Peamount Healthcare

Athshlánú Rehabilitation
Cúram Cónaithe Residential
Comhphobail Community

Job Specification and Terms & Conditions

Job Title & Grade	Grade VI – Innovation Operations Officer
Campaign Reference	RQ1198
Closing Date	December 4th, 2026 @ 11pm
Proposed Interview Date	Week of the 14th of December – candidates are expected to make themselves available at short notice for interview to be held onsite in Peamount Healthcare.
Taking Up Appointment	A start date will be indicated at job offer stage.
Informal enquires	Peamount Healthcare Recruitment: Daren
Location of Post	Hybrid working & Dublin office Working arrangements to be agreed at appointment.
Details of Service	The Innovation Operations Officer will support a programme of service improvement, design and innovation activity. The post-holder will work a team of innovation professionals that engage collaboratively with clinical teams, managers, patients and external partners to support the development, testing, evaluation and spread of practical, evidence-informed innovations that improve patient care, pathways and outcomes. The role combines operational coordination, programme administration, financial and workforce support, and stakeholder engagement to enable the effective delivery of innovation initiatives. The post-holder will contribute to the development and maintenance of robust administrative, financial and governance processes, ensuring that innovation activities are appropriately supported, coordinated and delivered. While the post is hosted at Peamount Healthcare, the role will support a mix of local, regional and national activity. The post-holder will work in partnership with relevant HSE stakeholders, including the HSE Spark Innovation Programme, and with external partners as required. Exact working arrangements and priorities will be agreed at onboarding. Commitment to the following values: **Person centred** – seeing each person as unique, giving them a voice and focusing on ability. **Respect** – creating a supportive environment where everyone is given courteous and respectful care and support. **Excellence** – enabling interdisciplinary teams to deliver high quality integrated care, meaningful outcomes with a focus on continuous improvement.

	Team working – fostering an inclusive, healthy working environment where people are valued and recognised for their individual and shared achievements. **Quality improvement** – supporting teams to embed continuous improvement methodology as part of everything we do. **Education & Research** – partnering with academia to support education, learning, research and evidence-based care.
Reporting Relationship	Brendan Harold, Strategic Implementation Lead (Peamount Healthcare) & Jared Gormly, (Head of HSE Spark)
Key Working Relationships	Other key working relationships associated with the post include the following: • HSE Spark & National Clinical Innovation Network • Regional Executive Officers • Regional Clinical Directors • Regional Directors • Patient and Service User Engagement Officers • National Doctors Training and Planning (NDTP) • National Health and Social Care Professions (HSCP) Office • Office of the Nursing and Midwifery Service Director (ONMSD) • National College of Art and Design (NCAD) • The Office of the Chief Clinical Officer HSE • The Office of the Chief Executive Officer HSE • The Office of the Chief Technology & Transformation Officer HSE • HSE ICT and e-health • Department of Health • Department of Public Expenditure NDP Delivery and Reform
Purpose of Post	To coordinate the day-to-day administration and operations related to the design & innovation operations, ensuring efficient finance, HR, diary, agreement and invoice processes. The post holder will maintain reliable systems and audit trails, support delivery of funding programmes and act as a central operational contact.
Eligibility Criteria Qualifications & Experience	Candidates must satisfy the Grade VI administrative eligibility criteria approved by Peamount Healthcare for this recruitment. Relevant administrative and operational experience, including financial administration, HR coordination, stakeholder liaison and use of office systems, is required. Formal qualification and experience thresholds are to be confirmed by Peamount HR; clinical professional registration is not required for this administrative role.
Skills, Competencies and Knowledge	Professional knowledge and experience: financial administration, budget tracking, invoicing, records management, HR administration and confidential correspondence; strong Microsoft Excel, Word, Outlook and Teams skills. Planning and managing resources: ability to manage competing deadlines, maintain trackers and coordinate multiple workstreams. Quality service: accuracy, responsiveness and process improvement.

	Problem solving: numerical ability, sound judgement and appropriate escalation. Team working and communication: collaborative stakeholder relationships and clear written and verbal communication.
Post Specific Requirements	**Qualifications** Have a relevant third level qualification in a relevant subject such as HR, Finance, Innovation, Design, Business, Marketing, Event Management or Technology **Experience** Candidates must have experience of partnership working and relationship building with executive management, stakeholder groups and partner organisations, ideally in the innovation space; Have experience of liaising with a diverse range of stakeholders such as Academic Institutions / External Providers; Experience in a senior administrative role, management of financial records, experience supporting HR processes, event management, senior diary management and formal meetings. Experience of HSE systems or public-sector governance is desirable. **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.
Other requirements specific to the post	Ability to attend occasional meetings at Peamount, Dublin office, HSE sites or partner locations as required, subject to agreed working arrangements.
Principal Duties & Responsibilities	FINANCE AND INVOICING • Maintain budget, expenditure, commitment and forecast trackers; prepare financial summaries. • Create and issue invoices and payment requests; track progress, reconcile records and follow up queries with Finance, suppliers and partners. • Coordinate purchase order and funding-transfer documentation, retaining supporting evidence and escalating discrepancies. MEMORANDA OF AGREEMENT AND FUNDING • Prepare and issue approved MOAs, check project and funding details, coordinate signatures and maintain a central agreement register. • Track outstanding agreements, milestones, approved allocations and administrative requirements for funding release. HR AND WORKFORCE SUPPORT • Coordinate recruitment paperwork, onboarding, contract extensions,

	secondments, departures, access and equipment requests. • Maintain confidential staffing and WTE trackers, monitor contract dates and liaise with Peamount and HSE HR. DIARY AND EXECUTIVE SUPPORT • Manage of diary and correspondence; arrange meetings, travel, agendas, papers, minutes and action logs. • Follow up agreed actions and support governance meetings, workshops and events. PROGRAMME OPERATIONS AND GOVERNANCE • Manage shared mailboxes, project records, registers, funding-call administration and stakeholder queries. • Maintain clear audit trails and comply with applicable HSE policies, financial controls, GDPR and record-retention requirements. • Identify improvements to procedures and escalate risks, overdue actions and payment issues. • Coordinate administrative colleagues where assigned and undertake other duties appropriate to the grade.
Campaign Specific Selection Post	A ranking and or short-listing exercise may be carried out on the basis of information supplied in your CV. The criteria for ranking and or 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 you think about your experience 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. 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 depending on the service needs of the organisation.
Annual registration	Not applicable: this is an administrative Grade VI post.

The reform programme outlined for the Health Service may impact on this role and as structures change the job description may be reviewed.

The job description is a guide to the general range of duties assigned to the post holder. It is intended to be neither definitive or restrictive and is subject to periodic review with the employee concerned.

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Terms & Conditions of Employment

Tenure	The current vacancy available is a 2 year Fixed-Term post on a full-time basis, however less than fulltime will be considered. 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.
Remuneration	Remuneration is in accordance with the salary scale approved by the Department of Health. Current salary scale (0574) with effect from 1st June 2026: €58,477 (point 1) to €71,441 (point 7). 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.
Working Week	The standard working week applying to the post is to be confirmed at Job Offer stage. The allocation of these hours will be at the discretion of the Department Head and in accordance with the needs of the service. HSE Circular 003-2009 "Matching Working Patterns to Service Needs (Extended Working Day/Week Arrangements); Framework for Implementation of Clause 30.4 of Towards 2016" applies. Under the terms of this circular, all new entrants and staff appointed to promotional posts from Dec 16th, 2008, will be required to work agreed roster / on call arrangements as advised by their line manager. Contracted hours of work are liable to change between the hours of 8am-8pm over seven days to meet the requirements for extended day services in accordance with the terms of the Framework Agreement (Implementation of Clause 30.4 of Towards 2016
Annual Leave	As per Health Service Executive (HSE)
Probation	All employees will be subject to a probationary period as per the probation policy. This policy applies to all employees irrespective of the type of contract under which they have been employed. A period of 6 months' probation will be served: • On commencement of employment. • Fixed term to permanent contract. • Permanent employees commencing in promotional posts will also undertake a probationary period relating to their new post.
Pension	Employees of Peamount Healthcare are required to be members of the Hospitals Superannuation Scheme. Deductions at the appropriate rate will be made from your salary payment. If you are being rehired after drawing down a public service pension your attention is drawn to Section 52 of the Public Services Pension (Single and

	Other Provisions) Act 2012. The 2012 Act extends the principle of abatement to retired public servants in receipt of a public service pension who secure another public service appointment in any public service body.
Maternity	Maternity leave is granted in accordance with the terms of the Maternity Protection Acts 1994 and 2001.
Sick Leave	Peamount Healthcare operates a Sickness Absence Management policy in line with the new Public Service Sick Leave Scheme as introduced in 31st March 2014.
Pre-Employment Health Assessment	Prior to commencing in this role a person will be required to complete a form declaring their health status which is reviewed by the hospital's Occupational Health Service and if required undergo a medical assessment with this department. Any person employed by Peamount Healthcare 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.
Validation of Qualifications & Experience	Any credit given to a candidate at interview, in respect of claims to qualifications, training and experience is provisional and is subject to verification. The recommendation of the interview board is liable to revision if the claimed qualification, training or experience is not proven.
References	Peamount Healthcare will seek up to two written references from current and previous employers, educational institutions or any other organisations with which the candidate has been associated. The hospital also reserves the right to determine the merit, appropriateness and relevance of such references and referees.
Character	Candidates for and any person holding the office must be of good character.
Health & Safety	These duties must be performed in accordance with the hospital health and safety policy. 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. Staff must carry out their duties in a safe and responsible manner in line with the Hospital Policy as set out in the appropriate department's safety statement, which must be read and understood. Comply with and contribute to the development of policies, procedures, guidelines, and safe professional practice and adhere to relevant legislation, regulations and standards. Have a working knowledge of the Health Information and Quality Authority (HIQA) Standards as they apply to Peamount. Protection and Care and comply with associated Peamount protocols for implementing and maintaining these standards as appropriate to the role. To support, promote and actively participate in sustainable energy, water and waste initiatives to create a more sustainable, low carbon and efficient health service.
Quality, Risk & 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 external agencies on safety initiatives as required.

	• Participate and cooperate with internal and external evaluations of hospital structures, services and processes as required, including but not limited to: ➢ National Standards for Safer Better Healthcare. ➢ National Standards for the Prevention and Control of Healthcare Associated Infections. ➢ HSE Standards and Recommended Practices for Healthcare Records Management ➢ Safety audits and other audits specified by the HSE or other regulatory authorities. • To initiate, support and implement quality improvement initiatives in their area which are in keeping with the hospital's continuous quality improvement programme. *It is the responsibility of all managers to ensure compliance with regulatory requirements for Quality, Safety and Risk within their area/department.*
Education and Training	Participate in mandatory training programmes. Pursue continuous professional development in order to develop professional knowledge and keep updated with current and legislation.
Specific Responsibility for Best Practice in Hygiene	Hygiene in healthcare is defined as *"the practice that serves to keep people and the environment clean and prevent infection. It involves preserving one's health, preventing the spread of disease and recognizing, evaluating and controlling health hazards."* • It is the responsibility of all staff to ensure compliance with hospital hygiene standards, guidelines and practices. • Department heads/ managers have overall responsibility for best practice in hygiene in their area. • It is mandatory to complete hand hygiene training every 2-years and sharps awareness workshops yearly.