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**candidate Clinical Nurse Specialist (cCNS)**

**candidate Midwife Specialist (cCMS)**

**Insert Campaign Ref XXXX**

**Job Specification & Terms and Conditions**

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| **Job Title, Grade** | **Clinical Nurse Specialist Candidate (Children’s)**  **Grade Code 2695**  **Clinical Nurse Specialist Candidate (Community/Primary Care)**  **Grade Code 2696**  **Clinical Nurse Specialist Candidate (General)**  **Grade Code 2697**  **Clinical Nurse Specialist Candidate (Intellectual Disability)**  **Grade Code 2698**  **Clinical Nurse Specialist Candidate (Mental Health)**  **Grade Code 2699**  **Clinical Midwife Specialist Candidate**  **Grade Code 2700**  **(Select as appropriate)**  The successful candidate will, on completion of the requirements set out in the section entitled ‘Purpose of the Post’ be appointed to the post of candidate Clinical Nurse Specialist/candidate Clinical Midwife Specialist |
| **Remuneration** | The salary scale for the post is:  Insert the relevant salary scale for this position.  For example:  XX,XXX - XX,XXX - XX,XXX - XX,XXX - XX,XXX - - **XX,XXX LSI** (DD/MM/YY)  Salary Scales are updated periodically and the most up to date versions can be found here: <https://healthservice.hse.ie/staff/benefits-services/pay/pay-scales.html> |
| **Competition Reference** | To be completed by Recruiter. |
| **Whole Time**  **Equivalent** | To be completed by Recruiter. |
| **Closing Date** | To be completed by Recruiter: Candidates will normally be given at least two weeks' notice of interview. The timescale may be reduced in exceptional circumstances. |
| **Proposed Interview date(s)** | To be completed by Recruiter. |
| **Taking up Appointment** | A start date will be indicated at job offer stage. |
| **Duration of Post** | The candidate CNS/CMS is required to progress to Clinical Nurse/Clinical Midwife Specialist grade within 2 years of commencement of this pathway and formally apply for entry onto the Interim ONMSD CNS/CMS database (until the database is  transferred to its permanent location) |
| **Location of Post/ Organisational Area** | Insert location  There is currently xx permanent / specified purpose / part time / whole-time vacancy available in xxxxxxxxxx  A panel may be formed as a result of this campaign for xxxxxxxxxxx from which current and future, permanent and specified purpose vacancies of full or part-time duration may be filled.  **What is the name of the Department?**  **Where is the CNS/CMS located?**  **Which hospital/ service?**  **Which geographical area?** |
| **Informal Enquiries** | Please provide name & contact details for person who will deal with informal enquiries. |
| **Background to the cCNS/cCMS pathway** | The Policy on the Development of Graduate to Advanced Nursing and Midwifery Practice (DOH, 2019) outlines a pathway to support a change for specialist practice to develop and meet service need, including the revised eligibility criteria for CNS/CMS as follows:   * A minimum of 1 years’ experience in practice prior to completing the required post graduate qualification in the specialist area at level 9 (equivalent to 60 ECTS or above) * Recognition as a CNS/CMS to meet service needs therefore requires the completion of a postgraduate qualification together with a minimum of 1 years’ specialist experience * This is in addition to meeting the requirements set by the HSE to ensure the delivery of safe, effective practice to meet service demands   In response to an identified service need a candidate CNS/CMS pathway has been established and sets out the following:   1. Nurses/Midwives currently employed as Staff Nurses/Midwives (SN/SMs) and Enhanced Nurses/Midwives (EN/EMs) and any other nursing/midwifery grades who have a minimum of 1 years clinical experience and who express an interest in CNS/CMS roles could be supported to progress on a candidate CNS/CMS pathway as follows: 2. A recruitment campaign will be organised by the CHO/HG between local HR and services. 3. Nurses/midwives who are successful at interview for candidate CNS/CMS post will:  * be offered a contract for a *candidate CNS/CMS post (identify specialist area)* at CNM1/CMM1 grade with a job description outlining the cCNS/cCMS competencies to be achieved. * be required to demonstrate their specialist experience or if they do not possess the relevant specialist experience, they will be supported to attain one year’s clinical specialist experience * be required to demonstrate that they have completed the required postgraduate education, or agree and are supported to undertake the required postgraduate education, at level 9 qualification (equivalent to 60 ECTS or above) relevant to the specialist area. * be required to demonstrate that they have continuing professional development (CPD) relevant to the specialist area or will be supported to obtain the required CPD.  1. All of the above must be achieved within 2 years from appointment for this pathway. 2. For Nurses/Midwives who express an interest in CNS/CMS roles and who currently hold a level 8 educational qualification in the specialist area (equivalent to 60 ECTS or above), this qualification will be recognised up to September 2026.   The clinical experience requirements for this cohort of nurses/midwives remain consistent with the DoH (2019) policy, i.e. a minimum of 1 years’ experience in practice and a minimum of 1 years’ experience in the specialist area and they could be supported to progress on a candidate CNS/CMS Pathway.  **The above pathway is valid from May 2023 to September 2026** |
| **Details of Service** | Provide details to the following types of questions:  **What service does the unit/service/catchment area provide?**  **What service user group is served by the unit/service/catchment area?**  **What are the possible future developments for the service?**  **What is the team structure?**  **What clinical area is covered by this service?**  There is no limit to the text that can be inserted here. Please use this section to highlight the service and generate interest in the service and job being recruited for. |
| **Reporting Relationship** | The professional reporting relationship is to the relevant Nursing/Midwifery Line Manager.  The clinical reporting relationship is to the senior clinical decision maker who has responsibility for the service /service user. |
| **Key Working Relationships**  **to include but not limited to** | The cCNS/cCMS will work collaboratively with a range of internal and external stakeholders including:  Director/Assistant Director of Nursing/Midwifery/Line Manager  CNS/CMS’s, RANP/RAMP’s and other nursing grades  Multidisciplinary Team colleagues and other key stakeholders within services, including National Clinical and Integrated Care Programmes  Service users/families and/or carers  Nursing and Midwifery Board of Ireland  Educational Bodies  Nursing and Midwifery Planning and Development Units  Centres of Nursing and Midwifery Education  National Clinical Leadership Centre  Other relevant statutory and non-statutory organisations |
| **Purpose of the Post** | **As outlined in this job description, the cCNS/cCMS pathway will facilitate the post holder to be supported to professionally and clinically develop the skills and knowledge required to achieve the competencies of the CNS/CMS role.**  The cCNS/cCMS post holder will be enabled to deliver care in line with the five core concepts of the role set out in the Framework for the Establishment of Clinical Nurse/Midwife Specialist Posts, 4th edition, National Council for the Professional Development of Nursing and Midwifery (NCNM) 2008.  **Caseload**  The cCNS/cCMS will focus initially on the following service user groups: List **service user groups** – (*reference Scope of Practice of the cCNS/cCMS role within your service*)  The cCNS/cCMS clinical role is based on the core concepts and associated competencies for the CNS/CMS (adapted from NCNM 4th edition 2008)  The concepts are:   * Clinical Focus (Direct and Indirect Care) * Service user/Service User Advocacy * Education and Training * Audit and Research * Consultancy (including leadership in clinical practice) |
| **Principle Duties and Responsibilities** | Clinical Focus **The cCNS/cCMS will be supported to:**  Develop a strong service user focus whereby the specialty defines itself as nursing/midwifery and subscribes to the overall purpose, functions and ethical standards of nursing/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 service user, family and/or carer. Indirect care relates to activities that influence and support the provision of direct care.  **Direct Care**  Throughout the agreed pathway, the cCNS/cCMS will be enabled to develop the specific knowledge, skills and competencies to:   * Provide a specialist nursing/midwifery service for service users with a diagnosis ofXXXX who require support and treatment through the continuum of care * Undertake comprehensive service user assessment to include physical, psychological, social and spiritual elements of care using best evidence based practice in **Insert Name**  care * Use the outcomes ofnursing/midwifery assessment to develop and implement plans of care/service user group management to contribute to the plans of service users, their families/carers and the MDT * Monitor and evaluate the service user’s response to treatment and amend the plan of care accordingly in collaboration with the MDT and service user, family and/or carer as appropriate. * Make alterations in the management of service user condition in collaboration with the MDT and the service user in line with the nursing/midwifery aspect of agreed pathways and policies, procedures, protocols and guidelines (PPPG’s). * Accept appropriate referrals from MDT colleagues * Co-ordinate investigations, treatment therapies and service user follow-up * Communicate with service users, family and/or carer as appropriate, to assess service user needs and provide relevant support, information, education, advice and counselling as required * Where appropriate, work collaboratively with MDT colleagues across Primary and Secondary Care to provide a seamless service delivery to the service user, family and/or carer as appropriate   Participate in medication reconciliation taking cognisance of poly-pharmacy and support medical and pharmacy staff with medication reviews and medication management  Identify and promote specific symptom management strategies as well as the identification of triggers which may cause exacerbation of symptoms. Provide service user with appropriate self-management strategies and escalation pathways  Manage nurse/midwife led **Insert Name** clinics in collaboration with the MDT  Identify health promotion priorities for the service user, family and/or carer and support service user 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 service user’ needs  **Indirect Care**  Throughout the agreed pathway, the cCNS/cCMS will be enabled to develop the specific knowledge, skills and competencies to:   * Identify and agree appropriate referral pathways for service user with XXXX when **Insert Name** * Participate in service user case reviews with MDT colleagues * Use a case management approach to service user 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 **Insert Name** care * Take a lead role in ensuring the nursing/midwifery service for service user with **Insert Name** condition is in line with best practice guidelines and the Safer Better Healthcare Standards (HIQA, 2012)   **Service user/Client Advocate** Throughout the agreed pathway, the cCNS/cCMS will be enabled to develop the specific knowledge, skills and competencies to:  * Communicate, negotiate and represent service user, family and/or carer values and decisions in relation to their condition to MDT colleagues in **both Primary and Secondary Care** as appropriate * Develop and support the concept of advocacy, particularly in relation to service user participation in decision making, thereby enabling informed choice of treatment options * Respect and maintain the privacy, dignity and confidentiality of the service user, family and/or carers * Establish, maintain and improve procedures for nursing/midwifery collaboration and cooperation between Acute Services, Primary Care and Voluntary Organisations as appropriate * Proactively challenge any interaction, nursing/midwifery or otherwise, which fails to deliver a good quality service to service user.  Education & Training Throughout the agreed pathway, the cCNS/cCMS will be enabled to develop the specific knowledge, skills and competencies to:   * Develop clinical competence in service user management within **Insert Name** nursing/midwifery, keeping up-to-date with relevant research to ensure the implementation of evidence based practice. * Provide the service user, family and/or carer with appropriate information, education and other supportive interventions to increase their knowledge, skill and confidence and autonomy in managing their **Insert Name** condition. * Contribute to the design, development and implementation of education programmes and resources for the service user, family and/or carer in relation to **Insert Name** to enable them to manage their own condition. * 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 **Insert Name** nursing/midwiferydelivery 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 nursing/midwifery educational programmes in **Insert Name** care * In tandem with the line management structure, be responsible for addressing own continuing professional development (CPD) needs to achieve competencies required for the role * Use agreed protected time for research, education and professional development * With the line manager, use the Professional Development Planning Framework for Nurses and Midwives to plan and self-assess competency achievement and additional CPD needs  Audit & Research Throughout the agreed pathway, the cCNS/cCMS will be enabled to develop the specific knowledge, skills and competencies to:   * Establish and maintain a register of service user with **Insert Name** within the cCNS/cCMS Caseload. * Maintain a record of clinically relevant data aligned to National Key Performance Indicators (KPI’s) as directed and advised by the DoN/M. * Identify, initiate and conduct nursing/midwifery audit and research relevant to the area of practice and take part in MDT audit and research. * Identify, critically analyse, disseminate and integrate into practice, best evidence relating to care in **Insert Name** * Contribute to nursing/midwifery research on **Insert Name** care. * Use the outcomes of audit to improve nursing/midwifery service provision and advocate, when appropriate, for improvement of non-nursing/midwifery services * 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 nursing/midwifery practice   **Audit expected outcomes including**   * Collate relevant data (insert agreed KPIs/clinical targets) which will provide a baseline audit of expected outcomes and demonstrate evidence of the effectiveness of the cCNS/cCMS interventions undertaken and refer to the National KPIs associated with the specialty. They should have a clinical nursing/midwifery focus as well as a breakdown of activity - service user seen and treated. * Evaluate nursing/midwifery audit results and research findings to identify areas for quality improvement in collaboration with nursing/midwifery management and MDT colleagues (Primary and Secondary Care).  Consultant (including leadership in clinical practice) Throughout the agreed pathway, the cCNS/cCMS will be enabled to develop the specific knowledge, skills and competencies to:   * Understand leadership in clinical practice with the aim of acting as a resource and role model for nursing/midwifery **Insert Name** practice. * Contribute the expanding nursing/midwifery knowledge/expertise to the development of clinical standards and guidelines and support implementation * Use growing specialist knowledge to support and enhanceown nursing/midwifery practice and practice of colleagues * Develop collaborative working relationships with local **Insert Name** CNS/CMS’s, Registered Advanced Nurse/Midwife Practitioner/MDT colleagues as appropriate, contributing to person centred care pathways to promote the integrated model of care delivery. * With the support of the DoN/M/line manager, attend integrated care planning meetings as required * Where appropriate, develop and maintain relationships with specialist services in voluntary organisations which support service users in the community. * Understand the requirement to liaise with other health service providers in the development and on-going delivery of the National Clinical and Integrated Programme model of care. * Understand the requirement to network with other cCNS/cCMS’s and CNS/CMS’s in **Insert Name** and in related clinical and professional areas of practice. |
| **Health and 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.   * 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.   **Quality, Risk and Safety Responsibilities**  **I**t 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 * Adequately identifies, assesses, manages and monitors risk within their area of responsibility * 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 nursing/midwifery quality improvement initiatives in their area which are in keeping with local organisational quality, risk and safety requirement * Contribute specialist expertise 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 * Respond immediately and appropriately to ensure the safety of any service user that you are aware has been put at risk * 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 cCNS/cCMS in **Insert Name**  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 one’s 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:** | Throughout the agreed pathway, the cCNS/cCMS (Insert Speciality) will be enabled to develop the specific knowledge, skills and competencies to:   * Provide an efficient, effective and high quality nursing/midwifery service, respecting the needs of each service user, family and/or carer * Effectively manage time and caseloadin order to meet changing and developing service need * Continually monitor the nursing/midwifery service to ensure it reflects current needs * Implement and manage identified changes * Ensure that confidentiality in relation to service user records is maintained * Understand the need to represent the specialist nursing/midwifery 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 nursing/midwifery and ensure that this service is in line with HSE requirements. * Contribute to the service planning process as appropriate and as directed by the Director of Nursing/Midwifery/Line Manager   **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 Description is not intended to be a comprehensive list of all duties involved and consequently, the post holder may be required to perform other duties as appropriate to the post which may be assigned to him/her from time to time and to contribute to the development of the post while in office.** |
| **Eligibility Criteria**  **Qualifications and/or experience** | **Candidates must have at the latest date of application: -**  ***Please insert Qualifications for the post. These are available on HSE website at -*** [***http://hse.ie/eng/staff/Jobs/Eligibility\_Criteria/***](http://hse.ie/eng/staff/Jobs/Eligibility_Criteria/)  **Health**  A candidate for and any person holding the office must be fully competent and capable of undertaking the duties attached to the office and be in a state of health such as would indicate a reasonable prospect of ability to render regular and efficient service.  **Character**  Each candidate for and any person holding the office must be of good character. |
| **Post Specific Requirements, additional qualifications and or experience required** | The organisation will consider the post specific requirements or experience required in developing the specific cCNS/cCMS **Insert Name** service. |
| **Essential Skills, competencies and/or knowledge** | **Professional Knowledge and Experience**  The cCNS/cCMS is expected to demonstrate the core and specific competencies deemed necessary to work within the identified scope of practice required for this role.  The cCNS/cCMS will:   * 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, 2021) * 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 * Demonstrate practitioner competence and professionalism as it related to cCNS/cCMS. * Demonstrate sufficient knowledge, clinical reasoning, communication and organisational skills and evidence based practice required to carry out the duties and responsibilities of the role * Demonstrate an awareness of current and emerging nursing strategies and policy in relation to the clinical/specialist area. * Demonstrate the ability to relate nursing research to nursing practice. * Demonstrate an awareness of HR policies and procedures including disciplinary procedures. * Demonstrate an awareness of relevant legislation and policy e.g., health and safety, infection control etc. * Demonstrate a commitment to continuing professional development. * Demonstrate a willingness to develop IT skills relevant to the role.   **Communication and Interpersonal Skills**  Demonstrate:   * Emotionally intelligent communication skills * Ability to build and maintain relationships particularly in the context of personal and team relationships * Ability to present information in a clear and concise manner * Ability to provide constructive feedback to encourage future learning * Demonstrates the ability to influence others effectively.   **Organisation and Management Skills:**  Demonstrate:   * Evidence of effective organisational skills including awareness of appropriate resource management and the importance of value for money * Ability to plan and organise effectively * Ability to attain designated nursing/midwifery service targets, manage deadlines and multiple activities * Ability to work autonomously * A willingness to be flexible in response to changing local/organisational requirements.   **Building & Maintaining Relationships including Team and Leadership skills**  Demonstrate:   * The ability to work on own initiative as well as the ability to build and maintain relationships with MDT colleagues. * With the required support, demonstrate leadership in clinical practice * A knowledge of change management and team management skills * Adopts a collaborative approach to patient care by co-ordination of care/interventions and interdisciplinary team working.   **Commitment to providing a quality service:**  Demonstrate:   * Awareness and respect for service user and family/carers’ views in relation to their care * A strong commitment to providing quality improvement programmes * The ability to conduct audits * Demonstrates integrity and ethical stance. * Demonstrate motivation, initiative and an innovative approach to job and service developments, is flexible and open to change.   **Analysing and Decision Making**  Demonstrate:   * Adopts an overview of complex problems before generating solutions and anticipates implications * Effective analytical, problem solving and evidenced-based decision making skill * Uses a range of information sources and knows how to access relevant information to address issues. |
| **Other requirements specific to the post** | Please outline if there are specific practical requirements that are specific to the post  e.g.   * have access to appropriate transport to fulfil the requirements of the role   participate in an on-call rota.  Formal written commitment to achieve the requirements of the cCNS/cCMS pathway  must be provided if a job offer is made |
| **Competition Specific Selection Process**  **Short listing / 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.  *Candidates who are successful at interview and subsequently meet the necessary registration requirements with NMBI will automatically be upgraded into the prepared Clinical Nurse/Clinical Midwife Specialist post.* |
| **Diversity, Equality and Inclusion** | The HSE is an equal opportunities employer.  Employees of the HSE bring a range of skills, talents, diverse thinking and experience to the organisation. The HSE believes passionately that employing a diverse workforce is central to its success – we aim to develop the workforce of the HSE so that it reflects the diversity of HSE service users and to strengthen it through accommodating and valuing different perspectives. Ultimately this will result in improved service user and employee experience.  The HSE is committed to creating a positive working environment whereby all employees inclusive of age, civil status, disability, ethnicity and race, family status, gender, membership of the Traveller community, religion and sexual orientation are respected, valued and can reach their full potential. The HSE aims to achieve this through development of an organisational culture where injustice, bias and discrimination are not tolerated.  The HSE welcomes people with diverse backgrounds and offers a range of supports and resources to staff, such as those who require a reasonable accommodation at work because of a disability or long term health condition.  For further information on the HSE commitment to Diversity, Equality and Inclusion, please visit the Diversity, Equality and Inclusion web page at <https://www.hse.ie/eng/staff/resources/diversity/> |
| **Code of Practice** | The Health Service Executive will run this campaign in compliance with the Code of Practice prepared by the Commission for Public Service Appointments (CPSA).  The CPSA is responsible for establishing the principles that should be followed when making an appointment. These are set out in the CPSA Code of Practice. The Code outlines the standards that should be adhered to at each stage of the selection process and sets out the review and appeal mechanisms open to candidates should they be unhappy with a selection process.  The CPSA Code of Practice can be accessed via <https://www.cpsa.ie/>. |
| The reform programme outlined for the health services may impact on this role and as structures change the job description may be reviewed.  This job description is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive nor restrictive and is subject to periodic review with the employee concerned. | |

**candidate Clinical Nurse Specialist (cCNS)**

**candidate Clinical Midwife Specialist (cCMS)**

**Terms and Conditions of Employment**

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| **Tenure** | The current vacancy available is **permanent/temporary** and **whole time/part-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.  Given the developmental nature of this cCNS/cCMS pathway the successful cCNS/cCMS will be required to adhere to the terms as set out below which are **specific to this whole time** appointment.   * The cCNS/cCMS is expected to demonstrate achievement of the core and specific competencies deemed necessary to manage the identified scope of practice. * On successful completion of the above requirements the cCNS/cCMS will be appointed as a CNS/CMS in a permanent capacity. * Failure to successfully achieve essential requirements within the agreed pathway timeframe of two years will result in termination of the cCNS/cCMS role and the candidate will return to a previously held substantive post **OR will be** re-deployed within the organisation.   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: **PLEASE INSERT (Pro Rata - part-time)**  **PLEASE INSERT the most recent salary scales for the role and grade code.**  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.  **Please include the following paragraph for posts that traditionally worked 9-5, Monday to Friday. Do not include for nursing and other posts that are required to work shifts over a 7-day week.**  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 and is in accordance with HSE Policy. |
| **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. |
| **Protection of Children Guidance and Legislation** | The welfare and protection of children is the responsibility of all HSE staff. You must be aware of and understand your specific responsibilities under the Children First Act 2015, the Protections for Persons Reporting Child Abuse Act 1998 in accordance with Section 2, Children First National Guidance and other relevant child safeguarding legislation and policies.  Some staff have additional responsibilities such as Line Managers, Designated Officers and Mandated Persons. You should check if you are a Designated Officer and / or a Mandated Person and be familiar with the related roles and legal responsibilities.  For further information, guidance and resources please visit: [HSE Children First webpage](https://www.hse.ie/eng/services/list/2/primarycare/childrenfirst/resources/). |
| **Infection Control** | Have a working knowledge of Health Information and Quality Authority (HIQA) Standards as they apply to the role for example, Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc. and comply with associated HSE protocols for implementing and maintaining these standards as appropriate to the role. |
| **Health & Safety** | It is the responsibility of line managers to ensure that the management of safety, health and welfare is successfully integrated into all activities undertaken within their area of responsibility, so far as is reasonably practicable. Line managers are named and roles and responsibilities detailed in the relevant Site Specific Safety Statement (SSSS).  Key responsibilities include:   * Developing a SSSS for the department/service[[1]](#footnote-1), as applicable, based on the identification of hazards and the assessment of risks, and reviewing/updating same on a regular basis (at least annually) and in the event of any significant change in the work activity or place of work. * Ensuring that Occupational Safety and Health (OSH) is integrated into day-to-day business, providing Systems Of Work (SOW) that are planned, organised, performed, maintained and revised as appropriate, and ensuring that all safety related records are maintained and available for inspection. * Consulting and communicating with staff and safety representatives on OSH matters. * Ensuring a training needs assessment (TNA) is undertaken for employees, facilitating their attendance at statutory OSH training, and ensuring records are maintained for each employee. * Ensuring that all incidents occurring within the relevant department/service are appropriately managed and investigated in accordance with HSE procedures[[2]](#footnote-2). * Seeking advice from health and safety professionals through the National Health and Safety Function Helpdesk as appropriate. * Reviewing the health and safety performance of the ward/department/service and staff through, respectively, local audit and performance achievement meetings for example.   Note: Detailed roles and responsibilities of Line Managers are outlined in local SSSS. |

**\*\*\*\*\*\*\*Helpful Reminders\*\*\*\*\*\*\***

**1) Please remember to delete any prompts and / or tables (in dark blue) in the sections above**

**2) Ensure all fonts are now in black**

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)