



Lori A. Shibinette
Commissioner

Lori A. Weaver
Deputy Commissioner

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF THE COMMISSIONER

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15 Mar

August 18, 2022

His Excellency, Governor Christopher T. Sununu
and the Honorable Executive Council
State House
Concord, NH 03301

REQUESTED ACTION

Pursuant to RSA 94:6, the Department of Administrative Services respectfully requests to place Stefanie Shea at Step 6 for the position of Chief Quality Improvement and Compliance Officer, New Hampshire Hospital, Position #9U442, unclassified salary grade GG, earning \$105,482.00, effective upon Governor and Council approval. 100% General Funds.

EXPLANATION

New Hampshire Hospital provides inpatient psychiatric care for acutely ill adult patients. The Chief Quality Improvement & Compliance Officer provides system-wide executive-level leadership, direction, and oversight of the daily operations and staff, development, implementation, evaluation, and ongoing monitoring of New Hampshire Hospital's (NHH) Quality Improvement and Assurance Program (QIA) which includes Patient Experience, Peer Support; the NHH Compliance Program including full responsibility for the Centers for Medicare & Medicaid Services' (CMS), Joint Commission accreditation, surveying, and Evidence of Standards Compliance (ESC) processes; and the Healthcare Safety and Medical Staff Coordination programs and staff.

The Chief Quality Improvement and Compliance Officer Serves as a member of NHH Executive Team and champions a culture of quality and compliance through matrix leadership, role modeling, teaching, mentoring, and leading cross-functional, goal-focused teams. Develops a strategic, operational, systematic, hospital-wide approach to identifying, designing, measuring, prioritizing, and monitoring all QIA, Compliance, and Healthcare Safety initiatives and activities. The Chief Quality and Compliance Officer, together with the appropriate NHH departments, is authorized to develop and implement all necessary plans, priorities, policies, and processes to achieve the goals and objectives of NHH.

Ms. Shea possesses a Masters in Nursing Science, as well as her Clinical Nurse Leader (CNL) certification. She has most recently worked as the Clinical Nurse Leader for Adult Behavioral Health at Elliot Hospital where, among other accomplishments, she was responsible for ensuring compliance with CMS, DHHS and Joint Commission standards, guidelines and regulatory requirements. She achieved a 50% increase in performance in Hospital-Based Inpatient Psychiatric Services (HBIPS) quality measures, meeting or exceeding CMS standards in all categories and also built a Key Performance Indicator (KPI) around the efficacy of the patient safety check process resulting in a 60% improvement in output.

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Based on her educational background, experience and demonstrated skills, Ms. Shea is exceptionally well qualified to develop, implement and oversee the comprehensive hospital-wide operational and strategic plans for QAI, compliance and Healthcare safety.

In addition to Ms. Shea's education and experience, the hiring landscape supports appointment at Step 6. I respectfully request that Ms. Shea be placed in the Chief Quality Improvement and Compliance Officer position at New Hampshire Hospital, unclassified salary grade GG, at step 6 with an effective start date of September 23, 2022.

Sincerely,



Lori A. Shabinette
Commissioner

Enclosure

Stefanie Shea MSN, RN, CNL

Experience

CLINICAL NURSE LEADER FOR ADULT BEHAVIORAL HEALTH | ELLIOT HOSPITAL | 2019 - PRESENT

- Lead, develop and oversee program changes from inception to successful implementation for state-wide behavioral healthcare program
- Responsible for ensuring compliance with CMS, DHHS and Joint Commission standards, guidelines and regulatory requirements
- Achievement of 50% increase in performance in Hospital-Based Inpatient Psychiatric Services (HBIPS) quality measures, meeting or exceeding CMS standards in all categories
- Built Key Performance Indicator (KPI) around the efficacy of patient safety check process resulting in a 60% improvement in output
- Foster culture of robust and comprehensive documentation
- Assess and analyze outcomes, identify complex problems in patient care, and provide interventions to assist in achieving optimal patient outcomes
- Collaborate with the Center for Clinical Excellence to maintain unit level metrics and dashboards; use metrics with work teams to identify areas of opportunity and facilitates process and patient outcome improvements
- Complete management investigations of adverse patient events, and reports findings as required to National Database of Nursing Quality Indicators (NDNQI)
- Lead systems review to quality of patient care delivery and at the individual level to critically evaluate and anticipate risks to patient safety with the aim of preventing medical error

STROKE AND SEPSIS PROGRAM MANAGER | PARKLAND MEDICAL CENTER | 2018 - 2019

- Responsible for program development, planning, organizing, implementation, assessment, patient flow, and performance improvement of the service lines
- Monitor stroke core measure compliance from admission to discharge
- Analysis of stroke measure fall outs for committee reporting and implementation of PI projects
- Conceptualization of education plan for emergency, hospitalist, and critical care providers including EMS field providers
- Responsible for ensuring compliance with CMS, DHHS and Joint Commission standards, guidelines and regulatory requirements
- Responsible for the successful pilot of tele-neurology services into acute stroke process flow; developed and implemented code stroke tool kits for rapid triage protocol, restructured post-Alteplase patient nursing assessment forms, achieved current door to needle time of 49 minutes.

REGISTERED BEHAVIORAL HEALTH NURSE | PARKLAND MEDICAL CENTER | 2018 – 2018

- Provided direct care to patients including daily monitoring, recording, and evaluating psychiatric medical conditions for up to 16 patients
- Responsible for developing and implementing standardized and evidence-based patient-centered treatment planning process
- Conducted group educational sessions on subject matters such as healthy lifestyle, nutrition, relaxation techniques and medication management

PSYCHIATRIC COUNSELOR | PORTSMOUTH REGIONAL HOSPITAL | 2014 – 2018

- Provided milieu management and direct patient services for up to 30 patients
- Responsible for the successful development and implementation of daily patient-centered treatment team process involving the patient in their plan of care and improving patient satisfaction scores
- President of the Unit-Based Practice Council

OUTREACH SPECIALIST | SEACOAST MENTAL HEALTH | 2012 - 2014

- Conducted psychosocial home evaluations for caseload of more than 25 mental health clients

Education and Other Credentials

M.S., NURSING, UNIVERSITY OF NEW HAMPSHIRE, DURHAM NEW HAMPSHIRE- 2018

CLINICAL NURSE LEADER (CNL) CERTIFICATION- 2018

B.A., PSYCHOLOGY, UNIVERSITY OF NEW HAMPSHIRE, DURHAM NEW HAMPSHIRE- 2011

Council Membership

- Disaster Behavioral Health Response Team (DBHRT) member
- Co-Chair Nursing Practice Research Council
- Member of the Patient Safety Alert Team
- Member of the Safety Clinical Practice Team
- Member of the Workplace Violence Committee

Board Membership

Lakes Region Mental Health Center, 2021