

Dr. Sruthi Mohan

PhD, MBA, CPHIMS, CPHQ, CPPS, CMQ/OE, CPIC, CLSSBB, FISQua, B.Tech

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Leadership (Quality Assurance, Risk Management & Regulatory, Clinical Informatics)

Snapshot: Qualified Healthcare practitioner holding certifications like CPHQ, Six Sigma, Patient Safety, Infection Control Quality Improvement and Public Health with more than 10 years of experience in JCI (Joint commission International) , CBAHI (The Saudi Central Board for Accreditation of Healthcare Institutions) and ACHSI (Australian Council of Healthcare Standards International) accredited Healthcare Organizations.

Core Competencies

Quality Improvement ~ Risk Management ~ Health Informatics ~ Patient Safety
Medical Commissioning ~ Project Coordination ~ Accreditation
~ Operations & Leadership

PROFILE OVERVIEW

- ❑ **Quality Improvement:** Skilled in Quality Improvement project methodology in Hospitals and Primary Healthcare Centers.
- ❑ **Process Implementation:** Define/ implement quality targets, processes to be developed, projects and activities to be audited, facilitate metrics collections, and conduct analysis for identification of process improvement actions
- ❑ **Patient Safety:** Set up & ensure compliance to effective patient safety parameters and other health/ environment related statutory regulations across various departments of the hospital
- ❑ **Accreditation:** Proven ability in effectively managing & implementing accreditation processes across area of operations
- ❑ **Program Governance:** Proficient in managing multiple projects through task, milestone, and objective tracking along with metric reporting; collaborate with business partners to create clear program goals and potential program improvements
- ❑ **Medical Commissioning:** Follow up with respective department heads for effective implementation of accreditation clauses in day-to-day operations of the hospital
- ❑ **Operations Excellence:** Set up processes related to resolution/ management of patient complaint resolution/ management, physician credentialing and privileging
- ❑ **Team Leadership:** Proven ability to lead and motivate large cross-functional and multi-cultural teams to maximize productivity, ensuring technical solutions meet business requirements
- ❑ **Special Mention:** Good knowledge & experience on **Electronic Medical Records Implementation in Hospitals and Medical Centers.**

KEY ACCOLADES ACROSS CAREER

- **JCI Survey Coordinator for JCI accreditations for PHCs /Hospitals/ Ambulatory Care Centers**
- **Vice-Chairperson for the Medical Commissioning and Operational team adopting and implementing JCI and CBAHI (The Saudi Central Board for Accreditation of Healthcare Institutions) standards for developing Quality and Patient Safety Framework in the Primary Healthcare facilities.**
- Internal auditor for CAP Laboratory Accreditation Program
- Implemented in-house Electronic Incident Reporting module and KPI dashboard in various healthcare settings
- Recognition for Best Chairperson for JCI accreditation steering committee
- Public Speaker for Healthcare Quality in International Conferences
- First Prize Winner in Dhaman External Education Program
- Advisory for Social Media Health Promotion and Disease Prevention and Community Engagement Activities
- **JCI CCPC certification modules for organization**
- Baby-friendly Hospital Initiative - World Health Organization
- Policy and Procedure manager implementation
- Survey Coordinator for Center of Excellence In Minimally Invasive Gynecology
- Accreditation Canada Education Program: Patient Centered Care in Qmentum Global
- Project Manager for Statistical Institute for Middle East
- Board Secretary for Quality and Patient Safety Governing Body
- HIMSS Accreditation Program Participation
- Quality Champion Award: Completed 20 Performance Improvement projects in healthcare settings - cost effective and system improvement strategies.
- Program Manager for WHO World patient Safety Day Campaign

PROFESSIONAL EXPERIENCE

Lead auditor and survey coordinator for ACHS, JCI, CAP, BFHI, COEMIG and CCPC-excellence survey.

- Australian Council of Healthcare Standards (ACHS).
- Successfully completed the commissioning and licensing of 3 Hospitals and 12 PHCs based on the Hospital Commissioning Checklist Structural and Operational Standards Ministry of Health, KSA and MOH Kuwait Laws and regulations (2019-2024).
- Joint Commission International Re-Accreditation Survey for Hospital (2013)
- Baby Friendly Hospital Initiative Accreditation (BFHI) from World Health Organization (WHO)(2014)
- College of American Pathologists'(CAP) Laboratory Accreditation Program (2015)
- Joint Commission International Clinical Care Certification Programme - Total Knee Replacement (2016)
- Joint Commission International Clinical Care Certification Programme- Lumbar Decompression & Fixation Programme (2017)
- Joint Commission International Re-Accreditation Survey for Hospital (2017)
- Center of Excellence in Minimally Invasive Gynecology (COEMIG) Accreditation Program (2018)
- Primary Healthcare Centers Planning and Commissioning Program (5 PHCs) (2019)
- JCI primary Care Centre Standards Implementation (2019- 2020)
- Joint Commission International Primary Care Centre Initial Survey for 3 PHCs (2021)
- Community Integration and Involvement, Chronic Disease Program Management, Enhancement of Home care services based on JCI standards and Kuwait Ministry of Health (MOH) regulations
- Joint Commission International Primary Care Centre Final Survey for 3 PHCs (May 2022)
- JCI Hospital Commissioning Program (upcoming two hospitals 2022)

Lothan Hospital ▶ Quality Director - Oct 2023- Present

Responsibilities:

- Develop Quality Improvement framework based on the CBAHI and JCI standards.
- Actively involved in Hospital design, commissioning and operations of Lothan Hospital.
- Oversees the Quality and Patient Safety functions of Hospital and ensure delivery of high-quality patient care, optimal patient flow, and continuity of care.
- Advise the Digital Applications team on the necessary fields and amendments for the health records.
- Initiate Strategic Planning, Organizational bylaws and facilitate cost effective service planning.
- Acts as Risk Manager for management of occurrences and liaison with stakeholders for simulation drills based on Kuwait Hospital emergency preparedness plans.
- Perform Risk assessment for the upcoming new healthcare centers and suggest improvements in the design and layout.
- Conducts daily executive safety hurdles to identify, prioritize and resolve clinical and non-clinical concerns.
- Develop accreditation compliance matrix for Australian accreditation standards based on EQUIP 7 and educate the hospital staff on the criterion.
- Suggest and analyze Key Performance Indicators for the departments based on the opportunities for improvement and service delivery.
- Chairperson for the Policy Committee and Quality and Accreditation Steering committee.
- Engage with physicians to suggest required strategies and improvements in daily clinical practices to deliver high quality and safe care.
- Deliver ongoing education and training for the staff members and assist departments to initiate training needs analysis and conduct mandatory training sessions.
- Directs and oversees the quality department and supervisory staff.
- Provides opportunities to aspiring clinicians and leaders to develop skills to meet career goals.
- Evaluates operations from a strategic level to ensure that organization delivers high quality of services and meets national and international accreditation standards and other requirements.
- Monitors KPIs, data analysis and validation, clinical audits and approves recommended changes.
- Reviews policies and procedures and other documentation such as checklists, logs, and reports for effectiveness, accuracy, and relevance.
- Periodically submit reports to the Governing body, Executive leadership and regulatory agencies.

Kuwait Hospital ▶ Senior Quality Manager -Jan 2023- Sep 2023

Responsibilities:

- Develop Quality Improvement framework based on the JCI and ACHSI standards.
- Advise the Digital Applications team on the necessary fields and amendments for the health records.
- Initiate Strategic Planning, Organizational bylaws and facilitate cost effective service planning.
- Facilitate improvement projects based on the lean six sigma and 5S methodologies.
- Acts as Risk Manager for management of occurrences and liaison with stakeholders for simulation drills based on Kuwait Hospital emergency preparedness plans.
- Perform Risk assessment for the upcoming new healthcare centers and suggest improvements in the design and layout.
- Conducts daily executive safety hurdles to identify, prioritize and resolve clinical and non-clinical concerns.
- Develop accreditation compliance matrix for Australian accreditation standards based on EQUIP 7 and educate the hospital staff on the criterion.
- Suggest and analyze Key Performance Indicators for the departments based on the opportunities for improvement and service delivery.
- Chairperson for the Policy Committee and Quality and Accreditation Steering committee.
- Engage with physicians to suggest required strategies and improvements in daily clinical practices to deliver high quality and safe care.
- Deliver ongoing education and training for the staff members and assist departments to initiate training needs analysis and conduct mandatory training sessions.

Dhaman Health Assurance Hospitals Company ▶ Quality Manager, June 2019- December 2022

Responsibilities:

- Commissioning of 600 bed Hospitals and 12 Primary Healthcare Centers
- Prepare/ implement project quality plans and manage QA activities. Evaluate quality issues and implement various process improvement initiatives like building a safe health care design concept based on Ministry of Health regulations, JCI and CBAHI standards.
- Participate in quality audits reviews for recommending improvement action plans like building Quality, Patient Safety, Risk Management concepts in the PHCC and hospital.
- Conduct Mock drills, patient flow drills to prepare the hospital for operational phase
- Liaise with Executive Leaders across various divisions to align process development as well as process improvement initiatives.
- Recommend process changes based on collated external customer satisfaction survey feedback to enable medical commissioning of the hospital
- Acquaint team members with various international standards for implementing the same in day-to-day business operations.
- Assess team performance and update department managers on process training requirements of team members. Prepare/implement training plans based on business as well as operational requirements
- Identify/ capitalize on lessons learnt & improvement needs in design and development processes.

Taiba Hospital ▶ Quality Improvement Specialist October 2014- May 2019

Responsibilities:

- Guided quality teams in ensuring compliance to organizational quality standards in role as Head of the Department.
- Conducted FMEA and RCA for new and existing projects.
- Enhanced patient satisfaction by effectively resolving patient safety issues/ complaint mitigations. Prepared patient safety manual for the hospital.
- Implemented various policies & procedures for accomplishing strategic goals.
- Set up/ managed international patient safety goals as well as Required Organizational Standards with 100% evaluation and monitoring compliance.
- Conducted periodic audit of medical records and enhanced clinical documentation
- Formed the Hospital Committee for streamlining activities across clinical and administrative areas
- Conducted self-surveys related to onsite observation, collated information/ data for evaluating & implementing required standards
- Maintained updated records of surveys conducted based on various survey techniques
- Prepared action plans based on evaluated earlier recommendations
- Defined documentation control processes, system control policies and procedures within the hospital
- Focused on design control & amendment of documentation in the hospital, design, approval and amendments of forms
- Evaluated policies & procedures, job description, work instruction / task sheets, forms and copies of amendment records
- Conducted regular regular environmental rounds against cleanliness, fire safety, and occupational health safety for the hospital

- Developing and directing software system validation and testing methods.
- Overseeing the development of documentation.
- Working closely with clients and cross-functional departments to communicate project statuses and proposals.
- Analyzing data to effectively coordinate the installation of new systems or the modification of existing systems.
- Managing the software development lifecycle.
- Monitoring system performance.
- Communicating key project data to team members and building cohesion among teams.
- Developing and executing project plans.
- Applying mathematics and statistics to problem-solving initiatives.
- Applying best practices and standard operating procedures.
- Creating innovative solutions to meet our company's technical needs.
- Testing new software and fixing bugs.

CREDENTIALS

- Doctor of Philosophy, **Healthcare Management** (2024) from Sunrise University, India
- Master of Business Administration, **Healthcare Management** (2019-2021) from JNU, India.
- Bachelor of Technology in Electronics and Communication, ASIET College, India (2008-2012)
- **Epidemiology in Public Health Practice Specialization**, John Hopkins University
- **COVID-19: Operational Planning Guidelines**, WHO
- **Project Management**, LinkedIn Learning
- **FISQUA – Fellowship** in Quality Improvement and Accreditation
- **Patient Safety and Quality Improvement**, John Hopkins University
- **Certified Professional in Infection Control (CPIC)**, AHIMA
- **Lean Six Sigma Master Black Belt (CLSB)**, from Anexas Europe Consultancy
- **Certified Professional in Healthcare Quality (CPHQ)**
- **Certified Professional in Healthcare Information Management (CPHIMS)**, HIMSS
- **Certified Professional in Patient Safety (CPPS)**, IHI
- **Certified Manager of Quality/Organizational Excellence (CMQ/OE)** from ASQ

Date of Birth: 04/05/1990 ~ **Nationality:** Indian ~ **Passport No.:** L7071956