



HSCP Office Newsletter



Welcome to Issue 6 of the National Health and Social Care Professions (HSCP) Office Newsletter. The National HSCP Office, established in 2017, is part of the HSE’s Chief Clinical Officer Division.

Developing a National HSCP Strategy: a Co-design Approach

In our last newsletter, we told you about the process planned to co-design a new national strategic framework for HSCP. The purpose of the new strategy is to create a shared understanding and direction for HSCP so that our full potential can be realised to deliver for service users.

The aim is to create a living document that will support HSCP and services in planning and working together to realise the full impact and value of the Health and Social Care Professions in the delivery of Sláintecare.

We started the process on 2nd July 2019 with a *Confirm and Challenge* workshop, bringing together HSCP from across the system along with representative bodies, to discuss and agree our approach and process towards co-creation of the strategy.

During September, we held a series of



face-to-face workshops in Cork, Galway, Sligo, Dublin and Tullamore. All workshops included a mix of HSCP from across



all grades and services and service users.

In parallel, we held an online workshop where people could interact with the same questions and review and build on contributions from others. The platform was anonymous so that all ideas and comments could be considered on their merits without linking to individuals or professions. Over 800 HSCP, service users and managers have participated so far in the face-to-face and online workshops contributing some 2000 ideas and 8000 votes.

We have now coded and analysed all of that data, triangulated it with our review of national documents and policy as well as senior leadership priorities and views. From this, a series of high level statements were written. These are divided into three areas – our value, our commitments, the support needed.

A second online workshop took place for two weeks in November to seek views on these high level statements. Contributions from this workshop are now being reviewed.

This feedback, along with other relevant national strategy and policy information, will be used to further refine the themes, creating a small number of high level statements to inform the framework. Publication is planned for Spring, 2020.

Huge thanks to everyone who has contributed to co-creating our HSCP Strategy.

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DEVELOPING A NATIONAL HSCP STRATEGY—IN ACTION!



HSCP Professional Supervision Training Programme

Congratulations to the newest group of Professional Supervision Trainers from across the health service who, in October, completed the *Train The Trainer (TTT) Professional Supervision Training Programme for HSCP Supervisors*.

During 2020, these trainers will be delivering the Professional Supervision Training Programme nationwide.

Look out on the HSCP Hub on HSEland for details of the Professional Supervisee Training Programme to be launched in 2020.



Clinical Leadership Competency Framework

We are delighted to announce that the Clinical Leadership Competency Framework (CLCF), developed in partnership with the National Clinical Leadership Centre for Nursing and Midwifery (NCLC), went live in November, 2019.



Who can use the CLCF?

The CLCF has been designed to support all Nursing and Midwifery grades up to and including CNM/CMM Grades 2 or equivalent. Within the Health and Social Care Professions, the CLCF is applicable for those in Staff Grade and Senior Grade roles.



What is the CLCF?

The CLCF is an e-learning resource designed to provide healthcare professionals with the necessary knowledge and tools to support their clinical leadership competency development.



What is the background to the CLCF?

The CLCF is a partnership between the National Clinical Leadership Centre for Nursing and Midwifery (NCLC) and the National Health and Social Care Professions (HCSP) Office who share a strong commitment to leadership development. The CLCF builds on and replaces the previous Clinical Leadership Competency e-Portfolio (NCLC, 2015).



What are the benefits of using the CLCF?

The CLCF is a flexible and individualised mode of learning where health care professionals can assess their leadership strengths and developmental needs. An extensive suite of resources can be accessed to support identified learning needs and users can link this learning to their digital Professional Development Planning (Nurses and Midwives) and My PDP (HSCP).

Go to www.hseland.ie

↓

Click on Course Catalogues

(tab on top tool bar)

↓

Click on CLCF

(tab on top tool bar)

Empowering Self and Others Programme for Healthcare Professionals

The National HSCP Office, in partnership with the National Clinical Leadership Centre for Nursing and Midwifery, delivered the first integrated *Empowering Self and Others* Programme for Healthcare Professionals in November, 2019.

This Programme complements the CLCF and is underpinned by the seven leadership competencies addressed in the CLCF.



There will be further integrated programmes in 2020. Watch out for updates on the HSCP Hub on HSElandD.

'True leaders don't create followers, they create more leaders.'

Inaugural HSCP Conference – October, 2019

The first National HSCP Conference was hosted on 1st October promoting the theme of *Connections, Confidence, Collaboration*. We were delighted to welcome 330 delegates on the day to hear keynotes from Ms Laura Magahy, Executive Director, Sláintecare Programme Implementation Office and Dr. Lynne Douglas, Director of AHP, NHS Lothian, Scotland.

We also had the opportunity to hear very high quality and truly inspiring presentations from the three winners of the HSCP Best Practice and

Innovation Awards. See HSCP Hub on HSEland for more details.

There were also parallel workshops with a breadth of excellent presentations from HSCP who had been shortlisted for the awards as well as some invited projects. The afternoon saw a focus on leadership. Dr. Sinéad Hanafin presented on the Leadership Study commissioned by the National HSCP Office. In addition, the Clinical Leadership Competency Framework, a collaborative project with colleagues in the National Clinical

Leadership Centre for Nursing and Midwifery, was presented.

The day concluded with an interesting panel discussion on HSCP leadership expertly chaired by Tina Joyce, Programme Director, RCSI Institute of Leadership. The panel featured Ms. Anne O' Connor, HSE Chief Operations Officer, Dr. Colm Henry, HSE Chief Clinical Officer, Mr. Damien Nee, Service User Representative and Ms. Una Cunningham, Chair HSCP Directorate & Head of Transformation, Mater Hospital.



HSCP Conference KEY MESSAGES

Key messages from the day include an invitation from Laura Magahy for HSCP to engage in development of the new regional structures and processes to facilitate delivery of population based integrated care – an opportunity not to be missed. Key messages from Dr. Lynne Douglas focused on the considerations that enabled AHP in Scotland to deliver their own workforce and transformation and included:

- ⇒ Empowered clinical and strategic leaders working with policy makers and connecting with front-line staff
- ⇒ Upskilling the workforce on quality improvement methodology to evidence the impact of change
- ⇒ Leadership development and influencing within their integrated boards

- ⇒ Workforce planning and underpinning education and training required to meet the clinical demands of new roles

Slides from the presentations on the day are available under conferences/workshops on the HSCP Hub on www.hsland.ie.



HSCP Leadership Study

‘HSCP Leadership – An examination of context, impact, supports, challenges and areas for consideration’ was completed and published in October. The study, commissioned by the National HSCP Office, was conducted by Dr Sinéad Hanafin and Dr Michael Shannon of Research Matters Ltd, and was presented at the National HSCP Conference on 1st October 2019.

The report presents the findings of a qualitative research study with 22 health and social care professional leaders and managers. The study aimed to understand the impact of HSCP leadership across the public health services in Ireland.

The following impacts were identified in the study:

Impact on the institution

- Supports interdisciplinary integration
- Ensures more efficient strategic service planning and delivery
- Provides better governance of HSCPS

Impact on the service user

- Brings a focus on what is best for the service user
- Improves access to resources
- Better able to align resources with need

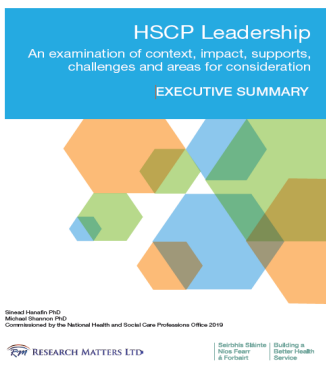
Impact on HSCPs

- Better representation of HSCPs within the institution
- HSCPs better informed about developments
- HSCPs feel more valued and supported
- The role can create another layer of bureaucracy

The report drew a number of conclusions as summarised below.

Finally, a series of areas were identified for consideration at national, organisational and individual level. The executive summary may be accessed on the HSCP hub on www.hsland.ie.

The National Office will be identifying key actions to take forward during 2020 at national level. We encourage all HSCP to review the document and to consider what actions you may be able to take individually and within your organisations.



Leadership Study Conclusions Summarised

HSCP leadership roles can have a direct impact on improvements in the quality of health services

HSCP leadership roles can enable institutional barriers to effective resourcing of services to be overcome

In Ireland, HSCP leadership roles lag well behind leadership roles in other health service disciplines

HSCP leadership can support improvements in governance

Greater support is needed to develop and sustain HSCP leaders

The HSCP leadership role needs to be focused at a strategic level

Changes in Dysphagia Management: IDDSI Implementation

Implementation of the changeover from the Irish Modified Consistency Descriptors to the International Dysphagia Diet Standardisation Initiative (IDDSI) Framework is well underway. This is a significant change, which requires a huge amount of time, effort and communications to co-ordinate and implement safely in both hospitals, and especially in community settings. Huge thanks to all staff involved for their efforts.

The National Working Group for Changes in Dysphagia Management, in liaison with HSE PCRS, engaged with Nutrition Companies regarding timeframe for transition. It is not possible to give definitive dates when non-IDDSI labelled stock will no longer be available as this is dependent on a number of factors including demand and stockpiling of non-IDDSI labelled products. Clear thickening powders are changing first followed by the regular thickeners where applicable. IDDSI labelled pre-thickened oral nutritional supplements will be available from November 2020. IDDSI alert stickers will remain on products until April 2020.

Both IDDSI and non-IDDSI labelled thickening products may be in circulation up to the end of the year/early 2020. This poses a risk to patients as the scoop size and recommended dosage of IDDSI labelled thickening products may be different. When introducing the new IDDSI labelled product, it is advisable that where possible, all non-IDDSI labelled products and scoops are removed from circulation in order to avoid risks associated with:

- ➡ Using the old scoop with the new mixing guidelines
- ➡ Using the new scoop with the old mixing guidelines

Patients need to be informed and supported in making this change. Patient information, including a NALA approved Patient Information Leaflet, can be found at www.hse.ie/iddsi and a short video was shared by HSE on twitter.

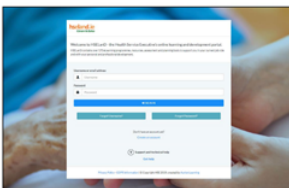
As you will know, a suite of resources, called the HSE IDDSI Implementation Pack, is available for staff on the Share Centre on

This pack includes: a multidisciplinary staff training needs assessment planner; educational and training webinars; generic implementation plan; generic communications and practical resources to support implementation.

This project has been an excellent example of multidisciplinary working; bringing together a large number of healthcare professions, HSE functions and support services, and service users, initially to co-ordinate review of the IDDSI framework to inform the decision to adopt it, and then to develop the national plan for implementation. There have been many challenges along the way and the National HSCP office and Chief Clinical Officer acknowledge the commitment of the members of the National Working Group and the subgroups for Education and Training, Communications and Risk Assessment and Mitigation, their tireless work and all the other individuals and groups who assisted in any way. Having now fulfilled its remit, the National Working Group for Changes in Dysphagia Management has been stood down.


HSE IDDSI IMPLEMENTATION PACK **hseland.ie**
Cúram le Eolas

Access Guide




Log on to hseland.ie
entering your username and password
(use the prompt to reset your username or password if you have forgotten)

If you are a first time user, select Create an Account and follow the steps.



Select **Hubs** from the homepage and enter the **Share Centre**



Select **HSE IDDSI Implementation Pack** from the list of **Projects and Resources**

Share Centre

HSE IDDSI Implementation Pack

Projects and Resources

Introduction

From September 2019, new terminology will be used to describe modified diets (foods) and thickened liquids (drinks) for people of all ages with dysphagia in Ireland. This standardised evidence-based framework is called The International Dysphagia Diet Standardisation Initiative (IDDSI). The framework consists of eight levels (0-7) and includes descriptors, testing methods and evidence for both thickened liquids (drinks) and diets (foods) texture levels. IDDSI has been endorsed by the HSE for the following reasons:

1. To improve patient safety by using a framework which is evidence-based and includes practical and validated measurement techniques that are easy to use and understand, thereby reducing the likelihood of errors.
2. To allow use of a person-centred, non-profession specific, international terminology for all, this also enables staff and patients to travel.
3. To initiate a common language that can be used for technical, cultural, professional and non-professional purposes.
4. To support dysphagia research and evaluation efforts by providing a common, internationally recognised language for texture modified diets (foods) and thickened drinks (liquids).
5. To encourage interdisciplinary collaboration to improve patient care and the safety of patients with dysphagia.

The *Assessment of Staff Training Needs* will guide you on which toolkit resources are relevant for you.


Implementation Toolkit

1. Education and Training

Webinar 1: Supporting Resources

[What is IDDSI \(webinar 1\) download](#)

IDDSI Framework



Unscheduled Care HSCP Seminar



The 2nd Unscheduled Care HSCP Seminar entitled ***Harnessing the Potential of the Health and Social Care Professions in Sláintecare Implementation*** took place on 27th November, 2019.

Building on last year's programme, the theme for this year's meeting was *Mobilising a System*.

We were delighted to welcome key note addresses from Fiona Keogan, Service Improvement Lead in IEHG, Dr. Philip Crowley, National Director for Quality Improvement and Laura Magahy, Executive Director, Sláintecare Programme Implementation Office.

In addition, frontline leaders shared unscheduled care innovations/service improvements in the following areas:

- ⇒ **Opportunities to Reduce Unscheduled Care by Improving the Management of Malnutrition in the Community** - Sharon Kennelly and Mairéad Aherne

- ⇒ **Shifting Diagnostics to the Community** - Paul Nolan and Eddie Conran

- ⇒ **A New Response: An Alternative to Emergency Department Conveyance for Elderly 999/112 callers** - Paul Bernard and Lawrence McKenna

- ⇒ **An Interagency Approach to Preventing Falls and Frailty in the Community** - Catherine Devaney and David Phelan

An engaging panel discussion followed with National Clinical Leads, Nursing Lead and a HSCP Executive Lead. Key messages discussed included:

- The clear value being added to patient care as a result of the strong culture of innova-

tion by HSCP

- The importance of prioritising services focused on prevention to reduce urgent care services
- A call for HSCP to continue to lead and innovate where there are gaps in service
- A recognition that WE are the system; *we must be the change we want to see.*

The afternoon workshop session focused on how HSCP can support each other and develop a Community of Practice for HSCP in unscheduled care.

Thank you to the Unscheduled Care HSCP Advisory Group who partnered with the National HSCP Office to design and deliver this Seminar. Our thanks, too, to those services who agreed to have their improvement initiatives included in the Case

Study section of the Programme Booklet. Presentations available on HSELand in January, 2020.



A short video, *'The Impact of the Health and Social Care Professions in Unscheduled Care'*, was developed for the Seminar and will be available on HSELand in January 2020.

Panel Members:

- Dr. Garry Courtney
- Dr. Gerry McCarthy
- Deirdre Lang
- Una Cunningham
- PJ Harnett

Health and Social Care Professions Research Group



The aim of the Health and Social Care Professions Research Group is to provide a forum for promoting best practice in the development, implementation and dissemination of HSCP Research. A key focus is supporting practice based research and encouraging HSCP in clinical practice to become research active.

The Research Group would like to expand the membership to include Clinical Specialist HSCP and HSCP from a number of disciplines. Expression of Interest forms will be circulated in December and the closing date for receipt of completed application forms is 31st of January 2020.

The group is co-chaired by Dr. Suzanne Guerin, School of Psychology, UCD and Ms Sinéad Fitzpatrick, National HSCP Office, supported by Ms Frances Conneely (National HSCP Office). There are 6—10 meetings per year, lasting approximately 1 hour, mostly via teleconference, with at

least one face-to-face meeting per year.

In addition to successfully hosting 5 HSCP Research conferences, the group has carried out two surveys of HSCP research activity in Ireland and members have developed “How to Conduct Research for Service Improvement A Guide Book for Health and Social Care Professionals” which includes 15 research papers (See HSCP hub on HSELand.ie). The group has also hosted a HSCP Research Speed Networking event with further events planned in 2020. For further information, contact sinead.fitzpatrick2@hse.ie.

Are you a HSCP working in research? Are you working in clinical practice and want to start doing research? Want to collaborate with HSCP interested in research? The HSCP Research Group is seeking new members!

HSCP Communications Advisory Group

The Health and Social Care Professions Communications Advisory Group (HSCP CAG), established in November, 2018 to advise the National HSCP Office on all HSCP communication matters, is pleased to report on progress during 2019.

The membership, sought through Expressions of Interest, comprises a cross section of HSCP disciplines and grades representing a range of care settings from around the country.

2019 was a busy first year for the CAG and key outputs from the year are detailed in the diagram above.

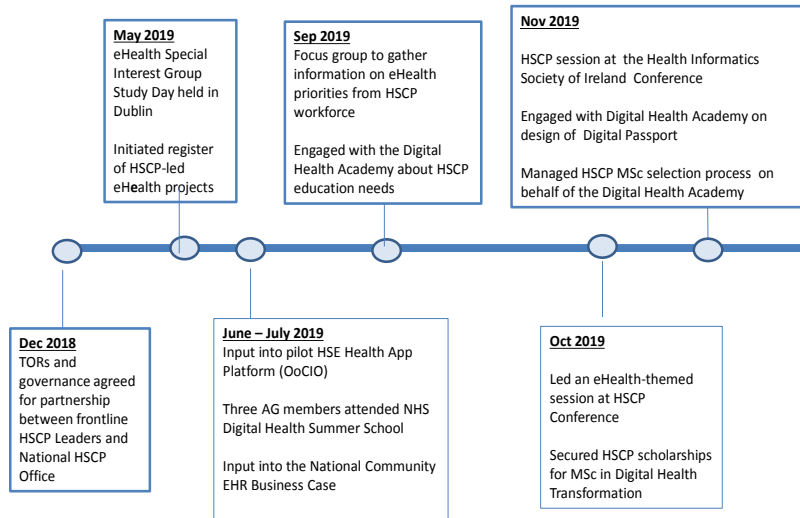


We recognise that some health and social care professionals are not always receiving HSCP Office communications and apologise for the inconvenience caused. Continuing our work on building an effective HSCP communications infrastructure remains our highest priority and we appreciate your patience while this work is being progressed.

eHealth HSCP Advisory Group

eHealth is a broad term and refers to the use of information and communications technologies in healthcare.

The eHealth HSCP Advisory Group, a collaboration between HSCP frontline digital leaders and the National HSCP Office, has reached the end of its first year. Some key outputs from 2019 can be viewed in the timeline diagram.



Foundations for integrated care	<ul style="list-style-type: none"> •facilitating access to the right information, in the right place, at the right time
Supports better communication	<ul style="list-style-type: none"> •enabling MDT working with improved access to and ability to share information •streamlining referral triage process
Safer Care	<ul style="list-style-type: none"> •ability to create alerts e.g. for allergies or infection control risks •ability to integrate with other devices to collate data related to patient monitoring •supporting medicines management in the acute setting
Improved patient experience	<ul style="list-style-type: none"> •patient interaction with services – text reminders, self booking and self check-in •additional platform for provision of patient education
Empowering patients	<ul style="list-style-type: none"> •promoting self-management through use of apps and telehealth
Data and information	<ul style="list-style-type: none"> •better audit and reporting capabilities with clinical coding
Better quality care	<ul style="list-style-type: none"> •increased opportunities to facilitate quality improvement and research activities
Better value	<ul style="list-style-type: none"> •savings generated by no longer having to search for notes or duplicate efforts looking up multiple systems to gather clinical information
Better for the environment!	<ul style="list-style-type: none"> •less paper, less transport, space savings

National HSCP Day— 4th March 2020



Building on the success of 2018 and 2019, HSCP Day 2020 will take place on 4th March. The day provides a valuable opportunity to:

- Share knowledge and experiences amongst HSCP and multi-disciplinary colleagues, helping to develop communities and networks of practice
- Share the value of HSCP services to services users and the healthcare system overall, leading to increased awareness about the work of individual professions, better collaboration and shared understanding.
- Recognise and celebrate the enormous impact of HSCP services on service users, made possible only through our dedicated and inspiring workforce.

Over the years, the enthusiasm shown by all staff in organising events, showcasing their work and sharing with other colleagues has been immense. The locations hosting events continues to build, with 38 HSCP teams from around the country participating in 2019.

Keep an eye on the HSCP Hub on www.hseland.ie and twitter @WeHSCPs for further updates. In the meantime, if you are interested in participating in HSCP Day 2020, please register by contacting eileen.walsh@hse.ie.

Your Voice Matters



Patient experience needs to be central to the planning and delivery of health and social care services. To build trust and confidence in services, we must listen to and learn from the experiences of service users.

Your Voice Matters is a patient experience survey that captures the lived experiences of service users by

inviting them to describe a recent instance of engaging with health and social care service(s), focussing on what is most important to service users themselves.

Experiences are then considered in terms of person centred, co-ordinated care and the information used to inform service improvements. To date, **1135** experiences have been collected and as a

direct result of these, a number of service improvement initiatives have been undertaken including: the establishment of COPD Peer Support Groups in identified areas; the development of COPD resources to support both service users and service providers.

For further details, please contact barbara.riddell@hse.ie.