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**Job Specification & Terms and Conditions**

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| **Job Title and Grade** | Rehabilitation Coordinator, Galway University Hospitals  Grade Code: 3070 |
| **Campaign Reference** | G10256 |
| **Closing Date** | Tuesday, 22nd April 2025 at 10am via Rezoomo |
| **Proposed Interview Date (s)** | Interviews will be held as soon as possible after the closing date. Candidates will normally be given at least one week’s notice of interview. The timescale may be reduced in exceptional circumstances. |
| **Remuneration** | The salary scale for the post **as of 01/03/2025** is:  69,998 71,349 72,737 74,117 75,496 76,949 78,478 80,004 81,228  New appointees to any grade start at the minimum point of the scale. Incremental credit will be applied for recognised relevant service in Ireland and abroad (Department of Health Circular 2/2011). Incremental credit is normally granted on appointment, in respect of previous experience in the Civil Service, Local Authorities, Health Service and other Public Service Bodies and Statutory Agencies. |
| **Taking up Appointment** | To be agreed at job offer stage |
| **Organisational Area** | HSE West & North West Region |
| **Location of Post** | Initial assignment Galway University Hospitals and within the IHA structures as appropriate when established. There is currently 1 year fixed term whole-time vacancies available.  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 **Galway University Hospital** from which current and future permanent and specified purpose vacancies of full or part time duration may be filled. |
| **Informal Enquiries** | Maria Molloy Deputy General Manager, GUH  **Email:** Mariam.molloy@hse.ie  **Tel:** 091 893668 |
| **Details of Service** | The West and North West region provides acute and specialist hospital and community services to the West and North West of Ireland – counties Galway, Mayo, Roscommon, Sligo, Leitrim, Donegal and adjoining counties.  The region comprises of 7 hospitals across 8 sites:   * [Letterkenny University Hospital (LUH)](https://saolta.ie/hospital/letterkenny-university-hospital) * [Mayo University Hospital (MUH)](https://saolta.ie/hospital/mayo-university-hospital) * [Portiuncula University Hospital (PUH)](https://saolta.ie/hospital/portiuncula-university-hospital) * [Roscommon University Hospital (RUH)](https://saolta.ie/hospital/Roscommon%20University%20Hospital) * [Sligo University Hospital (SUH)](https://saolta.ie/hospital/sligo-university-hospital) incorporating Our Lady’s Hospital Manorhamilton (OLHM) * Galway University Hospitals (GUH) incorporating [University Hospital Galway (UHG)](https://saolta.ie/hospital/university-hospital-galway) and Merlin Park University Hospital   The region’s Academic Partner is University of Galway.  The region covers one third of the land mass of Ireland, it provides health care to a population of 830,000, employs over 20,000 staff  **Vision**  Our vision is to be a leading academic Hospital providing excellent integrated patient-centred care delivered by skilled caring staff.  **Guiding Principles**  Care - Compassion - Trust – Learning  Our guiding principles are to work in partnership with patients and other healthcare providers across the continuum of care to:   * Deliver high quality, safe, timely and equitable patient care by developing and ensuring sustainable clinical services to meet the needs of our population. * Deliver integrated services across the Hospitals and communities, with clear lines of responsibility, accountability and authority, whilst maintaining individual hospital site integrity. * Continue to develop and improve our clinical services supported by education, research and innovation, in partnership with NUI Galway and other academic partners.   Recruit, retain and develop highly-skilled multidisciplinary teams through support, engagement and empowerment. |
| **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 GUIDING VALUES**  **Respect** - We are 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 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 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.  **Team working** – we engage and empower our staff, sharing best practice and strengthening relationships with our partners and patients to achieve our Mission.  **Communication** - we 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** | * Your professional reporting relationship will be to the appropriate discipline manager. * Professionally accountable to Assistant Director of Nursing or Clinical Head of Discipline HSCP within GUH. |
| **Purpose of the Post** | * The job holder will work with the Multidisciplinary teams (including but not exclusive to medical, nursing, Patient flow coordinators, Discharge coordinators, Integrated discharge managers, Occupational Therapy, Physiotherapy, Speech and Language Therapy, Social Work and Therapy Assistants). * The job holder will liaise with Hospital, Older persons, Primary Care and Disability teams as appropriate. |
| **Principal Duties and Responsibilities** | * The post holder will support the principle that 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 awareness of the primacy of the patient in relation to all hospital activities. * Performance management systems are part of the role and you will be required to participate in the hospital performance management programme   The Rehabilitation Coordinator will be responsible for the co-ordination of patient transfers to the most appropriate rehabilitation facility / service to meet their needs. He/she will work across services (acute & Community) to support safe and effective admissions which meets the identified rehab needs. The purpose of the role is to:   * Coordinate, streamline and assist with appropriate admissions via one source of referral to the service. * Maximise the utilisation of the operational rehabilitation beds through establishing, implementing, and overseeing optimal referral, admission, and discharge planning procedures for each rehabilitation stream of the hospital. Liaise with relevant ward/departments managers and hospital administrative functions including Corporate and Patient Services (Admissions) to ensure that processes are applied consistently across the organisation. * Within boundaries of professional competence, act as a ‘trusted assessor’ for admitting consultants by reviewing referred patients in other hospitals and community settings, collecting, and evaluating relevant data and by requesting separate professional input where required. Participate in MDT meetings to ensure Rehab service delivery is coordinated. * Maximise ‘patient flow’ through services by high-level monitoring of patient progress, identifying variance from target length of stay and escalating issues to senior management, as required. * Optimise the recording, appropriate sharing, distribution, and reporting (including visualisation) of referral, admission, and discharge data, including data on delayed transfers of care and adherence with target length of stays. Apply information technology to enhance these processes. * Lead on the development/establishment of Rehabilitation pathway service model for persons within the RHA. * Provide leadership and expertise in rehabilitation initiatives as relevant to the role;   ensuring appropriate care pathways develop with a focus on person-centred.  **It is to be noted that this is a developing post and is subject to change in line with service developments and requirements.**  **Professional/Clinical:**   * Provide a high level of professional and clinical leadership. * Support the development of dynamic linkages between GUH, Community and external service providers, developing a person-centered care planning approach that supports robust and timely communication across care settings. * To establish and maintain clear lines of communication with all aspects of the service e.g. to attend multidisciplinary and other team meetings and case conferences as appropriate to the post. * Liaise with referring hospital/ consultant / treating team to ensure that referral information, rehabilitation needs checklist and assessment process is complete and provides rehabilitation needs information to facilitate the transfer of patients from acute to post-acute care and between post acute services. * To enhance continuity of care in facilitating an effective communication model * To support the multi-disciplinary team to consider best options for rehabilitation of patients. * To develop, implement and evaluate standards of MDT-led and MDT-provided care for the patient that ensures each patient in the specialist area has a defined individual programme of care to meet their needs and in line with integrated discharge planning compliance with specialist and/or complex needs. * Communicate results of assessments, treatment / care programmes and recommendations to the team and relevant others in accordance with service policy / as required. * To maintain satisfactory clinical records in keeping with best practice, professional and statutory guidelines and to liaise with voluntary and statutory supports relevant to the post. * Formulate, manage and implement best practice policies and procedures. * Ensure that service users and others are treated with dignity and respect. * Maintain professional standards in relation to confidentiality, ethics and legislation. * Operate within Scope of Practice - seek advice and assistance from their manager with any cases or issues that prove to be beyond the scope of their professional competence in line with principles of best practice and clinical governance. * Ensure staff work in compliance within the Scope of Practice. * Development of an education plan to roll out the use of rehabilitation needs assessment; rehabilitation complexity scale and rehabilitation prescription. * Evaluation and development of clinical practice as appropriate ensuring compliance with national and local guidelines, such as Rehabilitation Medicine, Trauma and Orthopaedics and Care of the Older Person models of care.   **Management/Administration:**   * Provide an efficient, effective, and high-quality service, respecting the needs of each patient, family and/or carer. * Effectively manage time and caseload to meet changing and developing service needs. * Continually monitor the service to ensure it reflects current needs. * Ensure that beds are utilised fully and appropriately * Implement and manage identified changes. * Work with the service provider, GUH management and the HSE consultant to ensure continuous evaluation of processes and procedures to ensure optimal processes in place. * Promote a culture that values diversity and respect in the workplace. * Contribute to the strategic management and planning process. Manage and evaluate the implementation of the service plan and budget. * Lead on practice development within the clinical area. * Manage resources, including staff, efficiently and effectively to ensure the highest standards of service. * Provide reports on activity and services in a digital format as required. * Develop and manage departmental policy with a particular emphasis on change management. Monitor as appropriate and lead on proactive improvement. * Ensure compliance with legal requirements, policies and procedures affecting service users, staff and other hospital matters. * Evaluate existing rehabilitation pathways and work with relevant stakeholders to develop future pathways.   **Patient Advocacy:**   * To ensure patients and families wishes are considered in all decision making regarding their discharge pathway. * To ensure patient and family involvement in discharge planning early in process * To ensure all patients who require on-going rehabilitation have equity of access to rehabilitation pathways.   **Quality/Audit/Research:**   * To understand the role of the Rehabilitation Co-ordinator within the organisation. * To develop and monitor adherence to local policies, procedures and guidelines. * To promote a quality of service by reviewing and evaluating the service regularly and striving to find ways in which standards of quality and efficiency can be improved within the scope of the role. * To communicate service development needs and changes in a clear and comprehensive manner. * To optimise the use of available resources to achieve effective outcomes when planning and delivering a flexible service that meets the needs of all service users. * To develop and implement service / business plans, quality initiatives, audits etc. and to report on outcomes. * In consultation with other disciplines, implement and assess quality management programmes as appropriate. * Participate in clinical audit as required and ensure that clinical audits are performed in their area(s) of responsibility. * Initiate and participate in research studies as appropriate. * Assist in the setting and monitoring of clinical standards, evaluation of clinical practice, clinical research, quality control and clinical audit in the specialist area. * Engage in the development and utilisation of data for planning and improving outcomes in order to facilitate and promote an integrated care model for older persons, including specific reference to datasets that inform the integrated development of rehabilitation services and their impact.   **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 Acts 2005 and 2010 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 Region’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. * The post holders’ 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 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 Description 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 closing date:    **Statutory Registration, Professional Qualifications, Experience, etc**  (a) Candidates must at the latest date of application:  (i) Be a Health Care professional with a recognised professional qualification in Therapy or Nursing grade.  **AND**  (ii) Be entitled to be so registered on an appropriate professional register e.g. CORU, NMBI or other appropriate clinical/professional register.  **OR**  (iii) Be eligible for membership https://www.coru.ie/ (https://www.nmbi.ie/)  **OR**  (iv) Health and social care therapy applicants who satisfy the conditions set out in Section 91 of the Health and Social Care Professionals Act 2005, (see note 1 below\*), must submit proof of application for registration with the Registration Board at CORU. The acceptable proof is correspondence from the Health and Social care Registration Board at CORU confirming their application for registration as a Section 91 applicant.  *Note 1\*: Section 91 candidates are individuals who qualified before 30 September 2016 and Have been engaged in the practice of the profession in the Republic of Ireland for a minimum of 2 years fulltime (or an aggregate of 2 years fulltime), between 30th September 2011 and 30th September 2016 are Considered to be Section 91 applicants under the Health and Social Care Professionals Act 2005.*  **AND**  (v) All candidates must have 5 years full time (or equivalent) years post qualification  clinical experience of which 4 years full time are preferably in the falls and bone health speciality area, Older Persons services (or equivalent) and in a post within the healthcare service, which demonstrates evidence of a management/leadership role in a multidisciplinary/interdisciplinary team.  **AND**  (vi) Professional Development and Practice:  All candidates must demonstrate evidence of continuing professional development relevant in the falls and bone-health speciality area (Older Persons Services) in the form of post-graduate qualifications or relevant courses.  **AND**  All candidates must demonstrate achievement in the areas of clinical audit, quality  improvement initiatives, practice development, teaching and research.  **AND**  All candidates must demonstrate experience of interacting with multiple internal  and external stakeholders as relevant to the role.  **AND**  (b) All candidates must have the requisite clinical, managerial and administrative knowledge and ability (including a high standard of suitability and management ability) for the proper  discharge of the responsibilities and duties of this role.  **Annual Registration**  (i) On appointment, practitioners must maintain annual registration on their professional  register maintained by CORU or NMBI.  **AND**  (ii) Practitioners must confirm annual registration with CORU or NMBI to the HSE by way  of the annual Patient Safety Assurance Certificate (PSAC).  **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.  **Character**  Each candidate for and any person holding the office must be of good character |
| **Post specific Requirements** | * Evidence of relevant management and/or leadership experience and in particular awareness of national rehabilitation model of care. |
| **Other requirements specific to the post** | * Access to own transport as the post will involve travel. |
| **Skills, competencies and/or knowledge** | **Professional Knowledge**   * Demonstrate a high degree of commitment, professionalism and dedication to the philosophy of the post holders profession and quality health care provision. * Demonstrate relevant knowledge, expertise and experience in order to discharge the duties of this senior level post. * Demonstrate experience of innovative clinical practice and promoting evidence-based decision-making. * Demonstrate evidence of policy development and the ability to translate policy into working practices/action. * Demonstrate knowledge and experience of quality audit/assurance systems. * **Planning and Organising Resources** * Demonstrate ability to plan, prioritise, organise and deliver services in an efficient, effective and resourceful manner, within a model of patient centred care and value for money. * Demonstrate ability to manage deadlines and effectively handle multiple tasks. * Ability to be self-directed, work on own initiative. * A willingness to be flexible in response to changing local/organisational requirements.   **Building and Maintaining Relationships: Leadership, Managing People & Team Skills**   * Demonstrate leadership skills and ability to influence a large range of internal and external stakeholders, for example but not exhaustive to the local authorities, third sector organisations and patient representative groups. * Demonstrate flexibility and openness to change and ability to lead and support others in a changing environment. * Demonstrate ability to manage, motivate and develop staff to maximize performance at work. * Demonstrate the ability to foster a learning culture amongst staff and colleagues to drive continuous improvement in services to patients. * Demonstrate ability to work effectively with multi-disciplinary teams.   **Evaluating Information and Judging Situations**   * Demonstrate the ability to evaluate information and solve problems.   **Commitment to Quality Care**   * Demonstrate understanding of, and commitment to, the underpinning requirements and key processes in providing quality patient centred care. * Demonstrate an ability to monitor and evaluate service performance and levels of care.   **Communication and Interpersonal Skills**   * Demonstrate effective communications and interpersonal skills including the ability to present information in a clear and concise manner: the ability to engage collaboratively with all stakeholders, the ability to give constructive feedback. * Demonstrate competency in general use of information technology-computers, office functions, internet for research purposes, email, preparation of presentation materials etc. |
| **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. |
| **Diversity, Equality and Inclusion** | The HSE is an equal opportunities employer.  Employees of the HSE bring a range of skills, talents, diverse thinking and experience to the organisation. The HSE believes passionately that employing a diverse workforce is central to its success – we aim to develop the workforce of the HSE so that it reflects the diversity of HSE service users and to strengthen it through accommodating and valuing different perspectives. Ultimately this will result in improved service user and employee experience.  The HSE is committed to creating a positive working environment whereby all employees inclusive of age, civil status, disability, ethnicity and race, family status, gender, membership of the Traveller community, religion and sexual orientation are respected, valued and can reach their full potential. The HSE aims to achieve this through development of an organisational culture where injustice, bias and discrimination are not tolerated.  The HSE welcomes people with diverse backgrounds and offers a range of supports and resources to staff, such as those who require a reasonable accommodation at work because of a disability or long term health condition.  For further information on the HSE commitment to Diversity, Equality and Inclusion, please visit the Diversity, Equality and Inclusion web page at <https://www.hse.ie/eng/staff/resources/diversity/> |
| **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 CPSA is responsible for establishing the principles that should be followed when making an appointment. These are set out in the CPSA Code of Practice. The Code outlines the standards that should be adhered to at each stage of the selection process and sets out the review and appeal mechanisms open to candidates should they be unhappy with a selection process.  The CPSA Code of Practice can be accessed via <https://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. | |



**Terms and Conditions of Employment**

**G10256 Rehabilitation Coordinator**

**Galway University Hospitals**

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| **Tenure** | The current vacancy available is pensionable, temporary and whole time.  A panel may be created from which permanent and specified purpose vacancies of full or part time duration may be filled  Appointment as an employee of the Health Service Executive is governed by the Health Act 2004 and the Public Service Management (Recruitment and Appointment) Act 2004 and Public Service Management (Recruitment and Appointments) Amendment Act 2013. |
| **Working Week** | The standard working week applying to the post is 35 hours.  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 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. |
| **Age** | The Public Service Superannuation (Age of Retirement) Act, 2018\* set 70 years as the compulsory retirement age for public servants.  ***\* Public Servants not affected by this legislation:***  Public servants recruited between 1 April 2004 and 31 December 2012 (new entrants) have no compulsory retirement age.  Public servants recruited since 1 January 2013 are members of the Single Pension Scheme and have a compulsory retirement age of 70. |
| **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 Children Guidance and Legislation** | The welfare and protection of children is the responsibility of all HSE staff. You must be aware of and understand your specific responsibilities under the Children First Act 2015, the Protections for Persons Reporting Child Abuse Act 1998 in accordance with Section 2, Children First National Guidance and other relevant child safeguarding legislation and policies.  Some staff have additional responsibilities such as Line Managers, Designated Officers and Mandated Persons. You should check if you are a Designated Officer and / or a Mandated Person and be familiar with the related roles and legal responsibilities.  For further information, guidance and resources please visit: [HSE Children First webpage](https://www.hse.ie/eng/services/list/2/primarycare/childrenfirst/resources/). |
| **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 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. |
| **Ethics in Public Office 1995 and 2001** | Positions remunerated at or above the minimum point of the Grade VIII salary scale 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 <https://www.sipo.ie/>. |

1. A template SSSS and guidelines are available on [writing your site or service safety statement](https://www2.healthservice.hse.ie/organisation/national-pppgs/writing-your-site-or-service-safety-statement/).

   2 Structures and processes for effective [incident management](https://www2.healthservice.hse.ie/organisation/qps-incident-management/incident-management/) and review of incidents. [↑](#footnote-ref-1)
2. [↑](#footnote-ref-2)