

Vice President of Quality, Regulatory and Performance Improvement

Facility: St Francis Hospital
Location: Roslyn, NY
Department: Performance Improvement
Category: Leadership
Schedule: Full Time
Shift: Day shift
ReqNum: 6017069

Vice President of Quality, Regulatory and Performance Improvement

St. Francis Hospital, The Heart Center is New York State's only specialty designated cardiac center. A member of Catholic Health Services of Long Island, St. Francis is consistently recognized by *U.S. News & World Report* as a national leader for Cardiology & Heart Surgery, as well as for Gastroenterology & GI Surgery. Additionally, *U.S. News* rates St. Francis as high performing in Geriatrics, Neurology & Neurosurgery, Orthopedics, and Pulmonology. Nursing care at St. Francis is also nationally recognized, with multiple Magnet designations, as well as the AMSN PRISM Awards and Beacon Awards. St. Francis has regularly out-scored other hospitals on Long Island.

St. Francis Hospital is dedicated to providing a supportive environment, committed to the highest standards of patient care, where health care professionals can develop their expertise and strengthen their credentials.

The Vice President of Quality, Regulatory and Performance Improvement (PI) at St. Francis Hospital is responsible for the hospital wide Performance Improvement Department. The successful candidate will plan, organize and direct the following functions including, but not limited to:

Abstracting Data for Reporting to Federal, State and Accrediting Agencies to include:

- Core measures abstraction and validation (Inpatient and Outpatient), The Joint Commission and CMS.
- Abstraction and validation of data submitted to PCI, Open Heart registries, TAVR, ICD and CMS Carotid Artery Stent registry
- Abstraction and validation of data for submission to NYSDOH and to AHA Get with the Guidelines

Assisting with Data Analysis and Data Display to:

- Assure timely and complete submission of data to the above registries
- Develop high level reports and scorecards for Hospital and Medical Staff leadership
- Organize and prepare data for use in Focus and Ongoing Professional Practice Evaluation by Medical staff

Directs a comprehensive Performance Improvement/Patient Safety Program

Recommends projects for improvement and sets appropriate targets related to PI

Actively participates in the development and execution of Hospital and CHS Patient Safety goals

Serves as the Hospital's liaison to IPRO, The Joint Commission and other agencies as appropriate

Actively facilitates and/or participates in system and hospital wide committees as appropriate

Prepares for and coordinates all activities related to accreditation and regulatory surveys

Provides oversight and direction related to employee orientation and educational requirements in conjunction with Nursing Education and Human Resources with regard to PI, TJC and regulatory agency requirements

Annually reviews the scope of the Hospital's PI program and makes appropriate recommendations, updates, etc.

Participates in the development of Hospital PI teams and initiatives; assists with setting targets/goals; and, assists with the development of policies and procedures

Performs other duties/responsibilities as requested

Requirements:

- BSN degree
- MSN or MS degree in a related Healthcare field
- CPHQ
- Six Sigma Black Belt
- Current NYS RN license
- Seven (7) to ten (10) years relevant medical/surgical clinical experience
- Seven (7) to ten (10) years progressive experience in PI/UR
- Minimum of three (3) years of experience in a Hospital Administration position

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