



Vice President Quality and Risk Management

Leadership Profile

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The WittKieffer logo is positioned in the bottom left corner of a dark teal rectangular area. The text 'WittKieffer' is written in a white, italicized, sans-serif font. The background of this area features a decorative pattern of thin, light blue lines that curve and flow across the space.

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The Opportunity

Coffee Regional Medical Center (CRMC) seeks a collaborative, dynamic leader to serve as the hospital's next Vice President of Quality and Risk Management (VP Quality and Risk Management). This is an outstanding opportunity for an experienced quality and risk leader to assume a highly visible, hospital-wide leadership role dedicated to advancing quality, safety, risk management, and patient experience within an organization deeply committed to excellence. Based in Douglas, GA, Coffee Regional Medical Center is a 98-bed, independent, nonprofit hospital that serves the healthcare needs of Coffee County and its surrounding communities. CRMC is a proud affiliate of the Emory Healthcare Network and recently earned its sixth consecutive "A" rating from The Leapfrog Group.

Reporting directly to the CEO of CRMC, the VP Quality and Risk Management will serve as a key member of the leadership team, championing a culture of quality and patient-centered care across CRMC. This executive is directly responsible for leading the coordination and optimization of quality, safety, risk management, and patient experience across the hospital, including infection prevention, quality data collection and reporting, accreditation, and peer review. As a member of the hospital leadership team, the VP Quality and Risk Management will partner closely with hospital leadership, physician leadership, and clinical and operational staff across CRMC to further strengthen and ensure alignment of CRMC's long-term goals. This executive will promote and instill a culture of continuous improvement by actively identifying opportunities for operational performance improvement and clinical excellence. The VP Quality and Risk Management will develop and implement proactive policies and practices, building on CRMC's strong track record in quality performance and excellence.

A major priority for this role will be strengthening risk management across CRMC. The leader will ensure that issues are identified early, documented thoroughly, and resolved effectively, while implementing systems that provide clear visibility to leadership. This includes improving utilization and peer review processes, standardizing reporting practices, and leveraging data analytics to monitor trends and mitigate potential risks. In addition, the leader will maintain top-tier quality and safety scores, enhance patient experience, and oversee critical quality metrics such as hospital-acquired infections and readmissions. The VP Quality and Risk Management will present and report out frequently to senior leadership and board members.

The successful candidate will be a dynamic, patient-focused, self-starter with a proven track record of creating a culture of quality, safety, and performance excellence, possessing a minimum of five years of progressive leadership experience in a healthcare organization. The successful candidate will be viewed as a collaborator with experience working in a hospital setting. This executive will be a change leader with the ability to influence others, foster a culture of transparency and accountability, and manage ambiguity.

Organization Overview

Since 1953, Coffee Regional Medical Center has served the healthcare needs of its neighbors in Coffee County. Over the past 60 years, CRMC has become an integral part of the fabric of the community as well as a major contributor to the economic health of Douglas, Georgia. CRMC is proud of the work it does and the care it provides to its community. The Medical Staff membership includes anesthesiology, bariatrics, cardiology, emergency medicine, ENT, family practice, general surgery, GI, hematology, internal medicine, interventional cardiology, nephrology, OB/GYN, oncology/hematology, ophthalmology, orthopedics, pain management, pathology, pediatrics, podiatry, pulmonology, radiology, urology, and wound care.

CRMC is a proud affiliate of the Emory Healthcare Network. Through this relationship, CRMC is collaborating with Emory Healthcare to provide Coffee and surrounding county residents with additional options for their healthcare needs. The relationship with the Emory Healthcare Network enables patients to receive care close to home while accessing advanced expertise for many of CRMC's service lines. Emory Healthcare Network Affiliates collaborate with Emory Healthcare on quality and safety initiatives to ensure patients receive the best care possible. Coffee Regional Medical Center is a shining star in the region, providing high-quality, patient-centered care. Named a Top Small Hospital in Georgia, CRMC offers:

- A 98-bed hospital, featuring all private rooms, including 21 pediatric beds.
- A busy, high-tech emergency department, with telemedicine capability.
- An after-hours urgent care center
- Five fully equipped operating rooms.
- Two state-of-the-art cardiac catheterization labs.
- An in-house infusion center.
- On-site hospitalists to ensure a physician is available to all patients around the clock.
- A retail pharmacy

Coffee Regional Medical Center has earned full accreditation with NIAHO®, a quality-based hospital accreditation program from DNV. By earning accreditation, CRMC has demonstrated it meets or exceeds patient safety standards (Conditions of Participation) set forth by the U.S. Centers for Medicare and Medicaid Services. DNV's accreditation program is the only one to integrate the ISO 9001 Quality Management System with the Medicare Conditions of Participation.

Purpose

To Serve. To Heal. To Save.

Vision

Healthy Lifestyles. Better Lives.

Mission

To Provide Exceptional Care and Wellness Close to Home.

Values

- Trust
- Partnership
- Connection
- Knowledge
- Excellence
- Service

Position Summary

The VP Quality and Risk Management is responsible for coordinating organization-wide performance improvement, ensuring regulatory compliance, and promoting patient safety. This executive directs the performance improvement activities across quality, risk management, and patient safety.

Reporting Relationships

Reporting to the Chief Executive Officer, the VP Quality and Risk Management has direct responsibility of the following:

- Quality and Workflow Improvement
- Quality Data Collection and Reporting
- Risk Management
- Patient Experience
- Infection Prevention
- Patient Safety and Outcomes
- Accreditation
- Peer Review

Responsibilities

- Directs, develops, and continuously improves the hospital-wide performance improvement program to ensure program effectiveness, goal achievement, state-of-the-art practices, and regulatory compliance through the organizational structure.
- Participates in the Quality Assurance and Patient Care Committee of the Board of Trustees, including Quality Council, Clinical Services Committees, Medical Board monitoring committees, Medical Department, and Hospital Department Meetings.
- Coordinates the ongoing monitoring and evaluation activities of the medical department and hospital departments.
- Consults with all medical and hospital departments in the development of performance improvement plans, initiatives, and measurement strategies.
- Facilitates staff development activities related to quality improvement and new/revised standards in an interdisciplinary fashion in collaboration with medical and hospital departments.
- Maintains knowledge of current performance improvement practices and incorporates them into the PI program; remains current on industry trends in performance improvement and quality metrics.
- Oversees, plans, organizes, and directs development and revision of organization-wide standards in relation to internal and external standards.
- Oversees, conducts, and coordinates development and review of quality assessment and improvement activities and prepares summary reports as required.
- Participates in medical and hospital department committees necessary to problem solve and coordinate the provision of services to lead to better clinical performance.
- Keeps abreast of appropriate regulatory agency requirements related to quality improvement.

- Ensures efficiency and effectiveness of data collection, analysis, and reporting to drive performance improvement processes.
- Serves as the Joint Commission Coordinator - prepares and maintains accreditation for the organization.
- Addresses risk and legal issues concerning quality of care and patient safety issues.
- Coordinates activities related to value-based purchasing, readmissions, HCAPHS, etc.
- Coordinates Leapfrog and GHA programs and data related to quality.
- Serves as Compliance Officer/HIPAA Privacy Officer. Provides education and training to all staff members, ensuring the organization maintains compliance.
- Manages the incident reporting system.
- Identifies and evaluates potential liability claims (malpractice, etc.).
- Provides education and training on performance improvement, safety and risk management programs, and HIPAA compliance programs.
- Directs the fiscal management of the department and ensures proper utilization of the organization's financial resources.
- Seeks new program strategies and enhancements that will expand or improve services.
- Responsible for the operational excellence and ensuring that departments deliver quality services.
- Monitors compliance with regulatory, accrediting, and organizational policies for services and environmental and personnel safety.

Goals and Objectives

The following goals and objectives have been identified as priorities for this position:

- Establish personal and professional credibility as a recognized leader of quality, safety, and risk management at CRMC; be viewed across the organization as a leader who is visible, approachable, and team-oriented, and brings a contemporary, proactive perspective on quality, safety, and performance improvement and how those functions support the goals of the hospital.
- Develop strong, effective relationships with the hospital leadership, the Board of Directors, and the physician leadership to operationalize strategic efforts in order to deliver patient-centered, high-quality, safe, accessible, and affordable healthcare.
- Build and strengthen relationships with the medical and nursing staff. Be viewed as a positive and collaborative resource and be seen as someone who is fair and just. Ensure they have the tools, equipment, and supplies to provide high-quality patient care.
- Assess the current quality, safety, risk management, and performance improvement infrastructure and processes. Plan and implement continuous improvement initiatives to achieve clinical and service excellence across the organization that demonstrates an overall standard of high-quality outcomes as characterized by best practices and evidence-based guidelines.
- Further advance CRMC's historically strong quality performance by advancing initiatives to strengthen quality performance and sustain excellence through continuous monitoring and proactive enhancements.
- Provide mentorship, direction, and focus to the team, ensuring continued responsiveness, innovation, outstanding performance and service, collaboration, and ability to implement change.
- Strengthen risk management across the organization by enhancing transparency, improving reporting processes, and implementing proactive strategies to reduce clinical and operational risks. Foster an open, transparent culture of reporting to boost accountability, uncover issues, reduce errors, and drive improvement.
- Enhance patient experience by driving higher satisfaction scores and increasing survey response rates through targeted engagement strategies.
- Evaluate programs, policies, and procedures to ensure compliance with all applicable federal and state laws and regulations. Maintain awareness of laws and regulations and keep abreast of current changes. Strengthen regulatory and accreditation readiness, ensuring that the organization is prepared for review by all agencies.
- Educate, develop, and mentor staff to provide the knowledge, skills, and tools to drive the delivery of high-quality, safe, and consistent care.

Candidate Qualifications

Education/Certification

- A bachelor's degree is required.
- A master's degree in healthcare administration, business administration, nursing, public health, or a related field is preferred.
- Certified Professional in Healthcare Quality (CPHQ) is preferred.

Knowledge and Work Experience

- A minimum of five to ten years of progressive leadership experience in quality, risk management, or patient safety in a hospital setting.
- Experience working with multiple constituents throughout an organization. This includes achieving consensus through presentations, thought leadership, partnership, and relationship building throughout the organization.
- Knowledgeable in applicable standards and requirements of regulatory, accreditation, and licensing agencies.
- Strong communication skills, both written and verbal.
- Ability to analyze complex data and develop strategic recommendations.
- Strong problem-solving and critical thinking skills
- Strong history of developing, implementing, and providing oversight to clinical, regulatory, and quality programs.
- Demonstrated expansive working knowledge of and insight into contemporary quality and process improvement trends and best practices.
- Strong current knowledge of hospital operations, patient care services, compliance, and patient care regulations.
- Experience in driving care delivery improvement and innovation, and leading healthcare quality improvement teams.
- Understanding of healthcare information systems and data analysis tools

The Community

Douglas, Georgia

Douglas, Georgia is a place where culture, community, and convenience come together. The city is rich in Southern heritage, with the Heritage Station Museum and historic downtown providing a glimpse into its storied past. You'll find locally owned shops, charming cafés, and authentic Southern dining experiences that make everyday life feel special. The Martin Centre hosts live performances and cultural programs, ensuring there's always something to enjoy for music and theater lovers.

Culturally, Douglas offers a vibrant small-town experience.

The historic downtown district is filled with boutiques, antique shops, and locally owned restaurants serving authentic Southern cuisine. The Martin Centre, an art deco theater restored to its former glory, hosts concerts, community events, and touring acts, making it a cornerstone of the local arts scene. Annual events like the Gopher Tortoise Festival bring residents together for live music, crafts, and great food, celebrating the unique character of South Georgia.

Douglas is just a short drive from some of Georgia's most exciting destinations. The beaches of the Golden Isles and Jekyll Island are only a couple of hours away, offering stunning coastal scenery and a variety of activities. Savannah's historic squares and vibrant arts scene are within reach, and Jacksonville, Florida, offers big-city amenities and NFL action with the Jacksonville Jaguars.

To learn more about Douglas, GA, please visit:

<https://visitdouglasga.org/>

<https://www.cityofdouglasga.gov/>



Procedure for Candidacy

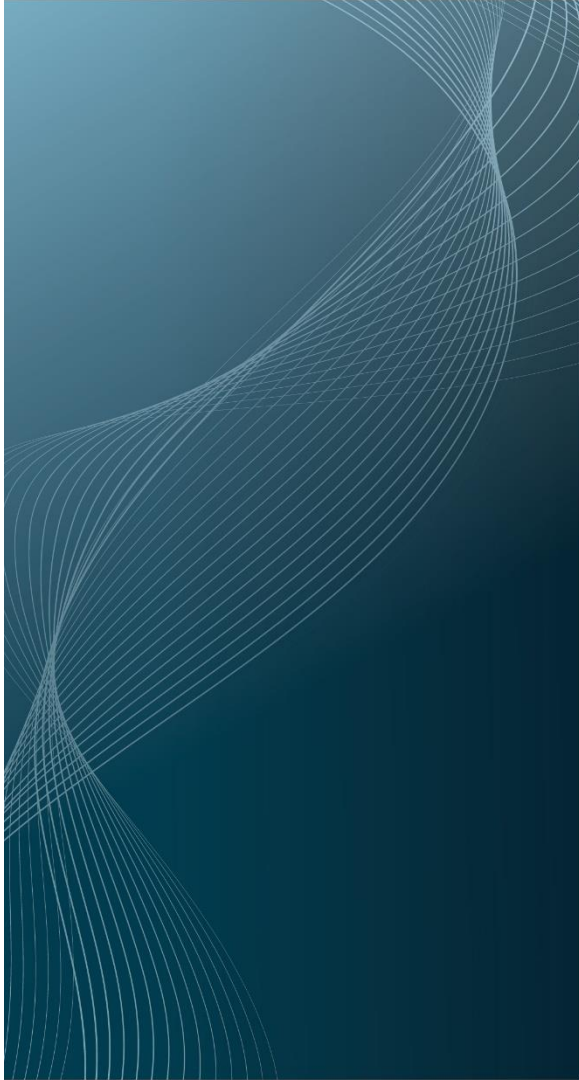
Please direct all nominations and applications to Keshia Harris and Toni Davis through the WittKieffer Candidate Portal by [clicking here](#). can also find this portal via the WittKieffer website at www.wittkieffer.com and select the "Become a Candidate" button. For additional questions, please contact Toni Davis, preferably via email at tdavis@wittkieffer.com.

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Coffee Regional Medical Center values diversity and is committed to equal opportunity for all persons regardless of age, color, disability, ethnicity, marital status, national origin, race, religion, sex, sexual orientation, veteran status, or any other status protected by law.

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