

# Head of Clinical Audit & Effectiveness

## Job Description & Person Specification

A summary of the role responsibilities and person specification



University Hospitals  
Bristol and Weston  
NHS Foundation Trust

### Why Our Trust?

#### Terms and conditions

**Post – Head of Clinical Audit & Effectiveness**

**Division – Trust Services**

**Department – Chief Nurse Quality Team**

**Band – 8b (subject to confirmation by grading panel)**

**Location – Trust Headquarters / travel to Weston General Hospital required**

**Hours of work – 37.5 hours per week**

**Contract length – Permanent**

**Annual leave – Up to 33 days dependant on NHS Service**

**Pension - The NHS Pension Scheme is a defined benefit scheme. Further details and outline of benefits can be found at: [www.nhsbsa.nhs.uk/pensions](http://www.nhsbsa.nhs.uk/pensions)**

#### Job Purpose

The Head of Clinical Audit & Effectiveness will lead and oversee clinical audit and effectiveness programmes and activity for University Hospitals Bristol and Weston, contributing significantly to Trust policy and strategy in these areas of practice and ensuring that operational processes reflect this guidance and best practice.

Providing strategic and operational leadership to the clinical audit and effectiveness team, the post holder will be the Trust's expert reference point on all operational matters relating to clinical audit and clinical effectiveness activities, advising staff at all levels within the organisation (from ward to board). In particular they will be responsible for overseeing and co-ordinating the Trust's annual clinical audit programme, ensuring that this reflects the Trust's strategic objectives and clinical priorities, and meets a wide range of requirements. The post holder will be a strong advocate for clinical audit as a quality improvement tool and its role in clinical governance and the wider quality agenda.

The post holder will also play a vital role for the Trust in the management of all matters of business relating to the Trust's relationship with the Care Quality Commission (CQC), in particular in relation to inspections, including readiness planning, coordinating responses to information requests in the lead up to inspections, organisation of on-site inspection logistics, and oversight and development of key organisational actions plans following inspection.

The post-holder is a designated deputy to the Associate Director of Quality & Compliance and will be required to undertake duties in this capacity up to and including Board-level support when required to do so.

#### About us

**Our mission** is to improve the health of the people we serve by delivering exceptional care, teaching and research every day.

#### What you'll love about working here

**UHBW has been rated by the CQC as 'Good'** - our staff are proud to deliver excellent care. As a forward-thinking multi-award winning Trust, our world-leading research and innovations are having a positive local and global impact. Our hospitals are spread across Bristol and Weston-super-Mare, join us and you can enjoy the very best of both worlds; city living within a stone's throw of the countryside or beside the seaside, both with easy access to all that the South West has to offer.

**A digital exemplar**- Being appointed as a Global Digital Exemplar means we can realise this vision by implementing digital technologies that will help us to transform the way we work and how we relate to our colleagues, patients and partner organizations.

**Sustainable healthcare** - We have joined the international movement to declare a climate emergency, recognising the impact climate change is having on the world. Climate change is labelled as the greatest threat to health in the 21st century, with a range of conditions related to heat, cold, extreme weather and air pollution predicted to rise. To lead the way in healthcare the Trust has set ambitious goals to become carbon neutral by 2030.

**Access to further opportunities with the Trust** - Apprenticeships are a great way to learn and earn on the job. UH Bristol and Weston provides a range of apprenticeships to support a huge number of career opportunities in clinical and non-clinical support services with apprenticeships starting at level 2 through to level 7. As an organisation we encourage further development of all employees to progress upward within their chosen field.

#### Diversity & Inclusion

A core principle of the Trust is to ensure that patients and staff are treated with dignity and respect.

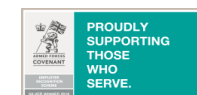
Promoting equality, diversity and human rights and challenging any form of inequality, discrimination, harassment or abuse are central to the Trust's Values.

'Committed to inclusion in everything we do' is the ambition set out in the Trust's Workforce Diversity & Inclusion Strategy.

supportive  
respectful  
innovative  
collaborative.  
We are UHBW.



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### Key Relationships

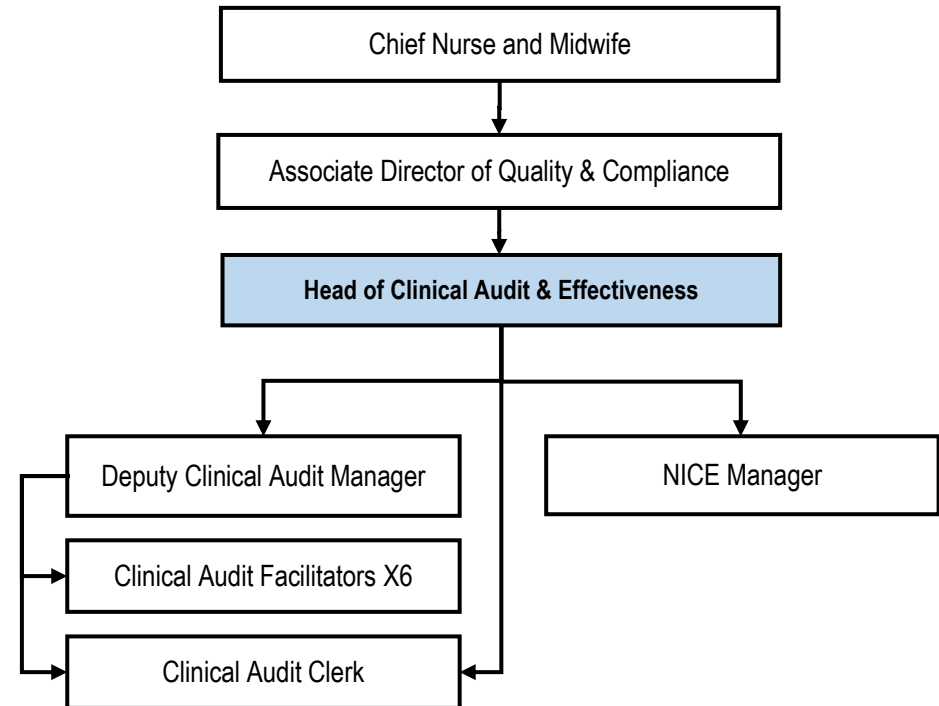
#### Internal

- Associate Director of Quality & Compliance
- Clinical Audit & Effectiveness Team
- Chief Nurse / Medical Director (plus wider Exec Team)
- Chair of Clinical Effectiveness Group (plus Group members)
- Chair of Clinical Audit Group (plus Group members)
- Medical Director Team
- Chief Nurse Team
- Divisional Management Teams
- Divisional Governance/Safety Leads
- Patient Experience and Regulatory Compliance Facilitator
- Commissioning & Planning Team
- Director of Pharmacy
- Quality Team
- Trust Business Intelligence and Performance Teams
- Medical Records Departments
- Healthcare professionals undertaking clinical audit projects

#### External

- Care Quality Commission inspection teams
- Healthcare Quality Improvement Partnership (as contractors of the National Clinical Audit & Patient Outcome Programme)
- Medical Royal Colleges (as suppliers of individual national audits)
- The National Confidential Enquiry into Patient Outcome and Death (NCEPOD)
- National Quality Improvement (incl. Clinical Audit) Network (N-QI-CAN)
- South West Audit Network (SWANS)
- Meantime IT (as developers of the current project management database software) and members of the Super User Group

### Organisational Structure



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### Main Duties and Responsibilities

#### Strategy and leadership

- Trust lead expert in the fields outlined within this job description, proving clinical governance analysis, guidance and support to executives, senior managers/clinicians and other staff across the organisation.
- Critical role leading the Trust's corporate clinical audit & effectiveness agenda, leading the development of policy and strategy on related activities.
- Provide leadership on clinical audit and effectiveness activities, identifying strategic aims for improvement, based on the national agenda, best practice and local priorities/areas of improvement.
- Deputise for the Associate Director of Quality & Compliance as and when required in all matters relating to the postholder's portfolio – this may involve presenting to and communicating with Board-level audiences. This may also require direct communication with the CQC inspection team on such issues as whistleblowing notifications or other urgent issues relation to the CQCs regulatory processes.
- Act as a specialist central source of advice and information to the Clinical Audit & Effectiveness Team and to all other staff in matters relating to clinical audit; including the appropriate organisation, design and methodology of clinical audit projects.
- Provide forward-thinking leadership and management to the Clinical Audit & Effectiveness Team.
- Develop the Clinical Audit & Effectiveness Team's annual work plan and oversee the delivery of this.
- Actively seek opportunities to shape and develop links between clinical audit and wider quality improvement activities.
- Lead on the development of the Trust's clinical audit project and guidance management system (AMaT), liaising with the external supplier (including attending Super user Group meetings) and internal staff to identify relevant areas for implementation.
- Plan and coordinate individual internal and external developments of the AMaT system; considering the impact to the organisation, ensuring that stakeholders are involved in the process and agreeing internal timescales for implementation.
- Produce reports on clinical audit, effectiveness and other activities to senior governance committees / Board.
- Raise the profile of the Trust's Clinical Audit & Effectiveness achievements, both internally and

externally, through events and activities such as displays/exhibitions, published articles in journals, presentations and posters at national conferences.

- Participate proactively as the Trust's representative in local, regional and national clinical audit and quality improvement forums, establishing, developing and nurturing positive and effective relationships, partnerships and collaborations with core local, regional and national stakeholders.
- Oversee the Trust's clinical audit training programme; working closely with the Clinical Audit & Effectiveness Team to develop appropriate training materials.
- Budget holder for the Trust's National Clinical Audit budget.
- Lead and oversee production of the annual Clinical Audit Report for the Board.
- Manage the Trust's clinical audit project management system (and other information systems used by the team), providing appropriate reports on activity as required.
- Design and manage electronic databases (MS Access & Excel) as necessary relating to projects specific overseen by the post holder.
- Oversee the Team's responses to Freedom of Information requests.

#### Clinical Audit

- Ensure an offer of clinical audit expertise to staff at all levels of the organisation, advising on project design and methodology.
- Lead the process for agreeing scheduled times throughout the year where clinical activity in theatres is ceased across the Trust enabling Divisions/specialties to take the opportunity to share learning through audit, mortality & morbidity review and wider quality/governance activity.
- Oversee and co-ordinate the Trust's annual clinical audit programme, ensuring that this reflects the Trust's strategic objectives and clinical priorities, and meets a wide range of requirements, including national audits; audits of NICE guidance; audits of recommendations published by Clinical Outcome Review Programmes (previously National Confidential Enquiries); plus projects which respond to locally identified concerns from risk/incidents as necessary.
- Coordinate the production of the Trust Annual Clinical Audit Forward Plan; ensuring that organisational priorities such as national audits and locally identified priorities are included.
- Proactively identify, support and co-ordinate an annual programme of Trust-wide clinical audit projects (i.e. specific projects which will be managed centrally, in addition to Divisional programmes). This can involve organising and planning of large-scale data collection exercises across the organisation, including arranging and coordinating input from medical students; analysing/interpreting data collected as a result.

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- Oversee and monitor Trust participation in national clinical audits - in particular those projects outlined by NHS England as part of the National Clinical Audit & Patient Outcome Programme and Quality Accounts - bringing any concerns to the attention of the Clinical Audit Group.
- Review and analyse the outputs (results/outcomes and actions) from local and national clinical audit activity across all services; identifying themes or issues for learning, further linkage into any existing work or escalation. Where national benchmarked results for national audit are available, to be able to interpret the significance and raise any assurance issues as necessary.

### Clinical Effectiveness

- Oversee the process for ensuring that guidance from the National Institute of Health and Care Excellence (NICE) is disseminated throughout the organisation and that staff understand the significance, impact and application to services where applicable.
- Ensure that assessments on the Trust's position against recommendations outlined with NICE guidance are received by the Clinical Effectiveness Group. As part of this process advise and guide senior clinical and management staff through the process of completing self-assessments against published recommendations; ensuring key areas of non-compliance are highlighted and reported to Clinical Effectiveness Group and significant issues/variation escalated as necessary.
- With regards specifically to NICE Technology Appraisals, ensure that processes are in place to meet the requirements outlined by the BNSSG Commissioning College in terms of information required for implementation.
- Implement, develop and coordinate processes for ensuring that new Interventional Procedures (as defined by Trust Policy) are reviewed by the Clinical Effectiveness Group to ensure they are safe/effective before introduction and that outcomes are monitored and reported to the Group.
- Advise and guide senior clinical and management staff through the new interventional procedure application process as necessary, with specific focus on the evidence base supporting the application and any further national guidance/recommendations in terms of patient information, consent and outcomes.
- Conduct literature reviews to supplement applications, either personally or through the Trust Library Services, critically appraising and interpreting the evidence presented to inform recommendation to CEG. Where the introduction of such an application is considered an emergency, work with applicants to rapidly produce supporting information to present to the Medical Director for consideration/approval.

- In cases where published national guidance conflicts evidence provided and the applicant/s wish to proceed (due to new published evidence or differing clinical consensus/ opinion), to brief the Medical Director and seek an appropriate route to consider the application.
- Ensure appropriate participation in relevant studies within the Clinical Outcome Review Programmes (Medical & Surgical and Child Health). This includes the identification of patient samples from Trust data systems and helping to ensure that organisational and clinical questionnaires are completed and returned.
- In relation to the Medical & Surgical and Child Health Programme, this also includes monitoring the progress of current studies and coordinating the process of reviewing and responding to recommendations as a result of the studies.
- Advise and guide senior clinical and management staff through the process of completing self-assessments against published recommendations; ensuring key areas of non-compliance are highlighted and reported to Clinical Effectiveness Group and significant issues escalated as necessary.
- Develop and co-ordinate a Trust-level process for the review of proposed clinical guidelines and care pathways by Clinical Effectiveness Group before they are introduced into clinical practice. As part of this work, liaise with authors to advise on process/procedure and internal standards for document creation and management.
- Ensure that the Trust participates in the national Patient Reported Outcome Measures (PROMs) programme, monitoring participation and reporting outcomes as necessary. Also to lead, explore and develop options for the delivery of local PROMs where potential situations arise.

### Care Quality Commission inspections/external reviews/quality intelligence

- Act as an expert reference point with regard to the CQC regulation/framework expectations and the Trust's internal approach to inspection/monitoring, advising executives, senior managers/clinicians and other staff across the organisation.
- Lead the process of responding to data/information requests associated with CQC inspections, interpreting these complex requirements, working closely with executive and divisional leads to plan and coordinate the Trust's response and liaising directly with the CQC inspection team (pre and post inspection) as necessary.

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- Manage the process of monitoring the progress of actions developed following CQC inspections, ensuring Divisional management teams and corporate leads provide the necessary information according to timescales for reporting. This process includes reviewing evidence submitted to support closure of any actions and clarifying any further information required.
- Plan and lead other programmes of activity in relation to ongoing internal CQC inspection/monitoring readiness across all core services, such as internal self-assessments against CQC quality statements and audit/monitoring of key information. As part of this work, review and interpret information from multiple sources, such as inspection reports from other Trusts and a range of other internal/external intelligence, to inform and guide staff and develop/adapt requirements as necessary.
- Act as a 'front face' of the organisation during CQC inspections, providing a vital link between the Trust and the inspection team. This includes liaising with the CQC inspection and Divisional management teams to plan and organise necessary interviews and focus groups or other logistics with a wide variety of staff, including Executive Directors and senior clinicians/managers), negotiating availability as necessary.
- Analyse and provide a regular summary of the CQC's 'Insight' publication of indicators across all services (or similar complex dataset published by CQC), interpreting this information to highlight key issues for executive, senior managers clinicians and nursing staff to consider.
- As a member of the Trust Quality Intelligence Group, to review outlier mortality outlier alerts (as part of routine review of information provided by HES/CHKS), interpreting and agreeing recommendations for further action/escalation to Clinical Quality Group.

### Governance

- Identify, write and manage corporate risks related to clinical audit or effectiveness activities as necessary.
- Plan and organise the Trust's monthly Clinical Audit Group and Clinical Effectiveness Group meetings, including agenda setting (with the Chair), managing papers, maintaining the Terms of Reference, and reviewing draft minutes etc.
- Write and develop Trust Policies in respect of Clinical Audit, Implementation of NICE guidance, Implementation of New Interventional Procedures and participation in Confidential Enquiries.
- Respond to recommendations from identified through Internal Audits related to service/activity and develop appropriate management responses/actions.

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**Personal Profile** – requirements as essential unless otherwise indicated (D = Desirable)

### Knowledge and Experience

- Knowledge and experience of complex data and information analysis/interpretation, collation and summation and ability to apply this in the appropriate manner, including supporting the direction and understanding of others, adapting to the capability and understanding of the audience
- Experience of complex systems and databases for the storage, collection, storage and reporting on complex datasets for a wide variety of different sources
- Substantial experience of leading, facilitating and co-ordinating programmes of clinical audit/effectiveness activity at Trust level
- Substantial relevant senior management experience in NHS acute sector, i.e. within quality domain, and preferably within a clinical audit/effectiveness setting
- Understanding of CQC regulatory requirements and inspection framework
- Experience of developing tools for supporting quality assurance and improvement activities in relation to CQC requirements and other standards
- Experience of designing and delivering training packages, preferably within a clinical audit/effectiveness setting
- Experience of writing reports for audiences up to and including Board level
- Knowledge of relevant NHS legislation and regulation covering all areas of responsibility (D)

### Aptitudes

- An innovative, respectful and supportive leader who encourages and develops their staff, whilst valuing their expertise and judgement
- Leads by example
- A team-player who will adopt a supportive, can-do approach with colleagues at all levels of the organisation
- Confident, enthusiastic, persistent, loyal trustworthy.
- Aptitude for teaching and empowering others
- Is innovative and has the ability to inspire change in large and complex organisations
- Has the confidence to constructively challenge and address performance issues
- Takes an analytical approach to solving complex problems
- Embraces change and identifies improvement opportunities

### Skills and Abilities

- Self-motivated and able to work under own initiative with limited supervision.
- Complex decision-making skills, and ability to make and articulate informed decisions
- Able to develop and sustain effective working relationships quickly with many individuals, groups and organisations.
- Manages concurrent, highly complex pieces of work.
- Excellent interpersonal and communication skills, ability to use empathy, tact and diplomacy when dealing with highly sensitive issues.
- Excellent report writing skills with the ability to present complex data that is well structured and clear
- Precision, attention to detail and a focus on excellence
- Ability to motivate other members of a team
- Ability to prioritise effectively and make good decisions whilst working under pressure
- Ability to deal with a range of professionals from 'Ward to Board'
- Project management skills
- Advanced knowledge of, and expertise in using, MS Office software - Excel, Access, Word, PowerPoint
- Resilience
- Able to concentrate at a computer for long periods of time

### Qualifications and Training

- Educated to masters degree level, or equivalent experience
- Relevant post-graduate qualification, e.g. in clinical audit, clinical effectiveness, or management/leadership
- Project management qualification, or relevant experience of managing large scale complex projects
- Evidence of ongoing professional development
- Training qualification (D)

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### Transforming Care

Delivering sustainable healthcare services to our patients, which are effective, efficient and driven by excellence, is at the heart of our organisation. Transforming Care is the Trust's overarching programme of transformational change. It enables staff to use a structured approach to continuously improve and innovates their services, strengthen our capability, and deliver our Trust's mission to improve the health of the people we serve by delivering exceptional care, teaching and research, every day.

Our Quality Improvement Academy is open to all staff and leaders across the Trust, and provides training to lead or take part in improvement and transformation activities in their departments and across the Trust. We will support staff to develop the skills and tools to improve services to deliver the best care to our patients and public.

### Information Governance

It is the responsibility of all staff to respect the confidentiality of patients and staff, as specified in the Caldicott Principles, Data Protection Act 2018 and the Human Rights Act. It is the duty of every employee to:

- Only access person identifiable information as required in the execution of their duties.
- Disclose information appropriately, in line with the Data Protection Act 2018.
- To ensure good quality data by recording, promptly and accurately, clinical and non-clinical information within agreed timescales to PAS, the health record or the appropriate clinical or non-clinical information system
- Always trace patient notes on the Patient Administration System

Maintain the confidentiality of their passwords / usernames and if in possession of a 'Smartcard' abiding by the terms and conditions of its use.

### Workplace health and wellbeing

The Trust Workplace Health and Wellbeing Framework applies to all employees, students and volunteers who are encouraged to take responsibility for their individual health and wellbeing and to promote the wellbeing of colleagues. Line managers must recognise the importance of health and wellbeing and take it into account when planning tasks and designing jobs.

### Safeguarding Children and Vulnerable Adults

The Trust is committed to safeguarding and promoting the welfare of all children, young people and vulnerable adults, and as such expects all staff and volunteers to share this commitment.

### Quality and Clinical Governance

Quality in the NHS has three core dimensions: Patient Safety, Patient Experience and Clinical Effectiveness. Clinical Governance is about the systems, processes and behaviours to ensure that high quality services are provided to patients. Every member of staff has a role to play in striving for excellence: it is important that everyone is aware of and follows policies and procedures that govern their work; and if something goes wrong, everyone has an obligation to report it so lessons can be learned from mistakes, incidents and complaints. If any member of staff has concerns on any clinical governance matters, they should raise them with their line manager, professional adviser, or a more senior member of management. Reference should be made to the Trust's guidance on Raising Concerns about provision of patient care.

### Health and Safety

Under the provisions contained in the Health and Safety at Work Act 1974, it is the duty of every employee to:

- Take reasonable care of themselves and for others at work
- To co-operate with the Trust as far as is necessary to enable them to carry out their legal duty
- Not to intentionally or recklessly interfere with anything provided including personal protective equipment for Health and Safety or welfare at work.

Everyone has a responsibility for contributing to the reduction of infections.

Senior Management is responsible for the implementation throughout the Trust of suitable arrangements to ensure the health, safety and welfare of all employees at work and the health and safety of other persons who may be affected by their activities. Where health and safety matters cannot be resolved at Senior Management level the appropriate Executive Director must be notified.

Line Managers are responsible for the health and safety management of all activities, areas and staff under their control. This includes responsibility for ensuring risk assessments are completed and implementation of suitable and sufficient control measures put in place. Health and safety issues are dealt with at the lowest level of management practicable. Where health and safety matters cannot be resolved at a particular management level the appropriate Senior Manager must be notified.