

**National Clinical Lead**

**Quality and Patient Safety**

**Job Specification & Terms and Conditions**

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| **Job Title, Grade Code** | **National Clinical Lead Quality & Patient Safety (NCL QPS)**  The current vacancy will be filled for a 2 year fixed duration time-period.  A minimum of 4.0 days per week / 0.8 WTE for this two-year period represents the time commitment associated with this post for the duration of appointment. The precise contractual commitment will be discussed and agreed with any shortlisted candidates.  The successful candidate will retain their existing terms and conditions of employment on reassignment/secondment into this role.  In consideration of the evolving nature of the ongoing health system reform agenda, including for example the establishment of the HSE Health Regions and the National Quality & Patient Safety Unit, the scope and tenure of this role may be subject to review and amendment following the establishment of the associated regional structures in September 2024.  This campaign is a confined competition on a grade-to-grade basis. |
| **Remuneration** | The successful candidate will retain their existing terms and conditions of employment on reassignment/secondment into this role |
| **Campaign Reference** | National Clinical Lead (NCL) Quality and Patient Safety (QPS) |
| **Closing Date** | 12 noon Monday the 20th of May 2024 |
| **Proposed Interview Date (s)** | TBA |
| **Taking up Appointment** | The successful candidate must be in a position to take up the appointment and assume duties no later than 6-8 weeks from date of offer. |
| **Location of Post** | The successful candidate will maintain their existing base/location of work but will be expected to also maintain an appropriate weekly presence at Dr Steevens Hospital Dublin and/or other locations associated with the HSE centre. In addition, they will also be required to attend in person all key on-site / in-person meetings.  Please note that no panel will be formed as a result of this recruitment campaign.  This campaign will be used to fill the listed post/s only and no additional jobs will be offered to candidates successful at interview.  Once the post/s are filled the candidate pool will be disbanded. |
| **Informal Enquiries** | For informal enquiries, please refer to:  Dr Colm Henry  Chief Clinical Officer  Office of the Chief Clinical Officer  Email: cco@hse.ie |
| **Details of Service** | The Office of the Chief Clinical Officer (OoCCO) was established as part of an overall investment by the HSE to strengthen governance and accountability for the planning and delivery of high-quality services with the aim of driving transformational change across our healthcare system through clinical leadership, design of new models of care, promotion of a culture of safety and quality improvements; through patient and service user involvement.  Keeping patients and those who use our services safe is the overriding priority for all working in or overseeing the work of the health service. Maintaining an ongoing focus on the enhancement of the quality and patient safety of all services is and has always been a fundamental objective of the HSE. The HSE has established various internal structures to deliver on the priorities and strategic intent as articulated in the Patient Safety Strategy 2019-2024 and other key strategic commitments. These internal structures include the National Quality and Patient Safety Directorate (under the remit of the CCO), and those within Community Operations and AcuteOperations. All existing structures work in close collaboration with internal and external partners to drive standardisation in process, improved patient safety, and the enhancement of the quality of care delivered.  The implementation of the HSE Regional model requires the introduction of six operational regions with accountability for the planning and coordinated delivery of safe and quality health and social care services within the respective geographies. These new arrangements aim to improve the health service’s ability to provide timely, integrated care to patients and service users, and ensuring that care is planned and delivered in line with regional and local demand. ​  As part of the overall health reform agenda and introduction of new operating models, there is an ambition to recognise the shift to regional accountability through the redesign of the current HSE centre into a leaner organisation with a strong role in supporting the six HSE Health Regions. There is also a need for the health system to provide assurance that services and processes are governed, designed and delivered with the quality and patient safety objectives of the HSE at the core of service delivery. ​  Existing HSE national QPS functions (currently operating under the direction of the COO and CCO) will be consolidated into the revised NQPSU structures.  In that context, a National Quality & Patient Safety Unit (NQPSU) will now be established under the remit of the Chief Clinical Officer to support the national quality and patient safety assurance model. The NQPSU will work in close collaboration with and maintain a strong relationship with the Department of Health National Patient Safety Office (NPSO).  The NQPSU will lead on implementation of national policy, operational policy development, procedures and assurance of quality and safety across the health system. It will be charged with setting the Patient Safety Strategy in collaboration with key stakeholders and overseeing implementation.​  The NQPSU will also have the authority to lead reviews / investigations commissioned by the CCO on behalf of the CEO or the Minister of Health. This may involve sole commissioning, co-commissioning and leading on serious patient safety incidents as part of the new model for serious incident management.  The core remit of the NQPSU will be as follows: ​   1. It will have a defined remit to initiate, design and manage a proportionate response to an incident in a scenario where the involvement of the NQPSU is deemed necessary and appropriate. The Unit will reserve the right to commission (or co-commission when appropriate) a review process. It will also have a role in supporting and advising a HSE Health Region with respect to the format, ToR and structure of a review to ensure consistency with national policy.​ 2. The provision of assurance to the CCO, and ultimately the CEO, that HSE Health Regions and National Services are maintaining alignment with national policy, protocols and processes as applicable to quality and patient safety. ​ 3. The delivery of enablement services and advisory support to the Health Regions (and National Services) with respect to QPS improvement, education, audit, data analysis, incident management, open disclosure and other key functions or responsibilities as deemed appropriate.   ​  With this background and the impending redesign of the QPS operating model, both centrally and across the HSE Health Regions, the Chief Clinical Officer seeks to appoint a HSE Clinical Lead for QPS to drive the design, establishment and consolidation of the NQPSU. |
| **Reporting Relationship** | The National Clinical Lead QPS will report to and be accountable for the discharge of their duties to the Chief Clinical Officer. |
| **Key Working Relationships** | The NCL QPS will work with and through a wide range of key stakeholders including but not restricted to:   * Colleagues within the NQPSU * Regional QPS teams and clinical leaders * National Clinical Leads / Clinical Programme representatives * Functions and divisions of the HSE Centre * Department of Health and the National Patient Safety Office * Patient and Service User Groups * Health Information & Quality Authority * Mental Health Commission * Academic partners   The full discharge of duties associated with this post will involve and require a partnership approach with patients, staff and other bodies such as the Department of Health, the Health Information and Quality Authority (HIQA), the Mental Health Commission, the State Claims Agency and the relevant Professional Bodies. |
| **Purpose of the Post** | The National Clinical Lead QPS will lead the process to establish and embed the National Quality & Patient Safety Unit. They will lead the development and implementation of an extensive work programme assigned to the Unit.  The post holder will introduce systems and approaches to provide assurance to the CCO with respect to regional application and adherence pertaining to QPS policies, protocols, procedures, and guidelines.  The post holder will also play a lead role in Serious Incident Management, particularly with respect to cases commissioned and/or co-commissioned by the NQPSU.  The successful post holder will work with the NQPSU and all key stakeholders to plan and deliver the required outputs to realise assigned strategic priorities, while ensuring the patient voice is included in their work, including:   * Providing senior clinical leadership to strategically develop the QPS operating model within the HSE Centre and to operationalise the NQPSU * Ensure QPS structures and teams across the health system, nationally and at Regional level, work collaboratively to a shared vision and plan to deliver effectively and efficiently across an innovative, responsive and agile QPS agenda * Oversee the development, implementation, and delivery of national policies, programmes and initiatives, developing inter-agency and interdisciplinary strategic plans to deliver intelligence-led and evidence-based improvements in QPS * Monitor the implementation of the Patient Safety Strategy and lead the development of the future Patient Safety Strategy (or equivalent) * Engage with senior leadership across the organisation to ensure QPS is positioned as appropriate within service (re)design and health system reform initiatives * Work collaboratively and cohesively with key organizational stakeholders to plan, prioritise, and develop the QPS function to enable a robust, timely, cohesive and standardised approach to QPS assurance * Establish and lead new national and regional QPS structures and working practices within an agreed QPS governance model * Be accountable for establishing clear governance and accountability arrangements within the function, and delivering efficiencies, productivities and service improvements across QPS |
| **Principal Duties and Responsibilities** | **General / Overarching Responsibilities:**  The National Clinical Lead for Quality and Patient Safety (QPS) will:   * Report to the CCO and provide QPS related advisory support to the CCO and the regional QPS structures.​ * Support the CCO in the development of the revised incident management framework reflecting the regional model and the reconfigured NQPSU. * Lead the development of the national Patient Safety Strategy, and support the identification of national QPS priorities and KPIs / metrics. ​ * Provide assurance to the CCO with respect to regional application and adherence pertaining to QPS policies, protocols, procedures, and guidelines. * Serve as the Deputy Chair of the National QPS Committee.​ * Act as a key point of contact for Regional Clinical Officers (RCOs) with respect to all QPS matters.​ * Oversee the development of all national QPS policies, procedures, protocols and guidelines. ​ * Lead / support / coordinate the reviewing of serious incidents (category 1 incidents) escalated to the NQPSU where appropriate and upon request from the IM function within the national unit.​ * Oversee the provision of a National QPS report, including a full listing/status/timeline of ongoing serious incident investigations, to the CCO through the NQPSU on a monthly basis.​ * Recommend to the CCO the commissioning of national and/or co-commissioning of regional reviews (using an approach developed and approved by the NQPSU) for management of serious incidents.​ * Conduct ongoing reviews of the national risk register with specific focus on all matters related to QPS.​ * Provide expert clinical advice, leadership, practical support, and direction for the development of clinical practice guidance with regards to QPS.​ * Oversee the development of policies and integration mechanisms for external providers of services (including voluntary organisations) at the regional level.​ * Liaise on an ongoing basis with key internal HSE functions including but not limited to: Patient and Service User Engagement, National Independent Review Panel, National Safeguarding Unit, and Governance & Risk/CRO (as appropriate).​ * Work in close collaboration with the NPSO and oversee the development of updates to the HSE Safety & Quality Committee for use by the CCO.​ * Review and agree on annual priorities, deliverables, outcomes and the annual work plan for the NQPSU.​ * Oversee / ensure the timely escalation and notification of serious incidents and any other QPS concerns to the CCO as deemed appropriate.​ * Ensure the adoption of a suitably rigorous approach to QPS planning and implementation by the regional QPS structures.​ * Act as an ambassador for QPS across the health system, influencing and promoting QPS strategy adoption and compliance.​   **Clinical Responsibilities:**   * Provide clinical expertise, insights and leadership focusing on quality and patient safety * Directly support the CCO and senior HSE leadership with respect to clinical insights and interpretation regarding QPS subject matter content * Offer a clinical viewpoint and inputs to inform QPS related decision-making with HSE senior leaders / leadership for a * Provide clinical leadership and expertise in the analysis, sharing and application of QPS data, including research evidence, to improve the quality and safety of health and social care services by identifying and prioritising areas for intervention, analysing information to understand the common causes of harm, and measuring, monitoring and evaluating improvement initiatives * Support intelligence-led planning and prioritisation of quality and patient safety initiatives * Deliver information, data analysis and interpretation expertise relating to QPS, utilising the National Incident Management System (NIMS) and other data to HSE representatives, Patient and Service User Groups, the HSE Board and the Quality and Patient Safety Committee as required * Work in collaboration with the NQPSU and regional QPS structures to plan, design and deliver effective QPS initiatives, interventions and supports * Engage with and promote cooperation and collaboration with other health services organisations, to develop strategic partnerships and alliances to drive improvements in quality and patient safety   **QPS-specific Responsibilities**   * Maintain an up-to-date understanding, awareness and knowledge of the regulatory frameworks as they pertain to the QPS agenda of the HSE and associated policy / strategy * Maintain an up-to-date understanding, awareness and knowledge of key legislation affecting the delivery of the QPS function * Comply with associated HSE protocols procedures and guidelines for implementing and maintaining standards as appropriate to the role * Be aware of and implement agreed policies, procedures and safe professional practice by adhering to relevant legislation, regulations and standards * Actively participate in risk management issues, identify risks and take responsibility for appropriate action. * Provide assurance to the CCO with respect to regional application and adherence pertaining to QPS policies, protocols, procedures, and guidelines. * Provide assurance that the processes for risk management, incident reporting and management are being adhered to across each of the HSE Health Regions and within National Services.​ * Receive and review completed incident review reports (as required/defined) to identify learning and ensure this is appropriately disseminated to relevant services.​ * Lead / support / coordinate the reviewing of serious incidents (category 1 incidents) escalated to the NQPSU where appropriate and upon request from the IM function within the national unit. * Activate / initiate a proportionate response to an incident in any situation whereby the involvement of the NQPSU is deemed necessary / appropriate.​ * Oversee (and/or contribute to) and validate the design and management of a review process in any situation as deemed relevant to the Executive and the health system more broadly. ​ * Oversee an agreed national approach to accommodate enhanced monitoring and escalation to special interventions as deemed necessary. ​ * Oversee the provision of a National QPS report, including a full listing/status/timeline of ongoing serious incident investigations, to the CCO through the NQPSU on a monthly basis. * Review and analyse national metrics and indicators to support assurance remit and QI priorities / pipeline. ​ * Oversee the application of a national audit approach and facilitate the Regions to deploy an equivalent as tailored to agreed priorities and areas of focus.   **Strategic and Managerial Responsibilities**   * Provide clinical leadership to the NQPSU and associated output of the Unit including the Patient Safety Strategy. * Monitor the implementation of the Patient Safety Strategy / Lead the development of a future Patient Safety Strategy (or equivalent). * Support the HSE Health Regions to build sustainable QPS capacity and capability via initiatives as driven by the NQPSU. * Deliver according to an annual programme of work aligned to the strategic priorities of the NQPSU and drive technical innovations to support the use, application and accessibility of data to understand and drive QPS improvement. * Provide national leadership and expertise to drive a standardised and cohesive approach to quality and patient safety within each of the HSE Health Regions and within national HSE services / programmes. * Act as spokesperson for the Organisation as required * Demonstrate pro-active commitment to all communications with internal and external stakeholders   **Governance and Accountability Responsibilities**   * Accountable to the CCO for the end-to-end performance of quality and patient safety across all relevant key performance indicators, achieving efficiencies, developing and meeting standards, and patient safety improvement within the remit of the role. * Work with teams to ensure information governance is maintained to appropriate national standards. * Ensure clear and effective governance and risk management arrangements are in place within the service area and with internal and external stakeholders. * Assist the Director of the NQPSU where required and from time to time with corporate priorities emanating from the HSE Service Plan, the Patient Safety Strategy and all other strategic / operational frameworks as relevant to the QPS function.   **Risk Management, Quality, Health & Safety**   * Adequately identifies, assesses, manages and monitors risk within their area of responsibility. * 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. * Support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service.   **Education and Training**   * Engage in the HSE performance achievement process in conjunction with your Line Manager and staff as appropriate.   **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 them from time to time and to contribute to the development of the post while in office.** |
| **Eligibility Criteria**  **Qualifications and/ or experience** | **The applicant pool for this campaign is restricted to existing HSE staff working at the below grades:**   * Nursing & Midwifery: Group / Area Director of Nursing 2915, 2525, 2292 (equivalent or higher will be accepted) * HSCP: Manager in Charge III – 3182, 3356, 3391, 3302, 3361, 3244, 3245, 3246 (equivalent or higher will be accepted) * Medical & Dental: Consultant (equivalent will be accepted)   **Candidates must have at the latest date of application: -**  The National Clinical Lead QPS will have significant clinical leadership experience and will possess a clear understanding of QPS principles and application demonstrated through their leadership roles.  They must have a clinical qualification (HSCP, Medical or Nursing background).  **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. |
| **Skills, competencies and/or knowledge** | The following provides supplementary detail with respect to the core skills, competencies and/or knowledge required of the successful candidate:   * Possess a detailed knowledge and understanding of the relevant specialist domain * Have a clear understanding of the clinical challenges facing relevant population groups * Demonstrate leadership skills to enhance quality and patient safety * Apply knowledge effectively to make clear and proactive decisions * Anticipate rather than react; maintain knowledge of current research and practice * Recognise and respond to the complexity, uncertainty and ambiguity inherent in QPS practice * Possess a track record in quality and patient safety and the delivery of patient care services. * Apply a patient-centred approach to understanding patient needs and delivering the responsibilities of a QPS function * Make a clear and decisive contribution within the multi-disciplinary team within the NQPSU |
| **Campaign Specific Selection Process**  **Ranking/Shortlisting / Interview** | Application form and CV should be emailed to [strategicprogrammes.cco@hse.ie](mailto:strategicprogrammes.cco@hse.ie) stating “HSE Clinical Lead for Quality & Patient Safety” as the subject line.  The closing date for receipt of applications is 12 noon Monday 20th of May 2024.  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. |
| **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 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. | |

**National Clinical Lead**

**Quality and Patient Safety**

**Terms and Conditions of Employment**

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| **Tenure** | The current vacancy will be filled for a 2 year fixed duration time-period.  A minimum of 4.0 days per week / 0.8 WTE for this two-year period represents the time commitment associated with this post for the duration of appointment.  Ongoing clinical practice (or other agreed professional commitments) will be facilitated via the remaining 1.0 days per week.  The successful candidate will retain their existing terms and conditions of employment on reassignment/secondment into this role. Appropriate arrangements for backfill will be made with the employer (if required).  The reassignment/secondment arrangement may be extended with the agreement of all relevant parties including the candidate’s employer and the  successful candidate.  Recruitment and appointment by 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 successful candidate will retain their existing terms and conditions of employment on reassignment/secondment into this role |
| **Working Week** | The standard working week associated with this post is 0.8 WTE per week, Monday to Friday. Specific working days to be agreed on appointment.  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** | The successful candidate will retain their existing terms and conditions of employment on reassignment/secondment into this role |
| **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. |
| **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/>. |
| **Disclaimer** | 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 their post, and which may be assigned to them from time to time and to contribute to the development of the post while in office.  The reform programme outlined for the Health Services may impact on these roles, and as structures change the job description may be reviewed.  In particular Office of the Chief Clinical Officer, reserves the right to reassign the successful post holder to other programmes and related projects, based on the on-going operational needs of the Function. |

**Updates to National Job Specification Template:**

September 2022 V.16

* Inclusion of DEI Statement,
* Revision to Children First Clause

October 2022 V.17

* Inclusion of Updates Section: to highlight National Job Specification version changes.

February 2023 v.18

* Inclusion of standard Interview Notice for Candidates.
* Ethic Clause guidance update re: HSE & Civil Service Pay Scales

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)