

JOB DESCRIPTION

JOB DETAILS	
Job Title	Safety and Quality Improvement Manager
Reports to	Safety and Quality Lead
Band	Band 7
Department/Care Group	Clinical Care Group

JOB PURPOSE

The postholder has responsibility for leading risk management and clinical governance processes within the Care Group ensuring the efficient, compliant, safe and high-quality delivery of care.

To be the Lead contact and expert within the Care Group for all Governance queries or enquiries i.e., patient safety events, patient experience feedback, legal claims, local and national audit, providing advice / guidance and direction as required.

To represent the Care Group at Trust wide meetings, governance & oversight groups and improvement forums, ensuring that a deputy is assigned when apologies are given.

To ensure a rapid, thorough and accurate information cascade from Trust wide Governance meetings back to the Care Group and to assign actions to key team members; monitoring them to completion within agreed timescales.

PRINCIPAL DUTIES AND RESPONSIBILITIES

Patient Safety

- To ensure the Care Group and its staff are aware of their responsibilities and have appropriate support and training for the timely identification and reporting of patient safety events; leading on the delivery of training where required.
- To ensure the Royal Devon Patient Safety Incident Response Plan and associated policies & processes are fully implemented and monitored within the Care Group.
- To provide expert advice, support and guidance to Care Group staff in responding to patient safety events in line with the Patient Safety Incident Response Plan.
- To lead on producing Patient Safety Event Escalation Reports for consideration by the Panel, in line with the Patient Safety Incident Response Policy.
- To provide leadership within the Care Group in relation to patient safety, effectively modelling the core principles of the patient safety incident response framework:
 - Compassionate engagement
 - Proportionate responses
 - Systems based learning
 - Supportive oversight

Patient Safety Event Learning Responses

- To lead on the review of Care Group safety insight to ensure all patient safety events receive the appropriate level of response as indicated in the Royal Devon Patient Safety Incident Response Plan. This will include statutory processes as indicated by the plan e.g. Child Death Review Panel, Safequarding Authority
- To lead on the initial response to a patient safety event, prioritising the compassionate engagement of those affected; (patient, family, carers & staff involved). The postholder will ensure appropriate support has been offered and affected people have been signposted to additional support (including bereavement services), if required.
- To lead on local Learning Responses including Swarm / Huddles; After Action Reviews; Concise Learning Responses; ensuring that these are completed appropriately and in a timely manner,

- and that all learning and safety actions are recorded on the Trust Risk Management System.
- Where learning responses are delegated to others, the Safety and Quality Improvement Manager
 will retain the accountability within the Care Group that responses have been completed within
 appropriate timescales and are of sufficient quality to support effective learning and the
 development of safety actions.
- To lead Care Group wide trending and theming of patient safety events from completed learning responses; working collaboratively with the central Patient Safety team so that learning is shared throughout the organisation, and is able to influence the Trust's Patient Safety Improvement Programme and Incident Response Plan.
- Where harm has occurred following a patient safety event, the postholder will be accountable for ensuring the requirements of Duty of Candour Regulations (nationally defined as moderate or greater harm) are met in full; and that this is appropriately evidenced within the Trust's Electronic Patient Record and Risk Management System.

Patient Experience

- To lead the Care Group Patient Experience function, ensuring that the team undertaking this work are supported to provide an effective, efficient and robust service in line with the Royal Devon Patient Experience Strategy and its associated policies and processes.
- Ensuring that where possible, early resolution is been sought in response to feedback, and where
 the formal complaints framework is used, issues are addressed and responded to in a timely
 manner.
- To escalate through the Care Group Triumvirate and Safety and Quality Lead (or equivalent position) where patient experience feedback is indicating:
 - Highly complex complaints where Executive oversight is required at an early stage;
 - Significant risk which requires escalation through the Trust Risk Management Policy;
 - A potential patient safety event which requires escalation in line with the Royal Devon Patient Safety Incident Response Plan and Policy;
 - Potential safeguarding issues (including events affecting those who lack capacity and attempts to radicalise vulnerable adults or children);
 - And/or there are significant delays to the Care Group's response to patient experience feedback
- To work collaboratively with the central patient experience team, the Matron for Patient Experience and Matron for Complaints and Patient Support to ensure effective working and support for the Care Group Complaints.

Risk Management

- To lead the local Risk Management processes within the Care Group, ensuring that all risks within the Care Group are assessed at the time the risk is identified and that they are managed in line with the Royal Devon Risk Management Policy.
- To be responsible for the Care Group Risk Register, ensuring risks are uploaded and appropriately reviewed and escalated to the correct level of Risk Register, in line with the Trust's Risk Management Policy.
- To ensure mitigating actions are undertaken and achieved within the agreed timeframe and to escalate to the Care Group Governance Group where risks and their actions are not on target.
- To work collaboratively with the Trust Risk Manager through Care Group Risk Surgeries, ensuring that all risk reviews are clearly audited on the Trust's Risk Management System.

Clinical Effectiveness and Audit

- To continuously review and develop the Care Group audits; actively monitoring completion against the Care Groups annual audit plan, ensuring all local and national audits are registered with the Clinical Audit Department and are appraised of the outcome of the audit and emerging action plan/changes in practice.
- To ensure that speciality clinical guidelines are recorded in the Trust Template for Clinical Guidelines and are uploaded and referenced on Trust Intranet following ratification at the appropriate Care Group Governance Forum.

- To act as the designated NICE lead for the Care Group, distributing guidance and providing expertise, advice and support to the relevant clinicians for assessment and remain a key point of escalation.
- To ensure the Clinical Audit Department is fully appraised of the compliance status within the Care Group, in line with the agreed timescale as detailed in the Trust's NICE policy. The postholder will also take a lead in updating the Directorate Audit Programme with NICE guidance requiring audit.
- Where required, the postholder will be responsible for working with clinicians to facilitate completion
 of an action plan in response to assessment against NCEPOD / Royal College / Other (e.g. Inquiry)
 recommendations; ensuring that action plans are reviewed, approved and monitored to completion
 via Care Group Governance Group (CGGG).

Care Group and Speciality Governance

- To be responsible for the effective functioning of the Care Group Governance Meetings ensuring that agenda reflects priorities, risks and regulatory requirements of the Care Group and its specialities.
- To monitor the interface between Speciality, Care Group and Corporate Clinical Governance, ensuring (in collaboration with the Safety and Quality Lead, Care Group Director, Director of Patient Care, Associate Director for Patient Care, and Deputy Medical Director) appropriate escalation and dissemination of issues between the differing levels of the Royal Devon Clinical Governance Structure.
- To represent the Care Group, where appropriate at Trust level Governance, Safety & Risk related meetings; presenting themes and lessons learnt with recommendations for consideration / change to Royal Devon policy and procedures.
- To collaborate and work with other Care Group Safety and Quality Improvement Managers to share learning, areas of best practice and support across the Care Groups, where appropriate

Care Group Performance Assurance Framework

The postholder will lead on the preparation for the regular Care Group Performance Assurance Framework (PAF) meetings by:

- Ensuring that safety and quality information is recorded as required onto the Risk Management System, so that the PAF Dashboard accurately reflects Risks, Incidents and Complaints & Concerns within the Care Group.
- Leading on the preparation of new risks to be presented to PAF, ensuring that each risk has a clearly defined Risk Statement, and scoring has been subject to appropriate check and challenge in line with the Risk Management Policy.
- Leading on preparation of items which require escalation or exception reporting to PAF.

KEY WORKING RELATIONSHIPS

Areas of Responsibility:

- Patient Safety
- Patient Safety Event Learning Responses
- Patient Experience
- Risk Management
- Clinical Effectiveness and Audit
- Care Group and Speciality Governance
- Care Group Performance Assurance Framework

No. of Staff reporting to this role: Variable (Dependent upon size and complexity of Care Group)

The purpose of this post is to provide effective leadership to support the development and delivery of Care Group Clinical Governance based upon the Trust's patient safety, experience and quality improvement agendas.

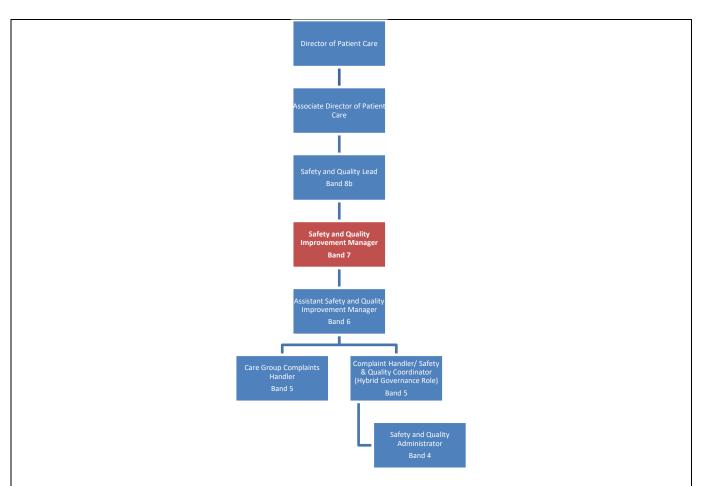
Through focusing on the organisational patient safety culture, high quality care standards and avoiding harm; the Safety and Quality Improvement Manager will lead within the Care Group the delivery of

learning responses from patient safety events, patient experience feedback and the results of clinical effectiveness and audit data (from both the local and national audit programmes).

The post holder is required to deal work collaboratively and effectively with staff of all levels throughout the Trust, the wider healthcare community and external organisations as required. This will include verbal, written and electronic media. They will use their expertise to provide consistent high-quality Governance advice to senior managers supporting effective decision-making.

Of particular importance are working relationships with:

ORGANISATIONAL CHART



There will be some variation in this structure between Care Groups due to differences in the size and complexity each Care Group

FREEDOM TO ACT

Expected results are defined but the post holder decides how they are best achieved and is guided by principles and broad occupational policies or regulations. Guidance may be provided by peers or external reference points.

The postholder will organise their own work and that of others to ensure effective use of resources to deliver the governance requirements of the Care Group's Patient Safety, Experience & Risk Management priorities.

The post holder may deputise for senior colleagues at meetings in their absence. In periods of extremis, the postholder may also be required to support other Care Groups in the leadership and delivery of their risk management and clinical governance processes.

The post holder will respond to External Visits ensuring appropriate escalation, in line with relevant Trust policies and protocols, and ensuring that they are reported through Care Group Governance processes and action plans are devised, implemented, reviewed & monitored.

COMMUNICATION/RELATIONSHIP SKILLS

The post holder will communicate effectively across a wide range of channels and with a wide range of individuals, the public, and health social and care professionals. They will provide and receive highly complex, sensitive or contentious information, where agreement or cooperation is required to groups of staff.

They will use both verbal and non-verbal methods of communication, and address communication barriers.

They should demonstrate the interpersonal skills that demonstrate empathy, compassion, courtesy, respect and trust, including:

- Leading on patient safety learning responses within their specific Care Group;
- Ensuring the Care Group's safety and quality improvement team meets the expectations of a just and restorative culture when delivering against the Clinical Governance priorities of the Trust;
- To produce logical, well-written, accessible reports with a high level of accuracy suitable for consumption by a diverse audience, including patients and families;
- To present key messages, findings, and make recommendations to senior audiences to address identified improvements for Safety, Experience or Clinical Effectiveness.

The postholder will ensure that reporting to performance and governance forums (such as PAF and Risk Management Committee) will utilise live reporting available through the Trust Risk Management System in relation to Risks, Patient Safety and Patient Experience.

They are likely to experience barriers to communication, and will use advanced communication skills to illicit information in difficult situations from people who may not be cooperative. This will include using:

- Negotiating Skills
- Influencing Skills
- Arbitrating Skills
- Ability to create consensus

ANALYTICAL/JUDGEMENTAL SKILLS

- To read, assimilate and analyse information from a number of sources e.g., complex patient health records, best-practice evidence, polices, clinical guidelines and determine judgements of relevance, and contribute in relation to a range of dynamic and emergent safety and quality contexts.
- To formulate recommendations from patient safety learning events, risk assessments, patient experience Feedback, Clinical Audits and regulatory activity. This will require thorough analysis and interpretation through applied systems thinking.
- To support their Care Group to create evidence-based risk assessments and use their judgement to develop effective actions to mitigate risks.
- To undertake peer reviews and quality assurance audits of patient safety, experience and risk and clinical effectiveness
- To lead within the Care Group in responding to data requests from the Care Quality Commission's (CQC); reviewing and analysing responses from their services and specialities to ensure that the information is consistently reported and accurately reflects service performance prior to formal escalation within the Trust.
- To seek and act on feedback from patients, families and staff which has been escalated through Safety and Quality activity within the Care Group.

PLANNING/ORGANISATIONAL SKILLS

The post requires advanced organisational skills due to the complexity of the agenda they lead.

The postholder will be required to manage multiple Safety and Quality workstreams simultaneously within the Care Group Safety and Improvement Teams, across the areas of their key responsibility in the care group:

- Patient Safety
- Patient Safety Event Learning Responses
- Patient Experience
- Risk Management
- Clinical Effectiveness and Audit
- Care Group and Speciality Governance
- Care Group Performance Assurance Framework

The post holder will plan and prioritise a range of governance activities, deploying relevant tools and frameworks appropriate to the subject; delivering reports within agreed timescales.

PATIENT/CLIENT CARE

• The postholder will not be involved in direct patient care.

POLICY/SERVICE DEVELOPMENT

- The postholder will be the Care Group's Lead and point of contact for the development of policies and procedures; advising staff on their development in line with the Policy for the Development, Ratification and Management of Procedural Documents.
- To continuously review and develop the Care Group audits and actively monitor completion against the Care Groups annual audit plan, ensuring all local and national audits are registered with the Clinical Audit Department and are appraised of the outcome of the audit and emerging action plan/change in practice.
- Collaborate on the development local standard operating procedures and contribute to developing and implementing governance policies which impact across the Care Group.
- To propose and support the implementation of changes in practice resulting from analysis of safety actions, risk assessments, responses to patient feedback; clinical audit and national guidance.
- To lead innovative ways to share lessons learnt and key insights throughout the Care Group and to other Care Groups to support ongoing improvements in safety and quality.
- To develop recommendations which will form the basis for improvement outside their own area of work.
- To provide specialist training to a range of clinical and non-clinical staff linked to Safety and Quality.

FINANCIAL/PHYSICAL RESOURCES

- Together with the Budget Holder, work within departmental budgets and support monitoring of expenses associated with the Safety and Quality Governance team's functions.
- Identify and record any cost and efficiency savings that can be achieved as a result of the service redesign and integration.

HUMAN RESOURCES

- Responsible as line manager for the Care Group Safety and Quality Improvement team including appointment of staff, objective setting, performance and sickness management, personal development appraisal and disciplinary matters.
- Develop an environment that will enable staff to work creatively and enthusiastically recognises and respects equality and diversity, demonstrating an inclusive approach in all environments.
- Manage the team's work and projects within the resources that are allocated.
- Ensure a safe working environment and identify promptly any hazardous conditions.
- Act responsibly in respect of colleague's health, safety and welfare, following safety at work
 practices, whilst working in compliance with local health and safety policy and guidance.
- Recognises and respects equality and diversity, demonstrating an inclusive approach in all environments.
- Understands the importance of role modelling and participates in the training and supervision of staff as appropriate to the postholders' competency.
- Provide education and training to staff within Care Group outside of on learning from feedback, patient safety events, human factors and managing risk.
- Ensure adherence to safe lone working practices and use of staff tracking systems.
- Participate in supervision and annual appraisal with line manager to support professional development.
- Identifies opportunities for personal development and participates in the personal performance / development planning processes.
- Individual responsibility to complete mandatory training in line with electronic staff record.

INFORMATION RESOURCES

- To be responsible for cascading Information Governance requirements and providing a coordinated response to these.
- To be responsible for informing the Information Governance Office of any new systems (electronic and manual) within the Care Group to ensure that "an owner" can be assigned and appropriate training provided.
- To support the development of the Trust's local risk management system, promoting its use throughout the Care Group.
- To produce reports, processing data compiled by others as part of their investigation process.
- Lead, as directed by the Safety and Quality Lead and/or Associate Director of Patient Care.
- It is the responsibility of all staff to respect the confidentiality of patients and staff, as specified in the Caldicott Principles, Data Protection Act 2018 and the Human Rights Act. It is the duty of every employee to:
- Only access person identifiable information as required in the execution of their duties.
- Disclose information appropriately, in line with the Data Protection Act 2018.
- To ensure good quality data by recording, promptly and accurately, clinical and non-clinical information within agreed timescales to the appropriate clinical or non-clinical information system
- Maintain the confidentiality of their passwords / usernames and if in possession of a 'Smartcard' abiding by the terms and conditions of its use.

RESEARCH AND DEVELOPMENT

- Undertake surveys, audits, or research to support service redesign and implementation.
- Establish monitoring and evaluation systems for measuring the impact of the service change.

PHYSICAL SKILLS

• Standard keyboard skills are required to produce investigatory reports as a requirement of the job, with use of a computer required for a significant portion of the day.

PHYSICAL EFFORT

- Combination of sitting, standing and walking throughout the day with little requirement for physical effort.
- The post will require travelling, meetings in various venues and office-based work.
- Manual dexterity to perform tasks using IT systems.

MENTAL EFFORT

- There will be a frequent requirement for prolonged periods of concentration, and occasional intense concentration is required for investigative interviewing and the analysis and synthesis of complex information.
- Excellent organisational skills are required, including personal time management to manage and prioritise variable workloads and the need to multi-task whilst completing tasks to short deadlines and progressing longer-term projects.

EMOTIONAL EFFORT

- The postholder will work closely with patients, carers and staff who have experienced distressing events, which may include fatalities or life changing disabilities resulting from patient safety incidents.
- They will be reviewing the details of such incidents and analysing emotionally distressing information on a daily basis. They should expect contact with people who have been affected to occur between once a week to once a month depending on workload, and number of active investigations.

WORKING CONDITIONS

• VDU use on a daily basis.

OTHER RESPONSIBILITIES

Take part in regular performance appraisal.

Undertake any training required in order to maintain competency including mandatory training, e.g. Manual Handling

Contribute to and work within a safe working environment

You are expected to comply with Trust Infection Control Policies and conduct him/herself at all times in such a manner as to minimise the risk of healthcare associated infection

As an employee of the Trust, it is a contractual duty that you abide by any relevant code of professional conduct and/or practice applicable to you. A breach of this requirement may result in action being taken against you (in accordance with the Trust's disciplinary policy) up to and including dismissal.

You must also take responsibility for your workplace health and wellbeing:

- When required, gain support from Occupational Health, Human Resources or other sources.
- Familiarise yourself with the health and wellbeing support available from policies and/or Occupational Health.
- Follow the Trust's health and wellbeing vision of healthy body, healthy mind, healthy you.
- Undertake a Display Screen Equipment assessment (DES) if appropriate to role.

APPLICABLE TO MANAGERS ONLY

Leading the Care Group Safety and Quality Improvement team effectively and supporting their wellbeing by:

- Championing health and wellbeing.
- Encouraging and support staff engagement in delivery of the service.
- Ensuring that any performance or capability issues are responded to compassionately, in line with just culture principles.
- Encouraging staff to comment on development and delivery of the service.
- Ensuring during 1:1's / supervision with employees you always check how they are.

DISCLOSURE AND BARRING SERVICE CHECKS

This post has been identified as involving access to vulnerable adults and/or children and in line with Trust policy successful applicants will be required to undertake a Disclosure & Barring Service Disclosure Check.

GENERAL

This is a description of the job as it is now. We periodically examine employees' job descriptions and update them to ensure that they reflect the job as it is then being performed, or to incorporate any changes being proposed. This procedure is conducted by the manager in consultation with the jobholder. You will, therefore, be expected to participate fully in such discussions. We aim to reach agreement on reasonable changes, but if agreement is not possible, we reserve the right to insist on changes to your job description after consultation with you.

Everyone within the Trust has a responsibility for, and is committed to, safeguarding and promoting the welfare of vulnerable adults, children and young people and for ensuring that they are protected from harm, ensuring that the Trusts Child Protection and Safeguarding Adult policies and procedures are promoted and adhered to by all members of staff.

At the Royal Devon, we are committed to reducing our carbon emissions and minimising the impact of healthcare on the environment, as outlined in our Green Plan available on our website. We actively promote sustainable practices and encourage colleagues to explore and implement greener ways of working within their roles.

PERSON SPECIFICATION

Job Title Safety and Quality Improvement Manager

Requirements	Essential	Desirable
QUALIFICATION/ SPECIAL TRAINING Educated to degree level in relevant subject or equivalent qualification / equivalent experience.	E	
Post graduate degree in management studies or equivalent experience.	E	
A Masters level qualification (or equivalent) or working towards, desirable, or equivalent experience.		D
Prince 2 Foundation level or equivalent experience.		D
KNOWLEDGE/SKILLS Proven ability to audit, investigate and analyse highly complex situations/problems where material is conflicting and drawn from multiple sources, developing and successfully implementing practical and workable solutions to address them.	E	
Ability to think and plan strategically, tactically and creatively, and to prioritise work programs in the face of competing demands.	E	
Ability to be intellectually flexible and to look beyond existing structures, ways of working, boundaries and organisations to produce more effective and innovative service delivery and partnerships.	E	
Ability to act upon incomplete information, using experience to make inferences and aid decision making	E	
Well-developed leadership and influencing skills with the ability to negotiate, persuade, enthuse, motivate and involve individuals and teams, and have them understand the Trust's performance expectations.	E	
Ability to collaborate constructively with internal and external partners to create the conditions for successful partnership working.	E	
Knowledge of financial systems including budget management.	E	
Excellent inter-personal and communication skills with good listening skills	E	
Advanced keyboard skills, use of Word, Excel, PowerPoint	E	
A good understanding of the changing NHS environment.		D
EXPERIENCE Substantial previous experience and success in supporting and delivering the risk and clinical governance agenda including experience in risk management and audit techniques.	E	
Experience of co-ordinating project work, with a comprehensive knowledge of project principles, techniques & tools.	E	
Experience of policy and report drafting and formulation. [MOS23 Safety and Quality Improvement Manager, matched 23/07/2024, considered and policy and policy improvement Manager, matched 23/07/2024, considered and policy improvement Manager, matched and policy improvement Manager matched and policy improvement matched and pol	E	

Experience of planning over short, medium, and long-term timeframes and adjusting plans & resource accordingly.	Е	
Sound political judgement and astuteness in understanding and working with complex policy, and diverse interest groups, and knowledge of when to effectively escalate.		
A commitment to improving patient services through an ability to sustain a clear performance focus on achieving demanding goals	E	
PERSONAL ATTRIBUTES High level of work organisation, self-motivation, drive for performance and improvement, and flexibility in approach and attitude.		
A strong sense of personal and team accountability coupled to a clear understanding of the boundaries around delegated authority		
Strong sense of commitment to openness, honesty and integrity in undertaking the role.	Е	
OTHER REQUIREMENTS The post holder must demonstrate a positive commitment to uphold diversity and equality policies approved by the Trust.	Е	
Ability to travel to other locations as required.	E	

		FREQUENCY			
		(Rare/ Occasional/ Moderate/ Frequent)			
WORKING CONDITIONS/HAZARDS			0	M	F
Hazards/ Risks requiring Immunisation Screening					
Laboratory specimens	N				
Contact with patients	N				
Exposure Prone Procedures	N				
Blood/body fluids	N				
Laboratory specimens	N				
Hazard/Risks requiring Respiratory Health Surveillance					
Solvents (e.g. toluene, xylene, white spirit, acetone, formaldehyde and ethyl acetate)	N				
Respiratory sensitisers (e.g. isocyanates)	N				
Chlorine based cleaning solutions	N				
(e.g. Chlorclean, Actichlor, Tristel)					
Animals	N				
Cytotoxic drugs	N				
Risks requiring Other Health Surveillance					
Radiation (>6mSv)	N				
Laser (Class 3R, 3B, 4)	N				
Dusty environment (>4mg/m3)	N				
Noise (over 80dBA)	N				
Hand held vibration tools (=>2.5 m/s2)	N				
Other General Hazards/ Risks					
VDU use (> 1 hour daily)	Υ				Х
Heavy manual handling (>10kg)	N				
Driving	N				
Food handling	N				
Night working	N				
Electrical work	N				
Physical Effort	Y	Х			
Mental Effort	Y				Х
Emotional Effort	Y			Х	
Working in isolation	N				
Challenging behaviour	Y		Х		