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**Job Specification & Terms and Conditions**

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| **Job Title and Grade** | Midwifery Practice Development Co-Ordinator  Grade Code: 2445 |
| **Campaign Reference** | G9552 |
| **Closing Date** | 10.00am 28th March 2025 via Rezoomo only |
| **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:  70,701 72,071 73,391 77,447 78,724 80,207 81,594 82,971 87,250  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** | **Maternity, Neonatal and Gynaecology services, Galway University Hospitals.**  There is currently **one permanent whole-time** post available in Galway University Hospitals.  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** | Ms Helen Murphy, Director of Midwifery, Galway University Hospital, Co. Galway  Email: [helent.murphy@hse.ie](mailto:helent.murphy@hse.ie)  Tel: 091 544789 |
| **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** | Reports to the Director of Midwifery in Galway University Hospitals.  Liaises with Directors of Midwifery & Managers in other care settings/organisations where students are placed to ensure quality clinical learning environments. |
| **Purpose of the Post** | The purpose of the post is to:   1. Manage and develop the Midwifery Practice Development Department, which will co-ordinate the development of excellence in Midwifery practice and will meet set objectives in set times-scales. 2. Provide effective line management and strategic leadership to the Clinical Placement Coordinator team, ensuring the delivery of high-quality clinical learning environments and robust support systems for students across hospital and external care settings, in alignment with the standards set by the Nursing and Midwifery Board of Ireland (NMBI)." 3. Provide leadership, management, and support to the Midwifery Clinical Skills Facilitator, ensuring the effective implementation and audit of practice guidelines and promoting staff development. 4. Lead and manage the adaptation to midwifery and nursing programme, return to midwifery programme and provide clinical support and guidance to CSF, Preceptors, Clinical Midwife and Nurse Managers. 5. Provide daily oversight and management of Women and Children’s services at the GUH site, working collaboratively as part of the midwifery team and contributing to the operational management and site coverage of maternity services at GUH, as delegated by the Director of Midwifery |
| **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   **Scope of Post:**  The Midwifery Practice Development Co-ordinator will:   1. Develop, implement, monitor and evaluate midwifery practice in all areas of the hospital and other care settings / organisations where students are placed, promote an environment for professional Midwifery practice which consistent with the mission, vision, values of the organisation. 2. Manage the Midwifery service quality assurance programmes in such a way as to support and ensure the delivery of the highest standard of patient focused Midwifery care throughout the hospital. 3. Ensure through supervision of the Clinical Placement Co-ordinator that the clinical areas within the hospital and in other care setting outside the hospital to which Midwifery students are assigned for clinical placements provide optimum learning environments, and are capable of meeting the learning objectives set by the (Third Level College) for the students. 4. Be a member of the Midwifery Management Team. 5. Participate with the Director of Midwifery and senior midwifery management colleagues in ensuring the day-to-day activities and resources of the hospital are managed and coordinated so that a patient focused service is delivered 6. The post holder will be expected to work as part of the Senior midwifery team in GUH and to contribute to the operational site cover and management of maternity services in GUH as delegated by the Director of Midwifery.   The Midwifery Practice Development Co-ordinator will:   1. Implement Midwifery practice developments throughout the hospital and monitor their effectiveness. 2. Provide Practice development support to Gynaecology and Neonatal services. 3. Provide leadership on quality issues and manage and implement the Midwifery service relating to quality assurance strategy by developing and implementing systems relating to quality improvement and co-ordinating associated monitoring/audit mechanisms with particular reference to measuring patient satisfaction. 4. Co-ordinate the development, implementation and monitoring of a patient dependency system, which are accurate, user-friendly and reflects best practice. Provide the necessary information for Midwifery management to permit the determination of the appropriate skill/grade mix. 5. Support staff in formulating evidence-based policies, protocols, guidelines and procedures that will ensure that the highest standard of patient focused Midwifery care is provided within available resources. 6. Evaluate the systems of midwifery care delivery and recommend changes in midwifery procedures practices and policies in order to reflect Evidence based practice approach to service delivery 7. Ensure that standards of clinical midwifery care are in operation at that regular monitoring of midwifery and nursing care are undertaken through Audit. 8. Set achievable, safe standards of Midwifery care across the broad spectrum of patient categories and collaborate with multidisciplinary approaches to standard setting. 9. Evaluate existing Midwifery records and documentation throughout the hospital and where necessary implement changes, which meet legal requirements and facilitates the best recording standard. 10. Liaise and give reports to the Director of Midwifery and out of hours managers/Senior managers as required 11. Lead in areas of Clinical Governance, Ex, risk management, quality, complaints legal issues and health and safety for the division/unit 12. In partnership with the lead clinicians identify areas for development and prepare business cases for these areas including rational for development   **Student Related Responsibilities**:   1. Ensure that the clinical areas of the hospital where student Midwives are assigned for clinical placements provide the optimum learning/teaching environments and are conductive to the learning requirements of the students as specified by the Third level organisation and The Nursing and Midwifery Board of Ireland (NMBI). 2. Provide support and guidance for student Midwives during clinical placements through the effective leadership and supervision of the Clinical Placement Co-ordinators. Regularly evaluate the quality of the clinical placements provided for student Midwives and to submit, from time to time, evaluation reports to the Director of Nursing and Midwifery and third level institution. 3. According to The Nursing and Midwifery Board of Ireland standards participate in training programmes for Clinical Placement Co-ordinators. Take responsibility for the appraisal process of the Clinical Placement Co-ordinator and Midwifery Clinical Skills Facilitator.   **Research:**   1. Keep up to date with Midwifery literature, present Midwifery research and new developments in Midwifery practice, management and conferences relating to Midwifery issues as required by the Director of Midwifery. 2. Initiate, facilitate and take part in relevant Midwifery research and promote research awareness within the Midwifery service of the hospital. Participate in the establishment and development of the best possible systems of support for the Midwifery service from clinical and non-clinical departments and collaborate with appropriate officers to remedy and deficiencies.   **Management Responsibilities:**   1. Attend meetings with Senior Midwifery Management team and Midwifery lectures, Clinical Placement Co-Ordinators, Clinical Midwifery Managers, Clinical Placement Co-ordinators, Allocations Officer and Staff Midwives and participate in interdisciplinary meetings as appropriate. Attend meetings within Third levels where appropriate in relation to student numbers. 2. Monitor the budget for pay and non-pay expenditure in assigned area of responsibility and ensure that pay and non-pay resources, in own area of responsibility, are development efficiently and effectively within the approved budgetary allocations. 3. Prepare work schedules that will achieve the objectives set for the Department by the Director of Midwifery, and to submit regular reports on targets achieved and, where targets have not been met, to indicate action to be taken. 4. Implement procedures for dealing with staff grievances handling disciplinary matters or negotiating on conditions on employment appropriate to his/her work as set out in personnel policies 5. Deal with relevant industrial relations issues relating to midwifery and allied staff in consultation with the HR Department and to the Director of midwifery where relevant 6. Keep the Director of Midwifery appraised of any significant development within his/her area of responsibility and perform such additional duties as may be assigned by the Director of Midwifery 7. Be part of the senior midwifery team at GUH, contributing to the operational site coverage and effective management of maternity services."   Ensure the most effective and efficient use of developments in information technology for both patient care and administrative support in a manner that integrates well with systems throughout the organisation  **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.**   1. Eligible applicants will be those who on the closing date for the competition have the following: 2. Are registered, or be eligible for registration, in the Nurses and Midwives Division of the Register of Nurses and Midwives as, maintained by the Nursing & Midwifery Board of Ireland [NMBI] (Bord Altranais agus Cnáimhseachais na hÉireann).   **AND**   1. Have successfully completed a post registration programme of study, as certified by the education provider, which verifies that the applicant has achieved a National Framework of Qualification (NFQ) major academic Level 9 or higher award maintained by Quality & Qualifications of Ireland (QQI) or can provide written evidence from the Higher Education Institute that they have achieved the number of ECTS credits equivalent to a Level 9 or higher standard in a health care or management related area.   **OR**   1. Give a commitment to undertake a relevant post registration qualification at not less than Level 9 (QQI) qualification in one of the following: Health Care, Quality Management, Risk Management, Health and Safety or Leadership and Management related area within a specific time scale to be decided.   **AND**   1. Have 7 years post registration midwifery experience and 3 years midwifery management experience at Clinical Midwife Manager 2 (CNM 2) grade or above.   **AND**   1. Candidates must possess the requisite clinical, leadership, managerial and administrative knowledge and ability for the proper discharge of the duties of the office.   **Annual Registration**   1. On appointment practitioners must maintain live annual registration in the Midwives Division of the Register of Nurses and Midwives maintained by the Nursing and Midwifery Board of Ireland [NMBI] (Bord Altranais agus Cnáimhseachais na hÉireann).   **AND**   1. Confirm annual registration with 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** | Demonstrate significant depth and breadth of midwifery experience as relevant to the post including:   * Evidence of developing and implementing Clinical Guidelines * Evidence with performing clinical audits and developing corrective action plans. * Evidence of understanding evidence-based knowledge * Evidence of being able to provide education and training |
| **Other requirements specific to the post** | Access to transport is necessary as the post may involve frequent travel to satellite locations in the community. |
| **Skills, competencies and/or knowledge** | **Professional Knowledge & Experience**  *The Successful Practice Development Coordinator will demonstrate:*   * Knowledge of structures/development within the HSE both at local and national level * Knowledge of practice development and quality improvement in public health nursing services. * Knowledge of audit and clinical learning environment audit * Knowledge of undergraduate, graduate and post-graduate midwifery and nursing programmes and the clinical experiences required to meet the needs of the requirements of the programme and students. * Knowledge of other professional issues related to relevant areas of Midwifery and nursing. * A willingness to support, promote and engage in change management * Evidence of computer skills including Microsoft Word, excel and use of email etc.   **Communication and Interpersonal Skills**  *The Successful Practice Development Coordinator will demonstrate:*   * Effective communication interpersonal skills including building and maintaining relationships with clinical and academic staff, and writing and presentation skills. * Ability to give and receive feedback in the conduct and application of the role, including in relation to identifying areas for improvement in practice activity, and the ability to work effectively within a team and possess the innovation and creativity to deal with challenging situations. * Evidence of management/organisational skills, including the ability to facilitate change through practice development initiatives and the ability to plan, organise, and prioritise workload appropriately, to manage deadlines, effectively handle multiple tasks, and possess the ability to use his/her own initiative. * An empowering style as a consultant to others, providing advice and guidance in supporting the identification, implementation and delivery of knowledge-based care.   **Planning & Managing Resources:**  *The Successful Practice Development Coordinator will demonstrate:*   * Demonstrate 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. * Demonstrate ability to manage deadlines and effectively handle multiple tasks.   **Commitment to providing a quality service:**  *The Successful Practice Development Coordinator will demonstrate:*   * An understanding of, and commitment to, the underpinning requirements and key processes in providing quality patient centred care. * Awareness and respect for the patient’s views in relation to their care * Evidence of providing quality improvement programmes * Demonstrate an ability to monitor and evaluate service performance and levels of care. * Evidence of conducting audit * Awareness of the factors involved in creating, maintaining and promoting quality care environments. * Evidence of research appreciation and Evidence Based Practice skills * Commitment to professional and personal self-development * Be fully conversant with the Requirement & Standards for midwifery and Nurse Registration Education Programmes of Bord Altranais agus Cnáimhseachais na hÉireann (Nursing Midwifery Board Ireland) and all other relevant publications that impact on the Nurse Education, Training, Learning and Professional Development.   **Evaluating Information and Judging Situations**  *The Successful Practice Development Coordinator will demonstrate:*   * Demonstrate the ability to evaluate information and solve problem |
| **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**

**G9552 Midwifery Practice Development Co-Ordinator, GUH**

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| **Tenure** | The current vacancy available is **pensionable permanent 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 **37.5 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)