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**Director of Nursing, Assistant (Emergency Department – Patient Flow)**

**Job Specification, Terms & Conditions**

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| **Job Title and Grade** | **Director of Nursing, Assistant (Emergency Department – Patient Flow)**  *(Grade Code 2910, Band 1)* |
| **Campaign Reference** | NRS05366 |
| **Closing Date** | **Friday 22nd September 2017 at 12 noon** |
| **Proposed Interview Date (s)** | **Week commencing 23rd October 2017** |
| **Taking up Appointment** | A start date will be indicated at job offer stage |
| **Location of Post** | **Mayo University Hospital, Saolta University Health Care Group**  There is currently one permanent whole-time post available. Initial assignment will be to Mayo University Hospital, Castlebar, Co Mayo.  The successful candidate may be required to work in any service area within the vicinity as the need arises.  A panel may be formed for Mayo University Hospital from which current and future, permanent and specified purpose vacancies of full-time or part-time duration may be filled. |
| **Informal Enquiries** | Andrea McGrail Interim Director of Nursing & Midwifery  **Email:** [andrea.mcgrail@hse.ie](mailto:andrea.mcgrail@hse.ie)  **Telephone:** 094 9042324 |
| **Details of Service** | Saolta University Health Care Group is one of seven new hospital groups announced by the then Minister for Health, Dr. James Reilly TD in May, 2013, as part of a re-organisation of public hospitals into more efficient and accountable hospital groups that will deliver improved outcomes for patient. The Saolta University Health Care Group comprises of 7 hospitals:   * Letterkenny University Hospital * Sligo University Hospital * Mayo University Hospital * Roscommon University Hospital * Portiuncula University Hospital * Merlin Park University Hospital Galway * University Hospital Galway   The Group has one overall Group Management Team, turnover of €820 million and operates with 1,781 beds and staffing of 8,454 WTE (9,737 headcount) in June 2016.  The objectives of the groups are to:   * Achieve the highest standard of quality and uniformity in care across the group * Deliver cost effective hospital care in a timely and sustainable manner * Encourage and support clinical and managerial leaders * Ensure high standards of governance, both clinical and corporate and recruit and retain high quality nurses, NCHDs, consultants, allied health professionals and administrators in all our hospitals.   There is an evolving Group governance structure with 4 Clinical Directorates which manage the clinical specialities across each site:   * Medicine * Perioperative * Diagnostics * Women and Children’s   Each Directorate has a set of key performance indicators to improve quality, drive performance, and ensure efficiency.    The Group provides a range of high quality services for the catchment areas it serves and GUH is a designated supra-regional cancer service provider meeting the needs of all the counties along Western seaboard and towards the midlands from Donegal to North Tipperary.    Saolta University Health Care Group aims to meet its service plan targets. Its priority is to implement the national clinical care programmes across the Group and establish a performance management culture with the development of Key Performance Indicators.  **Vision**  The formation of the hospitals groups, which will transition to independent hospital trusts, will change how hospitals relate to each other and integrate with the academic sector. Over time, the Group will deliver:   * Higher quality service * More consistent standards of care * More consistent access to care * Stronger leadership * Greater integration between the healthcare agenda and the teaching, training, research and innovation agenda   Our Academic Partner is the National University of Ireland, Galway and we are developing further international partnerships in the UK and the USA” |
| **Mission Statement** | Patients are at the heart of everything we do. Our mission is to provide high quality and equitable services for all by delivering care based on excellence in clinical practice, teaching, and research, grounded in kindness, compassion and respect, whilst developing our staff and becoming a model employer.  **OUR VISION STATEMENT**  Our Vision is to build on excellent foundations already laid, further developing and integrating our Group, fulfilling our role as an exemplar, and becoming the first Trust in Ireland.  **OUR GUIDING VALUES**  **Respect** - We aim to be an organisation where privacy, dignity, and individual needs are respected, where staff are valued, supported and involved in decision-making, and where diversity is celebrated, recognising that working in a respectful environment will enable us to achieve more.  **Compassion** - we will treat patients and family members with dignity, sensitivity and empathy.  **Kindness** - whilst we develop our organisation as a business, we will remember it is a service, and treat our patients and each other with kindness and humanity.  **Quality** – we seek continuous quality improvement in all we do, through creativity, innovation, education and research.  **Learning** - we will nurture and encourage lifelong learning and continuous improvement, attracting, developing and retaining high quality staff, enabling them to fulfill their potential.  **Integrity** - through our governance arrangements and our value system, we will ensure all of our services are transparent, trustworthy and reliable and delivered to the highest ethical standards, taking responsibility and accountability for our actions.  **Teamworking** – we will engage and empower our staff, sharing best practice and strengthening relationships with our partners and patients to achieve our Mission.  **Communication** - we aim to communicate with patients, the public, our staff and stakeholders, empowering them to actively participate in all aspects of the service, encouraging inclusiveness, openness, and accountability.  *These Values shape our strategy to create an organisational culture and ethos to deliver high quality and safe services for all we serve and that staff are rightly proud of.* |
| **Reporting Relationship** | The post holder will:   * Report to the Director of Nursing for the Acute Hospital. * Liaise internally with Diagnostic Services and In-Patient Units and externally with Special Delivery Unit (SDU), Quality Improvement Division and Clinical Strategy and Programmes with a particular emphasis on flow. |
| **Purpose of the Post** | * The ADON Emergency Department (ED) - Patient Flow has a key role in the management of patient flow to and from the ED, Assessment Units and Medical Short Stay Unit to other departments within the hospital and externally. * The ADON Emergency Department - Patient Flow will engage and influence the performance of the hospital patient flow pathways and support systems to facilitate optimum efficiency and effectiveness and safe, responsive high quality patient services. * The ADON will provide leadership and be accountable and responsible to further develop governance structures and within those have the authority to assess, plan, action, improve and review unscheduled care patient flow. * In order to enhance the effectiveness of patient flow across the hospital, the ADON will engage and influence the prioritisation of patient access to diagnostic facilities in collaboration with clinicians and other key flow management personnel. * The ADON will work collaboratively with “in house” colleagues, who have responsibility to drive processes essential to timely discharge such as plan for every patient, discharge planning, predicted date of discharge; criteria led discharge, use of discharge/transit area etc. * The ADON has responsibility for developing and enhancing relationships across the Primary and Community Care structures creating collaborative fora in order to improve integrated working and problem solving to reduce unnecessary attendances and support early discharge to the most appropriate setting. * The ADON Emergency Department - Patient Flow will collaborate with established clinical programmes to facilitate timely patient flow and on the introduction of new pathways, (clinical and organizational) and will monitor, using data, analysis and intelligence to determine effectiveness and report on the performance of the patient pathways to the unscheduled care governance group and the executive management team. * The ADON will identify and support opportunities to develop IT practices to enhance patient care and flow, and to increase efficiency while decreasing workload e.g. the development of systems to facilitate rapid ordering, tracing, and review of diagnostic testing, electronic bed mapping and navigational hub. * The ADON will ensure that relevant timely data is available to support decision making and to assess quality improvement deliverables. * The ADON Emergency Department - Patient Flow will be involved in ongoing workforce planning to ensure the availability of appropriate numbers, and levels, of staff to meet patient need. Including identifying opportunities for the development and roll out of advanced nursing practice roles which will increase the quality of patient care and clinical effectiveness, assist with departmental efficiency, and improve patient flow. * The ADON is also empowered to procure additional staff as needed in accordance with local arrangements, to ensure that the appropriate staffing complement is available. * The ADON will monitor patterns of attendance at the department and use that data to establish appropriate staff rostering to meet anticipated demand. The data will also be used to determine if there are patterns of inappropriate attendance. Specific steps will be taken by the ADON to address patterns which are identified. * The ADON will lead on the use of quality improvement methodologies to ensure the delivery of quality improvement projects that will provide safer better healthcare across the Unscheduled Care patient pathway. * The ADON will lead on the Quality Assurance and Verification agenda to ensure the delivery of safer better healthcare across the Unscheduled Care Patient Pathway. * While recognising that the escalation policy contains automatic trigger, the ADON will be responsible for ensuring that the policy is promptly implemented and recorded as implemented in accordance with the provisions of the escalation policy, and to ensure that the escalation policy overall, is subject to regular and rigorous review. * The ADON Patient Flow Management will ensure as part of the management team that prompt action is taken to identify general and specific health and safety risks. This will include regular consultation with appointed H&S representatives in the ED.   The ADON will work collaboratively with and be supported by the Quality Improvement Division to develop skills and competencies in the application of Quality Improvement theory and methodologies e.g. ED Microsystems. |
| **Principal Duties and Responsibilities** | * The person holding this post is required to support the principle that the care of the patient comes first at all times and will approach their work with the flexibility and enthusiasm necessary to make this principle a reality for every patient to the greatest possible degree. * Maintain throughout the hospital awareness of the primacy of the patient in relation to all hospital activities. * Performance management systems are part of role and you will be required to participate in the Group’s performance management programme.   **Management**  *The Assistant Director of Nursing (Emergency Department – Patient Flow) will:*   * Work collaboratively with the ADON responsible for operational management of the ED. * Participate in the appropriate management and co-ordination of effective and efficient patient flow to improve patient flow within the Emergency Department and associated assessment units. * Take remedial action where necessary to improve patient flow and the patient experience. * The ADON has responsibility for developing and enhancing relationships creating collaborative fora across the Primary and Community Care structures in order to reduce unnecessary attendances and support early discharge to the most appropriate setting. * Participate in the overall financial planning of the service including the assessment of priorities in pay and non-pay expenditure. * Identify opportunities to develop IT practices to enhance patient care and flow, and to increase efficiency while decreasing workload e.g. the development of systems to facilitate rapid ordering, tracing, and review of diagnostic testing, electronic bed mapping and navigational hub. The ADON will ensure that relevant timely data is available to support decision making and to assess quality improvement deliverables. * Ensure that critical human and material resources are allocated in an effective way, monitoring activity levels and intervening to align resources and maximize efficiencies. * Collaborate and liaise with key stakeholders’ national and local e.g. relevant clinical programmes, patient flow project, SDU, Quality Improvement projects, NMPD project leads. * Assist with the direction and supervision of the nursing service to provide a high level of patient care and clinical/functional area/sector management. * Provide innovative and effective leadership, support and advice to nursing and allied staff at all levels to improve the quality of care in the Emergency Department and associated assessment units (Unscheduled Care). * Provide guidance to nursing and other staff in the implementation of nursing guidelines and policies. * Maintain good employee relations and promote good communication with all relevant staff. * Give support and counsel to nursing and allied staff as necessary and take action in accordance with agreed service policy, if necessary. * Plan and guide activities to provide optimum patient care in accordance with service policies and procedure and undertake audits as required. * Ensure adherence to all standards and guidelines relating to professional nursing practice and behaviour. * Undertake other relevant duties as may be determined from time to time by the Director of Nursing.   **Professional / Clinical Responsibilities**  *The Assistant Director of Nursing (Emergency Department – Patient Flow) will:*   * Provide a high level of professional and clinical leadership to maintain efficient patient flow in the Emergency Department and associated assessment units. * Provide safe, comprehensive nursing care to service users within the guidelines laid out by Nursing and Midwifery Board of Ireland (NMBI). * Practice nursing according to Professional Clinical Guidelines, National and Area Health Service Executive guidelines, local policies, protocols and current legislation. * Place the values of kindness, care compassion, trust and learning at the core of daily work. * Manage, monitor and evaluate professional and clinical standards ensuring an evidence based care planning approach in conjunction with operational ADON. * Manage own work load in accordance with the needs of the post. * Participate in teams as appropriate, communicating and working in co-operation with the other team members, the wider multi disciplinary teams and integrated care teams. * Facilitate co-ordination, cooperation and liaison across health care teams’ programmes and services. * Formulate, manage and implement best practice policies and procedures. * Ensure, as part of the team approach to patient care uphold the HSE’s policy that service users and others are treated with dignity and respect and develop opportunities for service users to contribute to service improvements. * Adhere and contribute to the development and maintenance of nursing standards, protocols and guidelines consistent with the highest standards of patient care. * Maintain professional standards in relation to confidentiality, ethics and legislation. * Assist in the development of divisional service policies and procedures and the implementation of same and to update them as required. * Participate in development of quality initiatives including clinical audit, standard setting, investigation of complaints and untoward incidents, use of quality improvement methodologies.   **Education and Training**  *The Assistant Director of Nursing (Emergency Department – Patient Flow) will:*   * Contribute to service development through appropriate continuous education, research initiatives, keeping up to date with nursing and relevant literature, recent nursing and relevant research and new developments in nursing management patient flow management, education and practice and attend staff study days as considered appropriate. * Provide support/advice to those engaging in continuous professional development in his/her area of responsibility. * Participate in the identification, development and delivery of induction, education, training and development programmes for nursing and non-nursing staff in conjunction of operational ADON. * In respect of Patient flow, participate in in-service training, orientation programmes all nursing staff. * Provide support supervision and professional development of appropriate staff in respect of patient flow. * Engage in performance review processes including personal development planning by setting own objectives and providing and receiving feedback.   **Health & Safety / Risk Management**  *The Assistant Director of Nursing (Emergency Department – Patient Flow) will:*   * Ensure as part of the management team that prompt action is taken to identify general and specific health and safety risks. This will include regular consultation with appointed H&S representatives in the ED and Assessment Units. * In addition, the post-holder will introduce appropriate risk elimination measures, or where this is not possible will introduce risk mitigation management measures. The process of monitoring and responding to Health and Safety (H&S) concerns will be ongoing. * Ensure that effective safety procedures are developed and managed to comply with statutory obligations. * Be aware of risk management issues, identify risks and take appropriate action. * Comply with the policies, procedures and safe professional practice of the Irish Healthcare System by adhering to relevant legislation, regulations and standards. * Assist in the development, implementation and review of Health and Safety statements, as appropriate. * Document appropriately and report any near misses, hazards and accidents and bring them to the attention of the relevant person(s). * Maintain a feedback mechanism and report to senior management where appropriate. * Work in a safe manner with due care and attention to the safety of self and others. * Ensure adherence to policies in relation to the care and safety of any equipment supplied for the fulfilment of duty. Ensure advice of relevant stakeholders is sought prior to procurement. * The post holder has a duty to familiarise themselves with the relevant: * Organisational Policies * Continuous Quality Improvement Initiatives * Document Control Information Management Systems * Risk Management Strategy and Policies * Hygiene Related Policies, Procedures and Standards * Decontamination Code of Practise * Infection Control Policies * Safety Statement, Health & Safety Policies/Fire Procedure * Data Protection and Confidentiality Policies * Strategy for People Management * Trust in Care   Have a working knowledge of the Health Information and Quality Authority (HIQA) Standards as they apply to the role for example, Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etcand comply with associated HSE protocols for implementing and maintaining these standards.  Support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service.  **KPIs**   * The identification and development of Key Performance Indicators (KPIs) which are congruent with the hospital’s service plan targets. * The development of Action Plans to address KPI targets. * Driving and promoting a Performance Management culture. * In conjunction with line manager assist in the development of a Performance Management system for your profession. * The management and delivery of KPIs as a routine and core business objective.   **PLEASE NOTE THE FOLLOWING GENERAL CONDITIONS**   * Employees must attend fire lectures periodically and must observe fire orders. * All accidents within the Department must be reported immediately. * Infection Control Policies must be adhered to. * In line with the Safety, Health and Welfare at Work Act, 2005 all staff must comply with all safety regulations and audits. * In line with the Public Health (Tobacco) (Amendment) Act 2004, smoking within the Hospital Building is not permitted. * Hospital uniform code must be adhered to. * Provide information that meets the need of Senior Management.   **Risk Management, Infection Control, Hygiene Services and Health & Safety**   * The management of Risk, Infection Control, Hygiene Services and Health & Safety is the responsibility of everyone and will be achieved within a progressive, honest and open environment. * The post holder must be familiar with the necessary education, training and support to enable them to meet this responsibility. * The post holder is responsible for ensuring that they become familiar with the requirements stated within the Risk Management Strategy and that they comply with the Hospitals Risk Management Incident/Near miss reporting Policies and Procedures. * The post holder is responsible for ensuring that they comply with hygiene services requirements in your area of responsibility. Hygiene Services incorporates environment and facilities, hand hygiene, catering, cleaning, the management of laundry, waste, sharps and equipment. * The post holder must foster and support a quality improvement culture through-out your area of responsibility in relation to hygiene services. * It is the post holders’ specific responsibility for Quality & Risk Management, Hygiene Services and Health & Safety will be clarified to you in the induction process and by your line manager. * The post holder must take reasonable care for his or her own actions and the effect that these may have upon the safety of others. * The post holder must cooperate with management, attend Health & Safety related training and not undertake any task for which they have not been authorised and adequately trained. * The post holder is required to bring to the attention of a responsible person any perceived shortcoming in our safety arrangements or any defects in work equipment. * It is the responsibility of the post holder to be aware of and comply with the HSE Health Care Records Management / Integrated Discharge Planning (HCRM / IDP) Code of Practice.   **The above Job Specification is not intended to be a comprehensive list of all duties involved and consequently, the post holder may be required to perform other duties as appropriate to the post which may be assigned to him/her from time to time and to contribute to the development of the post while in office.** |
| **Eligibility Criteria**  **Qualifications and/ or experience** | **Candidates must, on the latest date for receiving completed application forms for the office, possess:**  **1. Professional Qualifications, Experience, etc.**  (a) Eligible applicants will be those who on the closing date for the competition:  (i) Are registered, or be eligible for registration in the General Nurse Division of the  Register of Nurses and Midwives, maintained by the Nursing & Midwifery Board of  Ireland (Bord Altranais agus Cnáimhseachais na hÉireann).  **and**  (ii) Have 7 years post registration nursing experience and 3 years nursing  management experience at a minimum of CNM2 in an acute setting.  **and**  (iii) Possess a post graduate qualification at not less than level 8 (QQI) in health care  or management related area.  **and**  (b) Candidates must possess the requisite clinical, leadership, managerial and administrative knowledge and ability for the proper discharge of the office.  **2. Annual Registration**  Practitioners must maintain live annual registration on the General Nursing Division of the Nurses & Midwifery Register maintained by the Nursing & Midwifery Registration Board (Bord Altranais agus Cnáimhseachais na hÉireann)  **3. Age**  Age restriction shall only apply to a candidate where s/he is not classified as a new entrant (within the meaning of the Public Service Superannuation (Miscellaneous Provisions) Act, 2004). A candidate who is not classified as a new entrant must be under 65 years of age on the first day of the month in which the latest date for receiving completed application forms for the office occurs.  **4. Health**  Candidates for and any person holding the office must be fully competent and capable of undertaking the duties attached to the office and be in a state of health such as would indicate a reasonable prospect of ability to render regular and efficient service.  **5. Character**  Candidates for and any person holding the office must be of good character. |
| **Post Specific Requirements** | Demonstrate depth and breadth of nursing experience as relevant to the post including clinical practice in an Emergency Department **or** in a related Assessment Unit **or** Patient Flow / Bed Management. |
| **Other requirements specific to the post** | Access to appropriate transport to fulfil the requirements of the role. |
| **Skills, competencies and/or knowledge** | **Candidates must demonstrate:**  **Professional/Clinical Knowledge**   * A high degree of commitment, professionalism and dedication to the philosophy of nursing and quality health care provision. * Relevant knowledge, expertise and experience from an acute hospital perspective in order to discharge the duties of this senior nursing post. * Evidence of policy development and the ability to translate policy into action. * Knowledge and experience of quality audit/assurance systems/data collation and interpretation.   **Planning and Organising Resources**   * An ability to plan, organise and deliver services in an efficient, effective and resourceful manner, within a model of patient centred care and value for money. * An ability to manage deadlines and effectively handle multiple tasks.   **Building and Maintaining Relationships incl. Leadership, Staff Management & Team Skills**   * Credible clinical and organisational leadership skills and ability to influence others. * Flexibility and openness to change and ability to lead and support others in a changing environment, evidence of engagement and leadership of a change management initiative. * An ability to manage, motivate and develop staff to maximize performance at work. * The ability to foster a learning culture amongst staff and colleagues to drive continuous improvement in services to patients. * An ability to work effectively with multi-disciplinary teams.   **Evaluating Information and Judging Situations**   * The ability to evaluate information and solve problems.   **Commitment to Quality Care**   * Understanding of, and commitment to, the underpinning requirements and key processes in providing quality patient centred care. * An ability to monitor and evaluate service performance and levels of care. * Knowledge of quality improvement methodologies and their application.   **Communication and Interpersonal Skills**   * Effective communications and interpersonal skills including; the ability to present information in a clear and concise manner and write reports and business cases; the ability to engage collaboratively with all stakeholders; the ability to give constructive feedback. * Competency in general use of information technology-computers, office functions, internet for research purposes, email, preparation of presentation materials etc., a willingness to learn. |
| **Campaign Specific Selection Process**  **Ranking/Shortlisting / Interview** | A ranking and or shortlisting exercise may be carried out on the basis of information supplied in your application form. The criteria for ranking and or shortlisting are based on the requirements of the post as outlined in the eligibility criteria and skills, competencies and/or knowledge section of this job specification. Therefore it is very important that you think about your experience in light of those requirements.  Failure to include information regarding these requirements may result in you not being called forward to the next stage of the selection process.  Those successful at the ranking stage of this process (where applied) will be placed on an order of merit and will be called to interview in ‘bands’ depending on the service needs of the organisation. |
| **Code of Practice** | The Health Service Executive will run this campaign in compliance with the Code of Practice prepared by the Commission for Public Service Appointments (CPSA). The Code of Practice sets out how the core principles of probity, merit, equity and fairness might be applied on a principle basis. The Code also specifies the responsibilities placed on candidates, facilities for feedback to applicants on matters relating to their application when requested, and outlines procedures in relation to requests for a review of the recruitment and selection process and review in relation to allegations of a breach of the Code of Practice. Additional information on the HSE’s review process is available in the document posted with each vacancy entitled “Code of Practice, information for candidates”.  Codes of practice are published by the CPSA and are available on [www.hse.ie/eng/staff/jobs](http://www.hse.ie/eng/staff/jobs) in the document posted with each vacancy entitled “Code of Practice, information for candidates” or on [www.cpsa.ie](http://www.cpsa.ie). |
| The reform programme outlined for the Health Services may impact on this role and as structures change the job description may be reviewed.  This job description is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive nor restrictive and is subject to periodic review with the employee concerned. | |



**Director of Nursing, Assistant (Emergency Department – Patient Flow)**

**Terms and Conditions of Employment**

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| **Tenure** | The current vacancy available is permanent and whole-time.  The post is pensionable. A panel may formed from this recruitment campaign and future permanent or specified purpose vacancies of full time or part time hours will be filled from this panel. The tenure of these posts will be indicated at “expression of interest” stage.  Appointment as an employee of the Health Service Executive is governed by the Health Act 2004 and the Public Service Management (Recruitment and Appointments) Act 2004 and Public Service Management (Recruitment and Appointments) Amendment Act 2013. |
| **Remuneration** | The salary scale for the post of Assistant Director of Nursing (Band 1) (as at 01/04/2017) is:  €55,870 - €56,952 - €57,996 - €61,201 - €62,210 - €63,382 - €64,477 - €65,566 - €66,066 |
| **Working Week** | The standard working week applying to the post will be confirmed at Job Offer Stage |
| **Annual Leave** | The annual leave associated with the post will be confirmed at Job Offer Stage |
| **Superannuation** | This is a pensionable position with the HSE. The successful candidate will upon appointment become a member of the appropriate pension scheme. Pension scheme membership will be notified within the contract of employment. Members of pre-existing pension schemes who transferred to the HSE on the 01st January 2005 pursuant to Section 60 of the Health Act 2004 are entitled to superannuation benefit terms under the HSE Scheme which are no less favourable to those which they were entitled to at 31st December 2004. |
| **Probation** | Every appointment of a person who is not already a permanent officer of the Health Service Executive or of a Local Authority shall be subject to a probationary period of 12 months as stipulated in the Department of Health Circular No.10/71. |
| **Protection of Persons Reporting Child Abuse Act 1998** | As this post is one of those designated under the Protection of Persons Reporting Child Abuse Act 1998, appointment to this post appoints one as a designated officer in accordance with Section 2 of the Act.  You will remain a designated officer for the duration of your appointment to your current post or for the duration of your appointment to such other post as is included in the categories specified in the Ministerial Direction. You will receive full information on your responsibilities under the Act on appointment. |
| **Infection Control** | Have a working knowledge of Health Information and Quality Authority (HIQA) Standards as they apply to the role for example, Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc. and comply with associated HSE protocols for implementing and maintaining these standards as appropriate to the role. |
| **Health & Safety** | It is the responsibility of line managers to ensure that the management of safety, health and welfare is successfully integrated into all activities undertaken within their area of responsibility, so far as is reasonably practicable. Line managers are named and roles and responsibilities detailed in the relevant Site Specific Safety Statement (SSSS).  Key responsibilities include:   * Developing a SSSS for the ward/department/service[[1]](#footnote-1), as applicable, based on the identification of hazards and the assessment of risks, and reviewing/updating same on a regular basis (at least annually) and in the event of any significant change in the work activity or place of work. * Ensuring that Occupational Safety and Health (OSH) is integrated into day-to-day business, providing Systems Of Work (SOW) that are planned, organised, performed, maintained and revised as appropriate, and ensuring that all safety related records are maintained and available for inspection. * Consulting and communicating with staff and safety representatives on OSH matters. * Ensuring a training needs assessment (TNA) is undertaken for employees, facilitating their attendance at statutory OSH training, and ensuring records are maintained for each employee. * Ensuring that all incidents occurring within the relevant ward/department/service are appropriately managed and investigated in accordance with HSE procedures[[2]](#footnote-2). * Seeking advice from health and safety professionals through the National Health and Safety Function Helpdesk as appropriate. * Reviewing the health and safety performance of the ward/department/service and staff through, respectively, local audit and performance achievement meetings for example.   **Note**: Detailed roles and responsibilities of Line Managers are outlined in local **SSSS** |
| **Ethics in Public Office 1995 and 2001**  **Positions remunerated at or above the minimum point of the Grade VIII salary scale (€ 65,812 as at 01.04.2017)** | Positions remunerated at or above the minimum point of the Grade VIII salary scale (€ 65,812 as at 01.04.2017) are designated positions under Section 18 of the Ethics in Public Office Act 1995. Any person appointed to a designated position must comply with the requirements of the Ethics in Public Office Acts 1995 and 2001 as outlined below;  A) In accordance with Section 18 of the Ethics in Public Office Act 1995, a person holding such a post is required to prepare and furnish an annual statement of any interests which could materially influence the performance of the official functions of the post. This annual statement of interest should be submitted to the Chief Executive Officer not later than 31st January in the following year.  B) In addition to the annual statement, a person holding such a post is required, whenever they are performing a function as an employee of the HSE and have actual knowledge, or a connected person, has a material interest in a matter to which the function relates, provide at the time a statement of the facts of that interest. A person holding such a post should provide such statement to the Chief Executive Officer. The function in question cannot be performed unless there are compelling reasons to do so and, if this is the case, those compelling reasons must be stated in writing and must be provided to the Chief Executive Officer.  C) A person holding such a post is required under the Ethics in Public Office Acts 1995 and 2001 to act in accordance with any guidelines or advice published or given by the Standards in Public Office Commission. Guidelines for public servants on compliance with the provisions of the Ethics in Public Office Acts 1995 and 2001 are available on the Standards Commission’s website <http://www.sipo.gov.ie/> |

1. A template SSSS and guidelines are available on the National Health and Safety Function/H&S web-pages [↑](#footnote-ref-1)
2. See link on health and safety web-pages to latest Incident Management Policy [↑](#footnote-ref-2)