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# Eastern Health Board

## 3 Year Implementation Programme

for the

**'Ten Year Action Plan for Services for Older Persons 1999 - 2008'**

**Ten Year Action Plan for Services for Older People 1999 - 2008**

*Recommendations without Direct Costing Implication*

*SECTION 1*

• **Health Promotion:(Para 7.1 - 7.5.9)**

- ◆ A risk falls assessment programme has been piloted at community care level in Area 1 in recent months and when evaluated this could be carried out in all Community Care Areas.

*Action person: Area General Managers.*

*Update: The risk falls assessment programme has been carried out in Community Care Area 1 and will continue in 1999.*

*Community Care Area 4 and Community Care Area 6 have identified a target of piloting the risk falls assessment in their areas in 1999. The remaining Community Care Areas are drawing up a timeframe for implementing these recommendation.*

- ◆ A risk falls assessment programme is being piloted in Baltinglass and Clonskeagh Hospital in 1998. On evaluation this programme could be utilised in all hospitals/homes for older persons.

Pilots are being arranged by the appropriate Directors of Nursing and Hospital Management in association with the Director of Services for Older Persons and a nominated Specialist in Public Health Medicine.

*Action Person - Individual Hospital Managers/Directors of Nursing/Chief Nursing Officers.*

*Update:- The risk falls assessment programme commenced in Baltinglass District Hospital and Clonskeagh in 1998 and will be evaluated and reported on in 1999.*

*The programme will commence in Wicklow Hospital in 1999 and be evaluated in Year 2000. On completion of the initial evaluation of the Baltinglass District Hospital programme a timeframe for its transfer to other hospitals/homes will be decided upon.*

- ◆ Specific health promotion campaigns in the area of falls, cardiovascular disease, mental health, smoking, nutrition and diet, physical activity and housing & environment could be targeted on a pilot basis by the newly formed Health Promotion Unit in conjunction with partners in the various fields, i.e. in the case of physical activity, Age & Opportunity or in the case of housing & environment with the local authorities. This could be carried out by way of public campaigns aimed at older people.

*Action Person - Director of Health Promotion in liaison with the Director of Services for Older Persons.*

*Update:-*

- *The Go for life project which involves interaction between community care staff and Age & Opportunity in providing activity Leader Workshops for appropriate volunteers who will implement physical activity programmes in in our Boards area commenced in September 1999.*

- *A risk falls assessment programme has been piloted at community and hospital level*

- *The Reach Out, Be a Good Neighbour campaign which is supported by all Community Care Areas of our Board continues to be a fine example of cross agency (both Voluntary & Statutory and Business co-operation in aspects relating to health and security of older persons.*

- *Our Board's is currently producing a Directory of Services for Older Persons in collaboration with a wide number of voluntary bodies in the region and involving all Programmes in the Board. To assist in this task Workshops have been held with a variety of groups representing care providers and recipients of care services to elicit their views on the format of the Directory. The Directory should assist those who care for older persons in finding the appropriate service in a timely fashion.*

- *Our Board will continue to support the Senior Games Festival in collaboration with the local authorities in our region. This festival brings together older persons from around the region and rewards initiatives which promote living on a sustained basis.*

- *Our Board's Health Promotion Department is currently developing a Peer led nutrition intervention (the Food and Health Programme) in one Community Care Area. This initiative, which has been proven successful in improving knowledge and behaviour in low income communities, seeks to assist older persons to maintain a healthy diet and reduce the risk of diet related morbidity and mortality.*

- *Our Board's hospitals/homes for older persons have become full members of the Irish Network for Health Promoting Hospitals. The group have submitted 3 quality initiatives for*

*examination e.g. Sonas Communication Programme, Risk Falls Programme and the Patient Advocacy Programme.*

*- An innovative Programme for Older Persons involving instruction in the fields of movement and dance and also instruction in art has been introduced to the Community Unit at South Circular Road.*

**Service Providers/Customers:(Para 8.9)**

- ◆ The charter of rights for older persons should be prepared by a small expert group.

*Action Person -Director of Services for Older Persons and small working group.*

*Update:- A small working group chaired by the Director of Services for Older Persons and including input from a voluntary organisation representing older persons is currently in place and has met on 3 occasions. It is targeted to have a Charter of Rights for older persons completed by end November 1999*

- ◆ The Pilot Advocacy Project currently running in St Mary's Hospital should be evaluated and transferred to other sites. This could be funded by a lottery allocation to Age Action Ireland and managed by individual hospital managers.

*Action Person - Hospital Managers/Directors of Care/CNO's.*

*Update:- The pilot Advocacy Project in a Unit at St Mary's Hospital is now underway after initial problems in recruiting volunteers to be trained as advocats. The initial pilot was carried out in 1998 and written up.*

*A second recruitment drive for volunteer advocats at St Mary's Hospital has taken place and a number of volunteers selected. While the development of this project into 3 other areas at St Mary's has been somewhat delayed as the Project Co-ordinator supplied by Age Action resigned it is targeted to develop this service in these units over the coming months. The*

*evaluation of the project in the 3 centres will allow for a timeframe for its implementation in other sites.*

- ◆ The Complaints/Appeals Director will be setting up customer fora. Consideration should be given to setting up a customer forum to deal specifically with issues relating to older persons.

*Action Person - Director of Appeals/Complaints in liaison with Director of Services for Older Persons.*

*Update:- A small group consisting of the Director of Services for Older Persons and Director of Appeals/Complaints and a representative of a voluntary group representing older persons has been established with a target of setting up a customer forum for older persons. Group sessions with various groups representing older persons were held in July 1999 to elicit their views on services for older persons. These meetings will form the basis for future customer feedback from older persons.*

- ◆ Questionnaire type feedback should be introduced in the community care setting.

*Action Persons - General Managers.*

*Update:- Community Care Areas 4 and 8 have are piloting customer surveys by use of questionnaire in 1999. The remaining Community Care Areas are currently examining a timeframe for implementing this recommendation in the short/medium term.*

- ◆ Each Community Care Area(General Manager) should arrange an annual day(seminar) when he/she should illicit the views of organisations representing older persons and older persons themselves regarding services for older persons. Ongoing informal contact should also be maintained.

*Action Person - General Managers.*

*Update:- Community Care Areas 4 & 8 have established Forums to meet and elicit the views of older persons during 1999. The remaining Community Care Areas are currently examining a timeframe for the implementation of this recommendation in the short term.*

- ◆ Consideration should also be given to organising a Board wide workshop either annually or every second year with the organisations representing older persons.

*Action Person -Director of Services for Older Persons in liaison with key people in the Board.*

*Update:- As a variation of this concept and in recognition of 1999 being the International Year of Older Persons, it is targeted to arrange a one day seminar to elicit the view of voluntary groups who have carried out projects to commemorate the year and to prepare a report on these projects. This service will be held in November 1999. This type of workshop/seminar - to elicit view of older persons - will be held on a regular basis either yearly or every two years thereafter.*

- **Vulnerable/Eccentric Older Persons:(Para 9.17)**

- ◆ There are a number of recommendations in this chapter (9.17) which refers to procedural matters relating to the care of vulnerable older persons.

*Action Person - Senior Area Medical Officers/General Managers.*

*Update:- Each Community Care Area has identified older persons in their areas under the heading of vulnerable/eccentric older persons. Individual case conferences are carried out on a needs basis involving all the key players in the area including voluntary and other statutory agencies.*

*A key worker is identified and an action plan put in place on an individual basis.*

- **Suspected Abuse of Older People:( Para 9.19)**

- ◆ A multidisciplinary working group should be put in place to draw up protocols/action plans for suspected older abuse in:-

- (i) a community setting.
- (ii) a residential setting.

*Action Person - Director of Services for Older Persons*

*Update:- A cross programme multidisciplinary committee chaired by the Director of Services for Older Persons and including representatives from the Gardai and voluntary organisations was established in May 1999 in our Boards area to examine this complex issue.*

*However the Minister of State for Older People has established a National Working Group under the auspices of the National Council on Ageing and Older People to establish national guidelines, protocols and procedures to deal with suspected older abuse.*

*As soon as the National Group issues their findings it is intended to re-establish our Board's group to report on how these recommendations could be implemented and the cost involved.*

- **Community Ward Teams:( Para 11.5)**

- ◆ A small working group should re-establish admissions/discharge policy and procedures for the Community Ward Teams and define their operation in line with the original concept of the Community Ward Team.

*Action Person - Director of Services for Older Persons*

*Update: The small group chaired by the Director of Services for Older Persons first met in September 1998 and has met on 13 occasions..The Working Group is in the process of completing its report which will concentrate on a redefinition and fine tuning of the Community Ward Teams to make them more responsive to the needs of the Acute General Hospitals in facilitating the discharge of patients to appropriate levels of sub acute care.*



- ◆ If necessary an expert group should be established to evaluate the operation of the CWT's under a wide range of headings and with specific terms of reference. A decision on the need for such a group will be dependent on the outcome of the above redefining of the CWT's.

*Action Person - Director of Services for Older Persons/General Managers.*

*Update:- The need for this group will be decided on in the light of the above report.*

- **Carer Support ( Para 10.1 - 10.3.5)**

- ◆ A small working group to advise on the need for carer support is currently being put in place.

*Action Person - Nominee from Community Care Programme with selected Health Board representatives.*

*Update:- A working group to determine and evaluate the need for carer support across all age groups is currently in situ and a report will be compiled by end November 1999. As part of their work ongoing discussions are being held with service providers and voluntary organisations. In addition the group held a one day seminar and workshop chaired by an independent evaluator to elicit the view of carers.*

- ◆ Carer support groups(of all ages) should be met and liaised with on an annual basis at Community Care Area level.

*Action Person: General Managers.*

*Update:- Community Care Areas 5 & 8 have indicated a target of implementing Carer Support Groups in 1999(subject to a decision on the allocation of additional monies for this development as outlined in our Boards 1999 operational plan). Additionally each Community Care area is committed to involving and liaising with carers and carer support groups in developing services in thier area.*

• **Partnership with Local Authorities:(Para 13.1 - 13.3.)**

- ◆ The Area Care Teams should be reactivated by the appropriate Area General Manager.

*Action Person - General Managers.*

*Update:- Community Care Areas 6, 7&8 have targeted the reactivation of the Areas Care Teams during 1999. The remaining areas are currently examining a timeframe for the implementation of this recommendation.*

- ◆ Each Area General Manager should arrange to meet officials from his/her Local Authority on a regular basis with a pre set agenda to discuss a range of issues (inc. services relating to older persons). The General Manager should involve appropriate staff from the services area as appropriate, i.e., Hospitals, Drug Service etc.

*Action Persons - General Managers.*

*Update:- Community Care Areas 6,7 & 8 have targeted to arrange meetings with Fingal County Council and Dublin Corporation as a group during 1999 to discuss issues of common interest across all age groups. The remaining areas are examining a timeframe for an introduction of this recommendation as soon as possible.*

- ◆ A rota of meetings with representatives of the various Local Authorities is to be set up at Board wide level with the aim of meeting each local authority twice a year. Our Board will be represented by a group of people 4/5. A meeting has already been held with Dublin Corporation in this regard.

*Action Persons - Director of Services for Older Persons and a group of 4 or 5 people*

*Update:- Regular meetings with Dublin Corporation have commenced. The remaining 5 local Authorities/Corporations have recently forwarded their nominations to meet with our*

*Board. A rota of meetings involving the remaining Authorities/Corporations has been scheduled for September to December 1999. These meetings will involve key players from our Board to mirror the catchment areas covered by the individual Authorities/Corporation.*

- **Hospital Community Liaison:(Para 14.2.3)**

- ◆ The links between the community care services and the various Acute General Hospitals should be re-enforced and vigorously pursued to ensure the speedy discharge of older patients to appropriate care settings.

The activation of the Hospital/Community Steering groups should be pursued to ensure that there is one in place for each acute hospital and relevant community care areas.

*Action Person - General Managers in liaison with the appropriate Acute Hospital Chief Executives.*

*Update:- Community Care Area 5(St James & Tallaght Hospitals.), Community Care Area 6(JCM Hospital) Community Care Area 7 (Mater Hospital) and Community Care Area 8(Beaumont Hospital) have indicated their commitment to improving liaison and discharge planning arrangements between each area and the individual acute hospitals during 1999. This will include active participation and promotion of the concept of the Hospital/Community Steering Groups. The remaining Community Care Areas are examining this recommendation to ascertain a timeframe for its implementation.*

- **Welfare Homes. ( Para 14.7)**

- ◆ Attendants/Domestics be immediately included in the cycle of training involving care attendants in the CWT's

*Action Person - General Managers*

*Update:- Arrangements are in hand to include care attendants employed in the Welfare Homes in Community Care Areas 1,6 & 10 in the cycle of training undertaken by care attendants attached to the CWT's.*

• **Quality Initiatives.(Para 14.8.6)**

- ◆ Quality initiatives should be introduced to our hospital and homes on a phased basis

*Action Person: Local Managers.*

*Update:- - an analytical quality programme commenced in three hospitals/homes in 1998 under the direction of the Nursing Research and Development Department and this has been extended to two other homes during 1999.*

*- an alternative quality control programme managed by an independent assessor has been introduced to 2 hospitals/homes in our Boards area during 1999.*

*- An Arts Programme has been introduced to the South Circular Road, Community Unit in 1999. An exhibition of the residents work will be held towards the end of 1999.*

- ◆ Sonas communication programme for Alzheimer's patients has been introduced into Cois Ceim, Tivoli Road, Newcastle Hospital, the Royal Hospital, Donnybrook and Leopardstown Park Hospital in 1998 and will be evaluated in September 1998. The plan is to extend this pilot into 3 other residential homes for older persons in 1999.

*Action Person - Local/General Managers in liaison with Sonas aPC and the Director of Services for Older Persons.*

*Update:- - the Sonas Communication programme was introduced to 4 hospitals/homes in our Boards area during 1998 and was reported on. The programme has been extended to St Vincent's Hospital, Athy, St Colman's, Rathdrum and Baltinglass District Hospital during 1999 and also piloted in Community Care Areas 2 & 8. The programme will be professionally evaluated in 2000.*

- ◆ A group involving officers of our Board and representatives of the Arts Council are currently examining ways of furthering the arts as a form of recreation and therapy in all services including homes for older persons.

It would be targeted to pilot the various art mediums i.e. painting, sound/music, theatre, visual arts in a home for older persons in 1999 and evaluate the outcome before developing it in other areas.

*Action Person - Local Management in liaison with Eastern Health Board/Arts Council Steering Group.*

*Update: A group chaired by our Director of Communications and of which the Director of Services for Older Persons is a member targeted the introduction of a pilot Arts programme in Cuan Ros Community Unit for Older Persons at Navan Road during 1999. This will involve close co-operation between the Arts Council, our Boards representatives and staff, patients and carers at Cuan Ros Community Unit, Navan Road.*

*In July 1999 an open day for interested Artists was held in Dr.Steevens' and subsequently interviews were held to source the Artist most suitable for the Cuan Ros Unit.*

*The Arts Programme commenced in Cuan Ros in September '99 and will be piloted up and until March 2000. The programme will be written up and evaluated.*

- ◆ The University of the 3rd Age scheme which is an example of excellent statutory/voluntary agency co-operation was piloted in Community Care Area 6 over the last few years.

This pilot which was evaluated and deemed to have been successful in re-orientating reclusive older persons into a social environment should be expanded to all community care areas.

*Action Person - General Managers*

*Update:- The University of the 3rd Age Project is ongoing in Community Care Area 6 and there are plans to extend it within available resources. Community Care Area 4 is targeting the implementation of a variation of the University of the 3rd Age in 1999 centred on a project in Crumlin. The remaining Community Care Areas are examining the timeframe for the implementation of this recommendation.*

**Comment:-** In respect of the recommendations to be actioned the Community Care General Managers, it should be noted that as they only took up their new posts in mid 1998, it has not proved possible to advance some of the recommendations as quickly as planned.

Since their appointment the General Managers have concentrated on the redefinition of the work of the individual areas taking on board the major managerial changes which have taken place and to establish criteria for the advancement of services in their particular area including the preparation of operational plans. Each area has or is currently putting in situ care groups, led by a key head of service (ie services for older persons) to develop and drive individual services areas and to implement recommendations such as outlined in the *“10 Year Action Plan for Services for Older Persons 1999 - 2008.”*

**Ten Year Action Plan for Services for Older People 1999 - 2008**

*Recommendations with Costing Implications,  
priorities in years 1999 - 2001*

**Section 2**

**Priorities 1999 - 2001 - Referenced in 10 Year Action Plan.**

• **5.2.1 Health Promotion (Para 7.5.10)**

- ◆ The creation of 3 Health Promotion Officers Revenue Cost £75,000(full year)

*Update: This recommendation has been endorsed in the recently adapted report, "A Health Promotion Strategy for the Eastern Health Board"*

*Additional Revenue monies are required in order to implement this recommendation.*

• **5.2.2 Service Providers and Customers(para 8.9)**

- ◆ The creation of 3 liaison officers with responsibility to network with various voluntary organisations Revenue Cost £75,000 (full year)

*Update:- Our Boards 1999 letter of determination included for the employment of 1 WTE person as liaison officer between our Board and Voluntary/Carer Organisations. This post is currently being filled in a temporary capacity and interviews for the permanent post will be held shortly.*

• **5.2.3 Services in the Community - Nursing Service (Para 9.3)**

- ◆ The creation of 15 WTE Public Health Nurse posts and 16 Senior Public Health Nurse posts Revenue Costs £621,000(full year)



*Update:- Additional Revenue monies have been made available to create 2 further nurse posts for the Community Care Service in North Dublin City/County.*

#### **5.2.4 Services in the Community - Home Help Service (para 9.4)**

- ◆ Phasing out of provision of the Home Help Service through the Community Welfare Service in Wicklow and Kildare and replacing it with a service provided by voluntary organisations as in other areas Revenue Cost £150,000 (full year)
- ◆ Increase in hourly rate paid to Home Helps over 2 year period(1999-2000) to £4.50 per hour Revenue Cost £3.00m (full year)
- ◆ Increased finance required to meet additional demand for Home Help Service(over initial 3 years of plan) Revenue Cost £3.50m(full year)

*Update:- - Our Boards 1999 letter of determination provided additional revenue funding to raise the hourly rate paid to home helps to a minimum of £3.00 per hour from 1st April 1999 and this has been fully implemented.*

*- additional revenue funding was also provided to meet increased demands for home help service including the targeting of piloting new areas of home help service.*

#### **• 5.2.5 Services in the Community - Meals on Wheels (para 9.5)**

- ◆ The provision of additional meals and the cost of increasing grant aid per meal over 3 years Revenue Cost £1.35m (full year)
- ◆ Upgrade and develop local based Meals on Wheels centres Capital Cost £750,000 (once off)

*Update:- Additional Revenue monies are required in order to implement this recommendation.*

• **5.2.6 Services in the Community - Occupational Therapy Services(Para 9.6)**

- ◆ The provision of 10 WTE posts of Occupational Therapist Revenue Cost £200,000(full year)

*Update:- Revenue monies have been allocated for an additional post of Occupational Therapist in Community Care Area 7.*

• **5.2.7 Services in the Community - Physiotherapy Services(Para 9.7)**

- ◆ The creation of an additional 13 WTE posts of Physiotherapist Revenue Cost £260,000(full year)

*Update:- Additional monies are required in order to implement this recommendation.*

• **5.2.8 Services in the Community - Continence Advice (para 9.13)**

- ◆ The creation of 2 additional WTE posts of Continence Advisor Revenue Cost £58,000 (full year)

*Update:- Additional Revenue monies are required in order to implement this recommendation.*

• **5.2.9 Services in the Community - Nutritional Services (para 9.14.2)**

- ◆ The creation of 2 additional WTE posts of Nutritionist Revenue Cost £42,000 (full year)

*Update:- Additional Revenue monies are required in order to implement this recommendation.*

• **5.2.10 Services in the Community - Social Work Service (para 9.15.4)**

- ◆ The piloting of a social work service by providing 2 WTE posts of Social Worker Revenue Cost £44,000 (full year)

*Update:- Additional Revenue monies are required in order to implement this recommendation*

**5.2.11 Services in the Community - Speech and Language Services (para 9.16.6)**

- ◆ The creation of 6 WTE posts of Speech and Language Therapists Revenue Cost £124,000 (full year)

*Update:- Additional Revenue monies are required in order to implement this recommendation*

**5.2.12 Services in the Community - At Risk Register (para 9.18)**

- ◆ The development of a computerised 'At Risk' register Equipment Cost £50,000 (once-off)

*Update:- Additional Revenue monies are required in order to implement this recommendation.*

• **5.2.13 Carer Support (para 10.3.2)**

The creation of carer support groups in South Dublin, East Wicklow, Kildare/West Wicklow Total Revenue Cost £160,000

*Update:- Additional revenue monies have been made available in order to create carer support groups in Dublin South, Kildare and Wicklow. Representatives of the Community Care Programme have met with a number of voluntary organisations who have submitted proposals to provide Carer's Associations on our Boards behalf in Dublin South, Kildare and West Wicklow. It is intended to provide these carers associations in these areas in 1999 and to continue to develop them in 2000.*

• **5.2.14 Community Ward Teams and Associated Care Services**  
(para 11.5.4/11.5.7)

- ◆ The provision of 90 WTE staff  
(PHNs, RGNs, Paramedical, Home  
Care Attendants and Support Staff) Revenue Cost £1.345m(full year)
- ◆ The creation of 2 additional posts of  
Area Co-ordinator of Services for the  
Elderly Revenue Cost £70,000 (full year)

*Update:- Plans are underway to create full time Managers of Services for Older Persons in 6 of our Board's Community Care areas e.g. the deployment of 6 x 5 WTE posts. This will augment the two full time posts currently in situ.*

• **5.2.15 In-Patient Hospital and Residential Services-Department of  
Medicine for the Elderly(14.2.3)**

- ◆ The creation of 3 acute hospital  
based Liaison Sisters posts in James  
Connolly Memorial Hospital , St  
Columcille's and Naas General  
Hospitals Revenue Cost £66,000 (full year)

*Update:- Additional Revenue monies are required in order to employ 3 dedicated Liason Sisters posts. However in the interim each acute hospital has nominated senior nursing personnel whose duties include the maximising of liason between the Acute Hospitals and Community Care staff to ensure that older people are transferred to their homes with appropriate care supports.*

• **5.2.16 In-Patient Hospital and Residential Services-Department of Medicine for the Elderly(14.2.5)**

The creation of an additional 4 posts of Consultant Physician in Medicine for the Elderly in North Dublin/County, Dublin South, Dublin S/W and Kildare, and Dublin S/E and Wicklow Revenue Cost £430,000 (full year)

*Update:-*

*- North Dublin City/County(E.H.B./JCM, Beaumont Hospital and Mater Hospital) - Revenue monies have been made available to allow this post come on stream during 1999. Approval has been received from Comhairle na nOispideal to fill this post. The post has been advertised and interviews are been arranged for November 1999.*

*- South Dublin(E.H.B and St James Hospital) - Revenue monies have been made available to allow this post come on stream in 1999. Approval has been received from Comhairle na Noispideal to fill this post. The post has been advertised and interviews are been scheduled for November 1999*

• **5.2.18 Secondary Rehabilitation Places (para 14.4.3)**

- ◆ The provision of an additional secondary rehabilitation places.

*Update:- - sites have been identified in at the National Orthopaedic Hospital of Ireland(64 beds) and Peamount Hospital(25 beds) for the location of a total of 89 continuing rehabilitation places for*

*older persons. The development of these services is dependant on capital and revenue monies been made available.*

• **5.2.19 In-Patient Hospital and Residential Services - Welfare Homes (para 14.7.3)**

- ◆ The provision of 4 additional posts of staff nurse and 10 posts of care attendants at St. Broc's, Clarehaven, The Orchard and Ashgrove Welfare Homes Revenue Costs £210,000
- ◆ Upgrading of Supervisors and Assistant Supervisors posts at the four Welfare Homes Revenue Costs £60,000
- ◆ Adaptation to St. Broc's, The Orchard, Clarehaven and Ashgrove Welfare Homes Capital Cost £180,000 (once off)(est)  
Equipment Cost £50,000 (once off)(est)

*Update:- Additional Revenue, capital and equipment monies are required to implement this recommendation.*

**5.2.20 Community Units for Older People (para 15.7)**

- ◆ The construction of 8 Community Units including Day Units for older persons as follows:-

St Clare's (1st Unit) and Dalkey.

- 1999/2000, Lusk and Raheny
- 2000/2001 Beaumont and 2nd unit St Clare's
- 2001/2002 North Kildare and Leopardstown Park Community Units
- Other sites have been identified at
  - Moore Abbey
  - Harolds Cross
  - St. Loman's
  - St. Brendan's

- Fairview
- Dundrum
- Clonskeagh

*Update:- - The construction of a 50 bed community unit at St Clare's (1st of two) has been completed and is targeted to come on stream 1st November 1999*

*- The construction of the 50 bed community unit at Dalkey commenced on 15th February 1999 with a target date of completion end February 2000. The opening of this unit will be contingent on the necessary revenue monies and WTE staff being made available. This is the final unit being Capital funded as part of the 'Roundwood Agreement'*

#### **1999/2000**

*- A site close to the village of Lusk has been selected as suitable for locating a Community Unit for Older Persons. A Design Team have prepared the necessary drawings and are in the process of applying for full planning permission for the Unit. Capital monies will be required in order to progress this unit.*

*- Discussions are at an advanced stage with the Dublin Diocesan authorities regarding the acquisition of a site for a 50 bed community unit at Raheny. Capital monies will be required in order to progress this unit.*

#### **2000/2001**

*- A site has been identified on the Beaumont Hospital Campus for the development of a 50 bed community unit for older persons. A feasibility study has been carried out and an application for outline planning permission has been lodged with the Local Authority. The Local Authority has asked for further information regarding this proposal prior to issuing there decision. Capital monies will be required in order to progress this unit.*

*- Full planning permission has been granted for the construction of a 2nd 50 bed community unit on the St Clare's campus. Capital monies will be required in order to progress this unit.*

## 2001/2202

- A site is available in Maynooth for the construction of a 50 bed community unit. A design team has been selected and has prepared the necessary drawings and applied for full planning permission for this development. Capital monies will be required in order to progress this unit.

- The management of Leopardstown Park Hospital have indicated that they are in agreement with a 50 bed Community Unit (in 2 x 25 bed modules) being located on the Leopardstown Park Hospital campus as part of the hospitals overall development plan. Capital monies will be required in order to progress this unit.

### • 5.2.21 Mental Disorders in Older People (para 16.4.3 )

#### 1999 Enhancement of Current Services

- ◆ The creation of 11 additional WTE staff posts for the existing Departments of Psychiatry of Old Age, i.e Community Nurses x 6, Registrar x 1, Psychologist x 1.5, , Occupational Therapist x 1, Social Worker x 1, Secretary x .05 Revenue Cost £237,000
- ◆ Provision of an additional 6 acute psychiatric and 8 additional long stay beds for severely disturbed patients Revenue Cost £ 463,000

#### 1999 - 2001

	Capital	Equipment	Revenue (full year)
◆ Provision of 54 acute beds located at the various acute general hospitals or elsewhere as appropriate	£1.760m	£352,000	£2.102m



◆ Creation of Day Hospitals/Base x 5 at the appropriate acute general hospitals	£2.360m	£565,000	£2.503m
◆ Existing Day Hospital at James Connolly Memorial Hospital to be adapted and base provided	£230,000	£50,000	£405,000
◆ Provision of 6 contract beds for manageable Alzheimer's patients	-	-	£96,000
◆ Provision of 70 beds for severely disturbed patients with dementia	£3.00m(est)	£560,000(est)	£1.60m(est)

*Update:-* - A new post of Consultant Psychiatrist in the Psychiatry of Old Age came on stream in November 1998 for the Tallaght Hospital/St Loman's service. An additional post of Registrar and additional Clerical support was also provided for.

- Our Board's 1999 letter of determination included for additional 5 WTE staff to allow for the staffing of a dedicated 9 bed acute unit for Psychiatry of Old Age patients at St James Hospital. Additional capital monies were made available which allowed this dedicated unit to be adapted in late 1998.

- Revenue monies were made available to upgrade the staffing of the community service of the S/E Dublin Department of Psychiatry of Old Age - 2 WTE Nurses, 1 Registrar.

- **Dementia in the Community (Appendix A)**

- ◆ Provision of 1.5 Staff WTE (PHN, Registrar) to pilot an outreach Community Dementia Service in North Dublin Revenue Costs £38,000(full year)

*Update:- Additional Revenue monies are required in order to implement this recommendation.*

- **Memory Clinic (Appendix B)**

- ◆ Provision of 1.5 Staff WTE (Registrar, Psychologist) to pilot a memory clinic in North Dublin Revenue Costs £44,000(full year)

*Update:- Additional revenue monies are required in order to implement this recommendation*

- **Presenile Dementia (Appendix C)**

- ◆ Provision of 1 Staff WTE (CPN, Registrar) to pilot a community orientated service for patients suffering from pre senile dementia in South Dublin. Revenue Costs £23,000(full year)

*Update:- Additional revenue monies is required in order to implement this recommendation*

• 5.2.22 Older People with a Mental Handicap (para 18.8)

The following capital/equipment, revenue resources are required during the lifetime of the Action Plan to anticipate the care needs of the mentally handicapped who will grow older and more frail.

1999	Capital Estimated	Revenue Estimated
◆ 3 x 5 bedded Specialist Units - Profound and Multiple Handicaps	0.900m	0.900m
◆ 1 x 6 bedded Specialist Unit - Challenging Behaviour	0.300m	0.300m
◆ 30 residential beds in 5 Unit Complex (6 beds per unit)	1.800m	1.100m
<b>2000</b>	<b>Capital</b>	<b>Revenue</b>
◆ 3 x 5 bedded Specialist Units - Profound and Multiple Handicaps	0.900m	0.900m
◆ 1 x 6 bedded Specialist Unit - Challenging Behaviour	0.300m	0.300m
◆ 30 residential beds in 5 unit complex (6 beds per unit)	1.800m	1.100m
<b>2001</b>	<b>Capital</b>	<b>Revenue</b>
◆ 30 residential beds in 5 unit complex(6 beds per unit)	£1.80m	£1.10m

*Update:- As part of the Department of Health & Children's overall commitment to the development of services on the St Ita's Hospital campus, significant capital monies have been made available which will allow for the adaptation and upgrading of accommodation at St Ita's for older mentally handicapped persons. A Project Team is currently meeting to determine the facilities on the St Ita's complex which can be upgraded to provide a quality in-patient facility for these patients.*

- **Private Care in Nursing Homes(Para 20.1 - 20.14)**

- ◆ Additional funding to meet ongoing demands of implementing Health (Nursing Homes)Act 1990. Revenue Cost £3.00m(full year)

*Update:- Significant additional revenue monies have been made available in our Boards 1999 letter of determination which have allowed our Board.*

- *dispense with the financial assessment of sons and daughters when deciding on the amount of a subvention to award in a particular case.*
- *increase the number of clients in receipt of enhanced subvention.*
- *meet demand for an increased number of subventions.*

*An additional 65 and 30 contract nursing home places were taken out in November 1998 and January 1999 respectively. These plans allowed older patients in the acute hospitals access levels of care more appropriate to their care needs. These places will be retained for the remainder of 1999 and following years.*

**APPENDIX 1**

**Ten year Action Plan for Services for Older Persons 1999 - 2008**

**Executive Summary and Costings of Ten Year Action Plan**

## Appendix 1

### 5.2 Executive Summary of Recommendations: 1999 - 2008

The following is a summary of the Working Groups recommendations taking on board the projection that our Board's elderly population will expand rapidly between now and the year 2008. This will be particularly relevant for those people aged 75 and over and 85 years and over where the increase will be even more substantial.

#### 5.2.1 Health Promotion (para 7.5.10 )

The employment of:

1 Senior Health Promotion Officer	
3 Health Promotion Officers	Revenue Cost £136,800 (full year)
1 Researcher	

#### 5.2.2 Service Providers and Customers(para 8.9)

The creation of 3 liaison officers with responsibility to network with various voluntary organisations	Revenue Cost £75,000 (full year)
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#### 5.2.3 Services in the Community - Nursing Service (para 9.3)

The creation of 29.5 WTE Public Health Nurse posts and 23 Senior Public Health Nurse posts	Revenue Cost £1.230m (full year)
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#### 5.2.4 Services in the Community - Home Help Service (para 9.4)

Phasing out of arrangement with Community Welfare Services	Revenue Cost £150,000 (full year)
Increase in hourly rate paid to Home Helps over 2 year period to £4.50 per hour	Revenue Cost £3.00m (full year)
Increased finance required to meet additional demand for Home Help Service	Revenue Cost £5.00m (over 10 years of plan)

### **5.2.5 Services in the Community - Meals on Wheels (para 9.5)**

The provision of additional meals and the cost of increasing grant aid per meal over a five year period Revenue Cost £1.34m (full year)

Upgrade and develop local based Meals on Wheels centres Capital Cost £750,000 (once off)

### **5.2.6 Services in the Community - Occupational Therapy Service (para 9.6)**

The provision of 20 WTE posts of Occupational Therapists Revenue Cost £400,000 (full year)

### **5.2.7 Services in the Community - Physiotherapy Services (para 9.7)**

The creation of an additional 25 WTE posts of Physiotherapist Revenue Cost £494,000 (full year)

### **5.2.8 Services in the Community - Continence Advice (para 9.13)**

The creation of 2 additional WTE posts of Continence Advisor Revenue Cost £57,500 (full year)

### **5.2.9 Services in the Community - Nutritional Services (para 9.14.2)**

The creation of 2 additional WTE posts of Nutritionist Revenue Cost £42,000 (full year)

### **5.2.10 Services in the Community - Social Work Service (para 9.15.4)**

The piloting of a social work service by providing 2 WTE posts of Social Worker Revenue Cost £44,000 (full year)

Following evaluation of this project and subject to a satisfactory outcome the following staff levels will be required.

3 Head Social Workers	
8 Senior Social Workers	
6 Social Workers	Revenue Cost £470,000 (full year)

#### **5.2.11 Services in the Community - Speech and Language Services (para 9.16.6)**

The creation of 12 WTE posts of Speech and Language Therapists	Revenue Cost £248,000 (full year)
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#### **5.2.12 Services in the Community - At Risk Register (para 9.18)**

The development of computerised 'At Risk' register	Equipment Cost £50,000 (once-off)
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#### **5.2.13 Carer Support (para 10.3.2)**

The creation of carer support groups in South Dublin, East Wicklow/West Wicklow	Total Revenue Cost £160,000
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#### **5.2.14 Community Ward Teams and Associated Care Services (para 11.5.4/11.5.7)**

The provision of 150 WTE staff (PHNs, RGNs, Paramedical, Home Care Attendants and Support Staff)	Revenue Cost £2.24m (full year)
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The creation of 2 posts of Area Co-ordinator of Services for the Elderly	Revenue Cost £70,000 (full year)
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#### **5.2.15 In-Patient Hospital and Residential Services-Department of Medicine for the Elderly(14.2.3)**

The creation of 3 acute hospital based Liason Sisters posts	Revenue Cost £66,000 (full year)
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**5.2.16 In-Patient Hospital and Residential Services-Department of Medicine for the Elderly(14.2.5)**

The creation of an additional 11 posts of Consultant Physician in Medicine for the Elderly

Revenue Cost £1.177m (full year)

**5.2.17 In-Patient Hospital and Residential Services - Acute Assessment/ Rehabilitation (para 14.2.5)**

The provision of an additional 190 acute assessment beds

Capital Cost	£7.60m (once off) (est)
Equipment Cost	£1.52m (once off) (est)
Revenue Cost	£8.30m (full year) (est)

**5.2.18 In-Patient Hospital and Residential Services - Secondary Rehabilitation (para 14.4.3)**

The provision of an additional 311 secondary rehabilitation places in the Board's area during the lifetime of the Action Plan

Capital Cost	£12.45m (once off) (est)
Equipment Cost	£ 2.50m (once off) (est)
Revenue Cost	£12.50m (full year) (est)

**5.2.19 In-Patient Hospital and Residential Services - Welfare Homes(para 14.7.3)**

The provision of 4 additional posts of staff nurse and 10 posts of care attendants at St. Broc's, Clarehaven, The Orchard and Ashgrove Welfare Homes

Revenue Costs £210,000

Upgrading of Supervisors and Assistant Supervisors posts at the four Welfare Homes

Revenue Costs £ 60,000

Adaptation to St. Broc's, The Orchard, Clarehaven and Ashgrove Welfare Homes

Capital Cost	£180,000 (once off)(est)
Equipment Cost	£ 50,000 (once off)(est)

**5.2.20 Community Units for Older People (para 15.7)**

The construction of 29 Community Units including Day Units throughout our Board's area

Capital Cost	£52.00m
Equipment Cost	£11.20m(once off)
Revenue Cost	£30.00m (full year)

## 5.2.21 Mental Disorders in Older People (para 16.4.3 )

### 1999 Enhancement of Current Services

The creation of 11 additional WTE staff posts for the existing Departments of Psychiatry of Old Age, i.e Community Nurses x 6, Registrar x 1, Psychologist x 1.5, Occupational Therapist x 1, Social Worker x 1, Secretary x .05	Revenue Cost £237,000
Provision of an additional 6 acute psychiatric and 8 additional long stay beds for severely disturbed patients	Revenue Cost £ 463,000
Extension of Day Hospital/Therapeutic Centre at James Connolly Memorial Hospital	Capital Cost £25,000 (once-off)

### 1999 - 2001

	Capital	Equipment	Revenue (full year)
Provision of 54 acute beds located at the various acute general hospitals or elsewhere as appropriate	£1.760m	£352,000	£2.102m
Creation of Day Hospitals/Base x 5 at the appropriate acute general hospitals	£2.360m	£565,000	£2.503m
Existing Day Hospital at James Connolly Memorial Hospital to be adapted and base provided	£230,000	£50,000	£405,000
Provision of 6 contract beds manageable Alzheimer's patients	-	-	£96,000
Provision of 70 beds for severely disturbed patients with dementia	£3.00m(est)	£560,000(est)	£1.60m(est)

## Years 4 - 10 of Action Plan

It is projected that the population aged 65 and over will increase to 165,000 by the year 2008 the following resources will be required to meet the service demands as per the accepted norms in the "Years Ahead" Report.

<b>Staffing</b>		<b>Cost</b>
Consultant Posts	7	£749,000 revenue
Community Staff Nurses	10	£186,000 revenue
Paramedical Staff	21	£528,000 revenue
N.C.H.D.'s	7	£172,000 revenue
Clerical	7	£ 93,000 revenue.
<b>Total Revenue</b>		<b>£1,728,000</b>

	<b>Capital</b>	<b>Equipment</b>	<b>Revenue</b>
Provision of 160 Additional Acute beds and 200 longstay/ respite beds for severely disturbed patients with dementia i.e EMI Units in modules of 20 beds each	£14.40m(est)	£2.88m(est)	£11.745m(est)

### **Dementia in the Community (Appendix A)**

Provision of 1.5 Staff WTE (PHN, Registrar)	Revenue Costs £38,000
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### Memory Clinic (Appendix B)

Provision of 1.5 Staff WTE (Registrar, Psychologist)	Revenue Costs £44,000
Renovation of area in an appropriate hospital.	Capital Cost £50,000 (once off)
The creation of 5.5 WTE Posts i.e 2 Research Registrars, 2 Research Nurses 1 Clerical Staff, .5 Clinical Psychologist	Revenue Cost £122,000

### Presenile Dementia (Appendix C)

Provision of 1 Staff WTE (CPN, Registrar)	Revenue Costs £23,000
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### 5.2.22 Older People with a Mental Handicap (para 18.8)

The following capital/equipment, revenue resources are required during the lifetime of the Action Plan to anticipate the care needs of the mentally handicapped who will grow older and more frail.

1999	Capital Estimated	Revenue Estimated
3 x 5 bedded Specialist Units - Profound and Multiple Handicaps	0.900m	0.900m
1 x 6 bedded Specialist Unit - Challenging Behaviour	0.300m	0.300m
30 residential beds in 5 Unit Complex (6 beds per unit)	1.800m	1.100m

<b>2000</b>	<b>Capital</b>	<b>Revenue</b>
3 x 5 bedded Specialist Units - Profound and Multiple Handicaps	0.900m	0.900m
1 x 6 bedded Specialist Unit - Challenging Behaviour	0.300m	0.300m
30 residential beds in 5 unit complex (6 beds per unit)	1.800m	1.100m

<b>2001 - 2008 Inclusive</b>	<b>Capital</b>	<b>Revenue</b>
8 x 30 residential beds in 5 unit Complex (6 beds per unit)	14.40m	8.80m

#### **5.2.23 Replacement of Old/Unsuitable Buildings - Providing Care for Older People (para 19)**

##### **Bru Chaoimhin, Cork Street (para 19.3.1)**

The Development of 4 x 50 bed Community Units and the medium/long term phasing out of Bru Chaoimhin

Capital Costs £8.00m (once off)

##### **St Brigids Home, Crooksling. (para 19.3.2)**

The Development of 3 x 50 bed Community Units and the medium/long term phasing out of St. Brigid's Home

Capital Costs £6.00m (once off)

##### **St Mary's Hospital, Phoenix Park (para 19.3.3)**

The Development of 4 x 50 bed Community Units and the medium/long term phasing out of approximately 200 long stay beds on the St. Mary's campus

Capital Cost £8.00m (once off)

**Comment:**

- (i) It should be noted that all costs outlined above are calculated at 1/1/98 prices
- (ii) Recommendations which do not have a cost implication are included in the summary at the end of each chapter
- (iii) The Working Group note that at present there is considerable difficulty being experienced in recruiting many grades of staff particularly paramedical and nursing grades. This Action Plan recommends a significant increase in the number of various grades of staff over its lifetime. This should be noted by the relevant education/training authorities to ensure that there is an adequate supply of staff in the various specialities to meet the inevitable demand.

### 5.3 10 YEAR ACTION PLAN

#### COST SUMMARY AND PROPOSED PHASING 1999 - 2003 PARA 5.2.1 - 5.2.14

Para	1999			2000			2001			2002			2003		
	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000
5.2.1	-	-	-	30	-	-	58	-	-	80	-	-	108	-	-
5.2.2	25	-	-	75	-	-	75	-	-	75	-	-	75	-	-
5.2.3	123	-	-	246	-	-	369	-	-	492	-	-	615	-	-
5.2.4.	2.150m	-	-	4.150m	-	-	4.650m	-	-	5.150m	-	-	5.650m	-	-
5.2.5	90	250	-	215	250	-	340	250	-	465	-	-	590	-	-
5.2.6.	40	-	-	80	-	-	120	-	-	160	-	-	200	-	-
5.2.7	50	-	-	100	-	-	150	-	-	200	-	-	250	-	-
5.2.8	-	-	-	-	-	-	29	-	-	29	-	-	29	-	-
5.2.9	-	-	-	21	-	-	21	-	-	21	-	-	42	-	-
5.2.10	22	-	-	44	-	-	44	-	-	44	-	-	44	-	-
5.2.10	-	-	-	-	-	-	62	-	-	92	-	-	144	-	-
5.2.11	25	-	-	50	-	-	75	-	-	100	-	-	125	-	-
5.2.12	-	-	50	-	-	-	-	-	-	-	-	-	-	-	-
5.2.13	80	-	-	160	-	-	160	-	-	160	-	-	160	-	-
5.2.14	259	-	-	518	-	-	742	-	-	966	-	-	1.190m	-	-
<b>Sub Total</b>	<b>2.864m</b>	<b>250</b>	<b>50</b>	<b>5.689m</b>	<b>250</b>	<b>-</b>	<b>6.895m</b>	<b>250</b>	<b>-</b>	<b>8.034m</b>	<b>-</b>	<b>-</b>	<b>9.222m</b>	<b>-</b>	<b>-</b>

## 10 YEAR ACTION PLAN

### COST SUMMARY AND PROPOSED PHASING 1999 - 2003 PARA 5.2.15 - 5.2.22

Para	1999			2000			2001			2002			2003		
	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000
5.2.15	22	-	-	44	-	-	66	-	-	66	-	-	66	-	-
5.2.16	321	-	-	321	-	-	428	-	-	535	-	-	642	-	-
5.2.17	874	800	160	1.748m	800	160	2.622m	800	160	3.496m	800	160	4.370m	800	160
5.2.18	1.610m	1.650m	331	2.820m	1.200m	241	4.030m	1.200m	241	5.240m	1.200m	241	6.450m	1.200m	241
5.2.19	270	-	-	270	180	50	270	-	-	270	-	-	270	-	-
5.2.20	3.213m	2.000m	1.200m	6.416m	6.000m	1.200m	9.619m	6.000m	1200m	12.832m	6.000m	1.200m	16.045m	6.000m	1.200m
5.2.21	700	25	-	700	-	-	700	-	-	700	-	-	700	-	-
5.2.21	1.535m	1.478m	332	4.261m	2.995m	635	6.706m	2.885m	560	8.315m	1.600m	320	9.924m	1.600m	320
5.2.21 Append. ABC	105	-	-	166	50	-	227	-	-	227	-	-	227	-	-
5.2.22	2.300m	3.000m*	-	4.600m	3.000m*	-	5.700m	1.800m*	-	6.800m	1.800m*	-	7.900m	1.800m*	-
5.2.23	-	2.000m	-	-	2.000m	-	-	2.000m	-	-	2.000m	-	-	2.000m	-
<b>Total</b>	<b>13.814m</b>	<b>11.203m</b>	<b>2.073m</b>	<b>27.035m</b>	<b>16.475m</b>	<b>2.286m</b>	<b>37.263m</b>	<b>14.935m</b>	<b>2.161m</b>	<b>46.515m</b>	<b>13.400m</b>	<b>1.921m</b>	<b>55.816m</b>	<b>13.400m</b>	<b>1.921m</b>

\* Includes for Equipping



## 10 YEAR ACTION PLAN

### COST SUMMARY AND PROPOSED PHASING 2004 - 2008 PARA 5.2.1 - 5.2.14

Para	2004			2005			2006			2007			2008		
	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000
5.2.1	137	-	-	137	-	-	137	-	-	137	-	-	137	-	-
5.2.2	75	-	-	75	-	-	75	-	-	75	-	-	75	-	-
5.2.3	738	-	-	861	-	-	984	-	-	1.107m	-	-	1.230m	-	-
5.2.4	6.150m	-	-	6.650m	-	-	7.150m	-	-	7.650m	-	-	8.150m	-	-
5.2.5	740	-	-	890	-	-	1.040m	-	-	1.190m	-	-	1.340m	-	-
5.2.6	240	-	-	280	-	-	320	-	-	360	-	-	400	-	-
5.2.7	300	-	-	350	-	-	400	-	-	450	-	-	494	-	-
5.2.8	58	-	-	58	-	-	58	-	-	58	-	-	58	-	-
5.2.9	42	-	-	42	-	-	42	-	-	42	-	-	42	-	-
5.2.10	44	-	-	44	-	-	44	-	-	44	-	-	44	-	-
5.2.10	228	-	-	280	-	-	332	-	-	416	-	-	470	-	-
5.2.11	150	-	-	175	-	-	200	-	-	225	-	-	248	-	-
5.2.12	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5.2.13	160	-	-	160	-	-	160	-	-	160	-	-	160	-	-
5.2.14	1.414m	-	-	1.638m	-	-	1.862m	-	-	2.086m	-	-	2.310m	-	-
<b>Sub Total</b>	<b>10.476</b>	<b>-</b>	<b>-</b>	<b>11.640</b>	<b>-</b>	<b>-</b>	<b>12.804m</b>	<b>-</b>	<b>-</b>	<b>14.000m</b>	<b>-</b>	<b>-</b>	<b>15.158m</b>	<b>-</b>	<b>-</b>

## 10 YEAR ACTION PLAN

### COST SUMMARY AND PROPOSED PHASING 2004 - 2008 PARA 5.2.15 - 5.2.22

Para	2004			2005			2006			2007			2008		
	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000	Rev. 000	Capital 000	Equip. 000
5.2.15	66	-	-	66	-	-	66	-	-	66	-	-	66	-	-
5.2.16	749	-	-	856	-	-	963	-	-	1.070m	-	-	1.177m	-	-
5.2.17	5.244m	800	160	6.118m	800	160	6.992m	800	160	7.866m	800	160	8.300m	400	80
5.2.18	7.660m	1.200m	241	8.870m	1.200m	241	10.080m	1.200m	241	11.290m	1.200m	241	12.500m	1.200m	241
5.2.19	270	-	-	270	-	-	270	-	-	270	-	-	270	-	-
5.2.20	19.258m	6.000m	1.200m	22.471m	6.000m	1.200m	25.684m	6.000m	1.200m	27.842m	4.000m	800	30.000m	4.000m	800
5.2.21	700	-	-	700	-	-	700	-	-	700	-	-	700	-	-
5.2.21	12.007m	2.400m	480	13.597m	1.600m	320	15.660m	2.400m	480	17.248m	1.600m	320	20.184m	3.200m	640
5.2.21 Append. ABC	227	-	-	227	-	-	227	-	-	227	-	-	227	-	-
5.2.22	9.000m	1.800m*	-	10.100m	1.800m*	-	11.200m	1.800m*	-	12.300m	1.800m	-	13.400m	1.800m*	-
5.2.23	-	2.000m	-	-	2.000m	-	-	2.000m	-	-	2.000m	-	-	4.000m	-
<b>Total</b>	<b>65.657m</b>	<b>14.202m</b>	<b>2.081m</b>	<b>74.915m</b>	<b>13.400m</b>	<b>1.921m</b>	<b>84.646m</b>	<b>14.200m</b>	<b>2.081m</b>	<b>92.879m</b>	<b>11.400m</b>	<b>1.521m</b>	<b>101.982m</b>	<b>14.600m</b>	<b>1.761m</b>

\* Includes for Equipping

Revenue costs each year includes roll on costs from previous years and are calculated at 1/1/98 prices

Capital and Equipment costs are also calculated at 1/1/98 prices.

## 10 YEAR ACTION PLAN

### TOTALS OF COST SUMMARY EACH YEAR 1999 - 2008

<b>Year</b>	<b>Revenue 000</b>	<b>Capital 000</b>	<b>Equipment 000</b>
1999	13.841m	11.203m	2.073m
2000	27.035m	16.475m	2.286m
2001	37.263m	14.935m	2.161m
2002	46.515m	13.400m	1.921m
2003	55.816m	13.400m	1.921m
2004	65.657m	14.202m	2.081m
2005	74.915m	13.400m	1.921m
2006	84.646m	14.200m	2.081m
2007	92.879m	11.400m	1.521m
2008	101.982m	14.600m	1.761m
<b>Total</b>	-	<b>137.190m</b>	<b>19.727m</b>

- Revenue costs each year includes roll-on costs from previous years and are calculated at 1/1/98 prices
- Capital and Equipment costs are also calculated at 1/1/98 prices