

## **1. GENERAL INFORMATION**

Job Title:	Patient Liaison and Risk Manager
Location:	Longbow
Hours of Work:	37.5 per week Monday – Friday ( 9am -5pm)
Responsible To:	Medical Director
Responsible For:	Clinical Support Co-ordinator

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## **2. JOB SUMMARY**

This post plays a lead role in delivering Shropdoc’s risk management requirements and corporate objectives including governance, complaints, claims and incidents.

It provides support to the Medical Director and Clinical Directorate in the management of complaints and incidents and the ongoing training and education of staff.

It plays a key role in making sure safe and effective processes are in place, reducing the chances of clinical and corporate risk.

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## **3. KEY TASKS AND RESPONSIBILITIES**

1. To manage the complaints process including recording, and responding to complaints as set out in the Complaints Policy and in a timely, professional, courteous and helpful manner at all times.
2. To manage the incident reporting process including recording, and co-ordinating the investigation in to incidents, responding and feeding back as necessary in a timely, professional, courteous and helpful manner at all times. This includes being the main point of contact for Police and the Coroner’s Office.
3. To line manage and support the Clinical Support Administrator.
4. To review and improve the complaints and incident reporting procedures where necessary to ensure that the use of resources is maximized. This includes planning and

implementing the expansion of the complaint and incident handling and investigation procedures to include all Shropdoc work streams.

5. To view, input, amend and update data on the IT systems and databases used in the office to ensure that these are maintained and the quality of information assured.
6. To organise, attend and take notes at Complaints or Critical Incident related meetings ensuring a professional, helpful and efficient approach.
7. To collate a comprehensive complaints and incidents report and themed reviews for the Clinical Governance Group and Clinical Quality Review Meeting on a monthly basis. To ensure that any remedial actions are implemented, recorded and reported to Clinical Governance Group accordingly.
8. To help design and implement a suite of reports for the Powys contracts and work with the Medical and Ops Directorates in a coordinating role for reporting against any new work stream KPIs.
9. To take a key role in monitoring English and Welsh 111 clinical performance and safety including coordination of the Health Professional Feedback (HPF) process.
10. To provide support to complainants and staff during the complaints process.
11. First point of contact for legal staff and insurers in relation to complaints and incidents.
12. To support Managers and other staff in the handling and investigation of complaints/incidents, to learn from mistakes and to continually improve the quality of Shropdoc services.
13. To support Managers and other staff to maximize learning from mistakes therefore reducing the risk to patients and harm to the reputation of Shropdoc.
14. To ensure that the Clinical Risk Register is accurate and up-to-date and ensure in conjunction with the Medical Director that the Risk Management Strategy is reviewed annually.
15. To regularly review and update as needed, policies and processes relating to complaints, risk, clinical governance and safeguarding.
16. Once trained as a Safeguarding Trainer, to co-ordinate and deliver safeguarding training in-house initially with a view to providing this as a commercial offering in the future. Training to be completed within first 6-months.
17. To deliver complaint and incident training to all staff as requested by line managers.

18. To support the Medical Director in reviewing and ensuring compliance with statutory or clinical guidelines and manage ongoing GP membership checks to ensure compliance with published processes.
19. To act as main point of contact and liaison for external auditors and accreditors, coordinating and managing visits and the associated actions and responses where appropriate e.g. CQC, UHUK, Healthwatch, Customer Service Excellence.
20. To act as Nominated Individual on behalf of Shropdoc for the CQC.
21. To be the main point of contact, during working hours, in relation to any request for information and associated Information Governance issues and queries.
22. To manage the process of Third Party and Subject Access Requests in accordance with the associated legislation.
23. To analyse and interpret failed home visit data and compilation of associated report, ensuring that any concerns in relation to potential issues of patient safety are logged as incidents and fully reviewed.
24. To support to GPs in the absence of Medical Director in relation to governance issues – complaints and incidents.
25. To support and deputise for the Caldicott Guardian.
26. To manage the incorrect patient notes process.
27. To deputise for Medical Director at non-clinical meetings when requested.
28. To ensure that relevant clinical administration activities are delegated and completed in a timely and efficient manner, e.g. filing, copying and other general administration.
29. To manage the GP Database and files, ensuring that, as far as is practicably possible, that up to date contact details, indemnity, DBS and registration information is held.
30. To manage the process of administration and appropriate responses to solicitors' letters.
31. To manage the process when dealing with GP performance and GMC investigations.
32. To act as non-clinical Safeguarding lead, overseeing the safeguarding process for referrals and child Protection flagging.

33. Manage the Clinical Alerts process (for infections, medication and devices), and associated actions.
34. Co-ordinate the Root Cause Analysis process for more significant events, help make associated recommendations and monitor actions as required.
35. Ensure Risk Assessments are carried out and collated, where and when appropriate, especially when new projects are undertaken, and any necessary communication with our insurers takes place.
36. Managing the administration and organisation of Clinical training sessions and the annual clinical education day, providing support to the GP Education Lead.
37. To arrange and attend regular meetings with third parties and stakeholder, monitoring actions that come from these meetings.
38. To manage the Patient Feedback process (In house and Cfep), making sure that this is logged, responded to and fed in to Exec as necessary.
39. To manage the violent patients process.
40. To act as the nominated individual for CQC registration.

#### **4. PROBATIONARY PERIOD**

This post is subject to the requirements of a six month probationary period for new staff only.

#### **5. STANDARDS OF BUSINESS CONDUCT**

The post holder will be required to comply with Shropdoc Policies and Procedures and, at all times, deal honestly with Shropdoc, with colleagues and all those who have dealings with Shropdoc including patients, relatives and suppliers.

All Shropdoc staff may be involved directly or indirectly with people who are receiving a health service. Therefore, Shropdoc is exempt from the Rehabilitation of Offenders Act (1974) and this post may be subject to a Criminal Records Bureau disclosure.

#### **6. PROFESSIONAL REGISTRATION**

- i. If you are employed in an area of work which requires membership of a professional body in order to practice (e.g. Nursing & Midwifery Council for Nurses), it is a condition

- precedent of your employment to maintain membership of such a professional body. It is also your responsibility to comply with the relevant body's code of practice. Your manager will be able to advise you on which, if any, professional body of which you must be a member.
- ii. You are required to advise Shropdoc if your professional body in any way limits or changes the terms of your registration.
  - iii. Failure to remain registered or to comply with the relevant code of practice may result in temporary downgrading, suspension from duty and/or disciplinary action which may result in the termination of your employment.
  - iv. If you are required to have registration with a particular professional body or to have specific qualifications you must notify your manager on appointment of such fact and provide him or her with documentary evidence of them before your employment commences or, at the latest, on your first day of employment. Furthermore throughout your employment with Shropdoc, you are required on demand by your manager to provide him or her with documentary evidence of your registration with any particular professional body or in respect of any required qualifications.

## **7. CONFIDENTIALITY and INFORMATION GOVERNANCE**

All staff may have access to confidential information about patients, staff or any Shropdoc or Health Service business. On no account must such information be divulged to anyone who is not authorised to receive it. Confidentiality of information must be preserved at all times whether at or away from work. Any breach of such confidentiality is considered a serious disciplinary offence, which is liable to dismissal and/or prosecution under statutory legislation (Data Protection Act) and Shropdoc's Disciplinary Procedure.

All staff must act within legislation, policies and procedures relating to information governance

## **8. DATA PROTECTION AND THE DATA PROTECTION ACT 1998 and (GDPR 2018)**

If you have contact with computerised data systems you are required to obtain, process and/or use information held on a computer or word processor in a fair and lawful way. To hold data only for the specific registered purpose and not to use or disclose it in any way incompatible with such purpose. To disclose data only to authorised persons or organisations as instructed.

All staff who contribute to patients' health records are expected to be familiar with, and adhere to, Shropdoc's Records Management Procedure. Staff should be aware that patients' records throughout Shropdoc will be subject to regular audit.

## **9. HEALTH AND SAFETY**

All staff must act within legislation, policies and procedures relating to Health and Safety

All staff must attend statutory/mandatory training as instructed

All staff must be familiar with Shropdoc's Health and Safety Policy, including a thorough understanding of personal responsibilities for maintaining own and the health and safety of others.

## **10. RISK MANAGEMENT**

All Shropdoc employees are accountable, through the terms and conditions of their employment, professional regulations, clinical governance and statutory health and safety regulations. Staff are responsible for reporting incidents, handling patient feedback and complaints appropriately, being aware of the risk management strategy and emergency procedures, and attendance at any relevant training as required.

The post holder will ensure compliance with Shropdoc's risk management policies and procedures. These describe Shropdoc's commitment to risk management, the recognition that our aim is to protect patients, staff and visitors from harm and stress and that all staff have a responsibility to minimise risk.

## **11. INFECTION CONTROL**

All staff are required to be familiar with Shropdoc's infection control policies and procedures and national guidance in relation to infection control. All staff whose normal duties are directly or indirectly concerned with patient care must ensure that they complete mandatory infection control training and are compliant with all measures known to be effective in reducing Healthcare Associated Infections.

## **12. SAFEGUARDING**

Shropdoc is committed to ensuring the safeguarding of vulnerable adults and children in our care. All employees are required to be familiar with their responsibilities and to raise any concerns as appropriate. An overview of Safeguarding is covered during induction and staff will be required to attend additional training regarding Safeguarding relevant to their position and role.

## **13. EQUALITY, DIVERSITY AND HUMAN RIGHTS**

The post holder will treat all colleagues, service users and members of the public with respect and dignity regardless of their gender, age, race, religious beliefs, religion, nationality, ethnic origin, social background, sexual orientation, marital status, disability, criminal background and Trade Union status. Shropdoc has a policy on Equality and Diversity and it is the responsibility of all staff to ensure that it is implemented and contribute to its success.

**14. HARASSMENT AND BULLYING**

Shropdoc condemns all forms of harassment and bullying and is actively seeking to promote a workplace where employees are treated with dignity, respect and without bias. All staff are requested to report any form of harassment and bullying to their line manager or to the Personnel Manager or any other Manager within Shropdoc.

**15. QUALITY**

Shropdoc conducts its patient care and related services:

- Through a commitment to good patient care and to the quality of its clinical practices
- By ensuring that all patient care and related services are conducted according to established protocols and specified requirements;

**16. TRAINING**

All staff must attend statutory /mandatory training as instructed.

**17. NO SMOKING POLICY**

There is a smoke free policy in operation in Shropdoc. In accordance with this policy smoking is discouraged and is not permitted anywhere within the buildings or within 15 metres of Shropdoc main buildings.

**18. REVIEW OF THIS JOB DESCRIPTION**

The above duties and responsibilities are intended to represent current priorities and are not meant to be an exhaustive list. The post holder may from time to time be asked to undertake other reasonable duties and responsibilities. The Job Description will be reviewed at least annually in conjunction with the post holder. Any changes will be made in discussion with the post holder according to service needs.

**19. JOB DESCRIPTION AGREEMENT**

Post Holders Name: .....

Post Holders Signature: ..... Date: .....

Line Managers Name: .....

Line Managers Signature: ..... Date: .....

**PERSON SPECIFICATION**  
**Patient Liaison and Risk Manager**

**(Supporting our Policy on Equal Opportunities in Employment)**

Shropshire Doctors Co-Operative has declared its commitment to equality of opportunity in employment and set standards which enhance individual rights protected at law. These are set out in the written Policy document which is freely available to applicants for employment and to existing staff.

**The under mentioned are the job-related requirements for this post:**

<b>Requirement</b>	<b>Essential</b>	<b>Desirable</b>	<b>Evidenced by</b>
<b>Education and qualifications</b>	<p>OCR Text Processing Level 3 (or equivalent experience).</p> <p>Degree level (or equivalent education) in a relevant area or equivalent work experience.</p> <p>NVQ/ILM Level 3 or equivalent experience in Leadership and Management.</p> <p>Safeguarding Level 3 qualification or willingness to work towards this.</p>	<p>Root Cause Analysis training</p> <p>NVQ/ILM Level 3 or equivalent experience in Leadership and Management</p> <p>Evidence of continuing professional development, which demonstrates the theory and practice to operate at a senior level</p> <p>Experience of training in Safeguarding.</p>	<p>Application form</p> <p>Interview</p>
<b>Experience</b>	<p>Risk management training/experience.</p> <p>Demonstrable experience of working with complaints and/or claims investigation and response.</p> <p>Experience of delivery of investigations in relation to service improvement.</p> <p>Experience of multi-disciplinary working.</p>	<p>Project Management and evidence of implementing change successfully</p>	

	<p>Experience of managing others including staff development, performance management and employee relations.</p> <p>Evidence of delivering training and education to others.</p> <p>Demonstrable experience of working within the requirements of the Caldicott Principles, Data Protection Act and Information Governance framework and GDPR.</p>		
<p><b>Skills/Abilities</b></p>	<p>Excellent communication and interpersonal skills (phone, letter, email and face to face) including emotional intelligence to in order to deal effectively with complex and sensitive patient information, distressed or aggressive patients, or those with an impaired level of understanding.</p> <p>High level of written and verbal presentation skills, including investigative reports and complaint responses.</p> <p>Clear understanding of professional responsibility and accountability.</p> <p>Ability to communicate effectively with all members of the multi-disciplinary team and other services. Including engaging with national, professional, academic and managerial colleagues and the general public.</p>		

	<p>Ability to resolve conflict and deal with difficult situations.</p> <p>Excellent organisational skills, the ability to prioritise and work under pressure to tight deadlines.</p> <p>Ability to provide training and education to other members of staff.</p> <p>High degree of computer literacy including all office software.</p>		
<b>Knowledge</b>	<p>Good awareness and understanding of national policy development on clinical governance, clinical quality, patient safety and quality improvements.</p> <p>Knowledge and understanding of clinical governance.</p> <p>Understanding of equality and diversity.</p> <p>Knowledge and understanding of Caldicott principles and guidelines.</p> <p>Knowledge and Understanding of safeguarding good practice and principles.</p> <p>Knowledge and understanding of Information Governance guidelines.</p> <p>Knowledge and understanding of GDPR.</p>	<p>Knowledge of continuous improvement methodologies and management of implementing new ways of working.</p> <p>Understanding of the role and function of Clinical Commissioning Groups</p> <p>Knowledge and understanding of local health and social care pathways</p> <p>Knowledge and understanding of current changes in the NHS and Social Services particularly in relation to primary care.</p> <p>Knowledge and understanding of medical terminology</p>	

<p><b>Other attributes</b></p>	<p>Ability to remain calm, assertive, fair and diplomatic.</p> <p>Effective communicator with a high degree of personal credibility.</p> <p>Ability to offer support to staff and deal with issues in a confidential manner.</p> <p>Ability to concentrate for prolonged periods of time.</p> <p>Confident decision maker.</p> <p>Systematic approach to problem solving.</p> <p>Hard working, reliable and resourceful.</p>		
<p><b>Other general requirements</b></p>	<p>Full driving license</p> <p>Flexibility to work outside of normal hours on occasions.</p>		