DEPUTY CHIEF NURSE, QUALITY GOVERNANCE

ROLE PROFILE

Draft and subject to refinement

October 2015
INTRODUCTION

Barts Health was established in 2012 following a merger of three former organisations and is the largest NHS Trust in England. It incorporates five hospitals in East London and the City (Whipps Cross, Newham, The Royal London, St Bartholomew’s and Mile End) together with community health services for the London Borough of Tower Hamlets. With a turnover of more than £1.3 billion and 16,000 staff, the Trust is committed to delivering high quality and effective patient care to a diverse population of 2.5 million people who rely on it for both general and highly specialist services.

Three of the hospital sites offer full 24 hour, 7 day a week emergency care. The Trust also delivers specialist and tertiary care, including Trauma, Cardiovascular, Cancer, Renal and Neurosciences. Earlier this year the Trust opened the new Barts Heart Centre at St Bartholomew’s Hospital, combining services from St Bartholomew’s, The London Chest and The Heart Hospitals. Over the course of a year the Trust conducts over 50,000 operations, delivers over 15,000 babies, treats 450,000 people in its Accident and Emergency (A&E) Departments and sees around 1.4 million outpatients. The Trust’s contribution to the local economy is vital to east London’s population – Barts Health sits at the heart of the local communities.

The Trust works closely with a wide range of partner organisations, including commissioners, GPs, local authorities and the medical school at Queen Mary University of London. Furthermore, the Trust is a key member of UCL Partners, one of Europe’s largest academic health science partnerships, allowing it to implement improvements in healthcare at scale and pace for patients.

The Trust’s ambition is for east London to have health services in which everyone in the community can take pride. These services reach beyond the Trust’s hospitals to provide care where it is needed most: at home, in local neighbourhoods or in special facilities across the area. Outstanding research, learning and development and a commitment to safety, quality and innovation will allow Barts Health to transform the health of the population and substantially reduce the significant inequalities in health which are prevalent in east London.

The Trust has experienced significant challenges in a number of areas which resulted in it being placed in special measures by the NHS Trust Development Authority (NHS TDA) in March 2015. These include:

- **Quality** - significant concerns were identified by the Care Quality Commission (CQC) in their inspections of Whipps Cross, Newham and The Royal London Hospitals in late 2014 and early 2015, resulting in ‘Inadequate’ ratings in each case.
- **Delivery** – the Trust reported a financial deficit of £79.6 million in 2014/15 and is forecasting a deficit of £134.9 million in the current financial year. Emergency care performance across two of the Trust’s three acute sites has been challenging and it has experienced significant issues with data quality impacting on its ability to publish reliable statistics on how quickly it is seeing patients on its waiting lists.
- **Sustainability** - there is a need to develop and agree a long-term plan for clinical and financial sustainability within the context of a challenged local health economy. The Trust is participating in a local programme, ‘Transforming Service Together’, which brings together providers, commissioners and other partners in the local health system to develop a strategic plan for the delivery of health services in east London.

The improvement journey has already begun with the agreement of a comprehensive improvement plan, *Safe and Compassionate*, focused around the following priorities:
- Safe and effective care
- Workforce
- Outpatients and medical records
- Emergency pathway and patient flow
- Compassionate care and patient experience
- End of life care
- Leadership and organisational development

There is a great deal to do to deliver the necessary improvements for our patients. The Trust Board believes strongly that the momentum already built can be maintained and accelerated further to improve staffing and morale, to raise standards, and embed clinical governance systems and processes across the Trust.

As part of the Trust’s improvement plan, leadership of the hospital sites has been strengthened recently with the appointment of dedicated Hospital Management Teams - including a Managing Director, Medical Director and Director of Nursing for each of the main sites – accountable for day-to-day delivery on the site. Alongside these changes, the Board has agreed a revised corporate directorate structure to support delivery of operational performance and strategic planning.
1. **ROLE DETAILS**

   **Role Title:** Deputy Chief Nurse, Quality Governance  
   **Grade:** VSM  
   **Location:** Based at The Royal London Hospital  
   **Accountable to:** Chief Nursing Officer

2. **ROLE PURPOSE**

   Reporting directly to the Chief Nursing Officer the post holder will be immediately required to support delivery across the Trust sites of improvement plans through provision of hands on practical advice and support to ensure that the corporate nursing Governance is discharged to required standards across all Trust sites.

   The post holder has a specific responsibility for ensuring governance systems and processes are embedded across the Trust to ensure effective, compassionate and safe patient care is delivered, improved and maintained. The post holder will develop a quality improvement strategy that provides a framework for the hospital sites to improve the quality, governance and safety for all patients and carers.

   The post holder will support the Chief Nursing Officer and site Director of Nursing to develop the annual quality account and the compliance with CQC registration and leads the patient safety agenda supporting the Site Directors of Nursing with National Health Service Litigation Authority (NHSLA), Safety Express, Care Quality Commission standards whilst leading on the development and maintenance of the Trust Risk register. The role provides expert advice and support to the Executive team, Site Leadership Teams, Non-Executive Directors and the CAG Directors to support the risk management and governance programmes.

3. **DIMENSIONS**

   The turnover of the Trust is £1.3 Billion and operates with an establishment of around 16,000.

   **Manages:** Head of Patient Safety and Head of Governance Standards & Risk Management  
   **Located:** Royal London Hospital

4. **KEY RESULT AREAS**

   a. **Leadership**

      • Demonstrate strong clinical leadership across all dimensions of Governance and patient safety ensuring the transference of knowledge to practice.
• Deputise for the Chief Nursing Officer where required.

• Work closely with the Corporate Nursing team to support individual staff and team development

• Support the Chief Nursing Officer in the on-going development and implementation of the Nursing, Midwifery and AHP strategy and participate in relevant senior groups external stakeholder events.

• To represent the Trust at regional/national level on quality and safety issues, developing partnerships, sharing best practice and integrating this into the nursing, midwifery and AHP knowledge within the Trust.

• Continue with personal and professional development.

b. Strategic Development

• Work in collaboration with the Deputy Chief Nurse (Patient Experience) & Deputy Director of Patient Experience to develop a strategy for achieving improved patient safety indicators and enhanced patient experience ratings and ensure all clinical services develop systems to support sustainable and measurable quality improvements.

• With the Chief Nursing Officer and Chief Medical Officer promote a culture that nurtures and promotes effective multi-professional team working to strengthen governance, improve national and locally agreed patient safety measures.

• Take the lead in supporting the Site Directors of Nursing and Director for Nursing and Midwifery to develop a framework for delivery against regulations as laid out by the Care Quality Commission.

• Ensure a framework is in place to enable the Trust Board to monitor Governance and Safety improvements and make decisions based on the assurances in place.

• Support the Chief Nursing Officer and Chief Medical Officer as Director of Infection and Prevention Control (DIPC), to provide assurance to patients, the Board, the Chief Executive and commissioners that the Trust’s infection control policy is being implemented effectively.

• Develop the strategy and supporting structure for the patient safety agenda to ensure an open culture of reporting and support within a learning environment.
• Develop an integrated Serious Incident reporting process across the organisation and ensure monitoring and reporting structures in place for NHS England and the TDA, and reporting through the Trust Quality & Safety structures through to Trust Board.

• Develop implementation plans and support for NHSLA and CNST compliance across the organisation for general and women’s health.

• Develop a governance framework and underpinning structure that responds to national policies/guidance, audit and alerts to support local reporting and monitoring.

• Develop the legal framework for the organisation in order to learn from litigation and patient safety reports.

c. **Operational**

• Manage the delegated revenue budgets within Corporate Nursing and Governance to ensure that expenditure and income is within divisional financial plans and budget.

• Actively contribute to the performance management and monitoring of standards across the corporate team taking remedial action where necessary to ensure that corporate objectives and targets are achieved and that all performance monitoring requirements are achieved.

• This is a key role in providing professional leadership and advice across the Trust

• Establishing and sustaining a system of key performance indicators/ measures for monitoring against standards for governance, patient safety and risk management

• Providing advice on implementation of remedial actions identified as a result of clinical incident and complaint investigations.

• Establishing and sustaining a system of key performance measures for monitoring against the standards within the CQUIN framework, agreed KPIs and the agreed cost improvements plans

• Work closely with the Clinical Improvement Facilitators and Clinical Improvement Groups and Governance Facilitators to ensure the quality/safety agenda is established across the CAGs.

• Provide governance reports to the Trust Board, Management Executive, hospital site leadership teams and CAGs

• Ensure Datix is maintained to provide reports on trends in reporting to inform reports and actions and to enable external reporting.
• The role will require the post holder to cover all sites across the organisation

d. Clinical

• Work with the Chief Nursing Officer to ensure quality, risk and safety standards set by the Professional Advisory Board are implemented and monitored. This will involve close liaison with the Directors of Nursing & Governance, Site Managing Director, Medical Director, Director of Nursing, Director of Operations and Clinical Academic Group Director.

• To lead in collaboration with the legal services team on the Mental Capacity Act (2005) and Deprivation of Liberty (DoLs) and provide expert advice and support to the CAGs.

• To provide overall direction and leadership to ensure the implementation of Governance principles within the CAGs and across the Trust.

• Develop and maintain a wide range of Trust policies relating to Clinical Governance.

• Ensure learning from incidents is shared throughout the Trust in order to improve patient safety and safeguard staff, patients and visitors.

• The post holder will be required to spend a minimum of half a day per week in clinical practice as part of the back to the floor programme

e. Governance

• The post holder will support the Chief Nursing Officer to provide assurance through the Governance structures, systems and processes across the organisation.

• The post holder will support the Chief Nurse to develop the annual quality account and the compliance with CQC registration.

• The post holder will lead on the ongoing development and maintenance of the Trust Risk register providing expert advice and support to the Executive team, Non-Executive Directors and the CAG Directors and Site Leadership teams to support the risk management and governance programmes.

e. Teaching and Research

In conjunction with the Deputy Chief Nurse (Patient Experience) and the Director of MELD, work in close liaison with all clinical disciplines to develop new ways of sharing development opportunities such as Clinical Skills Simulation, blended and e-learning and develop
opportunities for multi-disciplinary and multi-professional education, research, practice development and professional standards.

f. **Equality and Diversity**
   Actively ensure that the organisation is meeting its statutory responsibilities in respect of equality and diversity.

g. **Personal and Staff Development**
   All staff are expected to participate in individual performance management processes and reviews. Senior leaders are expected to encourage and develop a high performance culture individually, with their teams and across the organisation.

h. **On Call**
   To participate in the relevant Trust on call rota and provide practical leadership, advice and guidance.

5. **COMMUNICATIONS AND WORKING RELATIONSHIPS**
   - Use highly developed leadership and influencing skills with the ability to enthuse, motivate and involve individuals and teams within Hospital Site leadership and local teams and corporate teams
   - Use political judgement in understanding and working with complex policy, and diverse interest groups
   - Ensure that there are clear systems to enable the flow of communication both up and down corporate and Site structures
   - To use facilitation skills to advance practice and disseminate new knowledge and best practice related to the post holder’s applied area of practice.

6. **ADDITIONAL INFORMATION**

   6a. **Professional Standards**
   As an NHS Manager, you are expected to follow the Code of Conduct for NHS Managers (October 2002) [www.nhsemployers.org/~/media/Employers/Documents/Recruit/Code_of_conduct_for_NHS_managers_2002.pdf](http://www.nhsemployers.org/~/media/Employers/Documents/Recruit/Code_of_conduct_for_NHS_managers_2002.pdf). All staff employed in recognised professions are required to ensure they work to the professional standards and/or Codes of Practice set out for their professional group.

   6b. **Equal Opportunities and Dignity at Work**
   It is the aim of Barts Health NHS Trust to ensure that no job applicant or employee receives less favourable treatment on the grounds of race, colour, creed, nationality, ethnic or national origin, sex, marital status or on the grounds of disability or sexual preference, or is placed at a disadvantage.
by conditions or requirements which cannot be shown to be justifiable. Selection for training and development and promotion will be on the basis of an individual’s ability to meet the requirements of the job. To this end Barts Health NHS Trust has an Equal Opportunities Policy and it is for each employee to contribute to its success. All staff should treat other staff, patients and the public with dignity and respect.

6c. Appraisal

All staff will actively participate in an annual Appraisal process. All staff should have a personal/professional development plan and in conjunction with their manager, should actively determine and pursue agreed training and development needs and opportunities.

6d. Statutory and Mandatory Training

All staff need to ensure that their statutory and mandatory training is up to date so that they can work safely and efficiently to provide the very best care to our patients. It is essential that all staff are fully compliant with the Statutory and Mandatory training as outlined in the Trust’s Statutory and Mandatory Policy.

6e. Safeguarding

Barts Health NHS Trust is committed to safeguarding and protecting children and vulnerable adults. All health employees have responsibility for safeguarding and promoting the welfare of children and young people in accordance with "Working Together to Safeguard Children" HM Gov 2006. This applies to employees with both direct and indirect contact with children and families.

Employees who do not provide specific services for children and families or vulnerable adults require basic knowledge of their responsibilities to identify and refer concerns appropriately. All employees must undertake training in safeguarding children and vulnerable adults but will have different training needs to fulfil their responsibilities depending on their degree of contact with vulnerable groups and their level of responsibility.

6f. Confidentiality and Data Protection

Employees will have access to confidential information and will be required to ensure that the highest level of confidentiality is maintained at all times, adhering to all policies relating to confidentiality.

Employees are required to obtain, process and/or use person identifiable information in a fair and lawful way. The use of such information is governed by the Data Protection Act 1998 (DPA) and includes both manual and electronic records. Staff are expected to hold data only for the specific registered purpose and not to use or disclose it in any way incompatible with such purpose, and to disclose data only to authorised persons or organisations as instructed, in accordance with the Data Protection Act 1998.
6g. Access to Health Records

All staff who contribute to patients’ health records are expected to be familiar with, and adhere to Barts Health NHS Trust’s Records Management Policy. Staff should be aware that patients’ records throughout Barts Health NHS Trust will be the subject of regular audit. In addition, all health professionals are advised to compile records on the assumption that they are accessible to patients in line with the Data Protection Act 1998. All staff that have access to patients’ records have a responsibility to ensure that these are maintained and that confidentiality is protected in line with Barts Health NHS Trust Policy.

6h. Health and Safety

All staff are required to comply with the requirements of the Health and Safety at Work Act and other relevant health and safety legislation and Barts Health NHS Trust Policies and Procedures. All staff are required to make positive efforts to promote their own personal safety and that of others by taking reasonable care at work, by carrying out requirements of the law or following recognised codes of practice and co-operating with safety measures provided or advised by Barts Health NHS Trust to ensure safe working.

Managers are responsible for implementing and monitoring any identified risk management control measures within their designated area/s and scope of responsibility. In situations where significant risks have been identified and where local control measures are considered to be potentially inadequate, managers are responsible for bringing these risks to the attention of the appropriate Committee if resolution has not been satisfactorily achieved.

All staff must ensure that waste produced within Barts Health NHS Trust is disposed of in such ways that control risk to health, or safety of staff and the public alike in accordance with relevant legislation and procedures contained within the policy.

6i. Infection Control

Barts Health NHS Trust has made a public commitment to make healthcare associated infection a visible and unambiguous indicator of the quality and safety of patient care and work towards reducing it. All Directors and staff will demonstrate their ownership of, and their support, to this goal through management and corporate action.

6j. No Smoking Policy

There is a no smoking policy in operation in Barts Health NHS Trust. In accordance with this policy smoking is positively discouraged and is not permitted in any areas.

7. REVIEW OF RESPONSIBILITIES AND DUTIES

This role profile is not an exhaustive list of duties, but is intended to give a general indication of the range of work undertaken and will vary in detail in the light of changing demands and priorities within the organisation. Substantial changes in the range of work undertaken will be carried out in consultation with the role holder.
8. VALUES OF OUR ORGANISATION

All candidates and role holders are expected to help us live our values in order to deliver the high standards of care.

The Barts Health vision and values were developed with staff, patients and stakeholders, and define the way we are perceived as individuals and as an organisation. They set out how we expect staff to behave, what we believe in and what we aspire to.

Our vision

Our ambition is for east London to have health services in which we can all take pride. These services will reach beyond our hospitals and provide care where it is needed most – at home, in our communities, or in specialist facilities across the boroughs. Outstanding research, a commitment to learning and improvement, and a focus on partnership, will allow Barts Health to succeed. Success will see the health of the population transformed and inequalities in health reduced substantially. This commitment is what defines our organisation and our values.

Our values

Our core behaviors set out how all of us will work, regardless of the role we hold in the organisation. These behaviors, consistently carried out, will embed the Barts Health values in our everyday working lives, and support delivery of our vision to change lives.

Value: Caring and compassionate with patients, each other and our partners.

At Barts Health, we champion dignity, compassion and respect, putting the individual at the heart of all decisions, striving to get it right for every person, every time.

Our behaviors:

- Welcoming and courteous
- Dignity and respect
- Humanity and kindness
- Meet basic needs

Value: Actively listening, understanding and responding to patients, staff and our partners.

Engagement and involvement is essential in making improvements. We engage our staff and patients to achieve; better patient and staff experiences, fewer mistakes and better clinical outcomes
Our behaviors:

- Listen and involve
- Understand and respond
- Engage with others
- Open and honest

Value: Relentlessly improving and innovating for patient safety.

We support and challenge ourselves and others to do better. Being average isn’t good enough, we strive for excellence. We believe we can always do better.

Our behaviors:

- Get things right
- Try new ideas
- Improve through learning
- Strive for excellence

Value: Achieving ambitious results by working together.

We all need to understand the big health issues facing our population and use every opportunity to promote good health. Working as a cohesive team across Barts Health, we recognise the importance of partnership in achieving success, be that with staff, patients, communities, or any other partners to achieve life changing results.

Our behaviors:

- Personal responsibility
- Team working
- Promote good health
- Courage to speak up

Value: Valuing every member of staff and their contribution to the care of our patients.

Whether a staff member has a clinical or non-clinical role, is involved in direct patient care or is undertaking a supporting function (e.g. finance, information technology, estates, human resources) everyone at Barts Health is making an important contribution to patients’ experiences. Ensuring staff are appropriately trained, feel valued and empowered to make decisions in the best interest of patients is vital.

Our behaviors:

- Appreciate colleagues
- Develop others
- Build trust
- Fairness and equality
## PERSON SPECIFICATION

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<th>ROLE</th>
<th>Deputy Chief Nurse</th>
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<td>DEPARTMENT</td>
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### Essential = E  
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<td>Teaching PGCE Qualification</td>
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<td>Able to demonstrate leadership and experience in service/ quality improvement and cost efficiencies</td>
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