

Quality Team Administrator

Job Type: Permanent

Working pattern: 37.5 hours per week

Staff Group: Administrative & Clerical

Specialty/Function: Clinical Directorate

Salary: £19,737 - £21,142 pa dependent on experience

This is an exciting opportunity for an administrator to join our Clinical Directorate to provide high quality and comprehensive administrative support at all times, providing a positive and efficient image of the Organisation. We aim to deliver a “client-focused” service, which promotes good customer service and effective working relationships.

The quality team administrator will be a core member of the team providing high quality administrative support in relation to many features of clinical governance including patient safety and investigations. Their role will also include engaging in quality assurance document control and being an administrator of the redesigned Information Portal.

All of these will contribute to facilitating improvements in clinical practice and safety to reduce risk.

The role supports a collaborative style of working and requires a flexible approach to their work in order to meet various deadlines and to provide administrative cover when colleagues are absent. The post holder will provide a professional, comprehensive, administrative service to the directorate and the organisation as a whole, whilst maintaining complete confidentiality and using excellent communication skills.

If you are interested in this position and would like to discuss this role further and arrange an informal visit then please contact:

Mr Paul Page, Patient Liaison and Risk Manager

Paul.Page@shropdoc.nhs.uk

Thank you for your interest in Shropdoc, we look forward to receiving your application for employment.

Closing Date : 25^h June 2021

JOB DESCRIPTION

Job descriptions are not designed to be all-inclusive although they will, as far as practicable, be a reasonably accurate and understandable specification of duties. The nature of our business demands a flexible approach in order to provide services to our patients and doctors. Shropshire Doctors Co-operative Ltd (Shropdoc) may amend the job title and job description and you may be required to carry out additional or other duties as may be reasonably required.

Post: Quality Team Administrator

Reports to: Patient Liaison and Risk Manager, Clinical Directorate.

Hours: 37.5 hours
Based at Shropdoc, 3 Longbow Close, Shrewsbury SY1 3GZ.

Job Purpose: The purpose of the post is to support the Clinical Directorate across the range of Shropdoc Services provided in Shropshire, Telford & Wrekin and Powys.

Summary of the role: The post holder is responsible for providing administrative support to the Clinical Directorate. The principal duties are to:

- Engage in quality assurance document control, including identifying document revision status, control document distribution, prevent use of obsolete documents and facilitating proper archiving.
- Administration of the newly redesigned Information Portal, a framework for integrating information, people and processes across organizational boundaries. Authorised to manage foundational setup and hosted content. The administrator will create and manage key records and the accounts of all other users in the Portal.
- Assist the Patient Liaison and Risk Manager in all areas of quality governance, with particular focus on Patient Experience. Support the Clinical Support Coordinator in the general administration of the electronic incident reporting system.

Key Relationships: Patient Liaison and Risk Manager
Principal Investigator and Associate Medical Director
Associate Medical Director for Quality and Safety
Executive Medical Director
Clinical Support Coordinator
Clinical Services Delivery Manager
Staff members within the Care Co-ordination Centre
Technical Support Engineer

Shropshire Doctors Co-operative Ltd (Shropdoc) is a high quality, high performing organisation, which currently delivers urgent primary care services to over 600,000 patients. Responsive, adaptable and continually evolving, Shropdoc has a reputation for delivery safe, clinically effective and cost efficient services, which result in high levels of patient satisfaction.

Shropdoc is a registered society under the Co-operative and Community Benefit Societies Act 2014.

Shropdoc is also committed to the NHS Values (as set out in the NHS Constitution March 2015).

1. Main Duties and Responsibilities

1.1 Document Assurance and Administration

- On a monthly basis, provide an overview of the revision of overdue Controlled Documents listed in the appropriate register (controlled document section and clinical section) and contact the relevant document owner to ensure a timely review.
- With guidance from the Associate Medical Director for Quality and Safety, ensure that the reviewed document meets the requirements of the Policy for the Development Ratification Implementation and Management of Policies and Procedural Documents.
- Advising the Controlled Document Leads on implementing the process for the approval of Controlled Documents.
- Maintaining the organisation's electronic library of Controlled Documents and for publishing new and revised versions in PDF format only.
- Ensuring that antecedent versions are placed within the relevant document archive folder.
- Assist the Associate Medical Director for Quality and Safety in:
 - i) Preparing the annual summary report to Board and requesting and reviewing compliance evidence from Document Leads;
 - ii) Arranging for the publishing of all approved Controlled Documents; within the Information Portal;
 - iii) Undertaking an annual audit of each directorate's Controlled Documents to ensure compliance.

1.2 Administration of the Information Portal

- Responsible for assisting the Associate Medical Director (Quality and Safety), Information Portal Owner, in the operational maintenance of the Portal.
- Being the primary contact for matters relating to the Portal including user administration and feedback.
- Assist the Portal Owner in Portal release management and deployment.
- Assist the Portal Owner in assigning a content owner to each section of the Port
- Manage the content review process by undertaking a regular review process to ensure the Portal is kept up to date, accurate, and relevant. Specific duties include:
 - i) Notifying the Portal Publishers & Section Administrators when content is due for review.
 - ii) Providing support through the review and approval process.
 - iii) Publishing portal content.

- iv) Archiving and deleting content as per guidance in section 3 of the Content Management Policy.

1.3 Patient Experience

- Locating relevant information and records with guidance from the Patient Liaison and Risk Manager.
- Enter and maintain data within the electronic incident reporting system to ensure it is kept up to date.
- Collate all patient feedback from available sources (e.g. patient questionnaires, public facing website comments, email and letter) and enter into the appropriate database.
- Issuing location specific feedback to the relevant management team for review, using posters or short reports, and to establish any actions to be taken.
- When appropriate produce '*you said, we did*' posters feeding back both staff and patient actions taken as a result of patient feedback.
- Issuing exemplary case letters to GP's and Urgent Care Practitioners.
- Ensuring actions are tracked and completed as required by the Quality Governance Manager.
- Issuing any positive feedback out to individual staff members, groups of staff or teams as required.
- Ensure all Shropdoc bases have a supply of feedback leaflets and ordering new stock when required.

1.4 Education and Learning

- Coordinate preparatory activities for the monthly Case Based Learning (CBL) sessions for healthcare professionals.
- Collate evaluation of and feedback from the CBL sessions and assist in the maintenance of the Education Quality Dashboard.

1.5 General

- To provide administrative support to the Clinical Directorate including (but not limited to):
 - i) Photocopy and word-process documents, letters, emails, minutes and reports when required
 - ii) Authorised destruction of confidential/secure paperwork.
 - iii) Schedule and book events/meetings/training facilities
 - iv) Organise and attend meetings, where appropriate, to take minutes/notes, produce, copy and circulate papers.
- Contribute to the data collation required for review by commissioners and within NEMS as indicated by the Quality Governance Manager.
- To take responsibility for ensuring personal and professional development in support of the post.
- To carry out additional or other duties as may be reasonably required.

The following details are generic to all Shropdoc employees:

2. Probationary Period

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

3. 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.

4. Professional Registration

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.

You are required to advise Shropdoc if your professional body in any way limits or changes the terms of your registration.

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.

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.

5. 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.

6. Data protection and the Data Protection Act 1998

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.

7. 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.

8. 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.

9. Infection Control

All staff are required to be familiar with Shropdoc's infection control policies, 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.

10. 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.

11. 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.

12. 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.

13. 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;
- By requiring all personnel to be familiar with and trained in the quality policy, the quality management system and related documentation, practices and administration
- Through commitment to provide patients, Member GPs and associated LHBs and CCGs at all times with a service that confirms to Shropdoc's quality management system.

14. Training

All staff must attend statutory/mandatory training as instructed and as required within your role

15. 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 meters of Shropdoc main buildings.

16. 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.

Job Description Agreement

Post Holder's Name:

Post Holder's Signature:

Date:

Line Manager's Name:

Line Manager's Signature:

Date:

Person Specification – Quality Assurance Administrator

CRITERIA	ESSENTIAL	DESIRABLE
PERSONAL	<ul style="list-style-type: none"> • Excellent verbal, telephone and written communication skills. • Accuracy and attention to detail, particularly with data entry. • Ability to work as part of a team as required by the role. • Ability to work with managers with different personal styles. • Ability to manage own time and workload. • Ability to concentrate for prolonged periods of time. • Well organised. • Self-motivated. • Awareness of the limitations of authority, knowledge and skills and willingness to seek help when required. 	<ul style="list-style-type: none"> • Commitment to develop personal expertise through self-guided study and further training.
EXPERIENCE	<ul style="list-style-type: none"> • Previous general administrative and office work. • Experience in maintaining information systems or databases. • Data entry skills. 	<ul style="list-style-type: none"> • Experience of using Adastra/SystemOne. • Previous Quality Governance experience. • Understanding of the audit cycle.
SKILLS & KNOWLEDGE	<ul style="list-style-type: none"> • Proficient in the use of Microsoft Word and Excel, email and the use of databases and spreadsheets. • A good understanding of the key issues relating to patient records. • Understanding of the importance of accurate patient details in records. • Understanding of confidentiality and the Data Protection principles. 	<ul style="list-style-type: none"> • Willing to develop expertise through self-guided study and further external training • Level Two Certificate in Business Administration.