

## **HEALTHCARE GOVERNANCE SPECIALIST LEAD ROLES**

### **1. Healthcare Governance Lead Role**

#### **Key Duties**

- First point of contact for directorate/department staff, corporate specialists, central governance departments, and Trust-wide specialist committees for governance communications covering multiple specialist roles or when the designated lead is absent.
- Ensure that healthcare governance communication is locally disseminated to relevant staff, and that they are consulted about changes to governance systems and documents.
- Ensure that serious directorate or department issues are rapidly brought to the attention of the relevant directorate/department lead, corporate lead/central department, and to any relevant colleagues in other directorates, departments or committees.
- Receive guidance from corporate specialists and central governance departments about legislation and national standards, consider how processes could be changed to improve compliance and quality, and recommend changes to systems, policies and protocols.
- Ensure that agreed changes to governance systems, policies and protocols are implemented across the directorate/department and any issues are fed back. Participate in surveys, audits and inspections to test local governance processes and provide evidence of compliance with standards when required.
- Ensure that local systems are in place to review and update clinical guidelines and governance protocols produced by the directorate/department.
- Support and advise the directorate/department governance specialist leads; co-ordinate and integrate their work e.g. where there connections between an incident and a complaint/claim/inquest/safeguarding case; and ensure that any associated risk assessment is up-to-date.
- Support and advise the Medical Governance Lead/Corporate Heads of Department, ensure relevant information and data is reported to the directorate/department governance group and complete agreed actions.
- Support local service improvement and quality improvement projects and apply appropriate governance processes e.g. risk assessment when required.

#### **Expectations for Participation in Trust-wide Governance Meetings**

See [Terms of Reference](#) for Healthcare Governance Operational Group and [Terms of Reference](#) for Safety and Risk Management Board

#### **Expectations for Communication with External Agencies**

None

#### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience of healthcare governance activity and good understanding of the range of work carried out in their directorate.

#### **Mandatory Training**

See [Training Needs Analysis](#) for Risk Management/Health and Safety including Incident, Complaints, Claims Reporting and Investigation, Inoculation Incident and Falls Reduction.

#### **Additional Training**

Understanding of the Healthcare Governance Arrangements Policy, Management of Health and Safety at Work [Policy](#); Risk Management [Policy](#); and Incident Management [Policy](#).

## 2. **Occupational Safety Lead**

### **Key Duties**

- Receive and respond to safety alerts within the specified timescales. N.B. this role may be allocated to the Patient Safety Lead instead.
- Ensure risk assessments are completed in each area of the directorate/department, action plans are completed, and risks are reviewed at least once a year. N.B. this role may be allocated to the Risk Lead.
- Report, record and manage all incidents, including those incidents that require reporting under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.
- Inspect areas within jurisdiction regularly and undertake any environmental monitoring and health surveillance that is relevant to the local area and type of work.
- Ensure appropriate assessments relating to the Control of Substances Hazardous to Health (CoSHH) are completed, identify, introduce and monitor control measures. N.B. this role may be allocated to the Risk Lead.
- Develop and implement local processes for specific issues relevant to the directorate/department e.g. Lone Working.
- Provide directorate/department staff with information, instruction and training on matters related to health and safety, including on induction and through mandatory training updates, record training provided.
- Produce and implement action plans where these are necessary to improve health and safety performance.
- Report information relating to the numbers, types and severity of incidents involving staff, students and visitors to the directorate/department governance group.

### **Expectations for Participation in Trust-wide Governance Meetings**

See [Terms of Reference](#) for Safety and Risk Management Board

### **Expectations for Communication with External Agencies**

None

### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

The appropriate qualification for each post should be agreed between the directorate/department, the Occupational Safety Manager and the Core Learning Lead. The minimum Health and Safety qualification required to fulfil this role will be at certificate level but for some areas diploma level may be required dependent on the nature of the directorate/department.

Post holders will need prior experience in the same type of workplace and good understanding of work activity in their directorate.

### **Mandatory Training**

See [Training Needs Analysis](#) for Risk Management/Health and Safety including Incident, Complaints, Claims Reporting and Investigation, Inoculation Incident and Falls Reduction.

### **Additional Training**

Understanding of the Management of Health and Safety at Work [Policy](#); the Risk Management [Policy](#); and the Incident Management [Policy](#).

### 3. **Patient Safety Lead**

#### **Key Duties**

- Drive forward patient safety initiatives
- Oversee the implementation of Patient Safety First care bundles to improve specific issues relating to patient safety in their directorate/department.
- Receive and respond to safety alerts within the specified timescales. N.B. this role may be allocated to the Occupational Safety Lead instead.
- Investigate incidents involving patient safety issues using Root Causes Analysis techniques.
- Ensure the directorate/department considers the risks to patient safety during service planning. Ensure that any risks identified through patient safety work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Produce and implement action plans to address risks and following any significant patient safety incidents.
- Ensure that morbidity and mortality numbers and individual cases are discussed in directorate meetings and that key findings and actions are brought to the attention of the directorate healthcare governance group.
- Report information relating to the numbers, types and severity of incidents involving patients to the directorate/department governance group.

#### **Expectations for Participation in Trust-wide Governance Meetings**

See [Terms of Reference](#) for Safety and Risk Management Board

#### **Expectations for Communication with External Agencies**

None

#### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in the same type of workplace and good understanding of patient care in their directorate.

#### **Mandatory Training**

See [Training Needs Analysis](#) for Risk Management/Health and Safety including Incident, Complaints, Claims Reporting and Investigation, Inoculation Incident and Falls Reduction.

#### **Additional Training**

Understanding of the Risk Management [Policy](#) and the Incident Management [Policy](#).  
Root cause analysis techniques.

#### 4. **Risk Lead**

##### **Key Duties**

- Ensure risk assessments are completed in each area of the directorate/department and entered onto the Trust's Risk Register where appropriate.
- Ensure that local managers implement their risk assessment action plans to reduce risk, monitor and review their risks at least once a year.
- Ensure that directorate staff receive information, instruction and training in their duties relating to risk management, record training provided.
- Report information relating to risk to the directorate/department governance group including whether or not risks have been escalated and managed appropriately, agreed actions are taking place, and the level of risk is reducing.

##### **Expectations for Participation in Trust-wide Governance Meetings**

See [Terms of Reference](#) for Safety and Risk Management Board

##### **Expectations for Communication with External Agencies**

None

##### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in the same type of workplace and good understanding of work activity in their directorate.

##### **Mandatory Training**

See [Training Needs Analysis](#) for Risk Management/Health and Safety including Incident, Complaints, Claims Reporting and Investigation, Inoculation Incident and Falls Reduction.

##### **Additional Training**

Understanding of the Risk Management [Policy](#).

## 5. **Business Continuity and Emergency Planning Lead**

### **Key Duties**

- Ensure the directorate/department has business continuity and emergency plans, business impact analysis and the resulting action cards in place.
- Review the business continuity and emergency planning arrangements at least once a year and following any relevant incidents.
- Ensure the directorate/department has staffing structures in place to implement the business continuity and emergency plans.
- Ensure that directorate/department staff receive information, instruction and training in their duties relating to business continuity and emergency planning, including on induction and through training updates, record training provided.
- Ensure that any risks identified through business continuity or emergency planning work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Produce and implement action plans to address risks and following any significant incidents.
- Report information relating to business planning and emergency plans to the directorate/department governance group including whether or not plans are up to date and agreed actions are taking place.

### **Expectations for Participation in Trust-wide Governance Meetings**

See [Terms of Reference](#) for Emergency Preparedness Operational Group (EPOG)

### **Expectations for Communication with External Agencies**

None

### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in the same type of workplace and good understanding of work activity in their directorate.

### **Mandatory Training**

See [Training Needs Analysis](#) for Emergency Planning and Business Continuity.

### **Additional Training**

Understanding of the Major Incident [Plan](#).

## 6. **Infection Prevention and Control Lead**

### **Key Duties**

- Ensure the directorate/department has a process in place to ensure that all infection prevention and control related policies, procedures and guidance listed in the Trust Infection Prevention and Control Programme are implemented in all wards and departments.
- Develop, communicate and implement an annual Directorate Infection Prevention and Control Programme (Action Plan) for all areas within the directorate/department based on the requirements of the Trust-wide programme.
- Identify people with lead responsibility for infection prevention and control at all levels throughout the directorate/department.
- Implement a process to ensure that all wards and clinical departments achieve and maintain Infection Prevention and Control Accreditation.
- Review progress and complete the Infection Prevention and Control Programme Performance Assessment Form quarterly, gaining the agreement of the Clinical Director and capturing any significant concerns that need to come to the attention of the Trust Executive Group (TEG) and the Board of Directors before submitting the report to the Director of Infection Prevention and Control.
- Ensure that directorate staff receive information, instruction and training in their duties relating to infection prevention and control, including on induction and through training updates, record training provided.
- Ensure that any risks identified through infection prevention and control work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Produce and implement action plans to address risks and following any significant incidents.
- Report information relating to infection prevention and control to the directorate/department governance group.

### **Expectations for Participation in Trust-wide Governance Meetings**

None

### **Expectations for Communication with External Agencies**

None

### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in the same type of workplace and good understanding of work-activity relating to infection prevention and control in their directorate.

### **Mandatory Training**

See [Training Needs Analysis](#) for Infection Prevention and Control including Hand Hygiene.

### **Additional Training**

Understanding of the Infection Prevention and Control Accreditation [Programme](#).

## 7. **Medical Equipment Lead**

### **Key Duties**

- Ensure that directorate/department procedures are in line with the Trust's Management of Reusable Medical Equipment Policy in all stages of the procurement, requisition, use and decontamination of medical equipment
- Identify equipment within the directorate/department for which specialist training is required; develop and implement an appropriate training plan or lead a group of medical equipment trainers to fulfil this role
- Co-ordinate and/or deliver any specialist training that is required to use a specific piece of medical equipment to relevant staff as part of their induction, with updates at appropriate intervals. Record training provided.
- Ensure that any risks identified through medical equipment management work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Produce and implement action plans to address risks and following any significant incidents.
- Report information relating to medical equipment management to the directorate/department governance group.

### **Expectations for Participation in Trust-wide Governance Meetings**

Point of Care Testing group

### **Expectations for Communication with External Agencies**

None

### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in the same type of workplace and good understanding of medical equipment used in their directorate.

### **Mandatory Training**

See [Training Needs Analysis](#) for Medical Equipment/Medical Devices.

### **Additional Training**

Understanding of the Management of Reusable Equipment [Policy](#) and the [Policy](#) for Authorising Staff to Use Medical Equipment and Medical Devices.

## 8. **Safeguarding Lead**

### **Key Duties**

- Ensure that directorate/department procedures for safeguarding adults and children are in line with the Trust's safeguarding policies and are concordant with the South Yorkshire Adult Protection Procedures.
- Ensure arrangements for cover in the event of the designated Safeguarding Lead's absence, and that the person providing cover is aware of the contact details for the Trust's Safeguarding Team, the out of hours arrangements for safeguarding and where to find further information on the [Safeguarding intranet site](#).
- Ensure staff are supported to be proactive in dealing with concerns regarding safeguarding vulnerable adults.
- Ensure safeguarding concerns are managed in line with Trust policy and the Adult and Child Protection Procedures, and that issues are flagged via the Trust's Incident Management Database (DATIX)
- Ensure basic awareness training required for safeguarding adults and children is delivered to all relevant staff as part of their induction, with specialist training and updates provided as indicated by the training needs analysis. Record training provided.
- Ensure that any risks identified through safeguarding work are assessed, discussed with the Lead Nurse for Older People and Vulnerable Adults and /Safeguarding Children and Young People, and entered onto the Trust's Risk Register.
- Review practice, produce and implement action plans to address risks and any significant safeguarding issues that arise.
- Report information relating to safeguarding adults and children to the directorate/department governance group and the Safeguarding Leads Group.
- Participate and engage with any commissioned external reviews as required (Serious Case Reviews, Domestic Homicide Reviews) including the completion of action plans and related audits.

### **Expectations for Participation in Trust-wide Governance Meetings**

See [Terms of Reference](#) for Children and Young People's Services Group and Terms of Reference for the Safeguarding Leads Group.

### **Expectations for Communication with External Agencies**

None

### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience of safeguarding vulnerable adults in the same type of workplace and good understanding of work activity relating to safeguarding in their directorate.

### **Mandatory Training**

See [Training Needs Analysis](#) for Safeguarding Adults and [Training Needs Analysis](#) for Safeguarding Children.

### **Additional Training**

Understanding of the Safeguarding Vulnerable Adults [Policy](#), the [Policy](#) for Safeguarding Children, and the South Yorkshire Adult Protection Procedures.

Safeguarding Referrer Training will be provided for people appointed to this role.



## 9. **Equality and Human Rights Lead**

### **Key Duties**

- Ensure that equality impact assessments are completed for all services and remedial action is taken as necessary.
- Ensure staff are appropriately trained regarding equality and diversity in line with the local mandatory training plan. Record training provided.
- Ensure that any risks identified through equality and human rights work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Review practice, produce and implement action plans to address risks and any significant equality and human rights issues that arise.
- Report information relating to equality and human rights to the directorate/ department governance group.

### **Expectations for Participation in Trust-wide Governance Meetings**

See [Terms of Reference](#) for Equality and Human Rights Operational Group

### **Expectations for Communication with External Agencies**

None

### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in the same type of workplace and good understanding of work activity in their directorate.

### **Mandatory Training**

See [Training Needs Analysis](#) for Equality and Human Rights.

### **Additional Training**

Understanding of the Equality Impact Analysis [Policy](#).

## 10. **Complaints Lead**

### **Key Duties**

- Ensure rigorous and prompt investigation and response to complaints within the complaint response target in accordance with the Trust's Complaints Policy.
- Ensure a safeguarding referral is completed in line with the South Yorkshire Adult Protection Procedures if a safeguarding concern is identified during investigations.
- Escalate complaints to the Clinical Director and Nurse Director/Executive Director if the complaint is considered serious or if the complaint is re-opened because the complainant is dissatisfied with the initial response.
- Offer to meet with complainants where it will aid the resolution of the complaint, arrange and support meetings between complainants and other members of staff as appropriate.
- Ensure that written responses to complaints are of high quality and produced in accordance with the Trust's Final Response Letter Writing Guidance.
- Ensure that action plans are produced and implemented where the investigation has found a deficit in the service provided. Ensure that actions agreed are monitored and that progress is reviewed by the directorate/department governance group.
- Liaise with the Patient Partnership Department to identify how any training needs can best be met. Ensure staff are appropriately trained regarding complaints investigation in line with the local mandatory training plan. Record training provided.
- Ensure that any risks identified through complaints work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Ensure the directorate/department maintains comprehensive complaint files and records in accordance with the Complaint File Code of Practice and the Datix Handbook.
- Report information relating to complaints including number, type and severity, to the directorate/department governance group.

### **Expectations for Participation in Trust-wide Governance Meetings**

Patient Experience Leads group

### **Expectations for Communication with External Agencies**

None

### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in or detailed knowledge of complaints handling and good understanding of work activity related to patient care in their directorate or department.

### **Mandatory Training**

See [Training Needs Analysis](#) for Risk Management/Health and Safety including Incident, Complaints, Claims Reporting and Investigation, Inoculation Incident and Falls Reduction.

### **Additional Training**

Understanding of the Concerns and Complaints [Policy](#).

## 11. **Patient Experience Lead**

### **Key Duties**

- Ensure that feedback from patients is appropriately reviewed by the relevant staff and is acted upon.
- Seek the views of patients and the public when planning new facilities or services or making changes to existing facilities or services.
- Include the views of patients and the public in directorate or department discussions when services are reviewed.
- Seek the views of patients including a close working relationship with the corporate leads for Patient Partnership and Clinical Effectiveness when designing local patient experience surveys.
- Ensure staff training needs regarding patient experience, responding to patient feedback and customer care are appropriately identified and met. Record training provided.
- Ensure that any risks identified through patient experience work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Work with colleagues to produce, implement and follow up action plans in response to patient survey results and any risks identified, including feedback from patient surveys undertaken as part of the Clinical Assurance Toolkit (e-CAT).
- Report information from patient experience surveys to the directorate/department governance group.

### **Expectations for Participation in Trust-wide Governance Meetings**

See Terms of Reference for Patient Experience Leads Group.

### **Expectations for Communication with External Agencies**

None

### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in the same type of workplace and good understanding of patient care in their directorate.

### **Mandatory Training**

No additional requirements specific to this role

### **Additional Training**

None

## 12. **Clinical Effectiveness/Audit Lead**

### **Key Duties**

- Produce an annual Clinical Effectiveness Programme and agree it with the corporate Clinical Effectiveness Unit for inclusion in the Trust Clinical Audit Programme (TCAP). The programme will include projects identified as national priority, regional priority, Trust priority or directorate priority and should ensure that the quality of service that people receive are monitored.
- Co-ordinate, monitor and manage directorate clinical effectiveness activity on TCAP projects and audits that are locally managed.
- Advise on education and training for staff involved in clinical effectiveness work to enable them to complete audit projects.
- Ensure that any risks identified through clinical effectiveness work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Ensure that action is planned following clinical effectiveness projects (both TCAP and locally managed projects), action plans are tracked to ensure that each recommendation is completed and re-audit takes place.
- Submit audit reports to the Clinical Effectiveness Unit for TCAP and locally managed projects.
- Disseminate the results of clinical effectiveness projects appropriately within the directorate and in the wider Trust where appropriate.
- Review and report progress with TCAP and locally managed projects to the directorate/department governance group.

### **Expectations for Participation in Trust-wide Governance Meetings**

See Terms of Reference for Audit Leads Network.

### **Expectations for Communication with External Agencies**

None

### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in the same clinical specialty and sufficient understanding of clinical audit and effectiveness activities to be able to act as a clinical champion. This involves being a role model and promoting audits within their directorate that lead to quality improvement.

### **Mandatory Training**

No additional requirements specific to this role

### **Additional Training**

Understanding of the Clinical Audit [Policy](#) and associated procedures. The Clinical Effectiveness Unit provides a bespoke induction for newly-appointed Clinical Effectiveness/Audit Leads.

### 13. **Research Lead**

#### **Key Duties**

- Ensure that a directorate research strategy is developed and implemented in line with the Trust and national research strategies.
- Review and sign-off portfolio/non-portfolio/commercial studies to ensure that they comply with the directorate strategy, that the investigator has the ability to conduct the study, the directorate has the capacity to host the study, and ensuring that the studies are costed and funds are available for the study to proceed.
- Report any serious breach of GCP or trial protocol, or any research fraud and misconduct to the Director of Research.
- Ensure that all research nurses within the directorate are registered with the Research Department, maintain their NMC registration and meet the requirements for GCP, mandatory and research-related training.
- Promote training, supervision and support for all staff involved in research, record any training provided.
- Ensure that any risks identified through research work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Review practice, produce and implement action plans to address risks and any significant research issues that arise.
- Ensure the results of research projects are disseminated appropriately within the directorate, with the Research Department and in the wider Trust where appropriate.
- Report information about research governance to the directorate/department governance group.

#### **Expectations for Participation in Trust-wide Governance Meetings**

None

#### **Expectations for Communication with External Agencies**

None

#### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in the same type of workplace and good understanding of work activity relating to research in their directorate.

#### **Mandatory Training**

No additional requirements specific to this role

#### **Additional Training**

Understanding of the legislation relating to research conduct e.g. Clinical Trial Regulations, GCP, Human Tissue Act, Data Protection Act, Mental Capacity Act. Understanding of Research Department systems to comply with research governance requirements. This includes project registration; ethics approval; regulatory approvals (MHRA, IRMER and ARSAC); research governance approval; incident reports; safety reports; annual progress reports; final study reports; maintaining essential trial documents and archiving; publication.

## 14. **Information for Patients Lead**

### **Key Duties**

- Ensure information for patients is reviewed and developed in line with the Trust's Code of Practice.
- Provide training about the process for managing and developing information for patients to all relevant staff. Record the training provided.
- Ensure that any risks identified through patient information work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Review practice, produce and implement action plans to address risks and any significant patient information issues that arise.
- Report progress with patient information to the directorate/department governance group.

### **Expectations for Participation in Trust-wide Governance Meetings**

None

### **Expectations for Communication with External Agencies**

None

### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in the same type of workplace and good understanding of patient care in their directorate.

### **Mandatory Training**

No additional requirements specific to this role

### **Additional Training**

Understanding of the [Code of Practice](#) for Producing, Publishing and Managing Patient Information Materials.

## 15. **Clinical Records Lead**

### **Key Duties**

- Ensure secure management of clinical records, including out-of-hours access and systems for the sharing of information when more than one provider is involved.
- Ensure audit takes place against the Trust's approved standards for patient record keeping.
- Ensure that the patient records are managed as Interprofessional Patient Records (IPPR) and pages are securely filed in line with Trust guidance.
- Provide training about the standards for clinical record keeping to all relevant staff. Record the training provided.
- Ensure that any clinical forms being developed locally meet the Trust's patient record keeping standards, are piloted, and are submitted to the New Documents Group for approval prior to issue.
- Ensure that any risks identified through clinical records work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Review practice, produce and implement action plans to address risks and any significant clinical records issues that arise.
- Report information about clinical records to the directorate/department governance group.

### **Expectations for Participation in Trust-wide Governance Meetings**

None

### **Expectations for Communication with External Agencies**

None

### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in the same type of workplace and good understanding of work activity relating to patient care in their directorate.

### **Mandatory Training**

See [Training Needs Analysis](#) for Healthcare Record Keeping

### **Additional Training**

Understanding of the Healthcare Records [Policy](#) and the Patient Record Keeping [Policy](#).

**16. Clinical informatics Lead****Key Duties**

- Participate in regular data quality audits in conjunction with the Information Services department and implement any action plans arising from these audits.
- Advise on training available for clinical informatics and analytical skills to relevant staff.
- Ensure that any risks identified through clinical informatics work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Review practice, produce and implement action plans to address risks and any significant clinical informatics issues that arise.
- Report quality-related information collected for submission to commissioners e.g. CQUIN data to the directorate/department governance group.

**Expectations for Participation in Trust-wide Governance Meetings**

None

**Expectations for Communication with External Agencies**

None

**Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in the same type of workplace and good understanding of work activity and clinical informatics requirements in their directorate.

**Mandatory Training**

No additional requirements specific to this role

**Additional Training**

None



## 17. **Information Governance Lead**

### **Key Duties**

- Advise on training available on information governance to relevant staff.
- Ensure that any risks identified through information governance work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Review practice, produce and implement action plans to address risks and any significant information governance issues that arise.
- Report information on information governance to the directorate/department governance group.

### **Expectations for Participation in Trust-wide Governance Meetings**

None

### **Expectations for Communication with External Agencies**

None

### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Post holders will need prior experience in the same type of workplace and good understanding of work activity relating to informatics in their directorate.

### **Mandatory Training**

See [Training Needs Analysis](#) for Information Governance

### **Additional Training**

Understanding of the Information Governance [Policy](#)

## 18. **Mandatory Training Lead**

### **Key Duties**

- Provide information and training to relevant directorate/department staff about the requirements and processes for induction, mandatory & job specific training and appraisal.
- Produce and publicise a directorate/department mandatory training plan that is consistent with the Training Needs Analyses.
- Liaise with training providers to ensure there are sufficient training opportunities for directorate / department staff.
- Ensure that the training provided locally meets mandatory requirements, and ensure that OLM proforma are completed and submitted to the Learning and Development Department for courses and training delivered in the local area.
- Ensure that local service managers have a robust mechanism for recording training on ESR.
- Ensure that any risks identified through mandatory training work are assessed and, where appropriate, entered onto the Trust's Risk Register.
- Review practice, produce and implement action plans to address risks and any significant mandatory training issues that arise.
- Receive the monthly Mandatory Training Newsletter acting on and driving forward any new initiatives in the local area.
- Liaise with and give feedback to the Mandatory Training Coordinator (Learning and Development Department) on the provision of Mandatory Training in their area.
- Review directorate/department appraisal and mandatory & job specific training compliance and report this and any other relevant information to the directorate/department governance group.

### **Expectations for Participation in Trust-wide Governance Meetings**

None

### **Expectations for Communication with External Agencies**

None

### **Person Specification – Essential Criteria – Knowledge, Skills and Experience**

Good understanding of work activity in their directorate; working knowledge of the Oracle Learning Management (OLM) requirements of the Electronic Staff Record (ESR); ability to interpret Training Needs Analyses (TNAs), analyse directorate requirements, create a Directorate Training Plan (DTP) and coordinate locally adequate resource-efficient training opportunities for staff to access; experience of identifying effective modes of delivery to meet local training needs.

### **Mandatory Training**

No additional requirements specific to this role

### **Additional Training**

Understanding of the Central and Local Induction [Policy](#) and the Mandatory and Job Specific Training [Policy](#). Awareness of the policies referenced in the training needs analyses e.g. moving and handling policy.