



CLONTARF HOSPITAL

Blackheath Park, Clontarf, Dublin 3.

Position: Quality, Patient Safety and Risk Officer (Grade VII)
Contract: Permanent
Hours: 35 hours onsite
Salary range: HSE Consolidated pay-scale (Current Applicable Scale)
Reporting to: Chief Executive Officer
Closing Date: 19 October 2026

PURPOSE OF THE ROLE

To lead and support the development, delivery, and evaluation of comprehensive programmes of work in quality, patient safety, complaints, and integrated risk management. This includes overseeing clinical effectiveness, ensuring safety compliance, driving service improvements, and facilitating learning from service-user feedback across all operational pathways.

POST SPECIFIC REQUIREMENTS

- A minimum level 7-degree professional qualification in a health-related area.
- Significant experience of working in the Irish Health Services in a post that has involved quality and risk management as relevant to this role
- Experience in risk, incident and complaint management
- Experience of data measurement analysis and production of high-quality reports
- Experience of managing and working collaboratively with multiple stakeholders
- A proficiency in computer systems including Microsoft Word, Outlook, Power Point, Excel and NIMS.
- Fluent command and understanding of the English language to include spoken and written word.

DESIRABLE

- An academic award in Risk Management or Quality in Healthcare at Level 6 (or higher) on the Quality and Qualifications (QQI) framework or equivalent.

ORGANISATIONAL CONTEXT

Clontarf Hospital is a 160-bed Voluntary Hospital providing rehabilitation Services under Section 38 of the Health Act 2004 for Adults and Older Persons. At Clontarf Hospital, our committed, expert and compassionate staff provide excellent care to patients on their rehabilitation journey. Our goal is to work in partnership with patients, providing care that is tailored to their unique needs, empowering them to achieve their optimum level of independence at home and in their communities. The patient pathways include:

- Older Persons Rehabilitation
- Step-up beds and hospital avoidance pathways with the Integrated Care Team for Older Persons (ICPOP Team)
- Specialist Rehabilitation Services including neuro-rehabilitation and rehabilitation after trauma for adults and older persons
- Orthopaedic Rehabilitation

The Hospital has close links with the Mater Hospital, Beaumont Hospital, The National Orthopaedic Hospital, HSE Services and our Community Partners.

PRINCIPAL DUTIES AND RESPONSIBILITIES

INCIDENT MANAGEMENT

- Implement, oversee, and continuously optimise the Hospital's Incident Management System in strict alignment with national frameworks
- Co-ordinate, lead, and participate actively in clinical and non-clinical incident reviews utilising formal Systems Analysis and Root Cause Analysis (RCA) methodologies.
- Partner with frontline clinical and administrative departments to ensure that all local incidents are logged, escalated, and resolved in a timely, legally compliant, and professional manner.
- Generate data-driven reports on clinical events and near-miss profiles using the National Incident Management System (NIMS).
- Collate, synthesise, and present thematic trend analysis patterns stemming from hospital-wide incidents to the Executive Management Team and the Board of Governors.
- Oversee the implementation of recommendations from both national and local Systems Analysis Reviews and report on progress to the Hospital QPS Committee and QSRM Board Committee.
- Execute statutory reporting protocols, ensuring all applicable occurrences are directed to the State Claims Agency (SCA) and related regulatory authorities within required legislative windows.
- Deliver support, professional guidance, and objective briefing to staff requested to provide statements or evidence for internal reviews, insurance claims, or the Coroner's Court.
- Oversee the systematic rollout of recommendations originating from both local and national Systems Analysis Reviews, auditing progress and reporting directly to the Hospital QPS Committee and the QSRM Board Committee.
- Manage the Hospital Incident Oversight Group.
- Prepare documentation for and represent Clontarf Hospital in the management of Coroner's cases

RISK MANAGEMENT

- Maintain an operational knowledge of current Irish medico-legal legislation, statutory mandates, and health codes governing Patient Services, Employer's Liability, and workplace environment safety.

- Ensure local compliance with the Patient Safety (Notifiable Incidents and Open Disclosure) Act 2023, executing mandatory face-to-face open disclosures and managing regulatory communication workflows.
- Deeply embed ethical clinical practice models and the statutory requirements of the Assisted Decision-Making (Capacity) Act 2015 into hospital systems, honouring patient will and preference parameters.
- Champion an organisational 'Just Culture' built upon transparency, fairness, dignity, and individual mutual respect, eliminating barriers to reporting and safeguarding staff from blame.
- Design, audit, and update the Corporate, Hospital, and Departmental Electronic Risk Registers, working collaboratively with managers to track and review active risk mitigation plans.
- Review and update hospital Policies, Procedures, Protocols, and Guidelines (PPPGs) to reflect shifting statutory mandates and international evidence-based standards, offering advice on legal updates.
- Provide risk management support, advice and regular awareness sessions to all hospital teams.

QUALITY IMPROVEMENT AND AUDIT

- Drive a culture of patient safety, clinical excellence, and service improvement across all wards, teams and departments in the Hospital.
- Co-ordinate, embed, and monitor operational compliance with the HIQA National Standards for Safer Better Healthcare.
- Lead and advise multidisciplinary teams in the execution of Quality Improvement (QI) projects, utilising established improvement methodologies.
- Provide support to Hospital Accreditation cycles.
- To attend and participate and lead on committee and governance meetings, including the Hospital Quality and Patient Safety Committee, working groups, and/or process improvement teams as required.
- To assist in mechanisms to obtain patient feedback and in disseminating the learning from such feedback including the Hospital Patient Experience Survey and other surveys.
- Coordinate and participate in audit as required including audits emerging from review and trend recommendations.
- To deliver and participate in training programmes for Hospital staff on the Quality and Risk Management agenda.
- Co-ordinate Quality Improvement Programmes for departments and individuals to ensure the overall objectives and standards of the Quality and Safety Executive are achieved and maintained.

COMPLAINTS MANAGEMENT

- Deliver a supportive environment for service users, families, and patient advocates highlighting feedback or concerns regarding care experiences.
- Act as the designated Complaints Officer for the hospital, managing all incoming formal comments, complaints, and compliments in strict compliance with the

Hospital's Complaints Management Policy and the statutory HSE 'Your Service Your Say' Framework.

- Execute Stage 2 complaint investigations, compiling official findings and drafting statutory written resolutions within required public sector timelines.
- Ensure all investigative logs and sensitive consumer records adhere strictly to the Data Protection Act 2018 (GDPR) and the Freedom of Information Act 2014.
- Provide oversight and data on all feedback, comments, complaints and compliments received by the hospital

LEARNING AND EDUCATION

- Promote and support a learning and continuous improvement culture across the Hospital
- Lead, attend and participate in relevant staff development programmes on an ongoing basis
- Lead and assist in the training of colleagues as required.
- Identify training and professional development requirements across the Hospital

COMPETENCIES

LEADERSHIP, TEAMWORK AND WORKING WITH MULTIPLE INTERNAL AND EXTERNAL STAKEHOLDERS

- Inspires commitment from a range of teams, brings complex matters to conclusion, regularly demonstrates unique insight and is an effective decision maker.
- Have the ability to work on own initiative, be approachable and available for advice and support.
- Motivates others individually and in teams to deliver high-quality work and develops effective and productive workplace relationships.
- Maintains absolute focus, provides clarity and advice on all matters related to Quality, Patient Safety and Risk Management.
- Demonstrates commitment to professional development.
- Excellent evaluation, decision making, organisational and time management skills with the ability to work to deadlines.
- Leads by example in terms of commitment, flexibility and a strong patient service ethos to achieve desired outcomes.
- Harnesses resources to deliver on longer-term goals, manages resistance and setbacks as they arise.
- Gathers information from enough sources and other people to make well-informed decisions.
- Recognises when it is appropriate to refer issues to senior management.
- Effectively introduces change, fosters a culture of creativity in employees and overcomes resistance to change.

- Demonstrates flexibility and an openness to change and keeps abreast of relevant new regulations, laws and policies.
- Good communication and team working capability, and an ability to take necessary actions and responsibility for the same.
- Assist the Executive Management Team in achieving the hospital's strategic objectives as it relates to Quality, Patient Safety and Risk Management.

COMMUNICATION

- Demonstrate excellent interpersonal and communicative skills across all clinical, administrative, and executive groups.
- Develop quarterly Quality and Patient Safety Performance reports directly to the Chief Executive Officer and the Board of Governors.
- Establish and maintain effective communication networks within the wards and with all departments within the Hospital.
- Maintain effective liaison with external stakeholders including the the HSE Quality Teams, other relevant HSE personnel, States Claims Agency, HIQA, Coroner's Office and all other relevant external stakeholders

DATA ANALYSIS AND REPORTING

- Collate and analyse data for the hospital's management performance reports and the board performance report
- To use data and evidence to monitor service quality and assess against key performance indicators
- Facilitate, develop and support the implementation of bench marking, together with other appropriate review monitoring methodologies to enable staff assess the effectiveness of service delivery
- To attend and participate in committee meetings, working groups, and/or process improvement teams as required.
- To use data and evidence to monitor and promote service quality.

PLANNING AND ORGANISING

- Organisational and time management skills to meet objectives within agreed timeframes and achieve quality results.
- The capability to improve efficiency within the working environment and the ability to evolve and adapt to a rapidly changing environment.
- The ability to work to tight deadlines and operate effectively with multiple competing priorities.
- A capacity to operate in a challenging operational environment while adhering to quality standards.

APPOINTMENT

- Remuneration is in accordance with the Department of Health Consolidated Salary Scales, grade code 0582
- The annual leave entitlement is 30 working days per year.
- Normal working hours are 35 worked over 5 days.

CONFIDENTIALITY

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

The above role profile 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. This role profile will be subject to review in light of changing circumstances.

GARDA CLEARANCE

Arrangements have been introduced, on a national level, for the provision of Garda Clearance in respect of candidates for employment in areas of the Health Services, where it is envisaged that potential employees would have substantial access to children or vulnerable individuals. Each candidate will be required to complete a Garda Clearance form.

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 and Hospital protocols for implementing and maintaining these standards as appropriate to the role.

BENEFITS AND OPPORTUNITIES

- Supportive, inclusive and collegial working environment that values staff wellbeing and mutual respect
- Opportunity to gain broad and meaningful clinical experience across a diverse range of rehabilitation cases, supporting both professional confidence and career development
- Strong collaborative working within a multidisciplinary team, promoting shared learning and best practice
- Active support for Post-Graduate Education and Continuous Professional Development, with a strong emphasis on ongoing learning and professional growth
- Flexible working arrangements, where possible, to support work–life balance
- Access to free on-site car parking
- Subsidised staff canteen
- Membership of a public sector pension scheme
- Access to Occupational Health Services
- Staff support and counselling services, reflecting our commitment to employee

wellbeing and psychological safety

OTHER REQUIREMENTS SPECIFIC TO THE POST

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.

This job description will be subject to review in the light of changing circumstances.

It is not intended to be exhaustive but should be regarded as providing guidelines within which individuals work.

The duties and responsibilities detailed above reflect the present service requirements and may be subject to review and amendment to meet the changing needs of the service.

Short listing may be carried out on the basis of information supplied in your Application Form. The criteria for short listing are based on the requirements of the post as outlined in the 'eligibility criteria' and 'skills, competencies and/or knowledge section of this job specification. Therefore, it is very important that all experience is outlined in light of those requirements. **Failure to include information regarding these requirements may result in you not being called forward to the next stage of the selection process.**

PLEASE NOTE THIS COMPETITION CAN BE CLOSED EARLY IN THE EVENT OF LARGE VOLUME OF APPLICANTS.