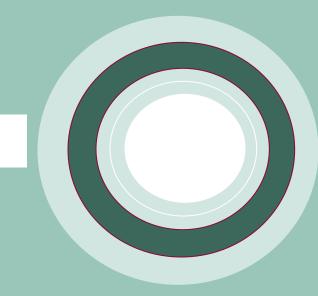


# **Vision – Strategic Context**



### Two Key Requirements to deliver Objective



#### Reform

- Develop a new person centred model of care for older people and people with disabilities
  - ✓ Promoting independence and lifestyle choice as far as possible
  - Maintain people at home or in their own community
  - ✓ A sustainable model "money follows the person"

#### Sustain Service Delivery

- Service Plan delivery within Resources, Targets & Standards
- Incremental performance improvement
- Transition safely



# What will be different for Older People & People with Disabilities



- ✓ Clear and comparable information and advice to make good decisions about their service - person centred models of care the norm, with ease of access to services
- ✓ People will be involved in developing their own care-plan based on standardised needs assessment which focuses on people's strengths & personal goals
- Maximised potential of local communities & social networks to sustain people in their own homes and communities
- ✓ Increased control of their own resource through "money following the person" budgeting
- Service users and their local communities will be heard & involved in all stages of the process to plan and improve services
- ✓ A wider range of high quality options either through public, private or voluntary providers choices available and people informed



### **Social Care Policy Direction & Service Modelling**



Disability Services - Priorities 2014

- •Implementation Framework Value for Money and Policy Review
- •People moving from institutional settings to homes in the community
- •Reconfiguration of day services and young people leaving school / rehabilitation programmes
- Disability services for children and young people (0 18s)
- •Service user involvement and quality in the development of services
- Management and information systems

Services for Older People – Priorities 2014

- •Develop sustainable model for long stay care - review of fair deal – nursing home support scheme
- Develop an integrated of service for older people – supporting older peoples independence

- Assessment of need single assessment tool
- Service user involvement
- Research, demographic trends planning & research
- Service improvement models and performance management models



#### **Governance & Accountability - Processes**



#### **National Level**

- Directorate Governing Body
- Leadership Team
- Planning, Performance & Assurance Group
- Social Care Management Team

Head of Operations &
Service Improvement
- Services for
Older Persons

Head of Operations &
Service Improvement
- Disability Services

Head of Planning, Performance & Programme Management

Quality & Standards Assurance

Clinical Lead

National Consultative Forum

National Implementation Framework – Value for Money & Policy Review

#### **Service Delivery**

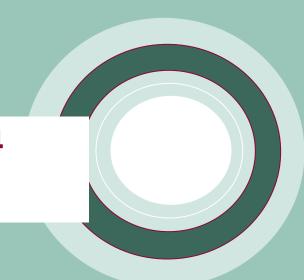
- Regional RDPIs Transition Period (RDOs)
- ISA's and Hospital Groups
- Support Functions Finance, HR, Shared Service, Communication

#### Reform

- Reform Programme Office (DOH)
- System Reform Office (HSE) Leo Kearns



# Social Care Division Operational Plan 2014 High Level Summary – Disability Services



### **Social Care Funding 2014**

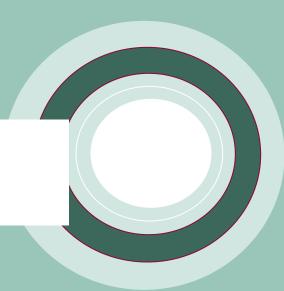
- The social care budget for 2014 is set at €3,055.3m which is a small increase of 0.5% on the 2013 position
- This includes reductions of €31.3m, which are principally pay related reductions associated with Haddington Road, the employment control framework (moratorium) and incentivised career break.
- It also includes additional resource of €45m representing €14m developments in disability services and additional resource of €31m to cover deficits in disability and older people services.
- HRA (€11.5m) & related pay reductions (€4m) for Disabilities
- Further €80m to be allocated across all Care Groups.



- Embarking on a large scale reform programme to implement the VfM and Policy Review which will transform or prodeled service to a community based model of person-centred care
- National Implementation Framework Steering Group & National Consultative Forum will support implementation
- An additional investment of €14m and 130 additional staff will:
  - Provide places for an estimated 1,200 young people leaving school or Rehabilitative Training nationwide - 35 additional staff - €7m
  - Provide "emergency" placements for people with disabilities whose care or family circumstances have changed and who now require an immediate and unplanned service response 15 additional staff - €3m.
  - Roll out a new model of assessment and intervention, the objective of which
    is to provide one clear referral pathway for all children (0 18s), irrespective
    of their disability, where they live or the school they attend 80 additional
    therapy staff €4m
- Reconfiguring existing resources will:
  - Deliver a more person-centred model of care and support, with more than
     150 people moving to more appropriate homes in the community.

- Realisation of €5m efficiencies in line with the VfM and Policy Review ht 10thar
- Streamline governance arrangements

# Social Care Division Operational Plan 2014 Detailed Actions – Making It Real



# A Person Centred Model of Service & Supports

Strategic Groundwork – 2014

- National Implementation Framework Steering Group Implementation Plan
- Evaluate Demonstration Projects
- Develop baseline data & comprehensive evaluation process
- Develop national guidelines and process to support rollout of congregated settings in 2015 and future years.
- Cross agency working with Local Housing Authorities
- Building a "community development" approach

## A Person Centred Model of Service & Supports

Specific Actions – 2014 - planned approach, responsive management, consultation & learning e.g.

- School Leavers
  - Identify cohort with DES / Providers 1<sup>st</sup> Feb
  - Identify service providers to respond 1<sup>st</sup> April
  - Advise School Leavers & Families 30<sup>th</sup> June
  - Communication & Learning for 2015
- 150 to move on from congregated settings
- New Directions translate learning from demonstration sites
- 0-18's model of assessment and intervention -one clear pathway, irrespective of disability

Reform is Part of our Work Every Day



# **Service User & Community Involvement**

National Consultative Framework Process to enhance involvement

- Maximise potential of local communities & social networks

   collaborate with DFI & other agencies
- Take a "whole system" approach in developing health and wellbeing
- Local Communities will be heard "Nothing About Us Without Us"
- Building a coalition of support with local communities, voluntary partners, staff & unions and the political system in achieving our shared objective

How we implement change is important

### **Quality & Standards**

Implement national HIQA standards for residential services

- Work with stakeholders during commencement of registration and inspection
- Regional implementation groups and national reference group
- Implement Children First in a standardised way
- Develop standardised assessment of need process & inform resource allocation model
- Safe Guarding Adults sign off of policy

Although care costs, poor quality care costs more

Client Safety is Paramount

Shábháilteacht

# **Management & Information Systems**

Work with DOH on strategic information framework

- Performance Indicators move from output to outcome focus
- Develop web based system to support easier service user access to information and advice
- Information to support planning including unmet needs

Joint Approach Required



### **Efficiency & Effectiveness**

- VFM & Policy Review step change in implementation
   realisation of €5m efficiencies
- Strengthening governance & streamline service arrangements / agreements
- Shared service platform real opportunities to leverage the model to streamline how we operate
- Promoting merging & partnering of service providers where appropriate
- Procurement measures
- Service improvement team developed to support and validate measures

Efficiencies will be targeted proportionately between the larger & smaller services

Tús Aite do

### Public Service Stability Agreement 2013- 2016 (HRA)

- HRA flexibilities can be applied to all services voluntary & statutory
- HRA (€11.5m) & related pay reductions (€4m)
- Enabling implementation of change programmes & extraction of cost
  - Review and change work practices, rosters as envisaged in Future Health
  - Additional Hours
  - Reduction in head count etc
  - Higher remuneration reductions
  - Reorganisation and consolidation of services
  - Redeployment and reassignment
  - Some outsourcing options



#### Public Service Stability Agreement 2013- 2016 (HRA)

- Each area working with agencies must ensure that
  - verifiable,
  - achievable and
  - proportionate
  - cost reduction and productivity measures are set for all agencies.
- Each area must have robust and transparent processes in place to verify delivery of same
- Each submission from the agencies must be stressed tested and validated and quality assured by Area Manager
- Early verifiable implementation
- Focus particularly on the top 50, however, all agencies to complete documentation, collaborative approach
- Questionnaire to be sent to all agencies receiving under €250,000



#### **Social Care Division - Values**



Our Mission – Why we exist
Our Values – How we operate
Our Vision – Where we want our organisation to be

Passion for Excellence Learning Trust

Developing a shared vision & values

Making it real

