



Clinical Nurse Manager 1 – Placement Planning & Review Team
Bainisteoir Altraí Cliniciúla 1
HSE Dublin and North East
Job Specification & Terms and Conditions

Job Title, Grade Code	Clinical Nurse Manager 1 – Placement Planning & Review Team Bainisteoir Altraí Cliniciúla 1 Grade Code: 2127
Remuneration	The salary scale for the post is (01/06/2026): €57,780 €58,828 €60,306 €61,810 €63,305 €64,809 €66,484 €68,046 New appointees to any grade start at the minimum point of the scale. Incremental credit will be applied for recognised relevant service in Ireland and abroad (Department of Health Circular 2/2011). Incremental credit is normally granted on appointment, in respect of previous experience in the Civil Service, Local Authorities, Health Service and other Public Service Bodies and Statutory Agencies.
Campaign Reference	DNE26172
Closing Date	Wednesday 16 th September 2026 at 12 noon
Proposed Interview Date (s)	Candidates will normally be given at least two weeks' notice of interview. The timescale may be reduced in exceptional circumstances.
Taking up Appointment	A start date will be indicated at job offer stage.
Location of Post	There is currently 1 permanent, whole-time post available in the Placement Planning & Review Team, Dublin and the North East Region. The post holder will be based within Dublin and the North East Region, with the base likely to be in Swords, Co. Dublin A panel may be formed as a result of this campaign for Clinical Nurse Manager 1 – Placement Planning & Review Team from which current and future, permanent and specified purpose vacancies of full or part-time duration may be filled within Community Services in Integrated Health Areas of Dublin North County and Dublin North City & West.
Informal Enquiries	For further information about the role, please contact: Name: Olive Hanley Email: rdl.dne@hse.ie Tel: 018131826 Contact David Glynn at davidf.glynn@hse.ie for enquiries relating to the recruitment process.
Details of Service	The HSE has created six new health regions. Each region is responsible for providing both hospital and community care for the people in that area. Bringing community health services and hospitals together means we can take a more patient-centred approach to healthcare. HSE Dublin and North East Region includes the following hospitals; • Beaumont Hospital • Cavan General Hospital • Connolly Hospital

- Louth County Hospital
- National Orthopaedic Hospital Cappagh
- Monaghan General Hospital
- Mater Misericordiae University Hospital
- Our Ladys Hospital Navan
- Our Lady of Lourdes Hospital
- Rotunda Hospital

Each Regional Health Area will have a Placement Planning and Review Team within Disability Services to assist with planning residential and housing solutions ensuring the most appropriate, person centred, high quality and most cost-effective placements are achieved.

The teams comprise of a Clinical Nurse Manager 1, a Social Care Leader and a Grade V Administrator.

The team will coordinate and/or participate in pre-placement assessments, periodic reviews of residential placements and ensure appropriate onward placements are developed as necessary.

The team will negotiate a joint assessment process with providers where levels of support are formally agreed prior to placing the individual and formally reviewed within 6 months of entry and on an ongoing basis of minimum 6 monthly intervals. The team will make recommendations to increase or reduce levels of support that are not consistent with risk levels.

Model of Care

The HSE Corporate Plan commits to “reimagine disability services, to be the most responsive, person-centred model achievable with greater flexibility and choice for the service user”. This is an ambition that requires careful consideration from an organisational development and transformation perspective so that achieving the desired outcome becomes a reality based on a co-design process with all stakeholders and with strong dedicated leadership.

HSE Disability Services follow a social model of support and work in partnership with the voluntary providers (Section 38 and 39, Health Act 2004) towards supporting persons with disabilities in achieving a fulfilling life, with meaningful roles in their community.

Government funding for care supports provided to the HSE should be directed towards home supports, community supports and personalised supports as much as possible to enable individuals to live in their own homes or with family members in the community.

HSE are looking to move from a managed care model to an Integrative – community supports model of support. The Model of Support we are striving for is grounded in a clear Framework of Practice that is guided by the UNCRPD principles, Social Role Valorisation and the values outlined in the core HSE policy documents under the Transforming Lives Programme (Time to Move On; New Directions) of person centred-ness, quality, citizenship and inclusion.

For many individuals especially those with significant support needs (from a physical, intellectual and behavioural perspective) it may be necessary to provide full time support in various housing models group homes or residential houses. A good home for someone

	should be personalised, supportive and integrated into the community. It should feel like a place where an individual has control, privacy and meaningful connections.
Reporting Relationship	The professional reporting relationship is to Regional Disability Lead, Dublin and the North East Region. The team will also have a close working relationship with the National Lead for Residential Services, Disability Services, Access & Integration
Key Working Relationships	The CNM 1 will work with the other members of the Placement Planning & Review Team in a collaborative manner with a range of internal and external stakeholders including: • Heads of Disability Services, Regional Disability Lead, General Managers, Disability Service Managers and Disability Case Managers • Housing Coordinators, Social Workers and Liaison Nurses • Persons supported and their families • Service providers of residential care including HSE, Section 38 & 39 voluntary providers and the for-profit sector • Multidisciplinary team colleagues and other key stakeholders within the community health networks and the Healthcare Region • Other relevant statutory and non-statutory organisation' including Local Authorities, Approved Housing Bodies and TUSLA
Purpose of the Post	The role of the Clinical Nurse Manager 1 includes: • Assisting the Case Manager/Housing Coordinator with mapping the requirement for residential placements and housing within the region. • Planning residential placements in a timely manner to reduce the requirement for unplanned placements to address urgent need. • Identifying housing solutions and governance arrangements within the HSE and voluntary sector as a first option and with the private for profit as a more short term option or for temporary and transitional arrangements. The Clinical Nurse Manager 1 will also coordinate and/or participate in the following: • Assessments of individual support needs prior to a placement in residential care or community homes (pre-placement assessments) • Pre-placement meetings with service providers to agree packages of care and support. • Periodic placement reviews to ensure adherence to service arrangements, person centred plans and to promote onward plans and step down arrangements as appropriate. • Periodic monitoring visits to ensure best practice is followed and meaningful activities are in place for individuals on an ongoing basis.
Principal Duties and Responsibilities	Principal Duties and Responsibilities – Clinical Nurse Manager 1 Service Planning and Coordination • Collaborates with the Case Manager/Housing Coordinator to map and forecast regional requirements for residential placements and housing supports. • Plans and schedules residential placements in a timely and proactive manner to minimise unplanned or emergency placements. • Identifies appropriate housing solutions across HSE, voluntary, and private sectors, ensuring governance arrangements are in place and prioritising sustainable, person-centred options. • Supports the development of transitional, temporary, or step-down housing arrangements where required.

Assessment and Pre-Placement tasks

- Conducts or contributes to comprehensive pre-placement assessments to determine individual support needs prior to admission to residential or community-based services.
- Participates in pre-placement meetings with service providers to agree tailored packages of care, support levels, and risk management considerations.
- Ensures that assessment outcomes inform person-centred planning and appropriate placement decisions.

Monitoring, Review, and Quality Assurance

- Coordinates and participates in scheduled placement reviews to evaluate adherence to agreed service arrangements, care plans, and regulatory or organisational standards.
- Monitors progress toward onward planning, including step-down opportunities, community integration, and transitions to less intensive support where appropriate.
- Undertakes periodic monitoring visits to residential and community homes to ensure best practice, meaningful daily activities, and high-quality support are consistently delivered.

Governance, Communication, and Collaboration

- Maintains effective communication with multidisciplinary teams, service providers, families, and relevant stakeholders to support coordinated care pathways.
- Contributes to governance processes by documenting assessments, reviews, and monitoring outcomes in line with HSE policies and professional standards.
- Supports the development and implementation of policies, procedures, and quality frameworks related to residential placements and community supports.
- Provides clinical expertise and guidance to colleagues, service providers, and external partners to promote safe, person-centred, and recovery-oriented care.

Professional Development and Leadership

- Engages in continuous professional development to maintain specialist knowledge relevant to residential care, community supports, and complex needs.
- Participates in service development initiatives, audits, and quality improvement projects.
- Acts as a clinical resource and role model, promoting evidence-based practice and high standards of care across the service

Health & safety

These duties must be performed in accordance with local organisational and the HSE health and safety policies. 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.

- Have a working knowledge of the Health Information and Quality Authority (HIQA) Standards as they apply to the role for example, Standards for Healthcare, Residential Services for people with Disabilities, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc. and comply with associated HSE protocols for implementing and maintaining these standards as appropriate to the role.

- To support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service.

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
- Adequately identifies, assesses, manages and monitors risk within their area of responsibility
- 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 HSE or other regulatory authority
- Initiate, support and implement nursing quality improvement initiatives in their area which are in keeping with local organisational quality, risk and safety requirement
- Contribute specialist expertise 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
- Respond immediately and appropriately to ensure the safety of any service user that you are aware has been put at risk
- Ensure completion of incident/near miss forms and clinical risk reporting including Open Disclosure Policy
- Adhere to department policies in relation to the care and safety of any equipment supplied and used to carry out the responsibilities of the CNM 1

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 CNM 1 Placement Planning & Review team will:

- Provide an efficient, effective and high quality nursing service, respecting the needs of each service user,
- Effectively manage time and caseload-in order to meet changing and developing service needs
- Continually monitor the service to ensure it reflects current service user and organisational needs
- Implement and manage identified changes
- Ensure that confidentiality in relation to service user records is maintained
- Understand the need to represent the specialist Disability 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 nursing specialist care and ensure that this service is in line with HSE requirements.
- Contribute to the service planning process as appropriate and as directed by the Line Manager

	The above Job Specification is not intended to be a comprehensive list of all duties involved and consequently, the post holder may be required to perform other duties as appropriate to the post which may be assigned to them from time to time and to contribute to the development of the post while in office.
Eligibility Criteria Qualifications and/ or Experience	Each candidate must, at the latest date for receipt of completed applications for the post possess: 1. Professional Qualifications & Experience (i) Are registered in the Intellectual Disability, General or Psychiatry Division of the Register of Nurses & Midwives maintained by the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) or entitled to be so registered. And (ii) Have at least 3 years post registration fulltime experience (or an aggregate of 3 years post registration full time experience) of which 1 year post registration full time experience (or an aggregate of 1 years post registration full time experience) must be in the speciality or related area of Intellectual Disability. And (iii) Have the clinical, managerial and administrative capacity to properly discharge the functions of the role And (iv) Candidates must demonstrate evidence of Continuing Professional Development. 2. Annual registration (i) Practitioners must maintain live annual registration on the relevant division of the Register of Nurses and Midwives maintained by the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann). And (ii) Confirm annual registration with NMBI to the HSE by way of the annual Patient Safety Assurance Certificate (PSAC). 3. Health Candidates 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. 4. Character Candidates for and any person holding the office must be of good character.
Post Specific Requirements	Demonstrate depth and breadth of experience in Intellectual Disability nursing as relevant to the role, particularly in relation to assessment of healthcare needs and the development of care/support plans to meet those needs. Demonstrate practitioner competence and professionalism appropriate to a CNM 1 role in disability services. Demonstrate an awareness of current and emerging developments in residential services, housing policy and community support models relevant to disability services.

	Demonstrate the ability to apply evidence-trauma informed social care practice to placement planning, review, risk management and service improvement. Demonstrate knowledge or experience of Social Role Valorisation, supported self-directed living and rights-based approaches to disability support. Demonstrate awareness of UNCRPD, person-centred planning, access and integration, and outcome-focused review processes.
Other requirements specific to the post	Access to appropriate transport to fulfil the requirements of the role, as post will involve frequent travel.
Additional eligibility requirements:	Citizenship Requirements Eligible candidates must be: (i) EEA, Swiss, or British citizens OR (ii) Non-European Economic Area citizens with permission to reside and work in the State Read Appendix 2 of the Additional Campaign Information for further information on accepted Stamps for Non-EEA citizens resident in the State, including those with refugee status. To qualify candidates must be eligible by the closing date of the campaign.
Skills, Competencies and/or Knowledge	Professional Knowledge & Experience • Demonstrate practitioner competence and professionalism. • Demonstrate an awareness of current and emerging nursing strategies and policy in relation to the area of disabilities. • Demonstrate the ability to relate nursing research to nursing practice. • Demonstrate an awareness of HR policies and procedures including disciplinary procedures. • Demonstrate an awareness of relevant legislation and policy e.g., health and safety, infection control etc. • Demonstrate a commitment to continuing professional development. • Demonstrate a willingness to develop IT skills relevant to the role. Organisation and Management Skills • Demonstrate the ability to plan and organise effectively. • Demonstrate the ability to manage deadlines and effectively handle multiple tasks. • Demonstrate an awareness of resource management and the importance of value for money. • Demonstrates flexibility and adaptability in their approach to work Building and Maintaining Relationships (<i>including Team Skills and Leadership Potential</i>) • Demonstrate the ability to work on own initiative as well as part of a team • Adopts a collaborative approach to provision of care by co-ordination of care / interventions and interdisciplinary team working. • Demonstrate strong interpersonal skills including the ability to build and maintain relationships. Fosters good professional work relationships between colleagues • Demonstrates the ability to lead on clinical practice Commitment to providing a Quality Service • Demonstrates a strong commitment to the delivery of quality service.

	• Display awareness and appreciation of the service user and the ability to empathise with and treat others with dignity and respect. • Demonstrates integrity and ethical stance. • Demonstrate motivation, initiative and an innovative approach to job and service developments, is flexible and open to change. Analysis, Problem Solving and Decision-Making Skills • Demonstrates evidence-based decision-making, using sound analytical and problem-solving ability. • Shows sound professional judgement in decision-making. • Takes an overview of complex problems before generating solutions; anticipates implications / consequences of different solutions. • Uses a range of information sources and knows how to access relevant information to address issues. • Demonstrate resilience and composure in dealing with situations. Communication Skills • Demonstrate strong communication skills - presents written information in a concise, accurate and structured manner. • Demonstrates the ability to influence others effectively. • Anticipates and recognises the emotional reactions of others when delivering sensitive messages.
Campaign Specific Selection Process Ranking/Shortlisting / Interview	A ranking and or shortlisting exercise may be carried out on the basis of information supplied in your application form. The criteria for ranking and or shortlisting are based on the requirements of the post as outlined in the eligibility criteria and skills, competencies and/or knowledge section of this job specification. Therefore it is very important that you think about your experience in light of those requirements. Failure to include information regarding these requirements may result in you not progressing to the next stage of the selection process. Those successful at the ranking stage of this process, where applied, will be placed on an order of merit and will be called to interview in 'bands' depending on the service needs of the organisation.
Diversity, Equality and Inclusion	The HSE is an equal opportunities employer. Employees of the HSE bring a range of skills, talents, diverse thinking and experience to the organisation. The HSE believes passionately that employing a diverse workforce is central to its success – we aim to develop the workforce of the HSE so that it reflects the diversity of HSE service users and to strengthen it through accommodating and valuing different perspectives. Ultimately this will result in improved service user and employee experience. The HSE is committed to creating a positive working environment whereby all employees inclusive of age, civil status, disability, ethnicity and race, family status, gender, membership of the Traveller community, religion and sexual orientation are respected, valued and can reach their full potential. The HSE aims to achieve this through development of an organisational culture where injustice, bias and discrimination are not tolerated. The HSE welcomes people with diverse backgrounds and offers a range of supports and resources to staff, such as those who require a reasonable accommodation at work because of a disability or long-term health condition. Read more about the HSE's commitment to Diversity, Equality and Inclusion



Code of Practice	The Health Service Executive will run this campaign in compliance with the Code of Practice prepared by the Commission for Public Service Appointments (CPSA). The CPSA is responsible for establishing the principles to be followed when making an appointment. These are set out in the CPSA Code of Practice. The Code outlines the standards to be adhered to at each stage of the selection process and sets out the review and appeal mechanisms open to candidates should they be unhappy with a selection process. Read the CPSA Code of Practice.
The reform programme outlined for the health services may impact on this role, and as structures change the Job Specification may be reviewed. This Job Specification is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive nor restrictive and is subject to periodic review with the employee concerned.	



Clinical Nurse Manager 1 – Placement Planning & Review Team
Terms and Conditions of Employment

Tenure	The current vacancy available is permanent and whole time. The post is pensionable. A panel may be created from which specified purpose vacancies of full or part time duration may be filled. The tenure of these posts will be indicated at “expression of interest” stage. Appointment as an employee of the Health Service Executive is governed by the Health Act 2004 and the Public Service Management (Recruitment and Appointments) Act 2004 and Public Service Management (Recruitment and Appointments) Amendment Act 2013.
Working Week	The standard weekly working hours of attendance for your grade are 37.5 hours per week. Your normal weekly working hours are 37.5 hours. Contracted hours that are less than the standard weekly working hours for your grade will be paid pro rata to the full time equivalent.
Annual Leave	The annual leave associated with the post will be confirmed at Contracting stage.
Superannuation	This is a pensionable position with the HSE. The successful candidate will upon appointment become a member of the appropriate pension scheme. Pension scheme membership will be notified within the contract of employment. Members of pre-existing pension schemes who transferred to the HSE on the 01st January 2005 pursuant to Section 60 of the Health Act 2004 are entitled to superannuation benefit terms under the HSE Scheme which are no less favourable to those which they were entitled to at 31st December 2004
Age	The Public Service Superannuation (Age of Retirement) Act, 2018* set 70 years as the compulsory retirement age for public servants. <u>* Public Servants not affected by this legislation:</u> Public servants joining the public service or re-joining the public service with a 26 week break in service, between 1 April 2004 and 31 December 2012 (new entrants) have no compulsory retirement age. Public servants, joining the public service or re-joining the public service after a 26 week break, after 1 January 2013 are members of the Single Pension Scheme and have a compulsory retirement age of 70.
Probation	Every appointment of a person who is not already a permanent officer of the Health Service Executive or of a Local Authority shall be subject to a probationary period of 12 months as stipulated in the Department of Health Circular No.10/71.
Protection of Children Guidance and Legislation	The welfare and protection of children is the responsibility of all HSE staff. You must be aware of and understand your specific responsibilities under the Children First Act 2015, the Protections for Persons Reporting Child Abuse Act 1998 in accordance with Section 2, Children First National Guidance and other relevant child safeguarding legislation and policies. Some staff have additional responsibilities such as Line Managers, Designated Officers and Mandated Persons. You should check if you are a Designated Officer and / or a Mandated Person and be familiar with the related roles and legal responsibilities. Visit HSE Children First for further information, guidance and resources.

Infection Control	Have a working knowledge of Health Information and Quality Authority (HIQA) Standards as they apply to the role for example, Standards for Healthcare, National Standards for the Prevention and Control of Healthcare Associated Infections, Hygiene Standards etc. and comply with associated HSE protocols for implementing and maintaining these standards as appropriate to the role.
Health & Safety	It is the responsibility of line managers to ensure that the management of safety, health and welfare is successfully integrated into all activities undertaken within their area of responsibility, so far as is reasonably practicable. Line managers are named and roles and responsibilities detailed in the relevant Site Specific Safety Statement (SSSS). Key responsibilities include: • Developing a SSSS for the department/service¹, 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 procedures². • 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.

¹A template SSSS and guidelines are available on [writing your site or service safety statement](#).

² Structures and processes for effective [incident management](#) and review of incidents.