



**DAUGHTERS OF CHARITY SERVICE**  

---

**FOR PERSONS WITH INTELLECTUAL DISABILITY**

*Service*



*Respect*



*Excellence*



*Collaboration*



*Justice and  
Creativity*

# Strategic Plan

## 2005-2009

---

**SUMMARY AND ACTION PLANS**

---

# Foreword

The Daughters of Charity Service for Persons with Intellectual Disability is pleased to present the Strategic Plan 2005 – 2009. This plan reflects the Service's understanding of our current working environment and acknowledges the significant number of issues that require attention; the impact of under-funding in the past and the large number of legacy issues that impact on current standards of both facilities and quality of care.

The plan also acknowledges the expectations of service users and their families and the hope that in a country that is now among the richest in the world that our vulnerable population group will be given the kind of attention and a share in the wealth and resources of this country that they deserve.

This Service has always planned for new developments and service upgrades from both the care and facilities perspective but the dangers of such planning in the absence of resource commitments is that expectations are heightened and failure to deliver only serves to lower the morale of a very committed and dedicated workforce.

There is now an expectation that in the light of pending Disability Legislation, related Sectoral Plans by up to six Government Departments and the standards being set by the Department of Health and Children in conjunction with the National Disability Authority that resources will follow.


Publication of this Strategic Plan also coincides with a number of focussed Working Groups and Review Groups that have been ongoing throughout the Service on such matters as Community Residential Services, Dementia Care, Mental Health, Challenging Behaviour etc and all of these have contributed to the process.

The development of this Strategic Plan is timely due to the significant changes taking place under the Health Reform Programme; a greater awareness of the needs of the intellectual disability sector and a greater ability to deliver in all aspects of those needs assuming resource provision is adequate to the task

This Service now has a comprehensive Strategic Plan that will drive and direct developments and resource requirements, establish the priorities within an overall framework and which will require both monitoring and evaluation in its implementation as we move forward

This process coincides with a review of our Service Policy Document, which has reshaped the language, reaffirmed our commitment and put a management structure in place that for the foreseeable future can, with proper resource provision, deliver on a comprehensive development strategy.

The first challenge has now been overcome, namely putting this plan together and I want to acknowledge the enormous amount of hard work and commitment of the Committee that was established back in October 2004. The involvement of representatives of both the Community of the Daughters of Charity and the Board of Management of the Service on the Committee was beneficial and is very much appreciated.

A handwritten signature in black ink, reading "Walter Freyne". The signature is written in a cursive style and is positioned above a horizontal line.

Walter Freyne,  
Chief Executive.

# Table of Contents

Page No

General

**Chapter 1** – – Setting the Scene ..... 5

**Chapter 2** – - Action Plans ..... 10

**Chapter 3** – Implications of Implementation ..... 22

# GENERAL

**The Strategic Plan Summary Document:** This summary document was designed as a brief guide to offer a synopsis of the main Strategic document. For a full explanation of the process and the Plan, it is necessary to consult with the main document. This can be obtained in all centres and on our website at [www.docservice.ie](http://www.docservice.ie).

**Plan for the Service.** This is a Strategic Plan for the whole Service. It is intended that the plan will assist the Service to address critical issues. Individual, or centre specific issues, are not being addressed directly but it is anticipated that the implementation of the plan will ultimately have a significant effect at all levels throughout the organisation.

**Positive Approach.** Language used in this document will be positive and proactive. It is the intention of the Board of Management and the Service Executive that all aspects of this Strategic Plan will be implemented as soon as possible. All acknowledge however that the success of the plan will depend not only on additional resources being made available but also on the willingness of all stakeholders to be creative and open to change.

**Building on our Strengths.** On numerous occasions throughout the strategic planning process, and particularly during the consultation phase with parents and families, the Strategic Planning Committee were made aware of the very good work already being done in various areas of the Service. The quality of care provided very much depends on the approach of the individual carers and the Service recognises the good work in place at present and intends that this Strategic Plan will help to improve the quality of care currently in place.

# CHAPTER 1

## SETTING THE SCENE

### 1.0 **The Daughters of Charity Service Background:**

- 1.1 **History of the Daughters of Charity:** The Community of the Daughters of Charity of St Vincent de Paul was founded in Paris in 1633 by St.Vincent De Paul and St. Louise de Marillac and is a worldwide organisation. The Sisters came to Ireland in 1855 and have been involved in providing services for persons with intellectual disability since 1892. For further information on the Daughters of Charity Community see [www.daughtersofcharity.ie](http://www.daughtersofcharity.ie). The Community are involved in a variety of care areas but by far the biggest part of the Community's services is the area of intellectual disabilities and this is known as the Daughters of Charity Service for Persons with Intellectual Disability. Operating originally from Dublin, the Community identified a need for a similar service in Limerick and opened its centre in Lisnagry in 1952.
- 1.2 **Key Stakeholders:** The key stakeholders of the Daughters of Charity Service include the service users and families, the staff and Board of Management, the Community of the Daughters of Charity, the Health Service Executive and the Department of Health & Children. Further details on the Service are available on the website [www.docservice.ie](http://www.docservice.ie).
- 1.3 **Structure:** The Dublin and Limerick services are funded separately by the local Health Service Executive and operate autonomously in the daily delivery of services. A Management Team assists the Chief Executive in the general management of the Service and the co-ordination of activities in relation to the Health Service Executive.

### 2.0 **The Strategic Planning Process:**

**The Process:** Having evaluated the most appropriate way to conduct the strategic planning process, the Executive agreed that the best way to complete the process within a reasonable time frame was to appoint a Strategic Planning Committee and task the Committee with developing a draft Strategic Plan for presentation to the Board of Management in April 2005.

The Committee assembled in November and, having consulted widely, including with professional management advisors, defined a process for the production of the Strategic Plan. The process was as follows:

- Mission Review
- Service Analysis
- Consultation Process
- Plan Development
- Implementation Phase

### **3.0 The Vision For The Future:**

3.1 **Mission and Core Values.** The Service’s Mission Statement and Core Values are outlined hereunder. These are central to our decision-making and delivery of services.

**Service Mission Statement** – “According to the spirit of St. Louise de Marillac and St. Vincent de Paul and inspired by their Christian vision of service to those most in need, the Daughters of Charity Service for Persons with Intellectual Disability recognises that each person possesses a unique dignity and potential.”

#### **We are committed to:**

The development of the potential of each person with an intellectual disability in an atmosphere characterised by love, respect and creativity.

Enabling each person with an Intellectual Disability within the Service to take his or her place in society and in turn to contribute in a meaningful way.

Giving priority to people with the greatest need.

Advocacy and to the promotion of justice for persons with intellectual disability.

#### **The Core Values that guide us in our mission are:**

**SERVICE, RESPECT, EXCELLENCE, COLLABORATION,  
JUSTICE AND CREATIVITY.**

3.2 **Service Key Result Areas:** The Key Result Areas for the Service are those areas of the Service, which we must improve upon to ensure that we remain as a leading service provider in the coming years. The Key Result Areas and their Objectives do not stand-alone but are interconnected with each other and in some instances very much depend on one another for successful completion. The Key Result Areas are centred on:

Quality and Person-Centredness  
Retention of Committed and Well-Trained Staff  
Financial Resources  
Effective Management  
Communication Systems  
Appropriate Facilities

3.3 **KEY RESULT AREA 1: WE WILL PROVIDE A QUALITY SERVICE BASED ON PERSON-CENTREDNESS, EQUITY, PARTNERSHIP, ADVOCACY, ACCOUNTABILITY, AND TRANSPARENCY.**

**GOAL: PROVISION OF HIGH QUALITY SERVICES**

**Objective 1:** The Service will deliver services through a person-centred approach.

**Objective 2:** The Service is committed to working in partnership with all stakeholders.

**Objective 3:** The Service is committed to working in partnership with all Service Users.

**Objective 4:** The Service will develop a uniform needs assessment system.

**Objective No 5:** The Service will ensure that all programmes are properly monitored, evaluated and delivered in accordance with evidence-based practice.

**Objective No 6:** The Service will put processes in place to ensure that services are delivered on a prioritised system based on greatest need.

**Objective No 7:** The Service will develop and implement plans to address service delivery in identified critical areas.

**Objective 8:** The Service will be informed by the principle of integration when planning day and residential services.

**Objective 9:** The Service will develop a clear policy in relation to the provision of supports to school-going children.

3.4 **KEY RESULT AREA 2: WE WILL ENSURE MAXIMUM STAFF EFFICIENCIES WHILST RECRUITING AND RETAINING COMMITTED MOTIVATED AND WELL-TRAINED STAFF.**

**GOAL: TO BE AN EMPLOYER OF CHOICE.**

**Objective 10:** The Service, in partnership with staff, will promote optimum efficiency and effectiveness in the delivery of services.

**Objective 11:** The Service will ensure that all staff are engaged in an effective Performance Development Review System.

**Objective 12:** The Service will ensure that exit interviews are conducted routinely and that all information is analysed.

**Objective 13:** The Service will support staff, wherever possible, in their requests for flexible working conditions.

**Objective 14:** The Service will where possible, ensure that there is an appropriate career path for all staff.

**Objective 15:** The Service will develop comprehensive strategies/ approaches for the recruitment of staff.

**Objective 16:** The Service is committed to the Continuous Professional Development and Training of staff.

**Objective 17:** The Service will engage in appropriate intellectual disability research projects.

**Objective 18:** The Service is committed to assisting in team-building and motivation of staff.

**Objective 19:** The Service will increase the Volunteer Base.

3.5 **KEY RESULT AREA 3: WE WILL CONTINUE TO MAKE EFFICIENT AND EFFECTIVE USE OF OUR FINANCIAL RESOURCES.**

**GOAL: FINANCIAL RESPONSIVENESS & TRANSPARENCY**

**Objective No 20:** The Service will make every effort to increase the funding base through both traditional and innovative approaches.

**Objective No 21:** The Service will demonstrate clear accountability and equity for all resources.

**Objective No 22:** The Service will continue with arrangements to devolve budgets to appropriate levels.

**Objective No 23:** The Service will make financial training and support available at an appropriate level for relevant managers.

**Objective No 24:** The Service will put in place an agreed system and framework for the prioritisation and allocation of new and emergency funding (revenue and capital) as agreed by the C.E.O. and the Executive team.

**Objective No 25:** The Service will, where practicable, introduce a shared services procurement policy.

3.6 **KEY RESULT AREA 4: WE WILL CONTINUE TO DEVELOP AND PROMOTE AN EFFECTIVE MANAGEMENT SYSTEM.**

**GOAL: TO EMPOWER MANAGERS AT ALL LEVELS TO PLAN, DEVELOP, CO-ORDINATE AND MONITOR SERVICES.**

**Objective No 26:** The Service will conduct a review of management structures at Centre level.

**Objective No 27:** The Service will complete a review of staff job descriptions to ensure that they are all relevant and descriptive of the current environment.

**Objective No 28:** The Service will encourage and empower management and staff at all levels to take ownership of the Strategic Plan.

**Objective No 29:** The Service will introduce, develop and support the implementation of an annual plan for each centre within the organisation.

3.7 **KEY RESULT AREA 5: WE WILL CONTINUE TO IMPROVE OUR SYSTEMS OF COMMUNICATION.**

**GOAL: TO COMMUNICATE AND CONSULT EFFECTIVELY WITH KEY STAKEHOLDERS.**

**Objective 30:** The Service will communicate and consult effectively with all service users.

**Objective 31:** The Service will communicate and consult effectively with all parents and family members.

**Objective 32:** The Service will communicate and consult effectively with all staff.

**Objective 33:** The Service will communicate and consult effectively with all external agencies.

**Objective 34:** The Service will conduct a review of present Management Information Systems.

3.8 **KEY RESULT AREA 6: WE WILL HAVE APPROPRIATE PHYSICAL INFRASTRUCTURE AND FACILITIES FOR BOTH SERVICE USERS AND STAFF.**

**GOAL: APPROPRIATE FACILITIES FOR ALL.**

**Objective No 35:** The Service will ensure that all new buildings and renovations to older buildings comply with all relevant statutory regulations and associated codes of practice.

**Objective No 36:** The Service will prepare a capital investment plan for each region based on priority issues and will endeavour by every means to acquire funding for these projects.

**Objective No 37:** The Service will ensure that maintenance plans are developed for each Centre.

# CHAPTER 2

## ACTION PLANS

KEY RESULT AREA 1: WE WILL PROVIDE A QUALITY SERVICE BASED ON PERSON-CENTREDNESS, EQUITY, PARTNERSHIP, ADVOCACY, ACCOUNTABILITY AND TRANSPARENCY.

GOAL: PROVISION OF HIGH QUALITY SERVICES.

**Objective No 1: The Service will deliver services through a person-centred approach**

	Action	Completion Date	Responsibility
1.1	Pilot person-centred approach/plan in each centre.	Dec 2005	Director of Quality and Education and PCP Implementation Team
1.2	Evaluate the pilot person-centred approach in each centre.	Jun 2006	Director of Quality and Education, PCP Steering Group and PCP Implementation Team
1.3	Commence 'roll out' of person-centred approach throughout the Service	Nov 2006	Director of Quality and Education, Administrators, PCP Steering Group and PCP Implementation Team
1.4	Implement person-centred planning across the Service.	Dec 2008	Director of Quality and Education, Administrators and PCP Steering Group

**Objective No 2: The Service is committed to working in partnership with all stakeholders**

	Action	Completion Date	Responsibility
No specific action plan is suggested as this Objective is closely associated with other objectives particularly No.1 – Person-centredness, No.3 Working in partnership with service users, No. 31 – Communicate and consult with parents and families, No. 32 – Communicate and consult with staff.			

**Objective No 3: The Service is committed to working in partnership with all Service Users.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
3.1	Examination and recommendation regarding the development of an Advocacy Service	Dec 2005	Head Social Worker – Dublin and Limerick
3.2	Advocating for the development of legal protection for service users	Ongoing	CEO and Clinical Directors
	See also Objective 1.1 person-centred planning		

**Objective No 4: The Service will develop a uniform needs assessment system.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
4.1	Development of a uniform needs assessment system	June 2006	Clinical Directors, Medical, Nursing and MDT.
4.2	Conduct a uniform needs assessment on all service users	By end of plan	Clinical Directors, Medical, Nursing and MDT

**Objective No 5: The Service will ensure that all programmes are properly monitored, evaluated and delivered in accordance with evidence-based practice.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
5.1	Production of agreed stated goals and expected outcomes for each programme of service delivery.	Nov 2005	Administrators and Programme Managers
5.2	Implementation of Annual Formal Programme Evaluation	Nov 2006	Administrators and Programme Managers
5.3	Establishment of a Service Review Team for Programme Auditing	July 2006	A/CEOs and Administrators

**Objective No 6: The Service will put processes in place to ensure that services are delivered on a prioritised system based on greatest need.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
6.1	Production of defined and agreed protocols to ensure team decisions around access to, increasing or decreasing levels of service.	Mar 2006	A/CEOs, Administrators and Multi-disciplinary Managers

**Objective No 7: The Service will develop and implement plans to address service delivery in identified critical areas.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
7.1	Dementia Service - Dublin. Adopt and implement over a phased period the Strategic Plan for dementia services.	Ongoing – refer to specific plan	A/CEO, Service and Policy Advisor on Dementia
7.2	Dementia Service - Limerick. Evaluation process and prepare plan for dementia services in Limerick Region.	Oct 2006	A/CEO, Service and Policy Advisor on Dementia and Administrators
7.3	Mental Health – Dublin. Implement over a phased period the Policy Document on Mental Health	Dec 2007	A/CEO & Clinical Director, Senior Clinicians Group, Administrators
7.4	Mental Health - Limerick. Evaluation process and prepare plan for Mental Health services in Limerick Region.	Nov 2006	A/CEO & Clinical Director, Senior Clinicians Group, Administrators
7.5	Challenging Behaviour - Adopt and action the newly developed Service Guidelines on Challenging Behaviour. Development of local implementation and support teams around challenging behaviour.	Jul 2005  Dec 2006	A/CEO, Clinical Director, Director of Quality and Education
7.6	Autism Service – Establish a Committee to evaluate and make recommendations regarding autism services.	Nov 2005	CEO, A/CEOs and Committee
7.7	Older Person - Establish a Committee in each region to evaluate and make recommendations regarding development of specific programmes for the elderly.	CRS: Oct 2005  On Campus: Dec 2005	A/CEOs

**Objective No 8: The Service will be informed by the principle of Integration when planning day and residential services.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
8.1	Production and Distribution of a Service Policy Statement on Integration	Nov 2005	A/CEOs, Administrators and Multi-disciplinary Managers
8.2	All potentially new residential service users will be supported in their own (family) home for as long as possible	Ongoing	Administrators and ADT Teams.
8.3	Review (in the Dublin Region) the admissions criteria for the Service with particular reference to service users in the mild range of disability.	Sept 2005	A/CEO and ADT Team

**Objective No 9: The Service will develop a clear policy in relation to the provision of supports to school-going children.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
9.1	Establish a working group and develop a policy on provision of supports to school going children.	Dec 2005	CEO & A/CEOs,

KEY RESULT AREA 2: WE WILL ENSURE MAXIMUM STAFF EFFICIENCIES WHILST RECRUITING AND RETAINING COMMITTED MOTIVATED AND WELL-TRAINED STAFF.

GOAL: TO BE AN EMPLOYER OF CHOICE.

**Objective No 10: The Service, in partnership with staff, will promote optimum efficiency and effectiveness in the delivery of the services.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
10.1	Through a partnership approach, the Service will conduct a review and make recommendations, regarding appropriate staff structures and work practices.	July 2007	Director of Human Resources, Director of Quality and Education and Administrators
See also Objective 27 – review of roles and job descriptions			

**Objective No 11: The Service will ensure that all staff are engaged in an effective Performance Development Review System.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
11.1	Introduction of training modules (managers and staff) on the Performance Development Review System.	Oct 2005	Director of Human Resources and Director of Quality and Education
11.2	Implementation of Performance Development Review System.	Jan 2006	Director of Human Resources and Administrators
11.3	Develop a Team-Based Performance Management System.	Nov 2005	Director of Human Resources and Administrators
11.4	Establish training modules for team members and facilitators for the Team-Based Performance Management System.	Jan 2006	Director of Human Resources and Director of Quality and Education
11.5	Implementation of a Team-Based Performance Management System	Mar 2006	Director of Human Resources and Administrators

**Objective No 12: The Service will ensure that exit interviews are conducted routinely and that all information is analysed.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
12.1	Development of a comprehensive exit interview process.	Nov 2005	Director of Human Resources

**Objective No 13: The Service will support staff, wherever possible, in their requests for flexible working conditions.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
13.1	Development of Service wide and Centre specific guidelines regarding flexible working conditions.	Dec 2006	Director of Human Resources and Administrators

**Objective No 14: The Service will, where possible, ensure that there is an appropriate career path for all staff.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
14.1	Review and recommend career paths systems for all relevant personnel.	Dec 2007	Director of Human Resources and Administrators

**Objective No 15: The Service will develop comprehensive strategies /approaches for the recruitment of staff.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
15.1	Proactive and continuous campaigns for the recruitment of staff.	Ongoing - (six monthly reports to CEO)	Director of Human Resources & Administrators
15.2	Examination and production of recommendations regarding creative approaches for the recruitment of multi-disciplinary staff.	Dec 2005	Director of Human Resources, Administrators & MDT
15.3	Build relationships and formal links with local and national universities to promote Service and career opportunities for students.	Ongoing - (six monthly reports to A/CEOs)	Multi-disciplinary Managers
15.4	Evaluation and recommendations regarding the possibility of recruiting alternative grades of staff, within the multi-disciplinary function.	May 2006	A/CEOs & Multi-disciplinary Managers

**Objective No 16: The Service is committed to the Continuous Professional Development and Training of staff.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
16.1	Review of financial allocation for training and education within other Intellectual Disability Service Providers.	June 2006	Director of Quality and Education
16.2	Training needs analysis for all staff.	Dec 2005	Director of Quality and Education

16.3	Analysis and recommendations regarding on-site 'for-profit' courses/ training modules for other health care providers.	June 2006	Director of Quality and Education
------	--	-----------	-----------------------------------

**Objective No 17: The Service will engage in appropriate intellectual disability research projects.**

	Action	Completion Date	Responsibility
17.1	Audit to assess internal interest and proposals for research programmes.	Dec 2005	Director of Quality and Education
17.2	Examination of and recommendations to attract public or private investment to Service research.	June 2006	Director of Quality and Education

**Objective No 18: The Service is committed to assisting in team-building and motivation of staff.**

	Action	Completion Date	Responsibility
18.1	Proactive approaches to and examination of team-building within each centre.	Ongoing - (six monthly reports to CEO)	Director of Human Resources, Director of Quality and Education and Administrators
18.2	Development of Service-level team-building programme.	Mar 2006	Director of Human Resources, Director of Quality and Education and Administrators
18.3	Establishment of committee to evaluate and make recommendations in relation to staff benefits.	May 2006	Director of Human Resources

**Objective No 19: The Service will increase the Volunteer Base**

	Action	Completion Date	Responsibility
19.1	Assessment of how best to utilise volunteers within each centre.	Dec 2005	Assistant CEOs and Administrators
19.2	Examination of the requirement for a volunteer co-ordinator within each region.	Dec 2005	Assistant CEOs and Administrators

KEY RESULT AREA 3: WE WILL CONTINUE TO MAKE EFFICIENT AND EFFECTIVE USE OF OUR FINANCIAL RESOURCES.

GOAL: FINANCIAL RESPONSIVENESS & TRANSPARENCY

**Objective No 20: The Service will make every effort to increase the funding base through both traditional and innovative approaches.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
20.1	Discussion and negotiation with Health Service Executive to increase core-funding base.	Ongoing	CEO, Director of Finance Assistant CEOs
20.2	Support and encouragement of all fundraising associations and organisations.	Ongoing - (Annual reports to CEO)	Assistant CEOs, Director of Finance and Administrators
20.3	Establishment of an expert group to explore options, and make recommendations regarding creative funding approaches.	Feb 2006	A/CEOs and Director of Finance

**Objective No 21: The Service will demonstrate clear accountability and equity for all resources.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
21.1	Development of agreed costing system to ensure the equitable distribution of resources.	Nov 2006	Director of Finance
21.2	Introduction of a cost-centred approach to budgeting and service delivery.	Jan 2007	Director of Finance

**Objective No 22: The Service will continue with arrangements to devolve budgets to appropriate levels.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
22.1	Production of a framework for devolving budgets within each Centre.	Nov 2005	Director of Finance

**Objective No 23: The Service will make financial training and support available at an appropriate level for relevant managers.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
23.1	Introduction of financial training modules and support systems for all managers.	Jan 2006	Director of Finance, Director of Quality and Education

**Objective No 24: The Service will put in place an agreed system and framework for the prioritisation and allocation of new and emergency funding (revenue and capital) as agreed by the C.E.O. and the Executive team.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
24.1	Identification and prioritisation of capital and revenue requirements outside of existing budgetary framework for each Centre. Refer to Objective 29.1	Feb each year.	Director of Finance, Assistant CEOs, Director of Logistics and Administrators

**Objective No 25: The Service will, where practicable, introduce a shared services procurement policy.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
25.1	Examination and cost benefit analysis regarding a centralised purchasing and procurement policy.	June 2006	Director of Finance

**KEY RESULT AREA 4: WE WILL CONTINUE TO DEVELOP AND PROMOTE AN EFFECTIVE MANAGEMENT STRUCTURE.**

**GOAL: TO EMPOWER MANAGERS AT LOCAL LEVEL TO PLAN, DEVELOP, CO-ORDINATE AND MONITOR SERVICES.**

**Objective No 26: The Service will conduct a review of management structures at Centre level.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
26.1	Review and recommendations regarding management structure within each Centre.	Jan 2007	Director of Human Resources, Administrators

**Objective No 27: The Service will complete a review of staff job descriptions to ensure that they are all relevant and descriptive of the current environment.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
27.1	In partnership with staff, all job descriptions will be reviewed and amended as appropriate. Linked with Objective 26.1	June 2007	Director of Human Resources and Administrators

**Objective No 28: The Service will encourage and empower management and staff at all levels to take ownership of the Strategic Plan.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
28.1	Launch and briefing of Strategic Plan for staff.	Aug 2005	Assistant CEOs

**Objective No 29: The Service will introduce, develop and support the implementation of an annual plan for each Centre within the organisation.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
29.1	Develop Annual Centre Plans	Feb each year Refer to 24.1	Executive Team and Administrators

**KEY RESULT AREA 5: WE WILL CONTINUE TO IMPROVE OUR SYSTEMS OF COMMUNICATION.**

**GOAL: TO COMMUNICATE AND CONSULT EFFECTIVELY WITH KEY STAKEHOLDERS**

**Objective No 30: The Service will communicate and consult effectively with all service users.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
30.1	Design of an agreed system, to facilitate the collation and dissemination of information to parents, staff and the Executive Team, from the Person-centred approach.	Dec 2008	Director of Quality and Education, Administrators
See also Objective 3 - Advocacy			

**Objective No 31: The Service will communicate and consult effectively with all parents and family members.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
31.1	Establishment of consultative fora within each Centre.	Oct 2005	Administrators
31.2	Development of a mechanism to evaluate the effectiveness of the consultative forums.	Mar 2006	Assistant CEOs, Director of Quality and Education, Administrators
	See also Objective 2 – Working in partnership with stakeholders		

**Objective No 32: The Service will communicate and consult effectively with all staff.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
32.1	Development and publication of the communication charter	Sept 2005	Director of Quality and Education
32.2	Implement the recommendations from communication charter.	Mar 2006	Director of Quality and Education, Administrators

**Objective No 33: The Service will communicate and consult effectively with all external agencies.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
33.1	Liaison and partnership approach to service delivery with the Health Service Executive and all external agencies.	Ongoing	CEO, Executive Team

**Objective No 34: The Service will conduct a review of present Management Information Systems.**

	<b>Action</b>	<b>Completion Date</b>	<b>Responsibility</b>
34.1	Review of existing management information systems within the Service.	June 2006	Assistant CEOs, Administrators
34.2	Introduce new Management Information Systems as necessary.	Ongoing (six monthly report to CEO)	Assistant CEOs, Administrators

KEY RESULT AREA 6: WE WILL HAVE APPROPRIATE PHYSICAL INFRASTRUCTURE AND FACILITIES FOR BOTH SERVICE USERS AND STAFF.

GOAL: APPROPRIATE FACILITIES FOR ALL.

**Objective No 35: The Service will ensure that all new buildings and renovations to older buildings comply with all relevant statutory regulations and associated codes of practice.**

	Action	Completion Date	Responsibility
35.1	Ensure mobility and access standards are fulfilled for all new buildings.	Ongoing	Director of Logistics
35.2	Evaluation, costing and recommendations required for additional works to older buildings.	June 2006	Director of Logistics

**Objective No 36: The Service will prepare a capital investment plan for each region based on priority issues and will endeavour by every means to acquire funding for these projects.**

	Action	Completion Date	Responsibility
36.1	Development of a capital investment plan for each region.	Sept 2005	Assistant CEOs, Director of Logistics, Administrators

**Objective No 37: The Service will ensure that maintenance plans are developed at each Centre.**

	Action	Completion Date	Responsibility
37.1	Development of a Preventative Maintenance Programme	Ongoing (six monthly report to CEO)	Director of Logistics, Administrators, Maintenance Managers

# CHAPTER 3

## 3.0 IMPLICATIONS OF IMPLEMENTATION

- 3.1 In line with the National Health Strategy (Quality and Fairness, 2001), the Strategic Statement of the Daughters of Charity Service sets out an ambitious programme of development and reform. Throughout the Strategic Plan we are aware of the importance of implementation and, as such, the detailed action plans demonstrate specifically how our goals will be achieved and the individuals responsible and accountable. This approach of detailing action plans and timeframes will facilitate monitoring of progress, not only for senior managers responsible for the planning and development of services, but also for all stakeholders.
- 3.2 **Dissemination of Strategic Plan:** Once the Strategic Plan has been approved by the Board of Management and launched by the Service, members of the Strategic Planning Committee will visit each centre and communicate and clarify this shared vision with service users, parents and families, and staff.
- 3.3 **Implementation Team.** In terms of monitoring the implementation and progress of the Strategic Plan, the Board of Management and the Service executive have agreed that members of the Service Co-ordination Committee will be responsible for implementation of the Plan.
- 3.4 **Resource Implications.** The Strategic Planning Committee recommends that every effort should be made to implement every aspect of the Strategic Plan within a five-year timeframe. The Committee are very aware that this plan will only be successful if parents/families and staff are fully supportive, and if the Health Service Executive fund the plan in it's entirety. Implementation of many aspects of the Plan will be dependant upon additional financial resources however we recognise that some strategic decisions might be funded through the better utilisation of existing assets.

3.5 **Involvement of Wider Stakeholders.** Since strategy very often requires an evaluation and a change in the way things are done, it follows that communication and organisational culture may also have to change (Boyle, R, et al, 2000, pp.25-26). All stakeholders have an important role at the implementation stage of this strategy and we have therefore set out the following actions to formalise links and a partnership approach.

**Service Users:** *Objectives 1, 3 and 30 and associated action plans.*

The development of the person-centred approach will ensure that each service user is placed at the centre of service delivery. In addition, to protect and ensure this partnership with service users, the Service will examine the role of advocacy groups.

**Parents and Families:** *Objectives 1, 2 and 31 and associated action plans.*

The Consultative Fora, which will be established by October 2005, will be used as a means to involve parents, relatives and friends of service users.

**Staff:** *Objectives 2, 11, 28, 32 and associated action plans.*

What is required from staff in relation to the implementation phase, is for all staff to take ownership of the Strategic Plan. As stated above, among other considerations, the success of the Plan is dependant on the co-operation of staff.

**Health Service Executive:** *Objectives 2 and 33 and associated action plans.*

The Strategic Plan affords the Service the opportunity to explain to the Health Service Executive (HSE) our plan for the future, and to demonstrate again the requirements and changing needs of the Service. Throughout the implementation phase, we will be involving the HSE in discussions around a more meaningful partnership arrangement for the future.

3.6 **Changing the Plan – Facilitating Change.** The Strategic Plan of the Daughters of Charity Service has been developed by the Committee through consultation, in-depth experience and examination of the Service at this time. However, although we aim to ensure implementation through the above approaches, the Committee is aware that this Statement must not become an inflexible product.

At times strategic direction will have to change and alter from the actual Strategic Plan as a required response to unforeseen environmental or organisational needs. The Implementation Committee will keep all stakeholders informed of any necessary changes.

