



Government of
Northwest Territories

IDENTIFICATION

Department	Position Title	
Northwest Territories Health and Social Services Authority	Quality Risk Manager - Yellowknife	
Position Number(s)	Community	Division/Region(s)
07-13475	Yellowknife	Quality, Risk, and Client Experience/HQ

PURPOSE OF THE POSITION

The Quality Risk Manager – Yellowknife is accountable for working collaboratively with stakeholders to manage the quality, risk and best practices programs and services in the Northern region of the Northwest Territories Health and Social Services Authority (NTHSSA) and providing support and advice on all aspects of healthcare quality management and incident investigation in the Yellowknife Region.

SCOPE

Reporting to the Territorial Manager, Quality and Best Practice (TM – QBP), the Quality Risk Manager - Yellowknife (the QRM - Yellowknife) is located in Yellowknife and is responsible for overseeing the planning, development, implementation, maintenance, and evaluation of the NTHSSA quality and safety programs, maintaining a future-focused perspective to recommend and develop proactive safety and quality programs, and conducting in-depth investigations into all patient safety incidents, critical incidents and unusual occurrences in the Yellowknife region, and supporting investigations in Hay River and Tłıchq regions.

The NTHSSA is the single provider of all health and social services in the Northwest Territories (NWT), with the exception of the Hay River and Tłıchq regions, and was established to move toward one integrated delivery system as part of the Government of the Northwest Territories' (GNWT's) transformation strategy. Health and social services includes the full range of primary, secondary and tertiary health and social services.

While the Tłıchq Community Services Agency (TCSA) will operate under a separate board and the Hay River Health and Social Services Agency (HRHSSA) will also operate under a separate

board in the interim, the NTHSSA will set clinical standards, procedures, guidelines and monitoring for the entire Northwest Territories. Service Agreements will be established with these boards to identify performance requirements and adherence to clinical standards, procedures, guidelines and policies as established by the NTHSSA.

The Department of Health and Social Services (DHSS) plays an important role in the connectivity between the NTHSSA, the TCSA and the HRHSSA because it establishes the common policy framework and common standards for the entire system. Operational consistency and collaboration across these three authorities is required to provide a quality, integrated Health and Social Services system for the NWT.

The QRM – Yellowknife works within a legislative and policy framework that includes the *Hospital Insurance and Health and Social Services Administration Act*, *Medical Profession Act*, *Nursing Profession Act*, *Guardianship Act*, *Public Health Act*, *Coroners Act*, *Access to Information and Protection of Privacy Act (ATIPP)*, *Health Information Act (HIA)*, *RNANT/NU Bylaws*, *NTHSSA Medical and Professional Staff Bylaws*, *Mental Health Act*, *Child and Family Services Act*, as well as GNWT, DHSS and NTHSSA policies and procedures.

The Quality, Risk and Client Experience Division promotes and supports safe, quality patient/client centered care and services through leading in-depth investigations into all patient safety incidents, critical incidents and unusual occurrences while providing subject matter expertise and education, minimizing risk and facilitating the implementation of best practices and system knowledge.

There is a significant shift to approaching quality and risk management with a proactive lens. This requires the QRM – Yellowknife to not only consider current policy, procedure, and system impacts, but ensure a forward look for future opportunities for quality care and safety improvements across the NWT. A commonly accepted definition of "quality" in Health Care identifies six dimensions including, being effective, efficient, accessible, patient centered, equitable, and safe. The incumbent is responsible for conducting in-depth investigations into all patient safety incidents, critical incidents and unusual occurrences to monitor, analyze, provide advice, recommendations and/or improvements in the quality of client care clients and patients receive in the Yellowknife region that ensure the standards for care outlined by Accreditation Canada are met.

The QRM – Yellowknife works closely with the TM – QBP, Chief Operating Officer (COO) of Yellowknife Region, Regional Managers, and all Territorial Managers. The QRM – Yellowknife will be called upon daily by the COO, Senior Executive, Medical, Territorial and Regional Leadership to provide advice, assistance, support and recommendations on all patient safety incidents, critical incidents, unusual occurrences, and various quality issues, concerns, and situations that often arise unexpectedly.

The QRM - Yellowknife actively leads, plans, implements and evaluates in-depth investigations into all patient safety incidents, critical incidents and unusual occurrences. Additionally, the incumbent will also lead complaint investigations, medical and legal reviews, and investigations of high-risk incidents and potential litigation, which can require immediate and

accurate attention. Many of the issues that arise from these investigations are unique, complex, very personal and of a highly confidential nature, and generally relate to patients/clients, staff, physicians and/or the business operations of the organization. Consequently, the nature of these investigations will require the incumbent to develop therapeutic, client centered relationships with individuals who have experienced traumatic events or the death of a loved one as a result of system errors. Given the nature of these investigations some patients, clients and/or staff may become abusive.

The QRM – Yellowknife is responsible for supporting the management of Quality and Continuous Improvement initiatives that facilitate and/or support the delivery and improvement of quality patient and client care in the Yellowknife Region. The QRM – Yellowknife will provide regional leadership and overall support to the implementation of quality initiatives, including Accreditation. This role, in collaboration with key stakeholders, will facilitate and support Continuous Quality Improvement (CQI) programs and services in the Yellowknife Region.

The QRM – Yellowknife plays a regional leadership role in advancing the NTHSSA Strategic Plan, and in implementing and monitoring the NTHSSA Quality and Patient Safety Framework. The incumbent ensures that regional quality and patient safety policies and practices are aligned with Accreditation Standards and GNWT legislation and policies. This role fosters respectful, compassionate, culturally appropriate care that is responsive to the needs, values, beliefs and preferences of the clients and their family, supporting mutually beneficial partnerships between clients, families and health care providers.

The QRM – Yellowknife works collaboratively with the TM – QBP, Yellowknife COO, groups of professional and non-professional staff within Yellowknife, staff of DHSS, the TCSA and HRHSSA to facilitate the development and delivery of quality, client centered programs and services.

The QRM - Yellowknife has a significant amount of latitude provided that the policies, guidelines and interests of the GNWT are complied with. This latitude is tempered by the knowledge that incorrect decision-making is likely to result in harm to the reputation of the NTSSA, diminished public confidence in the health and social services system and could ultimately result in harm to future patients entering the health and social services system. A variety of duties are assigned to the QRM - Yellowknife and the incumbent must effectively assess and prioritize incident investigations and other projects in order to achieve a successful outcome.

RESPONSIBILITIES

1. Provides subject matter expertise on incident management, patient safety, quality improvement, quality assurance, Accreditation and risk management.

- Provides advice and subject matter expertise on all patient safety incidents, critical incidents and unusual occurrences in their region, as well as on the interpretation of legislation and regulations, the development of policies and procedures and the

implementation of best practices in the areas of quality improvement, quality assurance, incident management, Accreditation and patient safety.

- Actively leads and participates in a variety of planning and decision-making meetings and activities throughout the Region, ensuring that all processes and procedures consider quality, patient centered care and align with the Accreditation Canada standards.
- Leads the tracking and evaluation of quality data based on best practice guidelines, standards process reviews, and policy changes to analyze and identify regional trends.
- Utilizes subject matter expertise to lead the development Assist in the development of regional program and service area quality indicators, identifying trends, participating in the development of initiatives to address the trends and further reporting to identify areas of opportunity or risk.
- The QRM – Yellowknife will also be required to have a working knowledge in a variety of operations to provide leave coverage for Regional Managers, the other Regional QRM's and the TM – QBP, as well as travel to regional centers to provide guidance, support and assistance as required.

2. Leads, investigates, coordinates and evaluates all patient safety incidents, critical incidents and unusual occurrences in the Yellowknife Region, in collaboration with the TM - QBP.

- Proactively leads the intake and investigation of all patient safety incidents, critical incidents and unusual occurrences in their region. This includes an initial discussion and disclosure of the incident to the patient, client or family. The incumbent is usually the first point of contact for patients experiencing grief, trauma or loss as a result of system errors and offers the apology, under the Apology Act, to the patient, client or family.
- Throughout these investigations, the QRM-Yellowknife is required to maintain a therapeutic relationship with the patient, client or family and provide them with frequent updates, referrals, advice and be their advocate throughout the process.
- The QRM-Yellowknife is responsible to ensure that a thorough analysis of all details surrounding all patient safety incidents, critical incidents and unusual occurrences in their region is completed including conducting interviews with staff, practitioners, patients, clients and families, as well as other stakeholders as deemed necessary to ensure due diligence (RCMP, DHSS, Legal Advisors, GNWT Risk Management, etc.).
- Ensures the chain of evidence and continuity of incident investigations are maintained.
- The QRM-Yellowknife is responsible for ensuring a qualitative report is completed for all patient safety incidents, critical incidents and unusual occurrences in their region, that the results are professionally and sensitively provided to the patient, client or family and that all recommendations are acted upon.
- The QRM-Yellowknife is responsible for providing the patient, client or family with the final apology and disclosure at a final disclosure meeting that includes the appropriate program or service representative. The incumbent is responsible for ensuring that the communication at this meeting is professional, respectful and that the family is provided with the support, resources and referrals necessary.

- Facilitates and supports regional systems review processes and investigations in response to critical incidents, adverse events and complaints, including the development of reports and recommendations on necessary quality improvements.
 - Tracks and trends Quality reviews, incident investigations and unusual occurrences and related recommendations to ensure timely implementation and follow-up is completed in their region.
 - Assists in the preparation and submission of all potential lawsuits and insurance claims for the Insurer and Legal Counsel, in a proactive, timely and concise fashion.
- 3. Supports planning, developing, implementing, maintaining and continuously evaluating the NTHSSA's incident management, patient safety, quality improvement, quality assurance, Accreditation and risk management programs.**
- Manages the Regions effective utilization of the Territorial-wide incident reporting system (RL6) to enhance patient safety and ensure accurate reporting and follow-up on client and patient safety concerns.
 - Continuously leads the collection of feedback from clients, patients and families through the intake of all patient complaint and concerns and the investigations into all patient safety incidents, critical incidents and unusual occurrences. The incumbent leads the analysis of this data and the use of the data to inform quality improvement strategies and ensure client and family involvement in planning and service design, quality improvement initiatives and client safety activities in the Yellowknife Region.
 - Leads the development, implementation and evaluation of regional quality improvement plans to ensure compliance with the standards of care outlined by Accreditation Canada.
 - Supports the development, review, and integration in the Region, of the NTHSSA's quality management initiatives, client and staff satisfaction surveys and the development of valid, reliable quality indicators. Reporting on all aspects of the NTHSSA's quality management outcomes for the Region, (i.e., utilization management, continuous quality improvement initiatives, accreditation status and follow up, client advocacy activities).
 - Leads, coordinates, implements, and evaluates the Yellowknife Region Accreditation program and provides support to the region throughout the Accreditation process
 - Prepares briefing materials, plans and evaluates quality enhancements and ensures improvements are meeting the operational needs of the organization.
 - Supports the proactive development and implementation of programs and policies to mitigate risk and improve health privacy from the quality and safety perspective.
- 4. Leads and facilitates Continuous Quality Improvement (CQI) in the Yellowknife Region and offers support in the development of programs for prevention and mitigation of quality or safety issues.**
- Champions the use of the NTHSSA CQI toolkit in the Yellowknife Region to identify quality improvement opportunities and support the continuous development and maintenance of new or improved programs, policies, and practices.
 - Provides support, advice and leadership to the Yellowknife COO on matters of non-compliance, all investigations into patient safety incidents, critical incidents, unusual

occurrences and potential risks or losses to the organization. This includes planning, implementing, and evaluating incidents and investigations, as well as coordinating stakeholders and clients for consultation and input into the investigation.

- Identifies regional quality improvement issues, and provides oversight and recommendations on developing, implementing and evaluating corrective action.
- Prepares Regional Quality and Patient Safety Reports for review by the Regional COO and TM - QBP and assists in the completion of the annual patient safety and quality improvement plan for NTHSSA.
- Provides advice on significant developments in Yellowknife Regional health and social services that could have implication for operations and develops and recommends corrective actions based on best practice standards to ensure continuity of coverage, services and programs.

5. Supports the regional planning implementing and evaluating of risk management activities.

- Assists with the regional risk assessment and development of the regional risk registry.
- Intakes, investigates and proposes recommendations on all privacy and confidentiality breaches in collaboration with the territorial privacy specialist.
- The QRM – Yellowknife is responsible for the initial disclosure to patients, clients and families of all privacy breaches, conducting a thorough investigation in collaboration with the Territorial Privacy Specialist and the development of a qualitative report of the investigation.
- The QRM - Yellowknife is responsible for the final disclosure to the patient, client and family of the breach ensuring that the communication at the disclosure meeting is professional, respectful and that the family is provided with the support, resources and referrals necessary.
- Champions and supports regional staff on the implementation and utilization of the NTHSSA Policy Framework.
- Assists in the completion of required insurance documents for all complex unusual occurrences that happen in the Region.
- Advises and supports Regional staff on Requests for Information in collaboration with the Territorial Privacy Specialist.
- Coordinates and assists with privacy education for new and existing regional staff.

6. Supports the Accreditation Process to ensure quality is a proactive mindset and staff is provided with the necessary resources to provide quality service and programs.

- Leads the Yellowknife Region Accreditation Team and provides support to regional staff regarding accreditation standards and the self-assessment process.
- Participates on the Territorial Accreditation Leadership Forum and, as needed, Standards Team(s) to support quality initiatives and the accreditation process Territory-wide.
- Provides input to self-assessment findings, survey findings and the development of action plans to address any deficiencies.
- Plans, implements and facilitates education to the COO and regional staff on the Accreditation process and standards.

- Leads and participates in mock tracer exercises at regional and territorial level.

7. Supports the development or amendment of policies and procedures at the Regional Level.

- Supports the implementation, utilization and evaluation of the NTHSSA Policy framework to develop and amend NTHSSA policies, procedures, protocols and guidelines.
- Ensures that quality and safety policies, procedures, protocols are continuously reviewed, updated, and distributed throughout the Region.
- Promotes ongoing education and orientation throughout the Region new, updated or amended quality and patient safety policies, procedures, protocols guidelines, legislation and professional practice issues (e.g. liability issues) in collaboration with others.

WORKING CONDITIONS

Physical Demands

No unusual demands.

Environmental Conditions

Incumbent will be in contact with patients, families and clients and conducting investigations on nursing units daily within the health care environment posing significant risk for exposure to infectious diseases.

Sensory Demands

Daily the incumbent is required to develop therapeutic client centered relationships with impacted and traumatized individuals, while actively listening, communicating with and observing patients, clients and families for cues to determine their mental and emotional status and intervene as necessary.

Mental Demands

On a daily basis the incumbent will be exposed to emotionally upsetting experiences while conducting investigations and providing advocacy, support, and resources to patients, clients, families, staff, lawyers and other stakeholders. On a daily basis the incumbent will be faced with potentially traumatic information as a result of the details revealed through the incident investigation process. The therapeutic relationship is initiated when the QRM-North discloses to the patient, client or family that trauma has occurred and offers an apology on behalf of the system. This relationship is then fostered by the QRM –North throughout the investigation, which can take many months to complete. Given the nature of the loss or trauma being revealed to the patient, client or family, some patients/clients may become abusive.

On a weekly basis, the incumbent will be faced with numerous ethical dilemmas that will challenge their morals while investigating incidents.

Daily, the incumbent will be exposed to numerous interruptions, unknown factors, uncontrolled work flow and competing demands as a result of an incident occurrence. Weekly the incumbent may be required to adjust their work hours into the evening and weekends to complete incident investigations.

KNOWLEDGE, SKILLS AND ABILITIES

- Knowledge of how to design and facilitate a change process. The ability to build and work with groups and teams, planning and implementing change; skilled in group dynamics and conflict resolution.
- Knowledge of Quality Management, methodologies, and legislation including problem solving tools, quality improvement tools, evaluation measures and outcome indicators.
- Knowledge of investigative processes and report writing.
- Knowledge and ability to use a variety of intervention and prevention methods, and determine which method is most appropriate at any given time.
- Knowledge of legislation that affects the delivery of health and social services in the NWT.
- Knowledge of all aspects of risk identification, loss prevention, and loss reduction in a health and social services program areas.
- Ability to acquire and apply knowledge of health and social services legislation in the NWT, including the *Hospital Insurance and Health and Social Services Administration Act*, *Medical Profession Act*, *Nursing Profession Act*, *Guardianship Act*, *Public Health Act*, *Coroners Act*, *Access to Information and Protection of Privacy Act (ATIPP)*, *Health Information Act (HIA)*, *RNANT/NU Bylaws*, *NTHSSA Medical and Professional Staff Bylaws*, *Mental Health Act*, *Child and Family Services Act*, as well as GNWT, DHSS and NTHSSA policies and procedures.
- Knowledge of legal aspects of health and social services programs including release of information, rules of confidentiality, legalities in medical chart documentation, consent law and other medico-legal healthcare areas.
- Ability to apply a high level of sensitivity in responding to and handling client concerns.
- Inter-group skills to effectively lead and facilitate internal, external, individual or multidisciplinary division team or group.
- Organizational, time management, analytical, facilitation, and presentation skills to manage multi-disciplinary responsibilities in a timely and effective manner.
- Communication skills, both written and verbal to develop and maintain internal and external networks to achieve work objectives, with the ability to prioritize work in a team based setting.
- Analytical and problem solving skills to investigate and initiate corrective action to problems/issues encountered during the planning, development and delivery of operational initiatives, programs and services.
- Ability to understand the geographical and cultural needs of the people and to apply sensitivity to how community and culture impact the delivery of health care.
- Ability to apply and develop creative and innovative approaches to project planning, implementation, and evaluation within a complex health system.

- Ability to develop and maintain positive working relationships with individuals, agencies, elected community leaders, and employees in order to communicate program information, including the ability to obtain and respond to feedback from these individuals.
- Ability to build solid partnerships and strategic alliances based on trust and to work with a variety of people from different backgrounds and personalities.

Typically, the above qualifications would be attained by:

Completion of a Bachelor's Degree in a Nursing or Allied health and a minimum of seven (7) years of work-related experience in a health, or social services discipline is required, including a minimum of two (2) years' experience leading a team.

ADDITIONAL REQUIREMENTS

Must be in good standing with the Registered Nurses Association of the Northwest Territories and Nunavut (RNANT/NU).

Proof of immunization in keeping with the current public health practices is required.

Assets include:

- Certification or post graduate degree in Health Care Quality and Risk Management.
- Educational preparation and experience working in quality improvement, risk management and patient safety.
- Equivalencies of education and experience will be considered on a case by case basis.

Position Security

- ☐ No criminal records check required
- ☒ Position of Trust – criminal records check required
- ☐ Highly sensitive position – requires verification of identity and a criminal records check

French language (check one if applicable)

- ☐ French required (must identify required level below)

Level required for this Designated Position is:

ORAL EXPRESSION AND COMPREHENSION

Basic (B) ☐ Intermediate (I) ☐ Advanced (A) ☐

READING COMPREHENSION:

Basic (B) ☐ Intermediate (I) ☐ Advanced (A) ☐

WRITING SKILLS:

Basic (B) ☐ Intermediate (I) ☐ Advanced (A) ☐

- ☐ French preferred

Indigenous language: Select language

- ☐ Required
- ☐ Preferred