

Job Description

| | |
|-------------------------------------|---|
| Job Title: | Quality, Risk and Point of Care Manager |
| Band: | 8a |
| Division: | Manx Care - Diagnostics Pathology |
| Job Evaluation Reference No: | 1129/JE/21 |
| Responsible to: | Pathology Manager |
| Responsible for: | Providing Specialist Education and Training |

Overview

The Pathology Directorate, based at Noble’s Hospital, aims to provide a fast, accessible, quality assured and cost effective service focused on the clinical needs of the patient.

The aim of the service is to provide, and maintain, a 24 hour, 365 days per annum facility. The established Pathology provision is subject to ever increasing demand with the challenges and changes that are continuously introduced, such as newer molecular techniques, and being required from our users.

Pathology, located centrally in Noble’s Hospital, offers an island-wide comprehensive diagnostic laboratory service to the Noble’s Hospital and Ramsey Cottage Hospital, Primary Care, Community and the Department of Public Health on the Isle of Man. The department consists of the following diagnostic laboratories: Blood Transfusion, Clinical Chemistry, Haematology, Histopathology/Cytology, Immunoserology and Microbiology as well as managing Mortuary and Blood Donor services for the Island.

The role of Quality, Risk and Point of Care Manager will be to be committed to ensuring the Pathology service provides an excellent service that understands the pathology needs of the island’s population.

This role is based at Pathology Noble’s Hospital but may require visits to other health care establishment on the Island

CARE

In Manx Care we pride ourselves on being committed, appreciative, respectful and excellent. CARE represents what we are about, what we stand for and what we value. All our recruitment, performance management and development is based on our CARE ethos.

Job Purpose

The post holder will act as Quality, Risk and POCT Manager and will be a key member of the Pathology Management Team.

As Quality Manager (QM)

- The post holder will be responsible for formulating quality policy and the management, including the design, establishment, implementation, development, and maintenance, of the Pathology Quality Management System (QMS). The QM will manage the QMS with the objectives of developing and maintaining compliance with National and International Accreditation Agencies/Bodies and National and International Regulatory and Standards Agencies/Bodies to ensure continuous quality improvement across the entirety of the Departmental service, and the day-to-day provision of a quality service that meets the needs and requirements of service users. It is important that the post holder will be responsible for driving the department forward with the ultimate aim of achieving ISO 15189 and ISO 22870 accreditation and compliance with MHRA directives.
- The post holder will provide expert advice, support and leadership in quality management issues throughout the department linking with Clinical Directors, Departmental Heads, Quality Leads, Service Managers, and the Clinical Audit Team.
- A key requirement of the post holder is to develop strong professional and close working relationships with a wide range of stakeholders. The post holder will collaborate closely with all relevant individuals and teams to help shape the face of quality throughout the department and ensure that quality improvements are delivered.

As Point of Care (POCT) Manager

- The post holder will have responsibility for all point of care services within secondary care on the Isle of Man including quality, audit, training, and clinical governance in association with clinical lead consultant(s), service leads, clinical service users, Pathology heads of departments and the Pathology Manager.
- Point of care testing includes , but is not limited to the following
 - Arterial Blood Gas analysis
 - Blood Glucose and ketone measurement
 - INR testing
- They will advise the DHSC / Manx Care on POCT matters for primary care regarding quality, audit, training, reagent management and clinical governance.

Duties and Responsibilities

As Quality Manager

- "Central to laboratory accreditation is the development and implementation of a quality management system and the growing role of the quality manager." Quality manager is a post required to comply with UKAS standards.
- Requiring expert specialist knowledge covering the diversity of governance, quality, risk management, and staff training and education, the post holder will require advanced planning and organisational skills. The role shall include the formulation of long-term strategic plans that will impact across the entirety of the Service.
- To monitor requirements of laboratory users and ensure that they are reflected within defined quality performance measures. This requires communication skills using questionnaires, providing a user handbook and dealing with queries and complaints.
- Identifies areas and particular projects where there is the potential for the improvement of quality to the benefit of the service provided by the laboratory at Noble's hospital
- Reporting to the Pathology Manager, the post holder will be responsible for designing, implementing and monitoring compliance of policies and procedures to ensure compliance with National and International standards and legislation set by Accreditation Agencies / Bodies, and International Regulatory and Standards Agencies/Bodies, to ensure continuous quality improvement of the Service,

and the day-to-day provision of a quality service that meets with the needs and requirements of service users.

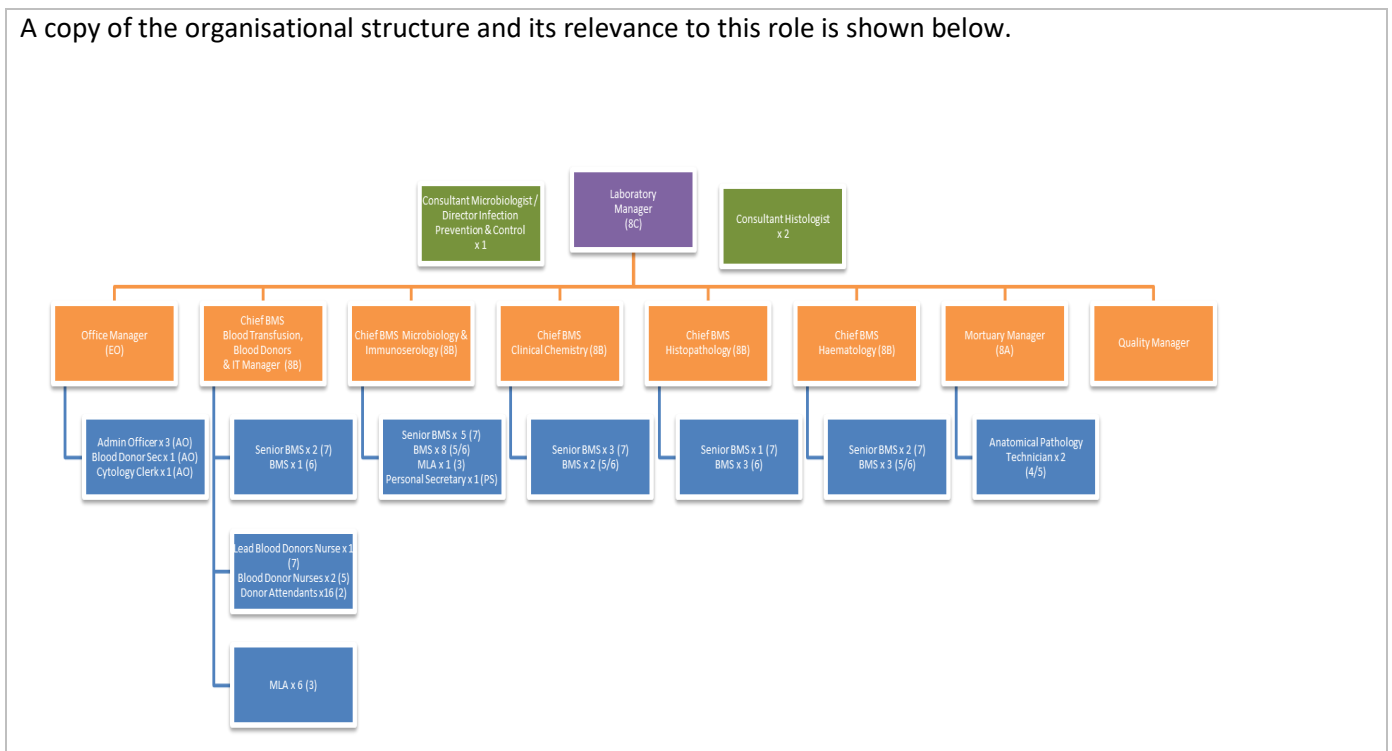
- ♥ The QM is required to contribute to all aspects of management, strategy development and direction of Pathology Services through membership of the Pathology Management Team. In addition, the post holder has responsibility for setting and recommending quality strategy and objectives to the Pathology Management Team.
- ♥ The post holder will consult with Management and senior Governance staff to integrate incident reporting (Datix), complaints and evidence-based practice, to facilitate continuous improvement and to ensure implemented changes are effective.
- ♥ In conjunction with the Quality leads design, maintain, review and develop the Pathology Quality Manual
- ♥ Responsible for formulating Pathology Quality Policy, implementing and ensuring adherence.
- ♥ Attends and reports to the Heads of Department meetings contributing to decision making and policy implementation. Presents quality management reviews and implements agreed quality improvements.
- ♥ Identifies and recommends quality objectives to be included in annual reviews.
- ♥ To ensure compliance with national standards and regulations such as ISO, UKAS, HSE, HTA and MHRA.
- ♥ To ensure that all regulatory and risk management requirements are satisfied and to assist in the development of systems and control processes which will establish safe and consistent service delivery and monitoring arrangements.
- ♥ To write and implement Pathology wide policies, procedures and guidelines.
- ♥ Ensures compliance with documentation, disseminates quality information, and supports quality improvement throughout the Isle of Man Health service.
- ♥ To develop and implement quality initiatives.
- ♥ To represent the department at quality management meetings.
- ♥ To manage and operate the iPassport software system in use for document and quality record control after training.
- ♥ Have oversight of all internal and external Quality Assurance / Quality Control materials and schemes taking appropriate remedial action where required.
- ♥ In collaboration with the laboratory management team investigate complaints ensuring immediate, effective and follow up actions are taken.
- ♥ To supervise the program of internal audits against defined quality performance measures, ensuring immediate and effective follow up actions are taken in compliance with UKAS / MHRA standards.
- ♥ Responsible for following up on non-compliances from external inspections and verify completion of corrective actions required.
- ♥ To monitor the requirements of the laboratory users and ensure they are reflected within defined quality performance measures. Design and implement user surveys and report responses to management team.
- ♥ To provide help and advice to the laboratory management team on quality management matters.
- ♥ To identify areas within the laboratory where there is a potential for quality improvement projects.
- ♥ Responsible for the completion of the risk register for Pathology.
- ♥ To participate in risk management of the department including the reporting of adverse incidents, using Datix.
- ♥ To identify and ensure prompt referral of quality deviations to the Pathology management team.
- ♥ Work with groups and individuals from various disciplines and all levels of seniority.
- ♥ Encourage and motivate staff to maintain an environment of quality improvement within the department
- ♥ The post holder is required to prepare an annual Quality Report.
- ♥ To organise and chair meetings pertinent to the Quality Team.

As Point of Care Manager

- The post holder will have responsibility to ensure compliance with UKAS and MHRA (DB2010(2)) guidelines for the provision, maintenance and monitoring of all POCT devices on the Isle of Man and to liaise with the service leads and users to ensure all guidelines and correct practices are adhered to.
- The post holder will function as a POCT coordinator and play a key role in the development, implementation and management of all POCT services related to Pathology. This is particularly true for secondary care and may also be useful for some primary care services.
- The post holder will provide advice on a range of issues including the purchase of devices, training, competency, interpretation of results, troubleshooting, quality control, quality assessment and health and safety.
- The post holder should develop close liaison between users and the laboratory on all issues relating to POCT. This liaison should be formally defined e.g. by a service level agreement and/or POCT checklist specifying the range of products, services, operational details, and the responsibilities of the laboratory and the POCT user.
- To organise and chair meetings pertinent to POCT.

Organisational Structure

A copy of the organisational structure and its relevance to this role is shown below.



Communication and Relationship Skills

- To liaise closely with the Pathology Manager, Service leads, other POCT users and all other laboratory staff and other grades involved in providing the service, to ensure effective co-ordination of all aspects of the Point of Care service, and Quality Management System
- Ensure effective co-ordination with other Departmental Quality / POCT leads to ensure consistency of service provision model and QMS.
- Responsible as first point of contact for communication on quality issues and resolution of quality non-conformances with regulators e.g. UKAS
- Use tact and diplomacy when investigating incidents and errors that may involve staff (both internal and external to the department, medical and non-medical) and service users, all of whom require to be informed of the problem and the extent of their involvement, and how it may have affected patient care.
- Good interpersonal and communication skills, both written and verbal, to enable the post holder to develop and maintain good working relationships with all relevant staff groups within Manx Care.

- The post holder will also be required to communicate effectively with others e.g. colleagues in other laboratories in the UK, equipment consumable suppliers, service engineers, product specialists and staff from research and educational establishments.
- Communicate changes in operational procedures to staff of all levels and ensure implementation using effective lines of communication within the department.
- The QM will advise, liaise, and influence medical consultants, senior nursing staff and quality managers within Manx Care on quality related issues. In addition, the QM will also develop communications with these individuals to ensure that the service provision meets their needs and requirements.
- Participate in department meetings, management meetings as necessary either in own right or in capacity as one of post holder's responsibilities.
- The post holder will be expected to present highly complex information to large groups of staff or professional peers as necessary e.g. Laboratory open days (for GPs and others), practice nurses, staff meetings, external multidisciplinary educational seminars, external scientific meetings and conferences.
- Consult with colleagues in other departments and hospitals to ensure consistent approach to implementing new standards & guidelines.
- Communicate with other POCT staff highly complex scientific analyser malfunction information and facilitate remote diagnostic and remedial action.
- Communicate information received at meetings, educational seminars etc. to colleagues in the department.

Knowledge, training and experience required to do the job

The essential knowledge, training and experience requirements of this role are:

- Fellow of the Institute of Biomedical Sciences (FIBMS) or hold an MSc in Biomedical Sciences or significant equivalent experience in a specialist discipline in Pathology. Or equivalent RCPATH qualifications
- Registration with Health Care Professions Council as a Biomedical Scientist or Clinical Scientist
- A Quality Management Qualification or significant experience
- Significant experience and knowledge of quality management systems
- Good knowledge of health and safety issues including COSHH, fire regulations and risk.
- Excellent communication skills Good presentation skills both verbally and written.
- Ability to supervise staff and encourage a team culture.
- Ability to facilitate and manage change.
- General IT skills in Word, Excel and PowerPoint. Good working knowledge of the laboratory information system and its maintenance.
- Good negotiating / influencing skills.
- Ability to manage change and implement new policies within the constraints set by the laboratory, hospital, and other regulatory bodies
- Substantial practice as a Senior BMS or Clinical Scientist underpinned by extensive theoretical and practical experience across a range of sections with the Pathology Laboratory.
- In depth and up to date knowledge of current guidelines and standards and their implication.
- Familiarisation with laboratory information systems.
- Clear and in depth understanding of quality assurance topics and assessment of good laboratory practice. Flexible attitude working well under pressure.
- Team builder / player
- Positive, motivated, and enthusiastic attitude.
- Sensitive and supporting nature that feels empathy with other professionals,
- To be articulate in discussions with other colleagues and health professionals.

The desirable knowledge, training and experience requirements of this role are:

- Formal qualification or equivalent demonstrable experience of Leadership
- Chartered Scientist status
- Supervisory skills course – Trust or equivalent
- Management skills course – Trust or equivalent

- 📍 IBMS CEP in Quality Management
- 📍 IBMS CEP in POCT
- 📍 Experience of iPassport or equivalent
- 📍 Demonstrable knowledge of POCT equipment
- 📍 Knowledge and use of audit tools.

Analytical and Judgement Skills

The analytical and judgement skill requirements of this role are:

As Quality Manager

- 📍 Possessing expert specialist knowledge covering the diversity of governance, quality, risk management, and staff training and education, the post holder shall require advanced analytical and judgemental skills to evaluate highly complex data that requires analysis of conflicting information, data/report interpretation and evaluation of a range of options or outcomes. Roles, and decisional/judgemental skills, required of the post holder include:
- 📍 Operating as a key member of the Pathology Management Team, the post holder shall participate in decision-making, formulating strategy, policy creation and implementation covering all Sector business.
- 📍 Post holder shall work independently, and, on own initiative, to make decisions on the day-to-day management of quality, governance, risk management and training and education related issues.
- 📍 Required to prioritise own workload according to service and governance/quality /POCT service requirements.
- 📍 Responsible for the resolution of non-conformances which may conflict with current service provision model requiring judgement of situation such that neither position is compromised.
- 📍 Required to evaluate, analyse requirements, interpret, and implement service strategies relating to governance, accreditation, risk management agencies/bodies standards, regulatory agencies/bodies and other professional standards that are essential to laboratory accreditation, service development and quality improvement.
- 📍 Required to analyse requirement, design, and schedule and implement a programme of audit to cover the entirety of the QMS. Required to evaluate and interpret data/reports, institute corrective action, and monitor the effectiveness of corrective actions, of Sector audit activities.
- 📍 Required to institute relevant communications of critical events, system failure, and quality improvements, to staff, as appropriate.
- 📍 Required to analyse, interpret, evaluate, and communicate complaints and adverse critical incidents directly to Laboratory, Manx Care Management staff, and to regulatory and professional agencies/bodies, as appropriate.
- 📍 Required to continually evaluate and monitor quality performance and seek quality improvement whilst assessing the risks and implications of pursuing them.
- 📍 Required to analyse the requirement, design, and schedule and implement a programme of audit to cover the entirety of the QMS.
- 📍 Required to evaluate and interpret data/reports, institute corrective action, and monitor the effectiveness of corrective actions, of Departmental audit activities.

As Point of Care Manager

- 📍 Required to evaluate new technologies and laboratory equipment and recommendations for purchase
- 📍 Will put procedures in place to monitor the quality of service.
- 📍 Will be expected to work autonomously and unsupervised and will use experience and discretion when making decisions and judgements and when dealing with staff or scientific / technical matters. They must know when to inform and involve the Pathology Manager or Lead Anticoagulant Nurse / Diabetic Nurse Specialist / Clinical Users. Results and outcomes will be assessed at agreed intervals.
- 📍 Expected to interpret and implement organisational and national policies and procedures,

- Interpret highly complex and at times conflicting data e.g. when interpreting new standards, how they relate to standards from another accrediting institution and how they will be applied in the department.
- Interpret scientific and technical developments within area of expertise and, taking into account National, local and departmental policies, advise and formulate implementation plans for the department to make required changes to maintain or improve standards of service delivery or take other courses of action as necessary.
- Will work as part of Pathology management group to evaluate any change to analysers, other device, reagent, or other proposed changes to the service.
- As part of Pathology management group will be responsible for communicating to other personnel and areas of the organisation all aspects of authority and interrelationships.
- Participates in formulation of strategy to deliver the future needs of the service.
- Diagnose faults on a range of equipment and using a high level of discretion and autonomy where considered necessary, communicate with company specialist engineers to take corrective action. This not being possible, to formulate solutions and decide best course of action to maintain service provision.
- Review current methodologies to maintain a cost-effective service.

Planning & Organisational Skills

The planning and organisation skill requirements of this role are:

- To be responsible for laboratory Quality issues throughout Manx Care
- To lead on development and long-term planning to ensure a safe and effective Quality Management System
- Take the lead responsibility for the standardisation of Quality Systems in response to clinical demand and organisational change.
- To develop and maintain an ongoing strategy to ensure that the laboratory achieves compliance and/or accreditation with the appropriate bodies and standards (e.g. MHRA, UKAS, ISO 15189 and 22870) some of which may be legally required.
- Overall responsibility for all quality control of all technical analyses by ensuring adequate internal standards and participation in National External Quality Assurance Schemes.
- Set up department quality meetings.
- Function as the major change agent for the quality strategy.
- Responsible for risk assessments of all processes within Pathology divisions.
- Review, document laboratory procedures
- Cascade information on performing risk assessments in the department.
- Responsible for safe working practices within the department in accordance with Health and Safety Regulations.
- Devolves various aspects of responsibilities to departmental quality leads.
- Alters and revises plans at short notice to respond to unexpected circumstances

Physical Skills

The physical skill requirements of this role are:

- Sitting daily for long periods of time while examining highly complex data generated from a number of different and sophisticated technologies, analysing test results and compiling reports.
- Multi-tasking and prioritisation of work often, under stressful conditions.
- Sitting at VDU for long periods, e.g. compiling reports, authorising reports.
- Occasional exposure to blood and other body fluids/tissues including potentially infective and infective

Patient/Client Care

The patient/client care requirements of this role are:

- The post holder is required to attend departmental meetings on order to contribute to discussions relating to the development of protocols and procedures. For example, when the introduction of a new test or the re-assessment of current POCT testing procedures is being made.
- The post holder is required to attend hospital core training opportunities that explain how clinical governance affects everyone and then pass on relevant information and principles to junior staff to ensure best practice.
- In conjunction with the Pathology Manager record any untoward incidents for passing on to senior management and ensure that any learning / training objectives identified are actioned. Or cascading to the Patient Safety and Quality Directorate and to other managers as appropriate.
- Assist the Departmental Heads in the planning or conducting of risk assessments.
- Routinely observe laboratory procedures to assess risk: example when the introduction of a new test or the reassessment of current testing procedures is being made.
- To ensure the provision of the highest standards of professional practice within Manx Care, through appropriate training, development, induction and CPD of staff.
- Responsible for overseeing and ensuring compliance in documentation during implementation of new methodologies and equipment in line with approved protocols.
- Responsible for and undertakes the risk assessment analysis of all working practices within the department.
- Ensures that all manufacturers' instructions are followed by staff.
- Follows external regulations regarding the performance and reporting of results.
- Reports all untoward incidents to Datix
- Performs audits of technical methods and clinical results as required.

Policy and Service Development

The policy and service development requirements of this role are:

- The post holder will be responsible for formulating quality policy and the management, including the design, establishment, implementation, development and maintenance, of the Pathology Quality Management System (QMS). The QM will manage the QMS with the objectives of developing and maintaining compliance with the National Clinical Governance Framework and National and International Accreditation Agencies/Bodies and National and International Regulatory and Standards Agencies/Bodies to ensure continuous quality improvement across the entirety of Manx Care, and the day-to-day provision of a quality service that meets with the needs and requirements of service users.

Financial and Physical Resources

The financial and physical resource requirements of this role are:

- Responsible for the Quality Management System (iPassport).
- Responsible for advanced troubleshooting, maintenance, repair, safe use, and operation of POCT analysers and equipment –Coagulometers, Glucose meters, blood gas analysers and other POCT equipment within secondary care.
- Ensure that equipment is appropriate for the needs of the service. This will include involvement in the technical specification of the equipment.
- Develop a programme of maintenance to be undertaken by other grades of staff.
- Monitor maintenance programme.
- Maintain and update knowledge and operating skills of all instrumentation used in areas of technical activity.

Human Resources

The Human resource requirements of this role are:

- Provides specialised training on the Quality Management Systems.
- To provide professional leadership on quality issues for the departmental staff
- To provide training to both laboratory and other staff as required in both quality management and POCT subjects
- To assist in the development and implementation of staff training programmes that ensures compliance with the laboratory training policy, MHRA, UKAS and legal requirements
- To maintain an up-to-date knowledge of quality schemes and standards and advise departmental managers of changes and implications for the service.
- To represent Noble's Pathology at local, regional, and national meetings / conferences and disseminate information accordingly to ensure the department is kept up to date with current policy and legislation.
- To acquire and maintain sufficient knowledge to be able to troubleshoot the organisation's quality management software. To use this knowledge to ensure most efficient use of the system.
- To educate and train Pathology staff in quality principles and practice, with specific reference to validation / verification and Measurement of Uncertainty.
- The post holder is responsible for the education, training and retraining of Point of Care operators including health and safety aspects and COSHH.
- Responsible for the organisation of training sessions for new users of all Point of Care devices and provide ongoing support.
- Plan and develop the content of operator training sessions for each Point of Care Testing device to assess operator competency. This will involve consulting with suppliers of Point of Care Testing devices to ensure training packages provided meet the requirements of regulatory bodies such as the Medicines and Healthcare Products Regulatory Agency (MHRA). Training packages must also be developed to comply with the Trust Medical Devices Training Policy to satisfy criteria required by the Care Quality Commission (CQC)
- Consult with Educators from Diagnostic companies to provide appropriate training schedules.
- Conduct operator-training sessions when Company Educators are not available or would not be appropriate. This will involve the communication of complex information to both qualified and non-qualified healthcare workers.
- Provide on-going refresher and proficiency testing programmes to comply with the Training Policy. The Post holder is responsible for providing lists of staff that require refresher training in Point of Care devices to all ward/department managers.
- Promote Continuous Professional Development.

Information Resources

The information resource requirements of this role are:

- Direct responsibility (administrator) for the management of the electronic iPassport Quality management and document control system (used to process, generate, create, update, and store QMS information) and the QMS electronic database.
- Responsible for the management, including maintenance and updating, of the iPassport system. Responsible for maintenance of access (Department-wide) to the QMS via Departmental PC Network. Responsible for the training of Departmental staff in the effective use of the iPassport document control system.
- Is proficient in the use of the hospital and laboratory IT systems to conduct audits.

Research and Development

The research and development requirements of this role are:

- Regularly performs complex audits on all the various aspects of the laboratory service using research methodology. These audit methodologies include initiative-taking audits (e.g. vertical, horizontal and examination) and retrospective audits (e.g. turnaround times, complaints, errors, transport). The number, complexity and diversity of audits that need to be performed dictate that this is a major requirement of this post.
- To undertake operative maintenance on laboratory instruments and equipment, as directed in SOPs, prior to them being used for patient investigations.
- To consult with all outside agencies necessary to resolve any failure of systems, equipment, analytical method, or IT.
- To conduct regular equipment testing and regularly measure and monitor the accuracy and imprecision of laboratory investigations using appropriate quality control procedures. To counter sign quality control procedures conducted by staff under the post holder's supervision.
- Investigate, develop and evaluate by means of literature or practical means, new technologies, methodologies and equipment which may be introduced into the laboratory routine or POCT for improved service to clinicians, and for greater efficiency and effectiveness for Pathology services.

Freedom to Act

The freedom to act requirements of this role are:

- Post holder shall work independently, and, on own initiative, to make decisions on the day-to-day management of quality, governance, risk management and point of care testing related issues.
- The QM will advise, liaise, and influence medical consultants, senior nursing staff and quality managers within Manx Care on quality related issues. In addition, the QM will also develop communications with these individuals to ensure that the service provision meets their needs and requirements.
- Reporting to the Pathology Manager, the post holder will be responsible for designing, implementing and monitoring compliance of policies and procedures to ensure compliance with National and International standards and legislation set by Accreditation Agencies / Bodies, and International Regulatory and Standards Agencies/Bodies, to ensure continuous quality improvement of the Service, and the day-to-day provision of a quality service that meets with the needs and requirements of service users.

Confidentiality

In the course of your duties you may have access to confidential material about patients, members of staff or other business of Manx Care. On no account must information relating to identifiable patients be divulged to anyone other than authorised persons, for example, medical, nursing or other professional staff, as appropriate, who are concerned directly with the care, diagnosis and /or treatment of the patient. If you are in any doubt whatsoever as to the authority of a person or body asking for information of this nature, you must seek advice from your manager. Similarly, no information of a personal or confidential nature concerning individual members of staff should be divulged to anyone without the proper authority having first been given. Failure to observe these rules will be regarded by your employers as gross misconduct which could result in disciplinary action being taken against you. In the case of information held on computer systems, you may be held personally liable if you in any way knowingly contravene the appropriate terms of the Data Protection Act 2018.

Health & Safety

It is the duty of all employees to work in such a way that accidents to themselves and to others are avoided, and to co-operate in maintaining their place of work in a tidy and safe condition, thereby minimising risk. Employees will, therefore, refer any matters of concern through their respective line managers. Similarly, it is each person's responsibility to ensure a secure environment and bring any breaches of security to the attention of their managers.

Safeguarding

The Isle of Man is committed to safeguarding and promoting the welfare of children, young people and adults at risk and expects staff to share this commitment.

Staff must work in accordance with all Manx Care policies relating to safeguarding.

Job Description Appendix 1

Physical, mental and emotional demands of the job and working conditions

Physical Effort

- Sitting daily for long periods of time while examining highly complex data generated from a number of different and sophisticated technologies, analysing test results and compiling reports.
- Multi-tasking and prioritisation of work often, under stressful conditions.
- Sitting at VDU for long periods, e.g. compiling reports, authorising reports.
- Occasional exposure to blood and other body fluids/tissues including potentially infective and infective

Mental Effort

- Frequent (daily) periods of prolonged concentration required during the entry, and in- depth analysis of large quantities of scientific and numerical data e.g. when compiling audit reports
- Pressure of service delivery and maintenance of standards.
- Dealing with highly trained other staff groups and having to be able to comprehend all information supplied, while not entirely being used to methods and procedures used by them.

Emotional Effort

- Meeting the demands of the users in a demand led but cost contained service.
- Ensuring continuous compliance with mandatory national standards.
- Accommodating activity increases and developing systems to minimise errors/incidents
- Motivating staff while dealing with the day-to-day requirements of the service.
- Participating in service developments in line with changing health care requirements.
- Manage own time and prioritise tasks both short term (daily) and long term, ongoing, often with several ongoing major components.
- Maintain service provision under extremely difficult circumstances e.g. limited availability of qualified staff, equipment malfunction and mandatory documentation, etc.
- Planning of the QMS is long term and complex involving all the activities related to the department. The day to day running of the QMS is subject to change but the overall strategy of continuous quality improvement and compliance with professional standards is maintained.
- Work is guided by general health, organisational and professional policies that must be interpreted. Overall health service policy and strategy inform this.
- Lateral thought aids problem solving and persuades senior specialist staff on board.

- ♥ Maintenance of very high levels of concentration over prolonged periods of time (up to 5 hours per work shift) e.g. data analysis.
- ♥ Working within limited resources.
- ♥ Coping with constant pressure to provide rapid, accurate information within a demand led service.

Working Conditions

- ♥ Occasional unavoidable exposure to open samples of blood and other biological body fluids of known or potentially infective material.
- ♥ May occasionally be exposed to spills of hazardous chemicals; spills, leakage and breakage of specimen containers and culture bottles that may contain infectious material. The post holder will be required to deal with any spillage/breakage immediately, ensuring appropriate measures and containment as directed by Standard Operating Procedure

Agreement of above description

I have read and agree with the above description

Job Holder's Name (please print)

Date:

Job Holder's Signature

Date:

Line Manager's Name (please print)

Line Manager's Signature



Person Specification

| | |
|--------------------|---|
| Job Title: | Quality, Risk and Point of Care Manager |
| Department: | Manx Care |
| Division: | Pathology |
| Band: | 8a |

| Attributes | Essential (E) or Desirable (D) | Method of Assessment |
|---|---|--|
| <p>Qualifications</p> <ul style="list-style-type: none"> ♥ Fellow of the Institute of Biomedical Sciences (FIBMS) or hold an MSc in Biomedical Sciences or significant equivalent experience in a specialist discipline in Pathology. Or equivalent RCPATH qualifications ♥ Registration with Health Care Professions Council as a Biomedical Scientist or Clinical Scientist ♥ A Quality Management Qualification or significant experience ♥ Record of CPD in line with HCPC requirements for CPD ♥ Formal qualification or equivalent demonstrable experience of Leadership ♥ Chartered Scientist status ♥ Supervisory skills course – Trust or equivalent ♥ Management skills course – Trust or equivalent ♥ IBMS CEP in Quality Management ♥ IBMS CEP in POCT | <p>E</p> <p>E</p> <p>E</p> <p>E</p> <p>E</p> <p>D</p> <p>D</p> <p>D</p> <p>D</p> <p>D</p> | <p>CV</p> <p>Pre-employment checks</p> |
| <p>Experience</p> <ul style="list-style-type: none"> ♥ Significant experience and knowledge of quality management systems ♥ Good knowledge of health and safety issues including COSHH, fire regulations and risk ♥ Experience of iPassport or equivalent ♥ Demonstrable knowledge of POCT equipment ♥ Knowledge and use of audit tools ♥ Excellent communication skills ♥ Good presentation skills both verbally and written ♥ Ability to supervise staff and encourage a team culture ♥ Ability to facilitate and manage change | <p>E</p> <p>E</p> <p>E</p> <p>D</p> <p>E</p> <p>E</p> <p>E</p> <p>E</p> <p>E</p> | <p>CV</p> <p>Interview</p> |

| | | |
|---|---|--|
| <ul style="list-style-type: none"> • General IT skills in Word, Excel and PowerPoint. • Good working knowledge of the laboratory information system and its maintenance • Good negotiating / influencing skills • Ability to manage change and implement new policies within the constraints set by the laboratory, hospital, and other regulatory bodies • Substantial practice as a Senior BMS or Clinical Scientist underpinned by extensive theoretical and practical experience across a range of sections with the Pathology Laboratory • In depth and up to date knowledge of current guidelines and standards and their implication • Familiarisation with laboratory information systems • Clear and in depth understanding of quality assurance topics and assessment of good laboratory practice | <p>E</p> <p>E</p> <p>E</p> <p>E</p> <p>E</p> <p>E</p> <p>D</p> | |
| <p>Attributes</p> <ul style="list-style-type: none"> • Flexible attitude working well under pressure • Team builder / player • Positive, motivated, and enthusiastic attitude • Sensitive and supporting nature that feels empathy with other professionals • To be articulate in discussions with other colleagues and health professionals | <p>E</p> <p>E</p> <p>E</p> <p>E</p> <p>E</p> | <p>Assessment CV Interview</p> |
| <p>CARE</p> <ul style="list-style-type: none"> • The post holder will demonstrate commitment by ensuring the department attains and continues to hold successful accreditation with the relevant accreditation bodies • The post holder will demonstrate appreciation of stake holders needs in implementation of policies • The post holder will demonstrate respect of all stakeholder in line with Manx Care policies • This role will develop and maintain the excellence expected from accredited Quality Management Systems • Demonstrate credibility at senior levels, prioritising Care Quality and Safety activities • Be open and approachable, valuing the contribution of others, using tact and diplomacy to manage potential conflict • Perform when under pressure, maintaining standards of behaviour and working in a balanced, objective manner • Support a culture where people are encouraged to think creatively, improve ways of working and learn from mistakes | <p>E</p> <p>E</p> <p>E</p> <p>E</p> <p>E</p> <p>E</p> <p>E</p> <p>E</p> | <p>CV Interview</p> |

| | | |
|--|----------------------|--|
| <p>Circumstances and Interests</p> <ul style="list-style-type: none"> ♥ Satisfactory Police check ♥ Physically able to carry out the requirements of the role ♥ Isle of Man Worker | <p>E E D</p> | <p>Pre-employment checks Application</p> |
|--|----------------------|--|