**National Director, Access & Integration**

**Job Specification & Terms and Conditions**

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| **Job Title, Grade Code** | National Director, Access and Integration (A&I)  *(National Director Level 2)* |
| **Campaign Reference** | NRS14246 |
| **Closing Date** | **Monday, 20th May 2024 at 3PM** |
| **Proposed Interview Date (s)** | Proposed interview dates will be indicated at a later stage. Please note you may be called forward for interview at short notice. |
| **Taking up Appointment** | A start date will be indicated at job offer stage. |
| **Location of Post** | There is currently one permanent and whole-time vacancy available in Dr Steevens’ Hospital. The CEO is open to engagement in respect of flexibility around location subject to a minimum level of availability at Dr Steevens’ Hospital.  A panel may be formed as a result of this campaign for **National Director, Access and Integration (A&I),** from which current and future, permanent and specified purpose vacancies of full or part-time duration may be filled. |
| **Informal Enquiries** | Bernard Gloster, Chief Executive Officer  **Email:** [CEO.Office@hse.ie](mailto:CEO.Office@hse.ie)  **Tel:** 01 6352701 |
| **Details of Service** | The A&I function is a newly constituted function in HSE Centre reporting directly to the Chief Executive Officer.  The A&I function will support and enable the Regional Health Areas to deliver on their operational responsibilities as follows:   * The National Director of A&I will lead the development of service improvement initiatives that target patient access, promotes health and wellbeing and the prevention of illness. * The function will identify new and emerging strategies to increase efficiency, improve processes, and enhance the patient experience. * The National Director of A&I will, at national level, promote adherence to national standards and ensure integration of services and functions within the context of a population health approach. The function will access performance data to promote, enable and direct performance to ensure Access and Integration across acute services, community services, social inclusion, health and wellbeing and climate change, sustainability etc. * The function will ensure future service development, with regard to Access and Integration, is planned and deployed in a cohesive, consistent and coordinated way and is fully aligned to HSE Plans and Government health policy. * A&I will play a lead role in determining development funding requirements pertaining to all matters related to A&I. * The function will oversee, manage and be responsible for the distribution of A&I development funding to the Health Regions and for evaluating and determining the impact on respective services and patient / client / care groups. * A&I will also support and inform the performance management and escalation functions. The function will provide key expertise and advice to the CEO with regard to A&I performance issues and be a key member of the performance management team working closely with the CEO. * A&I will act as the national centre of specialist knowledge and policy expertise for respective care groupings within the system overall. * This function will work with the Department of Health, DCEDIY and Health Regions as well as collaborating closely with other National Directors (such as the Chief Clinical Officer and Performance and Planning function). * A&I function will maintain a strong working relationship with the Regional Executive Officers and Integrated Healthcare Areas who have operational responsibility within their respective Regions. * A&I will influence, support and ensure the integration of primary, community, and acute services to align with the continuum of population health and social care. While Access and Integration is a defined function is its own right, it is important that a focus on Access and Integration is embedded across the system as whole. * A & I will ensure the health service sustains a continued focus on prevention, health promotion and self-care to keep people healthy and well and reduce the onset of chronic disease and premature mortality. |
| **Reporting Relationship** | The National Director, Access and Integration will report to the Chief Executive Officer of the HSE. They will act, on behalf of the CEO, as the national lead for Access and Integration. |
| **Key Working Relationships** | In addition to participating as a member of the Senior Leadership Team, the National Director, Access and Integration will have key working relationships with other members of that team, i.e. Regional Executive Officers, Chief Clinical Officer and National Directors. The National Director, Access and Integration will also have close working relationships with other functions reporting directly to the CEO, e.g. National Director, Performance and Planning.  The proper execution of duties will involve the development of appropriate working arrangements with key stakeholders, both internal and external.  The post holder will provide leadership, expertise & guidance in relation to National Access, Integration, Capacity and Service Improvement to deliver best patient outcomes across the following areas:   * National Community Services & Insights   1. Mental Health (including CAMHS)   2. Older Persons   3. Primary Care (ECC \*note ECC to move across in 2025)   4. Disability Services   5. Social Inclusion   6. Palliative Care, End of Life, Bereavement * National Acute Services & Insights   1. Scheduled Care   2. Unscheduled Care   3. Cancer Services   4. Maternity & Paediatrics   5. Diagnostics * Health & Well-Being * Human Rights & Equality * Climate Action & Sustainability   **\*\*\* Operational responsibility resides for the above areas within the Regional Health Areas \*\*\*\*** |
| **Purpose of the Post** | The primary purpose of the post is to provide leadership in ensuring improved access, capacity and integrated service delivery within and across particular groups of patients and/or populations (care groups), acute services, social inclusion supports and health and wellbeing programmes.  ​  The post holder will:   1. Be a national centre and repository of specialist knowledge and expertise for acute and community services, to offer guidance, ensure a standardised approach and provide assurance to the CEO, underpinned by a focus on improving care and patient outcomes. 2. Drive national improvement programmes and working in partnership with the CCO to ensure safe, timely and equitable access for patients/ clients/ to services and integrated delivery 3. Work collaboratively with the CCO and P&P function to form a fully informed, integrated view of performance to support the CEO in the overall management of the organisation. 4. Identify further improvement opportunities for service developments in line with national priorities. Contributing to the service planning process. Management and allocation of service development funding related to A&I. 5. A&I will also support and inform the performance management and escalation functions. The function will provide key expertise and advice to the CEO with regard to Access and Integration performance issues and be a key member of the performance management team working closely with the CEO. 6. Manage key relationships with DoH, DCD, DPER, CCO, regulators etc. 7. Coordinating function for disabilities relationship with DCEDIY 8. Provide assurance to the CEO that access and integration priorities are being progressed and delivered in Health Regions and in so doing advise of service issues, challenges and outliers, opportunities. |
| **Principal Duties and Responsibilities** | **Leadership**   * Provide leadership to improve Access, Integration and Capacity to, and across services for particular groups of patients and/or populations, acute services, social inclusion supports and health and wellbeing programmes.  ​​ * Work closely with REOs and Chief Clinical Officer to align hospital-based and community-based services to deliver joined-up, integrated care closer to home. * Work with the Health Regions to enable integrated service delivery across particular groups of patients and/or populations, recognising the need for consistency and interdependency. * Provide leadership in the provision, development and design of care systems (in partnership with Health Regions and other National Directors) to promote equity of access and best patient outcomes. * To provide leadership and direction to the A&I multidisciplinary team to ensure that the Access, Integration and Capacity function delivers on its objectives and adds value to the overall health system.   **Enabling Access and Integration**   * Provide a national lens together with expert input to both acute and community services. * Support the regions to develop and implement service improvement programmes across particular groups of patients and/or populations (care groups) to ensure timely access to services in collaboration with development colleagues involved in public health, transformation, technology advancement and change management * Hold and allocate revenue funding to Health Regions for developments and improvements in access and integration. Review and evaluate investments in services to support future planning and ensure VFM best service user outcomes. * Ensure co-ordination of service improvement initiatives across Health Regions working closely with Clinical Functions at national and regional level. ​ * Take an active role in informing key planning priorities for respective populations/care groups working collaboratively with the Health Regions, DoH, DCEDIY and HSE Clinical Functions. * Provide assurance to the CEO that national priorities are being progressed and delivered in Health Regions and in turn advise of any service issues, challenges and outliers   **Service Improvement / Reform**   * Identifying opportunities for service improvement * Identifying best practice and innovative ways of working * Lead the development of service improvement * Keep pace with, and up to date with international best practice in Access and reform areas. * Co- design reform and improvement programmes with partners in health and service users, underpinned with the aim of improving service user access and experience. * Communicate, ensure deployment and evaluate the effectiveness development of appropriate evaluation methodologies in order to provide assurance to the CEO that reform and service improvement are driving nationally agreed objectives. * Contributing to the development of present and future health care leaders through influencing and providing expert content to the design and delivery of leadership programmes. * Be a national centre of specialist knowledge and policy expertise for acute and community services.   **Communications**   * Demonstrate pro-active commitment to all communications with internal and external stakeholders. * Act as spokesperson for the Organisation as required. * Deliver on key reporting requirements for areas of responsibility including meeting Access and Integration reporting requirements for:   + Executive Management Team   + Board and relevant Board sub-committees, as necessary   + Statutory and regulatory reporting, as necessary. * Support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service. * Have a detailed 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 etcand comply with associated HSE protocols for implementing and maintaining these standards as appropriate to the role. * Adequately identifies, assesses, manages and monitors risk within their area of responsibility. * Engage in the HSE performance achievement process in conjunction with your Line Manager and staff as appropriate. * Any other duties relevant to the role which may be identified from time to time.   **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** | **Candidates must have at the latest date of application: -**   * Extensive experience at a senior leadership level in either health or social care delivery or other comparable and relevant business environment of equivalent complexity, to include working with an Executive Team and Boards as relevant to this role. * Significant strategic leadership experience with a proven track record of organisational management, operational excellence and organisational improvement in a distributed and highly complex organisation or other relevant and highly complex organisation, as relevant to this role. * Significant leadership experience of transformational change and reconfiguration in complex environments of scale and a proven track record of implementing major system-wide reform(s). * Significant experience of strategic planning underpinned by an effective internal corporate governance framework and risk management system. * Experience of managing and working collaboratively with multiple internal and external stakeholders and a proven ability to collaborate and work effectively with external service delivery partners within well-structured governance relationships as relevant to this role.   **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. |
| **Other requirements specific to the post** | Access to appropriate transport to fulfil the requirements of the role as post will involve travel |
| **Skills, competencies and/or knowledge** | **Professional Knowledge & Experience**  Demonstrates:   * An in-depth knowledge of the issues and developments and current thinking in relation to best practice in health and social care services, policy and delivery. * A well-developed knowledge of the key challenges and issues across the health system. * An in depth understanding of the HSE’s strategic reform and innovation agenda, as per Sláintecare and the resultant organisational structure that aligns healthcare governance at regional level, within a strong national framework to enable better co-ordination and improved performance across health and social care services. * An in depth understanding of risk, information technology, financial management, corporate and clinical governance and accountability. * Significant knowledge and experience of multidisciplinary working in a complex environment as relevant to the role. * Significant experience of engaging at Senior Management Team and Board Level, as relevant to the role. * Experience of corporate governance and risk management. * A detailed understanding of the public service regulatory and legislative framework in Ireland, with particular reference to the regulatory requirements related to particular groups of patients and/or populations, e.g., HIQA, Mental Health Commission. * Knowledge and experience of application of evidence-based decision-making practices and methodologies. * A general knowledge of the legal and corporate governance framework of the HSE. * Significant understanding of integrated service delivery and issues impacting access and capacity.   **Leadership and Delivery of Change**  Demonstrates:   * Effective leadership and the capacity to build a coalition for change across the whole system and drive the transformation needed to deliver better outcomes. * An ability to remain fully informed in a dynamic and challenging environment, while at the same time having a clear view of what changes are required in order to achieve immediate and long-term health service objectives. * A track record of service innovation and delivery in a challenging environment. * A strong focus on results and an ability to achieve results through collaborative working, including external stakeholders. * Leadership and team management skills including the ability to work with multi-disciplinary team members, internal and external stakeholders.   **Managing and Delivering Results (Operational Excellence)**  Demonstrates:   * The ability to adequately identify, assess, manage and monitor risks within their area of responsibility. * The ability to develop / implement strategic action plans and programmes. * A high degree of commitment and energy to well directed activities and looks for and seizes opportunities that are beneficial to achieving organisation goals. * Perseverance and an ability to see tasks through. * Champions measurement on delivery of results and a willingness to take personal responsibility to initiate activities and drive objectives through to a conclusion. * The ability to develop strategies/policies. * A strong emphasis on achieving high standards of excellence.   **Building and Maintaining** **Relationships/Communication Skills**  Demonstrates:   * Highly effective interpersonal and communication skills to establish and develop trust based, high-stake partnerships and relationships with a range of external partners and stakeholders. * An ability to promote organisational cohesion and the pursuit of excellence through first-class relationship management practices throughout all levels of the service. * A commitment to working co-operatively with and influencing senior management colleagues to drive forward the reform agenda. * A commitment to building a professional network to remain up to date with and influence internal and external politics. * An ability to support the development of an effective team. * The ability to communicate ideas, positions and information clearly and convincingly in a manner that is sensitive to wider issues and has the ability to advocate for and negotiate positions which allow for the on-going improvement of services.   **Critical Analysis and Decision Making**  Demonstrates:   * The capacity to operate as an effective strategic and tactical thinker. * An ability to provide significant input to operational and strategic decision making. * A capacity for critical analysis to identify how things can be done better. * The ability to analyse and evaluate, in a rational objective, consistent and systematic manner, a range of complex information to identify the core issues and arguments that are most salient to the situation at hand. * The ability to challenge effectively and to maintain the highest levels of professional integrity in challenging circumstances. * A willingness to take calculated risks and consider the range of options available to support improved change practices. * An ability to make timely decisions and stand by those decisions as required.   **Personal Commitment and Motivation**   * Understands, identifies with and is committed to the core values of the HSE. * Demonstrates a strong willingness and ability to operate in the flexible manner that is essential for the effective delivery of the role. * Demonstrates a commitment to and focus on quality and the promotion of high standards to improve patient outcomes, by involving patients and the public in their work. |
| **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. |
| **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 Director, Access and Integration**

**Terms and Conditions of Employment**

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| **Tenure** | The current vacancy available is permanent and whole time  The post is pensionable. A panel may be created from which permanent and specified purpose vacancies of full or part time duration may be filled. The tenure of these posts will be indicated at “expression of interest” stage.  Appointment as an employee of the Health Service Executive is governed by the Health Act 2004 and the Public Service Management (Recruitment and Appointments) Act 2004 and Public Service Management (Recruitment and Appointments) Amendment Act 2013. |
| **Remuneration** | The Salary scale for the post is: **€188,268** *(as at 1 Jan 2024)*  New appointees to any grade start at the minimum point of the scale. Incremental credit will be applied for recognised relevant service in Ireland and abroad (Department of Health Circular 2/2011). Incremental credit is normally granted on appointment, in respect of previous experience in the Civil Service, Local Authorities, Health Service and other Public Service Bodies and Statutory Agencies. |
| **Working Week** | The standard working week applying to the post is to be confirmed at Job Offer stage.  HSE Circular 003-2009 “Matching Working Patterns to Service Needs (Extended Working Day / Week Arrangements); Framework for Implementation of Clause 30.4 of Towards 2016” applies. Under the terms of this circular, all new entrants and staff appointed to promotional posts from Dec 16th 2008 will be required to work agreed roster / on call arrangements as advised by their line manager. Contracted hours of work are liable to change between the hours of 8am-8pm over seven days to meet the requirements for extended day services in accordance with the terms of the Framework Agreement (Implementation of Clause 30.4 of Towards 2016). |
| **Annual Leave** | The annual leave associated with the post will be confirmed at Contracting stage. |
| **Superannuation** | This is a pensionable position with the HSE. The successful candidate will upon appointment become a member of the appropriate pension scheme. Pension scheme membership will be notified within the contract of employment. Members of pre-existing pension schemes who transferred to the HSE on the 01st January 2005 pursuant to Section 60 of the Health Act 2004 are entitled to superannuation benefit terms under the HSE Scheme which are no less favourable to those which they were entitled to at 31st December 2004 |
| **Age** | The Public Service Superannuation (Age of Retirement) Act, 2018\* set 70 years as the compulsory retirement age for public servants.  ***\* Public Servants not affected by this legislation:***  Public servants joining the public service or re-joining the public service with a 26 week break in service, between 1 April 2004 and 31 December 2012 (new entrants) have no compulsory retirement age.  Public servants, joining the public service or re-joining the public service after a 26 week break, after 1 January 2013 are members of the Single Pension Scheme and have a compulsory retirement age of 70. |
| **Probation** | Every appointment of a person who is not already a permanent officer of the Health Service Executive or of a Local Authority shall be subject to a probationary period of 12 months as stipulated in the Department of Health Circular No.10/71. |
| **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** | 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/>. |

1. A template SSSS and guidelines are available on [writing your site or service safety statement](https://www2.healthservice.hse.ie/organisation/national-pppgs/writing-your-site-or-service-safety-statement/).

   2 Structures and processes for effective [incident management](https://www2.healthservice.hse.ie/organisation/qps-incident-management/incident-management/) and review of incidents. [↑](#footnote-ref-1)
2. [↑](#footnote-ref-2)