State of Michigan
Civil Service Commission

Capitol Commons Center, P.O. Box 30002
Lansing, MI 48909

Position Code
1. DEPSPL2A75N

POSITION DESCRIPTION

This position description serves as the official classification document of record for this position. Please complete the information as accurately as you can as the position description is used to determine the proper classification of the position.

2. Employee's Name (Last, First, M.I.)	**8. Department/Agency** MDHHS-WALTER P.REUTHER PSY HS
3. Employee Identification Number	**9. Bureau (Institution, Board, or Commission)** Hospital and Administrative Operations
4. Civil Service Position Code Description DEPARTMENTAL SPECIALIST-2	**10. Division** WRPH
5. Working Title (What the agency calls the position) Performance Improvement Coordinator	**11. Section** Administrative
6. Name and Position Code Description of Direct Supervisor ROBERTS, SUSAN I; STATE ADMINISTRATIVE MANAGER-1	**12. Unit** Quality & Compliance
7. Name and Position Code Description of Second Level Supervisor SOLKY, MARY C; SENIOR EXEC HOSPITAL DIRECTOR	**13. Work Location (City and Address)/Hours of Work** 30901 Palmer Rd Westland Mi 48186 / M-F 8:00 am - 4:30 pm

14. General Summary of Function/Purpose of Position

This position functions as a professional specialist responsible for Performance Improvement programs at Southeast Michigan Psychiatric Hospital (SMPH). This Specialist will coordinate and maintain an effective Performance Improvement Program for SMPH.

15. Please describe the assigned duties, percent of time spent performing each duty, and what is done to complete each duty.

List the duties from most important to least important. The total percentage of all duties performed must equal 100 percent.

Duty 1

General Summary: **Percentage:** **80**

Responsible for the coordination and maintenance of Performance Improvement activities for Adult Services which ensures the integration, coordination, communication and information-sharing among departments, services, and committees.

Individual tasks related to the duty:

• Becomes fully conversant with CMS & TJC regulations and standards.
• Conducts Root Cause Analysis.
• Ensures that Performance Improvement responsibilities assigned in the written plan to each level of the organization are carried out appropriately and effectively.
• Utilizes performance Improvement tools.
• Maintains complete and accurate records of reports prepared by the Performance Improvement Teams, which documents findings; conclusions, recommendations, actions taken and results of actions taken.
• Conducts literature search or complies data from various sources as needed for PI projects.
• Assures two-way feedback between the Performance Improvement Teams and the Health Quality Committee as well as between hospital departments, committees and other disciplines.
• Provides new employee orientation and as needed in-services to hospital staff on the program as well as on Performance Improvement techniques.
• Prepares reports for the Performance Management Committee to function. Submit reports to the Executive Staff Committee as required.
• Acts as group facilitator to a performance Improvement team and, if assigned, any time limited process improvement group.

Duty 2

General Summary: **Percentage:** **10**

Hospital liaison responsibilities, standing hospital committee participation, special assignments, and other related tasks.

Individual tasks related to the duty:

• Responsible for the review of monthly discharges and submission of Core Measures data to National Research Institute.
• Responsible for submission of the monthly CMS & ORYX data to the National Research Institute for statistical and comparative analyses of non-core performance measures.
• Serve as member and active participant of the SOP Committee, Health Quality Committee, and Infection Control Committee.
• Provides information and feed-back (verbally and in writing) as requested by various agencies related to Performance Improvement activities.
• Provide expertise and/or experience to Performance Improvement project development through facilitation and/or as a team member.
• Conducts special projects as requested to assigned.
• Perform all other duties as assigned by the Director of Quality & Compliance.

Duty 3

General Summary: **Percentage:** **10**

Other duties as assigned

Individual tasks related to the duty:

• Acts a Chairperson to the Workplace Safety Committee
• Assists with the development of recommendations to improve safety
• Reports Committee Activities to Environment of Care Committee
• Assists with the development of risk mitigation strategies for MIOSHA inspections and complaints

16. Describe the types of decisions made independently in this position and tell who or what is affected by those decisions.

As the Performance Improvement Coordinator:
• Functions for the most part independently with general direction from the Health Quality Committee and Executive Staff Committee.
• Interprets Joint Commission and CMS standards specific to Quality Assurance & Performance Improvement.
• Works with clinical and administrative staff in maintaining and pursing high quality standards of care.

17. Describe the types of decisions that require the supervisor's review.

Critical issues which may have significant impact on the certification or de-certification of the hospital. When questions related to deviation in policy are raised.

18. What kind of physical effort is used to perform this job? What environmental conditions in this position physically exposed to on the job? Indicate the amount of time and intensity of each activity and condition. Refer to instructions.

Walking to and from the units (patient care areas) to review charts, assess patients, meet with the treatment teams, and other disciplines regarding Performance Improvement activities. Because we are a hospital that provides services to mentally ill adults, some risk is involved due to the unpredictable behavior of these individuals. Also, the ability to cope with various stressful situations as they arise.

19. List the names and position code descriptions of each classified employee whom this position immediately supervises or oversees on a full-time, on-going basis.

Additional Subordinates

20. This position's responsibilities for the above-listed employees includes the following (check as many as apply):

N	Complete and sign service ratings.	N	Assign work.
N	Provide formal written counseling.	N	Approve work.
N	Approve leave requests.	N	Review work.
N	Approve time and attendance.	Y	Provide guidance on work methods.
N	Orally reprimand.	N	Train employees in the work.

22. Do you agree with the responses for items 1 through 20? If not, which items do you disagree with and why?

Yes

23. What are the essential functions of this position?

1. Coordinate and maintain an effective hospital-wide Performance Improvement Program in cooperation with the Performance Improvement Coordinator for the C&A service line for the hospital.
2. Position plays a major role in the Hospital's continuous readiness for CMS & TJC.

24. Indicate specifically how the position's duties and responsibilities have changed since the position was last reviewed.

Utilization Management Program duties removed.

25. What is the function of the work area and how does this position fit into that function?

WRPH is an adult psychiatric state hospital providing psychiatric and medical services to adults. It is Joint Commission accredited and CMS certified. The position is crucial to the maintenance of the hospital's Joint Commission accreditation and CMS certification.

26. What are the minimum education and experience qualifications needed to perform the essential functions of this position.

EDUCATION:

Possession of a bachelor's degree in any major.

EXPERIENCE:

Departmental Specialist 13 - 15
Four years of professional experience, including two years equivalent to the experienced (P11) level or one year equivalent to the advanced (12) level.

KNOWLEDGE, SKILLS, AND ABILITIES:

• Ability to interact effectively with treatment teams, third-party payors, and surveyors.
• Ability to integrate clinical evaluations with utilization and administrative requirements.
• Able to initiate, facilitate, and implement Quality Assurance & Performance Improvement activities.
• Knowledge with Root Cause Analysis.
• Knowledge with Performance Improvement tools.
• The MDHHS mission is to provide opportunities, services, and programs that promote a healthy, safe, and stable environment for residents to be self-sufficient. we are committed to ensuring a diverse workforce and a work environment whereby all employees are treated with dignity, respect, and fairness.

CERTIFICATES, LICENSES, REGISTRATIONS:

Required: Bachelor's degree in any discipline.
Desirable: Certified Professional in Healthcare Quality, LEAN Process Improvement or Six Sigma certified

NOTE: Civil Service approval does not constitute agreement with or acceptance of the desired qualifications of this position.

I certify that the information presented in this position description provides a complete and accurate depiction of the duties and responsibilities assigned to this position.

Supervisor **Date**

TO BE FILLED OUT BY APPOINTING AUTHORITY

Indicate any exceptions or additions to the statements of employee or supervisors.

N/A

I certify that the entries on these pages are accurate and complete.

FELISHIA WILLIAMS 10/8/2026

Appointing Authority **Date**

I certify that the information presented in this position description provides a complete and accurate depiction of the duties and responsibilities assigned to this position.

Employee **Date**