

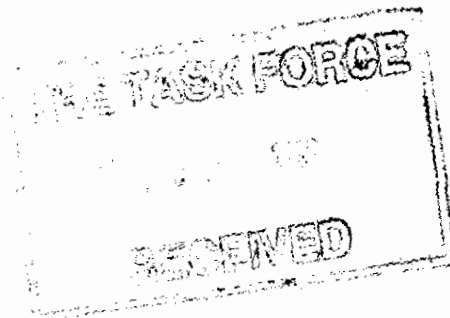
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Eastern Health Board

Children's Services

Children's Services Workshop Report



July 1997

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Appendix 1

Children's Services

Workshop Participants

Dr. Brian McLoughlin, Senior AMO

Ms. Janette McDonald, Senior Speech and Language Therapist

Ms Teresa Scully, Superintendent Public Health Nurse

Ms Carmel Hickey, Administrator

Ms Ann McWilliams, Senior Social Worker

Mr. Stephen McDermott, Principal Dental Surgeon

Ms Michelle Clear, Senior Social Worker

Ms Rosemary Curry, Principal Speech and Language Therapist

Dr. Lelia Thornton, Public Health Specialist

Ms Lilian Charles, Administrator

Dr. Geraldine Sayers, Director of Community Care

Ms Joan McGarry, Child Psychiatric Services

Ms Clare Doherty, Management Services

Dr. Brendan Doody, Senior Registrar

Mr. Adrian Charles, Administrator

Appendix 2

Processes

Key Information Needs

SECTION 1

INTRODUCTION

- 1.1 A workshop on Children's Services was held in St. Mary's Hospital, Phoenix Park on the 27th June 1997 to identify the operational processes and key information needs for this Care Group. The workshop was attended by service professional and administrative staff working in this area. The workshop participants are listed in Appendix 1.
- 1.2 The workshop was conducted using presentation sessions and break out groups in which the participants were divided into teams to specify certain processes and key information needs. This process was facilitated by Ernst and Young supported by EHB Management Services staff.
- 1.3 The following activities were undertaken at the workshop:
- The participants view of the Goals and Objectives of Children's Services
 - The operational processes involved in the delivery of Children's services
 - The key information needs of the of the service for both operational and management purposes.
- 1.4 Due to pressure of time discussion did not take place on key constituencies (groups of people with whom the service interacts and the nature of the interaction) and the primary products and services supplied by the service. However, these have been derived from the processes and key information needs and are set out in the document.
- 1.5 *Participant Representation of Workshop.*
The following services were represented from Community Care and Special Hospital Care:
- Community Area Medical
 - Speech and Language Therapy
 - Public Health Nursing
 - Social Work
 - Dental Service
 - Public Health Specialist
 - Child Psychology
 - Child Psychiatry
 - Community Care administration

SECTION 2

GOALS AND OBJECTIVES

2.1 The goals and objectives for the provision of Children's services are set out below and are taken from the Service Plans:

2.2 **Goals: Child Psychiatric Service:**

- To sustain and develop an equitable, high quality, cost-effective community based child and adolescent service.
- To engage in the promotion of health and the prevention and treatment of illness.
- To provide services which are sensitive and responsive to the needs of those availing of the service, the staff entrusted with the delivery and the community which it serves.

2.3 **Goals: Community Care:**

Public Health

- To prevent certain diseases of childhood which impact on the Health and Social Gain of our population by way of vaccination and immunisation service and to achieve a level of uptake of immunisation against the appropriate age cohorts which will accommodate this aim.

Child and Family Support

- To deliver integrated child care and family support services with families and communities and other statutory and voluntary services.
- To work in partnership with the voluntary sector and to involve organisations in the consultative process, as well as in the delivery of services.

2.4 **Objectives: Community Care:**

- To eliminate communicable diseases such as Pertussis, Measles, Mumps, Rubella, Polio and Hib related diseases and aims to achieve and maintain a minimum of 95% uptake of the National Immunisation programme in each Community Care Area.
- To provide a continuum of care for children ranging from early intervention and support in the home through community based services to various types of foster care, residential and after care accommodation.
- To adopt a cross programme approach with the Aids/Drugs Programme to develop services for young drug users.
- To provide assessment and emergency care for young Travellers.
- To review existing day services for young travellers.

- To develop outreach services for vulnerable teenagers in relation to teenage pregnancy and health and social well-being.
- To publish a policy document in relation to the funding of voluntary agencies providing counselling and psychotherapy services.
- To conduct inspections of pre-schools in accordance with parts 7 and 8 of the Child Care Act 1991.
- To provide a non-residential assessment service for children and young people under 18 years of age who present with emotional or behavioural problems.
- To expand the range of counselling services and therapy services for children and young people under 18 years of age who present with emotional or behavioural problems.
- To expand the Child Psychiatric service in Wicklow.

2.5 At the workshop the participants also proposed the following additional goals:

- To promote the welfare of children living in an area.
- To promote the health of children.
- To support and empower the family.
- To protect children
- To prevent children being separated from the family
- Prevention of illnesses to children.
- Maximise the potential of the child
- Identify children at risk
- To ensure that the social, emotional and educational needs of children are addressed
- To monitor the health and development of children

To ensure that practises carried out are:

- effective
- accessible
- equitable
- efficient
- of a high standard
- To support the community to identify their own needs
- To ensure that workers in the Child Care area are sufficiently trained
- To ensure standardisation and uniformity of information given to clients
- To ensure that communications between professionals and organisations are effective and efficient.

SECTION 3

CONSTITUENCIES

3.1 The term constituency may be defined as :

“ An identifying group which may or may not be aligned along structural or functional lines, used to map the organisation to culture.” e.g. Customer, client, department (internal) , voluntary agency, GP’s, Pharmacists.

3.2 In this context the primary constituencies are the clients of the service. The key constituencies identified are shown below. In these lists the nature of the relationship between the service and the constituency i.e. as a customer of the service or as a supplier to the service, is shown along with the type of contact between the two - whether at an individual level or at an organisational level.

<i>CLIENTS</i>		
<i>Constituency</i>	<i>Relationship</i>	<i>Contact</i>
Children at Risk	Customer Support/Service	Individual/Group
Family of Child	Customer Support/Service	Individual/Group
Child to age 18	Customer Support/Service	Individual/Group
Foster Care Family	Customer Support/Funding	Individual/Group
Children with Special Needs	Customer Support/Service	Individual/Group
<i>INTERNAL</i>		
Community Mothers	Supplier - Family Crisis	Individual
Hospital	Customer - Family Crisis	Organisation
Child Care Advisory Committee	Customer - Information Supplier - Policy	Organisation
Health Centres	Supplier - Service Provision	Individual/Group
Multi Disciplinary Team	Supplier Service Provision/ New Policy	Organisation
<i>EXTERNAL</i>		
<i>Constituency</i>	<i>Relationship</i>	<i>Contact</i>
Courts	Customer - Family Crisis Supplier - Client Information	Individual
Garda	Customer - Family Crisis Supplier - Client Information	Individual
Hospitals	Customer - Family Crisis Supplier - Birth Notifications	Individual
G.P.'s	Customer - Family Crisis Supplier - Client Information	Individual
Schools	Customer - Family Crisis Supplier - Client Information	Individual/Group
Public Representatives	Customer - Service Enquiry Supplier	Individual
Department of Health	Customer - Information/Plans Supplier - Funding	Organisation
Minister for Health	Supplier	Organisation
Pressure Groups	Customer - Increase Provision of Service	Organisation
Professional Training Groups	Supplier - Staff Training	Organisation

Section 4

PRODUCTS/SERVICES

4.1 The term product may be defined as:

“Part of a deliverable. Products can be either delivery products, work products or presentation products assembled from presentation components. They are essentially physical items produced for use within or outside the service”

E.g. budgets, policy documents, health promotion literature

4.2 Services on the other hand may be defined as:

“ A function that is provided on request, and that hides it’s internal implementation from the requester. Services typically represent shared, reusable functions. A service can provide a simple or complex function; it’s implementation can be technically simple or it can require multiple technologies, clinical skills, and administrative skills. Work performed for an enterprise or organisational unit by some organisation other than itself.”

E.g. immunisation, dental examinations, counselling.

The following are the key products and services identified for Children’s Services:

<i>PRODUCT/SERVICE</i>	<i>P/S</i>	<i>PRODUCED BY</i>	<i>FREQUENCY</i>
Case Reports	P	Professional Service Provider	Regular
Evaluation Information	P	Administration/Professional	
Intervention Plans	S	Professional	Regular
Assessment	S	Professional	Regular
Screening	S	Professional	Regular
Detection	S	Professional	Regular
Referral	S	Professional	Regular
Immunisation	S	Professional	Regular
Treatment	S	Professional	Regular
Payments to Foster Parents	P	Administration	Regular
Family Support	S	Professional	Regular
Health Education	S	Professional	Regular
Ante-Natal Services	S	Professional	Regular
Family Support	S	Professional	Regular
Counselling	S	Professional	Regular
Training	S	Professional Needs	As required
Out of Hours	S	Professional	Regular
Information>Returns	P	Professional/Administration	Regular
Service Plans	P	Professional/Administration	Monthly/Annual
Policies	P	Professional	As Required
Administration Support	S	Administration	Daily
Evaluation Information	P	Professional/Administration	As Required
Management Information	P	Professional/Administration	As Required
Courts/Garda/School	S	Professional	As Required
Professional Liaison	S	Professional/Administration	As Required

4.3 *Issues:*

The primary issues relating to products and services are:

- The multi disciplinary nature of Children's services.
- It is a cross programme service

SECTION 5

PROCESSES

- 5.1 In deriving the processes undertaken by the service the following hierarchy was used:

Mega Process
Major Process
Process

- 5.2 The definition of each process is:

Mega Process:

“ The highest level process identified for an enterprise. Typically the following 6 mega processes are defined for an enterprise: gaining new business, product/service design, operations, aftersales support, support and executive. Most enterprises have between 2 and 10 of these mega processes.”

Major Process:

“ A high level process in the process decomposition of an enterprise, one level below mega process.”

Process:

“ A specific ordering of work activities across time and place, with a beginning, an end, and clearly defined inputs and outputs. A structure for action defining how work is done. Business processes are the structure by which the organisation physically does what is necessary to produce value for it's customers.”

5.3 The processes identified for Children's Services are:

	<i>MEGA</i>		<i>MAJOR</i>		<i>PROCESS</i>
2.1	Administrative Support	2.1.1	Provide Administration and Support		
		2.1.2	Provide Care Worker Support	2.1.2.1	Provide Supervision of Workers in Care Area.
				2.1.2.2	Provide Training, Education, Research.
2.2	Service Development	2.2.1	Provide Plan Service	2.2.1.1	Provide Audit Service Provision.
		2.2.2	Plan Prevention Service		
2.3	Service Delivery	2.3.1	Provide Social Work services for Children		
		2.3.2	Provide Intervention and Management Services	2.3.2.1	Liaison between Agencies.
				2.3.2.2	Provide Screening Services.
				2.3.2.3	Provide Detection Services.
				2.3.2.4	Provide Referral Services.
				2.3.2.5	Provide Assessment Services.
		2.3.3	Manage Caseload	2.3.3.1	Manage Case Conference
				2.3.3.2	Manage Team Approach
		2.3.4	Provide Prevention Service	2.3.4.1	Administer Prevention Service Support
				2.3.4.2	Provide Primary Prevention Service
				2.3.4.3	Provide Secondary Prevention Service
				2.3.4.4	Provide Tertiary Prevention Service

5.4 The key issues here are:

- Having the necessary information to plan and audit the service.
- Standard approach to audit.
- Reviewing the outcome of the service encounters.
- Agree standards in management supervision and clinical/professional supervision.

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Section 6

KEY INFORMATION NEEDS

6.1 A key information need refers to a set of information requirements by the business to execute its functions. Information needs are broken down into 2 categories:

6.2 Executive Information Need:

“ Information required to monitor achievement of objectives or critical success factors, the validity of critical assumptions, or the impact of opportunities and problems”

6.3 Operational Information need:

“ A statement of the information required to operate or monitor a process; e.g. uptake of immunisation”

6.4 The major information needs identified in the study are grouped in Appendix relative to the processes they support. For ease of review they are summarised and grouped below into their respective categories:

<i>TYPE</i>	<i>NEED</i>
<i>Executive</i>	Performance Indicators
	Activity
	Outcomes
	Targets
	Consumer satisfaction
	Epidemiological Information
	Population Profiles
	Special groups needs
	Health status
<i>Operational</i>	Birth notifications
	Referral Information
	Information from RICHs
	Movement of families
	Referral destination and source
	BCG information
	Feedback from developmental examinations
	Caseload information
	Staff information for training
	Financial information
	Details of payments made
	Statistical information on service activity
	Development needs of staff
	Information on PHN 'drop in' clinics
	Family details
	Child details
	Immunisation uptake
	Assessment results
<i>Executive/Operational</i>	List/status of support services
*	Details of involvement between EHB staff and client

6.5 *The key issues here are:*

- Confidential nature of information being supplied to other service providers. Information should be supplied on a need to know basis only.
- Birth notification information should be provided electronically by the Rotunda and Coombe Hospitals. This should include perinatal information.
- Make information available from the Mobile Day Clinic computer system on Traveller' children to the Community Care Areas.
- A stock control system for recording vaccines issued to GP's and AMO's under the Primary Childhood Immunisation scheme is required.
- Valuable information on the Primary Immunisation programme will exist on GP computer systems. Consider transferring this information to the RICHS system.
- RICHS system should be made available to Community Care Heads of Discipline.

Process Description Form

PROCESS	Provide Administration & Support	LEVEL NO.	
<p>Description:</p> <p>The purpose of this process is to provide background administration for the handling of Case Work. This process ensures that all background material is requested and fully completed, e.g. request for references, background material, placement forms completed, home health assessment and additional allowances forms.</p>			
<p>Frequency:</p> <p>Daily</p>		<p>Triggers:</p> <p>Forms completed, new requests for allowances, new cases</p>	
<p>Inputs:</p> <p>As triggers</p>			
<p>Outputs:</p> <p>accurately maintained files</p>			
<p>Customer:</p> <p>Care Worker</p>			
<p>Supplier:</p>			

Process Description Form

PROCESS	Provide Care Worker Support	LEVEL NO.	
<p>Description:</p> <p>It is generally recognised that providing care to disadvantaged can be stressful for the individual care workers involved. Consequently, an informal support structure exist within the each of the areas to handle this issue. Through a series of weekly team meetings (same discipline)& formal supervision of new staff issues arising are dealt with.</p>			
<p>Frequency:</p> <p>Weekly</p>		<p>Triggers:</p> <p>Time based</p>	
<p>Inputs:</p> <p>Care Worker concerns, Case Workload</p>			
<p>Outputs:</p> <p>Issue Resolution</p>			
<p>Customer:</p> <p>Care Worker</p>			
<p>Supplier:</p> <p>Care Worker Line Management</p>			

Process Description Form

PROCESS	Provide Supervision of Workers in Care Area.	LEVEL NO.	
<p>Description: This process involves management Supervision and Clinical/Professional Supervision. Under management supervision the main issues are:-</p> <ul style="list-style-type: none"> • Agreed induction process; • Delegation/Support; • Formal Appraisal; • Effective Communications; • Team approach to developing staff; • Agreed standards; <p>Within Clinical and professional Supervision the main issues are:-</p> <ul style="list-style-type: none"> • Effective Case management:- standards, quality, Cost Effectiveness; • Establish priorities with workload management; 			
<p>Frequency: On-going</p>		<p>Triggers: Audit new staff, annual appraisal systems, individual staff members, complaints, public representatives, individual issues, crisis.</p>	
<p>Inputs: Senior staff, changes.</p>			
<p>Outputs: Efficient service, consumer satisfaction.</p>			
<p>Customer: Staff</p>			
<p>Supplier: Service Provider, department heads.</p>			

Process Description Form

PROCESS	Provide Training, Education and Research.	LEVEL NO.	
<p>Description:</p> <p>Identification of training needs, keeping up to date with developments, organising and evaluating training courses, Dissemination of training material, liaise with special interest groups, case discussions, further education, access to appropriate documentation is important and increased use of the Internet will be made for this purpose.</p>			
<p>Frequency:</p> <p>On-going</p>		<p>Triggers:</p> <p>Changes in client needs, changes in methods of service provision, professional needs of service providers, research information.</p>	
<p>Inputs:</p> <p>Financial resources, training courses (night courses, day release courses), internet information.</p>			
<p>Outputs:</p> <p>Trained and motivated staff, better service to clients, efficient and effective service..</p>			
<p>Customer:</p> <p>Service Provider Staff</p>			
<p>Supplier:</p> <p>Eastern Health Board</p>			

Process Description Form

PROCESS	Provide Plan Service	LEVEL NO.	
<p>Description: This involves:-</p> <ul style="list-style-type: none"> • Describe health status; • Describe services in place; • Setting aims and objectives; • Take account of groups with special needs e.g. Travellers; • Knowledge of resources required; • Evaluation. <p>It may be advisable in some cases to pilot the plan and share information and results with other areas.</p>			
<p>Section Responsible:</p> <p>Service provider departments.</p>			
<p>Frequency:</p> <p>On-going, short-term, long-term, annually.</p>		<p>Triggers:</p> <p>Resources, Strategy Documents, budget, identification of needs, new service, year end.</p>	
<p>Inputs:</p> <p>Financial resources, staff, information, census information, public representations, service requests.</p>			
<p>Outputs:</p> <p>Improved service, development of service, effective and efficient service, healthy clients, information for audit, pilot/revise a plan and provide results to other areas.</p>			
<p>Customer:</p> <p>Services, clients, special groups, senior management, Department of Health.</p>			
<p>Supplier:</p> <p>Service planners</p>			

Process Description Form

PROCESS	Audit Service Provision	LEVEL NO.	
<p>Description:</p> <p>The key issues here are having the necessary information to carry out effective on-going audits and defining appropriate parameters for audit. It is necessary to define activity, outcome, performance indicators, specify targets, produce feedback of results and redefine indicators. Other measures are consumer satisfaction, (waiting lists, accessibility). A standard approach should be adopted and a formal communications structure between Service Providers should be put in place.</p>			
<p>Section Responsible:</p> <p>Service provider disciplines.</p>			
<p>Frequency:</p> <p>On-going, monthly.</p>		<p>Triggers:</p> <p>Child Care Advisory Committee, Eastern Health Board, Department of Health, Minister for Health, Pressure Groups, Clients, Public Representatives, Service Areas Routines, Annual Report, Programme Manager, Evaluation.</p>	
<p>Inputs:</p> <p>Individual staff, records and information, Administrators, Financial Resources and Clients.</p>			
<p>Outputs:</p> <p>Better service, efficient allocation of resources. service plans, improvement in standards, prioritisation.</p>			
<p>Customer:</p> <p>Service, Client (indirectly), Staff.</p>			
<p>Supplier:</p> <p>Professional staff.</p>			

Process Description Form

PROCESS	Plan Prevention Service	LEVEL NO.	
<p>Description:</p> <p>This process identifies the resources required to support a family during an acute or chronic crisis. The focus is on limiting the effect of the crisis in order to prevent the children being taken into care. Use is also made of any 'peer led schemes' which may be relevant, e.g. Community Mother programme. Once it has been decided that a crisis exists, a plan is drawn up by the care workers for subsequent implementation.</p> <p>The approach also relies on both local and international research to provide alternative views as to the best possible mechanism to resolve the crisis.</p>			
<p>Frequency:</p> <p>Daily</p>		<p>Triggers:</p> <p>Family Crisis identified by Care Workers, Notification by Courts, Garda, Hospital, GP, School</p>	
<p>Inputs:</p> <p>Assessment of Crisis</p>			
<p>Outputs:</p> <p>Prevention Plan</p>			
<p>Customer:</p> <p>Family, Child, Courts</p>			
<p>Supplier:</p> <p>Care Workers</p>			

Process Description Form

PROCESS	Provide Social Work Services for children	LEVEL NO.	
<p>Description:</p> <p>There are many classifications of what are known as Social Work Services. These services are driven by the assessment of client needs (both at the group and individual level). Some of the services provided include the provision of 'drop in' family centres, the provision of foster families, child care and family support services. Needs of individual clients are assessed by the care workers and services provided as required. Services provided to meet with the needs of disadvantaged groups are assessed over a period of time and are included in the overall planning stage.</p> <p>Specific Services are also provided out of hours and a special team of care workers support this need.</p>			
<p>Section Responsible:</p> <p>The provision of services to individual clients are the responsibility of the Care Workers involved. Planning the provision of services to disadvantaged groups are the responsibility of the appropriate management teams.</p>			
<p>Frequency:</p> <p>Provision of services to groups is on as required basis; individuals on a daily basis.</p>		<p>Triggers:</p> <p>Assessment of Client and Group needs</p>	
<p>Inputs:</p> <p>An assessment of needs are presented to the process and decision is taken as whether a genuine need exists. Based on this assessment the Care Worker or management team will either provide the services required, if available, or investigate the possibility of providing such services at a future date. Additional inputs include information from schools, GPs, Legislation (court orders) and local knowledge.</p>			
<p>Outputs:</p> <p>Provision of services</p>			
<p>Customer:</p> <p>Individual client or disadvantaged group,</p>			
<p>Supplier:</p> <p>Community, Garda, GPs, etc</p>			

Process Description Form

PROCESS	Provide Intervention and Management Services	LEVEL NO.	
<p>Description:</p> <p>This process is involved in developing intervention plans for children at risk. These plans also require that the resources available for their support should also be effectively managed.</p> <p>Issues to be dealt with are :</p> <ul style="list-style-type: none"> where should the services be delivered e.g. school, clinic, home the use of block therapy (a period of time blocked exclusively with a care worker) Frequency of service encounters required Facilitate direct or indirect intervention Prioritise the waiting list Review the outcome of the various service encounters 			
<p>Frequency:</p> <p>Daily</p>		<p>Triggers:</p> <p>Assessment of results</p>	
<p>Inputs:</p> <p>Assessment by Care Workers and other agencies</p>			
<p>Outputs:</p> <p>Produce Guidelines, or referral to other agencies or indirect intervention</p>			
<p>Customer:</p> <p>Family of child, child and other referral agencies</p>			
<p>Supplier:</p> <p>Care Workers</p>			

Process Description Form

PROCESS	Liaison between Agencies	LEVEL NO.	
Description: To provide appropriate liaison between internal/external agencies and voluntary/statutory agencies. This must have regard to the consent of the client and confidentiality.			
Frequency: On-going		Triggers: Client needs, service needs.	
Inputs: Individual service provider areas, professional and administrative input.			
Outputs: Improved service.			
Customer: Other agencies Eastern Health Board.			
Supplier: Other agencies Eastern Health Board.			

Process Description Form

PROCESS	Provide Screening Services *	LEVEL NO.	
Description:			
<p>The purpose of this service is to provide appropriate early warning services which screen and detect potential problems in children as early as possible, and refer them to the appropriate service provider. In the area of Public Health it takes the form of advice and examinations.</p>			
Frequency:		Triggers:	
On-going		GP referrals, other referrals, self referrals, parental contact, birth notifications, age related (school examinations) and movement into an area.	
Inputs:			
Skilled professional staff, information, unscreened clients, financial resources.			
Outputs:			
Referrals, counselling advice, provision of treatment, healthy clients, crisis intervention.			
Customer:			
Child to age 3, 6, 14 and 18 years depending on service and legal position.			
Supplier:			
Providers of Children's Services.			

Process Description Form

PROCESS	Provide Detection Services	LEVEL NO.	
<p>Description: This process is involved in providing detection services where problems identified can be treated or referred to the appropriate service provider.</p>			
<p>Section Responsible: Dental Services, Public Health Nurses, Medical Officers, Psychiatry/Psychology Service, Speech and Language Therapy Staff.</p>			
<p>Frequency: On-going</p>		<p>Triggers: As Screening/Detection.</p>	
<p>Inputs: As Screening/Detection.</p>			
<p>Outputs: As Screening/Detection.</p>			
<p>Customer: Child up to the age of 18 depending on service/legal position.</p>			
<p>Supplier: Providers of Childrens' Services.</p>			

Process Description Form

PROCESS	Provide Referral Services	LEVEL NO.	
Description:			
This involves the provision of information between professional service providers on a need to know basis. An important issue here is confidentiality.			
Section Responsible:			
Dental Services, Public Health Nurses, Medical Staff, Child Psychiatry Staff, Speech and Language Therapy Staff, Social work Service, GP's.			
Frequency:		Triggers:	
On-going		Examination of child.	
Inputs:			
Skilled professional staff.			
Outputs:			
Appropriate treatment for child.			
Customer:			
Child.			
Supplier:			
Providers of Childrens' Services.			

Process Description Form

PROCESS	Provide Assessment Services	LEVEL NO.	
Description:			
<p>This can result from the processes of Screening/Detection, Detection or Referral from any other provider of childrens services or self referral. An effective assessment would assure that all necessary information is available to the provider carrying out the assessment.</p>			
Section Responsible:			
<p>GP's, P.H.N.'s, Social Workers, Dental/Orthodontic Service, Speech and Language Therapists, Area Medical Staff, Child Psychiatry/Psychology Staff.</p>			
Frequency:		Triggers:	
On-going		Screening/Detection, Detection, Referral by another professional, Self Referral.	
Inputs:			
<p>Skilled professional staff. Information financial resources.</p>			
Outputs:			
<p>Correct treatment plan for client..</p>			
Customer:			
<p>Child.</p>			
Supplier:			
<p>Providers of Childrens' Services.</p>			

Process Description Form

PROCESS	Provide Assessment Services	LEVEL NO.	
Description:			
The purpose of this process is to facilitate the diagnosis and develop an appropriate treatment plan for a child. The physical and psychological needs are assessed by this process.			
Section Responsible:			
GPs, psychologists, psychiatrists, Care Workers,			
Frequency:		Triggers:	
Daily		Self referral, other agencies	
Inputs:			
Background Information such as child medical history, family background, etc.			
Outputs:			
Treatment Plan			
Customer:			
Other Agencies, Child			
Supplier:			
Various Care Workers			

Process Description Form

PROCESS	Manage Case Load	LEVEL NO.	
<p>Description:</p> <p>This process ensures that Cases are prioritised in a consistent way and that work-loads for individual care workers are distributed in an equitable manner. Effectively, it is the responsibility of managers to ensure that an agreed set of criteria are used and inequities are minimised throughout the area.</p> <p>In order to manage Case workload, a provision for out of hours service (using 2 welfare officers) is made.</p>			
<p>Section Responsible:</p> <p>Managers</p>			
<p>Frequency:</p> <p>Daily</p>		<p>Triggers:</p> <p>Changes in Case Workload</p>	
<p>Inputs:</p>			
<p>Outputs:</p> <p>Successfully managed Case Workload</p>			
<p>Customer:</p> <p>Care Workers</p>			
<p>Supplier:</p>			

Process Description Form

PROCESS	Manage Case Conference	LEVEL NO.	
Description:			
Report to DCC, Manage stress related issues, make major decision and disseminate information to participants			
Section Responsible:			
Care Worker			
Frequency:		Triggers:	
As required		Level of Concern identified by Care Worker	
Inputs:			
Various reports from Social Workers, PHN, GPs, Child Guidance, Schools			
Outputs:			
Minutes and Decisions			
Customer:			
Child, Family Care Workers			
Supplier:			
Care Workers			

Process Description Form

PROCESS	Manage Team Approach	LEVEL NO.	
<p>Description:</p> <p>This process seeks to provide a mechanism for an effective multi-disciplinary approach. It must take account of appropriate team interviews, case management, liaison with internal/external agencies and case conferences.</p>			
<p>Section Responsible:</p> <p>P.H.N.'s, Area medical Staff, Social workers, Speech/Language.</p>			
<p>Frequency:</p> <p>On-going</p>		<p>Triggers:</p> <p>Crisis presenting problem, ethos.</p>	
<p>Inputs:</p> <p>Skilled professional staff, client needs.</p>			
<p>Outputs:</p> <p>Better communication, changes in policy, enhanced multi-disciplinary approach.</p>			
<p>Customer:</p> <p>Staff multi-disciplinary team, client.</p>			
<p>Supplier:</p> <p>Eastern Health Board</p>			

Process Description Form

PROCESS	Provide Prevention Service	LEVEL NO.	
Description			
Frequency: Daily		Triggers:	
Inputs:			
Outputs:			
Customer:			
Supplier:			

Process Description Form

PROCESS	Administer Prevention Service Support	LEVEL NO.	
Description:			
<p>This process administers the support activities which are required by the Prevention Services. For example, funding to Care Families (allowances, weekly payments, etc.) are made by this process. Records are maintained of payments made. Public Health Nurse records are also maintained within this area. The recruitment of new foster families and maintenance of lists of foster families are part of the activities of this process</p>			
Frequency:		Triggers:	
Daily		New Foster Care Family Recorded, Payments/Allowances required by Foster Care Family	
Inputs:			
Outputs:			
Funding			
Customer:			
Foster Care Family, Child			
Supplier:			
Administration			

Process Description Form

PROCESS	Provide Primary Prevention Service	LEVEL NO.	
Description: This process ensures the provision of the primary prevention services such as Family Support, Education, Immunisation Services, Ante-natal services, PHN and on-going work with professional groups such as Teachers, GPs, other Care Agencies.			
Frequency: Ad hoc on demand		Triggers: Identified Community needs, Health Care Strategy	
Inputs: Community based research			
Outputs: Refined decision making processes			
Customer: Community, GPs, Education Services, PHNs,			
Supplier: (This field is currently empty)			

Process Description Form

PROCESS	Provide Secondary Preventative Services	LEVEL NO.	
Description: The purpose of this process is to deal with the crisis/problem once identified. This is can be achieved by various screening processes (e.g. child developmental screening) or the care workers being alerted by various agencies or interested parties, such as GP, Family, Garda, Hospital A&E.			
Frequency: Daily		Triggers: Problem notified by interested party	
Inputs: Problem classification and quantification			
Outputs: Resolution plan			
Customer: Client			
Supplier: Care Workers			

Process Description Form

PROCESS	Provide Tertiary Level Services	LEVEL NO.	
Description: This process is involved in the management of the services once the child is admitted into care.			
Frequency: Daily		Triggers: Need identified	
Inputs: Child based information such as family history/background, medical reports, School attendance records, background case-history			
Outputs:			
Customer:			
Supplier:			

KIN Description Form

INFORMATION NEED	Intervention and management services.	ITEM NO.	
Type: Operational/Executive.			
Description: <ul style="list-style-type: none"> • Birth notifications. • Referral information. • School rolls. • Movement of families. • Information from RICHS. • Referral destination and source. • BCG/School Booster - input onto child health. • More detail on MMR statistics. • Feedback from developmental examinations. • System integration. • Action taken. • Family details. • Confidentiality information supplied on a need to know basis. • Record keeping. • Perinatal form details. 			
Section Responsible: <ul style="list-style-type: none"> • Hospitals. • Schools. • Client. • Referring agent. 			
Data Mechanism (Paper, phone, computer, etc.): Paper & Computer.		Triggers: Direct request, Client information, Referral information.	
Source: Hospitals and Schools.			
Destination:			
Processing: Record it, Check further information, Acknowledge.			
Notes:			

KIN Description Form

INFORMATION NEED	Provide supervision of workers in care area.	ITEM NO.	
Type: Operational/Executive.			
Description: <ul style="list-style-type: none"> • Information on caseloads. • Information on staff. • Information on staff qualifications. • Financial information (costs). • Priorities within workload. 			
Section Responsible: <ul style="list-style-type: none"> • Department heads. • Client. • Other department heads. 			
Data Mechanism (Paper, phone, computer, etc.):		Triggers:	
Paper and Verbally.		New employee, Observations, Complaints.	
Source: Personnel Department, Client and Staff.			
Destination:			
Processing: Record it and Act on it.			
Notes:			

KIN Description Form

INFORMATION NEED	Audit service provision	ITEM NO.	
Type: Operational/Executive.			
Description: <ul style="list-style-type: none"> • Record statistics. • Record statistics in relation to PHN 'drop-in' clinics. • Performance indicators. • Background information. • Activity. • Outcomes. • Specifying targets. • Consumer satisfaction. • Communications between service providers. 			
Section Responsible: Professional staff.			
Data Mechanism (Paper, phone, computer, etc.): Mixed (paper and IT).		Triggers: New employee, Observations, Complaints.	
Source: Activity and Performance indicators.			
Destination: People doing Audit.			
Processing: Gather information, Analyse information and forms conclusions.			
Notes: 			

KIN Description Form

INFORMATION NEED	Liaison between agencies	ITEM NO.	
Type: Operational/Executive.			
Description: <ul style="list-style-type: none">• Client information.• Other services available internal and external.• Confidentiality - consent of client.			
Section Responsible: Own service Area.			
Data Mechanism (Paper, phone, computer, etc.): Mixed		Triggers:	
Source: Client and Agency.			
Destination: Agency and EHB.			
Processing: Recording, Validation and Acting upon it.			
Notes:			

KIN Description Form

INFORMATION NEED	Manage Team Approach	ITEM NO.	
Type: Operational/Executive.			
Description: <ul style="list-style-type: none">• Case management details.• Multi disciplinary information.			
Section Responsible: Own service Area.			
Data Mechanism (Paper, phone, computer, etc.): Mixed		Triggers:	
Source: Client and Agency.			
Destination: Agency and EHB.			
Processing: Recording, Validation and Acting upon it.			
Notes:			

KIN Description Form

INFORMATION NEED	Provide plan Services	ITEM NO.	
Type: Operational/Executive.			
Description: <ul style="list-style-type: none"> • Epidemiological information. • Population profile. • International research. • Special groups. • Identify needs. • Describe health status. • Knowledge of resources. 			
Section Responsible: <ul style="list-style-type: none"> • EHB staff. • Multi- disciplinary. 			
Data Mechanism (Paper, phone, computer, etc.):		Triggers:	
Mixed			
Source: Questionnaire, Research, Census of population and Annual reports.			
Destination: EHB and EHB staff.			
Processing: Gather information, Analyse information, Multi- disciplinary element, Prepare plan, Pilot plan and revisions of it, Share information with other areas and produce Results.			
Notes:			

KIN Description Form

INFORMATION NEED	Provide training, education and research	ITEM NO.	
Type: Operational/Executive.			
Description: <ul style="list-style-type: none"> • Suitable training courses. • Identify training needs. • Course evaluation. • Staff qualifications. • Update training requirements. 			
Section Responsible: <ul style="list-style-type: none"> • EHB staff. • Multi- disciplinary. 			
Data Mechanism (Paper, phone, computer, etc.): Mixed		Triggers:	
Source: Questionnaire, Research, Census of population and Annual reports.			
Destination: EHB and EHB staff.			
Processing: Gather information, Analyse information, Multi-disciplinary element, Prepare plan, Pilot plan and revisions of it, Share information with other areas and produce Results.			
Notes:			

KIN Description Form

KIN Description Form

INFORMATION NEED	Case History	ITEM NO.	
Type: Executive/Operational			
Description: Record new referrals, Family Data, Incidences of Child Abuse, Care Types, Respite Care (Foster or Natural), Children in Care			
Section Responsible: Agencies, such as GPs, Child Guidance, Hospitals, Garda etc.			
Data Mechanism (Paper, phone, computer, etc): Paper, Computer (SWIS), Fax, Phone		Triggers:	
Source:			
Destination:			
Processing:			
Notes:			

KIN Description Form

KIN Description Form

INFORMATION NEED	Child History	ITEM NO.	
Type: Mainly Operational			
Description: To record the family history, school attendance, GP, Public Health Nurse, Child Welfare Workers, Child details, such as weight, height, development milestones, Immunisation uptake and formal assessment results.			
Section Responsible: Those who collate the information.			
Data Mechanism (Paper, phone, computer, etc): Paper, Phone		Triggers:	
Source: Various external agencies			
Destination: Child assessment for the Courts, Case Conferences, Schools (with parental consent) and referral services.			
Processing:			
Notes:			

KIN Description Form

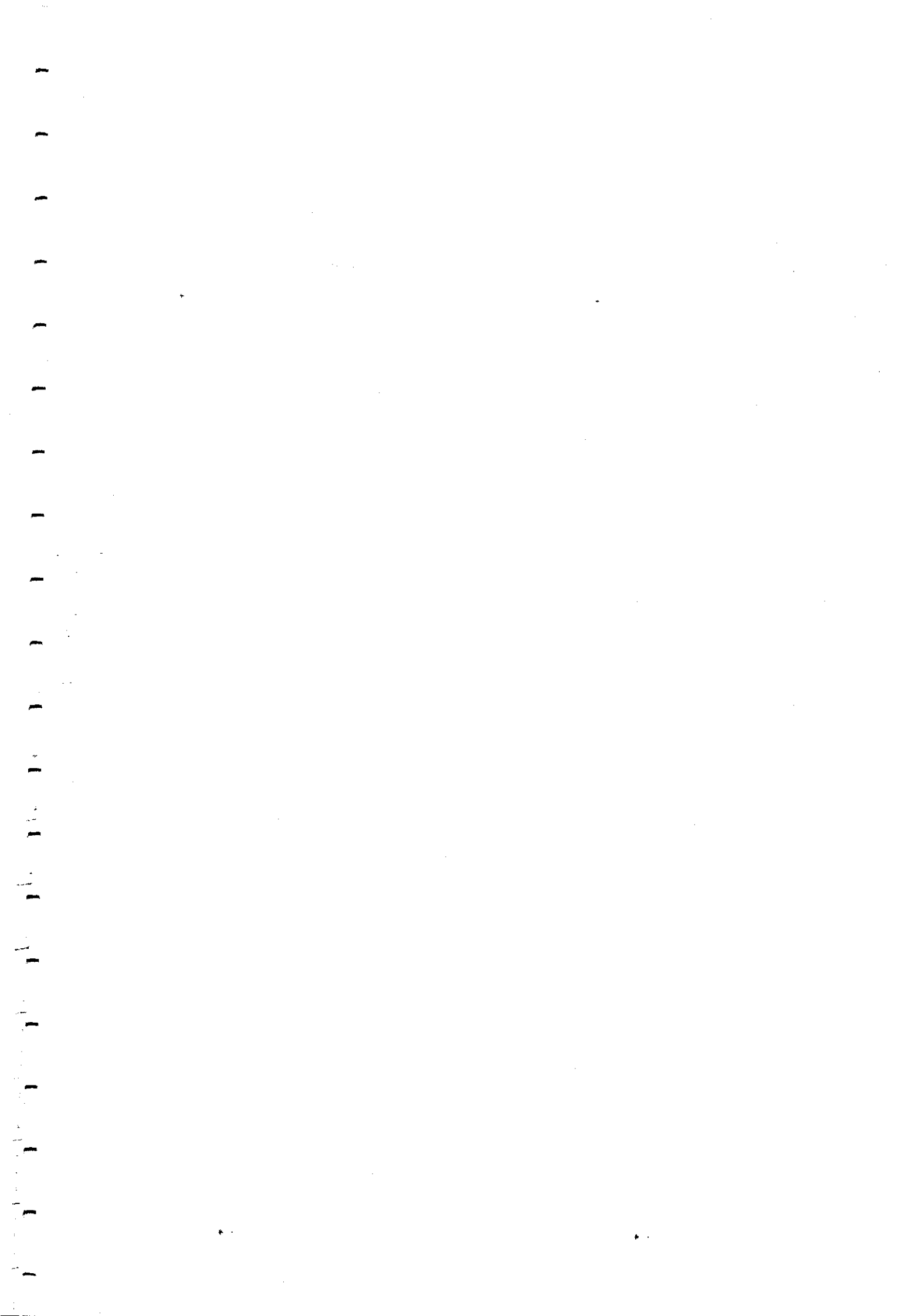
KIN Description Form

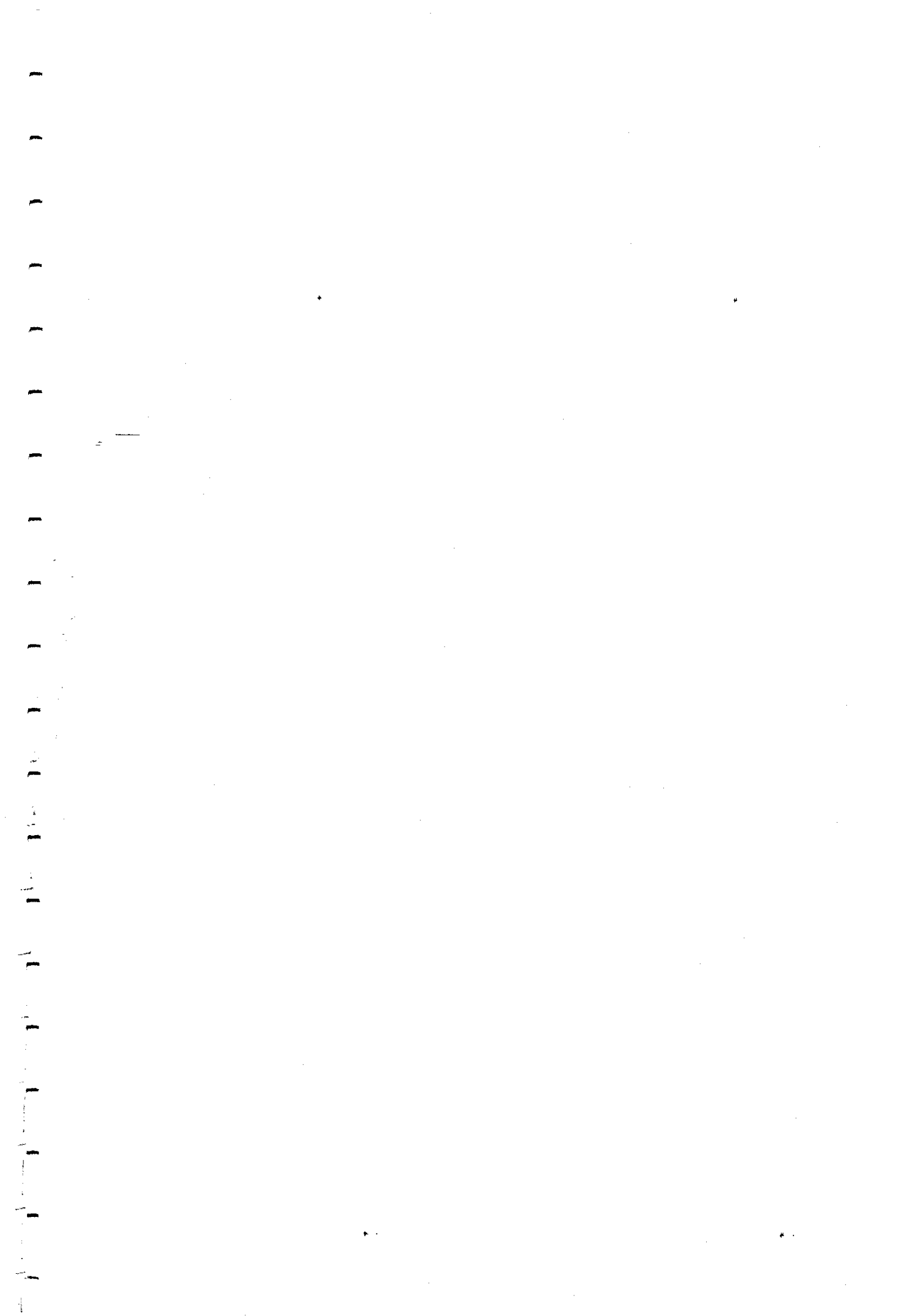
INFORMATION NEED	Available Services	ITEM NO.	
Type: Executive/Operational			
Description: The list and status of support services should be held centrally. This list should detail the services available, (rates, if applicable) to any EHB Client together with the Area/Section/Person responsible for the delivery.			
Section Responsible: All areas responsible for the delivery of services should ensure that the list is maintained and is current.			
Data Mechanism (Paper, phone, computer, etc): No mechanism currently exists, however		Triggers: New Services, change in the status of current services	
Source: Service plans			
Destination: Information/Enquiry process			
Processing:			
Notes:			

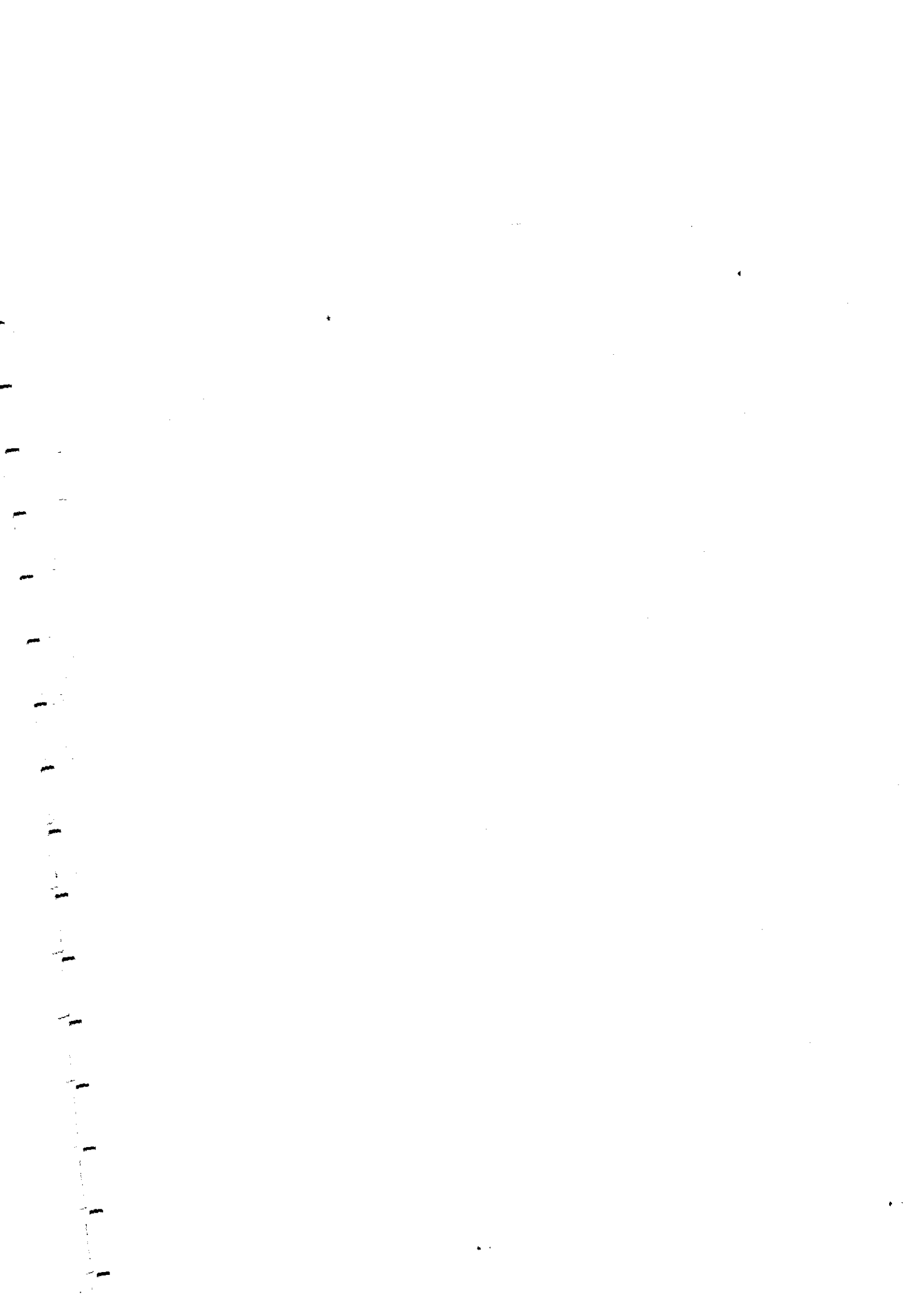
KIN Description Form

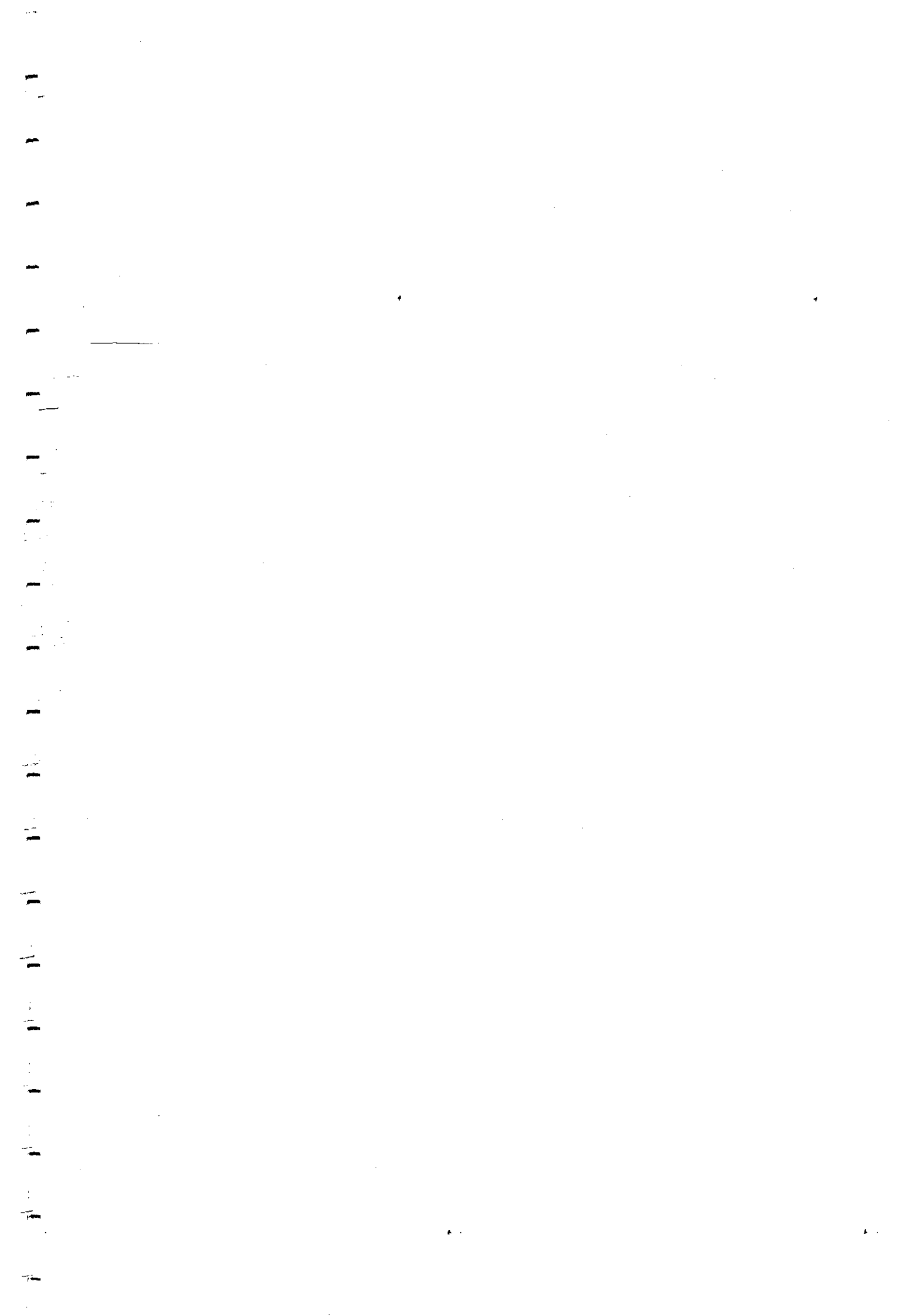
KIN Description Form

INFORMATION NEED	Involvement History	ITEM NO.	
Type: Executive/Operational			
Description: Focused to allow for the recording of all aspects of the involvement between EHB Staff and the Client.			
Section Responsible: Any section initiating the involvement			
Data Mechanism (Paper, phone, computer, etc): Paper, Computer		Triggers: Involvement Initiation	
Source:			
Destination:			
Processing:			
Notes:			









KIN Description Form

KIN Description Form

INFORMATION NEED	Payments	ITEM NO.	
Type: Operational			
Description: The EHB issues substantial payments to their client base. A detailed breakdown of every payment made should be readily available and accessible to appropriate systems/personnel.			
Section Responsible: The relevant section/area making the payment/allowance.			
Data Mechanism (Paper, phone, computer, etc): Currently both paper and computer. Should ideally be computer only.		Triggers: Payment generation	
Source: Payments Sections			
Destination: Client			
Processing:			
Notes:			