

**Grade VIII Quality and Patient Safety Manager**

**Job Specification & Terms and Conditions**

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| **Job Title, Grade Code** | Grade VIII Quality and Patient Safety Manager  *(Grade Code 0655)* |
| **Campaign Reference** | 03MUH2024 |
| **ECC Reference** | M2801 |
| **Link to Application Form** | https://www.rezoomo.com/job/65078/ |
| **Closing Date** | 12 noon Wednesday 24th July 2024 |
| **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** | Mayo University Hospital  There is currently one permanent whole-time vacancy available in Quality & Patient Safety Department.  A panel may be formed as a result of this campaign for Mayo University Hospital, from which current and future, permanent and specified purpose vacancies of full or part-time duration may be filled. |
| **Informal Enquiries** | **Name & Title:** Catherine Donohoe, Hospital Manager, Mayo University Hospital  **Email:** [Catherine.donohoe@hse.ie](mailto:Catherine.donohoe@hse.ie)  **Tel:** 094 9042329 |
| **Details of Service** | The Saolta University Health Care Group provides acute and specialist hospital services to the West and North West of Ireland – counties Galway, Mayo, Roscommon, Sligo, Leitrim, Donegal and adjoining counties.  The Group comprises 7 hospitals across 8 sites:   * [Letterkenny University Hospital (LUH)](https://saolta.ie/hospital/letterkenny-university-hospital) * [Mayo University Hospital (MUH)](https://saolta.ie/hospital/mayo-university-hospital) * [Portiuncula University Hospital (PUH)](https://saolta.ie/hospital/portiuncula-university-hospital) * [Roscommon University Hospital (RUH)](https://saolta.ie/hospital/Roscommon%20University%20Hospital) * [Sligo University Hospital (SUH)](https://saolta.ie/hospital/sligo-university-hospital) incorporating Our Lady’s Hospital Manorhamilton (OLHM) * Galway University Hospitals (GUH) incorporating [University Hospital Galway (UHG)](https://saolta.ie/hospital/university-hospital-galway) and Merlin Park University Hospital   The Group's Academic Partner is NUI Galway.  The Saolta Group’s region covers one third of the land mass of Ireland, it provides health care to a population of 830,000, employs 12,700 staff (January 2023), and has a budget of €1 Billion  The Group provides a range of high quality services for the catchment areas it serves and GUH is a designated supra-regional cancer service provider meeting the needs of all the counties along Western seaboard and towards the midlands from Donegal to North Tipperary.    **Vision**  Our vision is to be a leading academic Hospital Group providing excellent integrated patient-centred care delivered by skilled caring staff.  **Saolta Guiding Principles**  Care - Compassion - Trust - Learning  Our guiding principles are to work in partnership with patients and other healthcare providers across the continuum of care to:   * Deliver high quality, safe, timely and equitable patient care by developing and ensuring sustainable clinical services to meet the needs of our population. * Deliver integrated services across the Saolta Group Hospitals, with clear lines of responsibility, accountability and authority, whilst maintaining individual hospital site integrity. * Continue to develop and improve our clinical services supported by education, research and innovation, in partnership with NUI Galway and other academic partners. * Recruit, retain and develop highly-skilled multidisciplinary teams through support, engagement and empowerment. |
| **Mission Statement** | Patients are at the heart of everything we do. Our Mission is to provide high quality and equitable services for all by delivering care based on excellence in clinical practice, teaching, and research, grounded in kindness, compassion and respect, whilst developing our staff and becoming a model employer.  **OUR GUIDING VALUES**  **Respect** - We are an organisation where privacy, dignity, and individual needs are respected, where staff are valued, supported and involved in decision-making, and where diversity is celebrated, recognising that working in a respectful environment will enable us to achieve more.  **Compassion** - we treat patients and family members with dignity, sensitivity and empathy.  **Kindness** - whilst we develop our organisation as a business, we will remember it is a service, and treat our patients and each other with kindness and humanity.  **Quality** – we seek continuous quality improvement in all we do, through creativity, innovation, education and research.  **Learning** - we nurture and encourage lifelong learning and continuous improvement, attracting, developing and retaining high quality staff, enabling them to fulfil their potential.  **Integrity** - through our governance arrangements and our value system, we will ensure all of our services are transparent, trustworthy and reliable and delivered to the highest ethical standards, taking responsibility and accountability for our actions.  **Team working** – we engage and empower our staff, sharing best practice and strengthening relationships with our partners and patients to achieve our Mission.  **Communication** - we communicate with patients, the public, our staff and stakeholders, empowering them to actively participate in all aspects of the service, encouraging inclusiveness, openness, and accountability.  *These Values shape our strategy to create an organisational culture and ethos to deliver high quality and safe services for all we serve and that staff are rightly proud of.* |
| **Reporting Relationship** | The post holder will report directly to the Hospital Manager |
| **Purpose of the Post** | To ensure a proactive approach to Incident and Risk management across the Hospital with consistent application of HSE Risk and Incident Management Policies and Guidance. This will involve supporting the implementation of the HSE Risk and Incident management policy and guidance, including:   * Risk Assessment process including management of hospital risk registers * Strengthen a culture of risk management at all levels of the organisation from front line services through to group level. * Incident management – develop and support systems and processes for incident management including communication and escalation of serious incidents (internally and to external agencies e.g. Clinical indemnity scheme) * Monitoring on incident management activity system and processes * Tracking Implementation of Major reports/investigations recommendations * Sharing of Learning from Hospital and Group through defined processes * Preparation of risk and incident activity and assurance reports to SAOLTA Serious Incident Management Team   To ensure a culture of quality improvement and patient safety, based on best practice, national standards and feedback from patients; by Compliance and management of:   * National complaints policy. * National standards for safer better healthcare 2012, all related HIQA guidance and standards for acute services. * NOCA reports and findings. |
| **Principal Duties and Responsibilities** | * The person holding this post is required to support the principle that the care of the patient comes first at all times and will approach their work with the flexibility and enthusiasm necessary to make this principle a reality for every patient to the greatest possible degree * Maintain throughout the Group’s awareness of the primacy of the patient in relation to all hospital activities. * Performance management systems are part of role and you will be required to participate in the Group’s performance management programme * Keeping the hospital manager and hospital management team abreast of any pending or existing Quality & Patient Safety (QPS) issues at the earliest opportunity of escalation. * Lead, manage and supervise all staff assigned to the QPS function within MUH. * The post holder is responsible for ensuring that they become familiar with the requirements stated within the Risk Management Strategy and that they comply with the Group’s Risk Management Incident/Near miss reporting Policies and Procedures. * Establish appropriate structures and processes in relation to risk reporting and incident management within the Hospital and at Group level. * Maintain and update the Risk Register * Provide advice and support on all aspects of risk and incident management * Support service colleagues in improving Incident and Risk Management processes * Develop a process for tracking implementation of recommendations from major reports, investigations and safety audits to ensure that assurance on implementation and learning is achieved within Mayo University Hospital. * Maintain a repository of organisational learning from safety incident and risk management and disseminate learning to enable mitigation of future risk. * Ensure all risk management documentation; policy and guidance are kept up to date. * Develop and support delivery of uniform training for incident and risk management, to ensure consistent investigative processes in line with HSE policy and guidance are applied across the service. * Establish integrated risk management reporting structures and processes. * Contribute to the development of performance indicators for risk management system which can be monitored (quality and safety profile). * Provide reports as required on performance in relation to quality and patient safety. * Contribute to ongoing development of ICT systems for quality and patient safety. * Active participation in SAOLTA collaborative working on QPS related initiatives / committees * The post holder must foster and support a quality improvement culture in MUH. * Imbed in MUH quality improvement methodologies utilising recognised frameworks for implementation. * To promote and participate in quality improvement systems and changes in MUH. * To participate in and lead project working groups where the focus is on Quality improvement and patient safety. * To represent Mayo University Hospital on committees and groups as required. * To attend meetings committees as requested. * To develop and maintain positive working relationships with key stakeholders both internal and external. * Undertake special assignments and investigations as directed. * To carry out any other appropriate duties or assignments as requested by senior management team. * Have an in-depth knowledge of the Health Information & Quality Authority (HIQA) standards as they apply to the role within an acute hospital setting. * Manage the complaints process, coordinating input for maximum organisational learning * Maintain and develop systems for shared learning for patient feedback where good practices and opportunities for improvement are identified. * To act as spokesperson for the organisation as required * Demonstrate pro-active commitment to all communications with internal and external stakeholders   **KPI’s**   * The identification and development of Key Performance Indicators (KPIs) which are congruent with the Hospital’s service plan targets. * The development of Action Plans to address KPI targets. * Driving and promoting a Performance Management culture. * In conjunction with line manager assist in the development of a Performance Management system for your profession. * The management and delivery of KPIs as a routine and core business objective.   **PLEASE NOTE THE FOLLOWING GENERAL CONDITIONS:**   * Employees must attend fire lectures annually and must observe fire orders. * All accidents within the Department must be reported immediately. * Infection Control Policies must be adhered to. * In line with the Safety, Health and Welfare at Work Act, 2005 all staff must comply with all safety regulations and audits. * In line with the Public Health (Tobacco) (Amendment) Act 2004, smoking within the Hospital Buildings is not permitted. * Hospital uniform code must be adhered to. * Provide information that meets the need of Senior Management. * To support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service.   **Risk Management, Infection Control, Hygiene Services and Health & Safety**   * 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. * The post holder must be familiar with the necessary education, training and support to enable them to meet this responsibility. * The post holder has a duty to familiarise themselves with the relevant Organisational Policies, Procedures & Standards and attend training as appropriate in the following areas:   + Continuous Quality Improvement Initiatives   + Document Control Information Management Systems   + Risk Management Strategy and Policies   + Hygiene Related Policies, Procedures and Standards   + Decontamination Code of Practice   + Infection Control Policies   + Safety Statement, Health & Safety Policies and Fire Procedure   + Data Protection and confidentiality Policies * The post holder is responsible for ensuring that they comply with hygiene services requirements in your area of responsibility. Hygiene Services incorporates environment and facilities, hand hygiene, catering, cleaning, the management of laundry, waste, sharps and equipment. * It is the post holders’ specific responsibility for Quality & Risk Management, Hygiene Services and Health & Safety this will be clarified to you in the induction process and by your line manager. * The post holder must take reasonable care for his or her own actions and the effect that these may have upon the safety of others. * The post holder must cooperate with management, attend Health & Safety related training and not undertake any task for which they have not been authorised and adequately trained. * The post holder is required to bring to the attention of a responsible person any perceived shortcoming in our safety arrangements or any defects in work equipment. * It is the post holder’s responsibility to be aware of and comply with the HSE Health Care Records Management/Integrated Discharge Planning (HCRM / IDP) Code of Practice.   **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:**   * An academic award in Risk Management or Quality in Healthcare at level 6 (or higher) on the Quality and Qualifications Ireland (QQI) framework or equivalent or currently studying for same   **OR**  A professional qualification in a health related area  **AND**   * Significant experience of working in the health services in a post that has involved quality and patient safety management, as relevant to this role * Experience of Incident Management processes and subsequent System Analysis Investigation processes * Experience of leading and implementing Quality improvement initiatives within a Health setting * Experience of changing organisational culture regarding Quality and Patient Safety through the delivery of education and training * Experience of Team Leadership and collaborative working with multiple stakeholders * Have the requisite knowledge and ability (including a high standard of suitability and management ability) for the proper discharge of the duties of the office.   **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** | N/A |
| **Other requirements specific to the post** | Access to appropriate transport to fulfil the requirements of the role, as this post will involve travel |
| **Skills, competencies and/or knowledge** | **Professional Knowledge & Experience**  Demonstrates:   * Knowledge/experience of Risk Management in Health Care setting including risk assessment, risk registers, risk reporting and monitoring * Knowledge/experience of the Incident Management process * Knowledge and experience of delivering System Analysis Investigations * Knowledge of Patient Safety including learning from mistakes /errors, developing a culture of safety, monitoring and assurance. * Knowledge of Health Care Audit and other assurance mechanisms for quality and patient safety   **Managing & Delivery Results (Operational Excellence)**  Demonstrates:   * Excellent organisational and time management skills to meet objectives within agreed timeframes and achieve quality results * Evidence of effective planning and organisational skills including an awareness of resource management and the importance of value for money * The ability to improve efficiency within the working environment and the ability to evolve and adapt to a rapid changing environment. * The ability to work to tight deadlines and operate effectively with multiple competing priorities * A capacity to operate successfully in a challenging operational environment while adhering to quality standards.   **Critical Analysis, Problem Solving & Decision Making**  Demonstrates:   * Excellent analytical skills to enable analysis, interpretation of data and data extraction from multiple data sources * The ability to evaluate complex information from a variety of sources and make effective decisions. * Effective problem solving skills * Significant experience in effective operational problem solving utilising an inclusive approach which fosters learning and self-reliance amongst teams.   **Leadership, Direction and Team working skills**  Demonstrates:   * Effective leadership in a challenging and busy environment including a track record of innovation / improvements. * Ability to lead, organise and motivate teams to the confident delivery of excellent services and service outcomes. * Demonstrate capacity for management responsibility and demonstration of initiative. * Demonstrate team work skills including the ability to work as part of a multidisciplinary team environment. * Demonstrate motivation and an innovative approach to the job within a changing working environment. * Demonstrate flexibility and adaptability. * Demonstrate leadership skills and the capacity to inspire teams to the confident delivery of excellent services. * Demonstrate ability to support, supervise, develop and empower staff in changing work practises in a challenging environment within existing resources.   **Leading a Quality Service**  Demonstrates:   * An ability to pay close and accurate attention to detail in personal work and to create a culture where high standards are valued and respected * An ability to cope with competing demands without a diminution in performance * Places strong emphasis on achieving high standards of excellence * A client user and customer focus in the delivery of services * A core belief in and passion for the sustainable delivery of high quality user focused services   **Communication and Interpersonal Skills**  Demonstrates:   * Excellent interpersonal and communications skills to facilitate work with a wide range of stakeholders * The ability to present information clearly, concisely and confidently when speaking and in writing tailoring to meet the needs of the audience * Excellent presentation skills. * Excellent written communication skills including the ability to produce professional reports. |
| **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. |
| **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 Code of Practice sets out how the core principles of probity, merit, equity and fairness might be applied on a principle basis. The Code also specifies the responsibilities placed on candidates, facilities for feedback to applicants on matters relating to their application when requested, and outlines procedures in relation to requests for a review of the recruitment and selection process and review in relation to allegations of a breach of the Code of Practice. Additional information on the HSE’s review process is available in the document posted with each vacancy entitled “Code of Practice, Information for Candidates”.  Codes of practice are published by the CPSA and are available on <https://www.hse.ie/eng/staff/jobs> in the document posted with each vacancy entitled “Code of Practice, Information for Candidates” or on <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. | |



**Grade VIII Quality and Patient Safety Manager**

**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 as of 01/01/2024 is:  €78,274 €78,976 €82,065 €85,166 €88,244 €91,335 €94,407  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. |
| **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 €73,941 as at 01.10.2022)** | Positions remunerated at or above the minimum point of the Grade VIII salary scale (€73,941 as at 01.10.2022) 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 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)