

Job Title: Clinical Risk Manager
Accountable to: Hospital Director

Responsible to: Clinical Quality and Compliance Manager

Qualifications: RMN, AHP, SW

Role Summary:

The Clinical Risk Manager will be responsible for line management of Safety Audit Assistant and Clinical Audit Assistant. They will be a 'role model' for nurses and support workers and have high expectations of others, recognising and acknowledging their strengths. The post holder will be expected to challenge poor practice/performance issues in a timely and constructive manner, giving honest and proportionate feedback and escalate.

The role holder will be expected to develop and manage links with all services in order to effectively deliver aspects of the requirement of the role.

Main Duties

- Assist the Clinical Quality and Compliance Directorate through clinical practice development and quality improvement.
- Have Line management responsibilities of a designated staff team within the Clinical Quality and Compliance Directorate.
- Have an oversight of audit process and supervise the clinical audit assistant undertaking regular audits of care through monitoring and analysis of documentation, assessment and soft information including observation of the lived experience of patients
- Work in partnership with the Clinical Service Managers to deliver targeted intervention where themes, trends and lessons learnt indicate a need for Quality Improvement
- Work within PDNs to identify areas of focus to support them on the development of nursing practice, through clinical leadership, coaching and mentoring.
- Attend local Governance and external LPC meetings
- Ensure that quality improvement is embedded in practice through focused training and audit against required standards
- Involvement in hospital wide CQUIN implementation working groups and projects including data collection where appropriate
- Lead and facilitate relevant training programmes
- Ensure up to date with evidence based practice relevant to services and assist in implementing new standards in practice

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- Develop clinical networks relevant to role and area of focus
- Oversee to completion action plans within area of focus and scope of role
- Oversee completion and submission of the hospital Risk Register
- Oversee compliance with Serious Incident reporting and provide theme & trend reports for hospital and external meetings
- Undertake when required Root Cause Analysis and Investigations including the development of a comprehensive report and action plan

Key Tasks

- Audit of practice in relation to evidence based practice standards and policies / procedures relevant to practice within the hospital
- Develop Quality Improvement plans in partnership with services to address any adverse audit findings
- Work with MDT to affect positive change in practices and ensure that necessary quality improvement is achieved
- Be creative in developing practice
- To support the development, review and implementation of policies and procedures as required
- To understand and translate to practice the most up to date best practice guidance and clinical standards including NICE guidance and national minimum standards and use this when developing practice
- Attend all allocated governance meetings and play an active role in working towards quality improvement in these meetings

Patient Safety and Infection Prevention Role

- Support data collection and analysis of a programme of audits that relate to patient safety in the hospital as agreed within the Clinical Quality and Compliance Directorate Plan.
- Support the review of documentation that supports specific areas of safe patient care (e.g. seclusion documentation)
- Collate themes, trends and lessons learnt relating to infection prevention and through the health and safety committee make recommendations of changes to practice and systems / processes that will reduce or eliminate risk

Champion relational security and least restrictive practice

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Professional

- To maintain in confidence all records, correspondence and information pertaining to the patients and organisation according to the NMC guidelines for record keeping, the NMC Code of Professional Conduct and Cygnet Health Care policy and procedure.
- To promote constructive relationships with all colleagues, including consultants and others not permanently based at the hospital.
- To observe the statutory legal requirements as laid down in the 1983 Mental Health Act, the Code of Practice, the health and safety at Work Act 1974 and other relevant legislation.
- To ensure that all standards of professional practice as a minimum meet the expectations laid down in the respective professional Codes of Practice.
- To ensure that all requirements of revalidation are met in order to maintain current registration

Team Working

- To ensure that communication within the team is maintained to a high level so that the directorates objectives are met by all members
- To promote continuous quality improvements through the setting of standards, monitoring and evaluating practice through use of audit.
- To assist in the induction of new staff to the hospital and their duties. To familiarise new staff and existing staff with relevant policies and procedures.
- To maintain discipline amongst staff with regard to company and national guidelines and legislation. To take appropriate action to promote good staff discipline thorough effective staff support.
- To represent the hospital functions at relevant meetings, both internal and external, promoting a positive image for Cygnet Health Care.
- To liaise with relevant other individuals, officers and authorities as appropriate.
- To be involved in Recruitment and other HR related functions

Educational

- To remain up-to date with new theoretical and clinical practice.
- To provide both informal and formal teaching sessions for junior staff and students including the development of training packages.
- To be a 'self-starter' in all matters which pertain to personal and professional development.

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To supervise some staff in terms of personal development and continuing education.
 To report and agree needs with the Clinical Quality and Compliance Manager for implementation.

Duties as detailed may vary from time to time. The job description is not conclusive an	d
is subject to annual review.	

Signed	Date	
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