

**REVIEW OF THE PROPOSED STRUCTURED CAREER  
PATHWAY AND ALIGNED JOB SPECIFICATIONS FOR  
SURVEILLANCE SCIENTISTS/EPIDEMIOLOGISTS**

- EVALUATING THE ROLES AND PROPOSING APPROPRIATE SALARY SCALES FOR EACH GRADE IN THE PATHWAY
- RECOMMENDING HOW EXISTING STAFF SHOULD BE MIGRATED TO ANY NEW ARRANGEMENT THAT MAY ARISE FROM THE EVALUATION EXERCISE, BEARING IN MIND CURRENT GRADING OF STAFF, AND YEARS' EXPERIENCE

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# PART 1: Review and Evaluation

## Background

Following ongoing engagements between the Health Service Executive, Fórsa and the MLSA, the current situation regarding the grading structure, or lack of it, were considered, with particular focus on more recent demands due to the pandemic and the continuing development of the Winter Plan.

During these engagements it was agreed that Surveillance Scientists are integral to the provision and analysis of timely information to control and prevent the spread of disease in order to protect the public.

Surveillance Scientists are currently employed by the HSE, Public Voluntary Hospitals and a small number of private hospitals. Most work in the public health service, mainly in health protection surveillance.

Typical roles and responsibilities include but are not limited to:

- Epidemiological/Data analysis, interpretation of results and scientific report writing
- Scientific communications via publications, reports and presentations
- Outbreak investigations and generating alerts
- Management of surveillance systems, database development and maintenance
- Research
- Training, mentorship, and teaching
- Participation in guideline development
- Representation on international/national/regional/local committees/networks/projects
- Representation of Surveillance Scientist Association of Ireland (SSAI)

In addition to Surveillance Scientists, a small number of staff are employed as Surveillance Assistants and Surveillance Officers. Their primary focus is to support surveillance activities such as data processing, assisting with data management and the provision of administrative support.

It is recognised by the Parties that there is no agreed grading structure and associated salary scales for Surveillance Scientist roles. This has led to discrepancies in the grading, salaries and terms and conditions assigned to existing roles within the service. There is currently no career progression pathway available within this role.

Through the Winter Plan – Public Health Pandemic Plan, the HSE is commencing significant expansion of the numbers employed to support surveillance and epidemiology within the health protection function. This is a core component of pandemic response enabling the

provision and analysis of timely information to control and prevent the spread of Covid-19 and other infectious diseases, protect the public, and guide public health policy and practice.

It was agreed between the parties that in order to ensure best use of this investment, it is necessary to identify an appropriate grading structure and associated salary scales for the existing and future holders of Surveillance/Epidemiology posts. Accordingly, the Parties agreed to seek the assistance of an independent evaluator under the following terms of reference.

## Terms of Reference

The following terms of reference were agreed between the parties:

The evaluator is tasked with:

- Reviewing the proposed structured career pathway and aligned job specifications for Surveillance Scientists/Epidemiologists;
  - Evaluating the roles and proposing appropriate salary scales for each grade in the pathway;
  - Recommending how existing staff should be migrated to any new arrangement that may arise from the evaluation exercise, bearing in mind current grading of staff, and years' experience; and
  - Presenting a report on findings.
1. The methodology to be used for evaluating the role of Surveillance Scientists in Departments of Public Health and in HPSC will be agreed with the chosen evaluator, however, the following will be included:
    - Review of submission from the Surveillance Scientist Association of Ireland (SSAI) Working Group outlining the proposed career pathway;
    - Review of Job Descriptions aligned to the career pathway;
    - A points based scoring matrix;
    - Comparison with the role and responsibilities of Medical Scientists, Administration Grades and Therapist Grades;
    - Meeting with 3 nominated Surveillance Scientists (including one nationally, one regionally);
    - Meeting with MLSA;
    - Meeting with Fórsa;
    - Interview with Ms Laura Murphy, Project Lead-Programme for Public Health Reform.
  2. The person to conduct this review is Mr Sean Mc Hugh, Resource Limited.
  3. The report from the review will be presented to the HSE, MLSA and Forsa

4. The target is to complete the report no later than April 30<sup>th</sup>, 2021. [This date was extended to allow for fuller consultation with the parties and due to the ICT difficulties being experienced in the health service]
5. Following completion of the review representatives from the HSE, Forsa and the MLSA will meet to discuss the outcome of the review and agree on next steps.
6. It is agreed between the Parties that the recommendations from the job evaluation is non-binding.
7. It is acknowledged by the Parties that the Department of Health must sanction any outcome agreed between the Parties.

## Methodology

At the commencement of the process the following methodology was agreed between the evaluator and the parties:

- A. Identify and clarify remit of current exercise & finalise terms of reference.
- B. Review all initial documentation
- C. Gather additional information:
  - Detailed data re grades, locations, current salaries etc
  - Submissions from each party
  - List Key contacts – people involved email addresses etc.
  - Identify Comparators e. g. Therapy, Medical Scientists and Clerical & Administrative grades
- D. Conduct meetings with:
  - 3 nominated Surveillance Scientists (including one nationally, one regionally);
  - Meeting with MLSA;
  - Meeting with Fórsa;
  - Interview with Ms Laura Murphy, Project Lead-Programme for Public Health Reform.
- E. Conduct job evaluation
  - Review and Evaluate Comparator Grades
  - Identify and recommend grades in proposed new structure

As part of the process, verbal and written submissions were received from the parties, along with a range of job descriptions and person specifications of current and legacy positions.

Additional detailed data and documentation in relation to posts, both existing and prospective, in the Public Health sector were provided and analysed. A similar level of detail in relation to the Acute Hospitals sector was not available to the evaluator.

It became evident that, as the process progressed that there were two distinct elements:

- A Job Evaluation Exercise, allied with recommendations relating to the appropriate grading structure, and
- Recommending how existing staff should be migrated to any new arrangement that may arise from the evaluation exercise, bearing in mind current grading of staff, and years' experience.

## Review of proposed structured career pathway

As part of this process current anomalies and a proposed future structure were reviewed.

### Current Anomalies

Based on the available information and submissions from the parties, the following broad timeline in relation to the development of structures within the Public Health sector was identified:

- Surveillance Scientist posts were initially established in 1999.
- By the end of 2007, 24 posts had been created.
- Due to the economic situation, no new posts were created in the Health Protection Surveillance Centre (HPSC) between 2008-2015
- Prior to current initiatives, very few additional posts were created in Public Health Departments (PHD) between 2005-2020.
- While staffing levels remained relatively static up to the COVID-19 pandemic, there has been substantial increase in workload and the need for more in-depth surveillance, epidemiological analysis as well as more rigorous data quality initiatives.
- A total of seven new posts have been created since 2016, five of these in 2021 (4 HPSC and 1 PHD)

Due to lack of a career structure, there have been extremely limited, and in many areas there no promotional opportunities despite the expanding workforce and increased and more complex workload over the 20-year period, with the result that many Surveillance Scientists are working in senior roles but not on a senior salary.

- In the HPSC, of 20 permanent Surveillance Scientist posts, only one is at the senior grade or title
- In PHDs, of 13 permanent Surveillance Scientist posts across eight Departments of Public Health, as a result of upgrades five are at the senior grade

A range of other anomalies and inconsistencies were provided during submissions to this review.

## Review of Proposed Structure

The terms of reference for this evaluation provide for a review of the proposed structure, the career pathway and aligned job specifications for Surveillance Scientists, also referred to as Epidemiologists. The agreed methodology specified that, in doing so, this exercise should review the submission from the Surveillance Scientist Association of Ireland (SSAI) Working Group outlining the proposed career pathway, along with proposed Job Descriptions aligned to the career pathway.

The Crowe Horwath (2018) recommendations advised that the HSE should develop a significantly (and possibly even radically) different organisational model for Public Health, including: a “hub and spoke” model with a strong national function at the centre of the HSE and regional public health teams accountable for regional service delivery in response to population need. As a key enabler, it called for the establishment of enhanced multidisciplinary teams.

The approach undertaken within Public Health involves:

- Establishing a structured surveillance epidemiology career pathway to sustainably provide the intelligence and analytics underpinning public health practice is a key component of delivering enhanced multidisciplinary teams.
- A Programme for Public Health Reform was established under the governance of the Chief Clinical Officer to design and implement a future model to address the Crowe Horwath recommendations.
- As part of Phase 1 of the Crowe Horwath Programme, a Surveillance Scientist working group convened to prepare a submission highlighting the challenges of the current surveillance function, including no agreed grading structure, inconsistency in the application of grades (salaries and terms and conditions) across the service and no structured career pathway to support retention and development of expertise.
- This group reviewed international career structures and grading for surveillance and epidemiology staffing and proposed a structured surveillance epidemiology career pathway to support the health protection service delivery model.
- This proposed career pathway would be aligned to the health and social care professionals job family and include five points: Surveillance Assistant, Surveillance Officer, Epidemiologist, Senior Epidemiologist, and Principal Epidemiologist.

The main challenges related to the existing structure, or lack thereof, were identified in the submissions as follows:

- Salary scales for Surveillance Scientists are inconsistently applied across the country. Six different scales are used ranging across Administrative Grade VIII, Chief Medical Laboratory Scientist to Administrative Grade VI, with the majority on the Senior Medical Scientist grade scale.
- Despite the high level of qualifications and experience among Surveillance Scientists, there is currently no career structure or associated promotional opportunities available within the role.
- At least two Departments of Public Health lost surveillance posts as a result of the HSE 2011 recruitment moratorium, these posts have either not been replaced or the staff recruited have not been regraded to the pay scale associated with the original post.
- For a period of time, it has not been permitted to fill temporary vacancies due to maternity leave and long-term illness etc. which makes it challenging to maintain and sustain the level of service required, impacting negatively on staff morale and output.
- Due to resource constraints many scientists are not utilised to the full extent of their education, training, and experience, many conducting tasks more appropriate to the surveillance assistant and surveillance officer roles.
- A formal continued professional development (CPD) is not available to Surveillance Scientists in Ireland
- Surveillance Assistants and Surveillance Officers have similar challenges, lack of training opportunities, extremely limited opportunities for career progression and no formal CPD.

The submission considered international models of career structures and identified that Surveillance Scientist is not universally used or recognised as a term or job title internationally. Epidemiologist (or variations thereof) is the title generally used in other countries for similar roles and is the job title that most closely reflects the competencies, roles and responsibilities currently undertaken by Surveillance Scientists.

Internationally, epidemiologists can come from a variety of backgrounds, including medical, scientific, nursing, or veterinary etc. In the UK (England, Scotland, and Wales), in addition to medics, non-medics can register as a specialist on the UK Voluntary Register for Public Health Specialists.

A broad career pathway for epidemiologists working in the Public Health Service, Ireland, was proposed in the submission and is set out in the figure below:



## Proposed Career Pathway

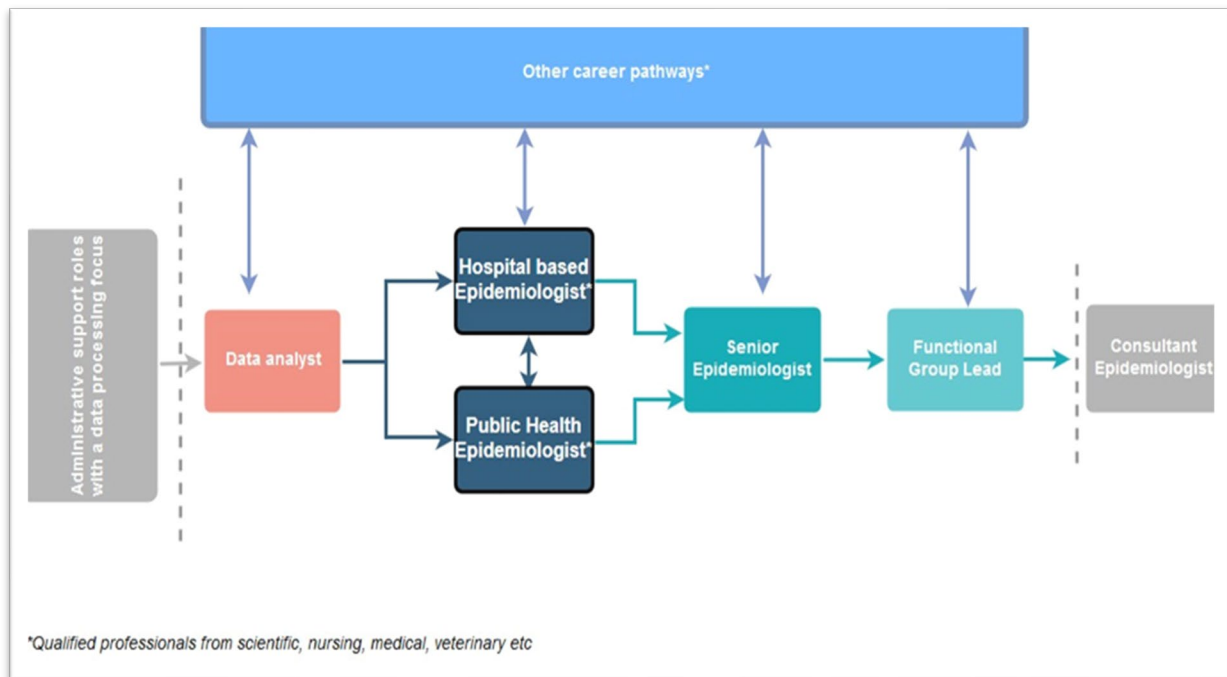


Diagram 1

The submission also addressed a ranged of matters, including setting out detailed changes in function, roles and responsibilities, governance structures, educational and upskilling requirements, and resources.

Detailed outlines of the future roles and responsibilities for each proposed grade were provided as an appendix to the submission.

Proposed WTEs by grade within this pathway are detailed in the Table below. These are indicative figures, and final allocations of posts are subject to approval, funding and WTE limits.

<b>Public Health Surveillance Epidemiology Career Pathway</b>			
<b>Proposed Pathway</b>	<b>Total</b>	<b>Regional</b>	<b>National</b>
Surveillance Assistant	27	20	7
Surveillance Officer	28	20	8
Epidemiologist	26	13	13
Senior Epidemiologist	19	7	12
Principal Epidemiologist	10	6	4
<b>All Grades</b>	<b>110</b>	<b>66</b>	<b>44</b>
<b>Variance</b>			

Table 1

## Job Evaluation Methodology

In advance of the commencement of the exercise, a proposed methodology was shared with the parties and agreed.

In order to analyse and compare this role with that of other positions in agreed grades in the broader Health Service, the following method is used:

- A job evaluation exercise of the positions in comparison with grades in the Administrative, Medical Scientist and Therapy streams.

Job information and specifications in relation to the comparator grades are firstly examined under the scheme used for this exercise. Subsequently, the roles proposed within the new structure being evaluated is examined under the scheme and the results compared.

The comparator grades used for the purpose of this exercise encompassed the following roles:

Clerical & Administrative	Medical Science	Therapy Professions
Grade IV	Medical Scientist	Therapist
Grade V	Senior Medical Scientist	Senior Therapist
Grade VI	Specialist Medical Scientist	Clinical Specialist Therapist
Grade VII	Chief Medical Scientist	Therapy Manager
Grade VIII	Laboratory Manager	Therapist-in-Charge III

Table 2

These comparator grades are firstly benchmarked under the scheme used for this exercise. Comparator Grades were agreed in advance.

Once this had been undertaken, the positions being evaluated were examined under the scheme and the results compared. In order to acquire a thorough understanding of the expectations for these positions, the roles, duties, and responsibilities were clarified through:

- Review of Job Descriptions and Specifications, as well as job related information for each comparator grade
- Review of draft Job Specifications for proposed new grading structure.
- Review of additional documentation submitted to the review
- Review of the Working Group submission
- Clarification and submissions by unions and management.
- Further consultation with the parties

## Job Evaluation Scheme

The job evaluation method used for this exercise is based on an analytical approach, where the post and comparator positions are evaluated using a points-based method.

This method analyses each job in component parts by scoring a number of factors characteristic to the organisation and relevant to most jobs of this nature. The factors used are those considered to be important in terms of identifying the position of one job relative to the others.

Points values are allocated to each factor and the more demanding a job in respect of a particular factor, the greater the number of points scored. Factors are weighted according to their perceived importance to the organisation as a whole and the resulting factor points added to give a score for each job, all of which are measured on the same basis.

The reasons for choosing this method of evaluation are:

- It ensures a close analysis of job content and avoids the natural tendency to evaluate the 'whole' job based on accepted traditional views. The focus on set factors common to most jobs makes it the most objective method available.
- It is an analytical scheme and this assists in meeting equal opportunities criteria.
- New and modified jobs can be readily evaluated and allocated a position in the organisation's structure.

The factors used for the purposes of this process are as follows:

### FACTORS

<b>KNOWLEDGE AND SKILLS</b>	<b>EFFORT DEMANDS</b>
Knowledge	Initiative and Independence
Mental Skills	Physical Demands
Interpersonal and Communications Skills	Mental Demands
Physical Skills	Emotional Demands
<b>RESPONSIBILITIES</b>	<b>ENVIRONMENTAL DEMANDS</b>
Responsibility for People	Working Conditions
Responsibility for Supervision, Direction	
Co-ordination of Employees	
Responsibility for Financial Resources	
Responsibility for Physical Resources	

Table 3

These factors are examined under a range of levels within each, ranging from five to eight as indicated in the table below. Knowledge and Skills account for up to 38.4%, Efforts and

Demands 25.4%, responsibilities 31.2% and Environmental Demands 5%. The maximum number of points attainable is 1,000.

## Job Evaluation Outcome

The outcome of the evaluation of the comparator grades identified that the following applies:

### Therapy Grades

The scoring outcomes associated with these grades ranges from 453 points at Therapist level to 641 points at Therapist In Charge 3 level.

### Medical Scientist Grades

The scoring outcomes associated with these grades ranges from 453 points at Medical Scientist level to 680 points at Laboratory Manager level.

### Administrative Grades

The scoring outcomes associated with these grades ranges from 387 points at Grade IV level to 640 at Grade VIII level.

The outcome of the evaluation process, outlined above, are set out in the following tables:

### Therapy Grades

	Therapist		Senior Therapist		Clinical Specialist Therapist		Therapy Manager		Therapist In-Charge 3	
	LEVEL	SCORE	LEVEL	SCORE	LEVEL	SCORE	LEVEL	SCORE	LEVEL	SCORE
KNOW	Level 5	100	Level 5	100	Level 6	121	Level 7	142	Level 7	142
MNTL	Level 3	39	Level 4	52	Level 4	52	Level 5	65	Level 5	65
INT & COMM	Level 2	26	Level 2	26	Level 2	26	Level 3	39	Level 4	52
PHYS	Level 3	39	Level 3	39	Level 3	39	Level 3	39	Level 3	39
INIT & IND	Level 4	52	Level 5	65	Level 5	65	Level 5	65	Level 5	65
PHY	Level 3	30	Level 3	30	Level 3	30	Level 3	30	Level 2	20
MNTL2	Level 3	30	Level 3	30	Level 3	30	Level 3	30	Level 3	30
EMTN	Level 1	10	Level 1	10	Level 1	10	Level 1	10	Level 1	10
PEOPLE	Level 3	39	Level 4	52	Level 4	52	Level 5	65	Level 5	65
SUP	Level 2	26	Level 3	39	Level 3	39	Level 4	52	Level 4	52
FIN	Level 1	13	Level 1	13	Level 1	13	Level 2	26	Level 2	39
PHY RES	Level 3	39	Level 3	39	Level 3	39	Level 4	52	Level 4	52
WRK	Level 1	10	Level 1	10	Level 1	10	Level 1	10	Level 1	10
<b>TOTAL POINTS</b>		<b>453</b>		<b>505</b>		<b>526</b>		<b>625</b>		<b>641</b>

Table 4

## Medical Scientist

		Medical Scientist		Senior Medical Scientist		Specialist Medical Scientist		Chief Medical Scientist		Laboratory Manager
	LEVEL	SCORE	LEVEL	SCORE	LEVEL	SCORE	LEVEL	SCORE	LEVEL	SCORE
KNOW	Level 5	100	Level 5	100	Level 6	121	Level 7	142	Level 7	142
MNTL	Level 3	39	Level 4	52	Level 4	52	Level 5	65	Level 6	78
INT & COMM	Level 2	26	Level 2	26	Level 2	26	Level 3	39	Level 4	52
PHYS	Level 3	39	Level 3	39	Level 3	39	Level 3	39	Level 2	26
INIT & IND	Level 4	52	Level 5	65	Level 5	65	Level 5	65	Level 6	78
PHY	Level 2	20	Level 2	20	Level 2	20	Level 2	20	Level 2	20
MNTL2	Level 4	40	Level 4	40	Level 4	40	Level 3	30	Level 3	30
EMTN	Level 1	10	Level 1	10	Level 1	10	Level 1	10	Level 1	10
PEOPLE	Level 3	39	Level 4	52	Level 4	52	Level 5	65	Level 5	65
SUP	Level 2	26	Level 3	39	Level 3	39	Level 4	52	Level 5	65
FIN	Level 1	13	Level 1	13	Level 1	13	Level 2	26	Level 3	39
PHY RES	Level 3	39	Level 3	39	Level 3	39	Level 4	52	Level 5	65
WRK	Level 1	10	Level 1	10	Level 1	10	Level 1	10	Level 1	10
<b>TOTAL POINTS</b>		<b>453</b>		<b>505</b>		<b>526</b>		<b>615</b>		<b>680</b>

Table 5

## Clerical and Administrative

		Grade IV		Grade V		Grade VI		Grade VII		Grade VIII
	LEVEL	SCORE	LEVEL	SCORE	LEVEL	SCORE	LEVEL	SCORE	LEVEL	SCORE
KNOW	Level 3	60	Level 4	80	Level 4	80	Level 5	100	Level 6	121
MNTL	Level 2	26	Level 3	39	Level 3	39	Level 4	52	Level 5	65
INT & COMM	Level 3	39	Level 3	39	Level 4	52	Level 4	52	Level 4	52
PHYS	Level 2	26	Level 1	13	Level 1	13	Level 1	13	Level 1	13
INIT & IND	Level 3	39	Level 4	52	Level 5	65	Level 5	65	Level 6	78
PHY	Level 2	20	Level 1	10	Level 1	10	Level 1	10	Level 1	10
MNTL2	Level 2	20	Level 3	30	Level 3	30	Level 4	40	Level 4	40
EMTN	Level 2	20	Level 2	20	Level 2	20	Level 2	20	Level 2	20
PEOPLE	Level 3	39	Level 2	26	Level 2	26	Level 2	26	Level 2	26
SUP	Level 2	26	Level 3	39	Level 4	52	Level 5	65	Level 5	65
FIN	Level 2	26	Level 3	39	Level 4	52	Level 4	52	Level 5	65
PHY RES	Level 2	26	Level 3	39	Level 4	52	Level 5	65	Level 5	65
WRK	Level 2	20	Level 2	20	Level 2	20	Level 2	20	Level 2	20
<b>TOTAL POINTS</b>		<b>387</b>		<b>446</b>		<b>511</b>		<b>580</b>		<b>640</b>

Table 6

The above scoring outcomes were the used as the benchmarks for comparing the grades in the proposed structure.

## Outcome relating to New Structure

The scoring outcomes associated with these grades ranges from 453 points to 680 points at Principal Epidemiologist.

		Surveillance Officer		Epidemiologist		Senior Specialist Epidemiologist		Principal Epidemiologist
	LEVEL	SCORE	LEVEL	SCORE	LEVEL	SCORE	LEVEL	SCORE
KNOW	Level 5	100	Level 6	121	Level 7	142	Level 7	142
MNTL	Level 3	39	Level 4	52	Level 5	65	Level 6	78
INT & COMM	Level 2	26	Level 2	26	Level 3	39	Level 4	52
PHYS	Level 3	39	Level 3	39	Level 3	39	Level 2	26
INIT & IND	Level 4	52	Level 5	65	Level 5	65	Level 6	78
PHY	Level 2	20	Level 2	20	Level 2	20	Level 2	20
MNTL2	Level 4	40	Level 4	40	Level 3	30	Level 3	30
EMTN	Level 1	10	Level 1	10	Level 1	10	Level 1	10
PEOPLE	Level 3	39	Level 4	52	Level 5	65	Level 5	65
SUP	Level 2	26	Level 3	39	Level 4	52	Level 5	65
FIN	Level 1	13	Level 1	13	Level 2	26	Level 3	39
PHY RES	Level 3	39	Level 3	39	Level 4	52	Level 5	65
WRK	Level 1	10	Level 1	10	Level 1	10	Level 1	10
<b>TOTAL POINTS</b>		<b>453</b>		<b>526</b>		<b>615</b>		<b>680</b>

Table 7

A further analysis of the outcomes are indicated in the table below:

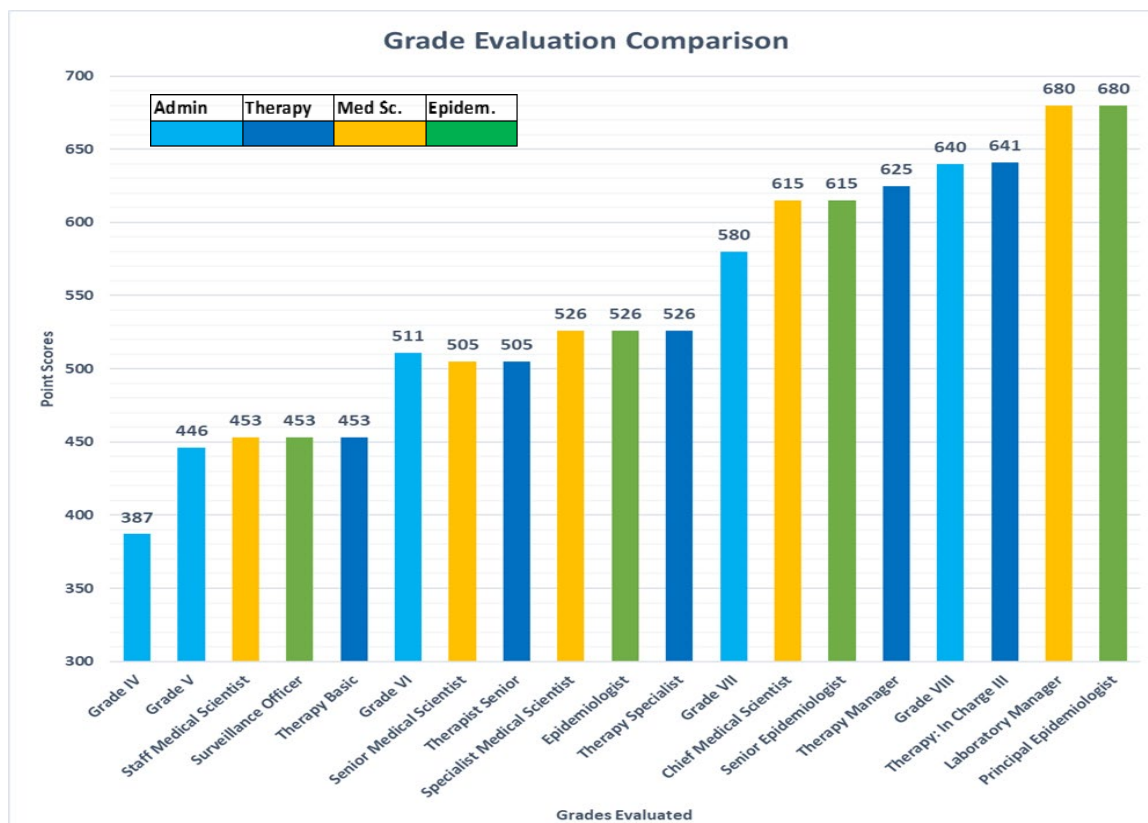


Chart 1

## Recommendation 1

In arriving at the recommendation below, it should be noted that this exercise is a bespoke process to evaluate the appropriate alignment of Epidemiology grades to broader grading and pay structures within the Health Service. It is not, intrinsically, an evaluation of the comparator grades.

This outcome identifies that Surveillance Officer, Epidemiologist, Senior/Specialist Epidemiologist, Principal Epidemiologist are very closely aligned with the Medical Scientist Grades and are the most appropriate Grades and scales for the Epidemiology Grading Structure.

The appropriate Grading for the roles being evaluated are set out below:

<b>Title</b>	<b>Proposed Grading Level/Salary Scale</b>
Surveillance Assistant	Grade IV
Surveillance Officer	Medical Scientist
Epidemiologist	Specialist Medical Scientist
Senior Epidemiologist	Chief Medical Scientist
Principal Epidemiologist	Laboratory Manager

*Table 8*

## **PART 2: Migration of existing staff to new structure**

### **Introduction**

The Terms of Reference for this evaluation exercise specified that there are, essentially, two parts:

(i) Reviewing the proposed structured career pathways and the aligned job specifications for Surveillance Scientists/Epidemiologists in order to conduct an evaluation of roles, including recommending the appropriate salary scales for each grade in the pathway.

(ii) Recommending how existing staff should be migrated to any new arrangement that might arise from the evaluation exercise, bearing in mind current grading of staff and years' experience.

Part 1 of this report dealt with the evaluation and grading levels. In order to undertake the second element, the following were taken into account and considered:

- Detailed Information including data relating staffing numbers
- A breakdown of existing temporary staff
- Details of existing permanent staff
- Itemised breakdown of current Surveillance roles and grading levels within Public Health
- Similar details provided by Fórsa.
- Circular 10/71
- Qualification Requirements specified in the submission to the Crowe Horwath process, and Job Specifications provided by the HSE during the evaluation.
- All of the information and the proposed structure and payscales recommended in Part 1 of this report

### **Current v Proposed Staffing Levels**

Based on data provided by the HSE, and separate submissions from Fórsa, there are at the time of counting, 72 permanent Surveillance posts in HPSC and across the eight Public Health Departments (PHDs) in Ireland.

The breakdown of these posts, provided in a submission, is as follows:

- 32 Surveillance Assistants; 30 at Grade IV (Clerical) and 2 at Grade V (Clerical) grade
- 2 surveillance support staff, 1 at Grade V (Clerical) and 1 Grade VI (Clerical) grade



- 5 Surveillance Officers at Grade VI (Clerical) grade
- 30 Surveillance Scientists at Grade VII (Clerical), Grade VIII, Senior Medical Scientist or Chief Medical Scientist grades
- 3 Senior Surveillance Scientists at Grade VIII or Chief Medical Scientist grade.

Of the 34 Surveillance Assistants and surveillance support staff, 24 have been newly recruited within the last 12 months.

The proposed structure will have up to a total of 110 positions, 44 Nationally and 66 Regionally. The proposed breakdown of these by grade level is contained in the table below.

	Current Grades/Numbers			Proposed Titles	Proposed		
	Clerical Admin	Med Scientist	Total	Proposed Pathway	Total	Regional	National
Grade IV	30		30	Surveillance Assistant	27	20	7
Grade V	3	22	25	Surveillance Officer	28	20	8
Grade VI	6		6	Epidemiologist	26	13	13
Grade VII	5	2	7	Senior/Sp. Epidemiologist	19	7	12
Grade VIII	4		4	Principal Epidemiologist	10	6	4
	<b>48</b>	<b>24</b>	<b>72</b>	<b>All Grades</b>	<b>110</b>	<b>66</b>	<b>44</b>

## Recommendation 2

The new grading structure should be filled based on updated versions of the Job Specifications and Qualifications. As indicated in Part 1 of this report, I used the HSE Job Specifications provided to me during the process, supported by the additional information gleaned from the Crowe Horwath Submission and other, related information provided.

It will be a matter for Management/HR to sign off on/finalise the Job Specifications once the recommendations are accepted.

All future appointments to these grades should be based on the minimum qualification requirements once any transition arrangements have been completed.

The following recommendations for the first filling of the new grades are set out below. All future fillings beyond this immediate stage will be in line with normal recruitment procedures.

Existing staff applying for the new grades will be required to follow the recruitment process outlined below. Successful applicants should be issued with a new contract and job description for their role.

Existing staff not applying for a recruitment competition or unsuccessful in a recruitment competition will be assimilated onto the appropriate scales as outlined below. They will be issued with a new contract and job description for the role they are assigned to.

## Recommendation 2.1

### **Principal Epidemiologist (aligned to Laboratory Manager grade)**

Positions at this level should be filled through Open Competition, based on the updated Job Specifications as provided for above. Successful internal candidates should be assimilated onto the new scales in line with Circular 10/71. New entrants should be placed on the appropriate point, in line with current arrangements in the HSE.

## Recommendation 2.2

### **Senior Epidemiologist (aligned to Chief Medical Scientist grade)**

Positions at this level should be filled through an internal HSE Competition, based on Job Specifications updated by HSE Management/Human Resources, and as proposed in the submission to the Crowe Horwath process, in the first instance. Any posts that remain unfilled following the internal competition, should be recruited through Open Competition.

Successful internal candidates should be assimilated onto the new scales in line with Circular 10/71.

## Recommendation 2.3

### **Epidemiologist (aligned to Specialist Medical Scientist grade)**

Existing Surveillance Scientists, not successful or not applying for the above, should be assimilated onto the new scale at a point nearest but not below. In the event that any existing permanent member of staff is on a salary point greater than the maximum of the scale they are being assimilated onto, they should retain their existing salary on a personal to holder basis.

## Recommendation 2.4

### **Surveillance Officer (aligned to Medical Scientist grade)**

Positions at this level should be filled by Open Competition, based on Job Specifications updated by HSE Management/Human Resources, and as proposed in the submission to the Crowe Horwath process.

## Recommendation 2.5

### **Surveillance Assistant (aligned to Grade IV)**

Existing staff at Grade IV Surveillance Assistant level, not successful or not applying for the above referenced posts (Recommendation 2.1, 2.2, 2.3 and 2.4), should remain on the grade

IV scale. They should be issued with an updated contract, job specification and/or job description, as required.

## Recommendation 2.6

### Grade Codes

It is recommended that a new Grade Code structure for Surveillance Officer and Epidemiology Grades and associated salary scales for public health surveillance and epidemiology should be sanctioned and put in place.

The contracted weekly hours for this grade is 37 hours per week. The following annual leave shall apply to each of the Grades for New Entrants/Newly promoted staff.

Surveillance Assistant	27 Days
Surveillance Officer	28 Days
Epidemiologist	29 days
Senior Epidemiologist	30 Days
Principal Epidemiologist	30 days

## Recommendation 2.7

Any outstanding matters, including any anomalies relating to individual members of staff, that remain after the implementation of the structure should be the subject of discussion between the parties at that point.

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## PART 3: Acute Hospital Sector

Under the terms of reference and methodology, it was agreed that the process would engage with the MLSA in relation to the process encompassing the roles in the Acute Hospital Sector.

The MLSA indicated that their review of the HSE employment census shows that there are currently 31 Surveillance Scientists in the Acutes Sector, that, in their view, are not materially different to the position in the Public Health area.

- 9 of those scientists are on specialist medical science grade,
- 20 are on senior medical scientist grade,
- 1 is paid as a Grade 7, and
- 1 is paid as a Grade 8.
- 3 of the specialist posts are in Band 4 Hospitals, and 6 are in Band 3 hospitals.

The chief issue for the MLSA is to address some of the disparities as regards to grading across the acute hospitals.

They outlined the similarities between their roles, duties, and responsibilities and those in Public Health.

There is an expectation that a process similar to that occurring in the Public Health area would be undertaken in the Acutes Sector.

For the purposes of this process, there is not a similar availability of information, analysis, funding, or approval for such an exercise in the Acutes area, at present.

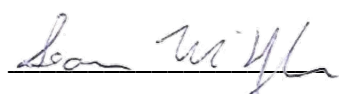
My understanding is that the key concern identified by the MLSA, on behalf of those employed in the Acute Hospital Sector, is in relation to grading levels.

### Recommendation 3

Based on knowledge to date, it is recommended that the parties i.e. HSE and MLSA consider, either

- i. to broaden this exercise to encompass a parallel process to examine the position in relation to surveillance scientists in the Acute Hospitals, or
- ii. alternatively agree a separate process.

In so recommending I am conscious that the approval of the Department of Health shall be required by the HSE for any course of action pursuant to this recommendation.



**Sean McHugh**

**July 16<sup>th</sup> 2021**