



BRAIN INJURY AND STROKE PROGRAMMES MANAGER (Specified Purpose – Maternity Leave Cover, Full-time)

Particulars of Office

1. Appointment

The appointment is Specified Purpose – Maternity Leave Cover, full time and pensionable.

2. Salary

Remuneration for the Brain Injury and Stroke Programme Manager post is aligned to the Therapy Manager In-Charge III Salary scale and in accordance with the salary scale approved by the Department of Health current scale.

3. Superannuation

The terms of the Voluntary Hospitals Superannuation Scheme and the Voluntary Hospitals Spouses and Children's Scheme or the Single Public Service Pension Scheme will apply to the position. Superannuation contributions at the appropriate rate will be payable in accordance with the provisions of these schemes.

4. Duties

The programme manager will perform such duties as are assigned and as are outlined in the attached Job Description.

6. Hours of Work

Under the provisions of the Haddington Road Agreement effective from the 1st July 2013, the whole time standard weekly working hours for this grade are 35 hours per week, usually discharged between the hours of 8.00am and 8.00pm on a Monday to Saturday basis, as appropriate to the particular service. The appointee may be required to attend at such other times as are required for the proper discharge of duties including attendance outside normal working hours.

7. Probation

The successful candidate will be appointed initially for a probationary period of 6 months. During the probationary period, progress or otherwise will be monitored and at the end of the period, the service will be

a) certified as satisfactory and confirmed in writing;

b) in certain circumstances this period may be extended and in such case you will be advised in writing of this and the duration of the extension.

8. Retirement

No age restrictions shall apply to a candidate except where he/she is not classified as a new entrant (within the meaning of the Public Service Superannuation (Miscellaneous Provisions) Act, 2004). In this case the candidate must be under 65 years of age on the 1st day of the month in which the latest date for receiving completed application forms for the office occur. Continued employment is conditional upon capacity and conduct of the employee.

9. Annual leave

Annual leave and public holidays are granted in accordance with the provision of the Organisation of Working Time Act, 1997. Your annual leave entitlement will be advised to you by the Human Resources Department in your contract of employment. Annual Leave may be based on a number of factors such as grade, years of service and whole-time equivalency.

10. Sick Leave

Payment of salary during illness will be in accordance with arrangements as approved from time to time by the Department of Health and Children.

11. Termination of office

The employment may be terminated at any time by three months notice on either side except where circumstances are dictated by the Minimum Notice and Terms of Employment Act 1973/77. The Management's right under this paragraph shall not be exercised save in circumstances where the Management is of the opinion that the holder of the office has failed to perform satisfactorily the duties of the post or has misconducted himself/herself in relation to the post or is otherwise unfit to hold the appointment.

11. Garda Vetting Checks

Arrangements have been introduced, on a national level, for the provision of Garda Vetting Checks in respect of candidates for employment in areas of the Health Service, where it is envisaged that potential employees would have substantial access to children or vulnerable adults in the course of their duties. Garda vetting is done for the protection of these groups and the National Rehabilitation Hospital reserves the right to revett employees at any future point, as deemed appropriate by Hospital Management.

12. Confidentiality

In the course of your employment you may have access to or hear information concerning the medical or personal affairs of patients and/or staff, or other health services business. Such records and information are strictly confidential and unless acting on the instructions of an authorised officer, on no account must information concerning staff, patients or other health service business be divulged or discussed except in the performance of normal duty. In addition records must never be left in such a manner that unauthorised person can obtain access to them and must be kept in safe custody when no longer required.

13. Hygiene

During the course of employment staff are required to ensure that the hospital's hygiene and infection control policies are adhered to at all times. All employees have responsibility to prevent transmission of infection by adhering to and implementing optimal hand hygiene and adhering to the Hospital's Hygiene processes. Hygiene is a fundamental component of the

National Rehabilitation Hospital's quality system to ensure the safety and well being of its patients and staff and plays a role in the prevention and control of healthcare associated infection.

14. Policies / Legislation

All Hospital policies and procedures form an integral part an employment contract and may be subject to update and revision, from time to time, in consultation with union representatives as appropriate. Employees are required to comply with all hospital policies, procedures (e.g. Dignity at Work, Trust in Care, Computer Usage Policy) and the Hospital's ethical codes of practice.

Employees are required to abide by the hospital's code of behaviour and the code of practice as defined by their relevant professional body.

15. Disability Census

As part of the NRH's commitment to supporting the employment of people with disabilities and to comply with the requirements of the Disability Act 2005, all staff are required to inform the Director of Human Resources Ms. Olive Keenan, of any personal disabilities. This information is only requested in the event that appropriate arrangements must be put in place during the course of one's employment and will be stored in compliance with Data Protection Legislation.

16. NRH Diversity, Equality and Inclusion

The NRH is committed to carrying out all activities in a way that values Diversity, promotes Equality and fosters Inclusion to successfully deliver the best public service to ensure a diverse, inclusive, high performance workplace.



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1. Qualifications

The candidate must, on the latest date for receiving completed application forms for the office, possess:

- Relevant 3rd level health or professional qualification, with masters or higher preferred.
- Qualification in a relevant clinical area that is validated by the Department of Health & Children is desirable.
- Evidence of professional development post qualification is desirable.
- Further qualifications in business or health management desirable.
- Substantial and relevant work experience may be considered in lieu of higher qualifications.

Experience

The candidate must, on the latest date for receiving completed application forms for the office, possess:

- Greater than 5 years post qualification clinical or professional work experience within a health care setting, with experience in comprehensive rehabilitation setting preferred.
- At least 3 years of management or supervisory experience in the delivery of health or rehabilitation services, including line management of staff preferably in an interdisciplinary setting is desirable.
- Good clinical knowledge of issues related to rehabilitation and care of the individuals served by the National Rehabilitation Hospital and especially good knowledge of issues relating to rehabilitation and care of individuals living with the outcomes of brain injury or stroke.
- Knowledge of other relevant important stakeholders and service providers related to care the target population is desirable
- Working knowledge and experience in design, implementation and control of various quality control and accreditation standards is desirable.
- Evidence of project management and/or health service developments is desirable.

2. Health

Candidates or any person holding the office must be free from any medical condition which would render them unsuitable to hold the office and be in a state of health such as would indicate a reasonable prospect of ability to render regular and efficient service.

For the purposes of satisfying the requirements as to health, it will be necessary for each successful candidate before he/she is appointed to undergo a medical examination by a qualified medical practitioner to be nominated by the Chief Executive or designated officer. Any irregularities reported as a result of this examination which render the incumbent unsuitable for the post must be remedied / addressed before appointment.

Health Promotion – The Hospital is committed to promoting healthy lifestyles for both patients and staff. Staff are expected to participate in initiatives to support better health and well-being in line with the Hospital objectives.

3. Character

Candidates for and any person holding the office must be of good character.



BRAIN INJURY AND STROKE PROGRAMMES MANAGER

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Job Description

1) Title: Brain Injury and Stroke Programmes Manager

2) Purpose of Position:

Under general supervision from the Deputy Chief Executive Officer and clinical authority of the programmes Medical Directors, the programme manager will assume responsibility for day-to-day operational management of all staff, activities and functions in their designated programme area.

The main duties and responsibilities of the programme manager will also include the facilitation of the development, implementation and evaluation of programme policies, procedures and quality controls, determining programme service levels and programme specific enhancements; assuming line manager duties of all staff including administrative, therapy, clinical service and nursing staff assigned to the programme; ensuring compliance with HIQA Safer Better Healthcare standards and CARF accreditation standards and designated programme targets and outcomes; developing and monitoring programme budgets; facilitating recruitment, selection, training and professional supervision of programme staff in conjunction with the relevant head of discipline; ensuring programmes and staff compliance with health & safety, risk management best practice; and liaising and working closely with other NRH staff, programmes, committees, the public and other agencies.

3) Accountable to

Each programme manager is accountable to the Chief Executive Officer or nominee. The direct reporting relationship for the Brain Injury and Stroke Programme Manager is to the Deputy Chief Executive.

The programme manager will manage all day-to-day issues relating to programme design, implementation and control of operations of respective programme. The line management responsibility of the programmes' medical staff will be under the remit of the programme's Medical Directors.

All decisions relating to the day-to-day allocation of approved resources, staff, budgets and operations will be the remit of the programme manager, the programme manager will consult with the relevant heads of department/service in relation to same where appropriate.

Decisions affecting the direct clinical care of patients will be made in consultation with the Medical Directors and clinical team with final decision authority to the Medical Directors.

Some programme specific clinical and nonclinical decisions will also be made in consult with senior programme team members, and/or heads of therapy/ clinical service/nursing and/or business services managers as required.

If decisions or actions require the discipline specific recruitment, selection, training, research and/or professional development/supervision of staff, these decisions will be made in consultation with heads of the respective therapy/ clinical /nursing / business service manager with final decision authority will rest with the Programme Manager.

Decisions of programme specific service development; allocation of resources, staff and capital; and financial management of programme budgets will be made in consultation of relevant authorities and NRH committees (i.e., Programme staff, Medical Directors, and relevant business services managers and heads of disciplines) with final decision approval at NRH Executive and/or NRH Board.

The programme manager is required to sit on NRH Operations Management Committee and other relevant NRH committees, working groups etc.

Outline of Duties and Responsibilities:

1) Policy & Procedure Management

- a. With assistance of the programme team and other relevant NRH entities, facilitates the development, implementation, adherence, documentation and evaluation of agreed programme goals, objectives, policies, procedures, work practices and quality controls for the programme.
- b. Responsible to ensure the compliance of these agreed programme measures, policies and practices with HIQA Safer Better Healthcare and CARF accreditation standards, best practice standards and relevant government legislation.
- c. Monitors and directs the day-to-day operations of the assigned programme to ensure that policies and procedures are being followed, that goals and objectives are met, and that services and projects are being accomplished efficiently and effectively; and takes corrective action as necessary.
- d. Work to continually upgrade and enhance agreed programme measures, policies and practices to facilitate greater effective and efficient provision of patient care.
- e. Responsible for the implementation of and adherence to all NRH policies and protocols.

2) Outcome and Performance Management

- a. With assistance of the programme team and other relevant NRH entities, facilitates the development, implementation, adherence, documentation, record control and evaluation of programme specific performance, quality and outcome indicators.
- b. Submit reports, as necessary, in respect of the programmes function and performance.

3) Information & Documentation Management:

- a. With assistance of the programme team and other relevant NRH entities, to facilitate the development, implementation, adherence, documentation and evaluation of programme specific information and documentation systems for the production of relevant statistical information for service improvement and governance purposes, to ensure effective and efficient programme management and quality patient care.
- b. Responsible to ensure the compliance of documentation management and controls systems with relevant HIQA Safer Better Healthcare and CARF accreditation standards, best practice standards and relevant government legislation.
- c. Work to continually upgrade, analyse and enhance necessary documentation and record keeping systems to ensure best practice and alignment necessary regulations, quality and accreditation standards.
- d. To facilitate internal and external audit/research projects & programme evaluation.
- e. Keep abreast of current developments and practices in documentation and record keeping systems and be aware of changes in relevant legislation.
- f. Submit reports, as necessary, in respect of the programmes function and performance.

4) Quality and Accreditation Management:

- a. With assistance of the programme team and other relevant NRH entities, to facilitate the development, implementation, adherence, documentation and evaluation of programme services changes and development to ensure the achievement and ongoing compliance with specific accreditation and quality standards; and facilitate corrective action as necessary.
- b. Keep up to date with changing accreditation and quality standards; and facilitate programme development and alignment with new standards.
- c. Lead the programme team in preparing for surveys by accrediting bodies.
- d. To participate in various NRH accreditation and quality control groups to support the overall achievement and maintenance of the designated NRH quality and accreditation standards.

5) Financial and Budget Management

- a. With assistance of the programme team, NRH Finance Manager and other relevant NRH entities, to facilitate the development, implementation, adherence, documentation and evaluation of a programme specific budget and financial management indicators.
- b. Monitors, evaluates and ensures the implementation of this approved and allocated programme budget.
- c. With assistance of the programme team, NRH Finance Manager and other relevant NRH entities, facilitates the preparation and justification of various budget enhancement requests.

6) Strategic Planning and Management

- a. In cooperation with the programme team, applicable clinical, therapy, administrative and nursing staff and other relevant NRH entities, to facilitate and participate in strategic planning, continuous quality improvement and programme development to improve future patient services, staffing and operational needs.
- b. Responsible to ensure patient, carer and other stakeholders' involvement and feedback in programme development and evaluation as defined in accreditation and quality standards

7) Human Resources Management

- a. Either directly or through appropriate senior administrative, therapy, clinical service and nursing staff to hold direct line management responsibility of all administrative, therapy, clinical service and nursing staff assigned to the programme.
- b. With the assistance of the programme team, NRH Human Resources Manager, applicable clinical, therapy, administrative and nursing managers and other relevant NRH entities, to facilitate the development, implementation, adherence, documentation and evaluation of job descriptions, policies and procedures that clearly identify the roles and responsibilities of all administrative, therapy, clinical service and nursing staff within the programme.

8) Recruitment and Selection of Programme Staff

- a. In cooperation with senior programme staff, Medical Directors, NRH Human Resources Manager, applicable clinical, therapy, administrative and nursing managers and other relevant NRH entities, to facilitate proper and timely recruitment and selection of new staff with final decision authority to the specific selection committee.
- b. With the assistance of the programme team, NRH Human Resources Manager, applicable clinical, therapy, administrative and nursing managers and other relevant NRH entities, to ensure adequate staffing levels are available within the programme at all times, within allocated staffing limits and budgetary constraints.

9) Staff Training, Development and Professional Supervision

- a. With the assistance of senior programme staff, Medical Directors, applicable clinical, therapy, administrative and nursing managers and other relevant NRH entities, to facilitate the development, implementation, adherence, documentation and evaluation of inter-disciplinary and discipline specific training, development and induction to ensure the continuing education and training needs of the programme staff to meet the service and patient needs of the programme.
- b. Under leadership of appropriate senior programme staff and applicable clinical, therapy, administrative and nursing managers, to facilitate the development, implementation, adherence, and evaluation of discipline specific professional supervision of the programme staff.
- c. To encourage and support staff training, development and supervision to promote cross programme working and within the inter-disciplinary teams.
- d. To maintain a suitable learning environment and opportunity and means to support the education and training of all programme staff, liaising with the internal and external training entities.

- e. Responsible to ensure the development, control and documentation of staff training and supervision records and their compliance with relevant HIQA Safer Better Healthcare and CARF accreditation standards, best practice standards and relevant government legislation.
- f. To work with heads of disciplines to ensure that appropriate professional supervision records are developed and maintained.
Responsible to ensure all programme staff participate in required mandatory training.

10) Working Relationships with programme stakeholders

- a. Work closely with clinical programme team and Medical Directors to help facilitate and maximise the timely, efficient, effective and quality clinical care of patients through the programmes' rehabilitation services.
- b. To participate and liaise across other NRH programmes, working groups, decision making bodies and entities to ensure open and effective communication is maintained.
- c. To liaise across other NRH programmes and to work closely with clinical teams and patient service staff to ensure consistency of processes, transparency of access to, effectiveness and efficiencies of all outpatient services
- d. May provide staff support to various NRH committees, working groups and commissions, committees and task forces.
- e. Confers with and represents the programme in meetings with various external stakeholders and fosters collaborative working relationships to the benefit of the programme.
- f. With assistance of other relevant NRH staff as appropriate, investigate complaints/ comments/ suggestions from staff/patients/relatives/carers and takes corrective action as necessary.

11) Risk Management

- a. With assistance of programme staff, Medical Directors, NRH Risk Manager, to facilitate the development, implementation, adherence, documentation and evaluation of programme activities to ensure the programmes compliance with relevant risk management, ethical, accreditation standards and government legislation.
- b. Responsible to ensure the development, control and documentation of appropriate risk management records.
- c. Responsible to ensure that Prosthetic satellite clinics are delivered by senior clinicians in premises which provide a safe environment.

12) Health and Safety Management

- a. With assistance of programme staff, Medical Directors, NRH Health and Safety Manager, to facilitate the development, implementation, adherence, documentation and evaluation of programme activities to ensure the programmes compliance with relevant accreditation standards and government health and safety legislation.
- b. Responsible to ensure all staff participate in required mandatory health and safety training designated for their corresponding job duties and responsibilities.
- c. Responsible to ensure the development, control and documentation of appropriate health and safety training records.

13) Personal Skills

- a. Excellent communication and negotiation skills with staff, committees and relevant stakeholders.
- b. Excellent organisational, time management, planning and problem solving skills.
- c. Ability to present ideas with clarity; and prepare clear, concise and informative reports, presentations, correspondence and other written materials.
- d. Ability to both effectively lead and delegate authority and responsibilities.
- e. Ability to handle difficult and sensitive situations, using sound and objective judgement within NRH policy and legal guidelines.
- f. Managing multiple work tasks within specific and often competing deadlines
- g. Ability to work effectively both independently and in team environments.
- h. Able to motivate self and others.
- i. Ability to gain the trust, confidence and respect of staff at a variety of levels and disciplines.
- j. Good computer skills and working knowledge of various word processing, spreadsheet, email, databases programmes.

Quality, Patient Safety & Risk Management

The NRH is committed to supporting a culture of continuous quality improvement through effective governance, clinical effectiveness and outcome measurement.

Quality and Patient Safety supports the Health Service to deliver high quality and safe services to patients and service users. This involves developing appropriate standards of practice that can be measured from the clinician and service user perspective and requires that the Manager is:

- Responsible to ensure compliance with Health Information and Quality Authority (HIQA) National Standards, Health Service Executive (HSE), CARF/adopted Accreditation Standards, National and Local policies, procedures, guidelines, best practice standards, relevant government legislation and regulations.
- Participate in various standards, NRH accreditation and quality control groups to support the overall achievement and maintenance of the designated NRH quality and accreditation standards.
- To promote and effect a Continuous Quality Improvement (CQI) environment for services at NRH in line with existing and future regulatory requirements.
- To work closely with the Risk Management Department, clinical programmes and services in order to organise and assure implementation of all hospital and external quality, safety and risk management policies, procedures and requirements pertinent to services at the Hospital.

The extent of speed and change in the delivery of health care is such that adaptability is essential at this level of management. The post-holder will be required to maintain, develop and enhance the necessary professional knowledge, skills and aptitudes required to respond to a changing situation.

This Job description does not contain an exhaustive list of duties, and the post holder may be required to undertake additional responsibilities. It will be reviewed from time to time in order to adapt and develop the role, according to service needs and Hospital policies.

I agree that this position description clearly outlines the specific responsibilities and duties that are to be carried out as part of this role. I also understand that these represent the minimum requirements to perform the duties at the current level.

To be signed by the post holder.

Employee Name: _____

Line Manager Name: _____

Employee Signature: _____

Manager's Signature: _____

Date: _____

Date: _____