

## JOB DESCRIPTION

<b>1. JOB IDENTIFICATION</b>	
Job Title:	Clinical Governance Support Manager
Reports to (insert job title):	Clinical Governance & Risk Team Leader
Department, Ward or Section:	Clinical Governance & Risk Team
Directorate or Corporate Department:	Corporate Services
Job Reference:	
No of Job Holders:	1
Last Update (insert date):	October 2024 (new post)

<b>2. JOB PURPOSE</b>
<p>As the Clinical Governance Support Manager, the post holder will coordinate and implement aspects of NHS Shetland’s arrangements for Quality, Safety and Risk which is intended to bring about improvements in safety, effectiveness and quality of experience to patients receiving care in NHS Shetland and the Shetland Community Health and Social Care Partnership (CHSCP).</p> <p>The post holder will participate in a range of quality and patient safety systems and processes, (e.g. adverse event reports, incident and risk management, patient feedback, safety alerts, Freedom of Information responses etc.). They will also promote the sharing of information, good practice and learning across the organisation via a range of mechanisms such as Governance Group meetings, Guidance and Learning Bulletin and Clinical Governance Afternoons.</p> <p>The post holder will have specific responsibility for undertaking the data collation, upload and validations to support the SNAP Audits, particularly the Hip Fracture and Stroke Audit, as well as undertaking audit activity to support data returns for the Excellence in Care measures and Scottish Patient Safety Programmes.</p> <p>The postholder will also act as a positive role model, creating staff confidence in the clinical governance and quality improvement processes in place.</p>

### 3. DIMENSIONS

NHS Shetland operates one hospital, Gilbert Bain Hospital, and a range of community based health services which are delivered from 10 Health Centres located throughout Shetland. There is a total of approximately 800 members of staff from all disciplines, based around the NHS Board's Estate.

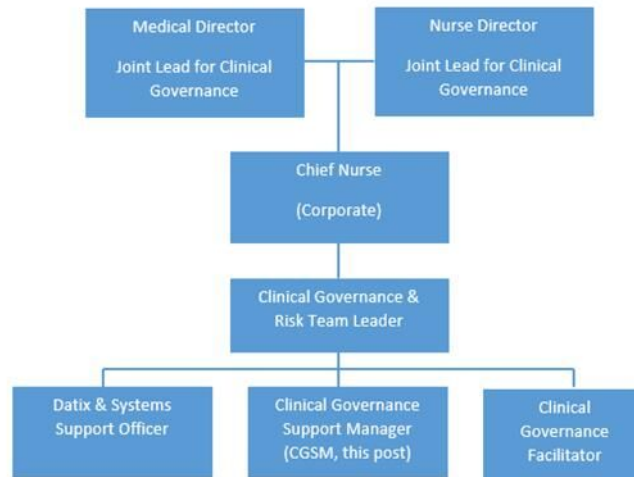
The Chief Nurse (Corporate) is responsible for the delivery of strategic programmes in relation to patient experience and engagement, quality, safety and the improvement agenda across the NHS Board and Shetland Community Health and Social Care Partnership.

The Clinical Governance and Risk Team are responsible for the delivery of both local and national programmes of work to ensure that NHS Shetland meets the 3 Quality Ambitions of the provision of safe, effective and person-centred care.

The Clinical Governance and Risk Team have a key role to play organisationally in supporting the development of a quality improvement ethos and promoting learning from all adverse events / debriefs/ case reviews etc.

The Clinical Governance and Risk Team comprises the Clinical Governance and Risk Team Leader, Datix and Risk Systems Officer, this post and a Clinical Governance Facilitator.

#### 4. ORGANISATIONAL POSITION



## 5. ROLE OF DEPARTMENT

The Chief Nurse (Corporate) is responsible for the strategic delivery of the following organisational functions:

- Clinical and care governance;
- Care assurance in the community setting
- Patient experience, public involvement, feedback and complaints
- Implementation of the Health and Care (Staffing) (Scotland) Act 2019 for all NHS professions

The Clinical Governance & Risk Team, through the Clinical Governance and Risk Team Leader, are responsible for the provision of leadership to the Clinical Governance & Risk agenda and the provision of support, development and implementation of appropriate systems which support governance, care assurance and the identification and control of risks across the organisation.

The Clinical Governance and Risk Team are specifically responsible for:-

- Providing advice and support for clinical governance, risk management, clinical audit and quality assurance activities;
- Management of adverse events, including the management and administration of the Datix system;
- Ensuring regular review and oversight of the Strategic Risk Register, supporting managers to review and manage risks at Departmental, Directorate, Organisational and Strategic risk register level;
- Providing a mechanism for sharing learning both from local and national sources eg Scottish Public Services Ombudsman (SPSO), Healthcare Improvement Scotland (HIS);
- Monitoring implementation of the clinical, care and professional governance framework;
- Management of the Leadership Walkrounds including monitoring of actions;
- Submission of reports and performance data both internally to the Board, Committees, Groups and externally e.g. Scottish Patient Safety Programme (SPSP);
- Reviewing, updating and implementing relevant clinical governance policies and procedures;
- Providing support and preparation of submissions for external reviews; and
- Providing a Research governance function, reviewing research applications and preparing them for consideration for approval.

The Clinical Governance and Risk Team supports NHS Shetland, its managers and staff to comply with relevant legislation, strategies and policies and to apply best practice in the field of clinical governance and risk management.

The Clinical Governance and Risk Team work collaboratively with other departments eg Information Governance, Corporate services and Health and Safety Departments to enhance governance processes across the organisation

The service also indirectly supports integration, by working in partnership with colleagues in Shetland Islands Council, on services under the direction of the Integration Joint Board.

## 6. MAIN TASKS, DUTIES AND RESPONSIBILITIES

### **Organisational / Operational Support**

Support the development of a robust patient safety and clinical governance framework within the NHS Board and CHSCP to ensure the provision of safe and high-quality care.

Work closely with colleagues to raise the profile of clinical governance and risk management, highlighting in practice the relationship between patient safety, management and everyday clinical practice and the effects on the patient, identifying areas of good practice and highlighting areas for improvement.

As part of the Clinical Governance and Risk Team facilitate, develop and co-ordinate clinical risk management within the Board, fostering a 'just culture' in line with the NHS Board corporate objectives, resulting in the delivery of a high-quality, cost-effective service.

Work with all services within the NHS Board and CHSCP to promote and create a culture of openness, transparency and collaboration, including ensuring compliance with Duty of Candour legislation and 'being open'.

Act as a positive role model, creating staff confidence in the clinical governance and quality improvement processes.

Actively encourage, promote and assist teams to view, assess and act upon feedback, incident and safety alerts etc. via the relevant processes and systems eg monthly governance group meetings.

Analyse, design and create management reports, including specialty reports (e.g. medication, falls etc) to allow local monitoring of trends relating to adverse events.

Prepare both regular and ad-hoc activity reports to feedback to the Executive Directors, Senior Clinicians, Operational Management Groups and Clinical Governance Committee structure to support them in monitoring the quality of patient services.

Support a reporting culture, ensuring that actions taken and lessons learnt from feedback, adverse events, debriefs and incident investigations are shared appropriately throughout the organisation via general distribution, newsletters, alerts, bulletins, and the Clinical Governance webpage.

Play a key role in governance activities, providing expert input, co-ordinating data, providing statistics and ensuring that multi-disciplinary team action plans are formulated and implemented.

Ensure that the views of service users are monitored consistently and that feedback is collated and shared with clinical leaders for improvement

Facilitate difficult conversations involving a range of people, maintaining confidentiality and discretion at all times, escalating concerns as appropriate through line management structure.

### **Systems and Processes Support**

Responsible for supporting the development, implementation and maintenance of key quality and patient safety systems such as DATIX risk management systems;

Provide specialist advice and support to staff at all levels to ensure that they are using systems appropriately and following quality and patient safety procedures;

Support specific groups which have been set up discuss issues and development of quality and patient safety systems.

Oversee the management of adverse events, communicating with staff responsible for investigating the incident and help analyse data, and build reports on themes / issues.

Ensure timely review and closure of incidents in accordance with local policy and ensuring incidents are appropriately graded according to risk.

Support production of comprehensive SAER reports and help monitor the compliance of completion of action plans from critical incident investigations and incident reviews.

### **Departmental Responsibilities**

Deputise for Clinical Governance & Risk Team Leader or Chief Nurse (Corporate) as required.

Provide feedback to staff of the learning from incidents through various methods, including newsletters, presentations, in house training programmes, governance notices, learning from incidents and safety boards.

Contribute to policy and procedure development, implementation, monitoring and evaluation within the Department and wider organisation, supporting the development of standard operating procedures (SOPs) and processes relevant to areas of work

Effectively contribute to the Clinical Governance & Risk Team work programme by delivering on key areas of work eg supporting the national audit programmes on Hip Fracture and Stroke through timely and efficient data collection and submission, ensuring work is prioritised to meet strict monthly reporting deadlines

Ensure all external reporting is undertaken within the required timeframes e.g. SNAP, SPSP and HIS data, ensuring they are quality assured and submitted timely.

Participate in review of Incidents for consideration of Duty of Candour, ensuring compliance with Duty of Candour requirements.

### **Education & Training**

Promote quality and safety across the organisation, supporting the Chief Nurse (Corporate) and Clinical Governance & Risk Team Leader in developing, implementing and monitoring Quality and Patient Safety related educational / training packages which will meet the needs of the different professions/ teams across the organisation eg management training, Junior Doctors Training

Deliver training relating to Quality and Patient Safety to NHS Shetland staff to educate them on adverse event management /patient feedback etc through formal and informal training opportunities.

### **Personal Development**

Extend own knowledge by attendance at courses/conferences and by accessing the latest relevant literature to ensure up to date knowledge.

Actively seek out learning opportunities appropriate to the role.

Maintain an awareness of current developments in quality improvement methodologies, patient safety, clinical governance and clinical effectiveness issues both within NHS Shetland and nationally.

## **7a. EQUIPMENT AND MACHINERY**

- Microsoft 365 Office applications:
  - Word for general word processing, design of forms, production of reports etc
  - Excel for analysis of data, including statistical analysis, drawing of graphs etc.
  - PowerPoint for the creation and display of teaching materials, talks, general presentations.
  - Internet Explorer to access information from the web including standards, guidelines, SPSO reports and evidence based materials.
- Use of digital media to support meetings and learning opportunities eg MS Teams for Clinical Governance Afternoon sessions.
- Good working knowledge of all office equipment including desktop computer, printer, dictation equipment, photocopier, binder, laminator and shredder.
- Adverse Event and Risk Management System – currently Datix

## 7b. SYSTEMS

The following are examples of systems which will be used when undertaking the role:

- National audit databases;
- NHS Board Performance System – Pentana;
- Patient Administration Systems – TRAK, EMIS;
- DATIX, current Incident and Risk Management System;
- Microsoft Office Suite inc Access, Excel, PowerPoint, Word, MS Teams;
- Extensive email use M365;
- Regular access to Intranet & Internet.

The postholder is also responsible for

- Ensuring the safe storage of data both manually and electronically and in a way that allows for immediate retrieval;
- Taking necessary precautions when transmitting information to ensure only disclosing it to those who have the right and need to know it;
- Note taking at a range of meetings – transcribing, typing, providing copies for those present & also maintaining a central electronic copy for access to other relevant members of staff via a shared system eg MS Teams channel;
- Using patient information systems to support data collection and collation, and case ascertainment;
- Responsibility for creating, maintaining and modifying systems (both manual and electronic) within the department to support clinical audit, effectiveness and patient feedback projects;
- Ensuring the integrity of systems is maintained i.e. quality of data entry.

## **8. ASSIGNMENT AND REVIEW OF WORK**

Work will be requested and agreed with either the Chief Nurse (Corporate) or Clinical Governance and Risk Team Leader. The Clinical Governance and Risk Team hold a Team huddle each morning to discuss daily work priorities and to communicate key deadlines and update on current work priorities.

The post holder is responsible for managing a programme of quality and patient safety activities, which meet both local and national priorities. This includes the national clinical audit programmes, Excellence in Care, and supporting the work of the Scottish Patient Safety Programme locally.

The post holder will be managed by the Clinical Governance Team Leader with regular 1-1s, although the post holder will be expected to use own initiative and experience to prioritise their schedule and to deliver work to pre-agreed timeframes. The postholder will also be capable of working effectively both as a team member and individually within departmental protocols.

This job description covers key result areas and as such does not intend to provide a comprehensive list of objectives. Objectives will be set in accordance with organisational priorities and changing service needs. These will be reviewed as part of formal appraisal on an annual basis.

## **9. DECISIONS AND JUDGEMENTS**

The post holder is responsible for managing their own workload, delivering on a range of activities to strict deadlines.

Much of the work is self-directed and the post holder will prioritise based on their knowledge of the internal and external demands on the organisation. The postholder will require to use their own initiative and be self-motivating.

The post holder is expected to organise and decide on the content of their daily work, supporting the requirement to deliver on data collection, upload and validation of clinical results within strict monthly deadlines.

## **10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB**

Persuading and motivating health care professionals into participating in quality and patient safety initiatives and to take ownership of the results and recommendations of these initiatives.

Persuading and motivating clinicians and management to use the results of initiatives to change and improve practice where necessary.

Ensuring engagement of patients and carers in projects, ensuring that their points of view are taken into consideration.

Keeping on top of an ever-changing workload which can consist of competing and changing priorities at very short notice.

Managing the time/workload of the work stream to deal with ongoing and new developments.

## 11. COMMUNICATIONS AND RELATIONSHIPS

### **Internal Communications and Relationships**

#### Within the department

- Chief Nurse (Corporate), Clinical Governance Team Leader and other staff members
- Clinical staff across various work streams about day-to-day work and forward planning of meetings and project activities
- Other team members to ensure appropriate links and co-ordination of all aspects of quality, safety and risk activity.

#### Within the Organisation

- Chief Executive, Executive Directors in particular Medical and Nurse Directors (Joint Leads for Clinical Governance), Chief Officer Health and Social Care Partnership and Chief Nurses and Heads of Service across the NHS and CHSCP for the presentation of reports and recommendations.

- All Clinical Teams to promote a positive quality and patient safety culture, investigate and feedback on complaints and incidents, propose solutions and improvements in practice, providing information, training, advice and support as required.
- E-Health Department for the maintenance and development of relevant information and reporting systems.
- Information Governance Department to ensure compliance with IG principles and regulations, across all areas of work.

#### **External Communications and Relationships**

- The post-holder is a point of contact for Quality and Patient Safety Systems and process queries. This includes, but is not exclusive to:
  - General public (patients and carers) to obtain their views both positive and negative, on specific areas of service
  - Clinical Governance professionals in other Health Board areas for information sharing and networking, and promotion of joint working on matters of mutual interest
  - NHS Healthcare Improvement Scotland, other National bodies and Scot Government Departments to provide information and seek advice on local implementation of national initiatives eg SNAP audits

#### **Modes of communication**

- Communication is verbal (face to face/ telephone/ MS Teams), written (via letters, reports and email) and through a variety of other interactions such as meetings, group/committee work, presentations and training.

## 12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB

### Physical

- Frequent use of a VDU for long periods of time and hence sitting for prolonged periods, when analysing data, writing reports, designing database applications.
- The need for accurate keyboard skills is essential when dealing with sensitive data, designing forms and questionnaires.

### Mental

- Workload is mainly foreseen but does have some work input that is not predicted such as urgent responses to requests and queries from Directors, responding to FOIs etc.
- Performing tasks which require frequent and prolonged concentration. These periods can last for several hours and are often interrupted by telephone calls or visitors seeking advice on any number of issues.
- Working with a number of applications at any one time in drawing together information from a number of sources and analysing data and presenting results.
- Concentration required when reviewing reports, checking documents, patient notes, and participating in meetings on a daily basis, whilst subject to frequent interruptions from team members

### Emotional

- The post involves the regular exposure to highly distressing and/or emotional circumstances affecting both staff and/or patients following adverse events.
- Accommodating and responding to the personal dynamics and the politics of working within a complex organisation.
- Ensuring that all interactions with our patient population are managed appropriately and with due sensitivity.

### Environmental

Working in open plan environment eg distractions and exposure to high levels of noise

### 13. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB

#### Knowledge, training and experience

- Registered NMAHP professional with current valid registration with the relevant regulator eg NMC, HPCP
- Educated to first degree level or equivalent level of experience
- Working knowledge or experience in quality/ patient/customer and/or safety related work
- Working knowledge of all domains of clinical governance
- Knowledge of healthcare regulations and best practices
- Evidence of current continuing professional development
- Ability to work on own initiative and as part of a team, valuing and promoting team-working and encouraging participation
- Detailed knowledge of equality and diversity issues, especially on how they impinge on patient and carer perspectives of care.
- Experience of analysis and interpretation of data sets and report writing
- Experience of questionnaire design
- Experience of developing and delivering training programmes
- Advanced knowledge and experience in the use of Microsoft Word, Excel and PowerPoint
- Experience and knowledge of dealing with ethical issues.

#### Skills

- Ability to build and maintain good working relationships with colleagues at all levels
- Excellent organisational skills - experience of planning and organising complex activities/ programmes, projects and implementation of change
- Excellent communication skills – oral, written, visual and presentation
- Ability to manage a complex workload and competing priorities, working to strict deadlines
- High level of interpersonal skills for effective communication and motivation
- Problem solving, facilitation, influencing and negotiating skills
- Time management skills
- Change management skills.

#### Desirable

- Experience of service redesign
- Car driver

### 14. JOB DESCRIPTION AGREEMENT

I agree that the above Job Description is an accurate reflection of my duties and responsibilities at the date of signing.

Job Holder's Signature:

Date:

Manager's Signature:

Date: