**Clinical Nurse Specialist (General) Psycho-Oncology**

**Job Specification & Terms and Conditions**

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| **Job Title, Grade Code** | Clinical Nurse Specialist (General) Psycho-Oncology  (Grade Code: 2632) |
| **Remuneration** | The salary scale for the post as of **01/03/2025** is:  60,854 61,862 62,715 64,106 65,644 67,154 68,664 70,364 71,943 74,658 **76,897 LSI**  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. |
| **Campaign Reference** | G10100 |
| **Closing Date** | 10 am on Thursday 3rd July 2025 via Rezoomo only. |
| **Proposed Interview Date (s)** | Interviews will be held as soon as possible after the closing date. Candidates will normally be given at least one week’s notice of interview. The timescale may be reduced in exceptional circumstances. |
| **Taking up Appointment** | A start date will be indicated at job offer stage. |
| **Location of Post** | Galway University Hospitals – HSE West & North West.  The successful candidate may be required to work in any service area within the vicinity as the need arises.  There is currently 1 specified purpose, whole-time, temporary vacancy available in Cancer Division Department.  A panel may be formed as a result of this campaign for Galway University Hospitals from which current and future, permanent and specified purpose vacancies of full or part-time duration may be filled. |
| **Informal Enquiries** | We welcome enquiries about the role.  Contact Ellen Wiseman, Assistant Director of Nursing Cancer Services  **Email:** ellen.wiseman@hse.ie / **Tel:** 091-542517  or  Rosane Gallagher, Assistant Director of Nursing  Galway Roscommon Mental Health Services GR2  Sherwood Hse, Nile Lodge, Galway H91 TR22  **Email:** [rosane.gallagher@hse.ie](mailto:rosane.gallagher@hse.ie) / **Tel:** 091 512968/087 6326983  for further information about the role. |
| **Details of Service** | The CNS Psycho -Oncology post is part of the NCCP Model of Care for Psycho- Oncology.  The Model of Care defines a comprehensive Psycho-Oncology service, the role of CNS Psycho-Oncology is part of an expanding and developing service, which will include the establishment of a Psycho-Oncology MDT as recommended within the National Cancer Strategy.  Psycho-Oncology is concerned with assessment, diagnosis and treatment of psychological distress caused by a cancer diagnosis. In the most recent National Cancer Strategy significant emphasis was placed on the importance of the development of Psycho-Oncology Multi-Disciplinary Teams in acute hospitals over the life of the strategy and includes psychology, psychiatry, nursing and social work.  The national mental health policy report, “Sharing the Vision” (DoH, 2020) promotes early access to psychological support in various settings, promoting the provision of individualised care to those who need help as soon as possible. The Psycho-Oncology model reflects these aims.  The Network will be led by the Director of the Cancer Network working closely with the Network General Manager and Network Director of Nursing. This team will be supported by designated support from HR, Finance, Quality and Patient Safety and Management Information Services/IS.  The West and North West region provides acute and specialist hospital and community services to the West and North West of Ireland – counties Galway, Mayo, Roscommon, Sligo, Leitrim, Donegal and adjoining counties.  The region comprises of 7 hospitals across 8 sites:   * Letterkenny University Hospital (LUH) * Mayo University Hospital (MUH) * Portiuncula University Hospital (PUH) * Roscommon University Hospital (RUH) * Sligo University Hospital (SUH) incorporating Our Lady’s Hospital Manorhamilton (OLHM) * Galway University Hospitals (GUH) incorporating University Hospital Galway (UHG) and Merlin Park University Hospital   The region’s Academic Partner is University of Galway.  The region covers one third of the land mass of Ireland, it provides health care to a population of 830,000, employs over 20,000 staff  **Vision**  Our vision is to be a leading academic Hospital providing excellent integrated patient-centred care delivered by skilled caring staff.  **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 Hospitals and communities, 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 Clinical Nurse Specialist (General) – Psycho-Oncology post holder   * Is professionally accountable to the Area Director of Nursing or designated Assistant Director of Nursing, Mental Health Service * Operationally accountable to the Assistant Director of Service, Cancer Services, GUH * Will report to the local named clinical lead for the Clinical Programme as required * The post holder will sit within the Mental Health Liaison Team and consult with the Consultant Liaison Psychiatrist pertaining to medical clinical matters, clinical reporting model may change as the model develops. * clinical reporting relationship is to the senior clinical decision maker who has responsibility for the service /service user. |
| **Key Working Relationships** | The CNS will work collaboratively with a range of internal and external stakeholders including:   * + Director/Assistant Director of Nursing Line Manager   + CNS’s, RANP’s and other nursing grades   + Multidisciplinary Team colleagues and other key stakeholders within services, including National Clinical and Integrated Care Programmes   + Service users/families and/or carers   + Nursing and Midwifery Board of Ireland   + Educational Bodies   + Nursing Planning and Development Units   + Centres of Nursing and Midwifery Education   + National Clinical Leadership Centre   + Other relevant statutory and non-statutory organisations |
| **Purpose of the Post** | The purpose of this post is to support Cancer patient’s psychological responses at all stages of their disease trajectory as required. The Clinical Nurse Specialist Psycho-Oncology will attend meetings with the multi-disciplinary Cancer teams, including the Psycho-Oncology Clinical Psychologist, and promote a patient-centred approach to cancer patients and their families. In doing so, he/she will provide nursing expertise, education and arrange appropriate follow-up for the mental health needs of the patient.   * The CNS pathway will facilitate the post holder to be supported to professionally and clinically develop the skills and knowledge required to achieve the competencies of the CNS role. * The CNS post holder will be enabled to deliver care in line with the five core concepts of the role set out in the Framework for the Establishment of Clinical Nurse/Midwife Specialist Posts, 4th edition, National Council for the Professional Development of Nursing and Midwifery (NCNM) 2008.   **Caseload**   * The CNS will focus initially on the following service user groups: **Psycho-Oncology patients** * The CNS clinical role is based on the core concepts and associated competencies for the CNS (adapted from NCNM 4th edition 2008)   The concepts are:   * Clinical Focus (Direct and Indirect Care) * Service user/Service User Advocacy * Education and Training * Audit and Research * Consultancy (including leadership in clinical practice) |
| **Principal Duties and Responsibilities** | * The post holder will support the principle that 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 awareness of the primacy of the patient in relation to all hospital activities. * Performance management systems are part of the role and you will be required to participate in the hospital performance management programme.   **Clinical Focus**  The CNS. will have a strong service user focus whereby the specialty defines itself as nursing/midwifery and subscribes to the overall purpose, functions and ethical standards of nursing/midwifery.  The clinical practice role may be divided into direct and indirect care. Direct care comprises the assessment, planning, delivery and evaluation of care to the service user, family and/or carer. Indirect care relates to activities that influence and support the provision of direct care.  **Direct Care**  *The CNS will:*   * Provide a specialist nursing/midwifery service for service users with a diagnosis of Cancer who require support and treatment through the continuum of care * Accept referrals for patients with cancer referred to the Mental Health Liaison Team via the IPMS system * Undertake comprehensive service user assessment to include physical, psychological, social and spiritual elements of care using best evidence- based practice in Cancer care * Use the outcomes of service user assessment to develop and implement plans of care/case management in conjunction with the multi-disciplinary team (MDT) and the patient, family and/or carer as appropriate. * Monitor and evaluate the patient’s response to treatment and amend the plan of care accordingly in conjunction with the MDT and patient, family and/or carer as appropriate. * Make alterations in the management of patient’s condition in collaboration with the MDT and the patient in line with agreed pathways and policies, procedures, protocols and guidelines (PPPG’s). * Accept appropriate referrals from MDT colleagues * Co-ordinate investigations, treatment therapies and patient follow-up * Communicate with patients, family and /or carer as appropriate, to assess patient’s needs and provide relevant support, information, education, advice and counselling as required * Where appropriate work collaboratively with MDT colleagues across Primary and Secondary Care to provide a seamless service delivery to the patient, family and/or carer as appropriate * Participate in medication reconciliation taking cognisance of poly-pharmacy and support medical and pharmacy staff with medication reviews and medication management * Identify and promote specific symptom management strategies as well as the identification of triggers which may cause exacerbation of symptoms. Provide patients with appropriate self-management strategies and escalation pathways. * Manage nurse-led Cancer clinics with MDT input * Identify health promotion priorities for the patient, family and/or carer and support patient self-care in line with best evidence. This will include the provision of educational and health promotion material which is comprehensive, easy to understand and meets patients’ needs * Maintain confidential, accurate and complete patient records   **Indirect Care**   * Identify and agree appropriate referral pathways for patients with Cancer * Participate in case review with MDT colleagues * Use a case management approach to patients with complex needs in collaboration with MDT in both Primary and Secondary Care as appropriate * Take a proactive role in the formulation and provision of evidence based PPPGs relating to Cancercare * Take a lead role in ensuring the service for patients with Cancercondition is in line with best practice guidelines and the Safer Better Healthcare Standards (HIQA, 2012)   **Patient/Client Advocate**   * Communicate, negotiate and represent patient’s family and/or carer values and decisions in relation to their condition in collaboration with MDT colleagues in **both Primary and Secondary Care** as appropriate * Develop and support the concept of advocacy, particularly in relation to patient participation in decision making, thereby enabling informed choice of treatment options * Respect and maintain the privacy, dignity and confidentiality of the patient, family and/or carer * Establish, maintain and improve procedures for collaboration and cooperation **between Acute Services, Primary Care and Voluntary Organisations** as appropriate * Proactively challenge any interaction which fails to deliver a quality service to patients   **Education & Training**   * Maintain clinical competence in patient management within Cancernursing/midwifery, keeping up-to-date with relevant research to ensure the implementation of evidence- based practice. * Provide the patient, family and/or carer with appropriate information and other supportive interventions to increase their knowledge, skill and confidence in managing theirCancercondition. * Contribute to the design, development and implementation of education programmes and resources for the patient, family and/or carer in relation to Cancer thus empowering them to self-manage their condition. * Provide mentorship and preceptorship for nursing/midwifery colleagues as appropriate. * Participate in training programmes for nursing/midwifery, MDT colleagues and key stakeholders as appropriate * Create exchange of learning opportunities within the MDT in relation to evidence -based Cancercare delivery through journal clubs, conferences etc. * Develop and maintain links with Regional Centres for Nursing & Midwifery Education (RCNMEs), the Nursing and Midwifery Planning and Development Units (NMPDUs) and relevant third level Higher Education Institutes (HEIs) in the design, development and delivery of educational programmes inCancer care. * Be responsible for addressing own continuing professional development needs   **Audit & Research**   * Collect statistical information in order to audit, evaluate and develop the service and assist in the provider planning process * Establish and maintain a register of patients withCancer within the CNS. Caseload. * Maintain a record of clinically relevant data aligned to National Key Performance Indicators (KPI’s) as directed and advised by the DoN/M. * Identify, initiate and conduct nursing/midwifery and MDT audit and research projects relevant to the area of practice. * Identify, critically analyse, disseminate and integrate best evidence relating to care Cancerinto practice * Contribute to nursing/midwifery research on all aspects of Cancer **c**are. * Use the outcomes of audit to improve service provision * Contribute to service planning and budgetary processes through use of audit data and specialist knowledge * Monitor, access, utilise and disseminate current relevant research to advise and ensure the provision of informed evidence- based practice   *Audit expected outcomes including:*   * Collate data which will provide evidence of the effectiveness of the CNS interventions undertaken - Refer to the National Council for the Professional Development of Nursing and Midwifery final report - *Evaluation of Clinical Nurse and Midwife Specialist and Advanced Nurse and Midwife Practitioner roles in Ireland* (SCAPE Report, 2010) and refer to the National KPIs associated with the speciality. They should have a clinical nursing/midwifery focus as well as a breakdown of activity - patients seen and treated. * Evaluate audit results and research findings to identify areas for quality improvement in collaboration with nursing/midwifery management and MDT colleagues (Primary and Secondary Care).   **Consultant**   * Provide leadership in clinical practice and act as a resource and role model for Cancerpractice. * Generate and contribute to the development of clinical standards and guidelines and support implementation * Use specialist knowledge to support and enhance generalist nursing/midwifery practice * Develop collaborative working relationships with local Cancer CNSp/ CMSp’s/Registered Advanced Nurse/Midwife Practitioner/MDT colleagues as appropriate, developing person centred care pathways to promote the integrated model of care delivery. * With the support of theDoN/M, attend integrated care planning meetings as required * Where appropriate develop and maintain relationships with specialist services in voluntary organisations which support patients in the community. * Liaise with other health service providers in the development and on-going delivery of the National Clinical Programme model of care. * Network with other CNS in Cancer and in related professional associations.   **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 periodically 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 Acts 2005 and 2010 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 become familiar with the requirements stated within the Risk Management Strategy and that they comply with the Region’s Risk Management Incident/Near miss reporting Policies and Procedures. * 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. * The post holder must foster and support a quality improvement culture through-out your area of responsibility in relation to hygiene services. * The post holders’ responsibility for Quality & Risk Management, Hygiene Services and Health & Safety 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 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 on the closing date:  **Statutory Registration, Professional Qualifications, Experience, etc**  (a) Eligible applicants will be those who on the closing date for the competition:  (i) Be a registered nurse/midwife on the active Register of Nurses and Midwives held by An Bord Altranais and Cnáimhseachais na hÉireann (Nursing and Midwifery Board of Ireland) or be eligible to be so registered.  **AND**  (ii) Be registered in the division(s) of the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) Register for which the application is being made or be entitled to be so registered.  **OR**    (iii) In exceptional circumstances, which will be assessed on a case by case basis be registered in another Division of the register of Nurses and Midwives.  **AND**  (iv) Have a minimum of 1 years’ post registration full time experience or an aggregate of 1 years’ full time experience in the division of the register in which the application is being made (taking into account (ii) (iii) if relevant)  **AND**  (v) Have a minimum of 1 years’ experience or an aggregate of 1 years’ full time experience in specialist area of Cancer Care.  **AND**  (vi) Have successfully completed a post registration programme of study, as certified by the education provider which verifies that the applicant has achieved a Quality and Qualifications Ireland (QQI), National Framework of Qualifications (NFQ) major academic Level 9 or higher award that is relevant to the specialist area of care (equivalent to 60 ECTS or above), and in line with the requirements for specialist practice as set out by the National Council for Nursing and Midwifery 4th ed (2008).  Alternatively provide written evidence from the Higher Education Institute that they have achieved the number of ECTS credits equivalent to a Level 9 or higher standard, relevant to the specialist area of care (equivalent to 60 ECTS or above), and in line with the requirements for specialist practice as set out by the National Council for Nursing and Midwifery 4th ed (2008). Cancer Care prior to application\* (See \*\*Note 1 below).    **AND**  (vii) Be required to demonstrate that they have continuing professional development (CPD) relevant to the specialist area.  **AND**  (viii) Have the ability to practice safely and effectively fulfilling his/her professional responsibility within his/her scope of practice  *\*\*Note 1: For Nurses/Midwives who express an interest in CNS/CMS roles and who currently hold a level 8 educational qualification in the specialist area (equivalent to 60 ECTS or above), this qualification will be recognised up to September 2026.*  **AND**    (b) Candidates must possess the requisite knowledge and ability, including a high standard of suitability and clinical, leadership, managerial and administrative capacity for the proper discharge of the duties of the office.  **Annual registration**  (i) Practitioners must maintain live annual registration on the appropriate/relevant Division  of the register of Nurses and Midwives maintained by the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) for the role.  **AND**  (ii) Practitioners must confirm annual registration with NMBI to the HSE by way of the  annual Service user Safety Assurance Certificate (PSAC).  **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** | Demonstrate an ability to complete an in-depth bio-psychosocial assessment pertaining to mental health.   * The organisation will consider the post specific requirements or experience required in developing the specific CNS Psycho-Oncology service. * It is preferable that the candidate has a recognised qualification in Counselling from a reputable educational institution. |
| **Skills, competencies and/or knowledge** | **Professional Knowledge**  *The CNS. will:*   * Practice in accordance with relevant legislation and with regard to The Scope of Nursing & Midwifery Practice Framework (Nursing and Midwifery Board of Ireland, 2015)and the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (Nursing and Midwifery Board of Ireland, 2014) * Maintain a high standard of professional behaviour and be professionally accountable for actions/omissions. Take measures to develop and maintain the competences required for professional practice * Adhere to the Nursing & Midwifery values of Care, Compassion and Commitment (DoH, 2016) * Adhere to national, regional and local HSE PPPGs * Adhere to relevant legislation and regulation * Adhere to appropriate lines of authority within the nurse/midwife management structure.   Demonstrate:   * An in-depth knowledge of the role of the CNS psycho-oncology. * In-depth knowledge of the pathophysiologyof psychological distress and psychiatric issues in patients with cancer. * The ability to undertake a comprehensive assessment of the patient with psychologicaldistress**,** including taking an accurate history of their condition and presenting problem * The ability to employ appropriate diagnostic interventions to supportclinical decision making and the patients’ self- management planning * The ability to formulate a plan of care based on findings and evidence- based standards of care and practice guidelines * The ability to follow up and evaluate a plan of care * Knowledge of health promotion principles/coaching/self-management strategies that will enable people to take greater control over decisions and actions that affect their health and wellbeing * An understanding of the principles of clinical governance and risk management as they apply directly to the CNS. role and the wider health service * Evidence of teaching in the clinical area * A working knowledge of audit and research processes * Evidence of computer skills including use of Microsoft Word, Excel, E-mail, PowerPoint     **Communication and Interpersonal Skills**  Demonstrate:   * Effective communication skills * Ability to build and maintain relationships particularly in the context of MDT working * Ability to present information in a clear and concise manner * Ability to manage groups through the learning process * Ability to provide constructive feedback to encourage future learning * Effective presentation skills.   **Organisation and Management Skills:**  Demonstrate:   * Evidence of effective organisational skills including awareness of appropriate resource management * Ability to attain designated targets, manage deadlines and multiple tasks * Ability to be self-directed, work on own initiative * A willingness to be flexible in response to changing local/organisational requirements.   **Building & Maintaining Relationships including Team and Leadership skills**  Demonstrate:   * Leadership, change management and team management skills including the ability to work with MDT colleagues.   **Commitment to providing a quality service:**  Demonstrate:   * Awareness and respect for the patient’s views in relation to their care * Evidence of providing quality improvement programmes * Evidence of conducting audit * Evidence of motivation by ongoing professional development.   **Analysing and Decision Making**  Demonstrate:   * Effective analytical, problem solving and decision- making skills |
| **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 progressing 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.  Read more about the HSE’s commitment to [Diversity, Equality and Inclusion](https://www.hse.ie/eng/staff/resources/diversity/diversity.html) |
| **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 to be followed when making an appointment. These are set out in the CPSA Code of Practice. The Code outlines the standards to 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.  Read the [CPSA Code of Practice](https://www.cpsa.ie/pdf/?file=https://assets.cpsa.ie/media/275828/b88e3648-c663-4293-9471-d2d75bd1d685.pdf). |
| 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. | |

**Clinical Nurse Specialist (General) Psycho-Oncology**

**Terms and Conditions of Employment**

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| **Tenure** | The current vacancy available is temporary 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. |
| **Working Week** | The standard weekly working hours of attendance for your grade are 37.5hours per week. Your normal weekly working hours are 37.5 hours. Contracted hours that are less than the standard weekly working hours for your grade will be paid pro rata to the full time equivalent. |
| **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.  Visit [HSE Children First](https://www.hse.ie/eng/services/list/2/primarycare/childrenfirst/resources/) for further information, guidance and 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-2), 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-3). * 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. |

1. A template SSSS and guidelines are available on [writing your site or service safety statement](https://healthservice.hse.ie/staff/health-and-safety/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-2)
2. [↑](#footnote-ref-3)