

Program # 40032 - Medical, Mid-level and Nursing Directors

Version 2/01/2005 s

Priority: Safety Net Services

Lead Agency: Health Department

Program Offer Type: Support

Program Contact: REYES-De-OEHLER

Related Programs:

Frameworks: School Aged Policy Framework, Early Childhood Framework, Poverty Framework, 10-year Plan to End Homelessness

Executive Summary

The Directors ensure that Physicians (MDs), Nurse Practitioners (NPs), Physician Assistants (PAs), Registered Nurses (RNs), & Licensed Practical Nurses (LPNs) have the necessary training, skills and knowledge to practice competently; patient care adheres to all pertaining regulations; clinical quality improvement initiatives are effective and appropriate for the communities we serve; and patient care is safe, cost-effective, and based on proven best practices. Directors are accountable for legal conformance, quality and safety of patient care, need-based and scientifically-justified service design, and efficient use of public funds.

Program Description

Medical Services provides the following to all clinical programs:

1. Oversees initiatives to improve quality, safety, cost-effectiveness, and access; develops and implements patient care guidelines, policies, procedures.
2. Recruits, hires, confirms credentials and monitors provider performance; oversees in-house nursing and medical educational programs.
3. Sets and monitors provider and nursing productivity goals.
4. Investigates and remedies untoward clinical incidents and errors.
5. Ensures that patient care meets all rules, regulations and standards set forth by regulatory agencies, contractors, grantors and accrediting agencies.
6. Ensures that administrative practices are consistent with quality patient care.

Program Justification

Oregon State Board of Nurses, Oregon State Board of Medical Examiners, Medicaid and Medicare rules and regulations, Joint Commission on Accreditation of Healthcare Organizations, stipulations of multiple federal and state grants, CareOregon contract, Central City Concern contract all require appropriate supervision of anyone with a medical licensure.

Performance Measures

1. 80 % of diabetics have two HgbA1c tests (standard for diabetic control) in 12 months.
2. Number of annual visits meets budgeted goal.
3. Average number of days to next available appointment is three or less.

Summary of last year's program results and this year's expected results

- | | |
|-------------------|---------------------|
| 1. FY04: 43.2% | Projected FY05: 60% |
| 2. FY04: 92.1% | Projected FY05: 96% |
| 3. FY04: 5.5 days | Projected FY05: 3.0 |

Program Mandate: 2 Mandated Program with Funding/Service Level Choice

Oregon State Board of Nurses, Oregon State Board of Medical Examiners, Medicaid and Medicare rules and regulations, Joint Commission on Accreditation of Healthcare Organizations, stipulations of multiple federal and state grants, CareOregon contract, Central City Concern contract.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2005	2005	2006	2006
Personnel	\$1,984,589	\$95,005	\$784,562	\$52,925
Contracts	\$0	\$154,500	\$158,051	\$13,456
Materials & Supplies	\$250,583	-\$144,284	\$62,934	\$7,826
Internal Services	\$131,908	\$14,674	\$116,141	\$10,100
Capital Outlay	\$0	\$0	\$0	\$0
Subtotal: Direct Exps:	\$2,367,080	\$119,895	\$1,121,688	\$84,307
Administration	\$0	\$0	\$19,893	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$19,893	\$0
Total GF/non-GF:	\$2,367,080	\$119,895	\$1,141,581	\$84,307
Program Total:	\$2,486,975		\$1,225,888	
Program FTE	0.00	0.00	6.37	0.48
Program Revenues				
Indirect for dep't Admin	\$9,962	\$0	\$5,062	\$0
Other / Miscellaneous	\$0	\$119,895	\$0	\$84,306
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$9,962	\$119,895	\$5,062	\$84,306

Explanation of Revenues**Significant Program Changes**

None anticipated.