

**Job Specification and Terms and Conditions**

**Saolta Group, CHO1 & CHO2 Patient Administration System (iPMS)**

**IPMS Data Quality Manager (Grade VI)**

**Programme for Health Service Improvement**

|  |  |
| --- | --- |
| **Job Title and Grade** | Temporary Data Quality Coordinator (IPMS) (Grade VI)  Hospital Group: Saolta University Health Care Group  Grade code: 0574 |
| **Campaign Reference** | SG63 |
| **Closing Date** | 12.00 noon on 27th August 2019 |
| **Proposed Interview Date (s)** | Interviews will be held as soon as possible after the closing date. Candidates will normally be given at least one weeks' notice of interview. The timescale may be reduced in exceptional circumstances. |
| **Taking up Appointment** | The successful candidate will be required to take up duty immediately |
| **Organisational Area** | Acute Hospital Division Saolta University Health Care Group. This is a Group programme serving acute hospitals across the Group so it may be necessary to work in other locations/ implementation sites from time to time. |
| **Location of Post** | Saolta University Health Care Group  There is currently one specified purposed whole time post available for immediate start for 2 years  The successful candidate may be required to work in any service area within the vicinity as the need arises.  A panel for Temporary Data Quality Coordinator (IPMS) (Grade VI) may be created from this campaign for Saolta University Health Care Group from which current and future specified purpose vacancies of full time or part time duration may be filled |
| **Informal Enquiries** | Ms Caroline Ryder, Interim ICT Project Manager, Group PAS  Email [caroline.ryder@hse.ie](mailto:caroline.ryder@hse.ie) |
| **Details of Service** | Saolta University Health Care Group is one of seven new hospital groups announced by the then Minister for Health, Dr. James Reilly TD in May, 2013, as part of a re-organisation of public hospitals into more efficient and accountable hospital groups that will deliver improved outcomes for patient. The Saolta University Health Care Group comprises of 7 hospitals:   * Letterkenny University Hospital * Sligo University Hospital * Mayo University Hospital * Roscommon University Hospital * Portiuncula University Hospital * Merlin Park University Hospital Galway * University Hospital Galway   The Group has one overall Group Management Team, turnover of €820 million and operates with 1,781 beds and staffing of 9,000 WTEs and a headcount of 10,324 (October 2018).  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 5 Clinical Directorates which manage the clinical specialities across each site:   * Medicine * Perioperative * Laboratory * Radiology * 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 the Western seaboard and towards the midlands from Donegal to North Tipperary.  This Acute programme is tasked with implementing the Group Wide Patient Administration System in areas of OPD Inpatient and Bed Management, Chart Tracking, Patient Billing, Unscheduled Care, Referrals/ Theatres across all hospitals in the Group.  The system is being implemented as a single instance PAS that will be configured to share a common patient index, with standard reference values that will allow for the linking of patient activity across different healthcare providers and the production of standardise management reports across the Saolta Group, etc.  The new PAS will provide a sound foundation for the future deployment of additional modules and systems paving the way towards eventual implementation of Board-wide electronic health records. To enable successful development of a group wide Patient Master Index (unique patient identifier) there is a requirement to address patient data quality and duplication issues.    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.  **Team working** – 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 ICT PAS Project Manager |
| **Purpose of the Post** | The Data Quality Coordinator‘s role is to ensure that the Patient Administration System data for the Saolta University Health Care Group is well managed and maintained in terms of data quality to ensure that patients have a unique patient record. Be responsible for monitoring (running daily duplicate reports), training and re-training staff, running awareness sessions and working with line management to ensure there is local ownership of data quality.  The post holder will lead a data quality team to address current duplicates and matching records from other PAS systems as the iPMS Group PAS is rolled out across the Saolta University Health Care Group and CHW  Develop a Data Quality plan for the Saolta University Health Care Group that includes audit & monitoring of data on PAS on an ongoing basis and highlight and address areas for improvement and promote data quality amongst all staff.  The Data Quality Coordinator role also includes the provision, mentoring support to 6 Data Mergers to ensure they become proficient in their roles |
| **Principal Duties and Responsibilities** | **Main Responsibilities of the Post**   * 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 and support this to ensure that patients are uniquely identified * Maintain throughout the hospital awareness of the primacy of the patient in relation to all activities. * Performance management systems are part of role and you will be required to participate in the Groups performance management programme. * Co-ordinate Data Quality function across the Saolta University Health Care Group and to be responsible for ensuring that regular data quality reports are set up and sent out to service managers for purposes of internal, external and central information requirements. * Training of Data Mergers and mentoring and supporting their work. * Hold data quality awareness briefings for staff and follow up with staff regarding any IT training that may be required. Promote high standards for collection of data among staff. * Develop and update SOPs and business processes in relation to data quality * Resolve data quality incidents and issues, on an on-going basis, adhering to standard operating procedures and business processes. * Providing PAS best practice training, mentoring and coaching as required to groups and individuals as required * Investigate and monitor duplicate records created and follow up with staff/supervisors to ensure reduction in duplication rate. * To audit the accuracy and completeness of data held on Information Systems ensuring that they are properly completed and data quality standards are maintained in line with Information Governance requirements. Prepare an action plan and follow up with staff/supervisor where data quality is below required standard. * To ensure that services understand the importance of data quality and monitoring and correction. * Be responsible for ensuring that documentation in Data Quality is up to date. * Work closely with supervisors /staff to ensure all policy documents regarding data recording (i.e. IPMS policy and procedure documents) are kept up to date and are available to staff on QPulse. * Post holder will be required to communicate with external agencies such as GP Practices to create greater awareness among GP’s, patients and the public of the importance of providing accurate and complete patient registration information to the hospital. * Post holder will be required to liaise with staff in other disciplines e.g. Radiology, Laboratory, Nursing, Maternity to ensure data integrity going across to other clinical systems is maintained. E.g. to support the merging of patient records on clinical systems. * Maintain data on duplication rate and feedback to Medical Records Committee meetings on agreed actions. * Post holder will be required to use their own judgement when making decision on potential duplicates and work with Medical Records and IT staff to assist in decision making. * Required to work on own initiative and within a team environment. To be able to work under pressure to tight deadlines while dealing with conflicting priorities should they arise. * The post holder will be expected to plan their own workload around the demands of the hospital.   **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 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** | This campaign is confined to staff who are currently employed by the HSE, TUSLA, other statutory health agencies, or a body which provides services on behalf of the HSE under Section 38 of the Health Act 2004 as per Workplace Relations Commission agreement -161867   1. Eligible applicants will be those who on the closing date for the competition:   (i) Have satisfactory experience as a Clerical Officer in the HSE, TUSLA, other statutory health agencies, or a body which provides services on behalf of the HSE under Section 38 of the Health Act 2004    Or  (ii) Have obtained a pass (Grade D) in at least five subjects from the approved list of subjects in the Department of Education Leaving Certificate Examination, including Mathematics and English or Irish1. Candidates should have obtained at least Grade C on higher level papers in three subjects in that examination.    Or  (iii) Have completed a relevant examination at a comparable standard in any equivalent examination in another jurisdiction    Or  (iv) Hold a comparable and relevant third level qualification of at least level 6 on the National Qualifications Framework maintained by Qualifications and Quality Ireland, (QQI).    Note1: Candidates must achieve a pass in Ordinary or Higher level papers. A pass in a foundation level paper is not acceptable. Candidates must have achieved these grades on the Leaving Certificate Established programme or the Leaving Certificate Vocational programme. The Leaving Certification Applied Programme does not fulfil the eligibility criteria.  And   1. Candidates must possess the requisite knowledge and ability, including a high standard of suitability and management ability), for the proper discharge of the office.   **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  **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 on the first day of the month in which the latest date for receiving completed application forms for the office occurs. |
| **Post Specific Criteria** | * Demonstrate depth and breadth of experience of working with Health Care Records and/or Electronic record systems * Demonstrate depth and breadth of experience of working in a multidisciplinary environment |
| **Other requirements specific to the post** | * Access to appropriate transport to fulfil the requirements of the role as post will involve frequent travel. * A flexible approach to working hours is required in order to ensure deadlines are met |
| **Skills, competencies and/or knowledge** | **Professional Knowledge & Experience**   * Demonstrate understanding of Data Quality and how Data Quality impacts Medical records – paper based and electronic * Capacity for management responsibility and demonstration of initiative, including decision making. * How to improve efficiency within working environment, ability to evolve and adapt to a changing environment. * Knowledge of paper based and electronic Hospital records systems * Knowledge of the HSE Standards and Recommended Practices for Healthcare Records Management. * Excellent MS Office skills to include, Word, Excel and PowerPoint * Knowledge of Organisation/Hospital Services * Knowledge and experience of IT systems to support and maintain Patient Administration Systems * The ability to manage a diverse and challenging workload   **Planning & Managing Resources including a commitment to a quality service**   * Excellent organisational and time management skills to meet objectives within agreed timeframes and achieve quality results. * Ability to progress issues through to completionThe ability to manage deadlines and effectively handle multiple tasks. * Effective planning and organisational skills including an awareness of resource management and the importance of value for money. * Demonstrate the ability to improve efficiency with the working environment and the ability to evolve and adapt to a rapid changing environment * The ability to put forward solutions to ongoing problems by addressing root cause * Demonstrate the ability to analyse problems and provide solutions where possible. * Experience in working to deadlines to ensure project targets are met. * Excellent planning and organisational skills including using computer technology effectively. * Awareness and appreciation of the service user * Evidence of proactively identifying areas for improvement and the development of practical solutions for their implementation * Evidence of developing operational procedures based on best practice * A commitment to promoting and maintaining high work standards * A commitment to developing own knowledge and expertise   **Evaluating Information, Problem Solving & Decision Making**   * The ability to appropriately analyse and interpret information, develop solutions and contribute to decisions quickly and accurately as appropriate. * Initiative in the resolution of complex issues. * The ability to recognise when it is appropriate to refer decisions to a higher level of management. * A capacity to develop new proposals and recommend decisions on a proactive basis. * Flexibility, problem solving and initiative skills including the ability to implement change. * The ability to problem solve by training users to improve performance * The ability to monitor performance and identify poor practice by users   **Team Working & Leadership Skills**   * Effective communication and interpersonal skills including ability to present information in a clear and concise * Experience of working as part of a team with a mixed programme of work, and moving with ease between concurrent projects * The ability to work with multi-disciplinary team members and stakeholders to facilitate high performance, developing and achieving clear and realistic objectives * Be a self-starter with excellent communicator skills and can take a Group lead in Data Quality * Be a team player, contributing, supporting and showing initiative * The ability to lead the team by example, coaching and supporting individuals as required * The ability to address performance issues as they arise * Flexibility and willingness to adapt, positively contributing to the implementation of change * An ability to influence and negotiate effectively in furthering the objectives of the role. * Demonstrate motivation and an innovative approach to the job within a changing work environment.   **Communications & Interpersonal Skills**   * Effective communication and interpersonal skills including the ability to present information in a clear and concise manner. * Strong written communication skills. * The ability to build and maintain relationships with a variety of stakeholders to improve Data Quality awareness |
| **Campaign Specific Selection Process**  **Ranking/Shortlisting/ Interview** | A ranking and or short-listing exercise may be carried out on the basis of information supplied in your application form. The criteria for ranking and or short-listing 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 / Public Appointments Service 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 on [www.cpsa.ie](http://www.cpsa.ie). |
| The reform programme outlined for the Health Services may impact on this role and as structures change the job description may be reviewed.  This job description is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive nor restrictive and is subject to periodic review with the employee concerned. | |



**Temporary Data Quality Coordinator (IPMS) (Grade VI)**

**Terms and Conditions of Employment**

|  |  |
| --- | --- |
| **Tenure** | The current vacancy available is for a specified purpose contract for 2 years, is whole time and pensionable.  A panel for Temporary Data Quality Coordinator (IPMS) (Grade VI) may be created from this campaign for Saolta University Health Care Group from which current and future specified purpose vacancies of full time 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. |
| **Remuneration** | The Salary scale for the post is (01/01/2019): € 46,771, 47,897, 49,262, 51,816, 53,346, **55,246, 57,158 LSIs** |
| **Working Week** | The standard working week applying to the post is 37 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. |
| **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)