



Staff Information Sessions 2019

Killarney and Tralee November 20th



Welcome

- Introductions
- Housekeeping













Agenda Killarney

Item	
Welcome – Chief Officer Ger Reaney	09.30 - 09.35
Context - Cork Community Healthcare in 2019	09.35 - 09.45
Context – Our Strategic Plan	09.45 - 09.50
Making Our Priorities Count – local presentations: Woodlands for Health Rathass Healthy Campus	09.50 - 10.05
HR updates and discussion re the staff survey	10.05 - 10.20
Making Our Priorities Count – local presentations Yvonne Mulvihill	10.20 - 10.30
Questions/discussion	10.30 - 10.45
Summary and Close	10.45 - 10.50

The aims of today's session are to:

- provide an update on developments in Cork Kerry Community Healthcare
- discuss how we areMaking Our PrioritiesCount
- showcase the work of your colleagues
- allow opportunities for everyone to ask questions.







Agenda Tralee

Item	
Welcome – Chief Officer Ger Reaney	2.30 - 2.35
Context - Cork Community Healthcare in 2019	2.35 - 2.45
Context – Our Strategic Plan	2.45 - 2.50
Making Our Priorities Count – local presentations: Rathass Healthy Campus Woodlands for Health	3.50 – 3.05
HR updates and discussion re the staff survey	3.05 - 3.20
Making Our Priorities Count – local presentations Yvonne Mulvihill	3.20 - 3.30
Questions/discussion	3.30 - 3.45
Summary and Close	3.45 - 3.50

The aims of today's session are to:

- provide an update on the development of Cork Kerry Community Healthcare
- discuss how we areMaking Our PrioritiesCount
- showcase the work of your colleagues
- allow opportunities for everyone to ask questions.







Welcome from Chief Officer Ger Reaney

- Service plan 2020 and budget
- Recruitment controls
- Our strategic priorities
- * Remember you can submit questions online at sli.do
 Use the code #ckch







Our Mission, Vision and Values





OUR MISSION

Providing quality services to enable everyone to optimise their health and wellbeing.



OUR VISION

A healthier Cork and Kerry with an accessible, responsive, connected, and high quality service valued by all.



OUR VALUES

Integrity, Learning, Partnership and Respect.









Our Strategic Priorities

In order to realise our vision and implement the ethos and values that we want to create, we have identified six strategic priorities for the next 3-5 years.

Each priority is underpinned by specific objectives. 1. Access

To provide the best possible access to our services

2. People

To value and respect our staff, those who use our services, and their families and carers

3. Quality

To ensure we deliver the best possible quality, compliant services

4. Resources

To create a culture of efficiency that makes the best use of resources in all of our services

Health and Wellbeing To improve the health of all who live in Cork and Kerry

6. Engagement

To foster a culture of pride, confidence & trust in our services







National context

Sinead Glennon, Head of Mental Health Services/ Teresa O'Donovan Head of Primary Care







National updates



CEO & HSE Board

Paul Reid, CEO appointed May 2019
The Board is the governing body of
the Health Service Executive (HSE),
and is accountable to the Minister for
Health for the performance of its
functions with the CEO accountable
to the Board as set out in the Health
Service Executive (Governance) Act
2019.

Mr Reid has visited services in Cork and in Kerry







CEO Paul Reid visits services in Kerry



We are in a state of transition

- Sláinte Care (Ten year cross party strategy)
- New CEO & Board appointed to HSE
- Regional Health Areas announced summer 2019
- Community Healthcare Networks- Learning Site
- Revised GP Contract







Sláintecare Objectives:



- SLÁINTECARE IMPLEMENTATION STRATEGY
- Sláintecare Action Plan 2019

- Promote the health of our population to prevent illness
- Bring the majority of care into the community
- Create an **integrated** system of care, with healthcare professionals working closely together
- Create a system where care is provided on the basis of need, not ability to pay
- Move our system from long waiting times to a timely service
- Drive accountability and performance in the health service
- Deliver a health service that has the capacity and ability to plan for, and manage, changing needs

Integration Fund

€20m for 122 successful projects

- Promote the engagement and empowerment of citizens in the care of their own health
- Scale and share examples of best practice and processes for chronic disease management and care of older people
- Encourage innovations in the shift of care to the community or provide hospital avoidance measures

CKCH Project - Urgent Ambulatory Care and Virtual Ward for the Older Person

A collaboration between Cork Kerry Community Healthcare, South South West Hospital Group, the Five Fundamentals of USC Programme and the Integrated Care Programme for Older People

.The impact of the approach could release up to 30 acute beds per week in the acute system at full capacity

CKCH Project - Cork Kerry Health & Wellbeing Community Referral

A partnership between Cork Kerry Community Healthcare Health & Wellbeing and National Family Resource Centres, supported by a cross-sectoral steering group

<u>Inte**care.** Right Care. Right Plac</u>e. Right Ti

Regional Health Areas

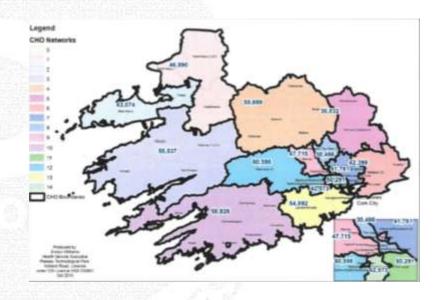


Cork and Kerry make up one entire Regional Health area, with a population of 690,000

- Six regional planning teams have been identified and wider engagement with stakeholders at a regional level is getting under way.
- Staff, patients and the general public will be centrally involved in the design of their own area.
- Regional health areas will have their own budget based on local population needs.
- While the HSE will continue to be the central executive with responsibility for planning and strategy, restructuring will mean health regions will have greater autonomy to make decisions at a local level.

Community Healthcare Networks

 We are implementing a Community Healthcare Network learning site in the Kinsale, Bandon, Carrigaline Network (14 networks in Cork and Kerry, 96 across the country









Cork Kerry Community Healthcare

Update on the launch of our Strategic Plan

Mary Smithwick Communications Manager







Why do we need a CKCH strategic plan?

- It helps us to deliver the best possible services.
- Structures will change, but the principles driving the plan will still be important. Achievements and advances under the six strategic priorities transcend and can outlive structures.
- If we don't set our own agenda, then who will?
- To assist in building identity for Cork Kerry Community Healthcare.
- Provides a framework for a structured approach to service improvement and change, brings objectivity to decision making.
- Multi annual perspective rather than planning on a year to year basis through operational plans.







CKCH strategic plan

Our plan was launched on October 14th, and is available at hse.ie/corkkerrypriorities.

Priorities for Cork Kerry Community Healthcare

Cork Kerry Community Healthcare's strategic plan for 2019 to 2023 is available: CKCH StrategicPlanFinal

The plan helps our 8,000 staff to see their role in delivering our mission, vision, values and strategic priorities.

Working together, we can all Make Our Priorities Count.

The plan lists actions needed in the short, medium and long term to deliver on objectives related to our six Strategic Priorities,

Those six priorities are Access, People, Resources, Quality, Health and Wellbeing and Engagement.

As well as the actions listed in the plan, staff in all parts of Cork Kerry Community Healthcare are taking on their own projects and initiatives.

Documents for local meetings:

We are asking staff to hold meetings to discuss how they are Making Our Priorities Count.

A workbook is available: Workbook for Progressing Strategic Priorities at Local Level

and slides for those meetings are available here: Slide deck for staff meetings in CKCH

This poster contains the Mission, Vision and Values of Cork Kerry Community Healthcare: CKCH Mission, Vision and Values

And this poster outlines the six strategic priorities: CKCH Priorities Poster

These leaflets have more details of the Mission, Vision, Values and Priorities: CKCH leaflet 1, CKCH leaflet 2

Share Your Stories of How you're making Our Priorities Count:

We want staff to share their stories of how they are Making Our Priorities Count.

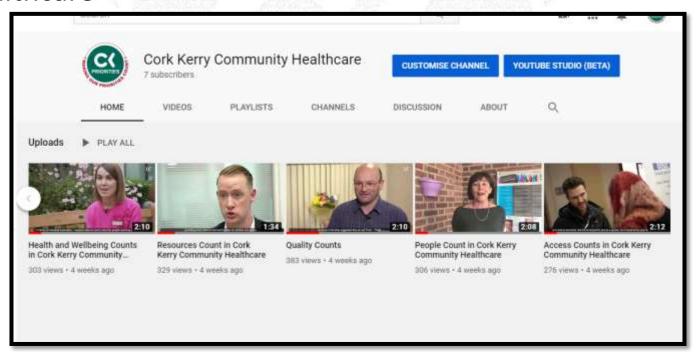






CKCH strategic plan

 To coincide with the launch, we shared six days of video content.
 Go to YouTube and search for "Cork Kerry Community Healthcare"









CKCH strategic plan

- Our theme/strap-line is Making Our Priorities Count (adaptable for each of the six priorities)
- We want to show everyone their role in making strategy a reality; allow for two-way feedback; and allow opportunities for staff to tell their own stories



See hse.ie/corkkerrypriorities and the intranet for guidelines on how to use this logo, including templates for letters and email signatures.

This logo does not replace the CKCH or HSE logos

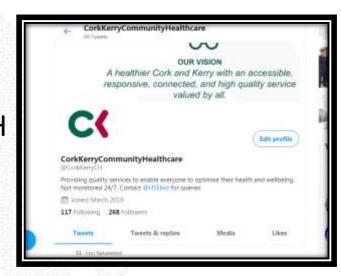






Launch of our Strategic Plan

- Staff newsletter to launch shortly.
- Follow us on Twitter, @CorkKerryCH
- Facebook account to follow.



 You can see stories of staff Making Our Priorities Count on YouTube.

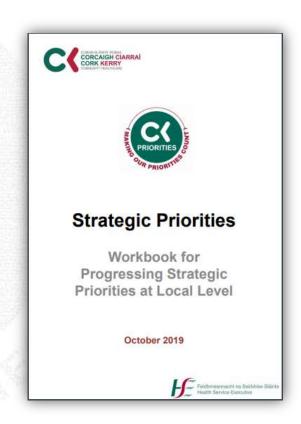






The ask

- Visit hse.ie/corkkerrypriorities
- Discus the plan and your role at staff meetings (support documentation at hse.ie/corkkerrypriorities).
- Share your stories –
 corkkerry.priorities@hse.ie.



• Each unit/department to introduce a Quality initiative.







Making Health and Wellbeing Count

How Rathass campus won an Active@Word award

Dr Ailis Brosnan







Overview

- Context
- IHF Active@Work Awards
- Criteria for Gold Award
- What we did
- What's next?



Staff Health and Wellbeing Context:

CKCH Strategic Plan 2019-2023

Health and Wellbeing - To improve the health of all who live in Cork and Kerry by:

- a) Providing the information, awareness, and opportunities to enable everyone to maximise their personal health & wellbeing
- b) Maximising our staff as ambassadors for Health and Wellbeing
- Leading by example in the promotion of health and wellbeing in all our facilities

COMPASS: HI Implementation Plan

- Area 5: Staff Health & Wellbeing
- Area 6: Healthy Ireland Campus

UHK/Kerry Community Services Health Promotion Committee

- Representatives across all departments, chaired by HP&I
- Promoting staff health and wellbeing









Active@Work AWARD

The IHF established the Active@Work Award to recognise the excellent work organisations are doing to create a more active workforce.

- Won bronze award in 2017
- Won silver award in 2018
- Won gold award this month!



Gold Award Criteria

- Meet criteria for the silver award plus:
- Set up a walking group
- Participate in national campaigns
- Run 3 physical activity programs
- Develop a workplace physical activity policy
- Encourage active commuting to work



Set up a walking group/ national



RATHASS / UHK SCHEDULE OF EVENTS:

Registration for Steps to Health, Tuesday 7th May in Rathass & UHK

During the 5 week challenge:

Mondays: Walk leaving from Hospital entrance 1:05pm
Tuesdays: Mini-fitness classes*, Rathass CR1: 1:30-2pm
Wednesdays: Walk leaving from Rathass entrance: 1:30pm
Thursdays: Walk leaving from Hospital entrance 1:05pm
Saturdays: Tralee parkrun, meet at townpark entrance 9:15am
*Classes include Qigong 14th May, Step class 21st May, Zumba 28th May,
Yoga 4th June and Circle dance on 11th June

Plus two free talks:

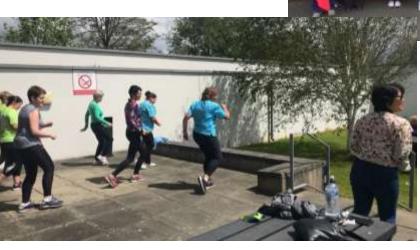
The benefits of being active - UHK Tuesday 7th May, 1pm Get motivated to get active - Rathass Thursday 16th May, 1:30-2pm

> To register for the talks or fitness classes, call Mary Lawless on 066 7195617

Further details at hse.ie/stepschallenge









Run physical activity programmes

Couch to 5k / Parkrun





	8	Run	Walk	Times	Total time
Week 1	Session 1	1 min	4 mins	x 4	20 mins
	Session 2	1 min	4 mins	x5	25 mins
	Session 3	2 min	3 mins	x 4	20 mins
Week 2	Session 1	2 mins	3 mins	x 5	25 mins
	Session 2	2.5 mins	2.5 mins	x 5	25 mins
	Session 3	3 mins	2 mins	x 5	25 mins
Week 3	Session 1	3 mins	2 mins	хб	30 mins
	Session 2	3.5 mins	1.5 mins	x5	25 mins
	Session 3	4 mins	1 min	x5	25 mins
Week 4	Session 1	4 mins	1 mins	x 6	30 mins
33,000.2	Session 2	6 mins	2 mins	x 4	32 mins
	Session 3	6 mins	1 mins	×4	28 mins
			1 mins	-	28 mins
			-	-	J. SOMMERSHIP
Week 5		ing Way for	ra 5K (Wee	k 5-8)	J. O. J. L.
Week 5	Mak	ing Way for	Walk	k 5-8) Times	Total time
Week 5	Mak Sension 1	Run B mins	Walk 2 mins	7 Times	Total time
	Session 1 Session 2 Session 3	Run 8 mins 8 mins 10 mins	Walk 2 mins 2 mins 2 mins 2 mins	Times x2 x3 x2	Total time 20 mins 27 mins 24 mins
Week 5 Week 6	Mak Session 1 Session 2	Run B mins B mins 10 mins	Walk 2 mins 2 mins	Times x 2 x 3	Total time 20 mins 27 mins 24 mins 33 mins
	Session 1 Session 2 Session 3 Session 1	Run 8 mins 8 mins 10 mins	Walk 2 mins 2 mins 2 mins 2 mins 1 mins	Times x2 x3 x2	Total time 20 mins 27 mins 24 mins
Week 6	Session 1 Session 2 Session 3 Session 1 Session 2 Session 3	Run 8 mins 8 mins 10 mins 12 mins 12 mins	Walk 2 mins 2 mins 2 mins 1 mins 1 mins 1 mins 1 mins	75mes x2 x3 x2 x3 x2 x2 x2	Total time 20 mins 27 mins 24 mins 33 mins 28 mins 26 mins
Week 6	Session 1 Session 2 Session 3 Session 2 Session 3 Session 3	Run 8 mins 8 mins 10 mins 10 mins 12 mins 12 mins 15 mins	Walk 2 mins 2 mins 2 mins 2 mins 2 mins 1 mins 2 mins 1 mins 2 mins 1 mins	Times x2 x3 x2 x3 x2 x2 x2	Total time 20 mins 27 mins 24 mins 33 mins 28 mins 26 mins
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Week 6 Week 7	Session 1 Session 2 Session 3 Session 2 Session 3 Session 3 Session 3 Session 1 Session 2 Session 2 Session 3	Run 8 mins 8 mins 10 mins 12 mins 12 mins 12 mins 13 mins 13 mins 15 mins 18 mins	Walk 2 mins 2 mins 2 mins 2 mins 1 mins 2 mins 1 mins 1 mins 2 mins 1 mins 2 mins 1 mins	** 5-8) **Times **x2 **x3 **x2 **x3 **x2 **x2 **x2 **x2 **x2 **x2 **x2 **x2 **x2 **x2	Total time 20 mins 27 mins 24 mins 24 mins 33 mins 28 mins 26 mins 34 mins 34 mins 40 mins
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Run physical activity programmes



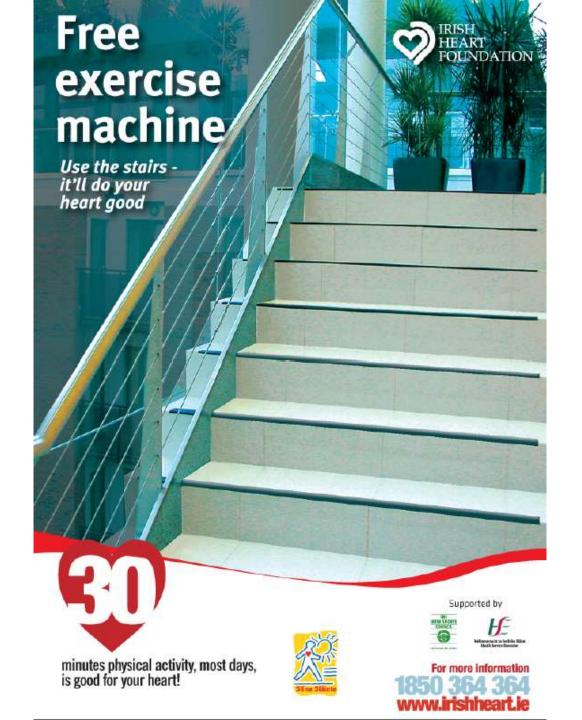


The 'Keyboard Warriors' team at the Alan McGovern Memorial UHK Soccer Tournament at Tralee Dynamos sitch on Saturday. Photo by Dermot Crean

Alan McGovern
5 a side memorial
UHK soccer tournament

Develop a workplace PA policy









Promote Active Commuting







Want to go for a cycle at lunchtime or leave the car and cycle to that meeting in town?



University Hospital Kerry (UHK) Campus









Walkways to Health (follow signs and footprints)



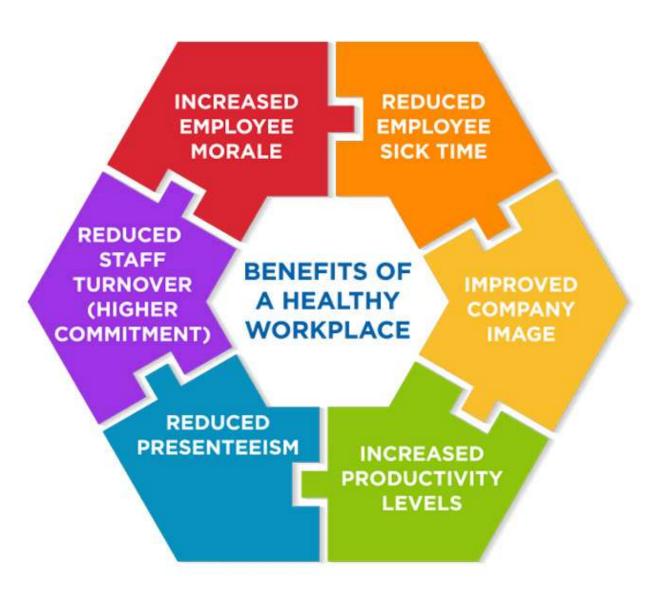
Moving forward...

Develop action plan 2020

- Looking for representatives from Community Services in Rathass...
 - Julianne.Prendiville@hse.ie



Why staff health & wellbeing?



"This is a major programme of utmost importance, but it has no budget, no guidelines, no support staff and it's due next week.

At last, here's your chance to really impress everyone!"



Contact

- Dr. Ailis Brosnan
- Ailis.brosnan@hse.ie
- 086 7810222



Making Health and Wellbeing Count

Woodlands for Health Caroline McCarthy Catherine Fitzgerald







Health and Wellbeing

To improve the health of all who live in Cork and Kerry by:

- a)Providing the information, awareness, and opportunities to enable everyone to maximise their personal health & wellbeing
- b) Maximising our staff as ambassadors for Health and Wellbeing
- c)Leading by example in the promotion of health and wellbeing in all our facilities

Woodlands For Health

- Innovative development initiated by Coillte in 2012 in partnership with HSE Wicklow Mental Health Services, Mental Health Association and Mental Health Ireland
- Eco Therapy
- Research based
- Ran across the CHO networks



What we did

a) Providing the information, awareness, and opportunities to enable everyone to maximise their personal health & wellbeing

- Pilot of an OT walking group
- Information Poster
- Recruited participants
- Information session
- Explained the rationale for the project
- Explored the benefits of eco therapy
- Partnered with local external agencies i.e. Coillte, Kerry Sports Partnership, Kerry County Council, Kerry Local Link
- Completed a 12 week Woodland Walking programme



b) Maximising our staff as ambassadors for Health and Wellbeing

Who

- Two Mental Health
 Occupational Therapists from
 the Rehab and Recovery team
- Co produced with one mental health service user
- Completed Irish Heart Foundation walking leader training
- Forged links with external agencies



Outcome

c) Leading by example in the promotion of health and wellbeing in all our facilities

- 27 participants across the mental health sector teams
- Average of 13 people walking in a woodland area on a weekly basis
- Post evaluation session



Conclusion and future planning

- Feedback from participants
- Plans for 2020
- Let's keep walking!























Contact details:

HSE Kerry Mental Health Services – Rehab & Recovery Team

Caroline McCarthy – <u>caroline.mccarthy5@hse.ie</u>
Catherine FitzGerald – <u>catherine.fitzgerald6@hse.ie</u>

Movement break

(because Health and Wellbeing Counts)







HR updates







National Pay Agreements

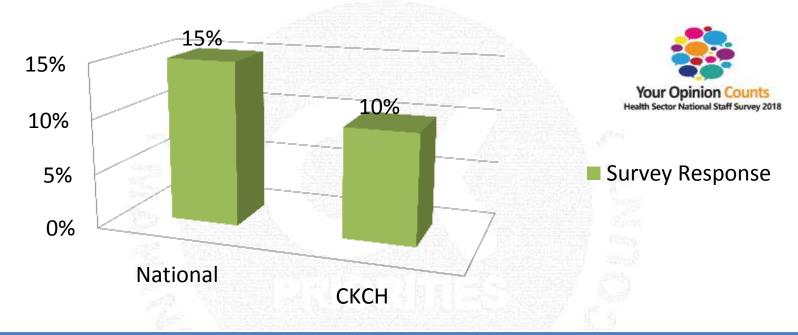
- 1 September 2019 annualised salaries increase by
 1.75%,
- 1 January 2020 annualised salaries up to €32,000 increase by 0.5%,
- 1 October 2020 annualised salaries increase by 2%.







Staff survey – key results in CKCH



Staff Survey – Q&A

What would make you more likely to do the survey in future?

What do you think should be asked in the survey in future?







Staff survey – key results in CKCH

Supports	2018 CKCH	2018 National	
Dignity at Work Policy			
 Aware of Dignity at Work policy 	87%	87%	
■ Trained or briefed on the Dignity at Work Policy	61%	59%	
 Have experienced bullying/ harassment by a Manager/Colleague 	33%	37%	

Q&A – Dignity at Work Policy:

- How can CKCH improve Dignity at Work Policy awareness?
- How do we better support our staff to prevent Dignity at Work type issues?







Discussion re key results



Teams	2018 CKCH	2018 National	2016 CKCH	2016 National
Perception of Leadership Strategy heading in the right direction	48%	47%	41%	33%
Line Management ■ Communicates well with the team	56%	52%	59%	53%
Training & Development Training Opportunities	59%	48%	53%	45%

Q&A - Teams

- What do you think is an effective team?
- What makes you proud of the service?
- What are your suggestions to make teams even more effective?







Making Our Priorities Count Local Projects







Engagement Counts

Yvonne Mulvihill







https://vimeo.com/362093350

geniohse2019



A TIME TO MOVE ON - PREPARING AND SUPPORTING ADULTS LIVING IN A RESIDENTIAL DISABILITY SERVICE TO EMBARK ON THEIR JOURNEY TO SUCCESSFUL COMMUNITY LIVING

Person Centered Care

BACKGROUND

- Cluain Fhionnain (CF) opened in 2001 and was a joint initiative between Mental Health and Intellectual Disability services to provide a specific service for those with dual diagnosis.
- 44.83% (13) of the 29 residents were admitted directly to St. Finans
 Hospital when they reached their late teens from Intellectual
 Disability residential care facilities some had been admitted as very
 young children.
- The population of CF mainly comprised of those residents who transferred from St. Finans Hospital or other Intellectual Disability Residential services where the majority had spent many years in long term care.

- The need to move away from institutionalised living for people with Intellectual Disabilities has been a feature of Irish policy for decades.
- Equal Status Act (2000) Dublin: The Stationery Office; 2000.
- National Disability Authority. National Standards for Disability Services. Dublin: National Disability Authority; 2004.
- Disability Act 2005. Dublin: The Stationery Office; 2005.
- Health Act 2007. Dublin: The Stationery Office; 2007.
- Health Service Executive. Draft Guidance for the provision of Residential Services for people with disabilities. Dublin: Health Service Executive; 2008.
- Time to Move from Congregated Settings 2011.
- New Directions-Personal support services for people with Intellectual Disabilities 2012.
- Department of Health. Value for Money and Policy Review of Disability Services. Dublin: Department of Health; 2012.
- Health Information and Quality Authority. National Quality Standards: Residential Services for People with Disabilities. Dublin: Health Information and Quality Authority; 2009 which saw the commencement of regulation through HIQA November 2013.
- Safeguarding Vulnerable Persons at Risk of Abuse 2014.
- The reform Agenda 2015.

AIM

- The Committee on the United Nations Convention on the Rights of Persons with Disabilities clearly state that while institutions may differ in size they share common characteristics.
- They acknowledge that deinstitutionalisation involves more than just closure of large residential settings but is about removing instutional cultures and practices and ensuring accessible, inclusive housing, services and supports are made available to persons with disabilities in community settings.
- This cannot be achieved by just moving a group of people to a smaller setting and closing the larger congregated setting, it requires the introduction of a model of care that supports person centered planning within the community.

Objectives

- To move from a Medical Model of Care to a Social / Person Centered model of care in CF.
- To prepare and support 29 residents and 2 respite adults with Intellectual Disability to move to community settings of their choice and provide them with the skills to make choices and live more independently.
- To include family and each individuals circle of support in this decision making process.
- To introduce supports such as easy read documents, assistive technology, literacy & advocacy groups to enhance and inform personal choice.

Objectives

- To improve the current living environment and remove restrictive practices which were common with instutional living practices. To commence the discovery process, develop Person Centered Planning and Positive Behavioural Support Plans with the residents which was supported by their key worker.
- To source and provide suitable accommodation and a staff group with the appropriate skills mix to enable this change.
- To commence the introduction of residents to groups, clubs and locals in the communities they would choose to relocate to.
- To offer this group of adults the opportunity to live a more independent life of their choice and remove the current segregation from community.

Methods

- Funding for the transition was obtained from Cork Kerry Community Health Care, HSE, Genio and Service Reform Funding. Purchase of the properties was through the Capital Assistance Scheme managed by Kerry County Council with some houses front funded by the HSE.
- As no change-manager could be sourced the ADON for the area was seconded from KMHS to oversee the change management process and to implement the preparation and support planning for the residents transition programme. The ADON also assumed a dual role as Person in Charge as required by HIQA Regulation.
- Rehab Care were identified as the service provider to support transition from Cluain Fhionnain and to support living arrangements and given that a Medical Model of Care was in place they assisted nursing staff in the development of Individual Person Centered Plans.

Staff training and professional development was required to ensure:

- Person centered planning was adopted to provide a flexible and responsive approach to meet the resident's needs in line with good practice.
- HIQA Standards: Training for staff was urgently required regarding National Quality standards following the completion of a gap analysis and initial inspection by HIQA which identified failures in meeting HIQA standards within the centre.
- Intellectual Disability training and Positive Behavioural Support Plan training was put in place to support staff to manage and complete needs assessments and models of care interventions appropriate to each individuals needs. This was supported by An Cuan.

- Allied health professionals such as the Community Dietician, Speech and Language Department and Physiotherapy Department played a vital role in introducing programmes to assist staff to manage communication difficulties, mobility issues and the implementation of nutritional plans and training for staff.
- An Cuan provided individual support through their ACROSS Programme to staff in managing behaviours that challenge.
- Through Service Reform Funding we were able to fund an onsite .5 psychologist to provide valuable support and psychological assessment for the residents.
- Through funding from GENIO a 7 seater vehicle was purchased in 2015 and in 2017 we were gifted another 7 seater vehicle by Home Instead who became the new service provider on site in 2017. This enabled more choice in relation to community activities.
- Through Service Reform Funding we introduced community support workers to support integration to the community and expand the experiences of residents in the communities of their choice through a Social 12 Clubz initiated by the residents which along with day engagements provided evening and night socialising opportunities.

Challenges

- Getting staff to change practice from a medical Model of Care to a Social Care Model of Care.
- Positive risk taking to reduce the amount of restrictive practices in place.
- During the early stages of the project is was made clear that the nursing staff attached to Cluain Fhionnain would not transfer with the residents. Up until 2017 there were two staff teams in place Rehabcare Transition team and KMHS nursing staff team.
- A new staff group were identified in 2017 and a total staff change commenced from June with nursing staff and Rehabcare transition team replaced by a team of SCWs and HCAs from Home Instead. The Social Care Model was fully introduced from July.

Challenges

- Securing properties in the areas chosen by the residents.
- The application process for CAS can take time and as a result we lost two properties in the Listowel area and one in Tralee and several in Killarney.
- Getting approval from families who initially were very opposed to the whole process involved a lot of reassurance.
- Trying to meet HIQA regulations and standards while simultaneously preparing and supporting residents to transition.
 The emphasis had to be on the residents and remain person centered at all times regardless of the time constraints to close.

OUTCOMES

- This endeavour required a major change in the model of care being delivered in order for it to achieve the desired outcomes for the residents.
- It had to be person centered in approach which could not be achieved through a medical model of care.
- It highlighted the need to identify the appropriate skills mix of staff and their belief in each residents ability to live an enriched life in the community with support.
- Residents became familiar with social occasions and had embraced this side of life and as such embraced the transition when it happened.
- They were not strangers when they moved into their communities as each have been given the opportunity to become acquainted with and establish a relationship with locals as an individual rather than a group.
- The increase in family contact has been more than significant.

Outcomes

- Interaction and the on-going development of relationships between staff and residents has the opportunity to take place in a normal setting rather than an institutional one.
- Getting to know each resident as a person.
- Discovering their individual personality through their likes and dislikes.
- Watching their personalities emerge as they experience new ventures and engage with their community.
- Seeing them experience what we take for granted with such joy.
- Knowing this has made a significant impact in the quality of each of the residents lives and most importantly that it is only a stepping stone to what is to become their new lives.

Acknowledgements

Cork Kerry Community Health Care

Health Service Executive

Kerry Mental Health and Disability Services

Estates

Kerry County Council

Genio

Service Reform Funding

Nursing Staff Kerry Mental Health Services

Home Instead

Allied Health Professionals – Speech and Language & Dieticians

Psychiatric Consultant services and GP services

Rehab Care

Kerry Parents and Friends

IWA

Literacy Ireland

National Advocacy

And those that I may have omitted

Questions and Answers

* Remember - you can submit questions online at sli.do
Use the code #ckch







Thank you and Close





