

Strictly Private and Confidential**Clinical Issues in Urology Service
Briefing Note for Trust Board Confidential****Background on IV Fluids and Antibiotics**

The clinical practice of managing recurrent urinary tract infections (UTIs) by intravenous (IV) fluids and antibiotics has become part of local urological practice over many years. This was discovered in Spring 2009 during an audit of bed usage, and was considered to be unusual. At that time the therapy was discussed with the clinicians involved and the Trust subsequently took expert advice and was persuaded that this therapy is not evidence based. About 35 patients were in the cohort, and following discussions with the commissioner, the Director of Acute Services at that time, and the clinicians, it was agreed that each member of the cohort would be reviewed with a view to ceasing IV therapy.

This patient group, who have repeated episodes of therapy, ultimately become difficult with regard to venous access. This may result in the need for placement of a central venous line as the only alternative for IV therapy. This procedure carries risks in that the line is left inserted semi-permanently. Equally the patient has difficult peripheral venous access.

The cohort of patients who have received this method of treatment has been reduced considerably to approximately 10 since January 2010.

Current Action

The Trust received a letter from the Commissioner seeking an assurance that this treatment had ceased and that no patient had central venous access. The Director of Acute Services and Associate Medical Director of Surgery and Elective Care have met the two surgeons individually to require an immediate review of each patient in the remaining cohort of 10. The review will be chaired by the Clinical Director of Surgery and Elective Care and will also involve Dr Damani, Consultant Microbiologist, to advise on optimum antimicrobial therapy. All potential future patients for IV therapy will also be reviewed in this manner. Both surgeons agreed to participate in this process which is now underway.

Strictly Private and Confidential**Background on Cystectomies**

The Commissioner has also drawn to the Trust's attention to a slightly increased rate of cystectomy for benign pathology in CAH when compared with the rest of the NI region. Cystectomy is the surgical excision of bladder. The numbers of patients identified are of the order to 2-4 per year.

Current Action

In line with guidance provided by the document "Maintaining High Professional Standards in the HPSS" the Trust has commenced a local review. This process includes a case note review of each patient who has undergone cystectomy in the past 10 years. The review will be undertaken by the Associate Medical Director for Surgery and Elective Care, who also has a remit to seek professional advice from an appropriate expert.

The result of this screening review will guide the next step – no further action or the requirement for a deeper investigation.

In keeping with best practice the 2 clinicians have been kept fully informed.

Regional Urology Review

One of the requirements of the implementation of the review is that all radical pelvic urological surgery is moved to the Belfast Trust. This now explicitly covers radical pelvic surgery for both malignant and benign conditions. The Trust is in discussion currently with HSCB and Belfast Trust regarding each individual case during the transition period.

Dr Gillian Rankin
Interim Director of Acute Services
September 2010

**Clinical Issues in Urology Service
Briefing Note for Trust Board Confidential**

Review of patients on IV Fluids and Antibiotics

The clinical review and development of a management plan for patients which excludes routine IV fluids and antibiotics has been led by Ms Sloan, Clinical Director, Surgery and Elective Care. The review has been completed for 13 patients.

It has been decided by the clinical review team to undertake a review of the whole original cohort of patients and it will take several more weeks to complete this.

No patient in the cohort now has a central venous line.

Review of Cystectomies

The clinical review of the records of the small cohort of patients who have had surgical removal of the bladder is underway by Mr Mackle, AMD, Surgery and Elective Care. This will be completed in the next few weeks.

Regional Urology Review

The transfer pathway of patients with urological cancer requiring radical pelvic surgery or radiotherapy has been agreed. All patients are now being transferred to the Regional Urology Centre in the Belfast Trust.

**Dr Gillian Rankin
Director of Acute Services (Interim)
November 2010**

Southern Health & Social Care Trust**CONFIDENTIAL****List of Consultants and SAS Medical Grades aligned to Urology from 1 October 2009 - 31 March 2016**

Prepared by/HR Contact: Ciara Rafferty, Senior HR Data Analyst

Prepared for: Andrea McNeice and Zoe Parks, Medical HR

Ref: AD/2022/117

Date: 25 March 2022

Note: Employees with multiple posts have been highlighted in green**Staff in Post from 31 October 2009 - 30 November 2013****Note:** This information was taken from staff in post reports, during the above reporting period, extracted from HRMS at time of reporting.

Surname	Forename1	Fac/Bk/Staff No	Date Commenced Post	Employment Status Description	Grade Description	Cost Centre Code	Cost Centre Description	Location of Post Description	WTE	Date Appointed to Trust	Date Left Trust	Current SHSCT Employee
O'BRIEN	AIDAN	Personal Information	01/04/1993	PERMANENT	CONSULTANT (NC)	73318S	CAH CAH - UROLOGY	CAH - MAIN BUILDING	1.00	01/04/1993	17/07/2020	N
CONNOLLY	DAVID JAMES	Personal Information	03/09/2012	PERMANENT	CONSULTANT (NC)	73318S	CAH CAH - UROLOGY	CAH - MAIN BUILDING	1.00	03/09/2012	31/03/2013	N
GLACKIN	ANTHONY JUDE	Personal Information	01/08/2012	PERMANENT	CONSULTANT (NC)	73318S	CAH CAH - UROLOGY	CAH - MAIN BUILDING	1.00	01/08/2012		Y
HO	KUO JONG	Personal Information	01/10/2011	TEMPORARY	CONSULTANT (NC)	73318S	CAH CAH - UROLOGY	CAH - MAIN BUILDING	1.00	06/04/2011	01/08/2012	N
		Personal Information	01/10/2011	TEMPORARY	CONSULTANT (NC)	73318S	CAH CAH - UROLOGY	CAH - MAIN BUILDING	1.00	06/04/2011	01/08/2012	N
PAHUJA	AJAY	Personal Information	01/11/2012	PERMANENT	CONSULTANT (NC)	73318S	CAH CAH - UROLOGY	CAH - MAIN BUILDING	1.00	01/11/2012	05/01/2014	N
FERNANDO	MAURICE JAYANTH	Personal Information	12/11/2012	PERMANENT	SPECIALTY DOCTOR (NC)	73318S	CAH CAH - UROLOGY	CAH - MAIN BUILDING	1.00	12/11/2012	09/08/2013	N
AKHTAR	MEHMOOD	Personal Information	03/09/2007	PERMANENT	CONSULTANT (NC)	73318S	CAH CAH - UROLOGY	CAH - MAIN BUILDING	1.00	03/09/2007	08/04/2012	N
YOUNG	MICHAEL	Personal Information	01/05/1998	PERMANENT	CONSULTANT (NC)	73318S	CAH CAH - UROLOGY	CAH - MAIN BUILDING	1.00	14/04/1998		Y

Staff in Post from 1 December 2013 - 31 March 2016**Note:** This information was taken from HRPTS, detailing all staff aligned to Urology Organisational Units during the above reporting period

Last name	First name	Pers.No.	HRMS Staff No	Org Assignment Start Date	Org Assignment End Date	Work Contract	Job Description	Organizational Unit	Cost Ctr	Cost Center	location	WTE	Date Appointed to Trust	Date Left Trust	Current SHSCT Employee
Hall	Samuel	Personal Information	Personal Information	01/01/2015	15/03/2016	Permanent	Consultant (NC)	Clinical Director ENT Urology T&O	C0305S	CAH E.N.T. - CAH	Craigavon Area Hosp-Main Building	1.00	01/04/1993	15/03/2016	N
		Personal Information	Personal Information	17/03/2016	31/12/2016	Temporary	Consultant (NC)	Clinical Director ENT Urology T&O	C0305S	CAH E.N.T. - CAH	Craigavon Area Hosp-Main Building	0.40	17/03/2016	31/12/2016	N
O'Brien	Aidan	Personal Information	Personal Information	01/04/1993	17/07/2020	Permanent	Consultant (NC)	CAH Urology Medical	C0318S	CAH - UROLOGY	Craigavon Area Hosp-Main Building	1.00	01/04/1993	17/07/2020	N
Haynes	Mark	Personal Information	Personal Information	12/05/2014	31/12/9999	Permanent	Consultant (NC)	CAH Urology Medical	C0318S	CAH - UROLOGY	Craigavon Area Hosp-Main Building	1.00	12/05/2014		Y
O'Donoghue	John	Personal Information	Personal Information	04/08/2014	31/12/9999	Permanent	Consultant (NC)	CAH Urology Medical	C0318S	CAH - UROLOGY	Craigavon Area Hosp-Main Building	1.00	04/08/2014		Y
Martin	Jennifer	Personal Information	Personal Information	20/10/2014	26/08/2016	Temporary	Specialty Doctor (NC)	CAH Urology Medical	C0318S	CAH - UROLOGY	Craigavon Area Hosp-Main Building	1.00	20/10/2014	26/08/2016	N
Glackin	Anthony Jude	Personal Information	Personal Information	01/08/2012	31/12/9999	Permanent	Consultant (NC)	CAH Urology Medical	C0318S	CAH - UROLOGY	Craigavon Area Hosp-Main Building	1.00	01/08/2012		Y
Suresh	Kothandaraman	Personal Information	Personal Information	11/12/2013	26/10/2016	Permanent	Consultant (NC)	CAH Urology Medical	C0318S	CAH - UROLOGY	Craigavon Area Hosp-Main Building	1.00	11/12/2013	26/10/2016	N
Pahuja	Ajay	Personal Information	Personal Information	01/11/2012	05/01/2014	Permanent	Consultant (NC)	CAH Urology Medical	C0318S	CAH - UROLOGY	Craigavon Area Hosp-Main Building	1.00	01/11/2012	05/01/2014	N
Young	Michael	Personal Information	Personal Information	14/04/1998	27/05/2022	Permanent	Consultant (NC)	CAH Urology Medical	C0318S	CAH - UROLOGY	Craigavon Area Hosp-Main Building	1.00	14/04/1998	27/05/2022	Y

Confidentiality & Data Protection - This report has been compiled and is intended for use only by the official recipient. Please remember your responsibilities under data protection legislation, for example, by ensuring personal information is kept secure and not left in view of unauthorised staff or visitors, is only used for the purpose intended, and is not shared with anyone who should not have access to it. Also, once personal information has been used for its intended purpose it should be appropriately destroyed, or kept in a secure location if it is required for future use.

Timeliness Issues & HRPTS Recording - In order to ensure that information is reported correctly from HRPTS, it is essential that on line processes or off line forms are actioned or forwarded for action on HRPTS as soon as possible. Delays will result in reported information not being up to date.

Data Quality - If you believe the information in this report does not accurately reflect the current position, please contact the HR Analytics & Governance Team.

Personal Secretary



Working together



Excellence



Openness & Honesty



Compassion



JOB DESCRIPTION

JOB TITLE	Personal Secretary
BAND	4
DEPARTMENT/ LOCATION DIRECTORATE	Acute - All specialties Functional Support Services
REPORTS TO	Service Administrator
ACCOUNTABLE TO	Head of Acute Booking and Secretarial Services

JOB SUMMARY

The post-holder will provide secretarial support to a Consultant/s, and their team, supporting the day-to-day clinical activities associated with the Specialty within the Acute Services Directorate.

KEY DUTIES / RESPONSIBILITIES

1. Prioritise and manage workload on a daily basis, escalating areas of concern to the Line Manager as appropriate. Exercise judgement and use own initiative to provide non-clinical advice, information and guidance directly to patients, relatives and carers, requiring an intermediate level of medical terminology and procedures.
2. Management of waiting lists which includes providing timely reports for consultants, eg, ensuring all patients receive treatment within Integrated Elective Access Policy targets (IEAP) and other Regional and internal milestones.



3. Responsible for compiling admission and theatre lists following guidance given by the consultant(s), which includes allocating/replacing patients for theatre slots and ensuring theatre sessions are used to full capacity.
4. Ensure patients are given correct guidance in relation to medication prior to surgery, eg Warfarin, Aspirin, contraceptive pill as per clinical standards agreed by the Trust and advice from Consultant(s)
5. Word processing letters from Digital Dictation in a timely manner. Record and update information on the Patient Administration System (PAS) or other computerised information systems. Escalating any concerns with backlogs/missing dictations to Line Manager.
6. Take initial receipt of all incoming correspondence – telephone, written and enquiries. Using initiative, prioritise urgency of response required and bring to the attention of consultant where necessary.
7. Prioritise and manage effectively results from x-ray and laboratory systems, ensuring all examinations and investigations have been received and brought to the attention of medical staff without delay.
8. Validation of data quality reports & other reports associated with the Service eg DARO reports
9. Provide figures to Management on a regular basis to help with the management & distribution of workload i.e. Backlog Reports
10. Supervise and support new secretaries and audio-typists and actively participate in the induction and training of new staff within the directorate.
11. Application of diagnostic coding for out-patient episodes and procedure codes for waiting lists.
12. Operate all IT tools available to provide the most efficient use of time and most effective use of service, eg, Microsoft Outlook, Patient Centre, PAS, Radiology, Laboratory Systems, Theatre Management System, ensuring the data contained on the system is accurate and up-to-date.



13. Monitor the typing workload within the office and allocate to audio-typists where appropriate and monitor quality of performance, escalating areas of concern to the Directorate/Service Administrator.
14. Manage the consultants dairy/schedule informing appropriate staff of changes to work schedule which affects theatre and out-patient scheduling. Co-ordinate the consultant(s) personal dairy for internal and external meetings.
15. Any other duties as may be assigned from time to time by Line Manager.

GENERAL REQUIREMENTS

The post holder will be required to:

1. Ensure the Trust's policy on equality of opportunity is promoted through his/her own actions and those of any staff for whom he/she has responsibility.
2. **Co-operate fully with the implementation of the Trust's Health and Safety arrangements, reporting any accidents/incidents/equipment defects to his/her manager, and maintaining a clean, uncluttered and safe environment for patients/clients, members of the public and staff.**
3. Adhere at all times to all Trust policies/codes of conduct, including for example:
 - Smoke Free policy
 - IT Security Policy and Code of Conduct
 - standards of attendance, appearance and behaviour
4. Comply fully with the Trust's policy and procedures regarding records management, as well as the Data Protection Act, accepting legal responsibility for all manual or electronic records held, created or used as part of his/her duties, and ensuring that confidentiality is maintained at all times.
5. Take responsibility for his/her own ongoing learning and development, including full participation in KSF Development Reviews/appraisals, in



order to maximise his/her potential and continue to meet the demands of the post.

6. Represent the Trust's commitment to providing the highest possible standard of service to patients/clients and members of the public, by treating all those with whom he/she comes into contact in the course of work, in a pleasant, courteous and respectful manner.
7. Understand that this post may evolve over time, and that this Job Description will therefore be subject to review in the light of changing circumstances. Other duties of a similar nature and appropriate to the grade may be assigned from time to time.

This Job Description will be subject to review in the light of changing circumstances and is not intended to be rigid and inflexible but should be regarded as providing guidelines within which the individual works. Other duties of a similar nature and appropriate to the grade may be assigned from time to time.

It is a standard condition that all Trust staff may be required to serve at any location within the Trust's area, as needs of the service demand.

February 2021



PERSONNEL SPECIFICATION

JOB TITLE **Personal Secretary Band 4**

DIRECTORATE Functional Support Services

Ref No:

Notes to applicants:

1. You must clearly demonstrate on your application form how you meet the required criteria – failure to do so may result in you not being shortlisted.
2. Proof of qualifications and/or professional registration will be required if an offer of employment is made – if you are unable to provide this, the offer may be withdrawn.

ESSENTIAL CRITERIA

SECTION 1: The following are **ESSENTIAL** criteria which will initially be measured at shortlisting stage although may also be further explored during the interview/selection stage. You should therefore make it clear on your application form whether or not you meet these criteria. Failure to do so may result in you not being shortlisted. The stage in the process when the criteria will be measured is stated below.

Factor	Criteria	Method of Assessment
Experience / Qualifications/ Registration	<p>1. HNC/HND or equivalent/higher qualification and 1 years experience in a clerical/administrative role within a Clinical Setting*</p> <p style="text-align: center;">OR</p> <p>4 GCSEs at Grades A-C including English Language or equivalent / higher qualifications and 2 years experience in a clerical / administrative role in a Clinical Setting*</p> <p style="text-align: center;">OR</p>	Shortlisting by Application Form



	<p>3 Years experience in a clerical / administrative role within a Clinical Setting*.</p> <p>2. OCR / RSA Stage 3 Word processing / Typing (Parts 1 and 2) or equivalent qualification</p> <p style="text-align: center;">OR</p> <p>A minimum of 1 year's word processing experience.</p> <p>*Clinical setting will be defined as working in an area that supports Medical/Nursing/AHP professions in a hospital/GP setting</p>	
SECTION 2: The following are ESSENTIAL criteria which will be measured during the interview/ selection stage:		
Skills / Abilities	<ol style="list-style-type: none"> 1. Excellent oral and written communication skills 2. Ability to compile and collate statistical information 3. Ability to plan and organise work 4. Ability to work accurately 5. Ability to work on own initiative 6. Experience of working to deadlines and achieving targets 7. Knowledge of medical terminology 8. Knowledge of IT Systems 9. Flexible with regard to working arrangements 10. Responsible attitude to confidentiality 11. Acceptable attendance record 	Interview



DESIRABLE CRITERIA

SECTION 3: These will **ONLY** be used where it is necessary to introduce additional job related criteria to ensure files are manageable. You should therefore make it clear on your application form how you meet these criteria. Failure to do so may result in you not being shortlisted.

Factor	Criteria	Method of Assessment
Experience	<ol style="list-style-type: none"> 1. Audio typing experience 2. Working experience of computerised information systems eg Patient Administration System (PAS) 	Shortlisting by Application Form







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JOB DESCRIPTION

JOB TITLE:	Registration & Booking Clerk
BAND:	Band 3
DIRECTORATE:	Acute Services
INITIAL LOCATION	Health Records, Southern Health & Social Care Trust
REPORTS TO:	Booking & Contact Centre Manager
ACCOUNTABLE TO:	Head of Health Records

JOB SUMMARY

The role will include working as part of a team and play a key part of the strategic modernisation and development of the pathway for GP and other referrals within the Trust. This will include the interface with patient, the GPs and colleagues within the Trust both by correspondence and telephone.

The post holder will be required to work shifts covering the opening hours of the Referral and Booking Centre i.e. 8.00a.m. to 8.00p.m. Monday to Friday and Saturday 9.00 a.m. to 1.00 p.m.

KEY DUTIES / RESPONSIBILITIES

Registration

1. Receive incoming referral letters and sort into ICATS and non ICATS.
2. Ensure that all referrals to consultant led services are processed in line with protocols to ensure prioritisation (Red Flag, urgent and routine) is timely and notify the Manager where this is not the case.
3. Ensure that the referral management and registration process complies with the requirements of the IEAP.

Booking

4. Fully implement the partial booking process, telephoning patients as required, issuing letters to patients and the associated administrative processes.
5. When selecting/offering appointment dates to patients from the waiting list ensure that they are selected in chronological order.
6. Work using a Primary Targeting List (PTL) to ensure patients are not offered dates past the guaranteed waiting time.
7. Calculate capacity for routine patients and commence the partial booking process. Comments should be added throughout the partial booking process so that patients can be removed appropriately.
8. Remove from the waiting list and notify referrers if patients fail to contact the booking centre after 2 invites have been issued.
9. Calls into the booking office may be complex, sensitive, contentious or aggressive and you will be required to use your developed interpersonal and communication skills to defuse any conflict. Telephone numbers are to be continually updated and mobile numbers recorded.
10. When the patient makes contact with the Trust ensure that they are given a 'reasonable offer' of a minimum of 3 weeks notice of their appointment and a choice of 2 different times/dates.
11. Where appointments are being arranged at short notice, attempts will be made to contact the patient by telephone. Appointment documents will be posted in confirmation.
12. Assist in the notification of cancelled appointments, notifying the Referral and Booking Centre Manager of any shortfall in capacity so that the waiting time guarantee is not breached.
13. Cancellation of sessions any capacity problems should be emailed to the Manager immediately after notification.
14. Work with the Manager and secretaries to ensure that patients who have cancelled are re-dated.

Good Practice

15. All contact with patients either face to face or on the telephone should be treated in a sensitive manner in accordance with any customer service standards and in line with the Data Protection Act and Trust Policies & Procedures.
16. Implement the standards outlined in the Integrated Access Protocol.
17. Undertake regular validation checks where there are discrepancies with the patients' demographic and GP details. If required, contact the GP surgery for more information.
18. Monitor the waiting lists through a process of regular review in order to ensure their continuous validity.

GENERAL REQUIREMENTS

The post holder will be required to:

1. Ensure the Trust's policy on equality of opportunity is promoted through his/her own actions and those of any staff for whom he/she has responsibility.
2. Co-operate fully with the implementation of the Trust's Health and Safety arrangements, reporting any accidents/incidents/equipment defects to his/her manager, and maintaining a clean, uncluttered and safe environment for patients/clients, members of the public and staff.
3. Adhere at all times to all Trust policies/codes of conduct, including for example:
 - Smoke Free policy
 - IT Security Policy and Code of Conduct
 - standards of attendance, appearance and behaviour
4. Contribute to ensuring the highest standards of environmental cleanliness within your designated area of work.
5. Co-operate fully with regard to Trust policies and procedures relating to infection prevention and control.
6. All employees of the trust are legally responsible for all records held, created or used as part of their business within the Trust including patients/clients, corporate and administrative records whether paper-based or electronic and also including emails. All such records are public records and are accessible to the general public, with limited exception, under the Freedom of Information act 2000 the

Environmental Information Regulations 2004 and the Data Protection Acts 1998. Employees are required to be conversant with the Trusts policy and procedures on records management and to seek advice if in doubt.

7. Take responsibility for his/her own ongoing learning and development, including full participation in KSF Development Reviews/appraisals, in order to maximise his/her potential and continue to meet the demands of the post.
8. Represent the Trust's commitment to providing the highest possible standard of service to patients/clients and members of the public, by treating all those with whom he/she comes into contact in the course of work, in a pleasant, courteous and respectful manner.
9. Available / able to work any 5 days out of 7 over the 24 hour period, which may include on-call / stand-by / sleep-in duties, shifts, night duty, weekends and Public Holidays if required immediately on appointment or at a later stage following commencement in response to changing demands of the service.

This post may evolve over time and this Job Description will therefore be subject to review in the light of changing circumstances and is not intended to be rigid and inflexible but should be regarded as providing guidelines within which the individual works. Other duties of a similar nature and appropriate to the grade may be assigned from time to time.

It is a standard condition that all Trust staff may be required to serve at any location within the Trust's area, as needs of the service demand.



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PERSONNEL SPECIFICATION

JOB TITLE AND BAND	Registration & Booking Clerk Band 3
DEPARTMENT/DIRECTORATE	Health Records Department, Southern Health and Social Care Trust
SALARY	<insert salary> (pro rata if part-time)
HOURS	<insert hours>

Notes to applicants:

1. You must clearly demonstrate on your application form under each question, how you meet the required criteria as failure to do so may result in you not being shortlisted. You should clearly demonstrate this for both the essential and desirable criteria.
2. Shortlisting will be carried out on the basis of the essential criteria set out in Section 1 below, using the information provided by you on your application form. Please note the Trust reserves the right to use any desirable criteria outlined in Section 3 at shortlisting. You must clearly demonstrate on your application form how you meet the desirable criteria.
3. Proof of qualifications and/or professional registration will be required if an offer of employment is made – if you are unable to provide this, the offer may be withdrawn.

ESSENTIAL CRITERIA

SECTION 1: The following are **ESSENTIAL** criteria which will initially be measured at shortlisting stage although may also be further explored during the interview/selection stage. You should therefore make it clear on your application form whether or not you meet these criteria. Failure to do so may result in you not being shortlisted. The stage in the process when the criteria will be measured is stated below.

Factor	Criteria	Method of Assessment
Qualifications/ Experience	1. 4 GCSE's or equivalent at Grades A-C including English Language or equivalent/higher qualification AND 1 year's experience in a clerical/administrative role OR 2 years' experience in a clerical/administrative role 2. Experience in the use of Microsoft Office	Shortlisting by Application Form

	Word, or equivalent	
SECTION 2: The following are ESSENTIAL criteria which will be measured during the interview/ selection stage:		
Skills / Abilities	3. Ability to work as part of a team 4. Ability to use initiative 5. Good organisational skills with an ability to prioritise own workload 6. Effective communication skills to meet the needs of the post in full	Interview / Test

As part of the Recruitment & Selection process it may be necessary for the Trust to carry out an Enhanced Disclosure Check through Access NI before any appointment to this post can be confirmed.

THE TRUST IS AN EQUAL OPPORTUNITIES EMPLOYER

Successful applicants may be required to attend for a Health Assessment

All staff are required to comply with the Trust's Smoke Free Policy

Higher Clerical Officer



Working together



Excellence



Openness & Honesty



Compassion



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JOB DESCRIPTION

JOB TITLE	Higher Clerical Officer
BAND	3
DIRECTORATE	Acute – Cancer Services
INITIAL LOCATION	Ramone Building, Craigavon Area Hospital
REPORTS TO	Cancer Services Co-ordinator
ACCOUNTABLE TO	Operational Support Lead

JOB SUMMARY

The post holder will book cancer appointments and provide a clerical and administrative support service to the Cancer Tracker/MDT Co-ordinators if necessary

KEY DUTIES / RESPONSIBILITIES

Operational Delivery

1. Operate all relevant IT systems e.g. Patient Administration System (PAS), NIECR, Clinical Communication Gateway (CCG), Cancer Patient Pathway System (CaPPS)
2. Operate the NIECR e-Triage function to book appointments (This includes monitoring the action table, holding table, triaged section)
3. Add patients to outpatient waiting lists
4. Booking 1st outpatient appointment in accordance to Cancer Access Target guidelines, ensuring that they are selected from the waiting list in chronological order.
5. To co-ordinate, process and distribute a range of correspondence in accordance with agreed procedures within area of responsibility.
6. Prioritise and manage own workload on a daily basis, escalating areas of concern to the Line Manager as appropriate. Exercise judgement and use own initiative to provide non-clinical advice, information and guidance directly to patients and relatives.
7. Deal with incoming / outgoing mail and ensure that mail is distributed appropriately to relevant staff and in a timely manner.



8. To ensure that work for which responsible is processed in a timely manner in accordance with agreed performance standards
9. Provide clerical support and cover for the Cancer Tracker/MDT Co-ordinators as required
10. Continually strive to improve quality, standards and procedures within area of responsibility contributing to the ongoing desire to improve delivery of services.
11. Actively participate in the induction and training of new staff within the directorate
12. Any other duties as may be assigned from time to time by Line Manager

Information Management

13. To ensure that all systems used both manual and computerised are maintained accurately at all times.
14. Where necessary to develop filing systems to meet the needs of the service and ensure these are maintained.

Key Working Relationships

15. Establish, maintain and develop close working relationships with managers and staff at all levels throughout the Trust and to interact effectively with members of the public as required

GENERAL REQUIREMENTS

The post holder will be required to:

1. Ensure the Trust's policy on equality of opportunity is promoted through his/her own actions and those of any staff for whom he/she has responsibility.
2. Co-operate fully with the implementation of the Trust's Health and Safety arrangements, reporting any accidents/incidents/equipment defects to his/her manager, and maintaining a clean, uncluttered and safe environment for patients/clients, members of the public and staff.
3. Adhere at all times to all Trust policies/codes of conduct, including for example:
 - Smoke Free policy
 - IT Security Policy and Code of Conduct



- standards of attendance, appearance and behaviour
4. Contribute to ensuring the highest standards of environmental cleanliness within your designated area of work.
 5. Co-operate fully with regard to Trust policies and procedures relating to infection prevention and control.
 6. All employees of the Trust are legally responsible for all records held, created or used as part of their business within the Trust including patients/clients, corporate and administrative records whether paper-based or electronic and also including emails. All such records are public records and are accessible to the general public, with limited exceptions, under the Freedom of Information Act 2000 the Environmental Information Regulations 2004, the General Data Protection Regulations (GDPR) and the Data Protection Act 2018. Employees are required to be conversant with the [org name] policy and procedures on records management and to seek advice if in doubt.
 7. Take responsibility for his/her own ongoing learning and development, in order to maximise his/her potential and continue to meet the demands of the post.
 8. Represent the Trust's commitment to providing the highest possible standard of service to patients/clients and members of the public, by treating all those with whom he/she comes into contact in the course of work, in a pleasant, courteous and respectful manner.

This Job Description will be subject to review in the light of changing circumstances and is not intended to be rigid and inflexible but should be regarded as providing guidelines within which the individual works. Other duties of a similar nature and appropriate to the grade may be assigned from time to time.

It is a standard condition that all Trust staff may be required to serve at any location within the Trust's area, as needs of the service demand.

January 2020





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PERSONNEL SPECIFICATION

JOB TITLE AND BAND	Higher Clerical Officer Band 3
DEPARTMENT / DIRECTORATE	Cancer Services, Acute
HOURS	37.5hours per week

Ref No: <to be inserted by HR>

January 2020

Notes to applicants:

1. You must clearly demonstrate on your application form under each question, how you meet the required criteria as failure to do so may result in you not being shortlisted. You should clearly demonstrate this for both the essential and desirable criteria.
2. Shortlisting will be carried out on the basis of the essential criteria set out in Section 1 below, using the information provided by you on your application form. Please note the Trust reserves the right to use any desirable criteria outlined in Section 3 at shortlisting. You must clearly demonstrate on your application form how you meet the desirable criteria.
3. Proof of qualifications and/or professional registration will be required if an offer of employment is made – if you are unable to provide this, the offer may be withdrawn.

ESSENTIAL CRITERIA

SECTION 1: The following are **ESSENTIAL** criteria which will initially be measured at shortlisting stage although may also be further explored during the interview/selection stage. You should therefore make it clear on your application form whether or not you meet these criteria. Failure to do so may result in you not being shortlisted. The stage in the process when the criteria will be measured is stated below.

Factor	Criteria	Method of Assessment
Experience/ Qualifications/ Registration	<p>1. 4 GCSEs at Grades A-C including English Language and/or equivalent / higher qualification AND 1 years' experience in a clerical / administrative role</p> <p>OR</p> <p>2 years' experience in a clerical / administrative role</p> <p>Experience in the use of Microsoft office products including Word, or equivalent.</p>	Shortlisting by Application Form



Other	Hold a current full driving licence which is valid for use in the UK and have access to a car on appointment. <i>This criteria will be waived in the case of applicants whose disability prohibits driving but who have access to a form of transport approved by the Trust which will permit them to carry out the duties of the post.</i>	Shortlisting by Application Form
SECTION 2: The following are ESSENTIAL criteria which will be measured during the interview/ selection stage:		
Skills / Abilities	<ol style="list-style-type: none"> 1. Effective oral and written communication skills to meet the needs of the post in full. 2. Ability to plan, organise and prioritise work. 3. Ability to work independently and as part of a team. 4. Ability to work accurately, with thoroughness and attention to detail. 5. Flexible with regard to working arrangements and a positive attitude to change 6. Responsible attitude to confidentiality. 	Interview

DESIRABLE CRITERIA

SECTION 3: these will **ONLY** be used where it is necessary to introduce additional job related criteria to ensure files are manageable. You should therefore make it clear on your application form how you meet these criteria. Failure to do so may result in you not being shortlisted

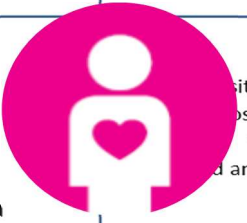
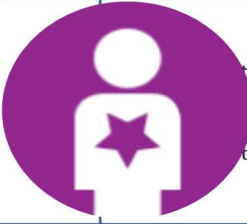

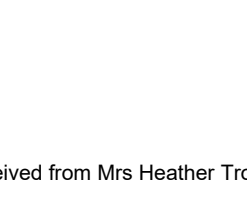
Factor	Criteria	Method of Assessment
Experience	Experience of using a computerised database	Shortlisting by Application Form

As part of the Recruitment & Selection process it may be necessary for the Trust to carry out an Enhanced Disclosure Check through Access NI before any appointment to this post can be confirmed.

Successful applicants may be required to attend for a Health Assessment

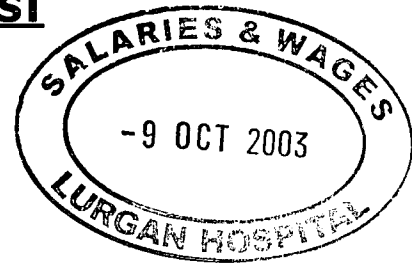
THE TRUST IS AN EQUAL OPPORTUNITIES EMPLOYER



Value	What does this mean?	What does this look like in practice? - Behaviours
Working Together	 <p>We work together for the benefit of people we care for and support. We work across Health and Social Care and with other external organisations and agencies, recognising that leadership is the responsibility of all.</p>	<ul style="list-style-type: none"> • I work with others and value everyone's contribution • I treat people with respect and dignity • I work as part of a team looking for opportunities to support and help people in both my own and other teams • I actively engage people on issues that affect them • I look for feedback and examples of good practice, aiming to improve where possible
Compassion	 <p>Positive, caring, respectful and understanding of those we care for and support and our families. We listen carefully to others to better understand and take action to help them and ourselves.</p>	<ul style="list-style-type: none"> • I am sensitive to the different needs and feelings of others and treat people with kindness • I learn from others by listening carefully to them • I look after my own health and well-being so that I can care for and support others
Excellence	 <p>A commitment to being the best we can be in our work, to improve and develop services to achieve the best outcomes. We deliver safe, high-quality, person-centred care and support.</p>	<ul style="list-style-type: none"> • I put the people I care for and support at the centre of all I do to make a difference • I take responsibility for my decisions and actions • I commit to best practice and sharing learning, while continually learning and developing • I try to improve by asking 'could we do this better?'
Integrity & Honesty	 <p>Being open and honest with each other and act with integrity and courage.</p>	<ul style="list-style-type: none"> • I am open and honest in order to develop trusting relationships • I ask someone for help when needed • I speak up if I have concerns • I challenge inappropriate or unacceptable behaviour and practice

All staff are expected to display the HSC Values at all times



CRAIGAVON AREA HOSPITAL GROUP TRUST**JOB DESCRIPTION**

JOB TITLE: Directorate Administrator Grade 5

LOCATION: Surgical Directorate

REPORTS TO: Clinical Services Manager

RESPONSIBLE TO: Clinical Director

JOB PURPOSE: To ensure the day to day administrative co-ordination of the Directorate through the provision of high quality, cost effective support to Clinical staff. The postholder will play an active role in the development of the Directorate by assisting the Clinical Services Manager with the full range of non-clinical duties and deputising in this respect in his/her absence.

MAIN RESPONSIBILITIES:**Clinical Information**

- Ensure the accurate, timely and complete recording of information within the Directorate on the Patient Administration System (PAS) and other clinical information systems.
- Review the effectiveness of patient data collection and implement any necessary improvements.
- Provide statistics and information as required to the Directorate using appropriate information systems and computer applications:

PAS, Business Objects, Comparative Korner Database, Spreadsheets and any manual systems

- Monitor Directorate activity and waiting lists to ensure compliance with contractual obligations and produce relevant reports.
- Monitor performance indicators with clinical staff and assist them to implement appropriate action to achieve target levels.
- Liaise with the Clinical Contracts Manager regarding contracting queries.
- Provide information on performance against the Patients' Charter standards and co-ordinate charter monitoring surveys in appropriate areas.
- Assist in the development and implementation of new systems, both computerised and manual, within the Directorate.
- Liaise with Clinical Coders and Directorate staff to facilitate the clinical coding function.

Staff Management

- Manage the administrative and secretarial staff within the Directorate (including the Accident & Emergency Department) ensuring cost effectiveness and efficiency.
- Review and continuously monitor workload distribution and allocate secretarial and administrative staff accordingly ensuring the effective provision of cover during staff absences.
- Develop and implement staff appraisal.
- Develop and maintain accurate staff records.
- Allocate leave and monitor sickness and absenteeism.
- Participate in the recruitment and selection of staff in accordance with the Trust's policies.
- Participate in disciplinary matters in liaison with the Clinical Services Manager.
- Identify staff training needs and ensure that these needs are met.
- Monitor the secretarial and administrative budget, in liaison with the Clinical Services Manager.

General Duties

- Provide administrative support for Clinical Directorate meetings.
- Maintain the Clinical Services Manager's diary and deal with queries / take messages as appropriate when s/he is unavailable.
- Assist in the preparation of the Directorate's annual business plan and submissions for the Trust's Annual Report.
- Assist in the preparation of the Directorate's business cases as appropriate.
- Assist in the formulation and monitoring of Directorate objectives.
- Assist in the preparation and monitoring of Directorate budgets.
- Assist in the setting and monitoring of quality standards within the Directorate.
- Undertake other projects and research as directed and prepare reports for the Clinical Services Manager and Clinical Director.
- Channel and record non-stock requisitions within the Directorate.
- Assist the Clinical Director and Clinical Services Manager in the investigation and response to complaints.
- Assist the Directorate to identify capital and revenue requirements and prepare submissions for new and replacement equipment.

- Ensure minor non-capital and maintenance programmes within the Directorate are planned and completed effectively.
- Ensure that all clinical records and information used within the Directorate are managed and stored in an appropriate manner and with due regard to confidentiality and Data Protection legislation.

GENERAL REQUIREMENTS

- Carry out his/her duties with full regard to the Trust's Equal Opportunities Policy.
- Co-operate fully with the implementation of the Trust's Health and Safety arrangements and report any accidents/incidents, defects with work equipment or inadequate safety arrangements.
- Comply with the Trust's policy on smoking.
- Treat those whom he/she comes into contact with in the course of work, in a courteous manner.
- Accept that this job description will be subject to review in the light of changing circumstances and should be regarded as providing guidance within which the individual works rather than something which is rigid and inflexible.

July 2003

EMPLOYEE PROFILE**I T:**

Directorate Administrator Grade 5

DEPARTMENT/SPECIALTY: Surgical Directorate

FACTORS	ESSENTIAL	DESIRABLE
Skills/Abilities	<p>Excellent communication skills - verbal and written</p> <p>Excellent administrative and organisational skills</p> <p>Good analytical and numerical ability.</p> <p>Good team working ability.</p> <p>Thoroughness and attention to detail at work.</p> <p>Ability to lead and take responsibility for the performance of a large team of administrative staff.</p>	
Qualifications/ Experience/Training etc.	<p>Minimum of two years' recent clerical / administrative experience in a clinical setting.</p> <p>Evidence of recent personal development relevant to the post eg development programme, recognised qualification etc.</p> <p>Experience of using computerised database, spreadsheet and wordprocessing packages.</p>	<p>Third level qualification or equivalent.</p> <p>Staff Management experience.</p> <p>Experience in report writing.</p> <p>Experience of collecting and analysing data and presenting as meaningful information</p>
Knowledge	<p>Knowledge of acute hospital processes and associated information requirements.</p> <p>An understanding of the role of this post.</p>	
Other Requirements/ Work Related Circumstances	<p>Flexible with regard to working arrangements.</p>	

July 2003

Operational Support Lead - Acute Services (4 posts)

Ref: 88207120



Closing Date: 20 June 2007 12:00

Location: Craigavon Area Hospital / Daisy Hill Hospital

Contract: Permanent

Salary: Band 7 (£26,269 - £36,416)

Hours: Full-time / Job Share

Interview Dates: Expected late June / early July

Job Description:

SOUTHERN HEALTH & SOCIAL CARE TRUST

JOB DESCRIPTION

- JOB TITLE:** Operational Support Lead
- BAND:** Band 7
- REPORTS TO:** Assistant Director of a division within Acute Services
- JOB PURPOSE:** To work as a key member within a division of the Trust's Acute Services Directorate, responsible for managing the day-to-day operational functions associated with patient access and flow in line with the reform and modernisation agenda, quality of patient care and resources available.
- To assist the Assistant Director within the division in the delivery of the operational functions associated with the development of a booked elective pathway and maintenance of patient access via management of the Primary Target Lists (PTL) and waiting list management processes. Where applicable, to assist the Assistant Director within the division in the delivery of the operational functions associated with the maintenance of patient access to Medicine and Unscheduled Care services in line with DHSSPS standards of care.
- To assume day to day line management responsibility for the administrative and clerical staff within the division (Personal Secretaries, Audio Typists, Ward Clerks), ensuring efficient and flexible administrative support to clinical teams.

MAIN DUTIES:

OPERATIONAL MANAGEMENT – PATIENT ACCESS AND FLOW:

1. Engage with senior medical, nursing, administrative and allied health professional teams to ensure that the main focus continues to be on the management of specialty specific PTLs to meet maximum patient access targets for inpatient and daycase patients and where applicable to meet access targets for unscheduled care.
2. Work with clinical directorate teams to develop realistic capacity plans to facilitate

planning for the achievement of PTL schedules and to ensure identified capacity is fully utilised across the division. Similarly for the planning of unscheduled care capacity requirements.

3. Support and facilitate elective and non-elective clinical teams in sustaining patient flow, for example assisting in capacity assessment, job planning and service development issues particularly in relation to issues affecting capacity and service provision.
4. Assess the waiting list and unscheduled access target positions for risk, identify and communicate issues affecting access and work with clinical and functional directorate teams to ensure plans are in place to deal with bottle-necks and pressures, escalating as appropriate.
5. Support staff from all key disciplines to ensure a whole system approach to improve and sustain waiting list and unscheduled care management and the development of elective and non elective access pathways.
6. Ensure the Trust is compliant with regional access policy issues for elective and non elective patients and that all supporting processes are in place, documented and implemented.
7. Manage development projects as directed by the Assistant Director for the division to further improve patient access and operational performance across the hospital system.
8. Be the main point of contact for day-to-day operational performance issues for the division.
9. Develop excellent working relations with key stakeholders to encourage collaborative working.
10. Provide updates on performance at Trust and regional meetings as required.

INFORMATION AND ANALYSIS:

1. Work with the Trust's Information Department to co-ordinate the collection and analysis of data to facilitate the monitoring of elective and non elective access and flows across the hospital system.
2. To analyse complex performance information to identify areas for improvement and to work collaboratively to develop plans to deliver improvement.
3. To monitor ongoing projects to assess outcomes, benchmarked against expected outcomes.

GENERAL MANAGEMENT:

1. Assume day to day line management responsibility for the administrative and clerical staff within the division.
2. Participate in the Trust's Staff Development and Performance Review Scheme. Review individually on a regular basis the performance of staff. Provide guidance on personal development requirements, advise on and initiate, where appropriate, further training.
3. Maintain good staff relationships and morale amongst staff reporting to him/her.
4. Where appropriate, review the organisational plan and establishment levels and ensure that each is consistent with achieving objectives and recommend change where appropriate.

5. Participate as required in selection and appointment of staff reporting to him/her in accordance with procedures laid down by the Trust.
6. Take such action as may be necessary in disciplinary matters in accordance with procedures laid down by the Trust.
7. Promote the Trust's policy on equality of opportunity through his/her own actions and ensure that this policy is adhered to by staff for which he/she has responsibility.

GENERAL RESPONSIBILITIES

Employees of the Trust will be required to promote and support the mission and vision of the service for which they are responsible and:

- At all times provide a caring service and to treat those with whom they come in contact in a courteous and respectful manner.
- Demonstrate their commitment by their regular attendance and the efficient completion of all tasks allocated to them.
- Comply with the Trust's No Smoking Policy.
- Carry out their duties and responsibilities in compliance with health and safety policy and statutory regulations.
- Adhere to equal opportunities policy throughout the course of their employment.
- Ensure the ongoing confidence of the public in service provision.
- Comply with the HPSS Code of Conduct.

This job description is subject to review in the light of changing circumstances and is not intended to be rigid and inflexible but should be regarded as providing guidelines within which the postholder works. Other duties of a similar nature and appropriate to the grade may be assigned from time to time by the Assistant Director of the division.

Personnel Specification:

Personnel Specification

Knowledge, skills and experience required:

Applicants must provide evidence by the closing date for application that they are a permanent employee of the Southern Health and Social Care Trust and have:

- university degree or relevant professional qualification and worked for at least 1 year in a middle management role* within an acute hospital clinical support service

OR

- have worked for at least 3 years in a middle management role* within an acute hospital clinical support service.

AND

- experience of playing a lead role / managing projects within a multi-disciplinary environment within tight timescales.
- experience of playing a lead role in the successful implementation of change initiatives.
- a proven track record of people management and organisational skills.

- a full current driving licence with access to a car or access to a form of transport to meet the mobility needs of the post.

SHORTLISTING

A shortlist of candidates for interview will be prepared on the basis of the information contained in the application form. It is therefore essential that all applicants demonstrate through their application how and to what extent their experience and qualities are relevant to this post and the extent to which they satisfy each criterion specified

Candidates who are short-listed for interview will need to demonstrate at interview that they have the required competencies to be effective in this leadership role. The competencies concerned are given in the NHS Leadership Qualities Framework, details of which can be accessed at nhsleadershipqualities.nhs.uk Particular attention will be given to the following:

- Self Belief
- Self Management
- Drive for results
- Leading change through people
- Effective and strategic influencing

The following additional clarification is provided:

“middle management role” is defined as experience gained *for example* at Admin & Clerical Grade 5 and above or Nursing & Midwifery Grade F and above or equivalent. The role must have included staff management responsibility.

June 2007

Other Information:

Downloads: [SHSCT rpa](#)

Instructions: [Instructions for Completing Application Form](#)

Health records Ward Clerk



Working together



Excellence



Openness & Honesty



Compassion



Quality Care - for you, with you

JOB DESCRIPTION

JOB TITLE	Ward Clerk
Grade	3
DEPARTMENT/LOCATION	Acute Wards in DHH
DIRECTORATE	Acute
REPORTS TO	Admin Manager
ACCOUNTABLE TO	Head of Health Records

Job Summary

The post holder will provide a high level clerical service to Consultants, Medical Staff and other Professionals at ward level and work as an integral part of the team. They will be expected to work under pressure without direct supervision and be able to manage own workload. As the post holder, he/she will be ward based as frontline personnel of the ward and expected to answer and handle phone calls. They must have knowledge working with computer and Microsoft Office. They will use Patient Centre.

KEY RESULT AREAS/MAIN RESPONSIBILITIES

1. General reception duties which include managing the door systems, meeting and greeting patients, relatives, members of staff and clergy; also checking in and redirecting patients.
2. Operate Patient Centre, computer database system, ensuring all information is accurate and up-to-date. Record manually the ward activity on daily ward return/reports. Record on Patient Centre all admissions, discharges and transfers on the ward, including reasons for delayed and complex discharges.
3. Have charts available on war, ensure they are tracked to the appropriate ward, filed in a tidy manner and fastened securely with an adequate supply of documentation prepared for ward rounds. Daily print and file ward rounds from Consultants in case notes.



4. Booking outpatient appointments. Use acquired knowledge and understanding of medical terminology (acquired through on-the-job training and experience) in order to book review appointments. Use judgement to book the appropriate appointment. Print and post out appointment letters to the patients and for short notice appointments, contact the patient directly by telephone. For some appointments liaise with secretaries (i.e. when no appointments available), Consultants (i.e. for difficult appointments) and booking centre (i.e. lifting suspended clinics).
5. Add patients to urgent outpatient waiting lists.
6. Cancel patient appointments and rebook.
7. Record all patient activity for ward attenders.
8. Book patients to Access Clinics, record attendances and book follow-up appointments.
9. Book interpreters for patients on ward and arrange interpreters for follow-up appointments.
10. Work with theatre scheduler to ensure that patients who have cancelled are re-instated.
11. Follow protocol and procedures to ensure the smooth administrative management of patients. This will require close liaison with Consultants, nursing staff, secretarial staff, medical records and relevant staff across the Trust.
12. Take initial receipt of all incoming correspondence – telephone, written and enquiries. Using initiative, prioritise urgency of response required and bring to the attention of medical and nursing staff when necessary.
13. Liaise with health records for case notes for new admissions on the ward. Preparation of case notes for planned elective admission. Check case notes have arrived on the ward and liaise with health records for missing charts and add-ons. Retrieve case notes for Ward Manager for complaints.
14. Go to various libraries in health records and the secretaries' offices to obtain case notes for next day admissions.
15. Split charts for ease of reference as per guidelines on splitting charts.
16. Deal with general enquiries regarding case note retrieval and storage issues and liaise with a variety of staff regarding same. Transfer of case notes to secretarial offices, health records and other departments after discharge.
17. Deal with telephone and face to face enquiries from all staff groups, patients (different cultures and languages, dementia, psychiatric), relatives and carers, providing non clinical information, directing and prioritising queries as appropriate to ensure efficiency and effectiveness.



18. Forward clinical correspondence, discharge letters and referrals to secretaries, booking centre, Consultants and Consultants in other Trusts including red flag referrals.
19. Provide induction and on-going training for new ward clerks within the directorate and monitor, giving feedback to the Line Manager in the first few months.
20. Check, order and maintain adequate supply of stationery as required by the ward.
21. Report faults to Estates/Maintenance Department and IT Department.
22. Inform appropriate GP by telephone if requested, send letter of death of patient on ward.
23. Book ambulance transport for patients on discharge or transfer.
24. Undertake a range of clerical duties including photocopying, scanning and laminating.
25. Update Immix/Flow Board daily.
26. Fill in Data Dispute Form for discrepancies of a patient's details.
27. Prioritise and manage own workload on a daily basis, escalating areas of concern to Line Manager as appropriate. Exercise judgement and use own initiative to provide non-clinical advice, information and guidance directly to patients and relatives.
28. Contact nursing home and prison services by telephone about outpatient review appointments, enabling them to arrange transport in a timely manner.
29. Fill in health insurance forms for patients to forward to Health Insurance Company and forward telephone queries from health insurance companies to Line Manager.
30. Issue travel expense forms, inpatient hospital certificates and car vouchers.
31. Liaise with appropriate members of staff to ensure smooth running of the department.
32. Keep mandatory training up-to-date.
33. Any other duties as may be assigned from time to time i.e. emergency cover for other wards when required.

GENERAL REQUIREMENTS

The post holder will be required to:



1. Ensure the Trust's policy on equality of opportunity is promoted through his/her own actions and those of any staff for whom he/she has responsibility.
2. Co-operate fully with the implementation of the Trust's Health and Safety arrangements, reporting any accidents/incidents/equipment defects to his/her manager, and maintaining a clean, uncluttered and safe environment for patients/clients, members of the public and staff.
3. Adhere at all times to all Trust policies/codes of conduct, including for example:
 - Smoke Free Policy
 - IT Security Policy and Code of Conduct
 - Standards of attendance, appearance and behaviour
4. Contribute to ensuring the highest standards of environmental cleanliness within your designated area of work.
5. Co-operate fully with regard to Trust policies and procedures relating to infection prevention and control.
6. All employees of the trust are legally responsible for all records held, created or used as part of their business within the Trust including patients/clients, corporate and administrative records whether paper-based or electronic and also including emails. All such records are public records and are accessible to the general public, with limited exception, under the Freedom of Information Act 2000 the Environmental Information Regulations 2004 and the Data Protection Acts 1998. Employees are required to be conversant with the Trusts policy and procedures on records management and to seek advice if in doubt.
7. Take responsibility for his/her own ongoing learning and development, including full participation in KSF Development reviews/appraisals, in order to maximise his/her potential and continue to meet the demands of the post.
8. Represent the Trust's commitment to providing the highest possible standard of service to patients/clients and members of the public, by treating all those with whom he/she comes into contact in the course of work, in a pleasant, courteous and respectful manner.
9. Understand that this post may evolve over time, and that this Job Description *will therefore be subject to review in the light of changing circumstances. Other duties of a similar nature and appropriate to the grade may be assigned from time to time.*

AfC banded April 18







Quality Care - for you, with you

PERSONNEL SPECIFICATION

JOB TITLE AND BAND

WARD CLERK BAND 3

DEPARTMENT / DIRECTORATE

Acute Services, Functional Support Services

HOURS

37.5hr

Mon-Sun & Public Holidays

December 2021

Notes to applicants:

1. You must clearly demonstrate on your application form under each question, how you meet the required criteria as failure to do so may result in you not being shortlisted. You should clearly demonstrate this for both the essential and desirable criteria.
2. Shortlisting will be carried out on the basis of the essential criteria set out in Section 1 below, using the information provided by you on your application form. Please note the Trust reserves the right to use any desirable criteria outlined in Section 3 at shortlisting. You must clearly demonstrate on your application form how you meet the desirable criteria.
3. Proof of qualifications and/or professional registration will be required if an offer of employment is made – if you are unable to provide this, the offer may be withdrawn.

DESIRABLE CRITERIA

SECTION 3: these will **ONLY** be used where it is necessary to introduce additional job related criteria to ensure files are manageable. You should therefore make it clear on your application form how you meet these criteria. Failure to do so may result in you not being shortlisted

Factor	Criteria	Method of Assessment
Experience	1. Experience in the use of Microsoft office Word	Shortlisting by Application Form
Qualifications	2. 4 GCSEs at Grades A-C including English Language or equivalent / higher qualification AND 1 years' experience in a clerical / administrative role OR 2 years' experience in a clerical / administrative role.	Shortlisting by Application Form

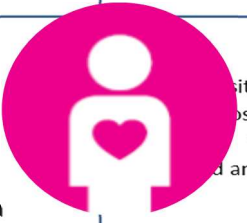
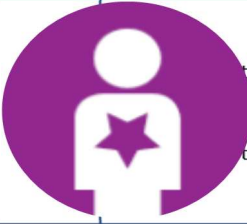

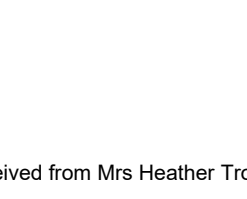


As part of the Recruitment & Selection process it may be necessary for the Trust to carry out an Enhanced Disclosure Check through Access NI before any appointment to this post can be confirmed.

Successful applicants may be required to attend for a Health Assessment

THE TRUST IS AN EQUAL OPPORTUNITIES EMPLOYER



Value	What does this mean?	What does this look like in practice? - Behaviours
Working Together	 <p>We work together for the benefit of people we care for and support. We work across Health and Social Care and with other external organisations and agencies, recognising that leadership is the responsibility of all.</p>	<ul style="list-style-type: none"> • I work with others and value everyone's contribution • I treat people with respect and dignity • I work as part of a team looking for opportunities to support and help people in both my own and other teams • I actively engage people on issues that affect them • I look for feedback and examples of good practice, aiming to improve where possible
Compassion	 <p>Positive, caring, respectful and understanding towards those we care for and support and our colleagues. We listen carefully to others to better understand and take action to help them and ourselves.</p>	<ul style="list-style-type: none"> • I am sensitive to the different needs and feelings of others and treat people with kindness • I learn from others by listening carefully to them • I look after my own health and well-being so that I can care for and support others
Excellence	 <p>A commitment to being the best we can be in our work, to improve and develop services to achieve the highest standards. We deliver safe, high-quality, person-centred care and support.</p>	<ul style="list-style-type: none"> • I put the people I care for and support at the centre of all I do to make a difference • I take responsibility for my decisions and actions • I commit to best practice and sharing learning, while continually learning and developing • I try to improve by asking 'could we do this better?'
Integrity & Honesty	 <p>Being open and honest with each other and act with integrity and courage.</p>	<ul style="list-style-type: none"> • I am open and honest in order to develop trusting relationships • I ask someone for help when needed • I speak up if I have concerns • I challenge inappropriate or unacceptable behaviour and practice

All staff are expected to display the HSC Values at all times



JOB DESCRIPTION

JOB TITLE	Health Records Clerk/Receptionist
BAND	Band 2
INITIAL LOCATION	Health Records Department Trustwide
REPORTS TO	Health Records Manager
ACCOUNTABLE TO	Head of Health Records

JOB SUMMARY

The postholder will be required to provide an efficient and effective clerical service using a range of technology within their allocated work area. The postholder will liaise with a range of people, including patients / clients, members of the public, staff within the Trust as well as external agencies to ensure an accurate, smooth running and comprehensive service.

KEY DUTIES / RESPONSIBILITIES

Operational Delivery

Carry out the full range of outpatient reception duties, to include meeting and greeting of patients and all associated computer work, eg making review appointments. Arrange appointments for patients which will include telephoning patients as required, issuing appointments letters, adding patients to the outpatient waiting list, recording reviews and all administrative processes involved in the making and follow up of appointments, including booking of interpreters and ambulances

Ensure the security and confidentiality of all patient records and information.

Retrieve and prepare clinical records for outpatient and inpatient attendances and other hospital activities.

Prepare casenotes for primary filing and assist in filing duties as required.

Ensure all information held both manually and electronically is recorded accurately, held securely and kept up to date.

Deal with general enquiries regarding casenote retrieval and storage issues and liaise with a variety of staff regarding these.

Operate the Patient Administration System (PAS), Patient Centre computer database and any other required information systems to assist in the performance of duties.

Use Microsoft Office packages as required to fulfill the duties of the post.

Assist in the maintenance of casenotes and casenote folders ensuring quality standards are met. File documentation as per departmental protocol, ensuring all files are in good order and fit for purpose.

General office duties to include filing, photocopying, scanning and dealing with incoming and outgoing post.

Support archiving and storage projects as directed.

Deal professionally with telephone/face to face enquiries from patients and staff within the Trust, those outside the Trust and members of the public, in accordance with customer service standards and Trust policies and procedures, and in line with Data Protection

Undertake any other ad hoc administrative and clerical duties, as may be required from time to time.

Comply with Infection control guidelines and the Trust dress code.

GENERAL REQUIREMENTS

The post holder will be required to:

1. Have a responsible attitude to confidentiality in relation to patient information.
2. Ensure the Trust's policy on equality of opportunity is promoted through his/her own actions and those of any staff for whom he/she has responsibility.
3. Co-operate fully with the implementation of the Trust's Health and Safety arrangements, reporting any accidents/incidents/equipment defects to his/her manager, and maintaining a clean, uncluttered and safe environment for patients/clients, members of the public and staff.

4. Adhere at all times to all Trust policies/codes of conduct, including for example:
 - a. Smoke Free policy
 - b. IT Security Policy and Code of Conduct
 - c. standards of attendance, appearance and behaviour
5. Contribute to ensuring the highest standards of environmental cleanliness within your designated area of work.
6. Co-operate fully with regard to Trust policies and procedures relating to infection prevention and control.
7. All employees of the trust are legally responsible for all records held, created or used as part of their business within the Trust including patients/clients, corporate and administrative records whether paper-based or electronic and also including emails. All such records are public records and are accessible to the general public, with limited exception, under the Freedom of Information act 2000 the Environmental Information Regulations 2004 and the Data Protection Acts 1998. Employees are required to be conversant with the Trusts policy and procedures on records management and to seek advice if in doubt.
8. Take responsibility for his/her own ongoing learning and development, including full participation in KSF Development Reviews/appraisals, in order to maximise his/her potential and continue to meet the demands of the post.
9. Represent the Trust's commitment to providing the highest possible standard of service to patients/clients and members of the public, by treating all those with whom he/she comes into contact in the course of work, in a pleasant, courteous and respectful manner.
10. Available / able to work any 5 days out of 7, which may include on-call / stand-by / sleep-in duties, shifts, night duty, weekends and Public Holidays if required immediately on appointment or at a later stage following commencement in response to changing demands of the service.
11. Understand that this post may evolve over time, and that this Job Description *will therefore be subject to review in the light of changing circumstances. Other duties of a similar nature and appropriate to the grade may be assigned from time to time.*
12. Ability to carry out a full range of duties including lifting and handling.

This Job Description will be subject to review in the light of changing

circumstances and is not intended to be rigid and inflexible but should be regarded as providing guidelines within which the individual works. Other duties of a similar nature and appropriate to the grade may be assigned from time to time.

It is a standard condition that all Trust staff may be required to serve at any location within the Trust's area, as needs of the service demand.

PERSONNEL SPECIFICATION

JOB TITLE: Administrative and Clerical Support Permanent Band 2

DIRECTORATE: Acute Services

SALARY: £16,943 - £18,309 pro rata per annum

HOURS: Full-Time / Part-Time

Ref No:

Notes to applicants:

1. *You must clearly demonstrate on your application form how you meet the required criteria – failure to do so may result in you not being shortlisted. You should clearly demonstrate this for both the essential and desirable criteria.*
2. *Proof of qualifications and/or professional registration will be required if an offer of employment is made – if you are unable to provide this, the offer may be withdrawn.*

ESSENTIAL CRITERIA – these are criteria all applicants **MUST** be able to demonstrate either at shortlisting or at interview. Applicants should therefore make it clear on their application form whether or not they meet these criteria. Failure to do so may result in you not being shortlisted. The stage in the process when the criteria will be measured is stated below;

QUALIFICATIONS / EXPERIENCE¹

1. 4 GCSEs at Grades A-C including English Language or equivalent / higher qualification **OR** 1 years' experience in a clerical / administrative role.
2. Experience in the use of at least one Microsoft office product or equivalent ie Word, Excel, Outlook, Access or Powerpoint.

¹Where an individual is unable to meet the Qualifications / Experience requirements in full for reasons related to their disability consideration may be given to offering a reasonable adjustment which must be detailed on the application form and must detail why the individual is unable to meet the stated criteria.

3. Hold a full current driving license valid for use in the UK and have access to a car on appointment²
4. Ability to work as part of a Team.

5. Ability to use own initiative.
6. Good organisational skills with an ability to prioritise own workload.
7. Effective Communications skills to meet the needs of the post in full.

As part of the Recruitment & Selection process it may be necessary for the Trust to carry out an Enhanced Disclosure Check through Access NI before any appointment to this post can be confirmed.

WE ARE AN EQUAL OPPORTUNITIES EMPLOYER

Successful applicants may be required to attend for a Health Assessment

All staff are required to comply with the Trusts Smoke Free Policy

²This criterion may be essential for some posts. Where this is the case it may be waived in the case of applicants who are prevented from driving due to a disability, providing the applicant can organise suitable alternative arrangements in order to meet the requirements of the post in full.

JOB DESCRIPTION

JOB TITLE: Nurse Specialist (Urology) – Grade H/G
LOCATION: Urology Department, Craigavon Area Hospital
REPORTS TO: Clinical Services Manager

JOB SUMMARY:

This post is seen as the next step in the overall development of Urology services within Craigavon Area Hospital Group Trust (CAHGT) and other sites. Working with other members of the Urology MDT, and with reference to the vision of service provision identified in the Strategy for Nursing and Midwifery, the Specialist Nurse will provide patient focused care through nurse-led services that will result in an improved response to patients' needs. Through a transparently audited approach the post holder will use his/her specialist nursing knowledge to provide care that is individualised, quality driven and holistic.

DUTIES AND RESPONSIBILITIES:**Clinical Responsibilities:**

At the Craigavon Area Hospital site and at other satellite sites, working as an integral member of the Urology MDT the post holder will:

- 1.1 Play a leading role in the on-going development of the services offered in the Urology Department at CAHGT and satellite sites to provide patient centred care and specialist advice and support to those requiring urological assessment.
- 1.2 Participate in the ongoing development and provision of existing and new nurse-led and nurse-led/doctor supported clinics, in both general and oncological urology.
- 1.3 Provide nurse led review services, via agreed protocols, for patients who have undergone treatment.
- 1.4 Assess the holistic needs of the patient group and act as a resource to all disciplines involved in the delivery of care to the client group.
- 1.5 Advise and communicate with other health professionals regarding the support and management of these patients, actively forming a link between hospital and community services.
- 1.6 Participate in local, regional and national networks within Urology to ensure standardisation of care and plan developments of services, incorporating regional and local policy needs.
- 1.7 Working with other members of the Urology team and the Practice Development Facilitators within CAHGT, participate in and/or lead relevant research to improve patient care, service delivery and practice development.
- 1.8 Acting as the patient advocate, function as a resource within the multiprofessional team to ensure patients are properly prepared for theatre via the provision of accurate information to enable patients to offer informed consent.
- 1.9 Communicate effectively with patients and families, assessing needs, providing relevant support, information, education, advice and counselling where and when necessary.
- 1.10 Maintain accurate and concise records of the clinical service provided.

Professional Responsibilities:

- 2.1 Adhere to Trust policies and procedures and promote practice that reflects the standards set in the NMC Code of Professional Conduct and Scope of Professional Practice.
- 2.2 Ensure that all treatment protocols are systematically and continually evaluated and prepare and develop new protocols as appropriate.
- 2.3 Work with others to maintain and develop an environment which facilitates the implementation of research and evidence informed practice.
- 2.4 Act as an effective role model and mentor for all registered nurses, students, junior medical staff and health care support workers and provide support and advice, as required.

Service Management

- 3.1 Work within the service standards in conjunction with the multiprofessional team and participate in the audit programme to monitor performance and outcomes.
- 3.2 Ensure Urology Specialist nursing services are provided within the agreed budgetary allocation, and to a standard which meets all contractual, professional and statutory specifications.
- 3.3 Seek the views of service users and relatives/carers to help ensure a patient focused service.
- 3.4 Work within Trust Policy regarding the investigation and resolution of complaints.
- 3.5 Contribute to modernisation of services and to the implementation of clinical and social care governance.
- 3.6 Provide an annual report of clinical activities.

Educational Role

- 4.1 Undertake a planned personal development programme identifying appropriate academic and experiential learning objectives, on an annual basis.
- 4.2 Identify, assess and facilitate the educational needs of the patient and relatives/carers.
- 4.3 Working with the Lecturer-Practitioner in Urology, participate in educational programmes for nurses and other health care disciplines as appropriate.
- 4.4 Be responsible for own educational needs in relation to Urology, the Nurse Specialists Role and identify and utilise appropriate resources to address these.

GENERAL REQUIREMENTS**The post holder must:**

- Carry out his/her duties with full regard to the Trust's Equal Opportunities Policy.
- Co-operate fully with the implementation of the Trust's Health and Safety arrangements and report any accidents/incidents, defects with work equipment or inadequate safety arrangements to his/her manager.
- Comply with the Trust's policy on smoking.
- Treat those whom he/she comes into contact with in the course of work, in a courteous manner.
- Accept that this job description will be subject to review in the light of changing circumstances and should be regarded as providing guidance within which the individual works rather than something which is rigid and inflexible.

April 2005

EMPLOYEE PROFILE

POST: Nurse Specialist (Urology) Grade H/G

DEPARTMENT: Urology Department

FACTORS	ESSENTIAL	DESIRABLE
Skills / Abilities	<p>Excellent verbal and written communication skills including effective interpersonal and motivational skills to influence, promote and manage change/innovation effectively.</p> <p>Ability to work within and provide effective leadership to the multi-disciplinary team while managing a busy caseload.</p> <p>Ability to work independently within protocols and, where appropriate, Patient Care Directives, providing agreed standards of patient care</p> <p>Computer literate</p> <p>Ability to actively engage in research and audit processes.</p> <p>Ability to teach colleagues and patients using a range of media</p>	<p>Staff management experience</p> <p>Experience in assessment of people with LUTS</p>
Experience	A minimum of 5 years' post-registration experience within the last 6, including 2 years' at Grade E or above caring for people with urological disorders.	
Qualifications / Training / Professional development	<p>Currently a Registered Nurse (Adult)</p> <p>Be a graduate of a nursing related degree programme or have a diploma in nursing and be currently undertaking (or willing to undertake) a nursing related degree.</p> <p>Have completed or be willing to undertake specialist nursing practice (Urology).***</p>	<p>Working towards a higher degree</p> <p>Evidence of experience in data collection</p> <p>Have undertaken formal study in counselling</p>
Knowledge	<p>Knowledge of:</p> <p>Current evidence of informed nursing practices and treatment modalities in both oncological and general aspects of urology care;</p> <p>National urological nursing agenda.</p>	
Other requirements/ work related circumstances	<p>Flexible with regards to working arrangements to meet the needs of the service</p> <p>Either a full current driving licence and access to a car or access to a form of transport which will permit the full requirements of the post to be met.</p>	

**** If the successful applicant has already completed specialist nursing practice (Urology) and a nursing related degree, she/he will commence at H Grade level. Otherwise, appointment will be made at G Grade and the postholder will be expected to undertake this course of study within 2 years of appointment, after which she/he will be regraded to H Grade.**

JOB INFORMATION

POST:	NURSE SPECIALISTS (UROLOGY) GRADE H/G – H505/30
LOCATION:	CRAIGAVON AREA HOSPITAL GROUP TRUST
REMUNERATION:	<p>The salary scales per annum (under review) are: G grade: £23,860 – £28,070, payable monthly, pro rata for part-time hours; H grade: £26,650 - £30,975, payable monthly, pro rata for part-time hours. Payment is made on the third last banking day of each month, by the Bank Automatic Clearing System (BACS).</p>
HOURS OF DUTY:	<p>There are 2 full-time posts available working 37½ hours per week exclusive of meal breaks, however, applications will also be considered from those interested in working part-time or job share hours.</p>
ANNUAL LEAVE:	<p>The annual leave year starts on 1 April. You will be entitled to 27 days annual holidays. If you join the Trust after 1 April you will be entitled to annual holidays proportional to your length of service in the remainder of the leave year. If you join the Trust on a part-time basis, the annual leave entitlement will be pro-rata to the number of days worked per week.</p>
STATUTORY LEAVE:	<p>The Trust recognises 10 statutory holidays each year.</p>
SUPERANNUATION:	<p>The post is superannuable. Unless you opt out of the scheme your remuneration will be subject to deduction of superannuation in accordance with the HPSS Superannuation Scheme (Currently 6% per annum).</p>
MEDICAL:	<p>You may be required to have a health assessment at the Occupational Health Department, to determine that you are fit to carry out the duties of the post.</p>
PROBATIONARY PERIOD:	<p>The appointment will be subject to a probationary period, during which time progress and attendance are monitored. Provided a satisfactory standard is achieved and maintained, the appointment will be confirmed.</p>
SICKNESS:	<p>Staff are required to comply with the Trust's Sickness and Absenteeism Policy and the reporting requirements and procedures contained within it. The Trust is committed to monitor and control absenteeism because of its responsibilities to patients and the organisation as a whole. It should be noted that you will be asked at interview about your sickness record for the previous 2 years and you will be required to give details of this to the interview panel.</p>
NOTICE:	<p>You may terminate your appointment by giving one month's notice in writing. Should notice have to be given to you it will be a period commensurate to length of service.</p>
CLOSING DATE:	<p>Completed application forms must be returned to the Human Resources Department – General Recruitment Section, Beechfield House, Craigavon Area Hospital, 68 Lurgan Road, Portadown, Co Armagh, BT63 5QQ no later than Tuesday, 26th April 2005.</p>

JOB DESCRIPTION

JOB TITLE: Nurse Specialist (Urology) – Grade H/G
LOCATION: Urology Department, Craigavon Area Hospital
REPORTS TO: Clinical Services Manager

JOB SUMMARY:

This post is seen as the next step in the overall development of Urology services within Craigavon Area Hospital Group Trust (CAHGT) and other sites. Working with other members of the Urology MDT, and with reference to the vision of service provision identified in the Strategy for Nursing and Midwifery, the Specialist Nurse will provide patient focused care through nurse-led services that will result in an improved response to patients' needs. Through a transparently audited approach the post holder will use his/her specialist nursing knowledge to provide care that is individualised, quality driven and holistic.

DUTIES AND RESPONSIBILITIES:**Clinical Responsibilities:**

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- 1.2 Participate in the ongoing development and provision of existing and new nurse-led and nurse-led/doctor supported clinics, in both general and oncological urology.
- 1.3 Provide nurse led review services, via agreed protocols, for patients who have undergone treatment.
- 1.4 Assess the holistic needs of the patient group and act as a resource to all disciplines involved in the delivery of care to the client group.
- 1.5 Advise and communicate with other health professionals regarding the support and management of these patients, actively forming a link between hospital and community services.
- 1.6 Participate in local, regional and national networks within Urology to ensure standardisation of care and plan developments of services, incorporating regional and local policy needs.
- 1.7 Working with other members of the Urology team and the Practice Development Facilitators within CAHGT, participate in and/or lead relevant research to improve patient care, service delivery and practice development.
- 1.8 Acting as the patient advocate, function as a resource within the multiprofessional team to ensure patients are properly prepared for theatre via the provision of accurate information to enable patients to offer informed consent.
- 1.9 Communicate effectively with patients and families, assessing needs, providing relevant support, information, education, advice and counselling where and when necessary.
- 1.10 Maintain accurate and concise records of the clinical service provided.

- 2.1 Adhere to Trust policies and procedures and promote practice that reflects the standards set in the NMC Code of Professional Conduct and Scope of Professional Practice.
- 2.2 Ensure that all treatment protocols are systematically and continually evaluated and prepare and develop new protocols as appropriate.
- 2.3 Work with others to maintain and develop an environment which facilitates the implementation of research and evidence informed practice.
- 2.4 Act as an effective role model and mentor for all registered nurses, students, junior medical staff and health care support workers and provide support and advice, as required.

Service Management

- 3.1 Work within the service standards in conjunction with the multiprofessional team and participate in the audit programme to monitor performance and outcomes.
- 3.2 Ensure Urology Specialist nursing services are provided within the agreed budgetary allocation, and to a standard which meets all contractual, professional and statutory specifications.
- 3.3 Seek the views of service users and relatives/carers to help ensure a patient focused service.
- 3.4 Work within Trust Policy regarding the investigation and resolution of complaints.
- 3.5 Contribute to modernisation of services and to the implementation of clinical and social care governance.
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Educational Role

- 4.1 Undertake a planned personal development programme identifying appropriate academic and experiential learning objectives, on an annual basis.
- 4.2 Identify, assess and facilitate the educational needs of the patient and relatives/carers.
- 4.3 Working with the Lecturer-Practitioner in Urology, participate in educational programmes for nurses and other health care disciplines as appropriate.
- 4.4 Be responsible for own educational needs in relation to Urology, the Nurse Specialists Role and identify and utilise appropriate resources to address these.

GENERAL REQUIREMENTS

The post holder must:

- Carry out his/her duties with full regard to the Trust's Equal Opportunities Policy.
- Co-operate fully with the implementation of the Trust's Health and Safety arrangements and report any accidents/incidents, defects with work equipment or inadequate safety arrangements to his/her manager.
- Comply with the Trust's policy on smoking.
- Treat those whom he/she comes into contact with in the course of work, in a courteous manner.
- Accept that this job description will be subject to review in the light of changing circumstances and should be regarded as providing guidance within which the individual works rather than something which is rigid and inflexible.

April 2005

EMPLOYEE PROFILE

POST

Nurse Specialist (Urology) Grade H/G

DEPARTMENT:

Urology Department

FACTORS	ESSENTIAL	DESIRABLE
Skills / Abilities	<p>Excellent verbal and written communication skills including effective interpersonal and motivational skills to influence, promote and manage change/innovation effectively.</p> <p>Ability to work within and provide effective leadership to the multi-disciplinary team while managing a busy caseload.</p> <p>Ability to work independently within protocols and, where appropriate, Patient Care Directives, providing agreed standards of patient care</p> <p>Computer literate</p> <p>Ability to actively engage in research and audit processes.</p> <p>Ability to teach colleagues and patients using a range of media</p>	<p>Staff management experience</p> <p>Experience in assessment of people with LUTS</p>
Experience	A minimum of 5 years' post-registration experience within the last 6, including 2 years' at Grade E or above caring for people with urological disorders.	
Qualifications / Training / Professional development	<p>Currently a Registered Nurse (Adult)</p> <p>Be a graduate of a nursing related degree programme or have a diploma in nursing and be currently undertaking (or willing to undertake) a nursing related degree.</p> <p>Have completed or be willing to undertake specialist nursing practice (Urology).***</p>	<p>Working towards a higher degree</p> <p>Evidence of experience in data collection</p> <p>Have undertaken formal study in counselling</p>
Knowledge	<p>Knowledge of:</p> <p>Current evidence of informed nursing practices and treatment modalities in both oncological and general aspects of urology care;</p> <p>National urological nursing agenda.</p>	
Other requirements/ work related circumstances	<p>Flexible with regards to working arrangements to meet the needs of the service</p> <p>Either a full current driving licence and access to a car or access to a form of transport which will permit the full requirements of the post to be met.</p>	

**** If the successful applicant has already completed specialist nursing practice (Urology) and a nursing related degree, she/he will commence at H Grade level. Otherwise, appointment will be made at G Grade and the postholder will be expected to undertake this course of study within 2 years of appointment, after which she/he will be regraded to H Grade.**

JOB INFORMATION

POST:	NURSE SPECIALISTS (UROLOGY) GRADE H/G – H505/30
LOCATION:	CRAIGAVON AREA HOSPITAL GROUP TRUST
REMUNERATION:	The salary scales per annum (under review) are: G grade: £23,860 – £28,070, payable monthly, pro rata for part-time hours; H grade: £26,650 - £30,975, payable monthly, pro rata for part-time hours. Payment is made on the third last banking day of each month, by the Bank Automatic Clearing System (BACS).
HOURS OF DUTY:	There are 2 full-time posts available working 37½ hours per week exclusive of meal breaks, however, applications will also be considered from those interested in working part-time or job share hours.
ANNUAL LEAVE:	The annual leave year starts on 1 April. You will be entitled to 27 days annual holidays. If you join the Trust after 1 April you will be entitled to annual holidays proportional to your length of service in the remainder of the leave year. If you join the Trust on a part-time basis, the annual leave entitlement will be pro-rata to the number of days worked per week.
STATUTORY LEAVE:	The Trust recognises 10 statutory holidays each year.
SUPERANNUATION:	The post is superannuable. Unless you opt out of the scheme your remuneration will be subject to deduction of superannuation in accordance with the HPSS Superannuation Scheme (Currently 6% per annum).
MEDICAL:	You may be required to have a health assessment at the Occupational Health Department, to determine that you are fit to carry out the duties of the post.
PROBATIONARY PERIOD:	The appointment will be subject to a probationary period, during which time progress and attendance are monitored. Provided a satisfactory standard is achieved and maintained, the appointment will be confirmed.
SICKNESS:	Staff are required to comply with the Trust's Sickness and Absenteeism Policy and the reporting requirements and procedures contained within it. The Trust is committed to monitor and control absenteeism because of its responsibilities to patients and the organisation as a whole. It should be noted that you will be asked at interview about your sickness record for the previous 2 years and you will be required to give details of this to the interview panel.
NOTICE:	You may terminate your appointment by giving one month's notice in writing. Should notice have to be given to you it will be a period commensurate to length of service.
CLOSING DATE:	Completed application forms must be returned to the Human Resources Department – General Recruitment Section, Beechfield House, Craigavon Area Hospital, 68 Lurgan Road, Portadown, Co Armagh, BT63 5QQ no later than Tuesday, 26th April 2005.

H500/25

CRAIGAVON AREA HOSPITAL GROUP TRUST**JOB DESCRIPTION**

JOB TITLE: RGN RSCN Grade 'E'
REPORTS TO: Department Manager
RESPONSIBLE TO: Outpatient Services Manager

JOB SUMMARY:

Principle duties of the post are:

- The assessment of care needs and the development, implementation and evaluation of programmes of care.
- To carry out all relevant forms of care without direct supervision and will be required to teach and supervise qualified or unqualified staff.
- Provide specialist nursing care, advice and support in the care of children.
- Participate in the teaching of specialist nursing skills which support a high standard of nursing care for children.

DUTIES AND RESPONSIBILITIES

1. Ensure that individualised nursing care is maintained and carried out to agreed standards set for Outpatient Services.
2. Participate in audit of clinical practice.
3. Co-operate with all members of the multidisciplinary team.
4. Provide specialist paediatric nursing care within Outpatient Services.
5. Maintain an awareness of clinical and professional developments in nursing and participate in Nursing Research.
6. Accept responsibility to improve his/her knowledge and professional competence.
7. Awareness of child protection issues within Outpatient Services.
8. Establish and maintain effective communication between paediatric ward staff and Outpatient Services and other disciplines dealing with children.

9. Contribute ideas and keep up-to-date with changes within the unit by attending department meetings.
10. Be professionally aware of changes in local and national paediatric policies and its implications for Outpatient Services.
11. Participate in the Off Duty/Annual Leave arrangements to ensure the department has adequate cover.
12. Ensure a safe environment for patient care and in absence of same communicate with appropriate department to take corrective action.
13. Adhere to **all** professional and Hospital Policies and Guidelines.
14. Take charge regularly of the department for designated shifts.
15. Participate in the induction and orientation of new staff.
16. Observe for any signs of ill health or stress factors in staff assigned to the Department and report same to Department Manager.
17. Provide support, guidance and counselling for junior staff.
18. Participate in the clinical training of qualified staff, students and nursing auxiliaries.
19. Attend In-Service study days, lectures and courses to comply with UKCC Policy and Trust Policies.

GENERAL REQUIREMENTS

The post holder must:

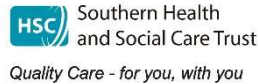
- Carry out his/her duties with full regard to the Trust's Equal Opportunities Policy.
- Co-operate fully with the implementation of the Trust's Health and Safety arrangements and report any accidents/incidents, defects with work equipment or inadequate safety arrangements to his/her manager.
- Comply with the Trust's policy on smoking.
- Treat those whom he/she comes into contact with in the course of work, in a courteous manner.
- Accept that this job description will be subject to review in the light of changing circumstances and should be regarded as providing guidance within which the individual works rather than something which is rigid and inflexible.

Mar.2000

CRAIGAVON AREA HOSPITAL GROUP TRUST**EMPLOYEE PROFILE****POST:** RGN RSCN Grade 'E'**DEPARTMENT/SPECIALTY:** Outpatient Services

FACTORS	ESSENTIAL	DESIRABLE
Skills/Abilities	<p>An ability to maintain and audit standards of care.</p> <p>To be innovative and progressive.</p> <p>Ability to teach.</p> <p>Ability to manage and lead a team.</p> <p>Ability to communicate effectively.</p> <p>Good interpersonal skills.</p> <p>Demonstrate an ability to acknowledge and access the differential needs of children and adults.</p>	
Experience	At least two years post registration experience.	Experience of working with both children and adults within Outpatient Services.
Qualifications/ Training, etc.	Currently on Part 1 or 12 and Part 8 or 15 of the UKCC "Live" Register.	
Knowledge	Conversant with current professional issues.	Knowledge of current relevant research.
Other Requirements/ Work Related Circumstances	Flexible with regard to working hours to facilitate the demands of the post.	

Mar.2000



JOB DESCRIPTION

JOB TITLE	Ward Sister/Charge Nurse
BAND	Band 7
DIRECTORATE	Acute Services
INITIAL LOCATION	Female Medical Ward, Daisy Hill Hospital
REPORTS TO	Lead Nurse, Medicine and Unscheduled Care
ACCOUNTABLE TO	Head of Service for Medicine and Unscheduled Care

JOB SUMMARY

The post holder is accountable for their ward/department and will:

- promote and monitor safe and effective practice
- enhance the patient/client experience
- provide effective leadership and management
- contribute to the delivery of the organisation's objectives

KEY DUTIES / RESPONSIBILITIES

The post holder will focus and lead on the following key areas, within the organisation's governance framework:

I. Ensure safe and effective practice

Professional, ethical and legal

1. Adhere to DHSSPS and NMC guidelines for practice requirements and standards, for example, safe handling, administration, storage and custody of medicinal products.
2. Adhere to Trust guidelines, policies and procedures.

3. Ensure that organisational goals are reflected in own and the nursing teams' objectives and in ward/department plans.
4. Contribute to the development of the Trust's policies and strategies, where appropriate.
5. Maintain own professional and personal development in accordance with the NMC Code (2008), standards and professional guidelines.
6. Establish and maintain relationships based on mutual respect communicating on a regular basis with the patient/client, relatives and carers in the provision of care and services.
7. Ensure appropriate systems are developed and operational to facilitate dissemination of information within the ward/department team.
8. Adhere to the Data Protection Act (1998).
9. Maintain effective records management ensuring all documentation written or electronic is managed as per HSC Trust and NMC (2009) guidelines.
10. Adhere to the Code of Conduct for HSC Managers, as per Human Resource policies and procedures. Ensure risk management arrangements are in place within the ward/department.

Evidence-based practice

11. Promote a culture of research and evidence-based practice within the ward/department to enhance person-centred care.
12. Ensure evidence-based care is provided to agreed standards within the ward/department.
13. Act as a change agent, developing clinically effective practice through the effective utilisation and integration of evidence.
14. Participate in developing, implementing and monitoring policies, procedures and protocols.
15. Create an environment which supports a culture of life-long learning and reflective practice for all staff.
16. Ensure systems and processes are in place to support effective mentoring of relevant staff.

Environment

17. Maintain a safe and clean environment for staff, patients/clients and visitors by ensuring compliance with legislation, policies and protocols including health and safety, healthcare associated infection, risk management and critical incident reporting.
18. Ensure staff awareness of environmental issues and take appropriate action as per HSC Trust policy.
19. Participate in the analysis, assessment and management of actual and potential risks to health and well-being.
20. Ensure safe and effective use of equipment as per HSC Trust policy.
21. Ensure near misses, incidents, accidents and faulty devices are recorded, reported, investigated and learning disseminated as per HSC Trust policy.
22. Maintain a Risk Register incorporating generic clinical and non-clinical risks in the ward/department as per HSC Trust policy.

Multi-professional working

23. Establish systems and processes to ensure effective communication and continuity of patient/client care, liaising with multi-disciplinary/multi-agency teams and community services.

II. Enhance the patient/client experience***Person-centred care***

24. Develop and maintain a culture of person-centred care within the ward/department.
25. Promote a caring environment where equality and diversity issues are respected and patients/clients and their carers are enabled to be partners in their care.
26. Develop strategies for communication between staff, patients/clients, relatives and their carers, showing awareness of barriers to understanding.
27. Facilitate communication between all members of the multi-disciplinary/multi-agency team, and across care settings.

Coordination of the patient/client journey

- 28. Ensure the safety and quality of the patient's/client's journey by effective planning and co-ordination of the episode of care, including the smooth transition to other settings.
- 29. Ensure effective admission/discharge planning with relevant multi-disciplinary and multi-agency teams as required.

Patient/client involvement

- 30. Identify opportunities for meaningful involvement of patients/clients and carers' in relation to the development of care and services.
- 31. Ensure effective systems are in place to gain patient/client and carers' feedback on their experience of care.
- 32. Ensure compliments and complaints are managed in line with HSC Trust policy including the dissemination of shared learning.

III. Provide effective leadership and management***Role model***

- 33. Act as a visible leader within the ward/department.
- 34. Provide leadership that enables professional decision making and effective team working.
- 35. Empower and enable staff to contribute to the delivery of high quality person-centred care.
- 36. Support clinical expertise of nurses/midwives within the ward/department by role modelling evidence-based person-centred care.

Develop team performance

- 37 Promote, develop and facilitate a learning culture within the ward/department.
- 38 Promote equality of opportunity for all, in accordance with HSC Trust Equality Opportunity Policy.
- 39 Lead and participate in annual staff appraisal/development review, ensuring effective implementation of the Knowledge and Skills Framework (DH, 2004).

- 40 Lead and participate in learning needs analysis and facilitate annual personal development plans for the nursing team.
- 41 Lead and participate in orientation and induction programmes for staff within the ward/department.
- 42 Lead, support and develop nursing health care support workers within the ward/department.
- 43 Promote a person-centred culture to facilitate good staff relationships and morale among staff.
- 44 Contribute to the education commissioning process for nursing staff.
- 45 Manage poor performance and practice of staff in line with HSC Trust policies.
- 46 Work in partnership with Higher Education Institute staff.
- 47 Ensure supervision and mentorship is embedded for pre and post registration students, registered nurses and health care support workers, as appropriate.

Manage the ward/department environment

- 48 Ensure appropriate delegation to nurses and health care support workers and monitoring of outcomes for effective care/service delivery.
- 49 Challenge appropriately and confidently where standards of care fall below that which the Ward Sister/Charge Nurse would expect.
- 50 Contribute to budget management within the ward/department, to ensure services are managed in accordance with yearly financial instructions.
- 51 Participate in multi-professional procurement processes to ensure appropriate selection of products which meet relevant quality and safety standards

Effective use of resources

- 52 Deliver a safe and effective service within allocated resources, ensuring the resources are used to maximum effect.
- 53 Monitor budgetary performance, develop and implement action plans, organise the necessary resources and monitor outcomes.

- 54 Adhere to financial policies and procedures, particularly Standing Financial Instructions, Authorisation Frameworks, Procurement Legislation and associated processes, and Prompt Payment Code.
- 55 Adhere to HSC Trust financial controls and fraud awareness principles (e.g. verification of authenticity / accuracy of the Staff-in-Post records).
- 56 Adhere to HSC Trust systems for effectively managing stock and safeguarding fixed assets.
- 57 Promote the principles of good governance and protects the ward/department from financial risk, particularly in respect of patient/client monies and property and charitable funds.
- 58 Display managerial and organisational skills to ensure that products required for patient/client care/treatment are procured in timely fashion and demonstrate value for money.
- 59 Show a commitment to effectively manage resources and achieve statutory financial targets.

IV. Contribute to the delivery of the organisation's objectives

Continuous quality and improvement

- 60 Promote a culture of continuous quality improvement through the use of audit, patient/client feedback and reflection on practice by self and other members of the team.

Service improvement, development and modernisation

- 61 Work in partnership with a range of clinicians and managers in the planning or development of own service promoting the involvement of patients/clients and carers.
- 62 Review processes /practices including those within the ward to support patients/clients to improve their own health and well-being.
- 63 Review processes/practices to ascertain if there are better ways of working within the ward/department to enhance patient/client care, service delivery and deliver required efficiencies.

Staff Management

- 64 Ensure nurses working in the ward/department are professionally qualified and registered with the NMC.
- 65 Ensure nurses working in the ward/department achieve compliance with statutory and mandatory training requirements.
- 66 Liaise with nursing managers and heads of nursing on all professional nursing issues.
- 67 Ensure processes are in place to manage sickness/absenteeism and take appropriate action in line with HSC Trust policies.
- 68 Promote the health and well-being of staff and observe for any signs of ill health or stress factors in staff assigned to the area and take appropriate action in line with HSC Trust policies and NMC guidelines.
- 69 Manage duty rotas/annual leave and study leave to ensure adequate nursing cover and appropriate skill mix.
- 70 Participate in the recruitment and selection of staff.

ENVIRONMENTAL CLEANLINESS

- 1. Take responsibility for ensuring the highest standards of environmental cleanliness within their designated area.
- 2. Take responsibility for ensuring that “departmental” audits are undertaken at the required frequency levels and leading the audits or delegating responsibility to an appropriate member of staff.

HUMAN RESOURCE MANAGEMENT RESPONSIBILITIES

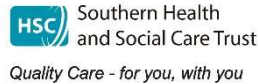
- 1. Review individually, at least annually, the performance of immediately subordinate staff, provides guidance on personal development requirements and advises on and initiates, where appropriate, further training.
- 2. Maintain staff relationships and morale amongst the staff reporting to him/her.
- 3. Review the organisation plan and establishment level of the service for which he/she is responsible to ensure that each is consistent with achieving objectives, and recommend change where appropriate.

4. Delegate appropriate responsibility and authority to the level of staff within his/her control consistent with effective decision making, while retaining overall responsibility and accountability for results.
5. Participate, as required, in the selection and appointment of staff reporting to him/her in accordance with procedures laid down by the Trust.
6. Take such action as may be necessary in disciplinary matters in accordance with procedures laid down by the Trust.

GENERAL REQUIREMENTS

The post holder will be required to:

1. Ensure the Trust's policy on equality of opportunity is promoted through his/her own actions and those of any staff for whom he/she has responsibility.
2. Co-operate fully with the implementation of the Trust's Health and Safety arrangements, reporting any accidents/incidents/equipment defects to his/her manager, and maintaining a clean, uncluttered and safe environment for patients/clients, members of the public and staff.
3. The HSC Code of Conduct for Employees sets out the standards of conduct expected of all staff in the Southern Health & Social Care Trust and outlines the standards of conduct and behaviours required during and after employment with the Trust. Professional staff are expected to also follow the code of conduct for their own professions.
4. Adhere at all times to all Trust policies/codes of conduct, including for example:
 - Smoke Free policy
 - IT Security Policy and Code of Conduct
 - standards of attendance, appearance and behaviour
5. Contribute to ensuring the highest standards of environmental cleanliness within your designated area of work.
6. Co-operate fully with regard to Trust policies and procedures relating to infection prevention and control.



7. All employees of the trust are legally responsible for all records held, created or used as part of their business within the Trust including patients/clients, corporate and administrative records whether paper-based or electronic and also including emails. All such records are public records and are accessible to the general public, with limited exception, under the Freedom of Information act 2000 the Environmental Information Regulations 2004 and the Data Protection Acts 1998. Employees are required to be conversant with the Trusts policy and procedures on records management and to seek advice if in doubt.
8. Take responsibility for his/her own ongoing learning and development, including full participation in KSF Development Reviews/appraisals, in order to maximise his/her potential and continue to meet the demands of the post.
9. Represent the Trust's commitment to providing the highest possible standard of service to patients/clients and members of the public, by treating all those with whom he/she comes into contact in the course of work, in a pleasant, courteous and respectful manner.
10. Available / able to work any 5 days out of 7 over the 24 hour period, which may include on-call / stand-by / sleep-in duties, shifts, night duty, weekends and Public Holidays if required immediately on appointment or at a later stage following commencement in response to changing demands of the service.

This post may evolve over time and this Job Description will therefore be subject to review in the light of changing circumstances and is not intended to be rigid and inflexible but should be regarded as providing guidelines within which the individual works. Other duties of a similar nature and appropriate to the grade may be assigned from time to time.

It is a standard condition that all Trust staff may be required to serve at any location within the Trust's area, as needs of the service demand.

PERSONNEL SPECIFICATION

JOB TITLE AND BAND Ward Sister/Charge Nurse (Band 7)

DEPARTMENT/DIRECTORATE Acute Services

SALARY £31,072 – £40,964 per annum pro rata

HOURS 37.5 hours per week

<Month & Year>

Notes to applicants:

1. *You must clearly demonstrate on your application form under each question, how you meet the required criteria as failure to do so may result in you not being shortlisted. You should clearly demonstrate this for both the essential and desirable criteria.*
2. *Shortlisting will be carried out on the basis of the essential criteria set out in Section 1 below, using the information provided by you on your application form. Please note the Trust reserves the right to use any desirable criteria outlined in Section 3 at shortlisting. You must clearly demonstrate on your application form how you meet the desirable criteria.*
3. *Proof of qualifications and/or professional registration will be required if an offer of employment is made – if you are unable to provide this, the offer may be withdrawn.*

ESSENTIAL CRITERIA

SECTION 1: The following are **ESSENTIAL** criteria which will initially be measured at shortlisting stage although may also be further explored during the interview/selection stage. You should therefore make it clear on your application form whether or not you meet these criteria. Failure to do so may result in you not being shortlisted. The stage in the process when the criteria will be measured is stated below.

Factor	Criteria	Method of Assessment
Experience	1. A Minimum of 5 years post-registration nursing experience	Shortlisting by Application Form
Qualifications/Registration	2. Registered nurse Part 1 of the NMC register 3. Hold a Diploma or relevant Professional qualification	Shortlisting by Application Form
Other	4. Hold a current full driving licence which is valid for use in the UK and have access to	Shortlisting by Application Form

	a car on appointment. This criterion will be waived in the case of applicants whose disability prohibits driving but who have access to a form of transport approved by the Trust which will permit them to carry out the duties of the post	
SECTION 2: The following are ESSENTIAL criteria which will be measured during the interview/ selection stage:		
Skills / Abilities	5. Ability to provide effective leadership to meet the needs of the post in full 6. Ability to effectively manage an operational team to ensure positive outcomes for patients/clients. 7. Provide evidence of maintaining and monitoring standards which have enhanced the patient/client experience of care. 8. Ability to influence and manage change, including the promotion of evidence based practice. 9. Have effective communication skills to meet the needs of the post in full. 10. Demonstrate ability to work effectively as part of a multi-disciplinary team	Interview / Test
Knowledge	11. Have sound knowledge of changing trends within health and social care 12. Be conversant with current professional issues in relation to nursing	Interview / Test

As part of the Recruitment & Selection process it may be necessary for the Trust to carry out an Enhanced Disclosure Check through Access NI before any appointment to this post can be confirmed.

THE TRUST IS AN EQUAL OPPORTUNITIES EMPLOYER

Successful applicants may be required to attend for a Health Assessment

All staff are required to comply with the Trust's Smoke Free Policy

88207059

Southern Health and Social Care Trust

Head of Health Records

Band 8A

Job Description

REPORTS TO: Assistant Director of Informatics

RESPONSIBLE TO: Director of Performance & Reform

JOB SUMMARY:

The role of the Head of Health Records is to ensure the provision of a comprehensive, efficient and effective health records service, for the Southern Health & Social Care Trust. He/she will provide a professional service and advice for health records.

The Head of Health Records will strategically plan for the future of the health records service and will lead the implementation of the patient electronic record in the future. He/she will be responsible for ensuring that the Health Records Departments across the Trust comply with Controls Assurance Standards, the Data Protection Act 1998, Subject Access requirements and the Access to Health Records Act (1990).

The Head of Health Records will implement Regional projects supporting shorter waiting times and improving access for patients e.g. partial booking and referral reform. He/she will lead the implementation of a single Referral Management Centre for the Southern Health and Social Care Trust and will have responsibility for performance of this function. The Head of Health Records will manage the budget for all staff employed in delivering this function.

The Head of Health Records will develop a culture of patient and client responsiveness, flexibility and quality. He/she will ensure that health records are available and accessible to meet the demands of patients on a 24-hour basis and will develop and implement a 'real time' service in the future. He/she will involve patients and clients in setting performance indicators and ensure regular feedback on progress.

As a member of the Informatics Senior Management Team, he/she will share corporate responsibility for achievement of Team objectives, be committed to multi-disciplinary working in driving forward a culture of change, innovation, development and modernisation.

DUTIES AND RESPONSIBILITIES:

1. Ensure the provision of a comprehensive, efficient and effective Health Records Service on a Trust-wide basis, within the resources available and in accordance with statutory requirements.
2. Provide leadership and professional advice on health records.
3. Plan and implement a single acute patient record for the Southern Health and Social Care Trust and, in the longer term, a patient electronic record.
4. Ensure that the Health Records Departments across the Trust comply with the Data Protection Act, Subject Access Requirements and the Access to Health Records Act (1990). Ensure compliance with Records Management Controls Assurance standards.
5. Represent the Trust on external or regional committees regarding Health Records.
6. Implement regional projects supporting shorter waiting times and improving access for patients e.g. partial booking and referral reform.
7. Lead the implementation of a single Referral Management Centre for the Southern Health and Social Care Trust and have responsibility for performance of this function.
8. Manage contracts with external storage supplies.
9. Improve data quality and data recording through the development and implementation of procedures to help staff understand the importance of their data input and get it right at the source of entry.
10. Develop a culture of client and patient responsiveness, flexibility and quality. Involve patients and clients in setting performance indicators and ensure regular feedback on progress.
11. Strive to develop new ways of working to improve effectiveness and efficiency in service delivery, such as 'bank' staff to provide essential cover during staff absenteeism.
12. Assist the Assistant Director of Informatics in developing and maintaining the Information Governance and Records Management Strategy, focused on improved clinical outcome and patient care.
13. Ensure that health and social care records are available and accessible to meet the demands of patients on a 24-hour basis and will develop and implement a 'real time' service in the future.

14. Develop, implement and review a Health Records Strategy, policies and procedures and monitor and evaluate implementation of these. This will ensure that all patient and client records are available for patient care at the appropriate time and place.
15. Ensure the provision of an efficient and effective outpatient referral, booking and reception service.
16. Responsible for ensuring compliance with Subject Access requests and that health & social care records are only given to authorised people. Ensure that all subject access requests are processed lawfully and fairly and in accordance with the Data Protection Act 1998, taking legal advice when required. The postholder will also have to deal with patients and relatives who have subject access requests and are dissatisfied with the outcome.
17. Manage and delegate the work of the records departments ensuring that duties are carried out to the required standard and within agreed deadlines.
18. Demonstrate strategic thinking in order to enable delivery of future changes to the service against the e-Health agenda. The postholder will play a leading role in the strategic planning and development of the electronic patient health record.
19. Plan and facilitate changes in workload, e.g. waiting list initiatives, clinical audit and research, peripheral clinics.
20. Keep abreast of the increasing legislative issues affecting the service and ensure that measures are devised and implemented and staff briefed accordingly across the diverse number of sites.
21. Develop and maintain working relationships with other colleagues to ensure achievement and objectives and effective team working. The postholder has the freedom to adapt, devise and implement policies and procedures regarding the health records service. If these policies or procedures affect other departments, this must be carried out in partnership with the other heads of service.

GENERAL MANAGEMENT RESPONSIBILITIES

- Participate in the Trust's Staff Development and Performance Review Scheme. Review individually, on a regular basis, the performance of immediately subordinate staff. Provide guidance on personal development requirements and advice on and initiate, where appropriate, further training.
- Maintain good staff relationships and morale amongst the staff reporting to him/her.

- Delegate appropriate responsibility and authority to the level of staff within his/her control consistent with effective decision making whilst retaining responsibility and accountability for results.
- Participate as required in the selection and appointment of staff reporting to him/her in accordance with procedures laid down by the Trust.
- Take such action as may be necessary in disciplinary matters in accordance with procedures laid down by the Trust.
- Promote the Trust's policy on equality of opportunity through his/her own actions and ensure that this policy is adhered to by staff for whom he/she has responsibility.

This job description is subject to review in the light of changing circumstances and is not intended to be rigid and inflexible but should be regarded as providing guidelines within which the post holder works. Other duties of a similar nature and appropriate to the grade may be assigned from time to time by the Director.

GENERAL RESPONSIBILITIES

Employees of the Trust will be required to promote and support the mission and vision of the service for which they are responsible and:

- At all times provide a caring service and to treat those with whom they come into contact in a courteous and respectful manner.
- Demonstrate their commitment by their regular attendance and the efficient completion of tasks allocated to them.
- Carry out their duties and responsibilities in compliance with health and safety policy and statutory regulations.
- Adhere to equal opportunities policy throughout the course of their employment.
- Ensure the ongoing confidence of the public in service provision.
- Comply with the HPSS code of conduct.

RECORDS MANAGEMENT

The post holder will be responsible to the Chief Executive for all records held, created or used as part of their business including corporate and administrative records whether paper-based or electronic and also including e-mails. All such

records are public records and are accessible to the general public, with limited exceptions, under the Freedom of Information Act 2000, the Environment Information Regulations 2004 and the Data Protection Act 1998.

December 2007

SOUTHERN HEALTH AND SOCIAL SERVICES TRUST**PERSONNEL SPECIFICATION****Head of Health Records****Knowledge, skills and experience required:**

Applicants must provide evidence by the closing date for application that they are working in a substantive post in the HPSS or an organisation affected by RPA (details of RPA affected organisations are included at pages 26 – 30 of the Candidate Information Booklet) and have:

- a relevant degree or professional qualification in Records Management or Business/Management and have at least 2 years experience working in a senior role* in records management.

OR

Have at least 4 years experience working in a senior role* in records management.

AND

- have delivered against challenging performance objectives for a minimum of 2 years in the last 6 years meeting a range of key targets and making significant improvements**
- excellent communication and interpersonal skills with a proven track record of having worked with a diverse range of stakeholders, both internal and external to the organisation for a minimum of 2 years in the last 6 years
- a proven track record of people management and organisational skills for a minimum of 2 years in the last 6 years.
- In depth knowledge of HPSS records management and legislation affecting the Health Records function.
- be prepared to undertake a Diploma in Records Management within 12 months of taking up post.
- a full current driving licence with access to a car or access to a form of transport to meet the mobility needs of the post.

SHORTLISTING

A shortlist of candidates for interview will be prepared on the basis of the information contained in the application form. It is therefore essential that all applicants demonstrate through their application how and to what extent their experience and qualities are relevant to this post and the extent to which they satisfy each criterion specified.

Candidates who are short-listed for interview will need to demonstrate at interview that they have the required competencies to be effective in this leadership role. The

competencies concerned are given in the NHS Leadership Qualities Framework, details of which can be accessed at the web-site: nhsleadershipqualities.nhs.uk
Particular attention will be given to the following:

- Self Belief
- Self Management
- Seizing the future
- Drive for results
- Leading change through people
- Holding to account
- Effective and strategic influencing

The following additional clarification is provided:

* "senior role" is defined as experience gained working at a minimum level of Admin and Clerical Grade 6 or equivalent.

** "significant" is defined as contributing directly to key corporate objectives of the organisation.

December 2007

**Southern Health and Social Care Trust
Assistant Director of Acute Functional and
Support Services
Band 8B**

Job Description

JOB SUMMARY

The jobholder will be responsible to the Director of Acute Services for the delivery of high quality support services to patients in the Trust's acute hospital sites i.e. Craigavon Area Hospital, Daisy Hill Hospital and other settings as appropriate. As the divisional assistant director, he/she will oversee the operational management of a range of functional and support services which will include hospital administration, laundry, facilities management, telephony, CSSD, catering, health and safety and mortuary services. He/She will collaborate closely with senior colleagues and clinicians to implement the objectives of the Trust's Delivery Plan and ensure effective team working. He/She will provide clear leadership to all staff in the division and will be responsible for effective financial management and the efficient use of all resources. The jobholder will also support the Director of Acute Services with long term planning and service reform initiatives.

As an Assistant Director, the jobholder will be a member of the directorate's senior management team and will therefore contribute to policy development in the directorate and the achievement of its overall objectives.

KEY RESULT AREAS

Service Delivery

- lead teams of staff in functional and support services and oversee the co-ordination of all processes to facilitate the delivery of high quality and equitable care to patients in the Trust's acute hospitals.
- ensure all support and functional services are delivered in accordance with best value principles and Trust service priorities with a particular emphasis on those relating to patient/visitor safety and user experience.
- establish effective working relationships with other senior staff in the Trust's community based settings to ensure the effective use of Trust resources.
- ensure effective engagement with patient user groups so as to enable their input to improved facilities for patients and their families.

Quality and Governance

- ensure that the needs of patients and their families are at the core of how all support services are delivered and are in accordance with DHSSPS *Quality Standards for Health and Social Care* and other relevant requirements.
- ensure high standards of governance to include compliance with controls assurance standards, the assessment and management of risk and the implementation of the DHSSPS's *Safety First* framework.
- ensure all support services comply with regulatory and requisite standards.
- work closely with senior colleagues to ensure high standards of ambience and environmental cleanliness in the hospital.
- ensure all recommendations from the RQIA and other regulatory bodies are implemented within requisite timescales.
- ensure the management of complaints within the division comply with HPSS and Trust complaints procedures and are underpinned by transparency and a culture of continuous improvement.
- lead on the implementation of quality initiatives such as Investors in People and Charter Standards for support services.

Service Planning and Development

- promote innovation and change to underpin the modernisation of the hospital's support services and oversee the implementation of associated initiatives.
- work closely with relevant stakeholders to secure their commitment and involvement in the development and implementation of planning initiatives and service reforms.
- liaise closely with senior planning and estates staff on minor works and capital development initiatives and ensure adherence to targets set by the HSSA and the Trust's corporate and delivery plans.
- act as a member of the directorate's senior management team and contribute to its policy development processes.
- represent the division and/or directorate in Trust and/or regional planning teams as appropriate.

Financial and Resource Management

- responsible for the management of the division's budget and the meeting of all financial targets by each service.
- ensure the effective implementation of all Trust financial policies and procedures in the division which will include ensuring the safe custody of patients' property and accounts and the use of endowments and gifts.

- ensure the effective management, use and maintenance of all physical assets in the division.

People Management

- provide clear leadership to staff within the division and ensure all services have a highly skilled, flexible and motivated workforce.
- work closely with senior human resources staff to take forward the development and implementation of workforce planning and modernisation initiatives.
- ensure that management structures and practices in the division support a culture of effective team working, continuous improvement and innovation.
- ensure the effective implementation of all Trust people management policies in the division and the achievement of all relevant targets such as relating to the management of sickness and absenteeism, turnover etc.
- ensure the effective management of staff health and safety and support in the division.

Information Management

- ensure the effective implementation of all Trust information management policies and procedures in the division.
- ensure the division's systems and procedures for the management and storage of information meet internal and external reporting requirements.

Corporate Responsibilities

- develop and maintain working relationships with other directorate colleagues to ensure achievement of Trust objectives.
- establish collaborative relationships and networks with external stakeholders in the public, private and voluntary sectors to ensure the Trust effectively discharges its functions.
- contribute to the Trust's overall corporate governance processes to ensure the development of an integrated governance framework for the Trust that assures safe and effective care for patients and clients and complies with public sector values and codes of conduct, operations and accountability.
- adhere to the Trust's corporate planning, policy and decision making processes as a member of the directorate's senior management team and ensure the Trust's objectives and decisions are effectively communicated.
- lead by example in practising the highest standards of conduct in accordance with the Code of Conduct for HPSS Managers.

General Management Responsibilities

- participate in the Trust's Staff Development and Performance Review Scheme. Review individually on a regular basis the performance of immediately subordinate staff. Provide guidance on personal development requirements and advise on and initiate, where appropriate, further training.
- ensure that the review of performance identified above is performed for all levels of staff within the Trust in accordance with the Trust Board's policy.
- maintain good staff relationships and morale amongst the staff reporting to him/her.
- where appropriate, review the organisational plan and establishment levels and ensure that each is consistent with achieving objectives and recommend change where appropriate.
- delegate appropriate responsibility and authority to the level of staff within his/her control consistent with effective decision making whilst retaining responsibility and accountability for results.
- participate as required in the selection and appointment of staff reporting to him/her in accordance with procedures laid down by the Trust.
- take such action as may be necessary in disciplinary matters in accordance with procedures laid down by the Trust.
- promote the Trust's policy on equality of opportunity through his/her own actions and ensure that this policy is adhered to by staff for whom he/she has responsibility.

This job description is subject to review in the light of changing circumstances and is not intended to be rigid and inflexible but should be regarded as providing guidelines within which the Assistant Director of Functional and Support Services works. Other duties of a similar nature and appropriate to the grade may be assigned from time to time by the Director of Acute Services.

GENERAL RESPONSIBILITIES

Employees of the Trust will be required to promote and support the mission and vision of the service for which they are responsible and:

- at all times provide a caring service and to treat those with whom they come into contact in a courteous and respectful manner.
- demonstrate their commitment by their regular attendance and the efficient completion of all tasks allocated to them.
- comply with the Trust's No Smoking Policy.
- carry out their duties and responsibilities in compliance with health and safety policy and statutory regulations.

- adhere to equal opportunities policy throughout the course of their employment.
- ensure the ongoing confidence of the public in service provision.
- comply with the HPSS code of conduct.

March 2007

Southern Health and Social Care Trust

Assistant Director of Functional and Support Services

Personnel Specification

Knowledge, skills and experience required:

Applicants must provide evidence by the closing date for application that they are a permanent employee of either Armagh and Dungannon, Craigavon Area Hospital Group Trust, Craigavon and Banbridge Community HSS Trust or Newry and Mourne HSS Trust and have:

- university degree or relevant professional qualification and worked for at least 2 years in a senior management role in a major complex organisation.

OR

- have worked for at least 5 years in a senior management role in a major complex organisation.

AND

- delivered against challenging performance management programmes for a minimum of 2 years in the last 6 years meeting a full range of key targets and making significant improvements.
- worked with a diverse range of stakeholders, internal and external to the organisation, to achieve successful outcomes for a minimum of 2 years in the last 6 years.
- a proven track record of people management, governance and organisational skills for a minimum of 2 years in the last 6 years.
- a full current driving licence with access to a car or access to a form of transport to meet the mobility needs of the post.

SHORTLISTING

A shortlist of candidates for interview will be prepared on the basis of the information contained in the application form. It is therefore essential that all applicants demonstrate through their application how and to what extent their experience and qualities are relevant to this post and the extent to which they satisfy each criterion specified. Candidates who are short-listed for interview will need to demonstrate at interview that they have the required competencies to be effective in this leadership role. The

competencies concerned are given in the NHS Leadership Qualities Framework. Particular attention will be given to the following:

- Self Belief
- Self Management
- Seizing the future
- Drive for results
- Leading change through people
- Holding to account
- Effective and strategic influencing

The following additional clarification is provided:

“senior management” is defined as experience gained at Director, Assistant Director or equivalent to mean reporting directly to a Director.

“major complex organisation” is defined as one with at least 200 staff or an annual budget of at least £50 million and involving having to meet a wide range of objectives requiring a high degree of co-ordination with a range of stakeholders;

“significant” is defined as contributing directly to key corporate objectives of the organisation.

March 2007

SOUTHERN HEALTH & SOCIAL CARE TRUST

PERSONNEL SPECIFICATION

RECORDS MANAGER

BAND 6

Applicants must:

- Be currently affected by RPA, and either
- Hold a substantive post at a minimum of Band *

OR

Hold a substantive post at a minimum of Band and be part of the P&R Pool.

*Staff who have not had their Agenda for Change Banding confirmed must be of an equivalent Grade to Band

Knowledge, skills and experience required:

Applications must provide evidence by the closing date for application that they are a permanent employee of the Southern Health and Social Care trust and have:

- A relevant degree or professional qualification in Records/ Information/ Business Management or a related field and two years working in records/information management

OR

- 4 years experience working in a records/information management environment

AND

- In depth knowledge of HPSS records management and information governance including FOI and DPA
- Excellent interpersonal and communications skills

- Excellent skills in drafting documents and in presentation of material
- The ability to initiate work activities and to work without supervision
- A proven track record of effective people and work management skills
- The ability to work to tight deadlines under pressure
- Experience in using desktop applications including email, word-processing, spreadsheets and presentational material
- Hold a full current driving licence with access to a car or access to a form of transport to meet the mobility needs of the post.
- Be prepared to undertake a Diploma in Records Management within 12 months of taking up post.

SOUTHERN HEALTH & SOCIAL CARE TRUST**JOB DESCRIPTION**

Job Title: Referral & Booking Centre Manager (1 post)

Band: *Band 6*

Reports to: Head of Health Records

Responsible to: Director of Performance & Reform

Location: Craigavon Area Hospital

JOB PURPOSE

The postholder will be responsible to the Head of Health Records for the management of the administration of all out-patient registration and appointments for the Southern Trust. In doing so, the postholder must meet Government booking and waiting times targets for Outpatients.

This service is currently provided across 6 locations in the Southern Trust. This postholder will play a **lead** role in centralising this service to a single unit on the Craigavon Area Hospital site in April/May 2008, combining all call centres of hospitals within the Trust. The postholder will lead discussions with the relevant stakeholders and facilitate the planning, co-ordination and delivery of a centralised service.

The postholder will have responsibility for the Patient Booking Team and will ensure that all new patient referrals are received in the Contact Centre and booked for their first appointment within the 13 week guidelines set.

The postholder will fully implement DHSSPS Elective Access Reform Targets, including Access Protocols, which will ensure that all referral letters are registered on the day of receipt, graded by Clinicians within 4 days and patients are offered a range of appointments within 6 weeks of target appointment times (maximum wait of 13 weeks). The postholder will also manage appointments for non-urgent (routine) review patients.

The postholder will also assist with the implementation of a 7 day week, 12 hour day contact centre to improve patient access. The postholder will also assist with the implementation of appropriate telephony systems to monitor response times and customer service. The postholder will report on this to the Head of Health Records and will recommend and take any corrective action required to improve services to patients.

JOB DIMENSIONS

The postholders will be responsible for the management of the following staff:-

3 Supervisors (Band 4)
30 (approx) Booking Co-ordinators (Band 2)

Managerial responsibility for appropriate administration of approximately 100,000 new outpatient referrals per annum and 168,000 review appointments (total 268,000 outpatient appointments).

PRIMARY DUTIES & KEY RESULT AREAS

- i. Effective management of the departmental team; agreeing work areas, objectives and undertaking regular appraisal. Implement, develop and monitor outpatient booking processes to ensure maximum efficiency, effectiveness and understanding.
- ii. To manage all aspects of the contact centre service, including referrals, registration and partial booking.
- iii. To ensure all telephone communication with patients and referrers is conducted in a courteous, helpful and timely manner, developing protocols for staff where necessary.
- iv. To ensure appropriate systems and processes are in place to meet Government booking and waiting times targets for Outpatients.
- v. Responsible for monitoring and maintaining agreed Trust standards for out patient booking, for example PTLs, customer service and response, timeliness of patient registration and booking.
- vi. To implement, review and revise Contact Centre policies and procedures e.g. escalation policy and access protocols and to monitor compliance;
- viii. To liaise with Clinicians and other managers to rectify underperformance against targets and compliance with Policies and Procedures e.g. notification of Consultant Annual Leave, 4 day turnaround in grading referrals;
- ix. To liaise continuously and effectively with Directorate Performance Managers, general managers and clinicians, to manage the boundaries and ensure that services are delivered in partnership.
- x. To regularly assess the training needs of staff and develop and provide training programmes appropriate to identified needs in order to maintain standards and enable staff to respond to service changes;
- xi. To liaise and communicate with GPs, Practice Managers and other referral agents, to address issues such as missing referral data, which can affect the efficiency of the service.
- xii. To ensure that patient data held on PAS is validated and updated appropriately e.g. changes to patient details, address, contact details etc.

- xi. To assist with the population and accurate use of the H&C number to improve accuracy of patient data and work towards a single patient electronic record.
- xii. To improve efficiency and effectiveness through the recommendation/implementation of technology, including responsibility for ongoing development and implementation of ERMS and to ensure that staff are appropriately trained on any new technology implemented.
- xii. To liaise and work with the Trust's Head of Corporate Records on security and confidentiality of patient identifiable information;
- xiii. To ensure that the function of the Contact Centre Team assists with other organisational objectives in other Directorates, such as 'Red flagging' cancer patients to ensure access targets in other areas.
- xiv. To assess the need for support staff for the Booking Centre Service;
- xv. To make recommendations and provide reports on progress and improvements in respect of the Contact Centre, to the Head of Health Records and Assistant Director of Informatics.
- xvi. To gather Contact Centre statistics and use this information to improve performance.
- xvii. To assist with the implementation of a 7 day week, 12 hour day contact centre to improve patient access.
- xviii. To assist with the implementation of appropriate telephony systems to monitor response times and customer service.
- xix. To assist with centralising the Contact Centre to a single unit on the Craigavon Area Hospital site in April/May 2008, combining all call centres of hospitals within the Trust.
- xx. To monitor DNA rates and report these to the Head of Health Records on a monthly basis.
- xxi. To review availability of appointments alongside waiting lists and PTLs and maximise the use of clinic capacity to achieve waiting list targets.
- xxii. To escalate appropriate issues to the Head of Health Records, Head of Outpatients and Head of Informatics, when required, to ensure no breaches against Government outpatient waiting list targets.
- xxiii. To implement policies which ensure zero tolerance on 'Booking Beyond Breach' within the call centre.

- xxiv. To ensure that there is a manual or electronic trail for all referral letters leaving the Department and to have a recall/BF system in place to mitigate the risk of any missing letters which could compromise patient safety and breach waiting list targets.

**JOB DESCRIPTION**

JOB TITLE	Lead Nurse = Surgery & Elective care - Acute Services (Temporary for 6 months initially)
BAND	8A
DIRECTORATE	Acute Services
INITIAL LOCATION	Craigavon Area Hospital
REPORTS TO	Heads of Service - Surgery & Elective Care
ACCOUNTABLE TO	Assistant Director of Acute Services – Surgery & Elective Care

JOB SUMMARY

The Lead Nurse for Surgery & Elective Care is responsible for professional nurse leadership and standards of nursing practice throughout this area of responsibility.

They will take the lead in supporting and developing nursing staff who work in the area of Surgery & Elective Care to ensure the delivery of high quality patient centered services, promoting and establishing innovative nursing practice.

They will empower nursing staff at all levels and promote an ethos of continuous development to deliver high quality Surgery & Elective Care Services for patients.

They will ensure that staff are fully engaged in the process of change management and in particular, that clinicians and multi-disciplinary professionals are fully involved at the forefront of service improvement initiatives.

They will represent Surgery & Elective Care Services within the Acute Sector and work in partnership with the Heads of Service for Surgery & Elective Care Services to deliver high quality services for patients.

KEY DUTIES / RESPONSIBILITIES**Service Delivery**

1. Lead and develop excellence in patient care through practice development and continuous review of evidence based clinical standards.
2. Review clinical practices ensuring compliance with clinical governance structures.
3. Create a strong patient focused team of nurses that challenges organisational and professional barriers.
4. Assist the Heads of Service with the achievement of access, governance and finance targets.
5. Participate in clinical and professional networks across acute hospital sites within the Trust.
6. Provide advice, guidance, support and professional leadership to nurses demonstrating a responsible attitude in order to promote confidence in the service within own clinical area.
7. Be highly visible, accessible and approachable to nursing staff so that open and honest communication channels are created and effective assessments of care delivery can be undertaken.
8. Lead the monitoring of clinical standards including observations of care when areas of concern are identified.
9. Take a lead on benchmarking services, ensuring that objective assessment is undertaken and action plans are developed which effectively improves patient care.
10. Ensure that clinical practice is evidence based and the clinical guidelines are developed and implemented taking into account the scope of practice within the clinical areas.
11. Ensure nurses have a clear understanding of the care and environmental standards they are expected to maintain and will take prompt action to rectify poor performance.
12. Develop a culture that is flexible and positive to change, where nurses feel valued and where opportunities are actively created for individuals to maximize their potential and excel.
13. Promote a learning environment for nurses, ensuring that the education, training, development and support needs of nurses are robust.

14. Critically assess skill mix and explore opportunity to create new roles within financial constraints.
15. Ensure Ward managers, nurses and specialist nurses are supported in their decision-making and are responsible for leading and managing their areas of clinical responsibility.
16. Ensure the achievement of excellent quality of care, which achieves a high level of patient satisfaction.
17. Support the process for assessing patient satisfaction and help implement actions in the light of patient feedback.
18. Act on own initiative and discretion and ensure that nursing resources are effectively managed, ensuring the nursing workforce is fit for purpose and meets the need of the service and patients, identifying priorities as necessary and adjusting the skill mix as required.
19. Act as mentor/coach to enhance the performance and capability of nurses through formal and informal interactions, provide constructive feedback to nurses and support and enable them to develop increased skills and ability.
20. Lead the development and implementation of professional policies related to the Surgery & Elective Care specialty.
21. Liaise closely with senior nursing staff to develop training needs analysis and the annual post registration commissioning plan.
22. Be responsible for ensuring implementation and evaluation of the agreed education commissioning programme.
23. To develop and implement an annual nursing workforce plan for Surgery & Elective Care within the Directorate.
24. Monitor the implementation of the Trusts Nurse Agency protocol.
25. In conjunction with the Heads of Service monitor the use of agency nurses and bank nurses and ensure that the Trust policies aimed at reducing expenditure are implemented.
26. Ensure systems are in place in the Directorate to ensure that all nurses have current registration with NMC.

Quality

1. Work to foster and develop an environment where nurses are valued and working within the NMC (2000) Code of Professional Conduct including effective record keeping and documentation in line with NMC Guidelines.

2. Ensure staff keep up to date with current developments regarding patient care.
3. Ensure nurses maintain confidentiality at all times, including the storage of records and the transfer of verbal and written information.
4. Take personal responsibility of own professional growth and development.
5. Ensure effective communication systems are in place to support care and programmes of care pathways.
6. In conjunction with Department Managers, lead the effective implementation of clinical supervision framework and preceptor ship programmes for nursing staff.
7. Be a good role model for nurses, inspiring nurses with their vision and value.
8. Assist the Heads of Service to ensure that practice and service development is underpinned by the most up to date evidence and research.
9. Ensure high standards of governance are met for all areas of responsibility ensure that systems are in place to identify and minimise the exposure to risk
10. Working with nurses, lead innovation and change to underpin modernisation, within remit of responsibility.
11. Establish and maintain clear systems and processes for accountability for nurses.
12. Monitor and support the use of appropriate policies, guidelines, and protocols for staff, reviewing and monitoring compliance. Work with Consultant Colleagues to ensure that all clinical incidents are reviewed, an action plan completed and that learning is disseminated throughout the division.
13. Assist the Heads of Service and Department Managers with co-ordinating the response to complaints within your remit prior to submission through line management to the Assistant Director of Surgery & Elective Care Services.
14. Review nursing issues arising from complaints about services provided ensuring that appropriate action is taken.
15. Support public involvement of users and carers in the planning of services within your remit of responsibility.

16. Work within the infection control team and clinical colleagues to monitor infection control rates, and take forward these actions and changes as necessary to reduce infection incidents.
17. Participate in quality initiatives such as Investors in People.

Strategic Planning and Development

1. Support the Heads of Service with the development of the strategic plan for the directorate of Surgery & Elective Care, in line with regional strategies, Ministerial and HSSA priorities.
2. Contribute to the strategic direction of the Trust and to the achievement of corporate objectives as appropriate.
3. Work with members of relevant teams on the innovative development of new and existing services.
4. Challenge the status quo in the planning and delivery of services.

Financial and Resource Management

1. Assist in the management of services and budget and ensure financial targets are met.
2. Develop and promote staff understanding of the financial requirements in order to ensure opportunity to maximize income generation potential in the delivery of the Directorate services.
3. Assist to maintain the financial viability with the Directorate.
4. Deliver all services within remit of responsibility within financial balance.
5. Assist with identification of cash releasing schemes and meet financial savings as outlined by Assistant Director of Surgery & Elective Care Services.
6. Monitor and manage nursing staff budgets within the Surgery & Elective Care wards and departments, including the use of agency, overtime and bank staff.

People Management

1. Provide clear and strategic leadership to staff and ensure the Directorate of Surgery & Elective Care Services has a highly skilled, flexible and motivated workforce to provide high quality services.
2. Support the Heads of Service in the development and implementation of workforce modernisation initiatives within your clinical services.

3. Support the management structures and practices to ensure a culture of effective team working, continuous improvement and innovation.
4. Ensure compliance with employment legislation, HSS directives and Trust standing orders, policies, procedures and regulations by introducing appropriate systems when required.
5. Encourage a culture that allows staff to maximize their potential, ensuring that they are able to contribute to the Trust Corporate strategy.
6. Ensure full engagement of all professional staff working in the Directorate of Surgery & Elective Care Services.

Corporate Management

1. Contribute to the Trust's corporate planning, policy and decision making processes and ensure the Directorates objectives and decisions are effectively communicated.
2. Establish collaborative relationships and networks with external stakeholders in the public, private and voluntary sectors to ensure the Directorate effectively discharges its functions.
3. Contribute to the Trust's overall corporate governance processes to ensure the development of an integrated governance framework for the Trust that assures safe and effective care for patients and clients and complies with public sector values, codes of conduct, operations and accountability.
4. Lead by example in practising the highest standards of conduct in accordance with the Code of Conduct for HPSS Managers.

Leadership

1. Provide effective and visible professional leadership to nursing staff within the Directorate of Surgery & Elective Care services.
2. Ensure an effective and appropriate professional development programme for nursing staff.
3. Act as a Role Model inspiring and ensuring nurses think creatively, challenge current practice and implement new ways of working.
4. Support the Heads of Service for the development of the divisions policies and to contribute to the development of Trust policies where appropriate.
5. To promote positive working relationships in order to understand the implications of service developments or changes for other parts of the Trust.

6. Ensure strong professional leadership of service development.
7. Facilitate the development of robust mechanisms for consistent communication with staff in the Directorate to enable them to influence the health agenda.
8. Establish, implement and maintain standards of practice consistent with the standards of relevant professional bodies.

HUMAN RESOURCE MANAGEMENT RESPONSIBILITIES

1. Review individually, at least annually, the performance of immediately subordinate staff, provides guidance on personal development requirements and advises on and initiates, where appropriate, further training.
2. Maintain staff relationships and morale amongst the staff reporting to him/her.
3. Review the organisation plan and establishment level of the service for which he/she is responsible to ensure that each is consistent with achieving objectives, and recommend change where appropriate.
4. Delegate appropriate responsibility and authority to the level of staff within his/her control consistent with effective decision making, while retaining overall responsibility and accountability for results.
5. Participate, as required, in the selection and appointment of staff reporting to him/her in accordance with procedures laid down by the Trust.
5. Take such action as may be necessary in disciplinary matters in accordance with procedures laid down by the Trust.

GENERAL REQUIREMENTS

The post holder will be required to:

1. Ensure the Trust's policy on equality of opportunity is promoted through his/her own actions and those of any staff for whom he/she has responsibility.
2. Co-operate fully with the implementation of the Trust's Health and Safety arrangements, reporting any accidents/incidents/equipment defects to his/her manager, and maintaining a clean, uncluttered and safe environment for patients/clients, members of the public and staff.
3. Adhere at all times to all Trust policies/codes of conduct, including for example:

- Smoke Free policy
 - IT Security Policy and Code of Conduct
 - standards of attendance, appearance and behaviour
4. All employees of the trust are legally responsible for all records held, created or used as part of their business within the Trust including patients/clients, corporate and administrative records whether paper-based or electronic and also including emails. All such records are public records and are accessible to the general public, with limited exception, under the Freedom of Information act 2000 the Environmental Information Regulations 2004 and the Data Protection Acts 1998. Employees are required to be conversant with the Trusts policy and procedures on records management and to seek advice if in doubt.
 5. Take responsibility for his/her own ongoing learning and development, including full participation in KSF Development Reviews/appraisals, in order to maximise his/her potential and continue to meet the demands of the post.
 6. Represent the Trust's commitment to providing the highest possible standard of service to patients/clients and members of the public, by treating all those with whom he/she comes into contact in the course of work, in a pleasant, courteous and respectful manner.
 7. Understand that this post may evolve over time, and that this Job Description will therefore be subject to review in the light of changing circumstances. Other duties of a similar nature and appropriate to the grade may be assigned from time to time.

This Job Description will be subject to review in the light of changing circumstances and is not intended to be rigid and inflexible but should be regarded as providing guidelines within which the individual works. Other duties of a similar nature and appropriate to the Band may be assigned from time to time.

It is a standard condition that all Trust staff may be required to serve at any location within the Trust's area, as needs of the service demand.

JOB TITLE	Lead Nurse for Surgery & Elective Care Band 8a
HOURS:	Full Time (Job Share will also be considered)
DIRECTORATE	Acute
SALARY	£38,851 - £46,621 per annum
HOURS	Full Time: 37.5 per week - Job Share will be considered
Ref No:	Expression of Interest
	Jan 2011

- 1. You must clearly demonstrate on your application form how you meet the required criteria – failure to do so may result in you not being shortlisted. You should clearly demonstrate this for both the essential and desirable criteria.***
- 2. Proof of qualifications and/or professional registration will be required if an offer of employment is made – if you are unable to provide this, the offer may be withdrawn.***

ESSENTIAL CRITERIA – these are criteria all applicants **MUST** be able to demonstrate either at shortlisting or at interview. Applicants should therefore make it clear on their application form whether or not they meet these criteria. Failure to do so may result in you not being shortlisted. The stage in the process when the criteria will be measured is stated below:

The following are essential criteria which will initially be measured at Shortlisting Stage although may also be further explored during the interview stage:

1. Hold a University degree or relevant Professional qualification.
2. Have 2 years experience of working in Acute Services in a HSC setting at Band 7 level or above, to include a broad range of clinical experience in Surgery & Elective Care.
3. Be currently a Registered Nurse Level 1, on the Live NMC Register

4. Experience of managing change within an Acute setting through empowerment of staff
5. Hold a full current driving license valid for use in the UK and have, on appointment, access to a car¹

¹ this criterion will be waived in the case of applicants who are prevented from driving due to a disability, providing the applicant can organise suitable alternative arrangements in order to meet the requirements of the post in full.

The following are essential criteria which will be measured during the interview stage

6. Successfully demonstrate a full range of key targets making significant improvements in Acute services
7. Ability to prioritise and have results orientated approach
8. High level of interpersonal and people skills
9. Successfully demonstrate high level people management, governance and organisational skills in Acute services
10. Possess excellent leadership skills

SHORTLISTING

A shortlist of candidates for interview will be prepared on the basis of the information contained in the application form. It is therefore essential that all applicants demonstrate through their application how and to what extent their experience and qualities are relevant to this post and the extent to which they satisfy each criterion specified

Candidates who are short-listed for interview will need to demonstrate at interview that they have the required competencies to be effective in this leadership role. The competencies concerned are given in the NHS Leadership Qualities Framework, details of which can be accessed at nhsleadershipqualities.nhs.uk Particular attention will be given to the following:

- Self Belief
- Self Management
- Seizing the future
- Drive for results
- Leading change through people
- Holding to account
- Effective and strategic influencing

December 2010

As part of the Recruitment & Selection process it may be necessary for the Trust to carry out a Protection of Children and Vulnerable Adults check (POCVA) before any appointment to this post can be confirmed.

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Successful applicants may be required to attend for a Health Assessment

All staff are required to comply with the Trusts Smoke Free Policy



Southern Health
and Social Care Trust

Quality Care - for you, with you

MEDICAL DIRECTOR

Applicant Information Pack

An abstract graphic composed of several overlapping, semi-transparent 3D rectangular blocks in shades of blue and grey, creating a sense of depth and movement. The blocks are arranged in a way that they appear to be part of a larger, complex structure.

June 2018

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Invitation from the Chief Executive

We are seeking to recruit a dynamic Medical Director to join our Executive team. The successful candidate will provide strong professional leadership and direction, support high standards of medical practice and provide resolved advice for medical matters across the organisation, which has a reputation for excellent care, innovation and a focus on improving the experience and outcomes of all who use our services.

This is an exciting time to join our Trust. This post is the first of five senior executive appointments to be made to the Trust following a number of recent retirements.

At a time of systemic change and challenge for health and social care within Northern Ireland, the Medical Director will take a leadership role in the provision of safe, high quality services, and support the delivery of the Trust's transformation agenda.

The role requires a visionary individual with strong interpersonal skills and an inclusive leadership style who will work collaboratively both internally across the organisation and with external partners to ensure that the services we provide to the community we serve are the best they can be. The successful applicant must be able to champion clinical leadership and engage a range of partners through their strong commitment to co-production and co-design to deliver truly integrated care and improved outcomes for our population.

They will be results driven and have an exemplary track record as a clinical leader. A proven ability to inspire, motivate and promote teamwork at all levels across the medical and non-medical workforce is essential as the postholder will be the organisational lead for clinical governance.

If you have:

- the drive and ambition to keep the Southern Health & Social Care Trust at the forefront of development in health and social care;
- the passion and expertise to make a real contribution to our journey of continual improvement; and,
- a strong value base of service to our patients, clients and community,



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then I look forward to receiving your completed application form.

For an **informal discussion about this post**, please contact:

Dr Richard Wright

on Personal information redacted by USI

or by e-mail to Personal information redacted by USI

SHANE DEVLIN
CHIEF EXECUTIVE

Profile of the Trust

The Southern Health & Social Care Trust provides integrated patient / client centred services to a population of c.370,000 people in the local areas of Armagh, Banbridge, Craigavon, Dungannon, South Tyrone, Newry and Mourne (see map outline below):



The Trust provides a wide range of hospital, community and primary care services. General acute in-patient hospital services are located at Craigavon Area Hospital and Daisy Hill Hospital and acute mental health and learning disability in-patient hospital services are located in the Bluestone Unit also on the Craigavon Area Hospital site. Working in collaboration with GPs and other agencies, Trust staff provide locally based health and social care services in Trust premises, in people's own homes and in the community. The Trust purchases some services, such as domiciliary, residential and nursing care and day care from private and voluntary organisations.

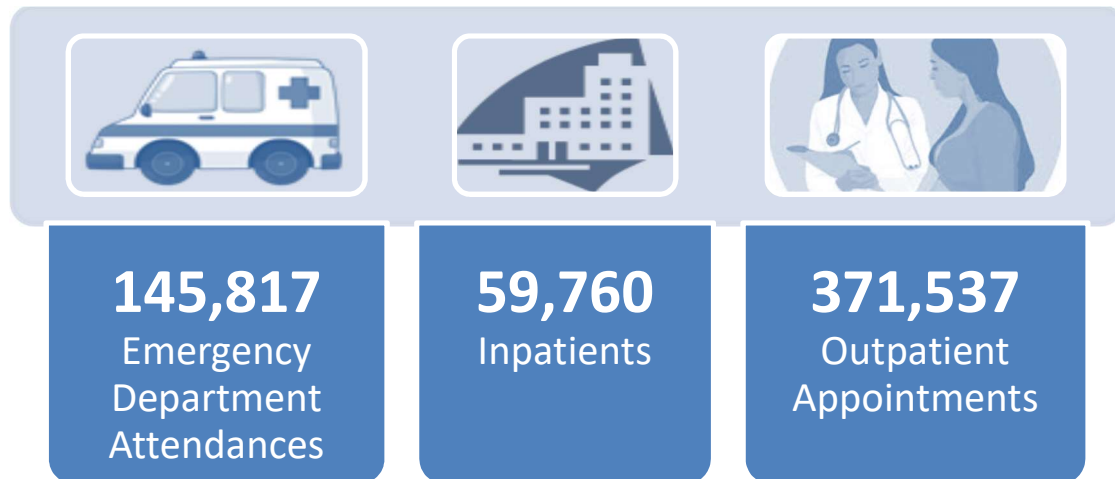
The Trust has an annual income of c.£678m and approximately 14,000 staff. Our geographical area covers in whole or in part, three of the new super-councils – Armagh, Banbridge and Craigavon; Newry, Mourne and Down; Mid-Ulster.

Key Facts

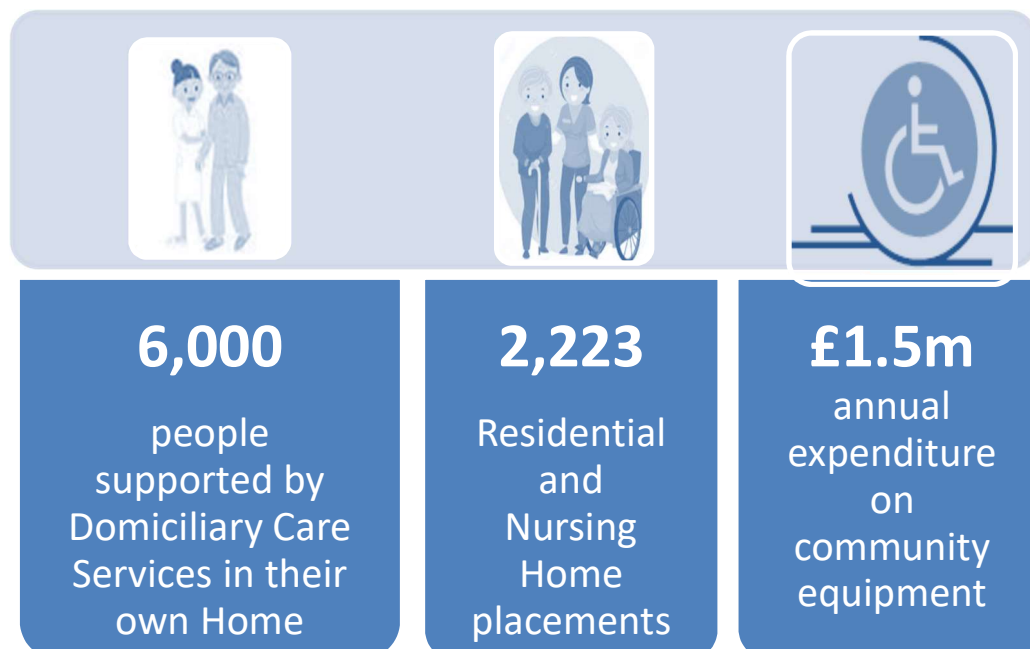
- Second largest resident population compared to other Trusts in Northern Ireland at 370,000 (20% of population).
- Over the 10 year period from 2014 to 2024 - Armagh City, Banbridge and Craigavon Council Area population is projected to grow by 10.4 per cent (i.e. 21,400 people). Newry and Mourne Council Area population is projected to grow by 7.4% (i.e. 13,100 people). Both growth rates are projected above the Northern Ireland average (5.3%).
- Over the past 10 years, there has been a 15% increase in the number of births in the Southern Area compared to a regional increase of 8% for the same period.
- 14% of the Southern Trust population is over 65 years. By 2039 this is projected to grow to 60% which is higher than the NI expected growth rate of 54%.
- 16% of the Southern Trust population falls within the NI's most deprived quintile.
- The Trust has the highest level of children with statements of educational need in NI.
- Central & Eastern European migration accounts for 4.2% of the Trust population, compared to the NI average of 2.2%.

We spend approximately £1.86m per day delivering care to local people

In 2017/18 the Southern Trust treated:



Each year across the Southern Trust area we support people to remain independent in their own homes within our community through:



Vision, Values & Priorities of the Trust

Trust Vision: 'Quality Care – for you, with you'

Our vision encompasses our core commitment to deliver safe, high quality care that is co-produced and co-designed in partnership with service users and staff who deliver our services. This vision is underpinned by the **Trust's Values** which shape what we do and how we do it.



Our **Corporate Objectives** reflect our priorities for the delivery of health and social care services to our local population. Achieving our objectives and delivering safe, quality care and services which are accessible and responsive to our patients and carers will remain our central focus:



Strategic Direction

of the Trust

Our Corporate Plan “Improving Together” 2017/18 - 2020/21

“Improving Together” 2017/18 - 2020/21 is the prevailing strategic plan that sets out how we intend to deliver against regional and corporate priorities in our local area. This response is informed by the changing needs of local people, by new technologies and ways of delivering care and by the resources made available to the Trust by our local assembly. The strategic plan explains what we want to achieve, how we plan to achieve and how we will know if we have made a difference. It sets a roadmap of how we would like Trust services to look and what outcomes we expect four years from now. Read more [here](#)

For further information on the documents below visit:

<http://www.southerntrust.hscni.net/about/Publications.htm>

- Trust Delivery Plan
- Annual Report
- Annual Quality Report
- Board Assurance Framework

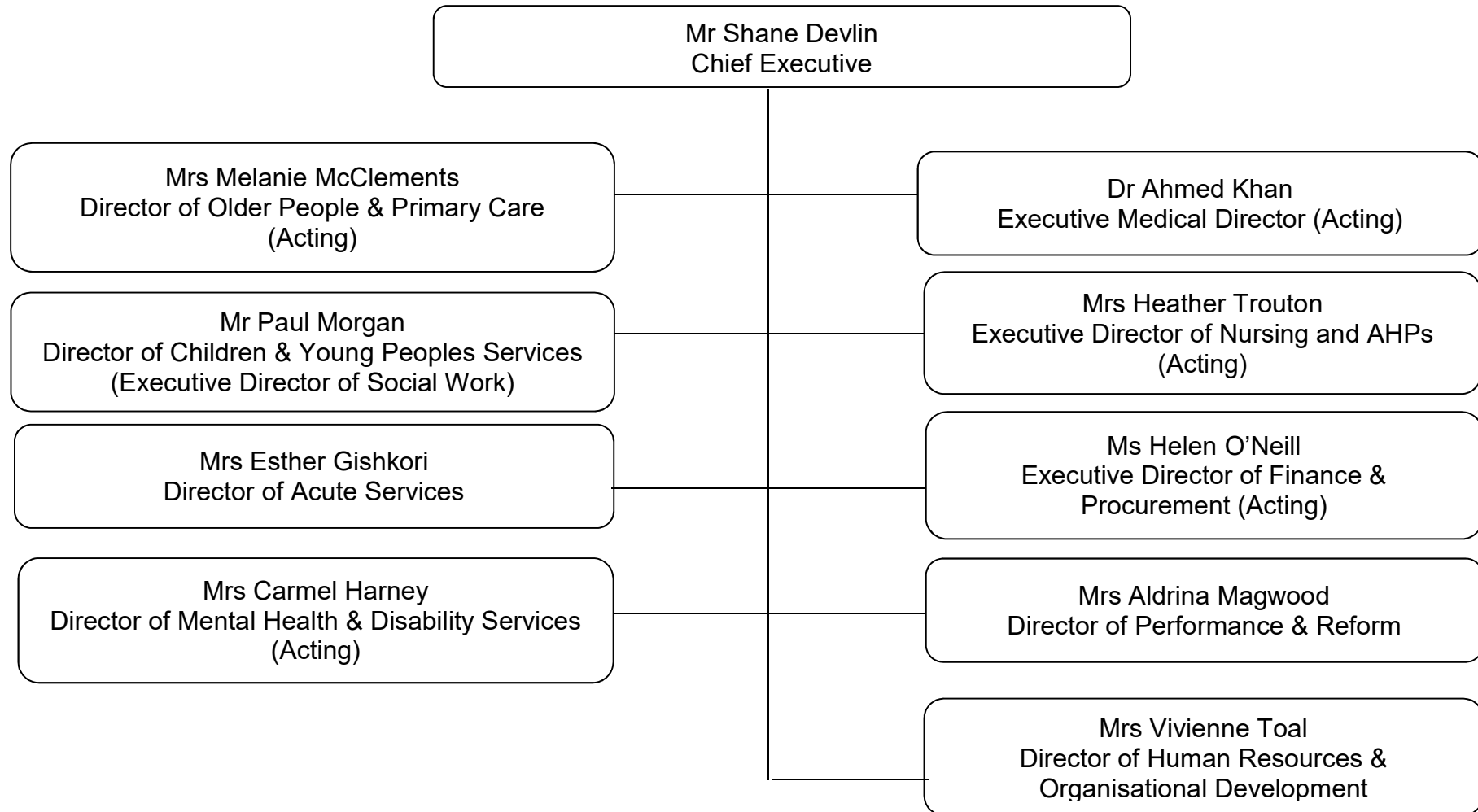
Southern Trust on Social Media

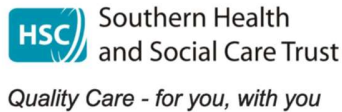
Click [here](#) to view the Southern Trust's Facebook page.

Click [here](#) to view the Southern Trust's Twitter account.

Click [here](#) to view the Southern Trust's YouTube Channel.

SENIOR MANAGEMENT STRUCTURE





MEDICAL DIRECTOR

Ref No 73218002

This is an exciting time to join our Trust as we look to recruit a dynamic Medical Director to join our Executive team. This post is the first of five senior executive appointments to be made to the Trust following a number of recent retirements.

The Medical Director is an Executive Director and is responsible for providing assurance to Trust Board that effective systems and processes for good governance, including those arrangements to support good medical practice, are in place.

The successful applicant will provide strong professional leadership and direction, support high standards of medical practice and provide resolved advice for medical matters across Directorates. S/he will take a leadership role in the provision of safe, high quality services, and support the delivery of the Trust's transformation agenda.

They will be results driven and have an exemplary track record as a clinical leader. A proven ability to inspire, motivate and promote teamwork at all levels across the medical and non-medical workforce is essential as the postholder will be the organisational lead for clinical governance.

We seek a visionary individual with strong interpersonal skills and an inclusive leadership style who will work collaboratively both internally across the organisation and with external partners to ensure that the services we provide to the community we serve are the best they can be.

If you believe you have the drive and ambition to deliver in this critical role then we would very much welcome an application.

Informal enquiries can be made to the current postholder, Dr Richard Wright on Personal information redacted by UST

A full Job Description, Personnel Specification and associated information for this post is available online at www.HSCRecruit.com or by emailing recruitment.services@southerntrust.hscni.net. Please note that you must be an employee of an organisation within Health & Social Care in Northern Ireland to be eligible to apply for this post.

**The closing date for receipt of completed applications is
Thursday 28th June 2018 at 12.00pm**

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Job Description

JOB TITLE	Medical Director
LOCATION	Trust Headquarters, Craigavon Area Hospital
ACCOUNTABLE TO	Chief Executive

JOB SUMMARY

The Medical Director is an Executive Director and is responsible for providing assurance to Trust Board that effective systems and processes for good governance, including those arrangements to support good medical practice, are in place.

S/he will provide strong professional leadership and direction, support high standards of medical practice and provide resolved advice for medical matter across Directorates. S/he will take a leadership role in the provision of safe, high quality services, support the reform and modernisation programme and drive initiatives for continuous quality improvement. The postholder will have lead responsibility for clinical governance.

As Responsible Officer (RO), s/he has a statutory duty to make recommendations to the General Medical Council with regard to a doctor or dentist's fitness for revalidation, for those doctors and dentists who have a prescribed connection with the Southern HSC Trust.

As a member of the Trust Board and the Senior Management Team s/he will have both individual and corporate leadership responsibility for the governance of the Trust and compliance with legal requirements and contribute fully to the development, delivery and achievement of the Trust's corporate objectives.

KEY RESULT AREAS

PROFESSIONAL LEADERSHIP

1. Provide highly visible and inspiring clinical leadership for medical and dental staff throughout the Trust, championing a professional and open culture which empowers staff to consistently deliver high quality, safe and effective care, acting as a role model for the behaviours and high professional standards expected.

2. Develop and maintain effective relationships with GMC that supports the registration and regulation of the medical workforce.
3. Work closely with colleagues to enhance communication and working relationships between clinical leaders and senior managers and ensure that opportunities to improve services are harnessed.
4. As Responsible Officer, ensure the following are in place:
 - an appraisal policy that meets the requirements of revalidation
 - effective clinical governance systems that can provide doctors with the supporting information they need for appraisal and revalidation
 - a system which ensures all doctors are given the opportunity to take part in an annual appraisal and which tracks participation
 - regular briefing for Trust Board on progress
 - a process for recognising and responding to concerns about doctors in line with *'Maintaining High Professional Standards in the Modern HPSS'*.
5. Provide professional leadership and guidance to support Associate Medical Directors, Clinical Directors and Lead Clinicians throughout the Trust in relation to governance of the medical workforce, including clinical practice and service change.
6. Provide medical leadership to attract, educate, develop and retain a quality workforce from both local and international pools.
7. Ensure sound working relationships with the Director of Public Health, other Medical Directors and the Public Health Agency

CLINICAL GOVERNANCE

1. As a member of the Senior Management Team and Trust Board, assume corporate responsibility for ensuring an effective system of integrated governance within the Trust which delivers safe, high quality care, a safe working environment for staff and appropriate and efficient use of public funds.
2. Provide professional advice to the Senior Management Team as to the appropriate indicators of safety, quality and performance, to inform and commission the measurement of such indicators as part of Senior Management Team Governance, to regularly review this

information, and to provide assurance or expert input into necessary next steps to address any issues arising from same.

3. Work with other professional Directors to lead multidisciplinary teams to ensure there is a system for audit of clinical practice that assesses and reviews the quality of services provided and ensures that any learning is incorporated into professional practice and systems.
4. While the operational responsibility and accountability for patient safety rests with operational Directors, assume responsibility for:
 - a) Participation in regional co-ordination of patient safety initiatives, bringing intelligence and direction on these approaches into the organisation and providing strategic and professional advice on implementation.
 - b) Co-ordinating the implementation of agreed Patient Safety priority projects and monitoring systems, as endorsed by Senior Management Team, within the wider Clinical and Social Care Governance arrangements of the Trust.
 - c) Reviewing and monitoring the impact of Patient Safety Initiatives and providing regular Patient Safety reports to Senior Management Team, Governance Committee and Trust Board.
5. Ensure the development and maintenance of professional standards and education liaising with professional and education bodies as necessary
6. Provide advice on medical workforce policy including staffing levels, changes in working patterns and skill mix which will ensure the delivery of effective and efficient clinical services to patients and clients
7. Ensure that all doctors and dentists in the Trust work within agreed procedures, and, as appropriate the GMC's guidance "Good Medical Practice" and the GDC's "Standards for Dental Professionals"
8. Set up systems for meeting and liaising with Associate Medical Directors and Clinical Directors in the Trust to ensure appropriate arrangements are in place for securing patient and client safety.
9. Ensure effective systems of clinical risk management and adverse event reporting are in place demonstrating trend analysis and processes to share learning.

10. Support the development and implementation of the Trust's Audit Strategy.
11. Ensure compliance with relevant assurance standards.
12. Provide arrangements for the clinical scrutiny of claims and litigation.
13. Ensure that there are effective systems in place to support the Trust's research governance arrangements.
14. Act as the designated lead Director for strategic management of patient safety initiatives, and the link Director with the Patient Safety Forum and other regional fora.

QUALITY

1. Promote high standards of medical and dental practice and provide advice and support to ensure the development of a quality culture with a focus on continuous improvement.
2. Ensure robust systems and processes for monitoring and improving outcomes for people who use our services are in place to provide assurance that clinical care is safe and effective.
3. Ensure effective systems are in place to comply with regional requirements for morbidity and mortality review and ensure compliance with Coroner's court processes.
4. Support innovation and change to underpin the modernisation of services
5. Be responsible for the delivery of undergraduate and postgraduate medical education and training to the standards and requirements set out in the service level agreements with Queen's University Belfast (QUB) and NIMDTA.
6. Act as the Trust Data Guardian, providing an advocacy role for data protection on behalf of patients, their families and carers.
7. Ensure systems and processes are in place to support responses to complaints, provide trend analysis and systems to share learning.
8. Work in partnership with the members of the Trust Senior Management Team to ensure the integration of learning from complaints, incidents and claims into the service delivery model within the Trust, via the Lessons Learned Committee.

9. Keep up to date with policies and guidelines on good practice from the Royal Colleges, GMC, universities, etc, and identify opportunities to enhance the quality of services provided by the Trust.

MEDICAL EDUCATION & TRAINING

1. Ensure the quality of medical education and training within the Trust, working closely with education and training bodies and ensure the Trust has a highly skilled career grade medical workforce. This will include accountability for the quality of undergraduate training including delivery of QUB Accountability Framework and utilisation of SUMDE budget, and the provision of Annual Report to Trust Board.
2. Lead on the post graduate training of junior doctors in training within the Trust, including managing the relationship between NIMDTA and the Trust, and ensuring the Trust and NIMDTA work in partnership to maintain a high standard of education and related patient safety.
3. Lead on the work related to the “Sub Deanery” for Queens University (QUB) Medical School within the Trust, including managing the relationship between QUB and the Trust, and ensuring the Trust and QUB work in partnership to maintain a high standard of education and supervision of the Medical students placed. This work includes an Annual report and financial report on the funding provided to the Trust by QUB in respect of the work of the sub-deanery.
4. Management of the Associate Medical Director (AMD) for postgraduate Medical Education, induction and training for Junior Doctors, QA / evaluation of training and supporting operational Directors to address issues arising from Deanery and PMETB evaluation and inspections.
5. Ensure that all doctors and dentists in the Trust work within agreed procedures, and, as appropriate the GMC’s guidance ‘Duties of a Doctor’, ‘Good Medical Practice’ and related documents, and succeeding and replacement documents or the GDC’s lifelong learning requirements.
6. Ensure the implementation of an effective process of professional self-regulation for doctors employed by the Trust.

RESEARCH & DEVELOPMENT

1. The postholder will be responsible for the strategic and operational management of Research and Development within the Trust, including the line management of the Associate Medical Director for Research and Development and associated support staff. This role includes responsibility for CAS for Research and provision of Research and Development Annual Report to Trust Board.
2. Responsible for the Trust's Research Committee to agree a programme of research and development and ensure the extant legal and regularity permissions are obtained.

SERVICE DELIVERY

1. Strategic management and co-ordination of effective Emergency Planning within the Trust and the provision of annual reports to Trust Board.
2. Ensure a Major Incident Policy is in place for the Trust, and suitable support is in place for the testing, recording and subsequent modification of the policy and attached plans are reviewed constantly and reported on at agreed intervals.
3. Management of ECRs and Drug Requests for Southern Trust patients, and responsible for medical evaluation, decision-making and liaison with Commissioner in relation to same.
4. Responsible to Trust Board for the discharge of medical statutory functions.
5. Lead Director for the Trust's litigation arrangements.

FINANCIAL AND RESOURCE MANAGEMENT

1. Be accountable for the management of the Directorate's budget (pay and non pay) and the meeting of all financial targets by each division and service.
2. Advise and assist the Trust Board and Chief Executive in determining its expenditure on clinical services.
3. Participate in contract and service level negotiations with Commissioners.

4. Advise and assist in the development of capital investment strategies across the Trust, ensuring these reflect and contribute to meeting targets set by the DoH/HSCB and the Trust's Corporate Plan.

LEADERSHIP & PEOPLE MANAGEMENT

1. Ensure effective engagement with doctors and dentists and their representatives including co-chairing the Trust's Local Negotiating Committee (LNC)
2. Ensure the aims and targets of the New Deal for junior doctors are implemented and compliance with EWTD for junior doctors and career grade doctors is achieved and maintained.
3. Support managers both in establishing and reviewing performance targets with individual consultants, recognising workloads and other pressures on medical staff and ensuring adequate mechanisms are in place for the support of medical staff
4. Responsible, in association with the Director of Human Resources & Organisational Development, for the management of disciplinary matters and complaints relating to medical staff
5. Provide exemplary and visible leadership and promote a strong positive model of valuing staff, effective communication and engagement so as to enable staff to perform to the best of their abilities to deliver high quality care and support and be involved in the transformation agenda.
6. Ensure that management structures and practices in the Directorate are fit for purpose and support a culture of effective team working, collective leadership, continuous improvement and innovation, always striving to remain focused on person-centred care for citizens of the Trust.
7. Ensure the effective implementation of all Trust people management policies in the Directorate and the achievement of all relevant targets such as relating to corporate mandatory training, personal development plans, the management of sickness and absenteeism, turnover etc.
8. Ensure the effective management of staff health and safety and support in the Directorate.

9. Review individually, at least annually, the performance of immediately subordinate staff, provides guidance on personal development requirements and advises on and initiates, where appropriate, further training.
10. Maintain staff relationships and morale amongst the staff reporting to him/her.
11. Delegate appropriate responsibility and authority to the level of staff within his/her control consistent with effective decision making, while retaining overall responsibility and accountability for results.
12. Participate, as required, in the selection and appointment of staff in accordance with procedures laid down by the Trust.
13. Take such action as may be necessary in disciplinary matters in accordance with procedures laid down by the Trust.

CORPORATE & COLLECTIVE LEADERSHIP

1. Demonstrate exemplary standards of corporate leadership and share a collective responsibility for all Trust corporate decisions, initiatives and the effective implementation and communication of same.
2. Actively promote a culture of collective leadership within the Trust, and across organisational boundaries, in line with the four key components of the *HSC Collective Leadership Strategy*.
3. Share a collective responsibility for the Trust's financial performance and the achievement of all quality, safety and other legislative requirements.
4. Share a collective responsibility for the Trust's overall corporate governance processes to include the implementation of an integrated governance framework that assures safe and effective care for patients and clients and complies with public sector values and codes of conduct, operations and accountability.
5. Lead by example, to ensure the Trust demonstrates respect through its culture and actions, for all aspects of diversity in the population it serves and the staff who provides the services.
6. Share a collective responsibility for the Trust's corporate planning, policy and decision making processes as a member of the Directorate's senior management team and ensure the Trust's objectives and decisions are effectively communicated.

7. Continually strive to develop self and improve capability in the leadership of the Trust and its staff.
8. Lead by example in practicing the highest standards of conduct in accordance with the Code of Conduct for HSC Staff.
9. Participate in the Director on-call rota.

GENERAL REQUIREMENTS

The post holder will be required to:

1. Ensure the Trust's policy on equality of opportunity is promoted through his/her own actions and those of any staff for whom he/she has responsibility.
2. Co-operate fully with the implementation of the Trust's Health and Safety arrangements, reporting any accidents/incidents/equipment defects to his/her manager, and maintaining a clean, uncluttered and safe environment for patients/clients, members of the public and staff.
3. Adhere at all times to all Trust policies/codes of conduct, including for example:
 - Smoke Free policy
 - IT Security Policy and Code of Conduct
 - standards of attendance, appearance and behaviour
4. Contribute to ensuring the highest standards of environmental cleanliness within your designated area of work.
5. Co-operate fully with regard to Trust policies and procedures relating to infection prevention and control.
6. All employees of the Trust are legally responsible for all records held, created or used as part of their business within the Trust including patients/clients, corporate and administrative records whether paper-based or electronic and also including emails. All such records are public records and are accessible to the general public, with limited exception, under the Freedom of Information Act 2000 the Environmental Information Regulations 2004 and the General Data Protection Regulations (GDPR). Employees are required to be conversant with the Trust's policy and procedures on records management and to seek advice if in doubt.

7. Take responsibility for his/her own ongoing learning and development, including full participation in Development Reviews/appraisals, in order to maximise his/her potential and continue to meet the demands of the post.
8. Represent the Trust's commitment to providing the highest possible standard of the patient/client experience and services delivered by treating all those with whom he/she comes into contact in the course of work, in a pleasant, courteous and respectful manner.

This Job Description will be subject to review in the light of changing circumstances and is not intended to be rigid and inflexible but should be regarded as providing guidelines within which the individual works. Other duties of a similar nature and appropriate to the grade may be assigned from time to time by the Chief Executive.

It is a standard condition that all Trust staff may be required to serve at any location within the Trust's area, as needs of the service demand.

May 2018

PERSONNEL SPECIFICATION

JOB TITLE Medical Director

Eligibility	Be an employee of an organisation within Health & Social Care within Northern Ireland ¹
Qualifications/ Experience	<p>1. Registration with the GMC, have a licence to practice and be on the GMC Specialist Register.</p> <p>2. A minimum of three years' experience in a senior medical management² role in a major complex organisation³ AND clear significant⁴ personal evidence of:-</p> <ul style="list-style-type: none"> • managing major service improvement and transformation; • high level leadership and people management skills; • effective medical professional governance and risk management; • building strategic relationships with external agencies / partners
Other	3. Hold a full current driving licence valid for use in the UK and have access to a car on appointment ⁵ . In respect of this point the successful applicant may be required to travel throughout Northern Ireland, the United Kingdom, the Republic of Ireland, and elsewhere.

¹ '**Organisation within Health & Social Care NI**' is defined as any one of the following: HSC Trusts; Health & Social Care Board; Business Services Organisation;; Public Health Agency; Patient Client Council; Regulation & Quality Improvement Authority; NI Practice & Education Council; NI Medical & Dental Training Agency; NI Guardian Ad Litem Agency; NI Blood Transfusion Service, and; NI Social Care Council

²'**senior medical management**' is defined as experience gained at Director, Assistant / Associate / Deputy Medical Director or equivalent in a major complex organisation

³'**major complex organisation**' is defined as one with at least 200 staff or an annual budget of at least £50 million and involving having to meet a wide range of objectives requiring a high degree of co-ordination with a range of stakeholders

⁴'**significant**' is defined as contributing directly to Key Corporate Objectives of the organisation concerned.

⁵This criterion will be waived in the case of a suitable applicant who has a disability which prohibits from driving but who is able to organise suitable alternative arrangements in order to meet the requirements of the post in full.

Candidates shortlisted and invited for further stages of selection will be assessed using the nine dimensions of leadership behaviour as specified in the **NHS Leadership Academy Healthcare Leadership Model**. Shortlisted candidates will need to demonstrate that they have the required knowledge, skills, competencies and values to be effective in this role.

Notes to applicants:

- 1. We will not accept CVs, letters, additional pages or any other supplementary material in place of, or in addition to completed application forms;*
- 2. You must clearly demonstrate on your application form how you meet each of the required criteria – failure to do so will result in you not being shortlisted.*
- 3. Proof of qualifications and/or professional registration will be required if an offer of employment is made – if you are unable to provide this, the offer will be withdrawn*

As part of the Recruitment & Selection process it will be necessary for the Trust to carry out an Enhanced Disclosure Check through Access NI before any appointment to this post can be confirmed.

WE ARE AN EQUAL OPPORTUNITIES EMPLOYER

Successful applicants may be required to attend for a Health Assessment

All staff are required to comply with the Trust's Smoke Free Policy

TERMS & CONDITIONS OF SERVICE

Hours - This post is ideally a full-time commitment, however applications will be considered from suitable qualified applicants who wish to continue with a small clinical commitment.

Remuneration – to be agreed on appointment. The salary will be in line with the HSC Hospital Consultant Medical and Dental Terms and Conditions of Service. The post will also attract a pensionable management allowance.

Annual Leave and Statutory / Public holidays - as per HSC Hospital Consultant Medical and Dental terms and conditions of service.

HSC Pension Scheme / HPSS Superannuation Scheme

One of the leading pension schemes available, Trust staff are automatically enrolled in the Health & Social Care Pension Scheme upon taking up employment within the HSCNI. Further information may be obtained from the HSC Pension Service Website at www.hscpensions.hscni.net. Applicants who are already members of the HPSS Superannuation Scheme may continue with their current arrangements

Current contributions are as follows:

Employer contribution rate:	16.3%
Employee contribution rate:	13.5%

Human Resources Policies

The Trust offers a wide range of Human Resource Policies to underpin the value that is placed on its staff such as:

- A range of Work Life Balance/Flexible Working Policies;
- Special Leave;
- Child Care Voucher Scheme;
- Cycle to Work Scheme;
- Access to savings on Social and Leisure Activities;

The HSC Code of Conduct is available on request.

Committed to Equality of Opportunity

The Trust recognises and values the diversity of its workforce and the population it serves. The Trust is committed to a working environment free from intimidation of any kind. Through a systematic and objective recruitment & selection process the Trust is committed to ensuring that appointment decisions are taken solely on the basis of merit.

COMPLETING YOUR APPLICATION FORM

The application form is designed to ensure that applicants provide the necessary information to determine how they meet the essential criteria. We strongly encourage all applicants to complete their application online at www.HSCrecruit.com. For those who wish to complete an offline application, please note that in order to ensure Equality of Opportunity for all applicants:

- The space available on the application form is the same for all applicants and must not be altered;
- We will not accept CVs, letters, additional pages or any other supplementary material in place of, or in addition to completed application forms;
- Applicants must complete the application form in either typescript font size 12, or legible block capitals using black ink;
- Applicants must not reformat electronic application forms;
- Information in support of your application will not be accepted after the closing date and time for receipt of applications;
- Applications will not be examined by the selection panel until after the closing deadline;

Completing the Criminal Convictions / Offences Section

The application form requires you to confirm your understanding that the Trust's positions fall under the Rehabilitation of Offenders Exceptions (NI) Order 1979 as amended. Within the Health Service, criminal convictions are never regarded as spent and therefore if you are offered a post with the Trust you must tell us about all previous or pending convictions or offences (including motoring convictions), even if they happened a long time ago (other than protected convictions).

The Trust is committed to the equality of opportunity for all applicants, including those with criminal convictions. We will undertake to ensure an open, measured and recorded discussion on the subject of any offences or other matters that might be considered relevant for the position concerned e.g. the individual is applying for a driving job but has a conviction history of driving offences. This will be conducted following the selection process if this applies to the successful candidate. Whilst the disclosure of information will not automatically prevent an individual from obtaining employment, it is essential that all convictions (other than protected convictions) are disclosed to allow the Trust to adequately consider their relevance to the post in question. The Trust considers failure by applicants to declare complete and accurate information about convictions to be a serious breach of trust.

Access NI Disclosure – the Trust operates in line with the Access NI Code of Practice. Further details can be obtained from www.accessni.gov.uk

It should be noted that some posts will fall within the definition of 'Regulated Activity'. Further information on Regulated Activity can be obtained on request. Any post falling within the definition of Regulated Activity will be subject to an Access NI Enhanced Disclosure check with Barred list check.

Completing the Medical History Section

The application form requires you to confirm your understanding that you must be in a fit state of health to render regular and reliable service in the post you are applying for. If successful, you will be asked to tell us about any periods of sickness you have had in the last 3 years, whether you have been in employment or not. Your sickness absence record will be verified through the reference checking process; therefore it is important that you give full and accurate information when requested.

Meeting the Criteria set out in the Personnel Specification

- Always refer to the Job Description and Personnel Specification when completing your application form.
- Clearly demonstrate on your application form how you meet the essential shortlisting criteria as detailed in the Personnel Specification. Failure to do so will result in you not being shortlisted for interview. Please remember that selection panels cannot make assumptions on whether or not you meet the essential shortlisting criteria.

Completing the Reference Section

We will want to seek references which cover the previous 3 years to the date of application in relation to your employment / training / education.

Completing Your Current / Previous Employment Details

- Ensure that full details are provided.
- Be specific about all the dates that you provide, in the format DD.MM.YYYY.
- Explain any gaps between periods of employment and include reasons for leaving each post.
- Provide a list of key duties that you have been responsible for in current post / previous posts.

Disability requirements

We ask on the application form if you require any reasonable adjustments, due to disability, to enable you to attend the interview or undertake the duties of the post. Details of any disability are only used for this purpose and do not form any part of the selection process. If you require any reasonable adjustments to be made during the Recruitment Process please contact Lynn Magee, Resourcing Manager by email to Personal Information redacted by USI or by phone to Personal Information redacted by USI who will be happy to discuss your requirements

Completing the Personal Declaration

It is important to remember that when signing the personal declaration section or submitting your form via email you are stating that the information is true, complete and accurate, and confirming your understanding that giving wrong information or leaving information out could lead to the withdrawal of an offer of employment, or dismissal if you take up a post.

Data Protection

The information you provide the Trust will be processed in accordance with the Data Protection Act 2018.

Completing the Equal Opportunity Monitoring Form

Please note that this information is regarded as part of your application and you are strongly encouraged to complete this section. This information is treated in the strictest confidence and is for monitoring /statistical purposes only. Selection panels do not have any access to this information at any stage of the recruitment process.

Advising us if you are not available to attend for assessment / interview

If you have any planned holidays, it is useful to tell us about this by detailing it on your application form. However please note that the selection panel are under no obligation to take these into account when arranging assessment / interview dates.

Submitting your completed form

Forms must be received by the stated closing date and time, as **late applications will not be accepted.**

Please remember that the Trust's standard Application Form is the only acceptable method of application to the Trust.

Closing Date for Receipt of Completed Applications

The closing date for receipt of completed applications is **Thursday 28th June 2018 at 12.00 noon.**

Applications can be submitted via www.HSCRecruit.com or in hard copy format to:

Mr Iain Gough
HR Resourcing Team
Hill Building
St Luke's Hospital site
Loughgall Road
Armagh
BT61 7NQ

Please note the Trust will not accept any late, incomplete or reformatted application forms received after the closing date and time.

Applicants using Royal Mail should note that 1st class mail does not guarantee next day delivery. It is the responsibility of the applicant to ensure that sufficient postage has been paid to return the form to the address above by the stated closing date and time. Existing Health & Social Care staff should not rely on the internal postal system.

Selection Process

A shortlist of candidates for interview will be prepared on the basis of the information contained in the application form. It is therefore essential that all applicants demonstrate through their application how and to what extent their experience and skills are relevant to this post and the extent to which they satisfy each criterion specified. This includes demonstrating how they meet the definitions of 'major complex organisation', and 'senior management' as defined within the Personnel Specification. **Please note this should be detailed under each appropriate criterion heading on your application form.** Only those applicants who clearly demonstrate on their application form how they meet the essential criteria, and if applied, the desirable criteria, will be shortlisted. Failure to demonstrate clearly how you meet each element of the essential / desirable criteria will result in you not being shortlisted for the further stages in the assessment process.

Candidates who are shortlisted following a review of their application form will then be invited to the further stages in the assessment process. The Trust reserves the right to incorporate additional shortlisting stages dependent on the number of applications received.

Throughout the assessment process applicants will need to demonstrate that they have the required competencies to be effective in this demanding leadership role. It is therefore intended that applicants who meet the essential criteria will be assessed against the criteria stated in this specification, linked to the Dimensions set out in the [NHS Healthcare Leadership Model](#).

In accordance with best practice all appointments within the Trust are made under the 'merit principle' where the best person for any given post is selected in fair and open competition.

Candidates may be contacted by telephone following each stage of the assessment process to confirm onward arrangements. This method, if used, is to ensure those being invited to the next stage have as much time available for preparation as possible. Candidates are therefore asked to ensure that mobile telephone numbers are provided where possible and that in any event the contact telephone numbers stated provide for ease of contact. All such communication will be followed up in writing.

Please note that the Trust is under no obligation to take account of your planned holiday arrangements.

Useful Links / Further Information

Further details on the HSCNI may be obtained from;

Southern Trust Website - <http://www.southerntrust.hscni.net/> or you can follow us on facebook or Twitter

Click [here](#) to view the Southern Trust's Facebook page.

Click [here](#) to view the Southern Trust's Twitter account.

Click [here](#) to view the Southern Trust's YouTube Channel.

Department of Health www.doh.gov.uk

Further Enquiries / Information

Applicants requiring any further information on the application process, shortlisting or interview arrangements should contact Lynn Magee, Resourcing Manager on 028 3756 4195 or by email to Lynn.Magee@southerntrust.hscni.net

- ? Scheduling = Day Case Urology. → Follow up

~~Urethralone~~ - For Day Surgery.
- See Ronan/Ursula.

- Meet personally with Aidan re managing review

- IV fluids / IV antibiotics not to be given prior to surgery without discussion with Dr Damani.

This practice has to stop unless Dr Damani + Mrs Sloan agrees it is clinically appropriate.

Reference Number:

Southern Health and Social Care Trust

Associate Medical Director – Surgery/Elective Care

Job Description

JOB SUMMARY

The appointee will provide clinical leadership in the Acute Services Directorate, Surgery/Elective Care Division for: medical people management; reform and modernisation, patient and client safety, quality and standards; medical education and research governance.

- To contribute strategically as a member of the Directorate Management Team
- To provide clinical leadership to relevant medical staff in the Directorate and promote the corporate values and culture of the Trust.
- Ensure excellent communication between clinicians, Directorate management team and the Medical Directors Office
- To take responsibility for performance management including appraisal of designated clinicians
- To provide leadership to medical staff to enhance collaboration on Reform and Modernisation agenda

KEY RESULT AREAS:

Strategy Development:

- Contribute to strategy development as part of Directorate Senior Management Team.
- To advise the Management Team of Directorate priorities and pressures and contribute to the development of an Annual Directorate Management Plan and Trust Delivery Plan

Service Delivery

- To function as a member of the Directorate management team with responsibility to contribute to strategic development and operational excellence.
- Provide clinical leadership in developing responses to specific access targets and in the reform and modernisation of services within the directorate
- Use the resources of the Directorate to deliver, in both quality and quantity, the activity and targets agreed for the Directorate
- To support the Trust in planning a response to major incidents and outbreaks.

Professional Leadership

- To develop and lead a team of Clinical Directors and Specialty Leads to assist the Trust in the redesign, modernisation and improvement of service delivery and ensure a senior professional clinical lead on the major Trust facilities
- To identify and make provision for the training and development needs of designated medical staff in the Directorate and facilitate research activity in the Directorate
- To ensure the highest standards of clinical effectiveness and medical practice in the Directorate, including the implementation of local and national recommendations including NICE guidelines, RQIA Reports, Independent Reviews, College Guidelines and Regional and National Reports
- Contribute as an effective member of Directorate Governance Committee
- To place Patient Safety at the centre of Directorate activity

Medical Education and Research

- Be responsible for the delivery and development of Medical Education and Research within the Directorate

Leading the Medical Team

- Be responsible for performance management, including appraisal and review of job plans, professional regulation for designated medical staff and to ensure that personal and professional development plans are in line with corporate objectives
- Implement the consultant contract, within the Directorate, ensuring the contract supports modernisation, quality improvement and achievement of access targets
- Provide leadership in the effective implementation and monitoring of Modernising Medical Careers and The New Deal for Junior Doctors.
- Ensure that doctors within the Directorate comply with arrangements for the assessment of fitness for clinical work and be responsible within the directorate for professional standards and regulation of doctors
- Ensure that a process is in place within the directorate for proper appraisal of all grades of doctors, including locum tenens, in line with regional guidance.
- Take part in the recruitment process for new doctors or ensure that other colleagues do so effectively
- Influence the modernisation of the workforce as systems for delivering care change
- Take such action as may be necessary in disciplinary matters in accordance with procedures laid down by the Trust.

Quality & Information Management

- Support the development of clinical indicators and outcome measures relevant to the Directorate clinical specialities.

- Ensure a programme of multi-professional clinical audit is implemented within the Directorate that supports the Trust integrated governance strategy and support the development of benchmarking activities within the Directorate
- Support the implementation of the Trust adverse incident reporting and complaints handling mechanisms within the Directorate

Collaborative Working

- Actively promote the development of clinical and professional networks across primary, secondary and social care.
- Liaise with clinical colleagues to ensure that activities across the Trust are appropriately co-ordinated and integrated
- Promote and develop effective multi-professional team working and communication.

Corporate Responsibilities

- maintain good staff relationships and morale amongst the staff reporting to him/her.
- where appropriate, review the organisational plan and establishment levels and ensure that each is consistent with achieving objectives and recommend change where appropriate.
- delegate appropriate responsibility and authority to the level of staff within his/her control consistent with effective decision making whilst retaining responsibility and accountability for results.
- participate as required in the selection and appointment of staff reporting to him/her in accordance with procedures laid down by the Trust.
- take such action as may be necessary in disciplinary matters in accordance with procedures laid down by the Trust.
- promote the Trust's policy on equality of opportunity through his/her own actions and ensure that this policy is adhered to by staff for whom he/she has responsibility.

This job description is subject to review in the light of changing circumstances and is not intended to be rigid and inflexible but should be regarded as providing guidelines within which the Associate Medical Director – Surgery/Elective Care works. Other duties of a similar nature and

appropriate to the grade may be assigned from time to time by the Medical Director/ Director of Acute Services.

GENERAL RESPONSIBILITIES

Employees of the Trust will be required to promote and support the mission and vision of the service for which they are responsible and:

- at all times provide a caring service and to treat those with whom they come into contact in a courteous and respectful manner.
- demonstrate their commitment by their regular attendance and the efficient completion of all tasks allocated to them.
- comply with the Trust's No Smoking Policy.
- carry out their duties and responsibilities in compliance with health and safety policy and statutory regulations.
- adhere to equal opportunities policy throughout the course of their employment.
- ensure the ongoing confidence of the public in service provision.
- comply with the HPSS code of conduct.

July 2007

Southern Health and Social Care Trust

Associate Medical Director – Surgery/Elective Care

Personnel Specification:

Title of Post: Associate Medical Director – Surgery/Elective Care

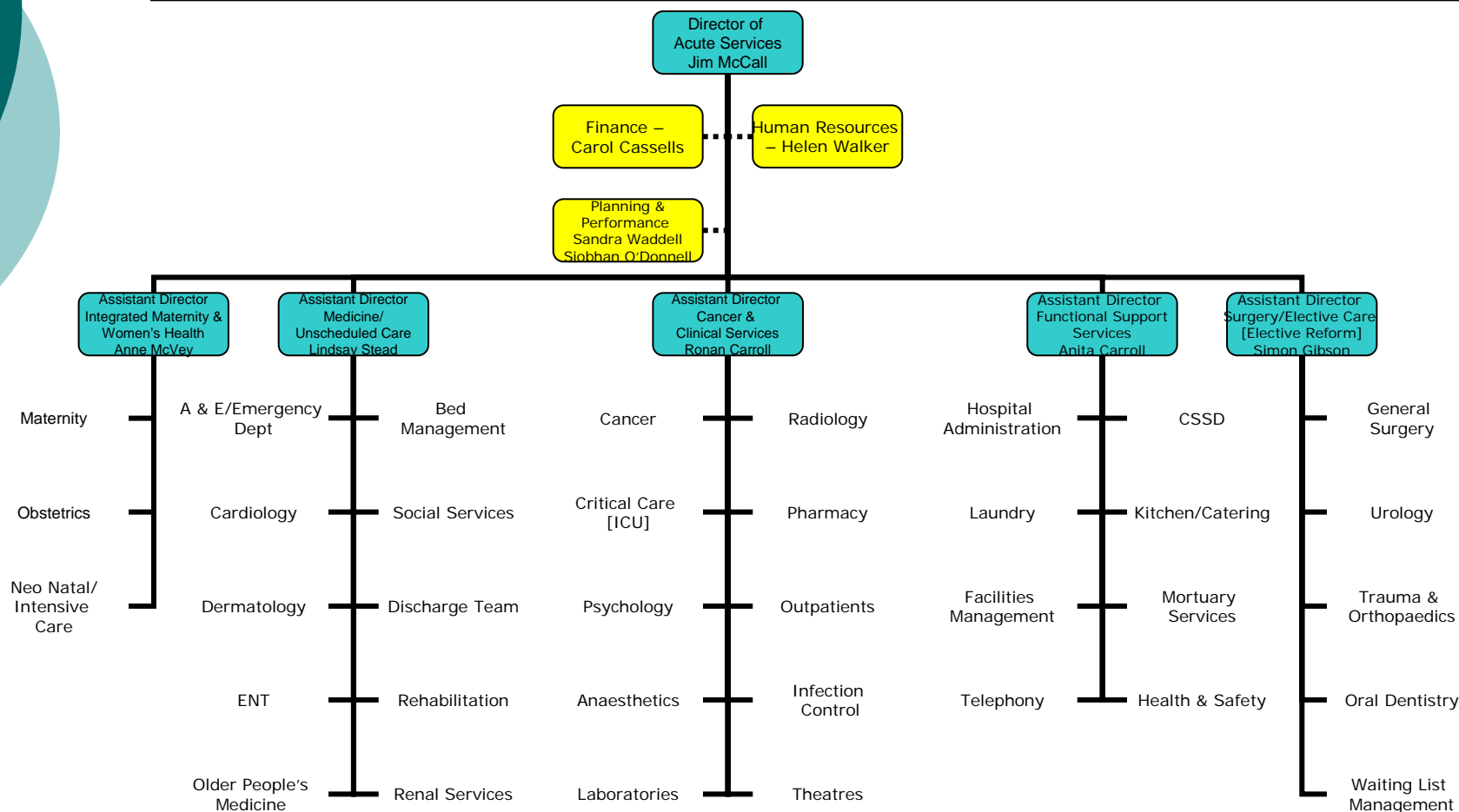
Knowledge, skills and experience required:

- Hold a medical or dental qualification, GMC registration and specialist accreditation.
- Demonstrate evidence of leadership within a team that led to successful service development and/or quality improvement.
- Demonstrate evidence of having worked with a diverse range of stakeholders, both internal and external to the organisation, to achieve successful outcomes.
- Have excellent communication skills, both orally and in writing.
- Be prepared to undertake clinical management development.

SHORTLISTING

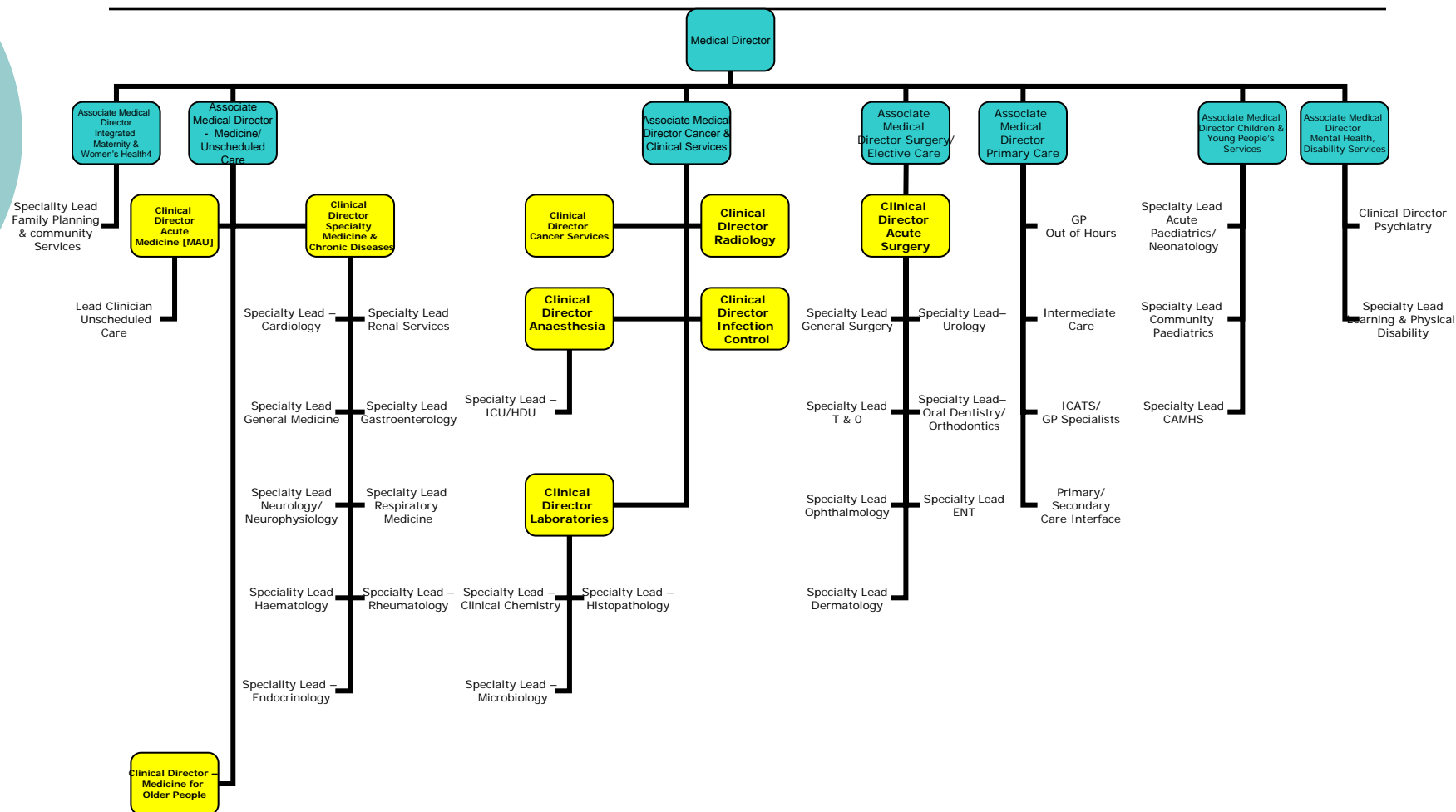
A shortlist of candidates for interview will be prepared on the basis of the information contained in the application form. It is therefore essential that all applicants demonstrate through their application how and to what extent their experience and qualities are relevant to this post and the extent to which they satisfy each criterion specified

Directorate of Acute Services



Medical Management/Structures will be confirmed following appointment of Medical Director

Medical Directorate Structure





Quality Care - for you, with you

JOB TITLE: Consultant Urological Surgeon (with a special interest that will complement the Urological team)

SPECIALTY: Urology

DEPARTMENT / LOCATION: All Consultants are appointed to the Southern Health and Social Care Trust. The base hospital for this post is Craigavon Area Hospital however the post holder may be required to work on any site within the Southern Health and Social Care Trust.

REPORTS TO: Mr E Mackle, AMD, Surgery & Elective Care Division

ACCOUNTABLE TO: Mrs D Burns, Interim Director of Acute Services

INTRODUCTION

This is a replacement post and the successful candidate will join 4 other Consultants to provide the full range of inpatient and outpatient urological services. While the post will be mainly based at Craigavon Area Hospital, there are also existing commitments to South Tyrone Hospital, Armagh Community Hospital, Daisy Hill Hospital, Banbridge Polyclinic and at the new South West Acute Hospital in Enniskillen. As a member of the Consultant team, the successful candidate will play a key role in the promotion of the service including the development and implementation of plans to enhance the Urological service provided by the Southern Trust. It is anticipated that the successful candidate will be able to provide a general urology service for elective and emergency care, though a subspecialty interest that would complement the unit would be advantageous.

PROFILE OF SOUTHERN HEALTH AND SOCIAL CARE TRUST

The Southern Health and Social Care Trust became operational on 1 April 2007 following the amalgamation of Craigavon Area Hospital Group Trust, Craigavon and Banbridge Community Trust, Newry & Mourne Trust and Armagh & Dungannon Health and Social Services Trust. Craigavon Area Hospital is the main acute hospital within the SHSCT, with other facilities on the Daisy Hill Hospital, Newry, Lurgan Hospital, South Tyrone Hospital, Dungannon and Banbridge Polyclinic sites.

Craigavon Area Hospital

Craigavon Area Hospital is the main acute hospital within the Southern Health and Social Care Trust and provides acute services to the local population and a range of services to the total Southern Trust area, covering a population of 324,000.

The current bed complement is distributed over the following specialties; General Surgery, Urology, General Medicine, Geriatric Acute, Dermatology, Haematology, Cardiology, Obstetrics, Gynaecology, Paediatrics, Paediatric Surgery, Paediatric Urology, Paediatric ENT, ENT, Intensive Care, Special Care Babies, Emergency Medicine (A&E), Trauma & Orthopaedics.

Many additional specialties are represented as outpatient services including Ophthalmology, Neurology, Maxillo-Facial and Plastic Surgery, Orthodontic and Special

Dental Clinics.

In October 2001 The Macmillan Building opened and provides dedicated accommodation for Oncology and Haematology outpatient clinics and day procedures. It is also the designated Cancer Unit for the Southern Area and is one of the main teaching hospitals of Queen's University, Belfast.

The Emergency Medicine Department underwent major refurbishment in 2002 and a Medical Admissions Unit opened in March 2003. A postgraduate medical centre and a Magnetic Resonance Imaging facility opened in 2004. The new Trauma and Orthopaedic Unit was officially opened in April 2010. This comprises of 2 adjoining Theatre Suites (1 Orthopaedic & 1 Trauma), an Admissions suite, 7 bedded recovery area and ancillary accommodation and a 15-bed ward.

UROLOGICAL SERVICE

Urology is part of the Surgical Directorate, which comprises of the following specialities:

- General Surgery
- ENT
- Urology
- Orthodontics
- Trauma and Orthopaedics

The Directorate is headed by an Associate Medical Director, a Clinical Director and each Specialty also has a designated Lead Clinician.

The service provided at Craigavon Area Hospital encompasses the entire spectrum of urological investigation and management, with the main exceptions of radical pelvic surgery, renal transplantation and associated vascular access surgery, which are provided by the Regional Transplantation Service in Belfast. Neonatal and infant urological surgery provided by the Regional Paediatric Surgical Service in Belfast.

Craigavon Area Hospital has been designated as a Cancer Unit, with its Urological Department being designated the Urological Cancer Unit for the Area population of 324,000. A wide spectrum of urological cancer management has been provided for some time. Cancer surgery includes orthotopic bladder reconstruction in the management of bladder cancer. Cancer management also includes intravesical chemotherapy for bladder cancer. Immunotherapy for renal cell carcinoma is also performed.

Craigavon is a pathfinder Trust for Urology services with regard to the establishment of Integrated Clinical Assessment and Treatment Services (ICATS). This service is currently supported by 2 nurse practitioners and a General Practitioner with a special interest in urology. The following ICAT services are provided:

- LUTS
- Prostate Diagnostic (One-stop Clinic)
- Haematuria (One-stop Clinic)
- Urodynamics
- Oncology Review
- Andrology
- Stone Service

The department has a fixed site ESWL lithotripter with full facilities for percutaneous surgery and the department also have a holmium laser.

Flexible cystoscopy services are undertaken by Specialist Registrars on the Craigavon/Daisy Hill and South Tyrone sites.

Outreach outpatient clinics are currently provided in Armagh (10 miles from Craigavon) and Banbridge (12 miles from Craigavon) and South Tyrone Hospital (18 miles from Craigavon). Currently one of the General Surgeons in Daisy Hill Hospital who has an interest in Urology provides outpatient and daycase sessions in Daisy Hill Hospital. It is anticipated that further outreach services [outpatients/day surgery] will also be provided at Erne Hospital, Enniskillen in the future.

CURRENT STAFFING IN UROLOGY:

Consultants

Mr M Young
Mr A O'Brien
Mr R Suresh
Mr A Glackin
Vacant post

2 Specialist Registrars
1 Specialty Doctor (currently vacant)
1 Temporary Specialty Doctor (currently vacant)

Supported by:

1 Lecturer Nurse Practitioners
2 Nurse Practitioners
1 GP with Specialist Interest in Urology

CLINICAL DIAGNOSTICS

There is access to a full range of clinical diagnostic facilities on the Craigavon Area Hospital Group Trust site.

The Department of Radiodiagnosis has up-to-date technology including a repertoire ranging from general radiological procedures, through to specialised radiological examinations of ultrasounds, nuclear medicine, MRI and CT scanning.

The hospital pathology department provides full laboratory facilities on Craigavon Area Hospital site, including biochemistry, haematology, microbiology and histopathology as an area service. A comprehensive pharmacy service exists at Craigavon Area Hospital.

There is also a full range of professions allied to medicine available including physiotherapy, occupational therapy, social services, and dietetics.

OTHER FACILITIES

Secretarial support and office accommodation will be provided from within the Directorate.

LIBRARY AND TEACHING RESPONSIBILITIES

Craigavon Area Hospital has a Medical Education Centre with excellent library facilities provided in association with the Medical Library at the Queen's University, Belfast. There is access to electronic online medical databases, such as Med-line and Cochrane.

Regular teaching sessions take place in the Medical Education Centre and general practitioners are invited to participate in and attend meetings.

Craigavon Area Hospital is a recognised teaching hospital for the Queen's University Medical School and attracts a large number of undergraduates. Craigavon Area Hospital is responsible for undergraduate medical teaching for third year students onwards.

The post holder will be expected to participate in undergraduate and postgraduate teaching and general teaching within the Trust and partake in the urology SPR training scheme on a rota basis.

DUTIES OF THE POST (To include Personal Objectives)

The appointee will:

- Have responsibility for urological patients.
- Be expected to share in the on call rota with the existing post holders. While maintaining clinical independence he/she will be expected to work as a member of the urological unit. An emergency theatre is staffed and available 24 hours per day.
- Be expected to undertake administrative and audit duties commensurate with the post and associated with the care of patients and the efficient running of the department.
- Be expected to take a full part in the teaching of undergraduates and post graduates.

SUPPORTING PROFESSIONAL ACTIVITY

You will:

- Be expected to undertake administrative and audit duties commensurate with the post and associated with the care of patients and the efficient running of the department.
- Work, where appropriate, with the development of Care Pathways.
- Be expected to take a full part in the teaching of undergraduates and postgraduates.

Timetable

Week 1

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
07:00							
07:15							
07:30							
07:45							
08:00							
08:15							
08:30							
08:45							
09:00	Clinic	Patient related admin (reports, results etc)	Continuous professional development.	Uroradiology meeting			
09:15							
09:30							
09:45							
10:00		Pre-op ward round		Grand Round			
10:15							
10:30							
10:45							
11:00							
11:15							
11:30							
11:45							
12:00				Continuous professional development.			
12:15							
12:30							
12:45							
13:00	Clinic	Planned in-patient operating sessions	Day surgery	Clinic			
13:15							
13:30							
13:45							
14:00							
14:15							
14:30							
14:45							
15:00							
15:15							
15:30							
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16:00							
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17:30							
17:45							
18:00							
18:15							

18:30							
18:45							
19:00							
19:15							
19:30							
19:45							
20:00		Post-op ward round					
20:15							
20:30							
20:45							
21:00							

Week 2

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
07:00							
07:15							
07:30							
07:45							
08:00		Pre-op ward round	Pre-op ward round				
08:15							
08:30							
08:45							
09:00				Uroradiology meeting			
09:15							
09:30							
09:45							
10:00							
10:15							
10:30		Planned in-patient operating sessions	Planned in-patient operating sessions				
10:45							
11:00	Clinic			Grand Round			
11:15							
11:30							
11:45							
12:00							
12:15							
12:30							
12:45							
13:00		Post-op ward round	Post-op ward round	Continuous professional development.			
13:15							
13:30							
13:45							
14:00							
14:15							
14:30	TRUS & biopsy				Continuous professional development.		
14:45							
15:00		Patient related admin (reports, results etc)	Continuous professional development.	Surgery MDT			
15:15							
15:30							
15:45							
16:00							

16:15							
16:30							
16:45							
17:00							
17:15							
17:30							
17:45							
18:00							
18:15							
18:30							
18:45							
19:00							

Week 3

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
07:00							
07:15							
07:30							
07:45							
08:00							
08:15							
08:30							
08:45							
09:00				Uroradiology meeting			
09:15							
09:30							
09:45							
10:00							
10:15							
10:30		Patient related admin (reports, results etc)					
10:45			Continuous professional development.	Grand Round	Day surgery		
11:00							
11:15							
11:30							
11:45							
12:00							
12:15							
12:30	Clinic						
12:45		Pre-op ward round		Continuous professional development.			
13:00							
13:15							
13:30							
13:45							
14:00							
14:15		Planned in-patient operating sessions	Continuous professional development.		Clinic		
14:30							
14:45				Surgery MDT			
15:00							
15:15							
15:30							
15:45							

16:00						
16:15						
16:30						
16:45						
17:00						
17:15						
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17:45						
18:00						
18:15						
18:30						
18:45						
19:00						
19:15						
19:30						
19:45						
20:00		Post-op ward round				
20:15						
20:30						
20:45						
21:00						

Week 4

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
07:00							
07:15							
07:30							
07:45							
08:00		Pre-op ward round	Pre-op ward round				
08:15							
08:30							
08:45				Uroradiology meeting			
09:00							
09:15							
09:30							
09:45							
10:00							
10:15							
10:30		Planned in-patient operating sessions	Planned in-patient operating sessions				
10:45							
11:00	Clinic			Grand Round			
11:15							
11:30							
11:45							
12:00							
12:15							
12:30							
12:45				Continuous professional development.			
13:00	TRUS & biopsy	Post-op ward round	Post-op ward round				
13:15							
13:30			Continuous professional				

13:45			development.				
14:00							
14:15							
14:30							
14:45							
15:00							
15:15		Patient related admin (reports, results etc)		Surgery MDT			
15:30							
15:45							
16:00							
16:15							
16:30							
16:45							
17:00							
17:15							
17:30							
17:45							
18:00							
18:15							
18:30							
18:45							
19:00							

Week 5

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
07:00							
07:15							
07:30							
07:45							
08:00							
08:15							
08:30							
08:45				Uroradiology meeting			
09:00							
09:15							
09:30							
09:45							
10:00							
10:15							
10:30							
10:45	Emergency operating sessions	Emergency operating sessions	Emergency operating sessions	Emergency operating sessions	Emergency operating sessions		
11:00							
11:15							
11:30							
11:45							
12:00							
12:15							
12:30							
12:45							
13:00	Continuous professional	Continuous professional	Day surgery		Planned in-patient operating sessions		
13:15							

13:30	development.	development.					
13:45							
14:00							
14:15							
14:30							
14:45							
15:00							
15:15							
15:30				Surgery MDT			
15:45							
16:00							
16:15							
16:30							
16:45							
17:00					Post-op ward round		
17:15							
17:30							
17:45							
18:00							
18:15							
18:30							
18:45							
19:00							

Activities

Day	Time	Weeks	Activity	Employer	Location	Cat.	Num/Yr	PA	Hours
						Total:	9.60	38:12	
Mon	09:00 - 13:00	2, 4	Clinic Comments: Prostate clinic	Southern He..	Craigavon A..	DCC	16.8	0.40	1:36
Mon	09:00 - 13:00	5	Emergency operating sessions Comments: CONSULTANT OF THE WEEK - Ward Round, Emergency operating, triage and virtual clinic	Southern He..	Craigavon A..	DCC	8.4	0.20	0:48
Mon	09:00 - 17:00	1, 3	Clinic Comments: Oncology Clinic	Southern He..	Craigavon A..	DCC	16.8	0.80	3:12
Mon	13:00 - 17:00	2, 4	TRUS & biopsy	Southern He..	Craigavon A..	DCC	16.8	0.40	1:36
Mon	13:00 - 17:00	5	Continuous professional development. Comments: CONSULTANT OF THE WEEK	Southern He..	Craigavon A..	SPA	8.4	0.20	0:48
Tue	08:00 - 08:30	2, 4	Pre-op ward round	Southern He..	Armagh Comm..	DCC	16.8	0.05	0:12
Tue	08:30 - 13:00	2, 4	Planned in-patient operating sessions	Southern He..	Craigavon A..	DCC	16.8	0.45	1:48
Tue	09:00 - 12:30	1	Patient related admin (reports, results etc)	Southern He..	Craigavon A..	DCC	8.4	0.18	0:42
Tue	09:00 - 12:30	3	Patient related admin (reports, results etc)	Southern He..	Armagh Comm..	DCC	8.4	0.18	0:42
Tue	09:00 - 13:00	5	Emergency operating sessions Comments: CONSULTANT OF THE WEEK - Ward rounds, emergency operating, triage and virtual clinic	Southern He..	Craigavon A..	DCC	8.4	0.20	0:48
Tue	12:30 - 13:00	1, 3	Pre-op ward round	Southern He..	Craigavon A..	DCC	16.8	0.05	0:12
Tue	13:00 - 13:30	2, 4	Post-op ward round	Southern He..	Craigavon A..	DCC	16.8	0.05	0:12
Tue	13:00 - 17:00	5	Continuous professional development. Comments: cow	Southern He..	Craigavon A..	SPA	8.4	0.20	0:48
Tue	13:00 - 20:00	1, 3	Planned in-patient operating sessions	Southern He..	Craigavon A..	DCC	16.8	0.73	2:48

Day	Time	Weeks	Activity	Employer	Location	Cat.	Num/Yr	PA	Hours
Tue	14:00 - 17:00	2, 4	Patient related admin (reports, results etc)	Southern He..	Craigavon A..	DCC	16.8	0.30	1:12
Tue	20:00 - 20:30	1, 3	Post-op ward round	Southern He..	Craigavon A..	DCC	16.8	0.07	0:12
Wed	08:00 - 08:30	2, 4	Pre-op ward round	Southern He..	Craigavon A..	DCC	16.8	0.05	0:12
Wed	08:30 - 13:00	2, 4	Planned in-patient operating sessions	Southern He..	Craigavon A..	DCC	16.8	0.45	1:48
Wed	09:00 - 13:00	5	Emergency operating sessions Comments: cow - Ward Rounds, Emergency operating, Triage and virtual clinic	Southern He..	Craigavon A..	DCC	8.4	0.20	0:48
Wed	09:00 - 13:00	1, 3	Continuous professional development.	Southern He..	Craigavon A..	SPA	16.8	0.40	1:36
Wed	13:00 - 13:30	2, 4	Post-op ward round	Southern He..	Craigavon A..	DCC	16.8	0.05	0:12
Wed	13:00 - 17:00	1	Day surgery	Southern He..	Craigavon A..	DCC	8.4	0.20	0:48
Wed	13:00 - 17:00	5	Day surgery Comments: cow	Southern He..	Craigavon A..	DCC	8.4	0.20	0:48
Wed	13:30 - 17:00	2-4	Continuous professional development.	Southern He..	Craigavon A..	SPA	25.2	0.53	2:06
Thu	08:30 - 09:30	1-5	Uroradiology meeting	Southern He..	Craigavon A..	DCC	42	0.25	1:00
Thu	09:30 - 13:00	5	Emergency operating sessions Comments: COW	Southern He..	Craigavon A..	DCC	8.4	0.18	0:42
Thu	10:00 - 12:00	1-4	Grand Round	Southern He..	Craigavon A..	DCC	33.6	0.40	1:36
Thu	12:00 - 14:00	1-4	Continuous professional development.	Southern He..	Craigavon A..	SPA	33.6	0.40	1:36
Thu	14:00 - 17:00	2-4	Surgery MDT	Southern He..	Craigavon A..	DCC	25.2	0.45	1:48
Thu	14:00 - 17:00	1	Clinic	Southern He..	Craigavon A..	DCC	8.4	0.15	0:36
Thu	14:00 - 17:00	5	Surgery MDT Comments: cow	Southern He..	Craigavon A..	DCC	8.4	0.15	0:36
Fri	08:15 - 13:00	3	Day surgery 45 minutes travel from Craigavon Area Hospital.	Southern He..	Daisy Hill ..	DCC	8.4	0.24	0:57
Fri	09:00 - 13:00	5	Emergency operating sessions Comments: COW - ward Rounds, Emergency Operating, Triage and Virtual clinics	Southern He..	Craigavon A..	DCC	8.4	0.20	0:48
Fri	13:00 - 17:00	5	Planned in-patient operating sessions Comments: COW	Southern He..	Craigavon A..	DCC	8.4	0.20	0:48
Fri	13:00 - 17:00	2	Continuous professional development.	Southern He..	Craigavon A..	SPA	8.4	0.20	0:48
Fri	13:00 - 17:45	3	Clinic 45 minutes travel to Craigavon Area Hospital.	Southern He..	Daisy Hill ..	DCC	8.4	0.24	0:57
Fri	17:00 - 17:30	5	Post-op ward round	Southern He..	Craigavon A..	DCC	8.4	0.03	0:06

On-call

Type	Normal	Premium	Cat.	PA
			Total:	1.00
Predictable	n/a	n/a	DCC	
Unpredictable	n/a	n/a	DCC	1.00

PA Breakdown

	Main Employer PAs	Total PAs	Total hours
Direct Clinical Care (DCC)	8.68	8.68	31:18
Supporting Professional Activities (SPA)	1.93	1.93	7:42
Total	10.60	10.60	39:00

On-call availability

On-call frequency?	1 in 5
Category	Category A
PA Count:	
The number of PAs arising from your predictable on-call work is:	0.00
The number of PAs arising from your unpredictable on-call work is:	1.00
Your on-call availability supplement is:	5%

Balance between Direct Clinical Care and Other Programmed Activities

Supporting Professional Activities including participation in training of other staff, medical education, continuing professional development, formal teaching of other staff, audit, job planning, appraisal, research, clinical management and local clinical governance activities are recognised within the Southern Health and Social Care Trust. The Trust expects that all consultants undertake a minimum of 1.5 SPA's (6 hours) in their job plan every week. The Trust also recognises that there are various activities as identified by all the Associate Medical Directors in each directorate and approved by the Medical Director where additional SPA time will be necessary. Where a newly appointed consultant will be involved in these additional SPA commitments, the precise balance of Programmed Activities in their job plan will be reviewed on appointment and agreed as part of their individual Job Plan review.

Programmed Activities for additional HPSS responsibilities and external duties will also be allocated for special responsibilities that have been formally approved and/or appointed by the Trust.

JOB PLAN REVIEW

This Job Plan is subject to review at least once a year by you and the Clinical Director before being approved by the Chief Executive. For this purpose, a copy of the current Job Plan (and Job Description, if appropriate), including an up-to-date work programme which may result from a diary exercise and objectives agreed at annual appraisal, together with note(s) provided by either side – of any new or proposed service or other developments need to be available. In the case of a new employee, a review of the Job Plan will take place 3 months after commencement and annually thereafter.

If it is not possible to agree a Job Plan, either initially or at an annual review, there are agreed procedures for facilitation and appeal with the final decision normally being accepted by the Trust Board.

MANAGEMENT ARRANGEMENTS

The Chief Executive has overall responsibility for Acute Services in the Southern Health and Social Care Trust. The Consultant appointed will have accountability to the Chief Executive through the Director of Acute Services, the Associate Medical Director and the Lead Consultant for the appropriate and smooth delivery of the service.

QUALIFICATIONS AND EXPERIENCE

See Employee Profile.

EMPLOYING AUTHORITY

Southern Health and Social Care Trust.

TERMS AND CONDITIONS

- Employment will be on the Terms and Conditions of the New Consultant Contract.
- Salary Scale is currently equivalent to NHS Remuneration for Hospital Consultants.
- The appointment may be on the basis of either whole time, part time or job share.
- Annual leave will be 32 days per annum initially, rising to 34 days after 7 years' seniority plus 10 statutory and public holidays.
- The post will be superannuable unless the successful candidate decides to opt out of the scheme.
- The Trust is committed to Continuing Professional Development (CPD) and will provide adequate study leave and financial support.
- The successful candidate will be required to reside within a reasonable distance of Craigavon Area Hospital.
- The successful applicant will be required to undergo a Health Assessment in the Trust's Occupational Health Department, to establish fitness to undertake the duties attached to the post. He/she will be required to bring evidence of immunisations/vaccinations to this assessment.
- The post will be subject to termination at any time, by three months' notice given on either side.

GENERAL REQUIREMENTS

The post holder must:

- Ensure the Trust's policy on equality of opportunity is promoted through his/her own actions and those of any staff for whom he/she has responsibility.
- Co-operate fully with the implementation of the Trust's Health and Safety arrangements, reporting any accidents/incidents/equipment defects to his/her manager, and maintaining a clean, uncluttered and safe environment for patients/clients, members of the public and staff.
- Adhere at all times to all Trust policies/codes of conduct, including for example:
 - Infection Control
 - Smoke Free policy
 - IT Security Policy and Code of Conduct
 - standards of attendance, appearance and behaviour
- All employees of the trust are legally responsible for all records held, created or used as part of their business within the Trust including patients/clients, corporate and administrative records whether paper-based or electronic and also including emails. All such records are public records and are accessible to the general public, with limited exception, under the Freedom of Information act 2000 the Environmental Information Regulations 2004 and the Data Protection Acts 1998. Employees are required to be conversant with the Trusts policy and procedures on records management and to seek advice if in doubt.
- Represent the Trust's commitment to providing the highest possible standard of service to patients/clients and members of the public, by treating all those with whom he/she comes into contact in the course of work, in a pleasant, courteous and respectful manner.

- Understand that this post may evolve over time, and that this Job Description will therefore be subject to review in the light of changing circumstances.
- It is a standard condition that all Trust staff may be required to serve at any location within the Trust's area, as needs of the service demand.

ADDITIONAL POINTS

- From 1 January 1990 medical staff have not been required to subscribe to a Medical Defence Organisation. It should be noted, however, that the Trust's indemnity only covers the Trust's responsibilities and, therefore, the appointee is advised to maintain membership of a recognised professional defence organisation for any work which does not fall within the scope of the Indemnity Scheme.
- Canvassing will disqualify.
- Application forms can be obtained by contacting the Recruitment & Selection Department, Hill Building, St. Luke's Hospital site, Loughgall Road, Armagh, BT61 7NQ. Telephone number: Personal Information redacted by the USI
- For informal enquiries regarding this post please contact Mr Michael Young, Lead Clinician, Urological Surgeon, Craigavon Area Hospital, telephone Personal Information redacted by USI.
- You must clearly demonstrate on your application form how you meet the required criteria – failure to do so may result in you not being shortlisted.
- Candidates wishing to apply online can do so at www.HSCRecruit.com, alternatively application forms for the post may be downloaded and forwarded to the Recruitment & Selection Department.
- Applications should be made on the prescribed form, and must be returned to the Recruitment & Selection Department, **no later than 4:30pm on Thursday 5 December 2013.**
- As part of the Recruitment & Selection process it may be necessary for the Trust to carry out an Enhanced Disclosure Check through Access NI before any appointment to this post can be confirmed.
- A shortlist of candidates for interview will be prepared on the basis of the information contained in the application form. It is therefore essential that all applicants demonstrate through their application how and to what extent their experience and qualities are relevant to this post and the extent to which they satisfy each criterion specified, including clarification around equivalent qualifications.
- Where there are large numbers of applicants, the panel reserves the right to include the Desirable criteria in the Essential Criteria for shortlisting purposes.
- Following interviews, a waiting list may be compiled for future permanent/temporary full-time/part-time/job share posts which may arise throughout the Trust initially within the next 6 months although some lists may be extended up to a maximum of 12 months.

WE ARE AN EQUAL OPPORTUNITIES EMPLOYER

SOUTHERN HEALTH & SOCIAL CARE TRUST**PERSONNEL SPECIFICATION**

JOB TITLE: Consultant Urological Surgeon (with a special interest that will complement the Urological team) – Craigavon Area Hospital

DIRECTORATE: Acute Services

HOURS: Full-time

Ref No: 73813109

October 2013

SALARY: £74,504 - £100,446 per annum

Notes to applicants:

1. **Your application form:** You must clearly demonstrate on your application form how you meet the required criteria – failure to do so may result in you not being shortlisted. You should do this for both essential and desirable criteria requirements. All essential criteria requirements listed below must be met by the stated closing date, unless otherwise stated.
2. **CVs:** If you decide to submit a CV, you should note that CV's will only be accepted in support of a properly completed application form. For shortlisting purposes the panel will only be assessing your application form, therefore do not rely on your CV to evidence shortlisting criteria. You **MUST** demonstrate all necessary shortlisting criteria on the Trust's standard application form or you will not be shortlisted.
3. Proof of qualifications and/or professional registration will be required if an offer of employment is made – if you are unable to provide this, the offer may be withdrawn.
4. This criterion will be waived in the case of a suitable applicant who has a disability which prohibits them from driving but who is able to organise suitable alternative arrangements in order to meet the requirements of the post in full.

Do not rely on your CV to evidence shortlisting criteria. You MUST demonstrate all necessary shortlisting criteria on the Trust's standard application form or you may not be shortlisted.

ESSENTIAL CRITERIA – these are criteria all applicants **MUST** be able to demonstrate either at shortlisting or at interview. Applicants should therefore make it clear on their application form whether or not they meet these criteria. Failure to do so may result in you not being shortlisted. The stage in the process when the criteria will be measured is stated below;

The following are essential criteria which will initially be measured at Shortlisting Stage although may also be further explored during the interview stage;

1. Hold Full registration with the General Medical Council (London) with License to Practice.
2. Hold FRCS (Urol) or equivalent qualification.
3. Entry on the GMC Specialist Register via
 - CCT (proposed CCT date must be within 6 months of interview)
 - CESR or
 - European Community Rights
4. Hold a full current driving license valid for use in the UK and have access to a car on appointment.¹

The following are essential criteria which will be measured during the interview stage.

5. Ability to work well within a multidisciplinary team.
6. Ability to lead and engender high standards of care.
7. Ability to develop strategies to meet changing demands.
8. Willingness to work flexibly as part of a team.
9. Good communication and interpersonal skills.
10. Ability to effectively train and supervise medical graduates and postgraduates.
11. Awareness of changes in the Health Service nationally and locally.
12. Understanding of the implications of Clinical Governance.
13. Knowledge of evidence based approach to clinical care.
14. Knowledge of the role of the post.
15. Interest in teaching.

DESIRABLE CRITERIA – these will only be used where it is necessary to introduce additional job related criteria to ensure files are manageable. Applicants should therefore make it clear on their application form whether or not they meet these criteria. Failure to do so may result in you not being short listed

1. Higher Degree e.g. MD/MCh or equivalent.
2. Completed ATLS Certification.
3. Have additional skills other than those specified in the job title.
4. Have some formal training in teaching methods.
5. Have management experience.

WE ARE AN EQUAL OPPORTUNITIES EMPLOYER

¹ This criterion will be waived in the case of a suitable applicant who has a disability which prohibits them from driving but who is able to organise suitable alternative arrangements in order to meet the requirements of the post in full.

REPORT SUMMARY SHEET

Quality care – for you, with you

Meeting: Date:	Senior Management Team 29 th March 2022
Title:	Clinical and Social Care Governance Report
Lead Director:	Dr Maria O’Kane, Medical Director
Corporate Objective:	Safe, high quality care
Purpose:	Information
Overview: Provide SMT with an Oversight of Weekly Activity in relation to Clinical & Social Care Governance	
<ul style="list-style-type: none"> 96 ongoing SAIs <ul style="list-style-type: none"> 48 Acute 35 MHD 3 CYPs 10 OPPC 2 New SAI Notifications MHD (1) Incident in Dorsy unit, resulting in patient having finger amputated (2) Suicide of SHSCT & SEHSCT service user within the Community 1 New SAI Notification Acute, Deceased COVID-19 positive patient released to family, wake commenced with open casket. 1 SAI Report submitted MHD – Death of service user known to Mental Health services, recommendations detailed at section 13. 2 SAI Reports submitted CYPs – 2 related incidents regarding overdose of medication. Early Alert CYPs re former Trust foster carer who was found guilty of a number of offences. Case due for sentencing April 2022. 6 New Clinical Negligence Claims - details provided at section 35 of report Safeguarding – Increase in the number of Physical Abuse allegations TC Domiciliary Care Agency - 3 Whistleblowing referrals via RQIA. Emergency meeting held 23/03 and contingency plans are being put in place. Information Governance meeting being held with Acute Services to address the number of outstanding SARs Response is being drafted to the HSCB for the letters received regarding outstanding Safety and Quality Reminder Letters and SAIs Extensive work is ongoing with regards to the Public Inquiry across all Directorates 	

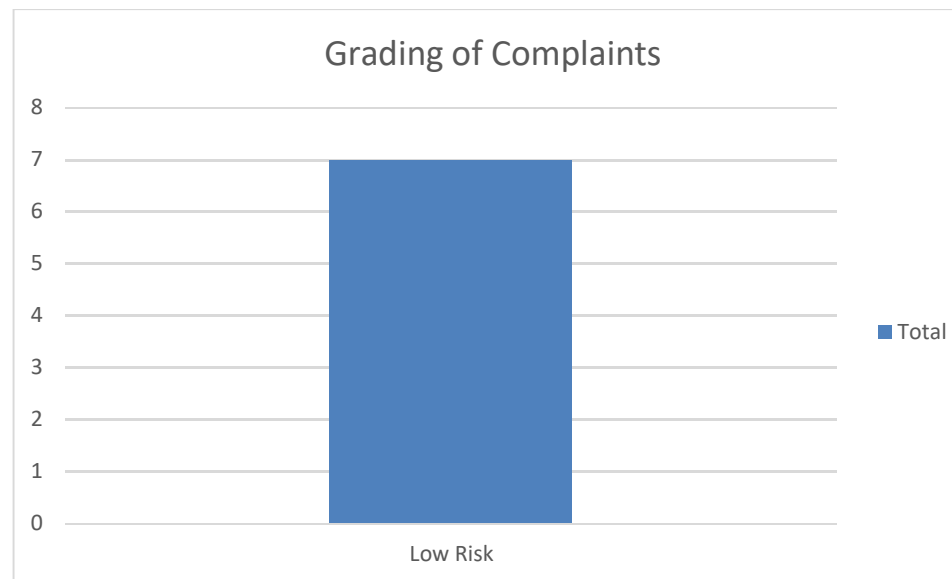
Summary of Weekly Governance Activity 14.03.2022-20.03.2022

	DIRECTORATE				
	ACUTE Number	MHLD Number	CYP Number	OPPC Number	TOTAL Number
New SAIs Notifications	1	2	0	0	3
SAI Reports submitted to HSCB	0	1	2	0	3
Ongoing SAIs*	48	35	3	10	96
High Risk Complaints	0	0	0	0	0
NIPSO Case Accepted for Investigation	0	0	0	0	0
NIPSO Draft/Final Reports Received	0	0	0	0	0
Early Alerts	0	1	1	2	4

*Below highlights the change in ongoing SAI figures from 96 last week to 96 this week:

Ongoing SAIs reported last week –13/03/2022		96
Add New SAI notifications:	MHD	+2
	Acute	+1
Less SAI reports submitted:	MHD	-1
	CYPS	-2
Ongoing SAIs reported week ended 20/03/2022		96

Grading of Formal Complaints Received 14.03.2022-20.03.2022



ACUTE DIRECTORATE

Data provided by Corporate Office from the Datix Incident Management System to the Weekly Governance De-Brief (Thursday mornings – 8.30am – 9.30am)

1. Status of SAIs - Summary of the status of SAIs between 14.03.2022-20.03.2022

Any reports received after Friday will not be reflected in the numbers below until the following week

More than 26 weeks	Less than 26 weeks	Within Timescales	Level 3	Total
14	22	9	3	48

2. SAI Notifications

Incident ID	Incident Date	Description
Personal information redacted by USI	Personal Information redacted by the USI	<p>On Personal Information redacted by USI patient with known metastatic lung cancer was admitted to Craigavon Area Hospital due to agitation, reduced GCS and chestiness. A Covid-19 swab at time of admission was negative. The patient was treated with steroids and Keprra. ECG confirmed seizure activity. After a few days, the patient's condition deteriorated further.</p> <p>On the Personal Information redacted by USI at 15:45, the patient was re-swabbed for Covid-19. At 21:30, the patient passed away.</p> <p>On the Personal Information redacted by USI at 02:45, the patient's death was certified. The cause of death was progressive metastatic lung Cancer.</p> <p>The patient's body was taken to the mortuary and released to the family at 16:00. A positive Covid-19 result was available at 16:45. The family was later contacted by the Ward to advise the patient had tested positive for Covid-19. The family advised staff a wake was already in progress with at open casket at the home. The family advised approximately 100 people had attended the wake.</p> <p>24/03/2022 UPDATE- Dr O'Kane has contacted AMDs/CDs regarding recent statistics, which confirmed there are a high number of queries being received regarding Death Certificates. -</p>

b/f from last week

Incident ID	Incident Date	Description
1 Personal information redacted by USI	Personal Information redacted by USI	<p>On the Personal Information redacted by USI, a Personal Information redacted by USI male patient attended Daisy Hill Hospital Emergency Department following an incident of collapse whilst playing football. The patient reported visual disturbance, vomiting and an occipital headache. The patient's ROSIER score was documented as 1. A CT brain scan was completed which showed nil acute. The patient was admitted under the Medical Team and investigated for a subarachnoid hemorrhage.</p>

		On the 18 November 2021, the patient had a new onset of speech disturbance. A further CT brain and CT angiogram were completed which showed a basilar artery occlusion. Following discussion with the Stroke Team in the Royal Victoria Hospital the patient was accepted for transfer to the RVH for thrombectomy.
Personal information redacted by USI	02/01/2022	This patient acquired Clostridium Difficile infection on Ramone Ward 1 five days after another patient. He subsequently died with Clostridium Difficile recorded on part 2 of his death certificate. Whole genome sequencing results confirm that there are zero SNP differences between the strains and so they are indistinguishable and indicative that transmission has occurred.
Personal information redacted by USI	09/12/2021	This patient was admitted on [Personal Information redacted by USI] following an ischaemic stroke. She sustained an in-patient fall the next day, suffering a left neck of femur fracture. She proceeded to theatre for a dynamic hip screw on 21 December 2021. A post-surgery review by the anaesthetic team confirmed the patient was not for escalation of care. Anticipatory medications were prescribed on 23 December 2021 and the patient passed away on [Personal Information redacted by USI].
Personal information redacted by USI	18/02/2022	<p>This [Personal Information redacted by USI] old patient presented to ED on 30/11/21 with reduced oral intake, reduced mobility and increased confusion. The patient had a fluctuating level of consciousness and episodes of agitation.</p> <p>Whilst an inpatient the patient remained confused and had multiple falls on the ward. On the 31/12/21, the patient fell sustaining a laceration to right forehead requiring sutures. A CT brain was undertaken, which showed no intracranial haemorrhage or CT evidence to suggest other acute intracranial pathology. No skull fracture. The patient was subsequently placed on 1:1 supervision.</p> <p>The patient sustained a further fall on 18 February 2022. A CT Brain showed an acute right-sided subdural haematoma with mild mass effect. The patient was discussed with neurosurgery team who advised conservative management.</p> <p>The patient was discharged home on 8 March 2022.</p>

3. Intertrust and Interface Incidents

Incident Date	Trust Origin	Description
28/02/2022 - 13/03/2022	NIAS	2 Intertrust Incidents received from NIAS re ambulances waits beyond 30 mins at SHSCT Emergency Departments as per summary below.
14/01/2022	HSCB - Ardmore GP Practice	On from previous weeks

		<p>Patient discharged to home, which is a facility for patients with Learning disability. Discharged on a Thursday evening and was newly commenced on warfarin.</p> <p>Discharge documentation not clear re dosage or when to give dosage resulting in administration error.</p> <p>Patient had been booked into an appt on Fri pm with nurse in practice for an INR check – this gentleman is housebound and can't attend practice.</p> <p>Patient DNA'd appt and thankfully practice nurse started investigating and realised it was a new warfarin, was Friday afternoon and DN hadn't been organised and there was no follow up.</p> <p>Discussed with hospital team as INR not stable (multiple held doses and discharged when first INR hit target), no transfer of care, DN organised to get an INR and hospital INR clinic took responsibility for ongoing monitoring so no adverse outcomes.</p> <p>17/02/2022: Chris to review details and provide feedback</p> <p>24/02/2022: Further information being obtained for screening. The doctor was not aware of the protocol currently in place. The GP did not receive the discharge letter.</p> <p>03/03/2022: Was due to be presented at screening, postponed due to lack of Quorum, will update next week. IT have confirmed that the discharge letter was submitted to the GP. Action: Jilly to speak with Dr Rose McCullagh regarding the process of Doctor speaking directly with GP and the practicalities surrounding this. Action: Nicole to invite Mary Donnelly and Rose McCullough to these meetings (completed)</p> <p>10/3/2022 – Currently being reviewed at screening – Chris to provide update on outcome.</p> <p>24/03/2022 – Currently being screened – b/f to next week</p>
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4. Catastrophic Incidents

Personal Information redacted by the - During handover , we were informed that patient was very unwell. Vomited coffee ground and reviewed by FY1. Bolus of 250 Normal saline was given to patient. NEWS 5. On 5L Oxygen. HB 81. For blood transfusion in the morning. Soon after handover , i went to patient. She was unresponsive, . NEWS 17. BP 74/43, HR 116, SATS 78% ON 2L Oxygen, Temp 34.1. I quickly asked my colleague to bleep SHO. FY1, SHO, Bed manager and clinical co-ordinator were immediately bleeped. Patient was not covered on upper body, several blankets put on patient. Colleague went to ask for Hugger bear blanket from AMU and this was placed on patient as soon as it arrived in ward. SHO came in to ward shortly, Patient treated for infection/Sepsis. Patient given several boluses (N/saline) as BP was low (BP 74/43). I.V Taz and Gentamicin administered as prescribed. ECG done as requested twice. Family informed about patient's condition and offered to come into ward at their own risk as NOK was not fit tested. SHO spoke to NOK with update and NOK was coming into ward. VBG done by SHO around 23.55. Glucose was noted to be low at 0.5. 00.30 BM checked <1.1 , Ket 1.9. Immediately patient was treated for Hypo. Glucose 50% I.V administered by SHO. 100ml 10% Glucose administered bolus. 01.00 Patient passed away

24/03/2022 Update: This incident has been reviewed at screening, no immediate learning or concerns raised

b/f from last week

Personal information redacted by USI - Patient attended ED on 05.01.2022 as a collapse & unresponsive with CPR performed in PNH. Admitted medically aspiration pneumonia/CAP. Approx 2330 on 06.01.2022 patient desaturated while in Yellow Area - further aspirated. Transferred to Amber Resus - seen by ED doctors & high flow o2 applied. Further deteriorated & cardiac arrest. Transferred to Red Resus & ALS implemented. ROSC briefly then arrested again. Personal information redacted by USI

24/03/2022 Update: Reviewing this and an update will be given next week

5. Early Alert (from previous week)

Update 24/02/2022: Letters being drafted to patients re Lab error. Chris to speak with Ruth Rogers regarding Kernan Labs. **Update 03/03/2022:** Chris confirmed he is still to speak to Ruth Rogers re: Kernan Labs. Chris also confirmed that this will be an SAI. He is meeting with Barry Conway 03/03/2022 to discuss the notification. The team are clarifying a bit more detail prior to submitting surrounding impact on service users etc.

Update 10/3/2022 – Chris following up with Labs today and will feedback at next meeting. Letters being finalised with decision to be made regarding whether they will be circulated from CEx or Chair's office.

Update 24/03/2022- Chris is meeting with the Assistant Director to progress communication with families.

6. No Never Events this period.

7. SJR Process

Discussion at meeting	Action
SJR Process for Covid Deaths	<p>09/09/2021 – Fiona to share the leaflet for families with Carly, Dr O’Kane and Dr Gormley.</p> <p>16/09/2021 – Dr O’Kane recommends that a Surgical volunteer should complete process with IPC input, David Gilpin</p> <p>23/09/2021 – A process around the SJR is to be finalised.</p> <p>07/10/2021 – Dr Gormley provided an update on a meeting held in relation to the SJR process. This process is likely to take as long as the SAI process but the NHS England model does not detail processes for family engagement like the SAI model. The team are going to carry out a pilot on some of the cases initially.</p> <p>14/10/2021 – The team are continuing with developing this process.</p>

	<p>29/10/2021 – No update, development of process continues.</p> <p>04/11/2021 –Margaret Marshall is meeting with Dr Gormley and Stephen Wallace to discuss the paper that has been drafted to operationalise the process. Dr Gormley and Stephen Wallace also meeting with NHSCT to compare processes to ensure standardisation.</p> <p>11/11/2021 – No update. Damian will chase Margaret.</p> <p>18/11/2021 – The team plan on starting to apply the SJR process to 10 cases in the coming weeks</p> <p>25/11/2021 – 9 cases identified for pilot. Process has been shared with Mary and Anne. There will be work needed from Acute Governance to support this piece of work. Chris to raise this with Acute Governance.</p> <p>02/12/2021 – Dr Gormley meeting with Anne and Mary 7th/8th December. Chris will follow this up to secure the date.</p> <p>09/12/2021 – Work is progressing.</p> <p>16/12/2021 – Work is progressing.</p> <p>23/12/2021 – work ongoing</p> <p>30/12/2021 – Work ongoing</p> <p>13/01/2022 – Options appraisal document being presented to Bronze. Team are meeting with BHSCT to discuss their process.</p> <p>20/01/2022 – Options appraisal presented to Bronze with agreement to take to Chief Executives for uniformed approach.</p> <p>03/02/2022 – Dr Gormley will follow up the options appraisal with Dr O’Kane.</p> <p>24/02/2022 – Dr O’Kane shared the SJR process for the review of HCAI deaths with her Chief Executive colleagues. SEHSCT provided comprehensive feedback. Dr Gormley to review/respond to this feedback and Dr O’Kane will then share this with the Chief Executives.</p> <p>03/03/2022 – No update.</p> <p>10/03/2022 – No update.</p>
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
8. Directors Oversight Groups

- General Surgery
- Obs and Gynae
- Urology – work is progressing

- Microbiology – awaiting the receipt of all family engagement.
- New Oversight group (MHD/Acute) to be created to identify and action learning from the recent Coroners case involving a patient who absconded from the ward and completed suicide.

9. RQIA Recommendations

10. Issues escalated by Corporate or Directorate office at meeting

- Recommendation from SA  – Dr Gormley asked for recommendation 1 to remain on this agenda.

1. The Radiology Senior Team will provide administrative support for the Radiology General Enquiries Service to determine what additional support is needed to ensure effective. Communications for inpatient examinations that are rejected or changed through the justification process. In reviewing these processes, the Radiology Team will consider how ICT can be best utilised to ensure this process is effective.

10/03/2022: With Radiology for review prior to being circulated to Dr Gormley.

MENTAL HEALTH AND DISABILITY DIRECTORATE

Data provided by Corporate Office from the Datix Incident Management System to the Weekly Governance De-Brief (Thursday mornings – 8.30am – 9.30am)

11. Status of SAIs


Summary of the status of SAIs between 14.03.2022-20.03.2022

More than 26 weeks	Less than 26 weeks	Level 3	Within Timescale	Total
15	12	2	6	35

12. SAI Notifications


Incident ID	Incident Date	Description
Personal Information redacted by USI	11/03/2022	A male patient within the Dorsy Unit required seclusion to assure his and other patients/staff safety due to escalated assaultive behaviours. Staff positioned him in the seclusion suite, disengaged holds and proceeded to exit the seclusion suite. The patient impulsively ran towards the door of the seclusion suite and as the door was closing he placed his hand on the door causing injury to the fifth digit on his right hand. The patient required transfer to the Emergency Department (CAH) and then to the Ulster Hospital where he underwent surgery resulting in the amputation of his fifth digit. Also reported as an Early Alert
Personal Information redacted by USI	Personal Information redacted by the USI	On the [Personal Information redacted by USI], the SHSCT was notified by the Belfast HSC Trust of death of a female patient in the Royal Victoria Hospital Intensive Care Unit. The patient had been admitted to RICU as she had attempted suicide (via hanging) in the community. The patient was known to the Home Treatment / Crisis Response (Newry and Mourne Team) to the Primary Mental Health Care Team within 12 months prior to the event. The patient also had a psychiatric inpatient episode in the Downe Hospital (Southern Eastern HSC Trust) in December 2021.

13. SAI Reports

Incident ID	Description	Recommendations/Lessons Learned
Personal Information redacted by USI	The Trust was notified on [Personal Information redacted by USI] via the SD1 process of the death of a [Personal Information redacted by USI] old female patient in the community. The SD1 advised that Suicide was not suspected but could not be ruled out. The coroner was contacted who advised that the cause of death was unascertained pending further investigations. This patient was known to Mental Health Services and had a history of self-harm. Prescription	 Draft Report Pending Fan

	medication was found in the kitchen of the deceased. The Report of Autopsy confirmed the cause of death as Bronchopneumonia.	
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b/f from previous week

Incident ID	Description	Recommendations/Lessons Learned
Personal information redacted by USI	This case involves the unexpected/unexplained death in the community of a female patient	 Personal information redacted by USI .docx

14. Catastrophic incidents

Personal information redacted by USI - On Personal information redacted by USI the Trust was notified via the SD1 process of the suspected suicide of a female patient in the community. The suspected method of suicide is an overdose of prescription medication. The patient was known to Primary Mental Health Newry and Mourne within 12 months within the last year.

b/f from previous week

Personal information redacted by USI - On Personal information redacted by USI the Trust was notified by the PSNI via the SD1 process of the suspected suicide of a male patient in the community. The suspected method of suicide is hanging.

Personal information redacted by USI - Information received from the Addictions service on the Personal information redacted by USI that GP has advised them patient had died two days earlier at a house in Coalisland- Suspected alcohol related . Patient has been open to CAT and ILS in the past year. Preliminary cause of death still unknown.

Personal information redacted by USI - On the Personal information redacted by USI, the SCHCT was notified via the Belfast Trust of the suspected suicide of a female patient in the community. The suspected method of suicide is hanging. The patient was transferred to the Royal Victoria Hospital where she passed away later that day.

15. Early Alerts

b/f from previous week

The SHSCT has been informed by the Portadown Times (Newspaper) that a group of carers of people with a learning disability have planned to protest at the entrance to Craigavon Area hospital, Portadown, on Monday 14 March 2022 at 11am. They are protesting about the isolation guidance impacting on learning disability day care attendance following covid outbreaks. Concerns and mitigation: There is potential of adverse publicity for the Trust, the PHA and the DoH.

The Trust are offering the protest organiser an opportunity to meet in a room to discuss their concerns to avoid the protest proceeding. This agreement has not yet been achieved. This issue requires policy change in the Care home guidance which has been raised with the DoH.

16. No Never Events this period**17. Directors Oversight Group**

- Dorsy and Granville
- Oversight group re absconding patient who completed suicide.

18. RQIA Recommendations

Tony confirmed a response has been drafted to the recommendations from the RQIA Bluestone inspection.

19. Issues escalated by Corporate or Directorate office at meeting

Tony gave an update on the Muckamore Abbey Hospital (MAH) Inquiry for the minutes

The MAH Inquiry requests the production of the following documents in Schedule 1

1. Safeguarding records relating to Muckamore Abbey Hospital
2. Serious Adverse Incidents (SAI) records relating to Muckamore Abbey Hospital
3. Complaints relating to Muckamore Abbey Hospital

The MAH Inquiry is also seeking further information and explanation with regards to the following documents in Schedule 2:

1. Minutes of regional meetings relating to Muckamore Abbey Hospital that were attended by Southern Trust staff
2. Documentation relating to surveys involving Muckamore Abbey Hospital
3. Documentation within the Learning Disability faculty relating to Muckamore Abbey Hospital

CHILDREN AND YOUNG PEOPLE SERVICES DIRECTORATE

Data provided by Corporate Office from the Datix Incident Management System to the Weekly Governance De-Brief (Thursday mornings – 8.30am – 9.30am)

20. Status of SAIs

Summary of the status of SAIs between 14.03.2022-20.03.2022

Any reports received after Friday will not be reflected in the numbers below until the following week

More than 26 weeks	Less than 26 weeks	Total
1	2	3

21. No SAI Notifications this period

22. SAI Reports

Incident ID	Description	Recommendations/Lessons Learned
Personal information redacted by USI	<p>XX is a ^{Personal information redacted by USI} old Looked After Child residing in a Trust Residential Facility.</p> <p>On 12 September 2021 (evening) XX attended the Emergency Department (ED) due to excessive bleeding. XX was accompanied to ED by her mother.</p> <p>XX was discharged from ED on 13 September 2021 with medication. On her return to the Trust Residential Facility XX refused to give the medication she had been prescribed in ED to residential staff. Staff phoned PSNI for assistance to remove the medication from XX. PSNI advised staff that they were not permitted to remove prescribed medication.</p> <p>With encouragement from staff, XX handed over some medication and alleged that she had disposed of the rest of the medication. Staff undertook a search of XX's room and found an empty packet of medication. XX advised staff that she had taken an overdose of the medication. Staff subsequently contacted NIAS for emergency assistance. Whilst awaiting NIAS, XX lost consciousness and staff performed CPR with guidance from the 999 operator. XX regained consciousness and was transported to the Paediatric Emergency Department by NIAS.</p>	None
Personal information redacted by USI	<p>XX is a ^{Personal information redacted by USI} old Looked After Child residing in a Trust Residential Facility.</p> <p>During the early morning of 13 September 2021, XX advised residential staff that she had consumed an overdose of medication prescribed for another young person in the Trust Residential Facility. The other young person had been in hospital the previous</p>	None

	<p>evening and had been prescribed and provided with medication on discharge. On the other young person's return to the Trust Residential Facility she refused to give staff the prescribed medication and shared it with XX.</p> <p>Residential staff phoned NIAS for emergency assistance. NIAS attended the Trust Residential Facility and assessed XX and recommended that they would transport XX to the Emergency Department. XX immediately absconded and staff pursued on foot. Staff observed XX to have collapsed on the street near the Trust Residential Facility. XX was non responsive but breathing. NIAS attended to XX and administered Narcan medication to support resuscitation of XX. XX assaulted NIAS staff. NIAS transported XX to the Emergency Department.</p> <p>XX was assessed by CAMHS in the Emergency Department and she was discharged back to the Trust Residential Facility during the afternoon of 13 September 2021.</p>	
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23. No Catastrophic Incidents reported this period

24. Early Alerts

Former Trust foster carer was found guilty on Personal information redacted by USI, following a trial relating to a number of offences relating to sexting, grooming and inciting a teenage girl to engage in sexual activity. These incidents occurred in 2018. The former Trust foster carer knew the teenage girl involved through her foster caring role. The Court has been adjourned pending a pre-sentence report being prepared. The former Trust foster carer has been ordered to sign the sex offenders register and granted bail on the condition that she has no contact with any child apart from her son. The former Trust foster carer was deregistered as a Trust foster carer on 6 March 2019, when these allegations first emerged with the required processes being adhered to. The former foster carer had not been actively fostering for a significant period of time prior to the allegations. The former Trust foster carer has been subject to detailed risk assessment during this interim period. The former Trust foster carer has a teenage adopted son who is known to the Trust's Children with Disability Services. Trust staff will be engaging with the adoptive father in relation to contingency plans for the care of their son, should the former Trust foster carer receive a custodial sentence. The former Trust foster carer's conviction has been reported on social media and in the regional Sunday newspaper. The case is due in Court again in Personal information redacted by USI for sentencing purposes.

25. No Never Events this period

26. RQIA Recommendations

27. Issues escalated by Corporate or Directorate office at meeting.

10/03/2022: Personal Information
redacted by USI Discussion regarding an incident that occurred in Blossom Ward and whether applying SJR would be beneficial in providing early learning.
Query whether this should be led by Acute, Marita and Chris to review detail and decide on best approach.

Update 24/03/2022: b/f due to pressures from Public Inquiry

24/03/2022: Engagement with staff to manage unallocated cases within the CYPS continues due to staffing shortages.

OLDER PEOPLE AND PRIMARY CARE SERVICES DIRECTORATE

Data provided by Corporate Office from the Datix Incident Management System to the Weekly Governance De-Brief (Thursday mornings – 8.30am – 9.30am)

28. Status of SAIs

Summary of the status of SAIs between 14.03.2022-20.03.2022

More Than 26 weeks	Less than 26 weeks	Hold	Within Timescale	Total
6	1	2	1	10

29. No SAI Notifications or Reports

30. No Catastrophic Incidents

31. Early Alerts

1 x GP OOH

1 x Whistleblowing referrals in relation to Independent Sector and Domiciliary Care provider.

32. No Never Events this period

33. RQIA Recommendations

34. Issues escalated by Corporate or Directorate office at meeting.

Discussion at meeting	Action
Review of Covid deaths in Care Homes. Connie advised that at the Regional Governance meeting held this week, the Trust was advised there had been a letter sent to confirm if the Incident meets the	Letter received and the ambiguity still remains. Stephen Wallace, Damian Gormley and Trudy Reid to discuss the review of the Covid deaths in Care Homes in more detail.

criteria of SAI then an SAI is to be raised. Ambiguity remains in relation to the Governance Framework around all of these incidents.

It was asked if there was a different process to follow for Covid Related Hospital Deaths in non-Acute settings and in Mental Health hospitals.

Update 20/05/2021 – This was discussed at the meeting with the PHA 19/05/2021 and the position remains unclear. Further discussions regarding other HCAI and if they would then meet the criteria for SAI.

Update 24/06/2021 - Correction from last week, the process for the review of deaths within the Non Acute hospital will follow the same process as the Acute incidents. The discussions are ongoing in relation to the review of deaths within a Care Home.

Update 08/07/2021 – Dr O’Kane, Heather, Dr Gormley, Stephen and Trudy to meet and discuss. Dr O’Kane to speak to IPC.

Update 29/07/2021 – There is a meeting taking place for this. Damian to forward the date to Claire.

Update 12/08/2021 – Heather to feedback on progress at next weeks meeting.

Update 19/08/2021 – IPC Trigger Group is to be arranged with the following people: Monica McAlister, Lisa Houlihan, Trudy Reid, Dr Damian Gormley, Aileen Mulligan, and John McEntee – this is to arrange a care home residential trigger list.

Update 26/08/2021 – Stephen has met with Damian and Claire, more work being done around this.

Update 02/09/2021 – Meeting has been set up and work is progressing.

Update 16/09/2021 – Meeting held this week, criteria out for comment.

Update 23/09/2021 – Meeting date has been arranged for this. Work being carried out.

Update 30/09/2021 – Another meeting has been arranged

Update 29/10/2021 – Claire McNally to link in with Monica McAllister for update.

Update 18/11/2021 – Claire is aware there has been a meeting arranged and will follow this up.

Update 25/11/2021 – A trial process in one of the Care Homes is being explored.

Update 02/12/2021 – Claire following up with Aileen and Monica regarding progress of the pilot exercise.

Update 09/12/2021 – Claire confirmed feedback from the pilot should be received today and an update will be provided next week. Dr O’Kane asked Claire to link with Brian Beattie regarding the preliminary approach to staff testing in Care Homes.

Update 16/12/2021 – Screening tool used in the pilot have been returned, initial feedback from Care Home staff that it is very time consuming. Claire will discuss with Monica.

Update 23/12/2021 – Monica to arrange meeting, dates awaited

Update 06/01/2022 – Monica back from leave, Claire will seek an update.

Update 13/01/2022 – Meeting has been organised

Update 20/01/2022 – A meeting has been arranged, however may have to be re-organised due to staff absence.

Update 10/02/2022 – A meeting was scheduled last week (w/b 31st January) however it may have been cancelled. Claire will seek an update.

Update 17/02/2022 – Meeting scheduled to take place was cancelled but feedback from Care Homes is that the screening tool is unworkable. New tool to be developed. Claire stated the guidance set out in terms of a hospital setting was very clear and could do with similar guidance for Care Homes.

Update 24/02/2022 – Meeting scheduled 14th March 2022.

Update 03/03/2022 – Claire has asked Monica to push for Regional direction with her Regional colleagues. Claire suggested in the absence of Regional direction, SHSCT carry out a desktop review of all deaths. Claire has asked Monica for numbers of deaths as well as outbreaks from the PHA. Dr O’Kane agreed this was a sensible approach.

10/03/2022 – Meeting due to take place this week.

24/03/2022 – Work is progressing. NIPSO case has been received regarding 1 death. Plans are progressing for SHSCT to create on process for reviewing these deaths.

LITIGATION

35. New Clinical negligence

New clinical negligence claims: 14.03.2022 – 18.03.2022

Ref	Directorate	Division	Incident type	Incident date	Claim date	Opened date	Description
MNS	ACUTE	MUC	Failure to	29/12/2020	02/03/2022	15/03/2022	Plaintiff alleges client seen without guardian and no treatment provided prior to discharge and no follow up
MNS	ACUTE	MUC	Other		17/08/2016	18/03/2022	PI alleges negligence that they were given antibiotics for a UTI and had an allergic reaction and was admitted to CAH for treatment, UTI returned and PI was given same antibiotics, Southern Trust have been identified as Third party and notes, charts and records have been requested.
MNS	ACUTE	MUC	Failure to diagnose/delay in diagnosis	14/07/2019	10/03/2022	15/03/2022	Claim taken by PI's (deceased) Husband on their behalf. PI admitted to DHH A&E 13/07/2019 and diagnosed with a trapped nerve and discharged with ibuprofen, PI then returned the next day lethargic and had difficulty mobilising, blood tests and temperature were taken, which revealed septicaemia, PI passed away shortly after.
MNS	ACUTE	MUC	Unknown		03/03/2022	16/03/2022	Writ Received and awaiting for further information.
MNS	ACUTE	MUC	Failure to interpret X-ray correctly	30/05/2018	15/03/2022	15/03/2022	PI alleges failure to diagnose a fracture of the heel bone in the right foot, and treat this correctly resulting in ongoing significant and debilitating pain within the injured foot. PI has suffered personal injury, loss and damage as a result of the alleged negligence.

MNS	ACUTE	MUC	Unknown		14/03/2022	16/03/2022	Writ Received, PI claim is for damages for personal injury and loss, in relation to diagnosis and treatment of PI. Awaiting further information in relation to allegation.
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2. (a) Clinical Negligence Claims Listed for Hearing in April 2022

Ref	Directorate	Division	Incident type	Incident date	Claim date	Opened date	Description	Governance Process
MN S71/985	ACUTE	SEC	Operator error	13/10/2015	28/07/2016	28/07/2016	<p>Was listed 28/03/2022 (for 3 days) Allegations of negligence are that during the insertion of a supra-pubic catheter in CAH, the patient's bowel was pierced resulting in peritonitis and ileus. It is alleged that, as a result, the PI had to undergo treatments and surgery including the creation of a stoma</p> <p><u>Hearing adjourned until further notice</u></p>	None identified

(b) Clinical Negligence Claims Listed for Hearing in April 2022 – None

36. Vaginal Mesh Cases – no update since last week

The number of vaginal mesh claims open to the Trust remains at 14 (stage of the claims are listed below).

Stage	Number of Mesh Cases
Letter of Claim	0
Discovery	3
Investigation	4
Proceedings Issued	7
Trial date Set	0

37. Urology Cases – no update since last week

Following an announcement by the Minister for Health a public inquiry is underway in relation to Trust Urology services. As a result, it is anticipated that there will be an increase in related litigation cases.

38. There are a total of 16 open cases identified at present (stage of the claims are listed below). The case that was listed for 28.03.2022 has since been adjourned until further notice.

Stage	Number of Urology Cases
Letter of Claim	0
Discovery	6
Investigation	5
Proceedings Issued	5
Trial date Set	0

39. Coroner's Inquiries and Inquests

- There was 1 new Coroner's Inquiries received 14.03.2022 – 18.03.2022

Ref	Directorate	Division	Incident type	Incident date	Claim date	Opened date	Description
CO 722/2022	ACUTE	SEC		12/03/2022	15/03/2022	15/03/2022	<p>Statements and other information are required.</p> <p>" Senior Doctor who treated patient during their admission between 28 January and 4 February and any discharge instructions or follow up with fracture clinic;</p> <p>" The Senior Orthopaedic Doctor; and</p> <p>" Anything else that may benefit the Coroner.</p>

- There are no further Inquest Hearings scheduled to take place in March or April 2022
- The following preliminary Inquest Hearings were/are scheduled to take place in March 2022

Ref	Directorate	Division	Incident type	Incident date	Opened date	Hearing Date	Description	Governance Process
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INQS71/206	OPPC	Older People		21/08/2019	21/01/2019	09/03/2022	The deceased was a resident in a nursing home, who was admitted to hospital after a fall <u>Further PH scheduled for 28.04.2022</u>	Falls proforma. Inc Ref No W81898
INQ S71/183	ACUTE	MUC	Death of patient	07/05/2018	11/05/2018	29/03/2022	PM Cause of death - infarct of left cerebral hemisphere due to thrombosis of left internal carotid and left middle cerebral arteries	None identified
INQ S71/210	ACUTE	IMWH	Neonatal death	25/08/2016	03/02/2017	29/03/2022	Neo-natal death at 6 days old following spontaneous onset of labour at 33+2 gw Inquest Hearing scheduled for 29/03/2022 (for 5 days)	Ref SAI ID HSCB Ref
CO-02385-2016	MHD/ACUTE	MHS/ED	Death of a service-user	13/08/2016	05/11/2019	29/03/2022	Deceased had been a service-user of MH services within a year of his suicide in Maghaberry Prison. Coroner requested MH notes and records, and also ED records from Aug 2016 The Trust are not a PIP	None identified

39. Number of Subject Access Requests exceeding timeframe for completion

The Medico-Legal Team continues to be unable to comply with the General Data Protection Regulations (GDPR) 2018 in respect of responding to Subject Access Requests within the statutory time-frames. This had been due to the sheer volume of requests and a lack of staffing to cope with the demand (which resulted in a

significant back-log). The Governance Committee have been advised of the ongoing back-log; it has been brought to the attention of the Trust's SIRO and placed on the HROD Risk Register. The HROD Risk Register demonstrates the significant back-log/significant time-delays that exist with ongoing Subject Access Requests.

A temporary Team Leader post has been in place within Medico-Legal effective from 18th October 2021. The team is now fully staffed at present, however there has been annual leave in the team which impacts on throughput. In addition, there have been gaps in the Litigation section which also impact as staff in this area assist with the 'sign-off' of records and a back-log had grown in this area which is being addressed. New staff have commenced, and are being trained to assist in this area of work.

The overall back-log at 90+ days has increased this week to 143 (with 12 of the 90+ apps being signed out last week). Gaps are being addressed with regards sign-off of notes and records within Medico-legal, but the issue also remains about available resources outside of the Medico-Legal Team for review of records, consideration of redaction (where appropriate), task of redaction and consent to release as this also has a significant impact on the Trust's ability to comply with the legislation. A short-life working group chaired by Performance and Reform to review the practical arrangements regarding consent is to take place on 1st April 20. There is currently a back-log of 143 requests that are in excess of 90 days across the following areas, and a large number of these are significantly over the required time-frame for response:-

Directorate	<u>Acute Services</u>	<u>C&YP</u>	<u>MH&D</u>	<u>OPPC</u>	<u>TOTAL</u>
Number of Outstanding Requests at 90+ days	115	10	18	0	143
New requests opened 14.03.2022:20.03.2022	32	2	3	0	38 (1 HROD)
Requests Closed 14.03.2022:20.03.2022	47	1	0	1	49 (12 of which were 90+)

MEDICATION INCIDENTS

There was no pharmacist present at the meeting on 24th March to provide an update on medication incidents. Previously pharmacy had advised that the directorate governance co-ordinators have full access to all the medication incidents for their area so should be able to highlight anything major in the absence of a pharmacist at the meeting. Dr O'Kane is to contact Head of Pharmacy and Medicines Management re an alternative – given the significance of medicines management incidents there is a requirement for a pharmacist to attend the weekly governance meeting.

Acute	CYP	MHD	OPPC
14	2	10	15

Personal information redacted by USI - Personal information redacted by USI old patient admitted to ED at 11.10am on 22/09/2021 with ongoing chest pain. Troponins 105 (11.36 am) and 353 (1.45 pm), did not receive Dual Antiplatelet Therapy until 20:40. Ongoing chest pain in the medical ward with runs of VT overnight. TNT 2049 (1.30am), oxycodone administered. Not discussed with

consultant on-call. Reviewed by Cardiology 23/09/2021 and patient had ongoing pain, GTN and morphine administered and case discussed urgently with consultant. Patient transferred to cath lab, angiogram showed Occluded Circumflex. Echo later showed severe LV impairment. Had further PCI to LAD and Diagonal a few days later.

Update 03/03/2022: Jilly is awaiting further information B/F to next week.

Update 10/03/2022: Chris to follow up on progress of screening and feedback next week (B/F).

Update 24/03/2022: Screening process continues

SAFEGUARDING

40.Link to SharePoint site regarding RQIA Notifications/Alerts

14/03/22 – 21/03/22

Adult Safeguarding Activity 14.03.22 – 20.03.22	Trustwide	MHD	OPPC	Acute	CYP
1.0 No of new adult safeguarding referrals (APP1 sec 1)	34	23	5	4	2
2.0 No of new adult safeguarding referrals meeting threshold for Adult Protection Gateway team (APP1 Sec 2)	13	9	1	1	2
3.1 No of new referral assessed as Adult in Need of Protection by APGT (APP1 Sec 3)	7 3 Physical 2 Psychological 2 Neglect	5 2 Physical 2 Psychological 1 Neglect	1 1 Neglect	1 1 Physical	0

3.2 No of new referrals managed as adult at risk of harm (APP1 Sec 2/3)	13	10	3	0	0
3.3 No of new referrals with NFA under Adult Safeguarding (APP1 Sec 2/3)	6	4	0	1	1
Referrals by category of allegation					
▪ Physical	22	16	2	3	1
▪ Psychological	5	4	0	0	1
▪ Sexual	2	1	0	1	0
▪ Financial	1	1	0	0	0
▪ Neglect	4	1	3	0	0
▪ Institutional	0	-	-	-	-
▪ Exploitation	0	-	-	-	-
No of adult protection cases open on PARIS system * REF STATUS *	237	111	111	14	1

** 6 referrals are pending decision by delegated appointed persons in teams at section 2 of the APP1 referral (3 MHD, 1 OPPC, 2 ACUTE)

** 2 referral received by APTG are pending decisions being made at Section 3 of the APP1 referral regarding the outcome of the initial assessment (1 MHD & 1 CYP)

Update:

Summary Position Table of high risk investigations previously reported on weekly governance report	
Ongoing Trust Investigation	17
Ongoing Joint Protocol with PSNI Investigation	18
PSNI Preparing file for PPS	1
Awaiting PPS decision	2
Pending Closure	5
Closed	0

Facilities with multiple ongoing Trust investigations:

Mother of Mercy Care Home (7 referrals)

Carlingford Lodge Care Home

St Macartan's Nursing Home Clogher (3 service users identified OPPC – I is WHSCT)

Top Class Dom Care Agency – 3 Whistleblowing referrals via RQIA. 4 named service users. Concerns raised re rough handling; training and non adherence to P&P, recruitment & access NI checks. Scoping exercise undertaken - emerging picture of mismanagement, poor quality of care and missed care provision impacting on service users safety and wellbeing

24/03/2022 UPDATE: Escalating very quickly and contingency plan is being prepared.

New Cases:

Iveagh House, OPPC Client. Allegation of physical assaults by care worker. Joint Protocol investigation. Delay in response due to care home reporting via corporate governance rather than directly to APGT or KW

Chestnut Lodge, Memory Client. Allegation of neglect indirectly resulting in fracture femur.

INFORMATION GOVERNANCE

41. Number of Subject Access Requests exceeding timeframe for completion.

Directorate	ACUTE	OPPC	MHD	CYPS	FINANCE	P&R	HROD	CX
Number of outstanding Requests	34	1	6	16	-	-	2	-

These relate to Subject Access Requests that have not been completed within the legislative timescale (legal timeframe 30 days or 90 days for complex requests). These delays are in relation to the demands on Services to carry out redactions of these service user notes etc.

Data Breaches reported to the ICO

Directorate	ACUTE	OPPC	MH&D	CYPS	FINANCE	P&R	HROD	CX
Breaches	1	-	-	-	-	-	-	-

This data breach is in relation to a report which was shared inappropriately with another Trust. The second data breach is in relation to a post on messaging platform by a member of staff has now been closed by the Information Commissioner's Office – with no further action required by the Trust.

Freedom of Information Requests Exceeding Legislative Timeframes.


The Trust has 20 working days to provide a response to a request for information under the FOI Act. The Trust currently has one outstanding FOI requests.

ID	Subject	Date Received	Due Date	Days Overdue	Directorate
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FOI/00000965	Breakdown of all properties used and registered within the Trust Catchment as having asbestos	16/02/2022	16/03/2022	1	Finance Procurement and Estates
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NEW STANDARDS AND GUIDELINES RECEIVED AND ASSURANCES DUE OR SUBMITTED

42. Responses Sent to External Agencies (14th to 20th March 2022)

Title of Correspondence	Reference	Guidance Type	Assurance response Date for S&G	Directorates applicability	Clinical Lead	Assurance Response
Patient Safety Alert - The Safe Use of Ultrasound Gel to reduce Infection Risk - All Documents	HSC (SQSD) 33/2021	Patient Safety alert	14/03/2022 and responded on 14/03/2022	Acute, CYPS, OPPC	Caroline Beattie	 20220314_APPROVE D_SHSCT 3rd Line As

43. Formal Assurance Responses that are due to be submitted to an external agency within the next 4 weeks [*up until 21st April 2022*]

Title of Correspondence	Reference	Guidance Type	Full Implementation Date for S&G	Lead Directorate	Clinical Lead
None indicated for within this timescale					

Internal Assurances that are pending completion / review within the next 4 weeks [*up until 21st April 2022*]

<u>Title of Correspondence</u>	Reference	Guidance Type	Implementation / Review Date	Lead Directorate	Implementation / Clinical Lead
Steroid Emergency Card to Support Early Recognition and Treatment of Adrenal	HSS(MD) 63/2020	Patient Safety Alert	01/04/2022	Medical Acute Services	Dr Gormley working with MDT colleagues

Crisis in Adults <i>Further update received on 03/09/2021</i>					
Planned Colonoscopy	LL-SAI-2021-039 (AS)	Safety and Quality Learning Letter	31/03/2022	Acute Services	Dr James Doyle / Endoscopy Team
Foreign Body Aspiration During Intubation, Advanced Airway Management or Ventilation	HSC (SQSD) 17/20	Patient Safety Alert	31/03/2022	Acute Services, CYPS, MHD	Dr Laure Martin & cross directorate MDT working group

43. Responses that are overdue for submission to External Agency

Title of Correspondence	Reference	Guidance Type	Date S&G assurance was to be submitted	Directorate Applicability	Clinical Change Lead
<i>No responses are currently overdue</i>					

44. Newly Issued S&G Circulars received by SHSCT (14th to 20th March 2022)


Title of Correspondence	Date of Issue from External Agency	Reference	Guidance Type	Full Implementation Date for S&G	Comments
<i>No new regionally endorsed circulars issued within this timescale</i>					

45. Update requests from HSCB Safety Alerts team

Title of Correspondence	Date of Request / Issue from External Agency	Reference	Guidance Type	Response Date	Clinical Change Lead
REVISED - IV Fluid management and prevention of harm from hyponatraemia	18/03/2022	QR-SAI-2020-067 AS - REVISED	SQR Learning Letter	Not specified	Dr Damian Gormley / MDT IV Fluid working group
Update requests that are still pending following request					
There are no update requests pending submission					
SQA Compliance emails received closing off SQR assurance responses previously submitted by the HSCB Safety Alerts Team					
There are no update requests received					

46. Clinical Audit and Regional PIVFAIT Audits

Item	Topic								
1.	IV Fluids in children and Young People: Week ending: <table border="1"> <tr> <td></td><td>Week ending 20/03/2022</td></tr> <tr> <td>CAH CYP</td><td>7/7 =100% – fully compliant</td></tr> <tr> <td>DHH CYP</td><td>Return is awaited</td></tr> <tr> <td>ACUTE</td><td>2 new cases identified this week: PIVFAIT = 0, ATICS specific audit tool = 2.</td></tr> </table>		Week ending 20/03/2022	CAH CYP	7/7 =100% – fully compliant	DHH CYP	Return is awaited	ACUTE	2 new cases identified this week: PIVFAIT = 0, ATICS specific audit tool = 2.
	Week ending 20/03/2022								
CAH CYP	7/7 =100% – fully compliant								
DHH CYP	Return is awaited								
ACUTE	2 new cases identified this week: PIVFAIT = 0, ATICS specific audit tool = 2.								

2.	Clinical Audit			
	<ul style="list-style-type: none"> Ongoing National Audit Participation – No Acute Governance Meeting – 08/03/2022 – awaiting updates 			
	Date	Audit	Stage	Issues / Comments
	This Weeks' Update			
	15/03/2022	CO-GENT Lead: Geraldine Conlon-Bingham	National audit on gentamicin outcomes	Anonymised case data (20 cases) to be submitted
	15/03/2022	Quarantine study Lead: Geraldine Conlon-Bingham	pan-European investigation into the effects of COVID-19 on antibiotic use across Europe	Data that will be submitted will be antibiotic consumption data, infection data per month, infection control interventions, mortality and admission data since January 2015
	18/03/2022	NCEPOD: Transition from Child to Adult Services- Organisational NCEPOD - TRANSITION	Data collection stage extended until 22nd March 2022 Case Identification stage – extension to 22/03/2022 NCEPOD: Transition from Child to Adult Services- Case Identification	Organisational questionnaire - CYP have completed all aspects of organisational questionnaire via NCEPOD online web tool Additional acute and community information requested on 39 selected cases. Information requests received from Acute and Community Information teams Distributed via CYP and open to May 2022
	08/03/2022	HQIP	Annual Quality Accounts Audit List 2022/23 released	Medical Director Memo being issued to centrally record Directorate planned participation - Response by 28/03/2022
				Submission approved Submission approved Director approval requested 14/03/2022 Adult Disability Transition team – response received – 18/03/2022 Acute Services - response awaited For final approval
				 MD_Participation in National Audits_202

3.	<table><tr><td>New national clinical audit reports published on the HQIP website</td><td>Date Disseminated / Directorate</td><td></td></tr><tr><td></td><td></td><td></td></tr></table>	New national clinical audit reports published on the HQIP website	Date Disseminated / Directorate				
New national clinical audit reports published on the HQIP website	Date Disseminated / Directorate						

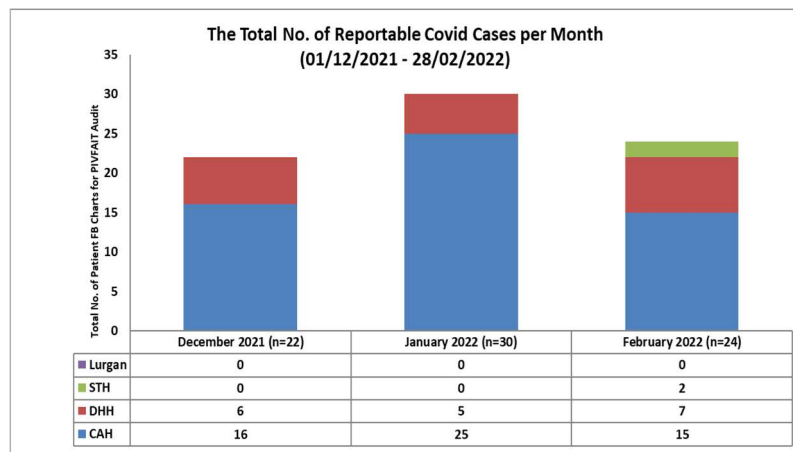
47. Infection Prevention Control, PPE and COVID

COVID-19 update

Summary Position – 20/03/2022 @ 9.15am

	Current week	Previous week
No. met PHA notification definition (+ test - 28 days) since March 15 th 2020	644	639
Weekly Reportable COVID-19 deaths 14 th March – 20 th March 2022)	5	9

Three month overview - Reportable deaths December 2021 – February 2022



24/03/2022 Update- Graph will be updated next month

48. Internal Audit Recommendations

Discussion at meeting	Action
<p>There was discussion around the need not to duplicate the work of the Trust's Internal Audit Forum which already follows up the status of internal audit recommendations for the mid-year and year end assurance process. There is no intention to usurp the purpose of that Internal Audit group. The purpose of including the IA recommendations on the Weekly Governance agenda is to ensure that we do not lose sight of those recommendations which relate to governance. This group will not be looking at the progress on each recommendation weekly – a quarterly update will probably be sufficient.</p> <p>Each Operational Directorate is to bring back their updates to next week's meeting.</p>	<p>Each Operational Directorate to update their area for next week's Governance Meeting</p> <p>30/09/2021 – It was agreed that each Directorate are to bring an update for 1 recommendation for their area to next weeks meeting.</p> <p>07/10/2021 – Caroline and Dr O'Kane to discuss this offline to agree a process to move forward the recommendations that have not progressed.</p> <p>14/10/2021 – Caroline and Dr O'Kane to meet to discuss the process for recording Internal Audit Recommendations, Learning from Litigation and Pressure Ulcers Data</p> <p>29/10/2021 – No update.</p>

<p>Their updates are to be sent through to Corporate Governance for collating for next week's Governance Meeting</p> <p>There are 35 Recommendations for all the Operational Directorates.</p> <p>1 person from each directorate should be nominated to bring back updates. Caroline Doyle will be the person to update Internal Audit for the Master Copy of Report</p>	<p>04/11/2021 – Caroline to link with Emma Campbell to get a date in the diary re this.</p> <p>11/11/2021 – Emma coming back to Caroline with suitable date</p> <p>18/11/2021 - Caroline continues to work with Emma to secure a meeting date</p> <p>09/12/2021 – Internal Audit Committee next meeting is 17th January all teams should progress with securing updates on all recommendations.</p> <p>16/12/2021 – Teams encouraged to continue with Internal Audit progression.</p> <p>17/02/2022 – Teams to make a concerted effort to address internal audit recommendations</p> <p>03/03/2022 – Nicole to ask Elaine to remind Dr O’Kane about a meeting for Internal Audit Recommendations. Completed</p> <p>24/03/2022 – Caroline Doyle confirmed that Internal Audit services in BSO has sought a year end update on the implementation of outstanding Internal Audit recommendations. The Medical Directorates (CSCG) response has been provided. In relation to the ongoing process for implementation of outstanding internal audit recommendations - A meeting between Caroline and Dr O’Kane is still to take place.</p>
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49. Reporting of Falls, Violence and Aggression and Pressure Ulcers Incidents

Falls

	Insignificant	Minor	Moderate	Total
4 South	1	0	0	1
Bannview Care Home	0	1	0	1
Cloughreagh House, Bessbrook	1	0	1	2
Emergency Department CAH	0	2	0	2

Fairlawns Residential Home	0	1	0	1
Home of client	1	2	0	3
Manor Court Residential Home, Lurgan	1	0	0	1
Orthopaedic Ward	0	1	0	1
Our Mother of Mercy Nursing Home	1	0	0	1
Silverwood Ward	1	0	0	1
Trauma Ward	0	1	0	1
Ward 1, Assessment & Rehabilitation	0	1	0	1
Total	6	9	1	16

ID	Incident Date	Directorate	Specialty	Description	Severity
157736	19/03/2022	Older People and Primary Care	Residential Care - Elderly	Resident found on Floor between duty room and dining room	Moderate

24/03/2022 Update: Being investigated

Violence and Aggression

	Physical contact (actual assault)	Physical threat (no contact)	Verbal Abuse	Total
2 North Medical	0	0	1	1
Bannvale SEC, Gilford	1	0	0	1
Cherrygrove Childrens Home, Lurgan Hosp Site	1	0	0	1
Silverwood Ward	0	1	0	1
STH Ward 2, Assessment & Rehabilitation	1	0	0	1
Ward 1, Stroke	2	0	0	2
Woodlawn House, Respite Unit, Dungannon	1	0	0	1
Total	6	1	1	8

Pressure Ulcers

	Minor	Total
3 South	1	1
Emergency Department CAH	1	1
Total	2	2

50. Approval Status – Position on Outstanding DATIX Incidents

* Some of these incidents relate to Urology.

Discussion at meeting	Action
<p>Date: 13.09.2021 – 19.09.2021 = 7916 Date: 20.09.2021 – 26.09.2021 = 7609 Date: 27.09.2021 – 03.10.2021 = 7506 Date: 04.10.2021 – 10.10.2021 = 7472 Date: 11.10.2021 – 17.10.2021 = 7523 Date: 18.10.2021 – 24.10.2021 = 7432 Date: 25.10.2021 – 31.10.2021 = 7494 Date: 01.11.2021 – 07.11.2021 = 7371 Date: 08.11.2021 – 14.11.2021 = 7298 Date: 15.11.2021 – 21.11.2021 = 7137 Date: 22.11.2021 – 28.11.2021 = 7214 Date: 29.11.2021 – 05.12.2021 = 7282 (2017 incidents reduced from 37) Date: 06.12.2021 – 12.12.2021 = 7430 Date: 13.12.2021 – 19.12.2021 = 7435 Date: 20.12.2021 – 26.12.2021 = 7474 Date: 27.12.2021 – 02.01.2022 = 7624 Date: 03.01.2022 – 09.01.2022 = 7627 Date: 10.01.2022 – 16.01.2022 = 7624 Date: 17.01.2022 – 23.01.2022 = 7514 Date: 24.01.2022 – 30.01.2022 = 7350 Date: 31.01.2022 – 06.02.2022 = 7304 Date: 07.02.2022 – 13.02.2022 = 7297 Date: 14.02.2022 – 20.02.2022 = 7016 – OPPC numbers have reduced (2017 – cleared, 2018 – reduced by 50%, In total 226 incidents cleared in 1 week.</p>	<p>Directorates to review and close off all incidents (excluding those currently being investigated by SAI) focussing on the historical back log.</p> <p>14/10/2021 – All Directorates to CCS1 code all incidents prior to April 2019</p> <p>29/10/2021 – OPPC team to review once full complement of staff re-established.</p> <p>04/11/2021 – OPPC team raised staffing issue, will address when full complement in place. All Directorates encouraged to review and approve where possible.</p> <p>11/11/2021 – OPPC have cleared all 2016 incidents and have a plan in place to clear the 2017 incidents.</p> <p>02/12/2021 – OPPC working on 2017 incidents. Claire thanked Richard O’Grady (Datix Manager) for his support. Acute advised there will be around 300 retrospective incidents being added to Datix due to the Urology Inquiry, which will have an impact on the backlog dating back to 2011.</p> <p>09/12/2021 – Chris to share the Urology incidents with Dr O’Kane</p> <p>03/02/2022 – Medical Directors office will be reissuing the memo regarding outstanding Datix incidents.</p>

<p>Date: 21.02.2022 – 27.02.2022 – 7013</p> <p>Date: 28.02.2022 -- 06.03.2022 - 6914</p> <p>Date: 07.03.2022 – 13.03.2022- 6868</p> <p>Date: 14.03.2022 – 20.03.2022- 6910</p>	<p>17/02/2022 – Regional work about the management of complaints and potentially incidents from ISPs being proposed. Clarification being sought on whether this work will cover both aspects, if not SHSCT will move forward to develop a plan for management of incidents.</p> <p>03/03/2022 – Dr O’Kane to raise this with Directors to secure an action plan to address the backlog. CYPS agreed to reduce to 2021 significantly by the end of March.</p>
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51. Dr Gormley is meeting with Mark Toal to discuss the use of email when communication with GPs. As per the HSCB guidance emails should not be used for communicating with GPs around patient specific information. The response received to date leaves the Trust vulnerable in terms of Information Governance. Mark and Damian will explore what options are available across the Trust.

09/12/2021 Update: Dr Gormley confirmed work is continuing however, the options for the Trust in relation to alternative methods for communicating with GPs is limited. However there is evidence that email is being used at times when there is an alternative option.

13&20/01/2022 – Damian and Mark Toal are progressing this work and communication will be circulated amongst this group.

03/02/2022: Dr Gormley continues to work with Mark Toal on this.

03/03/2022: Mark Toal continues to progress this, however there are very limited options available, specifically for those with no admin support

52. Dr O’Kane provided an update on the emerging themes from these meetings which includes Violence and Aggression, Insulin, Anticoagulation and Independent Sector arrangements inc. Safeguarding. The work of this group is making good progress to address these emerging themes. Dr O’Kane asked the group to consider these areas and put forward further ideas of QI work that could be taking forward.
53. Caroline Doyle relayed communication from HSCB that patients/service users/families etc. involved in SAI reviews, should be made aware as soon as SAI requirement has been identified (if appropriate), this should not wait until a panel has been established.
54. All attendees are asked to only included embedded documents if it is essential for the purpose of this meeting.
55. The Governance Coordinators and Caroline Doyle left the meeting to meet with DLS to discuss the Public Inquiry specifically evidence request number 75.

56. **Attendees:** Nicole O'Neill, Stacey Hetherington, Jacqueline Morton, Marita Magennis, Dr Catherine Weaver, Claire McNally, Tony Black, Joanne McConville, Caroline Doyle, Dr Maria O'Kane, Chris Wamsley, Rebecca Murray, Aaron Byrne, Colm McCafferty, Richard O'Grady, Lisa Houlihan, Christopher Warr, Deborah Hanlon, Ellen Lavery
57. **Apologies:** Damian Gormley, Jilly Redpath, Sharon Burnside

APPENDIX 6**8.0 LESSONS LEARNED**

During the SAI review the Review Team identified the below learning:

The current Disengagement Policy should be reviewed so that it provides specific clarification for staff involved when a patient disengages including appropriate timeframes.

The importance of improved record keeping. It is recognised that it is not feasible to record every conversation verbatim within clinical entries; however, the Review Team felt that the documentation available did not include summary notes of all relevant actions and discussions.

Provision of training to ensure that current mandatory Adult Safeguarding Training is completed and updated every 3 years.

Procedure for management/Operational Supervision within Integrated Care Team (2016) guidance remains valid. The Review Team recommends that a 6 monthly audit is used to demonstrate that frameworks within the guidance are used in routine practice, using templates provided or within Paris as an alternative.

Extension of training of the multi-disciplinary team in Knowledge and Understanding Framework (KUF, relates to patients with Personality Disorder) and Skills Training on Risk Management (STORM, re self-harm mitigation and suicide), to include hospital and community based teams.

9.0 RECOMMENDATIONS AND ACTION PLANNING

Recommendations	Person(s) Responsible	Timescale/Progress
The Disengagement Policy should be reviewed, with clarification for staff involved of what to do when a patient	Head of Service Support & Recovery Adrian Corrigan, Head of Service Primary	Within 3 Months

9.0 RECOMMENDATIONS AND ACTION PLANNING

disengages and who to inform, with appropriate timeframes.	Mental Health Stephanie Wethers,	
Improved record keeping. It is recognised that it is not feasible to record every conversation verbatim within clinical entries. It is recommended that team members involved with patients who disengage should add summary clinical entries when each attempt is made to contact the patient and when any relevant professional conversations occur.	Head of Service Support & Recovery Adrian Corrigan, Head of Service Primary Mental Health Stephanie Wethers,	Immediate Effect
Provision of training to ensure that current mandatory Adult Safeguarding Training is completed and updated every 3 years	Head of Service Support & Recovery Adrian Corrigan, Head of Service Primary Mental Health Stephanie Wethers,	Immediate Effect
Procedure for the management/ Operational Supervision within Integrated Care Team (2016) guidance remains valid. The Review Team recommends that a 6 monthly audit is used to demonstrate that frameworks within the guidance are used in routine practice, using templates provided or within Paris as an alternative.	Head of Service Support & Recovery Adrian Corrigan, Head of Service Primary Mental Health Stephanie Wethers	May 2022