



Clinical Nurse Specialist (Cardiologist)
Sain-Altra Cliniciúil (Cairdeolaí)
Integrated Health Areas of Dublin North County and Dublin North City & West
Job Specification & Terms and Conditions

Job Title, Grade Code	Clinical Nurse Specialist (Cardiologist) - Sain-Altra Cliniciúil (Cairdeolaí) Grade Code: 2632
Remuneration	The salary scale for the post is (01/06/2026): €62,699, €63,737, €64,615, €66,048, €67,633, €69,189, €70,745, €72,497, €74,123, €76,921, €79,227 LSI New appointees to any grade start at the minimum point of the scale. Incremental credit will be applied for recognised relevant service in Ireland and abroad (Department of Health Circular 2/2011). Incremental credit is normally granted on appointment, in respect of previous experience in the Civil Service, Local Authorities, Health Service and other Public Service Bodies and Statutory Agencies.
Campaign Reference	DNE26153
Closing Date	Wednesday 11 th November 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	Integrated Health Areas (IHA) of Dublin North County (DNC) and Dublin North City & West (DNCW) (Limistéir Shláinte IHA mhtháite IHA ntae Bhaile Átha Cliath Thuaidh agus Chathair Bhaile Átha Cliath Thuaidh & Thiar) There is currently a part-time permanent vacancy available in Cuan Aoibhean, St Mary's Hospital Campus, Dublin 15 A panel may be formed as a result of this campaign for Clinical Nurse Specialist - Cardiologist 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	We welcome enquiries about the role. Contact Catherine Geraghty, Director of Public Health Nursing, Catherine.geraghty@hse.ie / 087 6071591 further information about the role. Contact Nicola Hutchinson nicola.hutchinson@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 North East provides health and social care to North Dublin, Louth, Meath, Monaghan and most areas of Cavan. Community Healthcare Services are delivered through the HSE and its funded agencies to people in local communities, as close as possible to people's homes. Community Healthcare Services focus on keeping you well so that you can continue to live at home or

close to home through our health promotion, disease screening, diagnosis, treatment, and rehabilitation programs. You can refer yourself to most Community Healthcare Services or through your GP, public health nurse, community mental health team, etc. Services include - Primary Care, Social Care - Older Persons, Social Care – Disabilities, Mental Health, Health and Wellbeing, Quality, Safety and Service Improvement.

HSE Dublin 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

In line with Slaintecare (2017) and the Department of Health's Capacity review (2018), a shift in healthcare service provision is now required to place the focus on integrated, person- centred care, based as close to home as possible. In order to enable this, the Integrated Care Programme for the Prevention and Management of Chronic Disease (ICPCD) is supporting the national implementation of a model of integrated care for the prevention and management of chronic disease as part of the Enhanced Community Care Programme (ECC). The Model of Care for the Integrated Prevention and Management of Chronic Disease has a particular focus on preventive healthcare, early intervention and the provision of supports to live well with chronic disease.

The investment in the ECC programme will be delivered on a phased basis with a view to national coverage being achieved within a two- to three- year period. Three priority areas have been identified as follows:

1. Structural reform of healthcare delivery within the community with Community Health Networks (CHNs) becoming the basic building blocks for the organisation, management and delivery of community services across the country;
2. Creating Specialist Ambulatory Care Hubs within the community to support primary care management of chronic disease and older people with complex needs; and,
3. Scaling Integrated Care for Older People and Chronic Disease through the recruitment of specialist integrated care teams including Frailty at the Front Door Teams.

The focus is on providing an end-to-end pathway that will reduce admissions to acute hospitals by providing access to diagnostics and specialist services in the ambulatory care hubs in a timely manner. For patients who require hospital admission, the emphasis is on minimising the hospital length of stay, with the provision of post-discharge follow up and support for people in the community and in their own homes, where required. A shared local governance structure across the local acute hospitals and the associated CHO will ensure the development of a fully integrated service and end-to-end pathway for individuals living with chronic disease.

The ECC Programme is underpinned by a set of key principles including:

- Eighty percent of services delivered in Primary Care are through the GP and CHNs;
- Identifying and building health needs assessments at a CHN level (approximate population of 50,000) based on a population stratification approach to include identification of people with chronic disease and frequent

	<p>service users, thereby ensuring the right people get the right service based on the complexity of their health care needs;</p> <ul style="list-style-type: none"> • Utilisation of a whole system approach to integrating care based on person centered models, while promoting self-care in the community; • The Older Persons and Chronic Disease Service Models set out an end to end service architecture for the identification and management of frail older adults with complex care needs and people living with chronic disease; • Learning from, and delivering services, based on best practice models and the extensive work of the integrated care clinical programmes to date, particularly in the areas of Older Persons and Chronic Disease; • Embed preventive approach to chronic disease into all services; • Availability of a timely response to early presentations of identified conditions and the ability to manage appropriate levels of complexity related to same in the community; • Resources applied intensively in a targeted manner to a defined population, implementing best practice models of care to demonstrate the delivery of specific outcomes and sustainable services; and, • The need to frontload investment, coupled with reform to strengthen community services.
Reporting Relationship	<p>The post holder's professional reporting relationship is to the Director of Public Health Nursing (DPHN) or designated Nursing Manager as required and works in partnership with Integrated Cardiology Team.</p> <p>Clinical governance for the CNS is through the associated Consultant Cardiologist providing governance to the Integrated Cardiology Team.</p> <p>Will report to the Operational Lead Integrated Care ICPCD Specialist Community Team on operational and administrative matters</p>
Key Working Relationships	<p>The CNS role will involve 80% of the CNS role working with General Practitioners(GP'S) and MDT's in Primary Care and 20% of CNS role will involve working in Secondary care and/or to support the Consultant Cardiologist delivering care in the Ambulatory Care Hub.</p>
Purpose of the Post	<p>The Clinical Nurse Specialist in Integrated Cardiology will provide specialist nursing care to patients with established or suspected cardiovascular disease across community and hospital settings.</p> <p>The post holder will work as an integral member of the consultant-led multidisciplinary Integrated Cardiology Team, supporting early assessment, diagnosis, treatment, long-term management and prevention of cardiovascular disease.</p> <p>The primary objective is to provide timely, high-quality, patient-centred care closer to home, improve access to specialist cardiology services, reduce unnecessary hospital attendance and admissions, and ensure continuity of care between primary and secondary care.</p> <p>The CNS will develop and manage an agreed specialist nursing caseload, deliver nurse-led clinics, support consultant-led clinics and contribute to service development, education, clinical audit and research</p>
Principal Duties and Responsibilities	<p>The post holder's practice is based on the five core concepts of Clinical Nurse Specialist in Integrated Cardiology role as defined by the NCNM 4th edition (2008) in order to fulfil the role. The concepts are:</p> <ul style="list-style-type: none"> • Clinical Focus • Patient/Client Advocate • Education and Training

- Audit and Research
- Consultant

Clinical Nurse Specialist in Integrated cardiology 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

Clinical Nurse Specialist in Integrated Cardiology will:

- Undertake comprehensive cardiovascular assessments, including clinical history, symptom evaluation, medication review and cardiovascular risk assessment.
- Develop and deliver nurse-led clinics for patients with stable cardiovascular conditions, including heart failure, atrial fibrillation, coronary artery disease, hypertension and dyslipidaemia.
- Support consultant-led cardiology clinics through patient assessment, medication optimisation, coordination of investigations and structured follow-up.
- Provide specialist nursing care for patients with heart failure, including symptom monitoring, medication titration under agreed protocols, early recognition of deterioration and post-discharge follow-up.
- Promote cardiovascular prevention through risk-factor modification, lifestyle advice, patient education and referral to cardiac rehabilitation and other relevant services.
- Monitor and evaluate the patient's response to treatment and amend the plan of care accordingly in conjunction with the MDT and patient, family and/or carer as appropriate.
- Make alterations in the management of patient's condition in collaboration with the MDT and the patient in line with agreed pathways and policies, procedures, protocols and guidelines (PPPG's).
- Accept appropriate referrals from MDT colleagues.
- Co-ordinate investigations, treatment therapies and follow up patients with chronic cardiovascular conditions including heart failure and Atrial Fibrillation.
- Communicate with patients, family and /or carer as appropriate, to assess patient's needs and provide relevant support, information, education, advice and counselling as required.
- Where appropriate work collaboratively with MDT colleagues across Primary and Secondary Care to provide a seamless service delivery to the patient, family and/or carer as appropriate.
- Participate in medication reconciliation taking cognisance of poly-pharmacy and support medical and pharmacy staff with medication reviews and medication management.
- Identify and promote specific symptom management strategies as well as the identification of triggers which may cause exacerbation of symptoms. Provide patients with appropriate self-management strategies and escalation pathways.
- Identify health promotion priorities for the patient, family and/or carer and support patient self-care in line with best evidence. This will include the provision of educational and health promotion material which is comprehensive, easy to understand and meets patient's needs.

Indirect Care

Clinical Nurse Specialist in integrated cardiology will:

- Support integrated care pathways between the community, Connolly Hospital and general practice, ensuring timely assessment, appropriate referrals and continuity of care.

- Coordinate cardiovascular investigations, including ECG, Holter monitoring, echocardiography and ambulatory blood pressure monitoring, ensuring timely review and escalation of significant findings.
- Participate in multidisciplinary meetings, support GP virtual advice pathways and facilitate shared care planning.
- Support innovative models of care, including integrated cardiopulmonary clinics, remote monitoring and early intervention programmes aimed at reducing avoidable hospital attendances and admissions.
- Use a case management approach to patients with complex needs in collaboration with MDT in both Primary and Secondary Care as appropriate.
- Take a proactive role in the formulation and provision of evidence based PPPGs relating to cardiovascular care.
- Take a lead role in ensuring the service for patients with cardiovascular condition is in line with best practice guidelines and the Safer Better Healthcare Standards (HIQA, 2012).

Patient/Client Advocate

Clinical Nurse Specialist (CVD-IC) 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
- Respect and maintain the privacy, dignity and confidentiality of the patient, family and/or carer.
- Establish, maintain and improve procedures for collaboration and cooperation between Acute Services, Primary Care and Voluntary Organisations as appropriate.
- Proactively challenge any interaction which fails to deliver a quality service to patients.

Education & Training:

Clinical Nurse Specialist (CVD-IC) will:

- Maintain clinical competence in patient management within cardiology 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 managing their cardiovascular condition.
- Contribute to the design, development and implementation of education programmes and resources for the patient, family and/or carer in relation to cardiovascular diseases thus empowering them to self manage their condition.
- Provide mentorship and preceptorship for Nursing colleagues as appropriate.
- Participate in training programmes for Nursing, MDT colleagues and key stakeholders as appropriate.
- Create exchange of learning opportunities within the MDT in relation to evidence based cardiovascular care delivery through journal clubs, conferences, etc.
- Develop and maintain links with Regional Centres for Nursing & Midwifery Education (RCNMEs), the Nursing and Midwifery Planning and Development Units (NMPDUs) and relevant third level Higher Education Institutes (HEIs) in the design, development and delivery of educational programmes in cardiovascular care.
- Be responsible for addressing own continuing professional development needs

Audit & Research:

Clinical Nurse Specialist (CVD-IC) will:

- Establish and maintain a register of patients with cardiovascular conditions within Clinical Nurse Specialist Caseload.
- Maintain a record of clinically relevant data aligned to National Key Performance Indicators (KPI's) as directed and advised by the DPHN/DON/Services in conjunction with senior clinical decision makers.
- Identify, initiate and conduct Nursing and MDT audit and research projects relevant to the area of practice.
- Identify, critically analyse, disseminate and integrate best evidence relating to cardiovascular care into practise.
- Contribute to nursing research on all aspects of cardiovascular care.
- Use the outcomes of audit to improve service provision.
- Contribute to service planning and budgetary processes through use of audit data and specialist knowledge.
- Monitor, access, utilise and disseminate current relevant research to advise and ensure the provision of informed evidence based practice.

Audit expected outcomes including:

- Collate data (insert agreed KPIs/clinical targets) which will provide evidence of the effectiveness of Clinical Nurse Specialist (CVD-IC) interventions. Refer to the National KPIs associated with the speciality. They should have a clinical Nursing focus as well as a breakdown of activity – service users seen and treated.
- Evaluate nursing audit results and research findings to identify areas for quality improvement in collaboration with nursing management and MDT colleagues (Primary and Secondary Care).

Consultant:

Clinical Nurse Specialist (CVD-IC) will:

- Provide leadership in clinical practice and act as a resource and role model for cardiology practice.
- Generate and contribute to the development of clinical standards and guidelines and support implementation.
- Use specialist knowledge to support and enhance generalist nursing practice.
- Develop collaborative working relationships with local cardiology Clinical Nurse Specialist (CVD-IC)'s/Registered Advanced Midwife Practitioner/MDT colleagues as appropriate, developing person centred care pathways to promote the integrated model of care delivery.
- With the support of the Director of Nursing, attend integrated care planning meetings as required.
- Where appropriate develop and maintain relationships with specialist services in voluntary organisations which support patients in the community.
- Liaise with other health service providers in the development and on-going delivery of the National Clinical Programme model of care.
- Network with other Clinical Nurse Specialist (CVD-IC)'s in cardiovascular disease and in related professional associations.

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.

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 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 of Clinical Nurse Specialist in cardiovascular care.

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 ones 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:

Clinical Nurse Specialist (CVD-IC) 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 HSE requirements.
- Contribute to the service planning process as appropriate and as directed by the DPHN/Director of Nursing/Line Manager.
- 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 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.

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.

<p>Eligibility Criteria</p> <p>Qualifications and/ or experience</p>	<p>1. <u>Statutory Registration, Professional Qualifications, Experience, etc</u></p> <p>a) Eligible applicants will be those who on the closing date for the competition:</p> <p>(i) Be a registered nurse/midwife on the active Register of Nurses and Midwives held by An Bord Altranais and Cnáimhseachais na hÉireann (Nursing and Midwifery Board of Ireland) or be eligible to be so registered.</p> <p style="text-align: center;">AND</p> <p>(ii) Be registered in the General division(s) of the Nursing and Midwifery Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) Register or be entitled to be so registered.</p> <p style="text-align: center;">OR</p> <p>(iii) In exceptional circumstances, which will be assessed on a case-by-case basis be registered in another Division of the register of Nurses and Midwives.</p> <p style="text-align: center;">AND</p> <p>(iv) Have a minimum of 1 years' post registration full-time experience or an aggregate of 1 years' full-time experience in the General division of the register (taking into account (ii) and (iii) if relevant)</p> <p style="text-align: center;">AND</p> <p>(v) Have a minimum of 1 years' experience or an aggregate of 1 years' full-time experience in specialist area of Cardiology.</p> <p style="text-align: center;">AND</p> <p>(vi) Have successfully completed a post registration programme of study, as certified by the education provider which verifies that the applicant has achieved a Quality and Qualifications Ireland (QQI), National Framework of Qualifications (NFQ) major academic Level 9 or higher award that is relevant to the specialist area of care (equivalent to 60 ECTS or above), and in line with the requirements for specialist practice as set out by the National Council for Nursing and Midwifery 4th ed (2008). Alternatively provide written evidence from the Higher Education Institute that they have achieved the number of ECTS credits equivalent to a Level 9 or higher standard, relevant to the specialist area of care (equivalent to 60 ECTS or above), and in line with the requirements for specialist practice as set out by the National Council for Nursing and Midwifery 4th ed (2008).Cardiologist Nursing care prior to application</p> <p style="text-align: center;">AND</p> <p>(vii) Be required to demonstrate that they have continuing professional development (CPD) relevant to the specialist area.</p> <p style="text-align: center;">AND</p> <p>(viii) Have the ability to practice safely and effectively fulfilling his/her professional responsibility within his/her scope of practice.</p> <p style="text-align: center;">AND</p> <p>b) Candidates must possess the requisite knowledge and ability, including a high standard of suitability and clinical, leadership, managerial and administrative capacity for the proper discharge of the duties of the office.</p> <p>2. <u>Annual registration</u></p> <p>(i) Practitioners must maintain live annual registration on the General Division of the register of Nurses and Midwives maintained by the Nursing and Midwifery</p>
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	<p>Board of Ireland (Bord Altranais agus Cnáimhseachais na hÉireann) for the role.</p> <p style="text-align: center;">AND</p> <p>(ii) Practitioners must confirm annual registration with NMBI to the HSE by way of the annual Service user Safety Assurance Certificate (PSAC).</p> <p>3. <u>Health</u> 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.</p> <p>4. <u>Character</u> Each candidate for and any person holding the office must be of good character.</p>
Post Specific Requirements	<p>Demonstrate depth and breadth of experience in cardiovascular nursing care relevant to this post.</p> <ul style="list-style-type: none"> It is recommended that the CNS CVD-IC in consultation with line manager consider completing the Nurse & Midwife Medicinal Product Prescribing and/or Nurse prescribing Ionising Radiation programs in line with the evolving service requirements
Other requirements specific to the post	<p>Have access to appropriate transport to fulfil the requirements of the role</p>
Additional eligibility requirements:	<p>Citizenship Requirements Eligible candidates must be:</p> <p>(i) EEA, Swiss, or British citizens</p> <p style="text-align: center;">OR</p> <p>(ii) Non-European Economic Area citizens with permission to reside and work in the State</p> <p>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.</p> <p>To qualify candidates must be eligible by the closing date of the campaign.</p>
Skills, competencies and/or knowledge	<p>The candidate must demonstrate:</p> <p><u>Professional Knowledge</u></p> <p><i>Clinical Nurse Specialist (Cardiologist) will:</i></p> <ul style="list-style-type: none"> 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, 2021). 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. Demonstrate practitioner competence and professionalism as it related to CNS. Demonstrate an awareness of current and emerging nursing strategies and policy in relation to the clinical/specialist area. 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.

Clinical Nurse Specialist (Cardiologist) will demonstrate:

- In-depth knowledge of the role of Clinical Nurse Specialist (Cardiologist).
- The ability to employ appropriate diagnostic interventions to support clinical decision making and the service users' 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 Cardiologist 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 of National Clinical and Integrated Care Programmes as they pertain to cardiology and chronic disease management.
- A high standard of professionally accountability and professional behaviour.
- Self-direction in maintaining the competences required for professional practice.
- Knowledge of national, regional and local HSE PPPGs.
- Ability to operate professionally within appropriate lines of authority within the nurse/midwife management structure and across Multidisciplinary teams.
- An understanding of the principles of clinical governance and risk management as they apply directly to Clinical Nurse Specialist (Cardiologist) role and the wider health service.

Organisation and Management Skills:

Demonstrate:

- Evidence of effective organisational skills including awareness of appropriate resource management and the importance of value for money.
- Ability to plan and organise effectively.
- Ability to attain designated nursing targets, manage deadlines and multiple tasks.
- Ability to be self-directed, work on own initiative.
- A willingness to be flexible in response to changing local/organisational requirements.

Building & Maintaining Relationships including Team and Leadership skills

Demonstrate:

- The ability to work on own initiative as well as the ability to build and maintain relationships with MDT colleagues.
- With the required support, demonstrate leadership in clinical practice.
- A knowledge of change management and team management skills.
- Adopts a collaborative approach to service user care by co-ordination of care/interventions and interdisciplinary team working.

Commitment to providing a quality service:

Demonstrate:

- Awareness and respect for the service user's and family/carers' views in relation to their care.
- A strong commitment to /Evidence of providing quality improvement programmes.
- The ability to/evidence of conducting audit.

	<ul style="list-style-type: none"> • Demonstrates integrity and ethical stance. • Demonstrate motivation, initiative and an innovative approach to job and service developments, is flexible and open to change. <p><u>Analysing and Decision Making</u></p> <p>Demonstrate:</p> <ul style="list-style-type: none"> • Adopts an overview of complex problems before generating solutions and anticipates implications. • Effective analytical, problem solving and evidenced-based decision-making skill. • Uses a range of information sources and knows how to access relevant information to address issues. • Effective analytical, problem solving and evidenced-based decision-making skill • Uses a range of information sources and knows how to access relevant information to address issues. <p><u>Communication and Interpersonal Skills</u></p> <p>Demonstrate:</p> <ul style="list-style-type: none"> • Emotionally intelligent communication skills. • The ability to influence others effectively. • 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.
<p>Campaign Specific Selection Process</p> <p>Ranking/Shortlisting / Interview</p>	<p>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.</p> <p>Failure to include information regarding these requirements may result in you not progressing to the next stage of the selection process.</p> <p>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.</p>
<p>Diversity, Equality and Inclusion</p>	<p>The HSE is an equal opportunities employer.</p> <p>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.</p> <p>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.</p> <p>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.</p>



	Read more about the HSE's commitment to Diversity, Equality and Inclusion
Code of Practice	<p>The Health Service Executive will run this campaign in compliance with the Code of Practice prepared by the Commission for Public Service Appointments (CPSA).</p> <p>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.</p> <p>Read the CPSA Code of Practice.</p>
<p>The reform programme outlined for the health services may impact on this role, and as structures change the Job Specification may be reviewed.</p> <p>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.</p>	



Clinical Nurse Specialist – Cardiologist Terms and Conditions of Employment

Tenure	<p>The current vacancy available is permanent and part-time.</p> <p>The post is pensionable. A panel may be created from which permanent and specified purpose vacancies of full or part time duration may be filled. The tenure of these posts will be indicated at “expression of interest” stage.</p> <p>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.</p>
Working Week	<p>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.</p>
Annual Leave	<p>The annual leave associated with the post will be confirmed at Contracting stage.</p>
Superannuation	<p>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</p>
Age	<p>The Public Service Superannuation (Age of Retirement) Act, 2018* set 70 years as the compulsory retirement age for public servants.</p> <p><u>* Public Servants not affected by this legislation:</u></p> <p>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.</p> <p>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.</p>
Probation	<p>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.</p>
Protection of Children Guidance and Legislation	<p>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.</p> <p>All Mandated Persons under the Children First Act 2015, within the HSE, are appointed as Designated Officers under the Protections for Persons Reporting Child Abuse Act, 1998.</p> <p>Mandated Persons such as line managers, doctors, nurses, physiotherapists, occupational therapists, speech and language therapists, social workers, social care workers, and emergency technicians have additional responsibilities.</p> <p>You should check if you are a Mandated Person and be familiar with the related roles and legal responsibilities.</p>

	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	<p>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).</p> <p>Key responsibilities include:</p> <ul style="list-style-type: none"> • 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. <p>Note: Detailed roles and responsibilities of Line Managers are outlined in local SSSS.</p>

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.