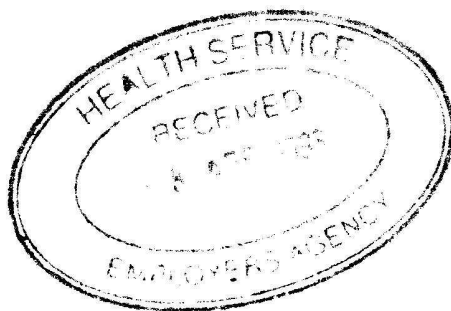


Ref: Circular 2/98

3 April, 1998.



DEPARTMENT  
OF HEALTH

Chief Executive Officer  
Each Health Board

Secretary/Manager  
Each Public Voluntary  
& Joint Board Hospital

Chief Executive/Administrator  
Each Mental Handicap Agency

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**Remuneration of Electronic Technicians**  
**under Programme for Competitiveness & Work**

I am directed by the Minister for Health and Children to refer to Clause 2 (iii) of Annex 1 of the Programme for Competitiveness and Work, and acceptance by IMPACT of PCW proposals for Electronic Technicians. The sanction of the Minister may be assumed for the implementation of the arrangements set out in this circular.

**1. Change of Title**

It has been agreed that Electronic Technicians will now be known as **Clinical Engineering Technicians**.

**2. Revised Grading Structure**

The revised grading structure is set out as follows:

**Clinical Engineering Technician**

**Senior Clinical Engineering Technician**

**Principal Clinical Engineering Technician**

**Chief Clinical Engineering Technician**

### **3. Revised Structures**

- 3.1 It is agreed that the revised structure will be implemented at hospital level having regard to Paragraphs 3.2 and 3.3 below and subject to further discussion on such issues as duties, reporting relationships, management role and interaction with other groups.
- 3.2 **The grades created by this restructuring shall only be open to those who on the 1/6/96 were, and continue to be, in full time permanent and pensionable employment in the Health Service and fulfill the necessary requirements.**
- 3.3 In the case of agencies who have staff recruited prior to 1/6/96, initial appointment to posts will be by assignment or confined competition as appropriate. Please see the attached schedule at **Appendix C**, which outlines the regradings for your agency. The criteria etc., for the future filling of posts will require further discussions at national level.
- 3.4 Agencies who have recruited staff since 1/6/96 will experience no change in grading structure and should assimilate staff to the new payscale in accordance with **Appendix A**.

### **4. Qualifications**

It is intended to commence the consultative process with regard to agreeing qualifications, prior to their declaration by the Minister for Health and Children, as soon as possible. Draft qualifications will be circulated to all interested parties for relevant comment.

### **5. Pay**

#### **(i) 1% from 1 April 1994**

The attached scales (**Appendix B**) recognise payment of a 1% increase already made with effect from 1 April 1994.

## (ii) Revised Salary Structure

As a consequence of the Revised Grading Structure, revised salary levels are set out at **Appendix B**.

## **6. Assimilation**

Details of the assimilation of all grades of Clinical Engineering Technicians from existing scales to proposed new scales on 1 January 1997 are available in **Appendix A**.

## **7. Superannuation**

- 7.1 Serving staff assimilated to the new scales, including the long service increment, who retire while on those scales, will be pensionable on the basis of those scales.
- 7.2 Staff who retire on or after 1 January 1997 should have their pension revised in the normal way, by reference to the rate of pay applicable to serving staff on 1 January 1997. Lump sums for these staff should be calculated by reference to the effective actual rates (now revised) on the date of retirement.

## **8. Flexibility and Change**

### (i) Full Co-operation with and Commitment to Implementing the Health Strategy - Shaping a Healthier Future

It is accepted that the aims of the Health Strategy can only be achieved with the co-operation of staff, including Technicians. It is agreed that to achieve such co-operation will require the trust and goodwill of all parties through ongoing discussions and consultations.

#### (a) Evaluating Patient Satisfaction

The Health Strategy refers to user satisfaction and participation and states that the health and personal social services exist to serve the patient or client and that this has not been sufficiently highlighted in the past. It also states that the services must therefore be consumer-orientated. It is anticipated that Health Agencies will introduce various methods by which the users of services and their families can participate in the planning and delivery of the services and it is further expected that Health Agencies will also

introduce various consumer feedback mechanisms. Technicians will co-operate with these aspects of service improvements.

b) Quality of Service Initiatives

Technicians agree to participate in initiatives to improve the quality of all aspects of their service. Technicians agree to co-operate with Health Agencies to introduce Joint Audit.

(c) Ongoing monitoring and evaluation of the effectiveness of services being provided - costs, outcomes and accountability

Initiatives to improve the quality of service and particularly the introduction of audit will be processed to evaluate the effectiveness of services being provided. Evaluating effectiveness requires the determination of expected outcomes from treatment and the setting of objectives and priorities. In accordance with the contents of the Health Strategy, Technicians agree to co-operate with the setting of agreed objectives and high standards and to be accountable for their achievement.

(d) "Value for Money" Initiative

Technicians agree to co-operate with the development of value for money structures and programmes designed to achieve improvements in the efficiency and effectiveness of the service.

(ii) Personal Performance and Development

Both parties are committed to the introduction of changes which promote a positive attitude to organisational and personal performance and development. These changes will include the introduction of systems to develop and encourage such performance and development.

(iii) Standard 35 Hour Week

It is agreed that, where individual employees so desire, local discussions may be held with staff representatives on this issue.

(iv) Flexibility

It is recognised that changing work requirements and the need to provide better services to the public necessitate greater flexibility in traditional attendance patterns and work practices. Staff will see benefits in a system which would allow them to fulfil their work obligations in a more flexible way. In this regard, where the need is demonstrated, staff agree to co-operate with such flexibility and with atypical employment arrangements and agree to more flexible reporting relationships to allow for greater flexibility of response to the needs of the public. Management agrees to prior consultation in such instances.

(v) Technology

Technicians agree to co-operate with all aspects of the design, installation and operation of new technology.

Management agree to full consultation with staff on technological change.

Technicians agree that no technology-related claims will be made in the future.

Health Agencies are committed to the development of the necessary skills and knowledge for their efficient use of new technology. Every effort will be made to encourage staff to familiarise themselves with new technology by way of training organised by the employing authorities to meet local needs.

Health Agencies are committed to drafting a policy for the internal and external training of staff involved with new technology as appropriate.

(vi) Monthly Paypath

Technicians agree to the introduction of monthly / 4 weekly paypath (at the discretion of the employer) from 1 January 1997, with staff having the option of a mid-monthly "basic" advance payment.

Consultations will take place with IMPACT on the administrative details of these changes and to address such issues as the timetable for change.

Briefing sessions will take place at Health Agency level involving the banks, at which they will address the issue of bank charges, etc.


#### **9. Funding**

In order that your non-capital allocation may be adjusted to take account of the cost involved, you are asked to complete a costing form (**Appendix D**) to reflect the funding required.

**Please complete and return these forms to Finance Unit, Department of Health, as soon as possible.**

#### **10. Queries**

- General queries in relation to this circular should be addressed, in the first instance, to your agency's Personnel Officer or via the Personnel Officer, to Personnel Management & Development Unit, Department of Health.
- Queries in relation to Paragraph 3 - *Flexibility and Change*, should be addressed to the Health Service Employers Agency, Block B, Dublin Castle, Ship Street, Dublin 2. Telephone: 01- 475 1333.



Melanie Pine

Principal

Personnel Management & Development Unit

**ASSIMILATION TABLE**

Old Structure				New Structure		
Grade	01/01/97 £	Point		Grade	01/01/97 £	Point
Basic	15,966	1	Assimilated to	Basic	16,352	3
	16,691	2	Assimilated to	Basic	17,169	4
	17,425	3	Assimilated to	Basic	18,028	5
	18,156	4	Assimilated to	Senior	18,929	2
	18,871	5	Assimilated to	Senior	18,929	2
	19,635	6	Assimilated to	Senior	19,876	3
	20,333	7	Assimilated to	Senior	20,869	4
	21,067	8	Assimilated to	Senior	21,913	5
	21,793	9	Assimilated to	Senior	21,913	5
	22,515	10	Assimilated to	Senior	23,008	6
Senior	21,001	1	Assimilated to	Senior	21,913	5
	21,620	2	Assimilated to	Senior	21,913	5
	22,241	3	Assimilated to	Senior	23,008	6
	22,864	4	Assimilated to	Senior	23,008	6
	23,484	5	Assimilated to:	Senior	24,160	7
			or **	Principal	24,991	1
	24,101	6	Assimilated to:	Senior	24,160	7
			or *	Senior (LSI 1)	25,052	8
			or *	Senior (LSI 2)	25,883	9
			or **	Principal	24,991	1
			or **	Chief	25,883	1

\*Long service increments for 3 and 6 years respectively

\*\*Dependent on designation - see Regrading schedule attached at Appendix C

**PCW PAY PROPOSALS**  
**CLINICAL ENGINEERING TECHNICIANS**

	01/01/94	01/04/94	01/06/94	01/01/95	01/06/95	01/06/96	01/06/96*	01/10/96	01/01/97	01/07/97	01/4/98
	£	£	£	£	£		£	£	£	£	£
<b>Basic CET</b>											
1	14,602	14,748	15,043	15,043	15,344	15,574	14,724	14,945	15,095	15,356	15,472
2	15,265	15,418	15,726	15,726	16,041	16,282	15,192	15,420	15,574	15,835	15,963
3	15,937	16,096	16,418	16,418	16,746	16,997	15,951	16,190	16,352	16,613	16,761
4	16,605	16,771	17,106	17,106	17,448	17,710	16,748	16,999	17,169	17,430	17,598
5	17,258	17,431	17,780	17,780	18,136	18,408	17,586	17,850	18,028	18,289	18,479
6	17,958	18,138	18,501	18,501	18,871	19,154					
7	18,596	18,782	19,158	19,158	19,541	19,834					
8	19,267	19,460	19,849	19,849	20,246	20,550					
9	19,931	20,130	20,533	20,533	20,944	21,258					
10	20,592	20,798	21,214	21,214	21,638	21,963					



	01/01/94	01/04/94	01/06/94	01/01/95	01/06/95	01/06/96	01/06/96*	01/10/96	01/01/97	01/07/97	01/04/98
	£	£	£	£	£	£	£	£	£	£	£
<b>Senior CET</b>											
1	19,207	19,399	19,787	19,787	20,183	20,486	17,587	17,851	18,029	18,290	18,480
2	19,774	19,972	20,371	20,371	20,778	21,090	18,465	18,742	18,929	19,190	19,402
3	20,342	20,545	20,956	20,956	21,375	21,696	19,388	19,679	19,876	20,137	20,373
4	20,911	21,120	21,542	21,542	21,973	22,303	20,357	20,662	20,869	21,130	21,391
5	21,476	21,691	22,125	22,125	22,568	22,907	21,375	21,696	21,913	22,174	22,461
6	22,043	22,263	22,708	22,708	23,162	23,509	22,444	22,781	23,008	23,269	23,583
7							23,567	23,921	24,160	24,421	24,764
LSI (1)							24,437	24,804	25,051	25,312	25,677
LSI (2)							25,248	25,627	25,883	26,144	26,530

	01/01/94	01/04/94	01/06/94	01/01/95	01/06/95	01/06/96	01/06/96*	01/10/96	01/01/97	01/07/97	01/04/98
	£	£	£	£	£	£	£	£	£	£	£
<b>Principal CET</b>											
1							24,378	24,744	24,991	25,252	25,616
2							25,378	25,759	26,016	26,277	26,666
3							26,524	26,922	27,191	27,452	27,871
4							27,320	27,730	28,007	28,268	28,975
5							28,000	28,420	28,704	28,965	29,422
6							28,790	29,222	29,514	29,775	30,252

	01/01/94	01/04/94	01/06/94	01/01/95	01/06/95	01/06/96	01/06/96*	01/10/96	01/01/97	01/07/97	01/04/98
	£	£	£	£	£	£	£	£	£	£	£
<b>Chief CET</b>											
1							25,248	25,627	25,883	26,144	26,530
2							26,248	26,642	26,908	27,169	27,581
3							27,321	27,731	28,008	28,269	28,708
4							28,140	28,562	28,848	29,109	29,569
5							28,984	29,419	29,713	29,974	30,456
6							29,853	30,301	30,604	30,865	31,369
7							30,749	31,210	31,522	31,783	32,310
8							31,570	32,044	32,364	32,625	33,173

\* Introduction of revised grading structure

LSI (1) after 3 years on the maximum

LSI (2) after 6 years on the maximum

Appendix D to Circular 2/98

**INCREASED COSTS ARISING FROM SPECIAL PAY INCREASE FROM 1 JUNE 1996 FOR CLINICAL ENGINEERING TECHNICIANS (FORMERLY KNOWN AS ELECTRONIC TECHNICIANS)**

Page 1 - Schedule for Funding Adjustments - 1996 (cost in respect of 1 June 1996 increase). Please complete the following. Numbers will be expected to correspond to relevant Personnel Census figures.

<i>Profession</i>	<i>Grade</i>	<i>Numbers Employed (W.T.E.)</i>	<i>Basic Pay Costs £</i>	<i>Employers P.R.S.I. £</i>	<i>1996 Cost £</i>
Clinical Engineering Technicians	Basic				
	Senior				
	Principal				
	Chief				
<b>TOTAL</b>					

I confirm that the requested funding adjustment set out reflects the cost involved in the implementation of the revised salary scales for the above listed paramedic grades.

Signed \_\_\_\_\_ Agency \_\_\_\_\_  
(Please write clearly)

Appendix D to Circular 2/98

**INCREASED COSTS ARISING FROM SPECIAL PAY INCREASE FROM 1 JUNE 1996 FOR CLINICAL ENGINEERING TECHNICIANS (FORMERLY KNOWN AS ELECTRONIC TECHNICIANS)**

Page 2 - Schedule for Funding Adjustments - 1997 (Full year cost of 1 June 1996 increase). Please complete the following. Numbers will be expected to correspond to relevant Personnel Census figures).

<i>Profession</i>	<i>Grade</i>	<i>Numbers Employed (W.T.E.)</i>	<i>Basic Pay Costs £</i>	<i>Employers P.R.S.I. £</i>	<i>Full year cost in 1997 £</i>
Clinical Engineering Technician	Basic				
	Senior				
	Principal				
	Chief				
<b>TOTAL</b>					

I confirm that the requested funding adjustment set out reflects the cost involved in the implementation of the revised salary scales for the above listed grades.

Signed \_\_\_\_\_ Agency \_\_\_\_\_  
(Please write clearly)

**Appendix D to Circular 2/98**

**INCREASED COSTS ARISING FROM SPECIAL PAY INCREASE FROM 1 JUNE 1996 FOR CLINICAL ENGINEERING  
TECHNICIANS (FORMERLY KNOWN AS ELECTRONIC TECHNICIANS)**

Page 3 - Schedule for Funding Adjustments - 1998 (Full year cost of 1 June 1996 increase). Please complete the following. Numbers will be expected to correspond to relevant Personnel Census figures).

<b>Profession</b>	<b>Grade</b>	<b>Numbers Employed (W.T.E.)</b>	<b>Basic Pay Costs £</b>	<b>Employers P.R.S.I. £</b>	<b>Full year cost in 1998 £</b>
Clinical Engineering Technician	Basic				
	Senior				
	Principal				
	Chief				
<b>TOTAL</b>					

I confirm that the requested funding adjustment set out reflects the cost involved in the implementation of the revised salary scales for the above listed grades.

Signed \_\_\_\_\_ Agency \_\_\_\_\_  
(Please write clearly)