

**Registered Advanced Midwife Practitioner (RAMP)**

**Job Specification & Terms and Conditions**

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| **Job Title and Grade Code** | **Registered Advanced Midwife Practitioner (RAMP) (insert speciality)**  (Grade Code: 2535) |
| **Campaign Reference** | To be completed by Recruiter. |
| **Closing Date** | To be completed by Recruiter. |
| **Proposed Interview Date (s)** | To be completed by Recruiter. |
| **Taking up Appointment** | A start date will be indicated at job offer stage. |
| **Location of Post** | 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. |
| **Informal Enquiries** | Please provide name & contact details for person who will deal with informal enquiries. |
| **Details of Service** | Provide details to the following types of questions:   * What service does the unit provide? * What client group is served by the unit? * What are the possible future developments for the service? * What is the team structure? * What 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** | Please outline reporting relationships associated with the post:   * To whom will the job holder report? * Who will report to the job holder?   Is professionally accountable to the Director of Midwifery  Clinically accountable to the Consultant / Clinical Lead / GP |
| **Clinical Indemnity** | **To be completed by the service(s) {Hospital Group and/or CHO area}** |
| **Key Working Relationships**  to include but not limited to: | Director/Assistant Director of Midwifery  Clinical Midwife Manager  RAMPs and other grades of Midwifery  Senior Midwives within the health service  Medical colleagues  Interprofessional colleagues  Women and Babies / service users  Prescribing site coordinator(s)  Nursing and Midwifery Board of Ireland  Higher Education Institution  Nursing and Midwifery Planning and Development Unit  Centres of Nursing and Midwifery Education  National Women and Infants Health Programme  National Leadership and Innovation Centre  Other relevant statutory and non-statutory organisations |
| **Clinical supervision** | The RAMP **(insert specialty)** engages in on-going clinical supervision as per a Memorandum of Understanding. The structure, process and outcome of clinical supervision must be explicit (formal and informal).  The RAMP **(insert specialty)** maintains a record of clinical supervision in his/her professional practice portfolio. |
| **Purpose of the Post** | The advanced practice service is provided by midwives who practice at a higher level of capability as independent, autonomous and expert advanced practitioners. The overall purpose of the service is to provide safe, timely, evidenced based midwife-led care to women and babies at an advanced midwifery level .This involves undertaking and documenting complete episodes of maternity care, which includes comprehensively assessing, diagnosing, planning, treating and discharging women and babies in accordance with collaboratively agreed local policies, procedures, protocols and guidelines and/or service level agreements/ memoranda of understanding.  The RAMP **(insert specialty)** demonstrates advanced clinical and theoretical knowledge, critical thinking, clinical leadership and complex decision-making abilities.  The RAMP **(insert specialty)** practices in accordance with the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2014), the Scope of Midwifery Practice Framework (NMBI 2000), Advanced Practice (Midwifery) Standards and Requirements (NMBI 2018), and the Values for Nurses and Midwives in Ireland (Department of Health 2016).  The RAMP **(insert specialty)** service provides clinical leadership and professional scholarship in the delivery of optimal midwifery services and informs the development of evidence based health policy at local, regional and national levels.  The RAMP **(insert specialty)** contributes to midwifery research that shapes and advances midwifery practice, education and health care policy at local, national and international levels.  [ **please insert any additional role specific requirements to support the purpose of the particular advanced midwifery practice service or speciality** ] |
| **Principal Duties and Responsibilities** | The RAMP **(insert specialty)** practices to a higher level of capability across the five principles of competence as defined by Advanced Practice (Midwifery) Standards and Requirements (NMBI 2018).  Each of the five principles specifies the standard which the RAMP **(insert specialty)** has a duty and responsibility to demonstrate and practice.  **Principle 1: Respect for the dignity of the Person**  Practice Standard 1  Midwifery practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values.  **Competency 1**  The RAMP **(insert specialty)** will demonstrate competency and capability in applying ethically sound solutions to complex issues related to caring for women and their babies by:   * 1. Demonstrating leadership by protecting, promoting and supporting the human rights of women and babies, including advocating for each woman’s right to choose how and where to give birth.   The initial caseload\* and scope of practice for the RAMP **(insert specialty)** is agreed as follows: {**insert here**}  The inclusion criteria for the RAMP **(insert specialty)** are as follows:  {**insert here**}  The exclusion criteria for the RAMP **(insert specialty)** are as follows:  {**insert here**}    *\*The caseload and scope of practice for the Registered Advanced Midwife Practitioner service will evolve to reflect changing service needs.*   * 1. Demonstrating clinical leadership by practising empathically and compassionately to facilitate, and support the health and wellbeing of all women, babies and their families, respecting the diversity of beliefs, values, choices and priorities of each woman and her family. * Articulating and promoting the advanced practice midwifery service in clinical, political and professional contexts which is woman-centred, and integrated and team based care {for example presenting key performance outcomes locally and nationally; contributing to the service’s annual report; maternity strategy implementation, participating in local and national committees to ensure best practice as per the National Clinical Programme for Obstetrics and Gynaecology, National Women and Infants Health Programme, **National Clinical Programme for Paediatrics and Neonatology,** and Integrated Care Programme for Children, as required}. * The chosen professional practice model for midwifery {**insert here**} provides the RAMP **(insert specialty)** latitude to control his/her own practice, focusing on person centred care, interpersonal interactions and the promotion of normal physiological process (normality). * The {**insert here**} model for midwifery emphasises a caring therapeutic relationship between the RAMP **(insert specialty)** and women and babies, recognising that RAMP’s work in collaboration with their inter/multidisciplinary colleagues. * It emphasises the woman receiving care from the most appropriate professional, in the most appropriate setting, at the most appropriate time. Supporting the normalisation of pregnancy and birth though the three pathways - Supported Care, Assisted Care and Specialised Care recommended in the National Maternity Strategy (2016-2026) as relevant to the area of practice.   1. Demonstrating leadership by advocating for women and their babies, including their emotional and psychological safety whilst at all times respecting each woman’s right to choose whether or not to follow advice and recommendations about her care. * Initiating and implementing health promotion activities and self-management plans in accordance with the wider public health agenda.   **Principle 2: Professional Responsibility and Accountability**  **Practice Standard 2**  Midwives practise in line with legislation and professional guidance, and are responsible and accountable within their scope of midwifery practice. This encompasses the full range of activities of the midwife as set out in EC Directive 2005/36/ EC and the adapted Definition of the Midwife International Confederation of Midwives 2011 (ICM) as adopted by the NMBI.  **Competency 2**  The RAMP **(insert specialty)** will develop and utilise advanced knowledge, skills and abilities to critically analyse, problem solve and engage in complex clinical decision-making as lead healthcare professionals by;    2.1 Developing his/her capability to be accountable and responsible for senior clinical decision-making, practising effectively as a lead healthcare professional in accordance with legal, professional and regulatory requirements, supported by evidence-based local, national, & international PPPG’s, relevant legislation and relevant professional regulatory standards and requirements pertaining to **(insert specialty)** advanced midwifery services.   * Conduct comprehensive holistic health assessment using evidenced based frameworks, policies, procedures, protocols and guidelines to determine diagnoses and inform autonomous advanced midwifery care. * Synthesise and interpret assessment information particularly history including prior outcomes, physical, mental, emotional social findings and diagnostic data to identify normal, normal-risk, medium-risk and high-risk states of health as appropriate to the **(insert specialty)** service. * Demonstrate timely use of diagnostic investigations/additional evidence-based advanced assessments to inform clinical-decision making. * Exhibit comprehensive knowledge of therapeutic interventions including pharmacological and non-pharmacological advanced midwifery interventions, supported by local, national, & international evidence-based PPPG’s , relevant legislation, and relevant professional regulatory standards and requirements.   2.2 Understand and demonstrate professional boundaries by referring to, transferring and collaborating with other members of the multidisciplinary team for areas that are outside the RAMP’s scope of practice, experience or competence using established referral pathways as per locally agreed PPPG’s to support and guide the RAMP **(insert specialty**) service.   * Develop supporting PPPG’s for discharge and /or transfer of women and babies from the service   1. Promotes, protects and articulates the advanced practice midwifery role in clinical, professional and political contexts developing clinical expertise under supervision, undertaking reflection in and on practice and continuous professional development.   2. Collaboratively develops a vision for the RAMP **(insert specialty)** service based on a competent expert knowledge derived from research, critical thinking and experiential learning {for example informed by vision expressed in the National Maternity Strategy (2016-2026) utilising a health and wellbeing approach}.   **Principle 3: Quality of Practice**  **Practice Standard 3**  Midwives use comprehensive professional knowledge and skills to provide safe, competent, kind, compassionate and respectful care. Midwives keep up to date with midwifery practice by undertaking relevant continuing professional development.  **Competency 3**  The RAMP (**insert specialty**) will promote and protect a culture of quality, compassionate and evidence-based safe maternity care and services by:   * 1. Demonstrate leadership in developing maternity services through initiatives, improvements and changes in the care provided to women, their babies and families.   2. Influence clinical practice through education (formal and informal) mentoring and coaching in the multidisciplinary team {for example teaching sessions; journal clubs; case reviews; presenting on academic programmes in the affiliated Higher Education Institute (XXX)} in the area of **(insert specialty)** Midwifery care.   3. Use expert knowledge and clinical competence when facilitating clinical supervision and mentorship of midwifery colleagues, midwifery students and others.   4. Lead in the translation of new knowledge and facilitation of best available evidence in the clinical setting * Lead on managing and implementing change to meet service needs (e.g. Implementation of National Maternity Strategy 2016-2026) * Establish links to affiliated HEI’s and other HEI’s as appropriate. Seek opportunities to present at local, national and international fora.   1. Demonstrate professional leadership by conducting audits and research and disseminate findings that shape and advance practice in midwifery, education, and policy at local, national, and international levels.   **Principle 4: Trust and Confidentiality**  **Practice Standard 4**  Midwives work in equal partnership with the woman and her family and establish a relationship of trust and confidentiality  **Competency 4**  The RAMP (**insert specialty**) will negotiate and advocate with other health professionals to ensure the beliefs, rights, and wishes of women, babies and their families are upheld in the design and evaluation of services by:   * 1. Demonstrate professional leadership in advocating choice for women when developing midwifery services {for example by ensuring best practice is applied consistently by continuity of care and carer}.   2. Promote, protect and develop a culture of openness, honesty, trust and confidentiality with women and their families {for example: Working in partnership, building good rapport and maintaining a high level of engagement with women and their partners and families}.   3. Articulate and understand how, in exceptional circumstances, confidential information may need to be shared with others according to relevant legislation.   **Principle 5:** **Collaboration with Others**  **Practice Standard 5**  Midwives communicate and collaborate effectively with women, women’s families and with the multidisciplinary healthcare team.  **Competency 5**  The RAMP (**insert specialty**) will manage risk for those who access the service through collaborative risk assessments and promotion of a safe environment by:  5.1 Communicating effectively with other members of the multidisciplinary team sharing information in accordance with legal, professional and regulatory requirements as per established PPPG’s and referral pathways, Service Level Agreements and Memorandum of Understanding.   * 1. Using expert professional judgment to make timely referrals to other appropriate healthcare professionals or members of the multidisciplinary team   2. Demonstrating leadership in negotiation and consensus-building by developing skills to manage conflict in collaboration with women receiving care and other members of the multidisciplinary team. * Establish and standardise clear governance structures to ensure accountability and transparency. * Utilise information technology, in accordance with local, national, & international legislation and organisational policies, procedures, protocols and guidelines to record all aspects of advanced midwifery care {for example; e health records, Maternal & Newborn Clinical Management System}. |
| **Legislation , regulations, policies and guidelines** | The RAMP **(insert specialty)** practises midwifery according to:   * The Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2014); * Scope of Nursing and Midwifery Practice Framework (NMBI 2015); * Practice Standards for Midwives ( NMBI 2015); * Values for Nurses and Midwives in Ireland – Care, Compassion and Commitment (Department of Health 2016); * Advanced Practice Midwifery Standards and Requirements (NMBI 2018); * National Health Policies and Procedures (latest versions) {list as relevant to the service for example: Houses of Oireachtas Committee on Future of Healthcare (Slaintecare 2017), HSE (2013, revised 2016) National Consent Policy; * Local policies, procedures, protocols and guidelines; * Protection of Life During Pregnancy Act, No.25 of 2013, Irish Statute Book 2013. |
| **Performance Management and Evaluation** | Performance Indicators (PI’s) are required to evaluate nursing interventions and implement initiatives to improve the quality and quantity of nursing care provided. PI’s should have a clinical nursing focus as well as a breakdown of activity, including patients seen and treated. In addition, PI’s should identify areas of good practice that must be recognised and celebrated (HSE 2015).  The Department of Health (2017) *Framework for National Performance Indicators for Nursing and Midwifery* provides a guiding framework for the development of Nursing and Midwifery PI’s.  In collaboration with the Director of Nursing, the RAMP will identify and develop Midwifery PI’s for their area of practice, collect and collate data which will provide evidence of the impact and effectiveness of the interventions undertaken {**insert here**} (for example relevant integrated clinical care programme and associated KPIs, Department of Health).  The RAMP **(insert specialty)** will participate in clinical audit and evaluate audit results and research findings to identify areas for quality improvement in collaboration with nursing and multidisciplinary team colleagues (primary and secondary care). |
| **Professional Practice Portfolio** | The RAMP **(insert specialty)** must maintain a professional practice portfolio, incorporating evidence of learning from continuing professional development, clinical supervision, reflective practice and review of his/her own scope of practice in accordance with regulatory requirements and service need. |
| **Health and Safety, Quality Assurance, Risk and Clinical Governance** | 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. These organisational standards and procedures are developed and managed to comply with statutory obligations.  The RAMP (**insert specialty**) will;   * Demonstrate knowledge of clinical governance structures and processes supporting service provision. * Be familiar with and is responsible for attending the necessary education, training and support to enable them to meet this responsibility. * Be responsible for ensuring that they comply with hygiene services requirements in their area of responsibility. Hygiene services incorporate environment and facilities, hand hygiene, catering, cleaning, the management of laundry, waste, sharps and equipment. * Adequately identify, assess, manage and monitor risks within their area of responsibility. * Foster and support a quality improvement culture throughout their area of responsibility. * Take reasonable care for their own actions and the effect that these may have on the safety of others. * Be responsible for ensuring they become familiar with the requirements stated within and that they comply with the Hospital Group’s / Community Healthcare Organisation’s PPPGs. * Have a working knowledge of PPPGs in relation to the care and safety of any equipment supplied for the fulfilment of duty within the RAMP **(insert specialty)** nursing service. Ensure the advice of relevant stakeholders is sought prior to procurement. * Have a working knowledge of the Health Information and Quality Authority (HIQA) Standards or Mental Health Commission (MHC) (as relevant) as they apply to the RAMP (insert specialty) nursing service, for example: Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards or MHC regulations/standards and legislation as relevant. Comply with associated HSE protocols for implementing and maintaining these standards as appropriate to the role. * Support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service. |
| **Management and Leadership** | The RAMP (**insert specialty**) will;   * Support the principle that person-centred care comes first at all times and will approach the effective, efficient and resourceful planning, organisation and delivery of RAMP **(insert specialty)** midwifery service with the flexibility and enthusiasm necessary to make this principle a reality for every patient. * Adopt a professional leadership role within the clinical governance structures influencing both clinical and non-clinical processes that impact upon the experience and/or outcomes for patients within the RAMP **(insert specialty)** midwifery service. * Participate in the appropriate and effective management of the RAMP **(insert specialty)** midwifery service. * Participate in the development of the overall service plan and in the monitoring and review of RAMP **(insert specialty)** activity against the plan. * Provide innovative and effective leadership, support and advice to midwifery, nursing and allied staff at all levels related to their area of practice. * Participate and engage in projects and service developments by representing senior nursing on committees and groups as relevant to the RAMP **(insert specialty)** midwifery service. * Participate in the overall financial planning of the service including the assessment of priorities in pay and non-pay expenditure relating to the RAMP **(insert specialty)** midwifery service. * Promote a culture that values diversity and respect in the workplace. * Manage and promote liaisons with internal and external bodies as appropriate, for example; intra-hospital service, community services, or voluntary organisations. * Engage in IT developments as they apply to service user and service administration. * Undertake other relevant duties as may be determined from time to time by the Director of Midwifery or other designated officer. * To act as spokesperson for the Organisation as required * Demonstrate pro-active commitment to all communications with internal and external stakeholders   **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:**  **Please insert Eligibility Criteria for the post - see HSE website at:** [**http://hse.ie/eng/staff/Jobs/Eligibility\_Criteria/**](http://hse.ie/eng/staff/Jobs/Eligibility_Criteria/)  Please note that appointment to and continuation in posts that require statutory registration is dependent upon the post holder maintaining annual registration in the relevant division of the register maintained by:  Bord Altranais agus Cnáimhseachais na hÉireann (Nursing Midwifery Board Ireland)  **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** | **This section may be used to specify that candidates must demonstrate particular experience deemed necessary for safe and effective performance in the role**  **e.g.**   * **depth and breadth of experience in providing a service to marginalised communities** * **depth and breadth of experience of working in a High Dependency Unit in an Acute setting** * **depth and breadth of experience of delivering concurrent, multiple projects.**   **Post specific requirements mostly relate to a specific role and might include education / experience required for a specific post in a specific location / may include specialisms e.g. ICU course or experience. We don’t include ‘Nice to have’ / ‘Desirable’ criteria – either a criterion is essential to the role or it isn't. Avoid including ‘numerical data’ here e.g. must have x no. of months / years’ experience in XXX. Instead it is more helpful to detail what it is you want the applicants to know / be able to do.** |
| **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** |
| **Skills, competencies and/or knowledge** | The RAMP **(insert specialty)** will be required to continue to demonstrate the ability to practice at a higher level of capability across the five principles of competence as defined by Advanced Practice (Midwifery) Standards and Requirements (NMBI 2018), along with the specialist knowledge and clinical skills in the (**insert specialty**) area of practice.  The RAMP **(insert specialty)** must continue to:  **Professional/Clinical Knowledge**   * Demonstrate a high degree of commitment, professionalism and dedication to the philosophy of quality health care provision. * Demonstrate evidence of Policy, Procedure, Protocol, Guideline (PPPG) development and the translation of PPPG into action. * Demonstrate knowledge and experience of quality audit/assurance systems. * Demonstrate experience in developing, implementing and evaluating quality improvement initiatives. * Demonstrate awareness of relevant legislation and policy developments. * Demonstrate a commitment to continuing professional development.   **Planning and Organising Resources**   * Demonstrate ability to proactively plan, organise, deliver and evaluate a midwifery service in an efficient, effective and resourceful manner, within a model of person-centred care and value for money. * Demonstrate ability to manage deadlines and effectively handle multiple tasks.   **Building and Maintaining Relationships: Leadership, Staff Management and Team Work**   * Demonstrate flexibility and openness to change and ability to lead and support others in a changing environment. * Demonstrate the ability to communicate a change vision and engage stakeholders in a sustainable change process. * Demonstrate the ability to foster a learning culture among staff and colleagues to drive continuous improvement. * Demonstrate ability to work effectively within multi-disciplinary teams.   **Evaluation Information and Judging Situations**   * Demonstrate the ability to evaluate information, identify risks and solve problems.   **Commitment to Providing Quality Services**   * Demonstrate understanding of and commitment to the underpinning requirements and key processes in providing quality, woman-centred care. * Demonstrate the ability to lead on clinical practice and service quality.   **Communication and Interpersonal Skills**   * Demonstrate effective communication and interpersonal skills including: the ability to present information in a clear and concise manner. * Demonstrate ability to engage collaboratively and influence others. * Demonstrate competency in the general use of information technology – computers, office functions, internet for research purposes, email, preparation of presentation materials etc. * Demonstrate evidence of skills in data management and report writing. |
| **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.  The HSE is an equal opportunities employer. |
| **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 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. | |

**Registered Advanced Midwife Practitioner (RAMP) (insert specialty)**

**Terms and Conditions of Employment**

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| **Tenure** | The current vacancy available is **permanent/temporary** and **whole time/part-time.**  Given the developmental nature of this service the successful registered advanced nurse practitioner will be required to adhere to the terms as set out below which are **specific to this** appointment.  In line with standards and requirements set out by NMBI (2018) *Advanced Practice (Midwifery) Standards and Requirements* the RAMP **(insert specialty)** will continue to engage in a process of self-development, structured education and clinical supervision specific to the service {**insert here**} in order to maintain and develop advanced clinical nursing knowledge and critical thinking skills to maintain the competences necessary to independently provide efficient, effective, safe patient care.  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: **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. |
| **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 for Persons Reporting Child Abuse Act 1998** | As this post is one of those designated under the Protection for 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. |
| **Ethics in Public Office 1995 and 2001** | Positions remunerated at or above the minimum point of the Grade VIII salary scale are designated positions under Section 18 of the Ethics in Public Office Act 1995. Any person appointed to a designated position must comply with the requirements of the Ethics in Public Office Acts 1995 and 2001 as outlined below:  A) In accordance with Section 18 of the Ethics in Public Office Act 1995, a person holding such a post is required to prepare and furnish an annual statement of any interests which could materially influence the performance of the official functions of the post. This annual statement of interest should be submitted to the Chief Executive Officer not later than 31st January in the following year.  B) In addition to the annual statement, a person holding such a post is required, whenever they are performing a function as an employee of the HSE and have actual knowledge, or a connected person, has a material interest in a matter to which the function relates, provide at the time a statement of the facts of that interest. A person holding such a post should provide such statement to the Chief Executive Officer. The function in question cannot be performed unless there are compelling reasons to do so and, if this is the case, those compelling reasons must be stated in writing and must be provided to the Chief Executive Officer.  C) A person holding such a post is required under the Ethics in Public Office Acts 1995 and 2001 to act in accordance with any guidelines or advice published or given by the Standards in Public Office Commission. Guidelines for public servants on compliance with the provisions of the Ethics in Public Office Acts 1995 and 2001 are available on the Standards Commission’s website <https://www.sipo.ie/>. |

**\*\*\*\*\*\*\*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, here: <https://www.hse.ie/eng/staff/safetywellbeing/about%20us/>

   2 See link on health and safety web-pages to latest Incident Management Policy [↑](#footnote-ref-1)
2. [↑](#footnote-ref-2)