Job description form

HSS REGISTERED

Manager Education, Safety, Quality & Risk

Health Salaried Officers Agreement: HSO Level G10

Position Number: 115278

Education, Safety, Quality & Risk / Nursing and Midwifery Rockingham Peel Group / South Metropolitan Health Service

Reporting Relationships

Executive Director
Executive Class
Position Number: 111922

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Director Nursing and Midwifery SRN 10 Position Number: 007001

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This Position

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Directly reporting to this position:		
Title	Classification	FTE
Clinical Governance Officer	HSO; G 8	1.00 FTE
Clinical Nurse Specialist	SRN 3	0.84 FTE
Nurse Educator – various	SRN 3	6.00 FTE
Manual Handling Coordinator	HSO; G 6	1.00 FTE
Training Officer	HSO; G 6	1.00 FTE
Risk Management Coordinator	HSO; G 6	1.00 FTE
Coordinator – Performance Review	HSO; G 5	1.00 FTE
Consumer Liaison/FOI Officer	HSO; G 5	2.00 FTE
Executive Secretary	HSO: G 4	1.00 FTE
Administrative Assistant	HSO; G 4	1.00 FTE

Also reporting to this supervisor:

- Coordinator Corporate Nursing; SRN 7 x 1 FTE
- SRN MH: SRN 7 x 1 FTE
- CNM Patient Flow; SRN 3 x 1 FTE
- CNM Waitlist; SRN 3 x 1 FTE
- CSR Project Manager; HSO G 9 x 1 FTE
- Duty Nurse Manager; SRN 3 x 4.5 FTE
- Emergency Preparedness Coordinator; HSO G 7 x 1 FTE
- Administration Officer;
 HSO G 4 x 1 FTE

Key Responsibilities

Lead and manage activities to ensure the development, implementation and maintenance of effective governance and co-ordination of safety, quality and risk activities and performance evaluation across Rockingham Peel Group (RkPG). Lead and manage the RkPG Education, Safety, Quality and Risk team. Support and develop safe, evidence-based clinical improvement throughout the hospital. Assist with the strategic planning process for RkPG.



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Brief Summary of Duties (in order of importance)

1. Leadership and Management

- 1.1 Provides leadership and strategic advice in safety, quality, risk and organisational learning across Rockingham Peel Group (RkPG).
- 1.2 Leads and manages the Education, Safety, Quality and Risk staff, including management and monitoring of staff performance.
- 1.3 Coordinates the development, monitoring and evaluation of policy and organisational learning within the group.
- 1.4 Initiates and implements strategies to develop and foster an organisational safety culture, within effective governance and learning environment.
- 1.5 Supports change, improvement and innovation across RkPG.

2. Governance

- 2.1 Develops and maintains structures and processes that enable the effective assessment, monitoring and review of clinical/corporate services and organisational learning.
- 2.2 Co-ordinates the investigation and reporting of: adverse incidents; consumer/carer feedback; legal cases; freedom of information requests; audit requirements and coronial investigations.
- 2.3 Works collaboratively with the Office of Quality Improvement and Change Management and Patient Safety, Surveillance Unit, Department of Health and other authorities/bodies in order to assist the group to achieve its strategic objectives for safety, quality, risk and organisational learning.
- 2.4 Ensures the safety, quality, audit, risk and learning systems meet National Safety and Quality Health Service Standards, EQUIP National Standards, National Standards for Mental Health and relevant college requirements.
- 2.5 Ensures the organisation meets its obligations to comply with all relevant legislation, including changes as required.
- 2.6 Ensures all safety and quality activities are aligned with the relevant South Metropolitan Health Service (SMHS) clinical and corporate governance framework and the WA Health Safety and Quality Strategic Plan.
- 2.7 Oversees and coordinates accreditation activities for RkPG.

3. Performance Evaluation

- 3.1 Coordinates and reviews organisation—wide frameworks to monitor and evaluate clinical performance.
- 3.2 Manages, plans and directs audit/reviews of RkPG activities/systems to enhance the effectiveness of service delivery.
- 3.3 Ensure the generation, dissemination and discussion of reports that assist in performance evaluation of the group and SMHS programs and services.
- 3.4 Co-ordinate the reporting of key performance indicators for safety, quality and risk programs; and organisational learning programs.

4. SMHS Governance, Safety and Quality Requirements

- 4.1 Ensures, as far as practicable, the provision of a safe working environment in consultation with staff under their supervision.
- 4.2 Participates in an annual performance development review and undertakes performance development review of staff under their supervision.
- 4.3 Supports the delivery of safe patient care and the consumers' experience including identifying, facilitating and participating in continuous safety and quality improvement activities, and ensuring services and practices align with the requirements of the National Safety and Quality Health Service Standards and other recognised health standards.

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- 4.4 Completes mandatory training (including safety and quality training) as relevant to role
- 4.5 Performs duties in accordance with Government, WA Health, South Metropolitan Health Service and Departmental / Program specific policies and procedures.
- 4.6 Abides by the WA Health Code of Conduct, Occupational Safety and Health legislation, the Disability Services Act and the Equal Opportunity Act
- 5. Undertakes other duties as directed.

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Work Related Requirements

Essential Selection Criteria

- 1. Extensive experience in Safety, Quality, Risk and Clinical/Corporate Governance.
- 2. Demonstrated experience in the development of organisational learning.
- 3. Considerable leadership and management experience in a large healthcare facility.
- 4. Demonstrated experience in undertaking organisational change management.
- 5. Excellent communication, negotiation and interpersonal skills.
- 6. Demonstrated high level conceptual, analytical and problem solving skills.
- 7. Demonstrated experience in policy development.
- 8. Current knowledge of legislative obligations for Equal Opportunity, Disability Services and Occupational Safety and Health, and how these impact on employment and service delivery.

Desirable Selection Criteria

- 1. Tertiary qualifications in a health or education related discipline.
- 2. Knowledge of acute health service issues and trends.

Appointment Prerequisites

Appointment is subject to:

- Provision of the minimum identity proofing requirements.
- Successful Criminal Record Screening Clearance.
- Successful Pre-Employment Integrity Check.
- Successful Pre-Employment Health Assessment.

Certification

responsibilities and other requir	ements of the	positioi	٦.	
Manager / Supervisor Name	Signature	or	HE Number	Date
Dept. / Division Head Name	Signature	or	HE Number	Date
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As Occupant of the position I hat other requirements as detailed in Occupant Name			nt of duties, respo	onsibilities and Date
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other requirements as detailed in Occupant Name	Signature	or		