



Department of Health and Children

BUSINESS PLAN 2005

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Business Plan 2005

Introduction

2005 marks a historic transition in the role of the Department in its governance of the Health System. With the establishment of the Health Services Executive (HSE) from 1st January 2005, many functions formerly discharged by the Department have become the responsibility of the HSE. These functions will transfer to the HSE gradually throughout the year and the rate of transfer will depend on factors outside the control of the Department. The Department will continue to discharge these functions until they have been transferred and will provide support and assistance to the HSE during the transfer. The Department will develop and refine monitoring and evaluation processes for functions transferred. The timescales and resource requirements cannot be quantified precisely at this point in time and the steps and actions listed in business plans related to transition of functions should be considered as best estimates only. These estimates will be reviewed and adjusted frequently during 2005 and business plans will be amended accordingly.

Department of Health and Children
Business Plan 2005

Division Name: Office of the Chief Medical Officer

Division Head: Dr Jim Kiely, CMO

MAC Area: Office of the CMO

MAC Member: Dr Jim Kiely, CMO

Divisional Objectives:

SS HLO A:

Div Obj 1:

Implementation of Reform Programme

SS HLO B:

Div Obj 2:

Better Cancer Control

SS HLO C:

Div Obj 3:

Enhancement of Communicable Disease Surveillance and Control

SS HLO D:

Div Obj 4:

Development of Policy on Chronic Diseases

SS HLO E:

Div Obj 5:

Service Development – Hospitals and Primary Care

SS HLO F:

Div Obj 6:

Fulfil International Objectives

Part 1:

HLO	Div Obj.	Implementation of Reform Programme			
1,2, 3,4	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Contribute to contract reform of key health professionals	2005/6	Dr Devlin	Agreed contracts	Ext Personnel
1.1	Contribute to legislation on Medical Practitioners Act	2005	Dr Devlin	Publication of Medical Practitioners Bill	Ext Personnel
2	Participation in the DOHC/HSE service planning process including performance measurement	2005	Dr Devlin	Agree service plan framework, monitoring process including the Annual Report	Population Health
2.1	Development of framework for HSE corporate plan	March 2005	Dr Holohan	Framework completed	Population Health
2.2	Participation in corporate planning process	Ongoing	Dr Holohan	Active participation in agreed structures and processes	Population Health
2.3	Integration of population health approach to corporate and service planning processes	Ongoing	Dr Holohan/ Dr Devlin	Active participation in agreed structures and processes	Population Health
2.4	Participation in development of health intelligence capacity within DOHC	Ongoing	Dr Holohan	Active participation in agreed structures and processes	Population Health
3	Participation in development of information policy including NHIS and oversight of its ongoing implementation through service plans	Ongoing	Dr Holohan	Active participation in agreed structures and processes	
3.1	Participation in governance development process Development of agreed corporate governance framework and monitoring process	2005/6	Dr Connolly	Active participation in agreed structures and processes	
Comments					

HLO	Div Obj.	Better Cancer Control			
1,2, 3,4	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Participation in National Radiotherapy Co-ordination Group	Ongoing	Dr Holohan	Active participation	
1.1	Oversight of implementation of Radiotherapy Report	Ongoing	Dr Holohan	Active participation	
1.2	Participation on Expert Group drafting National Cancer Strategy	June 2005	Dr Holohan	Production of Cancer Strategy	
2	Participation on National Cancer Forum	Ongoing	Dr Holohan	Active participation	
2.1	Participation on Board of National Cancer Registry	Ongoing	Dr Holohan	Active participation	
2.2	Participation in programme of work under All-Ireland Cancer Consortium	Ongoing	Dr Holohan	Active participation	
2.3	Supporting Acute Hospitals Division in relation to cancer services	Ongoing	Dr Holohan	Active participation	
Comments					

HLO	Div Obj.	Enhancement of Communicable Disease Surveillance and Control			
1,2, 3,4	3				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Participation in SARI Implementation Working Group	Ongoing	Dr Connolly	Implementation of relevant structures and processes	Community Health/ Population Health Divisions
1.1	Ongoing development of immunisation programme in conjunction with Community Health Division	Ongoing	Dr Connolly	Active participation on National Immunisation Advisory Committee	Community Health/ Population Health Divisions
1.2	Participation in measles eradication strategy committee	Ongoing	Dr Connolly	Plan outlining strategy to eradicate measles	Community Health/ Population Health Divisions
2	Participation in Biological Threats Expert Group	Ongoing	Dr Connolly	Biological Threats Expert Committee Report(s)	Community Health/ Population Health Divisions
2.1	Participation in CJD Advisory Committee	Ongoing	Dr Connolly	CJD Advisory Committee reports	Community Health/ Population Health Divisions
2.2	Participation in TB Advisory Committee	Ongoing	Dr Connolly	TB Advisory Committee reports	Community Health/ Population Health Divisions
2.3	Participation in Contingency Planning structures	Ongoing	Dr Connolly	Plan outlying SARS and other contingency arrangements	Community Health/ Population Health Divisions
3	Participation in Influenza Advisory Group	Ongoing	Dr Connolly	Pandemic influenza advisory reports	Community Health/ Population Health Divisions
3.1	Development of ECDC work programme and structures	Ongoing	Dr Connolly	Active participation	Community Health/ Population Health Divisions
Comments					

HLO	Div Obj.	Development of Policy on Chronic Diseases and Population Health			
1,2, 3,4	4				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Contribute to development of policy on chronic diseases	2005	Dr Devlin	Publication of Diabetes Strategy and other reports	Interdivisional
1.1	Contribute to population health policy including intersectoral initiatives	2005/6	Dr Devlin	Policy on fortification of food with Folic Acid	Community Health
2	Contribute to implementation of Cardiovascular Strategy				
2.1	Participation in Advisory Forum and review of Strategy	November 2005	Dr Shelley	Active participation, review completed	HPU/ Secondary Care
2.2	Evaluation of secondary prevention programme	April 2005	Dr Shelley	Evaluation process complete	HPU/ Population Health Division
2.3	Development of National Cardiovascular Information System	Ongoing	Dr Shelley	Updates on progress, design completed, Phase I tendering process complete	NCIS Steering Committee
2.4	Pilot of data standards for NAPS	November 2005	Dr Shelley	Standards agreed, put in place in HCIR, reviewed	NAPS/ IMU/CSO
2.5	Task Force on Sudden Cardiac Death	June 2005	Dr Shelley	Report completed	HPU / Task Force
3	EU Presidency Reports to Commission (1) Prevention (2) CARDS	June 2005	Dr Shelley	Reports completed	HPU
Comments					

HLO	Div Obj.	Services Development - Hospitals and Primary Care				
1,2, 3,4	5					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Contribute to policy on acute hospital development, including reorganisation, bed capacity, A&E services and specialty reviews		2005/6	Dr Devlin	Relevant reports on acute services	Secondary Care
2	Liaison with potential primary care providers		Ongoing	Dr Holohan	Active participation in agreed structures and processes	
2.1	Liaison with Department of Finance re Capital Allowances		Ongoing	Dr Holohan		
2.2	Participate in/support development of DOHC/management position for GMS contract renegotiation		Ongoing	Dr Holohan		
Comments						

HLO	Div Obj.	Fulfil International Objectives			
5	6				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	WHO Regional Committee and World Health Assembly	Ongoing	Dr Kiely/ Dr Connolly	Draft Report	International Unit
1.1	Council of Europe CDSP/CDBI	Ongoing	All staff	Relevant Reports	
1.2	Participation in programme of work under NCI Agreement	Ongoing	Dr Kiely/ Dr Holohan	Relevant Reports	
1.3	European Union				
Comments					

Part 2: Developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	DCMO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		
Increase participation of staff in professional development and CME activities through internal activities and attendance at national and international conferences	Greater knowledge based and consolidation of specialised expertise among CMO office staff	Dec 2005	All staff

Department of Health and Children
Business Plan 2005

Division Name: Community Health

Division Head: Brian Mullen, Principal Officer

MAC Area: Primary Care

MAC Member: Tom Mooney, Deputy Secretary

Divisional Objectives:

SS HLO 1: HIGH PERFORMANCE

Div Obj 1:

Contribute to the Health Service and Legislative Reform Process.

SS HLO 4: BETTER HEALTH FOR EVERYONE

Div Obj 2:

Population health - Develop policy in relation to health protection issues such as Immunisation, Infectious Diseases and monitor the implementation of policy by the H.S.E.

Div Obj 3:

Reproductive Health – Develop and evaluate policy on reproductive health.

Div Obj 4:

Primary Care Services: Policy Development.

**SS HLO 5: SUPPORTING WIDER GOVERNMENT
PROGRAMMES AND INTERNATIONAL HEALTH POLICY.**

Div Obj 5:

Support Government Programmes and International Meetings and Commitments.

Part 1:

HLO	Div Obj.				
1	1	Contribute to the Health Service and Legislative Reform Process			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	HEALTH SERVICE EXECUTIVE				SS 4.1
1.1	Participate in joint D.oH.C./H.S.E. Health Protection and Population Health Groups in order to facilitate the development of the Population Health Directorate in the H.S.E.	Jan – Dec 2005	BM, ET & TC	Contributions made Support provided.	
1.2	Facilitate process for transfer of functions from Community Health Division to the H.S.E.	Mar - Dec 2005	BM, ET & TC	Functions transferred	
2	REFORM OF DEPARTMENTAL STRUCTURES				SS 4.1
2.1	Participate in restructuring of D.o.H.C. in relation to the development of the Population Health Division	Mar - Dec 2005	BM, ET & TC	Contributions made	
3	REGULATION OF OPTICIANS: REVIEW FITNESS TO PRACTICE				
3.1	Consult with interested parties and draft proposals	Jan - June 2005	BM, TC & HC	Proposals developed and agreed by MAC	
3.2	Draft and submit Memo for Government	June – Dec 2005	BM, TC & HC	Memo submitted.	
Comments <ol style="list-style-type: none"> The nature of the work is such that issues arise from time to time (e.g. new commitments, unexpected problems) which affect and place strains on the ability of the section to achieve targets. Such issues may generate a substantial increase in the workload and develop into work that is of a more permanent rather than short-term nature. In such instances in light of restrictions on staffing levels, the business plan may require adjustment. Progress in meeting the targets at 1 and 2 above will be dependant on the co-operation of the H.S.E. 					

HLO	Div Obj.	POPULATION HEALTH – Develop policy in relation to health protection issues such as Immunisation, Infectious Diseases and to monitor the implementation of policy by the H.S.E.			
4	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	INFLUENZA: DEVELOP PREVENTATIVE MEASURES				
1.1	Update, publish and monitor the implementation of Influenza Pandemic Plan	Jan – Dec 2005	BM, TC & HC	Expert Committee work completed and Pandemic Plan published	
1.2	Support and work with H.S.E. in developing 2005/6 National Influenza Vaccination Programme	Feb – Sept 2005	BM, TC, HC, AB & BN	2005/6 programme launched	
1.3	Respond to policy enquiries	Ongoing	BM, TC, HC, AB & BN	Policy issues resolved	
2	PUBLIC HEALTH EMERGENCY PLANNING				
2.1	Monitor the development and testing of public health emergency plans by the H.S.E.	Ongoing	BM, ET & NOD	Implementation monitored	
2.2	Provide secretariat for Steering Group	Ongoing	NOD	Secretariat provided	
2.3	Respond to PHEP policy issues	Dec 2005	BM, ET & NOD	Policy issues resolved	
3	IMMUNISATION/ VACCINATION POLICY				Q & F Action 14
3.1	Monitor and evaluate the implementation of the National Review of Immunisation/ Vaccination Programmes	Jan – Dec 2005	BM, TC & HC	Timetable agreed and implementation monitored	
3.2	Examine the feasibility of introducing a Vaccine Damage Compensation Scheme	Jan – Oct 2005	BM, TC & HC	Report on options submitted to Tánaiste	
3.3	Deal with issues arising from mumps outbreaks	Ongoing	BM, TC & HC	Issues addressed	
3.4	Respond to policy enquiries	Ongoing	BM, TC, HC, AB & BN	Policy issues resolved	

HLO	Div Obj.	POPULATION HEALTH – Develop policy in relation to health protection issues such as Immunisation, Infectious Diseases and to monitor the implementation of policy by the H.S.E.				
4	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
4	INFECTIOUS DISEASES					
4.1	In conjunction with H.S.E., agree terms of reference for review of infectious diseases policy, in 2006		Dec. 2005	BM & ET	Terms of reference agreed.	
4.2	Work with H.S.E. to determine impact of I.H.R.s on current infectious disease policy		Will continue into 2006	BM, ET & NOD	Impact determined	
4.3	Respond to infectious disease policy enquiries.		Ongoing	BM, ET, NOD, AB & BN	Policy issues resolved	
5	MEASLES AND RUBELLA Oversee the development and implementation of a national five year action plan for the elimination of measles and rubella in line with the WHO Strategic Plan for 2010					
5.1	Work with Measles Eradication Committee to develop plan		Jan – June 2005	TC	Plan submitted to Tánaiste	
5.2	National Plan reviewed and agreed.		June – Dec 2005	BM & TC	Plan agreed.	
6	EXPERT AND OTHER GROUPS SARS, SARI, BIOTHRREATS etc.					
6.1	Participate in and support the work of various expert and other groups in order to complete expert guidance. <i>(If I.H.C.A. dispute is resolved)</i>		Ongoing	BM, ET, NOD, AB & BN	Support provided to groups as required	
6.2	Provide secretariat to Biological Threats Group		Ongoing	NOD	Secretariat provided	
6.3	Review and clarify the role of each expert group, in consultation with the H.S.E.		June 2005	BM, ET & NOD	Roles reviewed	
6.4	Contribute to Government Task Force and Interdepartmental Group meetings in relation to emergency planning		Ongoing	BM	Meetings attended and contributions made	
Comments						
1. The nature of the work is such that issues arise from time to time (e.g. new commitments, unexpected problems) which affect and place strains on the ability of the section to achieve targets. Such issues may generate a substantial increase in the workload and develop into work that is of a more permanent rather than short-term nature. In such instances in light of restrictions on staffing levels, the business plan may require adjustment.						
2. Progress in meeting the targets above will be dependant on the co-operation of other agencies/bodies, particularly the H.S.E. Resolution of the I.H.C.A. dispute is essential if the actions at 6 are to be progressed.						

HLO	Div Obj.	Reproductive Health - Develop and evaluate policy on reproductive health			
4	3				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	REPRODUCTIVE HEALTH				
1.1	Draft memo for Government, speech, brief, press release, replies (Oireachtas and general), etc	Mar 2005	BM, LMCC TON & DN	Documents prepared	Q & F Action 67
1.2	Analyse implications of the Report of the Commission on Assisted Reproduction and organise Department's policy response	Apr 2005	BM, LMCC TON & DN	Implications analysed and Department's position agreed	
1.3	Assimilate and integrate Commission files into division.	July 2005	TON & DN	Files examined and incorporated into division's filing system	
2	EUROPEAN COURT OF HUMAN RIGHTS Assist with preparation of State's legal papers for legal proceedings in the European Court of Human Rights				
2.1	Liaise with Dept of Foreign Affairs and Attorney General on all aspects of legal proceedings	Ongoing	BM, LMCC TON & DN	Correspondence, emails, etc., replied to	
2.2	Explore Department's response to evolving legal argument	Ongoing	BM & LMCC	Issues examined	
2.3	Contribute to drafting of briefs as required for counsel	Ongoing	BM & LMCC	Text agreed and provided	
3	CRISIS PREGNANCY AGENCY Monitor and Evaluate the work of the C.P.A. in line with its statutory mandate				Q & F Action 28
3.1	Examine funding requirements and expenditure of agency	Ongoing	BM, LMCC TON & DN	Funding needs identified; estimates prepared	
3.2	Monitor implementation of C.P.A. strategy, including, in particular, contraceptive framework and appoint members of Consultative Committee	Ongoing	BM, LMCC TON & DN	Cross reference actions with strategy, issues identified and members appointed	
Comments					
1. The nature of the work is such that issues arise from time to time (e.g. new commitments, unexpected problems) which affect and place strains on the ability of the section to achieve targets. Such issues may generate a substantial increase in the workload and develop into work that is of a more permanent rather than short-term nature. In such instances in light of restrictions on staffing levels, the business plan may require adjustment.					
2. Progress in meeting the targets above will be dependant on the co-operation of other agencies/bodies					

HLO	Div Obj.				
4	4	Primary Care Services: Policy Development.			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	CHILD HEALTH SCREENING Prepare Department's policy response to reviews of child health screening service by the Programme of Action for Children				Q & F Action 14
1.1	Evaluate final reports on child health screening services	2005	BM, LMCC TON & DN	Issues examined and documented	
1.2	Determine policy response in consultation with medical and line divisions.	2005	BM, LMCC TON & DN	Facilitate agreement; response provided	
2.	OPHTHALMIC SERVICES Support HSE with its new function of managing Ophthalmic Services				
2.1	Liaise with HSE on the monitoring and evaluation of pilot community ophthalmology schemes	Apr 2005	BM, LMCC TON & DN	Evaluation completed	
2.2	Participate and monitor with HSE the review of the adult optometric services scheme	Ongoing	BM, LMCC TON & DN	Observations provided	
3	HOME BIRTH POLICY DEVELOPMENT				
3.1	Review report of the Domiciliary Home Births Group	Jan – Apr 2005	BM, TC & HC	Department response agreed by Deputy Secretary	
3.2	Liaise with H.S.E. in developing home birth policy	Apr – Dec 2005	BM, TC & HC	Policy agreed.	
4	MATERNITY AND INFANT CARE SCHEMES Revision of GP Contract to facilitate participation of Practice Nurses				
4.1	Review with H.S.E. outcome of working group established to devise protocols	Jan. – June 2005	TC & H.C.	Protocols agreed	
4.2	Contribute to negotiations on amendment to G.P. contract	June – Dec. 2005	TC & H.C.	Contract amended	

Community Health

HLO	Div Obj.					
4	4	Primary Care Services: Policy Development.				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
5	COMPLETE AND PUBLISH TATTOOING/BODY PIERCING GUIDELINES					
5.1	Working Group to complete Guidelines		Jan – June 2005	TC	Guidelines completed	
5.2	Guidelines published and circulated		June – Dec 2005	TC	Guidelines published	
Comments						
1. The nature of the work is such that issues arise from time to time (e.g. new commitments, unexpected problems) which affect and place strains on the ability of the section to achieve targets. Such issues may generate a substantial increase in the workload and develop into work that is of a more permanent rather than short-term nature. In such instances in light of restrictions on staffing levels, the business plan may require adjustment.						
2. Progress in meeting the targets above will be dependant on the co-operation of other agencies/bodies.						

HLO	Div Obj.				
5	5	Support Government Programmes and International Meetings and Commitments			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	PARLIAMENTARY PROCESS				
1.1	Prepare replies to P.Q.s and Ministerial Representations and prepare briefing material, speeches, Order of Business etc., as required	Ongoing	All staff	Material supplied within time limits	
2	FREEDOM OF INFORMATION				
2.1	Respond to F.O.I. requests within statutory time limits.	Ongoing	All staff	Material supplied within time limits	
3	ANNUAL REPORT / HEALTH STRATEGY ETC.,				
3.1	Provide updates and briefing material, as requested	Ongoing	All staff	Material supplied as required	
4	INTERNATIONAL COMMITMENTS.				
4.1	Contribute to the finalising of the International Health Regulations with W.H.O.	Ongoing <i>dependant on WHO time table</i>	BM, ET & NOD	Briefing material provided	
4.2	Analyse implications and initiate response on international conventions and agreements that arise in relation to reproductive health	Ongoing	BM, LMCC TON & DN	Compatibility assessed and documented	
4.3	Health Security Committee (E.U.)	Ongoing	BM	Meetings attended, contributions made	
Comments <ol style="list-style-type: none"> The nature of the work is such that issues arise from time to time (e.g. new commitments, unexpected problems) which affect and place strains on the ability of the section to achieve targets. Such issues may generate a substantial increase in the workload and develop into work that is of a more permanent rather than short-term nature. In such instances in light of restrictions on staffing levels, the business plan may require adjustment. Progress in meeting the targets above will be dependant on the co-operation of other agencies/bodies. 					

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
PMDS			
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms. Completed Personal Training and Development Plans returned to Training Officer	31/01/05	All staff
Conduct Interim Review	Completed interim Review form, Role Profile updated as necessary	30/06/05	All staff
Conduct Annual Performance and Development Review	Annual Performance and Development Review form completed	31/12/05	All staff
Quality			
Manage quality of work of division	Enhanced quality of work output, improved policies and procedures for division	31/12/04	BM responsible; all staff involved.
	Adopt Risk Management procedures as appropriate	Ongoing	BM responsible; all staff involved.
Utilise Correspondence Tracking System	Customer Charter target for response to correspondence met	Ongoing	All Staff
Improved records management	Procedures reviewed and strengthened if necessary	Ongoing	All Staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All Staff
Support Business Process			
	Ensure that 2005 business plan is prepared.	January 2005	BM & AP's
	Ensure that 2005 business plan is reviewed monthly at division level and quarterly with the deputy secretary	Throughout 2005	TM, BM & AP's
	Prepare 2006 Business Plan	End of 2005	BM & AP's
HR Policy			
Implement new H.R. Policy at Division level	Policy implemented	Ongoing	All staff

Department of Health and Children
Business Plan 2005

Division Name: Community Health – Drugs, HIV/AIDS and Dental

Division Head: David Moloney, Principal Officer

MAC Area: Primary Care

MAC Member: Tom Mooney, Deputy Secretary

Divisional Objectives:

SS HLO 1: High Performance :

To ensure that the organisational structures, legal and accountability frameworks and management capacity (systems and people) are in place so that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence, and monitored and evaluated on the basis of this evidence.

Div Obj 1: Arrange with the Health Services Executive the smooth transfer of agreed functions in a timely manner

Div Obj 2: To ensure appropriate legislative reform in relation to the regulation and control of drugs

Div Obj 3: To ensure that the appropriate arrangements are in place to improve the quality of dental services and the level of oral health in the overall population and to develop the community audiology services

SS HLO 4 Better Health for Everyone

To provide a policy and legal framework for the protection and promotion of health and well-being which gives active support to improving quality of life, targets inequalities in health and advances intersectoral working

Div Obj 4: To develop and to continue the development of policy to improve the health and well being of drug users within the context of the National Drugs Strategy

Div Obj 5: To develop policy in relation to HIV/AIDS/STIs

Div Obj 6: To ensure that the appropriate arrangements are in place to improve the quality of dental services and the level of oral health in the overall population

Part 1:

HLO	Div Obj.	Arrange with the Health Services Executive the smooth transfer of agreed functions in a timely manner				
1	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Contribute as appropriate to the 2005 phase of health reform and provide transitional support to the HSE		Jan – July 2005	All Staff		
1.1	Establish communications with HSE and provide support as required		Jan – July 2005	All Staff	Transition of functions to the HSE completed	
1.2	Assist in the smooth transfer of the relevant functions		July 2005	All Staff	Agreed functions being delivered by HSE	
1.3	Complete discussions with IPU		Apr 2005	DM, LK, NR	Key issues moved forward and being implemented by HSE	
1.4	Transfer Membership of NDST		July 2005	LK	HSE taking over RDTF and LDTF commitments	
1.5	Contribute as appropriate to Review of the Dental Treatment Services Scheme and provide support to the HSE in carrying out the Review		Dec 2005	DM, GC, SD, ID	- Finalise report of the Management Review Group - HSE assumes responsibility for Review	
1.6	Support HSE in implementing probity measures for DTSS		Jan – June 2005	All Staff	- Support HSE in establishing probity measures - Monitor and evaluate probity measures	
1.7	Support transition of development of Community Audiology Services to HSE		Jan – June 2005	All Staff	Transfer of functions to HSE completed	
Comments: Timing is contingent capability of HSE to engage with DoHC on these issues						

HLO	Div Obj.	To ensure appropriate legislative reform in relation to the regulation and control of drugs			
1	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Facilitate the passage of IMB Act 2004	Dec 2005			
1.1	Finalise discussions with OPC re IMB Bill	May 2005	DM, LK, NR	Bill Published	
1.2	Prepare briefing as required	Dec 2005	DM, LK, NR	Act Passed	
2	Publish benzodiazepine regulations				
2.1	Examination regulations and make appropriate amendments	Dec 2005	DM, LK, NR, C��F	Regulations published	
3	Consider miscellaneous amendments to MOD Regulations				
3.1	Consider amendments to reflect changing role of ambulance personnel	May 2005	LK, NR, C��F	Amendments to regulations made if considered necessary	
3.2	Initiate procedures to abolish amphetamine regulations	July 2005	LK, LMCG, SS	Updated system for Dexedrine in place	
3.2	Consider what legislation is required to facilitate new Precursor Regulations	Aug 2005	LK, NR, SS	Any necessary changes to legislation identified	
4	Administer regulations systems, quarterly and annual reports				
4.1	Complete and issue licences as appropriate	Ongoing	LMCG, SS	Licences completed and signed in agreed turnaround time	
The completion of the action on the IMB Bill is dependent on the timely input from other involved sections and the Chief Pharmacist and also timely returns from OPC. Access to legal advice is also required for consideration of the other legislative changes.					

HLO	Div Obj.	To ensure that the appropriate arrangements are in place to improve the quality of dental services and the level of oral health in the overall population.			
1	3				
Ref	Steps / Actions	Date	Person(s) responsib le	KPIs / Outputs	XRef
1	Oversee Appropriate Development of Fluoridation Policy	Ongoing			
1.1	Support work of Expert Body on Fluorides and Health	Ongoing	DM, GC, SD, ID	Positive contribution to policy development	
1.2	Facilitate HIQA participation in Irish Expert Body on Fluorides and Health	July 2005	DM, GC, SD, ID	HIQA assumes responsibilities	
1.3	Maintain and update regulatory framework for fluoridation	Dec 2005	DM, GC, SD, ID	Review legal framework	
3	Discharge Minister's statutory obligations				
3.1	Consider Amendment to Dental Hygienists Scheme	Jan - Dec 2005	DM, GC, SD, ID	Agreed position with Dental Council	
3.2	Facilitate creation of orthodontic therapist grade	Jan - Dec 2005		Agreed policy position	
3.3	Develop policy position on Dental Technicians	Jan - Dec 2005		Agreed policy position	
<p>The Chief Dental Officer post is currently vacant and the Dental Unit is currently carrying a HEO vacancy, while the Drugs Section is carrying a further long term vacancy due to maternity leave . These unfilled posts will impact on the ability of the Unit to deliver KPIs/Outputs over a number of areas.</p> <p>Timing and delivery will also depend on the ability and readiness of the Dental Council, HSE and HIQA to engage with the DoHC and to assimilate the functions identified for transfer.</p>					

HLO	Div Obj.	To develop and to continue the development of policy to improve the health and well being of drug users within the context of the National Drugs Strategy			
2	4				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Oversee the delivery of the health elements of the NDS			,	
1.1	Participate in the Mid-Term Review of the NDS	Mar 2005	DM, LK	Steering Group Report finalised	
1.2	Develop Health Implementation Committee in context of health service reforms	July 2005	DM, LK, NR CÓF, SS	Committee restructured in line with new mandate	
1.3	Finalise work of Early Referral (Action 19) Group	June 2005	DM, LK, LMCG CÓF, SS	Action 19 guidelines developed	
1.4	Establish Steering Group on Drug Related Deaths	June 2005	DM, LK, NR CÓF, SS	Steering Group on DRD set up	
2	Review contributions to evidence based drug treatments				
2.1	Support work of HRB	Ongoing	DM, LK, NR	Positive contribution	
2.2	Contribution to work of NACD	Ongoing	DM, LK, NR	Positive contribution	
3	Ensure Ireland plays its role in the EU and at International Level				
3.1	Contribute to action plan for implementing EU Drugs Strategy		LK, NR		
3.2	Contribute to the development of drugs policy at international level		DM, LK, NR	Contribution to work of EMCDDA, Pompidou, UN CND etc.	

HLO	Div Obj.					
2	5	To develop policy in relation to HIV/AIDS/STIs				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Develop position on making HIV a notifiable disease					
1.1	Establish expert group		Jan 2005	DM, LK, NR, SS	Group established	
1.2	Develop policy position		June 2005	DM, LK, NR, SS	Policy position developed	
2	Initiate review on policy on Sexually Transmitted Infections					
2.1	Development of consultation paper on STIs		July 2005	CÓF, NR, LK, DM	Paper developed	
2.2	Consult with relevant players		Dec 2005	CÓF, NR, LK, DM	Consultation complete	
3	Consider introduction of antenatal testing for Hepatitis B					
3.1	Establish group in consultation with HSE to make recommendations		Mar 2005	LK, NR, SS	Group established	
3.2	Develop policy position for HSE implementation		Aug 2005	LK, NR, SS	Policy paper developed	
Comments						

HLO	Div Obj.	Ensure that the appropriate arrangements are in place to improve the quality of dental services and the level of oral health in the overall population			
2	6				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	To oversee completion of Dental Research Programme	Jan - Dec 2005			
1.1	Finalise research projects and launch report of Dental Research programme	Jan - Apr 2005	MS, EB, TB	Conference to launch/publish survey reports	
1.2	Finalise and publish Children's Dental Survey	Dec 2005	MS, EB, TB	Oversee completion and launch/publish report	
2	Initiate review of Dental Strategy	Jun - Dec 2005			
2.1	Review Policy on Specialist Services	Jun - Dec 2005	MS, GC, EB, SD	Policy position on specialisation, Policy position on special needs dentistry	
2.2	Consider and address manpower planning issues in the public dental service	May - Dec 2005	DM, GC, MS, SD	Policy position on restructuring of public dental service	
Comments The Chief Dental Officer post is currently vacant and the Dental Unit is currently carrying a HEO vacancy. These unfilled posts will impact on the ability of the Unit to deliver KPIs/Outputs over a number of areas.					

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
PMDS operating fully in section	PMDS completed by all staff: Role Profiles Completed Interim Review Annual Review	Jan 2005 July 2005 Dec 2005	All Staff
Continue to improve Records Management and filing system in section, including CRAFTS	Ensure easy access to all current and stored files. Ensure correspondence is replied to within the allotted time	Ongoing	CÓF All Staff
Provide service in accordance with the Department's Customer Charter		Ongoing	All Staff
Training and Development	Ensure training needs of all staff are identified and met as far as possible	Ongoing	All Staff
The Chief Dental Officer post is currently vacant and the Dental Unit is currently carrying a HEO vacancy while the Drugs Section is carrying a further long term vacancy due to maternity leave. These unfilled posts will impact on the ability of the Unit to deliver services in a timely manner and in accordance with the Department's Customer Charter			

Department of Health and Children
Business Plan 2005

Division Name: General Medical Services

Division Head: Colm Desmond, Principal Officer

MAC Area: Primary Care

MAC Member: Tom Mooney, Deputy Secretary

Divisional Objectives:

SS HLO A: High Performance

To ensure that the organisational structures, legal and accountability frameworks and management capacity (systems and people) are in place so that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence, and monitored and evaluated on the basis of this evidence.

Divisional Objective 1:

Develop strong legal and other governance arrangements for the GMS and community drugs schemes

Divisional Objective 2:

Review Contractual, IR and Administrative arrangements for delivery of the GMS and community drugs schemes

SS HLO B: Responsive & Appropriate Care Delivery

To support the health system in developing capacity – infrastructure, technology, systems and people – to deliver timely and appropriate services; and to provide key policy guidance in the development of services to ensure high quality care is being delivered in the appropriate setting with a focus on patients, clients and their families.

Divisional Objective 3:

Orderly transfer of functions from Department to HSE

Divisional Objective 4:

Develop objectives and capacity of the Division (Part 2)

Part 1:

HLO	Div Obj.	Develop strong legal and other governance arrangements for the GMS and community drugs schemes				
A	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Pharmacy Review Group/Pharmacy Bill			CD, RH, TMk, CB, CS		
1.1	Obtain Government approval for PRG recommendations and to draft pharmacy bill		April 2005	CD, TMk, RH	Government approval obtained	Pharmacy Review Group (PRG)
1.2	Finalise heads of bill and initiate consultation process within Department and externally		Dept. June 2005 External Sept 2005	TMk, CB, CH	Heads circulated	
1.3	Implement separate approved recommendations relating to contract		Underway by Nov. 2005	RH, CS		
2	Revision of Drug Schemes					
2.1	Advance Deloitte & Touche and Joint D.Fin/D.H&C GMS Working Group reports in the context of GMS and community drug schemes		February 2005	CD, TD, RH,	D&T published and GMS Group proposals under active consideration	Deloitte & Touche and GMS Working Group Reports
2.2	Consider all proposals in detail in Deloitte & Touche,GMS Working Group and National Drugs Prescribing Group Reports		First half 2005	CD, TD, RH, CS	Prioritise options	
2.3	Provide briefing and proposals on the cost of the drugs schemes for the Cabinet Committee on Health and implement decisions for revision to the schemes.		Second half 2005	CD, TD, RH, CS	Options agreed & action commenced	
Comments						

HLO	Div Obj.	Review Contractual, IR and Administrative arrangements for delivery of GMS and community drugs schemes			
A	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Ongoing internal review of pharmacy agreement and contract				
1.1	Resolve outstanding IR issues with pharmacists	March 2005	CD, RH, CS	Issues resolved	
1.2	Develop policy for renegotiation of pharmacy contract in conjunction with HSE	Autumn 2005	RH, CS	Policy options	
1.3	Commence transfer of operation of contract to HSE.	Autumn 2005	RH, CS, CB, MC	Transfer process agreed	
1.4	Deal with ongoing legal cases	As arise	TMk	Cases addressed	
2	Policy on e-prescribing and dispensing				
2.1	Pilot community pharmacy IT project underway	June 2005	RH, CS, CB, MC	Pilot completed	
2.2	Develop policy on e-prescribing and e-dispensing in relation to pharmacy and GP IT in conjunction with HSE	October 2005	CD, TD, RH, CS	Consultation commenced with HSE	
3	Operation and renegotiation of IPHA Agreement				
3.1	Approval of reimbursable medicinal products through Products Committee	Ongoing	MC, CB	Drugs added and deleted as appropriate	
3.2	Obtain Government approval to negotiate new agreement	March 2005	CD, RH, CS	Policy approved	
3.3	Negotiations with IPHA and APMI	Second half 2005	CD, RH, CS	New IPHA Agreement	
3.4	Commence management and transfer of work of Products Committee and of IPHA Agreement to HSE	Sept 2005	MC, CB	Transfer of knowledge to HSE	

HLO	Div Obj.	Review Contractual, IR and Administrative arrangements for delivery of GMS and community drugs schemes				
A	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
4	Review and development of policy on GP services within the GMS Scheme					
4.1	Participate in LRC process to resolve IR issues and agree framework for GP Review		March 2005	CD, TD	Review framework agreed	
4.2	Participate, as part of Management team, with HSE in implementation of agreed framework towards GP Review		From April 2005	CD, TD	GP Review underway	
4.3	Consult with HSE on knowledge transfer of GMS Schemes		From April 2005	TD, EB, LD	Contacts established and process agreed	
5	Review policy on general practice issues					
5.1	Consult with ICGP and HSE on vocational training, continuing medical education and manpower issues		Continue agreed processes	CD, TD, EB, LD	Resolution of issues having regard to overall GP Review framework	
5.2	Development of policy for general practices		Ongoing	CD, TD, EB, LD	Establish parameters as part of GP Review	
5.3	Participate in PCTF ICT Project		Ongoing	TD	Participate in work of group	
5.4	GPIT Project – transfer functions to HSE		July 2005	CD, TD	Project transferred	
Comments						

HLO	Div Obj.				
B	3	Orderly transfer of functions from Department to HSE			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Project Plan				
1.1	Identify and agree with HSE the functions to be transferred	March 2005	All staff	Functions identified	
1.2	Develop a project management plan to handle handover	March 2005	CD, TD, TMk, RH	Project plan agreed	
1.3	Complete all actions identified and finalise handover	Depends on plan	All staff	Handover finalised	
2	IDTS				
2.1	Finalise interim arrangements for 2005 in conjunction with HSE	March 2005	CD, TD, EB	2005 GP budget targets issued by HSE	
2.2	Initiate assessment of scheme with HSE and commence handover	March 2005	CD, TD, RH	Complete assessment by HSE/Dept by end-June 2005	
3	Manage policy on GP Out of Hours Co-ops				
3.1	Review existing arrangements and transfer to HSE	April 2005	TD, EB, LD	Review underway by HSE/Dept	
4	Modernisation of GMS Scheme				
4.1	Participate in HSE led groups and assess proposals re: National Schemes Modernisation Project (NSMP), National Client Index Project (NCIP), Medical Card guidelines, Join NSMP/NCIP IT sub group	Ongoing during 2005	CD, TD, EB	Successful progress of various HSE research proposals and projects	
4.2	Finalise arrangements for GP visit card as it relates to the operation of GMS Scheme	March 2005	CD, TD, EB, LD	GP Visit card in operation at HSE level	
4.3	Bring examination of GP underpayments by HSE to a conclusion	March 2005	CD, TD	Definitive position established in conjunction with HSE	

HLO	Div Obj.	Orderly transfer of functions from Department to HSE				
B	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
5	Primary Care Reimbursement Service					
5.1	Attend Advisory Board as relevant and advise on all policy issues		Monthly	CD	Attendance at board	
5.2	Liaise with PCR Service on all GP contractual and pharmacy issues pending transfer to HSE		Weekly	All Staff	Maintain smooth operation of GMS and community drug schemes.	
Comments						

Part 2: Develop Objectives and Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	February 2005	All staff
	Personal Training and Developments returned	February 2005	All staff
Conduct first interim review	Completed review form, modified role profile form	End June 2005	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct 2005	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	PO, AP's
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Primary Care Task Force

Division Head: Fergal Goodman, Principal Officer

MAC Area: Primary Care

MAC Member: Tom Mooney, Deputy Secretary

High Level Objective 2:

[Responsive and Appropriate Care Delivery]

To ensure the system has the capacity in terms of infrastructure, technology, systems and people to deliver timely and appropriate services; and to lead and guide the development of services to ensure appropriate care is being delivered in the appropriate setting with a focus on patients, clients and their families.

Divisional Objectives:

Lead and promote the implementation of the strategy *Primary Care: A New Direction* which seeks to develop a new integrated, team-based model for the delivery of primary care services.

Divisional Objective 1:

Support the health service reform process in the context of the establishment of the HSE and the changing role and responsibilities of the Department of Health and Children.

Divisional Objective 2:

Provide policy direction to facilitate the system-wide establishment of primary care teams and primary care networks as the core units of service delivery in accordance with an agreed HSE implementation plan.

Divisional Objective 3:

Develop policies and initiatives aimed at encouraging innovative approaches to the provision of facilities and to support the development and operation of primary care teams and networks.

Divisional Objective 4:

Support implementation process through representative structures and communications activities.

Divisional Objective 5:

Develop an Information and Communications Technology (ICT) Strategy and Action Plan for Primary Care.

Part 1:

Part 1:

HLO	Div Obj.	Support the health service reform process in the context of the establishment of the HSE and the changing role and responsibilities of the Department of Health and Children.				
2	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Continue to support Health Service Reform Programme.		Through 2005	All staff	Facilitate and support reforms	
1.1	Support restructuring of the Department of Health and Children.		Through 2005	FG JG	Restructuring of the DoHC facilitated.	
1.2	Review role and future of the Primary Care Task Force to facilitate transition to a strategic policy-focused Department.		June 05	FG DH JH	Future role of PCTF agreed.	
2	Support development of primary care in Phase I regions as part of the hospitals reform programme.					
2.1	Require HSE to indicate specific developments for 2005 having regard to the funding provided.		March 05	FG	Developments identified and agreed.	
2.2	Ensure developments are progressed by HSE in line with the agreed objectives and priorities.		Oct 05	FG	Progress as per agreed plan.	
3	Ensure that future GP contractual arrangements are in line with objectives of Primary Care Strategy.				Aims of Strategy reflected in outcome of negotiations.	
3.1	Scope and define Department and HSE requirements		Mar 05	FG	Requirements defined in conjunction with GMS Div. & HSE	
3.2	Support and participate in negotiation process.		Dec 05	FG	Negotiations concluded.	
4	Develop legislative measures to give effect to decision on GP-only medical cards		Mar 05	FG	Legislation enacted	
Comments						
The review of the role of the Task Force and the implementation of any necessary changes in working arrangements will be dependent on the speed with which the HSE establishes its new national structures and is ready to assume its role of leading implementation. It is linked also to overall DoHC restructuring plans.						

HLO	Div Obj.	Provide policy direction to facilitate the system-wide establishment of primary care teams and primary care networks as the core units of service delivery in accordance with an agreed HSE implementation plan.				
2	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Require the HSE to prepare (as part of its corporate plan) a three-year Action Plan for the continued implementation of the Primary Care Strategy, having regard to available resources and priorities set by the Department.		June 05	FG	Action plan prepared and agreed.	
1.1	Determine development priorities for 2005.		March 05	FG DH	Priorities set. Basis for further PCT rollout agreed.	
1.2	Require HSE to specify developments planned for 2005 in the context of the development funding provided.		March 05	FG	Developments for 2005 agreed.	
1.3	Require HSE to ensure completion of geo-mapping and planning exercise in each region.		Aug 05	FG	Mapping exercise completed.	
2	Complete round of meetings with regions to review progress in 2004 (Subject to HSE agreement re process)		April 05	FG	Meetings completed	
3	Review Primary Care Team eligibility issues and set out options for further policy development		June 05	DH	Future policy options identified	
Comments						

Primary Care Task Force

HLO	Div Obj.	Develop policies and initiatives aimed at encouraging innovative approaches to the provision of facilities and services to support the development and operation of primary care teams and networks.			
2	3				
Ref	Steps / Actions	Date	Person(s) responsib le	KPIs / Outputs	XRef
1	Advance capital allowances proposal				
1.1	Progress taxation proposals with D/Finance.	Feb 05	FG with PPP Unit	Proposal considered and outline scheme agreed (subject to agreement with Dept/Finance).	
1.2	Develop detailed scheme in conjunction with HSE (dependent on decisions re Finance Bill)	Sept 05		Scheme developed	
2	Scope potential for policy changes or initiatives aimed at facilitating and stimulating the supply of primary care facilities				
2.1	Commence development of policy framework for involving other interests in the development of facilities for delivery of integrated primary care services.	Dec 05	FG	Initial options set out as basis for development of policy paper in 2006	
Comments					

Primary Care Task Force

HLO	Div Obj.	Support implementation process through representative structures and communications activities.				
2	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Work with and support the Primary Care Steering Group and its sub-groups.		Ongoing	All staff	Effective working relationship between TF and SG	
1.1	Work with Chairman of Steering Group on common policy objectives and work to be undertaken by Steering Group		Ongoing	All staff	Series of SG meetings held and support provided	
1.2	Facilitate Steering Group’s reappraisal of its role and work programme		April 05	All staff	Review completed and agreed by Dept and SG.	
2	Maintain Primary Care website and intranet.			JG, JH	Site maintained and usage monitored.	
2.1	Update site content as required.			JG, JH	Material updated as required.	
Comments						

Primary Care Task Force

HLO	Div Obj.	Develop an Information and Communications Technology (ICT) Strategy and Action Plan for Primary Care.				
2	5					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Ensure completion of ICT consultancy and submission of Consultants’ report to the Department.		April 05	FG DH	Consultants’ report submitted to Dept.	
2	Consider the follow-on work that may be required as a result of the consultants report.		July 05	FG (with Systems Div., HSE and National ICT Steering Group)	ICT Action Plan developed	
Comments						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Change Management Team

Division Head: Geraldine Fitzpatrick, Principal Officer

MAC Area: Strategic Policy

MAC Member: Frank Ahern, Assistant Secretary

Divisional Objectives:

SS HLO 1: To ensure that the organisational structures, legal and accountability frameworks and management capacity (systems and people) are in place so that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence, and monitored and evaluated on the basis of this evidence.

Div Obj 1:

Implement plan for restructuring DOHC in the context of the Health Service Reform Programme.

SS HLO 5: To support the implementation of the Government programmes and policies beyond the health sector and to help meet Ireland's health-related commitments at European and international level.

Div Obj 2:

Promote and lead the Public Service Modernisation programme in the Department by supporting Divisions in modernisation initiatives including:

**Production of Strategy Statement and Annual Reports, supporting the Business Planning process, Verification of Performance under *Sustaining Progress*; implementation of PMDS, provision of appropriate training and development opportunities and library services;
Developing and implementing Quality Customer Service initiatives and implementation of the Official Languages Act 2003.**

Part 1:

HLO 4	Div Obj.	Implement plan for restructuring DOHC in the context of the Health Service Reform Programme.				
A	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Coordinate plan for restructuring DOHC , in consultation with Internal Personnel and restructuring team		June to December 2005	GF/MD	Implementation completed	
1	Lead Core Functions Group		Jan – June 2005	GF		
1.1	Agree Final Report		Feb 2005	GF	Report circulated	
1.2	Draft memo to Govt for Core Functions Group		Mar 2005	GF	Memorandum prepared	
Comments						

Change Management Team

Initials	Name	Grade		Initials	Name	Grade
AB	Aileen Brennan**	EO		MK	Maureen Kenny**	CO
AM	Aoife Moran	CO		KMcN	Kathleen McNamee**	CO
CB	Catherine Burns	HEO		KMcG	Kaye McGovern**	CO
CC	Caitríona Connolly**	HEO		MBD	Marie Dullea	AP
CML	Chris Mac Lochlainn**	AP		MD	Mary Dowling**	AP
CMcM	Catherine McManus**	AP		MM	Michael Mulkerrin	HEO
DW	Deirdre Walsh*	PO		PR	Patricia Rigney	HEO
FC	Fiona Conroy**	AO		RC	Rose Curran**	CO
GF	Geraldine Fitzpatrick	PO		TC	Tina Clarke	CO
GO'S	Geraldine O'Sullivan	HEO		UO'H	Ursula O'Hanlon	EO
JT	Jean Troy	EO		Librarian	Vacancy	
LH	Liz Heffernan	CO				
** Worksharing * responsible for specific library project						

HLO	Div Obj.	Promote and lead the Public Service Modernisation programme in the Department by supporting Divisions in modernisation initiatives including:				
5	2	Production of Strategy Statement, Annual Reports, supporting the Business Planning process, Verification of Performance under <i>Sustaining Progress</i> ; Maintenance and Development of PMDS, Provision of appropriate training and development opportunities and library services; Developing and implementing Quality Customer Service initiatives and implementation of the Official Languages Act 2003, supporting networks				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Produce Strategy Statement					
1.1	Design, translate, print and distribute strategy statement 2005-2007		Mar 2005	CML/FC/ PR	SoS published	
2	Work with divisions to prepare and produce the Annual Reports		Jan – April 05	GF/MBD/ PR		
2.1	Prepare draft and submit Annual Report 2004 to MAC for approval.		Jan – Mar	GF/MBD/ PR	Draft submitted	
2.2	Complete report, design, translate and publish Annual Report 2004		Mar – Apr	GF/MBD/ PR	Report published	
2.3	Prepare and evaluate tender for design, print and translation of 2005 Annual Report		Nov – Dec	GF/MBD/ PR	Tender awarded	
2.4	Circulate request for information to Divisions		Dec	GF/MBD/ PR	Letters circulated	
3	Support Business Planning in Dept					
3.1	Prepare draft of 2005 BP for approval by MAC		Jan 2005	CML/FC	Draft submitted to MAC	
3.2	Finalise Plan and obtain approval		Feb 2005	CML/FC	Approved plan published on website	
3.3	Support MAC review of Business Plan		As specified by MAC	CML/FC	Organise review sessions, update material	
3.4	Review BP process and revise as needed for 2006 business plans		April 2005	CML/FC	Report to MAC on 2005 process	
3.5	Prepare for 2006 BP process		Oct 2005	CML/FC	New guidelines issued, sessions organised	

HLO	Div Obj.	Promote and lead the Public Service Modernisation programme in the Department by supporting Divisions in modernisation initiatives including:				
5	2	Production of Strategy Statement, Annual Reports, supporting the Business Planning process, Verification of Performance under <i>Sustaining Progress</i> ; Maintenance and Development of PMDS, Provision of appropriate training and development opportunities and library services; Developing and implementing Quality Customer Service initiatives and implementation of the Official Languages Act 2003, supporting networks				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
4	Support the Performance Verification process under <i>Sustaining Progress</i>					
4.1	Circulate requirements, obtain progress updates from Divisions, prepare progress reports for CSPVG		As required by CSPVG	CMcM/ CML	Reports provided to CSPVG on schedule	Sustaining Progress
5	Participate in the development of non-financial Performance Indicators (PIs) for MIF		Ongoing	CML/FC	Indicators developed	
6	Support Regulatory Reform initiatives in Department					
6.1	Liaise centrally with developments in RIA and other aspects of Regulatory Reform		Ongoing	CML/FC	Provide updates as required	
7	Implement PMDS					
7.1	Monitor and support implementation of PMDS, including upward feedback, in all sections		Ongoing	MD/PR/AB	2003 liaison officer survey and PO feedback obtained. PMDS timetable adhered to	
7.2	Produce Progress Report for 2004		End Feb	MD/PR/AB	Report produced	
7.3	Produce comprehensive “one-stop” guide to PMDS		End March	MD/PR/AB	Guide produced	
7.4	Meet PMDS training needs, including those arising from introduction of upward feedback		Ongoing	MD/PR/AB	Training needs met	Cross ref with training
7.5	Support Personnel Officer in cross-departmental group on integrating PMDS with HR policies and processes		Ongoing	GF/MD	Support provided as requested	

HLO	Div Obj.	Promote and lead the Public Service Modernisation programme in the Department by supporting Divisions in modernisation initiatives including:				
5	2	Production of Strategy Statement, Annual Reports, supporting the Business Planning process, Verification of Performance under <i>Sustaining Progress</i> ; Maintenance and Development of PMDS, Provision of appropriate training and development opportunities and library services; Developing and implementing Quality Customer Service initiatives and implementation of the Official Languages Act 2003, supporting networks				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
7.6	Implement “best practice” findings from Mercers as agreed by General Council.		Date depends on General Council Report	MD/PR/AB	Findings implemented when agreed by General Council.	
8	Implement Training and Development Strategy		Jan – Dec 2005	MBD/GOS /CC/JT/TC		
8.1	Produce Training and Development Reports and Opportunities Booklet		March	MBD/GOS /CC/JT/TC	T&D Report; T&D Opportunities booklet produced and circulated	T&D S Obj 1 and 4
8.2	Manage Soft Skills, IT and Specialist Training programmes		Ongoing	MBD/GOS /CC/JT/TC	Effective training programmes in place; courses evaluated, contracts reviewed	T&D S Obj 4
8.3	Source T&D opportunities to meet needs of restructured DoHC and decentralisation		Ongoing	MBD/GOS /CC/JT/TC	Opportunities developed and offered	T&D S Obj 7
8.4	Provide Informal T& D Opportunities		Jan – Dec 2005	CC/JT	12 Lunchtime seminars; 6 Oireachtas visits	T&D S Obj 4
8.5	Promote on-the-job learning		Jan – Dec 2005	MBD/CC/G OS/JT/ TC	Master classes held and support material advertised	
8.6	Manage and Review Refund of Fees Scheme		Ongoing	MBD/CC/G OS/JT/ TC	Review findings sent to MAC for approval	T&D S Obj 1
8.7	Manage T & D Budget		Ongoing	MBD/CC/GO S/JT/ TC/LH	Ensure Value for Money	T&D S Obj 1 & 5
9	Participate on all Inter-Departmental modernisation Networks		Jan – Dec 2005	GF/MD/M BD/PR/GO S/JT/CMc M/MM	Inputs provided, Info circulated, Meetings attended	

HLO	Div Obj.	Promote and lead the Public Service Modernisation programme in the Department by supporting Divisions in modernisation initiatives including:				
5	2	Production of Strategy Statement, Annual Reports, supporting the Business Planning process, Verification of Performance under <i>Sustaining Progress</i> ; Maintenance and Development of PMDS, Provision of appropriate training and development opportunities and library services; Developing and implementing Quality Customer Service initiatives and implementation of the Official Languages Act 2003, supporting networks				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
10	Maintain and improve Library Services					
10.1	Maintain Library Services in the absence of a librarian		Ongoing	CMcM/ UO'H/LH/ AM	Journals ordered and circulated	
10.2	Examine library review in the context of the move to the new location and restructuring and Co-ordinate with wider Health Services regarding shared library services		Ongoing	DW/CMc M/CB/UO H	Sanction for library posts and recruitment initiated	
11	Maintain and enhance Quality Customer Service					
11.1	Customer Service Desk provide services to customers (internal and external customer)		ongoing	CMcM/ MM/MK/A M/KMN/ RC/LH/	Number of queries dealt with feedback comment cards	CSAP
11.2	Chair, secretariat and support to QCS Liaison Officer Group and provide guidance to sections		ongoing	CMcM/ MM	Re-printed guidelines calendar	
11.3	Prepare, print and monitor implementation of Customer Service Action Plan 2005 – 2007		ongoing	CMcM/CB/ MM	Customer Action published. Monitoring reports produced	
11.4	Monitor Customer Charter including implementation of correspondence tracking system		ongoing	CMcM/CB/ MM	Monitoring reports produced	
11.5	Monitor and deal with complaints regarding the Department		ongoing	CMcM/CB/ MM	Number of complaints dealt with	
12	Support implementation of Official Languages Act in Department					
12.1	Assess support requirements in Dept. and provide supports as approved by		Feb '05	CML/FC	Support measures	

HLO	Div Obj.	Promote and lead the Public Service Modernisation programme in the Department by supporting Divisions in modernisation initiatives including:				
5	2	Production of Strategy Statement, Annual Reports, supporting the Business Planning process, Verification of Performance under <i>Sustaining Progress</i> ; Maintenance and Development of PMDS, Provision of appropriate training and development opportunities and library services; Developing and implementing Quality Customer Service initiatives and implementation of the Official Languages Act 2003, supporting networks				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	MAC				implemented	
12.2	Produce Scheme under Section 11 of OLA 2003 if requested		Within 6 months of request	CML/FC	Consultation completed, scheme published	
13	Support Partnership					
13.1	Provide secretariat to Partnership Committee		Monthly	AB	Meetings arranged, minutes circulated and agenda set.	
13.2	Develop role of Partnership		Monthly	MD/AB	Enhanced role	
13.3	Co–ordinate and produce <i>INFORM</i> magazine		Quarterly	MBD/PR/GO’S/AB	Magazines produced	
14.	Manage Change Management Fund					
14.1	Co-ordinate Department’s application for funding under the Change Management Fund		To be set by DOF	PR	Application processed	
15	Support Departmental Networks					
15.1	Provide secretariat to SMN and APEX: co-ordinate core group, arrange meetings, plenary sessions; organise annual conference.		Jan – Dec 2005	GF/MBD/JT/CMcM/UO’H	SMN & APEX networks active in DoHC	
Comments						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output.	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Review Filing System	Review completed	CMcM/CB/LH	
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		CML
Review implementation of Correspondence Tracking System	Completed review	Mar 2005	CMM
Continue to develop team working, communication and knowledge sharing	Monthly team meetings Monthly AP meetings	Ongoing	All staff
Develop Internal training capacity	Target 10 courses during 2005	Jan – Dec 2005	MBD/GOS/CC/J T/TC

Department of Health and Children Business Plan 2005

Division Name: Corporate Services, Freedom of Information, Records Management
Division Head: Chris Costello, Principal Officer
MAC Area: Strategic Policy
MAC Member: Frank Ahern, Assistant Secretary

Divisional Objectives:

A. Corporate Services:

SS HLO 2: To support the system in developing capacity - infrastructure, technology, systems and people - to deliver timely and appropriate services; and to provide key policy guidance in the development of services to ensure high quality care is being delivered in the appropriate setting with a focus on patients, clients and their families.

Div. Obj. CS-1: Undertake the lead role for the Department's re-location to modern accommodation.

Div. Obj. CS-2: Provide appropriate accommodation (pending relocation to new accommodation), supplies, equipment and services for staff in the context of the reform programme and improve the working environment in the Departments existing facilities.

Div. Obj. CS-3: Support Ministers and MAC.

Div. Obj. CS-4: Develop and implement tools to assist in the delivery and management of an improved service to our customers.

B. Freedom of Information:

SS HLO 3: To provide a policy and legal framework which ensures equity for public patients and enables all patients and clients to access the services they need.

Div. Obj. FOI-1: Extend Freedom of Information Act to the statutory and regulatory bodies not yet covered by the Act and to support FOI policy in bodies already covered.

Div. Obj. FOI-2: Support the development of Information Policy relating to FOI, Data Protection and Records Management.

Div. Obj. FOI-3: Enhance the Department's response to Freedom of Information and Data Protection legislation.

C. Records Management Unit:

SS HLO 2: To support the system in developing capacity - infrastructure, technology, systems and people - to deliver timely and appropriate services; and to provide key policy guidance in the development of services to ensure high quality care is being delivered in the appropriate setting with a focus on patients, clients and their families.

Div. Obj. RM-1: Make progress on upgrading the Records Management function of the Department to a satisfactory level, taking particular account of the reform programme and the process of restructuring.

Div. Obj. RM-2: Index by name records of individuals formerly in care of the State and to respond promptly and comprehensively to requests from outside the Department regarding these records.

Introduction:

The Division comprises three distinct Units (Corporate Services, Freedom of Information and Records Management) and has responsibility for a diverse range of functions, serving both external and internal customers of the Department.

Corporate Services Unit has a wide range of responsibilities, including:

1. The provision of suitable office accommodation, furniture, equipment and services for the Department, including security, portering, front-desk and mail delivery.
2. Proper maintenance of the Department's premises and equipment.
3. Maintenance of the Department's asset register.
4. In conjunction with the Office of Public Works (OPW), provision of accommodation for certain

health agencies that may be established from time to time.

5. Ensuring compliance with Health and Safety requirements.
6. Co-ordination of Department responses to PQs of a general nature, where no specific Unit within the Department has overall responsibility.

The Department's planned move to new accommodation in 2005 will be a major undertaking, in which Corporate Services will have a very major role to play.

Freedom of Information Unit has responsibility for ensuring that the Department's obligations under the Freedom of Information Acts are met. The Unit's functions include:

1. Co-ordination of all FOI requests received by the Department.
2. Liaison with FOI request applicants to clarify request details, optimise the quality of requests, administer fees etc.
3. Liaison and advice with other Units in relation to requests, procedures for decision making and general compliance with the FOI Acts.
4. Monitoring the Department's response and compliance levels to FOI requests.
5. Provision of training and support to FOI decision makers.
6. Making arrangements for internal reviews and supporting the work of the Internal Review Panel.
7. All dealings with the Office of the Information Commissioner (OIC) in relation to overall Department compliance and appeals.
8. Gathering and publication of statistical information in relation to FOI.
9. Participation on inter-departmental FOI groups.

10. Extension of the FOI Act to appropriate bodies in the health sector.
11. Related policy developments e.g in relation to access to certain records of the Department and the wider health sector and of appropriate non-disclosure provisions.
12. Ensuring that the publication requirements of the FOI Act are met by the Department.
13. Provision of advice and support on information governance including FOI and data protection.
14. Monitoring the impact of FOI and, with other agencies, developing methods of measuring improvements in access to information in the health sector.

Priorities for 2005 include further strengthening of the Department's capacity to meet all FOI requirements, ensuring that appropriate arrangements are in place for FOI in the restructured health service and extension of the FOI Act to additional health sector agencies. The Unit will concentrate on initiatives that reflect the role of the Department as envisaged by the Health Act 2004.

Records Management Unit currently has responsibility for two main areas of work:

1. The records management function within the Department, from creation and logging of files, their interim and longer-term storage arrangements, to their ultimate disposal or transfer to the National Archives. A very significant element of the Unit's work which relates to the continued refinement and deployment of proper records management procedures throughout the Department.
2. Ensuring that the Access to Institutional and Related Records (AIRR) project is brought to a successful and timely conclusion.
The AIRR project has two key objectives:
 1. Creation of a comprehensive archive of records held by the Department relating to the provision of child care services in the State, incorporating an index by name of those who spent time in care of the State.
 2. Identification and release of such records to persons who spent time in the care of the State as children.
3. The identification of all relevant files in the possession of the Department and the data capture elements of the AIRR project are expected to continue until the early part of 2006. Requesters are initially provided with any details available through the project at the time of their request and, thereafter, are given periodic updates as additional details are captured. The Unit's aim is to provide repeat searches and to correspond with requesters on an eight weekly cycle. Once all data capture aspects of the project are complete, it is envisaged that all those who have requested any relevant details regarding their period in residential care that may be in the possession of

the Department can quickly be given final responses and that the project can then be wound down.

The Unit's range of functions include:

4. Establishment and roll-out of record management policies throughout the Department.
5. Training and the provision of advice on records management for Department staff.
6. Management of Records Liaison Officer (RLO) Network.
7. All requests for information, discovery orders and follow-up searches relating to the AIRR project.
8. Liaising with the Office of the Information Commissioner in relation to FOI requests from those who spent time in institutional care and related AIRR requests.
9. All aspects of work relating to the Department's off-site storage facility, including the transfer of records to the facility and searching for, retrieval of and return of files to the facility.
10. Identification of appropriate files for transfer to the National Archives and agreement of arrangements for transfer.
11. Bringing new agencies under the National Archives Act 1986.

The Unit's priorities for 2005 include further strengthening and embedding of the Department's records management practices and procedures, progressing the AIRR project to its near completion and supporting the development of the recently announced National Records Index.

Staff of The Division:

	Corporate Services	Freedom of Information	Records Management
Principal Officer	Chris Costello (CC)		
Assistant Principal	Séan McCormack (SMcC)	Raymond Smyth (RS)	Edel Hennessey (EH) **
Higher Executive Officer	Roger Keane (RK)	Dave Walsh (DW) Billy McCarthy (BMcC)	Deirdre Meehan (DM) **
Administrative Officer			Sarah Lundberg (SL)
Executive Officer	Vincent Byrne **	Aodán O'Briain	
Staff Officer			Mary Barry
Clerical Officer	Bryan King Paul Plunkett	Leigh Snedker Maureen Tiernan	Adrian Brophy Eileen Grogan ** Erica Hill Odile Lynch June Rogers ** Philomena Young

** Staff members on work-sharing arrangements

Part 1:

Part 1:					
HLO	Div. Obj.	Undertake the lead role for the Department's re-location to modern accommodation.			
2	CS-1				
Ref.	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Complete the consultation process within the Department				
1.1	Arrange visits for staff representatives and management to proposed locations.	mid-Feb	CC; SMcC; RK	Agreed position within DoHC on location, and projected timescale.	
1.2	Liaise with OPW, developers etc. in relation to building design, timeframes etc.	Feb-Mar			
1.3	Undertake presentations, surveys etc. as may be required.	Feb-Mar			
2	Liaise with other DoHC Divisions to ensure that all requirements in relation to the new building are addressed.	Feb-Aug	CC; SMcC; RK	New accommodation meets DoHC requirements.	
3	Arrange delivery of building to agreed requirements.				
3.1	Agree detailed lay-out design – within DoHC, with OPW and architects.	Mar-May	CC; SMcC; RK	New building finished to agreed DoHC requirements.	
3.2	Agree and arrange provision of facilities e.g. restaurant, car parking etc.	Apr-Aug			
3.3	Ensure compliance with Health & Safety requirements.	Apr-Aug			
3.4	Oversee delivery of fit-out and facilities.	Apr-Sep			
4	Arrange the provision of all required services for new building.				
4.1	Undertake all required tendering requirements.	Mar-Jun	CC; SMcC; RK	New building available for occupation by September, with all necessary contracts in place.	
4.2	Ensure that arrangements are in place for management of facilities.	Apr-Jun			
4.3	Arrange procurement delivery and fitting of all necessary furniture, equipment, etc.	Jun-Sep			
5	Relocate to new accommodation.				
5.1	Detailed planning.	May-Jul	CC; SMcC; RK	DoHC relocated to new accommodation.	
5.2	Agreement with all DoHC Divisions.	Jun-Aug			
5.3	Undertake move to new building in accordance with agreed plan.	Aug-Sep			
Comments:					
1. Re-location to new DoHC accommodation is planned to take place in 2005. The project will require a very considerable level of input from Corporate Services. Once confirmed, careful consideration will need to be given to project timing and to the level of additional resources and outside assistance that will be required.					

HLO	Div. Obj.	Provide appropriate accommodation (pending relocation to new accommodation), supplies, equipment and services for staff in the context of the reform programme and improve the working environment in the Department's existing facilities.			
2	CS-2				
Ref.	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Secure appropriate accommodation for staff of the Department and associated agencies.	Jan-Dec	CC, SMcC, RK	All staff requirements viz a viz rooms etc. met	
1.1	Provide rooms/accommodation for staff within existing buildings.	Jan-Dec			
1.2	Facilitate provision of accommodation for various health agencies, as required, in conjunction with OPW.	Jan-Dec		All relevant agency accommodation requirements met	
1.3	Maintain adequate standard of housekeeping within current premises.	Jan-Dec		Staff facilities maintained in an acceptably safe and clean condition.	
1.4	Ensure that the Department's Quality Customer Services Action Plan targets are facilitated e.g. in relation to building accessibility and facilities; phone systems.	Feb-Dec		Appropriate Corporate Services support provided to enable Department to meet its QCS targets.	
1.5	Assist GRO in the transfer of premises from Joyce House/Racecourse Road Roscommon to Convent Road Roscommon.	Apr		GRO in situ in Convent Road new building.	
1.6	Assist GRO in sourcing new premises for the Research Room in Dublin.	Apr		GRO research facility established.	
1.7	Liaise with OPW, contractors, service suppliers.	Jan-Dec		Related requirements met.	
2	Provide goods and services.		SMcC, RK		
2.1	Organise tendering and purchasing of stationery, furniture, printing, office equipment, office supplies, catering, cleaning etc.	Jan-Dec		All supply and service requirements provided.	
2.2	Process all payments for supplies and services.	Jan-Dec		Payments to suppliers processed.	
2.3	Maintain asset register.	Jan-Dec		Up-to-date asset register maintained.	
3	Review all major contracts for supplies and services to ensure adequacy and compliance with procurement regulations.	Well advanced by Q2. Completion dependent on move to	CC, SMcC, RK	Appropriate contractual arrangements in place.	

HLO	Div. Obj.	Provide appropriate accommodation (pending relocation to new accommodation), supplies, equipment and services for staff in the context of the reform programme and improve the working environment in the Department's existing facilities.			
2	CS-2				
Ref.	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
		new building.			
4	Comply with Health and Safety legislative requirements.				
4.1	Finalise and publish updated Health and Safety Statement.	March	CC, SMcC, RK	Updated H&S Statement agreed and published.	
4.2	Implement Health and Safety policy and procedures in accordance with the Health and Safety Statement.	Jan-Dec	SMcC, RK	H&S policy and procedures implemented.	
4.3	Ensure that adequate up-to-date signage (including bi-lingual) is in place throughout all our buildings.	Sep	SMcC, RK	Appropriate signage in place throughout Department's buildings.	
Comments:					

HLO	Div. Obj.	Support Ministers and MAC			
2	CS-3				
Ref.	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Coordinate relevant PQs of a general nature, whose responses require input from a range of Divisions.	Jan-Dec	SMcC, RK	PQs of this nature responded to comprehensively and in a timely manner.	
1.1	Maintain tracking system and liaise with divisions to ensure timely responses.				
2	Organise state receptions and misc. functions.	Jan-Dec	SMcC, RK	All events successfully organised to meet requirements.	
2.1	Liaise with conference organisers and venue management.				
2.2	Negotiate provision of catering with various companies.				
2.3	Arrange printing of invitations.				
Comments:					

HLO	Div. Obj.	Develop and implement tools to assist in the delivery and management of an improved service to our customers.			
2	CS-4				
Ref.	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Implement procurement support system to meet Department's obligations under FMS.				
1.1	Review proposed solution and identify required enhancements.	Jan-Feb	CC, SMcC, RK	System to support Corporate Services in place.	
1.2	Consider alternative solutions that would meet requirements.	Jan-Feb			
1.3	Carry out User Acceptance Test on system.	Mar			
1.4	Agree revised operational procedures.	Feb-Mar			
1.5	Implement system on a pilot basis.	Mar-Apr			
1.6	Complete implementation.	May			
2	Introduce a range of improved records management related procedures within the Unit.				
2.1	Complete implementation and use of the CRAFTS file tracking system.	Jan-Feb	SMcC, RK	Improved procedures for filing in place.	
2.2	Complete implementation of Correspondence Tracker.	Jan-Feb	SMcC, RK	All correspondence tracked and dealt with in a timely manner.	
2.3	Arrange for transfer of all appropriate files to off-site storage – in conjunction with Records Management Unit.	In stages by Jul-Aug	SMcC, RK	Uncluttered working environment; Unit better prepared for its own relocation.	
Comments:					

HLO	Div. Obj.	Extend Freedom of Information Act to the statutory and regulatory bodies not yet covered by the Act and to support FOI policy in bodies already covered.			
3	FOI-1				
Ref.	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Support the establishment of the Health Service Executive (HSE).				
1.1	Liaise with HSE to clarify and agree respective roles.	Feb	CC, RS, BMcC	Briefing prepared; meetings held.	HA-2004 NHIS
1.2	Consult with HSE and FOI network on liaison arrangements and on portal content.	Mar		Agreement on liaison and on portal options.	
1.3	Advise on performance indicators for 2006.	Nov		Agreement on National Priorities.	
1.4	Monitor the operation of FOI throughout the restructured health service, in consultation with the HSE.	Mar-Dec		Understanding of FOI effectiveness and related issues. Informed basis on which to base future policy making decisions.	
2	Extend FOI Act to bodies not yet covered by the Act.				
2.1	Bring Professional and Statutory bodies under the Act (Government decision).	May	RS, BMcC	Bodies included under FOIA Regulation.	Belfast Agreement
2.2	Liaise with North-South bodies and Institute of Public Health on implementation of Code of Practice.	Jun		Adoption of code by Institute.	
3	Improve the operation of FOI networks.				
3.1	Consult networks on supports needed.	Mar	RS, BMcC	Consultation complete.	HIQA
3.2	Agree on supports needed.	Jun		Agreement.	
3.3	Arrange review meetings with Commissioners and Central Policy Unit.	Apr-Oct		Spring and Autumn meetings.	
3.4	Establish support arrangements.	Dec		Arrangements in place.	
Comments:					
2. The Department needs to support the Executive through the transition process in dealing with policy issues regarding the application of FOI to such an extended complex public body.					
3. The Department has agreed with Department of Finance that consideration will be given to the inclusion of all health entities under the FOI Act. Much preparatory work has already taken place and it is intended that this work will be completed in 2005. The implementation of FOI in all sectors has been enabled by networks of public bodies within which FOI officers develop and improve on FOI practice. HIQA is to provide specific support for information governance.					

HLO	Div. Obj.	Support the development of Information Policy relating to FOI, Data Protection and Records Management.			
3	FOI-2				
Ref.	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Contribute to the drafting of the Health Information Bill.				
1.1	Review the issues and requirements going forward arising from the Health Act 2004 and the National Health Information Strategy.	Feb	CC, RS	Statement of Issues and understanding of the related matters to be addressed in the HIB.	HA-2004 NHIS
1.2	Commission advice on health records policy.	Feb		Policy options.	NHIS
1.3	Consult with other units and make recommendations.	Feb-Jun		Recommendations.	
2	Review non-disclosure clauses in legislation (Section 32).				FOI Act.
2.1	Consult regulatory bodies and line division(s) on new provisions.	Feb	RS, BMcC	Brief for line division(s).	
2.2	Respond to Office of The Information Commissioner (OIC) positions in meeting with Joint Oireachtas Committee (JOC).	Jun		Brief for Assistant Secretary. Satisfactory outcome to meeting with JOC.	
3	Develop FOI performance indicators.				
3.1	Consult authorities and networks.	Jun	RS, BMcC	Proposed indicators.	NHIS
3.2	Agree and validate initial set.	Nov		Agreed set of PIs.	
4	Respond to Policy Initiatives from CPU and OIC.				
4.1	Consider proposals and reports.	Jan-Dec	RS	Submissions.	
4.2	Contribute to review of Section 28 provisions (children/deceased).	Feb-Nov		Policy position.	
4.3	Respond to 2003/98/EC Directive on re-use of public sector data.	Sep		Impact statement.	
4.4	Review and advise on OIC decisions.	Jan-Dec	RS, DW, BMcC	Updated web site. Advice on appeals.	
Comments: <p>4. The Health Act 2004 requires the Department to lead on national policy and monitor its implementation. This requires structures to support joint deliberation and the development of effective performance indicators which focus more on outcome than resource input. The balance of responsibility and the respective roles between the Department, the Health Services Executive and the Health Information and Quality Authority will only be worked out over coming months.</p> <p>5. The Data Protection (Amendment) Act 2003 greatly strengthens the provisions of the 1988 Act and also extends it to paper records where these can be readily retrieved using a subject identifier. The impact on consent, security, and retention practice require policy responses at a national level. Departmental responsibilities have yet to be assigned for the support of this work but it is anticipated that information governance will be addressed in the restructured organisation. The Department has however provided funding for the development of guidance for health professionals, which may be the basis of a code of practice under the new legislation.</p>					

HLO	Div. Obj.	Enhance the Department's response to Freedom of Information and Data Protection legislation.			
3	FOI-3				
Ref.	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Review FOI policy and procedures.				
1.1	Adopt standard filing and customer service practices.	Feb	RS, DW, BMcC	Systems in use.	DoHC-SS
1.2	Review 2004 and consult RLOs, decision makers and review panel.	Mar	RS, DW	Summary of issues.	
1.3	Develop training and support response.	Apr	RS, DW, BMcC	Plan circulated.	
1.4	Revise procedures and adapt case tracker.	Jun	RS, DW	Revised system.	
1.5	Produce monthly report on Department's compliance for Assistant Secretary.	Mar-Dec	RS, DW	Monthly reports.	
1.6	Produce quarterly statistics and analyses.	Jun-Dec	RS, DW	Reports on Healthnet.	
1.7	Implement new support system.	Dec	RS, DW	New support system.	
2	Use the potential of the Web to support the FOI function.				
2.1	Review and update DoHC response to Government policy on publication.	Apr	CC, RS, DW	MAC approval.	
2.2	Develop Web based FOI resources.	Jun		Case summaries and resource material on Department's web site.	
2.3	Review operation.	Dec		Review document.	
3	Support the internal review panel.				
3.1	Prepare briefs for reviews and appeals.	Jan-Dec	RS, DW	Briefs.	
3.2	Review membership of panel.	Jun		Appropriate membership to address requirements.	
3.3	Brief members of the review panel.	May & Nov		Briefings held.	
4	Ensure legislative compliance.				
4.1	Review Data Protection arrangements.	Apr & Nov	RS, DW	Status report. Department's registration updated as necessary.	Data Protection Act 2003.

HLO	Div. Obj.	Enhance the Department's response to Freedom of Information and Data Protection legislation.			
3	FOI-3				
Ref.	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
4.2	Commission FOI publications.	Oct		Publications available on Department's web site.	FOI Acts.
5	Introduce a range of improved records management related procedures within the Unit				DoHC-SS
5.1	Complete implementation and use of the CRAFTS file tracking system.	Jan-Feb	RS, DW, BMcC	Improved procedures for filing in place.	
5.2	Complete implementation of Correspondence Tracker	Jan-Feb	RS, DW, BMcC	All correspondence tracked and dealt with in a timely manner.	
5.3	Arrange for transfer of all appropriate files to off-site storage – in conjunction with Records Management Unit	In stages by Jul-Aug	RS, DW, BMcC	Uncluttered working environment; Unit better prepared for its own relocation.	
Comments: 6. The reduction in FOI request numbers will impact on decision makers. The flow of requests may be insufficient to maintain expertise while individual requests will be quite challenging to process. It is hoped to increase the use of web resources and of guidance which does not require decision makers to be familiar with the complexity of the Act. The Department of Finance's Central Policy Unit have issued Government approved guidelines regarding the publication of FOI request details on the web. In 2004 the Unit developed proposals for the implementation of these in the Department and some of the related web development is complete. It is proposed to pilot the initiative internally before publishing on the Department's web site.					

HLO	Div. Obj.	Make progress on upgrading the Records Management function of the Department to a satisfactory level, taking particular account of the reform programme and the process of restructuring.			
2	RM-1				
Ref.	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Develop the records management function				
1.1	Maintain the Records Liaison Officers network by updating membership, convening meetings and steering agendas.	Jan-Dec	SL, DM	Meetings as necessary; key issues conveyed to each line division.	
1.2	Engage professional records management consultancy assistance to review records management practices in DoHC and to make recommendations.	Nov	EH, SL, DM	Review completed and recommendations provided.	
2	Further develop and refine the Department's records management practice				
2.1	Evaluate usage of file tracking system (CRAFTS) throughout DoHC.	Feb and Aug	EH, SL	Evaluation and indication of measures necessary to achieve fuller usage	
2.2	Devise records management protocols for implementation throughout DoHC, incorporating CRAFTS usage.	Feb	EH, SL	Protocol in place and agreed with MAC.	
2.3	Provide training and retraining for RLOs and others in basic records management, CRAFTS and archiving.	Jan-Dec	SL, DM	Trained staff in place across all divisions	
2.4	Create an RLO noticeboard to include online assistance and FAQs.	Jun	SL, DM	Noticeboard up and running	
2.5	Provide induction training.	Jan-Dec			
3	Reduce the volume of inactive records held in DoHC				
3.1	Renew tender for off-site storage.	Jun	CC, EH, SL, DM	New and enhanced off-site storage contract in place	
3.2	Evaluate extent of project and progress achievable in 2005.	Apr	EH, SL, DM		
3.3	Provide support for line divisions to continue indexing and transfer of inactive files to off-site storage.	Jan-Dec	EH, SL, DM	Large volume of files removed from DoHC	
4	Identify files suitable for transfer to the National Archives and agree arrangements with National Archives.	Nov	EH, SL	Commitments under National Archives Act and regulations met	

HLO	Div. Obj.	Make progress on upgrading the Records Management function of the Department to a satisfactory level, taking particular account of the reform programme and the process of restructuring.			
2	RM-1				
Ref.	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
5	Support line divisions in relation to inquiries, discovery orders, examinations etc.	Jan-Dec as required	EH, SL, DM	Department's commitments met in a timely and effective manner.	
Comments: 7. It is not possible to predict the instances or level of support for line divisions that might be required in 2005, but given that such instances are likely to take top priority for their duration, such work may affect the Unit's delivery in other areas of the business plan.					

HLO	Div. Obj.	Index by name records of individuals formerly in care of the State and to respond promptly and comprehensively to requests from outside the Department regarding these records.			
2	RM-2				
Ref.	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Advance the Access to Institutional and Related Records (AIRR) project				
1.1	Progress the data capture of details from all records held by the Department.	Jan-Dec	EH, SL, DM	Capture of details nearing compilation by year end.	
1.2	Liaise with Childcare Division, the National Archives and the Adoption Board about the future direction of the project and its incorporation into the National Records Index.	Jan-Dec	CC, EH, SL, DM	Agreement on RMU participation in the development of the national index by April. Ongoing participation to agreed level throughout the remainder of the year.	
2	Respond promptly to AIRR requests from outside the Department				
2.1	Process all new requests within 20 working days.	Jan-Dec	CC, EH, SL, DM	All new requests dealt with in a timely manner.	
2.2	Eliminate existing request backlogs	Jun		All existing requests replied to and brought into the cycle for regular repeat searches.	
2.3	Ensure that all new requests for internal reviews are dealt with within normal time limits.	Jan-Dec		New internal review requests dealt with in a timely manner.	
2.4	Eliminate backlog of internal review requests.	Jun		All existing internal review requests dealt with.	
2.5	Renew AIRR searches every 40 working days.	Jan-Dec		Requesters given regular updates on Department's search for details related to their requests.	
2.6	Respond to requests from the Office of The Information Commissioner within required deadlines.	Jan-Dec		All necessary assistance provided to OIC to meet their AIRR-related requirements.	
2.7	Liaise with OIC as necessary on the AIRR project.	Jan-Dec		Agreement with OIC on issues and appropriate means of addressing them.	

HLO	Div. Obj.	Index by name records of individuals formerly in care of the State and to respond promptly and comprehensively to requests from outside the Department regarding these records.			
2	RM-2				
Ref.	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
2.8	Continue to research and add to the list of bodies from whom AIRR requesters might find personal information.	Jan-Dec	EH, SL, DM	Additional assistance provided to requesters to locate details they require. OLA obligations met.	
2.9	Correspond as required with requesters in accordance with the Official Languages Act.	Jan-Dec			
2.10	Maintain up-to-date and useful information regarding AIRR on the Department's Web site.	Jan-Dec			
3	Deal with institutional care records relevant to the Department, but held elsewhere.				
3.1	Establish the extent of such records and agree a course of action with those concerned.	Jun	CC, EH, SL, DM	Extent of records established and agreed course of action in place.	
3.2	Undertake necessary work relating to these records in accordance with agreed plans.	Apr-Dec			
Comments: 8. As progress on new and backlog FOI cases continues to add to the cyclical review queue, this target may no longer be achievable and may need to be reviewed in consultation with the Office of The Information Commissioner.					

Part 2: Developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms Personal Training and Developments returned	4 Feb 4 Feb	All staff All staff
Conduct first interim review	Completed review form, modified role profile form	End May	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	End Dec	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication Adopt Risk Management procedures as appropriate	Monthly Ongoing	PO responsible, all staff involved
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented Improved provisions of services through Irish	Ongoing	All staff

Department of Health and Children
Business Plan 2005

Division Name: External Systems

Division Head: Richard Nolan

MAC Area: Strategic Policy

MAC Member: Frank Ahern, Assistant Secretary

Divisional Objectives:

SS HLO 1: High Performance

Div Obj 1: Structural Reform --- Provide appropriate support and advice to the Health Service Executive in relation to the Management of ICT capital Funding which is transferring to the HSE, and also in relation to those functions remaining in the Department

Div Obj 2: Health Information Systems --- Support in relation to effective Implementation of Information Policy

SS HLO 5 : Supporting Wider Government Programmes and International Health Policy

Div Obj 1: Supporting Wider Government Programmes

Div Obj 2: Supporting International Commitments

Part 1:

HLO	Div Obj.	Provide appropriate support and advice to the Health Service Executive in relation to the Management of ICT Capital Funding which is transferring to the HSE , and also in relation to those functions remaining in the Department				
1	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Project Plan to be drawn up, in conjunction with HSE, to indicate milestones for training, hand over and support to be provided in 2005 to HSE and also to indicate working relationships in relation to those functions remaining in the Department		To start as soon as HSE in a position to get involved	RJN/AC, in conjunction with MO'N and MC	Agreed project plan	
1.1	Implementation of Project Plan		Mainly up to end June 2005 (Residual up to end Dec 2005)	All staff	Effective transfer of management of IT Capital Funding to HSE	
1.2	Requests for Payments to be processed and a recommendation for payment sent to HSE		Until transfer to HSE completed	MO'N/MC	Requests for payments timely processed and documentation updated.	
1.3	Various actions/steps associated with closing off all funding queries, files etc in relation to the period before Jan 2005		Up to end June 2005	MO'N/MC	All pre 2005 items closed off	
1.4	For all ongoing projects continuing into 2005 funding/approval status to be detailed and communicated/explained to HSE		Dependi- ng on when HSE in a position to engage with the Unit	All staff	HSE in a position to agree allocation of 2005 IT capital funding	
2.	Collation and Assessment of IT Funding proposals and participation in securing of IT allocations from Dept of Finance		Ongoing	RJN/AC/ MO'N	Securing of allocations and high quality assessments of proposals	

External Systems

HLO	Div Obj.	Provide appropriate support and advice to the Health Service Executive in relation to the Management of ICT Capital Funding which is transferring to the HSE , and also in relation to those functions remaining in the Department				
1	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
3	ICT Indicators for NDP monitoring		June 05	AC/MO’N	Indicators developed and implemented	
3.1						
Comments Full list of actions/dates dependent on project plan to be drawn up. Funding arrangements for non-HSE agencies has to be clarified before planning for handover can commence: this also has implications for work remaining in the Unit.						

External Systems

HLO	Div Obj.	Health Information Systems : Support in relation to effective Implementation of Information Policy			
1	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Telemedicine Strategy	End Mar 05	AC	Telemedicine Strategy Report	
2	IT related Actions in National Health Information Strategy	Ongoing	RJN/AC	Relevant NHIS Actions Progressed	
3	PCCC IT Strategy	End June 05	RJN	PCCC IT Strategy Report	
4	Agree policy and evaluation roles for DOHC in relation to health services IT and provide for carrying them out	Ongoing to Dec 2005	RJN/AC	Policy and evaluation roles effectively provided for	
5	Continue to participate in IT Standards Fora (NSAI and NHS)	Ongoing	RJN	Maintaining a presence until HIQA in operation	
6	National Health Service IT Steering Groups for eHealth, Infrastructure, Human Resources and Financial Systems	Ongoing	RJN (AC to deputise as required)	Ongoing monitoring, pending new IT governance arrangements being put in place (see 4 above)	
7	CAG Reports, PQs, Briefing Material requests etc (see comment below)	Ongoing	AC/MO'N	PQs etc answered	
8	Managing filing system, arranging meetings, responding to queries etc (see comment below)	Ongoing	MON MC	Effective provision of relevant administrative supporting requirements	
<p>Comments Details in relation to shift in focus from operation to policy/strategy and evaluation have to be worked out.</p> <p>Position in relation to National IT Strategy (AC on national project team, RJN on national steering group) to be clarified with HSE</p> <p>6 and 7 apply across all the divisional objectives in the business plan</p>					

External Systems

HLO	Div Obj.	Supporting Wider Government Programmes				
5	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Information Society Programme Implementation Group		Ongoing	RJN	DOHC effectively represented	
1.1	Dept of Social and Family Affair’s SAFE Project		End Q1 2005	RJN	Recommendations on guidelines for smart cards	
1.2	REACH Consultative Forum		Ongoing	RJN	eHealth effectively catered for in REACH services	
1.3	Information Society Fund		Ongoing	AC	eHealth projects approved	
Comments						

External Systems

HLO	Div Obj.	Supporting International Commitments			
5	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	European Commission Communication ‘ Action Plan for a European eHealth Area ‘	Ongoing	RJN/AC	EU 2005 milestones met	
2	British Irish Council Telemedicine Working Group	End May 2005	AC	British-Irish Summit	
3	European Commission Working Group on Interoperability	Ongoing	AC	DOHC effectively represented	
4	Contributions, briefings etc, as required, to other international bodies (Council of Europe etc) in relation to IT	Ongoing	RJN/AC	Contributions, briefings etc provided	
5	European Commission Working Group on European Health Insurance Card	Ongoing	RJN	DOHC effectively represented	
Comments					

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: General Register Office

Division Head: Kieran Feely, Principal Officer (Ard-Chláraitheoir)

MAC Member: F. Ahern

High Level Objective 5:

To support the delivery of the wider programme for government (outside of the delivery of health and personal social services) and to ensure Ireland's commitments at European Union and international level are met.

Divisional Objectives:

Facilitate eGovernment through developments in services and links with external agencies
Relocate GRO from Dublin to Roscommon

High Level Objective 6:

To continue to develop the capacity of our organisation and people to ensure delivery of a quality service to our customers.

Divisional Objectives:

Ensure that an equitable, high-quality, customer-friendly and increasingly efficient service is provided at our offices for personal callers, postal correspondence, Government agencies and users of our research facilities.

Progress the Civil Registration Modernisation Programme "Bringing Civil Registration into The 21st Century".

Support and improve the service provided at civil registration offices countrywide.

Part 1

High Level Objective: To support the delivery of the wider programme for government (outside of the delivery of health and personal social services) and to ensure Ireland's commitments at European Union and international level are met.				
Divisional Objective: Facilitate eGovernment through developments in services and links with external agencies				
Steps to achieve objective	Specific Actions	Completion date	Person(s) responsible	KPIs / Outputs
Provision of Internet facilities and information.	Maintain and further enhance the level of information about GRO services and the range of application forms on our Web site www.groireland.ie	Throughout 2005	E Flood, APO	More comprehensive, user-friendly and accessible Internet service.
	Provide a range of online services e.g. certificate ordering and online payment by credit card through the REACH public service broker.	Feb 2005 ¹	E Flood APO	
Contribute effectively to and benefit from developments under the eGovernment Public Services Broker (REACH)	Further enhance the range of data transferred electronically in relation to life events. ²	Throughout 2005	E Flood APO C Kennedy APO P Hearty HEO	REACH notified of relevant life events - thus enabling the relevant information to be made available to other public service agencies.
Comments: ¹ Delivery date will be determined by REACH online services launch – currently planned for Feb 2004. The GRO customer base includes citizens of many countries. ² Details relating to births and deaths registered electronically are presently notified to REACH, as are details of events “taken on” to the I.T. system, following their registration by conventional means. From the introduction of electronic registration of marriages, these details will also be notified electronically.				

High Level Objective: To support the delivery of the wider programme for government (outside of the delivery of health and personal social services) and to ensure Ireland's commitments at European Union and international level are met.				
Divisional Objective: Relocate GRO from Dublin to Roscommon				
Steps to achieve objective	Specific Actions	Completion date	Person(s) responsible	KPIs / Outputs
Implement new organisation structure for GRO Roscommon	Liaise with Personnel Division on plans for Roscommon relocation and associated staff redeployment.	April 2005	K Feely PO P Patterson APO E Flood APO	Smooth transfer of staff to Roscommon and successful redeployment of staff not relocating.
Put necessary arrangements in place for new building in Roscommon..	Liaise with the Office of Public Works, the contractors and the relevant other Government Departments on the implementation of the accommodation and related services brief for the new building. ¹	April 2005	K Feely PO P Patterson APO E Flood APO J Hickey HEO	Successful completion and fitting out of the new building.- ready for occupation by April 2005
Transition to new structure and service locations.	Gradually transfer functions from Dublin to Roscommon and undertake associated training, support and liaison arrangements.	April 2005	K Feely PO P Patterson APO E Flood APO C Kennedy APO HEOs in Dublin and Roscommon	Smooth transfer of functions and staff to Roscommon and successful redeployment of staff not relocating.
	Establish new Genealogy/family research facility in Dublin.	Fully operational in new location by July 2005 ²	E Flood APO A N Other HEO	Modern Genealogy/family research facility established.
	Carry out the necessary staff integration, development and training process, in both Dublin and Roscommon, for relocation of GRO to Roscommon.	Jan-Apr 2005	Management team.	Successful relocation of GRO to Roscommon from April 2005.

High Level Objective: To support the delivery of the wider programme for government (outside of the delivery of health and personal social services) and to ensure Ireland's commitments at European Union and international level are met.				
Divisional Objective: Relocate GRO from Dublin to Roscommon				
Steps to achieve objective	Specific Actions	Completion date	Person(s) responsible	KPIs / Outputs
Comments: ¹ The new Government services building in Roscommon, currently under construction, is expected to be available for occupation by April 2005. ² A new genealogy/family research centre in Dublin will be established to coincide with the GRO relocation to Roscommon. Pending the electronic availability of all historic registration records, the facility will continue to use paper-based records.				

High Level Objective: To continue to develop the capacity of our organisation and people to ensure delivery of a quality service to our customers.				
Divisional Objective: Ensure that an equitable, high-quality, customer-friendly and increasingly efficient service is provided at our offices for personal callers, postal correspondence, Government agencies and users of our research facilities.				
Steps to achieve objective	Specific Actions	Completion date	Person(s) responsible	KPIs / Outputs
Monitor and improve performance and delivery targets	Maintain average service time of <20 minutes for personal callers for certificates.	Throughout 2005	E Flood APO C Daly HEO	Efficient service for personal callers throughout the day.
	Further improve response to postal requests for certificates and copies. ¹	Further improvement throughout 2005	E Flood APO C Daly HEO	<15 working days at all times, reducing to 10 working days by December 2005.
	Prompt response (at least matching postal applications) to requests for certificates and copies by Internet; customers informed online of application status. ²	From introduction of Internet applications from Feb 2005	E Flood APO C Daly HEO	<15 working days, reducing to 10 working days by December 2005.
	Maintain and further improve turnaround time for users of the Research Room ³	Throughout 2005	E Flood APO AN Other HEO	< 24 hours for small orders (<15); < 3 working days for medium orders (<50); < 5 working days larger orders (>50)
	Provide assistance, as required, to users of the research room.	Throughout 2005	E Flood APO AN Other HEO	All customers enabled to carry out their research requirements.
	Assist public/health service organisations with research projects as required	Throughout 2005	E Flood APO	Required research achieved.

High Level Objective: To continue to develop the capacity of our organisation and people to ensure delivery of a quality service to our customers.				
Divisional Objective: Ensure that an equitable, high-quality, customer-friendly and increasingly efficient service is provided at our offices for personal callers, postal correspondence, Government agencies and users of our research facilities.				
Steps to achieve objective	Specific Actions	Completion date	Person(s) responsible	KPIs / Outputs
	Further improve the turnaround time for requests for Late Registrations ⁴	To be devolved to SRs on implementation of CRA in Feb 05	S. O'Cleirigh APO	Improved service.
	Further improve the turnaround time for Re-Registrations. ⁴		S. O'Cleirigh (APO) L. Mulryan (A/HEO)	Improved service.
	Maintain response time on clearance of civil annulments and foreign divorces	Throughout 2005	P Patterson APO	< 10 working days on average to respond to correspondence. Average processing time < 5 weeks.
Quality Customer Service developments	Develop, agree and implement GRO specific QCS guidelines - in line with QCS Action Plan	Developed by end March 2005; Implement from April 2005	K Feely PO P Patterson APO E Flood APO	Clear QCS policy and principles in place.
	Develop additional feedback mechanisms and procedures	June 2005		Enhanced feedback procedures in place.
	Establish Customer Panels	October 2005		Customer Panels in operation.
Language Equality	Ensure that personal callers and postal correspondence can be dealt with through Irish.	Throughout 2005	E Flood APO	Effective service provided through Irish.
	Introduce any necessary measures to comply with the Official Languages Act 2003.	March 2005	E Flood APO	Compliance with Official Languages Act 2003.

High Level Objective: To continue to develop the capacity of our organisation and people to ensure delivery of a quality service to our customers.				
Divisional Objective: Ensure that an equitable, high-quality, customer-friendly and increasingly efficient service is provided at our offices for personal callers, postal correspondence, Government agencies and users of our research facilities.				
Steps to achieve objective	Specific Actions	Completion date	Person(s) responsible	KPIs / Outputs
Comments: ¹ Improvements will continue to be achieved as the range of historic data available electronically increases. ² Internet applications will be introduced as relevant REACH broker facilities become available - including credit card handling. ³ The planned introduction of electronic access to records in the research room is expected to create opportunities for self-service by researchers, which, in turn, will provide greatly improved access to printed copies of records. ⁴ Each application for late registration or re-registration can entail a number of stages. These functions will be devolved to Superintendent Registrars following the enactment of the Civil Registration Bill.				

High Level Objective: To continue to develop the capacity of our organisation and people to ensure delivery of a quality service to our customers.				
Divisional Objective: Progress the Civil Registration Modernisation Programme "Bringing Civil Registration into The 21st Century"				
Steps to achieve objective	Specific Actions	Completion date	Person(s) responsible	KPIs / Outputs
Continue development of the new civil registration I.T. system to meet planned business changes	Implement electronic research facility in the GRO research room.	From July 2005	E Flood APO AN Other HEO	Enhanced research facilities – which will greatly improve facilities as full range of historic records is made available electronically.
	Further enhance the system to meet emerging implications following on from the enactment of the Civil Registration Bill.	Throughout 2005	Management Team	I.T. system in place to support implementation deadlines.
	Provide necessary training and assistance to Health Boards.	Throughout 2005	E Flood APO C Kennedy APO P Hearty HEO F Conlan HEO	Successful roll-out of new system releases in civil registration offices countrywide.
	Provide a national help desk support facility to deal with business and procedural issues.	Throughout 2005	E Flood APO P Hearty HEO	All queries dealt with promptly.
Historical data capture: Ensure that the electronic records are created to the highest standard in preparation for the national implementation of the new Civil Registration system	Quality assure and validate remaining register images and index data - dating back to 1845. ¹	December 2006	P Patterson APO	Full set of quality historic data available electronically through the Civil Registration system.
	Develop a policy in relation to the future maintenance of minor registers.	Develop system during 2005	P. Patterson APO E Flood APO	Policy agreed & system enhancements done

High Level Objective: To continue to develop the capacity of our organisation and people to ensure delivery of a quality service to our customers.				
Divisional Objective: Progress the Civil Registration Modernisation Programme "Bringing Civil Registration into The 21st Century"				
Steps to achieve objective	Specific Actions	Completion date	Person(s) responsible	KPIs / Outputs
	Implement policy relating to minor registers.	December 2005		Policy implemented.
Information technology developments	Agree contingency arrangements and establish and test the contingency site and procedures.	May 2005	E Flood APO P Hearty HEO	Contingency/test site operational and tested.
	Verify capacity of contingency/test site on an ongoing basis.	From time established	E Flood APO P Hearty HEO	Capacity of contingency/test site confirmed.
	Oversee and monitor contractual arrangements for outsourced support and enhancement of Civil Registration I.T. system.	Throughout 2005	E Flood APO P Hearty HEO	Effective system support + enhancements implemented to meet requirements.
	Monitor the operation and efficiency of the I.T. system and liaise accordingly with system developers, managed service provider and network providers.	Throughout 2005	E Flood APO C Kennedy APO P Hearty HEO	All issues affecting the operation of the I.T. system are identified and dealt with.
	Monitor operation of the I.T. support arrangements countrywide; identify and address any issues.	Throughout 2005	E Flood APO P Hearty HEO	
	Ensure that the necessary technical infrastructure is in place for new building in Roscommon.	March 2005	E Flood APO J Hickey HEO	I.T. infrastructure and networking in place to support operation in the new building.
	Establish appropriate I.T. support arrangements for Roscommon and Dublin research offices.	December 2005	E Flood APO J Hickey HEO	I.T. support arrangements in place.

High Level Objective: To continue to develop the capacity of our organisation and people to ensure delivery of a quality service to our customers.				
Divisional Objective: Progress the Civil Registration Modernisation Programme "Bringing Civil Registration into The 21st Century"				
Steps to achieve objective	Specific Actions	Completion date	Person(s) responsible	KPIs / Outputs
Implement the Civil Registration Act 2004	Introduce necessary regulations etc. to enable the non-marriage provisions of the Civil Registration Act to be commenced.	7 February 2005	K Feely PO S O'Cleirigh APO P Patterson APO C Kennedy APO	Provisions of the Civil Registration Act implemented (excl marriage provisions)
	Draw up and publish the necessary guidelines on the operation of the provisions of the Civil Registration Act.	31 January 2005	S. O'Cleirigh (APO) C. Kennedy (A/APO)	
	Introduce necessary regulations to commence marriage provisions of CRA	December 2005	K Feely PO P Patterson APO E Flood APO	Marriage provisions implemented
	Lead and co-ordinate the work of the Inter-Departmental Committee on Marriage Reform.	April 2005	K Feely PO S O'Cleirigh APO P Patterson APO	Consultation completed and report published.
Comments: ¹ This project was due to be completed in time for decentralisation. For a variety of reasons this will not happen. A decision on the future management of this project is under consideration.				

High Level Objective: To continue to develop the capacity of our organisation and people to ensure delivery of a quality service to our customers.				
Divisional Objective: Support and improve the service provided at civil registration offices countrywide.				
Steps to achieve objective	Specific Actions	Completion date	Person(s) responsible	KPIs / Outputs
Provide support to civil registration offices countrywide for queries in relation to service delivery and legislative provisions.	Resolve issues in relation to cases referred by civil registration offices.	Throughout 2005	P Patterson APO C Connolly HEO T Doyle HEO	Prompt and efficient response provided to all cases referred and queries raised.
	Clear divorce applications referred by civil registration offices.			
	Provide support and advice to civil registration offices on all aspects of legislation.			
Co-ordinate customer service delivery standards throughout the country	Agree Service Development Plans with the Health Boards and oversee their operation.	Agree by April 2005; oversee operation thereafter.	P Patterson APO A Mitchell HEO	Service Level Agreements in place & progress monitored
	Develop and deliver a comprehensive training programme for civil registration staff countrywide on the implications of the Civil Registration Act.	Feb 2005	Management team & HEOs	Civil Registration Act implemented successfully.
	Review of procedures and quality of customer service conducted on a regular basis.	Throughout 2005	Management Team	Further improvements in Civil Registration Service countrywide.
Comments:				

Part 2**Developing the capacity of the Division**

Objective	Output	Target completion date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms. Completed Personal Training and Development Plans returned to Training Officer	January 2005	All staff
Conduct first Interim Review	Completed interim Review form, Role Profile updated as necessary	June 2005	All staff
Conduct second Interim Review	Completed interim Review form, Role Profile updated as necessary	September 2005	All staff
Conduct Annual Performance and Development Review	Annual Performance and Development Review form completed	December 2005	All staff
Manage quality of work of division	Enhanced quality of work output, improved policies and procedures for division	Throughout 2005	K Feely (PO) - all staff involved.
Hold regular meetings and information sessions for staff on the Civil Registration Service modernisation programme and relocation of the office to Roscommon.	All staff informed.	To Apr 2005	Management Team
Ensure that staff are familiar with Freedom of Information procedures.	FOI courses – basic and advanced, as appropriate	Throughout 2004	All staff involved in responding to FOI requests.
Ensure that staff, especially those not planning to re-locate to Roscommon, have a greater understanding of	Relevant courses (to be agreed with Training Unit).	Feb-Apr 2005	Management Team and relevant staff members.

General Register Office

the health services and of the Department's role.			
Arrange/provide appropriate training to staff on all aspects of quality customer service.	Training provided; staff familiar with QCS procedures and objectives.	Throughout 2005	Management Team and HEOs.

Department of Health and Children
Business Plan 2005

Division Name: **Health Strategy and Reform Unit**
(Formerly Health Strategy Implementation Team)

Division Head: **Colm Keenan, Principal Officer**

MAC Area: **Strategic Policy**

MAC Member: **Frank Ahern, Assistant Secretary**

Divisional Objectives:

SS HLO 1 (High Performance): To ensure that the organisational structures, legal and accountability frameworks and management capacity (systems and people) are in place so that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence, and monitored and evaluated on the basis of this evidence.

Div Obj 1:

To support implementation of the Health Service Reform Programme and specific health service initiatives.

Div Obj 2:

Monitor and report on the implementation of the Health Strategy.

Div Obj 3:

Provide a communications resource to support the Reform Programme, including restructuring of the Department.

Div Obj 4:

Support the establishment of the Health Information and Quality Authority (HIQA).

Div Obj 5:

Continue effective and efficient management of the unit and the delivery of quality services.

Part 1:

HLO	Div Obj.	To support implementation of the Health Service Reform Programme and specific health service initiatives			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Cabinet Committee on Health				
1.1	Support Cabinet Committee on Health and Senior Officials Group	Per meeting schedule	Colm Keenan Eileen Keogh	Attendance at meetings Preparation of papers	SS 1
1.2	Co-ordination of Committee's work on behalf of DoHC	Per meeting schedule	Eileen Keogh, Edel O'Connor, Liam Preston	Cabinet Committee adequately supported	SS 1
2	Monitoring Committee on Health Service Reform				
2.1	Support smooth functioning of such arrangements as may be decided in relation to monitoring the Health Service Reform Programme.	Throughout 2005	Colm Keenan, Eileen Keogh, Edel O'Connor	Arrangements put in place and functioning effectively	SS 1
3	Development of Governance Frameworks				SS 1 SP 5.2.1
3.1	Finalisation of a framework for corporate and financial governance for the Health Service Executive.	Jan 2005	Teresa Hynes, Joan McKenna	Framework finalised	SS 1 SP 5.2.1
3.2	Issuing framework to HSE	Feb 2005	Teresa Hynes, Joan McKenna	Framework issued	SS 1 SP 5.2.1
3.3	Review & Evaluate Code of Governance submitted by the HSE under section 35 of Health Act 2004	Within 8 weeks of receipt	Teresa Hynes, Joan McKenna	Code evaluated & submitted to the Minister with a recommendation	SS 1 SP 5.2.1
3.3	Oversee the development of good governance arrangements for the HSE and directly funded bodies to include a range of issues including clinical governance, quality, risk management etc. This includes the preparation of a project plan for submission to MAC that will scope the project and identify key parties from outside the Unit who will need to be involved.	Mid 2005	Teresa Hynes, Joan McKenna	Background paper and initial project plan outline	SS 1 SP 5.2.1
4	National Health Consultative Forum				SS1 SP 5.2.1

HLO	Div Obj.	To support implementation of the Health Service Reform Programme and specific health service initiatives			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
4.1	Circulate report on proceedings of Nov 2004 Forum	Jan '05	Liam Preston	Report circulated	SS1 SP 5.2.1
4.2	Preparation of paper for consideration of future role, scope and composition of the Forum	End April	Colm Keenan, Eileen Keogh, Pauline Redmond, Liam Preston	Paper submitted for Ministerial decision	SS1 SP 5.2.1
4.3	Event planning and additional preparations associated with convening National Health Consultative Forum	May 2005	Eileen Keogh, Pauline Redmond, Liam Preston	Forum convened in November 2005	SS1 SP 5.2.1
4.4	Final preparations and onsite event management	Nov 2005	Eileen Keogh, Pauline Redmond, Liam Preston HSRU team	Efficient organisation of Forum proceedings	SS1 SP 5.2.1
5	Information sharing and transitional processes				SS 1
5.1	Develop mechanisms, in cooperation with HSE, for regular meetings between MAC and HSE senior management during the transition phase	Jan 2005	Teresa Hynes, Joan McKenna	Facilitation and servicing or arrangements for regular meetings.	SS 1
5.2	Facilitate the exchange of information relating to the Reform Programme at Principal Officer level in DoHC	Fortnightly meetings	Colm Keenan, Brian Brogan, Teresa Hynes, Helen Murray, Eileen Keogh, Pauline Redmond	Meetings organised.	SS 1
5.3	Agree an liaise on initial arrangement for handling of parliamentary affairs between the Department and the HSE during the transition period	Jan 2005	Colm Keenan, Brian Brogan	Arrangements agreed and liaison process in operation	SS 1
6	Health Services National Partnership Forum (HSNPF)				SS 1
6.1	Participate in HSNPF Coordination of material for participation in Forum meetings.	Monthly/ Bimonthly	Eileen Keogh, Liam Preston, Laurianne Muller	Effective participation at Forum	SS 1
Comments: Completion of the steps/actions outlined above and the achievement of the associated KPIs/outputs will be dependent on/may be impacted by the following factors:					

HLO	Div Obj.	To support implementation of the Health Service Reform Programme and specific health service initiatives				
1	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
<ul style="list-style-type: none">• Divisional staffing – this includes achieving a settled fully staffed team and for unit staff to be available to carry out their core responsibilities – for example one AP is currently engaged in two areas outside the units area of responsibility.• Potential impact of proposed physical relocation of the Department.• Relationships with, and input received from, other division/organisations which is particularly important in view of the coordinating role of the Division.• Rate at which the HSE builds up their corporate capacity to deal with enquiries and to manage certain actions.• Receipt of training - both in terms of skills required for current positions and future requirements in the context of roles in the Department post restructuring.						

HLO	Div Obj.				
1	2	Monitor and report on the implementation of the Health Strategy			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Prepare Annual Progress Report on Implementation of the Health Strategy <i>Quality and Fairness, A Health System for You for 2004-</i>				QF
1.1	Co-ordinate material from divisions on progress	Jan/Feb 2005	Brian Brogan, Christine Brennan, John O'Farrell, Laurianne Muller		QF
1.2	Co-ordinate material from the HSE and other government departments on progress	Jan/Feb 2005	Brian Brogan, Christine Brennan, John O'Farrell, Laurianne Muller		QF
1.3	Secure tenders for production and Irish Language translation, prepare annual progress report for 2004	Mar/April 2005	Brian Brogan, Christine Brennan, John O'Farrell, Laurianne Muller	Tender process completed and final Report prepared by April 2005	QF
1.4	Update Health Strategy Database	April 2005	Brian Brogan, Christine Brennan, John O'Farrell, Laurianne Muller	Information on Database quality assured	QF
2	Prepare Annual Progress Report on Implementation of the Health Strategy <i>Quality and Fairness, A Health System for You for 2005-</i>				QF
2.1	Request report from relevant government departments and agencies on specific strategy actions	Nov 2005	Brian Brogan, Christine Brennan, John O'Farrell, Laurianne Muller	Reports requested	QF
2.2	Request update from line divisions for 2004 progress report	Nov 2005	Brian Brogan, Christine Brennan, John O'Farrell, Laurianne Muller	Updates received	QF
Comments: Completion of the steps/actions outlined above and the achievement of the associated KPIs/outputs will be dependent					

HLO	Div Obj.	Monitor and report on the implementation of the Health Strategy			
1	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
<p>on/may be impacted by the following factors:</p> <p>As per Divisional objective 1:</p> <ul style="list-style-type: none"> • Divisional staffing. • Relocation of the Department. • Relationships with and input received from other division/organisations • Rate at which the HSE builds up their corporate capacity • Receipt of appropriate training 					

HLO	Div Obj.					
1	3	Provide a communications resource to support the Reform Programme, including restructuring of DoHC.				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Coordinate implementation of the communications strategy for the Reform Programme					QCS
1.1	Revamp healthreform.ie website		Mid 2005	Helen Murray, Joan McKenna	Content and design updated	
1.2	Respond to email queries received via healthreform.ie		As queries arise	John O'Farrell	Email queries responded to in a timely manner	
1.3	Liaise with HSE and other service agencies on implementation of the Reform Programme communications strategy		From Jan 2005	Helen Murray, Joan McKenna	Communications links established	
1.4	Liaise with interim HIQA in relation to communication activities		From Jan 2005	Helen Murray, Joan McKenna	Communications materials developed as required	
1.5	Provide content and resources for presentations as required.		As required	Helen Murray, Joan McKenna	Input and/or speakers provided as required	
2	Provide advice and support within the DoHC regarding internal communications activities related to the Reform Programme and restructuring.					
2.1	Develop communication tools to communicate with DoHC staff		From Jan 2005	Helen Murray, Joan McKenna	Updates provided via Health Reform News and email	
2.2	Liaise with Change Management, Personnel and other relevant DoHC divisions		From Jan 2005	Helen Murray, Joan McKenna	Ongoing Liaison	
2.2	Develop and manage internal communications calendar		From Jan 2005	Helen Murray, Joan McKenna	Calendar developed and updated regularly	
Comments: Completion of the steps/actions outlined above and the achievement of the associated KPIs/outputs will be dependent on/may be impacted by the following factors: <ul style="list-style-type: none">Rate at which interim HIQA is established.						

HLO	Div Obj.					
1	3	Provide a communications resource to support the Reform Programme, including restructuring of DoHC.				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
As per Divisional objective 1: <ul style="list-style-type: none">• Divisional staffing.• Relocation of the Department.• Relationships with and input received from other division/organisations• Rate at which the HSE builds up their corporate capacity• Receipt of appropriate training						

HLO	Div Obj.					
1	4	Support the establishment of the HIQA				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Support the establishment of the HIQA					SP 5.2.1
1.1	Arrange recruitment of Project Officer to support the Chair of HIQA		January 2005	Brian Brogan, Christine Brennan, John O'Farrell	Officer appointed	
1.2	Appoint the Board		Feb 2005	Brian Brogan, Christine Brennan, John O'Farrell	Board appointed	
1.3	Prepare appropriate legislation for appointment of interim HIQA		March 2005	Brian Brogan, Christine Brennan, John O'Farrell	SI submitted to Minister for signature	
1.4	Liaise with interim HIQA in relation to plans for the establishment of HIQA		From Feb 2005	Brian Brogan, Christine Brennan, John O'Farrell	Ongoing liaison	
1.5	Support the preparation of legislation for the establishment of the HIQA		Spring to end of 2005	Brian Brogan, Christine Brennan, John O'Farrell	Assistance provided to Legislation Unit	
1.6	Support flow of information between HIQA and the Department		From Jan 2005	Brian Brogan, Christine Brennan, John O'Farrell	Arrangements for information sharing are put in place and operating effectively	
Comments: Completion of the steps/actions outlined above and the achievement of the associated KPIs/outputs will be dependent on/may be impacted by the following factors: <ul style="list-style-type: none">• Rate at which interim HIQA is established.• Prioritisation of Legislation in 2005. As per Divisional objective 1: <ul style="list-style-type: none">• Divisional staffing.• Relocation of the Department.• Relationships with and input received from other division/organisations which is particularly important in view of the coordinating role of the Division.• Rate at which the HSE builds up their corporate capacity to deal with enquiries and to manage certain actions.• Receipt of training - both in terms of skills required for current positions and future requirements in the context of roles in the Department post restructuring.						

HLO	Div Obj.	Continue effective and efficient management of the unit and the delivery of quality services.			
1	5				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Provide parliamentary and administrative support				SS1
1.1	Manage the parliamentary affairs requirement for the section - PQs, Reps. etc.	From Jan 2005	Brian Brogan, HSRU team	Provide quality material in a timely manner	SS1
1.2	Provide speech material, briefings and other support as required	From Jan 2005	Brian Brogan, Christine Brennan	Provide quality material in a timely manner	SS1
1.3	FOI	From Jan 2005	Brian Brogan, HSRU team	Replies provided in a timely manner	SS1
1.4	Review national/international reports	From Jan 2005	Brian Brogan, Christine Brennan	Observations provided on reports as appropriate	SS1
2	Management of Division Budget				
2.1	Monitor and review of budget	Beginning of each month	Eileen Keogh, Edel O'Connor, Liam Preston	Effective management of budget	SS1
2.2	Prepare documentation for payment of invoices	From Jan 2005	Eileen Keogh, Edel O'Connor, Liam Preston	Timely payments	SS1
2.3	Prepare estimate for 2006	August '05	Colm Keenan, Eileen Keogh, Edel O'Connor	Budget estimate for 2006	SS1
2.4	Budget management of HIQA	August '05	Eileen Keogh, Edel O'Connor, Liam Preston	Budget estimate for 2006	SS1
<p>Comments:</p> <p>Completion of the steps/actions outlined above and the achievement of the associated KPIs/outputs will be dependent on/may be impacted by the following factors:</p> <p>As per Divisional objective 1:</p> <ul style="list-style-type: none"> • Divisional staffing. • Relocation of the Department. • Relationships with and input received from other division/organisations • Rate at which the HSE builds up their corporate capacity 					

HLO	Div Obj.	Continue effective and efficient management of the unit and the delivery of quality services.			
1	5				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs
	<ul style="list-style-type: none"> Receipt of appropriate training 				

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	Colm Keenan, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	All Staff
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Implementation of quality customer service commitments in Customer Charter and Action Plan		All staff
	<ul style="list-style-type: none"> • Timely response to correspondence and phone enquiries • Keeping clients informed of progress on outstanding issues • Use of correspondence tracking system • Timely response to internal customers 		Liam Preston, John O'Farrell
	Participate in Quality Customer Service Liaison Officer Group		Eileen Keogh, Pauline Redmond
	Improved provision of services through Irish		Eileen Keogh, Edel O'Connor

Department of Health and Children
Business Plan 2005

Division Name: Internal Audit

Division Head: Brendan Ryan, Assistant Principal Officer

MAC Area: Secretary General

MAC Member: Michael Kelly, Secretary General

Divisional Objectives:

High Level Objective 5:

Divisional Objective

- **The continued provision of an Internal Audit function which will conduct a programme of audits to provide reasonable assurances on the effectiveness of the Department's systems of internal control, the risk management processes in place and ensuring that the work of the Unit is carried out to the highest audit standards.**

Part 1:

HLO	Div Obj.	The continued provision of an Internal Audit function which will conduct a programme of audits to provide reasonable assurances on the effectiveness of the Department's systems of internal control, the risk management processes in place and ensuring that the work of the Unit is carried out to the highest audit standards.				
5	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	2005 Audit Programme			B Ryan Audit Committee Secretary General		
1.1	Finalise the audit report on the audit on the Department's payroll carried out during Nov/Dec 2004		18/2/05	B Ryan	Final report submitted to Audit Committee, Secretary General and C&AG	
1.2	Audit on Health Promotion Unit		31/3/05	B Ryan	Draft report available by end March 2005	
1.3	Audit on consultancy subheads – A7, F01,H00		30/6/05	B Ryan	Draft report available by end June 2005	
1.4	Audit on Travel and Subsistence		30/6/05	B Ryan	Draft report available by end June 2005	
1.5	Audit on Corporate Services – A4, A5, A6		30/9/05	B Ryan	Draft report available by end September 2005	
1.6	Audit on External Systems		30/9/05	B Ryan	Draft report available by end September2005	
1.7	Audit on Hospital Planning Office		31/12/05	B Ryan	Draft report available by end December2005	
1.8	Audit on Records Management/FOI		31/12/05	B Ryan	Draft report available by end December 2005	
Comments: The allocation of additional staff to the Internal Audit Unit is being considered as part of the overall restructuring of the Department. The proposed audit programme will be reviewed in the light of any such appointments being made.						

Internal Audit

HLO	Div Obj.	The continued provision of an Internal Audit function which will conduct a programme of audits to provide reasonable assurances on the effectiveness of the Department’s systems of internal control, the risk management processes in place and ensuring that the work of the Unit is carried out to the highest audit standards.				
5	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
2	Risk Management					
2.1	As part of each audit review the processes in place for the identification of risks and the controls in place to mitigate such risks		Ongoing through 2005	B Ryan Audit Committee	Assurance that a “Risk Register” is in place in each area audited	
3	ERDF/ESF Audits					
3.1	Follow up on the ERDF (1994-1999) programme with the HSE and each health region as required by the Dept of Finance, the Dept of Enterprise, Trade & Employment to prepare a rebuttal statement, if required, to the EU Commission when their decision is received		Ongoing through 2005	B Ryan	That a rebuttal statement is made available to the DoETE and the DoF on receipt of the EU Commission decision	
3.2	Carry out audits as required on the Interreg 111A ESF (2000-2006) programme		Ongoing through 2005	B Ryan	That any requests for follow up action from the DoF and/or the EU is provided	
4	Audit Committee					
4.1	Act as Secretary to the Audit Committee, prepare agendas for each meeting, prepare and agree minutes of each meeting, provide information as required by the Audit Committee		Ongoing through 2005	B Ryan Audit Committee	An active and relevant Audit Committee in place	
Comments: The allocation of additional staff to the Internal Audit Unit is being considered as part of the overall restructuring of the Department. The proposed audit programme will be reviewed in the light of any such appointments being made.						

Internal Audit

HLO	Div Obj.	The continued provision of an Internal Audit function which will conduct a programme of audits to provide reasonable assurances on the effectiveness of the Department's systems of internal control, the risk management processes in place and ensuring that the work of the Unit is carried out to the highest audit standards.				
5	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
5	Links					
5.1	Representation on the Heads of Internal Audit Forum (HIAF) including the Executive Committee		Ongoing through 2005	B Ryan	Continued representation on the HIAF	
5.2	Continue the development of appropriate links with the various Department Divisions and, in particular, the Professional Accounting Unit		Ongoing through 2004	B Ryan	Provision of an effective and relevant Internal Audit function	
5.3	Finalise an Information Brochure on the role of the Internal Audit Unit and the Audit Committee		31/3/05	B Ryan Audit Committee Secretary General	Brochure circulated within the Department and posted on the Intranet	
6	Audit Standards					
6.1	That the Institute of Internal Auditors (UK & Ireland) information, publications, standards, web site is available to the Internal Audit Unit		Ongoing through 2005	B Ryan	The Head of Internal Audit is an associate member of the IIA and is on the IIA's mailing list	
6.2	That a quality assurance evaluation is conducted on all audit work		Ongoing through 2005	B Ryan Audit Committee	That each audit report is evaluated by the Audit Committee	
7	Procurement					
7.1	That the annual report required under Circular 40/02 on contracts above a €25k (ex vat) threshold which were awarded without a competitive tender process is prepared		31/3/05	B Ryan T Woulfe-Flanagan Secretary General	Report submitted to DoF and C&AG	
Comments: The allocation of additional staff to the Internal Audit Unit is being considered as part of the overall restructuring of the Department. The proposed audit programme will be reviewed in the light of any such appointments being made.						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	30/01/05	All staff
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Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	Asst Sec responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Internal Systems

Division Head: Kevin Conlon, Principal Officer

MAC Area: Strategic Policy

MAC Member: Frank Ahern, Assistant Secretary

Divisional Objectives:

High Level Objective 5: Supporting Wider Government Programmes and International Health Policy

Div Obj 1:

On going development of the Departments ICT infrastructure to support the business objectives of the organisation.

Div Obj 2:

ICT Business Continuity /Disaster Recovery Plan

Div Obj 3:

External Office support: projects for GRO move to Roscommon, HSE disengagement, SSI, OCO, Adoption Board etc.

Div Obj 4:

Application Development Program: CRAFTS, Briefing System, eCabinet Phase II, Intranet strategy, HR project, Contacts Application etc.

Div Obj 5:

Move from Hawkins House?

Part 1:

HLO	Div Obj.	On going development of the Departments ICT infrastructure to support the business objectives of the organisation. This is a series of projects to enhance the ICT infrastructure in Hawkins House.			
5	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1.0	Secure remote access to network services for users	March	KC JW	Secure access for staff requiring connection to their systems from remote locations	
1.1	Evaluate tenders and award preferred vendor status		KC JW JB		
1.2	Agree project plan, implement test and commission		JW JB DN		
2.0	File and print failover for Hawkins House	April	KC JW	Ability to provide immediate access to data in the event of a failure of main server cluster	
2.1	Evaluate proposals from vendors		KC JW JB DN		
2.2	Test and implement		JW JB		
2.3	Integrate into current environment		JW JB SOC		
3.0	Changes to current data backup infrastructure	March	JW DN	Implement changes to present data backup arrangement for more effective and efficient solution	
3.1.	Agree changes, implement and draft new procedures		JW DN JR		
4.0	Secure access for third party vendors	February	JW JB	Ability to allow third party vendors access only the systems they have responsibility for.	
4.1	Implement new Agate solution		JW JB		
4.2	Agree test plan with external security vendors		JW		
Comments* The local business plan sets out the detail for all work projects delivered during the course of the year and for multi-annual projects. It is monitored on a regular basis and all staff of the unit have an input into the delivery of the projects set out in the plan. The local work plan is a major focus of the Unit’s activity. It is recognised that a considerable proportion of this work is operational in nature (around 80%), i.e. procurement, helpdesk, asset management and maintenance activities and as such is not fully reflected in the high level business plan. The work of staff at HEO and EO on these activities is a major contribution to the output of the Unit.					

HLO	Div Obj.	On going development of the Departments ICT infrastructure to support the business objectives of the organisation. This is a series of projects to enhance the ICT infrastructure in Hawkins House.				
5	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
5.0	Rationalise external offices data lines		July	JW DN JR JW SOC	More cost effective and resilient solution for data access to/from HQ	
5.1.	Comms Upgrade and firewalling Plan for move from ISDN to BIP Reach VPN solution			JW DN JR		
6.0	Lotus Domino upgrade		September	JW DN MOB JR AB RM	Upgrade to the latest version of the Notes product suite	
6.1.	Do impact assessment of benefits and work from upgrade			JW MOB		
6.2	Agree plan and if viable in 05			JW		
7.0	MIF FMS Upgrade		July	JW	Ability to better manage and track assets and also fulfil dual accounting requirement	
7.1.	Continue implementation of new FMS including asset tracking etc.			JW AMcK RB		
Comments* The local business plan sets out the detail for all work projects delivered during the course of the year and for multi-annual projects. It is monitored on a regular basis and all staff of the unit have an input into the delivery of the projects set out in the plan. The local work plan is a major focus of the Unit's activity. It is recognised that a considerable proportion of this work is operational in nature (around 80%), i.e. procurement, helpdesk, asset management and maintenance activities and as such is not fully reflected in the high level business plan. The work of staff at HEO and EO on these activities is a major contribution to the output of the Unit.						

HLO	Div Obj.				
5	2	ICT Business Continuity /Disaster Recovery Plan			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1.0	Carry out tender evaluation	February	KC JW JB	Following on from tendering exercise we may proceed to develop a comprehensive ICT BC/DR Plan	
1.1	Evaluate individual proposals		“ “		
1.2	Match against award criteria		“ “		
1.3	Award preferred vendor status to tenderer	February	“ “		
2.0	Agree scope of BC plan	March	“ “	Clear plan of action of what is included	
2.1	Draw up detailed project plan		“ “		
2.2	Assign tasks within project		JW JB DN AMcK		
2.3	Agree approach to other Unit's requirements within the plan		MOB		
2.4	Sign off draft plan	May		BC DR Plan	
3.0	Assess implementation projects arising from plan		KC JW MOB		
3.1	Agree priorities action items		KC JW MOB		
3.2	Liaise with other business units		JW AB		
4.0	Post implementation action items	Sept.	KC JW MOB	Agree action items with other business units (e.g. accounts) to assist in the implementation of the plan	
4.1	Assign responsibilities for testing and maintaining readiness of BC DR plan		KC		
Comments					

HLO	Div Obj.	External Office support: projects for GRO move to Roscommon, HSE disengagement, SSI, OCO, Adoption Board etc.				
5	3	Series of projects to support external offices.				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1.0	GRO Move to Roscommon		March	KC JW	Project to implement all GRO moves in 2005	With GRO PO
1.1	Agree scope with GRO on various moves and office redeployments in 2005		January	KC JW		
1.2	Develop and implement plan for various moves required by GRO over 2005		January – July	JW DN JB JR SOC AMcK RB		
2.0	HSE Disengagement		January	KC JW SC	HSE Abbey St not dependent on DoHC for ICT support	
2.1	Agree timescales with HSE					
3.0	Adoption Board File Tracking Systems and names database		February – May	MOB AB RM	Amended CRAFTS available for use by AB	With Adoption Board staff
3.1	Roll out of AB version of crafts and post implementation support					
4.0	Office of Ombudsman for Children		February – August	MOB JW JB DN AMcK	OCO planning move to new offices and implementation of file tracking solution	With OCO
4.1	Correspondence tracking and scanning solution operational in office		Mar-Nov	MOB AB RM		
5.0	SSI Inspection Systems		January - May	KC MOB	SSI will have access to new Inspectorate System	With SSI plans
5.1	On-going development and roll out in 2005					
5.2.	Sign off and go live, maintenance and staffing issues					
Comments						

HLO	Div Obj.	Application Development Program : CRAFTS, Briefing System, eCabinet Phase II. Intranet strategy. HR project. Contacts Application etc.
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Internal Systems

5	4				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1.0	Rollout of CRAFTS to outstanding section and agree protocol for use	January – September	MOB AB	Successful use of CRAFTS throughout the DoH&C using agreed protocol	With Records Management Unit
1.1	Agree work plan for outstanding sections		MOB AB RM		
1.2	Examine and plan future development issues, e.g. healthNET link		MOB AB RM TOL		
1.3	In conjunction with Records Management Unit develop protocol for use of CRAFTS				
2.0	ECabinet	Oct prov.		Availability for use by relevant staff	With Department of Taoiseach
2.1	Plan and implement rollout of Phases II and III including briefing, biometrics and messaging		KC MOB AB		
3.0	Briefing System	February – May	KC MOB RM	Availability throughout DoH&C	
3.1	Finalise scope and rollout test system to agreed areas	March	RM MOB		
3.2	Evaluate potential of system and agree implementation	April	KC RM MOB		
4.0	Correspondence Tracker	Jan-June	MOB AB RM	Working in all relevant areas.	
4.1	Move to remaining areas, tweak for some individual work areas				
4.2	Liaise on training and usage with Change Management				
Comments					

Internal Systems

HLO	Div Obj.	Application Development Program : CRAFTS, Briefing System, eCabinet Phase II, Intranet strategy, HR project, Contacts Application etc.			
5	4				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
5.0	Lotus Notes Tender	February	MOB JW DN AB	Development of framework approach to Notes development	
5.1	Evaluate current tender				
5.2	Develop development strategy for framework type approach	May			
6.0	Intranet Redevelopment	September	KC MOB TOL MOS	By end year progressing a definitive series of applications, available via healthNET, e- enabling routine tasks for all staff.	Intranet plan
6.1	Agree scope of work for healthNET and plan for items in scope	February	TOL MOS		
7.0	Evaluate impact of Departmental restructuring in terms of PQ's, data requirements, NHIS and reporting arrangements from HSE etc	Jan-August	KC MOB JW	Following consultation with other Units we would have a clear idea of the impact of a restructured Department on ICT delivery	With other Divisions BP
8.0	New web site for Dental Health Foundation	May	TOL MOS		With Community Health
8.1	Agree timescales with Community Health				
9.0	Evaluate proposal for new site for Casemix	February	KC TOL	Proposal at early stage, final output would be a comprehensive web site supporting the casemix function	With Finance Unit
9.1	Agree scope with Casemix Unit, discuss with ESRI	March			
9.2.	Proceed with development	Mar-October			
Comments: The list above shows the main items for application development, additional items are being examined at present and will be added if required during the course of 2005					

HLO	Div Obj.	Application Development Program : CRAFTS, Briefing System, eCabinet Phase II, Intranet strategy, HR project, Contacts Application etc.				
5	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
10.	Redevelop contacts database		September	MOB RM TOL	Integrate with Intranet project to produce an easy to use Contact database incorporating photographs etc.	
10.1	Scope out proposal			AB RM		
Comments						

Internal Systems

HLO	Div Obj.	5. Move of DoH&C Offices from Hawkins HSE				
5	5					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Further planning on this must await clarification on the dates for the move. If this is proceeding it will have a major impact on the preceding work program.					
1.1						
1.2						
1.3						
2						
2.1						
3.0						
3.1						
3.2						
4.0						
4.1						
Comments						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
Improved information available in the procedures and information databases.	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Personnel - HR

Division Head: Jimmy Duggan, Principal Officer

MAC Area: Strategic Policy

MAC Member: Frank Ahern, Assistant Secretary

Divisional Objectives:

SS HLO 1: High Performance

Div Obj 1: To manage Personnel's high level role in the restructuring/reform agenda and the service wide decentralisation programme, together with the Unit's central role in the decentralisation of the GRO to Roscommon and the proposed relocation from Hawkins House.

Div Obj 2: To realign the Personnel function to a strategic HR focus.

Div Obj 3: To manage legal and financial aspect of the Personnel function in parallel with emerging IR agenda.

Div Obj 4: To continue the management of the Personnel function and ensure delivery of a quality service in support of meeting the Department's business objectives.

Part 1:

HLO	Div Obj.	To manage Personnel's high level role in the restructuring/reform agenda and the service wide decentralisation programme, together with the Unit's central role in the decentralisation of the GRO to Roscommon and the proposed relocation from Hawkins House.			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	Ref
1	To work with the Project Office on the Reform agenda.	End '05	JD, EB, JB, SR		
1.1	Commence implementing agreement on re-structuring of Dept. with relevant stakeholders.			Agreement implemented.	
1.2	Negotiate agreement with the DoF with relation to numbers of posts			Agreement reached on numbers.	
1.3	Manage process of transfer of posts and staff to the HSE or other Depts as appropriate.			Process for transfer of posts in place	
2	Progress the GRO transfer to Roscommon	April '05	JD, EB, JB, SR		
2.1	Assist in the process of transferring the GRO to Roscommon			GRO transfer complete	
2.2	Arrange redeployment of staff arising from the move to Roscommon.			Staff redeployed	
3	Proposed move of Department premises.	Ongoing	JD, EB, JB, SR,CW		
3.1	Participate in negotiations with Unions and Partnership for smooth transfer to new premises.			Negotiations held	
4	To work with the Deptl PO led decentralisation group in assoc with the DoF central committee.	Ongoing	JD, JB,	Attend and input to all relevant DoF meetings	
4.1	Act as Dept designated liaison Officer				
Comments					

HLO	Div Obj.					
1	2	To realign the Personnel function to a strategic HR focus.				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	Ref
1	Progress the SMI agenda through the implementation of the HR policy.		Year end	JD, CW		
1.1	Set up implementation group		Mar '05	JD, CW	Implementation group established	
1.2	Draft additional supporting policies as per HR Policy document and monitor existing policies.		Year end	JD, CW	Policies drafted and monitoring in place	
1.3	Examine next steps for HR solution in conjunction with Systems Unit.		June '05	JD,CW	Decision made	
1.4	Met commitments given in Sustaining Progress Action Plan		As per plan	JD,CW	Targets met	
1.5	Continue to liaise with CMT on relevant cross cutting issues.		Ongoing	CW	Regular meetings with CMT	
Comments						

HLO	Div Obj.	To manage legal and financial aspect of the Personnel function in parallel with emerging IR agenda.				
1	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	Ref
1	To ensure joint management of the Dept’s Admin budget.		Ongoing	JD, JB	Improve Managemnt of Admin. Budget	
1.1	Attend quarterly meetings of the Admin Budget group.		Ongoing	JD, JB		
1.2	Work towards devolution of agreed aspects of the Admin Budget.		Ongoing	JD, JB		
1.3	Monitor expenditure in conjunction with Dept Accountant, unit heads and the DoF.		Ongoing	JD, JB		
2	To manage/monitor Dept’al travel requirements to ensure an efficient service for officers travelling & to achieve vfm for the Depart.		Ongoing	HD, TniM, CF	Efficient service for officers travelling	
2.1	Manage the travel requirements of departmental staff		Ongoing	HD, TniM, CF		
2.2	Monitor operation of travel policy.		Ongoing	HD, TniM, CF		
3	To manage all relevant aspects of employment law for contract/seconded staff.		Ongoing	JD, JB, HD, TniM	Monitor policy on Contracts/Secondmts	
3.1	Manage/monitor contract & seconded staff.		Ongoing	JD, JB, HD, TniM		
3.2	Manage competitions for contract/seconded staff as they arise.		Ongoing	JD, JB, HD, TniM		
4	To facilitate discussions under the emerging IR agenda.		Ongoing	JD, JB, HD, TniM		
4.1	Finalise the introduction of new methods of career progression for AHCPs grades.		Year End	JD, JB, HD, TniM	Finalise uplifts with AHCPs	
4.2	Manage cases taken under Equality Legislation and liaise with AG’s office on complex cases in general.		Ongoing	JD, JB, HD, TniM	Resolution of Equality Cases	
4.3	Administer the 1% PCW for Impact grades		Year End	JD, JB, HD, TniM	Finalise payments to Impact grades	

HLO	Div Obj.	To continue the management of the Personnel function & ensure delivery of a quality service in support of meeting the Department's business objectives.			
1	4				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	Ref
1	To continue the provision of Dept. wide customer service.	Ongoing	All staff	A more efficiently delivered Personnel function throughout the Department.	
1.1	Monitor staff work patterns and associated paperwork (annual leave, sick leave, wksharing, etc).	Ongoing	EB, SR, AW, IG, AMcG, SL, PQ, AS, GO'D, BF		
1.2	Process high volume staff queries.	Ongoing	EB, SR, AW, IG, AMcG, SL, PQ, AS, GO'D, BF		
1.3	Provision of service records support (superannuation, starting pay on promotion, purchase/transfer of service).	Ongoing	EB, AW, SL, AS, AMcG, IG		
1.4	Continue development of Personnel staff protocols in conjunction with 1.5 below.	Ongoing	EB, SR, AW, IG, AMcG, SL, AS, PQ, BF, GO'D		
1.5	Business process review following data clean up project and staff training.	As arises	All staff		
2	To liaise with DoF on statistical information including management of staff numbers (in line with DoF 3 yr reduction in CS numbers) and management of the Dept's vacancy position.	Dependent on restructuring programme	EB, SR	To meet DoF targets while maintaining staff numbers at optimum level.	
2.1	Work with management and unions in agreeing staff priority assignments to achieve DoF targets on staff reductions and meet the Department's business objectives.				
2.2	Ongoing management of Censis data.	ongoing	IG, AS		

HLO	Div Obj.	To continue the management of the Personnel function & ensure delivery of a quality service in support of meeting the Department's business objectives.				
1	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	Ref
2.3	Provision of statistical information to DoF throughout the year as increasingly required.		On going	AW, AMcG, IG, SL, AS		
2.4	Discussions with Division Heads on reassignment of a) GRO staff remaining in Dublin; b) DoHC staff and possibly CS wide staff applying for decentralisation.		On going	JB, EB, SR, AW, HD, AS, BF	Latest Roscommon decent date complied with. Working with DoF on wider decent prog.	
2.5	Preparatory planning of movement of staff and work blocks arising from the restructuring programme of the Dept and the forthcoming decentralising programme and proposed relocation from Hawkins House.		On going	JD, EB, SR, AW	Tracking process successfully commenced, working will with Reform Office and DoF.	
3	To facilitate complex work/life staff relations issues.		Ongoing*	EB, SR, AW	Progress made in resolving issues.	
3.1	Brokering individual sensitive staff difficulties.					
Comments * Having regard to anticipated increase in volume arising from expanded change agenda.						

Part 2: Developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms.	31/01/05	All staff
	Personal Training and Developments returned.	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form.	End June	All staff
Conduct second interim review	Completed review form, modified role profile form.	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed.	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication.	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate.	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary.	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented.	Ongoing	All staff
	Improved provisions of services through Irish.		

Department of Health and Children
Business Plan 2005

Division Name: Strategy Legislation Unit

Division Head: David Smith, Principal Officer

MAC Area: Strategic Policy

MAC Member: Frank Ahern, Assistant Secretary

Divisional Objectives:

SS HLO 1: High Performance – Health Structures Reform

Div Obj 1: Draft regulations required to bring sections 42, 79 and part 9 of the Health Act 2004 into operation

SS HLO 1: High performance – Health Structures Reform

Div Obj 2: Preparation of a General Scheme and Heads of Bill to provide for the establishment of the Health Information and Quality Authority (HIQA) and the Social Services Inspectorate (SSI) on a statutory basis and to address legal issues arising from the Health Information Strategy.

Part 1:

HLO	Div Obj.	Draft regulations required to bring sections 42, 79 and part 9 of the Health Act 2004 into operation				
1	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	<u>Regulations under section 42</u> <u>(establishment of Regional Forums)</u> Consult with Health Strategy Implementation Unit and Dept. of Environment, Heritage and Local Government on functional areas of Forums Prepare first draft of regulations Consult with Dept. of Environment, Heritage and Local Government on draft regulations. Consult with Minister’s Policy Adviser, MAC, Dept. of Finance and HSE Draft commencement order Consult with Legal Adviser on draft regulations and draft commencement order. Arrange for formal consultation with Min. for Environment, Heritage and Local Govt. Submit to Tánaiste for approval Arrange for processing of Statutory Instruments including laying before Houses of Oireachtas Arrange for notification of commencement of section and making of regulations to HSE, Dept. of Environment, Heritage and Local Government and to local authorities		End February End Feb. Mid March End March Early April Early April Mid April End April End April End April	D. Smith/ N.Lynch	Consultations completed 1st draft of regs. Completed Consultations completed Consultations completed Commencement order drafted Consultations completed Consultation completed Tánaiste’s approval received Regs laid before Houses of the Oireachtas Notifications issued	

HLO	Div Obj.	Draft regulations required to bring sections 42, 79 and part 9 of the Health Act 2004 into operation			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
2	<u>Regulations under Part 9</u> <u>(statutory complaints framework)</u> Consult with HSE, Offices of the Ombudsman and Ombudsman for Children and Dept. of Finance Prepare draft regulations and draft commencement order. Consult with Legal Adviser on draft regulations and draft commencement order Submit to Tánaiste Arrange for processing of S.I.s including laying before Houses of Oireachtas Arrange notification of commencement of section and making of regulations to HSE, Ombudsman and Ombudsman for Children	Feb to early June June to October Nov Nov Nov	D. Walsh 	Consultations completed Draft regs. and commencement order completed Consultation completed Approved by Tánaiste S.I.s laid before Houses of Oireachtas Notifications issued	
3	<u>Regulations under section 79</u> <u>(dealing with Oireachtas members)</u> Consult with relevant divisions within the Dept and MAC Consult with HSE and Dept of Finance Draft commencement order and regulations Consult with Legal Adviser on draft regs. and commencement order. Submit to Tánaiste for approval	Feb/ March March April April	D. Walsh D. Walsh/ D. Smith/ N. Lynch 	Consultations completed Consultations completed Order and regs drafted Consultation completed Approval received	

Strategy Legislation Unit

HLO	Div Obj.	Draft regulations required to bring sections 42, 79 and part 9 of the Health Act 2004 into operation				
1	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	Arrange for processing of Statutory Instruments including laying before Houses of Oireachtas. Arrange for notification of commencement of section and making of Regulations to HSE		April April April		Regulations laid before Houses of Oireachtas Notification issued	
Comments Achievement of the goals set out under this Objective will be dependant on <ul style="list-style-type: none">- timely clarification of policy issues;- co-operation from those consulted with;- adequate staff resources within the Unit to deal with workload; and- access to legal advice on a timely basis						

HLO	Div Obj.	Preparation of a General Scheme and Heads of Bill to provide for the establishment of the Health Information and Quality Authority (HIQA) and the Social Services Inspectorate (SSI) on a statutory basis and to address legal issues arising from the Health Information Strategy.				
1	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	Consult with Information Management Unit, Planning Unit, Interim HIQA and Data Protection Commissioner on proposals relating to HIQA.		Early March	David Smith/ Nora Lynch	Consultations completed	
	Consult with Child Care and Services for Older People on proposals relating to SSI.		Early March		Consultations completed	
	Prepare draft General Scheme and draft Heads on HIQA and SSI.		Mid March		1 st draft Scheme completed	
	Circulate to relevant divisions for comment		Mid March		Comments received	
	Consult with Dept. of Finance on draft General Scheme and draft Heads on HIQA and SSI		End March		Comments received	
	Consult with Legal Adviser		End March		Consultation completed	
	Based on recommendations of Report of Group on NHIS, draft General Scheme and draft Heads		April/May		Draft completed	
	Prepare draft Memo for Government		May		Memo drafted	
	Circulate draft memo and General Scheme and draft Heads to Government Departments for obs		Early June		Observations received from Depts	
	Finalise Memo to Government and submit to Government for approval to commence drafting Bill.		June		Approval received to draft Bill	
	Liaise with and clarify issues arising with Office of Parliamentary Counsel on draft Bill		June to Sept		Bill drafted	
	Prepare draft memo to Government seeking permission to publish		End Sept.		Memo drafted	

HLO	Div Obj.	Preparation of a General Scheme and Heads of Bill to provide for the establishment of the Health Information and Quality Authority (HIQA) and the Social Services Inspectorate (SSI) on a statutory basis and to address legal issues arising from the Health Information Strategy.				
1	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	Circulate draft memo and draft Bill to Government Departments for obs		October		Obs received from other Depts.	
	Finalise Memo to Government and submit with Bill seeking approval to public		End October		Approval to publish received	
	Support Minister in bringing Bill through Oireachtas		End Oct to mid December		Bill enacted	
Critical Success Factors Achievement of the goals set out under this Objective will be dependant on <ul style="list-style-type: none">- timely establishment of and reporting by NHIS group;- timely clarification of policy issues;- co-operation from those consulted with;- complexity of issues arising from inclusion of Health Information provisions- access to legal advice on a timely basis;- access to Parliamentary Draftsman within timeframe set down; access to Oireachtas time; and adequate staff resources within the Unit to deal with workload						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
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Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children

Business Plan 2005

Division Name: Health Services for People with Disabilities,
Travellers & Homeless Adults

Division Head: Brendan Ingoldsby, Principal Officer

MAC Area: Continuing Care

MAC Member: Donal Devitt, Assistant Secretary

Divisional Objectives:

SS HLO 1: High Performance

To ensure that the organisational structures, legal and accountability frameworks and management capacity (systems and people) are in place so that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence and monitored and evaluated on the basis of this evidence.

Divisional Objective 1:

- Conduct a critical examination of the present deployment of funding for disability services.

Divisional Objective 2:

- Conduct a strategic review of disability services in accordance with the commitment in "Sustaining Progress".

SS HLO 2: Responsive and appropriate care delivery

To support the health system in developing capacity - infrastructure, technology, systems and people - to deliver timely and appropriate services; and to provide policy guidance in the development of services to ensure high quality care is being delivered in the appropriate setting with a focus on patients, clients and their families.

Divisional Objective 3:

- Continue the development of information systems on the needs of people with disabilities.

Divisional Objective 4:

- Monitor the development of services for people with disabilities in line with national policy documents and Government commitments.

Divisional Objective 5:

- Support the Tanaiste in the discharge of her functions relating to Responsive and Appropriate Care Delivery for People with Disabilities.

High Level Objective 3: Fair Access

To provide a policy and legal framework which ensures equity for public patients and enables all patients and clients to access the services they need.

Divisional Objectives 6:

- Participate in the introduction and implementation of Disability Legislation.

High Level Objectives 4: Better Health for Everyone

To provide a policy and legal framework for the protection and promotion of health and well-being which gives active support to improving quality of life, targets inequalities in health and advances intersectoral working.

Divisional Objective 7:

- Implement Traveller Health Policy

Divisional Objective 8:

- Support the Tanaiste in the discharge of her functions in relation to Traveller Health.

Divisional Objective 9:

- Support the Tanaiste in the discharge of her functions in relation to Homeless Adults.

High Level Objective 5: Supporting Wider Government Programmes and International Health Policy.

To support the implementation of Government programmes and policies beyond the health sector and to help meet Ireland's health related commitments at European and international level.

Divisional Objective 10:

- Fulfil Department's commitment to the Council of Europe in relation to the Rehabilitation and Integration of People with Disabilities.

Divisional Objective 11:

- Implement Health Policy in relation to Homeless Adults.

Part 1:

SS HLO 1: High Performance

HLO	Div Obj	Conduct a critical examination of the present deployment of funding for disability services.		
1	1			
Ref	Steps/Actions	Date	Person(s) responsible	KPI's/ Outputs
1	Identify present funding and deployment			
1.1	Consult Finance Unit	Feb 2005	All	Consultation completed
1.2	Consult Health Service Executive	March 2005	All	Information received
1.3	Consult Stakeholders	June 2005	All	Meetings with Stakeholders
1.4	Prepare draft	December 2005	BI / All	Draft prepared
Comments: Cannot be achieved without appropriate technical support.				

HLO	Div Obj	Conduct a strategic review of disability services in accordance with the commitment in “Sustaining Progress”.		
1	2			
Ref	Steps/Actions	Date	Person(s) responsible	KPI's/ Outputs
1	Collate existing information on services			
1.1	Collect internal information	March 2005	All	Receipt of info
1.2	Consult HSE	May 2005	All	Completion of briefs
1.3	Prepare draft report	December 2005	BI / MM / LC	Completion of draft report
Comments :				

SS HLO 2: Responsive and appropriate care delivery

HLO	Div Obj	Continue the development of information systems on the needs of people with disabilities.		
2	3			
Ref	Steps/Actions	Date	Person(s) responsible	KPI's/ Outputs
1	Monitor the operations of National intellectual Disability Database			
1.1	Convene meetings of National Committee as required.	31-12-05	BI / MoR	Production of Annual Report
2	Monitor the operations of the Physical & Sensory Database			
2.1	Convene meetings of National Committee	31-12-05	BI / MoR / AMK	Data collection
Comments:				

HLO	Div Obj	Monitor the development of services for people with disabilities in line with national policy documents and Government commitments.		
2	4			
Ref	Steps/Actions	Date	Person(s) responsible	KPI's/ Outputs
1	Monitor intellectual and autism disability services			
1.1	Obtain quarterly reports	Quarterly	BI / MoR	Receipt of Reports
1.2	Meet HSE as appropriate	31-12-05	BI / MoR	Meetings held
2	Monitor physical and sensory disability services			
2.1	Obtain quarterly reports	Quarterly	BI / AMK	Receipt of Reports
2.2	Meet HSE as appropriate	31-12-05	BI / AMK	Meetings held
Comments:				

HLO	Div Obj	Support the Tanaiste in the discharge of her functions relating to Responsive and Appropriate Care delivery for People with Disabilities.		
2	5			
Ref	Steps/Actions	Date	Person(s) responsible	KPI's/ Outputs
1	Furnish replies to PQ's			
1.1	Research information	Specified date	All	100% of replies within time limit
1.2	Prepare reply	Specified date	All	
2	Furnish briefs for Minister, TD's etc			
2.1	Research	Specified date	All	Meet deadlines
2.2	Prepare brief	Specified date	All	
Comments				

High Level Objective 3: Fair Access

HLO	Div Obj	Participate in the introduction and implementation of Disability Legislation.		
3	6			
Ref	Steps/Actions	Date	Person(s) responsible	KPI's/ Outputs
1	Provide the appropriate supports necessary to progress implementation of the provisions of the Education for Persons with Special Educational Needs Act 2004 in relation to the health services	As required	BI / FF	Meet deadlines
1.1				
1.2	Advise Dept. of Education and Science as appropriate	As required	BI	100% attendance at meetings
	Participate in Council for Special Education established under Education for Persons with Special Educational Needs Act 2004			
2	Provide advice on Disability Bill 2004 (JELR) generally	Dec 2005	BI / FF	Attend meetings and Dail / Seanad sessions as appropriate
2.1	Participate in work related to progressing the legislative measures in Part 2 of the Disability Bill 2004			
2.2	Participate in consultation meetings with JELR, Taoiseach;s office etc and other relevant preparatory work	Dec 2005	BI / FF	Attendance at meetings and completion of relevant preparatory work
COMMENTS				

High Level Objectives 4: Better Health for Everyone

HLO	Div Obj	Support the implementation of Traveller Health Policy		
4	7			
Ref	Steps/Actions	Date	Person(s) responsible	KPI's/ Outputs
1	Meet 2005 targets in Traveller Health Strategy			
1.1	Consult Traveller Health Advisory Committee as required	Dec 2005	MoR / MK	Meetings with THAC
1.2	Consult relevant Divisions	Dec 2005	MoR / MK	Consultations held
2	Commence National Research Project			
2.1	Complete tendering process	Dec 2005	MoR / MK	Tender process completed
Comments:				

HLO	Div Obj	Support the Tanaiste in the discharge of her functions in relation to Traveller Health		
4	8			
Ref	Steps/Actions	Date	Person(s) responsible	KPI's/ Outputs
1	Furnish replies to PQ's			
1.1	Research information	Specified date	BI / MoR / MK	100% of replies within time limit
1.2	Prepare reply	Specified date	BI / MoR / MK	
2	Furnish briefs as required			
2.1	Research and prepare briefs	Specified date	BI / MoR / MK	Meet deadlines
Comments:				

HLO	Div Obj	Support the Tanaiste in the discharge of her functions in relation to Homeless Adults.			
4	9				
Ref	Steps/Actions	Date	Person(s) responsible	KPI's/ Outputs	
1	Furnish replies to PQ's				
1.1	Research information	Specified date	BI	100% of replies within time limit	
1.2	Prepare reply	Specified date	BI		
2	Furnish briefs as required				
2.1	Research and prepare briefs	Specified date	BI	Meet deadlines	
Comments:					

High Level Objective 5: Supporting Wider Government Programmes and International Health Policy.

HLO	Div Obj	Fulfil Department's commitment to the Council of Europe in relation to the Rehabilitation and Integration of People with Disabilities		
5	10			
Ref	Steps/Actions	Date	Person(s) responsible	KPI's/ Outputs
1	Continue duties as Committee member			
1.1	Attend CD-P-RR meetings	Dec 2005	BI / MM	Attend meetings
1.2	Provide briefing for draft plan	Dec 2005	BI / MM	Briefs prepared
2	Draft Comprehensive and Integral International Convention on the Protection and Promotion of the Rights and Dignity of Persons with Disabilities	Dec 2005	BI/FF	Attend meetings Briefing Material Prepared
3	Continue to liaise with other Government Departments in relation to the mainstreaming process	On-going	All	Attend meetings and enhance mainstreaming process
Comments:				

Health Services for People with Disabilities, Travellers & Homeless Adults

HLO	Div Obj	Support the implementation of Health Policy in relation to Homeless Adults			
5	11				
Ref	Steps/Actions	Date	Person(s) responsible	KPI's/ Outputs	
1	Implement "An Integrated Strategy"				
1.1	Co-ordinate meetings of Implementation Group	As required	BI	Attendance at meetings	
1.2	Participate in Cross-Departmental Team	As required	BI	Attendance at meetings	
2	Monitor Health spending on Homelessness				
2.1	Receive Reports from HSE	Dec 2005	BI	Receipt of Reports	
Comments:					

Part 2: Developing the capacity of the Division

Objective	Output	Target completion date	Person(s) responsible/ involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication.	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate.	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved customer service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Mental Health Services

Division Head: Bairbre Nic Aongusa, Principal Officer

MAC Area: Continuing Care

MAC Member: Donal Devitt, Assistant Secretary

Divisional Objectives:

High Level Objective: No 4. Better Health for Everyone

Divisional Objective No. 1: Support the work of the Expert Group on Mental Health Policy

High Level Objective: No. 4. Better Health for Everyone

Divisional Objective No. 2: Support the work of the Mental Health Commission in the implementation of the Mental Health Act, 2001

High Level Objective: No. 3. Fair Access

Divisional Objective No. 3: Monitor the implementation of the mental health component of the National Disability Strategy allocated under the Budget Day Disability Package

High Level Objective: No. 4. Better Health for Everyone

Divisional Objective No. 4: Contribute to development and implementation of National Suicide Prevention Policy

High Level Objective: No. 1 High Performance

Divisional Objective No. 5: Provide appropriate support and advice to the Health Service Executive and monitor progress

High Level Objective: No. 4. Better Health for Everyone

Divisional Objective No. 6: Provide support services to customers, internally and externally

Part 1:

HLO	Div Obj.	Support work of Expert Group on Mental Health Policy			
4	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Liaise with Chairperson and provide administrative support to group.	Mid 2005	M. Cuddy A. Corr J. Byrne	Meet targets as set by the Group	Quality and Fairness
1.1	Organise/attend / record meetings.				
1.2	Provide administrative support as directed by Chair.				
2	Support members of the group in their particular tasks.	Mid 2005	M. Cuddy A. Corr J. Byrne	Meet targets as set by the Group	Quality and Fairness
2.1	Organise, attend and record meetings of advisory subgroups.				
2.2	Provide administrative support to the advisory subgroups.				
3	Support Project Worker/Rapporteurs.	Mid 2005	M. Cuddy A. Corr J. Byrne	Support provided on request.	Quality and Fairness
3.1	Provide research and administrative support as required.				
4	Support Group in providing information to media/ general public.	Ongoing	B. Nic Aongusa M. Cuddy A. Corr	Accurate information conveyed to media/public as required	Quality and Fairness
4.1	Liaise with Press Office.				
4.2	Respond to media and general public queries				
4.3	Updating of website				
5	Participate as member of the Group.	Mid 2005	B. Nic Aongusa	Input into final policy document.	Quality and Fairness
5.1	Attend and participate in meetings.			Meet target for finalisation of subgroup report	
5.2	Chair Advisory Subgroup			Advice provided on request.	
5.3	Provide advice to Chairperson on policy issues as required.				
6	Support preparation/publication and launch of Final Report.	Mid 2005	M. Cuddy A. Corr J. Byrne	Meet targets as set by the Group.	Quality and Fairness
6.1	Organise tender process				
6.2	Liaise with printers				
6.3	Organise launch				
Comments: Progress under this objective is contingent on the decisions of the Chair and the members of the Group.					

HL O	Div Obj .	Support the work of the Mental Health Commission in the implementation of the Mental Health Act, 2001				
4.	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Oversee work of the Mental Health commission		On-going	A Gannon I Higgins	Up-to-date information to hand Quarterly Meetings	Mental Health Act, 2001
1.1	Monitor progress on the implementation of the Commission’s Business Plan.					
1.2	Measure levels of expenditure in relation to the cash profile of the Commission					
1.3	Ensure that the Annual Report is submitted to the Minister and laid before the Oireachtas					
			June 05		Meet target date as indicated	
2	Agree time scale with Commission for introduction of provisions of Mental Health Act, 2001.		March 05	B NicAongusa P Howard A Gannon I Higgins	Time-scale agreed for implementation of provisions of Mental Health Act, 2001	Mental Health Act, 2001
2.1	Regular contact with Mental Health Commission, HSE and implementation groups		On-going			
2.2	Prepare regulations under Section 66 of Mental Health Act, 2001		To be agreed with MHC			
3	Review procedures with new Inspector of Mental Health Services		Quarterly	B NicAongusa P Howard A Gannon I Higgins	Review of procedures completed	Mental Health Act, 2001
3.1	Organise meetings					
3.2	Review and monitor procedures and protocols for investigations of reps, complaints and inquiries by Inspector				Procedures working well	
4	Transfer of functions to Commission		To be agreed with MHC	B NicAongusa A Gannon I Higgins B. Sinclair	Timescale agreed, functions transferred.	Mental Health Act, 2001
4.1	Identify functions to transfer to Commission i.e. registration of mental health facilities.					
4.2	Prepare appropriate briefing and background information to facilitate transfer					
Comments Time scale for introductions of provisions of Act and preparation of regulations will be subject to MHC’s having the appropriate infrastructure in place. Regular meetings with Inspector and staff of the Commission will depend on Commission staff availability.						

HL O	Div Obj .	Monitor the implementation of the mental health component of the National Disability Strategy allocated under the Budget Day Disability Package				
3	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Agree with HSE the priority areas for development in 2005		Mid Feb 05	B NicAongusa P Howard A Gannon A Cronin	Agreement with HSE	Health Service Reforms
1.1	Establish contact with Mental Health Team in HSE/PCCC		Jan 05			
1.2	Meet and agree priorities		Mid Feb 05			
2	Develop and agree protocols for monitoring development in agreed priority areas		End of Feb 05	B NicAongusa P Howard	Agreement with HSE	Health Service Reforms
2.1	Meet and agree protocols					
2.2	Develop structures within the division to monitor agreed protocols		End of March 2005			Structures in place
3	Maintain up-to date information concerning progress		Ongoing	P Howard A Gannon M Cuddy A Cronin	Up-to date report on hand	Health Service Reforms
3.1	Keep in regular contact with HSE local area offices					
Comments: Achievement of these steps would be dependent on the identification and availability of relevant staff in the HSE/PCCC						

HL O	Div Obj .	Contribute to the Development and Implementation of national suicide prevention policy			
4	4				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Contribute to preparation/launch/implementation of a new Strategic Action Plan on Suicide Reduction.	Mid 2005	B. Nic Aongusa P. Howard M. Cuddy B Sinclair	Satisfactory input into process.	Quality and Fairness
1.1	Attend meetings of Steering Committee		P. Howard		
1.2	Review drafts of Report and advise Chair.		B Nic Aongusa		
1.3	Provide support services for launch of Report.				
1.4	Liaise with HSE re implementation of Action Plan.				
2	Monitor the implementation of the recommendations of the National Task Force on Suicide and other developments in relation to suicide prevention and research.	Ongoing	P. Howard M. Cuddy B Sinclair	Relevant information available when required.	Report of the National Task Force on Suicide
2.1	Liaise with HSE/Resource Officers and NSRG.	Ongoing			
2.2	Ensure that a report on suicide prevention measures is laid before the Houses of the Oireachtas.	30 Sept 05		Meet target date as indicated.	Health (Misc. Provisions) Act, 2001
2.3	Participate as member of the National Suicide Review Group.	Ongoing	P. Howard	Satisfactory input into process.	
3	Provide briefing/advice/information to the Tánaiste / Ministers of State / other members of Government/members of the public on Suicide Prevention policy.	As per deadline	B. Nic Aongusa P. Howard M. Cuddy B Sinclair	Accurate and timely response to requests.	
3.1	Draft Speeches, Briefs, PQs, Press releases. Draft replies to representations etc.				
3.2	Provide support to internal divisions, including Press Office.				
3.3	Provide information, by mail and phone to the public/service users.				
Comments Progress under step no 1 is contingent on the timely finalisation of the new strategic action plan.					

HL O	Div Obj .	Provide appropriate support and advice to the Health Service Executive in relation to the funding of the mental health services and monitor progress				
1	5					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Identify functions to be transferred to Primary Community Continuing Care (PCCC) in 2005			B NicAongusa P Howard	Agreement reached and functions transferred by end of year	Health Act 2004
1.1	Establish contact with mental health team in HSE/PCCC		End of Jan 05			
1.2	Identify functions to be transferred to PCCC (eg funding and liaising with voluntary organisations)		End of Mar 05			
1.3	Agree with the PCCC timescale for transfer of functions					
1.4	Transfer functions as agreed					
2	Accountability		Ongoing	B NicAongusa P Howard A Gannon M Cuddy A Cronin	Satisfactory arrangements in place	
2.1	Review + comment on HSE service plans					
2.2	Specify periodicity and content of reports from HSE					
2.3	Liaise with PCCC mental health personnel on issues arising					
3	Capital programme		Ongoing	B NicAongusa P Howard	Satisfactory arrangements in place	
3.1	Clarify arrangements for capital programme					
4	Assist in future development of Performance Indicators		Ongoing	P Howard		
4.1	Serve as member of working group					
Comments						
Achievement of these steps would be dependent on the identification and availability of relevant staff in the HSE/PCCC						

HL O	Div Obj .	Provide support services to customers, internally and externally				
4	6					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Provide briefing and advice to the Tánaiste/Minister of State and other members of Government		As per deadline	All staff as appropriate M. Cuddy B. Sinclair	Accurate and timely response to requests	CSAP
1.1	Draft speeches, briefs, PQs, press releases. Draft replies to representations etc.					
1.2	Attend meetings as appropriate.					
1.3	Process National Lottery Applications					
2	Provide support to public/service users		As per deadline	All staff	Accurate and timely response to requests	CSAP
2.1	Provide information, by mail and phone to the public/service users re mental health services					
3	Provide support to internal divisions, including Press Office		As per deadline	All staff	Accurate and timely response to requests	CSAP
3.1	Draft briefs/contributions to speeches, reps etc. to divisions within the Department					
4	Record Management		Ongoing	All Staff	Up-to-date and accessible records maintained.	CSAP
4.1	Ensure that files are maintained and recorded on CRAFT System			A. Gannon J. Byrne		
4.2	Ensure that all correspondence is registered on the Correspondence Tracking System as appropriate			All Staff		
4.3	Keep accurate records of suicides/deaths/injuries notified to the former Inspectorate*			J. Byrne		
4.4	Arrange for the registration of health board hospitals under the Mental Treatment Act, 1945*			M. Cuddy B. Sinclair		
Comments: Contingent on staff numbers and skill mix in the Division being maintained at current levels. *These functions are expected to transfer to the Mental Health Commission in due course.						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish	Ongoing	B NicAongusa B Sinclair
	Serve as member of Quality Customer Services Liaison Officers Group	Ongoing	P Howard

Department of Health and Children Business Plan 2005

Division Name: Services for Older People and Palliative Care

Division Head: Dolores Moran, Principal Officer

MAC Area: Continuing Care

MAC Member: Donal Devitt, Assistant Secretary

Divisional Objectives:

SS HLO 1: (High Performance) To ensure that the organisational structures, legal and accountability frameworks and management capacity (systems and people) are in place so that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence, and monitored and evaluated on the basis of the evidence.

Div Obj 1: To contribute to health service reform by working intensively with the HSE to ensure a smooth transition to the new structures and the transfer of appropriate responsibilities.

Div Obj 2: To liaise with HIQA, Health Services Accreditation Board and the Social Services Inspectorate, as appropriate, in relation to standards setting and quality assurance in service provision for older people.

SS HLO 2: (Responsive and Appropriate Care Delivery): To support the system in developing capacity – infrastructure, technology, systems and people, to deliver timely and appropriate services, and to provide key policy guidance in the development of services to ensure appropriate care is being delivered in the appropriate setting with a focus on patient, clients and their families.

Div Obj 1: To work closely during the transition period with the HSE on the development of a range of services for older people.

Div Obj 2: To contribute to the development of a national palliative care service including palliative care for children by the HSE.

SS HLO 3: (Fair Access) To provide a policy and legal framework which ensures equity for public patients and enables all patients and clients to access the services they need.

Div Obj 1: To contribute, as appropriate, to legislative and policy developments impacting on the care of older people.

Div Obj 2: To contribute to the development of a strategy for the future financing of long term care for older people.

Div Obj 3: To ensure that appropriate outcomes for the additional funding provided for high dependency care, intermediate care and home care support for older people are achieved together with the ongoing monitoring of the funding and activity.

Part 1:

HLO	Div Obj.	To contribute to health service reform by working intensively with the HSE to ensure a smooth transition to the new structure and the transfer of appropriate responsibilities.			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Ensure accountability for transferred functions	Ongoing	D. Moran D. Wolfe & Team*	Smooth transition and appropriate responsibilities transferred	
1.1	Specify regularity and content of monitoring reports from HSE				
1.2	Liaise with HSE on issues arising				
2	Provide full ministerial support to the offices of the Tánaiste and Ministers of State in the discharge of their duties.	Ongoing	D. Moran D. Wolfe & Team	Requests dealt with in accordance with agreed protocols and within required timeframes.	
2.1	Provide briefing, speeches, replies to PQs, adjournment debates and representations as appropriate.				
2.2	Refer PQs & representations to the Parliamentary Affairs Division, HSE, as appropriate.				
<p>Comments An increasing proportion of time involves Ministerial support. As this is essentially a “demand-led” area it sometimes has the effect of delaying the completion of other tasks. In 2004, 472 PQs, and over 1000 Ministerial Representations were responded to and Briefing Material, Speeches and Adjournment Debates were provided on request on a regular basis.</p> <p>This is relevant to all Divisional Objectives/Steps throughout this Business Plan.</p> <p>Business plan is based on current structures in the health system.</p>					

Team Membership:

A. O'Driscoll
 D. Finnegan
 M. Stanley
 N. Waldron
 D. Tracey
 M. Reynolds
 G. Bowe
 S. McKervey

HLO	Div Obj.	To liaise with HIQA, Health Services Accreditation Board and the Social Services Inspectorate, as appropriate, in relation to standards setting and quality assurance in service provision for older people.			
1	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Input, as appropriate, to setting of standards.	Ongoing	D. Moran D. Wolfe & Team	Progress in relation to development of standards for services for older people	
1.1	Liaise with HIQA, SSI and Health Services Accreditation Board				
2	Input as appropriate to development of health information needs	Ongoing	D. Moran D. Wolfe & Team	Provision of data and support, as appropriate	
2.1	Liaise with HIQA in relation to the development, analysis and dissemination of health information to meet the needs of service users.				
Comments Progress in relation to Div Obj depends on the early establishment of HIQA and putting the SSI on a statutory footing.					

HLO	Div Obj.	To work closely during the transition period with the HSE on the development of a range of services for older people.				
2	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Monitor the implementation of the recommendations of the Report on Elder Abuse		Dec 2005	D. Moran D. Wolfe N. Waldron	Ongoing monitoring and evaluation.	
1.1	Liaise with HSE, as appropriate.				Liaising with HSE to ensure implementation.	
1.2	Contribute to work of National Implementation Group, as appropriate.					
2	See also HLO 3 Div Obj 3 in relation to development of services (Page 9)			D. Moran D. Wolfe & Team		
3	Coordinate the business of the Inter-Departmental Group, including U.N. Day for Older people.		Ongoing	D. Moran D. Wolfe D. Finnegan	Secretariat to IDG provided	
3.1	Contribute to work of the implementation group as required.				Meetings attended	
3.2	Liaise with HSE, as appropriate.				Ongoing liaison.	
Comments						

HLO	Div Obj.	To contribute to the development of a national palliative care service including palliative care for children by the HSE.				
2	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Monitor and evaluate the implementation of the findings of the National Advisory Committee’s Report on Palliative Care.		Ongoing	D. Moran D. Wolfe N. Waldron		
1.1	Ensure completion of the Regional Needs Assessment.		June 2005		Needs assessment completed.	
1.2	Ensure the Report of the Expert Group on Design Guidelines is launched and disseminated.		June 2005	D. Moran D. Wolfe N. Waldron	Report launched and disseminated.	
1.3	Establishment of the National Council for Specialist Palliative Care.		April 2005	D. Moran D. Wolfe N. Waldron	Council established.	
1.4	Continue the work of Paediatric Palliative Care Needs Assessment Project Team		July 2005	D. Moran D. Wolfe J. Ling	Report published.	
Comments						

HLO	Div Obj.	To contribute, as appropriate, to legislative and policy developments impacting on the care of older people.				
3	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Contribute to the work of the Legislation Division in preparing legislation on eligibility, as it relates to services for older people.		As required	D. Moran D. Wolfe & Team	Material provided, in a timely manner as required.	
1.1	Attend meetings as required.				Meetings attended.	
1.2	Preparation of material as required.					
2	Policy development and implementation		2005	D. Moran D. Wolfe J. Ling.	Finalise review.	
2.1	Contribute to the process to review conditions and staffing levels in care of the elderly services as per the Commission on Nursing Report with Personnel External Unit.					
2.2	Contribute to the development of an information management database including development of performance indicators.					
Comments						

HLO	Div Obj.	To contribute to the development of a strategy for the future financing of long-term care for older people.			
3	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Review of the Nursing Home Subvention Scheme.		D. Moran D. Wolfe D. Finnegan D. Tracey G. Bowe		
1.1	Establish a Group amalgamating the Review Group on the Nursing Home Subvention Scheme and the work being undertaken by the Department of Social & Family Affairs on the Mercer Report on the Future Financing of Long-Term Care in Ireland.	March 2005		Group established by March 2005.	
1.2	Bring forward recommendations on a transparent equitable financially sustainable system for the long term care of older people.	July 2005		Recommendations brought forward by July 2005.	
<p>Comments (a)1.1 and 1.2 are subject to agreement being reached with Dept. of Social & Family Affairs.</p> <p>(b)The outcome of the Art 26 referral on the Health (Amendment) (No. 2) Bill, 2004 will be significant in relation to this Div Obj.</p>					

HLO	Div Obj.	To ensure that appropriate outcomes for the additional funding for high dependency care, intermediate care and home care support for older people are achieved together with the ongoing monitoring of the funding of the activity.				
3	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Ensure the implementation of the aspects of the 10 point plan in relation to A&E services, as they relate to services for older people.		All to be completed by Autumn 2005	D. Moran D. Wolfe & Team		
1.1	Ensure that the needs of an additional 500 older people are met annually in the private sector for intermediate care up to 6 weeks.					
1.2	Ensure that the transfer of 100 high dependency patients from the acute hospitals to private nursing care is achieved.					
1.3	Ensure the expansion of the home care package scheme to support 500 additional older people at home.					
1.4	Monitor and evaluate, as appropriate.				Ongoing monitoring and evaluation of progress.	
Comments						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	11/02/05	All staff
	Personal Training and Developments returned	11/02/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End July	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication. Adopt Risk Management procedures as appropriate	Monthly Ongoing	PO responsible, all staff involved
Improved records management	Procedures reviewed and strengthened if necessary.	End June	All staff
Implementation of CRAFTS system	Training on CRAFTS system, as required.	Ongoing	All Staff
Implementation of Correspondence Tracker	All letters received put on system and replied to within 15 days	Ongoing	All staff
Improved Quality Customer Service Charter.	Provisions of new Customer Action Plan implemented	Ongoing	All staff
Official Languages Act	Provisions of services through Irish as required.	Ongoing	D. Tracey
Regular meetings of AP with HEOs	Better internal organisation and communication.	Weekly.	D. Wolfe A. O'Driscoll* D. Finnegan* M. Stanley* N. Waldron*
Regular Team Meetings	Team kept up-to-date of all developments	Monthly	D. Moran with all staff; rotating Chair.
Project Management Training	Training undertaken; courses attended.	June 2005	D. Wolfe & HEOs as above*

Department of Health and Children
Business Plan 2005

Division Name: Acute Hospitals Division

Division Head: Joseph Cregan, Principal Officer

MAC Area: Acute Hospitals

MAC Member: Paul Barron, Assistant Secretary

Divisional Objectives:

SS HLO 2:

Fair Access -To provide a policy and legal framework, which ensures equity for public patients; and enables all patients and clients to access the services they need.

Div Obj 1: Improve access to hospital services for public patients.

SS HLO 3:

Responsive and Appropriate Care Delivery – To ensure the system has the capacity in terms of infrastructure, technology, systems and people to deliver timely and appropriate services; and to lead and guide the development of services to ensure appropriate care is being delivered in the appropriate setting with a focus on patients, clients and their families.

Div Obj 2: Provide appropriate support and advice to the Health Service Executive in relation to both the functions remaining within the Department and functions transferring to the HSE.

Div Obj 3: Promote and monitor the provision of emergency medicine (A&E) services nationally

Div Obj 4: Monitor elective activity and waiting lists nationally through the National Treatment Purchase Fund and National Hospitals Office.

Div Obj 5: Monitor and evaluate the delivery of acute hospital services

Div Obj 6: Support the Minister and the parliamentary process

SS HLO 6:

To continue to develop the capacity of our organisation and people to ensure delivery of a quality service to our customers.

Div Obj 7: To continue to develop the implementation of PMDS within the Division.

Part 1:

HLO	Div Obj.	Improve access to hospital services for public patients.			
2	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Policy on public/private patient mix		JC/HH/DB/ DC	Activity Statistics	
1.1	Prepare proposals for a process which achieves goals of new consultant contract	3 rd quarter	JC/HH	Proposals developed	
1.2	Arrange for transfer of responsibility for designation process to NHO	Mid year	JC/HH/DB/ DC	Transfer of responsibility	
2	Develop policy on private sector developments on public hospital sites		JC/HH		
2.1	Manage Prospectus consultancy to achieve objectives contained in tender documentation	1 st quarter	JC/HH	Consultancy advice/papers	
2.2	Develop policy on foot of advice from consultancy	2 nd quarter	JC/HH	Policy document	
2.3	Communicate policy to HSE	Mid year	JC/HH/DB/ DC	Circular letter to HSE	
3	Develop policy on private sector provision of acute hospital services		JC/HH		
3.1	Examine regulatory issues regarding acute hospitals	December 2005	JC/HH/DC/ DC	Analysis of framework	
4	Monitor the position in relation to delivery of new beds and new acute units funded during 2005	Quarterly	JC/HH/DB/ DC	Additional beds in place	
Comments					

HLO	Div Obj.	Provide appropriate support and advice to the Health Service Executive in relation to both the functions remaining within the Department and functions transferring to the HSE.				
3	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Facilitate the transfer of functions to HSE		Mid Year	All staff		
1.1	Agree functions for transfer to HSE		Mid year	All staff	Functions identified	
1.2	Review legal and administrative requirements		Mid year	JC/HH/RB	Requirements identified	
1.3	Agree timetable / protocols		Mid year	JC/HH/RB	Timetable/protocols agreed	
1.4	Arrange appropriate briefing for HSE/NHO		Mid year	All staff	Transfer complete	
2	Transfer responsibility for national specialities to the HSE		Mid year	All staff	Responsibilities transferred	
Comments: The level of requirement to achieve this objective will become apparent when the functions to be transferred to the HSE have been identified and agreed						

HLO	Div Obj.	Promote and monitor the provision of emergency medicine (A&E) services nationally			
3	3				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Monitor and advise on National Policy on the delivery of emergency medicine (A&E) services		JC/RB/ET/ CD		
1.1	Prepare briefing material and attend Cabinet Committee on Health	As required	JC/RB/ET/ CD	Action Committee decisions	
1.2	Liaise with the HSE on the delivery of the 10-point A&E plan		JC/RB/ET/ CD	Implementation of plan	
1.3	Participation on the A&E Health Service Employers Agency management team at the Labour Relations Commission	As meetings scheduled	JC/RB	Seek to resolve issues in dispute	
1.4	Participation in joint steering group on the implementation of the CAPITA report on bed management	Quarterly	RB	Agree method of implementation	
1.5	Monitor progress of the steering group on the implementation of the Orschenick Report on Nurse Staffing of A&E Departments		JC/RB/ET/ CD	Liaison with Nursing Policy Division	
1.6	Liaison with External Personnel on A&E staffing issues	1 st quarter	JC/RB/ET/ CD	Action agreed on A&E staffing issues	
2	Participate in the High Level Group on Road Safety	Attend scheduled meetings	RB	Health aspects reflected in policy implementation	
2.1	Participate in the Cross Departmental Review of Road Safety Expenditure	Attend scheduled meetings	RB	Health aspects reflected in policy implementation	
3	Consider the outcome of the Health and Safety Authority's review of A&E departments	Mid year	JC/RB/ET/ CD	Agree necessary actions with HSE	
4	Assist in the C&AG examination of A&E services		JC/RB/ET/ CD	Provide information as required	
Comments					

HLO	Div Obj.	Monitor elective activity and waiting lists nationally through the National Treatment Purchase Fund and the National Hospitals Office				
3	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	To liaise with and monitor the operation of the National Treatment Purchase Fund		Quarterly	JC/RB/ET/ CD	Quarterly review meetings with NTPF	
1.2	Review NTPF service plan		1 st quarter	JC/RB/ET/ CD	Sign-off on Service Plan	
1.3	Participate in project team for the new patient register			JC/RB	New register designed and implementation commenced	
1.4	Agree Chief Executive terms and conditions		Mid year	JC/RB	Clear with Department of Finance	
1.5	Monitor level of NTPF work in public hospitals in the context of A&E pressures		Mid year	JC/RB/ET/ CD	Reports from NTPF	
1.6	Assess NTPF pilot project on out-patient waiting lists		Dec 2005	JC/RB	Report to Assistant Secretary	
1.7	Facilitate working arrangements between HSE and NTPF			JC/RB	Quarterly review meetings	
Comments						

HLO	Div Obj.	Monitor and evaluate the delivery of acute hospital services			
3	5				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Provide input into recommendations to approve or otherwise the National Service Plan	April 2005	All staff	Provide input into consideration of Service Plan	
2	Evaluate HSE proposals for capital projects for acute hospitals as part of the Capital Framework 2005 – 2009	April 2005	JC/RB/HH	Contribute to assessment of Capital Framework	
2.1	Monitor progress of Capital Framework 2005 for acute hospitals	Through-out 2005	All staff		
3	Contribute to the evaluation and development of annual estimates of the NHO	Nov 2005	JC/RB/HH	Completion of Estimates submission within required timeframe	
4	Liaise with NHO/HSE on the effect of infectious diseases e.g. MRSA in so far as they affect hospital services	June – Nov 2005	JC/RB/ET/CD	National guidelines	
5	Review policy in relation to genetic services	December 2005	JC	Policy developed	
6	Liaison with regulatory and professional bodies on matters affecting acute hospital services		All staff	Ongoing contact	
6.1	Participation in Inter-agency Forum.	As meetings are arranged	JC/RB/HH	Consensus achieved with regulatory and professional bodies	
7	Continue as a member of Comhairle na nOspideal in a non-statutory basis	2005	JC	Specialty review reports published	
7.1	To participate and advise on hospital services and specialty analysis	2005	JC	Specialty review reports published	
8	Liaison with working group on performance indicators for the acute hospital sector	As meetings are arranged	JC/RB	Agree national set of PIs	
9	Liaise with NHO/HSE in relation to acute hospital aspects of chronic diseases	Ongoing	JC/RB/ET/CD	Discuss with HSE	

Acute Hospital Services (I)

HLO	Div Obj.	Monitor and evaluate the delivery of acute hospital services				
3	5					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
10	Contribute to the review group on male circumcision		2 nd quarter	HH	Completion of report, submission to Tanaiste and liaison with HSE re service provision	
Comments						

HLO	Div Obj.				
3	6	Support the Tanaiste and the parliamentary process			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Support the Tánaiste, Advisors and Press Office in the discharge of her functions relating to the parliamentary process	As required throughout 2005 – see comment	All staff		
1.1	Providing answers to PQs and representations, preparing speech, briefing material and press releases as required.	"	All staff	Material supplied and timelines met	
1.2	Provide responses to representations	"	All staff	Material supplied and timelines met	
1.3	Preparing speech and briefing material	"	All staff	Material supplied and timelines met	
1.4	Prepare and compile press releases	"	All staff	Material supplied and timelines met	
2	Support the Tánaiste's communication with public and the media	"	All staff	Prepare draft press releases etc	
2.1	Prepare press releases/statements and research/draft speeches for attendance at official functions	"	All staff	Material supplied and timelines met	
2.2	Respond to matters of media and public interest	"	All staff	Material supplied and timelines met	
3	Attendance at Dail Committees	"	All staff	Attend as required	
3.1	Prepare appropriate briefing material for Departmental representative(s)	"	All staff	Material supplied and timelines met	
4	Provide briefing to Ministerial advisors	"	All staff	Material supplied and timelines met	
4.1	Obtain and provide appropriate information at the request of the Tánaiste's advisors	"	All staff	Material supplied and timelines met	
5	Provide material for the Department's Annual Report and progress on Health Strategy	"	All staff	Material supplied and timelines met	

HLO	Div Obj.	Support the Tanaiste and the parliamentary process				
3	6					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	implementation					
Comments: This objective involves a substantial proportion of the Divisions work. With the establishment of the HSE in 2005 this Division will be required to contribute towards the development and implementation of new arrangements to conform with the responsibility of the Department and the HSE under the new Health Act 2004						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	Feb 2005	All staff
	Personal Training and Developments returned	March 2005	All staff
Conduct first interim review	Completed review form, modified role profile form	End June 2005	All staff
Upward feedback	Complete upward feedback forms	End June 2005	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
To re-define and develop the role and responsibility of the Division in the context of the Health Act 2004 and the Health Reform Programme	Agree roles and responsibilities	Feb 2005	All staff
Participate in Senior Management Network, APEX and other representative for a	Attend meetings as required	Ongoing	JC/HH/RB
Contribute to the development of HIQA functions		Ongoing	JC/HH/RB
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Customer Charter	Ongoing	All staff
	Correspondence Tracking	Ongoing	All staff
Implementation of HR policies on time, attendance and mobility		Ongoing	All staff
Review of processes and	Review completed		JC/RB/HH

Acute Hospital Services (I)

Objective	Output	Target Completion Date	Person(s) responsible / involved
procedures in light of Travers examination			
Develop the division's evaluation capability for it's new role under the Health Act 2004	Identify training and development needs	Mid year	All staff
Logistical preparation and transfer to new Department office		Mid year	All staff
Consider implications of the Official Languages Act			All staff

Department of Health and Children Business Plan 2005

Division Name: Cancer Services Division

Division Head: Gerry Coffey, Principal Officer

MAC Area: Acute Hospitals

MAC Member: Paul Barron, Assistant Secretary

Divisional Objectives: Ongoing development and review of national cancer policy

High Level Objective A:

To provide a policy and legal framework for the protection and promotion of health and well-being which gives active support to improving quality of life, targets inequality in health and advances intersectoral working.

Divisional Objective:

- Completion and progression of a National Cancer Strategy 2005

High Level Objective B:

To support the system in developing capacity – infrastructure, technology, systems and people – to deliver timely and appropriate services and to provide key policy guidance in the development of services to ensure appropriate care is being delivered in the appropriate setting with a focus on patients, clients and their families.

Divisional Objective(s):

- Support and monitor the implementation and strategic development of cancer services nationally in line with the National Cancer Strategy and the National Health Strategy.
- Support and monitor the implementation of the Report on the Development of Radiation Oncology Services in Ireland
- Support and monitor the development of the National Breast Screening Programme
- Support and monitor the development of the Irish Cervical Screening Programme

High Level Objective C

To support the implementation of the Government programmes and policies beyond the health sector and to help meet Ireland's health-related commitments at European and International level

Divisional Objective

- Support North-South co-operation and monitor international developments in relation to cancer control.

- Part 1:

HL O	Div Obj.	Completion and progression of a National Cancer Strategy 2005			
A	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Finalise National Cancer Strategy 2005	April 2005	GC/TC	Strategy completed	
1.1	Consult with Regional Directors of Cancer Services and the HSE	February 2005	TC	Consultations completed	
1.2	Design, Print and Launch the Strategy	April/May 2005	TC	Strategy published	
2	Prepare Memorandum for Government on the Cancer Strategy	April 2005	TC	Timely production and circulation of Memo for Government	
3	Develop and support the work programme of the National Cancer Forum and its sub-groups	Ongoing	GC/TC	Timely production of quality papers to progress the work programme of the Forum	
3.1	Provide the Secretariat to the National Cancer Forum	Ongoing	TC	Support quarterly meetings of the Forum	
3.2	Maintain the website of the National Cancer Forum	Ongoing	LF/MD	Website regularly updated and queries responded to promptly	
Comments					

HLO	Div Obj.	Support and monitor the implementation and strategic development of cancer services nationally in line with the National Cancer Strategy and the National Health Strategy.			
B	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Review the development of Services for Symptomatic Breast Disease in line with the O'Higgin's Report	Ongoing	GC/AN/SF	Reports on progress on development of units	
1.1	Liaise with NHO as appropriate in the organisation and development of symptomatic breast disease services		GC/AN/SF		
1.2	Support the development of a national quality assurance programme in association with the HSE		GAC/AN/SF	Scheme progressed by HSE	
2	Support the National Cancer Registry Board	Ongoing	GC/AN/SF	Service Plan agreed	
2.1	Assist in streamlining NCR into HIQA			Progression of streamlining	
3	Support the Minister in her accountability to the Oireachtas	Ongoing	All Staff	High quality material and briefing submitted within deadlines	
3.1	Prepare draft replies to PQs, adjournment debates, private members motions and supply any necessary supplementary briefing material. Supply notes for Taoiseach's Order of Business				
4	Process replies to representations from Minister	Ongoing	All Staff	Draft replies to reps submitted in a timely manner to the Minister's office	
5	Support the Minister's and the Department's communications with the public and the media	Ongoing	All Staff	Timely submission of quality material to the Minister's office	
5.1	Prepare and submit press releases / statements, speaking notes and speeches and briefing for Ministers, and in respect of Taoiseach and President's attendance at official functions. Provide divisional attendance at relevant meetings		All Staff		
6	Prepare appropriate briefing material for Departmental representative(s) and attendance at Dail Committees	Ongoing	All Staff	Briefing provided in advance and attendances at committees as required	

HLO	Div Obj.	Support and monitor the implementation and strategic development of cancer services nationally in line with the National Cancer Strategy and the National Health Strategy.			
B	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
7	Assist members of the public / other colleagues with queries relating to cancer services		All Staff	Successful resolution of issues	
7.1	Provide a quality customer service		All Staff	Responses dealt with in DoHC time-frame guidelines	
8	Contribute to and provide support to the reform programme as it relates to cancer services nationally		GC/AN/TC	Ongoing implementation of reform	
8.1	Contribute to the development of the Department's role vis-à-vis the HSE and cancer				
8.2	Re-define and develop the role of Cancer Services in the context of the reform process including the establishment of HIQA and the roll out of a new National Cancer Strategy				
9	Analyse HSE service plan, and liaise with HSE on issues arising relevant to Cancer Services and advise Minister on approval.		GC/AN/TC/SF	Evidence that service plan prepared in line with Letters of Determination	
9.1	Monitor the HSE delivery of Service Plans, 2004.			Provide briefing in advance of review meetings	
9.2	Review quarterly returns from the HSE, having regard to key performance indicators and progress in achieving service plan targets.				
9.3	Liaise with the HSE on service issues requiring clarification/action by Department				
10	Examine and advise on annual estimate proposals from HSE, BreastCheck, NCR and estimate proposals from HRB concerning the NCI programme		GC/AN/TC/SF	Completion of Estimates Submission for 2005	
11	Progress the establishment with the HSE of mechanisms to monitor oncology drug costs and service pressures	3 rd quarter	GC/AN/SF	Framework for monitoring costs developed	
12	Monitor the development of a National Medical Genetics Service as it relates to Cancer	Ongoing	GC/TC	Review Service Plan in conjunction with the HSE and agree proposals for the development of the	

Acute Hospital Services (II)

HLO	Div Obj.	Support and monitor the implementation and strategic development of cancer services nationally in line with the National Cancer Strategy and the National Health Strategy.			
B	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
				service	
13	Develop in association with HSE data collection systems relevant to diagnostic tests for specific cancers (Colon, Prostate, Breast)	2 nd quarter	GC/AN/SF	Development of Systems	
Comments					

HL O	Div Obj.	Support and monitor the implementation of the Report on the Development of Radiation Oncology Services in Ireland			
B	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Liaise with the Health Service Executive in relation to the implementation of the Report's medium term priorities in Dublin, Cork and Galway	Ongoing	GC/TC	Progress on capital and revenue requirements for expansion in Dublin, Cork and Galway	
2	Develop and support the work programme of the National Radiation Oncology Co-ordinating Group	Ongoing	TC/LF	Participate in and provide the Secretariat for the NROCG and its sub-groups	
2.1	Develop measures to improve access to radiation services	April 05	NROCG	Make recommendations in relation to the development of mechanisms to ensure patient referral to the closest treatment centre where the required type and quality of treatment can be provided	
2.2	Develop national quality assurance programmes that support best patient care and safety	April 05	NROCG	Examine protocols that exist internationally and produce a policy document on a national quality assurance programme for radiation oncology services	
2.3	Facilitate the co-ordination and integration of teaching and training programmes particularly within the core professional and clinical disciplines identified within the Report	April 05	NROCG	Paper on the approach to medical manpower requirements in radiation oncology	
2.4	Develop information and communication technologies, including telecare and telemedicine	May 05	NROCG	Progress plans for the development of a national telesynergy network for radiation oncology services with relevant parties (NIH, HSE).	
2.5	Develop clinical protocols and risk management procedures for the management of malignancies with radiation therapy	June 05	NROCG	Development of a framework for the development, management, review and updating of clinical	

Acute Hospital Services (II)

HL O	Div Obj.	Support and monitor the implementation of the Report on the Development of Radiation Oncology Services in Ireland				
B	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
					protocols	
Comments						

HL O	Div Obj.	Support and monitor the development of the National Breast Screening Programme			
B	3				
	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1.	Support the National Breast Screening Programme	Ongoing	GC/AN/SF	Agree Service Plan with BreastCheck	
1.1	Ensure Board appointed to NBSP	1 st Quarter		Board Appointed	
1.2	Support the expansion of the breast screening programme nationally	Ongoing		Input provided into roll out of Programme	
1.3	Develop revenue funding plan for expansion in association with HSE			Plan developed	
1.4	Liaise with HSE re expansion	3 rd quarter onwards			
1.5	Address organisational implications of expansion on existing services	ongoing			
Comments					

HL O	Div Obj.	Support and monitor the development of the Irish Cervical Screening Programme				
B	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Support and monitor phase one of the Irish Cervical Screening Programme		Ongoing	GC/AN/SF	Report of ICSP developing in line with LoD specifications	
1.1	Complete stake-holder consultation on the Report on national roll out		1 st quarter		Report on Department’s response to Report including implementation framework	
1.2	Prepare Policy on National roll-out		3rd quarter		Policy Developed	
Comments						

HL O	Div Obj.	Support North-South co-operation and monitor international developments in relation to cancer control			
C	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Support the work of the Ireland-Northern Ireland-NCI Cancer Consortium	Ongoing	GC/TC	Timely production of papers to support the work of the Consortium	
1.1	Participate on internal Departmental Group to co-ordinate activities of the Dept. as they relate to the different strands of the agreement	Ongoing	TC	Timely production of papers to support the CMO participation at quarterly board meetings	
1.2	Liaise with the HSE , the Health Research Board and National Cancer Registry Ireland in relation to funding requirements for cancer clinical trials and other initiatives under the agreement.	Ongoing	GC/TC	Timely follow-up and implementation of actions arising from board meetings in conjunction with CMO's office, Nursing Policy, HRB and NCRB	
2	Support the work of the North South Ministerial Council in Health & Food Safety Format in relation to Cancer Research	Ongoing	CG/TC	Timely production, in conjunction with NCRI, HRB and DHSSPS of quality papers to inform process	
3	Support initiatives at EU level in relation to Cancer Services	Ongoing	GC/TC	Timely production of position papers for EU meetings	
4	Examine International Policies on screening programmes	2 nd quarter	GC/AN/SF	Paper developed	
Comments					

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Acute Hospital Services (III)

Division Head: Denis O'Sullivan, Principal Officer

MAC Area: Acute Hospitals

MAC Member: Paul Barron, Assistant Secretary

Divisional Objectives:

High Level Objective 3: Responsive and Appropriate Care Delivery

To ensure the system has the capacity in terms of infrastructure, technology, systems and people to deliver timely and appropriate services; and to lead and guide the development of services to ensure appropriate care is being delivered in the appropriate setting with a focus on patients, clients and their families.

Divisional Objectives:

1. Support the Tánaiste and the parliamentary process
2. Monitor and evaluate the provision of acute hospital services in the Eastern, Midland, North Eastern and North Western Areas of the HSE.
3. Promote and monitor the development of pre-hospital emergency care services nationally
4. Oversee emergency planning function in respect of the hospital, pre-hospital and emergency services
5. Promote and monitor development of acute hospital and laboratory accreditation nationally.
6. Support and progress the implementation of Health Strategy targets and other Ministerial and Government initiatives/commitments in relation to the development of acute hospital services

High Level Objective 4: High Performance

To put in place organisational structures, accountability frameworks and management capacity (systems and people) to ensure that health and personal services are planned and delivered efficiently and effectively on the basis of this evidence.

Divisional Objectives:

7. Progress measures to improve the accountability and performance of the hospital system.

High Level Objective 5:

To support the delivery of the wider programme for Government (outside of the delivery of health and personal social services) and to ensure Ireland's commitments at European Union level and international level are met.

Divisional Objectives:

8. Promote North/South co-operation in the areas of hospital, pre-hospital and emergency care.

High Level Objective 6: Developing the capacity of our organisation and people

Divisional Objectives:

9. To continue to develop the capacity of our organisation and people to ensure delivery of a quality service to our customers.

Part 1:

HLO	Div Obj.	Support the Tánaiste and the Parliamentary process				
3	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Support the Tánaiste in the discharge of her functions relating to the parliamentary process by the provision of material for PQ replies, adjournments, Private Members, Order of Business and representations.		Through 2005	All staff	Material supplied and timelines met.	
2	Support the Tánaiste's communication with the public and the media					
2.1	Prepare press releases/statements and research/draft speeches for attendance at official functions		Through 2005	All staff	Material supplied and timelines met	
2.2	Attendance at meetings with deputations.		Through 2005	All staff	Attendance at meeting and follow up as required.	
3	Prepare appropriate briefing material for Departmental representative(s) at Dáil Committees.		Through 2005	All staff	Appropriate briefing material supplied and timelines met.	
4	Provide briefing to Ministerial advisors		Through 2005	All staff	Material supplied and timelines met	
5	Provide material for the Department's Annual Report.		As required	All staff	Material supplied and timelines met	
Comments: This objective involves a substantial proportion of the Divisions work. With the establishment of the HSE in 2005 this Division will be required to contribute towards the development and implementation of new arrangements to conform with the responsibility of the Department and the HSE under the new Health Act 2004						

HLO	Div Obj.	Monitor and evaluate the provision of acute hospital services in the Eastern, Midland, North Eastern and North Western Areas of the HSE.			
3	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Assess and evaluate acute hospitals and ambulance service elements of Health Service Executive (HSE) Service Plan, 2005	On receipt of service plan	Denis O'Sullivan (DO'S)/Mary Hogan (MH)/ Pat Clifford(PC) PaulMcKiernan(PMcK) Fergal Flynn(FF)/Niall Staunton(NS)/John Kelly(JK)	Provide input to Departments's consideration of plan.	
1.1	Review quarterly returns from the HSE.	On receipt of quarterly returns.	DO'S/MH/FF/DS	Briefing provided in advance of quarterly review meeting with HSE.	
1.2	Liaise with the HSE on service issues requiring clarification/action.	As issues arise.	DO'S/MH/FF/DS	Advice provided/action taken as required.	
2	Contribute to the evaluation and development of the NHO Annual estimates	3 rd Quarter onwards	DO'S/MH/FF/DS	Completion of estimates submission for 2005 within agreed timeframe	
3	Evaluate HSE proposals for Capital projects				
3.1	Evaluate HSE proposals for acute hospitals as part of the Capital Framework 2005 – 2009	Following Receipt	DO'S/MH/FF/DS	Contribute to assessment of Capital Framework	
3.2	Monitor progress of Capital Framework for acute hospitals in 2005	Through 2005	DO'S/MH/FF/NS		

Acute Hospital Services (III)

HLO	Div Obj.	Monitor and evaluate the provision of acute hospital services in the Eastern, Midland, North Eastern and North Western Areas of the HSE.				
3	2					
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef	
4	Review Legislation governing hospitals operating under the Corporate Bodies act, 1961.					
4.1	Monitor completion of Business of Tallaght Hospital Board and arrange for preparation of Statutory Instrument (S.I) to dissolve the Board	2 nd Quarter	DO’S/PC/JK/MO’N	Board functions discharged and Board dissolved		
4.2	Review S.I’s of St James’s, Beaumont and St Luke’s Hospitals to ensure compatibility with Health Reforms, and prepare amending S.I’s if necessary	2nd Quarter Onwards	DO’S/MH/FF /DS	Review completed and SI amended if necessary.		
Comments						

HLO	Div Obj.					
3	3	Promote and monitor the development of pre-hospital emergency care services nationally				
Ref	Steps / Actions		Date	Person(s) responsib le	KPIs / Outputs	XRef
1	Liaise with the Health Service Executive on development of Ambulance Service in line with agreed policy.		Through 2005	DO’S/P C/JK/ Marian O’Neill (MO’N).	Development of the service in line with the Strategic Review of the Ambulance Service, 2001.	
2	Complete arrangements with the Air Corps for the provision of Air Ambulance Service and monitor development of HEMS in the voluntary section.		Agreement to be finalised 2 nd Quarter	PC/JK/ MO’N.	Agreement finalised. Liaison with voluntary sector as required.	
3	Support and monitor Pre-Hospital Emergency Care Council (PHECC)					
3.1	Assessment of PHECC Service Plan, 2005.		Within 2 weeks of receipt	DO’S/PC/ JK/ MO’N.	Completion of 2005 service plan assessment and follow up liaison as required.	
3.2	Monitor delivery of 2005 Service Plan.		Following receipt of quarterly returns	DO’S/P C/JK/ MO’N		
3.3	Monthly drawdown of funds.		Monthly	DO’S/P C/JK/ MO’N	Funding allocated	
3.4	Evaluate and progress 2006 development proposals		3 rd Quarter onwards	DO’S/P C/JK/ MO’N	Follow up liaison on development needs for 2006.	

HLO	Div Obj.					
3	3	Promote and monitor the development of pre-hospital emergency care services nationally				
Ref	Steps / Actions		Date	Person(s) responsib le	KPIs / Outputs	XRef
4.	Liaise with Medicines Division to progress the amendment of the legislation governing the administration of certain medications by EMTs in the pre-hospital emergency care setting.		2 nd Quarter	DO’S/ PC/JK/ MO’N	Legislation amended and the administration of medications introduced. (lead role to be taken by Medicines Division.)	
5.	Liaise with the HSE /Department of Environment & Local Government Dublin City Council on existing and future service arrangements, in the light of the European Court of Justice’s case on the current arrangement between the HSE and Dublin Fire Brigade.		Depending on date of decision	DO’S/ PC/JK	Implement Court decision	
6.	Representation on Critical Incident Stress Management Group (CISM)		Quarterly or as required	JK	Development of a programme which will provide appropriate awareness of, and response to, stress management for ambulance personnel.	

HLO	Div Obj.					
3	4	Oversee emergency planning function in respect of the hospital, pre-hospital and emergency services.				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1.	Participate in the Interdepartmental Committee on Emergency Planning.		As required.	PC/JK.	Provision of appropriate guidance, assistance and information to the HSE.	
2.	Liaise with the HSE and the Department of the Environment in relation to the introduction of charges for the preparation of external emergency plans/exercises for identified SEVESO sites.		2 nd Quarter	PC/JK MO'N	Introduction of charges.	
3.	Participate in work of Interdepartmental committee on carriage of dangerous goods by rail		As required	JK	Attendance at meetings and provision of appropriate advice to the HSE.	
4.	Participate in work of Marine Emergency Advisory Group.		Quarterly	PC/JK	Attendance at meetings and provision of advice to the HSE.	
5.	Liaison with the HSE on the development of appropriate hospital sites for the treatment of persons with infectious diseases		Through 2005	DO'S/PC	Progress in development of appropriate facilities	

HLO	Div Obj.					
3	5	Promote and monitor development of acute hospital and laboratory accreditation nationally.				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Progress the development of acute hospital and laboratory accreditation programmes.					
1.1	Assessment of IHSAB Service Plan.		Within 2 weeks of receipt	DO'S/PMc K/NS	Completion of 2005 Service Plan assessment and follow up liaison as required.	
1.2	Monitor delivery of 2005 Service Plan		Quarterly	DO'S/PMc K/NS		
1.3	Evaluate and progress development proposals		As required	DO'S/PMc K/NS	Development proposals agreed and progressed.	
1.4	Assist with merger of IHSAB functions to HIQA.		As required	DO'S/PMc K/NS	Merger progressed.	
1.5	Liaise with IHSAB and Irish National Accreditation Board (INAB) on development of laboratory accreditation programme.		Through 2005	DO'S/PMc K/NS	Issues progressed.	

HLO	Div Obj.	Support and progress the implementation of Health Strategy targets and other Ministerial and Government initiatives/commitments in relation to the development of acute hospital services			
3	6				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Promote development of Neurology Services through liaison with Neurological Alliance, ICNA, HSE and other Divisions in relation to the development of services.	Through 2005	DO'S/MH/FF/DS	Progress in advancing policy formulation and service development.	
2.	Provision of appropriate support to National Review of Renal Services. (Action No. 60)	Through 2005	DO'S/PMc K/NS/GO'B/DS	Progress on report.	
3.	Representation on joint working group on the management and prevention of diabetes.	As required	DO'S/PMc K/NS/GO'B.	Progress in development of strategy.	
4.	Liaison with HSE to monitor progress of the National Lung Transplant Programme in 2005, in particular the commencement of the surgical component of the programme.	Through 2005.	DO'S/MH/FF/DS.	Introduction (on a phased basis) of the surgical component of the programme.	
Comments: The membership of the National Review Group for Renal Services has been agreed since the beginning of 2004. However, the group has not yet met due to the ongoing non availability of consultant members as a result of the dispute between their representative bodies and the DOHC. Research work continuing in the interim. Departmental meetings with neurology groups have been suspended, while the work of the Diabetes Group has also been affected.					

HLO	Div Obj.				
4	6	Progress measures to improve the accountability and performance of the Hospital system.			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Act as Secretary and provide secretarial support to the Ruddle Review Panel. Publish Report and progress any follow up action required with HSE.	Report February 2005	MH/FF/DS.	Completion of Review and presentation of report to Minister. Follow up action as required.	
2	Continue to support the work of the Inquiry into practices at Our Lady of Lourdes Hospital, Drogheda, on foot of Medical Council Report on Dr Neary.				
2.1	Consideration of Report	On receipt	DO'S/PMc K/NS/GO'B/DS	Subject to Legal advice, report published	
2.2	Submit findings to Government and liaison with HSE on any follow up action required.	2nd Quarter onwards	DO'S/PMc K/NS/GO'B/DS	Follow up action as required	
3	Liaise with HSE on the provision of appropriate services for patients affected by the practice of Symphysiotomy in Ireland.	As required	DO'S/PMc K/NS/GO'B/DS.	Appropriate services made available to patients.	
4	Liaise with HSE in relation to the review of organ donation and retrieval processes. (Action No. 61)	2 nd Quarter onwards	DO'S/MH/FF/DS.	Commencement of review.	
Comments					

HLO	Div Obj.				
5	7	Promote North/South co-operation in the areas of Hospital, pre-hospital and emergency care			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1.	Organise and participate in bilateral discussions with DHSSPS officials [and individual health agencies] in the areas of acute hospital and pre-hospital emergency care where necessary.	Twice yearly	DO'S/PC /JK.	Meetings held and issues progressed.	
1.1	Monitor, support and assess the progress of Cooperation and Working Together (CAWT) on the project management of initiatives identified for the enhancement of areas of co-operation	Twice Yearly.	DO'S/PC /JK.	Project management role discharged as agreed.	
<p>Comments: The steps and specific actions identified in this objective are significantly affected by the suspension of the Northern Ireland Executive. The North South Ministerial Council (NSMC), which approves initiatives identified by the various Working Groups, cannot meet because of the absence of an Executive. Work in progress, previously approved by the NSMC, will continue during 2005. CAWT has been commissioned to project manage the various recommended action areas identified by the Working Group established on foot of the Good Friday Agreement.</p>					

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	February 2005	All staff
	Personal Training and Developments returned	March 2005	All staff
Conduct first interim review	Completed review form, modified role profile form	End June 2005	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct 2005	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		
Develop the division's evaluation capability for its new role under the Health Act 2004	Identify training and development needs	Mid year	All staff
Assist with the implementation of HR policies on time, attendance and mobility.		Ongoing	All staff
Consider implications of the Official Languages Act			All staff

Department of Health and Children
Business Plan 2005

Division Name: Blood Policy

Division Head: Mary Jackson, Principal Officer

MAC Area: Secondary Care / Acute Hospitals

MAC Member: Paul Barron, Assistant Secretary

Divisional Objectives:

SS High Level Objective 1: HIGH PERFORMANCE

To ensure that the organisational structures, legal and accountability frameworks and management capacity (systems and people) are in place so that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence, and monitored and evaluated on the basis of this evidence.

Divisional Objectives:

1. Provide appropriate support and advice to the Health Services Executive in relation to both the functions remaining within the Department and functions transferring to HSE/NHO.
2. Support HSE and the Irish Blood Transfusion Service in achieving and maintaining international standards in transfusion medicine in particular, achieving compliance with Directive 2002/EC on Blood Quality and Safety.
3. Support the HSE in identifying and agreeing the steps necessary to comply with the requirements of Directive 2004/23/EC on Quality and Safety of Tissues and Cells.

SS High Level Objective 2: RESPONSIVE AND APPROPRIATE CARE DELIVERY

To support the system in developing capacity – infrastructure, technology, systems and people – to deliver timely and appropriate services; and to provide key policy guidance in the development of services to ensure high quality care is being delivered in the appropriate setting with the focus on patients, clients and their families.

Divisional Objectives:

4. Promote and monitor appropriate health and personal support services (including compensation schemes) to meet the current and future needs of persons infected by HIV/Hepatitis C through blood and blood products administered within the State.
5. Manage legal and administrative issues (including compensation schemes) arising from infection by Hepatitis C and HIV through the administration within the State of blood and blood products.
6. Support the Post Mortem Inquiry and implement the recommendations of Inquiries relating to infected blood products (and related matters).

SS High Level Objective 5: SUPPORTING WIDER GOVERNMENT PROGRAMMES AND INTERNATIONAL HEALTH POLICY

To support the implementation of the Government programmes and policies beyond the health sector and to help meet Ireland's health related commitments at European and international level.

Divisional Objectives:

- 7 Ensure that Irish policy in relation to medical devices is consistent with EU and international standards.

Part 1:

HLO	Div Obj.	Provide appropriate support and advice to the Health Services Executive in relation to both those functions remaining within the Department and functions transferring to HSE/NHO				
1	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Identify functions to be transferred		Feb 05	MJ, AMcG BO'C, CF	Functions identified	
1.1	Update schedule prepared in Nov '04					
2	Agree list of functions to transfer to HSE in '05		Feb 05	“	List of functions agreed	
2.1	Identify steps necessary		Mar 05	“		
2.2	Identify records to transfer and retain		Mar 05	“		
2.3	Specify scope of function(s) to transfer and PIs to ensure proper accountability for devolved function.		May 05	“	PIs developed	
2.4	Agree scope, performance indicators with HSE		June 05	“	PIs agreed with HSE functions transferred	
2.5	Develop monitoring and accountability process for transferred functions		June 05	“	Training underway	
2.6	Implement procedures and appropriate training for new role		June 05	“		
2.7	Liaise with HSE as appropriate during transfer		July to Dec 05	“	Liaison arrangements in place	
3	Ensure accountability of transferred functions		Sept 05	“		
3.1	Specify periodicity and content of monitoring reports from HSE		Sept 05	“		
3.2	Liaise with HSE on issues arising		Dec 05	“	Ongoing liaison	
Comments The timing and content of the functions schedule is subject to change and revisions to the list of functions are expected. Thus the list and dates can be only regarded as guides to sequence rather than definite completion dates at this stage. Firmer dates will be specified following agreement on overall schedule.						

HLO	Div Obj.	Support the HSE and the Irish Blood Transfusion Service in achieving and maintaining international standards in transfusion medicine.			
1	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Support the IBTS to implement its blood safety and quality strategies.				
1.1	Support the IBTS to achieve and maintain: (a) international standards in transfusion medicine; (b) a safe and adequate blood supply and (c) safe and adequate donor selection procedures.	Ongoing	MJ/ AMcG	Achievement of best practice in relation to <ul style="list-style-type: none"> ▪ new and existing technologies; ▪ donor selection, recruitment and retention policies 	
1.2	Monitor follow up by the IBTS of issues, if any, raised in the Irish Medicine Board's Annual Report to the Tánaiste.	Sept 2005	MJ/ AMcG	Effective action programme to address deficiencies, if any, identified by the IMB	
1.3	Commence planning for transfer of operational responsibility for IBTS to HSE.	Sept 2005	MJ/ AMcG	Plan developed	
2	Support the development by HSE of transfusion best practice in hospitals				
2.1	Review, in association with the Irish Medicines Board, the National Haemovigilance Office and the HSE, the operation of the National Haemovigilance Programme	Oct 2005	MJ/ AMcG	Completion of review.	
2.2	Progress with HSE the recommendations of the National Blood Strategy Implementation Group.	Jun 2005	MJ/AMcG BO'C,CF	Implementation plan to improve blood stock management	

HLO	Div Obj.	Support the HSE and the Irish Blood Transfusion Service in achieving and maintaining international standards in transfusion medicine.				
1	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
3	Monitor development of international standards on blood safety and related issues					
3.1	Transpose EU Directive 2002/98/EC on Blood Quality and Safety.		Transpose Directive- Feb 05	MJ/AMcG	Statutory Instrument	
3.2	Develop plan for implementation of Directive.		Plan: Mar 05		Plan developed	
			Implement nation: Ongoing		Implementation monitored	
3.3	Monitor developments at Council of Europe and other international fora		Ongoing	MJ/AMcG	Appropriate input into international developments	
					Dissemination of relevant international guidelines	
Comments: Steps and actions to achieve Divisional Objectives incorporate support for the Tánaiste in the discharge of her parliamentary and statutory functions, as follows: Support the Tánaiste’s accountability to the Oireachtas by ensuring that she is provided with accurate, comprehensive and timely material to answer PQ’s, adjournment debates, private members motions, Estimates debates and any other Dáil commitments which may arise. Support the Tánaiste’s communications with the public and the media by ensuring replies are issued to representations and other correspondence in line with the timescales outlined in the Department’s Customer Services Plan; providing accurate, comprehensive and timely briefing material to the Tánaiste on major issues liaising with the Press Office, the Department’s Communications Manager and the Tánaiste’s Advisors to present the Tánaiste’s policies to the media Support the Tánaiste in formulating policy and obtaining Exchequer funds by advising her on policy issues and formulating draft policy documents						

HLO	Div Obj.					
1	3	Support the HSE in identifying and agreeing the steps necessary to comply with the requirements of Directive 2004/23/EC on Quality and Safety of Tissues and Cells.				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Develop a policy to comply with EU Directive 2004/23/EC on quality and safety of tissues and cells.					
1.1	Consult with key experts on various aspects of the Directive, especially on regulatory frameworks required and on drafting of tissue legislation in Ireland.		Ongoing	MJ, PC, TO'C	Determine regulatory framework required.	
1.2	Commence drafting legislation to transpose the EU Directive by April, 2006		Ongoing	MJ, PC, TO'C	Progress on drafting legislation	
1.3	Identify the competent authority for accrediting tissue and cell establishments				Competent Authority designated	
Comments: Steps and actions to achieve this Objective incorporate support for the Tánaiste in the discharge of her parliamentary and statutory functions as set out in Objective 1.2 on Page 5 of this Plan.						

HLO	Div Obj.	Promote and monitor appropriate health and personal support services (including compensation schemes) to meet the current and future needs of persons infected by HIV/Hepatitis C through blood and blood products administered within the State.				
2	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Promote and monitor, in conjunction with the HSE and the representative groups, the delivery of responsive and appropriate primary care and hospital services.					
1.1	Monitor service delivery and implementation of agreed actions.		Ongoing	MJ, AMcG BO'C,CF	Effective service delivery Plans to address service deficits Updated National Guide to Services	
1.2	Monitor pilot programme for provision of community nursing service and plans for national roll-out of this service		Dec 05	MJ, AMcG BO'C,CF MJ, AMcG BO'C,CF	Report on implementation of pilot and development of national plan	

HLO	Div Obj.	Promote and monitor appropriate health and personal support services (including compensation schemes) to meet the current and future needs of persons infected by HIV/Hepatitis C through the administration of blood and blood products within the State.				
2	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
2	Support the Consultative Council on Hepatitis C in discharging its statutory functions					
2.1	Provide administrative and secretarial support to the Council,		Ongoing	MJ, AMcG BO'C,CF OC	Effective administration of the Council's meetings and correspondence Effective response to Council decisions, recommendations and action points Appropriate input into the Council's deliberations	
2.2	Assess the recommendations of the 2 nd Review of Health Services for Persons with Hepatitis C in conjunction with HSE and develop implementation plan.		Apr 2005 Dec 2005	MJ, AMcG BO'C,CF OC	Plan developed for implementation of recommendations	
2.3	Monitor the development of educational resources in conjunction with the Consultative Council on Hepatitis C, HSE Hepatitis C Liaison Officers, to address the information needs of persons with Hepatitis C		December 2005 October 2005	MJ, AMcG BO'C,CF OC	Further informational literature on relevant subjects. Information Day on Hepatitis C	
2.4	Support the establishment of a National Database on Hepatitis C.		December '05	MJ, AMcG BO'C,CF OC	Completion of baseline data collection and production of initial reports	
2.5	Support the development of national guidelines on the management of death		December '05		Production and dissemination of guidelines on management of	

HLO	Div Obj.	Promote and monitor appropriate health and personal support services (including compensation schemes) to meet the current and future needs of persons infected by HIV/Hepatitis C through the administration of blood and blood products within the State.				
2	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
					death.	
3	Address insurance difficulties experienced by persons with Hepatitis C					
3.1	Submit memo to Government		Feb 05	MJ, AMcG BO'C,CF OC	Government Decision.	
3.2	Subject to Government approval, identify agency to administer scheme.		April 05	MJ, AMcG BO'C, CF	Agency designated.	
3.3	Prepare draft legislation to enable the Tánaiste to establish the scheme		June 05	MJ, AMcG BO'C, CF	Legislation drafted	
3.4	Work with designated agency to establish scheme		Sept 05	MJ, AMcG BO'C, CF	Insurance scheme in operation.	
3.5	Ensure that outstanding insurance issues are addressed		Dec 05	MJ, AMcG BO'C, CF	Plan developed to address outstanding issues	
Comments						
Steps and actions to achieve Divisional Objectives incorporate support for the Tánaiste in the discharge of her parliamentary and statutory functions, as set out in Objective 1.2 on Page 5 of this Plan.						

HLO	Div Obj.	Manage legal and administrative issues (including compensation schemes) arising from infection with Hepatitis C and HIV through the administration within the State of blood and blood products				
2	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Manage legal issues pertaining to infection with Hepatitis C and HIV through the administration within the State of blood and blood products					
1.1	Manage the Department’s response to legal actions ranging from initial contact by solicitors to final hearing or settlement.		Ongoing	MJ, AMcG, BO’C, CF	Effective and timely response to legal actions from initiation to final hearing or settlement	
1.2	Support the Tánaiste’s role as respondent in appeals under the 1997 & 2002 Compensation Tribunal Acts, including formulation of instructions to Counsel and attendance at High Court hearings		Attendance at High Court: average of 4 days per month during Court Terms	MJ,AMcG, BO’C, CF	Effective representation at Court appeal hearings	
2	Manage administrative issues pertaining to Hepatitis C and HIV compensation schemes.					
2.1	Manage the Department’s administrative role under the 1997 & 2002 Compensation Tribunal Acts, including the appointment of ordinary members, monitoring of Annual Report, and the resolution of any issues raised by the Tribunal.		Ongoing	MJ,AMcG, BO’C, CF	Maintenance of full complement of Tribunal members. Annual report to the Oireachtas.	
Comments: Steps and actions to achieve this Objective incorporate support for the Tánaiste in the discharge of her parliamentary and statutory functions (as described for Divisional Objective1.2 on page 5 of this Plan).						

HLO	Div Obj.	Support the Post Mortem Inquiry and implement the recommendations of Inquiries relating to infected blood products (and related matters).			
2	5				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Support the Post Mortem Inquiry.				
1.1	Participate in, and fully co-operate with, the Inquiry	Ongoing	MJ, PC, TO'C, OC	Timely response to requests from Inquiry team	
1.2	Regular contact with representative groups and others relating to post mortems.	Ongoing	MJ, PC, TO'C, OC	Timely response to correspondence and attendance at meetings as required	
1.3	Liaise with and support HSE in relation to the Post Mortem Inquiry and related matters.	Ongoing	PC, TO'C, OC	Replies to queries	
2	Manage legal issues pertaining to the Post Mortem Inquiry				
2.1	Support the Tánaiste (in consultation with the Chief State Solicitors Office and the Attorney General's Office) in responding to any legal actions relating to the Inquiry	Ongoing	MJ, PC, TO'C, OC	Timely response to legal actions	
3	Implementation of Recommendations in the Lindsay Report				
3.1	Support National Haemophilia Council in the discharge of its statutory functions	Ongoing	MJ, AMcG, CF	Effective administration of the Council's meetings and correspondence Effective response to Council decisions, recommendations and action points Appropriate input into the Council's deliberations	

HLO	Div Obj.	Support the Post Mortem Inquiry and implement the recommendations of Inquiries relating to infected blood products (and related matters).				
2	5					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
3.2	Assist in the establishment of a permanent Secretariat, taking into account the Health Service Reform Programme.		Establish Permanent Secretariat : June 2005	MJ, AMcG, CF	Establishment of Permanent Secretariat in HSE	
3.3	Continue to support the Council after the establishment of the Secretariat through membership of the Council.		Support Council: ongoing	MJ, AMcG, CF	Effective input into the Council’s work programme	
3.4	Establish Product Selection & Monitoring Advisory Group on a statutory basis.		Feb 05	MJ, AMcG, CF	Statutory Instrument	
3.5	Support the Product Selection & Monitoring Advisory Group in the discharge of its statutory functions		Quarterly	MJ, AMcG, CF	Effective discharge of the Group’s remit, including timely recommendations on products to be purchased	
4	Develop proposals in relation to an Inquiry into the role of certain multi-national pharmaceutical companies.					
4.1	Examine feasibility of conducting litigation against pharmaceutical companies in the United States			MJ, AMcG	Proposals developed	
4.1	Submit Memo to Government.			MJ, AMcG	Government Decision.	
5	Examine proposals in relation to an investigation into donor notification by the former BTSB.					
5.1	Submit Memo to Government.		June 05	MJ,AMcG	Government Decision.	

HLO	Div Obj.	Ensure that Irish policy in relation to medical devices is consistent with EU and international standards.			
5	6				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Ensure that Irish legislation and policy comply with requirements under EU Directives and Member State obligations				
1.1	National actions to comply with Member State obligations in the area of medical devices: -Circulate Commission Communications to relevant parties -Transpose Directives	Ongoing	MJ, PC, TO'C	Quarterly meetings with IMB	
1.2	Monitor development of EU policy	Ongoing	MJ, PC, TO'C	Action taken to transpose and to comply with Directives and other obligations	
1.3	Liaison with HSE/NHO in relation to medical devices issues affecting in the Irish Healthcare system	Ongoing	MJ, PC, TO'C		
2	Ensure that the Irish Medicines Board is supported to carry out its functions as the competent authority for medical devices.				
2.1	Monitor the operation of the Advisory Committee for medical devices	Ongoing	PC,TO'C	Reports received on any issue that will affect national policy	
Comments Steps and actions to achieve this Objective incorporate support for the Tánaiste in the discharge of her parliamentary and statutory functions as set out in Objective 1. 2 on Page 5 of this Plan.					

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Finance Unit

Division Head: Dermot Magan, Principal Officer

MAC Area: Finance

MAC Member: Dermot Smyth, Assistant Secretary

Divisional Objectives:

SS HLO 1: High Performance

Div Obj 1: To ensure that the Department's Estimates (ELS, Developmental and Supplementary) bids are timely, comprehensive, accurately costed, agreed with Department of Finance and ultimately receive Dáil approval.

Div Obj 2: To assist the Health Service Executive in any transition arrangements necessary in the management of Vote 40.

Div Obj 3: Managing, monitoring and reporting on expenditure and cash in respect of Vote 33. Assisting the HSE in reporting to Government on Vote 40 spending.

Div Obj 4: Manage and develop the accounting function of the Department and meet all payment deadlines for health grants, invoices and payroll.

Div Obj 5: Provide appropriate support and advice to the HSE in relation to both those functions remaining within the Department and functions transferring to the HSE.

SS HLO 2: Responsive and Appropriate Care Delivery

Div Obj. 6: Funding but in particular :- Maintenance and Development of the National Casemix Programme in line with the Casemix System.

Div Obj 7: Implementation of the Government Decision on developing a Management Information Framework (MIF), based on the accrual concept.

SS HLO 5: Supporting Wider Government Programmes and International Health Policy

Div Obj. 8: To manage the application of EU *directives (incl. relevant European Court of Justice rulings)* applying to migrant workers, including the management and revision of bilateral reimbursement and waiver agreements between Ireland and other member states and to represent Ireland's interests in the development of policy / legislation in this area at EU level.

Part 1:

HLO	Div Obj.	To ensure that the Department's Estimates (ELS, Developmental and Supplementary) bids are timely, comprehensive, accurately costed, agreed with Department of Finance and ultimately receive Dáil approval.				
1	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Successful negotiation of a comprehensive Estimates bid for Vote 33 consistent with Departmental objectives.		May to November (Govt./Dept of Finance deadlines)	D. Magan E. O'Reilly K. Comiskey	Sufficient funding negotiated through Estimates process and approved by Dáil.	
1.1	Ensure accurate calculation and negotiation of technical increases and adjustments, incl. pay and non-pay items, for the DOHC Vote.		May to November (Govt./Dept of Finance deadlines)	E. O'Reilly K. Comiskey S. Bromley	Properly costed Estimates bids agreed / negotiated with Dept of Finance	
1.2	Support the Department's policy divisions/units in assessing and securing financial resources for initiatives		May to November	E. O'Reilly K. Comiskey S. Bromley	Properly costed Estimates bids agreed / negotiated with Dept of Finance	
2	Preparation of Vote 33 for Estimates publications (AEV/REV/Supplementary)		November to February (Govt./Dept of Finance deadlines)	E. O'Reilly K. Comiskey S. Bromley	Correct data used for publication of AEV, REV and Supplementary Estimates	
2.1	Correct mapping of the Vote 33 by subhead		November to February	As above	As above	
2.2	Accurate drafting of skeleton and appendices for publication		November to February	As above	As above	
3	Maintain a robust system of control of Vote 33		On-going during year	E. O'Reilly K. Comiskey S. Bromley M.MacMahon	Reconciling vote provision to expenditure to allow for no excess or significant surplus.	
3.1	Correctly assign all available finding to relevant subheads		On-going during year	E. O'Reilly K. Comiskey S. Bromley M.MacMahon	Subhead totals correct	
3.2	Correctly assign all available finding to Divisions for allocation to agencies		On-going during year	E. O'Reilly K. Comiskey S. Bromley M.MacMahon	Correct funding assigned to Divisions	
4	Provide support and information to the Minister and senior management in Estimates processes		On-going during year	D. Magan E. O'Reilly K. Comiskey S. Bromley	Accurate and comprehensive information provided.	
Comments: The completion dates above largely depend on the deadlines laid down by the Department of Finance, consistent with Government Decisions, on the various stages of the Estimates process.						

HLO	Div Obj.	To assist the Health Service Executive in any transition arrangements necessary in the management of Vote 40.			
1	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Assist the HSE in the development of the new Vote 40 to enable it to secure sufficient resources	Jan to Feb 2005	D. Magan E. O'Reilly K. Comiskey S. Bromley	Sufficient resources provided for Vote 40. Vote 40 published correctly in REV.	
1.1	- Accurate separating of DOHC/HSE funding to provide for 2 new votes, including any subsequent REV adjustments	Jan to Feb 2005	E. O'Reilly K. Comiskey S. Bromley	Accurate separating of funding into 2 distinct Votes	
1.2	- Successful negotiation with DOF on any additional resources required for HSE Vote 40 in 2005	Jan to Feb 2005	D. Magan E. O'Reilly K. Comiskey	Sufficient resources provided for Vote 40	
1.3	- Assist the HSE in developing subheads and amounts	Jan to Feb 2005	E. O'Reilly K. Comiskey S. Bromley	Correct amounts assigned to appropriate subheads.	
1.4	- Liaising with HSE & DOF in finalising Vote 40 for REV publication	Jan to Feb 2005	D. Magan E. O'Reilly K. Comiskey S. Bromley	Vote 40 published correctly in REV.	
2	Assist the HSE in developing a structure to manage funding during the course of the year	On-going during 2005	D. Magan E. O'Reilly K. Comiskey S. Bromley	HSE able to manage funding in Vote arising from Estimates process	
2.1	- Provide backup to assist the HSE to assign funding to service areas below Vote level	As above	E. O'Reilly K. Comiskey S. Bromley	As above	
2.2	- Provide backup to allow the tracking of (additional) funding allocations in the Vote	As above	E. O'Reilly K. Comiskey S. Bromley	As above	
3	Assist the HSE in the development of its Estimates function	On-going during 2005	D. Magan E. O'Reilly K. Comiskey S. Bromley	HSE able to manage funding in Vote arising from Estimates process	
3.1	- Calculation of technical items	As above	E. O'Reilly K. Comiskey S. Bromley	HSE able to accurately calculate technical factors	
3.2	- Services / Developmental items	As above	D. Magan E. O'Reilly K. Comiskey S. Bromley	HSE able to make Estimates bid on services/developmental items	

HLO	Div Obj.	To assist the Health Service Executive in any transition arrangements necessary in the management of Vote 40.			
1	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
3.3	- Other matters relevant to HSE estimates bid	As above	D. Magan E. O'Reilly K. Comiskey S. Bromley		
Comments: <ol style="list-style-type: none"> 1. The identification of the objective / steps / actions above is dependent on decisions to be taken on roles of the Department and the HSE in relation to the Estimates function for Vote 40. 2. The success in completing these steps and actions is dependent on the management capability of the HSE in relation to the Estimates functions. 3. Arising from the Health Act 2004 and the new legislative requirement for the HSE to account for its funding on a Vote basis (rather than I&E in accordance with the 1996 legislation?), there is a potential risk that there might be an excess/under spent Vote. 4. HSE will need to put in place the necessary monitoring and evaluation controls across the system to manage new vote accounting and reporting requirements. 					

HLO	Div Obj.	Managing, monitoring and reporting on expenditure and cash in respect of Vote 33. Assisting the HSE in reporting to Government on Vote 40 spending.				
1	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Managing Vote 33 spending					
1.1	Assisting with developing determinations for health agencies		Jan 2005	H Minogue P Monks S Dunks	Issuing letters of determination	
1.2	Setting levels of spending for Budget Holders within the Admin Budget		Jan/Feb 2005	H Minogue C MacCarthy	Issue of budgets to budget holders in the Department	
1.3	Preparing the Department’s Annual Cash Profile of voted spending for submission to Department of Finance		Jan 2005	H Minogue H Matthews	Meeting DOF deadlines	
2	Monitoring and Reporting on Vote 33 spending					
2.1	Reporting to MAC and Department of Finance (Monthly Cash Returns)		Start of month following	H Minogue P Monks	Meeting reporting timescales	
2.2	Monitoring cash and expenditure positions of health agencies		Monthly	H Minogue P Monks H Matthews	Meeting reporting timescales	
2.3	Reporting and monitoring the Admin Budget allocations		Monthly	H Minogue C MacCarthy	Meeting reporting timescales	
2.4	Administering the National Lottery Discretionary Fund		On-going during year	H Minogue H Matthews	The allocation of funds	
3	Reporting to Department of Finance and Government on Vote 40 spending					
3.1	Assisting the HSE in managing the changeover to Vote accounting		On-going	H Minogue P Monks	HSE meeting accounting requirements	
3.2	Liaising with HSE and Department of Finance in meeting Government reporting requirements.		Monthly	H Minogue P Monks	HSE meeting reporting deadlines	
Comments: Step 3 is dependent on the HSE developing the capacity to meet Vote Accounting requirements, given that the system operates currently on an income and expenditure basis. Given the significance of this task, the monthly Vote Accounting reporting will require careful management in the early months of 2005.						

HLO	Div Obj.	Manage and develop the accounting function of the Department and meet all deadlines for health grants, invoices and payroll.				
1	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Creditor and accounting function		Completion dates Weekly Monthly, Annual	S Howlett R Murray M Nolan A Wright C Walsh A Mulligan	Payments completed on time. Meet deadlines	
	Sub Accountant		Monthly	M Nolan	Meet deadlines	
	Payroll and accounting function		Fortnight Monthly Annually	S Howlett M Walsh S McNamara J Duffy M Maughan D Lynch	Payrolls completed on time Meet deadlines	
1.1	Review procedures, documentation and best practice, including standardisation of information templates.		ongoing	All staff as above	Staff support and training, maintain information flow and communication. Reduced risk. Segregation of duties	
1.2	Review & liaise with Personnel, IT Dept of Finance, Rev Com & line Divisions to ensure continued best practice.		ongoing	Accounts	Improved payment information and presentation. Reduction in queries. Reduced risk. Segregation of duties	
2	Preparation, presentation of Appropriation Account & PAC brief		Annual by end of March following year	D Magan & all staff	Meet deadlines	
2.1	Preparation, reconciling accounts into required format		As above	D Magan Accounts	.Meet deadline	
2.2	Agree with Secretary General for submission to C&AG		As above	D Magan, C MacCarthy S Howlett	Meet deadline	
2.3	Prepare PAC Brief		Date not fixed	C MacCarthy R Murray		

HLO	Div Obj.	Manage and develop the accounting function of the Department and meet all deadlines for health grants, invoices and payroll.			
1	4				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
3	Development of accounting function	ongoing	D Magan All staff		
3.1	Maintenance & upgrade of computer systems. Work with consultants.	ongoing	Accounts	Reduce risk, minimise down time	
3.2	Liaise with IT unit and software developers.	Ongoing	Accounts	Reduce risk	
3.3	Electronic currency transactions roll out	ongoing	S Howlett R Murray M Nolan A Wright C Walsh A Mulligan	Staff support and training, maintain information flow and communication. Reduced risk. Segregation of duties	
3.4	Facilitate access to electronic payslips. Liaise with IT & Personnel	ongoing	S Howlett Mary Walsh S McNamara J Duffy M Maughan D Lynch	Maintain information flow and communication	
3.5	Represent staff at internal / external Department / Review Groups / User Groups.		C MacCarthy S Howlett R Murray M Walsh S McNamara	Response to development initiatives, maintain information flow and communication.	
4	Contingency planning and risk analysis	ongoing	Accounts		
4.1	Identify risk	ongoing	Accounts	Staff support and training, maintain information flow and communication.	
4.2	Develop, document & review contingency plans for payments	ongoing	Accounts	Staff support and training, maintain information flow and communication.	
4.3	Review Records Management	ongoing	Accounts	Staff support and training, maintain information flow and communication.	
Comments: The proposed relocation of the Department has major implications for Accounts in relation to staffing, maintenance of computer hardware & software and related issues, movement and storage of files.					

HLO	Div Obj.	Provide appropriate support and advice to the Health Service Executive in relation to both those functions remaining within the Department and functions transferring to the HSE			
1	5				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Identify functions to be transferred	28/5/05	D Magan E O'Reilly C Grealy H Minogue		Div Project Plan for Xfer
2	Agree list of functions to transfer to HSE in Q1 and Q2 '05	28/2/05	D Magan E O'Reilly C Grealy H Minogue	Agreement reached on the functions to be transferred to the HSE	
2.1	Identify steps necessary	31/3/05	D Magan E O'Reilly C Grealy H Minogue	Steps necessary for transfer have been identified	
2.3	Specify scope of function(s) to transfer to ensure proper accountability for devolved function.	31/3/05	D Magan E O'Reilly C Grealy H Minogue	Scope of the functions to be transferred have been specified	
2.4	Develop monitoring processes for transferred functions	31/3/05	D Magan E O'Reilly C Grealy H Minogue	Monitoring processes have been developed	
2.5	Liaise with HSE as appropriate during transfer	Ongoing in 2005	D Magan E O'Reilly C Grealy H Minogue	Good co-operation with the HSE regarding the transfer of functions	
Comments The timing and content of the functions schedule is subject to change and revisions to the list of functions are expected. Thus the list and dates can be only regarded as guides to sequence rather than definite completion dates at this stage. Firmer dates will be specified following agreement on overall schedule in ????					

HLO	Div Obj.	Funding but in particular :- Maintenance and Development of the National Casemix Programme in line with the Casemix System.				
2	6					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Identify functions to be transferred to HSE					
1.1	Commence negotiations with the HSE regarding the transfer of operational aspects of Casemix		05/2005	C Grealy	Transfer arrangements agreed	
2	Ongoing maintenance & Development of the National Casemix Programme					
2.1	Co-ordination & production of accurate Casemix Budget Outturn for 2006		11/2005	C Grealy D Kiernan C Wray	Accurate Casemix Budget Outturns for 2006	
2.2	Maintain and raise stakeholder participation by convening an Annual Casemix Conference		04/2005	C Wray I Norton	Hold a successful annual Conference	
2.3	Production of Technical Material for all stakeholders		03/2005	C Wray D Kiernan I Norton	Circulation of documentation to relevant stakeholders and in-house technical files updated appropriately	
3	Continuation & Initiation of New Projects to enhance the Casemix Programme					
3.1	Establish a Review of Medical Assessment Units		04/2005	EJ Morgan	Agreed recommendations on the status of MAU within Casemix	
3.2	Establish a National Paediatric Review Group*		12/2005	C Grealy EJ Morgan	Review Group established	
3.3	Establishment of a Maternity Review Group*		12/2005	C Grealy C Wray	Review Group established	
4	Technical Work arising from the Agreed Actions of the Root and Branch Review					
4.1	Review of the Daycase Budget Model including the use of the AR-DRG grouper		11/2005	D Kiernan	Completion of the Daycase Budget Model Review	
4.2	Review of version 5.1 of the AR-DRG Grouper		11/2005	D Kiernan	Completion of the Review of Version 5.1 of the AR-DRG Grouper	
4.3	Ongoing development of the Casemix Ireland Website		09/2005	C Wray	Enhancement of the Website for all stakeholders	
5	Implementation of Agreed Actions of the Root					

HLO	Div Obj.	Funding but in particular :- Maintenance and Development of the National Casemix Programme in line with the Casemix System.				
2	6					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	& Branch Review					
5.1	Circulation of the ‘Root and Branch’ Review Report		03/2005	EJ Morgan C Wray I Norton	Circulation of the ‘Root and Branch’ Review Report to all stakeholders	
5.2	Education Programmes on AR-DRG Grouper & ICD-10		11/2005	C Grealy EJ Morgan I Norton	Convene and Hold Open days on the New Grouper and Provision of new educational information to all stakeholders	
5.3	- Establishment of National Groups*		Ongoing	C Grealy EJ Morgan I Norton	Establishment of National Casemix Groups	
5.3	Involvement in the Implementation of the Bramley and Reid Report Recommendations		Ongoing	C Grealy E.S.R.I	Agreement with the ESRI on implementation of the recommendations of the report	
Comments						
* Additional resources dependant						
Critical Success Factors: The production of a timely Casemix budget each year, and its acceptance by the stakeholders as a reasonably fair and accurate reflection of activity and costs on the ground, is, in essence, the only relevant critical success factor.						
Dependencies: Successful negotiations with the HSE must be concluded so that adequate support is received for the programme and its transfer to the HSE. The recruitment and retention of support from Australian and other technical experts is crucial, without which the programme will fail. Also the retention of appropriately skilled Casemix staff within the unit is essential and the recruitment of the additional staff as per the agreed strategy is critical.						
Aspects of the Business Plan require involvement from the ESRI. The success of certain projects is dependant on their continued support and co-operation.						

HLO	Div Obj.	Implementation of the Government Decision on developing a Management Information Framework (MIF), based on the accrual concept.			
2	7				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Further develop the internal MIF framework				
1.1	Settling down period for Financial system		D Magan F Prendergast C MacCarthy	Financial system fully bedded down by June 2005	
1.2	Determine appropriate Accounting Rules / Policies		D. Magan F. Prendergast	Accounting Rules for MIF agreed	
2	Implementation of Asset Register				
2.2	Pilot Asset Register in IT Division		H. Minogue	Asset Register implemented in pilot site.	
2.3	Following pilot, roll-out of Asset Register to Corporate Services, GRO, and HPU			Procurement module in use across DoHC	
3	Implementation of Procurement Module				
			F. Prendergast P. Creedon		
3.1	Pilot Purchasing module in Corporate Services Division		F. Prendergast P. Creedon	Procurement Module implemented in pilot site	
3.2	Modifications / enhancements designed to cater for specific issues		F. Prendergast		
3.3	Following pilot, roll-out of procurement module to IT, and HPU		P. Creedon F. Prendergast P. Creedon	Procurement module in use across DoHC	
4	Agree Information Formats				
4.1	Determine information needs and reporting formats from HSE		D. Magan F. Prendergast H. Minogue	Information needs & reporting formats agreed	
4.2	Develop reporting templates, including PI's		F. Prendergast	New reporting templates developed	
Comments CSF's. The above timeframes are subject to change in the context of the Health Service Reform Programme, and the possible unavailability of Corporate Services Division in light of the proposed re-location of DoHC from Hawkin's House					

HLO	Div Obj.	To manage the application of EU <i>directives</i> (incl. relevant <i>European Court of Justice rulings</i>) applying to migrant workers, including the management and revision of bilateral reimbursement and waiver agreements between Ireland and other member states and to represent Ireland’s interests in the development of policy / legislation in this area at EU level.				
5	8					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Secure approval of Ireland’s Annual Average Cost Paper by the Audit Board of EC Administrative Commission		11/2005	D. Magan E. O’Reilly C. O’Callaghan	Approval secured	
1.1	Source relevant data, liaising with CSO, and, using spreadsheets, calculate Ireland’s Average Cost. Submit to Audit Board by notified closing date to allow for consideration at Audit Board meeting			D. Magan E. O’Reilly C. O’Callaghan		
1.2	Present paper at meeting					
2	Support correct implementation of EU Regulations 1408/71 and 574/72 at HSE level, including payments		09/2005	D. Magan E. O’Reilly C.O ’Callaghan	Guidelines created	
2.1	Work with HeBE Project Manager and team to draft guidelines on implementation of Regulations			D. Magan E. O’Reilly C. O’Callaghan		
2.2	Liaise with HSE areas as necessary					
3	Ensure Ireland’s interests represented in discussions on EU Regulations 1408/71 at EU level		12/2005	D. Magan E. O’Reilly C. O’Callaghan	Agreement secured	
3.1	Ensure agreement on remaining aspects of 1408/71 (in particular Annex VI) reflect Ireland’s interests			D. Magan E. O’Reilly C. O’Callaghan		
3.2	Ensure discussions on interaction of 1408/71 and draft Directive on Services reflects Ireland’s interests					
Comments						
With regard to Step 1, preparation of the Average Cost paper requires a complex calculation drawing on different and necessarily imperfect sources of demographic and financial data. Presentation of Average Cost papers by member states can lead to robust discussions at the Audit Board.						
With regard to Step 3, the outcome of negotiations at EU level reflect a range of factors and the interests of all member states and may be agreed from time to time on the basis of compromise.						

HLO	Div Obj.	To manage the application of EU <i>directives</i> (incl. relevant <i>European Court of Justice rulings</i>) applying to migrant workers, including the management and revision of bilateral reimbursement and waiver agreements between Ireland and other member states and to represent Ireland’s interests in the development of policy / legislation in this area at EU level.					
5	8						
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef	
4	Monitor ECJ rulings impacting on patient mobility		Ongoing	D. Magan E. O'Reilly C. O'Callaghan	Impacts noted		
4.1	Monitor impact and potential impact of patient mobility cases and rulings				D. Magan E. O'Reilly C. O'Callaghan		Interventions submitted where advisable
4.2	Work with CSSO to prepare interventions where advisable						
5	Work towards bilateral agreement with Spain		09/2005	D. Magan E. O'Reilly C.O 'Callaghan	Draft Agreement		
5.1	Follow-up meeting with Spanish delegation						
5.2	Progress agreement						
6	Agree basis for and carry out new survey of workers’ dependants		09/2005	D. Magan E. O'Reilly C.O 'Callaghan	Agreement secured		
6.1	Agree basis of survey with UK delegation						
6.2	Carry out survey						
7	Agree payments on foot of bilateral agreement		09/2005	D. Magan E. O'Reilly C. O'Callaghan	Agreement secured		
8	Agree 2004 survey of pensioners		06/2005	D. Magan E. O'Reilly C. O'Callaghan	Agreement secured		
Comments							
With regard to bilateral agreements with other member states, successful agreement is dependent on a shared basis for agreement between two member states.							
With regard to the UK bilateral agreement, shifts in demographics and survey outcomes are not normally available in time for publication of the REV. Consequently, forecasting receipts cannot be very precise.							

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Finance Unit - Professional Accounting

Division Head: Brian Donovan

MAC Area: Finance

MAC Member: Dermot Smyth, Assistant Secretary

Divisional Objectives:

SS HLO A: High Level Objective 2: Responsiveness and appropriate Care Delivery

To support the system in developing capacity - infrastructure, technology, systems and people - to deliver timely and appropriate services; and to provide key policy guidance in the development of services to ensure appropriate care is being delivered in the appropriate setting with a focus on patients, clients and their families.

Objectives 1-4 relate to the National Casemix Program which will transfer to the HSE. This transfer is not expected to be completed in 2005.

Div Obj 1:

To Review and Audit the Specialty Costing Returns of the Hospitals participating in the National Casemix Program.

Div Obj 2:

To Maintain and further develop the Specialty Cost Reporting Systems and Update the Specialty Cost Instruction Manual.

Div Obj 3:

To Support the Maintenance and Development of the National Casemix Program.

Div Obj 4:

To provide Training and Education to the 37 Hospitals participating in the Casemix Budget Models.

Div Obj 5:

To ensure that the review of annual financial statements of statutory health bodies and agencies and related statutory compliance provisions are organised and addressed in an efficient manner.

Div Obj 6:

To monitor the application of and provide guidance in relation to the Department's financial reporting standards by the Health Service Executive, including statutory/ voluntary hospitals funded by the HSE.

Div Obj 7:

To provide assistance in selecting external risk consultants who will guide MAC and Department divisions in introducing a formal Risk Management process as required by the Mullarkey Report (Report of Working Group on the Accountability of Secretaries General and Accounting Officers).

Div Obj 8:

To provide assistance within the Department to statutory and voluntary health bodies where they are required to obtain the consent of the Minister to certain estate management transactions.

Div Obj 9:

To provide Professional Accounting assistance to the Department on matters relating to the Health Service Reform Program.

Part 1:

HLO	Div Obj.	To Review and Audit the Specialty Costing Returns of the Hospitals participating in the National Casemix Program				
2	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Distribution of 2003 Specialty costs and hospital activity data to all 37 hospitals in Casemix.		February 2005	F.Hughes C.Moore	Data available for hospitals for comparison with their peers and for benchmarking	
1.1	Collate costing data and match it with hospital activity data to arrive at Specialty cost per cases.					
2	Review Specialty costs on a year by year basis and on a Group basis.		Nov 2005	B.Donovan E Watters F.Hughes C.Moore	Agreed costs for the 37 hospitals in casemix budget models pre national specialty deductions. Finalised costs for inclusion in casemix budget models.	
2.1	Reconciliation of costs from Annual Financial Statements to costs submitted for inclusion in Casemix Budget models.					
2.2	Issue query letters as appropriate to hospitals on matters raised during review and analyse replies.					
2.3	Agree National Specialty Deductions in order to complete reviews.					
3	Audit of Specialty Costing Returns		Ongoing 2005	B.Donovan E Watters C Moore	Compliance with Specialty Cost Instruction Manual.	
3.1	Carry out on site audits as required.					
Comments Availability of staff with appropriate financial experience and IT skills is essential to this process. Any changeover of staff must allow for this and an appropriate handover period, if serious problems are to be avoided. The Department's mobility policy may affect the above review process						
Audits are necessary to ensure compliance with the guidelines in the Instruction manual. This is particularly so in the current climate of increasing funding rates in the Casemix Budget models. The funding rates will increase from 20% to 30% in 2005						

HLO	Div Obj.	To Maintain and further develop the Specialty Cost Reporting Systems and Update the Specialty Cost Instruction Manual				
2	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Assessment of existing reporting systems.		Ongoing 2005	B.Donovan F.Hughes C.Moore	Updated Reporting system available for use in Specialty Costing exercise	
1.1	Identifying amendments to the existing reporting systems in light of changes in Casemix classification and Grouping systems.					
2	Installation of updated systems in hospitals.		May 2005	F.Hughes C.Moore	Updated Reporting systems installed in each hospital pre- May 31 submission deadline	
2.1	Visit each hospital to install new system					
3	Update the Specialty Cost Instruction Manual.		April 2005	B.Donovan F.Hughes C.Moore	Updated Specialty Cost Instruction Manual available for Casemix conference to be held in April	
3.1	Prepare and issue the costing manual to hospitals. This manual will incorporate audit findings.					
Comments The reporting system presently in use has been developed and updated annually from in house resources to allow for greater flexibility in amending and improving the system.						

HLO	Div Obj.	To Support the Maintenance and Development of the National Casemix Program			
2	3				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Assess the costing methodologies used in other countries for possible use in Specialty costing return and cost weights study.	Ongoing 2005	B Donovan	Creation of cost weights based on foreign costs adapted for Irish use as appropriate	
1.1	Develop links with countries using Casemix through meetings, Internet and attendance at conferences. Such countries include:UK, Australia, Canada,Germany, Slovenia and the Nordic States				
2	Review cost centre allocation of costs in existing DRG Casemix Budget model and amend to allow for comparison of alternative DRG Grouper(s).	Ongoing 2005	B Donovan F Hughes C Moore	Comparison of Casemix funding using alternative DRG Grouper(s).	
2.1	Reprogram existing costing reporting system into format suitable for alternative DRG Grouper(s)				
3	Support the ongoing Maintenance and Development of the Casemix Programme.	Ongoing 2005	B Donovan E Watters C Moore F Hughes	Casemix Budget models which are robust and equitable from a funding perspective.	
3.1	Membership of Casemix Technical and Management Groups .			Ongoing contact maintained with hospitals and agencies participating in Casemix	
3.2	Meetings with Hospitals , ESRI and providers of Grouping and Classification Systems as appropriate.				
<p>Comments The coding and patient classification systems require to be updated in order to keep up to date with advances in medicine. Costing systems also need to be developed accordingly.</p> <p>Development of cost weights which reflect Irish practices and costs is required in light of increased funding rates. This rate of development is dependent upon the availability of appropriate systems at hospital level.</p>					

HLO	Div Obj.	To provide Training and Education to the 37 Hospitals participating in the Casemix Budget Models				
2	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Educate hospital on contents of manual and revisions to the Reporting System			B.Donovan F.Hughes C.Moore	Hospitals officially notified of amendments to Instruction manual and reporting system for use in the 2004 Casemix Budget models	
1.1	Casemix Conference to be held 13 to 15 April 2004 .		April 2005			
1.2	Provision of seminars and meetings with hospitals new to Casemix.		Ongoing 2005			
2	Provide Training and Education to Hospitals as requested			B.Donovan F.Hughes C.Moore	Assist hospitals new to the Casemix System and staff in existing hospitals new to the area in completion of costing returns. This will improve the quality of costing returns submitted for review.	
2.1	On site support to hospitals in the preparation of the annual costing return.		Ongoing 2005			
2.2	On site training in the specialty cost reporting systems		Ongoing 2005			
2.3						
3						
3.1						
Comments Hospitals new to Casemix require a lot of assistance in year one as there is a steep learning curve in Casemix . Staff in existing hospitals also rotate on a regular basis and thus require the assistance of the staff within the Specialty Costing Unit						

Part 1:

HLO	Div Obj.	To ensure that the review of annual financial statements of statutory health bodies and agencies and related statutory compliance provisions are organised and addressed in an efficient manner.				
2	5					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Review all annual financial statements from statutory health bodies and the related audit reports from the Comptroller & Auditor General within the specified or appropriate time limits.		Ongoing	E.Watters M.Guiry	Completion of Review Memorandum on AFS issues for Assistant Secretary/Secretary General.	
2	Ensure all Statutory presentations of annual accounts of health bodies are made before the Oireachtas and subsequently before the Public Accounts Committee are made on time.		Ongoing	E.Watters M.Guiry	Presentation of all annual accounts to the Oireachtas/PAC in accordance with time-limits ,as required under legislation or by convention.	
3	Address any significant matters or issues identified in the accounts following review and/or presentation before the Oireachtas/PAC with the appropriate management of the relevant body or agency.		Ongoing	E.Watters	Follow-up of issues raised in C&AG audit reports or DoHC reviews to resolution with relevant agencies	
Comments						
Achieving the presentation of annual financial statements within the specified time-limits is dependant upon a number of factors including; the time period taken to complete the annual statutory audits, the finalisation of any special audit supplements or examination reports, arranging and scheduling the DoHC review of accounts on a continuous basis which may also be impacted by other assigned tasks/objectives, and the ongoing co-ordination of the presentation process.						

HLO	Div Obj.	To monitor the application of and provide guidance in relation to the Department's financial reporting standards by the Health Service Executive, including statutory/ voluntary hospitals funded by the HSE.			
2	6				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	<p>Provide guidance and advice to the Department and health agencies on accounting and financial reporting standards currently in operation</p> <p>Review professional accounting standards and relevant publications as applicable to accounting for publicly funded health agencies.</p>	Ongoing	E.Watters B.Donovan	Maintenance of accounting standards which reflect professional best practice in ROI.	
2	<p>Review and examine current statutory reporting and related financial accounting regulations with HSE under the compliance provisions contained within the Health Act, 2004</p> <p>Liaise with HSE Director(s) of Finance on the changes arising from the inception of the new organisational structures and service configuration over the coming 12 to 24 months.</p>	On-going through 2005/6	E.Watters B.Donovan	Providing for changes to existing financial reporting and related accounting standards for the HSE and other agencies, as appropriate	
Comments <p>The review of existing accounting/reporting standards is closely linked to the implications and consequences of reporting the accounts of the HSE under Government Appropriations Accounting rules. The application of Public Financial Procedures and the related accounting rules for the Appropriation accounts , which are non-accruals based, is likely to have a bearing upon the nature and degree of work necessary in revising existing accrual based accounting standards.</p>					

HLO	Div Obj.	To provide assistance in selecting external risk consultants who will guide MAC and Department divisions in introducing a formal Risk Management process as required by the Mullarkey Report (Report of Working Group on the Accountability of Secretaries General and Accounting Officers)				
2	7					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	<p>Review of tender proposals received for the risk management consultancy assignment to assist MAC and Line Divisions in initiating a Risk Management process for corporate and divisional risks.</p> <p>To provide input and disseminate guidance received from the D/Finance on risk management issues for Government Departments presently introducing new Risk structures (The Mullarkey & Brennan recommendations for this Department proposed a specific Risk Assessment Unit be established as part of its structures)</p>		<p>Feb 2005</p> <p>March – June 2005</p>	<p>E.Watters</p> <p>B.Donovan</p>	<p>Selection of successful firm to guide and assist MAC and line divisions in introducing a Risk Assessment & Evaluation process.</p>	
2	<p>Provide assistance to the Finance Unit in completing the remaining Mullarkey recommendations on</p> <p>a.Statements of Accountability from Bodies funded by the Department and</p> <p>b.Updating the Review of Internal Financial Controls.for Secretary General’s statement appended with the Appropriations Account</p>		<p>March / April 2005</p>	<p>E.Watters</p> <p>M.Guiry</p>	<p>Completion of the remaining recommendations within the Mullarkey Report</p>	

HLO	Div Obj.	To provide assistance in selecting external risk consultants who will guide MAC and Department divisions in introducing a formal Risk Management process as required by the Mullarkey Report (Report of Working Group on the Accountability of Secretaries General and Accounting Officers)				
2	7					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
Comments The introduction of the Department Risk Management framework at MAC (Corporate) and within Department Line divisions will be assisted by a firm of specialist risk management consultants to be selected shortly. With the conclusion of the Mullarkey Group representation in December 2004 and the engagement of external consultants, this business plan now reflects the transition to implementation as a cross-Department process. It is therefore essential that the introduction of structures supporting this new process are established with and directed in a strategic fashion , first by the Secretary General and MAC , to be followed by the individual line division management. With the engagement of external consultants to facilitate the development of this framework, key decisions in terms of planning, and resourcing this Department-wide initiative and its future organisation and management in the Department now need to be determined. (ie. Risk Assessment Unit) Failure to address these issues at the outset with the engagement of external consultants could result in the eventual process being sub-standard with related consequences in terms of both cost and value for money in the assignment.						

HLO	Div Obj.	To provide assistance within the Department to statutory and voluntary health bodies where they are required to obtain the consent of the Minister to certain estate management transactions.			
2	8				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	To assist the line divisions in dealing with requests from statutory and voluntary health agencies for formal Ministerial consent in matters related to their Estate Management ie. the purchase, sale or lease of land and property.	On-Going	M.Guiry E.Watters	Provide advice and guidance in cases involving requests for Ministerial consent relating to Estate Management	
2	To maintain the administrative records and liaison with the Legal Adviser (or Chief State Solicitor's Office) and support the process of Estate Management involving the Minister or the Department of Health & Children.	On-Going	M.Guiry E.Watters	Maintain complete and up-to-date Estate Management records.	
Comments The volume of work on Estate Management increased significantly during 2004 arising from changes in legislation for health boards and their associated powers to purchase and dispose of lands. While the Health Act, 2004 has vested this power in the HSE, various transactions may require Department involvement during 2005. In addition, non-statutory bodies with agreements involving the Minister remain effective and thus will require examination by the Department and its line divisions.					

HLO	Div Obj.	To provide Professional Accounting assistance to the Department on matters relating to the Health Service Reform Program				
2	9					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	To Support the Health Service Reform Programme As required Transfer of Casemix to the HSE		Ongoing 2005	B Donovan E Watters		
2						
3						
Comments						
The demands on the Professional Accounting Unit in relation to the Health Service Reform Programme are difficult to estimate at this stage. The timing and duration of such demands may impact on the other objectives contained in this Business Plan.						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Health Insurance

Division Head: Brendan Phelan, Principal Officer

MAC Area: Finance

MAC Member: Dermot Smyth, Assistant Secretary

Divisional Objectives:

High Level Objective 1:

To put in place organisational structures, accountability frameworks and management capacity (systems and people) to ensure that health and personal services are planned and delivered efficiently and effectively on the basis of best available evidence and monitored and evaluated on the basis of this evidence.

Div Obj 1:

Implementation of Government policy on the private health insurance regulatory framework, in particular implementation of framework to enable retention of community rating and to enhance competition in the sector.

Div Obj 2:

Implementation of such change in the corporate status of the Voluntary Health Insurance Board as may be decided by Government.

Div Obj 3:

Assist in the implementation of the Health Strategy.

Part 1:

HLO	Div Obj.					
1	1	Implementation of Government policy on the private health insurance regulatory framework, in particular implementation of framework to enable retention of community rating and to enhance competition in the sector.				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Implementation of Risk Equalisation Scheme in accordance with statutory provisions.		Ongoing	B. Phelan P. Barrett, J. Scannell, M. Kennedy.	Actions and decisions, as per the provisions of the scheme	
1.1	Liaising with the Health Insurance Authority (HIA) as per legislation and with actuarial advisers in relation to Minister’s functions under the scheme. Dependent on the Authority’s analysis of returns or other issues which may arise. Revision of the Scheme as the need arises.					
2	Effective Liaison with the Health Insurance Authority (HIA).					
2.1	Consultation relating to regulation and development of the market.		Ongoing	B. Phelan P. Barrett, J. Scannell, M. Kennedy.	Ongoing	
2.2	Finalisation of Pension Scheme.		Summer		Scheme laid before the Oireachtas	
3	Preparation of “Age-at-Entry” Community Rating Regulations. (Late Entry Loadings) and submission to Oireachtas. Related amendments to Open Enrolment Regulations. Consideration of Draft regulations with Actuarial Advisers Liaison with the Health Insurance Authority. Submission to Oireachtas.		By End-Year.	B. Phelan P. Barrett, J. Scannell, M. Kennedy.	Completed Draft Regulations presented to Oireachtas	

HLO	Div Obj.					
1	1	Implementation of Government policy on the private health insurance regulatory framework, in particular implementation of framework to enable retention of community rating and to enhance competition in the sector.				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
4	Commencement of drafting Revised Minimum Benefit. Consideration of the HIA's Report. Commence drafting in consultation with actuarial advisors and liaison with the HIA.		By End-Year.	B. Phelan P. Barrett, J. Scannell, M. Kennedy.	Draft of revisions to regulations.	
5	Continuation of liaison with relevant EU authorities on regulatory framework, in particular the forthcoming Court Case to be heard in the EU Court of First Instance (C.F.I.). Finalisation and submission of Intervention to C.F.I. Any follow-up arising.		Date to be set by Court.	B. Phelan, P. Barrett, J. Scannell, M. Kennedy.	Submission to the Court.	
6	Monitoring of the operation of health insurance legislation generally. Meetings with HIA, Providers and Department's Actuarial Advisers.		Ongoing.	B. Phelan, P. Barrett, J. Scannell, M. Saunderson M. Kennedy.	Proposals for change, as appropriate	
Comments						
The above objective is significantly dependent on external linkages. These involve liaison with the Health Insurance Authority, actuarial and legal advisors, EU Commission Services, the Houses of the Oireachtas, and the Court of First Instance of the European Court of Justice.						

HLO	Div Obj.	Change the corporate status of the Voluntary Health Insurance Board as per Government policy.			
1	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Finalise consideration in relation to VHI corporate status.	March / April	B. Phelan, P. Barrett. M Saunderson	Completed consideration of Strategic options.	
1.1	Liaison with VHI and other Govt. Departments to determine most appropriate course of action in current circumstances. Prepare and submit proposals to Tánaiste.				
2	Provide for Government consideration of proposed course of action. Preparation of Memorandum to Government.	April	B. Phelan, P. Barrett, M. Saunderson	Government memorandum.	
3	Drafting of legislation on foot of Government decision.		B. Phelan, P. Barrett, M. Saunderson		
3.1	Subject to Government decision, provision of drafting instructions to, and close liaison with, Office of Parliamentary Counsel.	End June	M. Kennedy	Progress on Drafting of Bill.	
3.2	Preparation of draft Bill	End October		Draft Bill.	
Comments There are very clear linkages here to external factors, such as liaison with other Departments and with advisors. Liaison with EU Commission services on wider health insurance regulatory issues will be relevant to progress on steps to achieve this objective. Legal advices may also be required. Staffing availability may also be a consideration.					

HLO	Div Obj.					
1	3	Assist in the implementation of the Health Strategy.				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Implementation of objectives 2 & 3 in order that Private Medical Insurance will continue to play a vital part in the overall resourcing of health care. As per actions set out in objectives 1 & 2.		As per objectives 1 & 2.	B. Phelan, P. Barrett, J. Scannell, M Saunderson M. Kennedy.	As per objectives 1 & 2.	
Comments Process will primarily involve liaison with, and provision of advice to, other Divisions of the Department, in relation to actions they are proposing/implementing under the Strategy relevant to the conduct of private health insurance business.						

Part 2: Developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Hospital Planning Office

**Division Head: Richard O'Keeffe, Chief Architectural Advisor
Tony Morris, Principal Officer NDP**

MAC Area: Finance

MAC Member: Dermot Smyth, Assistant Secretary

Divisional Objectives:

SS HLO 2: Responsive and Appropriate Care Delivery

To support the system in developing capacity – infrastructure, technology, systems and people – to deliver timely and appropriate services; and to provide key policy guidance in the development of services to ensure appropriate care is being delivered in the appropriate setting with a focus on patients, clients and their families.

Div Obj 1:

To provide expert advice and assistance in relation to the Strategic Management of the Health Capital Programme, in order to support the Health System in the provision and maintenance of appropriate infrastructure and technology.

Div Obj 2:

Provide appropriate support and advice to the Department of Health and Children and the Health Service Executive in relation to both those functions remaining within the Department and functions transferring to the HSE.

SS HLO 5: Supporting wider Government Programmes and International Health Policy.

To support the implementation for the Government programmes and policies beyond the health sector and to help meet Ireland's health-related commitments at European and international level.

Div Obj 3:

Provide support to the Department and Health Agencies in respect of policy development and the implementation of policy relating to the broad range of environmental, planning, procurement, and technical issues currently being advised at National, EU and International level.

Part 1:

HLO	Div Obj.	To provide expert advice and assistance in relation to the Strategic Management of the Health Capital Programme, in order to support the Health System in the provision and maintenance of appropriate infrastructure and technology.			
2	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Supporting the Minister and the Department in relation to Strategic Management of Health Capital Programme.				
1.1	Advising and supporting the Minister on all issues regarding capital investments, NDP/CIF.	ongoing.	HPO staff.		
1.2	Providing policy guidance to the HSE and other agencies in respect of Capital investment and health infrastructure.	ongoing.	HPO staff.		
1.3	Assessing the capital plan proposed in Service Plans submitted by the HSE to the Minister for approval.	on receipt	HPO staff.	Report issued.	Health Act 2004.
1.4	Support the Minister in establishing the annual element of Capital Investment Framework (CIF) in the estimates process for HSE.	Nov. 2005	HPO staff.	Estimates published.	
1.5	Establish annual element of CIF in estimates process. (DOHC).	Nov. 2005	HPO staff.	Estimates published.	
1.6	Monitor and Reporting CIF progress.	ongoing.	T. Morris.	Reports prepared.	
1.7	Monitor project specific progress and cash flow as appropriate.	ongoing.	Professional staff	Reports prepared.	
1.8	Evaluate outputs and outturns.	ongoing.	HPO Staff.	Output Report.	
1.9	Compliance with DOF sanctions and reporting requirements.	ongoing.	HPO staff.	Compliance.	DOF.
1.10	Compliance with ESIOP reporting requirements.	Quarterly.	T. Morris.	Reports issued.	NDP
2	Policy Development – capital consequences.				
2.1	Infrastructure to support new or changed service delivery Initiatives.	ongoing.	Professional Staff.	Timely provision of advice.	

HLO	Div Obj.	To provide expert advice and assistance in relation to the Strategic Management of the Health Capital Programme, in order to support the Health System in the provision and maintenance of appropriate infrastructure and technology.				
2	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
2.2	Planning and environmental service design standards.		ongoing.	Professional Staff.	Timely prevision of advice.	
2.3	Cost advice, best value solutions, cost limits.		ongoing.	Professional Staff.	Timely prevision of advice.	
3	Research and Development.		ongoing.	Professional Staff.	Reports prepared and advice given.	
3.1	Care pathways (Infrastructure Support)					
3.2	Planning Standards.					
3.3	Cost Standards.					
3.4	Procurement methodologies.					
4	Procedures		Autumn 2005.	Professional Staff	Review & update existing guidance, plan completion of documentation.	
4.1	Guidance Manuals - briefing - design - equipping - procurement					
5	National Support		ongoing.	Q.S.s	Database maintained.	
5.1	Cost database (Qcost 2004) management.					
5.2	Strategic Estate planning and optimisation.					
5.3	Completion of implementation of capital management and reporting system (INSPIRE)		T Woulfe-Flanagan to advise.	Professional Staff.	System operational.	
6	Option Appraisal		As required.	Professional Staff.	Timely provision of advice.	
6.1	Expert assessment.					

HLO	Div Obj.	To provide expert advice and assistance in relation to the Strategic Management of the Health Capital Programme, in order to support the Health System in the provision and maintenance of appropriate infrastructure and technology.				
2	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
7	Individual procurement options.					
7.1	Expert advice.		As required.	Professional Staff.	Timely provision of advice.	
8	Project Evaluation and Feedback					
8.1	Post completion review <ul style="list-style-type: none">- briefing- design- equipping- procurement- cost in use- environment -al quality.		June 2005	Professional Staff.	Prepared review methodology.	
9	Public Private Partnerships.					
9.1	Expert advice to PPP unit on procurement procedures, design standards, and risk evaluation.		As required.	Architects, Q.S.s	Timely provision of advice.	
10	Provide expert professional advice.					
10.1	Professional procurement advice on all elements of projects- relevant EU Directives/National guidelines, Design Brief development, design team/site staff/project management appointments, design development, costs/budgets, tendering, contracts, equipping.		ongoing.	HPO Professional Staff.	Timely prevision of advice.	
10.2	Promotion of architectural quality.			Architects.		
10.3	Promotion of integrated value for money solutions for capital investment and life cycle costing.			Professional Staff.		
10.4	Promotion in the arts in healthcare (Government Policy “Public Art – Percent for Art scheme”)			Architects.		

HLO	Div Obj.	To provide expert advice and assistance in relation to the Strategic Management of the Health Capital Programme, in order to support the Health System in the provision and maintenance of appropriate infrastructure and technology.				
2	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
11	Strengthen International Role, and input to EUHPN.		ongoing.	P de Freine, T Woulfe - Flanagan	Active participation.	
11.1	To participate in the development of the EU Health Property Network, to ensure access to the latest range of relevant research, knowledge, experience and expertise. Benchmarking against European standards.					
Comments <ul style="list-style-type: none">• This plan is subject to review during the course of 2005, to reflect future developments in the health reform programme.• List of actions is likely to change depending on the availability of resources and expertise in the HSE to develop their future role.• Particular functions require clarifications of procedures, including the requirements of the Department of Finance, agreement of new roles and responsibilities, etc, in the context of the new Health Act.						

HLO	Div Obj.	Provide appropriate support and advice to the Department of Health and Children and the Health Service Executive in relation to both those functions remaining within the Department and functions transferring to the HSE.				
2	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Assist in the implementation of transfer to HSE of agreed list of functions.		ongoing.	HPO Staff.	Transfer complete.	Health Act 2004
1.1	Identify principle steps necessary, including programme.		June 2006.	HPO Staff.	List complete.	Health Act 2004
1.2	Identify knowledge to transfer.		ongoing.			
1.3	Identify records to transfer and retain.		ongoing.			
1.4	Identify and complete specific tasks in conjunction with HSE.		ongoing.			
1.5	Ensure clarity and accountability in respect of transferred functions.		ongoing.			
1.6	Assist in the implementation of a training programme as appropriate.		ongoing.			
2	Transitional arrangements.					
2.1	Establish Capital Investment Framework outturn for 2004.		Feb. 2005	HPO Staff.	Report prepared.	
2.2	Assist HSE in establishment of its capital plan 2005.		March. 2005	HPO Staff.	Plan prepared.	
2.3	Advise as requested in relation to capital payments.		ongoing.	HPO Staff.	Timely provision of advice.	
2.4	To continue to provide project specific professional advice and support for delivery of the Health Capital Programme.		ongoing.	Professional Staff.	Timely provision of advice.	
2.5	To continue to provide advice and support for the equipping replacement programme.		ongoing.	Professional Staff.	Timely provision of advice.	
Comments: The list of actions noted above is subject to change and revisions are expected. The list can be only be regarded as a guide. Firmer dates will be specified following agreement on overall schedule.						
“Transfer” and “transitional” arrangements are dependent on the agreement, readiness, and capacity of the HSE to perform new functions. Dates noted above subject to periodic review.						

HLO	Div Obj.	Provide appropriate support and advice to the Department of Health and Children and the Health Service Executive in relation to both those functions remaining within the Department and functions transferring to the HSE.			
2	2				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs

HLO	Div Obj.	Provide support to the Department and Health Agencies in respect of policy development and the implementation of policy relating to the broad range of environmental, planning, procurement, and technical issues currently being advised at National, EU and International level.				
5	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Advancing the sustainability agenda.					
1.1	Promotion of improved environmental and health & safety practices relating to the generation, management and disposal of healthcare risk waste: updating the segregation and packaging guidelines.		ongoing.	B McGrath	Updated guidelines.	
1.2	Developing policy with the SEI on the establishment of a pilot Energy Management Bureau.		June 2005.	J Murphy	Bureau Operational.	
1.3	Participate with the interdepartmental group on National Energy Procurement.		April 2005.	J Murphy	Tender awarded.	
1.4	Participate in architectural Taskforce on Accessibility.		ongoing.	P de Freine	Issues highlighted advice proposed.	
1.5	Promote the use of sustainable products and practices in the provision of health buildings.		ongoing.	Architects & Engineers.	Issues highlighted advice proposed.	
2	National health-care waste disposal policy.					
2.1	Participation in the North/South Joint Waste Management Board (JWMB) and overseeing the joint healthcare waste disposal project.		ongoing.	B McGrath J Murphy	Continuing Participation.	
2.2	Contract Management of the JWMB healthcare risk waste contract in the Republic of Ireland.		ongoing.	J Murphy	Annual Report.	
2.3	Establishing and reviewing policy to ensure compliance with operative EU Directives.		ongoing.	B McGrath	Review complete.	
3	Government Contracts Committee. To provide professional advise on the development of comprehensive national procurement guidance for		ongoing.	P Finnegan		

HLO	Div Obj.	Provide support to the Department and Health Agencies in respect of policy development and the implementation of policy relating to the broad range of environmental, planning, procurement, and technical issues currently being advised at National, EU and International level.				
5	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	public works contracts.					
3.1	Membership of the Government Contracts Committee – Construction (GCCC) Participation in working groups on specific issues. Assessment & comment on Draft documents prepared by the GCC.		ongoing.	P Finnegan D O’Dwyer Professional Staff	Continuing relevant contribution to the work of the Committee.	
3.2	Professional Indemnity Insurance (PII – sub group).		ongoing.	P Finnegan	Review Report implementation.	
4	To provide professional advise on the development of comprehensive national procurement guidance for public supplies and services contracts..					
4.1	Membership of the Government Contracts Committee – (GCC).		ongoing.	T Woulfe-Flanagan	Continuing.	
4.2	Implementing National Procurement Policy.					
4.2.1.	Promoting effective and efficient procurement practices in the Department, the Health Service Executive, and other Health Agencies.		ongoing.	T Woulfe-Flanagan (within Department only)	Continuing.	
4.2.2.	Improving and strengthening governance and accountability.		ongoing.	T Woulfe-Flanagan (within Department only)	Continuing.	
4.2.3.	Achieving best value for money outcomes for procurement of goods and services by the health sector.		ongoing.	T Woulfe-Flanagan (within Department only)	Continuing.	
4.3	eProcurement.					

HLO	Div Obj.	Provide support to the Department and Health Agencies in respect of policy development and the implementation of policy relating to the broad range of environmental, planning, procurement, and technical issues currently being advised at National, EU and International level.			
5	3				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
4.3.1	Supporting the implementation of the <i>Strategy for the implementation of e-Procurement in the Irish Public Sector</i> in the health sector.	ongoing.	T Woulfe-Flanagan (within Department only)	Continuing.	
4.3.2	Dynamic Purchasing Systems.				
4.4	Public Procurement Law.				
4.4.1.	Deliver training on the introduction of new E.U. Procurement Directives.	late 2005 early 2006.	T Woulfe-Flanagan (within Department only)	Training complete.	
4.5	Successful Delivery Skills and Capacity.				
4.5.1.	Collaborate with the Health Service Executive to ensure appropriate capacity building, training and education measures.				
4.6	Collaborative Opportunities.				
4.6.1.	Promote appropriate procurement aggregation.				
4.7	Strategic Supplier Management.				
4.7.1.	Promote Supply Chain Management. - Building relationships, knowledge, partnerships - Frameworks				
4.8	Procurement guidance.				
4.8.1.	Develop User guide of proven good practice for - Procurement strategies, - Business planning including Value for Money Assessments - Compliance with Public	March 2006.	T Woulfe-Flanagan	User Guide complete.	

HLO	Div Obj.	Provide support to the Department and Health Agencies in respect of policy development and the implementation of policy relating to the broad range of environmental, planning, procurement, and technical issues currently being advised at National, EU and International level.			
5	3				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
	Procurement Law, national procedures and guidance - Selection and Award Procedures - Specifications - Contractual arrangements - Risk management - Contract Management				
Note: Achieving the Departments' Statement of Strategy 2005-2007 in respect of procurement within the HSE and other Health Agencies will require additional appropriately skilled resources.					
5	E.U/ Directives on medical devices and other health related issues.				
5.1	To develop policy in relation to medical devices, including contributing to its development at EU level.	Ongoing	W. Higgins		
5.2	Participate in the examination and formulation of proposals for EU Directives at Commission and Council levels. Prepare draft national Regulations to give effect to amending EU Directives on Medical devices.			Putting Ireland's case at meetings in Brussels and ensuring developments are consistent with this country's public health policies. Transportation of Directives etc. as required.	
5.3	Chair Scientific advisory committee for Medical Devices in IMB.			Produce scientific advice for Board of IMB.	
5.4	Ongoing consultation with International, National, Statutory and Representative Bodies in the development of policy in regard to Medical Devices.				
5.5	Ongoing policy development in	Ongoing	W. Higgins	Positive feedback	

HLO	Div Obj.	Provide support to the Department and Health Agencies in respect of policy development and the implementation of policy relating to the broad range of environmental, planning, procurement, and technical issues currently being advised at National, EU and International level.				
5	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	consultation with the Irish Medicines Board, Healthcare Standards. Consultative Committee. ETCI, IMDA, RPIL.				from relevant parties.	
5.6	Implement regulations to transpose EU Directive on protection in use of ionising radiation in medical and					
5.7	dental treatments. Transpose balance of directive, prepare guidelines for users. Chair advisory committee, consultation with RPIL.		Ongoing	W. Higgins	Facilitate application in State.	
5.8	Support the development of Health Technology Assessment strategy.					
5.9	Support and advise on the development of strategic plans for radiotherapy services.					
5.10	Support the service review of medical physics and clinical engineering.					
Comments: Actions under divisional objective 3 will be dependent on the availability of resources in the context of health reforms and transitional arrangements, clarification of future roles and responsibilities, and the capacity/involvement of other agencies and bodies.						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Information Management Unit

Division Head: Hugh Magee, Senior Statistician

MAC Area: Finance

MAC Member: Dermot Smyth, Assistant Secretary

The Information Management Unit (IMU) is the focal point for statistical data collection and analysis within the Department. At present, the Unit serves a dual purpose. The first is to compile Integrated Management Returns (IMRs), personnel and other data, to collate and publish health statistics and to manage devolved information systems. The second is to provide statistical expertise, to interrogate the evidence-base for policy and accountability in relation to health services and population health, and to take a lead role in the formulation and implementation of data/statistics information policy. In the context of the revised role of the DoHC within the Health Service Reform Programme, the data collection/dissemination role will be subject to phased transfer to the Health Service Executive (HSE), the Health Information and Quality Authority (HIQA) and other agencies as appropriate. The second role represents core business within the restructured Department.

The work of the IMU provides support for all five of the high level objectives set out in the Department's Statement of Strategy, 2005-2007. These are high performance, responsive and appropriate care delivery, fair access, better health for everyone, and supporting wider government programmes and international health policy. Given the cross-cutting and enabling nature of information, the majority of the IMU's divisional objectives are most appropriately listed under the first of the high level objectives (High Performance) which is about ensuring that services are planned and delivered on the basis of best available evidence, and monitored and evaluated on the basis of this evidence. The IMU also has a role in the provision of information to the EU and other international bodies and this divisional objective falls under high level objective 5.

High Level Objective 1: High Performance

To ensure that the organisational structures, legal and accountability frameworks and management capacity (systems and people) are in place so that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence, and monitored and evaluated on the basis of this evidence.

Divisional Objectives (High Level Objective 1) :

Analytical and statistical capacity are required to assess need, to formulate policy, to evaluate performance and to benchmark ourselves against international standards of health status and health care. Meeting the demands of high performance requires development of the evidence-base and of the skills to effectively interrogate the system. The objectives encompass:

- a. Policy analysis and statistical advice/expertise.
- b. Analysis for Parliamentary Questions, research and other analysis requests.
- c. Data and statistics information policy development and implementation.
- d. Data collection, surveys, report production and data handling.
- e. Management of devolved health information systems.

The first 3 divisional objectives (a-c) under High Performance refer to analytical and information policy responsibilities much of which will form core business for the restructured Department in ensuring accountability and facilitating policy development. The last two objectives (d,e) refer largely to data collection and reporting tasks. This work will be subject to phased transfer to HSE or HIQA as appropriate, and these transitional arrangements are listed as specific actions in this Plan.

High Level Objective 5: Supporting wider government programmes and international health policy

To support the implementation of the Government programmes and policies beyond the health sector and to help meet Ireland's health-related commitments at European and international level.

Divisional Objective (High Level Objective 5) :

As part of both its data policy and data dissemination functions, the IMU is involved in the Public Health Programme of the European Union (EU) both in the development of EU health information policy and through leadership/participation in projects funded under the Programme. The IMU also provides data to Eurostat, the World Health Organisation (WHO), the Organisation for Economic Cooperation and

Development (OECD) and other agencies. It is also involved in information policy work with these organisations. Much of the work is concerned with the development and implementation of health indicators for the purposes of the improved international comparison of health status and health care.

Part 1:

HLO	Div Obj.	a. Policy analysis and statistical advice/expertise b. Analysis for Parliamentary Questions, research and other analysis requests c. Data and statistics information policy development and implementation d. Data collection, surveys, report production and data handling e. Management of devolved health information systems			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
a. Policy analysis and statistical advice/expertise					
1	Analysis for policy development				
1.1	Cardiovascular Strategy, Cancer Strategy, Analysis to inform development of National Health Information Strategy, Analysis for report of CMO, Analysis for Health Service Reform Programme, Analysis for Traveller's health strategy, Etc.	Ongoing	Hugh Magee, and all staff involved	Participation on Working Groups, Strategy Development teams to facilitate evidence-based policy development and monitoring of implementation	
1.2	HIPE analysis	Ongoing	Hugh Magee, Ciara O'Shea, Grainne Cosgrove	Ensure effective utilisation of HIPE database as principal source for hospital output information	
2	Strategic Group on Disability Databases				
2.1	Chair Group and prepare report for inclusion in strategic review of disability services	March 2005	Hugh Magee, Ciara O'Shea	Report is produced	
3	Develop Performance Indicators (PI) database				
3.1	Database for performance indicators and other management/population health indicators	Ongoing	Pat Lynch, Vincent Kennedy, Claire Grant	Database of indicators	
3.2	Establish PI development group	June 2005	Pat Lynch	Workplan produced	
4	Public Health Information System (PHIS)				

HLO	Div Obj.	a. Policy analysis and statistical advice/expertise b. Analysis for Parliamentary Questions, research and other analysis requests c. Data and statistics information policy development and implementation d. Data collection, surveys, report production and data handling e. Management of devolved health information systems			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
4.1	Test, release and distribute Version 8.0 and prepare upgrades	February 2005	Hugh Magee, Paul Walsh, Pat Lynch, Vincent Kennedy and all staff involved	Version 8.0 sent out	
4.2	Prepare Version 9.0 Beta for release	November 2005		Version 9.0 Beta available	
4.3	Test and fully implement a web enabled version of PHIS in conjunction with the Institute of Public Health	July 2005		Prototype tested	
4.4	Provide PHIS training for external customers	Ongoing	Paul Walsh, Pat Lynch	Training course prepared and given	
4.5	Convene PHIS user group meetings	March 2005	Paul Walsh	User group meets	
5	Casemix Budget Model				
5.1	Provide statistical expertise in Casemix Technical Group (CTG)	Ongoing	Hugh Magee	Successful implementation of Australian coding/casemix system	
6	Geographical Information Systems (GIS)				
6.1	Development of GIS analytical capacity	Ongoing	Hugh Magee, Vincent Kennedy, Ciara O'Shea, Pat Lynch	Analyses by GIS small area, regional health boundaries	

HLO	Div Obj.					
1	1	a. Policy analysis and statistical advice/expertise b. Analysis for Parliamentary Questions, research and other analysis requests c. Data and statistics information policy development and implementation d. Data collection, surveys, report production and data handling e. Management of devolved health information systems				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
b. Analysis for Parliamentary Questions, research and other analysis requests						
7	Provision of statistical data and analysis for health service professionals, research, media, ad hoc queries					
7.1	Compile and issue data in response to requests. Manage FOI requests for information		Ongoing	Hugh Magee, Pat Lynch and all staff involved	Responses issue promptly and monitored via IMUREQs system	
8	Parliamentary Questions (PQs)					
8.1	Prepare replies		Ongoing	All staff	Replies expedited	
c. Data and statistics information policy development and implementation						
9	Participation in data/statistics policy implementation as set out the National Health Information Strategy (NHIS)					
9.1	Contribute to the establishment of HIQA and the development of its data and statistics functions				HIQA established and addressing NHIS priorities	
9.2	Advise on data/statistics issues in the context of Health Information Legislation				Health Information Legislation introduced	

HLO	Div Obj.	a. Policy analysis and statistical advice/expertise b. Analysis for Parliamentary Questions, research and other analysis requests c. Data and statistics information policy development and implementation d. Data collection, surveys, report production and data handling e. Management of devolved health information systems			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
10	Health Service Reform Programme				
10.1	Participation in activities associated with the Health Service Reform Programme including transition teams with regard to HSE/HIQA and change management initiatives within the Department	Ongoing	All Staff	Participation in transition/change management teams. Implement project planning template for IMU and monitor targets	
10.2	Population Health Transition Team joining DoHC/HSE group	Ongoing	Hugh Magee	Establish transitional arrangements for population health functions	
11	Preparation and implementation of Data/Statistics Strategy in line with undertakings under the National Statistics Board workplan				
11.1	Prepare Data/Statistics Strategy	End January 2005	Hugh Magee, Ciara O'Shea	Production of report and inclusion in Department's Statement of Strategy, 2005-2007	
11.2	Implementation of Data/Statistics Strategy	Ongoing	Hugh Magee, Ciara O'Shea, Paul Walsh and all staff involved	Progressing prioritised actions as set out in NHIS	
12	Population Health Observatory				
12.1	Participate on Population Health Observatory (PHO) steering group	Ongoing	Hugh Magee	Development of PHO by Institute of Public Health and implementation of PHIS online	

HLO	Div Obj.	a. Policy analysis and statistical advice/expertise b. Analysis for Parliamentary Questions, research and other analysis requests c. Data and statistics information policy development and implementation d. Data collection, surveys, report production and data handling e. Management of devolved health information systems			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
13	Regional Data and Information				
13.1	Examine and address issue of current data holdings and availability of breakdown by new Regional Office boundaries	Ongoing	Hugh Magee, Ciara O'Shea, Paul Walsh, Pat Lynch, Vincent Kennedy	Initiate solutions/steps to address regional breakdown requirements	
d. Data collection, surveys, report production and data handling					
14	Health Statistics Report				
14.1	Keep health statistics tables up to date on the internet	Ongoing	Ciara O'Shea, Carmel Smith, other staff involved	Tables updated and website kept up to date	
14.2	Prepare for production of 2005 Health Statistics Report	March 2005		Report is published	
14.3	Progress transition arrangements with HSE/HIQA	End 2005	Hugh Magee, other staff involved	Transfer report production to HSE/HIQA as appropriate	

HLO	Div Obj.	a. Policy analysis and statistical advice/expertise b. Analysis for Parliamentary Questions, research and other analysis requests c. Data and statistics information policy development and implementation d. Data collection, surveys, report production and data handling e. Management of devolved health information systems			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
15	Integrated Management Returns (IMRs)				
15.1	Collect and validate IMR data on a quarterly and monthly basis, produce reports, review content and develop IMR analysis system	Monthly and quarterly	Pat Lynch and all staff involved	Reports issue promptly	
15.2	Progress transition arrangements to HSE	End 2005		Agreement with HSE on phased transition plan	
16	Employment Census				
16.1	Collect and process quarterly Employment Census data and produce reports	Ongoing	David Keating	Data collected and report issues within month of end of quarter	
16.2	Progress transition arrangements with HSE	End 2005	Hugh Magee, Pat Lynch, David Keating	Phased transition plan in place	
17	Finance Maintenance Data				
17.1	Carry out survey until arrangements can be made to return survey to Finance Unit	End 2005	Pat Lynch	Data collected and report issues	
17.2	Progress transition arrangements with HSE	End 2005	Hugh Magee, Pat Lynch	Transition to HSE	

HLO	Div Obj.	a. Policy analysis and statistical advice/expertise b. Analysis for Parliamentary Questions, research and other analysis requests c. Data and statistics information policy development and implementation d. Data collection, surveys, report production and data handling e. Management of devolved health information systems			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
18	Long-Stay Survey				
19.1	Process 2004 Long-Stay Survey data and produce 2004 report	July 2005	Ciara O'Shea, Anne Lloyd, Vincent Kennedy, Carmel Smith	2004 report produced	
18.2	Send out 2005 questionnaires	December 2005		2005 questionnaires issued	
18.3	Progress transition arrangements with HSE	End 2005		Transition plan to HSE in place	
18.4	Carry out Pilot Project on ethnicity data collection in acute hospitals	End 2005	Hugh Magee, Ciara O'Shea, Grainne Cosgrove	Report on Pilot Project completed	
e. Management of devolved health information systems					
19	Hospital In-Patient Enquiry (HIPE)				
19.1	Manage/oversee ESRI admin: Review of data, publication of reports, systems developments	Ongoing	Hugh Magee, Ciara O'Shea, Grainne Cosgrove	HIPE data timely, accessible and reliable	
20	National Perinatal Reporting System (NPRS)				
20.1	Manage/oversee ESRI admin: Review of data, publication of reports, systems developments	Ongoing	Hugh Magee, Ciara O'Shea, Grainne Cosgrove	NPRS data timely, accessible and reliable	

HLO	Div Obj.					
1	1	a. Policy analysis and statistical advice/expertise b. Analysis for Parliamentary Questions, research and other analysis requests c. Data and statistics information policy development and implementation d. Data collection, surveys, report production and data handling e. Management of devolved health information systems				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
21	Vital Statistics systems – collected by CSO on behalf of DoHC					
21.1	Liaise with CSO on data, publication issues and developments		Ongoing	Hugh Magee, Paul Walsh, Ciara O'Shea and other staff	Vital Statistics timely, accessible and reliable	
Comments: The implementation of the Health Service Reform Programme clearly sets the context for Business Planning for 2005. This will be a transition year with consequent additional pressures to maintain existing work, to participate in the establishment of new health service structures/agencies as well as the restructuring of the Department, and to put in place phased arrangements for the devolution of functions. Critical to our success in achieving many of the actions specified above will be the retention of skilled staff to negotiate these complex changes. Consideration also needs to be given, at an early stage, to augmenting the analytical skills which will be required to support the Department's accountability and policy roles.						

HLO	Div Obj.	To support the implementation of the Government programmes and policies beyond the health sector and to help meet Ireland's health-related commitments at European and international level.			
5	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Implementation of cross-Departmental data/statistics policy				
1.1	Representation on CSO and other groups	Ongoing	Hugh Magee, Ciara O'Shea, Paul Walsh	Provision of expertise and output from groups	
1.2	Steering Group on Social Equality Statistics				
1.3	Statistical Potential of Administrative Records (SPAR)				
1.4	Population Projections expert group for CSO				
1.5	Census 2006 expert group				
1.6	Employment Information Improvement Group				
2	EU Commission	Ongoing	Hugh Magee	Active representation at EU meetings, prepare briefing materials/reports, provision of data/information as requested	
2.1	Represent Ireland on EU health information strand of Public Health Program				
2.2	Subgroup of High Level Committee on information and eHealth				
2.3	Leadership on Working Party on Health Systems				
2.4	Working Party on Health Indicators				
2.5	Project participation (e.g. European Community Health Indicators (ECHI) project)				
2.6	Member of Network of Competent Authorities		Ciara O'Shea		

HLO	Div Obj.	To support the implementation of the Government programmes and policies beyond the health sector and to help meet Ireland’s health-related commitments at European and international level.				
5	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
3	EUROSTAT: Participation in Eurostat’s Partnership Public Health					
3.1	Member of Eurostat Working Group on Public Health Statistics		Ongoing	Hugh Magee, Ciara O’Shea	Active representation at Eurostat meetings, prepare briefing materials/reports, provision of data/information as requested	
3.2	Participation in ad hoc task forces as they arise					
4	EUROSTAT: Data requests					
4.1	Supply data for Eurostat’s regional and demographic statistics		June 2005	Hugh Magee, Claire Grant, all staff involved	Data provided on time	
5	World Health Organisation (WHO): Advisory role					
5.1	Represent Ireland at WHO health statistics fora		Ongoing	Hugh Magee	Active representation at WHO meetings, prepare briefing materials/reports, provision of data/information as requested	
5.2	Revision of statistical information prior to publication of Highlights on Health for Ireland		June 2005	Paul Walsh	Publication of report	
6	WHO: Health for All data requests					
6.1	Supply data to WHO Health For All database		January and July 2005	Hugh Magee, Pat Lynch, all staff involved	Data provided on time	

HLO	Div Obj.	To support the implementation of the Government programmes and policies beyond the health sector and to help meet Ireland’s health-related commitments at European and international level.				
5	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
7	OECD: Health Statistics database data requests					
7.1	Supply data to OECD Health Statistics database		January 2005	Hugh Magee, Claire Grant, Grainne Cosgrove, all staff involved	Data provided on time	
8	Hospital Data Project (HDP) Phase 1					
8.1	Dissemination of results and advice to EU working groups and projects, OECD and WHO with regard to findings of projects. Produce additional data (Canada and Australian) and CD-Rom for WHO centre Heads subcommittee on hospital data		Ongoing	Hugh Magee, Ciara O’Shea, Pat Lynch, Grainne Cosgrove	Dataset and software sent to participating WHO countries	
9	Hospital Data Project (HDP) Phase 2					
9.1	Completion and signing of contract with EU Commission/DG Sanco. Start of project		Quarter 2 2005	Ciara O’Shea	Contract signed and project started	
Comments: The benefits of involvement at EU and international levels are considerable in terms of shared expertise and improved comparability of health data. Considerable time and effort are required to support these commitments both in terms of policy work and in supplying data and participation in EU-funded projects. Maintaining the policy and analytic aspects of this work are seen as critical to developing the role of the Department in terms of keeping pace with international developments and enabling appropriate benchmarking of performance. Resourcing and appropriate skills mix in the Department are seen as critical success factors in this area. Further actions under HDP 2 will be required if application is accepted.						

Part 2: Developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		
Training in Public Health Information System	All staff are familiar with the Public Health Information System	Ongoing	Pat Lynch, all staff involved
Meet training requirements for IMU staff who use SAS	Appropriate SAS expertise available to section	Ongoing	All SAS users
FOI and file management training	All staff have access to and can use FOI file management system and understand FOI process	Ongoing	Pat Lynch, all staff involved
PQ database training	All staff familiar with PQ database	Ongoing	Vincent Kennedy, all staff involved
IMU internal training	All staff, are able to respond to queries and provide a quality customer service	Ongoing	Patrick Lynch, all staff involved
Sharing of specialist IT skills	Cover will be available for all staff carrying out specialist roles	Ongoing	All staff

Objective	Output	Target Completion Date	Person(s) responsible / involved
Specialist IT training	Update skills in Delphi, web development, SAS, Five Win, Exharbour, My SQL, Arc Gis and Report Writing	Ongoing	Pat Lynch, Vincent Kennedy and all involved staff
Specialist Software Update	Arrange for the purchase of required software updates	Ongoing	Pat Lynch, Vincent Kennedy
Development of IT expertise	Arrange courses	Ongoing	All staff

Department of Health and Children
Business Plan 2005

Division Name: International

Division Head: Brendan Phelan, Principal Officer

MAC Area: Finance

MAC Member: Dermot Smyth, Assistant Secretary

Divisional Objectives:

SS HLO 5: To support the delivery of the wider programme for government (outside of the delivery of health and personal social services) and to ensure Ireland's commitments at European Union and international level are met.

Div Obj 1:

Co-ordination of the Department's responsibilities and preparation of policy positions regarding European Union, World Health Organisation, Council of Europe and other international matters affecting health.

Div Obj 2:

Co-ordination of the Department's responsibilities regarding health sector co-operation under the North/South Ministerial Council arrangements and other responsibilities relating to North/South and East/West relations.

Div Obj 3:

Monitoring the discharge of the Department's international obligations regarding health services for refugees and asylum seekers.

Part 1:

HLO	Div Obj.	Co-ordination of the Department's responsibilities and preparation of policy positions regarding European Union, World Health Organisation, Council of Europe and other international matters affecting health.			
5	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Responding to and initiating exchange of information between the range of players involved in international health matters.	Ongoing	B Phelan S Kelly M Aylward S Barnes P Synnott N Kenny G McGrane L O'Dea	Expanded knowledge base	
1.1	Analysis/dissemination of material and feedback internally.	Ongoing	B Phelan S Kelly M Aylward S Barnes P Synnott N Kenny G McGrane L O'Dea	Expanded knowledge base	
2	Maintaining and developing effective Department participation in appropriate fora, both national and international.	Ongoing.	B Phelan S Kelly M Aylward S Barnes P Synnott N Kenny G McGrane	Strengthened international contacts and relations.	
2.1	Keeping abreast of national and international health related matters to which a Departmental input is necessary/desirable.	Ongoing.	B Phelan S Kelly M Aylward S Barnes P Synnott N Kenny G McGrane	Membership of influential committees, working groups, etc.	
2.2	Preparing a considered Departmental input to same.	Ongoing.	B Phelan S Kelly M Aylward S Barnes P Synnott N Kenny G McGrane		

HLO	Div Obj.	Co-ordination of the Department’s responsibilities and preparation of policy positions regarding European Union, World Health Organisation, Council of Europe and other international matters affecting health.				
5	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
3	Organise official visits to Ireland by foreign health ministers and certain other foreign dignitaries.		As circumstances require	B Phelan S Kelly G McGrane L O'Dea	High quality preparations and successful implementation of programme	
3.1	Issuing invitations, preparing itinerary, accommodation, transfer, setting up meetings, liaising with D/Foreign Affairs and other relevant bodies. Co-ordinate preparation of memoranda of understanding, where appropriate.		As circumstances require	B Phelan S Kelly G McGrane L O'Dea	Memoranda of understanding as appropriate.	
4	Supporting Ministerial and Departmental leadership and response in international health issues in line with relevant provisions of the Health Strategy.		Ongoing.	B Phelan S Kelly M Aylward S Barnes P Synnott N Kenny G McGrane L O'Dea	High level input to health issues. Clear Department position on relevant health issues.	
4.1	Preparing briefing and speaking material for Ministers, Departmental officials and members of Government, as required.		Ongoing.	B Phelan S Kelly M Aylward S Barnes P Synnott N Kenny G McGrane L O'Dea		
4.2	Preparing replies to parliamentary questions, representations, general correspondence, press queries and Freedom of Information requests		Ongoing.	B Phelan S Kelly M Aylward S Barnes P Synnott N Kenny G McGrane L O'Dea		

HLO	Div Obj.	Co-ordination of the Department’s responsibilities and preparation of policy positions regarding European Union, World Health Organisation, Council of Europe and other international matters affecting health.				
5	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
5	Preparation for annual meetings of WHO Assembly, WHO Regional Committee, etc.		EB 17-25 Jan. WHA 16-25 May. EB 26-28 May. WHO EURO 12-15 Sept	B Phelan M Aylward G McGrane L O'Dea	Specific contributions to deliberations. Quality of health briefing for Irish delegation.	
5.1	Participation in meetings and preparation and co-ordination of policy positions within the Department (e.g. stating Ireland’s position on draft resolutions).			B Phelan M Aylward G McGrane L O'Dea	Analysis of issues and documentation.	
6	Discharge of broad information support role and co-ordination, in general, of WHO issues.		Ongoing throughout the year.	B Phelan M Aylward G McGrane L O'Dea		
6.1	Analysis and dissemination of WHO material. Feedback to/from WHO on specific issues.			B Phelan M Aylward G McGrane L O'Dea		
6.2	Involvement of other Units, disciplines, organisations in meetings and briefings.			B Phelan M Aylward G McGrane L O'Dea	Timeliness and quality of service to relevant Department Divisions. Timeliness and quality of response and inputs to WHO issues.	
6.3	Liaison with Irish Mission / D/Foreign Affairs.			B Phelan M Aylward G McGrane L O'Dea		
6.4	Facilitating compliance with WHO decisions and resolutions.			B Phelan M Aylward G McGrane L O'Dea	Timeliness and quality of service to relevant Department Divisions.	

HLO	Div Obj.	Co-ordination of the Department’s responsibilities and preparation of policy positions regarding European Union, World Health Organisation, Council of Europe and other international matters affecting health.				
5	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
7	Preparation for bi-annual meetings of Council of Europe European Health Committee, Bureau of European Health Committee and Public Health Committee		June and December.	B Phelan S Barnes G McGrane L O'Dea	Specific contributions to Council deliberations. Quality of health briefing for Irish Delegation.	
7.1	Participation in Council of Europe bi-annual meetings and preparation, co-ordination of policy positions within the Department and presentation at these meetings.		June and December.	B Phelan S Barnes G McGrane L O'Dea		
Comments						

HLO	Div Obj.	Co-ordination of the Department's responsibilities and preparation of policy positions regarding European Union, World Health Organisation, Council of Europe and other international matters affecting health.				
5	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
8	Preparation for bi-annual meetings of Council of Europe Senior Officials Committee which is planning the 8 th European Conference of Health Ministers to take place in early 2007.		As circumstances require and attendance at meeting in June and Dec 2005.	B Phelan S Barnes G McGrane L O'Dea	Timeliness and quality of briefing material, conference documentation, speaking notes etc. facilitating effective contribution at meetings.	
8.1	Participation in Senior Official's bi-annual meetings and ongoing work of a preparatory and editorial nature regarding research and selection of a suitable theme and preparation of preliminary conference documentation			B Phelan S Barnes G McGrane L O'Dea		
9	Follow up work on High Officials meeting (The Hague, October 2003) to initiate a forward looking strategy for health related activities of Council of Europe.		Ongoing.	B Phelan S Barnes G McGrane L O'Dea	Direct input into preparation of set of recommendations for Committee of Ministers and their implementation	
9.1	Participation in and contribution to discussions and deliberations and preparation of final set of recommendations		Ongoing.	B Phelan S Barnes G McGrane L O'Dea		
10	Direct input into considerations of the Council of Europe expert working groups		Ongoing	B Phelan S Barnes G McGrane	Direct early contribution to formation of proposals and recommendations	
10.1	Nomination of, and liaison with, Irish members on working groups		Ongoing	B Phelan S Barnes G McGrane		
Comments						

HLO	Div Obj.	Co-ordination of the Department's responsibilities and preparation of policy positions regarding European Union, World Health Organisation, Council of Europe and other international matters affecting health.			
5	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
11	Preparation for, and attendance at, four times yearly EU Employment, Social Affairs, Health & Consumer Affairs Council meetings and preparation for ministers consultative meetings and bi-lateral meeting with EU Health Ministers and Informal Health Ministers Meeting.	Meeting dates: 3/4 March 2/3 June 13/14 October 8/9 December 20.21 October (informal) .	B Phelan P Synnott N Kenny M Joyce L O'Dea	Timeliness and quality of briefing material and speaking notes, facilitating effective contributions at meetings.	
11.1	Preparation for other Councils with health related items such as Research, Competitiveness and growth.		B Phelan P Synnott N Kenny M Joyce L O'Dea	Timeliness and quality of briefing material and speaking notes, facilitating effective contributions at meetings.	
11.2	On-going liaison with Health Counsellor in Brussels. Participation, as delegate, in Health Working Group, Brussels, approx. twice monthly.		B Phelan P Synnott N Kenny M Joyce L O'Dea	Timeliness and quality of briefing material and speaking notes, facilitating effective contributions at meetings.	
11.3	Preparation of Irish policy positions for all meetings in consultation with relevant Units in the Department.	As circumstances require.	B Phelan P Synnott N Kenny M Joyce L O'Dea	Timeliness and quality of briefing material and speaking notes, facilitating effective contributions at meetings.	
11.4	Drafting and collation of briefs for Minister, Secretary General, and CMO for Council/informal Ministers meetings.	As circumstances require.	B Phelan P Synnott N Kenny M Joyce L O'Dea	Timeliness and quality of briefing material and speaking notes, facilitating effective contributions at meetings.	

HLO	Div Obj.	Co-ordination of the Department’s responsibilities and preparation of policy positions regarding European Union, World Health Organisation, Council of Europe and other international matters affecting health.				
5	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
12	Preparation of twice yearly meeting of EU High Level Committee on Health (HLCH).		21/22 April 15/16 December '05. .	B Phelan P Synnott N Kenny M Joyce L O'Dea	Timeliness and quality of briefing material and speaking notes facilitating effective contribution at meetings.	
12.1	Preparing Irish position/policy papers on agenda items and preparing brief for Secretary General to attend meeting.			B Phelan P Synnott N Kenny M Joyce L O'Dea	Timeliness and quality of briefing material and speaking notes facilitating effective contribution at meetings.	
13	Ongoing work arising from the report of the high level process of reflection on patient mobility and other health considerations		Meeting dates: Various HWG meetings. HLGHS& MC	B Phelan P Synnott N Kenny L O'Dea	Timeliness and quality of briefing material and speaking notes, facilitating effective contributions at meetings.	
13.1	Preparation of Irish policy positions for Health Working Group (HWG) and the High level Group on Health Services and Medical Care			B Phelan P Synnott N Kenny L O'Dea	Timeliness and quality of briefing material and speaking notes, facilitating effective contributions at meetings.	
Comments						

HLO	Div Obj.	Co-ordination of the Department's responsibilities and preparation of policy positions regarding European Union, World Health Organisation, Council of Europe and other international matters affecting health.			
5	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
14	Co-ordination of Oireachtas Scrutiny arrangements.	As circumstances require	P Synnott N Kenny L O'Dea	Submission of information notes within specifies timeframes.	
14.1	Receiving and distributing EU legislative proposals and circulating to appropriate units.	As circumstances require	P Synnott N Kenny L O'Dea	Dealing with queries quickly Submission of information notes within specifies timeframes.	
14.2	Monitoring provision of information notes within specific timescale.	As circumstances require	P Synnott N Kenny L O'Dea	Dealing with queries quickly Submission of information notes within specifies timeframes.	
14.3	Dealing with queries from units, other departments and Dail Office.	As circumstances require	P Synnott N Kenny L O'Dea	Dealing with queries quickly Submission of information notes within specifies timeframes.	
15	Representing the Department on the Community Public Health Action Programme Committee (EU Commission).	June November	P Synnott N Kenny L O'Dea	Specific contribution to Committee deliberations	
15.1	Co-ordinating briefing material for agenda items with appropriate units.		P Synnott N Kenny L O'Dea		
15.2	Attendance at meetings and representing Irish positions.		P Synnott N Kenny L O'Dea		

HLO	Div Obj.	Co-ordination of the Department’s responsibilities and preparation of policy positions regarding European Union, World Health Organisation, Council of Europe and other international matters affecting health.				
5	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
16	Discharge of broad information support role in relation to EU matters.		As circumstan ces require	B Phelan P Synnott N Kenny M Joyce L O'Dea	Timely dissemination of information and enhanced awareness among relevant parties of Irish/EU policy issues relating to health.	
16.1	Production of material on health to insert in twice yearly and annual reports for the Oireachtas on EU developments.		As circumstan ces require	B Phelan P Synnott N Kenny M Joyce L O'Dea	Timely dissemination of information and enhanced awareness among relevant parties of Irish/EU policy issues relating to health.	
16.2	Monitoring Transposition of EU Directives in DoHC and notification of transposing NEM System.		As circumstan ces require	B Phelan P Synnott N Kenny M Joyce L O'Dea	Timely dissemination of information and enhanced awareness among relevant parties of Irish/EU policy issues relating to health. Focus on deadlines for transposition of Directives	
16.3	Supplying information on request to Irish MEP’s attending Committee and Plenary sessions of Parliament.		As circumstan ces require	B Phelan P Synnott N Kenny M Joyce L O'Dea	Timely dissemination of information and enhanced awareness among relevant parties of Irish/EU policy issues relating to health.	
16.4	Analysing, distilling and circulating material received from other Depts.		As circumstan ces require	B Phelan P Synnott N Kenny M Joyce L O'Dea	Timely dissemination of information and enhanced awareness among relevant parties of Irish/EU policy issues relating to health.	
16.5	Circulating EU information/reports in the Department		As circumstan ces require	B Phelan P Synnott N Kenny M Joyce L O'Dea	Timely dissemination of information and enhanced awareness among relevant parties of Irish/EU policy issues relating to health.	
16.6	Representing the Department at meetings in other Departments (notably D/Foreign Affairs and Dept of the Taoiseach) on broader EU issues		As circumstan ces require	B Phelan P Synnott N Kenny M Joyce L O'Dea	Timely dissemination of information and enhanced awareness among relevant parties of Irish/EU policy issues relating to health.	

HLO	Div Obj.	Co-ordination of the Department’s responsibilities and preparation of policy positions regarding European Union, World Health Organisation, Council of Europe and other international matters affecting health.				
5	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
Comments <u>Re: Council of Europe Affairs</u> The International Unit liaises clearly with the Medical Division (currently Dr Boothman) in the discharge of duties concerning Council of Europe. A significant external dependency will be addressed by ensuring immediate replacement, following retirement, of the D/CMO currently dealing with Council of Europe matters.						

HLO	Div Obj.	Co-ordination of the Department's responsibilities regarding health sector co-operation under the North/South Ministerial Council arrangements and other responsibilities relating to North/South and East/West relations. See 'Comments below'.			
5	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Preparation for participation of Minister in NSMC in Food Safety and Health sectoral format.	NSMC meetings as may be scheduled.	B Phelan S Kelly G McGrane L O'Dea	Deadlines met. Effective meetings.	
1.1	Meetings and liaison with relevant divisions of the Department and with: - a) Joint NSMC Secretariat, Armagh; b) DHSSPS, Belfast; c) Anglo Irish Division, D/Foreign Affairs d) Contact with other bodies as necessary.	NSMC meetings as may be scheduled.	B Phelan S Kelly G McGrane L O'Dea	Deadlines met. Effective meetings.	
2	Preparation for participation of Minister and senior officials in NSMC Plenary format.	NSMC meetings as may be scheduled.	B Phelan S Kelly G McGrane L O'Dea	Deadlines met. Effective meetings.	
2.1	Meetings and liaison with relevant divisions of the Department and with:- a) Joint NSMC Secretariat, Armagh; b) DHSSPS, Belfast; c) Anglo Irish Division D/Foreign Affairs	NSMC meetings as may be scheduled.	B Phelan S Kelly G McGrane L O'Dea	Deadlines met. Effective meetings.	
3	Preparation for participation of Minister and senior officials in NSMC in Institutional format - when required.		B Phelan S Kelly G McGrane L O'Dea	Deadlines met. Effective meetings.	
3.1	Assessment of capacity for further health content for NSMC agenda beyond current set areas.	Assessment as appropriate on request by D/Foreign Affairs	B Phelan S Kelly G McGrane L O'Dea	Deadlines met. Effective meetings.	

HLO	Div Obj.	Co-ordination of the Department’s responsibilities regarding health sector co-operation under the North/South Ministerial Council arrangements and other responsibilities relating to North/South and East/West relations. See ‘Comments below’.				
5	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
3.2	Meetings and liaison with relevant divisions of the Department and with: - a) Joint NSMC Secretariat, Armagh; b) DHSSPS, Belfast; c) D/Foreign Affairs		NSMC Institutional format meetings as may be scheduled	B Phelan S Kelly G McGrane L O'Dea	Deadlines met. Effective meetings.	
4	Preparation for participation of Minister and senior official(s) in British Irish Council (BIC) meetings.		On-going as BIC agenda may require	B Phelan S Kelly G McGrane L O'Dea	Assist in securing input to preparations by D/Foreign Affairs for plenary meetings	
4.1	Liaison with relevant divisions of the Department and with D/Foreign Affairs.		On-going as BIC agenda may require	B Phelan S Kelly G McGrane L O'Dea		
5	Joint management, (with DHSSPS, Belfast), of a Joint Working Group on Health established on foot of a Decision of the NSMC (Plenary) in relation to a Study on Obstacles to Cross- Border Mobility.		Mid -2005.	B Phelan S Kelly G McGrane L O'Dea	Bring forward implementation proposals to lessen, or bring to an end, obstacles to cross border mobility in relation to: - i) access to health services for frontier workers; and ii) mutual recognition of professional	
5.1	Works with the Joint Chairs to organise meetings;			B Phelan S Kelly G McGrane L O'Dea		
5.2	Surveyed professional and regulatory bodies and employers and trades unions to secure their input;			B Phelan S Kelly G McGrane L O'Dea		
5.3	Liaison with D/Foreign Affairs, NSMC Secretariat and Office of the First and Deputy First Minister;			B Phelan S Kelly G McGrane L O'Dea		

HLO	Div Obj.	Co-ordination of the Department’s responsibilities regarding health sector co-operation under the North/South Ministerial Council arrangements and other responsibilities relating to North/South and East/West relations. See ‘Comments below’.				
5	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
5.4	Provide secretariat jointly with DHSSPS			B Phelan S Kelly G McGrane L O’Dea		
6	Organise periodic high level meetings with DHSSPS		Approx twice yearly (first meeting planned for 1 Feb)	B Phelan S Kelly G McGrane L O’Dea	Maintenance of good communications and relations with DHSSPS on matters of mutual interest	
6.1	Prepare briefings for senior Department officials involved.			B Phelan S Kelly G McGrane L O’Dea	Maintenance of good communications and relations with DHSSPS on matters of mutual interest	
7	Represent the Department in the implementation of the EU Interreg IIa Funding Programme as it relates to health.			B Phelan S Kelly G McGrane L O’Dea	30 cross-border health projects enabled under the Programme so far at end 2004	
7.1	Adviser to Monitoring and Steering Committees of the Programme		Ongoing for duration of programme 2003 - 2008.	B Phelan S Kelly G McGrane L O’Dea		
7.2	Participation in Multilateral meetings organised by Special EU Programmes Body (involving all participating Depts.)		Approx twice per year (Monitoring Cttee) and monthly (Steering Cttee)	B Phelan S Kelly G McGrane L O’Dea		
7.3	Participation in Bilateral meetings organised by Special EU Programmes Body (involving both Health Depts and CAWT)		Approx quarterly	B Phelan S Kelly G McGrane L O’Dea		
7.4	Participation in Assessment Panel for selection of projects		Approx twice per year or as required.	B Phelan S Kelly G McGrane		

HLO	Div Obj.	Co-ordination of the Department’s responsibilities regarding health sector co-operation under the North/South Ministerial Council arrangements and other responsibilities relating to North/South and East/West relations. See ‘Comments below’.				
5	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
				L O’Dea		
7.5	General liaison with CAWT (Co-operation and Working Together), Special EU Programmes Body, DHSSPS and Dept of Finance		On going	B Phelan S Kelly G McGrane L O’Dea		
8	General support role in North South co-operation health matters.		As circumstances require.	B Phelan S Kelly G McGrane L O’Dea	Increased contacts. Establishing rapport with key personnel. Extended knowledge base	
8.1	Participation in meetings, seminars, and information days organised by various bodies having a cross-border interest, e.g., CAWT Dept of Finance DHSSPS, Special EU Progs. Body.		As circumstances require.	B Phelan S Kelly G McGrane L O’Dea		
Comments The Steps and Specific Actions above relating to NSMC meetings are the prime focus of the North South Unit within International Unit. However, they continue to be significantly affected by suspension of the Northern Ireland Executive. There was no activity in 2003 or 2004 and none is foreseen at least in the first half of 2005. Suspension of devolution has been in operation since October 2002. While this situation is extant, the official position is that the NSMC cannot meet because of the absence of Ministers. Work in progress mandated by the NSMC is to continue on a care and maintenance basis overseen by the Department of Foreign Affairs, the Office of the First and Deputy First Minister and the joint North South Secretariat. This involves on-going contacts between Departmental officials, North and South, and meetings of working groups that have been established in pursuance of the mandate of the NSMC in Health/Food Safety sectoral format.						

HLO	Div Obj.	Monitoring the discharge of the Department's international obligations regarding health services for refugees and asylum seekers.			
5	3				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Supporting the discharge of the Department's responsibilities with regard to Refugees and Asylum Seekers in the context of the provisions in the Health Strategy.	As circumstances require	B Phelan M Aylward S Barnes G McGrane L O'Dea	Timely and appropriate referral of issues to relevant agents. Expanded knowledge base. Ability to access information quickly	
1.1	Liaison with relevant agents, as appropriate, regarding health services.	As circumstances require	B Phelan M Aylward S Barnes G McGrane L O'Dea		
1.2	Liaison with D/Justice, Equality and Law Reform, D/Foreign Affairs, their agencies and other appropriate agencies.	As circumstances require	B Phelan M Aylward S Barnes G McGrane L O'Dea		
1.3	Maintenance of relevant information.	As circumstances require	B Phelan M Aylward S Barnes G McGrane L O'Dea		
1.4	Preparing briefing and speaking material for Ministers, Departmental officials and members of Government, as appropriate.	As circumstances require	B Phelan M Aylward S Barnes G McGrane L O'Dea		
1.5	Preparing replies to parliamentary questions, representations, general correspondence, press queries and Freedom of Information requests, as appropriate.	As circumstances require	B Phelan M Aylward S Barnes G McGrane L O'Dea		

HLO	Div Obj.	Monitoring the discharge of the Department’s international obligations regarding health services for refugees and asylum seekers.				
5	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
Comments						
Responsibilities in this area extend across a large number of Divisions in the Department. At local level, the Health Service Executive has the responsibility of providing health care services to Refugee and Asylum Seekers. The role of the International Unit is to represent the Department, for example in interdepartmental committees, as appropriate, and to act as a conduit of information between the Departments line divisions and outside interests.						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

of the Division

**Department of Health and Children
Draft Business Plan 2005**

Division Name: Planning and Evaluation Unit

Division Head: Charlie Hardy, Principal Officer

MAC Area: Finance

MAC Member: Dermot Smyth, Assistant Secretary

High Level Objective 1: High Performance

- To ensure that the organisational structures, legal and accountability frameworks and management capacity (systems and people) are in place so that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence, and monitored and evaluated on the basis of this evidence.

Divisional Objective.

1. Contribute to development, implementation and enhancement of effective performance/performance management across the health services.
2. Contribute to the Implementation of the Health Sector Procurement Policy.
3. To manage the consultancy elements of the Administrative Budget for the Department.
4. Contribute to North South co-operative and health care in agreed areas.

High Level Objective 2: Responsive and Appropriate Care Delivery

To support the health system in developing capacity - infrastructure, technology, systems and people - to deliver timely and appropriate services; and to provide key policy guidance in the development of services to ensure high quality care is being delivered in the appropriate setting with a focus on patients, clients and their families.

High Level Objective 3: Fair Access

- To provide a policy and legal framework which ensures equity for public patients and enables all patients and clients to access the services they need.

Divisional Objective.

1. Administration of current policy on eligibility including preparation of legislation on Long Stay Charges and contribute to putting in place of necessary regulation and administrative procedures.
2. To Coordinate input into the Travers Examination
3. Health research advanced in line with Government Policy

High Level Objective 4: Better Health for Everyone

- To provide a policy and legal framework for the protection and promotion of health and well-being which gives active support to improving quality of life, targets inequalities in health and advances intersectoral working.

Divisional Objective.

1. Contribute to Government's social inclusion programme, in particular in relation to the reduction of health inequalities

High Level Objective 5: Supporting Wider Government Programmes and International Health Policy

To support the implementation of Government programmes and policies beyond the health sector and to help meet Ireland's health-related commitments at European and international level.

Divisional Objective.

1. Represent Ireland in OECD and Health matters

HLO	Div Obj.	Contribute to development, implementation and enhancement of effective performance/performance management across the health services			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Participate in joint HSE/DOHC work to develop and link service and corporate planning with the annual report	Ongoing	C Hardy E. Brady E. Hackett D. Roche F. O'Brien	Agreed enhanced Service Plan format and contents.	
1.1	Attendance at Project Team meetings	Ongoing	C Hardy E. Brady E. Hackett D. Roche F. O'Brien A Harkin	Enhanced monitoring and evaluation processes agreed.	
1.2	Monitoring conformity with new Service Plan Template	Ongoing	C Hardy E. Brady E. Hackett D. Roche F. O'Brien	Improved strategic Performance Indicators	
1.3	Future development of monitoring arrangements for Service Plan	Ongoing	C Hardy E. Brady E. Hackett D. Roche F. O'Brien	Performance Indicators agreed and in place for 2006.	
1.4	Liaising and consulting within the Department on Project Teams work	Ongoing	C Hardy E. Brady E. Hackett D. Roche F. O'Brien	Agreed enhanced format and high level contents defined and agreed for Corporate and Service Plans. KPI outputs annual report and necessary	

HLO	Div Obj.	Contribute to development, implementation and enhancement of effective performance/performance management across the health services			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
				linkages defined and agreed.	
1.5	Develop effective dissemination method through ICT of quarterly PI reports	Ongoing	C Hardy E. Brady E. Hackett D. Roche F. O'Brien	Dissemination of quarterly PI reports within Department within one week of receipt.	
1.6	<p>Contribute to the assessment of the current Care Group and Data definitions to seek to ensure uniformity of presentation.</p> <p>Comment</p> <p>Progress on the items under this Divisional Objective will be very small in the first half of 2005 in particular given the demands arising in relation to long stay charges. Significant advance on this objective is dependent on the re-organisation of the Department and the subsequent application of resources to this objective.</p>	Ongoing	C Hardy E. Brady E. Hackett D. Roche F. O'Brien	PIs Data Dictionary agreed. A map of Care Group Structures currently in place in HSE produced.	

HLO	Div Obj.	Contribute to the Implementation of the Health Sector Procurement Policy.			
1	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
2.1	Liaise with HSE & DoF in the development of Materials Management in the Health Services	On-going	E. Brady	Agreed mechanisms for improving health sector procurement	
2.2	Participate in and contribute to the work of the Health Services Procurement Steering Committee, the Health Services Procurement Improvement Project from Department of Finance and work with the NPPPU of Dept. Finance				
2.3	Work conjointly on specific performance measurement in the Materials Management area				
2.4	Agree enhanced PIs with HSE	On-going	C. Hardy E. Brady D.Roche F. O'Brien	Quarterly PI reports monitored and assessed.	
2.5	Assist HSE in the putting in place of appropriate VFM and Regulatory Structures	On-Going	C Hardy E Brady D Roche	Agreement with HSE on structures with HSE putting Structures in place.	
2.6	Work with relevant units in the Department, HSE and state legal services to address EU procurement related legal actions	On-Going	C. Hardy E. Brady D.Roche	Appropriate advice and documentation provided in a timely fashion	
2.7	Provide relevant advice and documentation to support the state's case when required in conjunction with other units and health agencies				
	Comments Progress on the items under this Divisional Objective will be very small in the first half of 2005 in particular given the demands arising in relation to long stay charges. Significant advance on this objective is dependent on the re-organisation of the Department and the subsequent application of resources to this objective.				

HLO	Div Obj.	To manage the consultancy elements of the Administrative Budget for the Department.			
1	3				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
3.1	Administer and Monitor Consultancy subhead Budget	On-going	C Hardy E Brady D.Roche E. Hackett F O'Brien	Meetings taking place Minutes, other documentation and briefs agreed and signed off.	
3.2	Ensure effective dissemination of Departmental and Procurement procedures.	On-going	C. Hardy E Brady D Roche E. Hackett F.O'Brien	Dissemination timely and comprehensive	
3.3	Arrange payments from Consultancy Subhead and Monitor Budget	On Going	C Hardy E Brady D Roche	Payments made to sanction and on time	
Comments Progress on the items under this Divisional Objective will be very small in the first half of 2005 in particular given the demands arising in relation to long stay charges. Significant advance on this objective is dependent on the re-organisation of the Department and the subsequent application of resources to this objective.					

HLO	Div Obj.	Contribute to North South co-operative and health care in agreed areas.			
1	4				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
4.1	Participate in the North-South High Technology Assessment group		C. Hardy E. Brady D. Roche E. Hackett F. O'Brien	Departmental and Procurement procedures disseminated and understood.	
Comments Progress on the items under this Divisional Objective will be very small in the first half of 2005 in particular given the demands arising in relation to long stay charges. Significant advance on this objective is dependent on the re-organisation of the Department and the subsequent application of resources to this objective.					

HLO	Div Obj.	Administration of current policy on eligibility including preparation of legislation on Long Stay Charges and contribute to putting in place of necessary regulation and administrative procedures			
3	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1.1	To develop solutions for legal and policy requirements in relation to long stay charges, particularly the requirements following the Supreme Court decision of 16 th February 2005.				
1.2	Prepare specific legislative requirements and their consideration by Government where required		C Hardy E Brady D Roche E Hackett F O'Brien	Legislation approach approved by Government	
1.3	Specify in detail legislative requirements in relation to long stay charges with legal advice from the legal advisor and the Attorney General's office		C Hardy E Brady D Roche E Hackett F O'Brien	Legislation prepared by Parliamentary Counsel Attorney General's office	
1.4	Dealing with changes to charges i.e. costings / drafting SIs / notifying HSE areas/Linking with HSE working groups	On-going	C Hardy E Brady D Roche E Hackett F O'Brien	Regulations signed distributed and there operation clearly understood by HSE	
1.5	Ensure appropriate policy is being implemented in relation to ex gratia payments and any related payments and work to develop scheme with HSE, Department of Finance and Attorney General's office as required.	On-going	C Hardy E Brady D Roche E Hackett F O'Brien	Suitable payment scheme clearly specified and in place	
1.6	Provide required level of support to Legislation Unit by sharing this Unit's knowledge on eligibility issues	On-going	C Hardy E Brady D Roche E Hackett F O'Brien	Advice accepted covering issues involved	

HLO	Div Obj.	Administration of current policy on eligibility including preparation of legislation on Long Stay Charges and contribute to putting in place of necessary regulation and administrative procedures			
3	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1.7	Ensure decisions on legislative requirements in relation to eligibility are specified clearly.		C Hardy E Brady D Roche E Hackett F O'Brien		
1.8	Collate information as requested (e.g. for DoF) on income from statutory, private and RTA charges		C Hardy E Brady D Roche E Hackett F O'Brien		
1.9	Supply necessary information for estimates and letter of determination		C Hardy E Brady D Roche E Hackett F O'Brien		
1.10	Dealing with requests for information on eligibility and charges (internally and externally) in an appropriate manner		C Hardy E Brady D Roche E Hackett F O'Brien	Timely accurate responses Low level of complaints	
<p>Comment</p> <p>This is the primary task for the Unit in 2005. It will consume the major portion of the Unit's resources and is unlikely to leave any resources for other work for those involved in 2005. In fact ADDITIONAL RESOURCES AND EXPERTISE MAY NEED TO BE APPLIED TO DEAL WITH THIS SITUATION ABOVE THOSE SPECIFIED ABOVE. It would seem to me this is one of the key areas for the Department in 2005 and whatever resources are necessary would need to be applied to it to ensure as successful an outcome as possible. There is relatively little experience in the Unit working on these issues at present and this has and will impact on what can be achieved.</p>					

HLO	Div Obj.	To coordinate input into the Travers Examination			
3	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Coordinate the provision of the required records to the Travers Examination	1 March	C Hardy E Brady D Roche E Hackett F O'Brien D McCarthy	Required records provided	
1.1	Liaise with other Units and in particular the records management unit in relation to the supply of records	1 March	C Hardy D McCarthy Staff from other units on overtime	All Units acting on need to supply records	
1.2	Supply records from the Unit in relation to the Travers Examination	1 March	C Hardy E Brady D Roche E Hackett F O'Brien	All Necessary records supplied	
1.3	Search files returned from offsite storage for relevant material	1 March	C Hardy D McCarthy D Roche A Younge Staff from other units on overtime	All relevant material considered relevant highlighted to the examination.	
1.4	Carry out necessary work on the follow-up to the report of the Travers Examination relevant to the Unit in cooperation with other action in the Department to implement the report's recommendations	On-Going	All Unit	Agreed actions implemented	
Comments					

HLO	Div Obj.	Health research advanced in line with Government Policy				
3	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
3.1	Dept represented on Board of Health Research Board (HRB)		Until May 2005	C Hardy	Appropriate participation	
3.2						
3.3						
	Discharge of other aspects of Dept's remit in relation to HRB; such as Letter of Determination, payments, briefs, speeches etc		On-going to be reviewed	C Hardy A M Harkin A Younge	Briefs etc. prepared satisfactorily on time	
3.4	Support Departmental Membership of interdepartmental groups on research		On-Going	AM Harkin A Younge PJ Kelly	Timely and accurate support provided	
Comments I will cease to be a member of HRB in May having served two periods on the board and being one of those chosen to leave the Board after 2 years under the provisions of the SI constituting the HRB. The Units involvement will need to be reviewed given that, I as Unit Head will not be on the HRB.						

HLO	Div Obj.	Contribute to Government’s social inclusion programme, in particular in relation to the reduction of health inequalities				
4	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1.1	Pursue the development, monitoring and evaluation of measures necessary for the achievement of the NAPS Health Targets to reduce health inequalities as outlined in the National Health Strategy and <i>Building an Inclusive Society</i> – the Government’s review of the NAPS		Ongoing	C. Hardy A.M. Harkin D. McCarthy P.J. Kelly		NAPS, Ireland’s National Action Plan against Poverty a and Social Exclusion 2003-2005 Q&F
1.2	Liaise with relevant units, HSE and relevant health and other agencies to identify opportunities for targeting of measures as outlined in report of WG on NAPS / Health Targets and NAPS Review Framework Document.			C. Hardy A.M. Harkin D. McCarthy		
1.3	Intensify liaison in relation to the pursuit of NAPS targets in the context of existing strategies e.g. Primary Care, CHD and Health Promotion and upcoming strategies / policies i.e. Cancer and Mental Health		Ongoing	C. Hardy AM Harkin D McCarthy		
1.4	Based on IPH Report on Effective Interventions re Low Birth Weight if possible make available policy guidance in relation to reducing low birth weight rates		Sept. 2005	C Hardy AM Harkin DMcCarthy	Policy guidance related to low birth weight rates developed and communicated to HSE.	
	Monitor implementation of same.		Ongoing			
1.6	Jointly with HSE and IPH ensure development of framework for implementation of NAPS in the health service taking on board the findings (2004) of the integrated research report on NAPS / Anti poverty issues in the health service.		May 2005	C Hardy AM Harkin D McCarthy	Framework for implementation of NAPS in the health services developed communicated to the services (e.g. Seminar and taken	

HLO	Div Obj.	Contribute to Government’s social inclusion programme, in particular in relation to the reduction of health inequalities				
4	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
					on board in HSE Corporate Plan and in HSE National Service Plan 2006	
1.7	Liaise with IPH in relation to work PEU has commissioned IPH to carry out i.e. analysing and specifying how NAPS Health monitoring data can be improved.		Ongoing	C Hardy AM Harkin DMc Carthy	Mortality data provided by socio economic group for latest available year.	
	Continue participation in group with HPU (CVD section), IMU and IPH to pilot, through the Cardiovascular Health Info. System (CHIS), feasible socio-economic variables for use in clinical settings e.g. Heartwatch, CHAIR and CRIS.		Ongoing to timetable agreed with HPU	AMHarkin with HPU, IMU & IPH	Seminar in mid-April and agreed variables taken on board on a pilot basis in CHIS thereafter	
1.8	Further develop an indicators and monitoring process		Ongoing		Agreed indicators	
1.9	Chair and service the Interdepartmental Working Group on NAPS and Health		Ongoing	C Hardy AM Harkin DMc Carthy	Working Group has contributed its advice and views on implementation of NAPS through its 3 subgroups on health services, children and research.	
1.10	Report as required on implementation of health element of National Action Plan against Poverty and Social Exclusion 2003 – 2005 (NAP incl.) on which evaluation for EU has to be completed by the OSI by June 2005 and OSI’s own Annual Report by same date.		June 2005 for evaluation Ongoing to D/ SFA timetable.	C Hardy AM Harkin DMc Carthy PJ Kelly	Health element included as appropriate in Ireland’s reports at national and EU level	
1.11	Roll out in the Department the Poverty Proofing Guidelines which have been tailored for use in the Health System		May	C Hardy AM Harkin DMc Carthy	Improved guidelines for poverty proofing (developed in conjunction with the Office for Social Inclusion) in use in	

HLO	Div Obj.	Contribute to Government’s social inclusion programme, in particular in relation to the reduction of health inequalities				
4	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
					the Department	
1.12	Work with the Equality Authority (EA) on integrating an equality dimension into the policy and evaluation work of the Department		Ongoing	C Hardy AM Harkin A Younge	Equality dimension taken on board in the Department’s policy making and evaluation work.	NAPS
1.13	Co-ordinate Ireland’s input to, and participate twice yearly in, the Council of Europe Committee of Experts on the Inclusion of Gender Differences in Health Policy.		Ongoing	AM Harkin A Younge	Ireland’s position represented in the CE Committee.	
1.14	Participate in the Travellers’ Ethics Research and Information Group on Ethnicity data and research issues emerging from Travellers’ Health Strategy e.g. Travellers All-Ireland Research Study		Ongoing to timetable led by Travellers Health Unit	AM Harkin	Input provided in support of NAPS targets into the Group’s work	NAPS Traveller Health Strategy
1.15	Provide support to ensure smooth transition of responsibility to HSE for health sector participation in the Government’s RAPID and CLÁR programmes and monitor their continued implementation			C Hardy AM Harkin A Younge PJ Kelly	Smooth transfer of responsibility for RAPID and CLÁR to HSE. Appropriate participation of the health sector in RAPID and CLÁR with commitment specified in the National Service Plan.	Govern- ment’s RAPID and CLÁR Program mes
1.16	Provide overview of RAPID and CLÁR programmes to HSE			C Hardy AM Harkin		
1.17	Specify scope of functions to transfer			C Hardy AM Harkin		
1.18	Identify records to transfer			A Younge		

HLO	Div Obj.	Contribute to Government's social inclusion programme, in particular in relation to the reduction of health inequalities			
4	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
			PJ Kelly		
1.19	Quality assure monitoring arrangements between HSE and Department of Community, Rural and Gaeltacht Affairs (D/CRAGA) to ensure discharge of Department's policy.		C Hardy AM Harkin		
1.20	Participate in transition team i.e. accompany HSE to meeting with D/CRAGA, NMC and with health service RAPID co-ordinators		AM Harkin A Younge		
1.21	Ensure Department's policy is in line with the health related recommendations in the National Action Plan Against Racism (NAPAR) launched January 2005		C Hardy AM Harkin A Younge PJ Kelly		NAPS Q&F NAPAR
1.22	Jointly with the HSE develop a national intercultural health service strategy with reference to equality/ diversity policy.	2006	C Hardy AM Harkin A Younge	Joint Steering Group established to develop strategy and progressed as agreed	NAPS Q&F NAPAR
1.23	Coordinate health aspect for Ireland's examination in relation to UN Convention on Elimination of all forms of Racial Discrimination (CERD). Attend examination if necessary.	Feb. 2006 March	AM Harkin A Younge AM Harkin		
1.24	Departmental participation in Senior Officials Group on Social Inclusion (SOGSI) and Cabinet Committee on Social Inclusion	Ongoing	C Hardy AM Harkin		
1.25	Co-ordinate Department's inputs to these meetings	Ongoing	C Hardy AM Harkin	Department's position appropriately represented in Senior Official Groups Meetings (SOGSI)	NAPS

HLO	Div Obj.	Contribute to Government’s social inclusion programme, in particular in relation to the reduction of health inequalities				
4	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
				DMc Carthy PJ Kelly		
1.26	Attend SOGSI as necessary		Ongoing	C Hardy AM Harkin		
1.27	Liaison and co-ordination in relation to monitoring the implementation of the Department’s non-pay commitments in Sustaining Progress		Ongoing	C Hardy AM Harkin DMc Carthy PJ Kelly	Progress reports delivered satisfactorily	Sustaining Progress
1.28	Co-ordinate reporting of progress on implementation of Department’s commitments		Ongoing	C Hardy AM Harkin DMc Carthy PJ Kelly		
1.29	Attend Plenary Monitoring Meetings and, where relevant, meetings in relation to the Special Initiatives		Ongoing	C Hardy AM Harkin		
1.30	Commence negotiation for successor agreement if necessary.		To timetable set by D/Taoiseach	C Hardy AM Harkin DMc Carthy		
Comments						

HLO	Div Obj.	Represent Ireland in OECD and Health matters.			
5	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
5.1	Represent Ireland and supply data to OECD and participate in the OECD health project.	On-going			
5.2	Collate data to contribute international comparative datasets and provide input to working groups and project teams.		Charlie Hardy Anna-May Harkin Amanda Younge P.J Kelly	Quality data supplied to required standards (e.g System for Health accounts for OECD)	
5.3	Co-Ordinate Dept input to OECD Health Project work			Successful participation by Irish Health Care Reps	
Comments Progress on the items under this Divisional Objective will be very small in the first half of 2005 in particular given the demands arising in relation to long stay charges. Significant advance on this objective is dependent on the re-organisation of the Department and the subsequent application of resources to this objective.					

Part 2: Developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Public Private Partnership Unit

Division Head: Dympna Butler, Principal Officer

MAC Area: Finance

MAC Member: Dermot Smyth, Assistant Secretary

Divisional Objectives:

SS HLO 2: Responsive and Appropriate Care Delivery

To support the system in developing capacity - infrastructure, technology, systems and people - to deliver timely and appropriate services; and to provide key policy guidance in the development of services to ensure high quality care is being delivered in the appropriate setting with a focus on patients, clients and their families.

Div Obj A:

Facilitate the restructuring of DOHC in the context of the Health Services Reform Programme and work with the HSE during transition

Div Obj B:

Developing PPP Programme in continuous partnership with Department of Finance, Line Divisions, Hospital Planning Office, NDFA, HSE

Div Obj C:

Develop PPP policy and work in partnership with other sections within the Department, HSE, NDFA and the Department of Finance in the evaluation and implementation of the Health PPP projects

Div Obj D:

Provide Support to other divisions within the Department on potential for PPPs

Div Obj E:

Promote the development of PPP in the Health Sector

Div Obj F:

Develop and Evaluate Departmental policy on non PPP funding sources

SS HLO 5: *Supporting Wider Government Programmes and International Health Policy*

To support the implementation of the Government programmes and policies beyond the health sector and to help meet Ireland's health-related commitments at European and international level.

Div Obj G:

Contributing to the development of National Policy on PPP

HLO	Div Obj.	Facilitate the restructuring of DOHC in the context of the Health Service				
2	A	Reform Programme and work with HSE during Transition				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Restructuring of DOHC		Q2	All Staff	Establish an effective communication system and support restructuring project teams as necessary	SS
1.1	Develop and maintain cooperative and mutually supportive relationship with the HSE and HIQA					
2	Relocation of DOHC		Q2	All Staff	Effective and Efficient transfer	SS
2.1	Prepare PPP Unit for relocation					
3	Decentralisation		Ongoing	All Staff	Provide support as required	Gov Policy
3.1	Prepare for any potential impact of the Government Decentralisation programme on PPP Unit					
Comments <ul style="list-style-type: none">The impact the reform and decentralisation programmes may have on staffing levels of the PPP Unit is unclear at this pointThis plan has been draft on the assumption that AO vacancy will be filled						

Part 1:

HLO	Div Obj.	Developing PPP Programme in continuous partnership with Department of Finance, Line Divisions, Hospital Planning Office, NDFA and HSE			
2	B				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Pilot CNU Programme				
1.1	Decision on PSBs	Q1	DB/AOR	To be determined	Q&F action 94
2	Assist in the transfer of management of PPP process to the HSE				SS
2.1	Assist the HSE to establish structures for implementing PPP projects	Q2/3	All Staff	Structures in place for PPP Projects	SS
2.2	Identify and facilitate knowledge transfer.	Q2/3	All Staff	PPP knowledge transfer	SS
2.3	Provide advice and assistance on training requirements for HSE staff during transition period	Q2/3	All staff	HSE training programme	
2.4	Identify records for transfer	Q2/3	All staff	Records transferred	
2.5	Handover of PPP Steering Group Role – resolution of any differences between projects and ensuring consistency of approach across all PPP projects	Q2/3	DB	HSE to Chair Steering Group	SS
2.6	Role of the Process Auditor is to transfer to HSE carried out in accordance with the Current DOF Guidelines	Q2/3	DB,AOR	Transfer to HSE	SS
3	Examination of alternative options for CNU PPP beds				
3.1	Submission for designated CNU beds	Q1	DB,AOR	To be determined	
4	Capital investment Framework				Q&F
4.1	Advise and support minister on PPP elements	Yearly	DB	Programme	
4.2	Ensure compliance with DOF sanctions and reporting	Ongoing	DB/AOR	The provision of regular and accurate reports to Finance	
Comments:					

The achievement of this objective is dependent on a number of factors:

- (a) This plan is subject to review during 2005 and the availability of resources and expertise in the HSE to take over these activities
- (b) Due to vacancy in the PPP Unit (AO post) resources within the Unit will be allocated on a priority basis in line with the departments priority objectives for 2005
- (c) The PPP Unit is a promoting, policy making and evaluating Unit. It is not directly responsible for the administration of the pilot projects. The development of the PPP and the allocation of the relevant resources must be a priority for the HSE and is crucial to the successful implementation of the PPP process.
- (d) Process auditor is independent and reports directly to the accounting officer (Now CEO of the HSE)

HLO	Div Obj.	Develop PPP policy and work in partnership with other sections within the Department, HSE, NDFA and the Department of Finance in the evaluation and implementation of the Health PPP projects.				
2	C					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Develop and implement Health PPP Policy					
1.1	Carry out research of PPP issues		Ongoing	AOR/DM	Up to date knowledge	PPP Framework
1.2	Develop and provide direction and Guidance		Ongoing	DB/AOR	Agreed Policy Guidance	
1.3	Implement Guidance		Ongoing	DM	Publish guidance PPP Website and issue circulars	
1.4	Monitor application of PPP guidance		Ongoing	All staff	Adherence to guidance	
2	Evaluate					
2.1	Evaluation of PPP Aspects of Service plans / Capital Plans		Q1/2	DB/AOR	Undertake reviews /evaluation of PPP Projects and PPP Programme	SS
2.2	Represent Department at Steering/ Project Boards for the PPP Pilot Projects		As required	DB	Views of the Department are reflected	PPP Framework
2.3	Continue to work in partnership with the NDFA on Financial, Insurance and Risk Issues		As required	DB/AOR	Timely advice	
2.4	Obtain technical advice from HPO		As required	DB/AOR	Timely advice	
2.5	Compliance with DOF (Public Expenditure Division and Central PPP Unit)		As required	DB/AOR	Agree direction of projects	
Comments: <ul style="list-style-type: none">Health Sector specific guidance will be published after national guidance has been finalised and published on the DOF websiteThe PPP Unit will continue to require independent technical advice from Hospital Planning Office in DOHC						

HLO	Div Obj.	Provide Support to other divisions within the Department on PPPs			
2	D				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Examination and support of potential PPP projects				
1.1	Contribute to inter-governmental group on the feasibility of PPP for the Central Mental Hospital	Ongoing	AOR DB	Views of PPP Unit reflected in report	
1.2	Support and advise on the development of the Primary Care Projects	Ongoing	DB	Specialist PPP information and alternative sources of funding	Primary Care Strategy
1.3	Support and advise on the implementation of the oncology report	Ongoing	DB/AOR	Specialist PPP info as required	Oncology Report
1.4	Meet with and provide advice to other sections of the department as required	Ongoing	All Staff	Specialist PPP info as required	
Comments: It is difficult to anticipate the amount of advice/input that will be required by other divisions in 2005 and the PPP Unit will allocate resources on a priority basis to support demands					

HLO	Div Obj.					
2	E	Promote the development of PPP in the Health Sector				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Promote PPP in the Health Sector					
1.1	Presentations to Health Sector		As required	DB/AOR	Health sector informed	PPP Communic ation strategy
1.2	Meet with and encourage private sector companies		Ongoing	All Staff	Good Relationship established	
1.3	Monitor current best practice		Ongoing	All Staff	Aware of current best practice	
2	Stakeholder Consultation					
2.1	Stakeholder consultation at sector level		As required	DB,AOR	Satisfactory Dialogue	PPP framework document
2.2	Monitor and evaluate implementation of the health sector Stakeholder Guidance		Ongoing	AOR	Regular reports received	
Comments:						
<ul style="list-style-type: none">The HSE will now have responsibility for all IR matters (Previously HSEA) and implementation of the PPP Stakeholder guidance.The promotion of PPP in the Health Sector will be dependant on resources (Staff and Finance) available in the PPP Unit.						

HLO	Div Obj.					
2	F	Develop and Evaluate Departmental policy on non PPP funding sources				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
3	Develop non PPP Policy Issues					
3.1	Support the Minister		As required	All staff		
3.2	Develop alternative and additional sources of funding for implementation of the health Strategy		Ongoing	DB/AOR	Alternative and additional sources of funding	Quality and Fairness
3.3	Assessment of the suitability of Capital allowances for Health facilities		As required	DB/AOR	Application of Capital Allowances where appropriate	
Comments:						
The PPP Unit will need to build up expertise on capital allowances and related issues						

HLO	Div Obj.				
5	G	Contributing to the development of National Policy on PPP.			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Attend and contribute to interdepartmental meetings				
1.1	Contribute to development of national PPP policy at interdepartmental Group on PPPs and prepare updates in advance of meetings	Ongoing	DB	Views of the PPP Unit are fully reflected. Updates provided on time.	PPP framework
1.2	Contribute to the Informal Advisory Group on PPPs	Ongoing	DB	Views of the PPP Unit are fully reflected	PPP framework
1.3	Member of the Government Construction contracts committee working groups	Ongoing	DB	Views of the PPP Unit are fully reflected.	
2	Communication at national level				
2.1	Contribute to PPP newsletters with updates of the health projects	Ongoing	AOR/DM	Updates provided	PPP communication Strategy
2.2	Presentations at PPP seminars in Ireland and abroad	Ongoing	DB/AOR	Presentations delivered	
3	PPP Guidelines				
3.1	Review and comment on all draft guidance prepared by the Central PPP Unit	As Required	DB/AOR	DOHC comments and views incorporated into guidance	
Comments: Due to the small number of staff in the unit (3) all training, seminars, etc, will be ranked in order of priority and attended accordingly.					

Part 2: developing the Capacity of the Division

Objective	Output	Target completion date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms.	31/01/05	All staff
	Completed Personal Training and Development Plans returned to Training Officer	31/01/05	
Conduct first Interim Review	Completed interim Review form, Role Profile updated as necessary and upward feedback sessions conducted	31/05/05	
Conduct second Interim Review	Completed interim Review form, Role Profile updated as necessary	30/09/05	
Conduct Annual Performance and Development Review	Annual Performance and Development Review form completed	31/12/05	
Manage quality of work of division	Enhanced quality of work output, improved policies and procedures for division	31/12/05	All staff involved.
Identification of Unit's general and PPP training needs and attendance at PPP seminars and training	Up-to-date knowledge on health issues, PPP, IT and management skills.	Monthly	All staff
Use of pool of resources (library, press cuttings, databases) to increase knowledge of PPP projects and issues	Enhanced and up-to-date knowledge of PPP projects and issues	Monthly	All staff
Staff adhere to the implementation of the Customer Service Action Plan 2004-2007	Provisions of the Action Plan implemented	Ongoing	All staff
Support Introduction of HR Strategy	Implementation of Strategy	Ongoing	All Staff
Improve strategic management of unit	Monthly meeting held in the unit	Ongoing	All staff

Department of Health and Children
Business Plan 2005

Division Name: Personnel – Medical and Dental Unit

Division Head: Larry O'Reilly, Principal Officer

MAC Area: Personnel Management and Development

MAC Member: Bernard Carey, Director

Divisional Objectives:

SS HLO 2: To ensure the system has the capacity in terms of infrastructure, technology, systems and people to deliver timely and appropriate services; and to lead and guide the development of services to ensure appropriate care is being delivered in an appropriate setting with a focus on patients, clients and their families.

Div Obj 1: Provide appropriate support and advice to the Health Service Executive in relation to both those functions remaining within the Department and functions transferring to the HSE (HLO2)

SS HLO 3: To provide a policy and legal framework which ensures equity for public patients and enables all patients and clients to access the service they need.

Div Obj 2: Progress the negotiation of a new contract for hospital consultants (HLO3).

SS HLO 1: To put in place organisational structures, accountability frameworks and management capacity (systems and people) to ensure that health and personal services are planned and delivered efficiently and effectively on the basis of best available evidence and monitored and evaluated on the basis of this evidence.

Div Obj 3: Prepare and publish the Medical Practitioners Bill (HLO1).

Div Obj 4: To address the postgraduate medical education and training (MET) needs of all doctors in training in line with the Government's decision on the Hanly Report and the need to comply with the EWTD (HLO1)

SS HLO 5: To support the delivery of the wider Programme for Government (outside of the delivery of health and personal social services) and to ensure Ireland's commitments at European Union and international level are met.

Div Obj 5: To represent the national interest in relation to medical and dental matters arising from Ireland's membership of the EU, WHO, Council of Europe and other international fora (HL05)

Part 1:

HLO	Div Obj.	Provide appropriate support and advice to the Health Services Executive in relation to both those functions remaining within the Department and functions transferring to the HSE (HL02).				
2	1					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Identify functions to be transferred			Larry O'Reilly, Grainne Duffey, David Maguire, Arleen Heffernan, Ciaran O'Maoileoin, Andrew Condon	Schedule updated	
1.1	Update schedule prepared in November 2004		31/01/05	“		
2.	Agree list of functions to transfer to HSE in Q1 and Q2 2005		28/02/05	“	List of functions agreed	
2.1	Identify steps necessary			“	Records Identified	
2.2	Identify records to transfer and retain		30/06/05	All team members as necessary	Project plan prepared Records prepared	
2.3	Specify scope of function(s) to transfer and PIs to ensure proper accountability for devolved function.		28/02/05	“	Draft scope/PIs prepared	
2.4	Agree scope, performance indicators with HSE			“	Agreement reached with HSE	
2.5	Develop monitoring and accountability processes for transferred functions		28/02/05	“	Protocols	

Personnel – Medical and Dental Unit

HLO	Div Obj.	Provide appropriate support and advice to the Health Services Executive in relation to both those functions remaining within the Department and functions transferring to the HSE (HL02).				
2	1					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
2.6	Implement procedures and appropriate training for new role		31/03/05	“	Procedures implemented, training provided	
2.7	Liaise with HSE as appropriate during transfer		31/12/05	All team members as necessary	Regular liaison in place	
3	Ensure accountability of transferred functions		31/12/05	“	PIs reviewed	
3.1	Specify periodicity and context of monitoring reports from HSE		31/03/05	“	Nature/context of Reports agreed with HSE	
3.2	Liaise with HSE on issues arising		31/12/05	All team members as necessary	Regular liaison in place	
4	Agree list of functions to transfer to HSE in Q3 and Q4 2005		30/06/05	Larry O'Reilly, Grainne Duffey, David Maguire, Arleen Heffernan, Ciaran O'Maoileoin, Andrew Condon	As at 2.1	
4.1	As for 2.1		30/12/05	“		
Comments: The timing and content of the functions schedule is subject to change and revisions to the list of functions are expected. Thus the list and dates can only be regarded as guides to sequence rather than definite completion dates at this stage. Firmer dates will be specified following agreement on overall schedule in ????						
* Critical Success Factors						
- Agreement reached with HSE re functions for transfer,						

Personnel – Medical and Dental Unit

HLO	Div Obj.	Provide appropriate support and advice to the Health Services Executive in relation to both those functions remaining within the Department and functions transferring to the HSE (HL02).				
2	1					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
<div>- Agreement reached with HSE re phasing of functions for transfer,</div> <div>- HSE have the resources allocated to facilitate transfer of functions,</div> <div>- Support and cooperation of all stakeholders,</div> <div>- Current level of resources are maintained within the Division,</div> <div>- Other priorities/key objectives do not arise which require the postponement of the objective,</div>						

Personnel – Medical and Dental Unit

HLO	Div Obj.					
3	2	Progress the negotiation of a new contract for hospital consultants (HLO3).				
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Serving the Oireachtas		As required	Larry O'Reilly, Dave Maguire, Philip Doran, Fiona Quinn, Emma Craven, Linda Moloney, Andrew Condon	All deadlines met, all requirements addressed.	Health Strategy 89
1.1	Preparing replies to PQs, reps, press queries, drafting speeches, briefs, adjournment debates, notes for Order of Business, material for Dáil Committees, legislative work, attendance at related meetings, Dáil sittings, hearings etc.					“
2	Finalise management’s position paper		Feb 2005	Larry O'Reilly, Dave Maguire, Philip Doran, Fiona Quinn, Emma Craven, Linda Moloney, Andrew Condon	Management team’s position paper finalised.	“
2.1	Reach agreement on content & approach					
3	Set timeframe & agenda for discussions with IHCA & IMO.		May 2005	Larry O'Reilly, Dave Maguire, Philip Doran, Fiona Quinn, Emma Craven, Linda Moloney		
3.1	Each party proposes draft agenda items for agreement		Apr 2005	Larry O'Reilly, Dave Maguire, Philip Doran, Fiona Quinn, Emma Craven, Linda Moloney	List of draft agenda items circulated	

Personnel – Medical and Dental Unit

HLO	Div Obj.					
3	2	Progress the negotiation of a new contract for hospital consultants (HLO3).				
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
3.2	. Draft agenda agreed		May 2005		Draft agenda agreed	“
3.3	Proposed timeframe/dates for meeting agreed.		May 2005		Proposed timeframe/date for meetings circulated	
4	Interim agreement on key issues as the negotiations progress (e.g. greater equity for public patients)		Oct 2005	Larry O'Reilly, Dave Maguire, Philip Doran, Fiona Quinn, Emma Craven, Linda Moloney	Timeframe/dates agreed	Health Strategy 89
4.1	Focus on areas where agreement is more likely to be reached		Sep 2005		Agreement reached on individual issues	
4.2	Get agreement of membership of medical organisations to the key elements in the proposed contract		Oct 2005			
4.3	Leave more difficult issues until later in the process		Oct 2005			
5	Agreement of both parties to the substantive issues in the proposed draft contract		Dec 2005	Larry O'Reilly, Dave Maguire, Philip Doran, Fiona Quinn, Emma Craven, Linda Moloney	All deadlines met, all requirements addressed	“
5.1	Brief and get agreement of Minister, Government on the key elements of the proposed contract and any financial implications		Nov 2005		Ministerial/government approval	
			Nov		Most of the key issues have been discussed	

Personnel – Medical and Dental Unit

HLO	Div Obj.					
3	2	Progress the negotiation of a new contract for hospital consultants (HLO3).				
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
5.2	Get agreement of membership of medical organisations to the proposed contract		2005		Agreement reached on substantive issues	
5.3	Get the revisions/amendments priced by an appropriate body		Dec 2005		Agreement ‘priced’ by appropriate body	
Comments						
Critical success factors						
<ul style="list-style-type: none">- Current level of resources are maintained within the Division;- Other priorities/key objectives do not arise which require the postponement/replacement of this objective;- Possible effects of establishment of HSE and abolition of Health Boards.- Possible impact of other issues, e.g. Clinical Indemnity Scheme, European Working Time Directive etc.- Agreement of the medical organisations on outstanding issues from the current contract;- Agreement of the medical organisations to an agreed agenda/proposed timetable;- Agreement of the medical organisations on the implementation of the Task Force recommendations.						

Personnel – Medical and Dental Unit

HLO	Div Obj.					
1	3	Prepare and publish the Medical Practitioners Bill (HL01)				
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Serving the Oireachtas		As required	Larry O'Reilly, Gráinne Duffy, Sinéad Cullen, Alison Geraghty, Gary Doyle	All deadlines met, all requirements addressed	
1.1	Preparing replies to PQs, reps, press queries, drafting speeches, briefs, adjournment debates, notes for Order of Business, material for Dáil Committees, legislative work, attendance at related meetings, Dáil sittings, hearings etc.					
2	Preparation of Bill		Jan - June 2005	Larry O'Reilly, Gráinne Duffy, Sinéad Cullen, Alison Geraghty, Gary Doyle	Bill completed on time and to required quality standard.	Prospectus Section 3.3.3.
2.1	Liaise with Parliamentary Counsel re drafting		June 2005	Gráinne Duffy, Sinéad Cullen, Alison Geraghty	- PC fully informed of DoHC position on issues on a timely basis	Prospectus Recs. 4.1
2.2	Consultation and briefing of Medical Council and other key internal and external stakeholders - considering/implementing any amendments/comments.			Larry O'Reilly, Gráinne Duffy	Briefings/consultations held and obs. considered/implemented.	Quality & Fairness Action 105
3	Publication of Bill		July 2005	Larry O'Reilly, Gráinne Duffy, Sinéad Cullen, Alison Geraghty, Gary	- Bill published before Summer recess.	

Personnel – Medical and Dental Unit

HLO	Div Obj.					
1	3	Prepare and publish the Medical Practitioners Bill (HL01)				
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
				Doyle		
3.1	Submission to Tánaiste and incorporation of any final changes			Larry O'Reilly, Gráinne Duffy, Sinead Cullen	- Tánaiste briefed, changes made.	“
3.2	Preparation of draft memo, press release and circulation of memo and Bill to relevant Govt. Depts			“	Memo prepared and circulated	“
3.3	Submission of memo and Bill to Cabinet for approval to publish			Gráinne Duffy	- Final memo, press release and briefs prepared. - Govt approval obtained	
3.4	Liaison with Parl Counsel, Bills Office and Whips office re publication of Bill				Bill published	

Personnel – Medical and Dental Unit

HLO	Div Obj.					
1	3	Prepare and publish the Medical Practitioners Bill (HLO1)				
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
4	Passage of Bill through Dáil/Seanad		Oct - Dec 2005	Larry O'Reilly, Gráinne Duffy, Sinéad Cullen, Alison Geraghty, Gary Doyle	- Bill passed through all stages in Dáil/Seanad.	“
4.1	Liaise with Min’s office, P Counsel & Whips Office re time in Dáil/Seanad		July 2005	“	- Date and Ministerial attendance arranged.	“
4.2	Preparation of 2 nd stage speech and briefing material and attendance at Dáil/Seanad.		Oct 2005	“	- Brief prepared, Oireachtas attended.	“
4.3	Preparation of Committee Stage Brief. Consideration of opposition amendments and preparation of Ministerial response, preparation of Ministerial amendments, liaison with Bills Office re amendments, attendance at Dáil/Seanad.		Oct 2005	“	- Brief prepared - Responses to amendments prepared - Oireachtas attended.	“
4.5	Liaison with Bills Office/Cahills re publication/printing of Bill.		Dec 2005	Larry O'Reilly, Gráinne Duffy, Sinéad Cullen, Alison Geraghty, Gary Doyle	Bill printed, proof-read and published	“

Personnel – Medical and Dental Unit

HLO	Div Obj.					
1	3	Prepare and publish the Medical Practitioners Bill (HLO1)				
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
<p>Comments</p> <ul style="list-style-type: none">- Other priorities/key objectives do not require a level of resources, which result in the postponement of the objective.- Support and cooperation of all stakeholders.- Current level of resources is maintained within the Division.- Additional resources will be required at time of passage of Bill through Dáil/Seanad.- All policy decisions finalised at an early stage and no unavailable delays arise.						

Personnel – Medical and Dental Unit

HLO	Div Obj.	To address the postgraduate medical education and training (MET) needs of all doctors in training in line with the Government’s decision on the Hanly Report and the need to comply with the EWTD (HLO1)				
1	4					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Serving the Oireachtas Preparing replies to PQs, reps, press queries, drafting speeches, briefs, adjournment debates, notes for Order of Business, material for Dáil Committees, legislative work, attendance at related meetings, Dáil sittings, hearings etc		As Required	Larry O’Reilly; Jane Buttimer; Ciarán Ó Maoileoin; Arleen Heffernan; Peter Heffernan; Siobhán Doyle	All deadlines met, all requirements addressed	
2.1	Consultation with stakeholders		Feb 2005		MET Secretariat meeting(s) with specialist training bodies, employing authorities	
2.2	MET Group advice on requirements for Medical Education and Training		March 2005		MET Group advice on MET requirements to stakeholders	
2.3	Agree protocols for ongoing monitoring of incorporation of training principles in new working arrangements and for periodic review of principles		March 2005		Protocols agreed	

Personnel – Medical and Dental Unit

HLO	Div Obj.	To address the postgraduate medical education and training (MET) needs of all doctors in training in line with the Government’s decision on the Hanly Report and the need to comply with the EWTD (HLO1)				
1	4					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
2.4	Draft MET Group proposals on longer-term EWTD compliance for inclusion in final report.		March 2005		Inclusion of relevant proposals in final MET report	
2.5	Engage with the recognised training bodies to encourage development of programmes in skills complimentary to clinical practice (as per Hanly) for new entrants and existing specialists for delivery from 2006 onwards		June 2005		Meetings held with each training body	
2.6	Prepare costings for training programmes for 2006 and secure funding		Nov 2005		Costings prepared and funding secured	
2.7	First draft of new programmes		Nov 2005		Initial draft(s) of programmes prepared by training bodies and under consideration by end of year	
3	Commence phasing out all non-training NCHD posts		Dec 2005	Larry O’Reilly; Jane Buttimer; Ciarán Ó Maoileoin; Arleen Heffernan; Peter Heffernan; Siobhán Doyle	Agreed circular issued by Minister and implementation commenced	Hanly Report Sections 3.4, 5.3; Govt Decision S22485H (30-10-03)

Personnel – Medical and Dental Unit

HLO	Div Obj.	To address the postgraduate medical education and training (MET) needs of all doctors in training in line with the Government’s decision on the Hanly Report and the need to comply with the EWTD (HLO1)				
1	4					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
3.1	Identify numbers in both training and non-training posts		Sep 2005		Standardised NCHD database developed and first statistics published	
3.2	Review of international developments (policy, legal etc.)		Sep 2005		Relevant international developments identified for inclusion	
3.3	Develop once-off opportunities for doctors in non-training posts to demonstrate or develop their suitability for entry on the Register of Medical Specialists		“		Appropriate schemes agreed with Medical Council and specialist training bodies	
3.4	Prepare proposals in consultation with training bodies on position of SpRs whose training is complete		“		Agreed approach adopted by Department	
3.5	Secure relevant funding		“		Funding secured	
3.6	Draft Departmental circular to employing authorities specifying a timetable for phasing out all non-training NCHD posts		Dec 2005		Circular agreed by Minister and issued	
4	Prepare final report on MET issues outstanding from Hanly Report		Apr 2005	Larry O’Reilly, Jane Buttimer; Ciarán Ó Maoileoin; Peter Heffernan, Arleen	Final report to Minister in line with terms of reference. Memo for Government for adoption of	Hanly Sec. 3.4; Govt Dec

Personnel – Medical and Dental Unit

HLO	Div Obj.	To address the postgraduate medical education and training (MET) needs of all doctors in training in line with the Government’s decision on the Hanly Report and the need to comply with the EWTD (HLO1)				
1	4					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
				Heffernan, Siobhan Doyle	recommendations	S22485H (30-10-03)
4.1	Drafting work on each element of report and discussion with MET working group; consultation with relevant bodies at national and international level		Feb 2005		Working group discussion of drafts	
4.2	Complete first draft of final MET Group report		Feb 2005		First draft of final report sent to MET Group	
4.3	Prepare costings for key recommendations and secure funding		Mar 2005		Costings prepared and funding secured	
4.4	Agree final report with MET Group and forward to Minister		Apr 2005		Final report of MET Group to Minister in line with terms of reference	
4.5	Draft Memo for Government		Apr 2005		Memorandum for Government	
4.6	Publish Report and Circulate		Apr 2005		Final Report published and circulated	
	Revise Business Plan for remainder of year in light of					

Personnel – Medical and Dental Unit

HLO	Div Obj.	To address the postgraduate medical education and training (MET) needs of all doctors in training in line with the Government’s decision on the Hanly Report and the need to comply with the EWTD (HLO1)				
1	4					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
4.7	adopted report		Apr 2005		Revised Business Plan	
5	Commence implementation of National Flexible Training Strategy		Dec 2005	Larry O’Reilly; Jane Buttimer; Ciarán Ó Maoileoin; Arleen Heffernan; Peter Heffernan; Siobhán Doyle	Plan devised and implementation commenced	Hanly Report Section 3.4, App. 6, 5.3; Govt Decision S22485H (30-10-03)
5.1	Consult employing authorities on relevant issues including flexible working aspects of Strategy		Mar 2005		Approach to implementation of relevant aspects of Strategy agreed with employing authorities	
5.2	Prepare costings for implementation plan		July 2005		Costings prepared	
5.3	Prepare Implementation Plan based on published Strategy and circulate to employing and training authorities		Sept 2005		Implementation Plan agreed by Minister and circulated	

Personnel – Medical and Dental Unit

HLO	Div Obj.	To address the postgraduate medical education and training (MET) needs of all doctors in training in line with the Government’s decision on the Hanly Report and the need to comply with the EWTD (HLO1)				
1	4					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
5.4	Secure funding required for 2006		Sept 2005		Funding secured	
6	Progress on relevant issues re undergraduate medical education (intern year, future role of universities / medical schools in postgraduate training).		Mar 2005	Larry O’Reilly; Jane Buttimer; Arleen Heffernan; Ciarán Ó Maoileoin; Peter Heffernan; Siobhan Doyle	Report of working group on undergraduate medical education published. Relevant issues addressed in final MET Report	Hanly Report Section 3.4.3G
6.1	Consultation on revised undergraduate projections		Jan – Mar 2005		Joint Undergraduate Working Group, FÁS, HEA, DoES consulted	
6.2	Continue to attend and contribute to joint D/ Health & D/Education working group on undergraduate medical education		Feb 2005		Draft material and comments supplied as contribution to drafting and finalising report of undergraduate medical education joint working group; agreed recommendations by working group on relevant issues;	
6.3	Consideration of implications for of Working Group report for DoHC, including identifying and securing any relevant funding		Apr 2005		Submission to Minister on action (if any) required; funding secured if required	
7	Completion of training body projects funded by Department		Mid-2005	Ciarán Ó Maoileoin; Arleen Heffernan; Peter Heffernan; Siobhán	All projects completed successfully; HSE facilitated in dealing with future project funding proposals	

Personnel – Medical and Dental Unit

HLO	Div Obj.	To address the postgraduate medical education and training (MET) needs of all doctors in training in line with the Government’s decision on the Hanly Report and the need to comply with the EWTD (HLO1)				
1	4					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
7.1	Ongoing monitoring and liaison with funded agencies		“	Doyle	Regular telephone, written and personal communication with project managers in training agencies; issues arising dealt with efficiently	Govt Decision S22485H (30-10-03); Hanly Report Section 3.4, 5.3
7.2	Evaluate progress and completion of reports on each project		July 2005		Summary evaluation document on outcomes from of each project including any relevant recommendations regarding potential future funding	
7.3	Development of proposals for possible funding of extended/new projects in 2005/2006		“		Proposals prepared	
7.4	Advice to HSE re proposals for 2005/2006		July 2005		Relevant HSE staff fully informed ahead of possible funding of projects in 2005 and 2006	
8	MET Secretariat to assist HSE in preparing and implementing proposals on transfer of PGMDB and medical education and training functions to HSE including requirement for independent training assessment of all training posts		Dec 2005	Larry O’Reilly; Jane Buttimer; Ciarán Ó Maoileoin; Arleen Heffernan; Peter Heffernan; Siobhán	Agreed DOHC/HSE proposals for future structures to safeguard quality of medical education and training	

Personnel – Medical and Dental Unit

HLO	Div Obj.	To address the postgraduate medical education and training (MET) needs of all doctors in training in line with the Government’s decision on the Hanly Report and the need to comply with the EWTD (HLO1)				
1	4					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
8.1	Secretariat consultation with stakeholders		May 2005	Doyle.	Meetings held with PGMDB; NHO (Comhairle); Medical Council; specialist training bodies; HRB; HEA-D/E&S; and other relevant stakeholders	
8.2	Draft Secretariat position paper		June 2005	“	Secretariat proposal submitted to Minister	
8.3	Secretariat collaboration with HSE in preparing for transfer of MET & PGMDB functions to HSE		Jan - Dec 2005		Arrangements in place by end-2005 to facilitate transfer of functions	
Comments Critical Success Factors: - Support and cooperation of all stakeholders - Current level of resources are maintained within the Division, - Other priorities/key objectives do not arise which require the postponement of the objective, - Increased consultant numbers as proposed in the Report of the National Taskforce on Medical Staffing (prerequisite for reducing NCHD numbers)						

Personnel – Medical and Dental Unit

HLO	Div Obj.	To represent the national interest in relation to medical and dental arising in relation to medical and dental matters arising from Ireland’s membership of the EU, WHO, Council of Europe and other international for a (HL05).				
5	5					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Serving the Oireachtas		As required throughout 2005	Larry O’Reilly, Gráinne Duffy, Sinéad Cullen, Alison Geraghty, Gary Doyle	All deadlines met, all requirements addressed	
1.1	Preparing replies to PQs, reps, press queries, drafting speeches, briefs, adjournment debates, notes for Order of Business, material for Dáil Committees, legislative work, attendance at related meetings, Dáil sittings, hearings etc.					
2	Keep up to date with all developments/proposals/initiatives involving medical and dental regulation/standards/training etc being undertaken by the organisations		As required	Larry O’Reilly, Gráinne Duffy, Sinéad Cullen, Alison Geraghty, Gary Doyle	All deadlines met, all requirements addressed	Quality & Fairness Ch. 8
2.1	Attend appropriate meetings			Gráinne Duffy, Sinéad Cullen	Meetings attended	2005-2007 Statement & Strategy
2.2	Liase with other delegates, Member States etc			Gráinne Duffy, Sinéad Cullen	Ongoing liaison with other delegates etc.	
2.3	Deal with associated admin work			Gráinne Duffy, Sinéad Cullen, Alison Geraghty, Gary Doyle	All Admin work completed to appropriate standard	

Personnel – Medical and Dental Unit

HLO	Div Obj.	To represent the national interest in relation to medical and dental arising in relation to medical and dental matters arising from Ireland’s membership of the EU, WHO, Council of Europe and other international for a (HL05).				
5	5					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
4	Maintain close liaison with the Medical Division, Community Health Division etc. on issues arising in the international forum		As required	Larry O’Reilly, Gráinne Duffy, Sinéad Cullen	Other divisions kept informed on an ongoing basis	2005-2007 Statement & Strategy
4.1	Copy documentation for information/observations			Gráinne Duffy, Sinéad Cullen, Gary Doyle	Documentation circulated	
4.2	Meet to discuss/review specific issues			Larry O’Reilly, Gráinne Duffy, Sinéad Cullen	Observations received Meetings arranged	
5	Maintain close liaison with the Department’s Permanent Representative in Brussels on medical and dental issues arising within the E.U.		As required throughout 2005	Larry O’Reilly, Gráinne Duffy, Sinéad Cullen, Alison Geraghty, Gary Doyle	Other Divisions kept informed on an ongoing basis.	“
5.1	Exchange information			Larry O’Reilly, Gráinne Duffy, Sinéad Cullen	Documents exchanged	
5.2	Update data		“			
5.3	Meet for briefings, EU committees etc		As required	Larry O’Reilly, Gráinne Duffy, Sinéad Cullen, Alison Geraghty, Gary	Briefings/meetings arranged	

Personnel – Medical and Dental Unit

HLO	Div Obj.	To represent the national interest in relation to medical and dental arising in relation to medical and dental matters arising from Ireland’s membership of the EU, WHO, Council of Europe and other international for a (HL05).				
5	5					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
				Doyle		
6	Maintain regular liaison with other Government Departments who may take the lead role or require information on particular issues which are relevant to the work of the Unit		As required	Larry O’Reilly, Gráinne Duffy, Sinéad Cullen, Alison Geraghty, Gary Doyle	Briefs/position papers provided Working groups attended	Quality & Fairness Ch. 8 2005-2007 Statement & Strategy
6.1	Provide updates, information, briefing notes etc			Gráinne Duffy, Sinéad Cullen, Alison Geraghty, Gary Doyle		
6.2	Participate in working groups etc			Gráinne Duffy, Sinéad Cullen		
7	Maintain regular liaison with Irish regulatory bodies/education and training interests		As required	Larry O’Reilly, Gráinne Duffy, Sinéad Cullen, Alison Geraghty, Gary Doyle	Meetings arranged Briefings/updates provided Observations/concerns noted	“
7.1	Provide updates on progress/developments					
7.2	Seek observations/comments on proposals			Gráinne Duffy, Sinéad Cullen, Alison Geraghty		

Personnel – Medical and Dental Unit

HLO	Div Obj.	To represent the national interest in relation to medical and dental arising in relation to medical and dental matters arising from Ireland’s membership of the EU, WHO, Council of Europe and other international for a (HL05).				
5	5					
Ref	Actions / Steps		Date	Person(s) responsible	KPIs / Outputs	XRef
Comments <i>Critical Success Factors:</i> - The range of health-related issues arising at international fora has grown significantly. These commitments have major implications for ongoing resource requirements and may require a review of other Divisional objectives if commitments are to be met. - Current level of resources are maintained within the Division; - Other priorities/key objectives do not arise which require the postponement of the objective; - Support of other Divisions within the Department in providing quality and timely information, observations and comments and attendance at meetings, where required.						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms Personal Training and Developments returned	31/01/05 31/01/05	All staff All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication Adopt Risk Management procedures as appropriate	Monthly Ongoing	PO responsible, all staff involved
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented Improved provisions of services through Irish	Ongoing	All staff

Department of Health and Children
Business Plan 2005

Division Name: Medical Indemnity Project Office

Division Head: Brendan Phelan, Principal Officer

MAC Area: Personnel Management and Development

MAC Member: Bernard Carey, Director

High Level Objective 1: High Performance

To ensure that the organisational structures, legal and accountability frameworks and management capacity (systems and people) are in place so that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence, and monitored and evaluated on the basis of this evidence.

Divisional Objectives:

- 1. To complete the establishment of the Clinical Indemnity Scheme.**
- 2. To produce the report of the Advisory Group on “no fault” compensation for brain-damaged infants.**
- 3. Negotiate Agreement with the MDU on historic liabilities.**

High Level Objective 2: Responsive and Appropriate Care Delivery

To support the health system in developing capacity - infrastructure, technology, systems and people - to deliver timely and appropriate services; and to provide key policy guidance in the development of services to ensure high quality care is being delivered in the appropriate setting with a focus on patients, clients and their families.

Divisional Objective

- 4. To formulate and implement a national clinical risk management strategy.**

Part 1:

HLO	Div Obj.				
1	1	To complete the establishment of the Clinical Indemnity Scheme			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Resolve issues relating to indemnity for consultants left without cover. Consult with Minister, Department of Finance, Attorney General's Office and others on unresolved issues relating to consultants and the CIS.	Uncertain	B. Phelan.	Final Agreement.	
2	Complete rollout of CIS IT System. Evaluate test sites. Rollout to remaining sites.	31 December	B. Phelan	Sign off with supplier.	
3	Communications/ Training Strategy. Meet with State Claims Agency.	31 March	B. Phelan	Meetings	
4	Agreement with SCA on operation of CIS. Negotiate agreement with State Claims Agency on operation of the CIS.	31 March	B. Phelan	Text of Agreement.	
Comments: A number of difficult problems remain to be resolved before this project can be wrapped up. The issue of granting an indemnity to consultants left without cover by the MDU remains unresolved. This issue and the related attempt to negotiate an agreement with the MDU on historic Obstetric liabilities is taking up significant amounts of time.					

HLO	Div Obj.	To produce the report of the Advisory Group on “no fault” compensation for brain-damaged infants.				
1	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Support the work of the “No Fault” Advisory Group. Attend meetings of the Group and provide general support to the Chairman and members.		July	B. Phelan/ M. Forde.	Report	
2	Produce report. Organise drafting groups.		January- July.	B. Phelan/ M. Forde.	Report	
3	Assess report on presentation to Minister. Meet with relevant units of Department, Department of Finance etc. on implications of the report’s recommendations.		September	B. Phelan.	Assessment/ Memorandum for Government.	
Comments						

HLO	Div Obj.	Negotiate Agreement with the MDU on historic liabilities.			
1	3				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Agree scope of due diligence examination of MDU. Liaise with MDU,PWC,CSSO etc.	18 February	B. Phelan	Agreed document	
2	Appoint contractor to undertake due diligence examination. Advertise tender Shortlist firms to be selected Invite tenders Select contractor	8 April	B. Phelan/ HPSG	Appointment of contractor	
3	Undertake due diligence examination. Liaise with MDU and appointed contractor	30 June	B. Phelan	Report from contractor	
4	Seek Government approval for agreement. Prepare Memorandum for Government	15 July	B. Phelan	Government Decision	
5	Prepare submission to EU Commission	August	B. Phelan	Commission approval	
Comments: This timetable cannot be regarded as anything but broadly indicative. The agreement of the MDU to continue to participate in this process cannot be assumed. Most the indicative target dates included here are at significant risk of not being met.					

HLO	Div Obj.	To formulate and implement a national clinical risk management strategy.				
2	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Set policy context. Produce policy/discussion paper.		31 March	B. Phelan.	Policy paper.	
2	Agree policy. Meet with relevant sections of Department and other interests.		30 April.	B. Phelan.	Agreed policy position.	
3	Draw up strategy. Consult with State Claims Agency, HSE/HIQUA and other interests.		31 May.	B. Phelan.	Agreed strategy.	
4	Assess resource implications/Secure funding. Meet Finance Unit/Department of Finance		30 June.	B. Phelan.	Funding Strategy.	
5	Formulate implementation strategy. Agree implementation strategy with State Claims Agency, HSE etc.		31 August.	B. Phelan	Implementation Plan	
6	Assess existing risk management arrangements. Agree appointment of external consultants to examine existing risk management structures.		31 March.	B. Phelan/ State Claims Agency	Consultant's report.	
Comments						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Nursing Policy Division

Division Head: Simonetta Ryan, Principal Officer

MAC Area: Personnel

MAC Member: Bernard Carey, Director

Divisional Objectives:

High Level Objective :1 To put in place organisational structures, legal and accountability frameworks and management capacity (systems and people) to ensure that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence and monitored and evaluated on the basis of this evidence

Divisional Objective 1:

Preparation of Heads of Nurses Bill

Divisional Objective 2:

Provide appropriate support and advice to the Health Service Executive in relation to both those functions remaining within the Department and functions transferring to the HSE

High Level Objective :2 To ensure the system has the capacity in terms of infrastructure, technology, systems and people to deliver timely and appropriate services; and to lead and guide the development of services to ensure appropriate care is being delivered in the appropriate setting with a focus on patients, clients and their families

Divisional Objective 1:

Implementation of Pre-Registration Nursing Degree Programme

Divisional Objective 2:

Implementation of the Commission on Nursing Report

Divisional Objective 3:

IR / Sustaining Progress Issues

Divisional Objective 4:

HR and Scope of Practice Issues

High Level Objective : 5 *Supporting Wider Government Programmes and International Health Policy*

Divisional Objective 1:

EU Directives

Part 1:

HLO	Div Obj.				
1	1	Preparation of Heads of New Nurses Bill			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Obtain approval of Minister and Secretary General to circulate relevant Departments	April 2005	S. Ryan Susan Reilly	Draft Legislative proposals approved for circulation	
1.1	Provide briefing for Minister and Secretary General on proposed outline Bill		Laura McGarrigle		
1.2	Draft Heads of Bill				
2	Prepare Memorandum for Government	May 2005	S. Ryan	Receive observations of other Government Departments to Heads of Bill	
2.1	Circulate to Government Departments	May 2005	Susan Reilly Laura McGarrigle		
3	Submit Memorandum for Government with Heads of Bill	July 2005	S. Ryan Susan Reilly Laura McGarrigle	Approval of Heads of Bill by Government	
3.1					
4	Publish Heads of Bill and lay them before the Houses of the Oireachtas	July 2005		Heads of Bill published to enable consultation with relevant stakeholders	
5	Engage in consultation process with relevant stakeholders	October 2005	S. Ryan Susan Reilly Laura McGarrigle	Clarify the views of all stakeholders in relation to the proposed legislation	
Comments					

HLO	Div Obj.	Provide appropriate support and advice to the Health Service Executive in relation to both those functions remaining within the Department and functions transferring to the HSE			
1	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Identify functions to be transferred and agree transition arrangements	Jan –Mar 2005	S. Ryan Sandra Walsh Eugene Lennon S. Treanor	Systems in place to ensure smooth administration of programmes	
1.1	Education: <ul style="list-style-type: none"> • Capital Spending • Revenue Spending • Sponsorship Scheme • Fees Initiative IR: <ul style="list-style-type: none"> • Pension Rate of Pay • Nurses Early Retirement Issue Circulars for HSE				
1.2	Agree procedures with the HSE for transition arrangements in relation to Capital and Revenue Payments	Feb 2005			
2	Agree list of functions to be transferred and agree transition arrangements <ul style="list-style-type: none"> • Sponsorship Scheme (Education) • Pension Rate of Pay (IR) 		All Staff	Systems in place to ensure smooth administration of programmes	
2.1	Steps: Organise meeting with HSE	Q1	All Staff		
2.2	Receive details of new sponsorships from service providers	Q1	All Staff		
2.3	Develop monitoring and accountability processes for transferred functions	Q2			

HLO	Div Obj.				
2	1	Implementation of the Pre-Registration Nursing Degree Programme			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Work with the HSE to support the administration of Capital and Revenue Funding for the nursing degree programme	Jan – June 2005	Sandra Walsh Sean Treanor C. O'Neill	Approval of Funding	
1.1	Checking claims and advising the HSE on correct allocation of funding				
2	Work with the HSE to oversee the implementation of the Sponsorship scheme for Public Health Service Employees wishing to train as nurses	Jan – June 2005	S. Walsh S. Treanor C. O'Neill Nurse Education Advisor	Approval of Funding	
2.1	Liaise with the Nursing Careers Centre and the Nursing and Midwifery Planning and Development Units	Ongoing			
2.2	Work with the HSE to review the Sponsorship scheme	Feb 2005		Revised Circular issued	
3	Work with the HSE to undertake a review of the Fees Support Initiatives	Aug 2005	S. Walsh S. Treanor C. O'Neill Nurse Education Advisor F. Wheeler	Review is undertaken	
3.1	Work with the HSE in processing claims for fees initiatives	Jan – June 2005		Approval of Funding	
3.2	Review of post registration and specialist courses			Review Complete	
4	Review of the Community CPC pilot project Report	May 2005	Mary O'Neill	Report under consideration	

HLO	Div Obj.	Implementation of the Pre-Registration Nursing Degree Programme				
2	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
				S. Ryan Mary McCarthy		
4.1	Work with the HSE with a view to implementing the recommendations					
5	Continued monitoring of Rostered Year replacement Project		Jan – June 2005	S. Ryan S. Walsh Education Advisor		
Comments						

HLO	Div Obj.	Implementation of the Commission on Nursing Report			
2	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Work with the HSE on Nationally introducing the Health Care Assistant Programme in Mental Health Services	Sept 2005	Tracy O'Beirne E. Lennon Mary McCarthy Psychiatric Nurse Advisor	Health Care Assistant Programme available in Psychiatry	
1.1	Liaise with Stakeholders				
2	Effective Utilisation of Nursing and Midwifery Skills	Jan – June 2005	Mary McCarthy Tracy O'Beirne E. Lennon	Draft Report Completed	
2.1	Examine systems for determining staffing levels				
3	Work with relevant Divisions	April 2005	Mary McCarthy Mary O'Neill	Sign off report with HSE	
3.1	Complete NAMIC Strategy Report				
3.2	Work with the HSE on completing the document				
4	Continue to provide professional leadership on the central planning and strategic development of nursing and midwifery	Ongoing	Mary McCarthy All Nurse Advisors		
4.1	Link with, provide guidance and direction for the profession				
4.2	Participate and support National and International Working Groups				
5	Evaluation of the Report of the Expert Group on Midwifery and		S.Ryan	Publication of the	

HLO	Div Obj.	Implementation of the Commission on Nursing Report			
2	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
	Childrens nursing education	March 2005	S.Walsh	Report	
5.1	Implement the recommendations of the report on the basis of decision by the Tánaiste	Autumn 2005/06	Mary McCarthy M. Godfrey Nurse Education Advisor A. Brunty S. Treanor	Commencement of Education programmes in the HEIs	
6	Implementation of the Research Strategy	Jun – August 2005	Mary McCarthy M.Godfrey	Identification of key research priorities in Nursing and Midwifery in Ireland	
6.1	Research Priorities Study			Study Completed	
Comments					

HLO	Div Obj.					
2	3	IR / Sustaining Progress Issues				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	IR Issues		Ongoing	Simonetta Ryan Eugene Lennon Caitriona Mason Maeve Hickey	Terms of Sustaining Progress are adhered to	SP
1.1	Work in partnership with the HSE on National IR Issues and major claims					
Comments						

HLO	Div Obj.	HR and Scope of Practice Issues			
2	4				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Workforce Planning	March 2005	E. Lennon S.Ryan		
1.1	Participate in the HSE National Steering Group to address the 2005 recruitment problem				
2	Progress the issue of X-Ray Prescriptive Authority for Nurses (and Midwives)	Sept 2005	S.Ryan Mary McCarthy S.Reilly L. McGarrigle T. O'Beirne	Creation of a register for Nurse / Midwife X-ray Prescribers	
2.1	Work with the relevant Divisions in the Department (Acute Hospitals and Hospital Planning Office) as well as participation in MEDAG and the MEDAG subgroup.			Production of a document outlining requirements and guidelines for the prescribing of x-rays by nurses and midwives.	
3	Advance the issue of Nurse Prescribing		S. Ryan M. McCarthy S. Reilly L. McGarrigle Nurse Education Advisor	Legislative changes progressed	
3.1	Participate in the Steering Group	June 2005			
3.2	Evaluate the recommendations of the Nurse Prescribing Pilot Project				
Comments					

HLO	Div Obj.				
5	1	EU Directives			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Draft legislation for EU Directive 2001/19 (Professional Recognition of Qualifications) and associated directives	Sept 2005	S. Reilly Laura McGarrigle		
1.1	Liaise with Departmental Working Group	Jan 2005		Project Plan	
1.2	Assemble directives, complete legislation	Feb 2005		Files of existing legislation	
1.3	Draw up tables of concordance	April 2005		Tables of concordance	
1.4	Draft Legislation and implement SI's	Sept 2005		SI's	
1.5	Liaise with inter-departmental group on proposed EU Directive 5161/05 – Services in the internal market	Ongoing		Input to working group in relation to health issues	
2	Present input to North – South Mobility Group		Sean Treanor Mary McCarthy Tracy O'Beirne		Group Members
2.1	Provide Working Group with advice re Nursing Issues	Ongoing			
3	All Ireland Nursing and Public Health Project		Mary O'Neill Mary McCarthy	Final Report Published	
3.1	Conference organised	April 2005			
4	NCI All Ireland Cancer Nurses Working Group	Quarterly until Dec 2007	Julie Ling	Implement Action Plan for 2004-2007	

Nursing Policy Division

HLO	Div Obj.					
5	1	EU Directives				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
4.1	Organise Meetings					
5	Prepare inputs for World Health Assembly		May 2005	Mary McCarthy		
Comments						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		
Annual Progress Report			
Official Languages Act		Jan 2005	All Staff
CRAFTS File Reference			All Staff

Department of Health and Children
Business Plan 2005

Division Name: Professional, Management and Support Division

Division Head: William Beausang, Principal Officer

MAC Area: Personnel Management and Development

MAC Member: Bernard Carey, Director

Divisional Objectives:

SS HLO 1: High Performance

To ensure that the organisational structures, legal and accountability frameworks and management capacity (systems and people) are in place so that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence, and monitored and evaluated on the basis of this evidence.

Div Obj 1:

Discharge responsibilities assigned to the Department of Health and Children under the modernisation programme for the health sector in Sustaining Progress.

Div Obj 2:

Transfer operational HR/IR/personnel/pension responsibilities agreed for devolution to the HSE, maintaining quality of service during the transitional phase.

Div Obj 3:

Ensure compliance in the health sector with Government policy on public sector pay (for health and social care professional / clerical – admin. and non-nursing grades), public sector numbers policy and public sector pensions policy.

Div Obj 4:

Deliver objectives for regulatory policy for health and social care professionals and complementary therapists set out in Quality and Fairness.

Div Obj 5:

Maintain quality of customer service in relation to roles / responsibilities remaining in the Department and build Divisional capacity to carry out effectively new roles and responsibilities of the Department in the Statement of Strategy.

SS HLO 2: Responsive and Appropriate Care

To support the system in developing capacity – infrastructure, technology, systems and people – to deliver timely and appropriately services; and to provide key policy guidance in the development of services to ensure appropriate care is being delivered in appropriate setting with a focus on patients, clients and their families.

Div Obj 6:

Develop and oversee/evaluate implementation by HSE of strategic policy frameworks for HRM/education and training for health workforce, working conjointly with Therapy Advisory Unit in relation to shared objectives.

Part 1:

HLO	Div Obj.	Regulation			
1	4				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Enactment of the Health and Social Care Professionals Bill and initiate follow-up work				
1.1	Assist Tánaiste in passage of Bill through the Oireachtas	June 2005	M O'Brien A Tighe	Health and Social Care Professionals Bill enacted	Q&F
1.2	Develop set of principles to guide the evaluation process to determine what variant titles will be protected under the Health and Social Care Professionals Bill	End 2005	M O'Brien	Principles produced	
1.3	Initiate establishment of Health and Social Care Professionals Council	End 2005	M O'Brien A Tighe	Preparatory work commenced.	Q&F
2	Assessment Mechanism for Chiropodists Wishing to Practise in the Public Health Service				
2.1	Finalise and distribute list of chiropodists considered eligible to practise in the public health service as a result of first assessment.	March 2005	M O'Brien	List finalised and distributed	
2.2	Professional bodies to take responsibility for next phase of assessment process i.e. the review of criteria in light of the first assessment which will inform the grand-parenting process to be put in place under statutory registration for chiropodists	End 2005	M O'Brien	Arrangements for review of criteria agreed with professional bodies	
3	Plan, organise and support the development of a regulatory framework for complementary therapists				
3.1	Participate in and provide administrative support to meetings of	Througho	M O'Brien	Report of National Working Group	Q&F

Professional, Management and Support Division

HLO	Div Obj.	Regulation				
1	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	the National Working Group on the Regulation of Complementary Therapists		ut 2005	A Tighe R Dunne	submitted to the Tánaiste	
Comments Achievement of the first objective largely depends on resources provided by the Office of the Parliamentary Counsel to the Government and Oireachtas time allocated by the Office of the Chief Whip. Achievement of the second objective depends on the co-operation of the professional bodies concerned.						

HLO	Div Obj.	Modernisation				
1	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Support the Performance Verification process in the Health sector and the work of the Health Service Performance Verification Group					
1.1	Provide secretariat for the Health Service Performance Verification Group		Througho ut 2005	Paul Fay / D. Williams / E. Lynch	Successful completion of both phases of the PV process due for completion in 2005	SP
1.2	Support the Secretary General’s role in the Performance Verification process		Througho ut 2005	Paul Fay / D. Williams / E. Lynch	Timescales for submission of documents to HSPVG met and determination of pay awards due complete on schedule	SP
Comments						

Professional, Management and Support Division

HLO	Div Obj.	Employment Control				
1	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Adherence to approved employment levels in the health service					
1.1	Liaise with HSE to ensure timely submission of employment reports		Through out 2005	Paul Fay / D. Williams / E. Lynch	Quarterly employment reports being received from HSE	
1.2	Analysis of data received from HSE on employment levels		Through out 2005	Paul Fay / D. Williams / E. Lynch	Required reports provided for Department / Division managers	
1.3	Work with HSE officials on issues arising from reports		Through out 2005	Paul Fay / D. Williams / E. Lynch	Strategies in place to manage issues arising	
1.4	Submission of reports to Department of Finance		Through out 2005	P. Fay / D. Williams	Reports submitted in appropriate timeframe	
HLO	Div Obj		Transition of EC to HSE			
1	2					
2	Provide assistance as necessary to the HSE in the transitional period for the takeover of the EC function					
2.1	Provide required assistance in a variety of forms (meetings, documentation etc)		Jan – June	Paul Fay / D. Williams / E. Lynch	Required assistance provided	
Comments						

Professional, Management and Support Division

HLO	Div Obj.					
1	5	Quality Customer Service				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Management of Board membership and Governance Issues					
1.1	Appoint board members / fill vacancies as necessary and maintain up to date records		Througho ut 2005	D. Williams / E. Lynch	Board vacancies filled and records up to date	
1.2	Gather information and provide returns on governance issues as required		Througho ut 2005	Paul Fay / D. Williams / E. Lynch	All requirements of Governance codes fulfilled	
Comments These two functions may be proper to another Division once the new Departmental structure is adopted during 2005						

HLO	Div Obj.	Develop the capacity of the Therapy Advisory Unit and agree the scope of an advisory resource for radiography and medical science.				
1	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	AHP advisory resource					Q&F EGVHP
1.1	Arrangements finalised for therapy advisors, posts advertised		Jan -June	TCA/ BR/PF/CO'C	Interviews held	
1.2	Discussions with radiographers and medical scientists		Feb. - June	WB/BR/PF	Scope agreed	Q&F EGRG EGMLTT
Comments : Requires support of union, other Divisions and HSE and is also dependent on funding						

Professional, Management and Support Division

HLO	Div Obj.	Establish a representative group to oversee a framework for the education and training of social care workers				
1	2?					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Framework for the education and training of social care workers					
1.1	Liaise with NSWQB/HSE/educators/NFVB		Jan - May	BR/PF/CO'C	Group established	EGVHP JCSCP
1.2						
Comments Dependent on support of stakeholders and on funding						

HLO	Div Obj.	Advance the HR modernisation agenda in line with Sustaining Progress				
1	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Support the HSE in devolution transition period					
1.1	Participate in existing groups for agreed timescale		Jan. - June	BR/PF/CO'C	Smooth handing over and transmission of corporate knowledge	HRF SP
HLO	Div Obj.	Devolution				
1	6					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Monitor output to ensure consistency with Govt. policy on public sector pay, HR, VFM and accountability					
1.1	Continued liaison with HSE on national AHP IR issues		Jan. Dec	BR/PF	Framework developed for monitoring and	HRP QF SP

Professional, Management and Support Division

HLO	Div Obj.	Advance the HR modernisation agenda in line with Sustaining Progress				
1	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
					evaluation role	
Comments Dependent upon HSE structures being in place and on restructuring within Department						

HLO	Div Obj.	Advance recommendations of Working Group on Garda Vetting				
2	5					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Implementation Group					
1.1	Continued participation in Garda Implementation Group		Ongoing	BR	Health Service needs addressed	WGGV
1.2	Exploration of PECS system		April	BR/CCPU	Legal advice sought and consultation initiated	WGGV
Comments Progress dependent upon Garda resources and on structures within the HSE and voluntary sector						

HLO	Div Obj.	Regulatory Policy				
1	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Ensure policy framework in relation to recognition of non-national qualifications					
1.1	Develop national policy relating to the recognition of non-national qualifications for HSCPs		Oct 2005	CK/AT/RD	Policy framework developed	

Professional, Management and Support Division

HLO	Div Obj.	Regulatory Policy				
1	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1.2	Meet obligations arising from new consolidated EU Directive on the mutual recognition of qualifications		Througho ut 2005	CK/AT	National policy amended to reflect new requirements	
2	Promote Cross-Border Mobility for HSCPs					
2.1	Provide input and support to Cross Border Obstacles to Mobility Working Group		Mar 2005	CK/AT	Requirements in relation to HSCPs provided	
2.2	Implement recommendations of the Group when agreed		Apr – Dec 2005	CK/AT	Recommendations implemented	
3	Prepare for streamlining of NSWQB responsibilities in advance of the establishment of the HSCPC.					
3.1	Consult with NSWQB regarding arrangements and agree procedures		Dec 2005	CK	Consultation completed and procedures agreed	
Comments: Department of Education and Science are the lead Department on issue of EU Directive.						

HLO	Div Obj.					
2	6	Education and Training				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Workforce Strategy and Policy Development					
1.1	Work with FÁS/Divisional working group to finalise FÁS/ESRI health skills monitoring report		Mar 2005	CK/AT	Appropriate and timely input provided to FÁS for inclusion in	

Professional, Management and Support Division

HLO	Div Obj.					
2	6	Education and Training				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1.2	Progress education and training issues arising with Dept of Education and Science		Througho ut 2005	CK	final report Issues identified to DoE&S and progressed	
2	Liaise with Departmental Chief Therapy Advisor (CTA) on professional issues					
2.1	Agree agenda and progress with CTA		Througho ut 2005	CK/CTA	Forum to progress professional issues established	
Comments						

HLO	Div Obj.	Transfer operational HR (education and training) responsibilities agreed for devolution to the HSE				
1	2					
Ref	Steps / Action		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Devolve implementation of education and training policies					
1.1	Oversee devolution of Bacon training places clinical placement framework and clinical psychology funding model ensuring appropriate transfer and monitoring arrangements in place.		Throughout 2005	CK/AT	Polices devolved and implementation monitored	
Comments: The timing and content of the functions schedule is subject to change and revisions to the list of functions are expected. Thus the list and dates can be only regarded as guides to sequence rather than definite completion dates at this stage. Firmer dates will be specified following agreement on overall schedule.						

Professional, Management and Support Division

HLO	Div Obj.	Divisional Objectives: Modernisation				
1	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Prepare/Validate/Issue Consolidated Pay scales					
1.1	Prepare scales (final benchmarking award and next SP award)		June 2005	GK/MD/ NC	Pay scales issued	SP/BENCH MARKING
1.2	Support HSE in the transfer of scales for December increase.		Dec 2005	GK/MD/ NC	Pay scales issued by HSE	SP
1.3	Await sanction re pay increases from DOF and relay to HSE		Nov 2005	GK/MD/ NC	Pay scales to issue by HSE	
2	Performance Related Awards					
2.1	Provide administrative support required to the work of the Committee for Performance Awards		Ongoing	FK/RD	Work of the CPA completed	
2.2	Ensure conduct of PRA schemes in NCSSIS conforms to agreed guidelines/principles.		Jan 2005 Dec 2005	GK/FK	Annual Report completed and submitted to the Department of Finance	
Comments Preparation of pay scales, both for benchmarking and SP, due in June 2005 needs some expertise, so it would be appropriate to devolve this task to the HSE for the subsequent pay increase, from Dec 2004 when only one increase, SP, is due. Close liaison/support will be required for the transition.						

HLO	Div Obj.	Administration of VHSS and NHASS and work to secure the successful devolution of both Schemes to the HSE				
1	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Maintain and improve current levels of service to client base of health service agencies and their employees		Ongoing	All staff	Throughput of work maintained and delivered in a timely manner	

Professional, Management and Support Division

HLO	Div Obj.	Administration of VHSS and NHASS and work to secure the successful devolution of both Schemes to the HSE				
1	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1.1	Continue work towards reducing backlogs on requests for information (cf comments below).		Ongoing	All staff	Backlogs reduced	
1.2	Develop communications with client agencies				Increase in quantity and focus of meetings and communications designed to enhance delivery of services	
2	Assist in the Devolution of Schemes to HSE		Ongoing	PC	Devolution to HSE is achieved	
2.1	Individual components of devolution to be assigned to staff members by project leader in conjunction with role profiles		February	All staff	Completion of individual and team projects	
3	Develop scheme guides		Q2.	PC, MC	Issue of new guides for Schemes	
Comments Continuing reduction on backlogs is dependent on availability of staff numbers with requisite expertise in particular area and the volume of requests for information on pension entitlements						

HLO	Div Obj.	Continue to develop Pension Policy Unit and Superannuation Section				
1	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Implementation of Pension Commission recommendations		Ongoing	PC	Extend Pension Commission Recommendation s into policy activity	

Professional, Management and Support Division

HLO	Div Obj.	Continue to develop Pension Policy Unit and Superannuation Section				
1	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1.1	Represent Department at inter-agency and inter-departmental fora		Ongoing	PC, FS		
1.2	Continue to liaise with Department of Finance in relation to pension legislation development, ensuring equitable access to Schemes for all health sector employees		Ongoing	PC/FS		
1.3	Devise circulars in relation to the application of Schemes advising agencies of amendments and developments		Ongoing	PC, FS	Timely issuance of circulars to agencies	
2	Review and monitor the implementation of schemes throughout the country			PC, FS		
3	Review and monitor implementation of particular aspects of Health Sector Schemes		Ongoing	PC/FS	Ensuring consistent application of Schemes' rules and regulations	
3.1	Permanent Infirmity		March	PC/FS	Consistent application of rules	
3.2	Abatement		January	PC	Consistent application of rules	
3.3	Refunds		March	FS	Consistent application of rules	
3.4	Provide expert advice to all health sector employers on pensions		Ongoing	All Staff	Increased expertise of all members of PPU/Superannuation Section	
4	Scope out 'Consolidation of Pension Schemes' (cf Comments below).		After devolution of schemes	PC/FS/EO's		
4.1	Work with health agencies including HSE on the development of model		Ongoing	PC/FS	Availability of	

Professional, Management and Support Division

HLO	Div Obj.	Continue to develop Pension Policy Unit and Superannuation Section				
1	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	superannuation schemes				model scheme to relevant agencies.	
Comments It is anticipated that the scoping out of consolidation of pension schemes will be possible subsequent to the commencement of devolution of the administration of both VHSS and NHASS. However if the schemes do not devolve the opportunity to scope out the consolidation of schemes will not be possible						

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Professional, Management and Support Division

Objective	Output	Target Completion Date	Person(s) responsible / involved

Department of Health and Children
Business Plan 2005

Unit Name: **Therapy Advisory Unit**

Unit Head: **Bernie Mc Nally, Chief Therapist Advisor**

MAC Area: **Personnel Management and Development**

MAC Member: **Bernard Carey, Director**

Divisional Objectives:

SS HLO 4: *(To put in place organisational structures, accountability frameworks and management capacity (systems and people) to ensure that health and personal services are planned and delivered efficiently and effectively on the basis of best available evidence and monitored and evaluated on the basis of this evidence.)*

Div Obj 1:

Complete the establishment of the Therapy Advisory Unit

Div. Obj. 2

Ensure that the Therapy Advisory Unit develops as a central and meaningful resource to all relevant divisions within the Department.

Div. Obj. 3

Establish effective structures, networks and partnerships with the professional bodies, universities and other external agencies as appropriate, to facilitate delivery of best practice standards across the professions.

SS HLO 3: *(To ensure the system has the capacity in terms of infrastructure, technology, systems and people to deliver timely and appropriate services and to lead and guide the development of services to ensure appropriate care is being delivered in the appropriate setting with a focus on patients, clients and their families.)*

Div Obj 4:

Support the introduction of Therapy Assistants in Physiotherapy, Speech and Language Therapy and Occupational Therapy. Identify training requirements for Therapy Assistants and how these requirements can be met.

Div. Obj. 5

Work with relevant agencies/ groups to ensure that undergraduate education for the “Bacon” Therapies meets the required standards of clinical education.

Div Obj 6

Work with relevant agencies to ensure that supply of Therapy profession meets demand.

HLO	Div Obj.	Complete the establishment of the Therapy Advisory Unit				
4	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Complete the establishment of the Therapy Advisory Unit					
1.1	Confirm approval from HR in DoHC and HSE to proceed as planned		Mar.05	BMN	Approval to advertise	
1.2	Advertise, interview and appoint Advisors		June 05	BMN	Advisors appointed	
Comment Dependant on approval to proceed from HR in DoHC and HSE. Divisional Objective 6 of Professional, Management and Support Division also refers.						
HLO	Div Obj.	Ensure that the Therapy Advisory Unit develops as a central and meaningful resource to all relevant divisions within the Department.				
4	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Therapy Advisory Unit develops as a central resource to the Department.		Sept 05	BMN	Active participation of TAU in relevant divisional activity	
1.1	Initial meetings and ongoing collaboration with all relevant divisional heads re. potential contribution of TAU		Jan.- Sept 05	BMN		
1.2	2 Advisors assigned with responsibility for specified divisions within Dept.		Sept 05	BMN and Advisors	Liaison person identified for all relevant divisions	
2	MAC Manager kept up to date on progress with this objective		Ongoing	BMN	Regular progress reports produced	
Comments						

HLO	Div Obj.	Establish effective structures, networks and partnerships with the professional bodies, universities and other external agencies as appropriate, to facilitate delivery of best practice standards across the professions.				
4	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef

Therapy Advisory Unit

HLO	Div Obj.	Establish effective structures, networks and partnerships with the professional bodies, universities and other external agencies as appropriate, to facilitate delivery of best practice standards across the professions.				
4	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Establish effective structures, networks and partnerships with the professional bodies, universities and other external agencies		Jan- June 05	BMN	Structures, networks, contact persons etc. established and working effectively	
1.1	Meet with 9 Professional Bodies		Jan 05	BMN	Partnership established	
1.2	Meet with the 12 Therapy Schools from the various Universities		Feb 05	BMN	Partnership established	
2	Interdisciplinary communication and advisory group established with the professions		Mar.05	BMN	First meeting documented	
2.1	Initial meeting with all other relevant agencies		Jun 05	BMN	Partnership established	

HLO	Div Obj.	Support introduction of Therapy Assistants in Physiotherapy, Speech and Language Therapy and Occupational Therapy. Identify training requirements for Therapy Assistants and how these requirements can be met.				
3	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Support HSE-ERD in introducing grading structure for Therapy Assistants in Physiotherapy, Speech and Language Therapy and Occupational Therapy.		Dec.05	BMN, Advisor	Grading structure established Job descriptions agreed	
1.1	Identify competencies required by Therapy Assistants and agree job description		June 05	BMN	Competencies identified and job description agreed	
1.2	Agree grading structure		July05	BMN	Grading structure in place	
2	Identify training requirements for Therapy Assistants and how these requirements can be met.					
2.1	Identify curriculum requirements		Oct 05	BMN and Advisor	Draft curriculum available	

Therapy Advisory Unit

HLO	Div Obj.	Support introduction of Therapy Assistants in Physiotherapy, Speech and Language Therapy and Occupational Therapy. Identify training requirements for Therapy Assistants and how these requirements can be met.				
3	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
2.2	Agree preferred method of provision of education/ training		Dec 05	BMN and Advisor	Training design agreed	
Comments:- Depends on continued support of HSE ERD and full cooperation from Prof. Bodies and Unions						

HL O	Div Obj.	Work with relevant agencies/ groups to ensure that undergraduate education for the “Bacon” Therapies meets the required standards of clinical education.				
4	5					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Work with relevant agencies/ groups to ensure that undergraduate education for the “Bacon” Therapies meets the required standards of clinical education.		Jan- Sept 05	BMN	clinical placements needs met	
1.1	Agree responsibility for delivery of clinical placements with relevant agencies		Feb 05	BMN	Clear understanding of designated authority	
1.2	Agree process for implementation of National Framework Document		Mar 05	BMN	Clear understanding by all stakeholders of implementation responsibilities	
2	Monitor and Evaluate success with implementation of framework document		Mar. – Dec 05	BMN	Clinical placements meeting required standards in terms of capacity and quality	
Comments: Divisional Objective 6 of Professional, Management and Support Division also refers. Will require support of HSE in establishing national co-ordinating structure for implementation of framework and provision of additional funding.						

HLO	Div Obj.	Work with relevant agencies to ensure that supply of Therapy professionals meets
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Therapy Advisory Unit

3	6				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Work with relevant agencies to ensure that supply of Therapy professional meets demand	Dec 05	BMN	Potential shortfalls identified and measures in place to resolve	
1.1	Work with FAS to complete Therapy section of Healthskills Report	Mar 05	BMN	Report published	
1.2	Shortfalls identified and actions required agreed	Apr. 05	BMN	Clear understanding of required action	
2	Meeting with relevant agencies to make business case for proposed action	June 05	BMN	Business case presented	
2.1	Action taken to resolve future manpower shortages	Dec 05	BMN	Action commenced	
Comments:- Divisional objective 6 of Professional, Management and Support Division also refers. Final outcome dependent on external agencies available resources and priorities					

Part 2: developing the Capacity of the Division

Therapy Advisory Unit

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Child Care Legislation

Division Head: Mary McLoughlin, Principal Officer

MAC Area: Child Care

MAC Member: Noel Usher, Director

Divisional Objectives:

SS HLO 1: To provide a policy and legal framework for the protection and promotion of health and well being which gives active support to improving quality of life, targets inequalities in health and advances inter-sectoral working.

1. **Review of Child Care Act 1991**
2. Review of Pre school Regulations
3. Review of Child Protection system

SS HLO 2: To put in place organisational structures, accountability frameworks and management capacity (systems and people) to ensure that health services are planned and delivered efficiently and effectively on the basis of best available evidence and monitored and evaluated on the basis of this evidence.

Div Objs:

4. **Adoption**
 - Manage the process for the enactment of proposals for change in Adoption Legislation
 - Consult re proposals on guardianship
5. **Ombudsman for Children**
 - Finalise Superannuation Scheme for Ombudsman for Children
 - Arrange for Annual Report to be laid before the Oireachtas
6. **Child Care Statistics**
 - Arrange publication of 2001, 2002 and 2003 statistics on children in care
 - Develop plan for transfer of the collection collation and dissemination of child care statistics to HSE.
7. **Adult Victims of Past Abuse**

- Develop plan to transfer liaison with Victim Support Groups, Central Development Fund expenditure and payment of external counselling claims to HSE
- Finalise the Vaccine Trials
- Provide information as requested to the Commission to Inquire into Child Abuse and liaise with Records Management concerning the possibility of transferring this responsibility to it
- Implement recommendations of the Ferns Inquiry insofar as they affect the Department.

Part 1:

HLO	Div Obj.			
1	1	- Child Care Act 1991		
1		Review of Child Care Act 1991		
1.1		Carry out review		

HLO	Div Obj.				
1	2	Responsibility for Pre School Inspections			
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs
2	Pre School Inspections				
2.1	Consider consolidation of responsibility for the inspection, provision and funding of pre-school services having regard to the findings of NCO chaired High Level Group on Child Care and Early Education				

HLO	Div Obj.	- Child Protection			
1	3				
3	Review of Child Protection				
3.1	Building on HSE review of Children First and in co-operation with HSE develop new systems for child protection				

HLO	Div Obj.	Adoption				
B		<ul style="list-style-type: none">- Consult in relation to proposals on guardianship.- Manage the process for the enactment of proposals for change in Adoption Legislation				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
4	Consultation re guardianship					
4.1	Agree consultation steps with D/J, Eq& LR and with CCPU		March	MMcL/SK	Agreed plan	
4.2	Carry out consultation		June	MMcL/SK	Clarity re views	
4	Drafting of adoption legislation					
4.3	Liaise with Office of Parliamentary Counsel in relation to drafting		ongoing	MMcL/SK		
4.4	Publish Bill		End 05	MMcL/SK	Bill published	
Comments: The assignment of a Parliamentary Counsel to the adoption bill and its identification as a priority item will be crucial to the completion of the bill within the year						

HLO	Div Obj.	Ombudsman for Children				
B	5	<ul style="list-style-type: none">- Finalise Superannuation Scheme for Ombudsman for Children- Arrange for Annual Report to be laid before the Oireachtas				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
5	Ombudsman for children - Superannuation					
5.1	Liaise with Superannuation Section concerning the model scheme		End Mar	DB		
5.2	Finalise scheme and seek Finance approval		End June	DB	Scheme approved	
5	Ombudsman for Children Annual Report			DB	Report laid before the Oireachtas	
5.3	On receipt of Annual Report arrange for submission to Government		2weeks after receipt of report			
5.4	Following Government approval arrange for the Report to be laid before the Oireachtas		1 week after receipt of approval	DB		
Comments						

HLO	Div Obj.	Child Care Statistics				
B	6	<ul style="list-style-type: none">- Arrange publication of 2001, 2002 and 2003 statistics on children in care- Develop plan for transfer of the collection collation and dissemination of child care statistics to HSE.				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
6	Annual statistics					
6.1	Volume of statistics collated, prepared analysed and published		End May	DB/EC	Statistics published	
6	Transfer of stats to HSE					
6.1	Consider training requirements for HSE staff		End Mar	DB/EC		
6.2	Exam relevant files and prepare them for transfer (or copies) to HSE		End Jun	DB/EC	Function transferred to HSE	
Comments						

HLO	Div Obj.	Adult Victims of Past Abuse				
B	7	<ul style="list-style-type: none">- Develop plan to transfer liaison with Victim Support Groups, Central Development Fund expenditure and payment of external counselling claims to HSE- Finalise the Vaccine Trials- Provide information as requested to the Commission to Inquire into Child Abuse and liaise with Records Management concerning the possibility of transferring this responsibility to it- Implement recommendations of the Ferns Inquiry insofar as they affect the Department.				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
7	Devolution to HSE					
7.1	Examine training requirements and files for transfer to HSE			DB		
7.2	Develop plan				Plan for transfer in place	
7	Vaccine Trials					
7.3	Receive advice from CSSO		End Jan	DB		
7.4	Submit proposals to Tanaiste		End Feb	DB	Decision made on Vaccine Trials	
7	Requests from Ryan Commission					
7.5	Respond to requests from the Investigation Committee of the Ryan Commission into individual cases of abuse with as much detailed information as possible			MMcL/DB	100% of replies to requests for information from the Laffoy Commission to issue before deadline of 28 days	
	Consult with Records Management				Decision made on possible transfer of function	

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children Business Plan 2005

Division Name: Child Care Policy Unit

Division Head: Dora Hennessy, Principal Officer

MAC Area: Child Care

MAC Member: Noel Usher, Director

Divisional Objectives:

SS HLO 1: (High performance)

To ensure that the organisational structures, legal and accountability frameworks and management capacity (systems and people) are in place so that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence and monitored and evaluated on the basis of this evidence.

Div Obj 1:

Support the Health Service Executive in the implementation of parts 2,3 and 11 of the Children Act, 2001. (Action 27)

- *Complete the process of certifying the special care units for the implementation of Parts 2 & 3 of the Children Act, 2001.*

Work with the Health Service Executive to support the transition of operational responsibility for child care services. Contribute to and participate in the restructuring of the Department as required.

SS HLO 4: Better health for everyone

To provide a policy and legal framework for the protection and promotion of health and well-being which gives active support to improving quality of life, targets inequalities in health and advances inter-sectoral working.

Div Obj 2:

To plan and support the implementation of major strategic initiatives as identified in the Health Strategy, National Children's Strategy and in response to critical service pressures. (Actions 21 and 27)

- *Support the Health Service Executive in the implementation of recommendations of the Working Group on Foster Care and the Youth Homelessness Strategy.*
- *Finalise Review Pre-school Regulations 1996.*
- *Establish Social Services Inspectorate on a statutory basis.*
- *Develop a National Policy on Family Support Strategy.*

Introduction

The National Health Strategy “*Quality and Fairness: A Health System for you*” is based on a whole-system approach to health matters. It recognises the role of stakeholders such as the public, community and voluntary bodies, health service providers, statutory and non-statutory bodies, other Government Departments and international bodies in working together to produce a world-class health system and a healthier population. This is also reflected in the Department’s Strategy Statement.

The transition of the Health Services Executive and the restructuring of the Department will inevitably impact on the Business Plan as the year progresses. The actual impact cannot be predicted at this stage.

Review of the business plan

The plan will be reviewed regularly and updated as necessary to reflect changing circumstances. Review mechanisms will include staff meetings and status reports. The plan review will be incorporated into other management activities of the division.

Part 1:

HLO	Div Obj.	Support the Health Service Executive in the implementation of parts 2,3 and 11 of the Children Act, 2001. (Action 27)				
1	1	<ul style="list-style-type: none">Complete the process of certifying the special care units for the implementation of parts 2 & 3 of Children Act, 2001				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Implementation of Parts 2 and 3 of Children Act 2001			K. Smyth G.Maguire/ P. Nulty B.Meaney J. Bourke		
	Certification of special care units		February 2005		Certification Process Complete	
1.1	Confirmation from SSI to Proceed with certification					
1.2	Follow up SSI certification report with HSE					
1.3	Get legal advice on the need to revise Special Care secondary Legislation (Part 3) to take account of HSE as a legal entity					
1.4	Prepare certificates for Minister's signature					
1.5	Inform and liaise with HSE re certification					
1.6	Ongoing liaison with HSE on the reopening of Coovagh House		June 2005		Coovagh House Reopened	
1.7	Arrange for the dissemination of information re private fostering - S 23 (0) of Act		April 2005	D.O'Brien/ E. Duffy H.O'Brien M. Moran	Arrangements agreed and information disseminated.	

HLO	Div Obj.	Support the Health Service Executive in the implementation of parts 2,3 and 11 of the Children Act, 2001. (Action 27)				
1	1	<ul style="list-style-type: none">Complete the process of certifying the special care units for the implementation of parts 2 & 3 of Children Act, 2001				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
2	Managing High Court Litigation		Ongoing during transition period	K. Smyth	High Court Litigation Managed	
3	Liaise with Statutory Special Residential Services Board (SRSB)			K. Smyth P. Nulty/G. Maguire B. Meaney J. Bourke		
3.1	Agree Letter of Allocation with Finance and Personnel Units and consult with Department of Education & Science and receive service plan		February / March 2005		Letter Issued, service plan received and approved	
3.2	Monitor and liaise with Department of Education and Science re SRSB and Implementation of Children Act		Ongoing		Effective liaison arrangements in place	
3.3	Obtain Department of Finance sanction to the retention of Interim CEO for a further period		January 2005			
3.4	Liaise with Personnel Management and Development Unit to obtain Dept of Finance sanction to increase the approved complement of staff in SRSB by ten and following this, in conjunction with Personnel, Management & Development Unit sanction recruitment of ten posts.		March 2005		Sanction obtained and posts approved	

HLO	Div Obj.	Support the Health Service Executive in the implementation of parts 2,3 and 11 of the Children Act, 2001. (Action 27)				
1	1	<ul style="list-style-type: none">Complete the process of certifying the special care units for the implementation of parts 2 & 3 of Children Act, 2001				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
4	Support the HSE in implementing the “health” provisions of the Children Act, 2001					
4.1	Participate with other Departments and in particular the NCO in the Children Act Working Group on the co-ordinated implementation of the Act and the development of the implementation programme for post 2005		Ongoing	D. Hennessy K. Smyth	Effective participation	
4.2	Participate in Guardian ad Litem Working Group		Ongoing	K.Smyth	Effective Participation	
4.3	Liaise with Dept Justice, Equality & Law Reform in relation to the Youth Justice Team		Ongoing	D. Hennessy K. Smyth	Effective Participation	
5	Participate in the work of Health Service Reform Programme					
5.1	Contribute as required to the HSR Programme and to the restructuring of the Department		Ongoing	D.Hennessy and involving all CCPU staff as required	Participated as required.	
Comments The commencement of Parts 2 and 3 has to date been very complex. Legal advice continues to be required. Adequate staffing levels and no serious unanticipated problems arising in both CCPU and HSE will be key in the achievement of these objectives. Achievement is also dependent on effective liaison and communication within this Department and with the NCO, HSE, Govt. Depts. Etc. Filling the ten posts in SRSB is subject to Dept. of Finance agreement. Some objectives may be affected by the Reform Programme and Restructuring of Department and proposed relocation.						

HLO	Div Obj.	To plan and support implementation of major strategic initiatives as identified in the Health Strategy, National Children's Strategy and in response to critical service pressures (Actions 21 and 27)			
4	2	<ul style="list-style-type: none"> Support the HSE in the implementation of recommendations of the Working Group on Foster Care and the Youth Homelessness Strategy. Finalise Pre-school Regulations 1996. Establish Social Services Inspectorate on a statutory basis. Develop a National Policy on Family Support Work with the HSE to support the transition of operational responsibility for child care services. Contribute to and participate in the restructuring of the Department as required. 			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Implementation of Foster Care Report and National Standards for Foster Care		D.O'Brien / E.Duffy H.O'Brien M.Moran		
1.1	During transition period liaise with HSE regarding plans to further implement the Foster Care Report and Standards.	December, 2005		Continued prioritising of foster care through the implementation of the report and the Standards	
1.2	Follow up on SSI Foster Care Inspection reports with HSE during transition period *See also 6.2	Ongoing		Reports followed up	
1.3	Continue to liaise with other divisions e.g. Disabilities Services on Foster Care Report.	Ongoing		Effective liaison	
1.4	Establish a group to consider and make recommendations for the provision of Special Foster Care Services	September 2005		Report completed and submitted	
1.5	Liaise with CCLU re Guardianship proposals for long term Foster Care	Ongoing		Effective Liaison	

HLO	Div Obj.	To plan and support implementation of major strategic initiatives as identified in the Health Strategy, National Children's Strategy and in response to critical service pressures (Actions 21 and 27)			
4	2	<ul style="list-style-type: none"> Support the HSE in the implementation of recommendations of the Working Group on Foster Care and the Youth Homelessness Strategy. Finalise Pre-school Regulations 1996. Establish Social Services Inspectorate on a statutory basis. Develop a National Policy on Family Support Work with the HSE to support the transition of operational responsibility for child care services. Contribute to and participate in the restructuring of the Department as required. 			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
2	Review Actions Plans (2002 to 2004) of former health boards to monitor implementation of the Youth Homelessness Strategy				
2.1	Request HSE to review the implementation of the Action Plans developed by boards in 2002 eg. areas implemented and those actions which have not been implemented.	September 2005		Responses received and analysis completed on the extent of the implementation of the Strategy	
2.2	Participate at National level in monitoring of implementation and decisions on future of the Strategy chaired by NCO	Ongoing		Effective participation in Monitoring Committee and its sub-committees	
2.3	Participate in Dept. of Taoiseach Group on Homelessness	Ongoing	D'O'Brien / E. Duffy	Effective Participation	
3	Ongoing liaison with HSE in relation to Unaccompanied Minors		D.O'Brien / E. Duffy H.O'Brien M.Moran		
3.1	During transition period continue to liaise with HSE and Dept of JELR regarding the service provided by HSE to Unaccompanied Minors	December 2005		Effective liaison arrangements in place	

HLO	Div Obj.	To plan and support implementation of major strategic initiatives as identified in the Health Strategy, National Children's Strategy and in response to critical service pressures (Actions 21 and 27)			
4	2	<ul style="list-style-type: none"> Support the HSE in the implementation of recommendations of the Working Group on Foster Care and the Youth Homelessness Strategy. Finalise Pre-school Regulations 1996. Establish Social Services Inspectorate on a statutory basis. Develop a National Policy on Family Support Work with the HSE to support the transition of operational responsibility for child care services. Contribute to and participate in the restructuring of the Department as required. 			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
3.2	Ongoing liaison with Dept Justice, Equality & Law Reform in relation to issues arising particularly under Dublin II Convention	Ongoing		Effective liaison arrangements in place	
4	Finalise review of the Child Care Pre-School Services Regulations 1996 and make recommendations to the Minister		B.McDonnell M. Deacy J. Doyle		
4.1	Finalise the outstanding issues, present report to Minister, revise and implement the regulations. Arrange for Irish translation.	March 2005		Review finalised, Regulations revised and commenced	
5	Establish the Social Services Inspectorate on a statutory basis				
5.1	Work closely with Strategy Legislation Unit in the drafting of the legislation	June 2005	B. McDonnell M. Deacy J. Doyle	Legislation enacted	
6	Further development of the SSI				
6.1	Quarterly meetings of the Steering Group	Ongoing pending establishment on a statutory basis	N. Usher (Chair) D. Hennessy B. McDonnell M. Deacy J. Doyle	Meetings held	

HLO	Div Obj.	To plan and support implementation of major strategic initiatives as identified in the Health Strategy, National Children's Strategy and in response to critical service pressures (Actions 21 and 27)			
4	2	<ul style="list-style-type: none"> Support the HSE in the implementation of recommendations of the Working Group on Foster Care and the Youth Homelessness Strategy. Finalise Pre-school Regulations 1996. Establish Social Services Inspectorate on a statutory basis. Develop a National Policy on Family Support Work with the HSE to support the transition of operational responsibility for child care services. Contribute to and participate in the restructuring of the Department as required. 			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
6.2	Follow up SSI reports on residential centres with HSE during transition period. *See also 1.2	Ongoing during transition period	B.McDonnell M.Deacy J.Doyle	Reports followed up	
6.3	Agree revised procedures for follow up of both residential and foster care Inspection Reports with SSI, HSE on the establishment of SSI on a statutory basis.	September 2005		Revised procedure agreed	
7	Liaise with HSE and SSI on the dissemination of National Care Planning Project findings and guidelines.	October 2005	D.Hennessy B.McDonnell M.Deacy J.Doyle	Dissemination plan agreed	
8	Guidelines / Standards				
8.1	Establish small group involving SSI, HSE, SRSB and outside expertise to review single separation guidelines.	June 2005	M.Smith M.Deacy E.Caldwell	Guidelines Reviewed	
8.2	Review with SSI and HSE, Special Care Standards in the context of Special Care Regulations	September, 2005	M.Smith M.Deacy E.Caldwell	Standards Reviewed	

HLO	Div Obj.	To plan and support implementation of major strategic initiatives as identified in the Health Strategy, National Children's Strategy and in response to critical service pressures (Actions 21 and 27)			
4	2	<ul style="list-style-type: none"> Support the HSE in the implementation of recommendations of the Working Group on Foster Care and the Youth Homelessness Strategy. Finalise Pre-school Regulations 1996. Establish Social Services Inspectorate on a statutory basis. Develop a National Policy on Family Support Work with the HSE to support the transition of operational responsibility for child care services. Contribute to and participate in the restructuring of the Department as required. 			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
9	Finalise the Family Support Strategy				
9.1	Liaise with NCO, HSE and other Departments and the Steering Group on the final report.	March 2005	N. Usher (Chair) D. Hennessy K.Smyth P.Nulty / G.Maguire J.Doyle J. Hammond	Strategy finalised, launched and circulated to HSE	
9.2	Arrange for printing of Strategy				
9.3	Translation into Irish				
9.4	Arrange launch date				
10	Planning & supporting new developments relating to Family Support (Action 27)				
10.1	Teen Parents Support Projects – Support HSE National Monitoring Committee in the development of two additional projects	Ongoing in 2005	D. Hennessy K.Smyth P.Nulty / G.Maguire J. Hammond	Two additional Projects developed in 2005	
10.2	Support the further development of four Youth Advocacy Programmes (YAP) in the East, Mid West, North East and Southern HSE Areas	Ongoing in 2005		Four additional projects established	

HLO	Div Obj.	To plan and support implementation of major strategic initiatives as identified in the Health Strategy, National Children's Strategy and in response to critical service pressures (Actions 21 and 27)			
4	2	<ul style="list-style-type: none"> • Support the HSE in the implementation of recommendations of the Working Group on Foster Care and the Youth Homelessness Strategy. • Finalise Pre-school Regulations 1996. • Establish Social Services Inspectorate on a statutory basis. • Develop a National Policy on Family Support • Work with the HSE to support the transition of operational responsibility for child care services. Contribute to and participate in the restructuring of the Department as required. 			
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
10.3	Support the further development of five additional Springboard Projects in East, South East, South and West HSE Areas	Ongoing in 2005		Five additional projects established	
10.4	Support the HSE in the monitoring of family support projects. Arrange for the transfer of operational responsibility to HSE.	June 2005		Responsibility transferred to HSE	
11	Monitor Service Plans, Development funding and NDP Expenditure.				
11.1	Participate in the preparation of expenditure estimates and allocation in conjunction with Population Health and Finance Units and liaising with HSE.	November 2005	M. Smith to lead, but involving all CCPU staff	Estimates prepared, allocation agreed.	
11.2	Review service plan and progress thereof in the context of Section 8 Reports, SSI Reports, PI Reports IMRs, SRSB Reports, Childcare Interim Minimum Data Set, statutory obligations and any other relevant information	Ongoing		Service plans reviewed	
11.3	Continued Participation in National Child Care Information System Project	Ongoing	M Smith	Effective Participation	

Comments:

Adequate staffing levels and no serious unanticipated issues arising both in Child Care Policy Unit and HSE will be key in the achievement of these objectives. Achievement is also dependent on a) the HSE agreement and implementation in a timely manner, b) HSE taking on operational responsibility c) effective liaison and communication with other Divisions/Units within DoHC, the National Children's Office, HSE, Government Departments, etc., and d) timely availability of information. Some objectives may be affected by the Reform Programme, and Restructuring of Dept and proposed relocation.

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Food, Medicines, Tobacco Control and
Environmental Health

Division Head: Eamon Corcoran, Principal Officer

MAC Area: Public Health Division

MAC Member: Noel Usher, Director

Divisional Objectives:

SS HLO 4: To provide a policy and legal framework for the protection and promotion of health and well being which gives active support to improving quality of life, targets inequalities in health and advances inter-sectoral working.

Div Obj 1:

Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to achieve the highest standards of food safety.

Div Obj 2:

Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to protect the health and safety of the public with regard to medicinal products, cosmetic products and poisons.

Div Obj 3:

Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to facilitate tobacco control measures to protect the health and safety of the public.

Div Obj 4:

Insofar as resources allow, and in conjunction with other agencies, to ensure that an appropriate legal framework and relevant structures are in place to facilitate the protection of the health and safety of the public from those environmental factors which can adversely affect human health and to promote an awareness of these factors among statutory and non-statutory bodies and the general public and to formulate, with a view to implementation, a National Environmental Health Action Plan.

SS HLO 5: To support the delivery of the wider programme for government (outside of the delivery of health and personal social services) and to ensure Ireland's commitments at European Union and international level are met.

Div Obj 5:

To contribute to the development of food safety policy at EU and international level

Div Obj 6:

To contribute to EU policy in regard to the regulation of medicines and cosmetic products

Div Obj 7:

To contribute to the development of tobacco control policy at EU and international level.

Div Obj 8:

To contribute to the development of Environmental Health Policy at EU and international level.

Part 1:

HLO	Div Obj.	Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to achieve the highest standards of food safety.			
4	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	To develop policy in relation to food safety				
1.1	Continue to formulate policy in relation to a number of specific food safety issues with other stakeholders, as required.	On-going	Entire team	<p>Briefs and submissions prepared within deadlines</p> <p>Effective liaison and consultation with HSE, other government departments, FSAI, FSPB, the food industry, interest groups</p> <p>Satisfactory outcome of discussions insofar as the Department's policies and views are concerned</p>	
2	To keep food safety legislation under review.				
2.1	To recast the Food Hygiene Regulations 1950-1989 in the context of the EU Hygiene Package and Official Feed and Food Control Regulations	December 2005	J Regan S McEvoy S Maguire	Current national regulations revised	
3	To maintain appropriate arrangements and structures for the implementation of food safety policy and legislation				
3.1	To prepare estimates and allocate funds and monitor spending on food control activities including HSE (subject to progress in transferring functions to HSE), FSAI and FSPB	On-going	Entire team	<p>Half-yearly reviews of food control expenditure</p> <p>Annual meetings with HSE</p>	

HLO	Div Obj.	Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to achieve the highest standards of food safety.			
4	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
3.2	To provide appropriate support to the Food Safety Authority of Ireland	On-going	J Regan S Maguire B Tuohy	Regular meetings with the FSAI	
3.3	To facilitate the continued development of the Food Safety Promotion Board (FSPB)	On-going	D Byrne M Burke A Shannon	On-going liaison with the DHSSPS and the FSPB and participation in inter-departmental meetings concerning the implementation bodies. Preparation for North-South Ministerial Councils	
3.4	To evaluate in conjunction with the HSE the report arising from the FSPB of laboratory services	On-going	S McEvoy AO/HEO (vacancy)	Recommendations to the Tánaiste by end 2005	
3.5	In the context of the Health Reform Programme and the restructuring of the Department, and subject to clarification of legal issues, to devolve responsibility for appeals under the Food Hygiene Regulations 1950 – 1989 to the FSAI	June 2005	S McEvoy B Tuohy M Conroy	Appeals function transferred to FSAI.	
4	To provide advice to the Tanaiste on the food safety aspects of CJD				
4.1	To provide the Secretariat for the CJD Advisory Group (CJD AG)	On-going	D Byrne B O'Meara M Murphy	Ensuring that the CJD AG is effectively facilitated and that it provides advice to the Tanaiste - as appropriate.	

HLO	Div Obj.	Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to achieve the highest standards of food safety.				
4	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
4.2	To keep abreast of developments in BSE as they relate to food safety particularly through regular contacts with appropriate departments and agencies		On-going	D Byrne B O’Meara M Murphy		
Comments: Current ‘live’ issues include, food additives, novel foods, food supplements, genetically modified foods, official control of foodstuffs, food fortification, hygiene of foodstuffs, nutrition labelling, health claims, and an impending review of food labelling . Currently, the Unit is carrying an AO/HEO vacancy which is adversely affecting the work of the Unit - particularly in regard to transpositions in addition to a vacancy for an EHO.						

HLO	Div Obj.	Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to protect the health and safety of the public with regard to medicinal products, cosmetic products and poisons.			
4	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	To develop policy in relation to medicinal products and cosmetic products, including contributing to policy development at EU level		T McGuinn M Griffin N Quinn P Brosnan P Smeaton D Brennan V Mulhall		
1.1	Participate in the examination, formulation and negotiation of legislative and other proposals at EU Commission and Council levels	On-going	Entire team	Putting Ireland's position at meetings in Brussels and ensuring developments are consistent with this country's public health policies	
1.2	<p>Draft legislation to implement:</p> <p>Regulation (EC) No. 726/2004 of the European Parliament and of the Council of 31 March 2004 laying down Community procedures for the authorisation and supervision of medicinal products for human and veterinary use and establishing a European Medicines Agency</p> <p>Directive 2004 / 27 / EC of the European Parliament and of the Council of 31 March 2004 amending Directive 2001/83/EC on the Community code relating to medicinal products for human use</p> <p>Directive 2004/24/EC of the European Parliament and of the Council of 31 March 2004 amending, as regards traditional herbal medicinal products, Directive 2001/83/EC on the Community code relating to medicinal products for human use.</p> <p>This will require the drafting of new Regulations to replace the current</p>	31 Oct 05	Entire team	Regulations made and administrative arrangements agreed with IMB	

HLO	Div Obj.	Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to protect the health and safety of the public with regard to medicinal products, cosmetic products and poisons.			
4	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
	existing Irish legislation in these areas, as follows: - Manufacturing Regulations - Wholesaling Regulations - Labelling Regulations - Product Authorisation Regulations (for Human Medicines, Traditional Herbal Medicines and Homeopathic Medicines) - Advertising Regulations				
1.3	Discharging the responsibilities of the Member State within the EU Standing Committee on Medicinal Products particularly with regard to the authorisation of centrally authorised medicinal products.	On-going	Entire team	Opinions on draft product authorisations and Opinions on draft Commission Directives finalised in the required time	
1.4	Provide briefing material on Ireland's negotiating position in regard to internal market issues relating to medicinal products and cosmetic products arising at COREPER and various Councils including briefing material for Health Attaches and Council of Health Ministers meetings.	On-going	Entire team	Satisfactory outcome of discussions in so far as this country's policies and views are concerned	
1.5	Commitment no. 65 in Health Strategy – a review of medicines legislation (including provisions relating to unlicensed medicines)	Dec 2005	Entire team	Review commenced and progressed. This is contingent on availability of sufficient resources	
1.6	Review advice from Irish Council for Bioethics regarding procedures for Ethics Committees New Guidelines to be published by Ethics Committee Supervisory Body and disseminated	On-going	Entire team	Appropriate structures in place to implement the provisions of the regulations	

HLO	Div Obj.	Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to protect the health and safety of the public with regard to medicinal products, cosmetic products and poisons.			
4	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
	<p>Organise training for ethics committee members</p> <p>Establish criteria for accreditation of ethics committees (in consultation with Irish Council for Bioethics and others)</p> <p>Prepare tender documentation for appointment of consultants to carry out accreditation of ethics committees</p> <p>Agree the arrangements for transfer of responsibility of Ethics Committee Supervisory Body functions from Minister to HIQA</p>				
1.7	<p>Amendment to S.I. 540 of 2003 – Medicinal Products (Prescription and Control of Supply) Regulations 2003 - to take account of:</p> <ul style="list-style-type: none"> • Updating medicines schedule • European Judgement on allowing internet sales of OTC medicines • Optometrists • Pre Hospital Emergency Care Council • Problems arising from interpretation of existing Regs in regard to administration and definition of hospital • amendments to Poisons Regs 	June 2005	Entire team	Regulations made	
1.8	<p>Assist Community Health in completion of amendments to Irish Medicines Board Act</p>	Dec 2005	Entire team	Act Passed	
2	<p>Liaise with International, National, Statutory and Representative Bodies in the development of policy in regard to medicinal products,</p>				

HLO	Div Obj.	Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to protect the health and safety of the public with regard to medicinal products, cosmetic products and poisons.			
4	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
	cosmetic products, and poisons				
2.1	Ongoing policy development in consultation with the Irish Medicines Board, the Irish Pharmaceutical Healthcare Association, the Pharmaceutical Society of Ireland and the Irish Cosmetics, Detergent and Allied Products Association	On-going	Entire team	Positive feedback from relevant parties. No gaps in policy emerging.	
2.2	Poisons Council to be reappointed for further term.	Dec 2005	Entire team	Council reappointed for a further term	
2.3	Consult Poisons Council regarding proposed amendment to Poisons Regulations	31.3.05	Entire team	Meeting held	
2.4	Examination of possible initiatives to promote the development of “orphan” medicinal products.	On-going	Entire team	Establishment of a forum for the examination of relevant issues.	
3	Assist with Commission to Enquire into Child Abuse – as required.				
3.1	Supply documentation and observations in relation to the Commission’s work as requested	On-going	Entire team	Timely response to enquiries from Commission	
4	To maintain appropriate arrangements and structures to protect the health and safety of the public with regard to medicinal products, cosmetic products and poisons.				
4.1	New Board of IMB to be appointed	Dec 2005	Entire team	Board appointed	
4.2	Advisory Committee on Human Medicines to be appointed Advisory Committee on Veterinary Medicines to be appointed	Dec 2005	Entire team	Committees appointed	

HLO	Div Obj.	Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to protect the health and safety of the public with regard to medicinal products, cosmetic products and poisons.				
4	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
4.3	Provide appropriate support to the Irish Medicines Board		Ongoing	Entire team	Regular meetings with the Board	
4.4	Commence discussions with IMB re the transfer of competent authority for cosmetics from Dept to IMB following feasibility report from IMB		Dec 2005	Entire team	Discussions commenced and progressed	
4.5	Agree proposals with HSE regarding EHOs functions in regard to enforcement of Cosmetics Regulations in retail outlets (seed funding provided to NEHB in 2005)		Dec 2005	Entire team	Proposals agreed with HSE	
Comments						

HLO	Div Obj.	Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to facilitate tobacco control measures to protect the health and safety of the public.				
4	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	To maintain appropriate arrangements and structures for the implementation of tobacco control policy and legislation					
1.1	Continue to provide appropriate support to the Office of Tobacco Control to facilitate its development. Research Institute for a Tobacco Free Society		On-going	G.ODufaigh K. Devine S. McEvoy	Regular meetings with the Office of Tobacco Control	
2	Drafting and making of new tobacco control regulations following commencement of Public Health (Tobacco) Acts 2002 and 2004. Initially this will be confined to sections of the Acts not impugned pending the outcome of the ongoing litigation.		On-going	G.ODufaigh K.Devine S. McEvoy		
2.1	Making of Commencement Orders and Regulations in conjunction with the Office of the AG - as required.		On-going	G.ODufaigh K. Devine S. McEvoy	Completion of Orders and Regulations	
2.2	Drafting and making of regulations to implement Commission Decision on the use of colour photographs or other illustrations as health warnings on tobacco products		On-going	G.ODufaigh K. Devine S. McEvoy	Completion of Orders and Regulations	
3	Continue to monitor the implementation of the Smoke-free workplaces measure introduced in March 2004.					
3.1	Ongoing contact with the relevant statutory authorities and the NGO sector.		On-going	G.ODufaigh K. Devine S. McEvoy	Contacts maintained.	
3.2	Participation in and servicing of the National Implementation Committee		On-going	G.ODufaigh K. Devine S. McEvoy	Meetings attended	

HLO	Div Obj.	Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to facilitate tobacco control measures to protect the health and safety of the public.				
4	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
3.3	Liaison with relevant regulatory and enforcement authorities		On-going	G.ODufaigh K. Devine S. McEvoy	Liaison maintained.	
4	Preparation of Defence by State in Personal Injury cases					
4.1	Liaison with State legal agencies		On-going	G.ODufaigh K. Devine S. McEvoy	Preparation of defence	
4.2	Retrieval and collation of relevant records since 1940		On-going	G.ODufaigh K. Devine S. McEvoy	Preparation of defence	
5	World Health Organisation Framework Convention on Tobacco Control					
5.1	Preparation for the Ratification by the Oireachtas of the World Health Organisation's Framework Convention on Tobacco Control			G.ODufaigh K. Devine S. McEvoy	Ratification of FCTC	
6	Prepare Defence against Tobacco Industry litigation					
6.1	Liaison with State legal agencies Servicing the legal challenge in the High Court to the Public Health (Tobacco) Acts 2002 and 2004 Attendance at regular Legal Consultations with Legal Team and international Expert Witnesses, attendance in Court"			G.ODufaigh K. Devine S. McEvoy	Defence prepared.	
7	Management of EU notification process under the Transparency Directives as issues arise					
7.1	Liaison with NSAI, AG's Office. EU Commission. Attendance at meetings.		On-going	G.ODufaigh K. Devine S. McEvoy	Completion of notification process	
Comments The ongoing litigation (both personal injuries and the tobacco industry litigation is a major drain on the Unit's resources. There are staffing problems (staff temporarily assigned for the Presidency have now been redeployed. In addition, there is ongoing international interest in the Smoke free workplace initiative and the positive response to it by the Irish people. A major report on tobacco and health policies commissioned by the EU						

HLO	Div Obj.	Insofar as resources allow, to ensure that an appropriate legal framework and relevant structures are in place to facilitate tobacco control measures to protect the health and safety of the public.				
4	3					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
identified this initiative as a model that could be used by other States. We are dealing with many requests to meet visiting delegations from other countries comprising elected representatives and public health officials. This is significant additional block of work for the Unit.						

HLO	Div Obj.	Insofar as resources allow, and in conjunction with other agencies, to ensure that an appropriate legal framework and relevant structures are in place to facilitate the protection of the health and safety of the public from those environmental factors which can adversely affect human health and to promote an awareness of these factors among statutory and non-statutory bodies and the general public and to formulate, with a view to implementation, a National Environmental Health Action Plan.				
4	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	To maintain appropriate arrangements and structures for the implementation of environmental health policy and legislation					
1.1	Providing appropriate support to the Institute of Public Health		On-going	B Murphy C Griffin É Gilvarry	Regular meetings with the Institute of Public Health	
2	Finalisation of the National Environmental Health Action Plan.					
2.1	Formulation of a proposal for Government involving use of specialist staff from HSE		December 2005	S McEvoy B Murphy C Griffin É Gilvarry N Murray H Hynes	Submission to and adoption by Government of the plan	
3	To fulfill the Department's role in relation to National Planning for Nuclear Emergencies					
3.1	Review the continued use of iodine tablets.		April '05	B Murphy C Griffin É Gilvarry	Decision reached	
3.2	Participate in the revision of the Department's sub-plan		Sept '05	B Murphy C Griffin É Gilvarry	Updated sub-plan	
4	Participate in the process at European Level concerning proposed amendment of Directive 86/609/EEC- re: experimental animals					
4.1	Attend relevant meetings		On-going	B Murphy C Griffin É Gilvarry	Attendance at meetings and presentation of Ireland's position effectively	

HLO	Div Obj.	Insofar as resources allow, and in conjunction with other agencies, to ensure that an appropriate legal framework and relevant structures are in place to facilitate the protection of the health and safety of the public from those environmental factors which can adversely affect human health and to promote an awareness of these factors among statutory and non-statutory bodies and the general public and to formulate, with a view to implementation, a National Environmental Health Action Plan.				
4	4					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
5	Compilation of Statistical Information under European Directive 86/609/EEC					
5.1	Collection and Collation of Statistical Returns for year ended 31 December 2004		Dec 2005	B Murphy C Griffin É Gilvarry N Murray H Hynes	Statistical Returns for 2004	
6	Review of European Communities (Medical Ionising Radiation Protection) Regulations 2002					
6.1	Service Medical Exposures Directive Advisory Group, Registration Sub – Group and Criteria of Acceptability Sub – Group.		On-going	B Murphy C Griffin É Gilvarry H Hynes	Any necessary amendments to Regulations. Completion of training and curriculum requirements for prescribers and practitioners. Good Practice Guidelines. Guidelines for Quality Assurance and Performance Criteria for Radiological and Nuclear Installations	
Comments The Unit also administers a licence system for persons conducting scientific research using live animals and also licences premises where scientific work is carried out. The possibility of transferring this block of work to the HSE will be explored but progress is unlikely during 2005 as the HSE is still in the start up phase.						

Part 1:

HLO	Div Obj.	To contribute to the development of food safety policy at EU and International level.			
5	5				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	To contribute to the development of food safety policy at EU and international level				
1.1	Attend meetings of EU and international bodies and ensure that Ireland's position on food safety issues is represented effectively e.g. <ul style="list-style-type: none"> • Working Group on Foodstuffs • Standing Committee on Food Chain & Animal Health <ul style="list-style-type: none"> ○ General Food Law ○ Toxicological Safety ○ GM Food & Feed and Environmental Risk 	On-going	J Regan D Byrne S McEvoy S Maguire M Burke B O'Meara	Presentation and articulation of the Irish/Department's position Satisfactory outcome of discussions insofar as Ireland's/ Department's policies and views are concerned	
1.2	Participate in Codex Committee meetings on: <ul style="list-style-type: none"> ○ Food Additives and Contaminants ○ Food Hygiene ○ General Principles ○ Food Labelling ○ Nutrition and Foods for Special Dietary Uses 	On-going	J Regan S Maguire	Satisfactory outcome of discussions insofar as Ireland's/ Department's policies and views are concerned	
2	To ensure Ireland's EU and international obligations in relation to food safety legislation are met				
2.1	Transposition of EU food safety legislation for which the Department is responsible	On-going	Entire Unit	Enactment of new legislation within prescribed time limits	
Comments Due to an AO/HEO vacancy which arose last September there are emerging problems in regard to transpositions.					

HLO	Div Obj.	To contribute to EU policy in regard to the regulation of medicines and cosmetic products			
5	6				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	To contribute to the development of policy in respect of medicinal products and cosmetic products at EU and international level		Entire team		
1.1	Attend meetings of EU and international bodies and ensure that Ireland's position on consumer safety issues in regard to pharmaceutical products and cosmetic products is represented	On-going	Entire team	Presentation and articulation of the Irish/Department position. Satisfactory outcome of discussions insofar as Ireland's/ Department's policies and views are concerned	
1.2	Attend meetings of the Pharmaceutical Committee and Standing Committee on Medicinal Products and servicing the Standing Committee on Medicinal Products	On-going	Entire team	Adoption of Opinions that are supported by Ireland	
1.3	Attend meetings of the Working Party on Cosmetic Products	On-going	Entire team	Adoption of Opinions that are supported by Ireland	
1.4	Attend meetings of the Standing Committee on Cosmetic Products.	On-going	Entire team	Adoption of Opinions that are supported by Ireland	
1.5	Progress the Proposal for a Regulation of the European Parliament and of the Council on medicinal products for paediatric use and amending Regulation (EEC) No 1768/92, Directive 2001/83/EC and Regulation (EC) No 726/2004	Ongoing	Entire team	Satisfactory outcome insofar as Ireland's policy is concerned	
1.6	Transpose Commission Directive on Good Clinical Practice for Clinical Trials	Ongoing	Entire team	Directive transposed	
Comments The impending retirement of the chief Pharmacist will give rise to difficulties.					

HLO	Div Obj.	To contribute to the development of tobacco control policy at EU and international level.			
5	7				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Implementation of EU Directive on the Manufacture, Presentation and Sale of Tobacco Products				
1.1	Implementation of S.I. 425 of 2003	On-going	G.ODufaigh K. Devine S. McEvoy	Implementation of Regulation	
1.2	Liaison with Office of Tobacco Control and relevant enforcement authorities	On-going	G.ODufaigh K. Devine S. McEvoy	Implementation of Regulation	
2	Implementation of EU Directive on Tobacco Advertising				
2.1	Implementation of Public Health (Tobacco) (Amendment) Act 2004	On-going	G.ODufaigh K. Devine S. McEvoy	Implementation	
3	EU Council recommendation on prevention of smoking and on initiatives to improve tobacco control				
3.1	Implementation of Public Health (Tobacco) (Amendment) Act 2004	On-going	G.ODufaigh K. Devine S. McEvoy	Implementation	
4	Implementation of Commission Decision on the use of colour photographs ... as health warnings				
4.1	Transposition of Decision into national law	For discussion with AG's	G.ODufaigh K. Devine S. McEvoy	Transposition achieved.	
Comments					

HLO	Div Obj.	To contribute to the development of Environmental Health Policy at EU and international level.			
5	8				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Influence the development of policy in these areas with a view to incorporating these developments in eventual Irish policy and legislation				
1.1	Participate in follow-up arising from the 4 th Ministerial Conference on Environment and Health, Budapest 2004 (WHO)	On-going	B Murphy S McEvoy C Griffin E Gilvarry N Murray H Hynes	Participation in follow-up meetings and provide data to WHO - as required.	
1.2	Participate in work on the European Environment and Health Strategy (EU)	On-going	B Murphy S McEvoy C Griffin E Gilvarry N Murray H Hynes	Participation in Consultative Group Meetings	
1.3	Participate in the follow-up to the EU action plan for the period 2004-2010.	On-going	B Murphy S McEvoy C Griffin E Gilvarry N Murray H Hynes	Participation in Consultative Group Meetings	
1.4	Co-ordination of Ireland's position (internal and interdepartmental) on documents relating to the European Environment and Health Strategy/Action Plan.	On-going	B Murphy S McEvoy C Griffin E Gilvarry N Murray H Hynes	Meetings and co-ordination of observations / briefing on relevant documents	
Comments					

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: Health Promotion Unit

Division Head: Chris Fitzgerald, Principal Officer

MAC Area: Child Care, Public Health and Health Promotion

MAC Member: Noel Usher, Director

SS HLO 1: *Better Health for Everyone* To provide a policy and legal framework for the protection and promotion of health and well being which gives active support to improving quality of life, targets inequalities in health and advances inter-sectoral working.

Div Obj 1:

Develop the infrastructural requirements necessary for the implementation of the relevant aspects of the Health Strategy – Quality and Fairness and the Health Promotion Strategy 2000 – 2005, particularly in the context of the Health Reform Programme and the restructuring of the Department.

Div Obj 2:

Intensify the promotion of health and well being by the continued implementation of the aims and objectives contained in the Health Promotion Strategy 2000-2005.

Div Obj 3:

Finalise the implementation of Cardiovascular Health Strategy having regard to the Health Services Reform Programme.

SS HLO 4: *High Performance*

To put in place organisational structures, legal and accountability frameworks and management capacity (systems and people) to ensure that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence and monitored and evaluated on the basis of this evidence.

Div Obj 1:

Provide access to appropriate, comprehensive, high quality information by putting in place a quality Information Project system based on best available evidence.

SS HLO 5:

To support the delivery of the wider programme for Government (outside of the delivery of health and personal services) and to ensure Ireland's commitments at EU and International level are met.

Div.Obj 1:

Strengthen and maintain European and International Links in relation to HPU activities

Part 1:

HLO 1	Div Obj. 1	Develop the infra-structural requirements necessary for the implementation of the Health Strategy <i>Quality and Fairness</i> and the Health Promotion Strategy 2000-2005, particularly in the context of the Health Reform Programme and the restructuring of the Department				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1	Contribute as necessary to the restructuring of the Department and pursue devolution of certain executive functions under Reform Programme		Dec 2005	C. Fitzgerald B. O'Neill	Executive functions devolved	Quality and Fairness
2	2.1 Review of Health Promotion Strategy		Feb. 2005	B. O'Neill S McGovern	Launch the Review of the Health Promotion Strategy	Health Promotion Strategy 2000-2004
	2.2 Launch the Review of the Health Promotion Strategy			B. O'Neill S. McGovern	Published Report	
3	Training Commence National Review of existing Health Promotion Training at all levels with a view to developing proposals for future needs		Sept 2005	B. O'Neill Oibhe O'Donoghue	Review, completed and published	Health Promotion Strategy 2000-2004
4	Partnership Develop guidelines and models of partnership building		October	B O'Neill Oibhe O'Donoghue	Guidelines and models agreed	Health Promotion Strategy 2000-2004
5	Prepare groundwork for Phase 3 of National Health and Lifestyle Surveys 5.1 E.U. Tender for SLAN contract		June	C.Fitzgerald D. Mahony B. O'Neill	Contract Awarded	Health Promotion Strategy 2000-2004
	5.2 Establish Steering Committee (SLAN/HBSC)		August	C.Fitzgerald D. Mahony B. O'Neill	Committee Established	
	5.3 Establish Ethics Committee		August	C.Fitzgerald D. Mahony B. O'Neill	Committee Established	

HLO 1	Div Obj.	Divisional Objective 2: Intensify the promotion of health and well being by the continued implementation of the aims and objectives contained in the Health Promotion Strategy 2000-2005, particularly in the context of the Health Reform Programme and the restructuring of the Department.			
X	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Support the development of Health Promotion Initiatives in Settings				H P Strategy
	1.1Hospitals				
	1.1.1 Provide support to the Health Promoting Hospitals Network	Ongoing	S McGovern	Support provided	
	1.1.2 Support organisation of International HPH Conference	May 2005	S McGovern	Successful conference	
	1.2Workplace				
	1.2.1 Review appointment of National Co-ordinator and establishment of all island workplace health promotion network	June 2004	S McGovern F Keegan E Ryan	Review completed	
	1.2.2 Liaise with regional workplace health coordinators to establish regional links and pilot projects.	Ongoing	S McGovern F Keegan E Ryan	Pilot projects commenced	
	1.2.3 Liase with regional workplace health co-ordinators to establish regional links and pilot projects	Ongoing	Ditto	Pilot projects commenced	
	1.3 Schools				
	Work in partnership with the Department of Education and Science and HSE to ensure the implementation of SPHE at both primary and post primary levels.	On-Going	B. O'Neill O. McGovern	Time tabled SPHE in all schools.	Review of National Health Promotion Strategy 2005

HLO 1	Div Obj.	Divisional Objective 2: Intensify the promotion of health and well being by the continued implementation of the aims and objectives contained in the Health Promotion Strategy 2000-2005, particularly in the context of the Health Reform Programme and the restructuring of the Department.				
X	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
1.4	1.3.1 Continue to work with the SPHE Management Committee as partners in the implementation of SPHE Junior Cycle		On-going		Time tabled SPHE in all schools.	
	1.3.2 Continue to liase with the Primary Curriculum Support Programme to facilitate and develop partnership between health and education in support SPHE at primary level		On-going		SPHE Primary supported at school level through a partnership between health and education	
	1.3.3 Finalise the SPHE Curriculum for SPHE Senior Cycle as part of the NCCA Senior Cycle Committee		June 2005		Completion of curriculum for senior cycle	
	1.3.4 Develop a plan for the Health Promoting School in Ireland in partnership with the Department of Education and Science and other relevant partners		December 2005		Development of model	
	Colleges Support the establishment of an Irish Network of Health Promoting Colleges in partnership with relevant stakeholders			B. O'Neill O. McGovern		Review of HP Strategy
	1.4.1 Review options for developing an Irish Network		July 2005	Oilbhe O'Donoghue	Review Completed and next steps identified	

HLO 1	Div Obj.	Divisional Objective 2: Intensify the promotion of health and well being by the continued implementation of the aims and objectives contained in the Health Promotion Strategy 2000-2005, particularly in the context of the Health Reform Programme and the restructuring of the Department.			
X	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
2	1.5 Community Support the development and implementation of community-based approaches to Health Promotion in conjunction with HSE	Ongoing	S McGovern D Mahony	Community based approaches developed and implemented	HP Strategy 2000-2005
	1.5.1 Continue support for the Healthy Communities pilot projects and examine possibility of expansion of project. Evaluation of projects and produce final report.	December	S. McGovern D. Mahony	Evaluation and final report produced	
	1.5.2 Evaluation of Community Development initiatives (2002-2004) in Health Board areas. Production of final report and recommendations to inform future initiatives	Sept 2005	S. McGovern D. Mahony	Evaluation completed and report produced	
	Support the development of topic based health promotion initiatives 2.1 Breastfeeding Measures to promote and support breastfeeding will be strengthened				Q & F 9
	2.1.1 Finalise, launch and disseminate strategic action plan for Breastfeeding	April	M.Fallon/ D.Mahony	Publication and dissemination of action plan	
	2.1.2 Support the expansion of the Baby Friendly Hospital Initiative	Ongoing	M.Fallon/ D.Mahony	Increased membership of BFHI	

HLO 1	Div Obj.	Divisional Objective 2: Intensify the promotion of health and well being by the continued implementation of the aims and objectives contained in the Health Promotion Strategy 2000-2005, particularly in the context of the Health Reform Programme and the restructuring of the Department.			
X	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
	2.1.3 Plan and support 2 nd National Breastfeeding Conference	May	M.Fallon/ D.Mahony	Successful conference to launch Strategic Action Plan for Breastfeeding	
	2.1.4 Develop National Breastfeeding Awareness Campaign in partnership with HSE	October	M.Fallon/ D.Mahony	Campaign developed	
	2.1.5 Produce and disseminate materials to support new maternity protection legislation	February	M.Fallon/ D.Mahony	Materials produced and disseminated	
	2.1.6 Work in partnership to develop policy on Infants and Nutrition in refugee accommodation and reception centres	Ongoing	M.Fallon/ D.Mahony	Policy developed	
	2.1.7 Develop information materials to support the promotion of breastfeeding	Ongoing	M.Fallon/ D.Mahony	Materials developed and disseminated	
	2.2 Mental Health Promote positive mental health and contribute to a reduction in the percentage of the population experiencing poor mental health				H.P Strategy 2000-2005
	2.2.1 Continue to support NGOs and HSE in promotion of positive mental health initiatives	Ongoing	S. McGovern D. Mahony	Continued support	
	2.2.2 Support NUI Galway Pilot Projects on Mental Health	Ongoing	S. McGovern D. Mahony	Continued support	

HLO 1	Div Obj.	Divisional Objective 2: Intensify the promotion of health and well being by the continued implementation of the aims and objectives contained in the Health Promotion Strategy 2000-2005, particularly in the context of the Health Reform Programme and the restructuring of the Department.				
X	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	2.2.3 Draft final submission of Sub-Group on Mental Health Promotion to the Expert Group on Mental Health		February	S. McGovern Biddy O'Neill D. Mahony	Submission finalised and presented	
	2.2.4 Plan and support International Conference on Mental Health Promotion		April	S.McGovern/ D. Mahony B O'Neill	Successful conference organised	
	2.2.5 Develop mental health promotion awareness campaign in partnership with HSE		Ongoing	S. McGovern Biddy O'Neill D. Mahony	Campaign developed	
	2.3 Accident Prevention					
	2.3.1Continue to liaise with the NSC Fire Safety committee		Ongoing	S.McGovern/ D.Mahony	Continued liaison	H.P Strategy 2000- 2005
	2.3.2 Continue to liaise with the National Accident Prevention Committee		Ongoing	S.McGovern/ D.Mahony	Continued liaison	
	2.3.3 Develop National falls prevention strategy in conjunction with the National Council on Ageing and Older People		Ongoing	S.McGovern/ D.Mahony	Strategy development process underway	

HLO 1	Div Obj.	Divisional Objective 2: Intensify the promotion of health and well being by the continued implementation of the aims and objectives contained in the Health Promotion Strategy 2000-2005, particularly in the context of the Health Reform Programme and the restructuring of the Department.			
X	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
	2.4 Drugs Misuse				
	2.4.1 Continue to implement the Education & Prevention Recommendations of the National Drugs Strategy 2001-2008	Ongoing	S. McGovern D. Mahony	Implementation of Drug Prevention Recommendations	HP Strategy 2000-2005 NDS 2001-2008
	2.4.2 Continue to develop and implement the National Drugs Awareness Campaign	October	S. McGovern/ D. Mahony	Campaign developed	NDS 2001-2008
	2.4.3 Continue to liaise with the NACD prevention sub-committee on relevant research	Ongoing	S. McGovern D. Mahony	Continued liaison	NDS 2001-2008
	2.5 Alcohol				
	2.5.1 Prepare and submit memorandum to Government for approval of 2 nd STFA report	Feb 05	S McGovern K Lombard K Cashman	Approval obtained	HP Strategy Sustaining Progress 2.10 Q & F, A 5
	2.5.2 Commence implementation of the STFA recommendations	June 05	K Lombard K Cashman	Implementation commenced	HP Strategy Sustaining Progress 2.10 Q & F, A5
	2.5.3 Process legislation on alcohol advertising	Mid 2005	S McGovern K Lombard K Cashman	Legislation processed	Q & F, A 5

HLO 1	Div Obj.	Divisional Objective 2: Intensify the promotion of health and well being by the continued implementation of the aims and objectives contained in the Health Promotion Strategy 2000-2005, particularly in the context of the Health Reform Programme and the restructuring of the Department.			
X	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
	2.5.4 Contribute to the development of EU and WHO Policy on alcohol	Ongoing	S McGovern K Lombard A Hope	Contribution made	
	2.5.5 Commence Process of developing and drafting new alcohol action plan, including consultation with key groups.	End 2005	S McGovern A Hope K Lombard	Process initiated	Sustaining Progress Q & F, A5
	2.5.6 Co-ordinate and support research projects: CLAN, ICGP, A+E, Alc and Pregnancy Study, Drinking Patterns 2004, EU ELSA, Public Attitude to Alcohol Policy analysis	Ongoing	S McGovern K Lombard K Cashman	Support provided – research/studies finalised	HP Strategy
	2.5.7 Monitor and evaluate Responsible Serving of Alcohol programme	Ongoing	K Lombard K Cashman	Evaluation conducted	HP Strategy
	2.5.8 Continue to lead on Special Initiative on Alcohol (Sustaining Progress)	Ongoing	K Lombard K Cashman		Sustaining Progress
	2.5.9 Finalise discussions on proposed new Code of Practice on alcohol advertising	March 05	C. Fitzgerald S McGovern	New Code in place	Q & F, A5
	2.6Cancer 2.6.1 Support the development of cancer prevention programmes with the Irish Cancer Society	Ongoing	F Keegan / E Ryan	Ongoing contact with ICS	

HLO 1	Div Obj.	Divisional Objective 2: Intensify the promotion of health and well being by the continued implementation of the aims and objectives contained in the Health Promotion Strategy 2000-2005, particularly in the context of the Health Reform Programme and the restructuring of the Department.				
X	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	2.6.2 Finalise submission on Health Promotion aspects of the second National Cancer Strategy		April	B. O'Neill	Submission finalised/submitted	
	2.7Sexual Health Promote sexual health in partnership with relevant partners, including NGO's the Crisis Pregnancy Agency and HSE.		Ongoing	B. O'Neill O. McGovern	Continued work in this area	
	2.7.1 Ongoing development and dissemination of sexual health awareness programmes		On-going	O. McGovern	Sexual Health advertising maintained; updated materials developed and disseminated	
	2.7.2 Continue to support the development of An Irish Survey of Sexual Knowledge Attitudes and Behaviour		Sept 05	O. McGovern	Participation on research steering and management groups; Publication of 4 reports.	
	2.7.3 Initiate discussions with CPA and HSE on the development of Sexual Health promotion Strategy		April	B. O'Neill	Discussions initiated	
	2.8 HIV/AIDS Support the implementation of the Education & Prevention Recommendations of the National Aids Strategy 2000.		On-going	B. O'Neill O. McGovern		
	2.8.1 Review recommendations of strategy.		Dec 2005	B. O'Neill O. McGovern	Review Completed	

HLO 1	Div Obj.	Divisional Objective 2: Intensify the promotion of health and well being by the continued implementation of the aims and objectives contained in the Health Promotion Strategy 2000-2005, particularly in the context of the Health Reform Programme and the restructuring of the Department.				
X	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	2.8.2 Develop revised work plan for the Education and Prevention Sub-Committee.		Dec 2005	B. O'Neill O. McGovern	Revised work plan developed and implementation commenced	
	2.9 ANTI SMOKING					Q & F
	2.9.1 Continue anti-smoking campaigns in partnership with HSE		Ongoing	B Dowling C Lyons J Doyle	Effectiveness of campaign demonstrated	H. P. Strategy 2000-2005
	2.9.2 Identify and target groups for future anti smoking campaigns		Dec 2005	B Dowling C Lyons J Doyle	Target groups identified	Building Healthier Hearts
	2.9.3 Guidelines finalised for Smoking Cessation training		Dec 2005	B O'Neill B Dowling C Lyons J Doyle	Training modules finalised and adopted at national level.	
	2.9.4 Establish a national data set to evaluate the effectiveness of smoking cessation services		Dec 2005	B Dowling B O'Neill C Lyons J Doyle	Data set finalised and implemented at national level.	
	2.9.5 Evaluation of Quitline clients after one year.		July 2005	B Dowling C Lyons J Doyle	Latest figures on Quitline client quit rates published	
	2.9.6 Consider initial roll out of SEHB smoking module of SPHE		June 2005	B Dowling C Lyons J Doyle	Revised SPHE implemented	
	2.9.7 Service regional programmes, National Smokers Quitline and Smoking Cessation Action Plan Steering Group		On-going	B Dowling C Lyons J Doyle	Support provided	
2.10 EATING WELL/OBESITY						
	2.10.1 Obesity Task Force to finalise policy document for submission to the Tánaiste/Governemnt		March 2005	C Fitzgerald O O'Donoghue	Strategy Document completed	Quality and Fairness

HLO 1	Div Obj.	Divisional Objective 2: Intensify the promotion of health and well being by the continued implementation of the aims and objectives contained in the Health Promotion Strategy 2000-2005, particularly in the context of the Health Reform Programme and the restructuring of the Department.			
X	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
	2.10.2 New National Nutrition Strategy to be completed.	June 2005	B Dowling U O'Dwyer	Strategy document launched.	H.P Strategy 2000- 2005
	2.10.3 Minimum Nutrition Guidelines and assessment tool for patients in Health Care Facilities.	December 2005	B Dowling C Lyons U O'Dwyer Joe Doyle	Guidelines launched and assessment tool developed and adopted at national level	Building Healthier Hearts
	2.10.4 Based on recommendations of NTF on Obesity - review National Healthy Eating campaign for 2005	April 2005	C Lyons U O'Dwyer Joe Doyle B Dowling		
	2.11 PHYSICAL ACTIVITY/OBESITY				
	2.11.1 Consider the development of physical activity guidelines based on the recommendations of the Obesity Task Force	April 2005	B Dowling C Lyons J Doyle	Guidelines developed.	
	2.11.2 Plan, launch and evaluate national physical activity campaign in partnership with HSE	June 2005	B Dowling C Lyons J Doyle	Campaign launched and evaluation completed	
	2.11.3 Have Modules signed off & ready to commence training of co-ordinators for the National GP Exercise Referral programme	Sept 2005	B Dowling C Lyons J Doyle	Commence roll out of GP Exercise programme nationally	
3	Populations 3.1 Older People				HP Strategy 2000- 2005
	3.1.1 Facilitate the implementation of policy document "Adding life to years... years to life" in association with National Council for Older People, health boards and voluntary organisations	Ongoing	S.McGovern/ D.Mahony	Implementation of relevant health promotion recommendations	HP Strategy for Older People

HLO 1	Div Obj.	Divisional Objective 2: Intensify the promotion of health and well being by the continued implementation of the aims and objectives contained in the Health Promotion Strategy 2000-2005, particularly in the context of the Health Reform Programme and the restructuring of the Department.				
X	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	3.1.2 Continue to liaise and support the National Council for Ageing and Older People on National Healthy Ageing Programme		Ongoing	S.McGovern/ D.Mahony	Continued liaison and support	
	3.1.3 Continue to work in partnership with all stakeholders in health for older people		Ongoing	S.McGovern/ D.Mahony	Continuation of partnership work	
	3.1.4 Continue to support the implementation of the National Residential Care Initiative		Ongoing	S.McGovern/ D.Mahony	Continued support	
	3.2 Traveller Health 3.2.1Complete the review of the Traveller Being Well Programme		June 2004	S McGovern F Keegan/E Ryan	Review completed	Action 20 Q & F
	3.2.2 Develop process for implementation of review		Ongoing	Ditto	Process developed	
	3.3 Men’s Health 3.3.1Continue preparation for development of Men’s Health Policy		Ongoing	S McGovern B O’Neill	Process commenced	Action 15 Q & F HPS 5.2.4
	3.3.2 Provide support to Men’s Health National Steering Committee		Ongoing	F Keegan/ E Ryan	Support provided	
	3.3.3 Initiate, support and complete consultation process		Jan-June 2005	Ditto	Consultation completed and report published	

HLO 1	Div Obj.	Divisional Objective 2: Intensify the promotion of health and well being by the continued implementation of the aims and objectives contained in the Health Promotion Strategy 2000-2005, particularly in the context of the Health Reform Programme and the restructuring of the Department.				
X	2					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	3.3.4 Support Men’s Health Week		June 2005	Ditto	Successful launch of activities	
	3.3.5 Draft results of research and consultation process on men’s health with a view to early preparation of strategy		December 2005	Ditto	Draft strategy developed	
	3.4 Children and Young People 3.4.1 Review young people’s health promotion initiatives, including Youth as a Resource		April 2005	B. O’Neill Olive McGovern	Review commenced	
	3.5Youth Sector: Support the implementation of National Youth Health Programme in partnership with the Department of Education and Science and the National Youth Health Programme		On-going	B. O’Neill Olive McGovern		
	3.5.1 Support the implementation of the Strategic Action Plan 2005-2007		On-going	B. O’Neill O. McGovern	Implementation of new work programme	
Comments: It is very difficult, at this stage, to identify the extent of engagement required with HSE on the devolvment of executive functions. The steps / actions required will be revised as this becomes more evident.						

HLO	Div Obj.	Finalise the implementation of Cardiovascular Health Strategy having regard to the Health Services Reform Programme.			
1	3				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Implement Cardiovascular Strategy 1.1 Provide management, medical and administrative support for the various implementation groups. 1.2 Agree and monitor regional developments, funding and expenditure 1.3 Prepare 3 rd / Final Progress Report on CVD Strategy 1.4 Support and evaluate health information and quality initiatives such as CHAIR, Heartwatch etc 1.5 Agree structures, staff and resources to implement a comprehensive cardiovascular information system 1.6 Agree, disseminate and plan the implementation of acute coronary syndrome and heart failure and electrophysiology guidelines, in conjunction with RCSI and the ICS	Ongoing Ongoing Oct 2005 April ongoing ongoing	B Dowling P Henshaw M Kinsella E. Shelly B Dowling P Henshaw M Kinsella B Dowling P Henshaw M Kinsella E. Shelly B Dowling P Henshaw M Kinsella E Shelley P Henshaw M Kinsella B Dowling E Shelley P Henshaw B Dowling	Progress on implementation of recommendations nationally Report published Nov 2005 Report completed Design brief completed and progress on implementation of CHIS Put structures in place including a national committee to disseminate guidelines as well as a plan for their implementation. nationally	CVD Strategy
2	Support the Task Force on Sudden Cardiac Death	May 2005	E Shelley B Dowling P Henshaw M Kinsella	Report completed	

HLO	Div Obj.	Finalise the implementation of Cardiovascular Health Strategy having regard to the Health Services Reform Programme.			
1	3				
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs

HLO 4	Div Obj.	To put in place organisational structures, legal and accountability frameworks and management capacity (systems and people) to ensure that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence and monitored and evaluated on the basis of this evidence.			
X	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	1.1. Maintain and develop provision of health promotion literature in partnership with HSE	Ongoing	K Lombard D McCann	Literature provided	HP Strategy
	1.2 Strengthen Editorial Group to streamline health promotion publications and facilitate early devolution to HSE	Ongoing	S McGovern K Lombard D McCann	Editorial Group functioning effectively	Q & F
	1.3 Manage storage and distribution contract while making arrangements for transition of function to HSE	Sept 2005	S McGovern K Lombard D McCann	Arrangements in place for transition of contract to agency	HP Strategy
2	Continue to provide support for improving literacy in the general population				
	2.1 Continue to liaise with NALA on health literacy projects	Ongoing	S McGovern K Lombard	Continued support Projects developed and implemented	HP Strategy
	2.2 Implement aspects of Official languages Act		K Lombard	Relevant aspects implemented	
3	Maintain HPU Website	Ongoing	F Keegan E Ryan		
	3.1 Continue maintenance and further development of Website	Ongoing	F Keegan E Ryan	Website maintained and improved	

HLO 4	Div Obj.	To put in place organisational structures, legal and accountability frameworks and management capacity (systems and people) to ensure that health and personal social services are planned and delivered efficiently and effectively on the basis of best available evidence and monitored and evaluated on the basis of this evidence.				
X	1					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
	3.2 Support in the development of National Health Portal		ongoing		Support provided	

HLO 5	Div Obj.	Strengthen and maintain European and international links and ensure that Ireland's commitments at European Union and international level are met.			
X	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1	Develop and implement EU pilot project to support and promote breastfeeding among disadvantaged women	Ongoing	M.Fallon/ D.Mahony	Project successfully implemented	
2	2.1 Continue input to various European and international bodies such as WHO, IUHPE, Euro Healthnet, ENWHP, EU Public Health Programme	Ongoing	Staff as appropriate	Input provided	HP Strategy
3	Develop a more structured arrangement for ongoing co-operation in the area of North/South development	Ongoing	S McGovern B O'Neill F Keegan E Ryan	Structure developed	
Comments					

Part 2: developing the Capacity of the Division

Objective	Output	Target Completion Date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	Completed Role Profile Forms	31/01/05	All staff
	Personal Training and Developments returned	31/01/05	All staff
Conduct first interim review	Completed review form, modified role profile form	End June	All staff
Conduct second interim review	Completed review form, modified role profile form	End Oct	All staff
Conduct Annual Performance and Development Review	Review conducted and form completed	31/12/05	All staff
Manage quality of work of division	Enhanced quality of work output. Better internal communication	Monthly	PO responsible, all staff involved
	Adopt Risk Management procedures as appropriate	Ongoing	
Improved records management	Procedures reviewed and strengthened if necessary	End June	All staff
Improved Customer Service	Provisions of new Customer Action Plan implemented	Ongoing	All staff
	Improved provisions of services through Irish		

Department of Health and Children
Business Plan 2005

Division Name: National Children's Office
Division Head: Elizabeth Canavan, Mary
Golden/Marie Kennedy, Sinead
Hanafin, and Anne O'Donnell
MAC Member Area: National Children's Office
MAC Member: Frances Spillane, Director

Divisional Objectives:

NCOSS HLO 1: To continue to develop initiatives to achieve the first goal of the National Children's Strategy: *Children Will have a Voice In Matters Which Affect Them*

Div Obj 1: Promote the work, publications and outputs of the NCO

Div Obj 2: Maintain and expand strategies for consultation with, and participation by children

NCOSS HLO 2: To undertake research on children's issues and promote the collection of reliable information to inform decision-making and improve evaluation in order to achieve the second goal of the National Children's Strategy that *Children's Lives Will be Better Understood*.

Div Obj 3: To establish the National Longitudinal Study of Children in Ireland

Div Obj 4: To build capacity around children's research and contribute to the national and international research agenda

Div Obj 5: To undertake and disseminate research around children's lives

Div Obj 6: To support the Department of Foreign Affairs in ensuring Ireland meets its international obligations in the children's policy area.

NCOSS HLO 3: To improve co-ordination of supports and services to children and to oversee the implementation of the National Children's Strategy and in particular the third goal of the Strategy: *Children Will Receive Quality Supports and Services to Promote All Aspects of Their Development*.

Div Obj 7: To improve co-ordination of objectives, services and related actions under the third goal of the National Children's Strategy and improve co-operation at local level in relation to services for children.

Div Obj 8: To co-ordinate the priority issues identified by the Cabinet Committee on Children.

Div Obj 9: To monitor Progress on all actions under the National Children's Strategy.

NCOSS HLO 4: To develop an overview of public policy in relation to children in order to identify gaps and recommend appropriate action to address them.

Div Obj 10: Monitor public policy which has implications for children to assess its compatibility with the underlying principles of the National Children's Strategy; identify/tackle new issues as they emerge.

Div Obj 11: To develop an overview of public policy in relation to children in order to identify gaps to recommend appropriate action to address them.

NCO HLO	Div Obj.	Promote the work, publications and outputs of the NCO			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
1.1	Draft new Communications Strategy for 2005-2006	Early February	AOD	Strategy circulated to staff /Minister	
1.2	Draft events and publications schedule 2005	January	AOD	Events and publications schedule delivered.	
1.3	Provide media, publicity and speech-writing support and advice to Minister Keep up to date on topical issues and brief Minister as appropriate	All year	AOD/ IM/ DD and other staff of National Children's Office All Teams	Successful media and publicity support provided to Minister New news clipping service sourced	
1.4	Redesign and Maintain NCO website	June All Year	AOD/ DD and All Teams	Website Redesigned Information comprehensive and up-to-date. Revised, child/youth friendly site	
1.5	Promote the work and profile of the NCO.	All year	AOD/ IM/ DD/ TMcG	Relevant press materials prepared. Information stand provided at exhibitions/conferences Attendance at conferences and seminars (including young scientists and young social innovators) Awareness of NCS and NCO promoted	
1.6	Manage the editing and production of all NCO publications.	March April May All year All year	AOD/All POs AOD/IM AOD/ IM	Annual Report; 2005 leaflet; Annual Magazine for Children/ Children's leaflet; Publications advice and support;	

NCO HLO	Div Obj.	Promote the work, publications and outputs of the NCO			
1	1				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
			DD/TMcG	Print and dissemination	
1.9	The development of NCO child protection and good practice guidelines	February 2005	AOD/IM	Guidelines finalised	
1.10	Organise seminars as required <ul style="list-style-type: none"> Joined up Government for Children Services Public, private and voluntary sectors <i>You Need Young People</i> 	Nov 2005 Sept 2005	All Teams AOD/ IM/ DD/ TMcG/ All POs	Policy makers provided with clear understanding of the value of participation by children and young people.	
Comments: Critical success factors: <ul style="list-style-type: none"> Deadlines met by those writing policy documents or supplying material for information products. 					

NCO HLO	Div Obj.	Maintain and expand strategies for consultation with, and participation by children			
1	2				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
2.1	Guardian Ad Litem <ul style="list-style-type: none"> Prepare Report for Minister based on Capita and submissions received Undertake actions arising Outcome presented to Minister and Cabinet Committee as appropriate 	February 2005 March-Sept 2005 By end 2005	EC/PM/ED EC/PM/ED EC/PM/ED	Report prepared and submitted Further project work commenced Conclusions reached and presented for consideration	
2.2	Publication and of guidelines on participation by children and young people developed with the CRA and NYCI.	April	AOD/ IM/ DD AOD/IM DD/ TMcG	Launch of guidelines. Guidelines available for broad circulation	
2.3	Support the development of Comhairle na nÓg Structures as appropriate <ul style="list-style-type: none"> Make proposals for the future development of Comhairle na nÓg, based on review by consultant Work with CDBs on participation by children and young people through Comhairle na nÓg 	March /April All year	Management Team AOD/IM/ MG	Proposals for the enhancement of the role and activity of Comhairle na nÓg. Continued improvements in opportunities for children to participate in local issues.	
2.4	Oversee the organisation / outcomes of Dáil na nÓg <ul style="list-style-type: none"> Manage contract for Dáil na nÓg 2005 (including chairing and administration of Dail Steering Committee) 	Ongoing	AOD/IM /DD	Plan developed for Dáil na nÓg 2005 Dáil successfully held on 19 March	

NC OH LO	Div Obj.	Maintain and expand strategies for consultation with, and participation by children (continued)				
1	2					
Ref	Steps / Actions		Date	Person(s) responsib le	KPIs / Outputs	XRef
2.5	Oversee Dáil na bPáistí processes as required <ul style="list-style-type: none">• YES meeting with Minister for Education & Science• Review future of Dáil na bPáistí, based on evaluation		January March/April	Managem ent Team	Outcomes communicated to Minister for E & S Decision on future of Dáil na bPáistí adopted.	
2.6	Chair, co-ordinate and administer the work of the Student Council Working Group.		Up to June 2005 March - May All year June	AOD/IM / DD AOD/IM / DD/TMc G DD/ AOD/IM	Launch of research and support pack. Management of website. Final report to Minister.	
2.7	Examine proposal for CDU development of CSPE module on giving young people a voice		February 2005 All year	AOD/IM	Evaluate proposal Undertake follow-up as required	
2.8	Devise work-plan and manage NCO Children and Young People’s Forum (CYPF) <ul style="list-style-type: none">• Agree purpose of Forum• Hold 4 meetings in 2005		All year	AOD/AG / IM/ Other staff as required.	NCO CYPF successfully functioning.	
2.9	Co-operate with Family Support Agency in establishing: <ul style="list-style-type: none">• National Participation Network• Ireland/UK Participation Network		Post publication of Participation Guidelines	AOD/IM / DD/TMc G	Networks established	

Comments:

Critical success factors:

- Political, departmental and local authority support for the future development of the Comhairle na nOg structure and Dail na bPaisti
- Time and resources for development of Student Council Support Pack;
- Resources for development of CSPE module

NCO HLO	Div Obj.	Establish the National Longitudinal Study of Children in Ireland			
2	3				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
3.1	Chair evaluation committee <ul style="list-style-type: none"> Evaluation of proposals and negotiation with bidders Evaluation of proposals and negotiation with bidders Contract development and award 	Jan – Jun 2005 Jan – Jun 2005 May - Jul 2005	FS/SH/AM B/MG	Agreement reached on proposal for carrying out NLS Agreement reached on proposal for carrying out NLS Contract awarded	
3.2	Put in place arrangements for, and oversee, governance of the NLS contract including appointment of contract manager	Jun 2005 and On-going	FS/SH/AM B/MG/ other (to be identified)	Governance of study satisfactory	
3.3	Put in place arrangements for, and oversee, structure for ethics approval for the Study	Dec 2005	SH/AMB	Ethics Structure Satisfactory	
Comments <i>Critical success factors</i> <ul style="list-style-type: none"> Availability of international experts and other necessary resources including contract manager post Co-operation of all relevant Departments, agencies and other stakeholders No unforeseen difficulties 					

NCOH LO	Div Obj.	To build capacity around children's research and contribute to the national and international research agenda			
2	4				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
4.1	<p>To ensure the successful continuation of the National Children's Strategy Research Scholarship Scheme by:</p> <ul style="list-style-type: none"> On-going evaluation of existing scholarships; and Advertising for, evaluating and awarding research scholarships for the 2005/2006 Programme. 	<p>On-going</p> <p>July 2005</p>	<p>AMB/SR</p> <p>SH/AMB/SR</p>	<p>Good governance of Scholarship Programme</p> <p>Scholarships for the 2005/06 Programme evaluated and awarded</p>	
4.2	<p>To ensure the successful continuation of the National Children's Office Research Placement Scheme by:</p> <ul style="list-style-type: none"> On-going evaluation of existing placements; and Advertising for, evaluating and awarding research placements for the 2005/2006 Programme. 	<p>On-going</p> <p>July 2005</p>	<p>AMB/SR</p> <p>SH/AMB/SR</p>	<p>Good governance of Placement Programme</p> <p>Placements for the 2005/06 Programme evaluated and awarded</p>	
4.3	<p>To ensure the successful continuation of the National Children's Office Research Programme by:</p> <ul style="list-style-type: none"> On-going evaluation of existing projects; and Advertising for, evaluating and awarding research projects for the 2005/2006 Programme. 	<p>On-going</p> <p>July 2005</p>	<p>AMB/SR</p> <p>SH/AMB/SR</p>	<p>Good governance of Research Programme</p> <p>Proposals for the 2005/06 Programme evaluated and awarded</p>	
4.4	<p>To ensure the successful continuation of the ESAT/ BT Young Scientist Special Award and sponsorship of the Primary Science Fair</p>	<p>Sept 2005</p>	<p>SH/AMB</p>	<p>Sponsorship for Primary Science Fair and Special award in place.</p>	

NCOH LO	Div Obj.	To build capacity around children's research and contribute to the national and international research agenda			
2	4				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
4.5	<p>To contribute to the national and international research agenda through participating on, or contributing to the work of the following:</p> <ul style="list-style-type: none"> National Children's Office Research Development Advisory Group; Programme of Action for Children Child Health Research Forum; Centre for Early Childhood Development and Education; Lifestart Research Study; ChildONEurope Network; Family Support Agency; IPPA; Social Research Association; and Combat Poverty Agency. 	<p>On-going</p> <p>On-going</p> <p>On-going</p> <p>On-going</p> <p>On-going</p> <p>On-going</p> <p>On-going</p> <p>On-going</p>	<p>SH/AMB</p> <p>FS/SH/AMB/RD</p> <p>SH/AMB</p> <p>SH</p> <p>AMB</p> <p>SH/AMB</p> <p>SH/AMB</p> <p>SH/AMB</p> <p>SH/AMB</p>	<p>Research profile of the Children's Office maintained and developed</p> <p>Successful contribution to the national and international research agenda</p> <p>Assistance provided to other organisations in commissioning research</p>	
Comments: Critical success factors: <ul style="list-style-type: none"> Availability of necessary resources Co-operation between all Departments, Agencies and other stakeholders Approval of RDU posts by the Department of Finance No unforeseen difficulties 					

NCO HLO	Div Obj.	To undertake and disseminate research around children's lives			
2	5				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
5.1	<p>To prepare, publish and disseminate the process of developing the national set of child well-being indicators. This includes the following discrete publications:</p> <ul style="list-style-type: none"> An inventory of existing child well-being indicators currently in use; A report on 'Children's Understanding of Well-Being' undertaken by NUI, Galway; A report on the results of the Delphi process adopted to reach consensus around a working list of child well-being indicators for Ireland 	<p>April 2005</p> <p>April 2005</p> <p>April 2005</p>	<p>SH/AMB</p> <p>SH/AMB</p> <p>SH/AMB</p>	<p>Report published and disseminated</p> <p>Report published and disseminated.</p> <p>Report published and disseminated</p>	
5.2	To compile, publish and disseminate the State of the Nation's Child Report	Dec 2005	SH/AMB/ SR	Report Published and disseminated	
5.3	<p>To disseminate research, around children's lives, funded by the National Children's Office through the following Programmes:</p> <ul style="list-style-type: none"> National Children's Strategy Scholarship Programme National Children's Office Research Programme 	On-going	SH/AMB/ SR	Completed research disseminated	
5.4	To extend the understanding of the whole child perspective by developing and disseminating an explanation of the whole child perspective to different audiences	July 2005 and on-going	SH/AMB	Paper Published and disseminated	
5.5	To establish the Research Dissemination Unit	By end 2005	FS/SH/AM B/MK/EC	RDU established	
<p>Comments:</p> <p>Critical success factors:</p> <ul style="list-style-type: none"> Availability of necessary resources Availability of necessary time to write Co-operation of all Departments, agencies and other stakeholders High quality research submitted Approval of RDU posts by Department of Finance 					

NCOH LO	Div Obj.	To support the Department of Foreign Affairs in ensuring Ireland meets its international obligations in the children's policy area			
2	6				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
6.1	Compete UNCRC Report <ul style="list-style-type: none"> Edit Report Hold Consultation with NGO Sector Submit Final Report to Min / Gov (incorporating NGO consultation) Issue Report to the UN Consultation held with Children 	Jan 2005 Jan/Feb 2005 Feb 2005 Mar 2005 By end 2005	EC/PM /ED/MK/FS /AOD EC/PM/ Comms Team	Redraft complete Consultation Concluded Report presented to Government for approval Report submitted to the UN Consultation completed and supplementary report on children's views prepared	
6.2	Prepare Reports / Briefings on Other International Commitments/Negotiations <ul style="list-style-type: none"> Analyse Requests Prepare Responses 	Ongoing	EC/PM /ED	DFA and other Departments supported in meeting international reporting commitments	
6.3	Represent Ireland in Formal and Informal International Fora as Required <ul style="list-style-type: none"> Attend Europe de L'Enfance Meetings Attend/Present at International Conferences As Required 	Ongoing	EC/PM	Ireland adequately represented at relevant international fora	
6.4	Children's Environment and Health Action Plan (CEHAPE) <ul style="list-style-type: none"> Support to young people involved in process NCO input into Plan 	Mid-year	MG/AK	NCO input reflected in Plan	
6.5	Review implementation of the <i>Stockholm Declaration</i> and <i>Agenda for Action</i> and the <i>Yokohama Global Commitment</i> including the preparation of a formal Action Plan	September 2005	MK/MC/ RD	Action Plan prepared in consultation with relevant Departments	

NCOH LO	Div Obj.	To support the Department of Foreign Affairs in ensuring Ireland meets its international obligations in the children’s policy area				
2	6					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
Comments: <i>Critical Success Factors</i> <ul style="list-style-type: none">• Prompt responses by Departments to requests from NCO• Reasonable notice in relation to deadlines• Assistance from other teams in NCO• Staff levels maintained• Other priorities/key objectives do not arise which require the postponement/replacement of these objectives						

NCOH LO	Div Obj.	To improve co-ordination of objectives, services and related actions under the third goal of the National Children’s Strategy and improve co-operation at local level in relation to services for children.				
3	7					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
7.1	Support PAC Project on the Development of a Children and Families Integrated Services Framework		Jan 2005-Dec 2005	EC/FS/TW	Principles from the Children’s Strategy Embedded in Project Outputs	
7.2	Monitor Implementation of the Youth Homelessness Strategy <ul style="list-style-type: none">Bring sub-group work of Monitoring Committee to a conclusionPrepare individual Reports from sub-groupsPrepare Report of Monitoring Committee for 2004Support PAC in co-ordinating role in 2005Hold Quarterly Meetings of the Monitoring CommitteeReport to Minister and Cabinet Committee		Jan 2005-Dec 2005 April 2005 April 2005 May 2005 Ongoing Quarterly As required	EC/TW/SS EC/TW/SS EC/TW/SS EC/TW/SS EC/TW/SS FS/EC	Sub-committee work finalised Report on Information /Advocacy and Education Sub-groups Finalised MC Report prepared and submitted to Director Successful handover of co-ordinating role to PAC Meetings held Reports prepared	
7.3	Co-ordinate and Monitor Implementation of the Children Act, 2001 <ul style="list-style-type: none">Hold Quarterly Meetings of the ID Working GroupEstablish/Reconvene Working Sub-groups<ul style="list-style-type: none">✓ Family Welfare Conferencing✓ Statistics/Research✓ Communications/Training		Quarterly Jan - April 2005	FS/EC/PM/ED FS/EC/PM/ED FS/PM/ED EC/PM/ED	Meetings Held Working Groups established and work completed	

NCOH LO	Div Obj.	To improve co-ordination of objectives, services and related actions under the third goal of the National Children's Strategy and improve co-operation at local level in relation to services for children.			
3	7				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
7.3 contd.	<ul style="list-style-type: none"> ✓ Inter-Agency Protocols Liaise with/Support Work of the Youth Justice Team Support Preparation of an Integrated Implementation Plan Prepare Submission for Minister and Cabinet Committee 	Jan – May 2005 By June 2005 June 2005	EC/PM/ED EC/PM/ED EC/PM/ED EC/PM/ED EC/PM/ED	WG work co-ordinates well will Youth Justice Report Plan Prepared Submission Prepared	
7.4	Early Education and Child Care Project <ul style="list-style-type: none"> Chair High-Level Group Prepare Policy Brief for Consideration of Minister and Cabinet Committee Undertake further work/analysis arising as required by Cabinet Committee 	Ongoing Feb 2005 As Required	FS SH/EC/PM /ED SH/EC/PM /ED	Meetings Held Policy Brief Completed and submitted for consideration	
7.5	Support Crisis Pregnancy Agency in working with Departments in relation to Teenage Pregnancy	December 2005	MK/ MC	Interdepartmental agreement on Action Plan in relation to teenage pregnancies	
7.6	Develop project to advance integrated delivery of services to children at local level <ul style="list-style-type: none"> Develop proposal in conjunction with relevant Departments Establish structures for implementation Liaise with local agencies/set up project teams 	June 2005 Sept 2005 End Year	FS and Management Team	Pilots in place for new ways of interagency working	
Comments: Critical success factors: <ul style="list-style-type: none"> Availability of necessary resources 					

NCO HLO	Div Obj.	To co-ordinate the priority issues identified by the Cabinet Committee on Children in their work programme for 2003 including the development of play and recreation policies for under and over 12's.			
3	8				
Ref	Steps / Actions	Date	Person(s) responsible	KPIs / Outputs	XRef
8.1	Monitoring and implementation of National Play Policy	Ongoing	RD/MC/ MK	Awareness Raised on Dept Responsibilities Progress by NCO on actions for NCO	
	<ul style="list-style-type: none"> Produce first monitoring report of Play Policy for Cabinet Committee on Children 	June 2005	RD/MC/ MK	Monitoring report on play policy available to Cabinet Committee by September 2005	
	<ul style="list-style-type: none"> Establish National Play Resource Centre 	June 2005	RD/MC/ MK	National Play Resource Centre established by June 2005	
8.2	Recreation Policy for over 12s <ul style="list-style-type: none"> Issue consultation Document Set up Steering Group Publish Research with young people Evaluation of consultation results Draft Policy 	April/May 2005 March 2005 April/May 2005 July 2005 Autumn 2005 End year	MG/AK/ SH/AMB	Consultation & Research informing policy. First draft of policy available for review.	
Comments: Critical Success factors: <ul style="list-style-type: none"> Prompt replacement of NCO staff as vacancies arise Agreement of Minister of State to proposals submitted Agreement of Cabinet Committee in relation to any proposals put forward Availability of staff resources to cater for emerging developments Other priorities/key objectives do not arise which require the postponement/replacement of this objective 					

NCO HLO	Div Obj	To Monitor Progress on all actions under the <i>National Children's Strategy</i> .			
3	9				
Ref	Steps / Actions	Date	Person(s) responsibl e	KPIs / Outputs	XRef
9.1	Preparation of annual progress report on all actions under the National Children's Strategy for 2004	March 2005	RD/MC/ MK	Report submitted to Advisory Board and Cabinet Committee within specified time-frame. Greater focus on outputs and outcomes.	
9.2	Development of NCO Statement of Strategy 2006-2009	End 2005	Manageme nt Team	Statement of Strategy Produced	
Comments: Critical Success Factors: <ul style="list-style-type: none"> • Co-operation of Departments and agencies. • Agreement of Cabinet Committee in relation to any proposals put forward. • Availability of staff resources to cater for emerging developments. 					

NCO HLO	Div Obj.	Monitor public policy which has implications for children to assess its compatibility with the underlying principles of the National Children’s Strategy; identify/tackle new issues as they emerge.				
4	10					
Ref	Steps / Actions		Date	Person(s) responsible	KPIs / Outputs	XRef
10.1	Child Impact Statements <ul style="list-style-type: none">Evaluate researchMake proposals on development of child impact statements in the Irish context		May 2005 End year	MG/MC/ SH	Proposal developed	
10.2	National Children’s Advisory Council <ul style="list-style-type: none">Re-establish CouncilMeetings of the Council organised and supported		Ongoing	MG/AK	Council re-established Timely working documents available to acceptable standard.	
10.3	Medical Consent <ul style="list-style-type: none">Evaluate commissioned research on children’s voices in healthcare settings and consent issues and, if necessary, commission further research.Identify main issues that need to be addressed		Mid-year September 2005	MG/AK/ SH and others (including the DOHC)	Document prepared identifying main issues.	
10.4	Prepare a Child Policy Review Newsletter		April 2005	RD/MC/ MK/AOD	Newsletter produced and circulated by deadline	

Objective	Output	Target completion date	Person(s) responsible / involved
Conduct PMDS planning meetings and complete role profile forms	<ul style="list-style-type: none"> Completed Role Profile Forms. Completed Personal Training and Development Plans returned to Training Officer 	31/01/05	All staff
Conduct Interim Review	<ul style="list-style-type: none"> Completed interim Review form, Role Profile updated as necessary 	31/05/05	All staff
Conduct Annual Performance and Development Review	<ul style="list-style-type: none"> Annual Performance and Development Review form completed. 	31/12/05	All staff
Ensure training and development needs of staff are met.	<ul style="list-style-type: none"> Training Courses identified in RPFs attended. 	31/12/05	All staff
Develop and implement risk assessment management process in relation to project management	<ul style="list-style-type: none"> Risk assessment standard aspect of project development/monitoring processes 	Ongoing	All Staff
Manage miscellaneous co-ordination matters	<ul style="list-style-type: none"> Deadline dates for co-ordination matters adhered to 	Ongoing	EC/TW/SS/KB
Manage NCO accommodation and Corporate Services Needs	<ul style="list-style-type: none"> Ongoing accommodation & corporate services needs dealt with 	Ongoing	TW/KB
Manage NCO Financial Matters	<ul style="list-style-type: none"> NCO expenditure controlled and monitored 	Ongoing	EC/TW/SS/KB
	<ul style="list-style-type: none"> Estimates process co-ordinated 	Ongoing	EC /TW
	<ul style="list-style-type: none"> Financial policies updated. 	Ongoing	EC /TW
Management and co-ordinate Personnel Matters	<ul style="list-style-type: none"> Manage personnel staffing matters for DoHC, cross-cutting and contract staff 	Ongoing	EC/TW
Enhance working capacity of NCO	<ul style="list-style-type: none"> Active participation in NCO Partnership Committee, Office, Management Team and Individual Team Meetings 	Ongoing	Relevant staff
Implement Quality Customer Service Action Plan	<ul style="list-style-type: none"> Quality Customer Service Action Plan for the NCO implemented 	Ongoing	Each PO All Staff involved

Objective	Output	Target completion date	Person(s) responsible / involved
	<ul style="list-style-type: none"> Review of operation of the correspondence tracking system in the NCO 		
Contribute to Civil Service Modernisation	<ul style="list-style-type: none"> Implement the commitments under Sustaining Progress – Performance Verification Process 	Ongoing	Each PO All Staff involved
Improve internal IT communications	<ul style="list-style-type: none"> Develop easily navigated computer filing Match computer and filing systems 	Sept	TW/SS
Improve internal NCO filing system	<ul style="list-style-type: none"> Review existing paper and electronic filing systems Carry out appropriate tidy-up/database creation etc. 	Autumn 2005	All staff involved

APPENDIX 1

Objective	Text	Person Responsible
Group 1: All children have a basic range of needs		
Objective A	Children's early education and developmental needs will be met through quality childcare services and family-friendly employment measures	EC and Team
Objective B	Children will benefit from a range of educational opportunities and experiences which reflect the diversity of need	MK and Team
Objective C	Children will be supported to enjoy the optimum physical, mental and emotional wellbeing	MG and Team
Objective D	Children will have access to play, sport, recreation and cultural activities to enrich their experience of childhood.	MK/MG and Teams
Objective E	Children will have opportunities to explore information and communication technologies in ways which are safe and developmentally supportive.	MK and Team
Objective F	Children will be safeguarded to enjoy their childhood free from all forms of abuse and exploitation.	EC and Team
Group 2: Some children have additional needs		
Objective G	Children will be provided with the financial supports necessary to eliminate child poverty.	MK and Team
Objective H	Children will have access to accommodation appropriate to their needs.	EC and Team
Objective I	Children with behavioural problems coming before the courts or in trouble with the law will be supported in the least restrictive environment while having their needs addressed.	EC and Team
Objective J	Children with a disability will be entitled to the services they need to achieve their full potential.	EC and Team
Objective K	Children will be educated and supported to value social and cultural diversity so that all children, including Travellers and other marginalized groups, achieve their full potential.	EC and Team
Group 3: All children need the support of family and community		
Objective L	Children will have the opportunity to experience the qualities of family life.	MG and Team
Objective M	Children will benefit from and contribute to vibrant local communities.	MG and Team
Objective N	Children will benefit from a built and natural environment which supports their physical and emotional wellbeing.	MG and Team

Glossary of Initials

FS - Frances Spillane (Director)

EC - Elizabeth Canavan Deputy Director)

MK- Marie Kennedy (Principal Officer)

MG- Mary Golden (Principal Officer)
Communications)

SH - Sinead Hanafin- (Head of Research)

PM - Patrick Murray (AP)

TW- Tommy Wilson (AP)

ED- Eoin Deegan (AO)

DD – Deirdre Dunworth (HEO)

TMcG - Teresa McGovern (CO)

AOD- Anne O'Donnell (Head of

IM- Ide Mulcahy (AP)

AK - Alison Keogh (AP)

AMB- Anne-Marie Brooks (Researcher)

RD- Robert Deegan (AO)

SS-Stephen Sheeran (EO)

KB -Keith Brown (CO)