

DIRECTOR, QUALITY IMPROVEMENT NETWORK FACILITATION

Professional Background

Highly accomplished registered- nurse with more than 20 years of experience in clinical nursing, management, statistics, quality management, and process improvement. Years of experience in hospital, clinic, public health, and academic operation with comprehensive understanding of healthcare; proven ability to build effective relationships and develop and maintain highly reliable teams; skilled coach, mentor, facilitator, and teacher; accomplished project manager and curriculum developer; detailed and outcome oriented.

Skill Highlights

- Areas of expertise include:
- Nursing
- Management
- Process Improvement
- Statistics and data Analysis
- Operationalizing best practices
- Teaching/ Facilitating/ Coaching/ Mentoring
- Team Building
- Marketing and Public Relations

Accomplishments

- California Hospital Engagement Network Improvement Adviser and Data Analysis, 2014
- Shining Star Champion', Best Organ Donation Liaison: GSDS/SETDS, 2011
- Recipient and a member of Alpha Eta Society Scholarship
- Recipient of Mary Greeley Scholarship

Professional Experience

Director, Quality Improvement Network Facilitation

January 2014 to Current Company Name

- Manage and analyze state level data to identify California's existing performance and identify gaps and opportunities for improvement. Provide oversight, alignment and coordination of data management, measurement and reporting functions to discover patterns and trends, and generate reports for senior leadership and multiple board of directors regarding state performance. Act as primary liaison for contract relationships for data repositories and advanced analytics such as CALNOC, CMQCC, NHSN, HRET, HSAG and UC Davis Population Health. Develop and manage data entry strategies for hospitals based on need assessments. Consult with hospitals to develop data entry strategies and reporting process and continuously improve the data flow and management to create information and knowledge to assist senior leadership to identify gaps and develop improvement strategies. Collaborate with learning and dissemination to provide training in basic statistics/ analytics and data management. Provide consultation to member hospitals to review and understand performance, data analysis and various public reports. Provide consultation for other programs such as CalHEN, Patient Safety First, and Patient & Family engagement. Establish criteria to evaluate and prioritize opportunities for consult and requests for studies and reports. Participate in grant writing, studies and publications. Accomplishments
- Developed content and designed a page on HQI public website for 11 most common public reports. This format provides relevant information in a simple and standardized and enables hospitals to compare reports side by side and understand the different scoring of the hospital in each report. <http://www.hqiinstitute.org/public-reports>
- Developed Infographics to communicate data and data analysis with board of directors, public, hospitals and media in a more effective way
- Generated data validation process to provide valid and reliable data
- Redesigned and standardized Board of Directors report
- Ongoing analysis of California performance on publically reported measures has provided better insight to the state performance that resulted in more effective strategies to improve
- Developed standardized report to all stakeholders and media based on performance improvement methodology to track and trend performance CMS Grant- funded position to ensure California hospitals achieve success in patient safety including reducing all hospital acquired conditions, obstetrical harm, readmissions. This position involved developing detailed individual hospital improvement plan to identify gaps and opportunities; tracking and trending outcome/ results, consultation, training and education; providing clinical improvement guidance and resources. Other activities included, but not limited to, close collaboration with other Quality Improvement Organizations (QIN) and Institute of Healthcare Improvement (IHI) and maintaining compliance with federal contracting requirements. Managed and assisted 28 hospitals throughout state of California for performance improvement efforts. Accomplishments
- Assisted hospitals to improve outcomes by 40% and sustain the gain
- Assisted leadership to identify gaps and meet the goal at the state level
- Developed the standard format for hospital site visit to increase meetings efficiency and effectiveness

RN Quality Coordinator

April 2012 to September 2012 Company Name i74 City , State

- Data management and analysis, and reporting functions; discover patterns and trends; generate reports for senior leadership; continuously improve the data flow and management to create information and knowledge to assist senior leadership to identify gaps and develop improvement strategies; collaborate with other units to improve performance. Assist, maintain and revise the Quality Improvement programs; Coordinate and evaluate the activities of committees; perform studies/ identify challenges and barriers/ and develop plan based on data analysis, data management/ validation/ and reporting, improve and sustain performance

- Consults with Service Line Leaders, Chiefs of Service, Medical Staff Committee Chairpersons, Physicians, and Department Administrators to assist them in developing ongoing evaluation programs to identify, resolve, and report opportunities to improve patient care
- Act as a facilitator for identified service-line performance improvement initiatives
- Performs and oversees ongoing Quality Improvement activities across the medical center to assure timeliness, accuracy, and compliance with licensing and regulation requirements
- Use & educate end users on understanding data and develop action plan to improve performance
- Develop and conduct presentations including statistical process control methods on the quality improvement standards and the Medical Center Quality Improvement Plan to insure compliance with Joint Commission and other regulatory agency standards Accomplishments
- Developed data collection process for inpatient and outpatient code blues, which provided opportunity for gap analysis and improvement in real time
- Improved performance and compliance for organ/ tissue/ cornea donation and increased referral. South Sacramento achieved first place for cornea donation in North California region in 2010. Developed referral process in ED, which increased referral by more than 60% with 100% timely referral for more than two years. South Sacramento Kaiser hospital received four regional awards for Best Coordinator, Best Emergency Department, Best Committee and Best performer in 2011.
- Received recognition as "Joint Commission Best practice" for Organ Donation data collection and reporting
- Assisted with standardized reporting to Quality Council; recognized as "best practice" by Regional Kaiser and Joint Commission

Healthcare Management Chair

January 2005 to January 2011 Company Name 1/4 City , State

- with CHI, Des Moines, IA 2005- 2011 Adjunct Faculty, Assistant Professor Responsible for planning, coordinating, implementing and evaluating various Healthcare Administration courses Accomplishments:
- Developed instructional tools, resources and course content for four high level courses
- Developed curriculum and piloted first online course
- Developed online curriculum for four different high level healthcare administration courses Managing children health coverage for chronic and disabling diseases including but not limited to operation, human resource management, financial management including budget development, strategic planning, marketing, contract management, compliance and state and federal reporting Accomplishments
- Initiated data analysis; identify gaps and opportunities for process improvements
- Developed a new budget process and reporting
- Redesigned annual employee evaluation based on performance
- Developed job descriptions for 12 employees
- Developed patient/ family Orientation Programs
- Developed employee orientation program Assistant Professor Managing bachelorette healthcare management program including but not limited to operation, teaching, financial management including budget development and maintenance, marketing, strategic planning, contract management and compliance Accomplishments:
- Developed curriculum for two new courses
- Developed and piloted distant management program (online)
- Collaborated with Des Moines Osteopathic Medical Center to initiate unique program to provide opportunity for smooth transition of students to Master's degree
- Increased enrollment by 50%

Clinic Director

January 2004 to January 2005 Company Name 1/4 City , State

- Managed a healthcare clinic including 25 physicians, Nurse Practitioners (NP), nurses (RNs) and support staff. Clinic census was approximately 100 patients per day. Services offered included Primary Care, Obstetrics/ Gynecology, and Pediatrics. Management included, but not limited to, operation, human resource management, financial management including budget development, strategic planning, marketing and state and federal reporting. Accomplishments:
- Completed first Joint commission (JC) survey that resulted in clinic's initial JC accreditation
- Started new dental service including renovation, purchasing equipment, hiring dentist and dental staff
- Renovation and expansion clinic successfully

Education and Training

Master of Public Health; Des : Public Health Moines University Osteopathic Medical center, College of Health Sciences 1/4 City , State , US

Master of Public Health; Des Moines University Osteopathic Medical center, College of Health Sciences. Des Moines, IA

ADN : Nursing Des Moines Area Community College 1/4 City , State , US ADN in Nursing: Registered Nurse, Des Moines Area Community College, Boone, IA

Master of Health Care Administration; Des : Health Care Administration Moines University Osteopathic Medical center, College of Health Sciences 1/4 City , State , US Master of Health Care Administration; Des Moines University Osteopathic Medical center, College of Health Sciences. Des Moines, IA

B.S. : Psychology Pars College 1/4 City , State , US B.S. in Psychology: Pars College, Tehran, Iran ACCREDITAION * Black Belt Six Sigma

Methodology. In progress * IHI Certified Improvement Advisor (IA), Sacramento, CA * Certified Public Health Nurse, Sacramento, CA *

Certified Green Belt Six Sigma Methodology, Des Moines, IA * Certified Medical Office Manager, Des Moines, IA * Board Certified Registered Nurse Iowa and California * Certified Advanced Cardiac Life Support (ACLS), Des Moines, IA * Certified Basic Cardiac Life Support (BCLS), Des Moines, IA

Certifications

Board Certified Registered Nurse, Board Certified Registered Public Health Nurse, * IHI Certified Improvement Adviser * Certified Green Belt Six Sigma Methodology, * Certified Medical Office Manager

Affiliations

Association of Critical Care Nurses (ACCN)

Languages

* Fluent in English, Farsi, and Dari

Presentations

Develop and conduct presentations including statistical process control methods on the quality improvement standards and the Medical Center Quality Improvement Plan to insure compliance with Joint Commission and other regulatory agency standards

Skills

Lean/ Six Sigma Improvement methodology, Advanced Analytics, Data Management, process and performance Improvement Planning, Financial Management, Marketing, Strategic Planning, Gap Analysis, Process Control, Statistical Process Control, Contract Management, Human Resource Management, Training, Data Entry, Data Validation, Liaison, Statistics, Management, Teaching, Coaching, mentoring.

Computer Literate: Microsoft word, Excel, Power Point, Access, PhotoShop, Microsoft Picture, Visio, Smart Draw VP, SPSS and Statit statistical programs, Other programs such as: MIDAS, InfoView/Business Object, KPHC, Lotus Note, and EPIC