University of California at Davis Health

Chief Nursing Executive

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University of California at Davis Health (UC Davis Health)

UC Davis Health is improving lives and transforming health care by providing excellent patient care, conducting groundbreaking research, fostering innovative, interprofessional education, and creating dynamic, productive partnerships with the community.

UC Davis Health is a major driver of economic prosperity for both the Sacramento region and California. According to a study of pre-pandemic data, in 2019 UC Davis Health expenditures led to a total economic impact of $4.60 billion for the seven-county local region – an additional $1.08 for every dollar UC Davis Health spent. UC Davis Health had 11,600 employees in the region, and economic activity generated indirectly and by their spending supported an additional 14,600 jobs.

UC Davis Health also partners with colleagues in the nation’s best School of Veterinary Medicine, the nation’s best School of Agriculture and Environmental Sciences, one of the nation’s best Colleges of Biological Sciences and one of the nation’s best Colleges of Engineering – all from within one of the top five "Best Public Universities" in the U.S.

UC Davis Health serves a 65,000-square-mile area that includes 33 counties and 6 million residents across Northern and Central California.

UC Davis Health encompasses:
- UC Davis Medical Center
- UC Davis Children's Hospital
- UC Davis Comprehensive Cancer Center
- UC Davis School of Medicine
- Betty Irene Moore School of Nursing at UC Davis
- UC Davis Health Community and Licensed Clinics
- UC Davis Health Community Physicians
- UC Davis MIND Institute
- UC Davis Health Rehabilitation Hospital
- Community partnerships with dozens of organizations and health providers across our 33-county Northern California service area, to improve levels of patient care everywhere

University of California at Davis Medical Center (UC Davis Medical Center)

Sacramento-based UC Davis Medical Center is a nationally renowned, 646-bed multi-specialty academic medical center where clinical practice, teaching and research converge to advance human health.

In its 2022-23 survey, U.S. News & World Report ranked UC Davis Medical Center as one of the nation’s best hospitals in nine adult medical specialties, including cancer; cardiology & heart surgery; diabetes & endocrinology; ear, nose and throat; geriatrics; neurology & neurosurgery; obstetrics & gynecology;
orthopedics; and pulmonology & lung surgery. UC Davis Medical Center also ranked as high performing in gastroenterology & GI surgery and in urology.

UC Davis Medical Center was recognized as the No. 1 hospital in the Sacramento area, and among the top 10 in California. U.S. News also rates the performance of hospitals in many common procedures and conditions. UC Davis Medical Center ranked high performing (the highest possible rating) for back surgery (spinal fusion), COPD, colon cancer surgery, diabetes, heart attack, heart failure, kidney failure, lung cancer surgery, ovarian cancer surgery, pneumonia, prostate cancer surgery, stroke, and transcatheter aortic valve replacement (TAVR).

In pediatric care, U.S. News included UC Davis Children’s Hospital among the nation’s top children’s hospitals in five pediatric specialties in its most recent rankings, including diabetes & endocrinology, neonatology, nephrology, pulmonology & lung surgery, and together with partner Shriners Children’s Northern California, orthopedics.

UC Davis Medical Center has also earned the nation’s highest form of recognition for nursing excellence: Magnet® recognition from the American Nurses Credentialing Center. Less than 10 percent of U.S. hospitals typically achieve this designation from the world’s largest and most prominent nurse credentialing organization – and as of the time of this writing, UC Davis is the only hospital in Sacramento to carry it.

Along with patient safety and quality care, equity and inclusion are top priorities at UC Davis. An example: for a decade, UC Davis Medical Center has been recognized as a LGBTQ Healthcare Equality Leader in the Healthcare Quality Index, an annual survey conducted by the Human Rights Campaign Foundation, the educational arm of the country’s largest lesbian, gay, bisexual and transgender (LGBT) civil rights organization.

UC Davis typically admits approximately 30,000 patients per year and handles more than 800,000 visits. The medical center’s emergency room sees close to 200 patients per day on average. The hospital maintains an annual budget of roughly $1.7 billion.

**FINANCIAL AND OPERATIONAL HIGHLIGHTS**

FYE 6/30/2021:

- Licensed beds: 646
- ER visits: 69,186
- Clinic/office visits: 1,097,902
- Admissions: 29,953 (Inpatient admissions; does not include 17,428 observation days)
- Staff: 13,327 (full and part-time)
- Nurses: 3,250
- Physicians: 1,323 (direct care providers)
- Students: 1,065
- Residents: 987
- Faculty: 1,730
- External research funding: $368 million in 2021, including $194 million in NIH funding

For more information, visit: [https://health.ucdavis.edu/welcome/](https://health.ucdavis.edu/welcome/)
Reporting to the UC Davis Health Chief Clinical Officer, the Chief Nursing Executive (CNE) provides strategic direction, executive level leadership, and general management for all aspects of Patient Care Services’ departments and programs, as well as other assigned functions, to ensure the provision of the highest quality patient care services. The CNE is responsible for the professional practice of nursing, including advanced practice providers, across all locations operated by the health system. The CNE monitors best practices, licensure and regulatory requirements, market and community developments and technological advancements to advance the professional practice of nursing at the health system in a compliant and progressive manner, supported by appropriate policies and procedures.

As a key member of the senior executive team, the CNE provides collegial and collaborative leadership in developing medical center long-term strategic direction and vision and maintaining positive and productive relationships with all staff members, including the medical staff. The CNE represents the health system in professional societies, healthcare associations, the University of California system, and northern California on issues related to the professional practice of nursing and the medical center’s patient care services. The CNE actively endorses and serves as a role model for the Principles of Community, health equity, diversity and inclusion.

**KEY RELATIONSHIPS**

**Reports to**  
Chief Clinical Officer, UC Davis Health

**Direct reports**  
Associate Chief Nursing Officers (4)  
Chief, Advanced Practice  
Chief Nursing Informatics Officer  
Director, Business Operations  
Director, Center for Nursing Science

**Dotted line reports**  
Administrator, Home Care Services  
Associate Chief Nursing Officer, Ambulatory  
Associate Director, Clinical and Translational Science Center  
Chief Nurse Anesthetist  
Clinical Director, Cancer Center  
Director, Heart and Vascular Center  
Executive Director, Emergency Department  
Executive Director, Perioperative Services  
Executive Director, Transplant Center

**Other key relationships**  
UC Davis Health Senior Leadership Team  
Dean, The Betty Irene Moore School of Nursing at UC Davis
KEY RESPONSIBILITIES
The CNE establishes and supports programs for the recruitment and retention of support staff, and develops personnel management strategies which comply with Federal, State, UC Davis Health, and labor agreements. The CNE establishes and maintains nursing and patient care policies, which focus on the care of the patient and promotes excellence in the practice of nursing. The CNE is responsible for leading best practice work across UC Davis Health as it relates to care management resources/functions, continuity of care, and clinical outcomes. The CNE prioritizes and supports evidence-based practice, promotes and implements successful care management practices across UC Davis Medical Center and creates organizational alignment around care management and care transitions from ambulatory to inpatient to post-acute care. The CNE monitors legislative activities affecting the practice of nursing and healthcare in general. The placement develops processes which result in collegial collaboration relative to patient and program issues in all settings: inpatient and outpatient. The CNO establishes a communication network with executive nursing organizations, The University of California system, and the community to facilitate sharing and to provide a service to the community, which is in connection with the University of California mission. The CNE participates in the ongoing development and implementation of UC Davis Health’s mission, goals, objectives, management strategies and policies as a member of senior leadership. The successful placement will be responsible for all clinical care provided by UC Davis Health as well as responsibility for operations as it relates to care management, the trauma program, and the regional burn center.

Leadership and Strategy:
- Participates in formulating patient care services and the organization’s vision and strategic plan.
- Communicates and operationalizes the strategic plan.
- Attracts, retains and develops the best and brightest nursing leadership team.
- Establishes and maintains a diverse, equitable, inclusive and bias-free work environment.
- Establishes and maintains an environment conducive to excellence in patient care.
- Continually evaluates quality and safety performance, identifies improvement opportunities, and plans and implements programs for improvement.
- Establishes and maintains an environment that is supportive of professional nursing practice and compassionate patient care consistent with a Magnet facility.
- Develops strong and engaging relationship with Betty Irene Moore School of Nursing and its learners.
- Supports research, professional development, and scholarship opportunities.
- Promotes multidisciplinary collaboration.
- Identifies, encourages, and provides mechanisms for participation of the nursing staff in shared governance.
- Ensures that the environment addresses needs of a diverse patient population and workforce.
- Drives innovation and technology advancements with heavy focus on the future of nursing practice.
- Provides strong executive leadership into development and implementation of information systems needed to support patient care.

Operations:
- Directs the development and implementation of evidence-based standards, policies, and programs to ensure excellence in nursing practice.
- Develops collaborative relationships with department heads, the medical staff, and colleagues in the nursing community.
- Designs and directs the implementation of programs and processes to support organizational mission and goals.
- Establishes criteria for recruitment, selection, retention, promotion and discipline for nursing personnel with an awareness of UC Davis Health personnel policies, affirmative action goals and collective bargaining contracts.
- Jointly responsible for collective bargaining and labor relations with California Nurses Association (CNA).

**Compliance:**
- Assures care and unit functions are in compliance with applicable local, state, and federal regulations and accrediting agencies.
- Develops and ensures compliance with nursing policies and procedures, standards of patient care and nursing practice.
- Supports a system that encourages the identification and analysis of errors and near misses in the context of a just culture.
- Promotes an environment where employees are alert to opportunities for the enhancement of patient care through utilization of the latest research findings, systems analysis and performance improvement principles.
- Initiates multidisciplinary and interdepartmental forums to ensure the promotion and protection of patient/family rights.

**Fiscal:**
- Collaborates with other members of the executive management team in financial planning and in setting priorities for resource allocation, integrating the institution’s mission and goals.
- Justifies financial resources in support of evidence-based practice and advocates for resources necessary for effective and efficient patient care.
- Establishes and maintains a cost-effective patient care environment, as demonstrated by benchmarking on relevant metrics.
- Develops and manages divisional budget to deliver safe and effective patient care with awareness of cost constraints and containment.

**Evidence-Based Practice:**
- Builds a culture that cultivates the implementation and sustainability of evidence-based practice in the practice setting.
- Serves as a champion for evidence-based practice projects by readily checking on progress, providing feedback, removing barriers, and offering encouragement.
- Promotes the conduct, implementation and adoption of evidence-based practice and culture.
- Assess readiness for evidence-based practice in the clinical practice environment.
- Assesses staff commitment to engaging in evidence-based practice.
- Promotes staff access to education, experts and mentors in evidence-based practice.
- Facilitates staff access to relevant data needed for evidence-based practice.
- Holds staff accountable for the integration of evidence-based practice into practice commensurate with their level of clinical expertise/role.
- Provides meaningful recognition of staff and mentors who engage in evidence-based practice.
- Supports and develops clinical, educational and innovation research with the Betty Irene Moore School of Nursing and other universities for faculty and doctoral nursing students.
DESIRED OUTCOMES

- Establish a reputation as a relationship-based leader who fosters collaboration across UC Davis Health, in the communities the organization serves, and in the broader nursing leadership community.
- Implement the 2022-2026 Nursing Strategic Plan and the 2022-2027 Clinical Strategic Plan.
- Build on the strong foundation in nursing recruitment and retention; evolve staffing models to ensure the sustainable and fiscally responsible delivery of care.
- Advance nursing informatics and the use of data in patient care services.
- Optimize work in case management to improve patient throughput; process design and control.
- Elevate patient and care team experience.
- Continue to elevate quality and patient safety, to support the highest caliber outcomes for patients.
- Continue to build on UC Davis Health’s strong foundation as a Magnet-designated organization.
- Establish a collaborative clinical and academic partnership model to advance nursing outcomes.

COMPENSATION RANGE

Base salary: 25%: $398,000; 50%: $446,000; 75%: $525,000; 90%: $574,000

Actual base salary will be dependent on an individual’s skills, experience, and qualifications. The final salary and offer components are subject to additional approvals based on UC policy. To learn more about the benefits of working at UC Davis, including total compensation, please visit: https://ucnet.universityofcalifornia.edu/compensation-and-benefits/index.html.

The University of California is an Equal Opportunity/Affirmative Action Employer advancing inclusive excellence. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability, age, protected veteran status, or other protected categories covered by the UC nondiscrimination policy.
CANDIDATE SKILLS AND/OR EXPERIENCE

REQUIRED:
▪ Seven to ten years of increasingly responsible experience in hospital management, preferably in an academic medical center.
▪ Active Registered Nurse License in the State of California, or eligible to be licensed in California.
▪ Bachelor’s or master’s degree in nursing required. Master’s degree in business, nursing, health care administration or a related field is required.
▪ Experience serving in a Magnet-designated organization.
▪ Academic Medical Center and Level 1 Trauma Center experience.

PREFERRED:
▪ Thorough understanding of all elements of health care delivery, including strategy, business planning, operations and financial conditions.
▪ Expertise in all aspects of assigned functions, as well as development and management of operational and capital budgets.
▪ Proven administrative skills including the ability to organize tasks and provide clear direction and leadership to others. Proven ability to work effectively with the other health professionals, including physicians and administrators.
▪ Demonstrated understanding of the roles of teaching, research and patient care in the academic medical center and active participation in improvements relevant to each mission.
▪ Ability to comply with all nurse practice and UC Davis Health policies and procedures for infection control, safety, administrative and clinical practice. Ability to comply with activities mandated by the Joint Commission/Title 22, Clinical Laboratory Improvement Amendments, and other regulatory agencies.
▪ Knowledge of strategic planning and its relevance to nursing operations and future direction.
▪ Knowledge of management information systems and its relevance to practice, quality and safety. Strong verbal, written and negotiating skills.
▪ Able to demonstrate consensus and inclusive practice in key situations.

CRITICAL LEADERSHIP CAPABILITIES

Collaborating and Influencing
▪ Facilitates discussions that enable people and stakeholder groups to collaborate independently
▪ Promotes collaboration and partnership among patient care services and across multiple parties inside UC Davis Health
▪ Orchestrates events for key players and stakeholders to engage in dialogue and shape consensus
▪ Builds and leverages a network of relationships that are important to UC Davis Health and its stakeholders
▪ Elevates UC Davis Health nursing throughout the State of California and beyond through participation in peer (CNE) and association meetings.
Driving Results

- Acts to surpass patient care services team goals, seizing opportunities to extend the limits of what is possible
- Sets continually higher goals for the team that are ambitious but achievable
- Identifies and acts on new opportunities that enable performance targets to be exceeded
- Seeks new challenges and is energized by exceeding targets

Leading People

- Identifies and leverages individual strengths and potential within the patient care services team
- Engages the patient care services team in discussions around UC Davis Health's longer-term strategy and how they can contribute
- Delegates significant responsibilities to team members to free self to work at a strategic level
- Gives team members decision-making authority and accountability within their areas of responsibility
- Invites the team to recommend ways to solve problems, discuss challenging issues, or generate new ideas, through shared governance and other avenues
APPENDIX

PROFESSIONAL RELATIONSHIPS AND TEAMWORK

Relationship-Based Culture

Nurses at UC Davis Health believe everything in health care will work better when relationships are healthy since relationships permeate every aspect of healthcare. All of the technical aspects of health care occur in the context of human relationships, which means all of the technical tasks underlying the provision of care work better when we tend to relationships. Healthy relationships are formed when nurses consistently attune to one another, wonder with and about one another, follow the cues provided by one another, and hold one another with respect and dignity. We advance our relationship-based culture through the application of these relational and therapeutic practices to all relationships at all levels and in all disciplines.

The Relationship-Based Care model (Koloroutis, 2004) is the philosophy, way of being, and operational blueprint which shapes our caring behaviors. The model’s six principles guide the transformation of infrastructure, processes, systems, and practices to support care givers in all disciplines in creating therapeutic relationships with patients and families.

Relationship-Based Care identifies three key relationships for the provision of humane and compassionate healthcare. These relationships are the nurse’s relationship with self, relationships with team members, and relationships with patients and families. We use this order, not to signal priority, but to acknowledge the importance of certain relationships dependency on others. Healthy, trusting relationships are dependent on how the individuals relate to themselves. Then, it follows that healthy relationships with patients and families are dependent on the relationships individuals have both with themselves and with their teams.

Demonstration of Relational and Therapeutic Practices:

Attuning: Being present in the moment and tuning in to an individual or situation.

- Connects with the patient/family/colleague with a focus on their state of being (physical, emotional, mental).
- Takes in and observes verbal and nonverbal cues and expressions.
- Tunes in to the energy in the room including one’s own energy, proximity, and pace of communication.
- Communicates acceptance and respect for the person receiving care through listening, spoken words, and body language.
- Gives focused attention to the person and minimizes interruptions to care.
Recognizes the potential for EMR (computer) and other technical devices to interfere with the therapeutic connection and takes appropriate action to stay tuned in to the person.

- Notices verbal and nonverbal cues indicating distress or suffering and responds appropriately.
- Conveys openness, transparency, and interest in the person.
- Conveys a sturdy, compassionate, and nonjudgmental presence.

**Wondering:** Being genuinely interested in a person. It requires an openhearted curiosity about what can be learned about this unique individual, while intentionally suspending assumptions and judgement.

- Conveys genuine interest in the person receiving care.
- Asks open ended questions.
- Suspends own agenda as appropriate and seeks to learn about the person.
- Communicates an openness and desire to listen and learn from the patient/family/colleague. Conveys a respect for human diversity, patient/family history, and culture.
- Avoids assumptions and consciously suspends judgements; is aware of potential for personal bias and refrains from labeling.
- Stays open and curious to new data and information about the person.
- Remembers that each person has a unique backstory that will affect their interactions and responses to care.

**Following:** Listening to and focusing on what an individual is teaching us about what matters most to her or him and allowing that information to guide our interactions. It requires consciously suspending our own agenda.

- Collaborates with the patient/family as involved partners in their own care.
- Listens with a focus on what matters most to the person.
- Provides sufficient time and attention for the patient/family/colleague to share what is on their mind. Refrains from interrupting, correcting, or rushing to fix prior to hearing the person’s perspective.
- Provides care that is consistent with what the patient family teaches about what matters to them.
- Notices and responds to person’s cues and/or expressed preferences re: proximity, eye contact, touch, preferred name, etc.
- Listens to and validates the person with empathetic sounds and conscious body language.
- Clarifies and seeks to resolve areas of concern and/or disagreement.
- Builds a sense of safety and trust by remembering specific patient and family needs and requests.

**Holding:** Intentionally creating a safe haven to protect the safety and dignity of an individual.

- Conveys a fundamental regard for the dignity and privacy of all persons needing care.
- Acts with integrity and care by following through on all commitments.
- Asks for help when necessary to meet patient/family/colleague needs.
- Communicates information about the patient/family/colleague to the rest of the health care team in respectful terms and language.
- Avoids derogatory labels or descriptors that may bias team members and interfere with ability to remain open and therapeutic.
- Shares information and proactively attends to transitions so that the patient and family knows what is happening and what to expect in their care.
- Participates in and encourages consistent and visible teamwork to safeguard the well-being of the patient and family.
- Remains a steady presence even in the face of strong emotions and crisis.
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