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| Campaign Reference Number & Job Title: | Expression of Interest - Scheduled Care Improvement Lead |
| Grade Code: | 0090 |
| County: | Co Dublin |
| Hse Area: | HSE Dublin and North East Region |
| Staff Category: | Management & Administrative  |
| Contract Type: | Temporary Full-Time   |
| Internal/External: | Internal |
| Proposed InterviewDates: | TBC |
| Informal Enquiries:  | Mr. Paddy Clerkin, IHA.LouthMeath@HSE.ie |
|  Closing Date:  | 24th January 2025 |
| Location Details: | Dublin and North Region |
|  Application Details | Expression of Interest - Scheduled Care Improvement Lead<https://careers-rcsihospitals.icims.com/jobs/3684/job> |
| Post Specific Related Information | The Regional Scheduled Care Lead in conjunction with the Regional Director for Planning & Performance in Dublin & North East, will ensure that National scheduled care processes are adhered to in line with NTPF waiting list management policies and procedures. Waiting times are reviewed and met in line with Slaintecare targets. Outsourcing and insourcing models are standardised across the Region to ensure consistence approach. The Regional Scheduled Care Lead will be;* Responsibility for the development and implementation of the Regions strategy for Scheduled Care across the sites and services
* Contribute to planning and decision-making processes as they relate to Scheduled Care within the DNE Region, both acute sites and community requirements including ECC Programmes.
* Provide advice and development of required strategies on all issues relating to scheduled care and patient flow.
* Develop and maintain effective working relationships with IHA Managers within the Region and HSE nationally to ensure the achievement of scheduled care objectives within the Integrated Healthcare Areas.
* Establish collaborative professional relationships and networks with Health Service providers external to the Region.
* Maintain and further develop a set of Key Performance Indicators and suite of data for Scheduled Care across the Region.
* Establishment of reporting mechanisms, activity and data sets pertaining to enhanced community care programmes (diabetics, respiratory and cardiology)
* Establishment of reporting mechanisms and frameworks for all HSCP and nursing activity both new and return.

Productivity* Ensure Preoperative assessment processes are established across all sites, with appropriate pathways designed for all patient cohorts ASA 1-4
* Theatre scheduling systems are established across all DNE sites to ensure maximisation of theatre times and allocations
* Theatre start times are measured, reviewed and necessary systems are designed to ensure quality improvements across all DNE site; including theatre TAT’s
* Theatre schedules are designed to ensure appropriate distribution to meet unscheduled care demand and elective commitments.
* Shift through collaboration and agreement with wider DNE Executive team towards rationalisation of all DNE theatres to optimise unscheduled and scheduled care demands 7/7
* Theatre facilities are optimised to ensure appropriate utilisation for General Anaesthesia and those requiring said theatre in first instance and that solutions sought for Local Anaesthesia in appropriate settings
* Assurances that patients outsourced to private facilities have surgeries completed in timely manner with communication and follow up loop completed to ensure patient safety.

Elective Programmes* Work collaboratively with all Integrated Healthcare Managers to ensure fair and equitable access to Regional Surgical Hub, ensuring theatre sessions are fluid, flexible and based on patient and access needs.
* Work collaboratively with all Integrated Healthcare Managers to ensure fair and equitable access to Regional Elective Hospital, ensuring theatre sessions are fluid, flexible and based on patient and access needs.
* Design and ensure processes and systems for Elective Hospital facilitate pathways for ASA patients 1-3.
* Ensure Community theatre requirements are accommodated in Pan Regional approach.

Radiology* Maximise utilisation of all public service diagnostic modalities in the first instance.
* Development of Ambulatory Diagnostic Hubs in Region.
* Shift towards inpatient Hospital Diagnostic specific unit.
* Ensure timely access for Community and GP colleagues to reduce acute UEC demand.
* Optimise AI potential in Radiology

Staff from across HSE divisions who are permanently employed at the grade advertised are eligible to apply for this EOI but should only do so subject to having your line manager’s approval and confirmation from the service manager that you will be released from your post if successful. (Please note, approval is discretionary and you may be refused.) |
|   | DocumentationValidated by: | Sarah Donnelly -  sarah.donnelly@hse.ie  |
|   | Amendments validated by (whereappropriate): | N/A |