and works with captive managers, brokers, commercial carriers, excess carriers for professional and general liability, property coverage, etc.;

Conducts detailed evaluations and analyses of risk factors using frequency and severity probabilities and an evaluation of the Medical Malpractice Self-Insurance Fund;

Develops and implements Medical Center Risk Management policies and procedures for accurate incident reporting, claims monitoring and legal defense for all Medical Center incidents, accidents and claims;

Recommends practices, policies and procedures with a view to reducing costs and losses;

Gathers data to identify the underlying causes of incidents and formal notices of claim;

Participates in the administration of the medical malpractice and 6N Fund including reserves established for funding self-insured losses and for self-insured retentions and deductibles;

Coordinates activities with Quality Assurance and Peer Review programs for compliance with standards and works with the Vice President for Patient Safety;

Insures compliance to JCAH, NYS DOH, and WCMC standards on Risk Management/Loss Prevention issues and incident reporting requirements;

Develops and participates in the risk management training programs and in-service education courses designed to reduce risk and promoted safety consciousness;

Reviews all major third party liability claims and incident investigations that could lead to a claim;

Administers the processing of all losses and claims of the Medical Center;

EXAMPLES OF WORK: (Illustrative Only) (Cont'd.)

Reviews all Medical Center contracts for appropriate indemnification provisions prior to signature in coordination with the contract division of the General Counsel's office;

Establishes and maintains a daily working relationship with claims investigation firm for medical malpractice;

Reviews, evaluates and determines action to be taken on lost and stolen County property;

Maintains records of insured and uninsured losses that may fall below deductible or retention levels and of all claim expenses;

Forwards all incident reports for input into data base known as Indra;

Receives and accepts all notices of claims, summons and complaints and/or order to show cause, etc.;

Develops procedures to insure the implementation of informed consent for medical procedures by patients;

Supervises the loss control program so as to minimize future losses involving patients, visitors, other third parties and property;

Uses computer applications or other automated systems such as spreadsheets, word processing, calendar, e-mail and database software in performing work assignments;

Accesses protected health information (PHI) in accordance with departmental assignments and guidelines defining levels of access (i.e., incidental vs. extensive);

May perform other incidental tasks, as needed.

REQUIRED KNOWLEDGE, SKILLS, ABILITIES AND ATTRIBUTES: Comprehensive knowledge of risk management in a hospital or health delivery setting; thorough knowledge of the principles, practices and procedures and techniques utilized in planning and conducting confidential investigations; thorough knowledge of the principles and practices of organization and administration; thorough knowledge of JCAHO, New York State Department of Health, Public Health Law and case law as they related to general hospital administration and Risk Management; ability to coordinate the work of others; ability to deal with a wide range of administrative, medical, professional and clerical personnel; ability to communicate effectively, both verbally and in writing; ability to effectively use computer applications such as spreadsheets, word processing, calendar, email and database software in performing work assignments; ability to read, write, speak, understand, and communicate in English sufficiently to perform the essential duties of the position; sound judgement; common sense; resourcefulness; initiative; physical condition commensurate with the requirements of the position.

MINIMUM ACCEPTABLE TRAINING AND EXPERIENCE: A Bachelor's Degree* and seven years of professional experience in the field of risk management, three of which must have been in the health care field.

SUBSTITUTION: Satisfactory completion of 30 credits* towards a Law Degree* or a Master's Degree* may be substituted on a year-for-year basis for up to 4 years of the above stated experience exclusive of the three years in the health care field.

*SPECIAL NOTE: Education beyond the secondary level must be from an institution recognized or accredited by the Board of Regents of the New York State Education Department as a post-secondary, degree-granting institution.

NOTE: Unless otherwise noted, only experience gained after attaining the minimum education level indicated in the minimum qualifications will be considered in evaluating experience.