

**Medical Scientist, Senior (Microbiology)**

**Job Specification & Terms and Conditions**

|  |  |
| --- | --- |
| **Job Title and Grade** | Medical Scientist, Senior (Microbiology)  *(Grade Code: 3877)* |
| **Campaign Reference** | HBS09611 |
| **Closing Date** | Monday 30th November 2020 at 12 noon |
| **Proposed Interview Date (s)** | Interviews are due to take place on Tuesday, 8th December 2020. |
| **Taking up Appointment** | A start date will be indicated at job offer stage. |
| **Location of Post** | **Saolta University Health Care Group**  **Sligo University Hospital**  There are currently three permanent whole-time vacancies in the Microbiology Laboratory and one permanent whole-time in the Public Health Laboratory, Sligo University Hospital. The successful candidates may be required to work in any service area within the vicinity as the need arises.  A panel may be formed as a result of this campaign for **Sligo University Hospital** from which current and future, permanent and specified purpose vacancies of full or part-time duration may be filled. |
| **Informal Enquiries** | Liam O’Grady, Laboratory Manager, Sligo University Hospital.  **Tel:** 071 917 4560/087 618 4160  **Email:** [liam.ogrady@hse.ie](mailto:liam.ogrady@hse.ie) |
| **Details of Service** | The Saolta University Health Care Group provides acute and specialist hospital services to the West and North West of Ireland – counties Galway, Mayo, Roscommon, Sligo, Leitrim, Donegal and adjoining counties.  The Saolta University Health Care Group 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) * [Merlin Park University Hospital (MPUH)](https://saolta.ie/hospital/merlin-park-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) * [University Hospital Galway (UHG)](https://saolta.ie/hospital/university-hospital-galway)   The Group's Academic Partner is NUI Galway.  The Saolta Group’s region covers one third of the land mass of Ireland, it provides health care to a population of 830,000, employs 10,653 staff (October 2019), and has a budget of €868 million.  The Group provides a range of high quality services for the catchment areas it serves and GUH is a designated supra-regional cancer service provider meeting the needs of all the counties along Western seaboard and towards the midlands from Donegal to North Tipperary.    Saolta University Health Care Group aims to meet its service plan targets. Its priority is to implement the national Clinical Care programmes across the Group and establish a performance management culture with the development of Key Performance Indicators.  **Vision**  Our vision is to be a leading academic Hospital Group providing excellent integrated patient-centred care delivered by skilled caring staff.  **Saolta 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 Saolta Group Hospitals, 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.   **Saolta Strategy 2019-2023**  We have developed a five year strategy which outlines the vision and framework for the Group’s strategic development from 2019 to 2023.  We are committed to ensuring that our patients are at the centre of all service design, development and delivery. Over the five years of the strategy we will further develop our services, both clinical and organisational based around seven key themes: Quality and Patient Safety; Patient Access; Governance and Integration; Skilled Caring Staff; Education Research and Innovation; eHealth and Infrastructure. These will be our key areas of focus to enable us to meet the future needs of our patients.  We continue to work very closely with our colleagues in the community both Community Healthcare West and Community Health Organisation 1 in the North West to deliver more streamlined care to our patients in line with the national focus of bringing services closer to patients.  While the tertiary referral centre for the Group is University Hospital Galway, it is essential that all our hospitals work more closely together in delivering services to address the challenges facing us across our region.  A key theme of our 5 year strategy is the development of Managed Clinical and Academic Networks.  These networks will ensure that specialities in individual hospitals will no longer work in isolation but as a networked team which will improve clinical quality and patient safety. It will also support collective learning/sharing of expertise and will be supported by education, training, research and audit programmes. It will result in safer, standardised and more sustainable services for our patients.  **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. |
| **Mission Statement** | Patients are at the heart of everything we do. Our mission is to provide high quality and equitable services for all by delivering care based on excellence in clinical practice, teaching, and research, grounded in kindness, compassion and respect, whilst developing our staff and becoming a model employer.  **OUR VISION STATEMENT**  Our Vision is to build on excellent foundations already laid, further developing and integrating our Group, fulfilling our role as an exemplar, and becoming the first Trust in Ireland.  **OUR GUIDING VALUES**  **Respect** - We aim to be an organisation where privacy, dignity, and individual needs are respected, where staff are valued, supported and involved in decision-making, and where diversity is celebrated, recognising that working in a respectful environment will enable us to achieve more.  **Compassion** - we will treat patients and family members with dignity, sensitivity and empathy.  **Kindness** - whilst we develop our organisation as a business, we will remember it is a service, and treat our patients and each other with kindness and humanity.  **Quality** – we seek continuous quality improvement in all we do, through creativity, innovation, education and research.  **Learning** - we will nurture and encourage lifelong learning and continuous improvement, attracting, developing and retaining high quality staff, enabling them to fulfil their potential.  **Integrity** - through our governance arrangements and our value system, we will ensure all of our services are transparent, trustworthy and reliable and delivered to the highest ethical standards, taking responsibility and accountability for our actions.  **Teamworking** – we will engage and empower our staff, sharing best practice and strengthening relationships with our partners and patients to achieve our Mission.  **Communication** - we aim to communicate with patients, the public, our staff and stakeholders, empowering them to actively participate in all aspects of the service, encouraging inclusiveness, openness, and accountability.  *These Values shape our strategy to create an organisational culture and ethos to deliver high quality and safe services for all we serve and that staff are rightly proud of.* |
| **Reporting Relationship** | The post holder will report to the Laboratory Manager and is accountable to the Chief Medical Scientist |
| **Purpose of the Post** | To participate in providing a high quality and efficient laboratory service, in compliance with current ISO 15189, to consultants, doctors and their patients within the hospitals and the community. The post holder, in co-operation with the Chief Medical Scientist will participate in the management of the POCT Service, in a way that supports the clinical needs of patients and is consistent with the mission, vision, values and strategic plan of the organisation. |
| **Principal Duties and Responsibilities** | * The person holding this post is required to support the principle that the care of the patient comes first at all times and will approach their work with the flexibility and enthusiasm necessary to make this principle a reality for every patient to the greatest possible degree * Maintain throughout the Group’s awareness of the primacy of the patient in relation to all hospital activities. * Performance management systems are part of role and you will be required to participate in the Group’s performance management programme  **Service Management** *The Senior Medical Scientist (Microbiology) will:*   * Demonstrate behaviour consistent with the values of the Hospital and ethical code * Maintain and promote a patient focused orientation in the delivery of service * Be actively involved in the change management process * Participate in developing and leading the introduction of new ideas and methods according to hospital policy * Participate in the production of an annual departmental report * Participate in the determination of departmental policies for improvement of the service and assessing the needs for additional resources * Supervise and delegate as appropriate, the registration, custody and stock level of the relevant laboratory reagents, consumables and other materials held in the Laboratory * Ensure that policy relating to the relevant laboratory record keeping is followed * Evaluate equipment, consumable items and research projects * Facilitate arrangements, where appropriate, to introduce professional and/or other visitors to the relevant laboratory * Participate on Hospital and/or external committees as required * Keep up to date in the scientific and technological developments in the area of POCT * Lead by example by setting high standards of working and commitment.  **Quality** *The Senior Medical Scientist (Microbiology) will:*   * Ensure appropriate compliance with international and national guidelines and standards for the provision of relevant laboratory services and actively participate in internal and external quality assurance. * Participate in the implementation of quality management programmes which are patient orientated and which measure and audit performance and client satisfaction. * Place great emphasis on the quality of results being produced in the Biochemistry Laboratory and in the point of care setting * Oversee the implementation and maintenance of a quality management system to ISO15189 accreditation standard (or equivalent) * Integrate lean, six sigma and other techniques into the lab to improve efficiency and reduce errors.  **Financial** *The Senior Medical Scientist (Microbiology) will:*   * Ensure the most effective use of available resources and the smooth running to the relevant Laboratory service. * Provide appropriate statistical and management information. * Maintain an Asset register of appropriate equipment, in conjunction with the Asset Register of the Hospital.  **Information Technology** *The Senior Medical Scientist (Microbiology) will:*   * Assist in ensuring that the POCT Operational Team make 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. * Collect, interpret and present data and information as appropriate and as required on the relevant Laboratory's activity, staffing and expenditure. * Ensure compliance with GDPR legislation and policies   **Staff Management**  *The Senior Medical Scientist (Microbiology) will:*   * Assist the Chief Medical Scientist in managing the relevant Laboratory staff resources ensuring that staffing levels and skill mix are appropriate and within the resources allocated. * Promote a professional, punctual and dedicated team with good open communications. * Create and promote healthy working relationships and stimulate initiative among relevant Laboratory staff. * Motivate team members on a day-to-day basis by agreeing goals and objectives in keeping with the Hospital anticipated performance system. * Maintain teamwork and act in accordance with the Hospital's disciplinary policy. * Be familiar with the Hospital’s Infection Control Policies and their relevance to the POCT service including compliance with Hygiene Services.   **Education & Training**  *The Senior Medical Scientist (Microbiology) will:*   * Arrange training for the laboratory and clinical teams as appropriate * Actively participate in and promote continuing education and research activities consistent with the position * Develop a system for training, certification and retraining of POCT operators in the following key areas:   + instructions on safe working practices   + principles of operation of the POCT device   + clinical utility and limitations   + review and understanding of error messages   + calibration and QC requirements   + patient preparation, sample collection and handling   + recording of patient results   + action on improper and unsafe use of POCT device   + procedure for recording of adverse incidents   **Risk, Health & Safety**  *The Senior Medical Scientist (Microbiology) will:*   * Participate in ensuring that effective safety procedures are in place to comply not only with the Safety, Health & Welfare at Work Act, but also within the spirit of the Hospital's mission, vision and values. * Assist and co-operate with the Chief Medical Scientist in developing 'Best Practice' procedures to be followed in preventing and managing accidents occurring in the Laboratory area. * Develop and co-operate with procedures to reduce and manage accidents occurring in the laboratory area. * Receive and record details concerning mishaps, complaints and defects in supplies and equipment, investigate the circumstances with appropriate team members and taking the necessary actions and report the findings as required. * Ensure that staff carry out all their duties in a safe manner, use personal protective equipment when necessary and are familiar with evacuation procedures. * Provide training, instruction, information and supervision to assist staff in complying with their duties under the Safety, Health & Welfare at Work Act.   **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.   **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 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. * 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 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: -**  **Category A:**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | | | | | (i) | | **Individuals who qualified before the 31st March 2019 and have not engaged in the practice of the profession in the Republic of Ireland must:** | | | | |  | | **Or** |  | | | | (ii) | | **Individuals who qualified before the 31st March 2019 and have been engaged in the practice of the profession for less than 2 years fulltime (or an aggregate** **of 2 years fulltime), in the Republic of Ireland between 31st March 2014 and 30th March 2019 must:** | | | | | **(a)** | | Possess a qualification approved by the Medical Scientists Registration Board at CORU see <https://www.coru.ie/about-us/registration-boards/medical-scientists-registration-board/apply-for-registration/> | | | | |  | | **Or** | |  | | | **(b)** | | Hold a comparable qualification recognised by the Medical Scientists Registration Board at CORU. | | | | |  | | **Or** | |  | | | **(c)** | | Submit proof to the HSE of their application for recognition of their qualifications from the Medical Scientists Registration Board at CORU by a date specified by the HSE. (HBS Recruit or recruiting unit will specify this date, generally pre interview date). | | | | |  | | **Or** | |  | | | **(d)** | | Hold a qualification previously recognised by the Academy of Clinical Science and Laboratory Medicine (ACSLM) (*formerly the Academy of Medical Laboratory Science)* upto 31st March 2019. | | | | |  | | **And** | |  | | | **(e)** | | Possess one of the following NFQ Level 9 post graduate qualifications:   * MSc Clinical Laboratory Science, Dublin Institute of Technology. * MSc Clinical Chemistry, University of Dublin, Trinity College. * MSc Biomedical Science, University of Ulster. * MSc Biomedical Science, Cork Institute of Technology / University College Cork. * MSc Molecular Pathology, Dublin Institute of Technology / University of Dublin, Trinity College. | | | | |  | | **Or** | | |  | | **(f)** | | An equivalent qualification at minimum Level 9 validated by the Academy of Clinical Science and Laboratory Medicine (ACSLM). | | | | |  | | **Or** | | |  | | **(g)** | | Have attained the Fellowship of the Academy of Clinical Science and Laboratory Medicine awarded before July 2018. | | | | |  | | **Or** | | |  | | **(h)** | | Have attained the Fellowship examination of the Institute of Biomedical Science ***(Awarded prior to 1999).*** | | | | |  | | **And** | | |  | | **(i)** | | Possess four years full time clinical experience (or an aggregate of four years’ full time clinical experience) as a medical scientist in a clinical diagnostic laboratory since qualifying as a medical scientist. | | | | |  | | **And** | | |  | | **(j)** | | Demonstrate evidence of Continuous Professional Development. | | | | |  | | **And** | | |  | | **(k)** | | Candidates must have the requisite knowledge and ability (including a high standard of suitability and management ability) for the proper discharge of the duties of the office. | | | |   **Category B:**  **Individuals who qualified before the 31st March 2019 and have been engaged in the practice of the profession in the Republic of Ireland for a minimum of 2 years fulltime (or an aggregate of 2 years fulltime), between 31st March 2014 and 30th March 2019 must:**   |  |  |  | | --- | --- | --- | | **(a)** | Hold a qualification recognised by the Medical Scientists Registration Board at CORU see <https://www.coru.ie/about-us/registration-boards/medical-scientists-registration-board/apply-for-registration/> | | |  | **Or** |  | | **(b)** | Hold a qualification previously recognised by the Academy of Clinical Science and Laboratory Medicine (ACSLM) (*formerly the Academy of Medical Laboratory Science)* upto 31st March 2019. | | |  | **And** |  | | **(c)** | Possess one of the following NFQ Level 9 post graduate qualifications:   * MSc Clinical Laboratory Science, Dublin Institute of Technology. * MSc Clinical Chemistry, University of Dublin, Trinity College. * MSc Biomedical Science, University of Ulster. * MSc Biomedical Science, Cork Institute of Technology / University College Cork. * MSc Molecular Pathology, Dublin Institute of Technology / University of Dublin, Trinity College. | | |  | **Or** |  | | **(d)** | An equivalent qualification at minimum Level 9 validated by the Academy of Clinical Science and Laboratory Medicine (ACSLM). | | |  | **Or** |  | | **(e)** | Have attained the Fellowship of the Academy of Clinical Science and Laboratory Medicine awarded before July 2018. | | |  | **Or** |  | | **(f)** | Have attained the Fellowship examination of the Institute of Biomedical Science ***(Awarded prior to 1999).*** | | |  | **And** |  | | **(g)** | Possess four years full time clinical experience (or an aggregate of four years’ full time clinical experience) as a medical scientist in a clinical diagnostic laboratory since qualifying as a medical scientist. | | |  | **And** |  | | **(h)** | Demonstrate evidence of Continuous Professional Development. | | |  | **And** |  | | **(i)** | Candidates must have the requisite knowledge and ability (including a high standard of suitability and management ability) for the proper discharge of the duties of the office. | |  1. **Registration on the Medical Scientists register**   **Category A**  Appointees who subsequently fail to achieve the necessary registration on the Medical Scientists Register maintained by the Medical Scientists Registration Board at CORU **will not** be able to continue in the role of a Medical Scientist **beyond the 30th March 2021.**  **Category B**  Appointees must have applied for registration with CORU by the **30th March 2021** to continue in the role of a Medical Scientist **beyond the 30th March 2021**.   1. **Annual registration**   On appointment, practitioners must maintain live annual registration on the Medical Scientists Register maintained by the Medical Scientists Registration Board at CORU.   1. **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.   1. **Character**   Candidates for and any person holding the office must be of good character. |
| **Post Specific Requirements** | Demonstrate depth and breadth of experience working in a Pathology Laboratory including Microbiology as relevant to the role. |
| **Other requirements specific to the post** | * A flexible approach to working hours is required. * Participation in the provision of out of hours service where required |
| **Skills, competencies and/or knowledge** | ***Candidates must:***  **Professional Knowledge**   * Demonstrate a good knowledge and understanding of the requirements of ISO15189 * Demonstrate in-depth knowledge and understanding of principles and practices related to the routine Microbiology Laboratory. * Demonstrate in depth understanding and knowledge of Microbiology * Demonstrate evidence based clinical knowledge in making decisions regarding implementing new techniques and equipment. * Demonstrate the ability and competence to develop, maintain, monitor and evaluate new and emerging trends in Microbiology. * Demonstrate experience in Laboratory Accreditation. * Demonstrate up-to-date knowledge of best practice in delivering a quality laboratory service. * Demonstrate awareness and compliance with HSE policies, procedures, guidelines and standards and promotion of this to others. * Demonstrate the ability to identify and resolve system failures and anomalies. * Demonstrate experience in documentation preparation. * Demonstrate evidence of computer/IT skills. * Demonstrate evidence of commitment to continuing professional development. * Demonstrate flexibility and openness to change. * Demonstrate a focus on quality and patient centred service provision.   **Planning and Managing Resources**   * Demonstrate evidence of effective planning and managing skills. * Demonstrate experience of managing large workloads, ability to work under pressure and multi-task. * Demonstrate good time management skills. * Demonstrate capacity for management responsibility and demonstration of initiative. * Demonstrate ability to evolve and adapt to a rapid changing environment. * Demonstrate the ability to manage self in a busy working environment.   **Managing & Developing (Self & Others)**   * Demonstrate experience in staff training and maintaining staff training records. * Demonstrate ability to work to your own initiative, work independently and as a lead person and ability to manage a team. * Demonstrate ability to maintain self-control in difficult and challenging situations. * Demonstrate supervisory, management and leadership experience.   **Commitment to Providing a Quality Service**   * Demonstrate a commitment to providing a quality service. * Demonstrate innovation and openness to change in striving to ensure high standards in service delivery. * Ensure that all service users are treated with dignity and respect and makes certain that the welfare of the service user is a key consideration at all times. * Monitor and review his/ her own work, and that of the team to ensure its quality and accuracy.   **Evaluating Information and Judging Situations**   * Make decisions and solve problems in a timely manner. * Gather and analyse information from a variety of (relevant) sources before making a decision and will use opportunities to empower others as appropriate. * Display the ability to explain the rationale behind decisions confidently when faced with opposing or competing demands   **Communication Skills**   * Demonstrate effective communication skills including the ability to present information in a clear and concise manner. * A willingness to share knowledge and/or new ideas with staff and colleagues. |
| **Campaign Specific Selection Process**  **Ranking/Shortlisting / Interview** | A ranking and or shortlisting exercise may be carried out on the basis of information supplied in your application form. The criteria for ranking and or shortlisting are based on the requirements of the post as outlined in the eligibility criteria and skills, competencies and/or knowledge section of this job specification. Therefore it is very important that you think about your experience in light of those requirements.  Failure to include information regarding these requirements may result in you not being called forward to the next stage of the selection process.  Those successful at the ranking stage of this process (where applied) will be placed on an order of merit and will be called to interview in ‘bands’ depending on the service needs of the organisation. |
| **Code of Practice** | The Health Service Executive will run this campaign in compliance with the Code of Practice prepared by the Commission for Public Service Appointments (CPSA). The Code of Practice sets out how the core principles of probity, merit, equity and fairness might be applied on a principle basis. The Code also specifies the responsibilities placed on candidates, facilities for feedback to applicants on matters relating to their application when requested, and outlines procedures in relation to requests for a review of the recruitment and selection process and review in relation to allegations of a breach of the Code of Practice. Additional information on the HSE’s review process is available in the document posted with each vacancy entitled “Code of Practice, Information for Candidates”.  Codes of practice are published by the CPSA and are available on [www.hse.ie/eng/staff/jobs](http://www.hse.ie/eng/staff/jobs) in the document posted with each vacancy entitled “Code of Practice, Information for Candidates” or on [www.cpsa.ie](http://www.cpsa.ie). |
| The reform programme outlined for the Health Services may impact on this role and as structures change the job specification may be reviewed.  This job specification is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive nor restrictive and is subject to periodic review with the employee concerned. | |



**Medical Scientist, Senior (Microbiology)**

**Terms and Conditions of Employment**

|  |  |
| --- | --- |
| **Tenure** | The current vacancies available are 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 is:  €51,855 - €54,194 - €56,271 - €58,394 - €60,582 - €62,732 - €64,945 - €67,137 - €69,346  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. |
| **Working Week** | The standard working week applying to the post is to be confirmed at Job Offer stage.  HSE Circular 003-2009 “Matching Working Patterns to Service Needs (Extended Working Day / Week Arrangements); Framework for Implementation of Clause 30.4 of Towards 2016” applies. Under the terms of this circular, all new entrants and staff appointed to promotional posts from Dec 16th 2008 will be required to work agreed roster / on call arrangements as advised by their line manager. Contracted hours of work are liable to change between the hours of 8am-8pm over seven days to meet the requirements for extended day services in accordance with the terms of the Framework Agreement (Implementation of Clause 30.4 of Towards 2016). |
| **Annual Leave** | The annual leave associated with the post will be confirmed at Contracting 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 joining the public service, or re-joining the public service with a 26 week break in service, between 1 April 2004 and 31 December 2012 (new entrants) have no compulsory retirement age.  Public servants, joining the public service or re-joining the public service after a 26 week break, after 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. |
| **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)