



IHA Service Lead / Ceannaire Seirbhíse IHA
Health Regions (Integrated Service Delivery Model)
HSE Dublin & North East Region
Job Specification

Job Title and Grade	IHA Service Lead / Ceannaire Seirbhíse IHA Health Regions (Integrated Service Delivery Model) HSE Dublin & North East Region <i>(Grade Code: 0087, Head of Service)</i>
Remuneration	The salary scale for the post is at 01/06/26: €115,211 - €120,015 - €124,813 - €129,613 - €134,412 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	DNE26194
Closing Date	Monday 28 th September 2026 at 12 noon
Proposed Interview Date(s)	As soon as possible. Please note you may be called forward to interview at short notice.
Taking up Appointment	As soon as possible.
Location of Post	HSE Dublin & North East Region There is one permanent full-time position available in the Integrated Health Care Area of Dublin North City & West.
Informal Enquiries	We welcome enquiries about the role: Contact Ms Mellany McLoone, Integrated Healthcare Area Manager of HSE Dublin North City & West for further information about the role. Email: IHA.DublinNorthCityWest@hse.ie Contact Rebecca Phillips E: Rebecca.phillips1@hse.ie for enquiries relating to the recruitment process..
Background	The Health Service Executive (HSE) is responsible for the provision of all health and personal social care services in the Republic of Ireland. With an annual budget in 2024 of €24 billion and over 150,000 employed in the HSE and the Section 38 Agencies with which the HSE has Service Agreements (SAs), the HSE is the largest employer in the State and the largest of any public sector organisation. The Health Regions Implementation involves the internal reorganisation of the HSE into six operational regions with responsibility for the planning and coordinated delivery of health and social care services within their respective defined geographies. While the full implementation will be a multi-year journey, the Health Region approach was stood up in March 2024 and will continue to progress throughout 2025 and beyond. These new arrangements are fundamental to the delivery of Sláintecare reforms and aim to improve the health service's ability to deliver timely integrated care to patients and service users,

	care that is planned and funded in line with their needs at regional and local level. In addition, the following will be delivered: • Alignment of hospital-based and community-based services to deliver joined-up, integrated care closer to home. • Clarification and strengthening of corporate, operational and clinical governance and accountability at all levels. • A population-based approach to service planning and delivery. • Balanced national consistency with local autonomy to maintain consistent quality of care across the country. • An efficient, highly productive and transparent health and social care service with aligned incentives to provide people with timely access to safe, high quality integrated care. • Support for local and regional innovations in service improvement for adoption across regions or at national level as appropriate. The changes in healthcare governance arrangements are being designed to make our services easier to navigate for people, to facilitate more integrated care, stronger accountability, and greater transparency across the sector. This in turn aims to foster change and innovation at a local level to deliver high-quality, accessible services to populations based on their needs, making our service a better place to work for our staff. The move to a regionalised approach represents a major shift in the approach to the planning, funding and delivery of health and social care services. In line with international best practice, the new arrangements will support a population-based approach to the planning and resourcing of the geographic delivery of services to improve health outcomes for people in Ireland. As part of these reforms, the operational focus is moving from the HSE Centre to the Health Regions and Integrated Healthcare Areas (IHAs), to ensure the regional structures have the intended level of appropriate authority and operational control of services in their region. The focus of HSE Centre will be on planning, enabling, performance and assurance (PEPA). The HSE Centre will develop and oversee standards and guidelines for implementation at regional level. At the Health Region level, the Integrated Service Delivery (ISD) model is the agreed operating design that supports the joined-up delivery of all health and social care services for local populations.
Details of Service	Each Health Region within the HSE is made up of between 2 and 4 Integrated Healthcare Areas (IHAs). Within the IHA and in line with the ISD model, all health and social care services will be managed by an integrated management team led by the Integrated Healthcare Area Manager. Each IHA management team is responsible for the health and wellbeing needs of the whole population within the geographic area, including access and care coordination and the local delivery of safe, high quality, person-centred services. Building on the established Community Healthcare Networks (CHNs), most community-based services will be delivered within a Community Healthcare Area (CHA) and will be organised around the CHN geography. Within the ISD Model, the term Community Healthcare Area (CHA) refers to the integrated management and organisation of a range of health and social care services at the level of a CHN geography. The CHA will work collaboratively with teams in hospitals and specialist community services. All services will work closely with partner organisations through agreed contractual arrangements and will also foster strong engagement with voluntary and community groups to serve the population in their area. The integrated approach to the overall management of all community-based, hospital and specialist services within the geographic area is designed to: • Facilitate a person-centred, community-first delivery model where services, funding, and governance are co-ordinated around the needs of the population.

	• Ensure clear pathways of care that are easy to navigate and as close to home as possible better serving people at all stages throughout their lives. The ISD Model is based on the following key features: • A geographic and population focused model, driving integrated services for patients and service users in line with Sláintecare principles. • A standardised approach to service configuration that also reflects local contexts and requirements. • A flat integrated structure where IHA Managers and associated management teams are operationally focused. Hospital Managers / Hospital CEOs, IHA Service Lead and General Managers, report directly to the IHA Manager. Clinical leaders and business support teams will work collaboratively with operational management colleagues to serve the needs of the system at IHA level. • A Community Healthcare Area (CHA) will provide the integrated management and organisation of a range of health and social care services at the level of a CHN geography. • Services that are more specialist / complex and / or serve a wider geography are managed across the full IHA. • Networks of Care driving standardisation, quality and safety across the IHAs and Health Regions will also be a key feature of the ISD model. The accountabilities and responsibilities of this post are determined in line with the following criteria to be applied in a fair and equitable manner: • Alignment with the nationally agreed ISD Model. • Collaborative, integrated working arrangements consistent with the ISD Model. • Equitable responsibilities commensurate with the grade, including appropriate spans of control. ◦ Designation of responsibilities aligned to portfolios of work within IHAs and across the Health Region. Portfolios of work assigned will take into consideration local context and factors such as the scale, complexity of services, population size, demographics and diversity of health and social care needs. • Experience, skills and knowledge to fulfil the role. The move to population-based service planning and delivery (as a core objective in Sláintecare) from a care group approach represents a significant change to the way services have been delivered previously. IHA Managers have operational and clinical accountability for all services. As in the current system, matrix working will be required to provide clinical and professional governance and assurance for services, staff and patients / services users. Matrix working in Irish health and social care involves collaborating across different professional, geographic, and organisational boundaries to deliver integrated, patient-centered care. In a matrix structure, leadership responsibilities are split between geographic (regional) and functional (service area) lines. This role will be key in achieving this as part of the IHA Management team. <i>This job spec is based on best current thinking and stage of development of the ISD model, review of care group processes, development of Networks of Care and associated clinical governance framework. The role is subject to further refinement as this work progresses – it will be overseen by the REOs in collaboration with the Organisational Change Unit and in line with the Health Region Steering Group requirements.</i>
Reporting Relationship	The post holder will report to the Integrated Healthcare Area (IHA) Manager. The IHA Service Lead will be a core member of the IHA Management Team. This role will play a key leadership role within the IHA and across the wider Health Region with direct reports from both operational service managers as well as clinical leadership in

	line with the new service delivery model. Reporting lines and ways of working for senior operational and clinical managers will be clearly articulated within the Region, based on the approved model.
Key Working Relationships	The IHA Service Lead will work with the following: • All members of the IHA Management Team representing the full range of services ○ Clinical functions within and across the IHAs ○ Business functions within and across the Health Region and IHAs • All members of the Health Region Executive Management Team including: ○ Regional Planning and Performance ○ Clinical leadership roles at Health Region ○ Technology and Transformation teams • Regulatory bodies as relevant to the role • All service managers and teams within their area of responsibility • All relevant voluntary, private partner organisations and other statutory services i.e. local authorities etc. • Department of Health, DCEDIY and other government departments as required • Change & Innovation Hub teams including service improvement and other development partners • Regional QSSI • Public Patient Partnership Engagement function • Education and academic partners • National Services (Access and Integration, Office of the Chief Clinical Officer, Planning and Performance) as relevant to the role
Purpose of the Post	Purpose of the role The IHA Service Lead will be a member of the IHA management team – this team will be collectively responsible for leading and enabling integrated work practices and cross service working at all levels within the IHA to serve the needs of their local population. • The IHA Service Lead is accountable for the delivery of a defined portfolio of services, focusing on safety and quality to meet population needs and regulatory requirements. • Given the focus on geographic delivery of services within the IHA, this role will carry functional responsibility for driving cross service integration at IHA level (and regional level as appropriate), with a focus on professional governance, standards, regulation and Networks of Care. • By virtue of the seniority and associated responsibilities afforded to the role at IHA level the IHA Service Lead carries the authority to provide oversight of designated Networks of Care / care group processes within the IHA working collaboratively with IHA Management Team colleagues in this regard. • The post holder will be required to contribute at IHA, Health Region and national levels in line with the duties and responsibilities outlined below. Key responsibilities in collaboration with the IHA Manager and associated management team will be delivered through a collective leadership approach and will include: • Being accountable and responsible for the delivery of a designated portfolio of services at IHA and / or Health Region level including assigned regulated services. The role will also include providing oversight and assurance for regulated services aligned to agreed portfolio. • Playing a key support role to deliver the large-scale changes required to realise the implementation of the integrated service delivery model and associated governance arrangements.

	• Taking a leadership and oversight role for *defined care group(s) at IHA or Health Region level, including driving integration through relevant **Network(s) of Care. • Leading the process of relationship, performance and contract management with key partner organisations relevant to portfolio of work. *Note on service assignments and portfolio structure: <i>decision making on the assignment of lead responsibilities for specific care groups / Networks of Care / service groupings across Mental Health, Disability, Older Persons, etc. will be made by the REO and IHA Managers in the context of locally agreed needs and priorities. In some instances, portfolios will include a combination of service responsibilities i.e. Older Persons and Disability Services. These allocations may change and evolve based on service needs.</i> **Networks of Care are also subject to change based on further development and refinement in line with the emerging clinical governance framework including assignment of clinical leads and other associated support roles.
Principal Duties and Responsibilities	The post holder will take on the following duties: Operational accountability <i>Be accountable and responsible for the delivery of a designated portfolio of services at IHA and / or Health Region level including assigned regulated services. The role will also include providing oversight and assurance for regulated services aligned to agreed portfolio.</i> • Directly manage designated specialist / high complexity services and / or services that span a number of Community Healthcare Areas, the IHA or multiple IHAs. ○ The scope and designation of these IHA-level services will be based on local configurations, population needs, and the specific direction of the REO and IHA Managers. ○ Service responsibilities will include regulated and non-regulated services at IHA level and regional level as required by the REO. • The postholder will take on assigned regulatory responsibilities, including the role of <i>Registered Provider Representative</i> and / or <i>Registered Proprietor</i> for the regulated services as determined by the REO and IHA Managers. ○ Ensuring clear lines of accountability for all reporting processes regarding escalation and compliance, and the highest standards of corporate and clinical governance, adherence to national frameworks and compliance with all regulatory, legal requirements. ○ Work with colleagues in quality and patient safety, regulatory bodies, education sector and other development partners to promote an ethos of continuous service improvement and productivity and proactively foster mutually supportive working relationships to jointly address improvements. • Will act as the delegated escalation point for agreed services and will carry sufficient seniority to make decisions (delegated authority by the IHA Manager) in relation to same, as required in line with best practice collaborative working arrangements. • Ensure that effective performance monitoring, early warning and control systems are in place to meet national, regional and local targets and progress action plans to improve performance and address issues that arise. • Support the development of cost savings and productivity plans to ensure the most

efficient use of resources within the IHA in accordance with HSE Financial Regulations.

Leadership and change delivery

Playing a key support to deliver the large-scale changes required to realise the implementation of the integrated service delivery model and associated governance arrangements.

- Working with IHA management team and Health Region EMT colleagues, playing a key support and oversight role to deliver the ongoing implementation of the ISD Model including service design and associated cultural changes to enable cross boundary working through strong collaborative relationships and integrated processes.
 - With colleagues lead the process of transition planning to support implementation of the ISD Model attending to the people and cultural elements of the change as well as to due diligence, change impact assessment and risk monitoring and reporting.
 - Address key service issues that emerge and ensure processes are in place to address challenges and find workable solutions in line with the nationally agreed ISD Model and local contextual needs.
- Continue to support a 'community first' approach as a key principle underpinning service access and delivery as well as ensuring pathways of care to enable smooth transitions for patients, service users and families.
- Provide strong system leadership as a core member of the IHA management team enabling and supporting all staff within the IHA to function effectively in a changing environment where cross service / cross boundary working is the norm enabled by community and staff engagement.
 - Ensure staff and team engagement processes are established to enable the transition and provide the leadership supports required to deliver the change.
- With colleagues in Technology and Transformation, ensure digital solutions are progressed with the required level of sponsorship and practical support to optimize solutions available to drive integrated work practices.

Support population-based planning within the IHA and at Health Region level

- Provide leadership and support to the IHA Manager and EMT colleagues, working with the following regional functions - Planning and Performance, Population & Public Health, Clinical Leaders, Business Supports as well as national colleagues in progressing a population-based approach to service planning and decision-making.
- Provide strong local leadership by engaging the whole system in the implementation of the Health Needs Assessment framework working with key stakeholders including patients/service users, local communities, voluntary and independent providers, GPs, local authorities and others as required.
- Progress equitable and improved health and wellbeing outcomes for the whole population through a focus on social determinants of health, health promotion and early interventions ensuring the needs of specific groups are addressed based on evidence.

Delivering Integrated Care

Take a leadership and oversight role for driving designated Networks of Care and care group(s) at IHA or Health Region level.

- Take a leadership and oversight role for driving designated Networks of Care / care group processes across the IHA as agreed by the REO and IHA Manager contributing at IHA, regional and national levels as required.

	- Responsibilities in the context of this lead role will include being the key point of contact within the IHA for the designated portfolio. This will include ensuring that within a geographic model of service delivery and a population health focus specific population / care group considerations are attended to in order to meet both regional and national requirements. - This 'care group lens' will involve working collaboratively with the relevant clinical leaders / service managers aligned to the areas of responsibility to drive Networks of Care including integrated services, quality standards and regulatory requirements. Key responsibilities will include: - Coordination of strategic and operational planning - Service improvement including quality standards and risk management - Patient, service user and community engagement to deliver improved experiences and outcomes - Performance management and reporting processes - Contract management and compliance - Being the escalation point for agreed regulated services within the IHA with the appropriate level of authority (on behalf of the IHA Manager) to address issues as they arise, make decisions and provide the necessary supports to ensure the delivery of safe high-quality services. (See further details under Operational Accountability) - Support the designated Lead IHA Manager and work with counterparts in other IHAs in taking a Region-wide view for designated Care Group services in relation to the Network of Care. This will include; strategic planning, service improvement, policy implementation, standards and compliance etc. - Progress integrated, matrix and multi-disciplinary team working through Networks of Care across the full IHA continuum of care (spanning community services, acute hospitals and services delivered by partner agencies) working collaboratively with clinical leaders and system partners to strengthen and develop integrated service provision: - Drive integration by implementing organisation structures, processes and ways of working that support and enable a culture of integration, multi-disciplinary team working and pathways that people can easily access and navigate. - Work in partnership with patients/service users, the public, voluntary organisations, local authorities and other key stakeholders to progress integrated care through agreed processes. - Within the context of integrated, multi-disciplinary team working and collaboration across the IHA management team, the post holder in line with their strategic oversight accountabilities will proactively address system issues that require leadership support or intervention to progress integrated work practices, address cross service challenges, ensure smooth transition between services and create safe environments for staff to delivery high quality services. - Hold delegated budgetary responsibility and be accountable for ensuring that services operate within agreed service levels and budgets to deliver public value as allocated for their agreed portfolio of services. Budgetary accountability will be assigned in accordance with the National Financial Regulations (NFRs) and the HSE Performance Accountability Framework (PAF) - Progress implementation of clinical / professional governance arrangements supported by the relevant clinical leads and subject matter experts within the IHA liaising with EMT colleagues at Health Region level. - Where appropriate, this role may include direct line management of senior clinicians and/or Heads of Discipline, thereby embedding clinical governance across the full continuum of care.
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	○ In collaboration with Heads of Discipline and clinical leads, identify and promote areas for quality improvement focused on improving access, care coordination, team working, reducing waiting lists and finding innovative solutions that meet individual and community needs. ○ Work with clinical leads and quality and patient safety colleagues to ensure robust quality, performance and safety systems are in place embedding clinical governance as a core driver of improved outcomes. Service and Contract Management <i>Lead the process of relationship, performance and contract management with key partner organisations relevant to portfolio of work.</i> • In agreement with the REO and IHA Managers manage assigned service agreements, contract management and performance reporting for S38/S39 partner organisations and other providers. • Ensure contract management practices meet standards required working collaboratively with colleagues in Planning and Performance at Health Region level. • Ensure that effective monitoring and control systems are in place in respect of service agreements and conduct performance management meetings with key service providers as agreed. • Contribute at regional and national levels to planning and performance monitoring to ensure a 'care group' perspective in line with agreed areas of responsibility. Communications and Engagement <i>Progress communication and engagement processes and strengthen partnership working.</i> • Implement agreed systems and process within the IHA to ensure partnership arrangements with patients and service users and local communities are proactively developed to inform service planning and delivery. • Foster positive working relationships with staff at all levels in the IHA enabling individuals and teams to deliver to the required performance standards. • Build effective relationships and collaboration between services and teams across areas of responsibility and ensure clear and effective communication and engagement processes are in place. • Provide leadership and support in progressing professional development, training and capacity building for individuals and teams working with HR colleagues and other development partners. • With the Regional Director of People, ensure that the management and monitoring of staff resources is effectively implemented in accordance with HSE policies and procedures and prevailing employment law. • Ensure compliance with Data Protection, GDPR and Freedom of Information legislation as it relates to IHA activities. • Implement the HSE performance achievement process across respective teams to optimise staff development. General • Be responsible for promoting the welfare of vulnerable people and adherence to the Safeguarding Vulnerable Persons at Risk of Abuse (2014) policy and Children First Act 2015. • Ensure staff maintain awareness of the requirements stated in the Risk Management Strategy and that they comply with all Incident/Near Miss reporting Policies and Procedures.
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	• 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. • Support, promote and actively participate in sustainable energy, water, and waste initiatives to create a more sustainable, low carbon, and efficient health service. • The postholder may be required to act in the role of IHA Manager on an interim basis as required • Act as spokesperson for the IHA and the Health Region as required • Deliver any other duties relevant to the role which may be identified from time to time The above Job Description is not intended to be a comprehensive list of all duties involved and consequently, the post holder may be required to perform other duties as appropriate to the post which may be assigned to him/her from time to time and to contribute to the development of the post while in office.
Eligibility Criteria	Candidates must have at the latest date of application: • Experience of working in a senior management role in health care or other care area relevant to the role. This should include significant operational and financial/ budgetary experience in the delivery of complex services • Have a significant track record of achievement as a leader and senior manager in a large complex organisation • Successful track record of planning and delivering organisational change in a complex environment involving multiple stakeholders • Experience of managing and working collaboratively with multiple internal and external stakeholders, as relevant to this role. • Experience of clinical and/or corporate governance • The requisite knowledge and ability (including a high standard of suitability and management ability) for the proper discharge of the duties of the office Health A candidate for and any person holding the office must be fully competent and capable of undertaking the duties attached to the office and be in a state of health such as would indicate a reasonable prospect of ability to render regular and efficient service Character Each candidate for and any person holding the office must be of good character Age Age restrictions shall only apply to a candidate where he/she is not classified as a new entrant (within the meaning of the Public Service Superannuation Act, 2004). A candidate who is not classified as a new entrant must be under 68 years of age on the first day of the month in which the latest date for receiving completed application forms for the office occurs.
Other requirements specific to the post	• Access to appropriate transport to fulfil the requirements of the role as the post will involve travel • Flexibility in relation to working hours to fulfil the requirements of the role.

Skills, Competencies and/or knowledge	Professional Knowledge & Experience Demonstrates as relevant to the role: • A detailed knowledge of the issues and developments and current thinking in relation to best practice in health and social care services, policy and delivery. • A well-developed knowledge of the key challenges and issues across the health and social care system within the context of Health Region reforms. • A detailed understanding of the HSE's strategic change and innovation agenda, as per Sláintecare. Detailed knowledge of the emerging organisational structure that align healthcare governance at regional level, within strong national frameworks to enable better co-ordination and improved performance across health and social care services. • An understanding of risk, information technology, financial management, governance and accountability • Significant experience of engaging at Senior Management Team level • Knowledge of the legal, clinical and corporate governance framework of the HSE • Experience of quality, patient safety and risk management processes • A good understanding of the public service regulatory and legislative framework in Ireland. • Knowledge and experience of application of evidence-based decision-making practices and methodologies • Knowledge of the organisational policy on change <i>People's Needs Defining Change – Health Services Change Guide</i> including use of appropriate and complementary service improvement methodologies. Leadership and Delivery of Change Demonstrates as relevant to the role: • Effective change leadership and is a positive driver for change; transforms the vision into a framework for moving forward. • Remains fully informed in a dynamic and challenging environment, while at the same time having a clear view of what changes are required to achieve immediate and long-term objectives. • A track record of service innovation and delivery in a challenging environment. • Strong results focus and ability to achieve results through collaborative working with multiple stakeholders. • Leadership and team management skills including the ability to work with multi-disciplinary team members. Managing and Delivering Results (Operational Excellence) Demonstrates as relevant to the role: • Ability to adequately identify, assess, manage and monitor risks within their area of responsibility • A track record in developing / implementing strategic action plans and programmes. • Commitment to a high degree of energy to well directed activities and looks for and seizes opportunities that are beneficial to achieving organisational goals. • Perseverance and sees tasks through. • Champions measurement on delivery of results and is willing to take personal responsibility to initiate activities and drive objectives through to a conclusion • Ability to develop strategies/policies • A strong emphasis on achieving high standards of excellence. Building and Maintaining Relationships/Communication Skills Demonstrates as relevant to the role: • Highly effective interpersonal and communication skills to establish and develop trust based, high-stake partnerships and relationships with a range of external partners and stakeholders.
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	• A capability of promoting organisational cohesion and the pursuit of excellence through first-class relationship management practices throughout all levels of the service. • A strong results focus and ability to achieve results through collaborative working • A commitment to working co-operatively with and influencing senior management colleagues to drive forward the reform agenda. • A commitment to building a professional network to remain up to date with and influence internal and external politics. • Ability to support the development of an effective team. • Ability to communicate ideas, positions and information clearly and convincingly in a manner that is sensitive to wider issues and can advocate for and negotiate positions which allow for the on-going improvement of services Critical Analysis and Decision Making Demonstrates as relevant to the role: • Ability to operate as an effective strategic and tactical thinker • Ability to provide significant input to operational and strategic decision making • Ability to look critically at issues to see how things can be done better • Ability to analyse and evaluate, in a rational objective, consistent and systematic manner, a range of complex information to identify the core issues and arguments that are most salient to the situation at hand • Ability to challenge effectively and to maintain the highest levels of professional integrity in challenging circumstances. • Willingness to take calculated risks and consider the range of options available to support improved change practices • Ability to make timely decisions and stand by those decisions as required Personal Commitment and Motivation • Understands, identifies with and is committed to the core values of the HSE • Demonstrates a strong willingness and ability to operate in the flexible manner that is essential for the effective delivery of the role. • Demonstrates a commitment to and focus on quality, promotes high standards to improve patient outcomes, by involving patients and the public in their work
Campaign Specific Selection Process	An eligibility sift exercise may be carried out on the basis of information supplied in your application form. The criteria for the eligibility sift will be based on the requirements of the post as outlined in the eligibility section of this job specification. Therefore, it is very important that you think about and outline your experience in light of those requirements. <u>Failure to include information regarding these requirements may result in you not being called forward to the next stage of the selection process.</u>
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 description may be reviewed. This job description is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive nor restrictive and is subject to periodic review with the employee concerned.	

**IHA Service Lead
Health Regions (Integrated Service Delivery Model)
HSE Dublin & North East Regional Health Area
Terms and Conditions of Employment**

Tenure	The current vacancy available is permanent and whole time. The post is pensionable. 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 35 hours per week. Your normal weekly working hours are 35 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. Your contracted hours are liable to change between the hours of 8.00am and 8.00pm in accordance with the terms of collective agreements and HSE Circulars.
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. <i>* Public Servants not affected by this legislation:</i> 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. 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.

	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. You should check if you are 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.
Ethics in Public Office 1995 and 2001	Positions remunerated at or above the minimum point of the Grade VIII salary scale are designated positions under Section 18 of the Ethics in Public Office Act 1995. Any person appointed to a designated position must comply with the requirements of the Ethics in Public Office Acts 1995 and 2001 as outlined below: A) In accordance with Section 18 of the Ethics in Public Office Act 1995, a person holding such a post is required to prepare and furnish an annual statement of any interests which could materially influence the performance of the official functions of the post. This annual statement of interest should be submitted to the Chief Executive Officer not later than 31st January in the following year.

¹ A 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.

	B) In addition to the annual statement, a person holding such a post is required, whenever they are performing a function as an employee of the HSE and have actual knowledge, or a connected person, has a material interest in a matter to which the function relates, provide at the time a statement of the facts of that interest. A person holding such a post should provide such statement to the Chief Executive Officer. The function in question cannot be performed unless there are compelling reasons to do so and, if this is the case, those compelling reasons must be stated in writing and must be provided to the Chief Executive Officer. C) A person holding such a post is required under the Ethics in Public Office Acts 1995 and 2001 to act in accordance with any guidelines or advice published or given by the Standards in Public Office Commission. Guidelines for public servants on compliance with the provisions of the Ethics in Public Office Acts 1995 and 2001 are available on the Standards Commission's website.
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