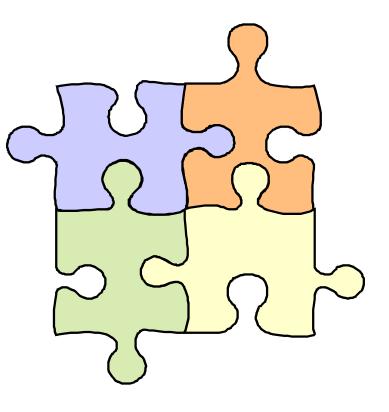
#### DISABILITY POLICY IN IRELAND

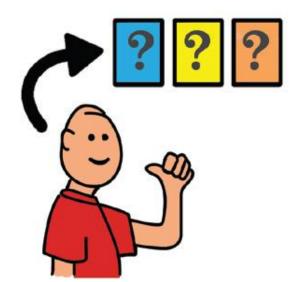
DR. CATE HARTIGAN DISABILITY SERVICES, HSE

22<sup>ND</sup> APRIL 2013



# BACKGROUND

- Unprecedented and accelerating change
- Transitioning from congregated to community provision and from segregation to inclusion
- People with disabilities are supported to participate fully in economic and social life and have access to a range of appropriate supports and services to enhance their quality of life and well-being
- Citizenship, control, informed choice, self determination, responsibility, inclusion, participation, equity, personcenteredness, quality



# WORKING TOGETHER

- The person, their families and carers, a multiplicity of agencies, government, and society as a whole
- There will be significant challenges. A major change programme over the next number of years has commenced
- The recommendations of the Value for Money and Policy Review will provide the framework



# POLICIES

- UN Convention on the Rights of Persons with Disabilities, 2009
- National Disability Strategy launched in 2004
- Disability Act 2005
- The Health Act HIQA 2007



# **POLICIES CONTINUED**

- New Directions– Personal Support Services for Adults with Disabilities
- Time to Move on from Congregated Settings
- Progressing Disability Services for Children and Young People (0-18s)



Children First

# HSE Governance Disability Provision

- Assistant National Director is the lead for the planning, monitoring and evaluation of services, developing standards and best practice
- Four Regional Directors of Operations (RDOs) are responsible for the delivery of all health
- National Consultative Forum
- Voluntary Providers
- Service Agreements



## VALUE FOR MONEY & POLICY REVIEW -VISION

Twin goals of:

- 1. Full inclusion and self determination
- 2. The creation of a cost effective, responsive and accountable system





#### VALUE FOR MONEY & POLICY REVIEW PRIORITY RECOMMENDATIONS

Administration and governance

Person centred services and supports

Commissioning and procurementoutcome focused

**Resource allocation** 

Information infrastructure



## TIME TO MOVE ON FROM CONGREGATED SETTINGS

- Approx 3,600 people live in segregated, group settings 10 or more people living together
- Commitment and dedication of dedicated staff and management
- People living isolated lives away from community and family
- Poor conditions lacking basic privacy and dignity



## TIME TO MOVE ON FROM CONGREGATED SETTINGS

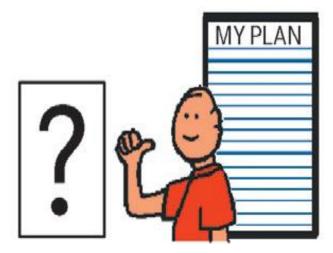
- Dispersed housing in the community
- Supported living
- Individual support
- Community based primary care and specialist supports
- Work/further education support





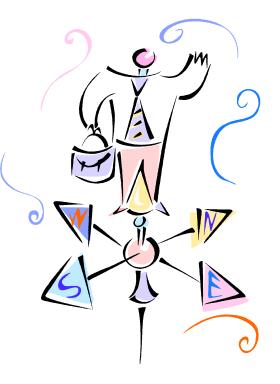
- An individualised approach allowing people live full and independent lives
- Proactive change through collaboration

- Re-organisation and reconfiguration of all aspects of the service
- Increase flexibility.



# **NEW DIRECTIONS**

- Published 2012 challenges us to modernise services so that they can better meet the needs of this population
- 25,000 people participate in Day Services
- Diverse set of interests, aspirations and personal circumstances

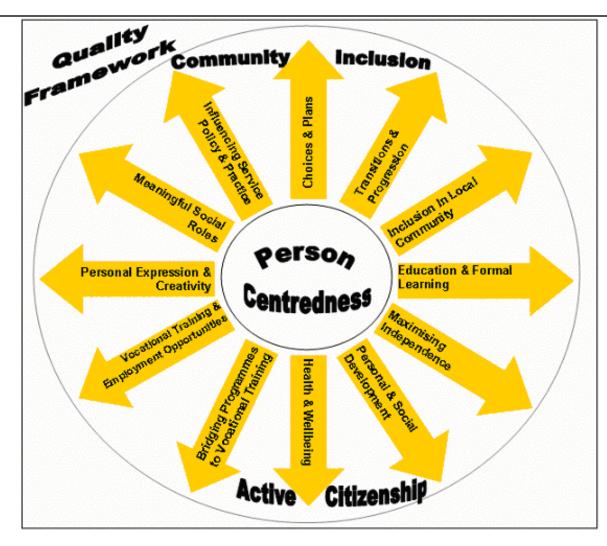


# **NEW DIRECTIONS**

- Based on the core values of personcenteredness, community inclusion, active citizenship and high-quality service provision
- Underpinned by good governance, monitoring and guidance for providers
- Access to flexible and outcome-driven supports to enable people to live a life of their choosing that meets their own wishes, aspirations and needs
- Supports to enable people to participate as equal citizens in their community and to contribute to that community.



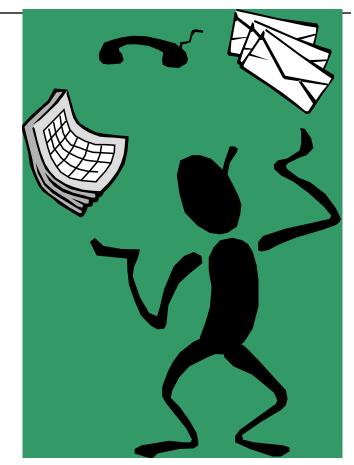
#### **12 SUPPORTS**



# CHANGE PROCESS

A significant change in:

- o Service Culture,
- Work Practices,
- o Programme Content,
- Staff Roles & Skills Mix
- Service User Roles
- The extent of the change in any service will depend on the gap between current practice and what is needed to deliver a modern, person-centred service.



#### PROGRESSING DISABILITY SERVICES FOR CHILDREN & YOUNG PEOPLE

- One clear pathway to services for all children according to need
- Effective teams working in partnership with parents and service users
- Resources used to the greatest benefit for all children and families
- Partnership between health and education to support children to achieve their potential



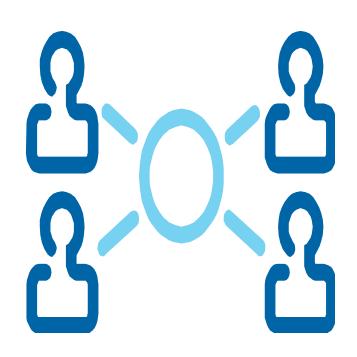
#### AIMS

- Single unified system
- Equity in access to services
- Consistency and clarity in service pathways
- Use experience of areas where new structure already in place



### Primary Care and Network Disability Teams

- Children seen at Primary Care for mild, non-complex needs as is current practice
- Network Disability Teams for children with complex needs
- Children's Specialist Disability Services
- Central Referral Forum



# CONCLUSION

- ENABLING PEOPLE WITH A DISABILITY
- ORDINARY LIVES IN ORDINARY PLACES WITH APPROPRIATE SUPPORT
- DIFFERENT GOVERNANCE ARRANGEMENTS FOR THE HSE/DOH
- COMMISSIONING
  PROVISON

