

# Integrating and Co-ordinating Services for Disabled People

**Shira Mehlman**

FÁS – Training and Employment Authority

**Leo Sheedy**

Department of Enterprise, Trade and Employment

## 1. Introduction

Ireland has had unprecedented growth in employment over the last decade. However, disabled people's benefit from this growth has been limited. The 2002 Irish Census highlighted the fact that employment participation by those individuals with a significant impairment remains significantly lower than for those with little or no impairment. In 2004, there were almost 300,000 people aged 15 – 64 who identified themselves as having a significant impairment (disability or long-standing health problem). Almost 111,000 were in employment; showing an employment rate of 37% compared to 64% amongst the non-disabled population. Analysis of Central Statistic Office data shows that the employment rate for disabled people is half that of their non-disabled peer, and has remained unchanged during this period of economic growth.

## 2. Relevancy

The Disability Act, enacted in 2005, underpins the participation of disabled people in Irish society. It establishes a statutory basis for an independent assessment of individual (including personal social services) needs, a related service statement and access to complaints, appeals and enforcement mechanisms, where entitlements are not delivered. It also establishes access to mainstream public services and actions to support access to public buildings, services and information. Section 31 of the Act provides for the preparation of Sectoral Plans by six Government Departments, including the Department of Enterprise, Trade and Employment, the Department of Social and Family Affairs, and the Department of Health and Children, among others. In the development of these Plans, appropriate cooperation between these three Departments in relation to the development and co-ordination of service for disabled people was legislated. To achieve this, protocols were agreed (in July 2006) with these Departments which commit themselves to working closely together, and to harmonise their endeavours to increase the effectiveness of service delivery to disabled people, including:

- Measures to encourage and support persons of working age to take-up work, training (rehabilitative and/or vocational) and/or educational or development opportunities;
- Promoting the removal of disincentives and financial barriers to work experienced by disabled people seeking, accepting or improving employment;
- Continuing the work of the National Coordination Committee relating to services provided by the Public Employment Service (FÁS) and the Health Authorities (Health Service Executive);
- Planning and developing joint bridging programmes between rehabilitative services and vocational training and employment services.

Like Sweden, rehabilitation (as defined) is divided among a number of agencies, who implement measures specific to their remits. This results in interventions that lack integration and cohesion for the individual. While the protocols outlined above is a first step approach among key Government Departments in providing a coordinated approach to service delivery; these protocols have only been recently agreed.

It is clear that the intermediate objective under Ireland's National Anti-Poverty Strategy against Poverty and Social Inclusion' to raise the employment rate of disabled people by 7,000 during the period 2006 to 2010, will not be achieved without some form of co-ordination between various government departments and agencies. Therefore, the DELTA model could provide valuable learning in how to progress Ireland's co-ordination at national level and achieve this objective. Of particular interest is the processes used by the 'Coordination Association' to reduce barriers and identify priorities and secondly, the process through which the joint budget is decided and allocated.

### **3. Ireland's Experience of Local Coordination**

In January 2003, Ireland commenced the 'High Support Process'. This process aims to provide extra support to individuals who are defined as being distanced from the labour market, including disabled people. It involves the formation of a multi-agency teams (PES, Social Welfare, Education and Health Service Executive) to address through a case-conferencing approach the issues presented by service users. A budget of €2,200 Euro per an individual is available to purchase the additional supports including personal development and counselling.

In its review, in 2004, it was found that the multi-agency team approach led to a number of benefits including:

- Increased communications among the agencies who attended the multi-agency meetings;
- Increase awareness of the services provided by the member organisations'
- Provision of multi-agency support to customers;
- Increased knowledge of supports available between the different agencies; and
- Peer support among agencies.

However, a number of difficulties were also identified including:

- Variations between regions;
- Increased administrative and resource burdens;
- The fact that not all relevant agencies within a region or locality would participate; and
- Customer ownership, e.g., who was ultimately responsible for following through with the customer.

While this process has had many successes, it is important that the teams at both regional and local level would include relevant State agencies and non-governmental organisations. Currently, this process is completely voluntary between the agencies involved. The fact that Sweden placed the need for involvement and appropriate membership on a statutory basis is of significant interest.

The Midlands Pilot was an inter-organisational (multi-agency) initiative designed to explore the parameters and to identify the nature of an integrated approach to delivering training and employment supports to recipients of Disability Allowance (DA) aged between 16 and 25 years in the Midlands region. The Midlands region comprises the counties of Laois, Longford, Offaly and Westmeath. The organisations involved in implementing the Midlands Pilot were the Department of Social and Family Affairs (DSFA), FÁS, and the Health Service Executive (HSE). The Midlands Pilot was implemented between January 2005 and September 2005 and a report was prepared by the DSFA on the findings and lessons of the Pilot in late 2005. It highlighted the very poor attendance rate of persons invited to participate: less than one in three (29.4%) attended

The Midlands Pilot is an important initiative to give effect to policy aspirations and objectives regarding the labour market situation of people with disabilities and the development of high-quality services to people with disabilities. The lessons arising from its implementation may provide a useful input to developing policy and practice specifically in respect of designing and delivering high-quality services in the area of training and employment supports to people with disabilities, in particular recipients of DA between the ages of 16 and 25 years.

#### **4. Potential Transferability**

In Ireland's recent report on the 'Consultation for the National Action Plan against Poverty and Social Inclusion 2006 – 2008', progress was noted in respect of internal co-ordination across national, regional and local government. Particularly noted was the improved level and quality of customer service provided to members of the public, and some increase in integration or co-ordination in service delivery across a range of providers. Yet, it was still believed, that co-ordinated implementation was hampered by:

- Some reluctance among some agencies and organisations to engage with other agencies to develop integrated service responses due to competing organisational objectives and remits;
- Limited implementation of shared information management systems precluding the sharing of common data across agencies and the development of responses tailored to individual, local and regional need; and
- Competition amongst agencies for a limited pool of funding.

These issues were raised in the context of a number of 'disadvantaged' groups, including disabled people. In this context, the DELTA project could potentially provide a structure through which Ireland could address some of these issues, in that its focus is in 'overcoming demarcation problems and improving cooperation among the actors concerned.' Particular attention in assessing transferability would need to be given to differences in governance structures between Sweden and Ireland – in that Ireland has a strong central government structure where minimal authority is devolved to local municipalities. Alternatively, Sweden devolves a high level of responsibility and accountability for service delivery to its County Councils.

## 5. Key Questions

1. Are the 'Coordination Association(s)' directly accountable to a particular government department? If so, who?
2. Who funds the staff (Administrator and two Junior Officers)? Does this come from the joint funding or is it funded separately?
3. It would also be interesting to obtain further information on the processes used to create a set of shared values, etc.? How were disputes in values resolved?
4. Is there a consultation process to engage with disability interest or advocacy groups or does the processes focus solely on the needs of individuals?
5. What is its added value if follow-up studies of participants indicate that there is little difference between Delta and the control group in service provision?
6. Concurring with Rienk Prins, the role of the employer is alluded to in relation to occupational rehabilitation, and it is unclear what onus is placed on employers to assist employees who acquire a disability to retain them (with or without modifications, as required)?
7. Finally, is there a consequence for agencies that choose not to participate and/or comply with the coordination legislation?