

VACANCY: Performance Improvement Lead

Position: Permanent, Full-Time. *This is an on-site position.*

Start Date: Spring 2024

Hours: 37.5 hours per week,

Compensation: \$78,000 to \$90,000. Relocation assistance is available as well a comprehensive benefits package and the possibility for interim housing.

Summary:

The Red Lake Margaret Cochenour Memorial Hospital is an 18 bed facility located in beautiful, rural Northwestern Ontario. Our catchment area includes the Municipalities of Red Lake and Ear Falls and Wabauskang First Nation. Our Hospital offers 24 hour emergency care, acute & chronic care, obstetrics, oncology, diagnostic services, rehabilitation, and a variety of day clinics. The community of Red Lake is home to approximately 5000 residents. The primary industries include mining, tourism, and forestry. Red Lake is accessible by road or by air. The town is approximately a 3 hour drive from Kenora and a five hour drive from Winnipeg (six hours from Thunder Bay).

Reporting to the Director, Corporate Services, the Performance Improvement Lead works in collaboration with the Senior Leadership Team, physicians, program and service leaders, regional partners, and clinical and non-clinical teams to support quality improvement initiatives aligned to the organization's priorities, patient relations process, privacy, hospital accreditation, quality improvement plan (QIP), patient safety, incident reporting, insurance claims, and emergency preparedness.

The individual will facilitate group discussions, analyze current processes and workflows, identify opportunities for improvement, implement change ideas through the application of leading-edge quality improvement tools and techniques, and establish benchmarks and organizational standards for quality, safety, and risk.

QUALIFICATIONS AND EXPERIENCE:

Education/Experience:

- A bachelor's degree in health, administration, health planning, or business administration with a minimum of 5 years of work experience.
- Formal education on employing process improvement methodologies and tools. Certification in Lean/Six Sigma is required.
- Minimum 2 years of experience in the application of quality improvement tools and in managing projects.
- Experience in proactively managing initiatives to achieve desired outcomes, mentoring project teams, and applying performance improvement and change management methodologies, preferably in a health care environment.

- Knowledge of the current legislation affecting Hospitals including, but not limited to Public Hospital Act, Excellent Care For All Act, Privacy Act, Hospital Insurance Act,
- Possess knowledge in WHMIS, Occupational Health & Safety, Infection Prevention and Control, Emergency Codes, Emergency Preparedness, Health Law, Hospital Liability and Malpractice.

Skills/Abilities:

- Excellent written and verbal communication and interpersonal skills
- Ability to deliver presentations and facilitate groups in problem solving, brainstorming, and creating new solutions.
- Ability to establish and maintain effective working relationships with staff and leaders at all levels of a complex healthcare/service sector organization.
- Ability to work effectively in a fast paced, dynamic, multi-disciplinary team environment.
- Team player with the ability to influence and persuade.
- Proven problem solving, analytical, and evaluative abilities.
- Strong facilitation and consensus building skills.
- Ability to effectively prioritize workload to meet various deadlines.
- Advanced skill in Microsoft Office Suite Programs (Word, Excel, PowerPoint).

Assets:

- Certification from Institute of Healthcare Improvement / Project Management Professional.
- Knowledge of Daily Improvement Management System.
- Certification in Change Management such as Prosci.
- Master Black Belt / Black Belt in Lean/Six Sigma preferred.
- Certification in data analytics.

JOB DUTIES AND RESPONSIBILITIES:

- 1) Supports the implementation of the organization's strategic plan to deliver on its goals, and objectives. Provides support to sustain processes, projects, programs, and committees.
- 2) Liaises within an interdisciplinary team environment to standardize/coordinate/prioritize quality, safety and risk initiatives within the facility to meet identified goals.
- 3) Lead teams through entire project life cycle for achieving project deliverables. Maintain adherence to standards of project documentation across all phases of the project.
- 4) Analyze data, processes, utilize evidence informed practices and workflows, and conduct root cause analysis to identify opportunities for improvement.

- 5) Design, develop, test and implement change ideas using continuous quality improvement philosophy to improve end-to-end process flows.
- 6) Develop and implement the framework for enterprise risk management. Maintain risk register, facilitate the planning, implementation, resolution and/or evaluation of risk mitigation activities.
- 7) Monitor and report regularly on established quality management indicators as requested.
- 8) Conduct regular reviews of departmental and organizational goals, objectives and related activities as required.
- 9) Engage frontline staff in daily quality improvement practices for driving operational excellence.
- 10) Train and coach teams on daily improvement management system and practices.
- 11) Establish and maintain a systematic method of collecting and reporting data on significant initiatives and projects, monitor and maintain data related to but not limited to risk assessments, safety events, safety trends and improvements.
- 12) Maintain knowledge of relevant acts/regulations/policies and procedures, that affect clients, staff and the organization.
- 13) Encourages creativity, initiative and risk taking in seeking new options/approaches to quality client-focused care.
- 14) Manage complex relationships with program/project sponsors and external stakeholders.
- 15) Build capacity, promote common language, and enable a culture of continuous improvement.
- 16) Coach and support staff in creative problem solving. Foster, promote and enable an environment of learning and professional development.
- 17) Promote use of clearly defined metrics, data and evidence-based decision making at all levels.
- 18) Manage complements and complains process, patient relations process, and patient surveys.
- 19) Lead the organization's accreditation process as the primary liaison with Accreditation Canada by supporting the planning, implementation, and/or coordination of the accreditation preparation and survey process. This includes leading RLMCMH's in self-evaluation activities and supporting improvement initiatives associated with meeting accreditation standards.
- 20) Lead emergency preparedness activities, policies and procedures, run mock exercises, fire drills, and host fire preparation meetings.

Deadline to apply: May 30, 2024

Please submit CV and cover letter to Sumeet Kumar (CEO) and Simranpreet Kaur (HR Manager) at jobs@redlakehospital.ca