

**Happy,
Healthy
& Heard**



Candidate Information Pack

Risk Manager
DG1321



“ Thank you for your
interest in this role with us ”

Dear Colleague,

Thank you for your interest in joining our Trust.

Dartford and Gravesham NHS Trust (DGT) is a dynamic and transforming Trust, committed to delivering the highest quality service to the communities it serves. DGT is an organisation that is genuinely committed to making you feel valued and important by supporting your physical and mental wellbeing, your career development and your general enjoyment of work.



We provide services across Darent Valley Hospital in Dartford, Queen Mary's Hospital, Sidcup, Erith and District Hospital, Bexley and Gravesham Community Hospital in Gravesend as well as a number of community locations across our population.

At DGT, we put quality at the heart of everything we do and whether directly or indirectly, everyone in this organisation contributes to providing safe, effective and compassionate care.

We are delighted that you are considering to come here and I very much look forward to meeting you personally.

Warm wishes.

Jonathan Wade, Chief Executive



Job Description

Risk Manager

Job Details

Job Title:	
Grade/Band:	Band 7
Location:	Trust-Wide
Speciality/Department	Governance
Reports to:	Health & Safety Manager
Managerially Accountable to:	Associate Director of Governance
Professionally Accountable to:	Associate Director of Governance
Accountable for:	Risk and Governance Facilitator

Job Summary

The post holder will be a subject matter expert and will lead in the creation of a risk culture for the Trust in which proactive risk management and assurance reporting is embedded at all levels to ensure the delivery of safe and effective patient centred services.

This is a standalone role and they will also provide a visible, accessible, and authoritative presence that takes responsibility for the functioning and oversight of the Trust's risk management strategy and processes (risk register, risk assessment, risk policies etc).

The post holder will also assist the Trust in monitoring compliance and assurance and will support, influence and provide advice that enables each service to effectively drive, deliver and provide evidence based assurance that the requirements of quality and regulatory compliance are being implemented effectively and sustainably. In addition, the post holder will lead systems and processes to support:

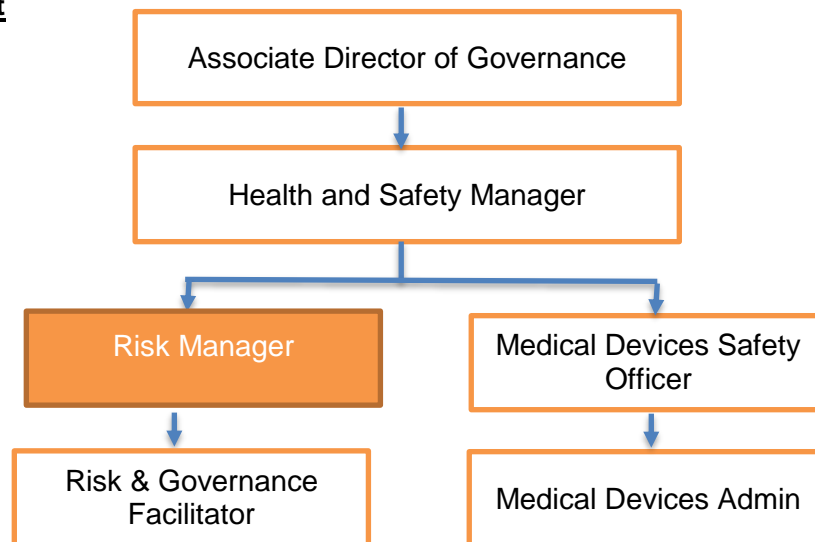
- Care Quality Commission's 'fundamental standards'
- Peer review visits/inspections (ISO, JAG etc)
- Clinical policies that relate to monitoring and compliance
- Compliance and Risk action plan monitoring and reporting

Values and Behaviours

- The Trust is committed to providing high quality services and in 2014 we engaged over 300 staff to help us develop values that underpin how we approach our responsibilities.
- Our Values are critical to our success and we expect all staff to adhere to them:
 - Delivery high quality **CARE WITH COMPASSION** to every patient.
 - Demonstrating **RESPECT AND DIGNITY** for patients, their carers' and our colleagues.
 - **STRIVING TO EXCEL** in everything we do.
 - **WORKING TOGETHER** to achieve the best outcomes for our patients.
 - Sustaining the highest **PROFESSIONAL STANDARDS**, showing honesty, openness and integrity in all our actions.

Our Values are supported by Our Behaviours which we expect every member of staff to exhibit.

Structure Chart



Specific Responsibilities

1. Clinical responsibilities:

- 1.1 Lead on the development of policies and procedures and associated documentation related to risk management to ensure they meet the requirements of the Trust and external regulators. Ensure policies are implemented, monitored and reviewed effectively and revise as required.
- 1.2 Ensure that all risks are managed in a timely manner, demonstrating with evidence that appropriate mitigations and actions have been achieved pre closure.
- 1.3 Lead on the development and management of Risk Registers, to include regular meetings with Executive, Divisional and Corporate Directors to review their risks and ensure that they are being managed effectively.
- 1.4 Lead in creating a culture and environment in which proactive risk management and assurance reporting is embedded at all levels in the organisation to ensure the delivery of safe and effective patient centred services.
- 1.5 Facilitate the embedding of the risk management process through the provision of guidance and training. Train and support the Divisional and Speciality Risk Leads, and regularly meet to review their risks and to ensure consistency across the Trust.
- 1.6 Be regularly visible / present in clinical areas, encouraging interaction with all groups of staff and gathering 'soft' data to enable effective risk management systems are in place that are accessible for all staff groups.
- 1.7 Support the Divisions in creating a dynamic approach to the management of risk ensuring a level of rigour and challenge to risk mitigation and review.
- 1.8 Ensure that effective and measurable risk improvement action plans are developed, implemented and monitored.
- 1.9 Attend and advise other key committees in relation to risk (e.g. Radiation, Pathology, Patient Safety Group etc.).
- 1.10 Provide analysis of the Trust Risk Register and its compliance with National standards to the Trust Leadership Team Meeting and the Health & Safety Group, highlighting key areas of concern or improvement.
- 1.11 Ensure systems for trust-wide learning and oversight are in place for all aspects of risk management – maintain an agile response – ensuring that risk management processes flex in response to feedback (internal and external).
- 1.12 Work closely with the Managers/Leads within Central Governance to ensure meaningful and proactive triangulation of data that is triangulated from complaints, patient safety incidents, legal services

2. Compliance and Assurance responsibilities:

- 2.1 Provide expert direction, guidance and support to Divisions and Speciality teams in achieving obligations in relation to National Standards (eg Care Quality Commission Standards, NICE Guidance and National Patient Safety Agency Standards (MHRA)).
- 2.2 In conjunction with the Deputy Chief Medical Officer, oversee the assessment of compliance with the full range of NICE guidance types and ensure ongoing audit to evidence compliance.
- 2.3 Produce the annual report into compliance with NICE Guidelines and technology appraisals.
- 2.4 Support the Divisional Leads in managing external inspections and peer reviews.
- 2.5 Support the Head of CQC Quality and Compliance in regard to assurance of national regulatory requirements.
- 2.6 Support the provision of information in relation to Quality and Safety under the terms of the Trust standard contract. Liaise with Corporate Leads to provide evidence and assurance to commissioning colleagues and regulators including the ICB.
- 2.7 Support the Divisional Leads in managing external inspections and peer reviews.
- 2.8 Support the Clinical Quality Compliance and Assurance Lead in regard to assurance of national regulatory requirements.

3. Managerial responsibilities:

- 3.1 Deputise for the Director or Associate Director of Governance as required in relation to matters relating to risk.
- 3.2 Attend and provide active contribution, in relation to Risk, to Assurance Meetings, providing support at Divisional or Speciality Meetings and work groups as appropriate.
- 3.3 Demonstrate expertise in presenting reports and educational materials (public speaking).
- 3.4 Chair meetings and working groups as appropriate.
- 3.5 Lead as appropriate in developing policies and strategy.
- 3.6 Monitor quality performance management indicators and support Trust strategies for improvement.
- 3.7 Be proactive in identifying and helping to resolve specific or recurrent concerns.

4. Education and development responsibilities:

- 4.1 All budget holders will undertake on the job training in all matters financial and will be responsible for ensuring they are setup in the finance/procurement/HR systems with the appropriate authorisation levels
- 4.2 Undertake annual review and statutory and mandatory training
- 4.3 Lead, review, develop and deliver the Trust training programmes for all aspects related to Risk Management.
- 4.4 Take part in teaching on the mandatory training sessions.
- 4.5 Establish links and working arrangements between Divisions, Specialities and corporate teams and that of the central Governance Team so that they work in collaboration and share good practice.
- 4.6 Keep portfolio
- 4.7 Ensure attendance at department training sessions as required for professional/personal/service development

General responsibilities:

Patient Experience

- Staff should ensure that they always put the patient at the heart of everything they do. All staff will strive to create a positive patient experience at each stage of the patient's/service users care journey

Trust Policies and Procedures

- To adhere to the Trusts agreed policies and procedures.

Equal Opportunities

- To promote and develop the equality of opportunity in accordance with the Trust's Equal Opportunities Policy

Confidentiality

- To protect the confidentiality of information relating to the Trust, Patient and Staff or other agencies

Quality

- To provide a quality service to internal and external agencies and participate/ develop clinical governance within sphere of responsibility.

Infection Control

- All Trust employees are required to be familiar with, and comply with, Trust policies and guidelines for infection control and hand hygiene in order to prevent the spread of healthcare-associated infections.
- For clinical staff with direct patient contact, this will include the uniform and dress code policy, the use of personal protective equipment guidance, the guidance on aseptic techniques and the safe handling and disposal of sharps.
- All staff are required to attend mandatory training in Infection Control and be compliant with all measures known to be effective in reducing healthcare-associated infections.

Health and Safety

- To share responsibility for abiding by health and safety policies and regulations, infection prevention and control policies and act in accordance with the Risk Management Policy.

Sustainability

- It is the responsibility of all staff to minimise the Trust's environmental impact by recycling wherever possible, switching off lights, computers, monitors and equipment when not in use, minimising water usage and reporting faults promptly.

Our Behaviours

- All staff are expected to behave in accordance with 'Our Behaviours'. The six areas of focus are the responsibility of each individual and should be the basis for all work undertaken within the Trust.

Safeguarding

- The Trust expects all employees to adhere to the principle that safeguarding children and adults is everybody's responsibility, including the escalation of any concerns.

Person Specification

POST:- Risk Manager

Criteria Group	Essential	Desirable
Education and Training	<ul style="list-style-type: none"> • Educated to Degree level or equivalent experience working at a senior level in Risk Management within the NHS • Recognised risk management qualification • Evidence of CPD 	<ul style="list-style-type: none"> • Qualification in a Quality Improvement or Project Management methodology • NEBOSH HSE Award in Managing Risk and Risk Assessment at Work
Knowledge and Skills	<ul style="list-style-type: none"> • Project Management skills • Up to date knowledge of Healthcare legislation • Up to date knowledge of the standards pertaining to Healthcare provider organisations • Able to compile, analyse and report on complex data • Excellent verbal and written communication skills • Excellent interpersonal skills including persuasiveness and influencing • Able to prioritise and manage a complex workload • Able to develop policies and procedures • Able to develop and deliver training interventions • IT Literate • Ability to think creatively to solve problems and recommend solutions 	<ul style="list-style-type: none"> • Experience of presenting papers and reports to public sector risk-related committees • Experience in devising and delivering training interventions • The function of committees within public bodies • Knowledge of the outcomes required under Healthcare legislation • Working knowledge of the NHS
Experience	<ul style="list-style-type: none"> • Extensive experience in the administration and the management of corporate risk including Risk Management and Risk Registers • Experiencing of working in project teams and providing competent specialist advice • Experience of working with enforcing officers from external agencies such as the CQC or HSE • Experience in the monitoring and facilitation of external agency standards 	<ul style="list-style-type: none"> • Experience in a similar role in the NHS or other public body • Able to deliver training to large groups and to all levels of the organisation
Personal Attributes	<ul style="list-style-type: none"> • Willingness to work flexibly 	

Terms and Conditions of Service

Band	Band 7
Salary Scale	As per Agenda for Change
Hours of work	37.5 hours per week
Annual Leave Entitlement	Annual leave entitlements are based upon the following lengths of NHS service (pro rata if applicable): On Appointment = 27 days After five years = 29 days After ten years = 33 days
Contractual Notice	As per Agenda for Change.
Registration	
DBS Check	Standard

Please note that these terms and conditions are subject to change and may differ from your proposed contract should you be successful in your application.