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**Medical Scientist, Senior (Division of Anatomic Pathology)**

**AMENDED - Job Specification, Terms & Conditions**

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| **Job Title and Grade** | **Medical Scientist, Senior (Division of Anatomic Pathology)**  *(Grade Code: 3877)* |
| **Campaign Reference** | **HBS06029** |
| **Closing Date** | **Monday 30th April 2018 At 12 noon** |
| **Proposed Interview Date (s)** | **Week Commencing 28th May 2018** |
| **Taking up Appointment** | A start date will be indicated at job offer stage |
| **Location of Post** | **Galway University Hospitals,**  **Saolta University Health Care Group**  There are currently two permanent whole-time posts available in the Diagnostics Directorate, Division of Anatomic Pathology, Department of Histopathology, Cytopathology & Molecular Pathology, University Hospital Galway. The successful candidate may be required to work in any service area within the vicinity as the need arises.  A panel may be formed as a result of this campaign for **Galway University Hospitals** from which current and future, permanent and specified purpose vacancies of full or part-time duration may be filled. |
| **Informal Enquiries** | Ms. Terri Muldoon, Chief Medical Scientist  **Tel:** 00 353 (0)91 54 4408  **E-mail:** [terri.muldoon@hse.ie](mailto:terri.muldoon@hse.ie) |
| **Details of Service** | Galway University Hospital is a Level 4 hospital delivering a range of high quality services. It 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.  Effective Laboratory Medicine Services are of critical importance to the overall effectiveness of health service and are essential to good clinical practice. The Laboratory Services at GUH have developed and evolved to support not only Acute Hospital Care, but also General Practice, Community Care Services and Psychiatric Services. The Laboratory is an integral part of modern health care and endeavours to provide an open access consultation service for Hospital and Community Practitioners. An efficient and well resourced laboratory testing and consultation service is essential to meaningful health promotion initiatives, to plans to empower General Practitioners to manage illness in the Community and to the efficient utilization of hospital beds and other clinical resources  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 fulfil 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 Chief Medical Scientist, Division of Anatomic Pathology, UHG. |
| **Purpose of the Post** | The purpose of the post is to participate in the management and delivery of a high quality Anatomic Pathology Laboratory Service. |
| **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. * Demonstrate behaviour consistent with the Mission and Values of the Hospital. * 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 etc and comply with associated HSE protocols for implementing and maintaining these standards as appropriate to the role. * To support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service.   **Scientific/Professional**  *The Medical Scientist, Senior (Division of Anatomic Pathology) will:*   * The successful applicant will require knowledge of the principles and methods routinely and specialised that are used in the Division of Anatomic Pathology laboratory. S/he should be familiar with the equipment in use in the Anatomic Pathology laboratory, as once proficient s/he will be required to troubleshoot any problems that may arise. In the performance of his/her duties a thorough understanding of results normally obtained in the Anatomic Pathology laboratory will be required, in order that potentially aberrant results, caused by deficiencies of reagents, equipment, or technique can be recognised and investigated. * S/he will take responsibility for planning, prioritising and supervising the analytical work of the laboratory in accordance with departmental policy. S/he will re-prioritise work as necessary, in response to increased urgency of testing, or decreased numbers of available staff. As required s/he will participate in the analytical work of the section. * S/he will oversee a schedule for the timely servicing of all laboratory equipment. S/he will be responsible for equipment performance, maintenance, condition, quality control and record keeping of all instruments and analysers within the Department. * S/he will be responsible for overseeing the management of consumables and reagent stocks in the laboratory as delegated. S/he will order reagents and consumables as directed by the Chief Medical Scientist. She/he will oversee the stock performance management system already in place in the laboratory. * S/he will contribute to the evaluation, procurement, validation and implementation of new analytical equipment, methods and software. * S/he will undertake suitable training and development programmes to successfully acquire non-core competencies and thereafter maintain the required standards of competence when undertaking duties. * S/he will design and deliver training to staff within the department to support the training of new and existing medical scientists, student medical scientists and laboratory aides working in the department. S/he will maintain records of staff training and competency testing. * S/he will ensure that standard operating procedures are in place, understood, and adhered to by all staff. * S/he will maintain attendance/absence records and organise duty rosters as delegated by the Chief Medical Scientist. * S/he will undertake relevant training for electronic information systems in place & under development and be familiar and proficient with the use of the information technology systems within the department. * S/he will be responsible for the conduct of staff being supervised in respect to their timekeeping, behaviour and safety. S/he will report any problems to the Chief Medical Scientist. S/he will promote a culture in the workplace where each individual is respected and valued, and diversity is welcomed. * S/he will participate fully as a team member, sharing knowledge and information and supporting colleagues to promote a cohesive laboratory team and the achievement of team objectives. * S/he will participate in laboratory meetings particularly in relation to assessment of performance, development of the service and organisational changes. S/he will ccontribute to effective communication within the department. * In co-operation with the Consultant Head of Department, Chief Medical Scientist and other designated senior staff, s/he will play a leading role in the introduction of new ideas and methods according to HSE policy * S/he will pperform to the highest professional standards and participate in developing and implementing a service that supports the clinical needs of patients and is consistent with the mission, vision, values and strategic plan of the HSE. * S/he will behave at all times in a manner appropriate to their profession and the obligations and constraints of the post, including an awareness of the primacy of the patient, maintaining patient confidentiality and relating to patients, clients and other stakeholders in an understanding and sympathetic way.     **Quality**  *The Medical Scientist, Senior (Division of Anatomic Pathology) will:*   * S/he will educate and train the laboratory staff in quality principles and practice. S/he will establish and maintain procedures for ensuring high standards of quality, reliability and safety. S/he will interact with all members of the laboratory staff to promote quality improvement efforts. * S/he will maintain a system for document control, and will review and approve all quality documentation i.e. SOPs, Quality Manual, User Manual, validation documentation etc on an ongoing basis. * S/he will schedule, supervise and implement a program of internal and external audits against defined quality performance measures and ensure that effective immediate follow up actions are taken. * S/he will investigate result and service complaints and incidents in relation to the Anatomic Pathology Department and ensure that effective, immediate follow up actions are taken. * S/he will maintain databases for tracking non-conformances, associated corrective and preventative actions, and service complaints. * S/he will follow up on external inspections and verify the completion of corrective actions as required by the reports of the inspectors. * S/he will have responsibility for the laboratory’s change control system, to manage changes to validated processes, equipment, procedures in a controlled manner. S/he will organise re-qualification/re-validation studies where required. * S/he will manage a system that assesses service providers and suppliers to assure the quality of services, reagents and materials provided to the laboratory. * S/he will ensure through the above activities, and by any other necessary means, that the Laboratory meets the requirement of relevant external regulatory/advisory bodies e.g. Irish National Accreditation Board (INAB).  Financial *The Medical Scientist, Senior (Division of Anatomic Pathology) will*   * Ensure most effective use of resources * Assist in all costing activities within the laboratory * Provide appropriate statistical and management information as needed   **Health & Safety**  *The Medical Scientist, Senior (Division of Anatomic Pathology) will*   * S/he will be familiar with the Health & Safety policies of the HSE and the department and ensure that they are followed to maintain a safe working environment for all employees and visitors. * S/he will implement agreed policies, procedures and safe professional practice and adhere to relevant legislation, regulations and standards. * S/he will work in a safe manner with due care and attention to the safety of self, patient and others. * S/he will be aware of risk management issues, identify risks and take appropriate action. S/he will report any adverse incidents or near misses. * S/he will assist and cooperate with other staff in procedures aimed at accident prevention in the laboratory. * S/he will adhere to department policies in relation to the care and safety of any equipment supplied for the fulfilment of duty. * S/he will take appropriate action where any malfunctions or defects in equipment are reported.   **Education & Training**  *The Medical Scientist, Senior (Division of Anatomic Pathology) will*   * S/he will participate in mandatory training programmes. * S/he will take responsibility for, and keep up to date with current practice by participating in continuing professional development. * S/he will actively promote continuous professional education and development. * S/he will monitor and maintain up-to-date personal training/ retraining records in accordance with laboratory policy. * S/he will engage in the performance review processes for departmental personal development planning. * S/he will facilitate arrangements in and provide education and training for scientific, medical personnel and others as appropriate.   **KPI’s**   * 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 Buildings is not permitted. * Hospital uniform code must be adhered to. * Provide information that meets the need of Senior Management. * To support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service.   **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 has a duty to familiarise themselves with the relevant Organisational Policies, Procedures & Standards and attend training as appropriate in the following areas:   + Continuous Quality Improvement Initiatives   + Document Control Information Management Systems   + Risk Management Strategy and Policies   + Hygiene Related Policies, Procedures and Standards   + Decontamination Code of Practice   + Infection Control Policies   + Safety Statement, Health & Safety Policies and Fire Procedure   + Data Protection and confidentiality Policies * 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 Group’s 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 this 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 post holder’s responsibility 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** | **1. Professional Qualifications & Experience, etc.**   1. Candidates for appointment must possess: 2. Bachelor of Science (Honours) in Medical Science from the Galway/Mayo Institute of Technology.   **Or**   1. Bachelor in Science (Applied Science) Honours degree (Biomedical option) from the University of Dublin/Dublin Institute of Technology, Kevin Street ***(Awarded prior to 2002)***.  Or  1. Diploma in Medical Laboratory Sciences of the Dublin Institute of Technology, Kevin Street or the Cork Institute of Technology ***(Awarded prior to 1994)***.  Or  1. Bachelor of Biomedical Science, Cork Institute of Technology (CIT) AND BSc (Honours) Biomedical Sciences, University College Cork (UCC). ***(Awarded prior to 2013)***.  Or  1. Bachelor in Science Honours degree in Biomedical Science form the Joint University College Cork – Cork Institute of Technology course ***AND*** Diploma in Clinical Laboratory Practice.   **Or**   1. Certificate in Medical Laboratory Science ***awarded before 1997*** by Dublin Institute of Technology (DIT), Cork Institute of Technology (CIT) or Galway/Mayo Institute of Technology (GMIT).   **Or**   1. Bachelor of Science (Honours) Biomedical Science, Dublin Institute of Technology (DIT).   **Or**   1. An equivalent qualification validated by the Academy of Clinical Science and Laboratory Medicine (ACSLM).   **Or**   1. A non-Irish Medical Scientist qualification recognised by the Academy of Clinical Scientists and Laboratory Medicine.   **And**   1. Possess one of the following NFQ Level 9 post graduate qualifications or equivalent accredited by the Academy of Clinical Science and Laboratory Medicine:  * MSc Clinical Laboratory Science, Dublin Institute of Technology * MSc Clinical Chemistry, University of Dublin, Trinity College * MSc Biomedical Science, University of Ulster * MSc Biomedical Science, Cork Institute of Technology / University College Cork * MSc Molecular Pathology, Dublin Institute of Technology / Dublin University   **Or**   1. Have attained the Fellowship examination of the Institute of Biomedical Science ***(Awarded prior to 1999)***.   **And**   1. Possess four years full time clinical experience (or an aggregate of four years’ experience) as a medical scientist in a medical laboratory since qualifying as a Medical Laboratory Scientist.   **And**   1. Demonstrate evidence of Continuous Professional Development.   **And**   1. Candidates must have the requisite knowledge and ability (including a high standard of suitability and management ability) for the proper discharge of the duties of the office.   **2. Age**  Age restrictions shall only apply to a candidate where he/she is not classified as a new entrant (within the meaning of the Public Service Superannuation Act, 2004). A candidate who is not classified as a new entrant must be under 65 years of age.  **3. Health**  A candidate 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.  **4. Character**  Each candidate for and any person holding the office must be of good character. |
| **Post Specific Requirements** | Demonstrate depth and breadth of post qualification experience in Histopathological techniques as relevant to the role including:   * Demonstrate evidence of theoretical knowledge and practical skills in Immunocytochemistry, Cryotomy and Special Stains. * Demonstrate evidence of theoretical knowledge and practical skills in non-gynaecological Cytology. * Demonstrate evidence of theoretical knowledge and practical skills in specialised techniques, i.e., enzyme histochemistry and direct immunofluorescence. * Demonstrate evidence of theoretical knowledge and practical skills in diagnostic molecular pathology techniques. |
| **Other requirements specific to the post** | Will be included at expression of interest stage, if applicable. |
| **Skills, competencies and/or knowledge** | ***Candidate must:***  **Professional Knowledge**   * Demonstrate evidence of theoretical knowledge and practical skills of Histology. * Demonstrate knowledge in:   + Histology specimen processing including specimen labelling, assisting pathologist lead cut-up, performing medical scientist lead cut-up, tissue processing, embedding, sectioning, coverslipping, slide issuing and frozen sectioning.   + Tissue staining procedures including routine and special stains.   + Automated Immunohistochemistry techniques.   + Autoantibody manual and automated testing methodologies.   + Andrology testing methodologies. * Demonstrate evidence of theoretical knowledge and practical skills of Immunology   (Autoantibody diseases).   * Demonstrate evidence of theoretical knowledge and practical skills of Andrology. * Demonstrate the ability to work with laboratory automation. * Demonstrate knowledge of verification, validation and performance monitoring of laboratory techniques and equipment. * Demonstrate awareness and compliance with HSE policies, procedures, guidelines and standards and promotion of this to others. * Demonstrate experience in documentation preparation. * Demonstrate evidence of computer/IT Skills. * Demonstrate evidence of commitment to continuing professional development. * Demonstrate evidence of project management skills. * Demonstrate capacity for management responsibility and demonstration of initiative, including decision making. Improve efficiency within working environment ability to evolve and adapt to a Rapid Changing Environment. * Demonstrate an awareness of the safety requirements in a clinical laboratory. * Be aware of and adhere to relevant standards policies and legislation for example Health and Safety, Freedom of Information Act 1997, Childcare Act, HIQA Standards.   **Planning & Managing Resources**   * Demonstrate evidence of effective planning and organising skills. * Demonstrate the ability to manage self in a busy working environment. * Demonstrate experience of managing large workloads, ability to work under pressure and multi-task. * Demonstrate good time management skills.   **Commitment to Providing a Quality Service**   * Demonstrate a strong commitment to the provision of a quality service. * Demonstrate up-to-date knowledge of best practice in delivering a Quality Laboratory Service and awareness of the requirements of ISO 15189. * Demonstrate flexibility and openness to change. * Demonstrate a focus on quality and patient centred service provision.   **Evaluating Information & Judging Situations**   * Demonstrate ability to design and implement structured policies and systems for the management of service delivery in consultation with key stakeholders and ensure clear role accountability for service levels, quality and decision making discretion. * Demonstrate the ability to evaluate information, solve problems and make effective decisions. * Demonstrate the ability to identify and resolve system failures and anomalies   **Managing & Developing (Self & Others)**   * Demonstrate experience in staff training and maintaining staff training records * Demonstrate ability to work to your own initiative, work independently and as a lead person and ability to manage a team. * Demonstrate ability to maintain self control in difficult and challenging situations * Demonstrate supervisory, management and leadership experience * Demonstrate effective communication skills including the ability to present information in a clear and concise manner. |
| **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 specification may be reviewed.  This job specification 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. | |

**Medical Scientist, Senior (Division of Anatomic Pathology)**

**Terms and Conditions of Employment**

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| **Tenure** | The current vacancies available are permanent and whole-time.  The posts are pensionable. A panel may be 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 posts is (as at 01/04/2017):  €48,979 – €51,189 – €53,150 – €55,156 – €57,222 – €59,253 – €61,344 – €63,414 – €65,500 |
| **Working Week** | The standard working week applying to the posts will be confirmed at job offer stage.  HSE Circular 003-2009 “Matching Working Patterns to Service Needs (Extended Working Day / Week Arrangements); Framework for Implementation of Clause 30.4 of Towards 2016” applies. Under the terms of this circular, all new entrants and staff appointed to promotional posts from Dec 16th 2008 will be required to work agreed roster / on call arrangements as advised by their line manager. Contracted hours of work are liable to change between the hours of 8am-8pm over seven days to meet the requirements for extended day services in accordance with the terms of the Framework Agreement (Implementation of Clause 30.4 of Towards 2016). |
| **Annual Leave** | The annual leave associated with the posts 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. |
| **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 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 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. |

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)