Temporary Medical Scientist, Staff Grade (Histology)
Job Specification, Terms & Conditions

<table>
<thead>
<tr>
<th>Job Title and Grade</th>
<th>Temporary Medical Scientist – Histopathology</th>
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<tbody>
<tr>
<td>Campaign Reference</td>
<td>MAHP17_150</td>
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<tr>
<td>Closing Date</td>
<td>12 noon on October 13th 2017</td>
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<tr>
<td>Proposed Interview Date</td>
<td>Interviews will be held on October 20th 2017</td>
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<tr>
<td>Taking up Appointment</td>
<td>Immediate full time locum contract for 12 months</td>
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<tr>
<td>Organisational Area</td>
<td>Saolta University Health Care Group</td>
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<tr>
<td>Location of Post</td>
<td>Histopathology Department, University Hospital, Mayo</td>
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<td>A panel may be formed as result of this campaign for Mayo University Hospitals from which current and future, specified purpose vacancies of full or part time duration may be filled.</td>
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<td>Informal Enquiries</td>
<td>Ms Joanne Keating , Division of Anatomic Pathology, Mayo University Hospital, Email: <a href="mailto:joanne.keating@hse.ie">joanne.keating@hse.ie</a></td>
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<tr>
<td>Details of Service</td>
<td>MUH provides a diagnostic laboratory service in Histopathology, Cytopathology .</td>
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<td>MUH is a Model 3 hospital providing 24/7 acute surgery, acute medicine, and critical care.</td>
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<td>Saolta University Health Care Group is one of seven new hospital groups announced by the then Minister for Health, Dr. James Reilly TD in May, 2013, as part of a re-organisation of public hospitals into more efficient and accountable hospital groups that will deliver improved outcomes for patient. The Saolta University Health Care Group comprises of 7 hospitals:</td>
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<td>• Letterkenny University Hospital</td>
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<td>• Sligo University Hospital</td>
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<td>• Mayo University Hospital</td>
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<td>• Roscommon University Hospital</td>
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<td>• Portiuncula University Hospital</td>
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<td>• Merlin Park University Hospital Galway</td>
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<td></td>
<td>• University Hospital Galway</td>
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<td>The Group has one overall Group Management Team, turnover of €820 million and operates with 1,781 beds and staffing of 8,454 WTE (9,737 headcount) in June 2016.</td>
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<td>The objectives of the groups are to:</td>
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<td>• Achieve the highest standard of quality and uniformity in care across the group</td>
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<td>• Deliver cost effective hospital care in a timely and sustainable manner</td>
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<td>• Encourage and support clinical and managerial leaders</td>
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<td>• Ensure high standards of governance, both clinical and corporate and recruit and retain high quality nurses, NCHDs, consultants, allied health professionals and administrators in all our hospitals.</td>
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<td>There is an evolving Group governance structure with 4 Clinical Directorates which manage the clinical specialities across each site:</td>
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<td></td>
<td>• Medicine</td>
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<td>• Perioperative</td>
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<td>• Diagnostics</td>
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Each Directorate has a set of key performance indicators to improve quality, drive performance, and ensure efficiency.

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.

Saolta University Health Care Group aims to meet its service plan targets. Its priority is to implement the national clinical care programmes across the Group and establish a performance management culture with the development of Key Performance Indicators.

**Vision**

The formation of the hospitals groups, which will transition to independent hospital trusts, will change how hospitals relate to each other and integrate with the academic sector. Over time, the Group will deliver:

- Higher quality service
- More consistent standards of care
- More consistent access to care
- Stronger leadership

Greater integration between the healthcare agenda and the teaching, training, research and innovation agenda

Our Academic Partner is the National University of Ireland, Galway and we are developing further international partnerships in the UK and the USA.

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<tr>
<th><strong>Mission Statement</strong></th>
<th>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.</th>
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<tr>
<td><strong>OUR VISION STATEMENT</strong></td>
<td>Our Vision is to build on excellent foundations already laid, further developing and integrating our Group, fulfilling our role as an exemplar, and becoming the first Trust in Ireland.</td>
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</table>
| **OUR GUIDING VALUES** | **Respect** - We aim to be 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 will 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 will 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.

**Teamworking** – we will engage and empower our staff, sharing best practice and strengthening relationships with our partners and patients to achieve our Mission.

**Communication** - we aim to 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.

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<th>Reporting Relationship</th>
<th>Senior Medical Scientist</th>
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<td><strong>Purpose of the Post</strong></td>
<td>The purpose of the post is to participate in the delivery of a high quality anatomic pathology laboratory service.</td>
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| **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  

**Scientific / Professional**

The Medical Scientist (Staff Grade) will:

- Maintain awareness of the primacy of the patient in relation to all hospital activities.  
- Perform to the highest professional standards and participate in implementing a service that supports the clinical needs of patients and is consistent with the mission, vision, values and strategic plan of the Health Service Executive (HSE).  
- Demonstrate behaviour consistent with the values of the profession of Medical Scientist.  
- Participate in the implementation of operational processes to standards of best practice in order to optimise use of resources.  
- Liaise with other health care professionals as appropriate.  
- Be responsible for the quality of their work and carry out their duties in accordance with laboratory and hospital policy.  
- Perform analytical testing appropriate to a histology laboratory.  
- Perform all activities related to the receipt, analysis and reporting of laboratory specimens.  
- Actively participate in quality management programmes which are patient centred and which measure, audit performance and client satisfaction.  
- Perform assigned work to the highest professional standard in accordance with ISO 15189, and laboratory SOPs.  
- Ensure that procedures are carried out in compliance with international and national guidelines and actively participate in internal and external quality control and quality assurance.  
- Report all anomalies, near misses, non-conformances, incorrect results immediately to appropriate senior staff.  
- Ensure all policies in relation to record keeping are followed.  
- Observe the strictest confidence when dealing with all aspects of patient or hospital information.  
- In co-operation with the Consultant Heads of Department, Laboratory Manager, Chief Medical Scientist and other designated senior staff, participate in the introduction of new ideas and methods according to HSE policy.  
- Participate and co-operate in evaluating and validating equipment, consumables and
reagents.
- Participate and co-operate in research and development projects.
- Carry out the Major Emergency Plan for isolated incidents of multiple trauma as required or requested by hospital policy.

**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 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 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.
- 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.
- 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 Description 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.

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<tr>
<th>Eligibility Criteria</th>
<th>Candidates must have at the latest date of application: -</th>
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<tr>
<td>Qualifications and/or experience</td>
<td>(i) The Bachelor in Science (Applied Science) Honours degree (Biomedical option) from the University of Dublin / Dublin Institute of Technology, Kevin Street</td>
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<td>Or</td>
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<td>(ii) The Bachelor in Science Honours degree in Biomedical Science from the Joint University College Cork - Cork Institute of Technology course</td>
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<td>(iii) The Diploma in Medical Laboratory Sciences of the Dublin Institute of Technology, Kevin Street or the Cork Institute of Technology awarded prior to 1994</td>
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<td>Or</td>
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<td>(iv) The Certificate in Medical Laboratory Sciences of the Dublin Institute of Technology, Kevin Street or Cork Institute of Technology or the Galway/ Mayo Institute of Technology (awarded prior to 1997)</td>
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<td>Or</td>
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<td>(v) A recognised qualification at least equivalent to (i) or (ii) above</td>
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<td>And</td>
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<td>(vi) Possess membership of, or be eligible for membership of the Academy of Medical Laboratory Science (MAMLS) or, prior to 1997, possess or be eligible for associate membership of the Academy of Medical Laboratory Science (AMAMLS)</td>
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<td></td>
<td>And</td>
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<td>(vii) Possess the requisite knowledge and ability (including a high standard of suitability and management ability) for the proper discharge of the duties of the office.</td>
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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.

Age

Age restrictions shall only apply to a candidate where he/she is not classified as a new entrant (within the meaning of the Public Service Superannuation Act, 2004). A candidate who is not classified as a new entrant must be under 65 years of age on the first day of the month in which the latest date for receiving completed application forms for the office occurs.

Other requirements specific to the post

A flexible approach to working hours is required in order to ensure deadlines are met and successful candidates will be expected to participate in laboratory weekend cover.
Skills, competencies and/or knowledge

Knowledge
- Demonstrate evidence of theoretical knowledge and practical skills of Cellular Pathology
- Demonstrate up-to-date knowledge of best in delivering a Quality Laboratory Service and awareness of the requirements of ISO 15189
- Demonstrate evidence of computer skills and a willingness to develop IT skills relevant to the role
- Demonstrate commitment to continuing professional development
- Demonstrate an awareness of the safety requirements in a clinical laboratory.

Planning & Organising
- Demonstrate evidence of effective planning and organising skills
- Demonstrate the ability to manage self in a busy working environment
- Demonstrate the ability to evaluate information, solve problems and make effective decisions.
- Demonstrate the ability to identify and resolve system failures and anomalies
- Demonstrate ability to manage deadlines

Commitment to Quality Service
- Demonstrate a strong commitment to the provision of a quality service
- Demonstrate up-to-date knowledge of best practice in delivering a Quality Laboratory Service
- Demonstrate motivation and an innovative approach to job and service developments
- Demonstrate awareness and appreciation of the service user and the patient
- Demonstrate flexibility and openness to change.

Team Skills
- Demonstrate evidence of ability to work as a member of a team.

Communication & Interpersonal Skills
- Demonstrate interpersonal skills in functioning as a member of a Health Care Team.
- Demonstrate principles of confidentiality with all information.

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.hse.ie/eng/staff/jobs in the document posted with each vacancy entitled “Code of Practice, information for candidates” or on 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

### Tenure
The current vacancy available is temporary, whole time and pensionable.

Appointment 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.

### Remuneration

### Working Week
The standard working week applying to the post is 37 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
Membership of the HSE Employee Superannuation Scheme applies to this appointment.

Existing Members who transferred to the HSE on 1st 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 to which they were entitled at 31st December 2004.

Appointees to posts in the Mental Health Services which formerly attracted fast accrual of service should note that the terms of Section 65 of the Mental Treatment Act 1945 do not apply to New Entrant Public Servants as defined by Section 12 of the Public Service Superannuation (Miscellaneous Provisions) Act 2004.

### 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 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.

### 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, 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.
• 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
2 See link on health and safety web-pages to latest Incident Management Policy