****



 **Clinical Nurse Specialist (CNS Haematology)**

 **Letterkenny University Hospital**

**Job Specification & Terms and Conditions**

|  |  |
| --- | --- |
| **Job Title and Grade** |  **Clinical Nurse Specialist** **(CNS) Haematology****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 LSINew 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** | L8269  |
| **Closing Date** | Monday 09th June 2025  |
| **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** | To be agreed at job offer stage  |
| **Location of Post** | **West North West Hospital Group, Letterkenny University Hospital**Initial vacancy is permanent 0.5 wte within Haematology Services, Letterkenny University Hospital.The successful candidate may be required to work in any service area within the vicinity as the need arises. A panel may be formed for Clinical Nurse Specialist (Haematology) at Letterkenny University Hospital from which current and future permanent and specified purpose vacancies of full time or part time duration may be filled. |
| **Informal Enquiries** | Ms Siobhan Kelly, ADON/SM Tel: 0874006747Email: Siobhan.kellylgh@hse.ie |
| **Details of Service** | Asafe quality service is the foundation on which haematology/oncology care is provided to patients in Letterkenny University Hospital. There are two strands to Haematology nursing care – patient who present with malignant and non-malignant conditions. Treatments for haematological malignancies can vary significantly in intensity from surveillance, through outpatient chemotherapy and immunotherapy, to complex inpatient therapy up to the level of allogeneic stem cell transplantation. Both non-malignant and malignant diagnosis receive intervention and treatments.The existing service in Letterkenny University Hospital includes one CNS Haematology working alongside two Consultant Haematologists. The provision of care includes a holistic ‘clinical work-up’and follow-up in preparation for specific therapies. Multidisciplinary Team involvement, meetings and Ward Rounds are an integral part of the patient care process. Nurse-led care is prominent and an important part of service delivery.Once the patient’s clinical work-up is completed, the patient then attends the Day Services, Oncology/Haematology Unit or is admitted to the in-patient ward for treatment and thereafter is included onto a programme of surveillance in relation to their clinical condition progression. The Haematology CNS is required to support care for the inpatients, and conduct virtual clinics/telephone review for patients. The service will be further developing the Telephone Triage service to enhance patient care and follow-up. The addition of a CNS Haematology role within this current service will support the existing team and enhance the delivery of care to patients. A key theme of our 5 year strategy is the development of Managed Clinical and Academic Networks. These networks will ensure that specialities in individual hospitals will no longer work in isolation but as a networked team which will improve clinical quality and patient safety. It will also support collective learning/sharing of expertise and will be supported by education, training, research and audit programmes. It will result in safer, standardised and more sustainable services for our patients.**The West and North West Region**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)](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 region’s Academic Partner is NUI 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 – LearningOur 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** | **Professional Accountability**: Director of Nursing and Midwifery.**Operational Accountability**: Assistant Director of NursingThe CNS will work in collaboration with Clinicians. |
| **Purpose of the Post**  | **The purpose of the CNS Haematology is to deliver specialist haematological nursing 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.****Core Concepts of the CNS role*** Clinical Focus
* Patient/Client Advocate
* Education and Training
* Audit and Research
* Consultant

**CNS Patient Caseload**The CNS Haematology will care for patients over 18 years old and work alongside the Haematology Clinical nursing and medical team to delivery holistic care which is focused on individual needs. There are two strands to Haematology nursing care – malignant and non-malignant. Treatments for haematological malignancies can vary significantly in intensity from surveillance, through outpatient chemotherapy and immunotherapy, to complex inpatient therapy up to the level of allogeneic stem cell transplantation. The non-malignant also require treatment and care.Patient referred to the CNS Haematology service will be through established referral systems. |
| **Principal Duties and Responsibilities** | * + The post holder 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, clinical knowledge and skills and enthusiasm necessary to make this principle a reality for every patient to the greatest possible degree..
	+ The post holder will maintain the primacy of the patient in relation to all hospital activities.
	+ The post holder will participate in performance management systems and processes and the CNS will be required to participate in the group’s performance management programme.

**Clinical Focus** The CNS Haematology will have a strong patient focus whereby the specialty defines itself as nursing and subscribes to the overall purpose, functions and ethical standards of nursing. 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 patient, 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 service for patients who require support and treatment through the continuum of care, demonstrating specialist knowledge of and clinical expertise in the delivery of patient care.
* Undertake a comprehensive patient assessment to include physical, psychological, social and spiritual elements of care using best evidenced based care in the specialist area of nursing practice.
* Use the outcomes of patient assessment to develop, coordinate and implement plan of care and treatment in conjunction with clinical team, the patient and family as appropriate. Attend multidisciplinary team meetings, ward rounds etc. as required.
* Contribute to and support the use of patient review through the use of virtual technology/telephone nurse led review. Provide a point of telephone contact for patient experiencing disease/treatment related symptoms and assess patients using the UKONS telephone triage system.
* Actively participate in planning and carrying out of unscheduled review of patients presenting unwell to the Haematology services with disease/treatment related side effects and escalating in line with local care pathways .
* Provide support to the family/ significant other, through listening, problem solving and education.
* Provide outreach support for the patient at home.
* Assess patients regarding their need for referral to specialist cancer services. Report such patient need promptly to the consultant/ clinical leader and discuss referral.
* Participate in ongoing patient/family education in relation to management of disease and treatment related side effects.
* Foster good working relationships with all members of the clinical team, which are both professional and supportive.
* Maintain accurate clinical records complying with legislation and best practice.
* Demonstrate leadership ability and good communication skills in all aspects of the CNS role and responsibilities.

**Indirect Care** *The CNS will:* * Identify, contribute to, agree and develop appropriate referral pathways for Haematology patients who are experiencing a disease or treatment related complication in collaboration with the Team.
* Participate in case review with MDT colleagues.
* Use a person-centred 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 care. Be actively involved in the preparation and implementation of policies and nursing guidelines in relation to the management of care to the Haematology patients.
* Be aware and adhere to all hospital policies and procedures and collaborate with other health care professionals to ensure that these are observed.
* Take a lead role in ensuring the service for haematology patients experiencing disease or treatment related complication is in line with best practice guidelines and the Safer Better Healthcare Standards (HIQA, 2012) and all other relevant guideline, policies and procedures.

**Patient/Client Advocate***The CNS will:* * 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.
* Proactively challenge any interaction which fails to deliver a quality service to patients
* 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
* Be aware of existing resources/ services, which help patients and their family/ significant others, e.g. social services, support groups, entitlements. Facilitate development of information leaflets for patients and families.
* Act as a resource/ contact person for Haematology patients attending other departments within the hospital or outside the hospital for treatment.
* Provide patients and family/ significant others with contact details for acute haematology nurse specialist and advise for out of hours contact

**Education & Training:** *The CNS will:* * Maintain clinical competence in patient management within the specialist area of practice and wider nursing, 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 relation to their clinical condition.
* Contribute to the design, development and implementation of education programmes and resources for the patient, family and/or carer, thus empowering them in relation to 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 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 inhaematology care.
* Be responsible for addressing own continuing professional development needs

**Audit & Research:***The CNS will:* * Contribute to maintaining a register of patients 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/ DON/ Clinical Team.
* Identify, initiate and conduct nursing and MDT audit and research projects relevant to the area of practice, utilise the outcomes to influence service delivery based on best evidence from a nursing and MDT/Service perspective.
* Identify, critically analyse, disseminate and integrate best evidence relating to **haematology nursing care and wider perspectives** into practice
* Contribute to service planning and budgetary processes through use of audit data and specialist knowledge
* Ensure own practice is compliant and up to date with “best practice”, which is reflected in research and development.
* Collect and maintain accurate data in relation to this service improvement initiative and the impact of the role within the haematology service as determined and developed nationally
* Participate in the regular audit of own clinical practice
* Set objectives and develop policies, procedures and standards for the cancer nursing services based on current nursing research and relevant research from other disciplines.
* Identify areas within the specialty relevant to nursing practice, which would benefit from research. Promote an awareness of research-based practice amongst staff.

***Audit expected outcomes including:**** Evaluate audit results and research findings to identify areas for quality improvement in collaboration with nursing management and MDT colleagues
* Contribute to, maintain and report outcome measures locally and to the NCCP and relevant agencies on activity levels from source of referral to management and follow up.

**Consultant:**The CNS will:* Provide leadership in clinical practice and act as a resource and role model for cancer services within the area of practice and wider.
* Generate and contribute to the development of clinical standards and guidelines, having regard to national and international advancements in cancer nursing.
* Establish collegial partnerships and in the context of cancer care, contribute to the professional development of students, peers, colleagues and others through consultation, education, leadership, mentorship and coaching.
* Work with, support, advise and help build up knowledge of expertise of the primary care team in providing an appropriate system of care to meet the needs of the patient and their family/carers.
* Develop and maintain good collaborative working relationships and communication with all members of the speciality’s MDT and other health care professionals within and outside the service.
* Participate in the implementation of the national clinical care programmes and their agreed models of care for patients and their families as they relate to the role.
* Use specialist knowledge to support and enhance the care and management of unscheduled care patients ensuring the prompt, correct management of these patients and consequently reduced bed days

**Health & Safety:**These duties must be performed in accordance with local organisational and the HSE health and safety polices. In carrying out these duties the employee must ensure that effective safety procedures are in place to comply with the Health, Safety and Welfare at Work Act (2005). Staff must carry out their duties in a safe and responsible manner in line with the local policy documents and as set out in the local safety statement, which must be read and understood. **Quality, Risk and Safety Responsibilities** It is the responsibility of all staff to: * Participate and cooperate with legislative and regulatory requirements with regard to quality, risk and safety.
* Participate and cooperate with local quality, risk and safety initiatives as required.
* Participate and cooperate with internal and external evaluations of the organisation’s structures, services and processes as required, including but not limited to, The National Hygiene Audit, National Decontamination Audit, Health and Safety Audits and other audits specified by the NCCP/HSE or other regulatory authorities.
* Initiate, support and implement quality improvement initiatives in their area which are in keeping with local organisational quality, risk and safety requirements.
* Contribute to the development of PPPGs and safe professional practice and adhere to relevant legislation, regulations and standards.
* Comply with Health Service Executive (HSE) Complaints Policy.
* Ensure completion of incident/near miss forms and clinical risk reporting.
* Adhere to department policies in relation to the care and safety of any equipment supplied and used to carry out the responsibilities of the role

**Specific Responsibility for Best Practice in Hygiene** Hygiene is defined as: “The practice that serves to keep people and environments clean and prevent infection. It involves the study of preserving one’s health, preventing the spread of disease, and recognising, evaluating and controlling health hazards. In the healthcare setting it incorporates the following key areas: environment and facilities, hand hygiene, catering, management of laundry, waste and sharps, and equipment” (HIQA, 2008; P2). It is the responsibility of all staff to ensure compliance with local organisational hygiene standards, guidelines and practices. **Management/Administration:***The CNS will:** Provide an efficient, effective and high quality service, respecting the needs of each patient, family and/or carer.
* Effectively manage time and caseload in order to meet changing and developing service needs.
* Continually monitor the service to ensure it reflects current needs.
* Implement and manage identified changes.
* Ensure that confidentiality in relation to patient records is maintained.
* Represent the specialist service at local, national and international fora as required.
* Maintain accurate and contemporaneous records and data on all matters pertaining to the planning, management, delivery and evaluation of care and ensure that this service is in line with NCCP/HSE requirements.
* Contribute to the service planning process as appropriate and as directed by the DoN.
* Have a 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.
* To support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service.

**General:** * Be accountable for the provision of your work and perform in a manner that is efficient, effective and of the highest standard.
* Conduct his /herself in a manner that ensures safe care.
* In accordance with Health and Safety at Work policy, it is each staff members responsibility to observe all rules relating to Health and Safety and Conduct at Work and to use any equipment and chemicals provided for cleaning in a safe and responsible manner.
* Report any incident or potential incident which may compromise the health and safety of patient, staff or visitors and take appropriate action.
* In line with public Health (Tobacco) amendment Act 2004-smoking on the hospital campus is prohibited.
* Comply with all Hygiene requirements –including use of appropriate Personal Protective Equipment required to comply with Infection Prevention and Control.
* Hospital Uniform Policy must be adhered to.
* Attend training courses as required e.g. Hand Hygiene, Health and Safety, Manual Handling, Chemical safety, Fire Prevention etc
* Report any equipment faults to person in charge and ensure all equipment is stored safely.
* The post holder is expected to carry out his/her duties with compassion, respect and consideration for both patients and other staff.
* Maintain the confidentiality of all information made available to him / her during the course of his / her work.
* Support and 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 & SafetyThe management of risk infection control hygiene services and Health and 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 responsibilityThe post holder has a duty to familiarise themselves with the relevant organisational policies procedures and standards and attend training as appropriate in the following areas * Continuous quality improvement initiatives.
* Document control Information Management Systems
* Risk Management strategies and policies
* Hygiene related police procedures and standards
* Decontamination codes of practice
* Infection Control Policies and guidelines
* Safety statement, Health and safety policies and fire policies
* 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 group risk management Incident/near miss reporting policies and procedures.
* The post holder is responsible for ensuring that they comply with hygiene service requirements in their areas of responsibility. Hygiene service incorporates environment and facilities, hand hygiene, catering, management of laundry, waste sharps and equipment.
* The post holder must foster and support a quality improvement culture throughout their area of responsibility in relation to hygiene services.
* It is the post holders specific responsibility for quality and risk management, hygiene services and Health and safety management and 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 these may have upon the safety of others.
* The post holder must cooperate with management, attend Health and safety related training and not undertake any task for which they have not been authorised or adequately trained.
* The post holder is required to bring to the attention of a responsible person any perceived shortcomings in safety arrangements or any defects in work equipment.

**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** | **1. 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 Midwivesheld by An Bord Altranais and Cnáimhseachais na hÉireann (Nursing andMidwifery 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 theapplication is being made or be entitled to be so registered.**OR**(iii) In exceptional circumstances, which will be assessed on a case by case basisbe 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 anaggregate of 1 years’ full time experience in the division of the register in whichthe 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 timeexperience in specialist area of Haematology**AND**(vi) Have successfully completed a post registration programme of study, ascertified by the education provider which verifies that the applicant has achieveda Quality and Qualifications Ireland (QQI), National Framework of Qualifications(NFQ) major academic Level 9 or higher award that is relevant to the specialistarea of care (equivalent to 60 ECTS or above), and in line with the requirementsfor specialist practice as set out by the National Council for Nursing andMidwifery 4th ed (2008).Alternatively provide written evidence from the Higher Education Institute thatthey have achieved the number of ECTS credits equivalent to a Level 9 or higherstandard, relevant to the specialist area of care (equivalent to 60 ECTS orabove), and in line with the requirements for specialist practice as set out by theNational Council for Nursing and Midwifery 4th ed (2008). Haematology or associated haematology area of expertise. **(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 professionalresponsibility within his/her scope of practice**\*\*Note 1:** For Nurses/Midwives who express an interest in CNS/CMS roles and whocurrently hold a level 8 educational qualification in the specialist area of Haematology or associated haematology area of expertise (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 properdischarge of the duties of the office.**2. Annual registration**(i) Practitioners must maintain live annual registration on the appropriate/relevant Divisionof the register of Nurses and Midwives maintained by the Nursing and Midwifery Boardof 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 theannual Service user Safety Assurance Certificate (PSAC).**3. Health**Candidates for and any person holding the office must be fully competent and capable ofundertaking 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.**4. Character**Candidates for and any person holding the office must be of good character. |
| Post specific Requirements | Demonstrate depth and breadth of nursing experience in the specialist area of Haematology services.Demonstrate interest in and/ or experience of developing haematology nurse services with a view to contributing actively to the development of Haematology services.* Have undertaken or agree to undertake, within an agreed timeframe, the Nurse Prescribing of Medicinal Products Certificate.
* If applicable, have undertaken or agree to undertake, within an agreed timeframe, the Nurse Prescribing of Ionising Radiation Certificate.

Formally apply for entry onto the Interim ONMSD CNS/CMS database (until the database is transferred to its permanent location) |
| **Other requirements specific to the post** | * A flexible approach to working hours
* Access to appropriate transport
 |
| **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 midwife management structure.

***The CNS will demonstrate:**** In-depth knowledge of the role of Clinical Nurse Specialist
* In-depth knowledge of the pathophysiology of /Haematology malignancies
* The ability to undertake a comprehensive assessment of the patient experiencing complications of Systemic Anti-Cancer Therapies**,** including taking an accurate history of theircondition and presenting problem.
* The ability to employ appropriate diagnostic interventions including use of the UKONS Telephone Triage toolkit to support clinical 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 Clinical Nurse Specialist 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.
* Knowledge in the use of Technology to enhance patient for example patient follow up – Virtual Technology, Telephone Technology for nurse led review.

**Communication and Interpersonal Skills*** 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:** * 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** * Leadership, change management and team management skills including the ability to work with MDT colleagues.

**Commitment to providing a quality service:** * 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** * Effective analytical, problem solving and decision making skills.
 |
| **Campaign Specific Selection Process****Ranking/Shortlisting/ Interview** | A ranking and or short-listing exercise may be carried out on the basis of information supplied in your application form. The criteria for ranking and or short-listing 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 / Public Appointments Service 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 [www.cpsa.ie](http://www.cpsa.ie) |
| The reform programme outlined for the Health Services may impact on this role and as structures change the job description may be reviewed.This job description 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. |



**Terms and Conditions of Employment**

**Clinical Nurse Specialist (CNS Haematology)**

|  |  |
| --- | --- |
| **Tenure**  | The current vacancy available is pensionable permanent and part time.A panel may be created from which permanent and specified purpose vacancies of full or part time duration may be filledAppointment as an employee of the Health Service Executive is governed by the Health Act 2004 and the Public Service Management (Recruitment and Appointment) Act 2004 and Public Service Management (Recruitment and Appointments) Amendment Act 2013. |
| **Working Week** | The standard working week applying to the post is 18.75 hours 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 job offer 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 recruited between 1 April 2004 and 31 December 2012 (new entrants) have no compulsory retirement age.Public servants recruited since 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. |
| **Mandated Person Children First Act 2015** | As a mandated person under the Children First Act 2015 you will have a legal obligation * To report child protection concerns at or above a defined threshold to TUSLA.
* To assist Tusla, if requested, in assessing a concern which has been the subject of a mandated report

You will remain a mandated person for the duration of your appointment to your current post or for the duration of your appointment to such other post as is included in the categories specified in the Ministerial Direction. You will receive full information on your responsibilities under the Act on appointment. |
| **Protection of Persons Reporting Child Abuse Act 1998** | As this post is one of those designated under the Protection of Persons Reporting Child Abuse Act 1998, appointment to this post appoints one as a designated officer in accordance with Section 2 of the Act.  You will remain a designated officer for the duration of your appointment to your current post or for the duration of your appointment to such other post as is included in the categories specified in the Ministerial Direction. You will receive full information on your responsibilities under the Act on appointment. |
| **Ethics in Public Office 1995 and 2001****Positions remunerated at or above the minimum point of the Grade VIII salary scale (€68,310 as at 01.01.2020)** | Positions remunerated at or above the minimum point of the Grade VIII salary scale (€ 68,310 as at 01.01.2020) 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 <http://www.sipo.gov.ie/> |
| **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. |
| **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.  |

1. A template SSSS and guidelines are available on the National Health and Safety Function/H&S web-pages [↑](#footnote-ref-1)
2. See link on health and safety web-pages to latest Incident Management Policy [↑](#footnote-ref-2)