



Position Description

Position title:	Safety, Quality & Risk Manager	Date:	October 2023
Reports to:	General Manager	Department:	Safety, Quality & Risk
Number of reports:	Direct:~4 Total (include indirect):~4	Location:	TBC
Delegated financial authority:	TBC	Budget ownership:	Yes/No
Level of influence:	Leading self Leading others Leading leaders Leading the Organisation		

Our Organisation

At Southern Cross Healthcare, our vision is to help people live their best lives by reimagining healthcare.

Across our nationwide network, we combine the skills of more than 4,000 people including nurses and anaesthetic technicians, working with specialists, surgeons, anaesthetists, and allied health practitioners.

As New Zealand's largest private provider of healthcare, our strong "for purpose ethos" and through being recognised as one of New Zealand's leading and most trusted brands, we are poised to amplify the delivery of healthcare services like no other.

Vision	Purpose
Our vision is for what we aspire.	Our purpose is why we exist.
To help people live their best lives by reimagining healthcare.	To advance the provision of quality healthcare in Aotearoa New Zealand.

Values and Behaviours

Teamwork: We will work together because we know that a strong team will always outperform strong individuals.

Responsibility: We will take ownership and pride in our work. We will act with integrity and be accountable for our behaviour.

Respect: We will act fairly in a culture of mutual trust and respect.

Aspiration: We will aspire to be the best we can be. We will recognise and celebrate success.

Role Purpose

Leads the hospital resource team responsible for Health and Safety, Quality and Risk, Infection Prevention and Education.

Develops, implements, and maintains hospital safety and quality systems and plans that ensure effective clinical governance and alignment with the SCH network, the hospital business plan, industry best practice, and regulatory requirements.

Collaborates closely with the General Manager and hospital leadership team to ensure the integration of quality systems, plans, and compliance practices into the SCH operating model and culture.

Drives improvement and innovation initiatives to ensure a high-quality patient experience and a safe thriving workplace.

Key Relationships

Internal

- General Manager
- Hospital leadership / resource team
- Clinical governance committees (SQR, IPC, H&S, HCGC, Medicine Management, PDRP)
- Quality & Risk Lead
- H&S Lead
- Education Lead
- CNS IPC
- All hospital staff.
- National support office resource teams

External

- External Auditors
- Credentialed medical practitioners.
- Vendors, external suppliers
- Professional networks
- Regulators

Key Accountabilities

Team Leadership and Management

- Lead day-to-day operational activities of the Safety, Quality & Risk Team, focused on education, quality improvement, compliance, safety, experience, and outcomes.
- Leading and championing a culture where quality and safety are top priorities that are integrated into daily operations at all levels.
- Provide direction, guidance, coaching, and support to direct reports to achieve desired business outcomes.
- Engage effective communication, consultation, and teamwork both within the team and across functions.
- Manage appraisals and personal development plans for team members, ensuring alignment with organisational needs.
- Achieve operational, financial, and staffing goals and targets for the Quality and Patient Safety team.
- Cultivate a robust operational team culture within and across teams, emphasising the highest quality standards.
- Encourage innovation, information sharing, and idea exchange within and among teams.
- Assist both the team and senior leaders in identifying, prioritising, and promptly addressing quality and safety concerns.
- Maintain a safe and healthy workplace environment and a culture that supports this.

Governance, Leadership, and Culture

- Develops, implements, and monitors annual quality plans collaboratively with direct reports and senior leaders, aligning them with the hospital's business plan and national strategic goals.
- Oversees the timely implementation of the hospital clinical governance committee requirements.
- Chairs Safety, Quality, and Risk Committee (SQRM) meetings.
- Coordinator for Hospital Clinical Governance Committees (HCGC).
- Reports on activity and key metrics to governance groups that track progress and inform improvements.
- Manages the sharing of information resulting from review, events, feedback, activity, and governance decisions.
- Communicates event review, feedback, improvement activities and learnings with medical practitioners.
- Oversees proper execution of actions and follow-ups from meetings.
- Ensures that committee minutes and significant event reviews are reported to national governance committees.
- Reports significant events to the national office resource team.
- Champions a safe and just culture
- Oversees the implementation of staff professional development and education programmes, ensuring annual education plans are completed.
- Collaborates with hospital leadership team, the National Support Office resource team and the SCH quality network to ensure the delivery of effective safety, quality, and risk management systems.

Safety, Quality and Risk

- Acts upon quality and safety concerns, leveraging the information for continuous learning and improvement.
- Leads event review processes for severe, major, always report and review (SMARR) events, ensuring comprehensive system reviews are completed with defined and measurable recommendations and actions.
- Coaches, supports, and champions systems-based thinking and human factors approach to review and improvements.

- Ensures participation and collaboration of consumers and whānau who have experienced harm, ensuring their needs are addressed.
- Establishes and maintains effective communication systems to share quality information throughout the hospital.
- Supports the General Manager (GM) and managers in handling consumer feedback through SafeHub and Cemplicity to ensure compliance with the Health and Disability Sector Standards (HDSS) and Consumer Code of Rights.
- Implements effective metrics and reporting systems to analyse consumer outcomes and experiences within the broader Quality plan.
- Ensures event and consumer experience data is accessible to GMs and operational leaders, integrating it into their improvement and innovation programs.
- Establishes and maintains a system for collecting, analysing, and reporting hospital quality metrics.
- Reviews processes for delivering feedback to the workforce, patients, consumers, and the community regarding the hospital's safety and quality performance.
- Oversees external certification and accreditation audits, managing preparation and coordination through the Quality Team.
- Collaborates with relevant GMs and Senior Leaders to establish a tracking, reporting, and monitoring system for all corrective actions.
- Ensures compliance with Information Privacy principles through direct management of the Privacy Officer, facilitating communication channels with the Privacy Commissioner and NSO, and engaging legal advice in the event of a privacy breach or complaint.
- Coordinates local and network quality and safety improvements across professional and organisational lines.
- Develop and implement risk mitigation strategies.
- Conduct local risk assessments and propose risk management solutions.
- Monitor and evaluate risk exposure and control measures.
- Facilitate risk assessments and communicate findings to senior management.
- Offer guidance and training on risk management to local teams as needed.
- Maintains and ensures external reporting requirements such as NZPSHA clinical indicators are delivered.

Safety, Quality and Risk Systems

- Ensures the competent application of safety, quality, and risk system components, reviewing, acting on, and monitoring system compliance. Monitors, reports, and disseminates data trends and key metrics and guides data driven improvements. Trains and coaches' staff in the use of tools, safety culture, just culture and review methodology in the following system components:
 - SafeHub – (adverse event management, patient feedback, and risk management)
 - Cemplicity – (consumer experience)
 - Meg – (internal auditing activity)
 - Content Management System – (document control)
 - Tableau – (performance metrics)
 - LMS – (learning management system)

Clinical Effectiveness

- Ensures the hospital orientation policies and programs provide appropriate and effective orientation in safety, quality and clinical governance.
- Oversees the systematic review and updating of local policies, procedures, and guidelines to align with legislative changes and national/local best practices.
- Develops and leads internal and external auditing program.
- Support best, and innovative, practice changes.
- Leads capability-building efforts to enhance quality and safety.
- Builds capability of continuous improvement methodologies in teams

- Ensures education is aligned with data driven trends.
- Communication to the workforce about their safety and quality roles and responsibilities
- Support educator to evaluate the extent to which documented clinical guidelines or pathways have been formally adopted by the clinical workforce, and whether opportunities exist to adopt clinical guidelines or pathways as a quality improvement activity.
- Support processes for ensuring compliance with, and variations of practice from, evidence-based clinical guidelines or pathways are monitored, especially for high-volume or high-risk conditions.

Safe Environment

- Oversees, supports and reports environmental audits to see whether environment is safe and promotes best practice.
- Uses evidence-based design principles to promote safe practice.
- Oversees development, maintenance and testing of hospital health emergency response plans.
- Provides oversight of hospital contractor management processes
- Oversees the implementation of hospital IPC, antimicrobial stewardship and health and safety programmes.

Promoting engagement and Influencing

- Acts as hospital resource person for safety, quality, and risk management.
- Drives engagement in hospital safety culture and culture of continuous quality improvement.
- Guides, coaches, and supports staff in safety, quality, risk, and improvement activities.
- Builds capability in safety, quality, and risk activities.
- Builds functional relationships with key stakeholders.

Health, Safety and Wellbeing

- All employees are responsible for complying with health and safety policies and procedures.
- You are responsible for your own health and safety while at work and ensuring that your actions or inactions do not put others at risk.
- Identify, report and self-manage hazards where appropriate.
- Ensure that you complete early and accurate reporting of incidents at work.
- Participate and co-operate for shared health and safety responsibilities
- Actively participate where improvements to health and safety at SCHL can be made

Commitment to the principles of Te Tiriti o Waitangi

- Demonstrate awareness and understanding of Te Tiriti o Waitangi obligations through manaakitanga (respect) and kawa whakaruruhau (cultural safety) as evidenced in interpersonal relationships.

Commitment to Diversity, Equity, and Inclusion (DEI)

- Honour diversity by acknowledging and respecting others' spiritual beliefs, cultural practices and lifestyle choices as evidenced in interpersonal relationships.
- Seek opportunities to include diversity, equity, and inclusion practices in everyday work.

Commitment to Environment, Social and Governance (ESG)

- Engage in sustainable practices whenever possible. Try to reduce the environmental impact of your work and take an active role to initiate change to meet Southern Cross' ESG (Environmental, Social and Governance) commitments.
- Actively engage to improve your knowledge regarding sustainable practices whenever possible.



Role Requirements	
<p>Experience and skills required:</p> <ul style="list-style-type: none">• Five years' recent post-graduate in surgical hospital environment• Demonstrated ability in risk and quality management and improvement methodologies.• Demonstrated ability to lead successful teams.• Ability to analyse data and prepare reports.• Proficiency computer systems to an intermediate level• High level of literacy – written and oral• Excellent relationship management skills <p>Experience and skills desirable:</p> <ul style="list-style-type: none">• Knowledge of private surgical sector• Management experience in health• Previous experience in operational management, leadership, coordination, support or administration within a hospital environment (preferably surgical)• Specialty expertise (for example: emergency management, risk management, project management, improvement methodology, change management.)	<p>Education and qualifications required:</p> <ul style="list-style-type: none">• Healthcare qualification (e.g., Bachelor of Nursing, or other)• PDRP Expert level (or working towards)• Certificate in healthcare auditing <p>Education and qualifications desirable:</p> <ul style="list-style-type: none">• Post Graduate qualification in nursing, risk, or quality management and/or project management.• Training / certification in event review and/or risk management methodologies (ICAM, Bowtie, London Protocol etc)

Leadership Attributes	
<p>Human Centred Leadership</p> <ul style="list-style-type: none">• Empathy• Adaptability• Connection <p>Performance Coach</p> <ul style="list-style-type: none">• Accountability• Engagement• Collaboration	<p>Change Enabler</p> <ul style="list-style-type: none">• Execution• Energy• Contribution