



POSITION DESCRIPTION

Quality Nurse Specialist II

JOB_CODE: 00579 Quality Nurse Specialist II
JOB_CODE: 01845 Quality Nurse Specst II (NE)
JOB_CODE: 02027 Quality Nurse Specialist II(NE)

General Information

ENTITY NAME: Vidant Health
EFFECTIVE DATE: As of 31 July 2019
DEPARTMENT/COST CENTER:
POSITION REPORTS TO:
SUPERVISOR REPORTS TO:
SUPERVISES OTHERS/NUMBER:
FLSA STATUS:
PROFILE ID: 00117325

PATIENT-FAMILY CENTERED CARE

Team Member actions reflect a commitment to patient-family centered care through demonstrating the belief that patient and family needs and wishes must be actively solicited and engaged and that their preferences must be at the center of all services.

Position Summary

Apply improvement methods to achieve successful outcomes: Use evidence-based structured improvement methods for all quality improvement projects. Promote the use of improvement methods and science throughout the organization.

Responsibilities

1. Synthesize information from relevant resources to demonstrate current practice and identify opportunities for improvement. Identify sources of valid and reliable information and metrics to monitor performance trends.
2. Analyze information from disparate sources. Analyze comparative data, benchmarks, and evidence-based practices for possible adaptation into the organization. Use valid and reliable data to support opportunity recommendations and illuminate key trends for stakeholders.
3. Demonstrate expertise in the use of analytical and statistical tools and techniques including understanding of how process goals are established, measured and monitored; apply techniques and tools to identify variation and its causes; analyze input variable to identify critical factors that must be addressed to achieve optimal process performance.
4. Communicate improvement priorities and results using narrative and visual tools by create graphs and charts that accurately reflect valid interpretation of findings; develop dashboards and scorecards to depict internal metrics and benchmark comparisons; create written and verbal communication to tell a story appropriate to the audience.

5. Design and develop project plans including providing project coordination using project management tools, measurement plans, estimates costs to determine budget, incorporates evidence-based guidelines. Uses change management principles. Communicates project progress to all stakeholders through the project.
6. Promote a safety culture and infrastructure by engaging stakeholders to understand all perspectives when addressing patient safety issues; model behaviors that promotes a safety culture; educate staff; support adoption of high reliability principles; design sustainable actions to improve patient safety.
7. Apply methods to identify and evaluate risks for harm by using assessment tools and methods appropriate for identification of potential and actual patient safety risks including RCA and FMEA; conducts fact-based investigations; monitors actions to prevent recurrence; uses improvement methods to improve patient safety reporting and processes.
8. Advance patient/person and family-centered strategies that enhance safety and quality by promoting and encouraging opportunities for patient/family engagement; incorporating patient/family feedback into improvement plans.
9. Demonstrate knowledge of regulations and standards applicable to healthcare setting including remain current on changes in standards and regulations; evaluates regulations using authoritative interpretive resources; provides expert analysis to synthesize regulations and interpretive guidance to articulate intent and value of regulations.
10. Guide practice and operations with applicable regulations or standards by assessing policies and practice and conduct audits to ensure compliance; utilize education techniques (such as just-in-time training) during audits to enhance knowledge and understanding of standards with front-line staff; provide analysis of compliance to assist with development of sustainable action plan in partnership with leadership; develop process for early identification of areas that are not in compliance; communicate results to leadership as an action plan for compliance.
11. Provide oversight for planned and unannounced surveys including presurvey, onsite survey, and post survey activities, oversee infrastructure for onsite visits, analyze overall reports by prioritizing them by severity and risk to communicate findings.
12. Facilitate the development and monitoring of action plans for noncompliant findings including assisting with the preparation of an action plan in response to survey or audit reports; develop data collection tools for auditing/monitoring measures of success/compliance with standards.
13. Advance a continuous readiness culture by participating in readiness activities; integrate continuous readiness activities into everyday workflows; conduct continuous readiness rounding and tracers.
14. Apply knowledge of ongoing professional practice evaluation, focused professional practice evaluation, and requisite structures and processes including applying applicable regulations and standards to OPPE and FPPE work, coordinating reviews for OPPE and FPPE processes; develop processes to support practitioner practice reviews.
15. Communicate accountability and reporting requirements and organization impact to internal and external stakeholders including defining stakeholders, develop method or plan to disseminate information, clarify expectations and accountability for creating action plans, monitor action plans.
16. Manage performance improvement opportunities from accountability reports and ensure follow-through including design process to monitor and trend internally and externally reported data; apply improvement tools to areas of opportunities, assist with action plan development.
17. Demonstrate knowledge of the impact of healthcare payment models as they apply to quality measurement and improvement programs including recognize evolving types of payment models and associated measures; assess financial impact to organization; educate teams on payment models and cost management.
18. Analyze the appropriate utilization of healthcare services including apply evidence-based criteria along with regulatory and payer requirements to ensure applicable standards of care met; use tools to analyze quality outcomes based on reimbursement criteria; apply risk assessment methods in identifying optimal care processes and outcomes; prepare provider-specific utilization reports with benchmarking of internal and external peers. Collaborate with providers to ensure complete and timely documentation to maximize payment and minimize details; apply organization specific risk calculations when analyzing the utilization of services.

Minimum Position Requirements

Bachelors of Science degree in Nursing

If Bachelors Degree in non-nursing field, Associates of Science degree in Nursing

5 years experience in healthcare setting

Certification in specialty preferred in 3 years and recertified every 2 years

Acknowledgement

I acknowledge receipt of a copy of my position description and understand its content and expectations of its principal duties and key responsibilities.

Employee Signature

Date

The above statements are intended to describe the general nature and level of the work being performed by people assigned to this job. They are not exhaustive lists of all duties, responsibilities, knowledge, skills, abilities, and working conditions associated with it.

** End of report **