

## Job Description

Job Information		
	<b>Job Title:</b>	Assistant Director of Quality Governance
	<b>Directorate / Service:</b>	
	<b>AfC Band:</b>	8c
	<b>Professionally Accountable to:</b>	Deputy Director of Quality Governance
	<b>Responsible to:</b>	Hospital Director of Nursing
	<b>Base Location:</b>	LUHFT sites
	<b>Job Code:</b>	AS.SE.R0011
	<b>ESR Position Number:</b>	

### Job Summary

In collaboration with the Hospital Leadership Team, provide highly visible leadership and direction to ensure that there are effective Quality Governance systems, implemented and devolved across the large, complex Hospital site, ensuring all risks are identified and managed via the Hospital's assurance framework processes. The successful post holder will oversee and have responsibility for all elements of patient safety, clinical effectiveness, complaints management and compliance for the Hospital site. An expert in the field, the post holder will be expected to provide pertinent, up-to-date professional advice and expert knowledge to the Hospital Director of Nursing and senior divisional management teams to support the successful delivery of corporate, professional, operational and clinical objectives.

The postholder will ensure that the Hospital complies with statutory, regulatory, contractual, and best practice requirements in relation to governance and quality, with effective assurance monitoring processes in place, through point of care to Hospital Assurance and Risk Group reporting and risk escalation processes.

### Key Working Relationships

**Internal:** Corporate and Site Based Quality Governance Team, Corporate Governance colleagues, Patient Safety, Quality Improvement and Health and Safety colleagues, Associate Director of Legal Services, Hospital, Divisional and Care Group Leadership Teams, Clinical Directors, Matrons and other clinical staff.

**External:** Patients, relatives and carers, Liverpool Place, Care Quality

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Commission, NHS England/Improvement, Other NHS Trusts.
<b>Key Responsibilities</b>
<b>Governance Strategy and Assurance</b> <ul style="list-style-type: none"><li>• Responsible for the establishment and on-going development of the Hospital's assurance framework across a large, complex acute site, working with the Hospital Leadership Team in ensuring the principal risks to the delivery of the Hospital's objectives are identified and controlled.</li><li>• Ensure the effective functioning of the Hospitals groups including appropriate information flows to the Hospital Management Board and onward to Trust.</li><li>• To be an active member of the Hospital's assurance groups, including Management Board.</li><li>• Responsible for the implementation of a quality governance system that ensures governance is multi-disciplinary, locally owned and provides assurance that the Hospital Quality Governance Framework is safe and effective.</li><li>• Ensure the Hospital governance systems and processes align to national requirements and best practice.</li><li>• Advise/brief the Hospital Leadership Team and Hospital assurance groups on changes in legislation/national policy in relation to the governance agenda and make recommendations to ensure compliance.</li><li>• Appraise national documents and present conclusions and recommendations to the Hospital Assurance and Risk Group regarding implications for the Hospital.</li><li>• Responsible for ensuring governance systems implemented within the large complex Hospital are effective and working in line with NHS Improvements Well-Led Framework.</li><li>• Ensure that governance and assurance systems monitor compliance with statutory, regulatory and best practice requirements and that assurance mechanisms are in place via corporate and divisional governance structures.</li><li>• Provide highly specialist advice, support and guidance to managers and clinicians in relation to the Trust's governance systems and processes.</li></ul>

## Key Responsibilities

### Governance Strategy and Assurance

- Responsible for the establishment and on-going development of the Hospital's assurance framework across a large, complex acute site, working with the Hospital Leadership Team in ensuring the principal risks to the delivery of the Hospital's objectives are identified and controlled.
- Ensure the effective functioning of the Hospitals groups including appropriate information flows to the Hospital Management Board and onward to Trust.
- To be an active member of the Hospital's assurance groups, including Management Board.
- Responsible for the implementation of a quality governance system that ensures governance is multi-disciplinary, locally owned and provides assurance that the Hospital Quality Governance Framework is safe and effective.
- Ensure the Hospital governance systems and processes align to national requirements and best practice.
- Advise/brief the Hospital Leadership Team and Hospital assurance groups on changes in legislation/national policy in relation to the governance agenda and make recommendations to ensure compliance.
- Appraise national documents and present conclusions and recommendations to the Hospital Assurance and Risk Group regarding implications for the Hospital.
- Responsible for ensuring governance systems implemented within the large complex Hospital are effective and working in line with NHS Improvements Well-Led Framework.
- Ensure that governance and assurance systems monitor compliance with statutory, regulatory and best practice requirements and that assurance mechanisms are in place via corporate and divisional governance structures.
- Provide highly specialist advice, support and guidance to managers and clinicians in relation to the Trust's governance systems and processes.

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- Support the Trust Director of Quality Governance and Associate Director of Legal Services in providing assurance to Care Quality Commission, NHS England/Improvement and Liverpool Place in relation to serious incidents, coronial outcomes, complaints and staff and user concerns.

### **Risk Management**

- On behalf of the Hospital Managing Director, be responsible for development of the Hospitals Risk Management processes ensuring that it aligns to the Trust's Risk Management Strategy and policy, best practice and fosters and develops a culture of risk maturity within the Hospital.
- Ensure there is appropriate training and development in place with regards to risk management for Hospital Directors, senior managers and frontline staff.
- Ensure that there are effective risk registers at all levels of the Hospital with risk escalation processes to inform the Hospital's Assurance Framework/Risk Register.
- In conjunction with the Trust's Health and Safety Team, maintain clear oversight and implementation of the Trust's Health and Safety Strategy within the hospital and ensure effective risk and assurance arrangements are in place to demonstrate that the hospital complies with the Health and Safety Care Act 2008/2010 and with the Health & Safety at Work Act 1974 and related regulations.
- In conjunction with the Trust's Health and Safety Team, ensure all reporting in relation to the Health and Safety Executive (HSE) (e.g., RIDDOR) and support the co-ordination of any on-site inspections by the HSE.

### **Patient Safety and Incident Management**

- In conjunction with the Trust Director of Quality Governance, ensure that the Hospital has effective systems for incident reporting, Duty of Candour and incident investigation, in line with the National Serious Incident Framework and Regulation 20 of the Health and Social Care Act 2008.  
*[Please note the Trust is currently transitioning to the Patient Safety Incident Response Framework].*
- Ensuring that patients, relatives, and their carers are appropriately involved when things go wrong with their care, and that the correct level of investigation is undertaken.

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- Support the Trust Director of Quality Governance and Associate Director of Legal Services in liaising with Commissioners, Police, Coroners, CQC and NHSEI regarding incidents reported under the Strategic Executive Information System (StEIS). Liaise with the Communications Department regarding handling of media enquiries as required.
- Support the Trust Director of Quality Governance and Director of Patient Safety in ensuring external reporting systems are in place to the National Reporting and Learning System (NRLS) and that a just culture fostered within the Hospital.
- In conjunction with the Trust Director of Patient Safety ensure there are appropriate systems in place for learning from incidents and significant events within the Hospital, as part of a Trust co-ordinated Lessons Learned Framework (Patient Safety Incident Response Framework).
- Ensure there are appropriate systems in place to manage safety alerts within the Hospital, including appropriate distribution, assurance, monitoring, risk escalation and audit of practice.
- In conjunction with the Trust Associate Director of Legal Services ensure that the Hospital meets the requirements of the Coroner, in disclosure of statements and investigations ahead of inquests. Where there is learning, for prevention of recurrence, ensure that systems for monitoring lessons learned are in place.

### **Hospital Quality Improvement**

- In conjunction with the Trust Director of Quality Improvement and Hospital Leadership Team, ensure that quality priorities are identified for improvements in patient safety, clinical effectiveness and patient experience and informed from point of care via the hospital's assurance structure.
- Ensure in conjunction with the Hospital Director of Nursing that the Quality priorities are aligned to the Trust's Vision, Values, annual planning cycle and Quality Accounts.
- Ensure that there are appropriate monitoring systems in place to track the progress to achieve Quality priorities via the Hospital's governance structures.
- Through the review of Quality and Performance data identify Quality Improvement initiatives relevant to the Hospital.

### **Complaints and Claims Management**

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- Ensure the Hospital, in line with the Trust's Complaints Management Policy, has a performance management and quality assurance process in place to produce quality and timely formal complaints responses.
- Ensure learning from complaints is identified, shared and monitored.
- In conjunction with the Trust Director of Quality Governance and Hospital Director of Nursing, ensure there are local and restorative, solution focused strategies in place within the Hospital e.g., an effective process to raise informal concerns raised with matrons.
- Support the Trust Associate Director of Legal Services in ensuring claims processes are in line with NHSLA schemes for Clinical Negligence, Employer Liability and Public Liability, ensuring learning from claims to support the reduction of NHSLA premiums and influencing the Hospital's Quality priorities.

### **Clinical Effectiveness**

- In conjunction with the Hospital Medical Director, lead the implementation of a Clinical Audit and Effectiveness Framework for the Hospital ensuring participation in national audits and the implementation of practices to ensure the Trust operates in a manner which is clinically effective.
- Ensure there are effective systems in place to ensure compliance with best practice and guidance e.g., NICE, NCEPOD reports, Royal Colleges etc.

### **Clinical Governance/Quality**

- Accountable for the delivery of clinical governance service. Provide senior leadership to ensure that governance processes are embedded within Hospital service provision.

### **Education and Training Development**

- Ensure there is appropriate complaints and compassion and empathy training in place within the Hospital.
- Responsible for the delivery of training across the Hospital on quality governance, assurance and risk, working closely with the corporate Quality Governance and Organisational Development teams on the development of new courses and training initiatives related to the governance and assurance agenda.
- Complete the Trust mandatory e-learning requirements.

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- Identifying personal development needs and discuss with the Deputy Director of Quality Governance.
- Identifying training needs of team members and address via 1 – 1's and appraisals and ensuring development needs are acted upon. Identifying training needs for all Trust staff and delivering training sessions.

## Equality and Diversity

It is the responsibility of every member of staff to understand our equality and diversity commitments and statutory obligations under current equality legislation (the Equality Act 2010) and to:

Act in ways that support equality and diversity and recognises the importance of people's rights in accordance with legislation, policies, procedures, and good practice.

Valuing people as individuals and treating everyone with dignity and respect, consideration and without prejudice, respecting diversity and recognising peoples expressed beliefs, preferences, and choices in working with others and delivering appropriate services.

- Recognise and report behaviour that undermines equality under Trust policy.
- Be consciously aware of own behaviour and encourage the same levels of behaviour in colleagues.
- Acknowledge others' different perspectives and recognise the diverse needs and experiences of everyone they come into contact with.
- With the support of managers develop an equality and diversity objective through the personal development review process.

## Values and Behaviours

### We are Caring

We are kind to each other and always show compassion to ourselves and others.

We know we are doing this when:

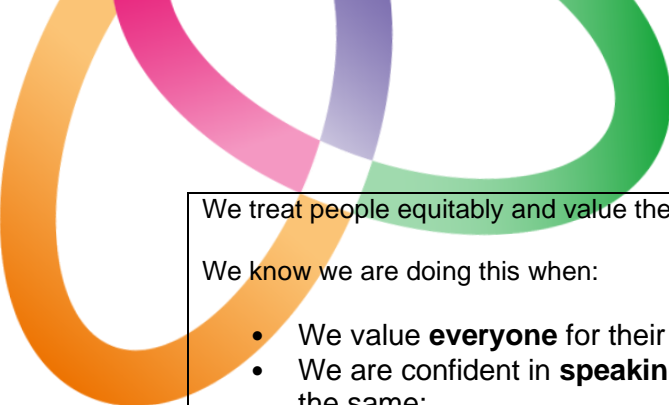
- We are always **kind** and **compassionate** to ourselves, our patients, families and colleagues;
- We **recognise** and **appreciate** each other, taking pride in working here and our contribution to success;
- We are **professional** and always seek to deliver the best standards of care.

### We are Fair

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We treat people equitably and value their differences.

We know we are doing this when:

- We value **everyone** for their unique contribution and we embrace diversity;
- We are confident in **speaking up** and we support all our colleagues to do the same;
- We are **open and honest**.

#### **We Are Innovative**

We work as a team to continuously improve the way we deliver and transform health care.

We know we are doing this when:

- We **continuously improve** the services we deliver and pioneer new ways of doing things;
- We **learn from mistakes**, striving to ensure we get things right first time;
- We **create and share knowledge** with each other, patients and our professional communities.

### **Infection Prevention and Control**

All staff will adhere to infection control policies and procedures at all times and carry out role specific duties as per roles and responsibilities.

### **Confidentiality**

Confidentiality/Data Protection regarding all personal information and Trust activity must be maintained at all times (both in and out of working hours).

All staff should ensure that they are familiar with and adhere to all Trust privacy, confidentiality and security policies and procedures. Any breach of confidentiality will be taken seriously and appropriate disciplinary action taken.

### **Freedom of Information**

In accordance with Freedom of Information and other associated legislation, the Trust may be required to make public recorded information available upon a request, or do this as part of a publication scheme. Please note, that in your public role, your name or job role may be contained in a document that is published in accordance with such legislation.

### **Management of Risk and Health and Safety**

All employees have a duty to take reasonable care to avoid injury to themselves or to others and to co-operate with the Trust in meeting its statutory requirements.

All employees will proactively contribute to the management of risk by identifying hazards in the workplace which have the potential to cause harm, raising issues of concern and risk to the appropriate level.

### **Safeguarding Children and Vulnerable Adults**

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All trust employees are required to act in such a way that at all times safeguards the health and well-being of children and vulnerable adults. Familiarisation with and adherence to trust Safeguarding policies is an essential requirement of all employees, as is participation in related mandatory/statutory training.

#### **IT Skills**

All staff are expected to have or to gain a minimum of basic level IT skills to enable them to use the Trust IT systems to support Trust services and needs. All staff should be familiar with relevant IT systems and security policies and procedures.

#### **Records Management**

All staff are personally responsible for record keeping. A record is anything that contains information in any medium e.g. paper, tapes, computer information, etc. which have been created or gathered as a result of any NHS activity. All individuals within the Trust are responsible for any records they create or use.

Please ensure that records are retained in accordance with the Records Management Policy and are stored in a manner that allows them to be easily located in the event of a Freedom of Information (FOI) request.

#### **Information Quality**

All staff must ensure complete and accurate data is collected to the highest standard at all times. Data collection should be supported by adequate documentation and processes should be regularly reviewed. Staff should ensure that processes conform to national standards and are fit for purpose. All staff should comply with the Information Quality Policy.

#### **Professional Responsibility**

As per relevant LUHFT policies

#### **Clinical Responsibility**

n/a

#### **Administration Responsibility**

Responsible for the appropriate investigation and administration of serious incidents and never events including liaison with regulators and commissioners

#### **Research**

Undertakes audits

#### **Strategic Role**

- Provide senior leadership to ensure that governance processes are embedded within Hospital service provision.

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### **HR Management**

- Managerial responsibility for the Divisional Governance Leads within the Hospital.
- Ensure systems in place to ensure that all staff have individual performance appraisals and personal development plans. Set team and individual objectives. Prioritise work-load ensuring deadlines are met. Overall responsibility for any recruitment and retention, sickness and absence, capability and disciplinary matters within the department.
- Resolve complex and sensitive human resources issues within the portfolio but also on request across the Hospital.
- Provide leadership and expert technical support to the teams and to other senior managers and clinicians across the Hospital in relation to Quality Governance and Risk Management.
- Motivate and enthuse all staff at all levels of the Hospital to participate with the governance, assurance and safety agenda.

### **Financial Responsibility**

- Manage the hospital governance team budget.
- Identify staffing and financial shortfalls across multiple divisions and budget lines to promptly and seek additional funding where necessary.
- Identify funding sources for safety initiatives, service developments and quality improvement initiatives across multiple divisions and budget lines.

### **Change of Job Description**

The duties outlined above are not intended to be exhaustive and may change as the needs of the department alter in line with current agendas. This job description will be subject to periodic review and amendment in accordance with the needs of the Trust.

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**Liverpool University Hospitals**  
NHS Foundation Trust

**Person Specification**

<b>Job Title:</b>	Assistant Director of Quality Governance		
<b>Band</b>	8c	<b>Job Code</b>	AS.SE.R0011

Person Specification				
	Qualifications	Essential	Desirable	Assessment
1	Educated to masters level or equivalent	x		A
2	Graduate qualification in a healthcare related field		x	A/I
3	Significant experience in a quality governance in a health care setting.	x		
4	Evidence of continuing professional development to support the delivery of a senior role in quality governance	x		A
	Experience	Essential	Desirable	Assessment
5	Experience of managing governance at a senior level in a large, complex healthcare Organisation; including evidence of strategic development and significant senior management experience.	x		A/I
6	Proven track record of leadership, managing redesign and organisational change within and across a large and complex organisation.	x		A
7	Proven experience of managing staff from a range of professional backgrounds within an Acute NHS environment and in developing clinical teams.	x		A/I
8	Significant experience in managing quality	x		A/I

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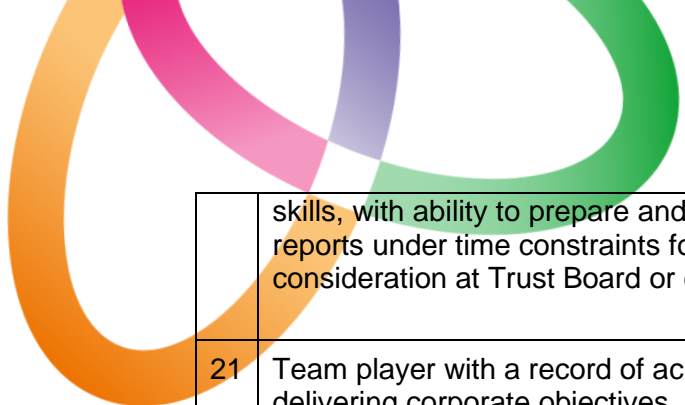
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	governance including incidents and complaints management, clinical effectiveness and compliance.			
9	Experience of Quality Improvement in Healthcare.		x	A/I
10	Experience of integrated governance systems across quality governance boundaries	x		A/I
	<b>Knowledge</b>	<b>Essential</b>	<b>Desirable</b>	<b>Assessment</b>
11	Demonstrates breadth and depth of understanding of current NHS policy and ability to develop strategies and policies and to implement them in practice.	x		A
12	Significant knowledge of statutory, regulatory requirements within governance in the NHS	x		A
	<b>Skills</b>	<b>Essential</b>	<b>Desirable</b>	<b>Assessment</b>
13	Highly developed leadership and motivational skills – able to work effectively across a large complex organisation; ability to enthuse, motivate and involve individuals and large teams, and have them understand your expectations.	x		I
14	High level of interpersonal skills both written and verbal.	x		A
15	Highly developed influencing, negotiating and conflict resolution skills.	x		A/I
16	High level of management competency, including ability to manage and lead in a complex, dynamic professional environment.	x		A/I
17	Ability to work with different disciplines across the health, education and social care settings.	x		A/I
18	Political awareness and ability to influence and work with stakeholders at all levels.	x		A/I
19	Demonstrates high degree of autonomy and decision making.	x		A/I
20	Excellent presentation and organisational	x		A/I

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	skills, with ability to prepare and present reports under time constraints for consideration at Trust Board or equivalent.			
21	Team player with a record of achievement in delivering corporate objectives.	x		A
22	Ability to work in a climate of rapid change, uncertainty and where there may be resistance to change.	x		A
23	Highly professional role model	x		A
24	Assertive, confident and able to work under own initiative, emotionally resilient	x		A
	<b>Other</b>	<b>Essential</b>	<b>Desirable</b>	<b>Assessment</b>
25	Commitment to achieving change and implementing quality improvement	x		A/I
26	Excellent leadership qualities, with an ability to motivate others	x		A/I
27	Ability to travel between sites to attend meetings as required.	x		A

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