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**Clinical Midwife Specialist/Clinical Nurse Specialist (Colposcopy)**

**Job Specification & Terms and Conditions**

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| **Job Title and Grade** | **Clinical Midwife / Nurse Specialist (Colposcopy)***(Clinical Midwife Specialist Grade Code 2313)**(Clinical Nurse Specialist Grade Code 2632)* |
| **Campaign Reference** | HBS06908  |
| **Closing Date** | **Monday 27th May 2019 at 12 noon** |
| **Proposed Interview Date (s)** | **To Be Confirmed**  |
| **Taking up Appointment** | **To Be Confirmed** |
| **Organisational Area** | Saolta University Health Care Group |
| **Location of Post** | There is currently one permanent whole-time vacancy available in the Colposcopy Unit, Galway University Hospital.A panel may be created from this campaign for Galway University Hospital from which current and future permanent and specified purpose vacancies of full time or part time duration may be filled |
| **Informal Enquiries** | Ms Anne Marie Grealish, Assistant Director of MidwiferyPhone: 091 544541Email: annemarie.grealish@hse.ie |
| **Details of Service/Background to the post** | 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 €863 million and operates with 1,986 beds and 8,936 WTE (10,135 headcount in June 2018) staff.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
* Laboratories
* 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 Galway University Hospitals (GUH) is a designated supra-regional cancer service provider meeting the needs of all the counties along Western seaboard and towards the midlands from Donegal to North Tipperary. Saolta University Health Care Group aims to meet its service plan targets. Its priority is to implement the national clinical care programmes across the Group and establish a performance management culture with the development of Key Performance Indicators.**Vision**The formation of the hospitals groups, which will transition to independent hospital trusts, will change how hospitals relate to each other and integrate with the academic sector. Over time, the Group will deliver:* Higher quality service
* More consistent standards of care
* More consistent access to care
* Stronger leadership
* Greater integration between the healthcare agenda and the teaching, training, research and innovation agenda

Our Academic Partner is the National University of Ireland, Galway and we are developing further international partnerships in the UK and the USA. |
| **Mission Statement** | Patients are at the heart of everything we do. Our mission is to provide high quality and equitable services for all by delivering care based on excellence in clinical practice, teaching, and research, grounded in kindness, compassion and respect, whilst developing our staff and becoming a model employer.**OUR VISION STATEMENT** Our Vision is to build on excellent foundations already laid, further developing and integrating our Group, fulfilling our role as an exemplar, and becoming the first Trust in Ireland.**OUR GUIDING VALUES** **Respect** - We aim to be an organisation where privacy, dignity, and individual needs are respected, where staff are valued, supported and involved in decision-making, and where diversity is celebrated, recognising that working in a respectful environment will enable us to achieve more. **Compassion** - we will treat patients and family members with dignity, sensitivity and empathy.**Kindness** - whilst we develop our organisation as a business, we will remember it is a service, and treat our patients and each other with kindness and humanity. **Quality** – we seek continuous quality improvement in all we do, through creativity, innovation, education and research. **Learning** - we will nurture and encourage lifelong learning and continuous improvement, attracting, developing and retaining high quality staff, enabling them to fulfil their potential. **Integrity** - through our governance arrangements and our value system, we will ensure all of our services are transparent, trustworthy and reliable and delivered to the highest ethical standards, taking responsibility and accountability for our actions. **Teamworking** – we will engage and empower our staff, sharing best practice and strengthening relationships with our partners and patients to achieve our Mission. **Communication** - we aim to communicate with patients, the public, our staff and stakeholders, empowering them to actively participate in all aspects of the service, encouraging inclusiveness, openness, and accountability.*These Values shape our strategy to create an organisational culture and ethos to deliver high quality and safe services for all we serve and that staff are rightly proud of.*  |
| **Reporting Relationship** | The post holder’s professional reporting relationship is to the Director of Midwifery/Assistant Director of Midwifery. |
| **Purpose of the Post**  | **The purpose of this Clinical Midwife/ Nurse Specialist Colposcopy** post isto deliver care in line with the five core concepts of the role as set out in the Framework for the establishment of Clinical Midwife Specialist Posts 4th edition National Council of the Professional Development of Nursing and Midwifery (NCMN) 2008.The Clinical Midwife/Nurse Specialist Colposcopy will provide clinical expertise and support to staff working in Maternity & Gynaecology Service. S/he will provide leadership in the delivery of specialised services and will ensure the Colposcopy service is part of a dynamic and growing health care facility catering for the health needs of women at all stages during their attendance at colposcopy. The Clinical Midwife/Nurse Specialist Colposcopy will carry out the duties appropriate to the specialist area and support and supervise staff in training. **Caseload**The CNSp/CMSp caseload will include women referred to colposcopy with abnormal smear results, high risk HPV positive results and/or clinical indications e.g. postcoital or intermenstrual bleeding.The CNSp/CMSp. will focus initially on the following patient groups: * All age groups with low grade abnormalities of smears
* Premenopausal women with high grade smear abnormalities and clinical indications
* Postmenopausal women with high grade smear abnormalities or clinical indications may be seen by the CNSp./CMSp in conjunction with RAMP or Consultant
* LLETZ excisional treatments may be carried out by the CNSp. /CMSp under direct supervision by RAMP or Consultant.

Cold coagulation ablative treatment may be carried out by the CNSp. /CMSp under indirect supervision by RAMP or Consultant. |
| **Principal Duties and Responsibilities** | The post holder’s practice is based on the five core concepts of Clinical Midwife/Nurse Specialist (Colposcopy) role as defined by the NCNM 4th edition (2008) in order to fulfil the role. The concepts are: • Clinical Focus • Patient/Client Advocate • Education and Training • Audit and Research • Consultant **Clinical Focus** Clinical Midwife/Nurse Specialist (Colposcopy) will have a strong patient focus whereby the specialty defines itself as midwifery and subscribes to the overall purpose, functions and ethical standards of Nursing and Midwifery. The clinical practice role may be divided into direct and indirect care. Direct care comprises the assessment, planning, delivery and evaluation of care to the patient, family and/or carer. Indirect care relates to activities that influence and support the provision of direct care. **Direct Care** * Provide a specialist nursing/midwifery service for patients with a positive cervical screening test or a clinical reason for referral who require support and treatment through the continuum of care.
* Undertake comprehensive patient assessment to include physical, psychological, social and spiritual elements of care using best evidence based practice in cervical screening and colposcopy.
* Use the outcomes of patient assessment to develop and implement plans of care/case management in conjunction with the multi-disciplinary team (MDT) and the patient, as appropriate.
* Monitor and evaluate the patient’s response to treatment and amend the plan of care accordingly in conjunction with the MDT and patient as appropriate.
* Make alterations in the management of patient’s condition in collaboration with the MDT and the patient in line with agreed pathways and policies, procedures, protocols and guidelines (PPPG’s).
* Accept appropriate referrals from MDT colleagues.
* Co-ordinate investigations, treatment therapies and patient follow-up.
* Communicate with patients as appropriate, to assess patient’s needs and provide relevant support, information, education and advice as required.
* Where appropriate work collaboratively with MDT colleagues across Primary and Secondary Care to provide a seamless service delivery to the patient as appropriate.
* Manage nurse/midwife led colposcopy clinics with MDT input.
* Identify health promotion priorities for the patient, family and/or carer and support patient self-care in line with best evidence. This will include the provision of educational and health promotion material which is comprehensive, easy to understand and meets patients needs.

**Indirect Care** * Identify and agree appropriate referral pathways for patients with cervix cancer or complex pre-cancer of vagina, vulva or cervix.
* Participate in case review with MDT colleagues.
* Use a case management approach to patients with complex needs in collaboration with MDT in both Primary and Secondary Care as appropriate.
* Take a proactive role in the formulation and provision of evidence based PPPGs relating to colposcopy care.
* Take a lead role in ensuring the service for patients with cervical pre-cancer is in line with best practice guidelines and the Safer Better Healthcare Standards (HIQA, 2012).

**Patient/Client Advocate*** Communicate, negotiate and represent the woman’s family and/or carer values and decisions in relation to their condition in collaboration with MDT colleagues in both Primary and Secondary Care as appropriate.
* Develop and support the concept of advocacy, particularly in relation to the woman’s participation in decision making, thereby enabling informed choice of treatment options.
* Respect and maintain the privacy, dignity and confidentiality of the woman, family and/or carer.
* Establish, maintain and improve procedures for collaboration and cooperation between Tertiary centres, Acute Services, Primary Care and Voluntary Organisations as appropriate.
* Proactively challenge any interaction which fails to deliver a quality service to women.

Education & Training* Maintain clinical competence in patient management within colposcopy nursing/midwifery practice, keeping up-to-date with relevant research to ensure the implementation of evidence based practice.
* Provide the patient, family and/or carer with appropriate information and other supportive interventions to increase their knowledge, skill and confidence in managing their cervical pre-cancer condition.
* Contribute to the design, development and implementation of education programmes and resources for the patient, family and/or carer in relation to colposcopy thus empowering them to self manage their condition.
* Provide mentorship and preceptorship for nursing/midwifery colleagues as appropriate.
* Participate in training programmes for nursing/midwifery, MDT colleagues and key stakeholders as appropriate
* Create exchange of learning opportunities within the MDT in relation to evidence based cervical screening and treatment through journal clubs, conferences etc.
* Develop and maintain links with Regional Centres for Nursing & Midwifery Education (RCNMEs), the Nursing and Midwifery Planning and Development Units (NMPDUs) and relevant third level Higher Education Institutes (HEIs) in the design, development and delivery of educational programmes in colposcopy care.
* Be responsible for addressing own continuing professional development needs

**Audit & Research*** Establish and maintain a register of patients with cervical pre-cancer within the CNSp. / CMSp. caseload.
* Maintain a record of clinically relevant data aligned to National Key Performance Indicators (KPI’s) as directed and advised by the Director of Midwifery.
* Identify, initiate and conduct midwifery and Nursing MDT audit and research projects relevant to the area of practice.
* Identify, critically analyse, disseminate and integrate best evidence relating to Colposcopy diagnosis into practice.
* Contribute to midwifery/nursing research on all aspects of midwifery/nursing care.
* Use the outcomes of audit to improve service provision.
* Contribute to service planning and budgetary processes through use of audit data and specialist knowledge.
* Monitor, access, utilise and disseminate current relevant research to advise and ensure the provision of informed evidence based practice.

***Audit expected outcomes including:**** Collate data which will provide evidence of the effectiveness of Clinical Midwife/Nurse Specialist (Colposcopy) interventions undertaken. Refer to the National Council for the Professional Development of Nursing and Midwifery final report - Evaluation of Clinical Nurse and Midwife Specialist and Advanced Nurse and Midwife Practitioner roles in Ireland (SCAPE Report, 2010) and refer to the National KPIs associated with the speciality. They should have a clinical nursing focus as well as a breakdown of activity - patients seen and treated.
* Evaluate audit results and research findings to identify areas for quality improvement in collaboration with midwifery management and MDT colleagues.

**Consultant*** Provide leadership in clinical practice and act as a resource and role model for Colposcopy practice.
* Generate and contribute to the development of clinical standards and guidelines and support implementation.
* Use specialist knowledge to support and enhance generalist midwifery/nursing practice.
* Develop collaborative working relationships with Clinical Midwife/Nurse Specialist (Colposcopy)’s/Registered Advanced Midwife Practitioner/MDT colleagues as appropriate, developing person centred care pathways to promote the integrated model of care delivery.
* With the support of the Director of Midwifery, attend integrated care planning meetings as required.
* Where appropriate develop and maintain relationships with specialist services in voluntary organisations which support patients in the community.
* Liaise with other health service providers in the development and on-going delivery of the National Clinical Programme model of care.
* Network with other Clinical Midwife/Nurse Specialist (Colposcopy) in appropriate tertiary centres in related professional associations.

**KPIs*** The identification and development of Key Performance Indicators (KPIs) which are congruent with the hospital’s service plan targets.
* The development of Action Plans to address KPI targets.
* Driving and promoting a Performance Management culture.
* In conjunction with line manager assist in the development of a Performance Management system for your profession.
* The management and delivery of KPIs as a routine and core business objective.

**Health & Safety**These duties must be performed in accordance with local organisational and the HSE health and safety polices. In carrying out these duties the employee must ensure that effective safety procedures are in place to comply with the Health, Safety and Welfare at Work Act (2005). Staff must carry out their duties in a safe and responsible manner in line with the local policy documents and as set out in the local safety statement, which must be read and understood. **Quality, Risk and Safety Responsibilities** It is the responsibility of all staff to: * Participate and cooperate with legislative and regulatory requirements with regard to quality, risk and safety.
* Participate and cooperate with local quality, risk and safety initiatives as required.
* Participate and cooperate with internal and external evaluations of the organisation’s structures, services and processes as required, including but not limited to, The National Hygiene Audit, National Decontamination Audit, Health and Safety Audits and other audits specified by the HSE or other regulatory authorities.
* Initiate, support and implement quality improvement initiatives in their area which are in keeping with local organisational quality, risk and safety requirements.
* Contribute to the development of PPPGs and safe professional practice and adhere to relevant legislation, regulations and standards.
* Comply with Health Service Executive (HSE) Complaints Policy.
* Ensure completion of incident/near miss forms and clinical risk reporting.
* Adhere to department policies in relation to the care and safety of any equipment supplied and used to carry out the responsibilities of the role of Clinical Midwife / Nurse Specialist in Colposcopy care.

Specific Responsibility for Best Practice in Hygiene Hygiene is defined as: “The practice that serves to keep people and environments clean and prevent infection. It involves the study of preserving ones health, preventing the spread of disease, and recognising, evaluating and controlling health hazards. In the healthcare setting it incorporates the following key areas: environment and facilities, hand hygiene, catering, management of laundry, waste and sharps, and equipment” (HIQA, 2008; P2). It is the responsibility of all staff to ensure compliance with local organisational hygiene standards, guidelines and practices. **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 in order to meet changing and developing service needs.
* Continually monitor the service to ensure it reflects current needs.
* Implement and manage identified changes.
* Ensure that confidentiality in relation to patient records is maintained.
* Represent the specialist service at local, national and international fora as required.
* Maintain accurate and contemporaneous records and data on all matters pertaining to the planning, management, delivery and evaluation of care and ensure that this service is in line with HSE requirements.
* Contribute to the service planning process as appropriate and as directed by the DoM.
* Have a working knowledge of the Health Information and Quality Authority (HIQA) Standards as they apply to the role for example, Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc and comply with associated HSE protocols for implementing and maintaining these standards as appropriate to the role.
* To support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service.

**The above Job Specification is not intended to be a comprehensive list of all duties involved and consequently, the post holder may be required to perform other duties as appropriate to the post which may be assigned to him/her from time to time and to contribute to the development of the post while in office.**   |
| **Eligibility Criteria****Qualifications and/ or experience** | **Candidates must have at the latest date of application:** **1. Professional Qualifications, Experience, etc.**(a) 1. Be a registered Nurse/Midwife on the active Register of Nurses and Midwives held by An Bord Altranais agus Cnáimhseachais na hÉireann (Nursing and Midwifery Board of Ireland) or be eligible to be so registered.

 And1. Be registered in the Midwives and/or General Division of the register of Nurses and Midwives

And1. Have successfully completed a post registration programme of study, as certified by the education provider, which verifies that the applicant has achieved a Quality and Qualifications Ireland (QQI), National Framework of Qualifications (NFQ) major academic Level 8 award, or higher relevant to the specialist area of Colposcopy prior to application.

OrCan provide written evidence from higher education institute that they have achieved the number of ECTS credits equivalent to a Level 8 award or higher standard, relevant to the specialist area of Colposcopy prior to application.And1. Have a minimum of 5 years post registration full time experience (or an aggregate of 5 years full time experience) in the Midwifery and/or General division(s) of the register in which the application is been made.

And1. Have a minimum of 2 years’ full time experience (or an aggregate of 2 years full time experience) in the specialist area of Colposcopy

And vi) Demonstrate evidence of continuing professional development.(b) Have the ability to practice safely and effectively fulfilling his/her professional responsibility within his/her scope of practice.**2. Annual registration**(i) Practitioners must maintain live annual registration on the appropriate/relevant Division of the register of Nurses and Midwives maintained by the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) for the role. And(ii) Confirm annual registration with NMBI to the HSE by way of the annual Patient Safety Assurance Certificate (PSAC).**3. Age**Age restriction shall only apply to a candidate where s/he is not classified as a new entrant (within the meaning of the Public Service Superannuation (Miscellaneous Provisions) Act, 2004). A candidate who is not classified as a new entrant must be under 65 years of age on the first day of the month in which the latest date for receiving completed application forms for the office occurs.**4. Health**Candidates for and any person holding the office must be fully competent and capable of undertaking the duties attached to the office and be in a state of health such as would indicate a reasonable prospect of ability to render regular and efficient service.**5. Character** Candidates for and any person holding the office must be of good character |
| **Post Specific Requirements** | Provide written evidence of Colposcopy Training and Accreditation as provided by the BSCCP (British Society for Colposcopy and Cervical Pathology) or equivalent. Having achieved accreditation by the BSCCP the Nurse/Midwife Specialist must fulfil the necessary requirements to maintain this accreditation. This includes attendance at an approved scientific meeting of the BSCCP at least once every 3 years.Demonstrate depth and breadth of experience in the area of Colposcopy as relevant to the role  |
| **Skills, competencies and/or knowledge** | **Professional Knowledge** *CNSp/CMSp (Colposcopy) will demonstrate:** Practice in accordance with relevant legislation and with regard to The Scope of Nursing & Midwifery Practice Framework (Nursing and Midwifery Board of Ireland, 2015) and the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (Nursing and Midwifery Board of Ireland, 2014).
* Maintain a high standard of professional behaviour and be professionally accountable for actions/omissions. Take measures to develop and maintain the competences required for professional practice.
* Adhere to the Nursing & Midwifery values of Care, Compassion and Commitment (DoH, 2016).
* Adhere to national, regional and local HSE PPPGs.
* Adhere to relevant legislation and regulation.
* Adhere to appropriate lines of authority within the midwife management structure.

*CNSp/CMSp (Colposcopy) will demonstrate:** In-depth knowledge of the role of Clinical Midwife Specialist (Colposcopy).
* In-depth knowledge of the pathophysiology of cervical precancer and cancer.
* The ability to undertake a comprehensive assessment of the patient with colposcopy referral for abnormal smear, positive HPV test or clinical indication, including taking an accurate history of their condition and presenting problem.
* The ability to employ appropriate diagnostic interventions including (smear, HPV test, swabs, biopsies) to support clinical decision making and the patients’ self- management planning.
* The ability to formulate, follow up and evaluate a plan of care based on findings and evidence based standards of care and practice guidelines.
* The ability to follow up and evaluate a plan of care.
* Knowledge of health promotion principles/coaching/self management strategies that will enable people to take greater control over decisions and actions that affect their health and wellbeing.
* An understanding of the principles of clinical governance and risk management as they apply directly to Clinical Midwife/Nurse Specialist (Colposcopy) role and the wider health service.
* Evidence of teaching in the clinical area.
* A working knowledge of audit and research processes.
* Evidence of computer skills including use of Microsoft Word, Excel, E-mail, PowerPoint.

**Communication and Interpersonal Skills*** Effective communication skills.
* Ability to build and maintain relationships particularly in the context of MDT working.
* Ability to present information in a clear and concise manner.
* Ability to manage groups through the learning process.
* Ability to provide constructive feedback to encourage future learning.
* Effective presentation skills.

**Organisation and Management Skills:** * Evidence of effective organisational skills including awareness of appropriate resource management.
* Ability to attain designated targets, manage deadlines and multiple tasks.
* Ability to be self directed, work on own initiative.
* A willingness to be flexible in response to changing local/organisational requirements.

**Building & Maintaining Relationships including Team and Leadership skills** * Leadership, change management and team management skills including the ability to work with MDT colleagues.

**Commitment to providing a quality service:** * Awareness and respect for the patient’s views in relation to their care.
* Evidence of providing quality improvement programmes.
* Evidence of conducting audit.
* Evidence of motivation by ongoing professional development.

**Analysing and Decision Making** * Effective analytical, problem solving and decision making skills.
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| **Campaign Specific Selection Process****Ranking/Shortlisting / Interview** | A ranking and or shortlisting exercise may be carried out on the basis of information supplied in your application form. The criteria for ranking and or shortlisting are based on the requirements of the post as outlined in the eligibility criteria and skills, competencies and/or knowledge section of this job specification. Therefore it is very important that you think about your experience in light of those requirements. Failure to include information regarding these requirements may result in you not being called forward to the next stage of the selection process. Those successful at the ranking stage of this process (where applied) will be placed on an order of merit and will be called to interview in ‘bands’ depending on the service needs of the organisation. |
| **Code of Practice** | The Health Service Executive will run this campaign in compliance with the Code of Practice prepared by the Commission for Public Service Appointments (CPSA). The Code of Practice sets out how the core principles of probity, merit, equity and fairness might be applied on a principle basis. The Code also specifies the responsibilities placed on candidates, facilities for feedback to applicants on matters relating to their application when requested, and outlines procedures in relation to requests for a review of the recruitment and selection process and review in relation to allegations of a breach of the Code of Practice. Additional information on the HSE’s review process is available in the document posted with each vacancy entitled “Code of Practice, Information for Candidates”.Codes of practice are published by the CPSA and are available on [www.hse.ie/eng/staff/jobs](http://www.hse.ie/eng/staff/jobs) in the document posted with each vacancy entitled “Code of Practice, Information for Candidates” or on [www.cpsa.ie](http://www.cpsa.ie). |
| The reform programme outlined for the Health Services may impact on this role and as structures change the job description may be reviewed.This job specification is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive nor restrictive and is subject to periodic review with the employee concerned. |

**Clinical Midwife / Nurse Specialist (Colposcopy)**

**Terms and Conditions of Employment**

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| **Tenure**  | The current vacancy available is permanent and whole time. The post is pensionable. A panel may be created from which permanent and specified purpose vacancies of full or part time duration may be filled. The tenure of these posts will be indicated at “expression of interest” stage. Appointment as an employee of the Health Service Executive is governed by the Health Act 2004 and the Public Service Management (Recruitment and Appointments) Act 2004 and Public Service Management (Recruitment and Appointments) Amendment Act 2013. |
| **Remuneration**  | The salary scale for the post (as at 01/01/2019) is: €49,056 - €49,868 - €50,555 - €51,677 - €52,917 - €54,134 - €55,351 - €56,721 - €57,995 |
| **Working Week** | The standard working week applying to the post is to be confirmed at Job Offer stage.  |
| **Annual Leave** | The annual leave associated with the post will be confirmed at job offer stage. |
| **Superannuation** | This is a pensionable position with the HSE. The successful candidate will upon appointment become a member of the appropriate pension scheme. Pension scheme membership will be notified within the contract of employment. Members of pre-existing pension schemes who transferred to the HSE on the 01st January 2005 pursuant to Section 60 of the Health Act 2004 are entitled to superannuation benefit terms under the HSE Scheme which are no less favourable to those which they were entitled to at 31st December 2004. |
| **Probation** | Every appointment of a person who is not already a permanent officer of the Health Service Executive or of a Local Authority shall be subject to a probationary period of 12 months as stipulated in the Department of Health Circular No.10/71. |
| **Protection of Persons Reporting Child Abuse Act 1998** | As this post is one of those designated under the Protection of Persons Reporting Child Abuse Act 1998, appointment to this post appoints one as a designated officer in accordance with Section 2 of the Act.  You will remain a designated officer for the duration of your appointment to your current post or for the duration of your appointment to such other post as is included in the categories specified in the Ministerial Direction. You will receive full information on your responsibilities under the Act on appointment. |
| **Mandated Person Children First Act 2015** | As a mandated person under the Children First Act 2015 you will have a legal obligation * To report child protection concerns at or above a defined threshold to TUSLA.
* To assist Tusla, if requested, in assessing a concern which has been the subject of a mandated report

You will remain a mandated person for the duration of your appointment to your current post or for the duration of your appointment to such other post as is included in the categories specified in the Ministerial Direction. You will receive full information on your responsibilities under the Act on appointment |
| **Infection Control** | Have a working knowledge of Health Information and Quality Authority (HIQA) Standards as they apply to the role for example, Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc. and comply with associated HSE protocols for implementing and maintaining these standards as appropriate to the role. |
| **Health & Safety** | It is the responsibility of line managers to ensure that the management of safety, health and welfare is successfully integrated into all activities undertaken within their area of responsibility, so far as is reasonably practicable. Line managers are named and roles and responsibilities detailed in the relevant Site Specific Safety Statement (SSSS). Key responsibilities include:* Developing a SSSS for the 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)