

Board Briefing Template

Subject: Transfer of Disability Functions from Dept. of Health (DOH) to Dept. of Children, Equality, Disability, Integration and Youth (DCEDIY)
Submitted for meeting on: 17 th December 2021
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Reasons:
This item is being presented to the Committee for the following reason:
For decision by the Performance & Delivery Committee prior to submission to HSE Board
To seek feedback and guidance from the Performance & Delivery Committee
To provide the Performance & Delivery Committee with a briefing or information on a topic X
Remit of Performance & Delivery Committee
Please indicate which areas of remit of the Committee the paper relates to;
 Performance and delivery framework – development and implementation X Assurance on robust and effective arrangements on delivery of objectives
Performance achievement and dashboards
Strategic and annual planning / performance against plans and escalation
Use of technology
Review of high level risks
Investment decisions
Communication systems
Slaintecare Implementation re performance and accountability
Other roles and responsibilities devolved by the HSE Board
Background and Summary Arrangements are underway for the transfer of policy, functions and funding responsibility relating to specialist community based disability services (SCRDS) to the Department of Children Equality. Disability, Integration and Youth

Arrangements are underway for the transfer of policy, functions and funding responsibility relating to specialist community-based disability services (SCBDS) to the Department of Children Equality, Disability, Integration and Youth (DCEDIY). The Government decision in December 2020 clarified that the HSE will retain responsibility for the delivery of SCBDS following the transfer and that the transfer does not encompass mainstream health services delivered to people with disabilities. This will remain under the Department of Health (DOH).

The provision and accountability for delivery of services to the people currently in receipt of SCBDS will remain unchanged throughout this transfer of functions. SCBDS are provided through a mix of providers including the HSE itself, Section 38 and Section 39 voluntary agencies and with some for-profit service provision. The budget is estimated to be approximately €2.2 billion in 2021.



In relation to the wider context of health service delivery, it should be recognised that the HSE's statutory objective and functions as set out in Section 7 of the Health Act 2004 will remain unchanged irrespective of the Transfer of Functions. Under the Act, the HSE is required to manage and deliver, or arrange to be delivered on its behalf, health and personal social services within available resources. In fulfilling this role, the HSE must use the resources available to it in the most beneficial, effective and efficient manner to improve, promote and protect the health and welfare of the public while having regard to Government/Ministerial policies.

The Sláintecare Implementation Strategy & Action Plan 2021 — 2023 is underpinned by the eight Sláintecare Principles from the Oireachtas Sláintecare Report, namely

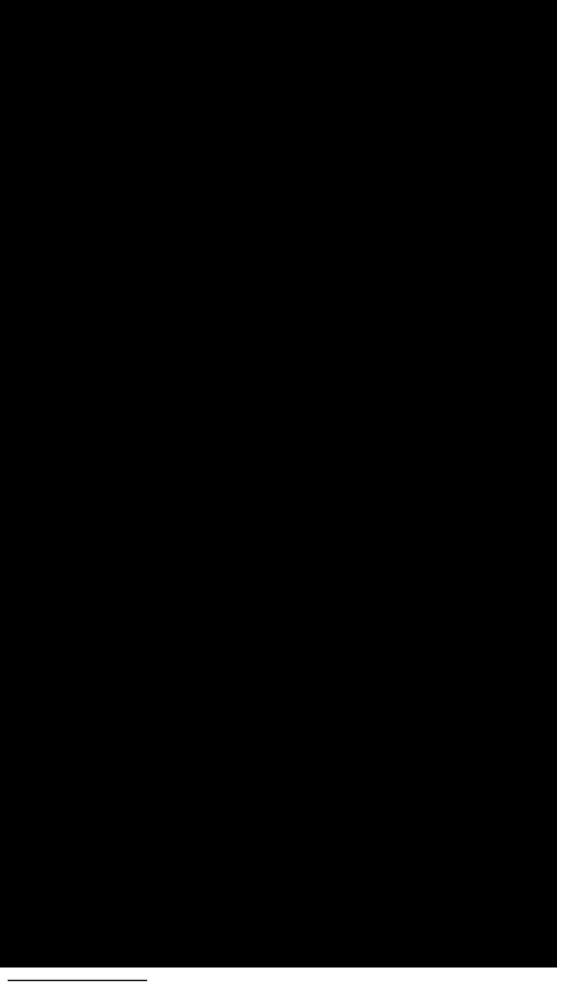
- Patient is Paramount
- Timely Access
- Prevention and Public Health
- Free at the Point of Delivery
- Workforce
- Public Money and Interest
- Engagement and
- Accountability

These will continue to act as the key reference point during the implementation of the Strategic Action Plan. Building on these Principles, the Strategic Action Plan is grounded in key reform strategies, policies and initiatives including the Disability Capacity Review. Of particular importance to services for people with disabilities is increased personal choice of services, rights based access to services and empowering people with disabilities to live independently.

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Scope

Primary Legislation	
Implications	
Conclusion	
Recommendation	
Members are asked to provide feedback.	



¹ Voluntary organisations have either a Service Level arrangement or a Grant Aid Agreement with the HSE under Sections 38 and 39 of Health Act

