



**Ginny Hanrahan
CEO**

Response to

**Public Service Agreement 2010 -2014 (Croke Park Agreement)
CIVIL SERVICE AND NON-COMMERCIAL STATE AGENCY SECTOR
STATE AGENCY ACTION PLAN**

06.01.10

Public Service Agreement 2010 -2014 (Croke Park Agreement)
CIVIL SERVICE AND NON-COMMERCIAL STATE AGENCY SECTOR
STATE AGENCY ACTION PLAN
For submission by 25th December 2010

1. Better human resource management *Actions to include under this heading include reductions in numbers, redeployment, reconfiguration of service delivery, revisions in attendance arrangements, better attendance and absence management, etc.*

Terms of the Public Service Agreement 2010 – 2014 (refer to all relevant paragraphs)	Action	Timeframe	Benefits Arising 2010 - 2014
<p><i>Specific action proposed by Coru</i> <i>Delivering a self funding agency which will regulate c.20,000 health and social care professionals for the first time on a statutory basis</i></p> <p><i>This will lead to regulation of these professions, with greater accountability, approved standards of proficiency and clear requirements of professional conduct</i></p>	<p>Established in 2008, Coru has approached all of its work in a lean and efficient manner. The Business Plan is outcome based with clear measurable objectives and deliverables based on available resources</p> <p>To establish and open the Social Workers Register</p> <p>Radiographers Registration Board to be appointment by Minister Radiographers Register established and opened</p> <p>Legislative amendments to the Health and Social Care Professionals Act 2005 to allow the transfer of the Opticians Board Opticians Register Transferred</p>	<p></p> <p>Q2 2011</p> <p>Q1 2011 Q4 2011</p> <p>Q2/3 2011 Q4 2011</p>	<p>By 2014, estimate 16,000 health professionals will be eligible & obliged to apply for statutory registration. Estimated that Coru will be 80% self funding by 2014 & 100% self funding by 2015</p> <p>Meeting legal requirements 1st step to dealing with registration, education and Fitness to Practise issues and placing the Social Workers profession on a statutory regulation basis</p> <p>As above for Radiographers</p> <p>Subject to legal amendments and appointment of the Opticians Board(s), will deal with</p>

	<p>Physiotherapists Registration Board to be appointed by Minister Physiotherapists Register established and open</p> <p>Continue programme of establishment of Registration Board Registers for the remaining professions subject to resources and Ministerial appointment for Occupational Therapists, Speech and Language Therapists, Podiatrists, Medical Scientists, Chemical Biochemists, Dietitians, Psychologists, Orthoptists and Social Care Workers</p>	<p>Q3 2011 Q2 2012</p> <p>To be complete by 2015</p>	<p>registration, education and Fitness to Practise issues for Opticians Board for first time and update legislation from 1957</p> <p>As outlined above for Social Workers for Physiotherapists</p> <p>As outlined for Social Workers for all of the professions</p>
Redeployment (2.9.1, 4.3 & 4.17)	<p>This assumes initial seed funding has been provided by the DOHC. It is our intention to work with the Croke Park Agreement, as a mechanism for providing us with staff. This will ultimately result in a net saving to the Exchequer as Coru will become a self-funding agency.</p> <p>Early re-deployment of staff will help us move to self funding at a quicker pace. With current resources, we anticipate that we will be fully self-funding by 2015 with exchequer funding required gradually being reduced year on year, as we commence registration.</p> <p>2010:-4 posts agreed with the Department of Finance for redeployment, Location has been now decided in Sandyford to an existing building that is being funded by DOHC To move to this in February 2011.</p> <p>Funding has been received to provide 5 additional posts through redeployment subject to Dept of Finance agreement. It is intended to advertise these initially within the DOHC agencies and we hope we will have interested parties.</p>	<p>See above</p> <p>Q1 2011 redeployment of 4 staff to Coru</p> <p>All posts ultimately to be funded by self-funding agency</p> <p>Additional 5 posts to be agreed with DOF</p>	<p>Coru should be self funding by up to 80% in 2014 and would anticipate fully self funding by 2015</p>

FAS Placement Programmes (4.18)	Coru are willing to partake in this programme, with accommodation office decided in Sandyford, with the redeployment of staff. Would be keen to be involved	Mid 2011	
Implementation of Strategic HR Management	Coru will implement Strategic HRM processes that clearly link service delivery requirements with competences, experience and staff development	2011	Productivity and service delivery culture
	Implementation of Performance Management system that places responsibility on all staff members to demonstrate how they add value to Coru services and processes with clear accountability. Deliverables are linked to business plan and overall strategy.	2011	All staff add value.
2. Better Business Processes <i>Actions under this heading would include efficiency measures including procurement, revisions to business process, reconfigurations and other changes to service delivery options, including sharing of service, revisions to regulatory/inspection actions, and so on.</i>			
	Terms of the Public Service Agreement 2010 – 2014	Timeframe	Estimated Savings/Benefits Arising 2010 - 2014
Dissolution of Agencies	National Social Workers Qualification Board 6 posts to transfer to HSCPC.	9 th March 2011	Reduced number of agencies, leading to economy of scale. The HSCPC staff will be able to support all 14 professions and ensure Fitness to Practise is in place for all. Estimated saving of €0.5m per annum on dissolution of NSWQB Previous cost of funding these agencies from the exchequer now borne by service users (registrants). Estimated saving of €3.5m per annum when PHECC functions are transferred to Coru.
	Opticians Board transfer of 1-2 posts. Discussions on-going currently. Legal amendments to Health and Social Care Professions Act 2005 to take place 2011	2011	
	Pre Hospital Emergency Care Council	2014/5	

Outsourcing (Service Delivery Options Principles 10)	<p>As a new organisation, with low staff numbers, we are well placed to use outsourcing as a mechanism to support the administrative functions required for registration, as we grow and develop. This will help us to deal with peaks and troughs of application numbers and will also ultimately minimise the number of staff we need to employ to provide this service. We have researched providers in Ireland and would hope to further prepare for outsourcing at the end of 2011 with a view to advertising for tenders in 2012.</p>	2012	Likely to reduce about 5 staff in direct employment by a public body
Procurement – Value for Money (Service Delivery Options Principle 2)	<p>Coru are committed to using the OPW publically negotiated procurement agreements where possible and see this as a way of reducing many organisations going through this expensive and time consuming process. We currently use the DOF framework agreements for IT equipment and mobile phone services</p> <p>We are also part of the Health and Social Care Regulators Forum who currently have joint initiatives to reduce cost and get better value for all agencies in areas such as internal audit (2011), and other issues as we progress.</p> <p>All regulators of Health Professions - Medical Council, An Bord Altranais, Pharmaceutical Society of Ireland, Dental Council and Coru are working together to see if we can reduce the legal costs for dealing with Complaints and Fitness to Practise issues. This is in the initial phase & will require legal amendments for all of the Acts. Medical Council currently taking the lead on this matter.</p>	2011 2011 2014 subject to a lot of work, legal amendments	
Business Process Management	All business processes have been mapped and carefully analysed to identify process efficiencies and to facilitate continuous improvement. All unnecessary steps / activities that lead to excessive administration have been eliminated. All processes are subject to continuous review and quality management underpins our Statement of Strategy	2011 - 2015	Increased savings in administration. Reduced burden on registrants. Simpler processes for the public to access services

3. Delivering for the Citizen *Actions under this heading would include efficiency measures and improvements to the processes by which your Department/body delivers its services to the public, including changes to the technology used, better data management, including around identity, and so on.*

Terms of the Public Service Agreement 2010 - 2014	Action	Timeframe	Estimated Savings/Benefits Arising 2010 - 2014
<p>2.2(h) “for further development and utilising the skills of all health professionals through the introduction of expanded roles and direct referral pathways.....”</p>	<p>Expansion of Roles for the 12 Statutory Registered Professions. This will allow roles to expand to the betterment of the citizen and improve the efficiency of the Health and Social service system. Many of the professions have been asking to deliver expanded roles to the service. The professions will be answerable for any work they undertake independently within an agreed code of Professional Conduct and Ethics. This has proven to be a stumbling block for some of the potential profession developments to date. This is an ideal opportunity to increase the value of the work of these professions. Some examples include</p> <p>Radiographers-introduction of the “red dot” system where experienced radiographers will review x-rays and can give an indication of a problem by using red dots on the x ray images, to alert medical colleagues.</p> <p>Physiotherapists have already commenced this work with the training of Physiotherapists to triage patients for back surgery, resulting in earlier intervention and freeing up medical staff, with ongoing economic gains</p> <p>Speech and Language Therapists involvement with videofluoroscopy for swallowing difficulties helping an interdisciplinary team to diagnose the reason for patients having swallowing difficulties. The earlier this occurs, the</p>	<p>Due for registration late 2011</p> <p>Due for registration in 2012</p> <p>Due for Registration 2013</p>	<p>This would result in speedier reviews of patients with potential knock-on impact in cost per patient. Increased patient safety</p> <p>Patient safety, earlier intervention, reducing patients with back injuries waiting times to be reviewed. Focussing medical intervention on patients who need this interventions</p> <p>Patient safety, impact on length of stay and could possibly reduce expensive treatments of these patients</p>

	less chance there is of death or serious injury once the team are aware of the issues, this can impact the length of stay and reduce some of the expensive treatments of these patients, if addressed early.		
Direct impact on the Citizen	<p>Social Workers Register to be established and opened</p> <p>Radiographers Registration Board to be appointment by Minister Radiographers Register established and opened</p> <p>Legislative amendments to the Health and Social Care Professionals Act 2005 to allow the transfer of the Opticians Board Opticians Register Transferred</p> <p>Physiotherapists Registration Board to be appointed by Minister Physiotherapists Register established and opened</p> <p>Continue programme of establishment of Profession Registers for the remaining professions subject to resources and Ministerial appointment of Registration Boards for Occupational Therapists, Speech and Language Therapists, Podiatrists, Medical Scientists, Chemical Biochemists, Dietitians, Psychologists, Orthoptists and Social Care Workers</p>	<p>Q2 2011</p> <p>Q1 2011 Q4 2011</p> <p>Q2/3 2011</p> <p>Q4 2011</p> <p>Q3 2011 Q2 2012</p> <p>To be complete by 2015</p>	<p>Meeting legal requirements 1st step to dealing with Fitness to Practise issues and placing the Social Workers profession on a statutory regulation basis</p> <p>As above for Radiographers</p> <p>Subject to legal amendments and appointment of the Opticians Board(s), will deal with Fitness to Practise issues for Opticians Board for first time and update legislation from 1957</p> <p>As outlined for Social Workers for Physiotherapists</p> <p>As outlined for Social Workers for all of the professions</p>