



Harold's Cross  
& Blackrock  
*Respite Rehabilitation Reassurance*

STRATEGIC PLAN 2017-2022

# A FIVE YEAR PLAN TO ENHANCE OUR CARE



2017-  
2022



STRATEGIC PLAN  
2017-2022

# CHAIRPERSON'S FOREWORD



I am delighted to present the Our Lady's Hospice & Care Services strategy for the period 2017 to 2022 which sets out our five year plan to enhance our work.

Many national and international changes have transpired since the publication of our last strategic plan. Despite a challenging economic environment with reductions to core funding, an ageing population and a moratorium on recruitment, significant development was achieved over the lifetime of our previous strategy and the Board of Directors are extremely satisfied with the progress made during this period.

The key accomplishments of our last strategic plan include: the development of our services both on site in Harold's Cross and Blackrock hospices and within the local community, achievements in the area of education & research, significant investment in our IT infrastructure, increased investment to maintain quality services through the funding of additional staff and capital infrastructure projects from fundraising income, multiple services and practice changes and enhancements. We also prioritised initiatives to enhance our staff and volunteer experience. All of these developments enabled us to respond to an ever increasing demand across all our services.

Throughout the duration of our last strategic plan we commenced the most ambitious project in our organisation's history; the development of a new state-of-the-art palliative care unit in Harold's Cross to ensure privacy, dignity and professional excellence at end of life. This capital development programme, which is due for completion in early 2018, was fully funded by the generosity of our donors who continue to be at the heart of all that we do.

In fact, over €25 million of publicly raised funds were utilised throughout this period to support our work and for which we are truly grateful.

This, combined with our annual allocation from the HSE (under the provisions of a service level agreement), allowed us to maintain and enhance our services whilst delivering quality and person centred care.

All of the achievements throughout our last strategic plan were underpinned by the development of a robust corporate and financial governance framework and enhanced clinical governance systems and processes.

At this point, I would also like to recognise the vital role played by our wonderful 600 staff and over 300 volunteers who consistently strive to achieve excellence in all that they do. They recognise that each patient and their family have unique needs and welcome people of all faiths and no faith. Their commitment to their work is exceptional and the Board of Directors acknowledges their constant professionalism, dedication and flexibility particularly as they adapted to significant change over the duration of the last strategic plan.

Looking forward, our vision over the next five years is to enhance and develop our existing services within our growing catchment area working closely with our health and academic partners.

Another key milestone in our organisational development will also take place during the implementation of this strategic plan; when Wicklow Hospice opens it will fall under the governance of Our Lady's Hospice & Care Services from both a clinical and corporate governance perspective. The building works will commence in 2018 and it is envisioned that the 15 bed state-of-the-art facility will be open to the public from 2019. This is a very exciting development in the history of our organisation and means that across our three sister sites of Harold's Cross (established 1879), Blackrock (established 2003) and Wicklow (due to open in 2019) there will be enough Specialist Palliative Care in-patient beds to service the growing demand within our catchment area.

Finally, since our establishment in 1879, the achievement of our ambitious strategic objectives would not be possible without the dedicated support of our stakeholders – the HSE and Department of Health Colleagues, academic partners, Board Directors, members of the public who demonstrate invaluable kindness and generosity – and our wonderful volunteers and staff. It is once again our pleasure to thank them most sincerely for their

won-going commitment and dedication to their work and to ensuring the best patient experience for all those who need our care.

**Sean Benton**  
Chair of the Board of Directors

## OUR LADY'S HOSPICE & CARE SERVICES IN 2017

### AT A GLANCE

**200**  
BEDS



**600+**  
STAFF

**330**  
VOLUNTEERS

**4,200**  
PATIENTS  
CARED FOR

**WICKLOW HOSPICE**  
OPENING IN 2019

# EXECUTIVE SUMMARY

For almost 140 years, Our Lady's Hospice & Care Services has provided high quality care to those who need it in our local community and it is from these strong foundations that we plan to grow.

The scale of the healthcare challenges facing us are unprecedented. We are an aging population and as we grow older we are experiencing more complex health and social care needs. It is estimated that by 2026, the numbers of those over 65 will have increased by 30%. This also comes at a time when Government funding is facing significant financial pressures.

It is essential that Our Lady's Hospice & Care Services plays an important role in responding to these diverse challenges and growing demand. We passionately believe that everyone living in our community should be able to access high quality, excellent and person centred care when they need it. Based on our values, we believe that our services should be delivered in the most appropriate and effective way to respond to the needs of the individual and their family.

Our response to these challenges is set out in this five year strategic plan. This plan, 2017 – 2022, is ambitious and progressive and strives to deliver upon our core vision: to provide the highest quality of life for our patients and residents. We aim to adapt an integrated approach to delivery of care across our three specialisms supporting our patients and residents with life limiting conditions and/or chronic illness.

To develop this ambitious strategic plan, we listened to many voices and undertook a comprehensive consultative process with our service users, staff, our Board of Directors, our management team, our volunteers and our external partners, funders and stakeholders whilst aligning nationally with clinical strategy programmes in the delivery of new models of integrated care.

During 2017, we cared for over 4,200 patients across all our services, an 8% increase on the previous year. Our Specialist Palliative Care community teams also delivered over 10,700 visits to patients in their own homes across our catchment area of over 1 million in South and West Dublin and as far afield as North Wicklow.

It is against this backdrop of increasing demand and ever-complex healthcare needs, that Our Lady's Hospice & Care Services provides integrated care throughout the patient journey. As such, this strategy outlines our plans to build capacity, to reconfigure and integrate our services and workforce based on best practice, evidence-based models of care and anticipated future needs.

Our progressive vision includes incremental growth and change, including welcoming Wicklow Hospice to the Our Lady's Hospice & Care Services family, and will be achieved through a series of model reviews and consultation with our internal and external colleagues, partners and associates across in-patient, out-patient and community outreach settings.

There are also a number of critical implementation considerations that need to be deliberated and decided upon to ensure effective delivery of our strategy. We acknowledge that there will be challenges and risks as we adapt and align existing funding models and strive to ensure that we have capacity both in workforce and facilities, to meet service needs and support areas of growth.

Finally, this strategy was developed following a period of HSE and HIQA audits and inspections. As such, this strategy places a huge emphasis on strong healthcare, corporate and financial governance, compliance, legislation, regulation, inspection and internal and external audit functions ensuring efficiency and accountability, so that those depending upon and supporting Our Lady's Hospice & Care Services can be assured of the highest quality standards and transparency in all that we do.



## INTRODUCTION

Our Lady's Hospice & Care Services (OLH&CS) was founded in 1879 by the Religious Sisters of Charity and continues its mission by providing, with loving care, the highest quality, person-centred health and social care services in our hospices of Harold's Cross and Blackrock and within the local community.

Since its foundation, OLH&CS has strived to deliver excellent care in a quality environment to achieve the best outcomes for our patients, residents and their families, whilst ensuring an innovative and supportive environment for our staff and volunteers.

Our approach to delivering healthcare is progressive and responsive to the ever-changing and growing demands for our services and the challenging landscape for healthcare funding.

Our reputation for leadership, clinical excellence, professionalism and education and research will continue to develop over the duration of this strategy and place us in a stronger position to influence improvements and deliver consistent quality across the breath of our work.



## SERVICES OVERVIEW

At Our Lady's Hospice & Care Services, we provide excellent specialist and person-centred care delivered by a dedicated and experienced multi-disciplinary team. Our focus is to improve and enhance quality of life and we exist to enable our patients to live as independently as possible with comfort, dignity and peace of mind.

The team work closely together to develop a holistic personalised care plan for each patient based on their specific needs and those of their family. We endeavour to meet the physical, psychological, emotional and spiritual needs of our patients in a caring and life enhancing environment.

### We provide a number of specialist services:

#### On both our Harold's Cross and Blackrock sites:

- Specialist Palliative Care including In-Patient, Community Palliative Care and Day Hospice.

#### In our Harold's Cross site:

- Rheumatic and Musculoskeletal Disease Unit.
- Care of the Older Person including Extended Care (Anna Gaynor House) and the Community Reablement Unit.

In 2017, we provided care to over 4,200 patients or an 8% increase on the previous year.



### SPECIALIST PALLIATIVE CARE

Our Lady's Hospice & Care Services provides a Specialist Palliative Care service through an interdisciplinary team, guided by a consultant physician in Palliative Medicine. The aim of our specialist services is to improve the quality of life for those with life-limiting conditions who are approaching end of life. We aim to treat, as early as possible, the symptoms of the disease (or side-effects caused by treatments) and any psychological, social and spiritual problems related to the illness. We also assist families and caregivers through this experience and provide a bereavement support service to those who are grieving.

Specialist Palliative Care is provided in both our hospice facilities (36 beds in Harold's Cross and 12 in Blackrock) and via our specialist community palliative care teams in partnership with community and hospital services.

In 2017, Specialist Palliative Care saw over 800 admissions to our in-patient unit or up 2% on the previous year. We also provided over 10,700 visits to patients in their own homes as well as seeing over 250 patients in our Day Hospice Facility.

In 2017, the Care of the Older Person Unit saw 100 admissions, up 69% on the previous year and is comprised of 82 beds. (50 extended care beds; 30 level 2 palliative care beds; 2 respite beds).

### RHEUMATIC AND MUSCULOSKELETAL DISEASE UNIT (RMDU)

Led by consultant rheumatologists, The RMDU team at Our Lady's Hospice & Care Services offers a unique service to those with chronic rheumatologic and musculoskeletal conditions requiring specialist medical management and rehabilitation. The aim of our multi-disciplinary team is to empower and enable individuals with rheumatic and musculoskeletal conditions to maintain or improve their quality of living, by addressing their health needs through interdisciplinary team care.

The unit is comprised of 40 in-patient beds and 6 day-care beds and in 2017, the Rheumatic and Musculoskeletal Disease Unit treated over 1,100 patients. This is the highest number of patients ever treated in this unit and admissions were up 25% on the previous year.

### COMMUNITY REABLEMENT UNIT (CRU)

Led by a consultant geriatrician working alongside a multidisciplinary team, CRU works in conjunction with St James's Hospital and the HSE. The aim of our Community Reablement team is to provide rehabilitation support to those over 65 to enable them to live independently whilst improving their mobility and increasing their personal safety enabling them to live in their own homes for as long as possible.

The unit is comprised of 24 in-patient beds and in 2017, the Community Reablement Unit saw over 350 admissions and referrals were up 5% on the previous year.

### EDUCATION & RESEARCH

Multi-disciplinary education, research and training form the bedrock for delivering a quality service to patients, residents and their families. Courses, conferences, seminars and workshops are provided throughout the year.

Research activity is undertaken on-site and in collaboration with the wider sector and we are affiliated with University College Dublin and Trinity College Dublin at both undergraduate and postgraduate levels.

Also based in the Education & Research Centre is the All Ireland Institute of Hospice and Palliative Care with whom we work collaboratively to develop education and research and influence policy across the island of Ireland.

### CARE OF THE OLDER PERSON UNIT:

Anna Gaynor House is a registered designated centre under the Health Act (2007) where the team aim to provide a multidisciplinary approach to the care of older people and those with supportive palliative care needs. This is achieved by providing holistic, individualised care to the highest standard. We provide a safe, secure and comfortable living environment to those classified as high-dependency and requiring nursing care on a 24 hour basis.



# OUR MISSION & CORE VALUES

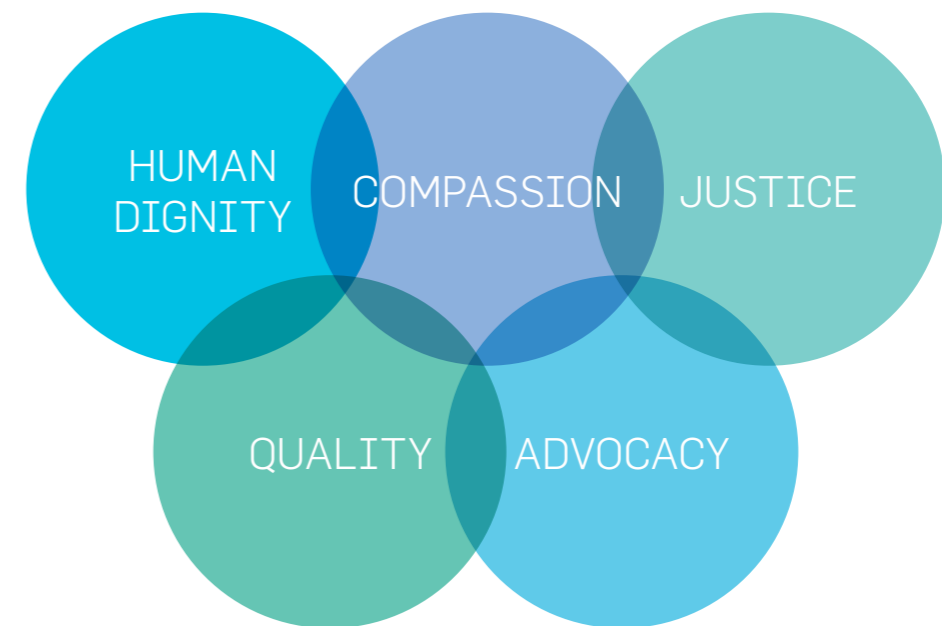
## MISSION STATEMENT

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FOUNDED WITH LOVING CARE BY THE RELIGIOUS SISTERS OF CHARITY IN 1879, WE CONTINUE THIS MISSION THROUGH PROVIDING HIGH QUALITY, PERSON-CENTRED HEALTH AND SOCIAL CARE SERVICES IN OUR HOSPICES AND WITHIN THE LOCAL COMMUNITY TO THOSE WHO NEED IT OF ALL FAITHS AND NONE.

## OUR CORE VALUES

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Through our core values we strive to provide an excellent standard of care for all our patients, residents and their families and our staff and volunteers understand that each person has unique needs and our core values underpin everything that we do.

## PREVIOUS STRATEGIC PLAN: 2013 – 2016: KEY ACHIEVEMENTS AND IMPACTS

STRATEGIC OBJECTIVES	KEY ACHIEVEMENTS
<p><b>GOVERNANCE</b></p> <ul style="list-style-type: none"> <li>• Ensure effective integrated governance mechanisms are in place with Board, management and staff accountable for their actions.</li> <li>• Ensure wider collaboration and integration with our external partners.</li> </ul>	<ul style="list-style-type: none"> <li>• Assurance in place for corporate and clinical compliance obligations including Company Law, Code of Governance for State Bodies, Charities Regulatory Authority.</li> <li>• Established corporate governance infrastructure and framework including financial controls.</li> <li>• Organisational structure adapted in line with regulatory requirements.</li> <li>• Establishment of National Hospice Group to co-ordinate collective campaigns.</li> </ul>
<p><b>FINANCIAL</b></p> <ul style="list-style-type: none"> <li>• Operate as an efficient, competitive organisation that delivers quality and value for money.</li> <li>• Sustain financial viability within current and potential allocations, recognising that value for money and focused interventions are central to our approach.</li> </ul>	<ul style="list-style-type: none"> <li>• Secured financial breakeven position annually with effective utilisation of both HSE and publicly raised funds.</li> <li>• Updated all internal financial control policies and systems.</li> <li>• Introduced Management Information Systems including SORP (Statement of Recommended Practice) for financial reporting and high level devolved budgets.</li> <li>• Invested in fundraising and communications structure.</li> <li>• Implemented procurement processes to ensure compliance with financial regulations.</li> </ul>
<p><b>WORKFORCE/ KNOWLEDGE &amp; SKILLS</b></p> <ul style="list-style-type: none"> <li>• Maximise allocation of our workforce in a changing health care model and to encourage flexibility to adapt to a changing patient environment.</li> <li>• Externally connected – to work in a modern environment that enables staff to excel at their jobs.</li> <li>• Create a climate of life-long learning, to build capability and develop the skills, knowledge and attitudes of all staff and volunteers of OLH&amp;CS.</li> </ul>	<ul style="list-style-type: none"> <li>• Introduction of Performance Management system.</li> <li>• Introduced Schwartz Rounds pilot in Blackrock Hospice to foster support system for staff.</li> <li>• Delivered Leadership Development Programme.</li> <li>• Transition Year / Gaisce Student placements established in our volunteer programme.</li> <li>• Supported organisational cross-cover initiatives including administration, patient services and realigned boundaries in our home care teams.</li> </ul>

STRATEGIC OBJECTIVES	KEY ACHIEVEMENTS
<p><b>QUALITY</b></p> <ul style="list-style-type: none"> <li>• Deliver unparalleled care to our patients and residents.</li> <li>• Achieve organisational excellence in the service of our patients.</li> <li>• Maintain the highest standards of quality, risk management, hygiene and safety.</li> <li>• Achieve equality in the treatment of patients/residents and staff.</li> <li>• Ensure equality of access to services.</li> </ul>	<ul style="list-style-type: none"> <li>• Achieved compliance with HIQA care standards.</li> <li>• Achieved Investing in Volunteers award.</li> <li>• Introduced practice changes including self-administration of medication.</li> <li>• Introduced smart phones to Community Palliative Care.</li> <li>• Changed models of service delivery including development of Rheumatic &amp; Musculoskeletal Disease Unit Day Patient Service.</li> <li>• Integration of registered Pharmacy service to both sites and established National Palliative Medications Information service.</li> <li>• Developed Equipment Library Programme.</li> <li>• Established Healthcare Records Department and commenced programme of work to ensure compliance with data protection legislative obligations.</li> </ul>
<p><b>CULTURAL</b></p> <ul style="list-style-type: none"> <li>• Culturally align patient, resident, and staff expectations in the context of the organisation's Mission and values and external cultural healthcare changes.</li> </ul>	<ul style="list-style-type: none"> <li>• Introduced Patient Priority Pledge across multi-disciplinary team and introduced Staff Priority Pledge.</li> <li>• Established staff support and health promotion initiatives.</li> <li>• Developed Staff Council to promote collaborative working and consultation.</li> <li>• Implemented all initiatives in Mission Strategy including long-service and Mission Hero awards for staff and volunteers.</li> </ul>
<p><b>EDUCATION &amp; RESEARCH</b></p> <ul style="list-style-type: none"> <li>• Education &amp; Research development to enhance our reputation and interaction, nationally and internationally with third level institutions and other health care providers.</li> </ul>	<ul style="list-style-type: none"> <li>• Introduced e-learning process for staff training.</li> <li>• Expanded Student Placement Programme.</li> <li>• Appointed Professor of Palliative Medicine and developed the Academic Department of Palliative Medicine in collaboration with UCD/TCD.</li> <li>• Developed research strategy and increased research activity.</li> <li>• Extended our membership of All Ireland Institute of Hospice &amp; Palliative Care and played a leading role in Education, Research and Policy &amp; Practice initiatives.</li> </ul>
<p><b>CAPITAL</b></p> <ul style="list-style-type: none"> <li>• Ensure capital infrastructure provides an appropriate environment to support high quality healthcare experience and outcomes.</li> </ul>	<ul style="list-style-type: none"> <li>• State-of-the-art Palliative Care Unit built in Harold's Cross.</li> <li>• Invested in the upgrade of ICT infrastructure.</li> <li>• Advanced range of minor capital requirements.</li> </ul>



# STRATEGY DEVELOPMENT

## CONSULTATIVE APPROACH

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We developed this strategy in consultation with our service users, staff, volunteers, and supporters, health service colleagues (national, primary, social care, academic and clinical care programmes) and thank them wholeheartedly for their invaluable contributions.

## CONSIDERATIONS THAT UNDERPINNED OUR STRATEGY

Alignment to National Health Strategy / Slaintecare.

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Palliative Care Development Framework.

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National Clinical Programmes for Rheumatology/Palliative Care/Older Persons.

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Emerging Compliance and Governance Framework.

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Review of Voluntary Hospitals.





WE BELIEVE THAT EVERYONE SHOULD HAVE THE OPPORTUNITY TO RECEIVE THE HIGHEST STANDARD QUALITY CARE THAT MAXIMISES THEIR QUALITY OF LIFE. THIS ETHOS IS AT THE HEART OF EVERYTHING WE DO.



The combined efforts of our highly committed 600 staff and 330 volunteers, along with the continued support of partners and local communities will enable us over the five years of this strategy to continue to provide the best in compassionate, excellent and cost-effective healthcare.

**This five year plan to enhance our patient-centred care is built on the principles below:**

- **Excellence in care** – across all our services.
- **Integration** – to bring our services to a wider cohort of patients and residents.
- **Innovation** – dynamic and efficient approach to the delivery of service.
- **Leadership** – making a difference to patients and families.
- **Collaboration** – with patients, partners, policy-makers and funders.

STRATEGIC DIRECTION

1

BE A LEADER IN PROVIDING QUALITY AND SAFE SERVICES, MAKE A DIFFERENCE TO PATIENTS AND FAMILIES AND BUILD UPON OUR REPUTATION FOR EXCELLENCE

This is a priority strategic direction as high quality and safe services are the foundation to enable us to deliver on our vision and extend our legacy of delivering patient centred care through a progressive, holistic and integrated approach.



KEY ACTIONS

1. Review our models of care and explore how we use resources to meet the needs of our patients whilst aligning to government health policy.
2. Explore our three services specialism to enhance the services and experience for our patients, residents and their families.
3. Realignment of our services to reflect patient need and funding sources.
4. Measure patient experience and use feedback to deliver improvements in line with national standards.
5. Create models of care that integrate across our settings and specialisms.
6. Build upon existing healthcare partnerships to create standardised pathways of care, clear communication and equitable access to care for all.
7. Lead on research, clinical innovation to become a practice-based learning organisation.
8. Integrate our Education and Research centre with new and existing academic partners and funders.
9. Explore synergies with education providers to establish a regional and national leadership role in Gerontology and Rheumatology.
10. Build in an innovative research agenda to keep abreast of changes in the sector both nationally and internationally and maximise innovation.
11. Create an environment that enables the highest quality care across all services enabled by an innovative technology infrastructure.

IMPACTS

1. Ability to deliver integrated care to the cohort of patients that need us most, in the right setting, and aligned to funding streams and current health structures.
2. An enhanced values-driven system based on continuous quality improvement and patient feedback.
3. Seamless patient flow with care plans designed around appropriate and preferred place of care.
4. Develop capital and IT support facilities to enable staff to deliver care, and patients to receive our services, in a high quality setting supported by effective systems.
5. A sustainable long-term model of fundraising with a structured pathway to secure financial targets in line with organisational priorities/ capital funding model, aligned with Wicklow Hospice and the wider hospice and homecare sector.
6. Enhanced link between education and research activities to ensure evidence based delivery of care.
7. Effective, clear and consistent internal communications reaching all staff and volunteers across all disciplines / sites.

STRATEGIC DIRECTION

2

COMMIT TO DEVELOPING AND CONTINUALLY IMPROVING OUR CLINICAL AND CORPORATE INFRASTRUCTURE AND PROCESS

This is a priority strategic direction to ensure that systems are in place to allow our teams to deliver care effectively and to assure our service users and external validators through evidence based practice in all our areas.

KEY ACTIONS

1. Continue creating the conditions to optimise staff contributions to on-going development of Our Lady's Hospice & Care Services.
2. Review internal and external structures to ensure that they are future-proofed and aligned to strategic goals.
3. Commit to ensuring that Governance, Risk Management, and Compliance (GRC) are three pillars working together to ensure we meet our organisational objectives.
4. Ensure that we are proactively engaged with all relevant regulatory and inspection bodies.
5. Advance stakeholder engagement with regulators, providers, funders and policy makers and establish synergies to secure a strong future.

IMPACTS

1. A renewed leadership and reporting structure defined that reflects existing and emerging governance and compliance requirements.
2. Enhanced staff and volunteer experience.
3. Full compliance achieved with all legislative requirements and staff supported to address any emerging regulatory standards.

STRATEGIC DIRECTION

3

ENSURE STRONG CLINICAL AND CORPORATE GOVERNANCE TO DELIVER HIGH QUALITY, SAFE CARE AND DEMONSTRATE EFFECTIVE STEWARDSHIP OF PUBLIC FUNDS

This is a priority strategic direction to ensure that we responsibly utilise resources in a quality environment, supported by systems of work that enable efficiency and effectiveness.

KEY ACTIONS

1. Commit to delivering best quality care for our patients and communities.
2. Strategic investment of resources.
3. Establish and develop clear care pathways across the primary-hospice care trajectory.
4. Explore expansion of community multidisciplinary services and using existing resources to meet patient needs.
5. Empower staff through strong leadership with clear accountability.
6. Develop measures to evidence our practice and align to national measures where appropriate.

IMPACTS

1. Patient needs met through expansion of high quality services in their homes and community setting.
2. Key performance indicators and outcome measures to evidence and shape our service for the future.
3. A balanced focus on our quality and finance priorities.

STRATEGIC DIRECTION

# 4

## EMBRACE A SYSTEM-WIDE PERSPECTIVE, WORKING CLOSELY WITH PARTNERS, PATIENTS/RESIDENTS AND HEALTHCARE STAFF TO HELP MEET GROWING DEMAND

This is a priority strategic direction as adapting a partnership approach is central to integrating our patient services, the development of staff and volunteers and in order to enhance access to all our specialisms in a planned and coordinated way.

### KEY ACTIONS

1. Deliver on our mission as a Health & Social Care and Education & Research provider.
2. Work with our community and academic partners to build and enhance effective partnerships.
3. Enhance our credibility and sustainability.
4. Ensure equity of access to our services in the appropriate setting and at the best time for the patient.

### IMPACTS

1. External-facing focus with enhanced care for those with chronic disease. Use and build on our skills, expertise and synergies with our partners.
2. An integrated approach to delivering care, using resources effectively and increase access to our care.
3. Continued outreach to the local community to enhance general awareness and fundraising.
4. Enhanced reputation as a lead education and research provider for all three specialisms.
5. New education and research partnerships established and niche markets defined.





# CORPORATE PRIORITIES THAT UNDERPIN OUR STRATEGY

## PARTNERSHIP

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- Advance stakeholder engagement with regulators, providers, funders and policy makers and establish synergies to enhance our patient cohort outcomes.

## FINANCE

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- Ensure financial viability and resource utilisation are monitored and achieve value for money.
- Ensure compliance with financial governance and best practice.

## FUNDRAISING & COMMUNICATIONS

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- Develop and deliver sustainable growth to meet future needs.
- Dedicated strategy to support and deliver capital development programme.
- Maximise effective external communication practices to raise our profile.

## EDUCATION AND RESEARCH

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- Maximise services by linking with other providers and strengthening relationships with academic partners.
- Maximise on potential from All Ireland Institute of Hospice and Palliative Care and other partners.
- Identify niche target education markets and provide solutions.
- Promote a research culture integrated with clinical practice.

## SYSTEM WIDE SYNERGIES

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- Review models of care across all three units and align with other healthcare providers.

## CAPITAL

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- Capital infrastructure plans to support strategic goals.
- ICT aligned with national developments, business intelligence and systems to support delivery of care.

## HEALTHCARE GOVERNANCE

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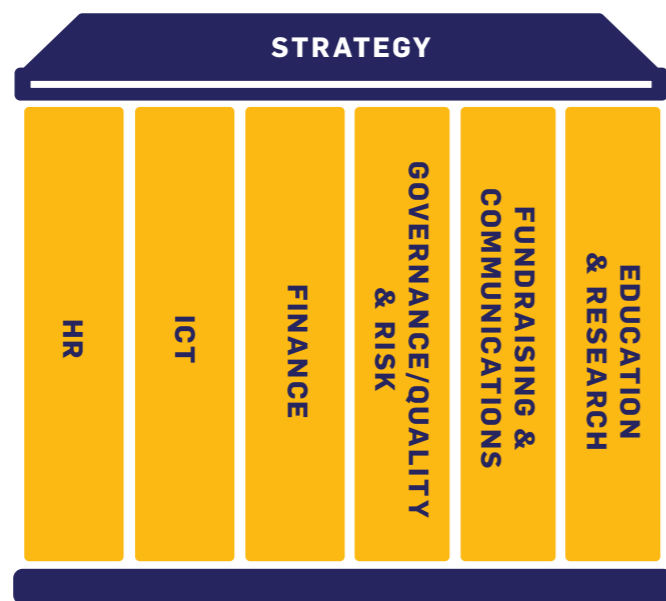
- Review governance structures and systems to ensure future-proofing.
- Review reporting structures to ensure alignment to strategic goals.
- Ensure strong clinical and corporate governance to deliver high quality and safe care.

## HUMAN RESOURCES/ STAFF ENGAGEMENT

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- Continue investing in support and development of staff and volunteers to enhance engagement and maximise patient, staff and volunteer experience.
- Develop workforce strategy to ensure our goals are achieved in partnership with staff and volunteers.
- Renewed focus on matching resources and skill sets to enable growth.

# DELIVERY MODEL FOR STRATEGIC IMPLEMENTATION



## OUR PEOPLE

Working in partnership with staff and volunteers we aim to foster compassion, connection and add value to support safer, better healthcare. Our objective is to enhance our values-driven approach by having a continual focus on improving the patient experience.

In recognition that our staff and volunteers are central to our service and delivering our vision, we will focus on empowerment, innovation and collaboration so that together we can provide quality safe care. By promoting a culture that prioritises staff support and development, we will ensure that our teams are equipped to confidently deliver, problem solve and innovate safer, better healthcare.

From a communications perspective, our focus is to raise awareness of our profile, to explain the work of our organisation, support our fundraising activities, manage internal and external communications processes and celebrate the stories of our patients, residents and staff with whom we work.

## OUR SYSTEMS

To promote effective governance we will adapt management information systems and controls to cover all aspects of clinical and corporate governance. We will effectively manage this by implementing an integrated quality and risk management system enabling us to continuously improve quality.

Bringing ICT to the frontline will support decision making and patient outcomes. We will use data to constantly assess our performance and systematically identify potential benefits of technology for clinical processes, quality and patient safety.

Data and information-sharing are essential aspects of a robust and effective infrastructure. Shared access to patient information is vital to enable us provide the best care across a range of health and social care professionals in different services and settings. This is managed in accordance with regulations and best practice guidelines.

We are committed to improving healthcare through education, research and training and will continue our work in partnership with academic institutions. We will integrate learning with practice developments and facilitate collaboration to share our research findings.



## OUR FUNDING

We aim to support our strategy and prepare for future implications of National Health Strategies by maximising our existing resources and identifying new sources of income. As part our commitment to being an efficient, effective and modern service we will conduct on-going service reviews that may lead to increased demands on available funds.

We aim to support our strategy and prepare for future implications of National Health Strategies by maximising our existing resources and identifying new sources of income. As part of our commitment to being an efficient, effective and modern service we will conduct ongoing service reviews that may lead to increased demands on available funds.

Our financial strategy defines the resources required to support, maintain and enhance services in line with strategic goals.

Our financial capacity depends on the level of state, private income and fundraised money available. We aim to operate a sustainable model of fundraising retaining current donors and attracting new ones. We recognise that sectoral challenges may constrain our ability to achieve these goals but are encouraged by the recent economic upturn, which indicates a positive fundraising climate. We continue to be humbled by the ongoing support of the public and their commitment to helping us provide services.

Our Fundraising team run a number of events, campaigns and activities throughout the year to raise vital funds to supplement HSE funding to enable the ongoing development of infrastructure as well as maintaining vital staffing levels.

In 2017, over €6,000,000 was raised in the Fundraising Department. 2017 also saw the opening of a new palliative care unit at a cost of just under €15,000,000. Fundraising funded 100% of the build costs of this important redevelopment.



# IMPLEMENTATION & MONITORING

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This strategy is a result of in-depth consultation, feedback, analysis and discussion with our staff, our Board of Directors, our management team, our volunteers and our external partners, funders and stakeholders.

This strategy is a framework to guide us through the period 2017 – 2022 and will enable us to achieve our vision and goals as outlined. This strategic plan is just the first step in delivering upon our objectives, and the implementation process will be ongoing and always evolving to meet changing realities and needs as we strive to provide the best in person-centred care for our patients, residents and their families.

The next step in achieving our organisational strategy will be to develop an in-depth implementation plan which will map out in detail the short term and long term actions required to deliver upon our four strategic objectives by 2022.

Our commitment to our patients, residents and their families, staff, volunteers, partners and supporters is that we will review and monitor the strategic and implementation plans regularly, and adapt and be flexible as required to ensure that our plans remain relevant, on track and fit for purpose. We will also ensure successful implementation of our strategic goals by aligning our resources, structures, initiatives and practices to enable delivery.





# Harold's Cross & Blackrock

*Respite Rehabilitation Reassurance*



## **Harold's Cross**

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## **Blackrock**

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