

Job Description

Title of Post:	Divisional Governance and Quality project officer
Band:	Band 5
Reporting to:	Divisional Governance Manager
Accountable to:	Divisional Associate Director Nursing and Therapies (ADON)

Context

You will be responsible for supporting governance and assurance mechanisms within the division reporting to the Division Governance Manager to support quality, safety, clinical effectiveness and patient experience.

Job Summary

As a member of the Divisional team, you will support the management of patient safety and experience at divisional level. Facilitates best practice in the analysis and management of incidents, PALS and Complaints and supports the serious incident and complaint investigations and action plans. The Patient Safety & Experience Co-ordinator will work closely with the Divisional Governance Manager and Associate Director of Nursing & Therapies to promote, develop and implement effective clinical governance across the Trust.

Specifically, you will provide multidisciplinary clinical staff with advice and information to effectively implement the principles and practice of clinical governance. You will take responsibility for delivering projects/ areas of activity linked to cross functional themes which are derived from national standards and requirements. You will work with members of the team in a matrix structure to fulfil specific outcomes.

You will undertake these functions under the line management of the Governance Manager and will work closely with Patient Safety & Experience Coordinators across all divisions.

Overview of Activities

Monitors incidents being reported within the Division ensuring that they are investigated and completed within the Trust timescale of 20 working days.

Liaises with clinicians, facilitates and monitors service area compliance with Being Open/Duty of Candour.

Identifies and analyses clinical risk and complaint themes and areas for improvements in awareness and clinical practice.

Undertakes analysis and other project work including short term urgent requirements, to respond to governance and risk needs.

Builds relationships and promotes a patient safety culture, supporting service areas to improve care practice, systems and awareness following clinical incidents.

Specific Responsibilities

Promotes integrated approach to clinical governance

1. Undertakes quality review of all clinical incidents to assess whether the quality of reporting is of a sufficient standard and to identify any bespoke training required for clinical areas.
2. Undertakes quality review of all complaints to assess whether the quality of reporting is of a sufficient standard and to identify any bespoke training required for clinical areas.
3. Check with the Patient Safety & Quality, Patient Experience and Legal teams to ensure that a single investigation is undertaken where SIs also involve a complaint, claim or inquest.

Facilitates meeting incident investigation standards are met

4. Support the clinical teams in completing Early Learning Reviews (ELRs) in a timely fashion, alerting the ADON to any delays in process.
5. Identify any instances where gaps in incident investigation are identified, promoting improvements and full identification of root causes in line with national best practice standards and Trust policy.
6. Check the quality and completeness of ELRs, Patient Safety Reviews (PSRs) and Patient Safety Incident Investigation (PSII) reports prior to review by the ADON then send to the Patient Safety and Quality team for quality assurance and final sign off by Executive Director.

Monitors Incident action plans

7. Monitors production and implementation of complaint action plans and other complaint action plans to meet required standards by clinical areas, liaising with clinical, ward and service area staff, as needed.
8. Monitors the completion of action plans and relevant evidence prior to submission to the Corporate Complaints team who will share with the relevant service users
9. Identifies and promotes Divisional wide learning from action plans from complex cases; liaising with Governance Managers from the other Divisions and the Trust's Patient Safety & Quality Team.

Identifies clinical risks and possible preventive strategies

10. Identifies and advises on risk themes, patterns or priorities arising from scrutinising complaints, and communicates needs for action or inclusion on the risk register.

Promotes patient safety and Being Open/Duty of Candour culture

11. Promotes cultural change and service ownership of Being Open/Duty of Candour process, through role modelling, advice and support.
12. Provides relevant advice to Complaint Investigators to enable investigations to occur to a high standard.
13. Promotes cultural change and service ownership of Being Open/Duty of Candour process, through role modelling, advice and support.
14. Facilitates investigators to give After Action Reviews/debriefs to clinical teams following incident investigations and as part of the Serious Incident investigation process.

Facilitates positive patient experience and effective complaints management

15. Ensures that all complaints are tracked to ensure that patients, and their relatives, are provided with robust and efficient support when a complaint is raised.
16. To support the Governance Manager in the finalisation of complaints responses where indicated, ensuring that all concerns have been answered and are written in a patient-centred way.
17. To provide thematic analysis of complaints and PALS concerns, identifying potential clinical risk.

Analysis and reports

18. Undertakes project work including short term urgent requirements in response to Trust clinical governance and patient safety needs. This may include working with clinical areas/divisions to facilitate their improvement of clinical care.
19. Supports divisional and Trust activity to evidence and demonstrate compliance with external monitoring, national audits, NICE guidance and quality standards in areas related to clinical incidents.
20. Support the provision of monthly exception reports to centralised Governance meetings (Patient Safety Group, Risk & Compliance Group and Patient Experience Group)
21. To be responsible for complying with Trust and local Safeguarding policies and procedures.
22. To be responsible for the quality of data recorded. The data should be accurate, legible (if hand written), recorded in a timely manner, kept up to date and appropriately filed.
23. All employees must comply with the East Suffolk & North East Essex Foundation Trust Equality and Diversity Policy and must not discriminate on the grounds of sex, colour, race, ethnic or national origins, marital status, age, gender reassignment, disability, sexual orientation or religious belief
24. Employees have a responsibility to themselves and others in relation to managing risk and health and safety, and will be required to work within the policies and procedures laid down by the East Suffolk & North East Essex Foundation Trust. The Trust seeks to establish a safe and healthy working environment for its employees and operates a non-smoking policy.
25. All employees have the right to work in an environment which is safe and to be protected from all forms of abuse, violence, harassment and undue stress. All employees are responsible for helping to ensure that individuals do not suffer harassment or bullying in any form. All employees will be personally accountable for their actions and behaviour in cases of complaint of harassment or bullying.
26. All staff have a responsibility to contribute to a reduction in the Trust's carbon footprint and should pro-actively reduce and encourage others through own actions to reduce their contribution to carbon emissions. This includes switching off electrical appliances that are not in use, turning down heating, closing windows, switching off lights and reporting carbon waste etc.

This job profile is not a definitive or exhaustive list of responsibilities but identifies the key responsibilities and tasks of the post holder. The specific objectives of the post holder will be subject to review as part of the Appraisal and Development Plan process.