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For Eunice Jones, the decision to enter the healthcare quality profession was not based solely on her desire to help others. Instead, she was influenced by her personal experiences with clinicians who emulated the mindful, comprehensive care that Healthcare Quality Professionals (HQPs) work to achieve in their own organizations.

When Jones was a child, her siblings were involved in a serious car accident that required many medical treatments and long hospitalizations. Being able to see firsthand the level of personal care provided by all staff made a lasting impression on Jones and sparked her interest in the healthcare industry.

However, she knows it takes more than passion to create positive change in the quality and safety of care provided. It takes the ability to capitalize on best practices from across healthcare and other industries; culture change advanced through consistent and supportive education and coaching; a commitment to lifelong learning; and the acquisition of a wide variety of quality improvement skills and tools. These all are qualities Jones has embodied throughout her career.

EDUCATION AND ACCOUNTABILITY AS INSPIRATION

Jones first experienced the power of a comprehensive education and accountability plan embedded within an improvement plan while serving in her first healthcare role as a nurse in a neurology/neuroscience unit for Methodist Le Bonheur Healthcare in Memphis, TN, where she was tasked with teaching other staff nurses how to use the electronic health record. There, she learned that “it’s one thing to have an improvement plan in place, but without the proper education, coaching, and follow-up in place, as well, no initiative will be successful,” she said.

Her time in the neurology/neuroscience unit piqued her interest in the role of emerging technology in improving care. Jones further developed her knowledge during an internship with the hospital’s clinical programs coordinator, when she helped to customize and

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implement an electronic health record for her institution. She later assumed the position full time and implemented new processes that led to improvements in system-wide electronic documentation practices. For example, she designed a new heparin-administration flow record that limited medication choices, thus reducing the potential for medication errors. In addition, her interest in technology as a tool led her to create an educational video for her colleagues on best-practice clinical documentation guidelines.

DIVERSE SKILL SETS MAKE YOU STRONGER

When Jones took her first role as director of quality management at Methodist Le Bonheur Healthcare, these seemingly disparate experiences coalesced into a unique skill set that perfectly fit her new role as an HQP.

Because she has vast experience in hospital operations and clinical care encompassing the life cycle of care from obstetrics and pediatrics to geriatrics, she is able to understand how each stakeholder is affected by quality and patient safety issues. She embraces a patient- and family-centered care approach and incorporates this approach into the planning, delivery, and evaluation of healthcare initiatives, “an increasingly important skill for any HQP,” she said.

“It’s important to understand the ‘whole’ individual, not just their medical care; the social, behavioral, and environmental factors impact well-being,” she said.

“Incorporating a holistic view is necessary to build the infrastructure to support a safe, patient-focused experience.”

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COMMUNICATION IS KEY TO CULTURE CHANGE

Jones stressed the importance of getting consistent feedback from stakeholders in every department and at every level to facilitate transparent communications and effective change, a concept she puts into practice by conducting daily safety huddles. During each huddle, senior leaders and departmental managers share patient safety issues they have identified, such as medication errors, and discuss planning for ways to prevent errors. These huddles help encourage staff at every level of the organization to use a more critical eye in daily interactions with patients by bringing various patient safety issues to their attention every day, not only when an error has occurred or a new process is being implemented.

Jones encourages HQPs who are looking into adopting new policies or processes to research the literature and published best practices, obtain feedback from other hospitals, and explore initiatives happening in other industries before developing a plan.

“Success leaves clues; often, some other person or industry such as aeronautics has had success with a similar issue to what we’re

tackling,” Jones said. “We have to apply lessons learned from business and industry to inform our patient safety reporting and improvement efforts.”

WORKING OUTSIDE YOUR COMFORT ZONE

It was the philosophy of learning from others and being a lifelong learner that led Jones to volunteer for the Patient Safety Work Group that created the patient safety competencies, which are part of NAHQ’s *HQ Essentials*. “It was this ability to capitalize on others’ experiences that made the final product relevant and useful,” Jones said.

“Each member brought a different perspective to the work group on patient safety, particularly in regard to culture and best practices,” Jones continued. “That enabled us to ensure the competencies are transferable across all healthcare settings.”

“Organizations can use [*HQ Essentials*] for establishing and assessing baseline patient safety competencies for staff and for building the skill sets needed to deliver safe quality care organization-wide,” she said.



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