



**Cúram Sláinte
Phobail, Iarthar**

ag freastal ar Ghaillimh,
Maigheo agus Ros Comáin

**Community
Healthcare West**

serving Galway, Mayo
and Roscommon

Service Arrangement Information and Engagement Event

Community Healthcare West
Ard Rí Hotel, Tuam, Co Galway

5th December 2023



Welcome & Overview



Dept/Function	Speaker
Registration and Networking & Engagement Opportunity	
Event Open	CMSU
Chief Officer, Community Healthcare West	John Fitzmaurice
National Compliance Unit	Kevin Cleary
Contract Management Support Unit	Denise Donlon
Head of Finance	Liam Fogarty
Head of Quality, Safety & Service Improvement (QSSI)	Karl Brogan
Networking Junction & Refreshments	
Head of Primary Care	Mary Warde
Head of Older Persons Services	Des Mulligan
Manager, Mental Health Services	Laura Costello
Head of Disability Services	Mary O'Halloran
Head of Health and Wellbeing	Elaine Prendergast
Q&A/Round up/Evaluation	
Close	



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Questions & Answers

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John Fitzmaurice

Chief Officer



Kevin Cleary

Assistant National Director
Compliance Unit, HSE

5 December 2023



- Introduction
- Role of the HSE Compliance Unit
- Dialogue Forum with Voluntary Organisations
- Key Relevant Processes for Funded Agencies

HSE is responsible in accordance with Legislation to deliver health and personal social services

In some situations the HSE provides services directly or in other instances S38 and S39 Agencies provide these services

The provision of services by external Agencies is done in accordance with S38 and S39 of the Health Act, 2004 as follows

Section 38

‘The Executive may, subject to its available resources and any directions issued by the Minister under [section 10](#), enter, on such terms and conditions as it considers appropriate, into an arrangement with a person for the provision of a health or personal social service by that person on behalf of the Executive’.

Section 39

‘The Executive may, subject to any directions given by the Minister under [section 10](#) and on such terms and conditions as it sees fit to impose, give assistance to any person or body that provides or proposes to provide a service similar or ancillary to a service that the Executive may provide’.

The Compliance Unit is responsible for the oversight of the Governance Framework which underpins the release of funding to these Agencies.

Role of the HSE Compliance Unit

The HSE Compliance Unit was established in late 2014 to support the implementation of the Governance Framework as it applies to Section 38 and Section 39 Agencies. Its main functions are as follows:

- Maintain oversight of the SA/GA process including their annual review and development.
- Work with and support the Contract Management Support Units (CMSUs) in the CHOs
- Provide status reports at regular intervals on the implementation of the Framework.
- Manage the Annual Compliance Statement (ACS) process.
- Manage the External Reviews of Governance at Board and Executive Level in S38 and S39 Agencies, where applicable
- Manage the Service Provider Governance on-line system (SPG) tracking system.
- Co-ordinate governance issues within the HSE regarding funded Agencies.
- Interface with key stakeholders involved in the Framework including representative bodies of the Non Statutory Sector and other bodies such as the State Claims Agency, Charities Regulator.
- Provide training on the Framework to the HSE staff and relevant staff in the S38 and S39 Agencies.

Annual funding released by the HSE to S38 and S39 Agencies 2016 to 2022

Year	Totals (€ Millions)
2022	6,342
2021	5,691
2020	5,443
2019	4,699
2018	4,283
2017	4,007
2016	3,782

Number and type of Agencies currently funded

YEAR END 2022	
TYPE OF SERVICE ARRANGEMENT	NO. OF AGENCIES
Section 38 - Service Arrangements (Voluntary)	38
Section 39 - Service Arrangements (Voluntary)	359
Section 39 - Grant Aid Agreements (Voluntary)	1,123
For-Profit Service Arrangement	267
Out-of-State Service Arrangement	20
Total Agencies	1,807

SERVICE ARRANGEMENTS WITH S38 AGENCIES

NON-STATUTORY SECTOR YEAR END 2023 (as at 17.11.23)										
S38 - Service Arrangements (Voluntary)										
NO. OF AGENCIES BY CARE GROUP										
FUNDING BANDS	Hospital s Acute	Disabilit y Services	Health & Wellbein g	Mental Health Service s	Older Person s Service s	Palliativ e Care / Chronic Illness Service	Primary Care Service s	Social Inclusion Services	TOTAL	% of Total Agencies
< 5 million	0	1	0	0	0	0	1	0	2	5%
5 - 20 million	0	2	0	1	2	0	1	0	6	16%
> 20 million	16	12	0	0	1	1	0	0	30	79%
TOTALS	16	15	0	1	3	1	2	0	38	100%

SERVICE ARRANGEMENTS WITH S39 AGENCIES

NON-STATUTORY SECTOR YEAR END 2023 (as at 17.11.23)										
S39 - Service Arrangements (Voluntary)										
NO. OF AGENCIES BY CARE GROUP										
FUNDING BANDS	Hospitals non Acute	Disability Services	Health & Wellbeing	Mental Health Services	Older Persons Services	Palliative Care / Chronic Illness Service	Primary Care Services	Social Inclusion Services	TOTAL	% of Total Agencies
< 500K	1	24	12	22	29	3	3	54	148	41%
500K - 1 million	0	18	2	6	12	1	2	26	67	19%
1 - 2 million	0	16	0	4	12	0	2	10	44	12%
2 - 3 million	0	9	0	3	4	1	1	8	26	7%
3 - 4 million	0	4	0	1	5	0	1	2	13	4%
4 - 5 million	0	6	0	0	5	0	0	2	13	4%
5 - 20 million	0	23	0	2	3	4	4	3	39	11%
> 20 million	0	9	0	0	0	0	0	0	9	3%
TOTALS	1	109	14	38	70	9	13	105	359	100%

GRANT AID AGREEMENTS WITH S39 AGENCIES

NON-STATUTORY SECTOR YEAR END 2023 (as at 17.11.23)										
S39 - Grant Aid Agreements (Voluntary)										
NO. OF AGENCIES BY CARE GROUP										
FUNDING BANDS	Hospitals non Acute	Disability Services	Health & Wellbeing	Mental Health Services	Older Persons Services	Palliative Care / Chronic Illness Service	Primary Care Services	Social Inclusion Services	TOTAL	% of Total Agencies
< 50K	12	39	57	30	486	5	31	70	730	65%
50 - 100K	5	20	22	14	70	5	4	46	186	17%
100 - 150K	0	13	11	6	22	1	5	32	90	8%
150 - 200K	0	3	3	3	21	2	5	28	65	6%
> 200K	0	5	13	3	13	0	2	16	52	5%
TOTALS	17	80	106	56	612	13	47	192	1123	100%

Dialogue Forum for Voluntary Organisations – Impact on the Governance Framework

- Development of the Partnership Principles
- Joint Working Group to Review the Service Arrangement and the Grant Aid Agreement
- Agreed to focus on three areas for 2024
 - Review Clauses 12, 14 and 33 in Service Arrangement.
 - Pilot project to use streamlined documentation for Service Arrangements with Mental Health and Palliative Care.
 - Pilot project in three CHOs to use the Grant Aid Agreement up to €1million.

Key Relevant Processes for Funded Agencies

- Ongoing reporting in respect of funded Agencies
 - Completion of Service Arrangements and Grant Aid Agreements
 - Submission of Annual Audited Accounts
 - Submission of Annual Compliance Statements
 - External Reviews of Agencies' Corporate Governance
- MOU with the Charities Regulator
 - Signed in July 2023
 - Facilitates close co-operation between both organisations
 - Enables the sharing of information in relation to Charities funded by the HSE
 - Provide assistance for the performance of respective functions of the HSE and the Charities Regulator

Matrix of Governance Framework Requirements

	SA (Part 1 and Part 2)	GA	AFS Audited	AFS Approved	AFMR	Monitoring Meetings	ACSS	External Governance Reviews
Section 38:								
Acute Hospitals	●		●		●	●	●	●
Voluntary Agencies	●		●		●	●	●	●
Section 39:								
Voluntary Agencies > €3m	●		●		●	●	●	●
Voluntary Agencies €0.250m – €3m	●		●		●	●		
Voluntary Agencies €0.150m – €0.250m		●	●			●		
Voluntary Agencies €0.050m – €0.150m		●		●		●		
Voluntary Agencies < €0.050m		●		●		<i>Documentation Control once a year.</i>		
For Profit Agencies - All Funding	●		●			●		

Topics Covered by the Annual Compliance Statement (ACS) Process

ACS is a self-confirmation process in respect of the following:

- Governance
- Internal Code of Governance
- Risk Management
- Remuneration
- Finance
- Capital Assets
- Taxation
- Procurement
- Other Matters

Topics covered by the External Reviews of Governance

- **Board Governance/
Internal Control / Risk**
- **Related Companies**
- **Reorganisation/Restructuring**
- **Procurement**
- **HR / Payroll / P60s**
- **Third Party Contracts**
- **Capital Assets**
- **Overview of Financial
Governance**
- **Role of HSE**

Summary and Key Messages

HAVE AN AWARENESS OF:

- The changes to some documentation and processes on a pilot basis for 2024.
- The HSE's reporting systems on the Governance Framework.
- The Annual Compliance Statement and External Review processes.
- The MOU between the Charities Regulator and the HSE.

Contact compliance@hse.ie





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Denise Donlon

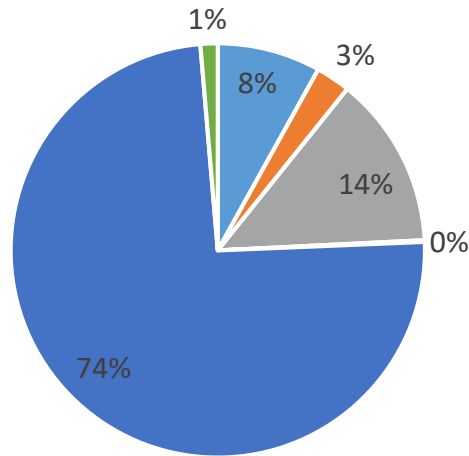
Manager – Contract Management Support Unit (CMSU)

5th December 2023



Funding allocated for Health and Social care Services via Service Arrangement - 2023

Funding Allocated for Service Provision in 2023



- Primary Care
- Mental Health Services
- Older Persons Services
- Health and Wellbeing
- Disability Services
- Grant Aid Agreements

2023	€M	%
National HSE Budget	21,600	
CHO Budget total	667	3.1%
CHO Grants allocation	298	45%

Operational Unit	€m
Primary Care	24
Mental Health Services	8
Older Persons Services	40
Health and Wellbeing	0.4
Disability Services	221
Total	294
<i>Grant Aid Agreements</i>	4



CMSU Function

To support, advise and monitor:

1. That appropriate completion of **Service Arrangements** or **Grant Aid Agreements** with providers (annually) in respect of all funding released pursuant to Section 38 and Section 39.
2. That a system to ensure that **Performance Review Meetings** regarding service provision by agencies take place in accordance with performance guidelines.
3. That all the **back-up documentation** has been received from providers, reviewed where appropriate, and saved to the CHO Contract Repository for management use as required.
4. That Agencies **Annual Financial Statements** (AFS) and related documentation are being received and reviewed (retrospective).
5. That the implementation of the **Governance Framework** is proactively managed.
6. That all necessary inputs are made to the **Service Provider Governance** (SPG) IT system to ensure it is up to date, accurate and reflects the totality of arrangements and funding allocated for the provision of health and social care services within the CHO.



Partnership Principles

Dialogue Forum with Voluntary Organisations

Partnership Principles

Building A New Relationship between Voluntary Organisations and the State in the Health and Social Care Sectors

Voluntary organisations are an intrinsic and valued core component of your hybrid, public health and social care system



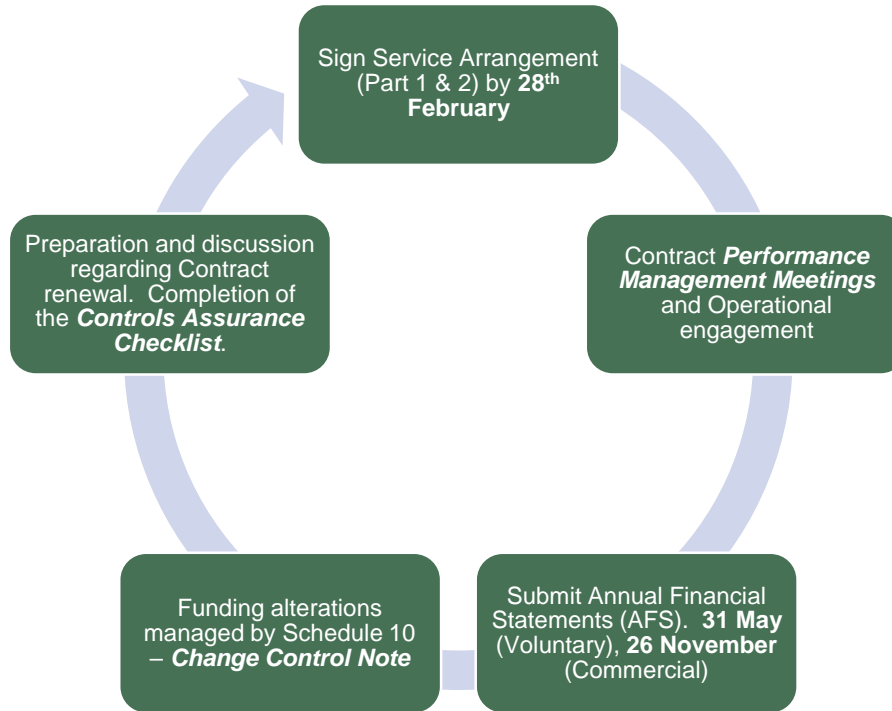


Partnership in action

1. Chief Officer notification of 2024 Contract issue – November 2023
2. Key Contact/Administrator will liaise during the contract completion phase i.e. prior to 28th February 2024.
3. Where issues are anticipated, advise the Key Contact by 31st December 2023.
4. Upon content agreement, the Key Contact will issue the final & agreed version for authorised provider sign-off.
5. Contract is returned to Key Contact with original signatures.
6. Key contact will arrange for authorised HSE sign-off and return a signed copy to the Provider.
7. Operational and Performance Review Meetings commence.
8. Previous year Annual Financial Statements to be submitted by 31st May/26 November 2024.



Summary Contract life cycle





Annual Financial Statement (AFS) Review

Agency Type	Information Requirements	Due date for submission to HSE
Voluntary	1) Signed Audited Unabridged AFS including Supplementary Information section, ie. Detailed Income & Expenditure Account 2) Signed Annual Financial Monitoring Return (AFMR) 3) Auditors Management Letter & Directors Response	By 31st May
For-Profit/ Commercial	A copy of the AFS as filed with the Companies Registration Office (CRO)	At the same time the organisation uploads the final version of its accounts to the CRO's online filing system ("CORE") as part of the annual return filing process. For clarity, the latest due date that can arise for the submission of accounts to the HSE is the 26th of November in the current year.



2024 focus

1. Completion of **2022** AFS Reviews (Primary & Secondary)
2. Continued development of the CMSU Support and monitoring function within the CHO and within available resource.
3. Implement any findings of relevant Audits e.g. Internal, C&AG.
4. Prioritise resources available towards achievement of the key CHO performance indicators (KPIs):
 - a) Issued to the Agency
 - b) Signed by the Agency
 - c) Signed by the HSE

HE

Thank you



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Liam Fogarty

Head of Finance

5th December 2023



Finance and Budget 2023

All information in slides as at end Quarter 3, 2023



CHO Budget 2023 @ Quarter 3

- TOTAL ANNUAL CORE BUDGET (Excluding Local Demand Led Schemes) **€650.7m**
- TOTAL CORE BUDGET ALLOCATED TO NON STATUTORY SECTOR **€298m**
- % of TOTAL BUDGET ALLOCATED TO VOLUNTARY ORGANISATIONS **45%**



DISABILITY SERVICES

- TOTAL CORE DISABILITY BUDGET **€236.7m**
- TOTAL CORE BUDGET ALLOCATED TO NON STATUTORY SECTOR **€221.1m**
- % of TOTAL BUDGET ALLOCATED TO VOLUNTARY ORGANISATIONS **93%**
- NUMBER OF SERVICES FUNDED BY SERVICE ARRANGEMENT **61**
- SERVICES FUNDED INCLUDE INTELLECTUAL, PHYSICAL AND SENSORY SERVICES
IN COUNTIES GALWAY, MAYO AND ROSCOMMON



Older Persons Services

- TOTAL CORE OLDER PERSONS SERVICES BUDGET
€115.0m
- TOTAL CORE BUDGET ALLOCATED TO NON STATUTORY SECTOR **€40.7m**
- % of TOTAL BUDGET ALLOCATED TO VOLUNTARY ORGANISATIONS **35%**
- NUMBER OF SERVICES FUNDED UNDER SERVICE ARRANGEMENT (25 Provide Home Support Services) **36**
- SERVICES FUNDED INCLUDE Home Support Services, Day Services and Social Care Allocations.



Primary Care Services

- TOTAL CORE PRIMARY CARE SERVICES BUDGET **€147.7m**
- TOTAL CORE BUDGET ALLOCATED TO NON STATUTORY SECTOR **€24.3M**
- % of TOTAL BUDGET ALLOCATED TO VOLUNTARY ORGANISATIONS **16%**
- NUMBER OF SERVICES FUNDED UNDER SERVICE ARRANGEMENT **17**
- SERVICES FUNDED INCLUDE GP Out of Hours Service, Palliative & Hospice Care Services and Social Inclusion Services



Health & Wellbeing Services

- TOTAL CORE HEALTH & WELLBEING SERVICES BUDGET **3.5m**
- TOTAL CORE BUDGET ALLOCATED TO NON STATUTORY SECTOR **€0.4m**
- % of TOTAL BUDGET ALLOCATED TO VOLUNTARY ORGANISATIONS **12%**
- NUMBER OF SERVICES FUNDED UNDER SERVICE ARRANGEMENT **4**
- SERVICES FUNDED INCLUDE Health Promotion i.e. Smoking Cessation, Healthy Eating programmes



Mental Health Services

- TOTAL CORE MENTAL HEALTH SERVICES BUDGET **€143.5m**
- TOTAL CORE BUDGET ALLOCATED TO NON STATUTORY SECTOR **€7.9m**
- % of TOTAL BUDGET ALLOCATED TO VOLUNTARY ORGANISATIONS **6%**
- NUMBER OF SERVICES FUNDED UNDER SERVICE ARRANGEMENT **25**
- SERVICES FUNDED Community based services for young people and specialist services.



Summary & key Financial Compliance Requirements

- Significant % of our allocated Budget **45%**
- Financial Reporting as outlined in the Service Arrangements (SA) and Grant Aid Agreements (GAA)
- Submission of Annual Financial Statements (AFS) and Annual Financial Monitoring reports (AFMR) as outlined in the SA/GAA.
- Where applicable adherence to the National Financial Regulations (NFR)
- Good Financial Governance

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Thank you



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Quality, Safety & Service Improvement (QSSI) Service Arrangement – Part 2 - Schedule 2

Karl Brogan

Head of Service - Quality, Safety & Service Improvement

QSSI.cho2@hse.ie

5th December 2023



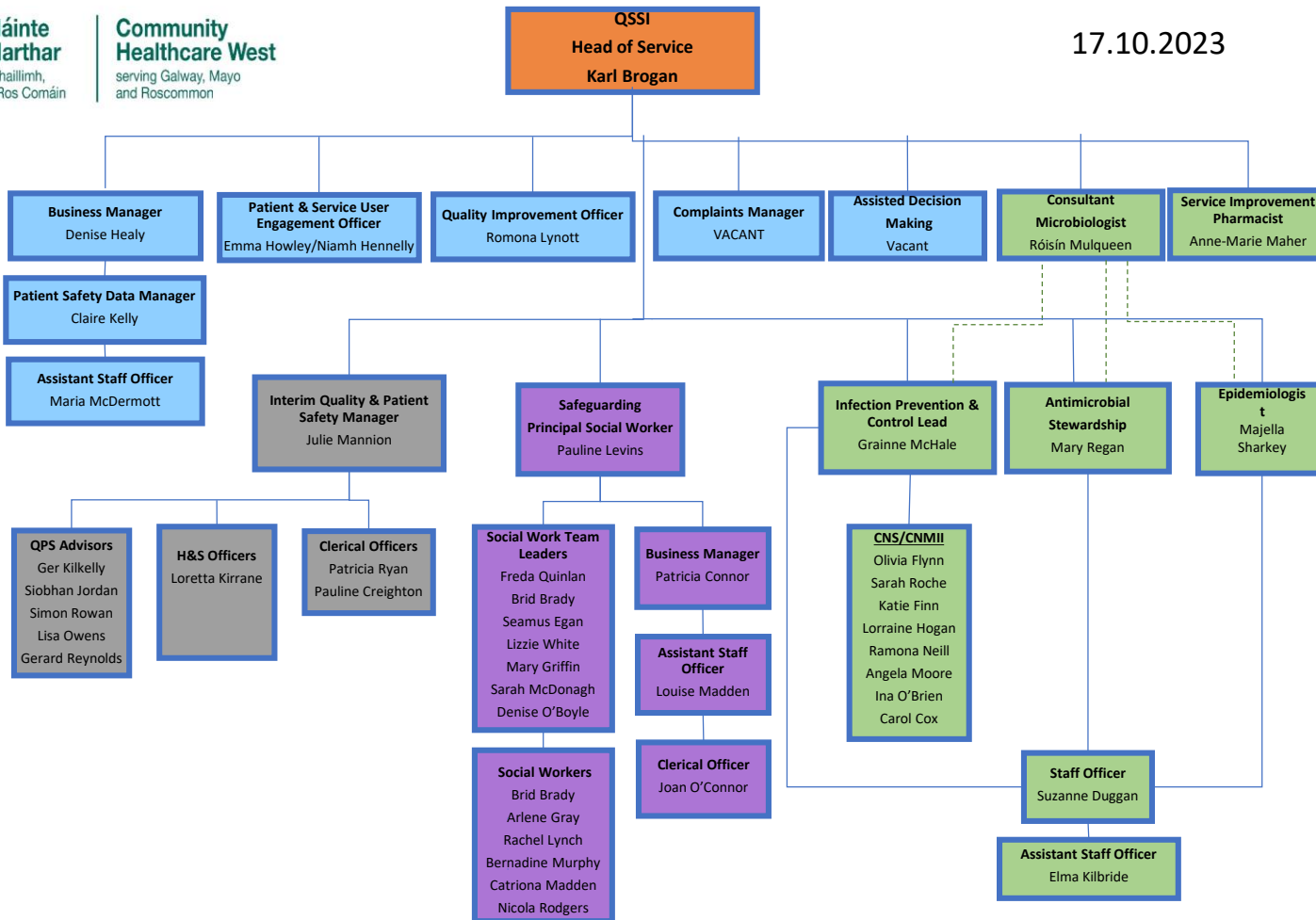
Who are we?

1. Established May 2021 to lead out on quality, patient safety and service improvement across the CHO – Community Healthcare West.
2. Regional Remit Support Service to all Care Groups / Functions and activities
3. Direct Report to Chief Officer
4. Strategic direction Sláintecare Right Care, Right Place, Right Time
5. HSE Quality Framework, Incident Management Framework, Governance for Quality
6. Patient Safety Strategy (2019 -2024) at core of all that we do



Role of QSSI

1. New Department and New Departure: Evolving!
2. Systematic implementation of quality, safety and service improvement strategies in planning, implementation and quality performance of all CHO services in a standardized manner
3. Development of and support of structures, systems and processes across CHO to support quality agenda and ensure compliance with regulatory standards and requirements
4. Ensure correct application of quality, safety and risk management policies and legislation in CHW
5. Support Heads of Service in implementation of, Health and Safety Legislation, HSE Safeguarding Policy and Guidelines, Human Rights, Service User Engagement etc.





SERVICE ARRANGEMENT PART 2 OF ARRANGEMENT –SERVICE SCHEDULES – 2023

- **TABLE OF CONTENTS**

- **SCHEDULE 1** - Contact Details

- Part A – The Executive

- Part B – The Provider

- **SCHEDULE 2 - Quality and Safety**



- **SCHEDULE 3** - Service Delivery Specification

- **SCHEDULE 4** - Performance Monitoring

- **SCHEDULE 5** - Information Requirements

- **SCHEDULE 6** - Funding

- **SCHEDULE 7** - Insurance

- **SCHEDULE 8** - Complaints

- **SCHEDULE 9** - Staffing

- **SCHEDULE 10** - Change Control

1. **Mission Statements**

2. **Corporate and Quality/Social Care Governance**

3. **Regulation**

4. **Quality and Standard Codes of Practice**

5. **Quality Assurance and Monitoring of Quality and Standards**



Quality and Safety

This schedule should specify the quality service standards, and service assurance aspects which must be adhered to by the Provider in consideration for the funding (**see Schedule 6, Funding**) provided by the Executive.

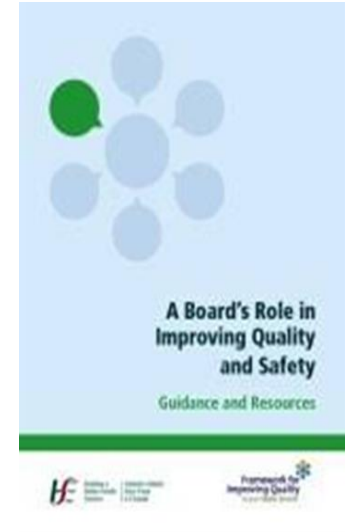
<https://www.hse.ie/eng/services/publications/non-statutory-sector/policies-procedures-guidelines-codes-of-practice-legislation.html>

The Web-link above outlines legislation, policies, standards, codes of practice. **Agencies must download and review this listing, and are required to comply with all relevant regulation.** The listing is relevant at this point in time and you will need to ensure you have appropriate structures and systems to be aware of any updates as relevant to your organisation



Corporate and Quality/Social Care Governance

- *The details of the Corporate, Clinical/Social Care Governance Structure in place need to be defined.*
- *Consider the Organisation Governance Structures / Organogram*
- *The Provider shall ensure it is compliant with the governance requirements outlined the SLA and in this context Clauses 14 (Insurance and indemnity) , 15 (Governance), 21 (Risk) , 22 (Quality and Standards) , 23 (Clinical Governance and Audit) of the Service Arrangements*





Regulation

Service Providers must ensure they are aware of their statutory obligations with regard to legislation and regulation. For example;

- Health and Safety
- Health Information Quality Authority
- Mental Health Commission
- Children's Act
- Assisted Decision Making
- Irish Medicines Board
- Health Act
- Open Disclosure
- Etc.





Quality and Standard Codes of Practice

Each provider should have systems in place to ensure quality and service standards are been implemented and monitored. The Executive may seek evidence of the Provider's compliance with same, also consider;

- *Professional Codes of Practice*
- *Safeguarding and Protection*
- *Immunisation*
- *COVID / Infection Prevention & Control*
- *HPSC*
- *Etc*



Framework comprised of 6 drivers

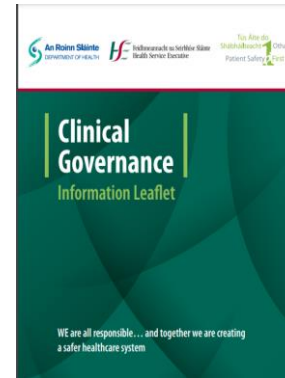




Quality Assurance and Monitoring of Quality and Standards

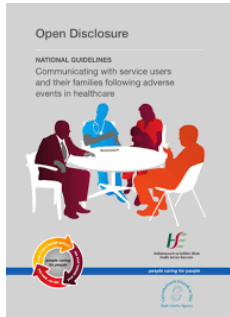
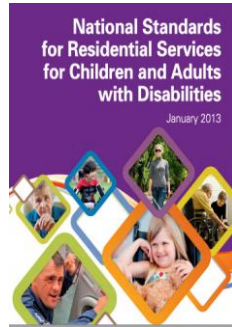
Governance and Oversight of

- Incident Management
- Serious Incidents / Serious Reportable Events
- Risk Management
- Quality Profiles
- Complaints
- Audit
- Etc





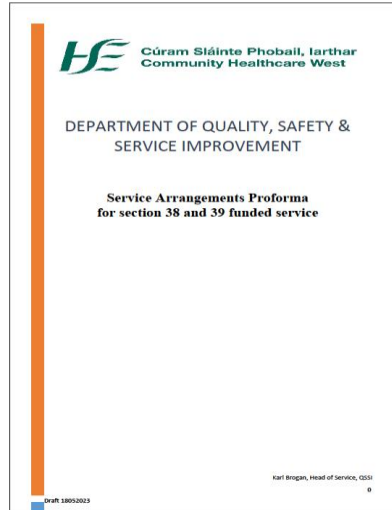
HSE Policies & Regulatory Frameworks





QSSI Role in Performance Review Meetings

Funding Level (in line with guidelines for frequency of meeting)	Attendance
Over €40 Million	At a minimum quarterly with a QSSI Proforma in advance
€20m - €40m	At a minimum Bi Annually with a QSSI Proforma in advance
€5m - €20m	Annually with a QSSI Pro forma in advance
€1m - €5m	As Required
€0.250m - €1m	Advice as required to HOS
€0.50m - €0.250m	Advice as required to HOS
Less than €0.050m	Advice as required to HOS



Index

Governance Structures

Section 1: Incident Management

Section 2: Health & Safety

Section 3: Adult Safeguarding and Children First

Section 4: Risk Registers/ Risk Assessments

Section 5: Compliance

Section 6: General

Section 7: Consumer Affairs / Service User Engagement

Section 8: Infection Prevention Control

Section 9: Quality



Thank you



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Networking Junction & Refreshments



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Service Arrangement Information and Engagement Event

Mary Warde

Head of Service – Primary Care

5th December 2023



2023 Service Arrangements in context

Overall Primary Care Budget	€147.7m
Total WTE in Primary Care	1,322 WTE
No. of Services Funded	17
Funding to Organisations	€24m



Community Healthcare Networks



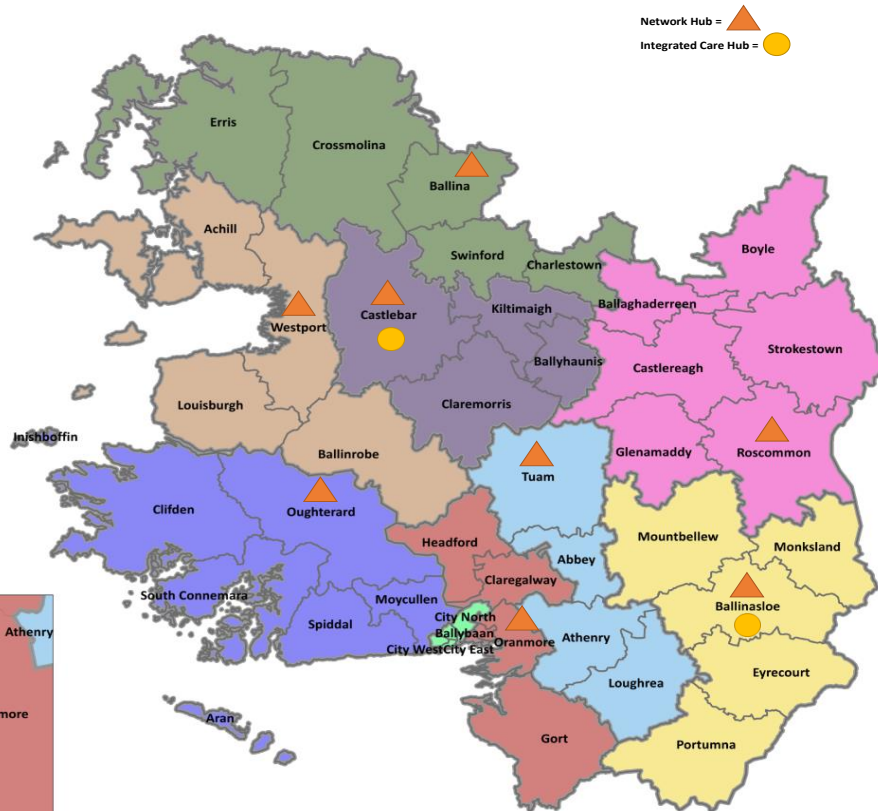
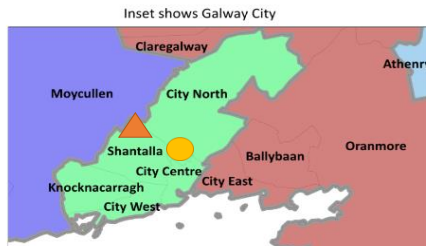
Primary Care Community Healthcare Networks

CHN Manager is based in the Network Hubs
Chronic Disease Leads are based in the Integrated Care Hubs

Legend

CHO2 Networks & Primary Care Teams

CHO2-1	North Mayo	●
CHO2-2	East Mayo	
CHO2-3	West Mayo	
CHO2-4	West Galway	●
CHO2-5	West Galway City	
CHO2-6	Central Galway & East Galway City	●
CHO2-7	Tuam, Athenry & Loughrea	
CHO2-8	East Galway & South Roscommon	
CHO2-9	North Roscommon & North East Galway	



Network Hub =
Integrated Care Hub =



Integrated Care Hubs

Integrated Care Hub ICP CD	Community Healthcare Network Area's	Population
Castlebar	North Mayo (Network 1) South Mayo (Network 2) West Mayo (Network 3)	130,638
Galway City	West Galway (Network 4) West Galway City (Network 5) Central Galway and East Galway City (Network 6)	156,693
Ballinasloe	Tuam, Athenry and Loughrea (Network 7) East Galway and South Roscommon (Network 8) North East Galway and North Roscommon (Network 9)	158,025



Services delivered across Primary Care

Services delivered within the Community Healthcare Network

- Physiotherapy
- Dietetics
- Occupational Therapy
- Speech and Language Therapy
- Social Work
- Public Health Nursing
- Podiatry

Primary Care Services aligned to the Community Healthcare network

- Dental
- Psychology
- Community Medical
- Regional Services
 - Social Inclusion
 - Civil Registration
 - GP Unit
 - Public Analyst Lab
 - Audiology
 - Ophthalmology
 - Orthotics
 - Palliative Care



Impact to date of Network Structure

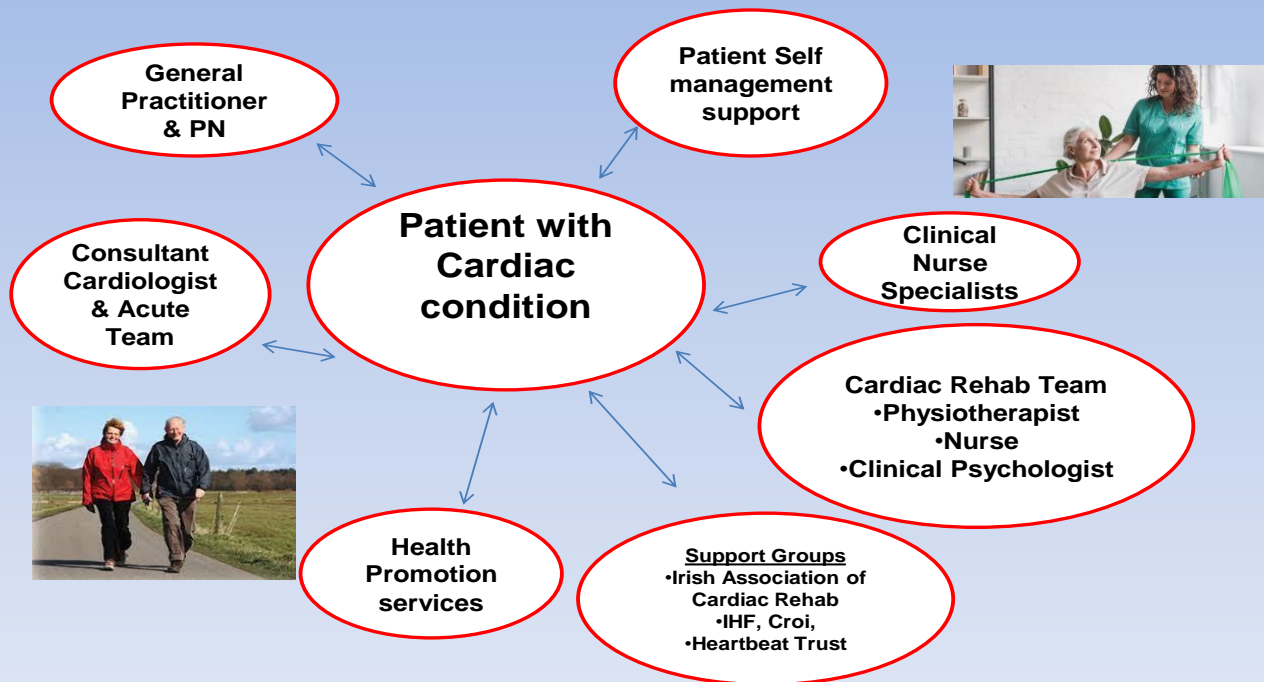
- Team based approach to care
- Emphasis on care planning
- Coordination of care
- Integration of services
- Increased multidisciplinary working
- Streamlining of referrals process (Healthlink)
- Links created with other agencies
- Focus on wellbeing and preventative care as well as reactive care



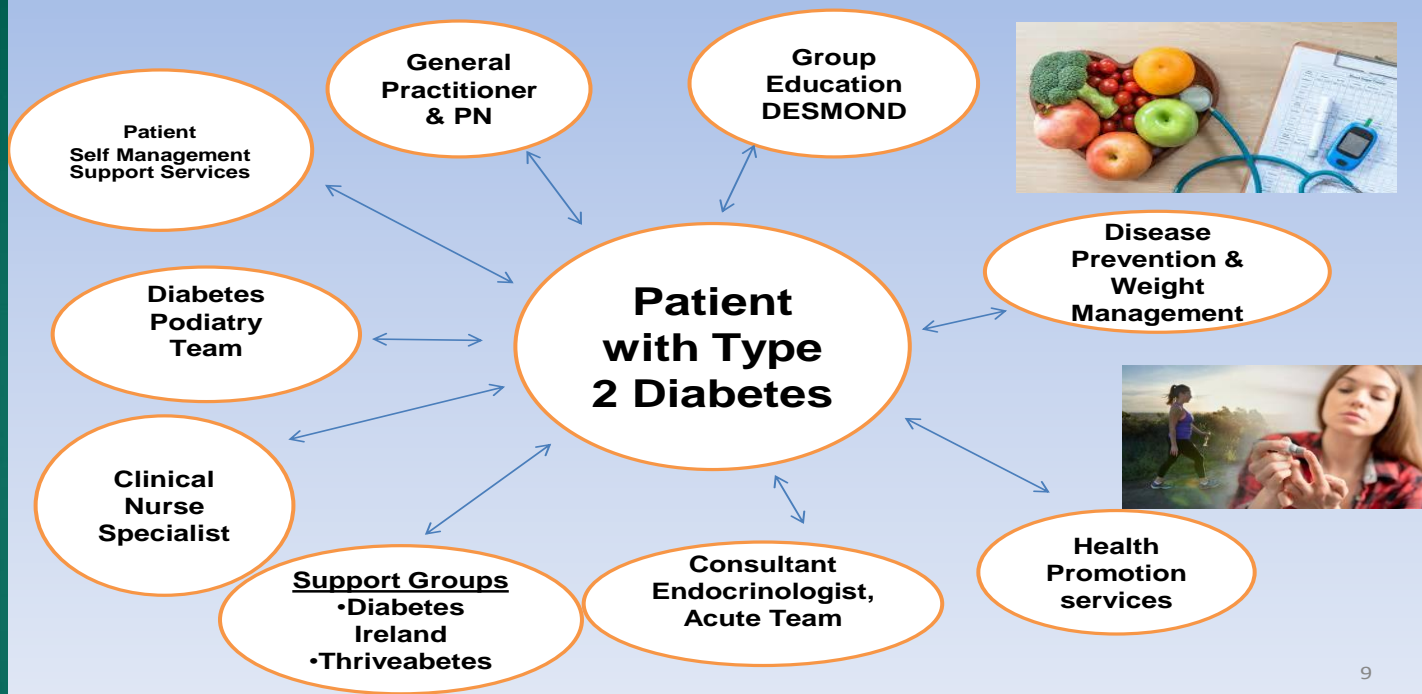
Model of Care for Chronic Disease Management



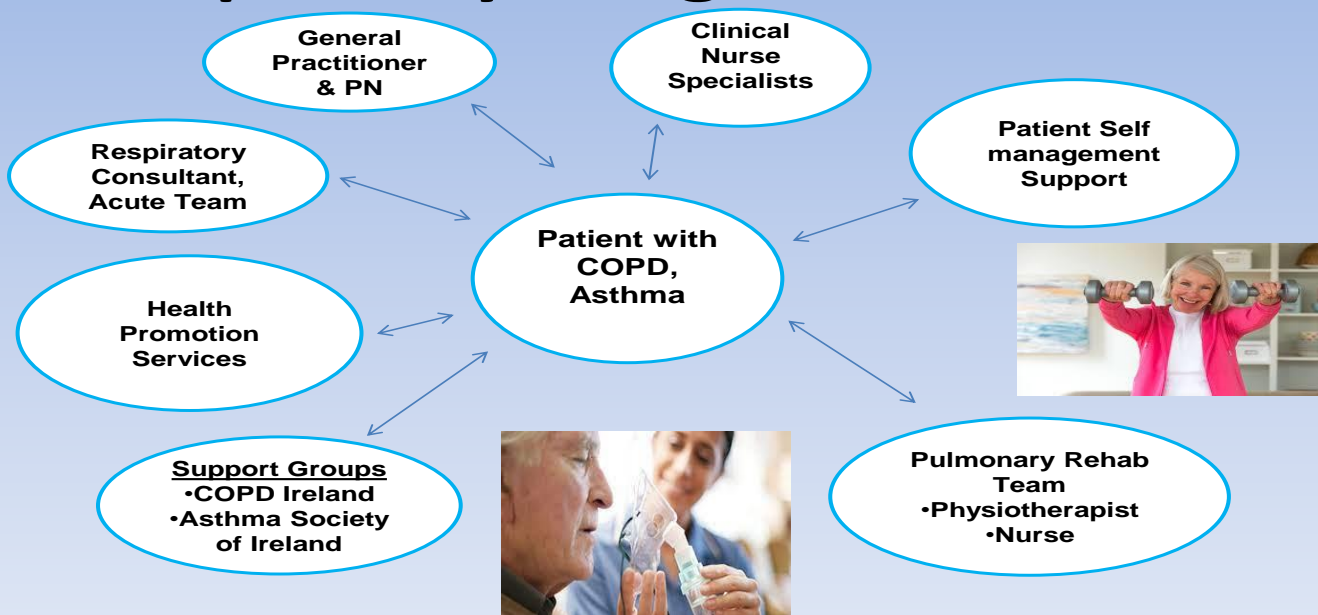
Cardiology Integrated Care Team



Diabetes Integrated Care Team



Respiratory Integrated Care Team





Further developments in Primary Care 2024

- Continued implementation of Sláintecare
 - Modernised Care Pathways
 - Urology Service
 - Ophthalmology Service
 - Migrant Health Team
 - Complex Paediatric Teams
 - Rollout of HPV Catch-up Programme(Laura Brennan catch-up)
 - Expansion of GP Direct Access to diagnostics
- Continued development of Integrated Care Hubs and Primary Care Centre's
- Ongoing Developments

HE

Thank you



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Service Arrangement Information and Engagement Event

Des Mulligan

Head of Service – Older Persons Services

5th December 2023

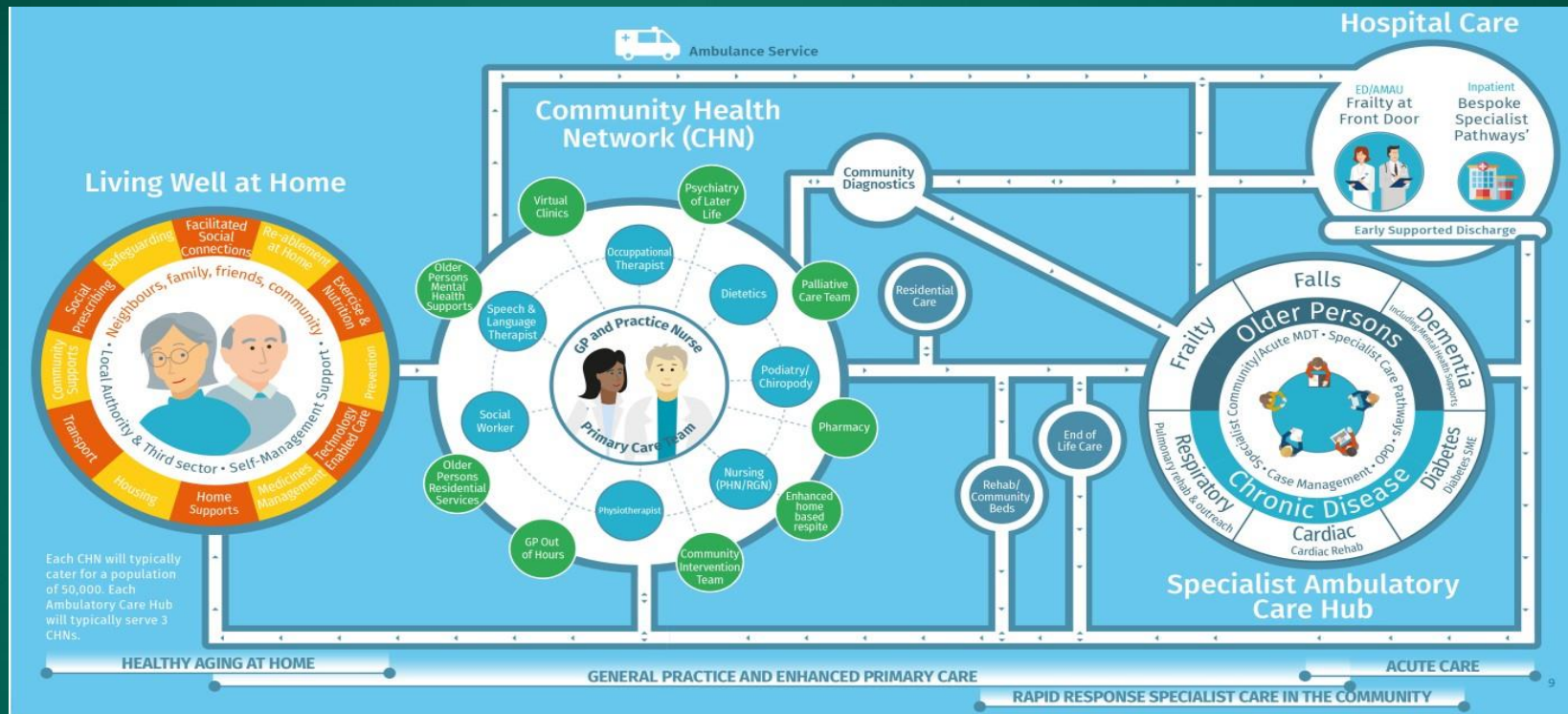


2023 Service Arrangements in context

- Funding allocated: €40 million
- No. of Contracts: 86



Sláintecare, Enhanced Community Care (ECC) & Urgent Emergency Care (UEC): Older Adults End to End Pathway





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Living Well With Supports



Each CHN will typically cater for a population of 50,000. Each Ambulatory Care Hub will typically serve 3 CHNs.

1. Focus on keeping living well at home.
2. Supports such as Meals on Wheels, Day Care, Social Connection, Be-friending, Respite (both bed based and in home), Dementia Advisors, Information and Signposting.
3. Currently Older Person's Services have 101 Service Arrangements and Grant Aid Agreements in place with a wide range of agencies across Community Healthcare West.
4. The total expenditure allocated in 2023 through these partnership arrangements is approximately €40m
5. All of this activity is an essential component of how we adopt a Home First approach.
6. A key point from all of this is that as our population is ageing we will need to grow these supports in the coming years.

RAPID RESPONSE SPECIALIST CARE IN THE COMMUNITY



'Home First' Principles



Discharge planning is integrated & starts early

1



Needs, will and preferences of the older adult defines care

2



No older adult should be assessed for HSS & NHSS in an Acute Hospital

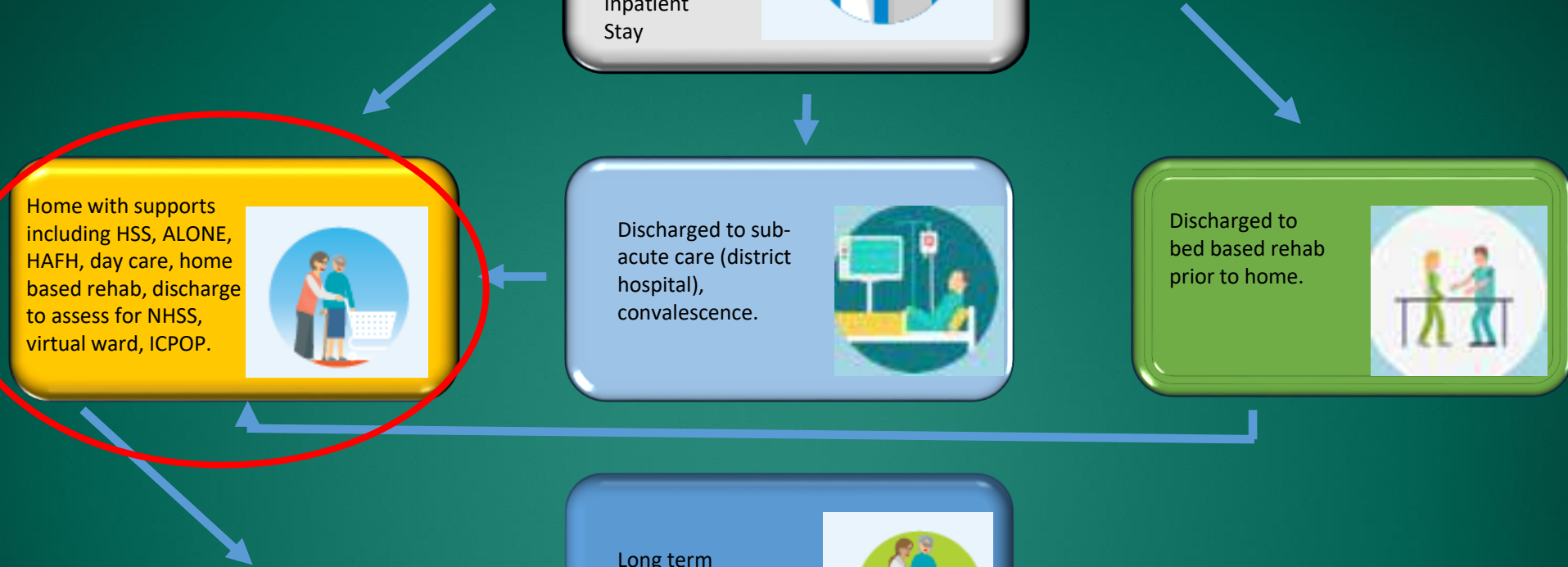
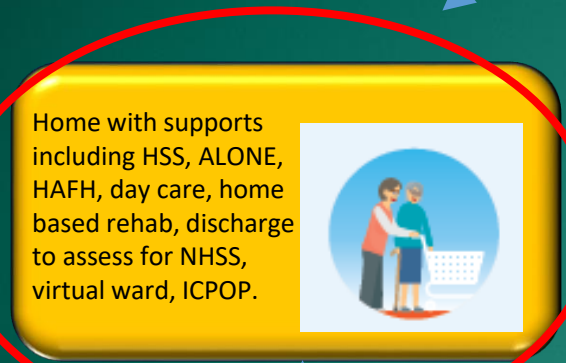
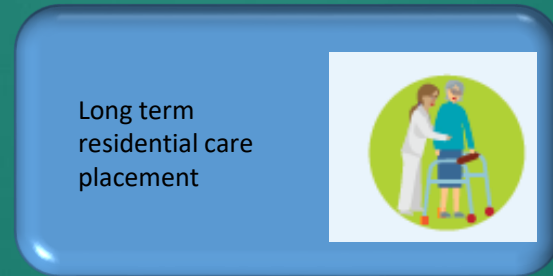
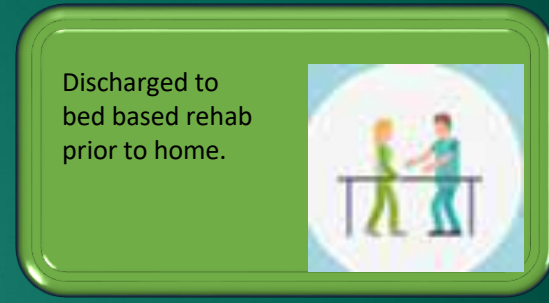
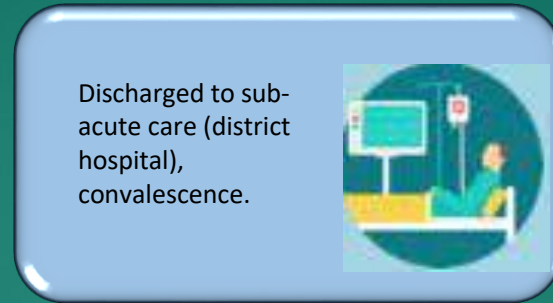
4



Every older adult has equity of access to rehabilitation and to return to their own home

3

Integrated Discharge Management – Home First Approach



HE

Thank you



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Service Arrangement Information and Engagement Event

Laura Costello

Manager – Mental Health Services

5th December 2023



2023 Service Arrangements in context

- Funding allocated: €8 million
- No. of Contracts: 25



“To be the best Mental Health Service we can be”



Development of the Community Healthcare West Mental Health Service Strategy

1. The strategy for Community Healthcare West was developed to deliver the best possible Mental Health Services to the people within our community.
2. The voice of those with lived experience and their families informed all aspects of service development, putting this voice central to service planning and development.
3. Co-production was central to our strategy development using the perspectives of professionals, service users and family members, aligning with *Sharing the Vision* and other national policies.



Methodology

1. Engagement with Service User's needs in Roscommon gave us valuable quality information.
2. Using the themes highlighted from this engagement, the project team we presented the findings of this survey to service user groups and forums, across the 3 counties. We also invited feedback through online and paper-based surveys. We summarised the findings and set out service user priorities for the service. In total, over 200 service users and family members engaged.
3. Once we completed the consultation with the service users, we extensively consulted with our staff.
4. We presented our service users' feedback and priorities. We had focus groups and online and paper-based surveys, over 400 staff participated. We engaged with our voluntary partners through the end of year review meetings.
5. We found very similar priorities addressed across the three counties.
6. The project team co-producing this strategy have worked to ensure these priorities were aligned with National Policy.



Key Outcomes/Themes Identified

1. Theme 1 - Collaboration and Integration (Collaboration with our community partners and integration with other care groups and hospital groups).
2. Theme 2 – Service Development (Developing our services across the spectrum of needs of individuals who avail of our services while putting the needs of these individuals central to the decision making process).
3. Theme 3 - Staff Development and Practice (Enhancing and developing the skillset of our staff, in line with the HSE core values of Care, Compassion, Trust and Learning, to enable them to maximise their potential in service delivery).
4. Theme 4 - Communication and Engagement (Enhancing our communications networks and continuation of the improvements in our engagement processes with key stakeholders)
5. Theme 5 - Facilities, Environments and Supports (Improvement and further development of our infrastructures across our mental health services)



Theme 1

- **Collaboration and Integration (Collaboration with our community partners and integration with other care groups and hospital groups)**

Goal 1

- **Collaboration with other Community Care Groups to build better working relations and more integrated care.**
 - Engagement with Primary Care/Older Persons and Disability Services to enhance access to Services for Individuals who avail of our services e.g. improvement of Primary Care/Early intervention through Psychology Services and Counselling Services/Access to Physio, SLT, OT, Home Help, Personal Assistants etc.
 - Strengthen links with GP practices in terms of mental health service provision e.g. Physical Health Monitoring, addiction services etc.
 - Through further develop of work with Mental Health and Well Being via Stronger Together.

Goal 2

- **Collaboration and coordination with our Community Partners to provide better community services**
 - Social Prescribing/Signposting to community supports and services.
 - Education and training around mental health promotion particularly in schools.
 - Continuation and further development of the Community Living Project.
 - Continuation and further development of the IPS service.

Goal 3

- **Collaboration and integration with Saolta Hospital Group to ensure an integrated approach to patient care**
 - Coordinated discharge planning from Acute Settings.
 - Introduction of HCA's to CMHT's in an effort to support care in the Community.



Theme 2

- **Service Development (Developing our services across the spectrum of needs of individuals who avail of our services while putting the needs of these individuals central to the decision making process)**

Goal 1

- **Increased access to therapeutic interventions**
 - Linkages to specialist interventions in other Teams across CHW MHS and also in other HSE services (including remote access to services)

Goal 2

- **Develop crisis pathways that are more accessible for individuals who avail of our services.**
 - Further development of the out of hours and Crisis Services across the region.
 - Sustainability of the Community Cafe model and further expansion.

Goal 3

- **Enhancement of coproduced and coordinated care provision for individuals who avail of our services**
 - Development of the role of key worker.
 - Co-production in the development of an individuals recovery/support plan.
 - Improving continuity of care, e.g. introduction of the Passport system.
 - Coordination of discharge planning within the services from Acutes to Community, Community to supports services and eventual discharge along with the coordination of transfer of patients within the services from Acutes to Community, from CAMS to AMHS from AMHS to POLL Teams etc.

Goal 4

- **Roll out and development of the National Clinical Programmes, including Early Intervention Psychosis incl. dedicated CNS for Psychosis in AAMHU's, ADHD, Perinatal, Dual Diagnosis, Self Harm and ED.**



Theme 3

- **Staff Development and Practice (Enhancing and developing the skillset of our staff, in line with the HSE core values Care, Compassion, Trust and Learning, to enable them to maximise their potential in service delivery)**

Goal 1

- **Workforce Planning**
 - Staff to VFC levels.
 - Staff retention.
 - Replacement of staff in a timely manner.
 - Flexibility in working days.
 - Reduced working hours.
 - Better work life balance. Bespoke interviews for specific roles.
 - Staff Performance Appraisals.

Goal 2

- **Staff training and development**
 - Training needs analysis and planning for staff across all teams.
 - Upskilling of staff in line with the HSE Core Values and in line with our Values in Action.
 - Training of staff to upskill in the area of therapeutic interventions including Peer Support.
 - Supporting clinical supervision requirements.

Goal 3

- **Enhancing Family Engagement across all areas of service provision**
 - Recruitment of Family Peer Workers/Peer Workers
 - Staff training to facilitate better working with families.



Theme 4

- **Communication and Engagement (Enhancing our communications networks across CHW MHS and continuation of the improvements in our engagement processes with key stakeholders)**

Goal 1

- **Develop a communications strategy for Mental Health Services**
 - Ensuring information is available and communicated effectively.
 - Ensure information is correct and maintained.
 - Improving access to information through the various communication outlets.

Goal 2

- **Enhancement of stakeholder engagement**
 - Continual feedback and engagement with all stakeholders on issues highlighted through Forums, Strategy Planning, Quality and Safety Walkarounds etc.

Goal 3

- **Enhancing governance and accountability**
 - Embedding learning and good practices across the service through Quality and Safety Walkarounds, Safewards etc.



Theme 5

• **Facilities, Environments and Supports (Improvement and further development of our infrastructures across CHW MHS)**

Goal 1

• **Capital Developments**

- Working in collaboration with Saolta to develop new Acute Units in Roscommon and Mayo.
- Establishment of an infrastructure group to review and buildings and future service requirements in line with a modern mental health service.

Goal 2

• **Appropriate therapeutic settings for staff and individuals who avail of our services**

- Improvements to current infrastructure and buildings
- A dignity space in hospitals/ED's for individuals and their supporters/family members

Goal 3

• **Increased access to Acute Beds**

- Need for MHID service users to have appropriate acute facilities outside of the AMHU's

Goal 4

• **Appropriate ICT structure to deliver a modern Mental Health Service**

- Requirement for electronic patient records
- Further expansion of IPMS programme.
- Development of the Passport App, Wellbeing App etc.



2024 and beyond

1. Service priorities will be adapted based on continual feedback.
2. An Implementation plan for the Strategy, based on the consultative process, will be developed by and for Mental Health service providers.
3. We will continue the engagement process with service users, families, staff and all stakeholders to review and refine service delivery aligned with National priorities.
4. The CHO Operational Plan will reflect the findings and outcomes of the Strategy.
5. We will continue to work, guided by the Partnership Principles, with you our valued service partners, to ensure that the funding we allocate is aligned to our Strategy over the coming years.



Thank you



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Service Arrangement Information and Engagement Event

Mary O'Halloran

Head of Service – **Disability Services**

5th December 2023



2023 Service Arrangements in context

- Funding allocated: €221 million
- No. of Contracts: 61



Disability Services

Our Service

Our Priorities

Our Vision



Vision for Disability Services in Community Healthcare West

“Work to reimagine disability services, to be the most responsive, person-centred model achievable with greater flexibility and choice for the service user”



Head of Disability Services
Mary O'Halloran

Business Manager
Aisling Faherty
Admin
Elaine Burns Grade VI
Kayla Bredy Grade IV

**GM Childrens Disability
PDS Services**
Padraic Carolan

**GM Adult Disability Services
Children's Respite/Residential Services**
Mary Owens (Acting)

PDS Lead
Caitriona Coen
Admin
Rebecca Dooley Grade VI
Frances Ford Grade VI
Jackie Cunniffe Grade VI
Jackie Lydon VI
Ann Marie Cusack Grade III
Martina Keaney Grade III

Business Manager
Brid Kelly
Admin
Siobhan Casserly Grade V
Maura Monaghan Grade V
Janine Beckett Grade IV

Children's Disability Network Managers

CDNM 1
Mary Horkan
CDNM 2
Aine Vesey
CDNM 3
Matthew Cruse
CDNM 4
Jeannie Gannon
CDNM 5
Noleen Donlon (Enable Ireland)
CDNM 6
Una Finn (BOCSI)
CDNM 7
Noel Burke
CDNM 8
Teesh Walsh
CDNM 9
Ajay Kumar

Assesment Officers
Liz Hanley (Galway)
Catherine Kilkenny
(Rosc/Mayo)

DSM Residential & Respite
Mayo
Laura Rochford (Interim)

DSM Residential and P&S
Services Galway
Ursula Collis

DSM Residential and P&S
Services Roscommon &
Mayo
Mary Owens

Day Services Opportunities
Co-ordinator Galway, Mayo
& Rosc.
Mary O'Donnell

**MCL Director of
Service**
Siobhan McAndrew

Case Managers Mayo
Lorraine Doyle
Linda Daly

Case Managers Galway
Pauline O'Dwyer
Lisa Haugh
Aislinn Eillean

Case Manager
Roscommon
Noreen Brophy

DS Opportunities Officers
Anne Silke
Carmel Hanley
Gillian Raftery
Debroah Brady



Objective of Service Provision in the area of Disability

The main objectives of service provision in the region is to:

1. Enable people with disabilities achieve their full potential.
2. Live ordinary lives in ordinary places, as independently as possible.
3. Ensuring that the voice of service users and their families are heard.
4. Support families and services users to get involved in planning and improving services to meet their needs.



UN Convention on the Rights of Persons with Disabilities (CRPD)

Guiding Principles of the Convention

There are eight guiding principles that underlie the Convention and each one of its specific articles:

1. Respect for inherent dignity, individual autonomy including the freedom to make one's own choices, and independence of persons
2. Non-discrimination
3. Full and effective participation and inclusion in society
4. Respect for difference and acceptance of persons with disabilities as part of human diversity and humanity
5. Equality of opportunity
6. Accessibility
7. Equality between men and women
8. Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities



Our Priorities – Disability Services

1. Continue to implement the Disability Act 2005 – including assessment of need
2. Provide high quality and safe residential and respite care to persons with disabilities and their families
3. Progression of Children’s Services – HSE lead in 7 Networks
4. Provide the maximum level of Day Services and supports safety to persons with disabilities
5. Further progress implementation of Time to Move on from Congregated Settings – A Strategy for Community Inclusion
6. Continue to deliver a safe high quality personal assistant (PA) and home support service
7. Joint Protocols HSE Disability Services/Child and Family Agency



Our Priorities

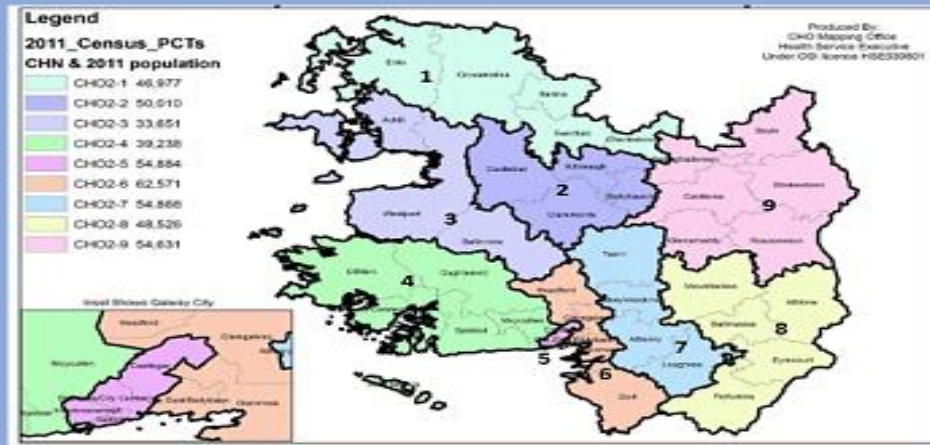
- 1. Assessment of Need (AON)**
- 2. Day Services & School Leaver Programme**
- 3. Respite – Children & Adult**



Disability Services

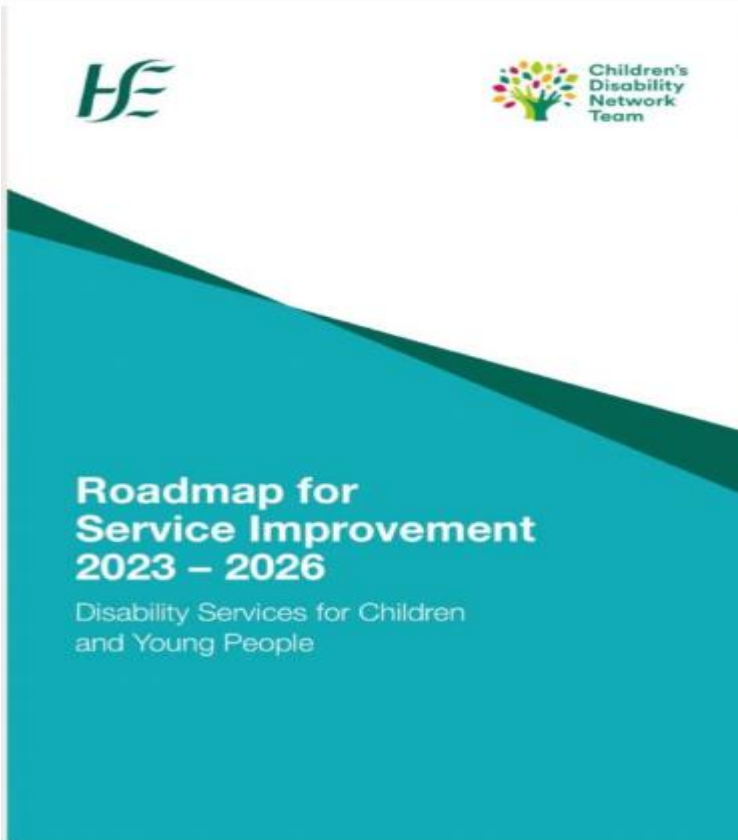
Children's Services

Children's Disability Network Teams





Roadmap for service improvement 2023-2026



Service Improvement Programme to achieve a quality, accessible, equitable and timely service for all children with complex needs as a result of a disability and their families.



Roadmap for Service Improvement

- Integrated Services between Disabilities, Primary Care, CAMHS and Tusla
- CDNT Service Access and Improvement including AON
- Workforce
- Communication and Engagement with Children and Families, and with Staff
- Engagement with Education and Support for Special Schools



New Developments in Disability Services

- Autism Assessment and Intervention Pathway (pilot Community Healthcare West)
- Neuro Rehab Team



Disability Services - Risks

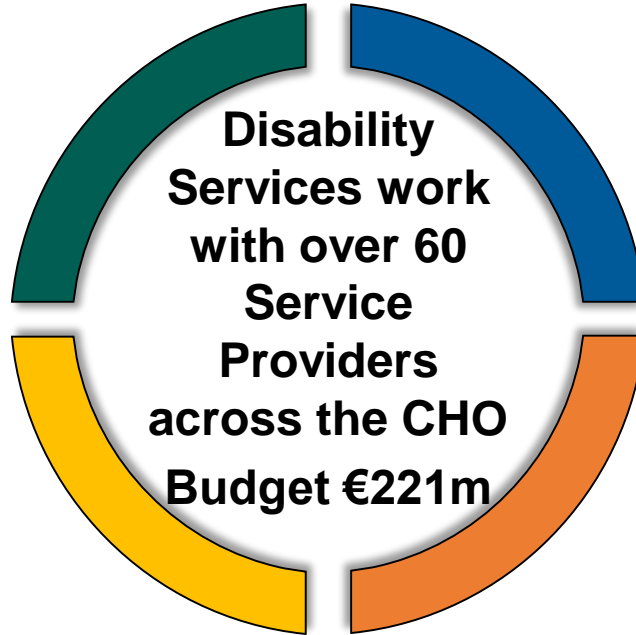
- 1 Delay in placement of emergency cases due to lack of funding and or appropriate placement
- 2 Children's Services
 - Understaffing / Primary Care Constraints
 - Accommodation
 - FEDS
- 3 Decongregation delays
- 4 Delayed Transfers of Care (DTC)



Partnership Principles

Shared Objectives

Shared Vision for better outcomes



Communication

Collaboration

**Quality people –
centred Services**

Transparency

Thank you





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Service Arrangement Information and Engagement Event

Elaine Prendergast

Head of Service - **Health & Wellbeing Division**

5th December 2023





2023 Service Arrangements in context

- Funding allocated: €450k
- No. of Contracts: 4



Health & Wellbeing Teams

Head of Service – Elaine Prendergast





Health & Wellbeing Programmes



MAKING EVERY CONTACT COUNT

ask about alcohol.ie



Protect yourself. Protect others.

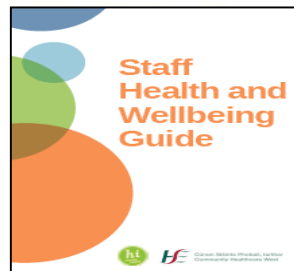


VACSÁIN COVID-19 Comhairle Sláinte Poiblí

Self-management Support



Sláintecare. Healthy Communities



QUIT



Sláintecare Healthy Communities

The Healthy Communities Initiative is focused on the implementation of an enhanced Health and Wellbeing Programme within areas that have the **greatest levels of disadvantage** and **highest proportion of young families**. 19 sites across Ireland
This includes the Erris Region in the West



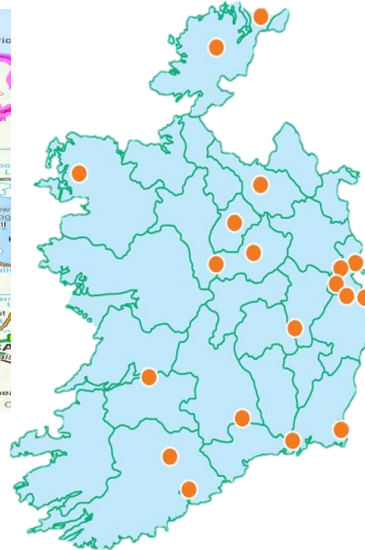
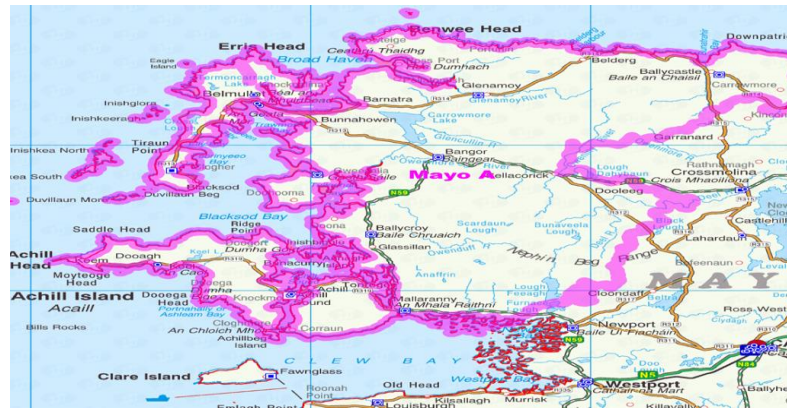
Smoking Cessation

Healthy Food Made Easy

Social Prescribing

Parenting

MECC





Some Key Performance Indicator Targets 2023

Tobacco

Smoking Cessation Clients	1147
Quit For Youth programme	1
TFI campus mentorship	1

Stakeholder Engagement & Communications

We Can Quit Clients	15 clients x 2
Smoking Cessation Clients	245
HFME courses	14
Parenting programmes	128 clients x 7
Parenting workshops	300 clients x 10
Social Prescribing clients	60

Making Every Contact Count MECC

Half day workshop	74
eLearning programme	371
Support CHW sites	6
Support saolta sites	6

Training

Men's Health - Engage	3
Sexual Health	1 (6 day course)
Schools x 5 programmes	12
Minding Your Wellbeing	12
Healthy Food Made Easy	290 participants

Stakeholder Engagement and Communications

National Activations	3
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AUTUMN VACCINATIONS CAMPAIGN (FLU AND COVID 19 VACCINES)

HSE Mobile Vaccination Teams administering Covid 19 & Flu Vaccinations to:

- 1. All residents and staff working in :**
 - HSE Community Nursing Units and Private Nursing Homes**
 - Congregated settings**
- 2. Housebound**
- 3. All children in Special Schools and all Senior Infant Classes in main stream schools**
- 4. All Healthcare Workers in HSE, Section 38 & Section 39**





Stakeholder Engagement and Communication

Promote and leverage support for internal and external agencies for Health and Wellbeing communications, campaigns, programmes, training and initiatives.

Local Authority/LCDC Healthy Cities and Counties	<ul style="list-style-type: none">• Healthy Cities/Counties - Galway City & Co. Mayo and Roscommon, e.g., Healthy Food Made Easy, Not Around Us (Tobacco), Galway Age Friendly Alliance
Sports Partnerships	<ul style="list-style-type: none">• Galway, Mayo & Roscommon Sports Partnerships
CYPSC / TUSLA	<ul style="list-style-type: none">• CYPSC- Galway, Mayo and Roscommon• CYPSC Early Years groups and projects, e.g., weaning, infant mental health, active play, breastfeeding, community mothers
Community and Voluntary	<ul style="list-style-type: none">• Men's Sheds, Men's Health Forum, Breastfeeding support groups, Traveller Health Unit, Western Region Drug & Alcohol Task Force, Galway City Alcohol Strategy, Galway City Partnership e.g. Community Gardens
Academia	<ul style="list-style-type: none">• NUIG – Health Promotion Knowledge Network, GMIT & NUIG Galway Alcohol Strategy, Department of Education
HSE H&W, CHW & SAOLTA	<ul style="list-style-type: none">• National Policy Priority Leads• Healthy Ireland Implementation groups/projects

HSE funded Agencies are required to confirm as part of the Service Arrangement that they have complied with all requirements of the Children First Act 2015. Specifically, they are required to ensure that:

1. All relevant services have carried out a Child Safeguarding Risk Assessment and have a Child Safeguarding Statement in place.
2. All Mandated Persons have been identified and informed of their role.
3. All funded agencies have a Child Protection and Welfare Policy in place.
4. All staff and volunteers have completed the HSE e-Learning Module “*An Introduction to Children First*”.
5. The HSE Children First Self-Audit Checklist has been completed and will be made available to the HSE on request.

Ann Davis and Clive Greally, HSE Children First National Office, are available to answer any questions you have in relation to these requirements.

HE

Thank you



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Questions & Answers



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Questions & Answers

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Event Round-up



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Feedback & Evaluation



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