

Reference Number: FOIAH2425/186
From: Private Individual
Date: 03 July 2024
Subject: Trust Risk Manager Details

Q1 Please can I request a copy of the job description regarding your trusts risk management system manger?

This would be the member of staff who is responsible for the risk management system which can be either Datix, Radar, Ulysses, and InPhase.

A1 Please see attached 'JD Risk Management Manager Facilitator'.

The current risk manager has responsibility for the risk management system InPhase

Q2 Please can you also confirm how this post fits within your Trusts hierarchy, does this member of staff have any line management responsibilities or work across multiple departments?

A2 The post sits within the Corporate Governance team but works across the Trust and has line management responsibility for a Band 4 post holder

JOB DESCRIPTION

Post:	Risk Management Manager/Facilitator
Agenda for Change	Band 7
Hours:	37.5 hours per week
Accountable to:	Associate Director of Nursing and Governance
Reports to:	Corporate Governance and Risk Manager

Key Relationships

- Associate Director of Nursing & Governance, Corporate Governance Manager, Trust Medical Director, Chief Nurse, Director of Nursing, Divisional Triumvirates, Associate Chief Nurses, Divisional Head of Quality/Nursing, Matrons, Divisional Clinical Directors, Clinical Audit and Effectiveness Manager and assistants, Risk Assistant , External ICS/PLACE Quality Manager, External Risk Management system team

1. Job Summary

1.1 To support the Associate Director of Nursing and Governance to deliver governance and Quality Improvement agendas within Alder Hey Children's NHS Foundation Trust specially in relation to clinical effectiveness and audit.

1.2 To manage lead the risk and incident management team to deliver the governance and quality improvement agendas within Alder Hey Children's NHS Foundation Trust.

1.3 To be responsible for ensuring that systems and processes are implemented and monitored to achieve governance, assurance, and quality objectives.

1.4 To work in collaboration with corporate and divisional teams, to assist in driving sustainable excellence in safety and quality of care and services.

1.5 To be responsible for putting in place Trust wide systems and processes to deliver Care Quality Commission (CQC) compliance and other regulatory and quality requirements.

1.6 The post holder will provide expert advice and support in all aspects of the governance and risk agenda. They will work with minimal direction and independently determine key governance priorities based on national regulation and standards

1.7 To contribute to the achievement of the strategic aims and objectives of Alder Hey Children's NHS Foundation Trust.

1.8 To ensure that Alder Hey Children's NHS Foundation Trust has appropriate systems in place to enable the delivery of the governance and quality improvement agendas.

1.9 The post holder will have good knowledge and understanding in the field of risk management including incident management and the wider governance agenda. In addition,

the post holder will have a good working knowledge of the regulatory and statutory requirements of the Care Quality Commission and NHS Improvement.

1.10 Managing the Trust's compliance with MHRA Central Alerting System requirements, including action plans and ongoing assurance

1.11 It is essential that the post holder support the corporate and divisional governance and clinical leads implement changes required because of significant safety incidents, ensuring remedial actions are proportionate, supported by training where necessary, and deliver sustainable improvements.

1.12 To work with managers and teams within the Clinical Divisions and other Support Services in Alder Hey Children's NHS Foundation Trust to ensure that quality improvement and governance systems are understood, and appropriate reporting mechanisms are in place.

1.13 Contribute to the production of internal and external monthly/quarterly and annual reports as requested

1.14 To provide effective leadership and management within designated areas of responsibilities, and to be responsible for the development of staff within the risk and incident management team.

1.15 To ensure service users are integral in all aspects of Trust Quality Improvement activity.

1.16 Provide cross cover for leads within the Governance and Risk team during periods of annual leave and sickness absences.

1.17 The post holder will be a 'super-user' of the Trusts Risk Management System, and support staff in learning and development of the system.

3. Main Duties and responsibilities

Risk reporting and management

3.1. Expert knowledge in risk capture: clearly defining the risk and articulating controls and mitigation which are put in place to reduce risk. Advising on risk reduction strategies, and when a risk is requiring escalation to the corporate risk register and formulating how this is achieved.

3.2. Support systems and processes for the review and recording of all risks from corporate function level to divisional team level, providing expert advice on the grading and escalation / de-escalation where appropriate; working closely with underperforming teams, influencing change and improvement by providing education of how risk reporting improves patient safety.

3.3. Expert in the Trusts Risk and incident management system reporting of risks and incidents and provide education throughout the Trust as required. Support the Associate Director of Nursing and Governance working collaboratively with Divisional Governance leads/teams Heads of Quality and Heads of Corporate functions to review and validate the Divisional and Corporate functions risk registers, through monthly risk revalidation meetings, providing assurance that controls are in place for those risks locally managed, and where this is not the case ensure any underperformance is challenged and escalated appropriately.

- 3.4. Liaise with the Health and Safety team regarding patient safety related incidents which are RIDDOR reportable supporting, correct reporting to the HCC / CQC.
- 3.5. Lead on the development, running and evaluation of risk and incident management training for all relevant staff.

Notification and Management of Incidents

- 3.6. Ensuring that the Trust's incident, serious incident policy and procedures are adhered to, in accordance with national best practice guided by the National Patient Safety Strategy and Patient Safety Incident Response Framework (PSRIF).
- 3.7. Work in collaboration with Divisional and Corporate leads to ensure:
 - All staff understand what constitutes an incident, a near miss, a serious incident, and a never event and how to report these, using the Trusts risk management system.
 - Incidents are notified rapidly to all internal and external stakeholders.
 - Corporate and Divisional processes are in place to review and scope incidents, to identify those that need detailed investigation aligned with the National Patient Safety Strategy and PSRIF.
 - Investigating officers are identified appropriately and investigations commence promptly with clear and appropriate terms of reference.
 - Duty of candour is applied and recorded appropriately.
 - Investigations are completed to a high standard and within the nationally defined timescales.
 - Underperformance is challenged and escalated appropriately in line with Trust policy.
- 3.7 The post holder will be responsible in partnership with Lead Investigator(s) for ensuring that:
 - All serious incident investigations are completed in line with expected standards including learning for improvement and sign-off process completed, before being submitted externally within the required timescales
 - Serious incident causes and lessons learned are clearly identified as part of the investigation leading to wider organisational learning which can be evidenced
 - The Trust 'says sorry' for any wrongdoing or harm caused and this is accurately recorded under Duty of Candour and compliance to CQC Regulation 20
 - SMART actions plan (learning for improvement plans) are created to address root causes, have clear lead managers identified for each action, these are tracked and completed
 - That divisional and corporate teams receive feedback from external stakeholders such as and including Care Quality Commission and PLACE based Commissioners
 - Learning takes place through Trust wide processes as outlined in PSRIF
 - Learning from incidences are uploaded and shared via the Governance and Quality Assurance web page and publicised Trust wide.
 - Provide assurance reports as requested by Associate Director of Nursing and Governance

Compliance and assurance

- 3.8. Support the Associate Director of Nursing and Governance in gaining assurance that corporate services and Divisions have in place a robust cycle of peer reviews, which

are coordinated and are providing structure reports based on improvement learning plans.

- 3.9. Work closely with the Clinical Audit and Effectiveness iManager/facilitator to achieve the annual NICE, audit and validation programme, which will meet the national requirements
- 3.10. Support the delivery of the Trust Multidisciplinary Quality Assurance rounds across the organisation, providing teams with advice and guidance as required.
- 3.11. Support Associate Director of Nursing and Governance with collation of details for Trust Quality Account

4. Communication & Relationship skills

4.1 To communicate effectively with a wide range of clinicians, managers and support staff within Alder Hey Children's NHS Foundation Trust, other external organisations, and with patients and carers.

4.2 To communicate effectively sensitive and/or contentious information concerning quality and governance, using negotiation skills

4.3. To present quality improvement and governance issues to large groups.

4.4 To anticipate barriers to communications and resistance to change and to be able to manage these effectively, liaising and seeking appropriate support as required.

4.5 To be responsible for effectively communicating information relating to the quality improvement and governance agendas across Alder Hey Children's NHS Foundation Trust using a variety of methods, including the production of analytical reports, training modules, and briefings.

4.6 To deliver effective and targeted training to staff across Alder Hey Children's NHS Foundation Trust in a variety of styles including presentation, discussion, and facilitation.

4.8 To contribute to the development of a culture where staff engagement in the quality improvement agenda is the accepted norm.

5. Analytical and Judgement skills

5.1 To be able to interpret trends and themes from information from a variety of sources, and to be able to exercise judgement to determine the implications of such information and the appropriate action to be taken.

5.2 To interpret national guidance and ensure it is accurately reflected in local policy and procedural documents to improve practice.

5.3 Support the development and implementation of a system that allows triangulation of information from risks, incidents, claims and complaints to support recognition of trends and appropriate learning improvement plans taken to mitigate against recurrence.

5.4 To provide expert opinion in quality improvement and governance to staff at all levels within the Quality and Governance Team and across the organisation and to provide expert guidance in areas which are complicated or conflicting.

6. Planning and organising skills

6.1 To support the development and implementation of the quality improvement and governance agendas across Alder Hey Children's NHS Foundation Trust in line with the strategic objectives and delivery plans, being responsive and flexible to changing priorities and deadlines.

6.2 To develop the Trust wide risk and incident management plan ensuring it reflects national and Trust priorities.

6.3 In partnership with Clinical Divisions and corporate services, develop departmental / specialist risk management / patient safety plans, reflecting local and national priorities.

6.4 To take the lead on specific areas of service development/delivery as agreed with the Associate Director of Nursing and Governance

6.5 In conjunction with Associate Director of Nursing and Governance contribute to Executive and Divisional improvement plans and to develop and monitor plans for own areas of responsibility.

6.6 To plan, coordinate and manage a variety of meetings and training events involving a wide range of attendees in specific area of responsibility.

6.7 To plan, delegate and manage the workload of the risk and incident management team, ensuring deadlines are met.

6.8 To manage own time effectively and delegate appropriate functions responsibly.

7. Physical skills

7.1 Advanced IT skills and keyboard skills to use standard keyboards and training equipment.

8 Responsibility for policy/service development

8.1 To contribute to the development, implementation, and review of policies for Alder Hey Children's NHS Foundation Trust which are specific to areas of responsibility.

8.2 To contribute to the development of quality improvement systems and reporting mechanisms to assure Alder Hey Children's NHS Foundation Trust of safe and effective patient care and a positive patient experience, taking lead in designated areas of responsibility.

8.3 To ensure that services meet general and legislative requirements in relation to patient safety, clinical effectiveness and patient experience including Care Quality Commission regulations, and to exercise confidentiality as appropriate.

8.4 To evaluate and monitor service delivery and in collaboration with others undertake service and role re-design where indicated to improve efficiency and effectiveness

8.5 To ensure all staff undertaking clinical audit adhere to the Data Protection Act and Caldicott Guidelines.

9. Responsibility for human resources

9.1 To line manage the risk and incident management Team ensuring that agreed HR systems and processes are implemented. Plan, delegate and manage the workload of the risk and incident management Team ensuring deadlines are met.

9.2 Lead and support the development, running and evaluation of a Trust wide risk and incident management training programme for staff.

9.3 In conjunction with Associate Director of Nursing and Governance have delegated responsibility for the recruitment and retention of staff, ensuring the process is in accordance with recruitment guidelines and proactive management of vacancies within the allocated, designated budget.

9.4 To ensure that frameworks and systems are in place across own area of responsibility for the appraisal, supervision, and personal development of all staff.

9.5 To ensure that performance management, grievance and disciplinary procedures are implemented in accordance with Trust procedures, and to instigate, supervise, contribute to or lead/chair the processes as required.

9.6 To ensure that all direct reporting staff are aware of and take responsibility as part of their legal obligation to eliminate harassment and are responsible for recognising stress amongst their staff and take appropriate action to minimise the effects.

9.7 To participate in annual appraisal, six-month review and be committed to developing a personal development plan including participation in regular supervision or action learning.

9.8 To develop a personal action/work plan to be reviewed with the Associate Director of Nursing and Governance on a regular basis.

9.9 To further develop own managerial skills; to maintain own continuing professional development by keeping abreast of any new trends and developments and incorporate them as necessary into work.

10. Responsibility for information resources

10.1 To be responsible for the accurate collection, entry and storage of risk, incidences, MHRA Central Alerting System requirements and quality related performance data and statistical information, using locally developed and national databases.

10.2 To be responsible for the provision of quality related performance reports at regular intervals at the frequency of local and national requirements, and to design reports to meet a range of different local and national requirements.






10.3 To be responsible for the analysis of data and statistical information and to work collaboratively with Clinical Divisions and corporate services to ensure that it informs decision-making, service improvement and improved patient experience.

10.4 To be responsible for the development of effective databases for the collection of data and statistical information in relation to quality and governance, and the coordination of its use to demonstrate assurance against organisational and national standards.

The post holder must comply with all trust policies and procedures and attend all necessary mandatory training

This job description is not intended to be an exhaustive list of duties, but it aims to highlight the typical key responsibilities of the post. It may be reviewed from time to time to ensure that it relates to the job as then being performed, or to incorporate required changes. This process will be conducted in consultation with the post holder in line with the Trust Job Evaluation Policy and Process.

Our values:

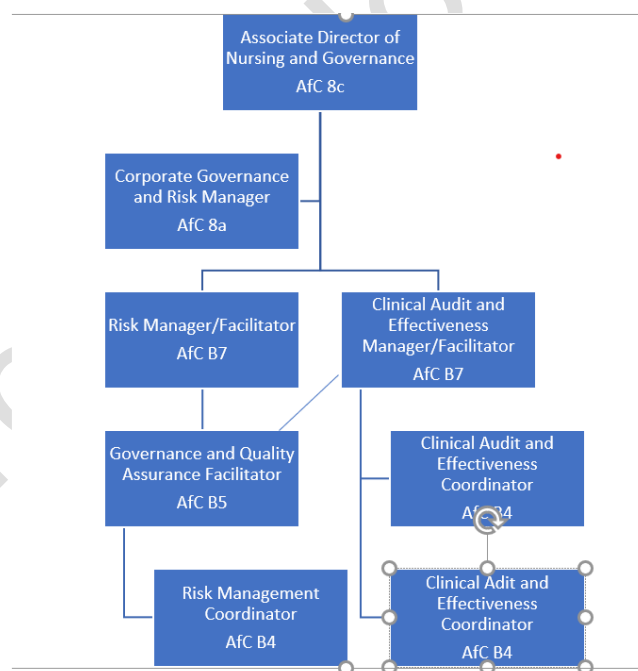
- 
We pride ourselves on the quality of our care, going the extra mile to make Alder hey a safe and special place for children and their families.
- 
We are committed to continually improving for the benefit of our patients.
- 
We are open and honest and engage everyone we meet with a smile.
- 
We show that we value every individual for who they are and their contribution.
- 
We work across the Alder Hey community in teams that are built on friendship, dedication, care and reassurance.

Values Based Behaviour's

Respect:	We show that we value every individual for who they are and their contribution
Excellence	We pride ourselves on the quality of our care, going the extra mile to make Alder Hey a safe and special place for children and their families
Innovation	

	We are committed to continually improving for the benefit of our patients
Together :	We work across the Alder Hey community in teams that are built on friendship, dedication, care and reassurance
Openness:	We are open and honest and engage everyone we meet with a smile

Team Structure



PERSON SPECIFICATION:

Job Title Risk Management Manager/Facilitator

AFC Band 7

Criteria	Essential	Desirable	Method of assessment
Education and Qualifications	<p>Educated to degree level</p> <p>Management of Risk certificate / Qualification (or willing to undertake)</p> <p>Formalised investigation training</p> <p>Evidence of continuing professional development</p> <p>Training in Root Cause Analysis methodology</p>	<p>Master's Degree or working towards</p> <p>Leadership qualification</p> <p>Project management training</p> <p>Professional Qualification (Nurse, Midwife, OPD, Physio, Radiographer etc)</p>	Application Interview
Experience	<p>Experience of working/managing in NHS or healthcare setting for 3 years or more</p> <p>In-depth knowledge of risk issues in health care.</p> <p>Experience of supporting investigations using incident management methodologies.</p> <p>Experience of critically analysing risks ascertaining themes for improvement.</p> <p>Experience of critically analysing incidents to ascertain themes for improvement.</p> <p>Ability to critique completed reports and make suggestions for improvement</p> <p>Experience in managing highly complex, sensitive, or contentious information to include analysis of data and reporting of the same</p>	<p>Project management experience</p> <p>Demonstrable experience of managing high level projects</p>	Application Interview



Criteria	Essential	Desirable	Method of assessment
	<p>Experience of delivering Care Quality Commission Standards, Information Governance,</p> <p>Ability to organise and take responsibility for a system to record and produce information on risk and incident management on behalf of the corporate team or division or sub speciality</p> <p>Experience of undertaking and supporting teams in delivering incident management & service improvement projects</p> <p>Experience of managing the risk and clinical incident function</p> <p>Experience of working in a management role</p> <p>Experience of a supervisory role in quality improvement, governance</p> <p>Recent experience of internal/external partnership working</p> <p>Proven experience of effectively managing policy implementation</p> <p>Experience of teaching / training in quality, and / or clinical governance</p>		
Knowledge	<p>In-depth knowledge of several areas including clinical effectiveness, audit, risk, governance, patient safety and information governance</p> <p>Knowledge of specific databases and programmes to support risk and incident management</p> <p>Detailed knowledge of risk management and governance structures</p>	<p>Ability to manage high level projects across a range of disciplines and to influence others without having direct authority</p>	<p>Application form/Interview</p>



My Alder Hey. My Values.

Criteria	Essential	Desirable	Method of assessment
	<p>Ability to work with complex facts which require analysis, interpretation and to present findings</p> <p>Excellent communication skills including verbal and written</p>		
Skills and Abilities	<p>Demonstrates leadership skills to lead on clinical effectiveness, audit & quality improvement across a range of services.</p> <p>Excellent presentation skills with ability to present complex information in an easily understandable format</p> <p>Excellent verbal and written communication skills</p> <p>Advanced IT skills - Experience of specific database management to meet needs of Trust NICE/ audit activity</p> <p>Excellent organisational skills with the ability to respond effectively to multiple priorities</p> <p>Able to build strong collaborative relationships with clinical leaders and professional staff groups</p> <p>Ability to work on own initiative but also as part of a team</p>	<p>Recognised project management skills and qualification</p> <p>Change management skills and experience</p>	Application form/Interview
Skills	<p>Demonstrates leadership skills to lead on clinical effectiveness, audit & quality improvement across a range of services.</p> <p>Excellent presentation skills with ability to present complex information in an easily understandable format</p> <p>Excellent verbal and written communication skills</p>	<p>Recognised project management skills and qualification</p> <p>Change management skills and experience</p>	Application form/Interview



My Alder Hey. My Values.

Criteria	Essential	Desirable	Method of assessment
	<p>Advanced IT skills - Experience of specific database management to meet needs of Trust NICE/ audit activity</p> <p>Excellent organisational skills with the ability to respond effectively to multiple priorities</p> <p>Able to build strong collaborative relationships with clinical leaders and professional staff groups</p> <p>Ability to work on own initiative but also as part of a team</p>		
Personal Attributes	<p>Able to take initiative whilst maintaining excellent communications with the team</p> <p>Flexible approach to work and willing to commit to achieving results and meeting deadlines</p> <p>Sets high standards and motivated to achieve these</p> <p>Promotes an environment of continuous learning and staff involvement in decision making</p> <p>Creates a culture of openness and support when things go wrong</p> <p>Demonstrates responsiveness and resilience in leading change and reaching goals</p> <p>Always displays and promotes the Trust Value Based behaviours</p>		Application form/Interview

Mandatory Statements

- As an organisation which uses the Disclosure and Barring Service (DBS) Disclosure service, the Trust complies fully with the DBS Code of Practice and undertakes not to discriminate unfairly against any subject of a Disclosure on the basis of conviction or other information revealed.
We meet the requirements in respect of exempted questions under the Rehabilitation of Offenders Act 1974, all job applicants will be subject to a criminal record check from

the Disclosure and Barring Service before an appointment is confirmed. This will include details of convictions cautions and reprimands, as well as 'spent' and 'unspent' convictions. A criminal record will not necessarily be a bar to obtaining a position. A decision will be made depending on the nature of the position and the circumstances and background of the offences.

2. The Trust is pro-diversity and anti-discrimination. Trust policies prohibit discrimination, victimisation, bullying or harassment. The Trust is committed to treating people equally, whether they are patients, colleagues, suppliers or other customers. We would like all our families and staff to feel valued and respected because we try to understand and provide for their individual needs.
3. The Trust is committed to promoting an environment that embraces diversity and promotes equality of opportunity. Staff should apply the values of respect, excellence, innovation, togetherness and openness in all that they do to ensure that Alder Hey truly belongs to everyone.
4. In the course of your duties you may acquire or have access to confidential information which must not be disclosed to any other person unless in the pursuit of your duties or with specific permission given on behalf of the Trust. You must ensure that you handle personal information in accordance with the requirements of the Data Protection Act 1998.
5. You are reminded that, in accordance with the Health & Safety at Work Act 1974, and subsequent legislation, you have a duty to take reasonable care to avoid injury to yourself and to others by your work activities, and are required to co-operate with the Trust in meeting statutory requirements.
6. You must ensure that you adhere to the Trust Infection Control policies and procedures at all times. You have a duty of care under the Health Care Act to prevent the spread of infection.
7. Within the NHS, good patient care is reliant on the availability of complete, accurate, relevant and timely data. The quality of information can limit the capability to make operational decisions about the way care is planned, managed and undertaken. Poor information quality can lead to poor decision making and may put service users at risk. High quality information means better, safer patient care. Where you are required to record data on systems, whether patient or staff data, or paper or electronic format you must ensure that it is up to date, accurate, complete and timely. You have a responsibility to ensure that you feel sufficiently knowledgeable about the system you are asked to use and what is required of you in order to fulfil your task accurately. Where an error is created or discovered by yourself on any system which you cannot rectify, you must contact the relevant helpdesk / system owner or your Line manager. Please read the Data Quality and Information Governance Policies located on the Intranet and ensure you understand your responsibilities.
8. Alder hey Children's NHS Foundation Trust is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment. Staff have a responsibility to ensure they are aware of specific duties relating to their role and should familiarize themselves with the Trust's safeguarding and child protection procedures, regular safeguarding and child protection training updates are mandatory for all staff All individuals will have some risk management responsibilities with which you are required to comply, for details of

your responsibilities please refer to the current Risk Management Strategy which is available on the intranet and in the local strategies folder.

9. You must comply with all Trust policies and procedures and attend all necessary mandatory training.
10. As an employee of the Trust you will be accountable for the data entered into records and systems. It is very important that the Trust records the most up to date patient demographic details, including full name, D.O.B., address, contact number, NHS number, GP and GP Practice. This is not only to fulfil our legal obligation under Principle 4 of the Data Protection Act, which states '*Personal data shall be accurate and, where necessary, kept up to date*', but it is also crucial in ensuring patient safety.
11. All staff should take ownership of records that are accessed and take the opportunity to check that the data held is correct.
12. This document provides an outline of the main responsibilities of the post. It is not intended to be an exhaustive list of duties.
13. Your job description will be subject to regular review with your Line Manager