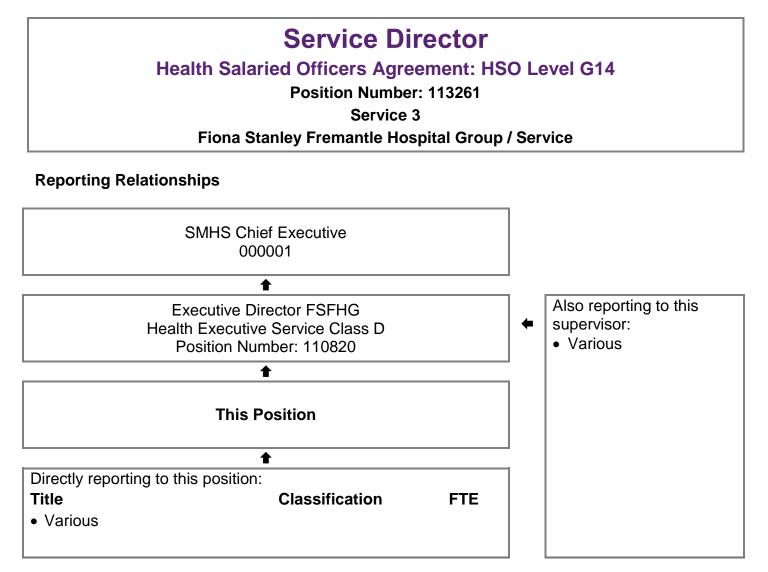


HSS Registered



Key Responsibilities

The Service Directors work in partnership to provide effective leadership, governance, strategic planning and operational management of the clinical stream. Support all staff within the Service to provide high-quality and efficient patient care consistent with the Fiona Stanley Fremantle Hospital Group's (FSFHG) safety, quality and performance frameworks. As part of the Executive team provide clinical and corporate governance within FSFHG.

Brief Summary of Duties (in order of importance)

1. General Duties

- 1.1. The Service Directors work in partnership with the Medical and Nurse Directors to lead and manage the Service. They are accountable to the Executive Director and represent the major link in a chain of accountability between the Hospital Executive and the clinical service lines (departments or units), which are led by Heads of Department and nursing and other health professional leaders. The respective roles and responsibilities of the Co-Directors will be documented in a Performance Agreement with the Executive Director.
- 1.2. Leads and promotes organisational culture in line with South Metropolitan Health Service and Hospital vision and values.
- 1.3. Accountable for the safe and high quality standards of clinical practice and the management of clinical and corporate risk within the Service.
- 1.4. Ensures evidence based practice and research as the foundation of advances in clinical care and in clinical care systems.
- 1.5. Leads the development and implementation of strategic and operational plans for the Service in alignment with the vision and operational imperatives of the hospital.
- 1.6. Develops and operationalises service plans for all Centres within the Service.
- 1.7. Leads transformation and service improvement agendas across the Service, working closely with all stakeholders. Challenges conventional approaches and drives change when needed, with a commitment to continuous improvement.
- 1.8. Works closely with all members of the executive to establish and manage safe, efficient and effective patient care across the Hospital in an Activity Based Funding (ABF) environment.
- 1.9. Responsible for the management of relevant service targets and resources within an ABF environment. Manages the performance of staff within relevant SMHS policy and public sector standards.
- 1.10. Ensures that Service clinical programs integrate effectively with State and area wide programs.
- 1.11. Promotes awareness of and ensures compliance with all Clinical and Corporate Governance Requirements.

2. Communication and Consultation

- 2.1. Promotes a clear focus on caring for patients and including them in decision making regarding their care, throughout the Service.
- 2.2. Promotes an interdisciplinary team environment with a focus on leadership development across the service. Ensures multidisciplinary team meetings are a cornerstone of patient management.
- 2.3. Promotes clinical education including multidisciplinary forums within the Service.
- 2.4. Ensures junior staff are appropriately supported and supervised at all times.
- 2.5. Actively participates in Hospital Executive activities, including peak committees
- 2.6. Establishes and maintains strong strategic and operational alliances and working relationships with internal and external stakeholders.
- 2.7. Leads and participates in forums and discussions related to the strategic and operational planning for the Hospital.
- 2.8. Meets regularly with Business Managers, Heads of Department and nursing leaders to lead, mentor and deliver service line management supported by service line reporting.



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Service Director | HSO Level G14 | 113261

3. Specific Position and/or Operational Responsibilities

- 3.1. Effectively promotes a culture of patient communication, patient safety and timely efficient care for all patients within the Service. In conjunction with the other Executive members, oversees the implementation of patient safety and quality initiatives for the Service as required.
- 3.2. Operationally manages Heads of Department, Business Managers and other leaders in the service fostering a culture of cooperation, professional performance and accountability to ensure the Service meets all targets and objectives.
- 3.3. Leads the delivery of and ensures the Service meets and exceeds all national and state safety, quality and performance targets and standards.
- 3.4. Responsible for ensuring leadership and direction within the Service.
- 3.5. Responsible for the planning and implementation of day to day operational and demand management and performance of the Service, planning and managing patient volumes to meet service requirements.
- 3.6. In liaison with the Director of Clinical Services and Director of Nursing & Midwifery, coordinates the development, implementation and management of an effective and integrated workforce.
- 3.7. In collaboration with the Director of Clinical Services & Midwifery ensures appropriate governance of research within the Service.
- 3.8. Ensures integration between clinical and non-clinical services.
- 3.9. Undertakes business continuity management for the Service including emergency planning.
- 3.10. Other responsibilities and accountabilities as outlined in the Performance Agreement.

4. SMHS Governance, Safety and Quality Requirements

- 4.1. Ensures, as far as practicable, the provision of a safe working environment in consultation with staff under their supervision.
- 4.2. Participates in an annual performance development review and undertakes performance development review of staff under their supervision.
- 4.3. Supports the delivery of safe patient care and the consumers' experience including identifying, facilitating and participating in continuous safety and quality improvement activities, and ensuring services and practices align with the requirements of the National Safety and Quality Health Service Standards and other recognised health standards.
- 4.4. Completes mandatory training (including safety and quality training) as relevant to role.
- 4.5. Performs duties in accordance with Government, WA Health, South Metropolitan Health Service and Departmental / Program specific policies and procedures.
- 4.6. Abides by the WA Health Code of Conduct, Occupational Safety and Health legislation, the Disability Services Act and the Equal Opportunity Act.

5. Undertakes other duties as directed.



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Work Related Requirements

Essential Selection Criteria

- 1. The Service Director will have a track record in professional leadership and it is desirable that they have a qualification in a relevant health professional discipline (and where applicable to be registered by the relevant national registration authority).
- 2. Current knowledge of legislative obligations for Equal Opportunity, Disability Services and Occupational Safety and Health, and how these impact on employment and service delivery.

All Co-Directors will be able to evidence business acumen with a strong track record in:

- 3. **Shaping and managing strategy** including the ability to focus strategically by aligning business imperatives with strategic priorities, the ability to harness information and opportunities in order to manage change, the capacity to champion organisational vision and goals and promote a shared commitment to the organisations strategic direction.
- 4. **Achieving results** including the ability to build organisational capability and responsiveness, and the capability to manage human, physical and financial resources in an environment of constraint.
- 5. **Building productive relationships** including the ability to broker cooperation and partnerships across an organisation and the ability to develop and maintain positive working relationships with colleagues and with diverse groups of people within the health sector.
- 6. *Management of a clinical services* in a large complex acute health care including balancing of diverse and competing interests and the achievement of high quality patient outcomes, service satisfaction and operational efficiency.

Appointment Factors

Service Co-Directors' appointments will be full time under the terms of the Health Salaried Officers Agreement.

Appointment Prerequisites

Appointment is subject to:

- Provision of the minimum identity proofing requirements.
- Successful Criminal Record Screening Clearance.
- Successful Pre-Employment Integrity Check.
- Successful Pre-Employment Health Assessment.
- Successful applicants are required to complete the Accountable and Ethical Decision Making e-learning package within three (3) months of commencement.



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Certification

The details contained in this document are an accurate statement of the duties, responsibilities and other requirements of the position. Manager / Supervisor Name Signature **HE Number** Date or Dept. / Division Head Name **HE Number** Signature or Date As Occupant of the position I have noted the statement of duties, responsibilities and other requirements as detailed in this document. **Occupant Name HE Number** Signature Date or Effective Date HSS Registration Details (to be completed by HSS) Created on Last Updated on February 2019

