



JOB DESCRIPTION

1. JOB IDENTIFICATION

Job Title:	Risk Management Support Officer
Responsible to	Clinical Governance & Risk Team Leader
Department(s):	Clinical Governance & Risk Team
Directorate:	Corporate Services
Last Update:	April 2025

2. JOB PURPOSE

As the Risk Management Support Officer, the post holder will coordinate and implement aspects of NHS Shetland's arrangements for Quality and Safety, with a specific focus on Risk, which is intended to bring about improvements in safety, effectiveness and quality of experience for patients receiving care in NHS Shetland and the Shetland Community Health and Social Care Partnership (CHSCP).

The post holder will lead on a range of quality and patient safety systems and processes, (e.g. adverse event reports, incident and risk management, safety alerts, Freedom of Information responses, Duty of Candour etc). They will also support the sharing of information, good practice and learning across the organisation via a range of mechanisms such as providing a contribution to the Guidance and Learning Bulletin and supporting managers and teams to identify and record lessons learnt following an adverse event.

The post holder will have specific responsibility for leading on the risk management agenda, implementing actions as outlined in the annual Risk Management Workplan and working with Managers, up to and including the Executive Directors, across the organisation to ensure that risks to the organisation from Departmental to Strategic level are recorded, appropriate mitigation and controls put in place and tested.

The postholder will also act as a positive role model, creating staff confidence in the clinical governance and quality improvement processes in place.

3. DIMENSIONS (Job Facts and Figures)

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 880 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.

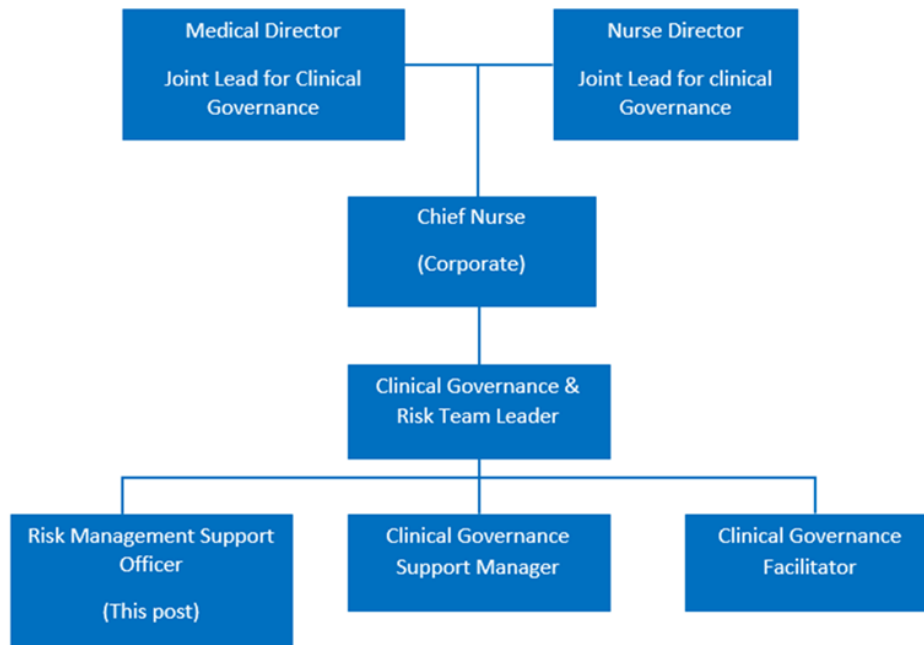
The Clinical Governance and Risk Team are responsible for the delivery of both local and national programmes of work to ensure that NHS Shetland meets the 3 Quality Ambitions of the provision of safe, effective and person-centred care.

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, Clinical Governance Support Manager, this post and a Clinical Governance Facilitator.

With the exception of the Chief Nurse (Corporate) and the Clinical Governance and Risk Team Leader all the other post holders are part time.

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. KEY RESULT AREAS

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, risk 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 take a lead role in developing and co-ordinating 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'.

To work alongside the Chief Nurse (Corporate) and Clinical Governance and Risk Team Leader to ensure principles of good governance are embedded within clinical risk and governance in line with the Blueprint for Governance.

Deputise for Clinical Governance & Risk Team Leader or Chief Nurse (Corporate) as required eg participating in the national Risk Group to provide a remote, rural and island Board perspective to inform national discussions.

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

Actively encourage, promote and assist teams to review their adverse event and risk data to ensure that they assess and act upon feedback, incidents, safety alerts etc. via the relevant processes and systems eg monthly governance group meetings.

Design, create and analyse management reports, including specialty reports (e.g. medication, falls etc) to allow local monitoring of trends relating to adverse events eg using spreadsheets to summarise data; maintains information systems used for data collection and analysis e.g. ensuring systems are adapted to reflect changes in data collected

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.

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. Acting as System Administrator for the risk management system, including day to day administration of the system, liaising with the supplier on any issues, coding of the system etc.

Provides direction for the effective implementation and utilisation of the risk management software system used across the Board (currently Datix) encompassing adverse events and operational risk registers.

Provide advice to senior managers in the management of risk through constructive challenge where required, escalating any concerns appropriately to Clinical Governance and Risk Team Leader or Chief Nurse (Corporate);

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.

Acting as subject matter expert, provide adverse incident data and risk management advice to specific groups which have been set up to discuss quality issues and/ or enhance 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.

To work with Chief Nurse (Corporate) and the wider Clinical Governance and Risk Team to ensure principles of good governance are embedded within clinical risk and governance in line with the Blueprint for Governance.

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

To apply knowledge and understanding of the application of Human Factors and Ergonomics to Investigations and learning to reduce human error, increase productivity and enhance safety.

Provide advice to senior managers in the management of risk, offering constructive challenge where required, escalating concerns to Clinical Governance and Risk Team Leader and/or Chief Nurse (Corporate) as necessary.

In conjunction with the eHealth Project Manager, lead the implementation and roll out of the new Healthcare Governance system, InPhase, across the organisation, providing system and risk-management expertise into the project.

Oversee the reporting of all Level 1 SAERS/ SLRS to Healthcare Improvement Scotland on a monthly basis ensuring accuracy and timeliness of submission.

Support the development and provision of comprehensive, fit for purpose clinical governance reporting processes which support collection, collation and reporting of data to support improvement and assurance from board to ward/department level eg. drafting quarterly Adverse Event and Risk Register reports for Governance Committees.

Support the development of an open and just culture within the organisation where adverse events and risks are identified, reported, actioned and lessons are learnt and shared locally and nationally, as appropriate.

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

Take a lead role in taking forward the preparation, planning and implementation of InPhase Adverse Event and Risk system both within the Clinical Governance & Risk Team and supporting its roll out across the organisation. This will involve a broad range of activities from liaison with key personnel across NHS Shetland and external providers such as Ideagen and Scottish Government departments as well as delivery of practical support eg training for staff.

Effectively contribute to the Clinical Governance & Risk Team work programme by delivering on key areas of work in relation to adverse event and risk management eg deliver actions as outlined in the annual Risk Management Workplan.

Participate in review of Adverse Events for consideration of any requirement for a Significant Adverse Event Review (SAER) and/or Duty of Candour, ensuring compliance with Duty of Candour requirements.

Works within organisational and professional policies and procedures, creating Standard Operating Procedures for department.

Implements departmental policies within own work area, proposes changes to working practices as a result of new guidelines or legislation.

Plan and organise complex activities eg plans activities requiring adjustment due to fluctuating workload, prioritising unpredictable and conflicting demands e.g. dealing with data queries arising from information requests, such as Freedom of Information Requests and ad hoc reports, risk management support and training sessions.

Provide and receive complex information which may be complicated e.g. discussing data queries with data suppliers or staff, understanding relevant legislation, understanding and disseminating specialist risk management advice, making judgements on actions required.

Risk Management system - Inputting and manipulating data and information into computer databases, coding system to ensure risk management system reflects organisation's requirements

Education & Training

Promote quality and safety across the organisation, through 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

Develop and provide training to adverse event managers and risk owners, responsible for delivery of the operational risk management training programme

Deliver training to NHS Shetland staff relating to adverse event and risk management both through formal teaching sessions and informal training opportunities.

Personal Development

Extend own knowledge by attendance at courses/conferences and by accessing the latest relevant literature to ensure an up to date knowledge base on risk management is maintained.

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

The post holder is required to have a high degree of computer literacy, in particular.

- Advanced knowledge of Microsoft Excel required to undertake statistical analysis
- Knowledge of Microsoft Office 365 applications including

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

- Knowledge in Risk Management systems (currently Datix, moving to InPhase in 2026)
- Intranet
- Use of digital media to support meetings and learning opportunities eg MS Teams for Clinical Governance Afternoon / Teaching sessions.
- Good working knowledge of all office equipment including desktop computer, printer, dictation equipment, photocopier, binder, laminator and shredder.

There is no budget responsibility within this post.

7b. SYSTEMS

The post holder:

Requires excellent working knowledge and awareness of systems to inform, present and communicate across the organisation.

Systems used by the Board include:

- Datix, Microsoft packages including Word, Excel and Access
- Patient management packages including SCI and Clinical Portal

- Requires to effectively communicate complex issues to groups and individuals of differing professional backgrounds using appropriate equipment & technology
- Requires to be able to undertake robust interpretation and analysis of data using appropriate software/IT solutions

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 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, prioritising unpredictable and conflicting demands.

Postholder works within organisational and professional policies and procedures; seeks advice as necessary/ operates on own initiative, taking advice from Clinical Governance & Risk Team Leader & Chief Nurse (Corporate) as required.

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 to be self-motivating.

The post holder is expected to organise and decide on the content of their daily work, manage the adverse event system, making technical adjustments to the system as required, as well as provide support to managers on the management of adverse events, development and formal recording of Risks, and share intelligence with other members of CG team to ensure overall situational awareness of quality issues/challenges in areas across the service and thus appropriate and timely support can be provided.

Recognition and judging severity of adverse events and notifying and referring them to relevant managers as appropriate in a timely manner in order for action to be taken. Advising staff and assisting them to grade adverse events when necessary.

Advising staff and supporting managers in fulfilling their risk management responsibilities.

The nature of this post means that the post holder must be able to anticipate problems and develop solutions on a regular basis and will be required to frequently reprioritise activity to respond to changing organisational need.

The post holder will provide, receive and understand a wide range of highly complex and/or sensitive information where opinion may be contradictory and a judgement needs to be made especially in relation to adverse events, demonstrating a high degree of discretion when handling highly confidential health information.

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.

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

Exposure to distressing and sensitive information when adverse events have occurred in clinical practice, resulting in patient harm.

Proactively facilitating the implementation of NHS Shetland's Risk Management Strategy and NHS Shetland's local implementation of Healthcare Improvement Scotland (HIS) A National Framework for Reviewing and Learning from Adverse Events in NHS Scotland.

Ensuring that risk management, safety, Clinical governance and quality improvement are integral to all service delivery, service redesign and change management.

Tenacity in following up adverse events and risks.

Complex system issues requiring problem solving in a timely manner.

Supporting the development of a culture of quality across the organization, ensuring that clinical governance is at the heart of the organisation both in strategic and operational planning and activity.

Dealing with interruptions in meeting deadlines and moving from one task to another e.g. responding to unpredictable work situations or producing urgent reports or information

11. COMMUNICATIONS AND RELATIONSHIPS

The postholder will be required to maintain effective communication channels with staff across NHS Shetland and CHSCP as well as link with external bodies as appropriate to the governance agenda.

Internal Communications and Relationships

Within the department

- Chief Nurse (Corporate), Clinical Governance Team Leader and other staff members
- Other team members to ensure appropriate links and co-ordination of all aspects of quality, safety and risk activity.

Within the Organisation

- All Clinical Teams to promote a positive quality and patient safety culture, investigate and feedback on incidents, propose solutions and improvements in practice, providing information, training, advice and support as required.
- Supporting Clinical staff with adverse event reporting, investigation and management, drafting and managing risks to add to the organisational Risk Register.
- Topic Specialists eg Tissue Viability, Health and Safety to ensure that relevant perspectives are sought on adverse events.
- 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.
- 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.

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:

- Clinical Governance professionals in other Health Board areas for information sharing and networking, and promotion of joint working on matters of mutual interest
- NHS Boards Scotland wide
- Healthcare Improvement Scotland
- Scottish Government
- Other external bodies eg Procurator Fiscal, Mental Welfare Commission

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.

There is a requirement to be able to communicate sensitive and confidential patient related information. The postholder must be able to communicate using tact and diplomacy to ensure appropriate levels of privacy and confidentiality are maintained at all times.

Represent the Team at relevant meetings / events as and when appropriate.

Required to effectively communicate complex issues to multi-disciplinary groups who may hold different views and will deliver challenging messages relating to key areas.

Relationships with key staff will often be against a background of change and as such communication skills may be deployed within a hostile environment.

Requires highly skilled negotiation and influencing skills which are essential in this role along with the ability to build professional credibility with a wide audience.

Will provide support and expert advice to staff under highly distressing and emotional circumstances, which will require the use of empathetic skills, in order to motivate, advise and negotiate with groups and individuals to gain cooperation. A high degree of confidentiality and sensitivity is required for this post.

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

Physical

- Frequent use of a VDU for long periods of time (greater than 3 hours) and hence sitting for prolonged periods, when analysing data, writing reports, designing database applications.
- The need for advanced keyboard skills is essential when dealing with sensitive data, designing forms and questionnaires.
- Occasional requirement to travel for business, both within and out with Shetland.
- Extensive use of telecommunications in day to day work.

- Occasional requirement to lift equipment and boxes.

Mental

- Workload is mainly planned 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.
- Periods of intense concentration required when reviewing/analysing statistical information or reviewing clinical or non-clinical records and documents for the purpose of compiling reports, which may be subject to frequent interruptions from other team members and/or wider organisational staff.

Emotional

- Demonstration of a balanced, equitable approach to managing difficult situations and conflicting views where a range of options require to be considered
- The post involves the regular indirect 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.

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

- Educated to first degree level or equivalent level of experience
- Certificate in Enterprise Risk Management or at least 3 years' experience in a risk management role
- Experience of Risk Management (essential), within a public sector (desirable)
- Experience of working in NHS or comparable quality and service improvement environment
- Experience of analysis and interpretation of data sets and report writing
- Experience of developing and delivering training programmes
- Working knowledge of all domains of clinical governance including knowledge or experience in safety related work
- Working 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
- Advanced knowledge and experience in the use of Microsoft Word, Excel, Teams and PowerPoint

- Have previous experience of working in a busy open office environment

Skills

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

Desirable

- Experience of service redesign
- Car driver

14. JOB DESCRIPTION AGREEMENT

A separate job description will need to be signed off by each jobholder to whom the job description applies.

Job Holder’s Signature:

Date:

Head of Department Signature:

Date: