

DAUGHTERS OF CHARITY – DISABILITY SUPPORT SERVICES CLG
ANNUAL REPORT
FINANCIAL YEAR ENDED 31 DECEMBER 2020

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1. OUR VISION AND MISSION AND VALUES

Daughters of Charity Disability Support Service has an established history of providing quality and responsive services to individuals with support needs. As an organisation, we constantly challenge ourselves to design and deliver responsive innovative support in line with an individual's preferences and needs.

A key component of this is to take time to openly reflect on current service approaches and structures; learn from what works well, hold onto it, identify what we need to reform or change in the support we offer, and commit to making these changes in partnership with our stakeholders. The Daughters of Charity Disability Support Service (DOCDSS) core purpose is to achieve the service vision:

People living their best lives as active citizens in an inclusive society

Our mission is:

Working together with people to live their best lives through the delivery of quality services

Our core values underpin what we do well, what we will improve upon, and what we need to do to achieve our vision for the people we support.

These values are:

SERVICE	Holistic approach characterised by quality and compassion
RESPECT	A high regard for the dignity of each person.
EXCELLENCE	Developing and maintaining the highest standards in our service.
COLLABORATION	Mutual support for the total development of each person.
JUSTICE	Advocating for the rights of the people we support.
CREATIVITY	Being innovative, imaginative, and resourceful.

Working to these values and this mission, DOCDSS currently provides a wide range of supports services to over 3,000 individuals with intellectual disabilities, individuals with complex support needs, and their families.

2. ADDRESS FROM THE CHAIRPERSON & CHIEF EXECUTIVE OFFICER

Chairperson's review

2020 began on a high note as the organisation was starting to build on the learning and successes of 2019. However, the disruptions caused by the COVID-19 pandemic forced changes upon us all that would have tremendous impacts on the entire organisation and the nation. This disruption was felt by all persons connected to the organisation: from the persons we support that had to stay home to keep safe from the virus to the members of Staff that were on the frontlines providing care to those that contracted the disease, and the families that were unable to avail of respite and other services that they depend on. The Board of Directors were unable to meet in person for the better part of the year, compelling many of us to learn alongside the rest of the Staff the nuances of online video conferences.

I am beyond proud of the response the organisation was able to provide to ensure that the many challenges posed by a virus that transformed the entire world did not get in the way of our mission to offer quality services to the individuals we support.

The Service, led by the Executive Team, was able to find new and innovative ways to meet the challenge of not being able to offer services in person. In keeping with the traditions and ethos of the organisation, we were able to use new technologies to stay connected and offer new models of service that will be with us long after the pandemic has gone. Above all, I would like to commend the amazing resilience demonstrated by our Staff who provided round-the-clock care in COVID isolation centres – their compassion and dedication to service is at the very heart of this organisation. I would also like to take this opportunity to extend my sincere thanks to our Board of Directors, the Members of our Sub-Committees, our Volunteers and all our wonderful Staff. Never was it more apparent or demonstrated more clearly than during this challenging year by our Staff and those we support, that the DOCDSS is beyond a doubt in a good place to continue to its next phase.

It is a long-standing tradition within the Daughters of Charity that when we feel an organisation, we have founded is ready to stand and grow on its own two feet, we step away and let it continue onwards to brighter and better things. For many years now, we have been slowly stepping away from the DOCDSS – the last full-time employee we had within the organisation retired in 2019, allowing new Staff and Managers to guide it and start to carry on the work without us there in a management capacity. In 2020, after much consideration, we made the difficult, yet necessary decision to start the process to completely turn over the organisation and all its material assets to an independent Board of Directors. This process will last over the next year or so. We did not take this decision lightly I can assure you, but we felt the time was right for the organisation to look towards a future that will be guided by a legacy of quality service that will carry on for many years to come.

One chapter closes, another begins, and in the years ahead we will look back on how 2020 challenged us in many ways, and no doubt will make us all more appreciative of the simple joys of life – spending time with family and friends, helping those less fortunate than ourselves and the power of prayer in our lives. We can be assured in the knowledge that though we have all been through an ordeal, our resilience, commitment, and faith has helped us navigate to the other side.

As our time with the DOCDSS begins its final steps, a sincere thanks to you all for your continued dedication to the Service and to the people we support and their families. I wish you every blessing for the future ahead.

Sr Goretti Butler DC

Chief Executive Officer Review

2020 began where we left off –we planned to continue our efforts in de-congregation, to progress with the work on our service strategy, the commencement of new director positions that will oversee risk management and governance structures – and examine the work necessary for future transformation and development of the service in line with national programmes. 2020 began with the election of a new government that we looked forward to engagement with to reverse cuts to service provisions that were enacted in the year prior. We were just getting started on the work necessary for continued growth and change across service areas and in line with our strategic plan when the world changed in ways that will be felt in years still to come. The global pandemic swept across the nation in early spring – and would impact all our core functions for the duration of the year. In March, in line with public health guidance and to ensure the safety of all, we made the difficult yet necessary decision to close our day and respite services and pivot our attention and resources to keeping people in residential locations safe from the virus. Overnight, we had to re-deploy staff from our closed centres to meet the needs, source great quantities of protective equipment and hand sanitiser, update infection control guidance that at one stage felt like it was evolving on a weekly if not daily basis and ensure that we could stay connected with the people we support who were now staying at home.

Resilience became a re-occurring theme across the service as we all adjusted to our new reality. Staff in isolation hubs worked day and night to make sure that the thankfully few cases we had in the service had their needs met. Our services all quickly shifted in one way or another to examining how supports could be delivered through online means. The people we support were able to avail of the disruption to re-examine the nature of the services offered to them and how they can help them achieve their goals in life. Local and national working groups were established to discuss ways the service could learn from its experiences from offering services through online means and how this could be of benefit to service supported persons for the duration of the pandemic and beyond. The feedback we received from individuals was used to further guide our ability to offer services through remote methods. We were able to secure funds through the RTE Comic Relief Fund and RESPECT to begin the development of a website that would allow supported persons easy access to live and pre-recorded assistive content that would be designed – both content and the website – based on feedback provided by the persons accessing the site. This will be part of many lessons and experiences we will be able to carry forward from 2020 and allow us to offer more bespoke supports to persons that are looking for something outside of the 9-4 structure.

We were able to continue work on areas that were set in motion from the year prior. We formalised the partnership between ourselves, Trinity College, and Tallaght University Hospital to form the National Memory Clinic – an exciting new initiative that will undertake the work to help us understand the effects of dementia in persons with intellectual disabilities and greatly advance care in this area. We were able to continue our efforts to advance de-congregation within the service, moving 14 individuals to their new homes within their local communities. All of these initiatives and more would be something to commemorate under ideal circumstances, the fact that we were able to accomplish as much as we did in the midst of a pandemic is something that demonstrates our effectiveness as a service to accomplish whatever it is we set out to do.

We continued our advocacy efforts to ensure that our service and our sector received the resources necessary to combat COVID, continue with the programmes and service changes we committed to at the start of the year, and through working with the Federation of Voluntary Bodies reverse the 1 percent cut to disabilities funding that would have had made a trying year even more difficult.

I would be remiss if I did not remark on the fact that 2020 marked many things – the start of a new decade, a year of trial and tribulations, and a year that will be a marker in the future of the service as a whole. In November of this year, the Daughters of Charity made the formal announcement that they will begin the process of stepping away from the service entirely and turning all control and assets over to a fully independent board. This is an aspect that is deeply ingrained within the Daughters – they leave organisations when they know they are ready to progress and grow after they are gone.

This has been a process years in the making, however it is a sincere sign of confidence that we are progressing in the right direction and capable of carrying on the work they started long after they are no longer with the service.

2020 was certainly a year for the books, but one that will see our service emerge stronger than before, tested by an insidious virus that we took on with our commitment to provide no matter the obstacles in our path. Our commitment to our core values – demonstrated in all facets in our response to the pandemic – and our amazing staff – got us through this year.

While we may be looking at the ramifications of lives and a service that will still face disruptions going into 2021 – we know that we can continue our progression to a transformed service that will never stop trying to offer the supports needed for the people we support to live their best lives.

Natalya Jackson
CEO

3. THE GOOD THINGS OF LIFE - SERVICE HIGHLIGHTS 2020

DOCDSS entered 2020 with the intention to continue work from 2019 and begin efforts to launch the new Service strategy and undertake the steps leading to the formal rebranding of the organisation. The organisation was forced to pause and redirect attention the majority of the year to managing the COVID-19 pandemic. While positively managing the succeeding waves of the virus DOCDSS managed in 2020 provide the following service highlights:

“Staying Connected” during the COVID-19 pandemic

Evergreen day activation launched their newsletter *Staying Connected*- which brought great joy as photographs, stories, birthday celebrations and sad events were shared with an aim to unite people who were living apart.

Further developing our practical knowledge and capacity in applying Social Role Valorisation Theory of Practise

In early 2020 DOCDSS hosted a 3-day in-house conference with international Social Role Valorisation (SRV) expert John Armstrong. The event - attended by staff, family members and senior management - challenged all present to stop, pause and rethink how practically applying SRV theory in our work can support individuals to live their best lives.

De-congregation

De-congregation continues within the DOCDSS and is in line with our strategy and national policy: *Time to Move on from De-congregation* - however, in 2020 the planning and transition period was different due to changes necessitated by the pandemic. In spite of the challenges of COVID, fourteen individuals moved into the community in 2020 thanks to the commitment of staff, families and the individuals we support to make the transition possible.

Operational strategy

DOCDSS developed and executed a clear, focused strategy and approach across the service to mitigate the spread and impact of COVID-19 for the individuals we support, staff and service connected.

Collaborative working

Exceptional expressions of teamwork and collaboration across the service in 2020 at local, regional and national level responding to COVID while also providing supports to individuals.

Rethinking Day Supports

Rethinking Day Supports Strategy: How the pandemic disrupted the service and created opportunities to use new methods of local and national service delivery.

The DOCDSS national newsletter

Re -Launch of a national service newsletter designed to support good information awareness and communication during the pandemic.

Easy Read Material Production

A vast range of incredible easy read material and videos to support individuals in understanding COVID and the impact it was having on their services and daily lives.

Regulatory Compliance

Full compliance with HIQA regulations in 477 areas, an increase of 75 percent for Limerick/North Tipperary and 61 percent for Dublin services from 2019.

Training and Development

Development of new digital communication tools to allow for online meetings and live service provision for individuals and staff cocooning during the pandemic.

It's My Life

2020 saw a continuation of *Its My Life* programme and the individualised supports it offers to allow a person to achieve the good things in life and attain greater levels of independence.

The basis of this work would help inform effort to rethink the nature of day supports provided at local and national level.

4. COVID-19: THE YEAR THAT WAS 2020

4.1 COVID-19: its impact on individuals we support, the service and the service response

2020 began with auspicious news of a new virus emerging from China that was highly transmissible and dangerous to older persons and individuals with multiple health issues. During the opening months of the year, the virus began to spread across the globe. By March, there were growing concerns that the virus, now identified as COVID-19, was being spread within Ireland. There was a rapid increase of outbreaks in the country of persons infected with the Coronavirus 2019 (COVID-19), a highly infectious virus spread through close contact and aerosol droplets originating from infected persons.

Pre-COVID 19, the service had established local infection control groups, who met frequently to discuss and disseminate evolving Infection Prevention and Control (IPC) standards, and the latest information from public health officials. This established IPC structure would prove essential to help manage all necessary changes to service provision to keep the people we support safe from serious outbreaks in all settings. As cases began to escalate across the country and to allow the service to quickly make decisions concerning IPC standards, management of outbreaks, purchase of essential Personal Protection Equipment (PPE) and communication to supported individuals, families and staff, the Serious Incident Management Team (SIMT) was established—consisting of the CEO, Executive Team, the Senior Physician, and the Communications Manager.

Following a thorough risk assessment by the SIMT, the decision was made on 13th March 2020 to close day and respite services, resulting in staff being redeployed to support service provision and residential services. These steps came as the Irish government introduced further lockdown measures on 17th March, which included the closure of stores, pubs, churches, and schools, and the restriction of citizens to travel more than 5km from their homes- The restrictions were imposed across the state with the intention to slow the spread of the virus. The travel restrictions resulted in a significant number of non-frontline staff working from home, with support from IT and their line management. Staff were flexible and adapted to this new way of working.

The SIMT initially met twice a day, six days a week to implement a business continuity plan, manage infection prevention and control and outbreaks in line with public health guidance to help staff and individuals we support in addressing COVID-19 cases, establishment of isolation hubs for suspected and confirmed COVID-19 cases, secured essential PPE and approved expenditures in this area in consultation with the Board of Directors, communications directed at staff, persons supported by the Service, families, and other audiences as needs required. The SIMT was forced to make hard choices concerning the safety and welfare of individuals supported by DOCDSS and staff within the context of maintaining rights-based approaches to all issues, whilst balancing safety concerns. This frequency of meetings continued until early summer, when the frequency was reduced to once per day, and eventually down to twice weekly until the end of July, when meetings were changed to occur on a weekly basis.

To maintain service continuity resulting from the lockdown and closure of day, respite and other services, many services and centres developed online support options through use of an on-line platform. Services also developed emergency support packages for individuals with prioritised needs, which were in turn discussed and approved through the SIMT meetings, primarily in the areas of day and respite supports. Each case put forward was supported by a risk management plan.

Multi- Disciplinary Teams (MDT) have made use of the social media channels created during the pandemic to stay in touch with individuals and families connected to the service, with supports ranging from status check-ins to online -based individual or group sessions. Day support teams also established a calling rota to check in on individuals and their families during the first lockdown period. The children's service teams engaged in a series of online contests and virtual events to stay connected with children and families. Additionally, children's services launched a series of peer-narrated videos explaining how the virus testing procedures and lockdown measures affect children. The explanation video concerning PPE was put into use by Temple Street Children's Hospital to prepare children for seeing medical personnel in various levels of PPE attire. Multi-disciplinary teams created pre-recorded support videos to provide exercises and activities that could be performed in the home, along with easy read guides explaining the details of the virus and the extent of lockdown procedures.

Feedback gathering on the service's response to COVID-19 began during the summer and questionnaires were sent to all families and individuals within our service. This sought feedback on what was working well, what wasn't and their ideas and suggestions. Surveys were sent to ascertain family and staff opinions on the overall response by the service to COVID-19. Results were analysed and shared and the data from the family survey was used to inform the changes to supports on offer when Day service resumed in September.

In early June, to allow the Service to plan for the resumption of day services, a national working group was assembled, represented by day support staff, managers, and MDT teams across the service, to discuss the challenges and opportunities with the resumption of day service provision. This group was set the brief by the CEO to review and re-think day service delivery, in the context of COVID-19 and best practice, to devise new service delivery models across the service.

Social distancing and IPC requirements reduced building capacities, and the repatriation of staff from residential centres presented limitations that resulted in day support provision for most persons to one or two days a week, with additional support considerations based on a support need assessment scale. Persons accessing day supports were segmented into support pods, full consideration was given in the makeup of pods of existent social relationships amongst individuals supported by DOCDSS, and self-determination on which support needs and common goals they wished to be a part of. While working within the limitations, consideration was also given to supported individuals, who expressed preferences on alternatives to the traditional day service they had been receiving prior to the lockdown, including stated preferences for a schedule outside of the standard 9-4 day. Some individuals expressed preferences to augment the schedule with more self-selected activities, more optional participation, and more opportunities to access supports from the home.

The Service collected the opinions and experiences of staff that were providing supports through online means, as well as the opinions and preferences from service supported individuals, with the intention of using their input to create a new online service portal. The intended web-based platform would be home to live and pre-recorded supports, alongside other content developed by the service.

In September 2020, funding was successfully sought from RESPECT (RESPECT is a separate organisation that fundraises specifically for projects within the DOCDSS) and Comic Relief fund and the platform is now being developed with individuals we support at the forefront of the design and content provision options.

The country entered a second national lockdown in late October 2020, and with comprehensive systems now in place, the service worked to keep all services open as long as it was safe to do so, including day services and respite. The challenges included infection rates between service supported individuals, staff, and limited-service provision hours for persons accessing day services due to transportation and space available limitations resultant from IPC measures and social distancing requirements. The service spent €4.2 million through to October 2020 to address COVID-19. This included funds spent on PPE, reconfiguration of service centres and housing, and other measures necessary to limit infections and prevent fatalities due to COVID-19.

On a final note, although this was a very trying period, staff, individuals we support, children and families showed great resilience, flexibility, and courage throughout this time.

5. WORKING TOGETHER WITH PEOPLE TO LIVE THEIR BEST LIVES THROUGH THE DELIVERY OF QUALITY SERVICES

5.1 General Overview Nature and Scope of Support Services provided:

DOCDSS provides a broad range of vital and responsive support services, led by the preferences and needs of individuals, in order to live their best lives. The organisation delivers services in Dublin, Limerick North Tipperary, and Offaly to both adults and children with intellectual disability and/ or complex support needs.

Striving to be a person-centred service we always seek to put those who use our service at the centre of all our plans and activities. We are also striving to develop and deliver a wide continuum of supports that are community based and socially inclusive, they are delivered in accordance with our core values and ethos and are underpinned by quality, best practice, and research. Our work in de-congregation in 2020 saw 14 individuals move to their new homes in the community and supporting more individuals achieve this opportunity will be a key central focus for us in our 2021 – 2025 Strategy.

Our activities include:

- Early Intervention, Pre-School Service and Educational Services
- Respite Supports- residential, home based, and community based
- Family Support
- Community Supported Accommodation and Residential Support Services
- Day Supports for Children and Adults
- Personal Development and Independence Living Support
- Training, Enterprise and Employment and Supported Employment Services
- Provision of Multi-disciplinary support – Medical, OT, Speech & Language,
- Physiotherapy and Psychology
- Specialist dementia supports
- Advocacy Supports

As noted, the service has been challenged by the COVID-19 pandemic since its onset in March 2020, bringing many changes in how we had to approach safe delivery of services.

This had a direct impact on service capacity and activity in areas of support specifically residential respite and day supports at different points across 2020, however supports were resumed where possible as the year progressed. It is the intention of the service to resume capacity services in line with national public health guidelines and informed by individuals evolving preferences and needs. Further to this will be the impact of the vaccination programme as it is rolled out and has the potential to reduce the impact of the virus on supports services.

The above service provision was supported by a team of 2,384 employees.

5.2 Improving the lives of the people we support through innovation, building and sharing of evidence-based practice and research

5.2.1 Our Target Destination and our Journey in 2020 in the lives of individuals we support

Improving the lives of the people we support, through innovation, building and sharing of evidence-based practice and research. Our Core Purpose and vision as a service is:

People living their best lives as active citizens in an inclusive society

This vision was the output of an extensive consultation process to develop our new service strategy completed across 2019 and early 2020. Within the consultation process we asked our stakeholders what was working well, and what we needed to change or do to improve the lives of the people that we support. The consultation process included workshops, surveys and interviews with families, staff and external stakeholders including the Department of Health, HIQA and the HSE. From this consultation process that started in 2019, we developed a mission, vision and goals that we need to achieve to enable people we serve to live their best lives. This draft strategy was presented to our Board and ratified in February 2020. The six goals and 42 objectives at the heart of the strategy create a challenging, but achievable roadmap for the Service to deliver on our core purpose.

Fundamental to the service strategy is that all services are developed and operated on the principles set out in the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD). Efforts to progress the rights of individuals as set out under the UNCRPD will be a central test of the success of delivering on this strategy over its lifetime. While we were ready to formally launch our new strategy in March 2020, the COVID-19 pandemic demanded huge focus and time across 2020 to ensure safety in service delivery. Since March our work and resources have been focused on seeking to minimise the risk of the impact of COVID-19 on the people we support, their families and our staff.

5.2.2 Committing to a Service theory of practice to support how we approach and deliver on our strategy

The values of our service are our core guiding principles in how we operate and act on behalf of the service. They guide decisions we make daily at a strategic and operational level. In supporting individuals live their best lives; the organisation has invested significant resources over the last 10 years seeking to build its practical knowledge, and capacity in understanding and applying Social Role Valorisation (SRV) theory into our service, planning and delivery. Our work in this area is challenging and only beginning and will span across the whole timeline of the service strategy and beyond. However, work to date has included several service-wide initiatives and staff development programmes and the development of support tools.

Outputs to our work in this area in 2020 include:

- Roll out of a revised individuals' assessment of need and preferences process (IPNA),
- Enhanced Person-Centred Plans (PCP) as a result of Its My Life Training Programme rollout for staff
- Individuals moving to their own home in the community,
- Further development and growth of an individualised support service being available to individuals seeking alternative approach to supports.
- DOCDSS staff publishing papers in international journals on the practical application of SRV. These publications include:
 - Social work department contributions to research into housing/ homelessness and people with disabilities
 - Psychology department contributions to research-based evidence for psychological services to people with intellectual disabilities.
 - Publication on social role valorisation by Dr Helen Connaughton in the British Journal of Learning Disabilities.
- Formation of service wide shared learning networks and critique forums to support and positively appraise our work in this area.

To assist us in our endeavours to really develop our ability to apply the theory of practice across our service, we continue to engage with and seek support of several national and international renowned experts in the practical application of SRV. In early 2020 DOCDSS hosted a 3-day in-house conference with international expert John Armstrong attended by staff, family members and senior management. It covered the principles and practices of SRV and challenged all present to stop pause and rethink how practically applying SRV theory in our work can support individuals to live their best lives. Key themes covered at the event included:

- *Our Society and Services through the Lens of Social Role Valorisation*
- *"If This Then That "how SRV helps us to create a road map for services that will support individuals access the good things of life*
- *Visioning and Implementing – how we can use the SRV theory on day-to-day basis to inform decisions we make*

The experience and impact of this event fuelled those present to take the knowledge and apply the theory in their individual roles and work settings. Additional plans to engage with John Armstrong on subsequent face-to-face SRV programmes had to be paused due to the pandemic. However alternative engagement with and mentorship from John were achieved through a range of impactful online learning events and mentoring support sessions with John. The impact of learning and reflection from this work is evident in a range activity across the service, and we will seek to build this partnership further in 2021. The outputs from this work informed further leadership and development programmes planned for the service in 2021. All these initiatives for staff across the service are seeking to ensure our approach to service delivery is driven to support the individual to live a life of their choosing. A key target for 2021 is to provide increased opportunities for families to learn more about SRV and develop engagement and sharing learning opportunities among families on their experiences.

5.2.3 Leading Change in our Sector- Rethinking Day Supports

In March 2020 national government guidelines set out for the management of COVID-19 meant that day supports across the service had to come to an abrupt pause. The impact of this disruption was extremely challenging for the individuals we support who lived at home that were now cut off from their regular service provisions. This impact was also felt by those individuals who accessed day and residential services from DOCDSS. It was challenging for staff teams across the service and had a very high impact, placing significant demands on the families of individuals we support.

As we strived to deal with, and to emerge from the pandemic and re-open our day support services across 2020, we needed to provide supports in a way that allowed us to prevent and minimise the risk of exposure to COVID-19.

This required supports to operate differently to how they would have traditionally operated. In seeking to respond to the presenting challenges, DOCDSS identified it as an opportunity to complete a targeted piece of work at national and local level to plan and develop short, medium, and long-term strategies that would allow us to reopen and evolve day supports in a way that ensures:

- We hold onto what is good for individuals we support
- We challenge ourselves to re-envisage day services in line with what individuals want and accepting that individuals will want and need different things
- Reform what elements need to change and what they might look like led by the needs, and preferences of the individuals we support.

The national and local Rethinking Day Support Teams set up to consider and develop service strategy embraced the opportunity to reflect on the current day supports on offer by the service, and challenge our thinking and approach today supports.

Work continued across 2020 and will continue into 2021 to examine new and different ways and approaches of day supports that will allow individuals to pursue the socially valued roles and good things in life they want for themselves as active, contributing citizens.

The five principles driving Rethinking Day Supports Strategy:

- The rights, needs and preferences of individuals we support as set out in the UN Convention for Rights of People with Disabilities.
- Maximising and building staff expertise, innovation, and creativity
- Our Service's Vision, Mission and Values
- Our New Service Strategy
- National Policy and Best Practice in particular New Directions

The work required teams to stop, reflect, learn, and challenge each other and the service on an ongoing basis. The kernel of the work was and will continue to be engagement with individuals to truly get to know them and create a vision for their life that would result in them accessing the right supports in the right place at the right time in line with their informed preferences and needs. The key performance indicators will be evidenced by the stories that individuals can share about the good things they achieved or are actively pursuing. Individual stories in this context have been shared in this report.

Initially each local group presented their vision for day supports in their area, along with a road map of how they were going to get there to the CEO and Executive team in December for discussion and agreement. In the context of recurrent waves of the virus, local teams have continued to push forward on the road maps. The service has put in place a framework to support ongoing learning, shared learning and review of progress. This included bi-monthly meetings of the National Forum where local teams provided updates on success, progress and challenges under the pillars and themes of New Directions.

From the presentations given in September 2020, it was clearly noted that for adult day supports as a service, there was a need to expand the range of the options available to school leavers in the future. For school leavers in 2020, this had to be managed in the context of existing commitments and expectations given to individuals and operating within a pandemic. Expanding the range of options for school leavers will be a key focus for the service 2021.

It's My Life Individualised Supports

It was noted that some individuals were choosing to opt out of participating in traditional service programmes that didn't completely align with their identified preference, need and desire for opportunities to enable them access to the good things in life and greater independence. To help address this gap *It's My Life, Individualised Supports* was established in 2018 to provide the alternative flexible supports that enable individuals to live an ordinary life in their local community.

"Right Support, Right Place, Right Time"

The development and operations of *It's My Life* programme is driven by the theory of Social Role Valorisation (SRV). SRV provides a research base on what the Universal good things in life are and provides us with a framework on how to pursue them for each person we support:

Universal Good Things of Life	
Family	Intimacy
Home	Respect, Honesty, Fairness
Good Health	Contributing
Belonging	Being Treated as an Individual
Friends	Having a Say
Work	Access to Community Places
Safety and Security	Ordinary Social Life
Opportunity to Grow and Develop to the Best of Ones' Abilities	

Using SRV as a guiding theory of practice, this service currently supports individuals ages 21 to 35 to explore and identify what their individual preferences, needs and dreams are so they can be empowered to live the life they want to lead including identifying and holding the valued role of employee.

For participants to date, SRV and the discovery process were used to create a typical vision for an ordinary life. The premise of SRV is if people hold valued social roles, (such as family member, friend, employee, neighbour, student, volunteer,) they are more likely to have access to the good things in life. These are the things we all take for granted: having a home of our own, family, work, friends, access to community places, and having a say in how we conduct our lives. SRV provides us with a research-based theory on how to support a person achieve the good things in life.

During the discovery process, all aspects of the person's life, their dreams, wishes and preferences around home, family, relationships, friendships, and lifestyle choice are identified. The person participates in a broad range of ordinary life experiences that are necessary for meaningful engagement in their community. The person is supported to identify their skills and interests, to learn the relevant competencies and develop personal image needed to enter valued social roles. This may include further education or employment. Key to this process is working exclusively with one person at a time and developing a partnership with the person, their family and identified circle of support.

Participants of *It's My Life* are supported to attain social roles and competencies that are unique to each person. One person was supported to acquire the roles of employee, volunteer, neighbour, active member of local community groups and supported to develop the competencies needed to pursue his vision for a good life.

For another person, this process has enabled them to hold and enhance the valued role of homeowner, employee, while also expanding their network of friends through inclusion in groups related to their interests.

The family of one participant in *Its My Life* were able to clearly identify the significant differences made in the life of their son from the individualised supports offered. They describe how their son, a 31-year-old man – was not interested in the activities that were on offer when he attended a traditional day service. He therefore opted out of day services and with no purpose to his days, would spend the day in bed.

They said of his condition upon exiting traditional day services: *"You know, he's 31, he's a young man, and he follows all the football, sports-mad, to (accessing supports that were not fully addressing his bespoke needs). It wasn't really going to get him anywhere."*

As a consequence of individualised supports provided by *Its My Life* programme, his life was transformed. Until this time many of the good things in life remained out of his reach. Through supports provided, he became an employee, working two days per week, volunteering for his favourite league of Ireland soccer team selling programmes, competes with his brother in running events and has developed competency skills to help within his home.

The participant's mother noted the following: *"But from that day (entering the It's My Life Programme) to now, the difference in his life is immense. You just couldn't compare the two. He's more confident. The lady in the news agents who helps with the bowling came over and said to me, "(The supported person) is in great form." I said, "He is, yeah." She said, "We have all noticed that he is totally changed. That is because he now has a purpose. When he started the bowling thing, I thought, "Oh, that won't last, no, no. He's now very much a part of the team. "I've done this all myself." He's there, and he's talking to everybody."*

His family notes that the participant has gone from having little structure in his life, little motivation to do few if any daily activities, to demonstrating confidence and making progress towards a previously unthinkable degree of independence and focus on what he wants to achieve in life:

"So he has gone from having no structure and really nothing to look forward to, to being able to (focusing on his job) ... I hear him on the phone to my aunt. "I am working. No, I can't do that now because I'm working." This is the first year in all his life that he will pay for his own holiday. That's a huge thing. And it's a huge thing for us to see that he can do. And he's doing the small things, like he's putting his clothes away...That might not sound much, but he's putting his clothes away and he's tidying his room. He is cooking a bit for himself. He wants to be more independent, and we want him to be more independent."

As *It's My Life* participants were not reliant on being supported as part of a traditional day support programme, they maintained their individualised support level with their community connectors across the pandemic. Coordinator of *It's My Life* were available for support to staff and participants by phone as needed. The focus for participants became the life skills and interests that could still be pursued and enhanced while working within national COVID-19 guidelines. For one participant, the focus from March to June was to enhance his cooking and physical skills in tandem with developing the necessary infection control skills to enable him to return to his employment after the first lockdown. The second participant continued to work throughout the pandemic and focused on saving money, redecorating his home and using technology to communicate.

A key target for 2021 is to provide increased opportunities for individuals to pursue the valued roles and good things in life they want for themselves as active, contributing citizens through expanding the capacity in *It's My Life*.

5.2.4 Rethinking Respite Supports

A service review of Respite Services in Dublin was carried out at the request of the CEO. This review was carried out considering Public Health Guidance in relation to the management of services during the Pandemic due to COVID-19 and the perceived impact that this will have on Respite Services and everyone who accesses a Respite Service or is waiting to access Respite is treated in a fair and equitable manner. The review was completed by an appointed team with input from service teams providing respite supports and considering all previous reports completed in the Service on our respite provision. The team formulated their recommendations into a final report to the CEO.

The general principles and guidance underpinning the recommendations of this report are:

- Person-centeredness.
- Safety – measures are informed and guided by public health advice and assessment of risk
- Equity: processes aim to ensure that all persons who meet the criteria for Respite have access to services available
- Ethics: all decisions are values based
- Respect: for the individual's dignity and autonomy
- Openness and transparency: To ensure that the decision-making process is clear, multi-disciplinary in nature and is well communicated.
- Evidence-based /informed: based on data and research available

Key recommendations came from the report were presented in the following areas:

- Provision of children and adult residential respite services
- Wait list management in residential respite services
- Connect Services
- Host Families Services
- Family Support Services
- Specialised / therapeutic Respite supports

The report was accepted in 2020 and progression of recommendations will continue across 2021. The learnings of this work will be applied to other regions.

Developing online supports

Technology became invaluable as we adapted to alternative ways of communication and interaction. A wide range of digital technologies were used to facilitate service provision and to maintain a sense of connectedness with family members and the people we support. The pandemic resulted in improved digital literacy amongst the people we support, and the use of technology enhanced service efficiency by the various means adapted.

The nature of service delivery changed drastically for many departments, for speech and language therapists and caregivers became more accepting of communicating through video, email and telephone calls. Therapy sessions via an on-line platform have now become the norm (where appropriate) for some of the individuals we support with some parents and caregivers noting that this was an easier method for them as it was more time and cost effective.

Within the psychology department assessments, individualised supports, group work, parental support sessions, were all facilitated with the use of interactive technology. Psychology was also involved in the development of accessible videos (e.g., Mindfulness on the DOCDSS YouTube channel; contribution to the 'Feel Good Series' webinar for parents) and in the production of accessible materials, including COVID-specific resources.

The social work department contributed to the roll out of two recent Online Parent's Plus programmes for carers in Children's Services.

Various resources were also developed by the physiotherapy department, for example:

- Video – Upper Limb Passive Range of Motion
- Video(s) – Pilates for children
- Easy Read Resource – Home Stretching Programme
- Easy Read Resource – Airway Clearance Techniques

The physiotherapy department also established a group work via video platform which was established during pandemic, where appropriate.

However, in the middle of COVID the speech and language department tried to find ways to have some fun and mark a few happy occasions. They developed a 'What makes me happy' video with wonderful and inspiring input from staff and people we support. It did bring a smile to many faces.

Although the pandemic has challenged us in the direct supports we can provide, in seeking to positively respond we are now developing an online platform to host a variety of virtual activities that are accessible, meaningful and of interest to individuals within our service.

The platform will provide opportunities for:

- learning/ development
- participation in activities of interests
- leisure and creativity skills
- access to information
- engagement in positive social experiences

Having successfully applied for funding from Comic Relief and RESPECT this platform will be fully operational in 2021.

5.3 Developing and improving services and supports that we provide to children and adults

5.3.1 Progressing Children's Services

Progressing Disability Services for Children and Young People Programme (PDS) is a significant change in programme for the provision of therapeutic services for children from birth to 18 years of age.

It is being rolled out nationally by the HSE in partnership with its funded voluntary organisations. PDS seeks to:

- Provide a clear pathway and fairer access to services for all children with a disability.
- Make the best use of available resources for the benefit of children and their families
- Ensure effective teams working in partnership with families and with education staff to support children with a disability to reach their full potential.

PDS is a fundamental new way of delivering services to children it requires pooling together all resources, including staff, facilities, and equipment, from the different voluntary agencies and the HSE providing specialist children's disability services, to establish Children's Disability Network Teams (CDNTs). A CDNT comprises a team of health and social care professionals who will provide services for a specific geographical area.

Once all teams are in place, there will be full national cover. The impact on the service will be an influx of new families into the organisation, and the departure of other families as their services are shifted to partner service providers based on their catchment area.

A child's access to services will be based on his/her needs, i.e., a diagnosis will not be required. Instead of a service providing for children with one type of disability only, resulting in some children unable to access a service, each CDNT will provide for all children with complex need arising from their disability who live in that area.

- Children with non-complex needs will receive services at Primary Care level. A small number of children with very complex needs will need a level of expertise which may not solely be met by Primary Care services or the Children Disability Network Team. Specialist services will be developed to support and work with the CDNT and Primary Care services to meet the needs of this group of children.

Children Disability Network Teams had been piloted and established in other parts of the country, including Children's Services in Limerick, several years ago. Work was slated to restart the transition to PDS networks for CH09 in 2020 – this however was disrupted by COVID-19. The reconfiguration meetings resumed mid-year – focused primarily on the work performed by the governance and communication strategy groups. The CH09 Dublin team consisted of representatives from the Health Service Executive (HSE), St. Michael's House, DOCDSS, and Central Remedial Clinic (CRC). The groups met over the summer to begin looking at effective communications strategies to inform new parents on the basics of how PDS would function, and to re-engage with parents in receipt of supports that would have prior familiarity with the move to the network system.

In addition to the reconfiguration of CDNT by lead agencies all Children's Disability Services have continued to work towards implementation of the goals and objectives set out under PDS. In 2020 this included the recruitment of Children's Disability Network Managers and an implementation plan for the move from school to home address for community network teams in the respective CHO regions. Discussions concerning families took into account the following points:

- Inability to host in-person forums due to safety concerns resulting from COVID-19. Timing the release of the letters to coincide with PDS progression to avoid overburdening families with information without a clear picture as to when the transition would take place.
- Notification on privacy protection when files are transferred with the child to their new service
- Engaging in discussion with families concerning any potential changes to their service.
- Addressing concerns about the impact the reconfiguration will have on waiting lists

5.3.2 Supporting individuals to become valued members in the Community

De-congregation continues within the DOCDSS in line with the Time to Move On Strategy for community inclusion however, in 2020 the planning and transition period was different due to COVID 19. However, the commitment of staff, families and the individuals we support to make the vision a reality was no less. Four campus-based settings within the service closed their doors, Ard Mhuire, Lissadell and Oakview in Limerick and St. Rosalie's Centre in Dublin.

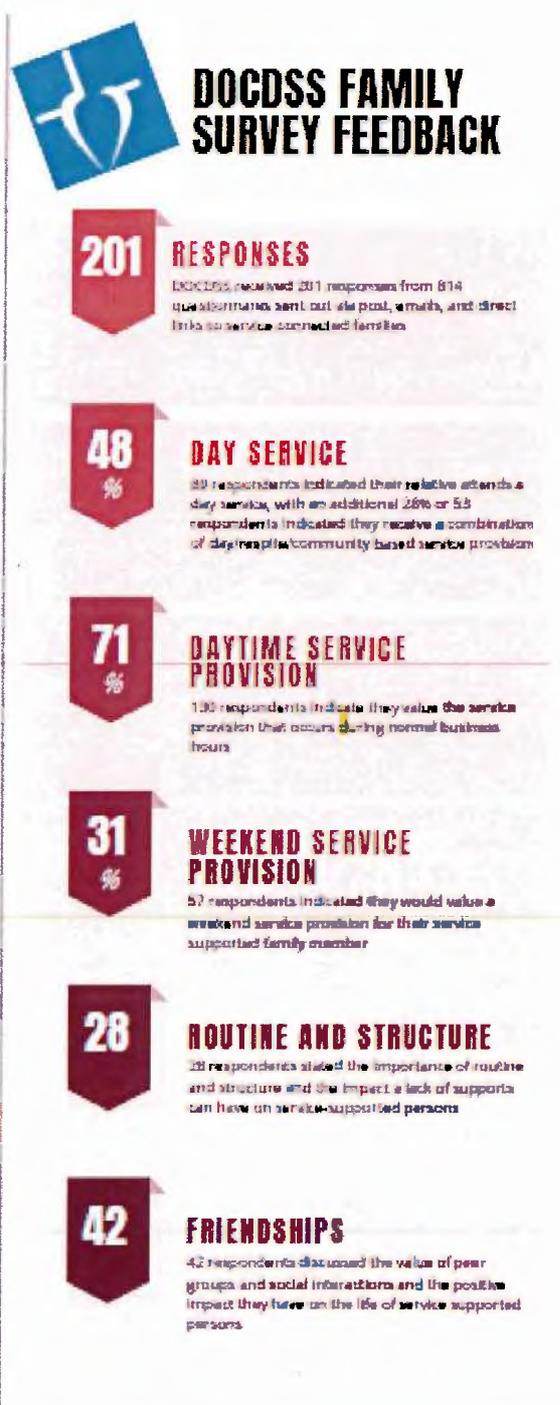
In Dublin six individuals moved into two beautiful houses in the communities of Clonee and Clontarf and in Limerick, four individuals moved to Old Gardens, Castleconnell, everyone was settled into their new homes by

Christmas. Overall, the moves proved to be a success and the positive changes and developments in the lives of the individuals concerned are very evident.

The Lisnagry Association who are a very committed group of parents and friends of those we support provided funding for an adapted vehicle to accommodate the transport needs of the residents of Old Gardens. As this house is based on the outskirts of a beautiful village in the countryside, public transport is not available however having this adapted vehicle has made a huge difference.

Much progress has been made since 2016 in Limerick and in Dublin and we intended to plan and support further moves into the community by the individuals we support in 2021, in line with their preferences and needs.

5.4 Individuals we support at the core of our planning and delivery of quality services





DOCDDSS FAMILY SURVEY FEEDBACK

20

FLEXIBILITY

20 respondents talked about the need to be flexible in service provision, with different hours/days of service provision to stagger smaller groups to prevent COVID-19 infection and make use of current space available.

16

ONLINE SESSIONS

16 responses noted that Zoom and other online platforms can provide a level of service to fill the gaps with reduced capacity, while noting that online classes are not for everyone and many people have limited or no access to such classes.

23

THERAPY PROVISION

23 respondents stated they had need for one or a combination of therapy services provided by DOCDDSS, this included OT, Physio, and Speech & Language providers.

8

HUBS AND OUTDOORS

8 respondents specifically commented on making use of outdoor spaces and hubs to allow for service provision in the context of continued restrictions and social distancing needs.

38

RESPIRE SERVICE

38 respondents mentioned the importance respite service has for their service supported person and for their family to give older caregivers a rest period.

30

DAYS OF SURVEY

The survey was collected over the span of 30 days from May through June of 2020.

5.4.1 Individual and Family Engagement

As the public health restrictions begin to ease toward the end of what would become the first lockdown, the DOCDDSS began the process of examining what a reopening and a resumption of services would look like in the context of COVID-19. Given that the virus was active in the community vaccines were still in development stages, and a 2nd wave would commence several months from the completion of the survey, it was clear to the Service that it will not be possible to return to pre-COVID day service provision levels within the foreseeable future.

The Department of Health took note of the experience of other countries that saw resurgences following the easing of restrictions, which indicated that there is still a risk of additional waves of community transmission. This would be evident in October and December of 2020, as 2nd and 3rd waves would put the nation back into additional restrictions. As a result, constant symptom monitoring (temperature checks), social distancing requirements and other mitigation measures were determined to be needed to be put in place in order to keep everyone safe so that much needed services could resume in this 'new normal'.

5.4.2 Families

To facilitate the reopening of day services, the DOCDSS initiated a consultation process with families and supported individuals to determine needs, expectations, concerns, and potential solutions. It acknowledged that balancing family / carer wishes and the needs of the people we support would be a challenge.

The data on families' responses to rethinking of day services, and a consultation process with the individuals we support were conducted at local level, with the intention to collate data into a comprehensive report that was compiled by July 2020.

The objectives of this survey were as follows:

- To understand what families' value / require most from the supports they receive
- To establish what times of the day would these supports be most valued
- To establish where these supports are best provided
- To ascertain any suggestions as to how day supports could be changed in a COVID -19 context
- To ascertain if families have any concerns

A questionnaire was created using an online survey platform and sent to all families availing of day supports in Dublin, Limerick and Roscrea. Respondents were asked what the best location would be to provide services to their relatives: a day service location, in the family home, a community-based setting, or a combination of the locations.

A total of 814 questionnaires were sent out, 201 responses were returned – a 24% response rate. As names and locations were not questioned, respondents had both anonymity and the opportunity to be open and honest in their answers.

Summary of responses

The findings from the questionnaires show the following:

- 89 respondents (48%) chose a day service as the best option for service provision for their relative
- (5%) chose the community option
- 130 respondents (71%) would value these services being delivered during the daytime
- 57 respondents chose a weekend service, 36 of the 57 chose day and weekend delivery of service

Recommendations were issued in the report from analysing the response data:

To maintain, further develop and sustain effective communication and engagement structures with families at local, Service Manager and organisational level.

It was recommended that there was an update to the website to provide supports and updates on service provision and COVID-19. The current DOCDSS website was not determined to be fit for this purpose – the recommendation would be used to inform work on what would become an online service provision hub.

Resumption of day service should take account of friendships

A few respondents stressed the importance of social contact and friendship, *if possible, to obtain some level of day service to interact with his friend and meeting up with his peers, getting out of the house*. The request of familiar social contacts was taken into consideration when limited in-person service provision necessitated the creation of day service pods that would allow small groups of supported persons to avail of in-persons supports that would be generated from known peer groups.

Day Service resumption should be based on several factors, including safety, equity, and accessibility

The survey data and report noted that online supports are not for everyone, due to technology limits in the home, by the supported persons themselves, or the technical knowledge of whomever is supporting them to participate in an online session. It was determined that individuals that could only receive supports in a centre or community- based location should have priority in receiving days services, those that had the desire and means to receive a mix of in person and online services should avail as such, and those that prefer online supports from the home should have that as an option. MDT teams engaged with the people we support as part of a programme of individualised service, efforts should be made to engage in online supports where possible and practical, and direct/in-person supports where necessary and otherwise impossible. There was a cohort of respondent that indicated that they were flexible regarding time of delivery of these supports.

Furthermore, day service resumption considered as part of the equity and individualised support element the idea that some supported individuals will be in higher needs categories based on social and physical needs than others. Not all the individuals we support are happy with a day service with a full slate of activities that consume the entirety of the day. Some supported individuals want/thrive on a full day schedule, others are content to pick and choose how many or the nature of the activities they take part in. This element should also be considered when formulating plans to reintroduce service operations and creation of groups/parings.

Based on the results of the survey – work began shortly thereafter on facilitation of online supports and national and local working groups that would examine how to use the pandemic as an opportunity to fundamentally rethink how services are provided.

St. Vincent's Centre Sport, Physical Activity and Dance Programme 2020:

Since the programme started in 2018 the sport, dance and physical activity timetable continued to be updated as requested by supported individuals in their feedback forms. Collaboration with local sport officers, inclusion and integration officers, *Enjoy Tennis* Programme coordinators and the service volunteer coordinator, has contributed in a great manner to provide supported individuals with new exiting opportunities in community-based sport and dance events.

Remote Services and Activities:

This year we learned and adapted to the use of technology as a new way of planning and delivering a large range of sessions for all the people in our services. One of most important developments this year was the introduction of live on-line sessions. Live on-line video classes have proven to be a great tool to keep people connected and active during the pandemic. A large variety of sessions has been provided by our gym staff who made sure that the participant's requests and feedback were taken into consideration to organise, plan and deliver their preferable sessions. Participants from all DOC services, Dublin, Tipperary, and Limerick regularly connected and participated in sessions. Overall, the programme manager received a great response and feedback by the Zoom participants.

Sessions Offered:

- Adapted Fitness, Strength and Core
- Gentle Chair Exercises and Motor Skill
- Mobility and Flexibility
- Zoomba
- Chair Yoga with Footballer Michael Darragh MacAuley
- Boot-camp sessions with our Local Sport Inclusion Officer
- Mindfulness
- Creative Dance
- A Christmas Zoomba class which was attended by more than 80 service supported individuals from across the DOCDSS services
- Motor Skills Darts Competition
- Creative Dance Competitions

2020 was a challenging year for all, however the gym programme responded in a creative way to the pandemic and continued to provide services not just for the people in St. Vincent's centre but to all individuals across the services who wanted to try and attend remote sessions.

5.4.3 United Nations Convention on the Rights of Persons with Disability

Disability Participation and Consultation Network

The Department of Children, Equality, Disability, Youth, and Integration set up the Disability Participation and Consultation Network in December 2020. The purpose of the DPCN is to make sure that people with disability are listened to and have a real say when Government makes laws and policies on disability and other issues affecting disabled people. The DOCDSS will form part of this national network along with other members (agencies and individuals). Members will take part in the running of the Network and be central to its work of gathering and representing the views of people with disabilities and making sure that those views are heard in the development of policy and legislation; consultation on Ireland's Initial State Report to the UN Committee on the Rights of Persons with Disabilities is an immediate task for the Network at the beginning of 2021.

This is very much in keeping with our strategic objectives to influence national policy and legislation and implementation of UNCRPD.

6. DEVELOPING OUR ORGANISATION TO SUPPORT THE DELIVERY OF OUR SERVICE GOALS AND QUALITY SERVICES

6.1 Ethical and Clinical Governance

The Clinical and Ethical Governance of the DOCDSS is governed by the Clinical Director and the Director of Nursing. Supporting them in their work is the Service Ethics Committee the multidisciplinary teams and the Clinical Nursing Team.

Ethical Governance

1. The DOCDSS strives to ensure that all our work practices and actions in supporting individuals are carried out in line with the highest ethical standards. A central resource to support this objective is the work of the Service Ethics Committee (SEC). The SEC serves to develop ethical guidelines on policies and procedures and address ethical issues within DOCDSS.

The SEC met quarterly across 2020, within that span they guided the organisation on various ethical issues presenting for some individuals and their supports service and provided additional directions to Operational teams.

Additionally, they reviewed applications for research related to the individuals we support and their service provision and gave approval or note for them to proceed.

The membership of the SEC is comprised of external and internal membership; the roster for 2020 was as follows:

- Natalya Jackson, CEO, DOCDSS, (Chair).
- Prof. David Smith, Associate Professor of Healthcare Ethics, RCSI
- Mary Kirwan, Legal external
- Dr. Siobhan O'Sullivan, Lecturer in Healthcare Ethics and Law, RCSI
- Dr. Sinead Cronin, GP Representative
- Dr. Jackie Daly, Senior Lecturer Biological Sciences, Associate Vice Dean Student Support and Development, Faculty of Medicine and Health Science, RCSI
- Dr. Niamh Clarke, Research Ethics Committee Convenor, RCSI
- Lorraine Macken, Assistant CEO, Dublin, DOCDSS
- Liam Keogh, Head of Social Work, DOCDSS
- Breda Noonan, Service Manager, Limerick, DOCDSS
- Dr Anita Ambikapathy Consultant Psychiatrist, DOCDSS
- Brid Dempsey, DOCDSS staff

6.2 Clinical Governance

Multi-Disciplinary Team (MDT)

The multidisciplinary teams are based throughout the Dublin, Limerick, and North Tipperary /Offlay Service. They consist of Occupational therapy, Physiotherapy, Psychiatry, Psychology, Social Work and Speech and Language Therapy and Paediatrics. The teams provide a large range of supports across the services and work collaboratively.

At the beginning of the pandemic there was considerable fear about the impact of the virus on the individuals we support, their families and staff. The safety of all and the prevention of spread of this highly contagious virus was and remains a priority of the MDTs. Nursing staff within the service were redeployed to frontline services and the consultants on the psychiatry team in Dublin supported other medical staff with ordering COVID tests and providing advice to staff, liaising with public health and other pandemic- related work.

As a result of infection control guidance, the teams had to adapt their working methods overnight. Remote working and the use of phone and screens for assessments, reviews and meetings became the norm very quickly. IT supported the teams to access the equipment necessary for this, but it was a steep learning curve for all and not without real issues.

The effects of the lockdowns with initial closure and then curtailment of day services, respite and family support caused considerable challenges for many supported individuals and their families. Behaviours of concern and high care needs meant that parents found 2020 a difficult year. Extraordinary efforts have been made by all to provide support throughout this time.

Expanding services and growing/changing needs of the individuals we support have placed considerable demands on all team's caseloads across the service. However, infrastructure has been put in place to be as effective as we can, for example the creation and filling of vacant posts has supported the various teams in supporting individuals and their families.

Innovations and ways of working during the pandemic

The Social work department contributed the roll out of two recent Online Parent's Plus programmes for carers in Children's Services and exploring the use of this model for support to carers in Adults Services. The social work department is looking at parent advocacy/empowerment initiatives such as Pathways to Possibilities; Positive Futures; Leap; DESSA with a view to developing a support programme.

Various online resources were developed to support people through the pandemic, such as the physiotherapy department who developed:

- *Video – Upper Limb Passive Range of Motion*
- *Video(s) – Pilates for children*
- *Easy Read Resource – Chair based exercises – sitting*
- *Easy Read Resource – What PPE to wear and when*

The psychology department used technology to facilitate continuing provision of psychological services to individuals they support, staff, and families during the pandemic, including assessment, individualised supports, group work and parental support session. Psychology was involved in the development of accessible videos (e.g., Mindfulness on DOCDSS YouTube channel; contribution to the 'Feel Good Series' webinar for parents) and in the production of accessible materials, including COVID-specific resources.

Speech and language just before the pandemic launched the new International Dysphagia Diet Standardisation Initiative (IDDSI) across the Dublin service. This new IDDSI meant that the names of texture modified diets and thickened drinks were changing to comply with international standards. They undertook several training sessions across the different centres in Dublin to familiarise staff with the new terminology. Unfortunately, face to face training sessions were abandoned due to the pandemic and different methods of training staff were being considered.

The psychiatry team continued to provide on call mental health provision to residents in Dublin throughout the pandemic. Along with the psychologist on the MHID team the psychiatrists provided crisis mental health support to over 300 supported individuals. As the year progressed routine mental health reviews resumed remotely, and the most urgent cases were seen for face-to-face assessment and treatment in as safe a manner as possible. Consultants continued to provide psychiatry training to two junior doctors over the 12-month period.

Publications

The social work department and Independent Living coordinator collaborated with Trinity College in research funded by the National Disability Authority. The study "*The experience and risk of homelessness for people with intellectual disabilities and/or autism and their families in Dublin*", is a mixed methods study, exploring the experience and risk of homelessness of persons with Intellectual Disability (ID) and/or Autism Spectrum Disorder (ASD) and their families in the Dublin area of Daughters of Charity Disability Support Services. The report was published by the NDA on the 8th December 2020 and was accepted for IASSID, Amsterdam July 6th -8th 2021 and journal articles are being prepared.

Social work inputted into the review of the Child Safeguarding Statement for the service and the HSE Draft National Safeguarding Policy.

Senior OT in Roscrea developed a sensory education document for DOC staff named 'Sensory Integration Pre-Referral Graded Approach'. This pack was developed to support those working with individuals with potential sensory processing difficulties.

The Psychology Department developed staff supports in context of COVID-19, including development of Staff Wellbeing Handbook, articles in Service Newsletter on maintaining psychological wellbeing during the pandemic.

The department made several contributions to research-based evidence for psychological services to people with intellectual disabilities. This included participation in research and dissemination of results through participation at conferences, lecturing, and journal publication. This included a publication on social role valorisation by Dr Helen Connaughton in the *British Journal of Learning Disabilities*: Connaughton, H., & Cline, T. (2021). How far can social role valorisation theory help in transition planning for a school-leaver with significant special needs? *British Journal of Learning Disabilities*, 49(1), 80–86. <https://doi.org/10.1111/bld.12310>

Challenges

From March onwards all Multi-Disciplinary Teams experienced challenges, such as reducing clinic capacity, upskilling staff on IPC, reduced access to the people we support, limitations of parents to carry out sessions/recommendations/programmes daily and in some cases deterioration of mobility status and weight increase of the people we support from inactivity during the pandemic with increased risk for falls and falls related injuries.

IT Issues

- Lack of WIFI in SJC MDT area limiting interventions with people we support, participation in meetings etc.
- Need for additional laptops, mobile phones, to support remote working
- Not all people/families have access to IT supports or are not interested/can't afford broad band to allow video sessions.
- Video sessions are not always possible to allow the therapeutic assessments and interventions they were responsible for providing

Collaborations:

- OT Manager became vice chairperson of National OT managers group
- OT Manager was part of 'Falls Policy Group' compiling a national policy for Daughters of Charity Disability Services
- OT Manager participated in disability & community streams of AFFINITY project which is a national project between HSE & State Claims Agency
- Contributions by members of our Psychology Department included participation in the selection of doctoral candidates, lecturing, and the provision of supervised clinical placements for trainee psychologists. The department supported the professional training of psychologists nationally, in collaboration with multiple training programmes including those provided by TCD, UCD, and UL

The psychiatry department provided lectures to medical students (UCD) and junior doctors. Dr Ambikapathy contributed in a substantial way to the College of Psychiatrists of Ireland and a review by the medical council of the training programme for senior registrars.

Dr Mulryan continued her significant involvement in the TILDA-IDS research with TCD. She also sat on a national committee looking at restrictive practices for the HSE.

Focus for 2021:

- The focus for 2021 for all the teams is to resume their MDT work which was deferred in 2020 due to lockdowns and reduced ability to assess supported individuals in-person
- Engaging in the roll out of PCDS and supporting social workers and Network Managers in the restructuring and roll out of services and supporting families around the change in how services are offered post-reconfiguration
- To support the roll out of information and training in relation to the new Service Child Protection and Welfare Policy
- To prepare for the roll out of the HSE Safeguarding Policy and to continue to work on system issues within current policy and practice

Clinical Nursing Team

In 2020, the Department of Nursing was committed to the demonstration of capacity and capability of the service's nursing workforce to meet the demands the COVID-19 pandemic through education and upskilling.

Central to this was work undertaken to help maintain a quality service during the worst of the pandemic through the incorporation of National HPSC and HSE Infection Control guidance and establishment and safe operation of isolation centres. Critical to the establishment and running of the isolation hubs was the institution of high levels of training and participation of the nursing team.

The adoption of national COVID prevent standards and adherence to IPC protocols and allowed nursing working collaboratively with care and support teams across the Service to play a critical role in mitigating the worst effects of the virus. The teams were engaged in redeployment and eventual repatriation across service areas to support workforce planning in isolation areas and provide for the needs of persons needing to isolate due to suspected or confirmed COVID cases. Our nursing team would later play a crucial role in the vaccination delivery and rollout programme.

The nursing team was able to participate in international commemorations of the International Day of the Nurse through work with the Communications Manager to produce a video highlight reel featuring members of the DOCDSS nursing staff sharing their reasons for becoming a nurse and telling their direct accounts of their work and why it is of importance to the service and to society at large. Nursing was also engaged in seeking Innovation funding allocation for the following projects:

- Educational hub (Louise's)
- Digital life story coordinator (Limerick/Roscrea)
- Workforce planning-nursing requirements. review (Roscrea)
- Advancement of candidate Advance Nurse Practitioner (Limerick/Roscrea)
- Educational programmes for Nursing progressed for Level 8 and Level 9 programmes through NMPDU funding.

The Director of Nursing also provided DOCDSS participation on the National RNID during online forums hosted over pandemic concerning the future of intellectual disability care and support.

Key Successes:

The Nursing Team – in collaboration with staff at service locations across DOCDSS were able to provide safe service delivery in Infection Prevention and control in COVID and outbreak management. While providing support for COVID, Nursing was also able to provide for the rollout of flu vaccination programme and increase in uptake of the flu vaccine through training and operation of peer vaccinators and flu vaccination clinics. The long in discussion plans to implement plans to make St. Vincent's Centre Dublin a smoke free campus. Nursing was also able to implement other tasks for 2020, including:

- Recruitment of candidate Advance Nurse Practitioner from Department of Health funding
- Recruitment of 0.5 WTE Clinical Nurse Specialist in Infection Prevention and Control on the Dublin region
- Partnership in Dementia service provision with Daughters of Charity Memory clinic and Tallaght University Hospital National Memory clinic
- Commencement of 2-year NMPDU project initiative in St. Louise's centre in Health Promotion
- Recruitment of student nurses to Health Care Assistant role to address workforce shortfalls from staff cocooning
- Participation of Director of Nursing, Clinical Nurse Specialists in Dementia, Candidate Advance Nurse Practitioner-Dementia Intellectual Disability in Dementia and Clinical Nurse Specialists in Children's Services in National Webinars during COVID pandemic

Key Challenges for 2021:

Critical for continued success in 2021 will be rolling out vaccination programmes across the Service as COVID remains an issue of concern and possible transmission, along with maintaining safe service delivery in Infection Prevention and Control. Nursing will also seek to maintain student placements in children's services and specialist sites, work towards recruitment and retention of nursing staff, and prepare for NMBI Inspection for student nurses in Dublin City University.

Key Plans to take forward:

- Ongoing management of COVID-19.
- Development of post registration Internship programme for Intern Nurses.
- Recruitment of Digital life story coordinator with NMPDU funding.
- Ongoing management of student nurse placements during COVID pandemic.
- Progression of Strategy in Nursing following launch of strategic plan.
- Specialist nursing requirements to support ageing in place and persons with dementia for Limerick/Roscrea area.
- Rollout of Tobacco Free Campus in St. Josephs.
- Review and develop partnerships with local hospitals and agencies to explore Clinical Nurse Specialist and Advance Nurse Practitioner roles.
- Ongoing review and development of Clinical Educational Environment placements for student nurses.

7. SERVICE GOVERNANCE

The Board delegate day to day management of the DOCDSS to the CEO, who is supported by the Executive team. Two new roles were appointed to the Executive team in early 2020; these were the Director of Quality Safety and Risk, and the Director of Governance Strategy and Planning.

Additionally, the role of Director of Logistics was expanded to Director of Property, Estates and Technology Services.

In 2020 the Executive team was made up of the following roles:

- Chief Executive Office
- Assistant CEO Dublin
- Assistant CEO Limerick
- Director of Finance
- Clinical Director
- Director of Nursing
- Director of Property Estates and Technology Services
- Director of Human Resources
- Director of Quality Risk and Safety
- Director of Governance Planning and Strategy

The team meets every three weeks and all members of the Executive Team have shared responsibility to drive and support the organisation in achieving its goals and objectives and meet all required regulation and compliance.

The DOCDSS Service Coordinating Committee meets every 6 - 8 weeks. It includes the full Executive Management Team and the senior line managers. DOCDSS Regional Management Teams meet quarterly; includes the operational and Multidisciplinary leads for the region. A serious incident management team (SIMT) was put in place in 2020 to address COVID-19. This was chaired by the CEO, and the team's core function was to oversee the governance and management of the risk of COVID-19 across the service. The team was very active across the year, meeting 6 days a week initially before a reduction in frequency to weekly meetings as services, responses and structures were embedded.

Key Organisational Committees in place to support shared learning and oversee the performance across the organisation did not meet face to face due to the pandemic and completed their work through online forums. The governance focus of these forums includes the following areas:

- Serious Incident Management Forum for COVID-19
- Health and Safety
- Safeguarding
- Infection Control
- Medication Management and Administration
- Persons Centred Supports
- Restrictive Practise
- Advocacy
- Rethinking Day Supports National and Local Forums

Natalya Jackson, Chief Executive Officer

The Chief Executive Officer (CEO) of the DOCDSS reports directly to, and is accountable to, the Board of Directors and is responsible for the overall management of the Service. The CEO provides effective direction, leadership and strategic vision, and is responsible for ensuring effective governance structures are in place and operational across the service. The CEO of DOCDSS is responsible for leading the development and execution of short and long-term strategies of the organisation. The CEO ensures sound and efficient financial management and accountability for public funds. The role hold overall responsibility to ensure supports and services provided by DOCDSS are impactful for individuals, and are consistent with the overall vision, mission, values and strategy of the organisation. In carrying out their role they work closely with their Executive and all internal and external stakeholders of the organisation.

Lorraine Macken Assistant CEO (Dublin) and Michelle Doyle Assistant CEO (Limerick/North Tipperary)

The Assistant CEOs are responsible for overall governance, budgets, and management of operations and service delivery in their region. They are tasked with sustaining close working relationships and negotiating with the HSE and other stakeholders such as local authorities, regulators, families, and Individuals we support. The ACEOs are responsible for driving change, sharing vision and strategy, and ensuring that deliverables/key performance indicators are achieved. They have responsibility and oversight of day-to-day operations and management of services, and they act as advocate and conduit between service managers and Heads of department to the HSE, the Executive Team and the CEO.

Dr Niamh Mulryan, Clinical Director

The Clinical Director (Dublin) provides a link to the executive committee on clinical issues; they support best clinical practice and promoting the development of clinical services. The Clinical Director also liaises on clinical issues with the HSE. In addition to this executive role the role includes governance of other functions including head of department, head of the MHID team and a clinical caseload. Additional responsibilities include teaching, supervision, and research roles.

Roger Hynes, Director of Finance

The Director of Finance is responsible for the management of all financial matters, providing financial help and support as necessary to all budget managers. The Director of Finance provides direction and leadership to the finance team, oversees the accounts payable process, and oversees implementation of all finance process and procedures. The Director of Finance is also responsible for reporting to the HSE with detailed analysis across 3 areas and €140m annually and preparation of financial statements for audit.

Deirdre Rudden, HR Director

The HR Director oversees the HR functions for the Dublin services and North Tipperary and Limerick, which collectively represents 2,000 staff. The HR Director manages a department of 6 staff in Dublin and a HR Manager for each region. The Director drives HR for the organisation ensuring that their objectives link to the overall strategy and values. The role protects the organisation from an employment law perspective and deals with external stakeholders such as unions and the HSE to manage staffing issues that encompass the lifecycle of the employee.

Stephanie Kilrane, Director of Quality, Safety and Risk

The Director of Quality, Safety and Risk ensures that a robust quality, risk and safety management framework is in place across the organisation, with associated structures and processes to ensure that best practice is embedded at all areas of the organisation and relevant regulatory requirements are met. With the support of the Quality and Risk Officers and key support staff in each region, the Director provides operational and strategic support in the areas of regulatory compliance, risk management, incident management, health and safety, policy governance and development, training and education, supported person engagement and management of feedback. The Director seeks to drive a culture of person-centeredness and continuous improvement at all levels of the organisation and are also the key point of contact in the management of claims for the service.

Sarah Jane Dillon, Director of Governance, Strategy, and Planning

The Director of Governance, Strategy and Planning leads and coordinates governance, strategy, and planning in consultation with the CEO, Board, Executive Team and senior managers across the Service to ensure the Service operates under an active corporate governance and compliance framework in line with best practice. This role assists the CEO in implementing strategy through operationalization of plans and future developments, including identifying external funding streams for service development. The Director has operational responsibility for governance of procurement, GDPR, FOI, Communications and Volunteer Strategy.

Lisa Lavelle, Director of Nursing

The role of the Director of Nursing is to provide strategic leadership in the delivery of a safe and quality Service and the overall management of the Nursing Department. This includes setting objectives and goals for the department and ensuring the delivery of evidence-based practice, guidance, policies, and legislative provisions. The Director of Nursing provides oversight in all aspects of nursing and nursing led operations across the Service including SCW and HCA.

Derek Tallant, Director of Property Estates & Technical Services

The Director of Property Estates & Technical Services (PETS) has responsibility for the maintenance Management (In House & Contractors), Facility Planning; Costing & Planning and Managing Developments. The PETS Director oversees the purchase and sale of Buildings and Properties, the health and safety of building and services (Electrical, Mechanical) related items. Additionally, the role has oversight of IT Services (Capital, Infrastructure, Staffing & Contractors) and phone services, managing estates, civil infrastructure, grounds & Boundaries. The PETS Director also manages compliance with planning and building Regulations, while managing environmental issues e.g., energy efficiency, water quality, waste management. The role also contains the duties of Service Fire Safety Officer.

Data Protection

The service as a Data Controller is cognisant of its obligations and responsibilities under Data Protection Legislation 2018 and General Data Protection Regulation May 2018 (GDPR May 2018) During 2020 and notwithstanding the challenges of the COVID 19 Pandemic, the service continues to work through the programme of work identified from an external GDPR Audit completed in 2018 by Data Privacy Consultants.

Key Activities

- Data Protection does not stand in the way of the provision of Healthcare and the management of public health issues; nevertheless, the Data Commissioner and EU Counterparts have recommended that our data management practices on COVID-19 are transparent and proportionate to need to ensure safe and effective service delivery to all stakeholders at this time.
- The DPO in collaboration with colleagues supported the development of protocols/guidelines and standard operating procedures to ensure that the appropriate legal and lawful basis was identified for the processing of personal and sensitive COVID-19 related data to include the application of the 7 Data Protection Principles.
- Development and dissemination of the service Data Protection Policy and Procedures
- Development of Data Protection Training Modules reflective of all components of the Policy that includes a tiered approach to the training relevant to one's role and responsibility within the service.
- National Ability Support System (NASS) - Provision of support to the Director of Governance, Planning & Strategy on the development of a policy and procedure on the implementation of NASS across the service in line with our requirements under the service level agreement. This also extended to the facilitation of training on the NASS system with the Health Research Board (HRB) and collation of a training toolkit to support data inputters on the system and completion of a Data Privacy Impact Assessment to adopt this IT System.
- Records Management: provision of guidance and training to areas of the service records management policy to ensure that there is a consistent approach to the implementation of the policy and the archive of records process.
- Process and management of Subject Access Requests, Freedom of Information Requests and Data Breaches/Incidents. The service processes in this regards are fair and transparent and the Service can report that there have been no complaints received on any of these activities
- Cookie Compliance: New directive from the Data Commissioner issued to ensure compliance with the Cookies Directive by the 5th of October 2020. Work has been initiated to achieve this compliance facilitating consent on the use of Cookies on the website
- The service learning from a Ransomware Attack and on-going awareness for staff on cyber-security
- On-going participation in the National Federation of Voluntary Body Data Protection and Freedom of Information net-work groups. Promotion of shared learning within the networks. Attendance at the Central Policy Unit Meetings (CPU) on Freedom of Information and the Irish Data Protection Conference
- Provision of support and guidance to all areas in the service relevant to role

Key Challenges

- Due to COVID-19 and associated priorities, delivery of data protection training and the ability of the identified data champions to support the DPO was impacted. However, in Quarter 4 of 2020, it was agreed to recommence training and the DPO commenced engagement with the Executive Directors, Service Managers and Heads of Departments to re-affirm designated data champions.
 - This ensued refresher and/or training for the data champions on the development of the service Register of Processing Activities (RoPA)
 - Incomplete RoPA, Third Party Log and challenges to manage the GDPR risks identified from the gap analysis and processes inputted to date

Focus for 2021

- Review and update of Freedom of Information Policy based on 2014 Legislation and associated policy implementation plan
- Update the service Publication Scheme
- Data Protection Legitimate Interest Policy-complete
- Promote awareness of the completion of Data Privacy Impact Assessments where required
- Update service Privacy Statement
- Review and update Administrative Access to Supported Persons and Service-Related Requests, DOCS 027
- Identify and support the data champion focus groups to address challenges identified
- Participate in service-related initiatives where relevant to data management practices under GDPR and FOI
- Provide overview to the CEO and the Executive Team on areas of success and areas of focus regarding the service obligations under Data Protection Legislation 2018 and GDPR May 2018
- Keep abreast of all developments relevant to role and responsibility and update the service accordingly.

Procurement

The year commenced well for the Procurement Department, the remit was realigned under the newly formed role of Director of Governance, Planning & Strategy providing further emphasis on the need to have good strong governance, governing all expenditure within the DOCDSS. The plans for the year were to redraft and relaunch the current Procurement Policy and continue with the drive towards compliance, by addressing non-compliances from running tender process or utilising central OGP and /or HSE contracts, where appropriate.

With the arrival of COVID-19, this plan was abruptly halted during March with resources diverted to sourcing and logistics of PPE, service wide. The market for PPE and clinic requirements was challenging given high demand but the Service was able to respond to meet presenting needs. In the early days of the pandemic when PPE supplies were in high demand within the HSE, Article 32 of the Procurement Directive was invoked for purchases of all PPE and /or COVID related expenditure during 2020, permitting direct purchases without publication of a tender competition in extreme urgent events:

Article 32 - Use of the negotiated procedure without prior publication

1. In the specific cases and circumstances laid down in paragraphs 2 to 5, Member States may provide that contracting authorities may award public contracts by a negotiated procedure without prior publication. (c) in so far as is strictly necessary where, for reasons of extreme urgency brought about by events unforeseeable by the contracting authority, the time limits for the open or restricted procedures or competitive procedures with negotiation cannot be complied with. The circumstances invoked to justify extreme urgency shall not in any event be attributable to the contracting authority.

A tender process for Contract Cleaning Services commenced during 2019 and subsequently deferred in early 2020, was concluded during Q3 2020 with a contract start date of Jan 2021.

During Q4 2020 an internal tender process for the provision of Waste Collection Services to Limerick and North Tipperary/Offaly regions was commenced, this process is targeted for completion in 2021.

Additionally in 2020 DOCDSS transitioned to newly appointed suppliers, following the outcome of national tender processes for:

- Supply of Electricity to HSE / Health Sector
- Supply of Gas to HSE / Health Sector

Implemented the following contracts for use:

- Personal and Notebook Computers, National OGP Contract,
- Supply of Tanked GAS to HSE.

8. INVESTING IN OUR PEOPLE

“In 2020 the Human Resources Department will focus on a review of Performance Management, the continuance of staff wellbeing initiatives and a campaign around Learning & Development for all staff. This will include building relationships with academia to provide wider opportunities for students and recruitment”

2020 started off very positively for the HR department. We successfully added a new permanent Consultant Psychiatrist to the MHID team, and we embarked upon building our relationships with academic institutions to support succession planning for the Organisation.

With the pandemic beginning in March the HR Department plans for 2020 were stalled somewhat and the primary focus was on managing staffing and redeployment. Staffing much needed isolation units in Dublin, Roscrea and Limerick was a challenge but through collaboration with local teams, and staff flexibility was positively managed across the year.

Staffing in general was a constant requirement in terms of COVID -19 and the daily request of staff being deemed close contacts and requiring isolating and ensuring we were keeping services running at a safe level was a constant.

In June we took the opportunity to look at day services and what we could do to re-imagine and improve our services through the lens of COVID. This work has been rewarding and creative in so many ways and the benefit to those we support continues to be demonstrated in wonderful stories. We commissioned a survey of all staff to gauge their opinions and their general thoughts in relation to re-deployment resulting from COVID-19 and their thoughts on how the service could resume day service provision considering necessary restrictions due to the nature of the virus transmission process. The survey also sought to gather staff input on their priorities in relation to changed hours and duty locations and see what, if any, changes to their hours and locations they would seek to preserve or change from their period of redeployment

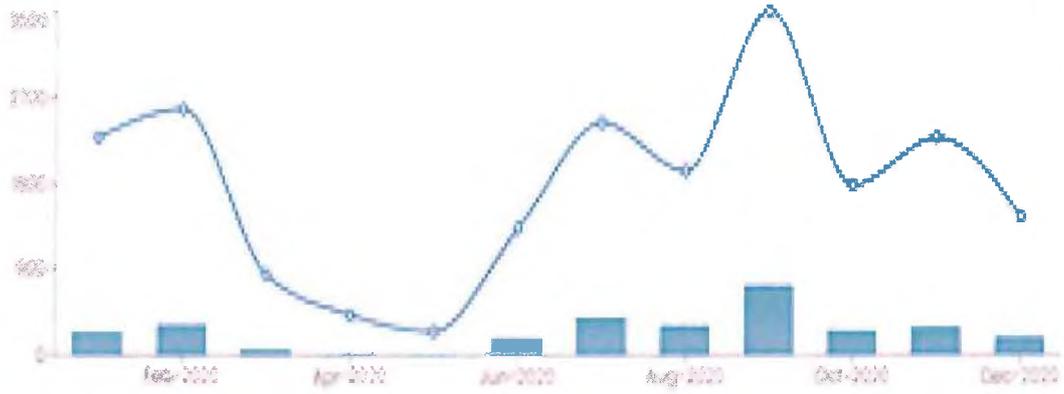
The following major themes presented:

- Meeting the needs of individuals supported by the Service
 - In open ended questions, staff expressed that supported individuals need their service provision to meet social needs that were lacking during the first lockdown period.
 - Staff noted that the disruption to the Service could provide a much-needed rethinking/reimagining of how day service provision is offered.
 - Staff noted in comments that some service supported individuals are happier without a full day of activities and having some downtime and socialising when they feel the need to do so.
 - Overall staff indicated they were happier to work with smaller groups of individuals, which in turn allowed them to offer more individualised supports and meet needs and preferences more on a supported-individual directed basis.
- 45% rated Safety from COVID-19 as their most important priority.
- Staff expressed a preference for Infection and Prevention Control measures over other offered supports such as IT training, risk assessments, and return to work protocols.
 - Job Satisfaction is a high priority for staff, followed closely by resuming nominal hours, going back to their primary work location, and work hour flexibility.
 - Work hour comments were discussed in open ended questions, with mixed opinions on changes to work hours and locations. Opinions range from being happy to work from home to unhappiness by the hours required to meet the redeployment shift.
 - Communication surrounding re-deployments and assignments were noted in open ended question areas. Several respondents made note of the lack of choice or advance warning they had concerning their redeployments and felt they lacked both a say and sufficient information from their line managers about their situation.

Looking back, HR's role through COVID was to communicate, inform, educate and support staff in as many ways as possible. Regular emails on a "Thought of the Day" were circulated to staff along with regular memos relating to updates on COVID between March 2020 and the end of the year. Mental health supports were offered through online portals for staff. The department participated in a webinar hosted by Trinity College on the Psychology of COVID for staff. We also welcomed a new HR Manager for the Dublin services.

Views/Applications

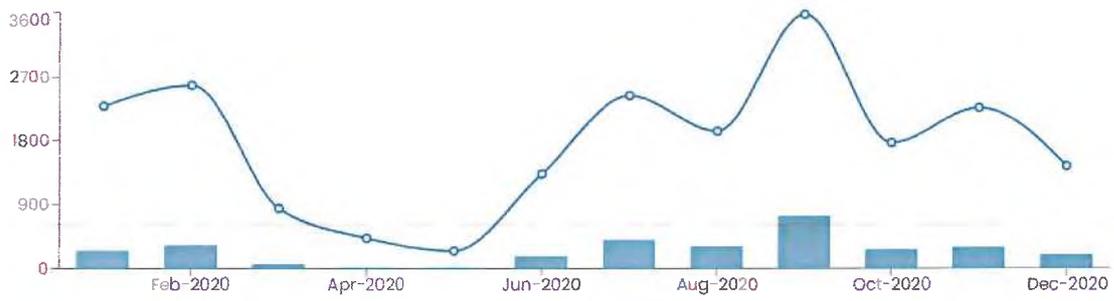
Last year



Views 2112 Applications 2941 Conversion rate 13.9%

Views/Applications

Last year



Views 2192 Applications 2946 Conversion rate 13.90%

9. QUALITY, COMPLIANCE, SAFETY AND RISK

9.1 Quality

2020 saw several changes within the Quality, Risk and Safety team in the DOCDSS with the successful appointment of a Director of Quality, Risk and Safety that commenced in mid-May 2020. This national role will be critical in the further developing and enhancing the quality and risk framework across the service and aligning our service strategy direction with operational practices. A newly appointed Quality and Risk Officer for the Dublin services also took up a vacated post in August.

2020 was a most challenging year for staff teams, supported individuals and families as a result of the impact of the coronavirus global pandemic on service delivery and our day to day lives and operations. In spite of this, and testament to the service core values and the resilience and determination shown by all stakeholders, there were a number of significant achievements that should be noted.

Key Highlights and Areas of Achievement 2020

- The successful management of COVID-19 across services through the introduction of strict IPC measures, public health guidance, establishment of isolation hubs and significant changes in work practices.
- The changes in work practices provided an opportunity for staff to reflect on what is most important to each individual we support and that, for many, the changes allowed them to enjoy life at a pace that is more suited to them where they could pursue their individual interests; key learnings taken from this will be brought forward into ongoing plans for individuals as we go into 2021.
- A review of Day Support and Respite models to seek to provide better quality services.
- Improvement (EASI) process continued across all day service areas
- The introduction of technology to support individuals to not only maintain contact with family and friends but to also develop new skills and gain experiences, for example online classes, virtual concerts etc. was a significant development across the service in 2020 which will continue to be built upon in 2021.
- Establishment of a new individualised supports pathway in the TEES Dublin service
- DNWAP selected St Vincent's adult & community education programme as one of the recipients for the 'Evolving for Equality Community Grants'.
- Participation in the HSE National Sharing Day Webinar- experience of living during COVID-19.
- Person-centred cultures working groups in St. Joseph's and St. Vincent's were able to sustain some of their work in spite of the pandemic and will re-group in 2021 to continue this work

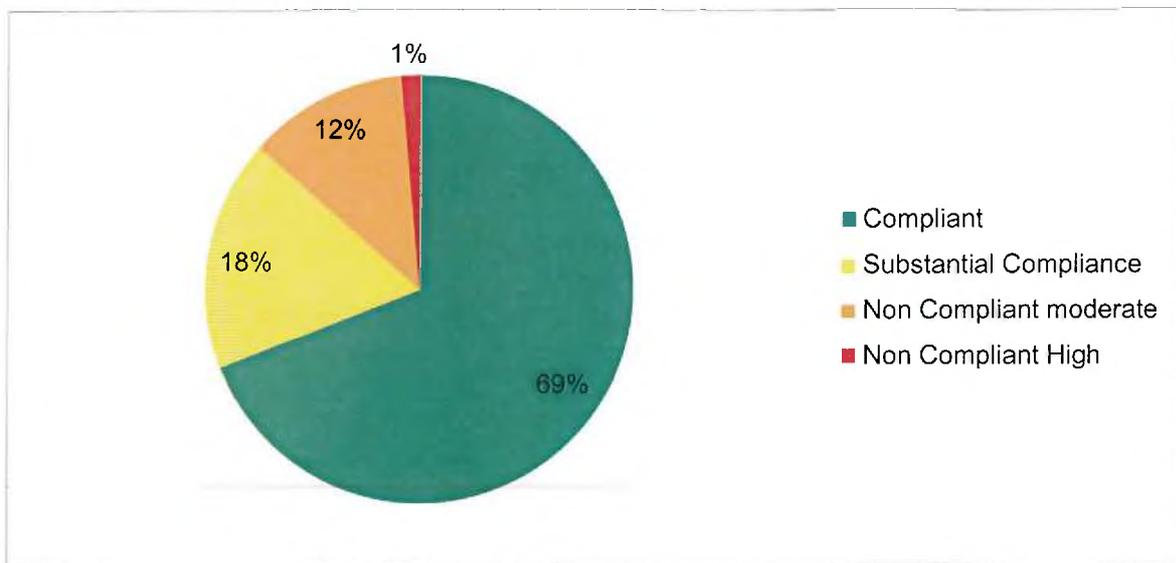
9.2 HIQA compliance

All DOCDSS residential services operate to the National Standards for Residential Services for Adults and Children with Disabilities. At the end of 2020 there were 91 designated residential services registered with HIQA, 48 of these were within the Limerick North Tipperary services and 43 were within the Dublin services. Early in 2020, HIQA inspections continued as per the regulatory process. With the onset of COVID-19, all onsite inspections were paused for a period of approximately 2 months due to the risks presented by the global pandemic however during this time, there was significant engagement with the regulator in relation to routine regulatory matters and the organisation's management of the pandemic. Onsite inspections recommenced in May 2021 albeit they were short-announced inspections.

Across the service, there were a total of 47 inspections carried out in 2020; 10 of which were unannounced occurring prior to the onset of COVID-19.

The compliance achieved across the 691 regulations inspected is outlined in the graph below.

Compliance Level	Compliant	Substantial Compliance	Non Compliant moderate	Non Compliant High
Number of areas of compliance	477	121	83	10
<i>Variance from 2019</i>				
Dublin Services	↑ 61 %	↓ 18%	↓ 18%	↔ 3%
Limerick and North Tipperary	↑ 75%	↓ 17%	↓ 8%	↓ 0%



9.3 Health and Safety

In all service activities we seek to maximise the health and safety and wellbeing of staff and those individuals that we support through a robust Health and Safety Framework. This operates at local, regional and national level and is supported by a culture of positive reporting, shared learning and reflection.

Key components of the DOCDSS Health and Safety Framework include:

- A Health and Safety Policy;
- A system to manage and control risks in connection with the use, handling, storage and transport of articles and substances;
- A safe and secure working environment, including provision and maintenance of access to and egress from premises;
- Safe and suitable plant, work equipment and systems of work that are without risks;
- Information, instruction, training and supervision as necessary;
- Adequate welfare facilities.

The most reported category of staff incident in the service was violence and aggression. While the numbers reported in their category were high, overall, the impact of the majority of these reported incidents were deemed to be low or negligible.

During 2020 the National Health and Safety Forum met 3 times with local and regional forums meeting more frequently. The main focus of the national forum was on the COVID-19 pandemic including:

- Development of a COVID-19 Response Plan for the service in line with government protocols and public health guidelines
- Appointment of COVID-19 lead worker representatives
- Updating of local health and safety checklists to reflect COVID-19 requirements
- Introduction of contractor screening process for essential service providers
- Review of organisational safety statement and local safety statements to reflect additional risks presented by COVID-19
- Development of organisational level risk assessments in the management of COVID-19 which were adapted and implemented locally

An ongoing review of staff absence because of reported incidents continued in 2020 and external reporting of incidents took place across the year as required with all staff absences three days or more being reported to the Health and Safety Authority.

A key challenge in the health and safety framework in operation across the service is that it is a paper-based system. It is hoped that the introduction of the NIRF forms and better use of the National Incident Management System (NIMS) will support in a stronger system-approach to incident management and allow for better data capture and analysis.

9.4 Learning and Development

The DOCDSS is committed to excellence in service provision, providing high quality, person-centred support to individuals who access our services. To achieve this, the service acknowledges the need to be committed to promoting a culture of learning within the organisation through the provision of quality learning and development opportunities for all our staff. We also acknowledge that to excel in this area, we must have a staff team that feel supported by a robust system of training and development.

The DOCDSS endeavours to reflect and deepen the ethos, values and vision of the service within learning and development initiatives and in all aspects of service provision. All learning and development initiatives are reflective of the needs of individuals supported by the service.

Our evolving training system seeks to ensure that staff not only access mandatory training requirements but have access to a greater suite of training that allows them to develop their skills and supports them to deliver the best possible service. In doing this it supports the individuals we support to access the good things in life, living full and meaningful lives within their community.

2020 was a challenging year for learning and development teams across Dublin, Roscrea and Limerick with great strides being made in ensuring access to education continued under very difficult circumstances. Training was identified as an area of non-compliance by the organisation and was also noted non-compliant in a number of inspections.

The onset of the COVID-19 pandemic in March 2020 fundamentally changed the way in which we could offer training and education within the service. Despite the challenges of this year the service remained committed to finding appropriate learning solutions to ensure staff continued to have access to high quality training in a safe manner. The service adjusted to a changed learning environment and emerged from this year with a renewed focus on digital learning technologies, enhanced online learning access for our staff as well as a determination to ensure high levels of training compliance into the future.

Our commitment to the development of online learning within the service was fast tracked during 2020 following the onset of the Covid-19 pandemic. To comply with social distancing and infection control measures, much of our training offered changed from in- person delivery to online delivery. This took on many forms including live delivery via ZOOM and externally hosted e-learning content. This was also supported by enhanced access to *HSEland* modules which supported more access to some mandatory training and improved compliance greatly. 2020 was a period of great change in our learning and development teams across the organisation and the commitment of staff to engage with and embrace these new ways of learning allowed us to emerge from 2020 with a true sense of how through online learning we can support our service not only through this period of uncertainty but in an ongoing capacity to further strengthen education provision into the future.

The first half of the year saw a heavy focus on infection control and pandemic related training content while the second half of the year focused on supporting recovery across other areas of training. Most of our training delivery methods changed during the course of 2020 with a heavy focus on online learning from the onset of the pandemic.

Courses delivered online included:

- Fire Safety
- Safeguarding Vulnerable Adults
- Children First
- Hand Hygiene
- Infection Control
- PPE Donning and Doffing
- People Moving and Handling
- Safe Administration of Medication
- Managing Behaviours of Concern
- GDPR
- Social Role Valorisation

The Nursing and Midwifery Planning and Development Unit (NMPDU)

The DOCDSS remained committed to supporting staff to access higher level education through our supportive relationship with the NMPDU. In the 2020 academic year the Dublin region supported 12 NMPDU funded students commencing and continuing their studies. Our students proved to be resilient and determined, responding to the changing landscape of university education in a positive and enthusiastic manner. This funding enabled studies across a wide variety of subject areas including Dementia Nursing Practice, Advanced Leadership and well as Infection Prevention & Control Nursing. Three students the Dublin region graduated from third level courses in 2020.

2021 Key objective

The immediate focus of the training and education department in 2021 is ensuring compliance across all areas of mandatory training. Key objectives will be to review the training needs analysis for the service, exploring methods of delivery to see how we can best support training for staff through a combination of face to face, online, in house and external training expertise. In addition, the department will continue to focus on the identification and implementation of an appropriate service wide training management system. 2020 was not only a year of great challenges but a year of intense learning for our departments and we move forward with a sense of renewed passion and determination.

9.5. Risk Report

The Board of the DOCDSS is responsible for setting the organisation's level of risk engagement and ensuring that appropriate risk management and internal control systems designed to identify, manage and mitigate possible risks to the achievement of strategic and operational objectives are in place.

DOCDSS Risk Management Framework

The effective management of risk requires the involvement of individuals at all levels of the organisation including staff, volunteers, supported individuals, their family, carers and advocates. DOCDSS seeks to encourage this through a culture of open communication in addition to the operation of formal risk management processes. The positive management of risk is essential for growth, development and innovation for supported individuals and the overall continued improvement of the service.

Risks are not seen as barriers to change and improvement; instead, they are recognised, considered, and managed effectively as part of service improvements. In this context the organisation is committed to promoting a person-centred and positive approach to risk management from the perspective of the person, their family, carers, and advocates. The DOCDSS commits to involving supported individuals and persons of their choosing in the assessment and management of risk in a manner which promotes their rights, independence, and social inclusion; service development in positive risk enablement is a planned area of focus for 2021.

The risk management framework in DOCDSS is based on the ISO 31000 standard and consists of frontline management of risks by individual managers through their centre/departmental risk register; the next level of oversight in the risk framework is at service manager level which feeds into a regional risk register and upward to the corporate risk register which is reviewed and monitored by the Executive team.

The Quality, Risk and Safety board sub-committee also monitors the corporate risk register which, along with Executive reporting, reports upward to the Board. This robust governance framework for the management of risks ensures the appropriate channels of escalation of risk as required; this framework will be further enhanced in 2021 with a full review of all risks and associated governing structures and processes.

2021 will see the adoption of the National Incident Report Forms (NIRF) within the service to replace locally developed incident reporting forms; this will strengthen the alignment of internal processes with national policies and provide for more detailed, quality data to enable better decision making and service improvements. All incidents and near misses continue to be reported via the National Incident Management System (NIMS).

Risk Assessment and Risk Register Process

The Board and Executive of the DOCDSS recognise the need for a robust focus on the identification and management of risks and therefore places risk as an integral part of its overall approach to quality. Each identified risk is assessed in line with the organisational Risk Management policy which rates the risk using the HSE risk assessment tool which measures the impact and likelihood of the risk on a 5 x 5 scoring matrix. The threshold for reporting of risks on corporate risk register will depend on the risk rating as well as the extent to which the risk affects multiple locations and/or services in the organisation.

Principal Risks and Uncertainties

The principal risks and uncertainties which have the potential, in the short to medium-term, to have a significant impact upon the DOCDSS's strategic objectives are set out below, together with an indication of the strategic priorities to which they relate, the principal mitigation measures and the movement in the risk in the past year. These represent the Board's view of the principal risks now; the mitigation measures that are maintained in relation to these risks are designed to provide a reasonable and not an absolute level of protection against the impact of the event in question.

Risk	Impact	Principal Mitigation Measures	Movement and Development ↑ ↔ ↓
COVID-19	The immediate and sustained impact of the pandemic and the threat to safety of supported individuals and staff as well as the impact on the service's ability to provide supports to meet the needs of those we support as a result of having to comply with public health guidance and IPC measures.	<p>Establishment of the Serious Incident Management Team (SIMT) and activation of service contingency plan to manage and provide governance regarding the organisation-wide challenges presented by COVID-19</p> <p>Implementation of stringent infection prevention and control (IPC) measures and roll out of programme of IPC training</p> <p>Reconfiguration of places of work to support operation of pod structures</p> <p>Appointment of COVID-19 lead worker representatives and IPC champions across all areas of the service as well as appointment of a dedicated IPC nurse</p> <p>Significant changes to work practices and policies to minimize transmission</p> <p>Establishment of regional isolation hubs for suspect and confirmed COVID-19 positive cases across the service</p> <p>Facilitation of temporary remote working</p>	<p>↑ Area of increased risk</p> <p>The onset of the global pandemic was an emergent risk for the service in 2020 that presented significant challenges to the service and society at large.</p> <p>The service continues to proactively and reactively manage the changing risks presented by the global pandemic in line with public health and government guidance.</p>
Protection of Children, Young People and Vulnerable Adults	The DOCDSS is committed to safeguarding the well-being of children, young people and vulnerable adults and to ensure that employees or others working on its behalf are suitable to work in such an environment; potential risk of safeguarding and child protection incidents in DOCDSS due to the vulnerable nature of individuals supported by of our services.	<p>DOCDSS adheres to strict recruitment and selection processes for all staff and volunteers as well as pre-approval and vetting of any contractors.</p> <p>Mandatory Child and Adult Protection and Welfare training is provided for all staff on a periodic basis.</p> <p>Clear reporting processes for concerns are established both internally and externally to relevant agencies and authorities.</p>	<p>No change ↔</p> <p>The Child Safeguarding Statement was reviewed with additional measures identified and actioned</p> <p>Safeguarding training went online in 2020 due to the pandemic which allowed for easier access to training for all staff</p> <p>Continued awareness training and supports for supported individuals.</p>

		DOCDSS promotes a culture of protection of the welfare of supported individuals through organisation-wide policies and procedures, advocacy supports, programmes and engagement with individuals, their families, carers and community supports.	
Compliance, legislation and regulations (statutory, clinical, professional, ethical)	A material failure to comply with applicable legislation, regulations and standards across a wide range of compliance areas including HIQA, procurement, clinical risk, governance, charity regulator etc. could result in penalties, reputational harm and damage to relationships with stakeholders including people supported, families, funders and donors.	<p>Director roles of Governance, Strategy and Planning and Quality, Risk and Safety appointed in 2020</p> <p>DOCDSS complies with The Governance Code for the Community, Voluntary and Charitable Sector in Ireland and the Statement for Guiding Principles for Fundraising. DOCDSS is also fully compliant with the requirements of registration with the Charity Regulatory Authority.</p> <p>Strong governance arrangements in place across the service to bring it into compliance with HIQA national standards and regulations, and drive continuous quality improvements</p> <p>As part of our service arrangement with the HSE, areas of non-compliance have been identified and lead Executive members assigned responsibility to work toward compliance.</p>	<p>No change ↔</p> <p>Significant programme of work embarked upon by newly appointed directors which will continue into 2021</p> <p>Strengthened Internal audit function planned for 2021</p> <p>Commitment to preparation of service accounts in line with SORP</p> <p>Plan for review of all quality and risk governance arrangements in 2021 to determine where improvements can be made</p>
Information Technology and Cyber Security	Maintaining adequate IT systems and infrastructure to support growth and development of DOCDSS services may be affected by accidental or deliberate exposure to risks, theft of sensitive information or loss of service or system availability.	<p>Ongoing engagement with the HSE to support development and improvements in the service IT infrastructure</p> <p>Annual health checks carried out on IT equipment and systems</p> <p>Development of IT policies and procedures to ensure the appropriate use of IT systems and equipment.</p>	<p>↑ Area of increased risk</p> <p>The reliance on IT systems to support the work of the service was highlighted in 2020 as a result of the pandemic. Funding has been secured for the roll out of Microsoft Office 365 across the service</p> <p>The IT team will be strengthened with necessary resources to enable the development of an IT strategy and roadmap for the service in the medium term.</p>

<p>Service Delivery Model changes and de-congregation</p>	<p>The ability of the Service to implement national policies such as Progressing Disability Services, New Directions and Time to Move on from Congregated Settings requires significant changes to existing service structures and processes to ensure the continued provision of quality safe and effective supports.</p>	<p>Mapping exercise for all affected services as a result of the implementation of PDS has been completed. Significant and ongoing training and support for staff, supported persons and families during the process of change.</p> <p>Continued close working relationships with the HSE and other agencies within the relevant CHO structures; DOCDSS has played and continues to play a key role on national forums regarding the restructuring of service delivery models Ongoing engagement with the HSE to secure appropriate accommodations to support the delivery of supports in premises that allow individuals to live their best life.</p> <p>Established supports for individuals using the service and their families with the planned development of a family forum for Children's services.</p>	<p>No change ↔</p> <p>Reconfiguration of Children's Services in CHO 9 in June 2021. The transition to a reconfigured service will be managed and monitored to identify and address challenges</p> <p>Further plans for decongregation from congregated settings in 2021 in line with the service Strategic Plan.</p>
<p>Information Governance</p>	<p>DOCDSS must comply with the General Data Protection Regulations (GDPR) (2016) and the Irish Data Protection Act (2018). Non-compliance could result in significant financial and reputational damage for the service.</p>	<p>Dedicated Data Protection Officer in place. Identified Data Champions roles established across the service with specific training for these roles</p> <p>Identification of third-party data processors particularly those based in UK reviewed to ensure appropriate contractual clauses and agreements in place.</p> <p>A risk-based approach has been adopted with the implementation of appropriate measures and controls proportionate to the level of risk for any gaps identified in processes. A training programme for all staff was rolled out in 2020 and will continue in 2021.</p>	<p>No change ↔</p> <p>Continued work in ensuring the required contractual agreements are in place with third party processors</p> <p>Work on the service's record of processing activities and the management of data protection risks will continue to progress in 2021</p> <p>Awareness programme for all supported individuals to inform them of their rights under the GDPR</p>

10. COMMUNICATIONS AND PUBLIC AFFAIRS

As part of its efforts to improve internal structures and better align with sector governance codes, the service hired its first Communications Manager to have responsibility for improving internal and external communications. The newly established post would have a national remit, and would be tasked with developing structures and strategies to help demonstrate services on offer from DOCDSS and raise its profile amongst the service sector.

Within the first few months of the creation of the post, the needs of service-level efforts to combat the pandemic escalated the need for additional tools to share information internally and externally about the service plans to manage the crisis. The first few weeks of the role were occupied with gathering information on how the service was communicating with internal and external audiences to influence new policies and strategies and assess what communication tools were in use prior to the start of the role. As the 2020 Irish election was in process, the Communications Manager provided updates on the election process and breakdowns of the party manifestos on issues of relevance to the service.

In response to the pandemic, the Communications department initiated the following tools and measures:

- The creation of DOCDSS social media channels on Twitter, Facebook, and Instagram to demonstrate how residents were still living their best lives in spite of the pandemic and having their needs met and to share additional news and developments from the service
- The creation of YouTube and Vimeo channels to share video-based information on the pandemic for staff and supported persons, this included easy read guides on safety measures, the importance of social distancing and hand hygiene, and what sectors of the public would remain closed and for how long the changes would be in effect
- The launch of a weekly service newsletter to share service changes brought on by the pandemic, special events, COVID prevention measures and standards, and a column provided by the CEO on important developments for the service and the sector as a whole
- Support for live events performed by Children's services that were run over the summer months as a substitute for events held in person prior to COVID – supports included providing instruction on how to pre-record sections of their presentation, editing of pre-filmed video elements into one video, promotion of the event through social media, and technical support for the broadcast of the live event through online meeting applications
- Provide support for departments seeking to offer live and pre-recorded content for supported persons to access from their homes and for residential centres
- Introduction of online survey tools to provide feedback from families on online supports on offer from the Service and to gauge staff opinions on how to resume day services after the reductions of quarantine measures by September 2020
- Development of visual guides for safe use and wear of PPE, these guides were updated on a regular basis in response to changing public health advice
- Providing support to Service Managers with methods to document in photos and videos the work that was being done to support residents and individuals at home that would highlight positive stories of the work on offer
- Video creation and editing services for pre-recorded content provided by staff – these included videos prepared for International Nurses Day, Charity Trustee's Week, COVID information videos for children prepared by Oakridge Children's Services, feast day celebrations, and a celebratory end of year video for the Christmas holiday season
- Provide support for centres engaged in live video events – including instruction on how to share videos recorded from online meeting applications, and advertising the event across the service
- Generation of reports from family and staff opinions provided through the online survey platform on how to adjust service provisions in response to COVID restrictions. The reports would help influence two projects of significance for the service.
 - The formation of the Rethinking Day Supports working groups that would meet nationally and regionally to discuss how to provide supports through a blend of in-person and online methods
 - The creation of a working group that evolved into a formal committee that would undertake the work to consolidate online service provisions through a web portal – the

- E-hub – that would serve as a nexus of live and static content developed by the preferences and feedback provided by supported individuals
- The committee would examine best practices from other services making use of online support portals, how they manage risk and live sessions, and content offered against ease of use of the site
- The committee would engage with a development firm to design the site based on accessibility needs and to ensure the site is easy to navigate based on the needs of persons with intellectual disabilities
- The committee advanced the project to get a working beta version of the site in operation before the end of the year

Additionally, the Communications Manager was a member of the SIMT for the entirety of 2020 and was regularly tasked to share information from meetings in emails, letters, easy ready guides, and how-to visual guides derived from decisions reached by the group. The Communication Manager would also continue progression on work to rebrand the organisation. Throughout the pandemic, work would continue to progress rebranding products with the design firm managing the project:

- Brand guidelines – new fonts, colours, logos to be part of the brand identity
- New Service website – applying learnings from the E-hub project to improve efficiency of the website design and build project
- Rebrand launch products – advancing the work of the service strategy document, presentation materials, and photographic/video elements needed for the launch anticipated in the next year.

11. PROPERTY ESTATES AND TECHNOLOGY SERVICES

11.1 Property and Estates

2020 saw substantial investment in a rapid programme of repurposing many of the Services building assets. The first wave saw alterations required to repurpose mainly day service buildings to provide COVID positive (& suspect) residential temporary facilities. Other works included installation of additional hygiene facilities across the building stock. The later waves saw the day facilities being returned to use with additional alterations to provide for COVID safe environments for returning services. Several residential construction and alteration projects were permitted by Government Regulations to continue operational throughout the year which was completed in 2020.

11.2 Technology Services

The main IT expenditure in 2020 was as a direct result of system & devices expansion related to the effects on the provision of services and changing work practices due to the COVID Pandemic. This included laptop, tablet & mobile devices purchases, Zoom, GoToMeeting and Other Video Conferencing Licences etc. WIFI and related data capacity connectivity was increased on many of our sites.

12. BOARD OF DIRECTOR BIOGRAPHIES

Sr Goretti Butler – Chair

Professional Background: Social Care, Early Education, Family Therapist.

Goretti Butler is a Daughter of Charity of St. Vincent de Paul. She is currently Provincial of the Daughters of Charity. Prior to this Goretti was Director of Services of the Daughters of Charity Child and Family Services providing a range of family support services to children and families, primarily based in the Dublin region. In her earlier years Goretti worked in Glenmaroon and in Ballyfermot. Chairperson of Board of Directors since April 2013.

Sr. Justine O'Brien

Professional Background: Education

Key Appointments held: Worked in Education at classroom level, in administration at Board of Management level with disadvantaged mainstream children and with children with an intellectual and physical disability. Campaigned on behalf of disadvantaged people in conjunction with various agencies in Inner City Dublin and in the Ballyfermot/Cherry Orchard areas. Currently a member of the leadership team of the Irish Province. Former Bursar of the Irish Province of Daughters of Charity which has responsibility to the Kenyan Mission. Joined the Board in 2012.

Sr. Bernadette MacMahon

Professional Background: Education

Key Appointments held: Head of Department of Education, Mater Dei Institute of Education, 1970 to 1986. Former Provincial of Daughters of Charity of St. Vincent de Paul. Former Chairperson of the Board of Directors of the Daughters of Charity Service for Persons with Intellectual Disability, 1986 to 1995. Director, Vincentian Partnership for Social Justice, 1995 to date. Joined the Board in 2007.

Sr Sheila Ryan

Professional Background: Nursing

Key Appointments held: Trained as a nurse and is qualified in three nursing disciplines. Worked in several Centres in the Daughters of Charity Disability Support Services, latterly as Service Manager in St Vincent's Centre, Lisnagry. Currently a member of the Irish Provincial Council of the Daughters of Charity. Joined the Board in 2014.

Mrs. Sally Byrne

Professional Background: Business/ Financial

Key Appointments held: Trained as Chartered Accountant in Pricewaterhouse. Financial Controller, Kelkin Limited, Health Food company 1989-2003 Financial Controller, Oppermann Associates Limited, Architects, 2003-2010. Joined the Finance Office of the Provincialate of the Daughters of Charity of St Vincent de Paul in 2010. Joined the Board in 2014.

Mr. John O'Quigley

Professional Background: Financial

Key Appointments Held: Trained as a Chartered Accountant and spent his career in one of the major international accountancy firms. Director of 3 companies operating in the financial services sector and serves on a stakeholders group of the European pensions authority (EIOPA). Joined the Board in 2016.

Dr. Danny O'Hare

Professional Background: Higher Education

Key Appointments held: Founding President DCU. Former Chairperson of Food Safety Authority, the Government Task Expert Group on Future Skills Key Appointments held: Worked in Education at classroom level, in administration at Board of Management level with disadvantaged mainstream children and with children with an intellectual and physical disability. Campaigned on behalf of disadvantaged people in conjunction with various agencies in Inner City Dublin and in the Ballyfermot/Cherry Orchard areas. Currently Bursar of the Irish Province of Daughters of Charity which has responsibility to the Kenyan Mission. Joined the Board in 2012. Needs, the Information Society Commission, the Ballymun Regeneration Project. Former Board Member of Media Lab Europe and of Calor. Chairman of the Independent Hospitals Association of Ireland, the Governing Authority of the Milltown Institute, the Dublin Airport Stakeholders Forum and of Exploration Station, the National Interactive Science Centre. Member of the Irish Medical Council and of the Edmund Rice SchoolsTrust. Member of RESPECT Fundraising Committee. Joined the Board in 2006.

Mr. Noel Kidney

Professional Background: Architecture and Urban Design

Practised in Burke Kennedy-Doyle & Partners, becoming Joint Managing Director for 15 years until 2009. Member of RESPECT Fundraising Board since 2001. Joined the Board in 2014.

Mr. Rory Staines

Professional Background: Law

Rory is from Dun Laoghaire, Co. Dublin. He studied law in UCD and King's Inns and qualified as a barrister in 2005. He worked Judicial Review and also lectured in Griffith College, DCU and King's Inns. He transferred to become a solicitor in 2017. He works for Michael J Staines Solicitors in the city centre. Joined the Board in 2017.

Prof Kieran Murphy

Consultant Psychiatrist at Beaumont Hospital and Head of Psychiatry at RCSI. His time with the organisation began during his time as a member of the UCD Medical Student Volunteer Society, where he would volunteer his time with supported individuals at St. Vincent's Centre Navan Road. Joined the Board in 2018.

Ms. Sile Parsons

Professional Background: Business / Office Management

Sile is the mother of two children with special needs who are supported by the Daughters of Charity Disability Support Services. In 2018 she established a campaign "Autism School Dublin 15" and as spokesperson successfully lobbied the Department of Education & Skills to open the first special school sanctioned by the Department of Education in over 15 years. Joined the Board in 2020.

13. TRUSTEES REPORT (incorporating directors report)

13.1 Administrative Details

Directors

Sr Goretti Butler
Sr Justine O'Brien
Sr Sheila Ryan
Sr Bernadette MacMahon
Sally Byrne
Noel Kidney
Daniel O'Hare
John O'Quigley
Rory Staines
Kieran Murphy
Sile Parsons

Bankers

AIB Bank
7/12 Dame street
Dublin 2

Secretary and registered office

Sr Justine O'Brien
St. Catherine's Provincial House
Dunardagh
Temple Hill
Blackrock
Co. Dublin

Independent auditors

PricewaterhouseCoopers
Chartered Accountants and Statutory Audit Firm
One Spencer Dock
North Wall Quay
Dublin 1

Solicitors

Byrne Wallace
88 Harcourt Street
Dublin 2

Sweeney McGann
67 O'Connell Street
Limerick

Hammond and Associates
23 Albert Road Upper
Glenageary
Co. Dublin

Mason Hayes and Curran
South Bank House
Barrow Street
Dublin 4

William Fry
2 Grand Canal Square
Dublin 2

Company registered number: 527694

CHY (Revenue) Number: 21097

Registered Charity Number: 20084035

13.2 Structure Governance and Management

The DOCDSS was incorporated as a company limited by guarantee and not having a share capital in 2014. The company operates under a Memorandum of Association. This sets out the objects and powers of the Company, and its governance under its Articles of Association and by the Board of Directors. The DOCDSS is registered with the Companies Registration Office (CRO), Company number 527694.

The purpose of the service is to provide a range of supports and services to people with intellectual disabilities. The activities of the company are charitable in nature and all income is applied solely towards the promotion of the charitable objectives of the Company.

The DOCDSS is a registered Charity with the Charities Regulator Authority, registered number 200884035. The DOCDSS has been granted charitable status under Sections 207 and 208 of the Taxes Consolidation Act 1997, Charity Number CHY 21097.

DOCDSS has in place key governance structures and operational systems across the organisation that are set up to support the organisation achieve its objectives and monitor performance across the organisation. These structures are outlined below:

Board Governance

The Board of Directors are responsible for the overall control, governance, and management of the DOCDSS. All Board members are engaged on a voluntary basis.

The Board in 2020 was represented by 11 board members who bring a wide range of professional and individual expertise to the board room.

In 2020 the Board held 10 meetings, 9 of these were Ordinary Meetings with 1 Extraordinary Board meeting held in February. Given the context of the COVID-19 pandemic the nature of how the Board met varied; 3 of the 10 meetings were held in person, 1 was held by teleconferences and 6 were held by Zoom. Ms Sile Parsons was appointed to the Board at the Ordinary Board meeting held in February.

Docdss Board Meetings 2020

There were 9 Ordinary Board meetings were held in 2020. An Extraordinary Board meeting was held in February. The AGM was held on 27/10/2020. Board attendance across the year is noted below.

Board Member Members Attendance at Board Meetings	Ordinary Board Meetings (9)	Extraordinary Board Meetings (1)	Annual General Meeting (AGM)
Sr Goretti Butler	9	√	√
Sr Justine O'Brien	9	√	√
Sr Sheila Ryan	9	√	√
Sr Bernadette MacMahon	8	√	√
Sally Byrne	8	√	√
Noel Kidney	9	√	√
Daniel O'Hare	9	√	√
Sile Parsons	8		√
John O'Quigley	8	√	√
Rory Staines	7	√	√
Kieran Murphy	7	X	√

Within the Board structure, the following subcommittees operate to review and oversee governance and performance in their respective areas.

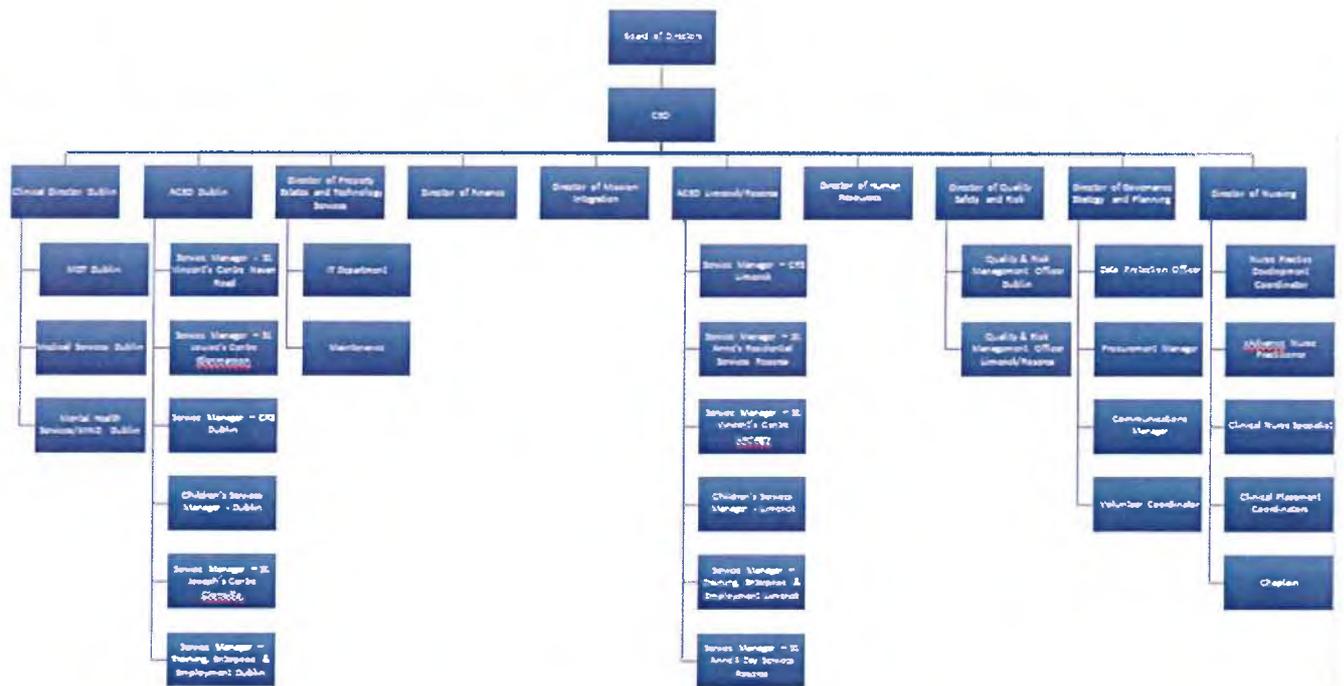
- Quality and Risk Committee
- Audit, Assets, Remuneration & Finance Committee
- Nominations Committee

The Audit, Assets, Remuneration and Finance Committee had 7 members at the start of 2020. Mr Noel Kidney stepped down from the committee in January 2020 reducing the membership to 6. The committee met 7 times across the year. The Nominations Committee falls under the Audit, Assets, Remuneration and Finance committee met to sanction the Director of Quality and the Director of Governance roles. During 2020 the Board Quality and Risk subcommittees met formally on one occasion other planned meetings were postponed as result of the impact of COVID. However, detailed Quality and Risk Operational Reports were provided to the Board.

The finalisation and progression of the new service strategic plan was intended focus for 2020. This work was built from the strategy development and consultation process completed service wide and with external stakeholders in 2019, The Board of the DOCDSS approved a five-year Service Strategy in February 2020. DOCDSS were ready to launch our new strategy in March 2020. However, from February the onset of the COVID-19 pandemic demanded significant focus and time across all governance and operational structures to ensure safety in service delivery. These efforts sought to mitigate the risk of COVID for the individuals we support, staff teams, and the families of individuals we support. While we faced many challenges the collective governance response of all staff across the service to the pandemic in 2020 is one which the Board of DOCDSS are very proud of.

In this unprecedented context the Board took a formal decision to postpone the formal launch of the strategy to 2021, and to formally revise the period of the strategic plan to cover period 2021 to 2025. Dedicated teams completed creative and innovative work at service level that commenced on the roll out of several key strategic goals alongside managing our response to COVID. It the full intention of the Board that the roll out of the strategy will resume our central focus in 2021, and this will be supported by the formal launch of the strategy plan with our key stakeholders.

In October 2020 the Daughters of Charity (DOC) announced their intention to hand over trusteeship and ownership of the DOCDSS to the existing independent board and independent trustees. In line with this announcement the DOC noted their long and proud association with the achievements of the DOCDSS and their confidence that the service would continue to grow and develop into the future. The DOC notified all key regulatory bodies and stakeholders of this decision, affording the HSE six months notices of commencement of the transition process. The DOC also put in place a formal transition team to oversee the small and timely transition process and target completion of the process by early 2022. The DOC clearly noted that this transition of ownership would not impact on current services or staffing levels across the Service.



13.3 Objectives and Activities

The core objective of the organisation is to work with individuals with intellectual disabilities and complex support needs *to live their best lives through the delivery of quality services*

DOCDSS's core values underpin what we do well, what we will improve upon, and what we need to do to achieve our vision for the people we support.

These values are:

SERVICE	Holistic approach characterised by quality and compassion
RESPECT	A high regard for the dignity of each person.
EXCELLENCE	Developing and maintaining the highest standards in our service.
COLLABORATION	Mutual support for the total development of each person.
JUSTICE	Advocating for the rights of the people we support.
CREATIVITY	Being innovative, imaginative, and resourceful.

In 2020, working to these values and this mission, DOCDSS provided 3,269 individual places individuals with intellectual disabilities, within residential; respite; day supports, community, home support and children's services. Of note some individuals accessed more than one type of service from the DOCDSS.

Core activities of DOCDSS in 2020 included:

- Early Intervention, Pre-School Service and Educational Services
- Respite Supports- residential, home based, and community based
- Family Support
- Community Supported Accommodation and Residential Support Services
- Day Supports for Children and Adults
- Personal Development and Independence Living Support
- Training, Enterprise and Employment and Supported Employment Services
- Provision of Multi-disciplinary support – Medical, OT, Speech & Language, Physiotherapy and Psychology
- Specialist dementia supports
- Advocacy Supports

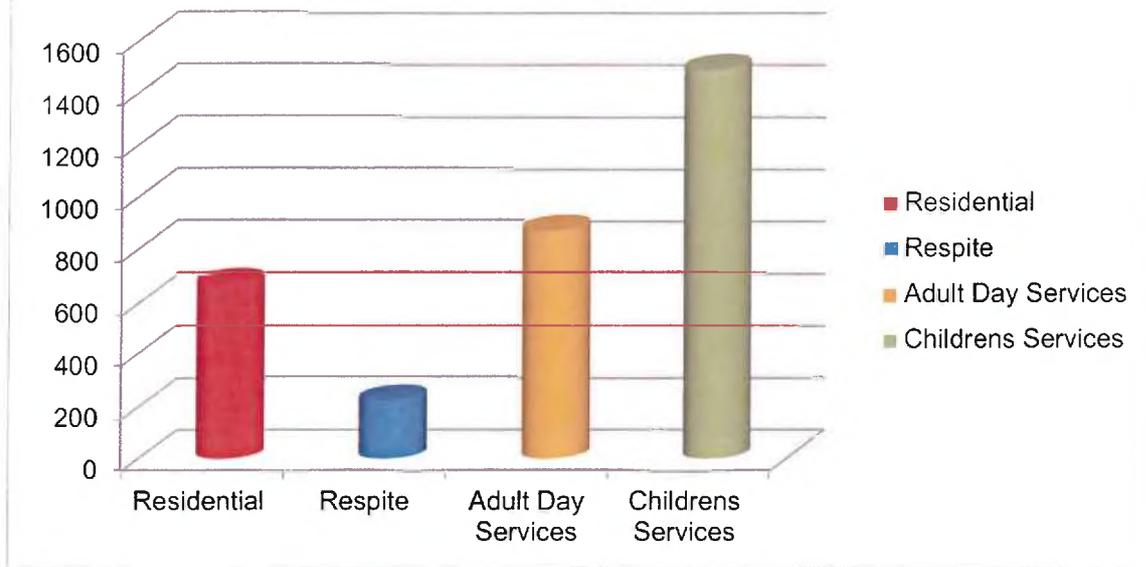
13.4 Achievements and Performance 2020

13.4.1 Strategic Objectives and performance

In 2020 a total of 3,269 individual places were provided for the people we support across residential; respite day supports and residential.

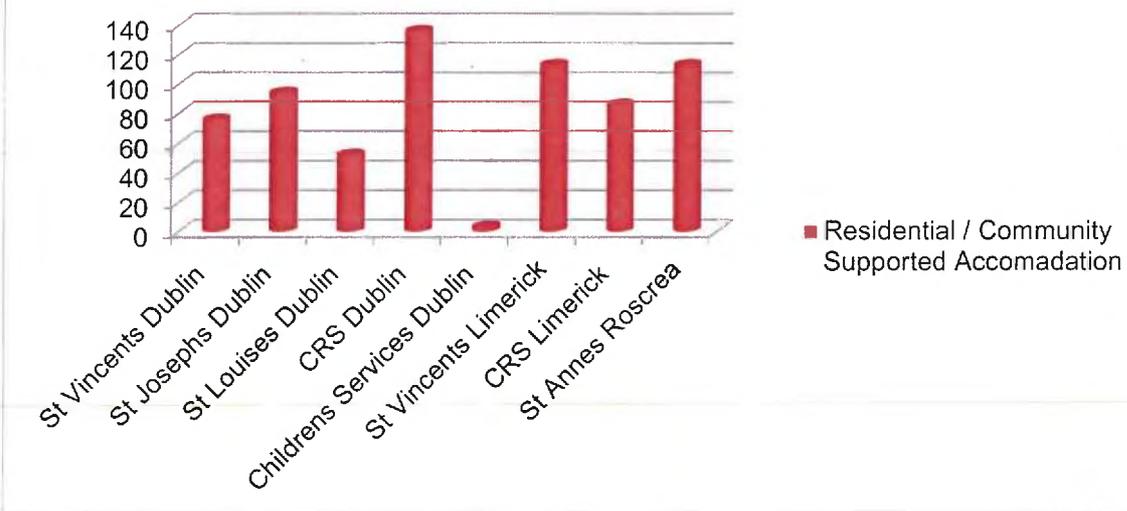
The chart below outlines how these places were distributed across the different services. Of note some individuals accessed more than one type of service from the DOCDSS.

2020 Service Provision

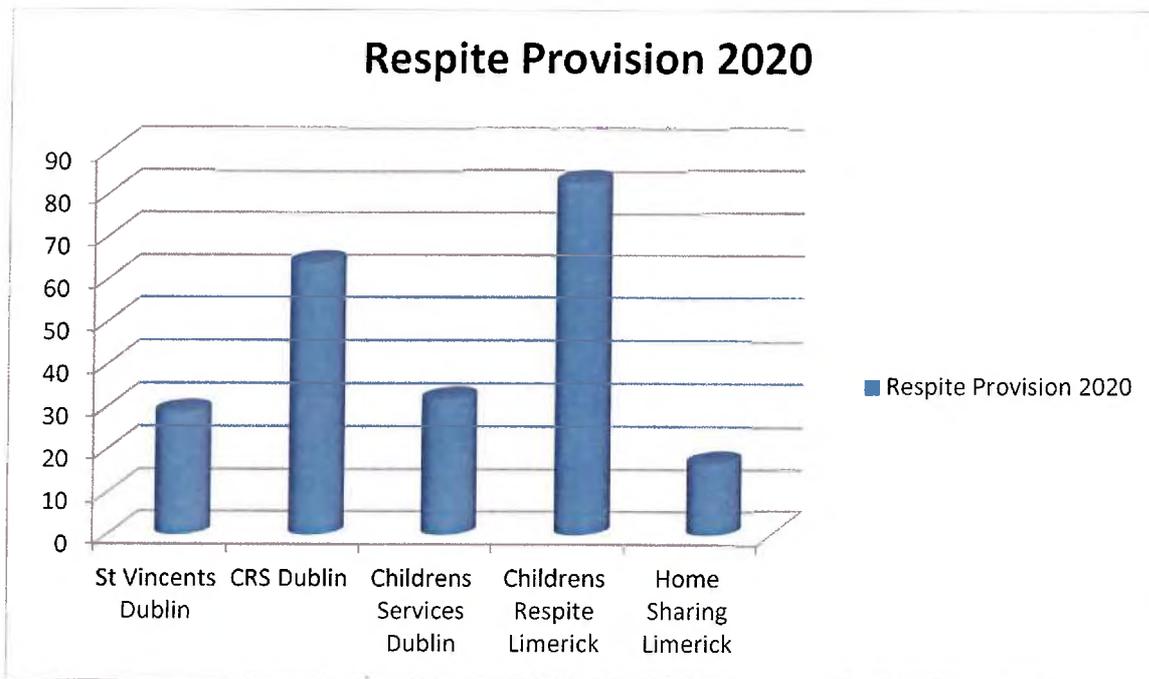


Residential and community supported accommodation across operating regions as detailed below:

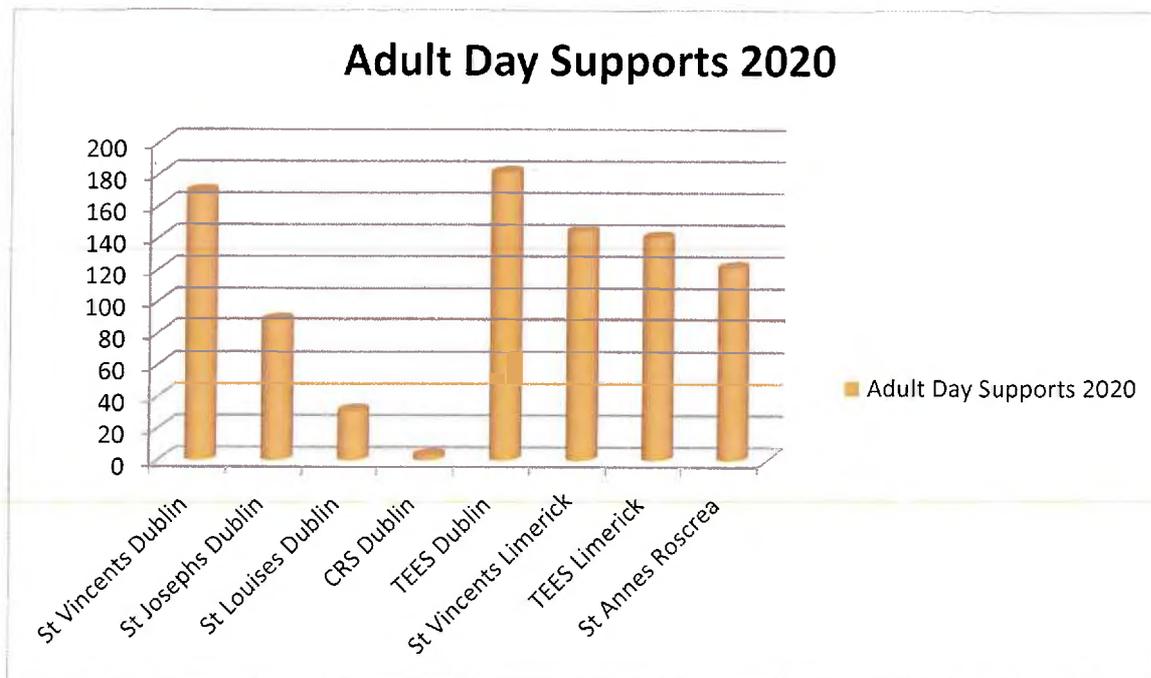
Residential / Community Supported Accomodation



Respite provision across operating regions as detailed below.

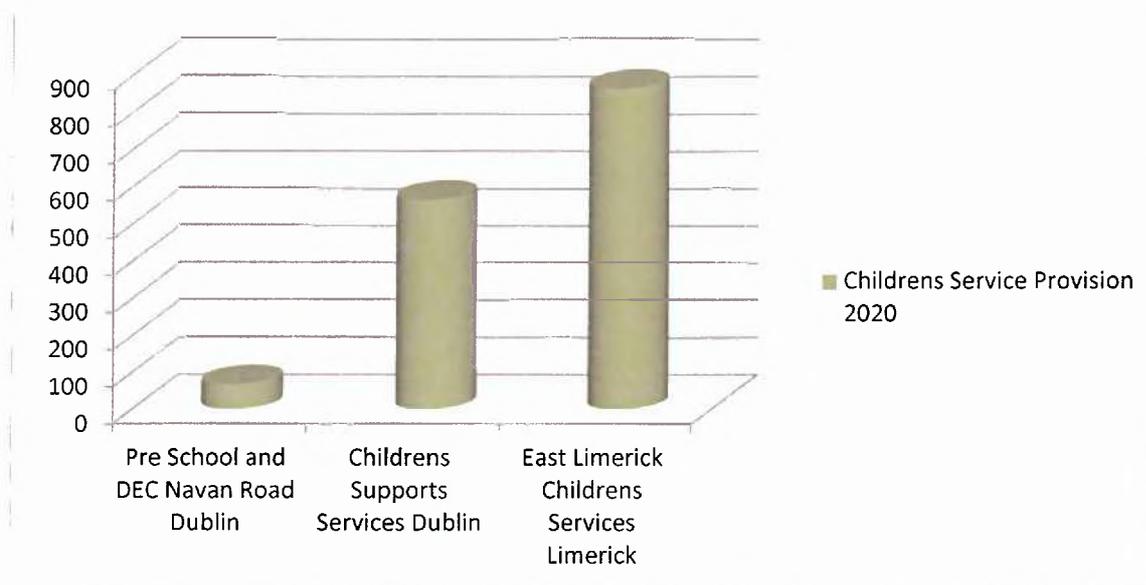


Adult Day Supports were provided as follows across the service in 2020:



Children Services were provided across the service as follows in 2020

Childrens Service Provision 2020



The CEO led a service wide consultation process with key internal and external stakeholders across the service in 2019. The objective of this process was to determine the new strategy and objectives for the service for 2020 to 2024. This process, built on previous service strategy, and delivered a clear mission, vision and goals that DOCDSS need to achieve to enable people we serve to live their best lives. DOCDSS entered 2020 with the commitment to continue work from 2019 and to launch the new Service strategy and undertake the steps leading to the formal rebranding of the organisation. The strategy was presented to the DOCDSS Board and ratified in February 2020. The six goals and 42 objectives at the heart of the strategy create a challenging, but achievable roadmap for the Service to deliver on its core purpose. The organisation was forced to pause and redirect attention the majority of the year to managing the COVID-19 pandemic. As a result, a decision was taken to revise the timeline the strategy to 2021 - 2025 and focus on its formal launch in 2021, however alongside this decision was clear commitment to move forward with the strategy implementation were possible in the context we faced. Targeted work to support the commencement of the strategy took place in a number of areas including:

- **Regulatory Compliance:** There were a total of 47 regulatory inspections carried out across the Service in 2020 with 691 regulations inspected. The Service achieved full compliance with 477 regulations and substantial compliance with 121 HIQA regulations
- **De-congregation continued in line with our strategy and national policy: Time to Move on from De-congregation.** Despite the challenges of COVID, 14 individuals moved into the community in 2020 thanks to the commitment of staff, families and the individuals we support to make the transition possible
- DOCDSS developed and executed a clear, focused strategy and approach across the service to mitigate the spread and impact of COVID-19 for the individuals we support, staff and service connected
- **It's My Life 2020** saw a continuation of *Its My Life* programme and the individualised supports it offers to allow a person to achieve the good things in life and attain greater levels of independence. The basis of this work informed effort to rethink the nature of day supports provided at local and national level
- **Rethinking Day Supports Strategy:** The disruption to traditional day support structures created opportunities to use new methods of in-person and online local and national service delivery in line with DOCDSS Service Strategy and New Directions
- A review of respite supports in line with Service Strategy
- **Advocacy:** A vast range of incredible easy read material and videos to support individuals in understanding COVID and the impact it was having on their services and daily lives. This

- included a series of educational videos on the pandemic that generated over 19,000 views on the service video channel
- DOCDSS has invested significant resources over the last 10 years to build the service's practical knowledge and capacity in applying Social Valorisation Workshop theory of practise in our services with aim to support individuals to live their best lives. This investment continued in 2020 and key outputs from these efforts included:
 - Roll out of a revised individuals' assessment of need and preferences process (IPNA),
 - Enhanced Person-Centred Plans (PCP) as a result of Its My Life Training Programme rollout for staff
 - Individuals moving to their own home in the community,
 - Further development and growth of an individualised support service being available to individuals seeking alternative approach to supports.
 - DOCDSS staff publishing papers in international journals on the practical application of SRV.
 - Formation of service wide shared learning networks and critique forums to support and positively appraise our work in this area.
 - DOCDSS completed a number of consultation processes with internal stakeholders to gain the input into operational and strategic activities of the service.
 - Development of new digital communication platform to allow for online meetings and live service provision for individuals and staff cocooning during the pandemic.

Integral to all the above impacts was the exceptional expressions of teamwork and collaboration demonstrated by staff across the service in 2020 at local, regional and national level in both responding to COVID-19 and seeking to provide supports to individuals live their best life.

2021 will see the formal roll out of the new Service strategy and formal progress against the strategy will be reported in line with the 6 goals and 42 objectives.

13.5 Financial Review

Charities SORP (FRS 102)

In 2020 the Directors decided to adopt of The Charities SORP (FRS 102) and the financial statements, along with the comparatives, have been prepared in this format. The objectives of the SORP are:

- To improve the quality of financial reporting
- To enhance the relevance, comparability and understandability of the information presented in charity accounts
- To provide clarification, explanation and interpretation of accounting standards and their application to charities and to the sector specific transactions; and
- To assist those who are responsible for preparation of the trustees' annual report and accounts

Review of results for year and financial position

The Statement of Financial Activities and Balance Sheet are set out on pages 107 to 109. The Daughters of Charity Disability Support Services recorded a surplus of €1,936,436 (2019: €550,398).

The emergence of COVID-19 in the early part of 2020 created significant challenges to the organisation not only in financial terms but also in operational terms with many people working remotely and the significant curtailment of services. In the first half of 2020 significant deficits were incurred in all parts of the organisation as a result of adapting buildings to serve as isolation units and a significant requirement to ensure adequate supplies of Personal Protective Equipment. An unintended and significant consequence of the closure of day services and the re-deployment of staff to our residential services was a significant reduction in agency usage, transport and maintenance costs. These factors coupled with additional funding provided by the HSE resulted in a surplus of €1,936,436 at the end of the year. The additional funding has been restricted towards various projects to be carried out in 2021 and agreed with the HSE.

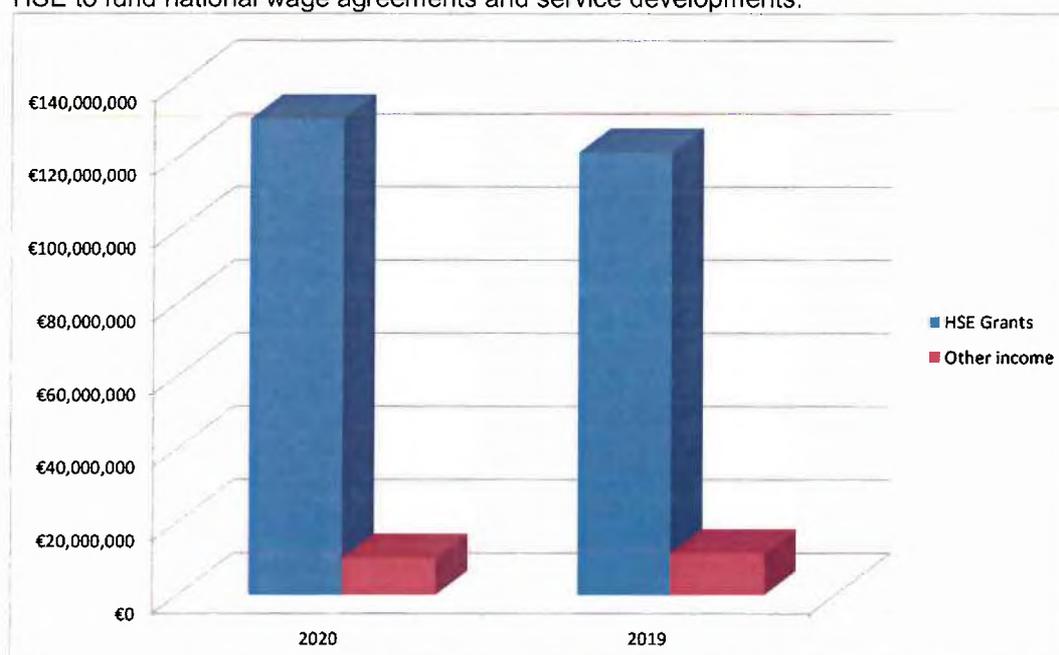
The total reserves at the year end were €28,858,952 (2019: €26,922,517) and are made up as follows:

Restricted funds	€1,416,660
Unrestricted funds	€271,556
<i>Restricted endowment funds</i>	<i>€27,170,736</i>

Further details of the reserves are contained in note 3 and note 21.

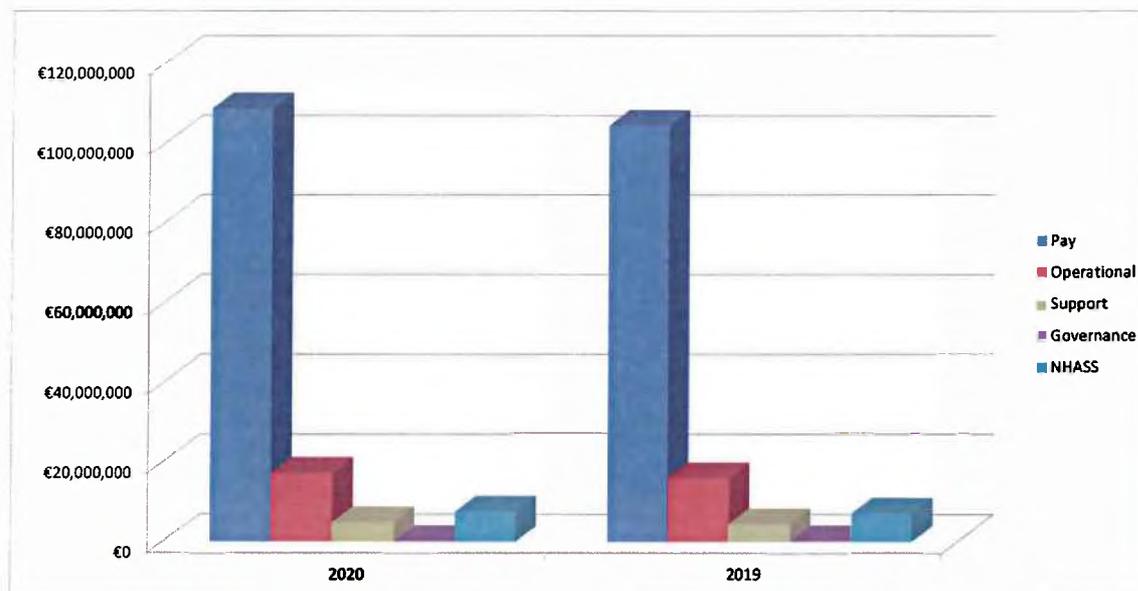
Income

Overall income increased during the year to €140,579,703 (2019: €132,712,910). The HSE provided 92.7% of our total income in 2020 (2019: 91.3%) and as a Section 38 funded agency we are predominately dependent on funding from the HSE to ensure we continue to deliver services. The increase in income is mainly from the HSE to fund national wage agreements and service developments.



Expenditure

Total expenditure increased during the year to €138,643,267 (2019: €132,162,512) – an increase of 4.9%. In common with all disability service providers the main area of cost increase is wages and salaries, as a result of national pay agreements and new services. Further details of staff costs are set out in notes 16 and 17.



Funding Activities

The Daughters of Charity Disability Support Services does not currently have a dedicated fund-raising section and currently rely solely on RESPECT CLG.

Reserves Policy

As a Section 38 Agency the Daughters of Charity Disability Support Services are dependent on funding received from the HSE. The funding received from the HSE is always specific to a particular activity and/or year.

S38 organisations are not permitted to generate reserves from the funding they receive from the HSE and any surpluses generated from HSE funding will have to be re-invested in service delivery (with HSE agreement). The Board of Directors are of the opinion that as a Section 38 Agency providing services for and on behalf of the HSE it is appropriate to rely on the HSE to continue to fund the services we deliver.

Investment Policy

The Daughters of Charity Disability Support Services are very risk averse, and any surplus funds are held in cash form.

Going Concern

As described more fully in note 6, The Daughters of Charity Disability Support Services is primarily dependent on funding from the HSE to enable it to continue as a going concern. The directors are comfortable that the forecasts they have prepared indicate the company can manage its obligations as they fall due for a period of at least 12 months from the signing of the financial statements.

13.6 Plans for Future Periods

The Daughters of Charity Disability Support Services is currently finalising its strategic plan for the next five years which will ensure the organisation continues to meet the highest standards and influence they delivery of services. Our annual report in sections 5 and 6 provides a detailed overview of our performance against our service objectives across a range of areas. In looking at each area of service delivery, we have also provided an overview in those sections of planned developments in 2021 and beyond.

13.7 Directors Report (Additional Disclosures Not Covered Under Trustees Report Above)

Principal activities and review of the business

The principal activity of the company is the provision of supports to persons with an intellectual disability across Dublin, Limerick and North Tipperary/Offaly areas. The company's main source of income comes from an annual HSE revenue grant which is used for the day-to-day running costs of the disability service. In 2020, the company generated a surplus of €1,936,436 (2019: €550,399).

The increase in the year was largely due to the savings generated from a combination of reduced agency costs (where staffs were re-deployed and reduced activity levels as result of re-configuring services in order to protect people from COVID-19).

The Daughters of Charity of St Vincent de Paul commenced providing specialised services to persons with intellectual disability on 1 January 1926. For many years the disability support services were managed by a Board of Management comprising of members of the Daughters of Charity of St Vincent de Paul and lay people. In 2014 it was agreed to establish a separate company to manage the Disability Services. These services were transferred to the Daughters of Charity Disability Support Services CLG on 1 January 2015. The company continues to use, free of charge, many properties belonging to the Daughters of Charity of St Vincent de Paul.

The services currently provided by the company had previously been provided by three unincorporated entities, namely:

- Daughters of Charity Service for Persons with Intellectual Disability Dublin
- Daughters of Charity Service for Persons with Intellectual Disability Limerick
- Daughters of Charity Service for Persons with Intellectual Disability North Tipperary/Offaly

Directors and secretary's interests in shares

The names of the persons who were directors at any time during the year ended 31 December 2020 are set out below. Unless indicated otherwise, they served as directors for the entire year.

Sr Goretti Butler
Sr Justine O'Brien
Sr Sheila Ryan
Sr Bernadette MacMahon
Sally Byrne
Noel Kidney
Daniel O'Hare
John O'Quigley
Rory Staines
Kieran Murphy
Sile Parsons (appointed 25 February 2020)

In accordance with the Articles of Association one third of the directors, or if their number is not a multiple of three then the nearest number to one-third, shall retire from office. At the Annual General Meeting to be held in 2021 the following directors shall retire and being eligible, offer themselves for re-election:

John O'Quigley
Kieran Murphy
Sr Goretti Butler
Sr Justine O'Brien

The directors and secretary had no interest in the shares of the company or any related company at 31 December 2020, as defined in paragraph 329 of the Companies Act 2014.

Results and dividends

The surplus for the year ended 31 December 2020 amounted to €1,936,436 (2019: €550,398).

The company is precluded by its Memorandum and Articles of Association from paying a dividend either as part of its normal operations or on distribution of the company's assets in the event of it being wound up. All income must be applied solely towards the charitable objectives of the company. A detailed overview of the financial performance is included in the financial review on pages 107 to 129.

Charitable and political donations

During the period, the company made no charitable or political donations.

Financial Risk Management

The Daughters of Charity Disability Support Services financial risk management objectives and policies involve identifying risks and opportunities across the organisation, assessing the potential impact of these risks and providing a method for addressing these impacts by either reducing threats to an acceptable level or eliminating them. The risk review process consists of activities to identify, categorise, describe, and assess risks. The outcome is a list of described risks which are clearly mapped to objectives and prioritised according to risk assessment criteria which are reviewed, challenged, discussed, and agreed as set out in the Risk Management section of this Report on pages 61 to 71.

Principle risks and uncertainties

The directors have identified five areas where major risks may occur:

- **Governance**

The directors have established four sub-committees to provide governance and oversight of what they consider the main areas affecting governance namely:

- Quality and risk
- Finance, assets, audit and remuneration
- Nominations
- Service ethics

- **Operational**

Regular meetings take place with the Health Service Executive to ensure all services are being carried out in accordance the Service Level Arrangement.

- **Financial**

Regular reviews by the Board of Directors of monthly financial reports which clearly indicate financial performance.

- **COVID-19**

COVID-19 arrived in Ireland in February 2020 and the country went into a national lockdown in March of that year. There was an immediate requirement to establish isolation centres and sufficient supplies of Personal Protective Equipment (PPE) in order to protect residents, day attenders and staff. All work practices were reviewed and altered (if required) in order to prevent the spread of this virus which initially gave rise to a deficit across all areas of the Service. However, as a consequence of closing day services and re-deploying the staff into the residential service our cost of employing agency staff dropped significantly. This, coupled with some additional funding from the HSE, resulted in a surplus in 2020.

At the time of writing this report the country is emerging from the third wave of the virus and the “re-opening” of the country in tandem and with the continuing roll out of the vaccination programme the outlook from the National Public Health Emergency Team (NPHE) is positive.

Notwithstanding the above, COVID-19 still poses a serious threat and will continue to pose challenges to service delivery into and beyond 2021. The financial results for 2021 are positive but we continue to consider the risks COVID-19 poses to the organisation and to our cash flows. The HSE have been very supportive in this regard, and it must always be borne in mind that the services we provide are essential services.

Even though we have been dealing with the pandemic for over a year there is no way of predicting the extent that the full effect coronavirus will have on our organisation in general, our occupants and the resulting demand for our services. It is now clear how widespread the virus has become but the full impact of new variants of the virus cannot be predicted nor any consequent government decisions. Our priority continues to do all we can to keep our workplace as safe as possible for residents, day attenders, staff and visitors.

The HSE have indicated that any incremental COVID-19 costs will be funded and, in line with this, the company has updated its forecasts to reflect the impact of a potential loss of some revenue and increase of some expenditures over the next 12 months. At the date of this report Management are comfortable that the forecasts will ensure that cash flows are sufficient to meet the company's obligations as they fall due for the period of at least 12 months from signing the financial statements.

There will be many challenges to our working practices as the pandemic continues and plans are in place to deal with the pandemic as it develops. We are confident that as an organisation we have the ability to manage through this challenging time. Therefore, these financial statements have been prepared on a going concern basis.

The directors have reviewed the measures in place to address these risks. Of key importance underlying each of these risks is the directors' awareness of the risk associated with the care of children and adults with disabilities. The purpose of the fore mentioned sub-committees is to ensure the systems, procedures and services delivered are adequate to ensure the care and safety of service users and staff at all times.

- **IT and Cyber Security**

As a large organisation with many staff we are greatly dependent on IT to carry out our day-to-day activities. Furthermore, as a consequence of Covid-19 many staff are working remotely and this has placed an even greater dependence on IT and also increased the associated risks. The IT department are acutely aware of this risk and all firewalls are updated regularly and added cloud-based malware detection software. IT and Cyber Security is also an ongoing item on our corporate risk register.

The detailed risk report on pages 61 to 71 provides further detail on the nature of the risks facing the organisation and our response to these.

Events since the end of the financial year

The HSE suffered a ransomware attack on 14 May 2021. The impact of this attack was that all HSE systems were shut down. Presently all HSE funding was continued uninterrupted but certain electronic regulatory reporting mechanisms remain unavailable at the time of this report. However, alternative methods have been put in place.

The HSE ransomware attack is considered to be a non-adjusting post balance sheet date.

Accounting Records

The measures taken by the Board of Directors to ensure compliance with the requirements of Sections 281 to 285 of the Companies Act 2014 regarding the keeping of accounting records include the implementation of policies and procedures for recording transactions, the employment of competent accounting personnel with appropriate expertise and the provision of adequate resources to the financial function.

The Daughters of Charity Disability Support Services books of account are kept at:

St Vincent's Centre, Navan Road, Dublin 7
St Joseph's Centre, Clonsilla, Dublin 15
St Vincent's Centre Lisnagry, Co. Limerick
St Anne's Centre, Sean Ross Abbey, Roscrea, Co. Tipperary

Disclosure of information to auditors

The directors in office at the date of this report have each confirmed that:

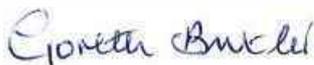
- as far as he/she is aware, there is no relevant audit information of which the company's statutory auditors are unaware; and
- he/she has taken all the steps that he/she ought to have taken as a director in order to make himself/herself aware of any relevant audit information and to establish that the company's statutory auditors are aware of that information

Independent auditors

The Auditor, PricewaterhouseCoopers, have indicated their willingness to continue in office, and a resolution that they be re-appointed will be proposed at the Annual General Meeting.

On behalf of the board on 28 September 2021

Sr G Butler



Sr J O'Brien



DIRECTORS RESPONSIBILITY STATEMENT

The directors are responsible for preparing the annual report in accordance with applicable law and regulation.

Company law requires the directors to prepare financial statements for each financial year. Under that law the directors have prepared the financial statements in accordance with Generally Accepted Accounting Practice in Ireland (United Kingdom Accounting standards, comprising FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland", and the Companies Act 2014). Under company law the directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the company and of the profit or loss of the company for that period. In preparing the financial statements, the directors are required to:

- select suitable accounting policies and then apply them consistently;
- state whether applicable Accounting Standards, comprising FRS 102, have been followed, subject to any material departures disclosed and explained in the financial statements;
- make judgements and accounting estimates that are reasonable and prudent; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the company will continue in business.

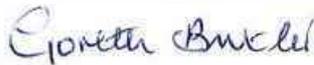
The directors are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The directors are responsible for keeping adequate accounting records that are sufficient to show and explain the company's transactions and disclose with reasonable accuracy at any time the financial position of the company and enable them to ensure that the financial statements comply with the Companies Act 2014.

The directors are responsible for the maintenance and integrity of the company's website. Legislation in the Republic of Ireland governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

On behalf of the board on 28 September 2021

Sr G Butler



Sr J O'Brien





Independent auditors' report to the members of Daughters of Charity Disability Support Company Limited by Guarantee

Report on the audit of the financial statements

Opinion

In our opinion, Daughters of Charity Disability Support Company Limited by Guarantee's financial statements:

- give a true and fair view of the company's assets, liabilities and financial position as at 31 December 2020 and of its surplus and cash flows for the year then ended;
- have been properly prepared in accordance with Generally Accepted Accounting Practice in Ireland (accounting standards issued by the Financial Reporting Council of the UK, including Financial Reporting Standard 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" and Irish law); and
- have been properly prepared in accordance with the requirements of the Companies Act 2014.

We have audited the financial statements, included within the Annual Report, which comprise:

- the balance sheet as at 31 December 2020;
 - the statement of financial activities for the year then ended;
 - the cash flow statement for the year then ended;
 - the statement of changes in funds for the year then ended; and
 - the notes to the financial statements, which include a description of the significant accounting policies.
-

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (Ireland) ("ISAs (Ireland)") and applicable law.

Our responsibilities under ISAs (Ireland) are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Independence

We remained independent of the company in accordance with the ethical requirements that are relevant to our audit of the financial statements in Ireland, which includes IAASA's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements.

Conclusions relating to going concern

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the company's ability to continue as a going concern for a period of at least twelve months from the date on which the financial statements are authorised for issue.

In auditing the financial statements, we have concluded that the directors' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

However, because not all future events or conditions can be predicted, this conclusion is not a guarantee as to the company's ability to continue as a going concern.

Our responsibilities and the responsibilities of the directors with respect to going concern are described in the relevant sections of this report.

Reporting on other information

The other information comprises all of the information in the Annual Report other than the financial statements and our auditors' report thereon. The directors are responsible for the other information. Our opinion on the financial statements does not cover the other information and, accordingly, we do not express an audit opinion or, except to the extent otherwise explicitly stated in this report, any form of assurance thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge



obtained in the audit, or otherwise appears to be materially misstated. If we identify an apparent material inconsistency or material misstatement, we are required to perform procedures to conclude whether there is a material misstatement of the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report based on these responsibilities.

With respect to the Trustees' Report (incorporating the Directors' Report), we also considered whether the disclosures required by the Companies Act 2014 have been included.

Based on the responsibilities described above and our work undertaken in the course of the audit, ISAs (Ireland) and the Companies Act 2014 require us to also report certain opinions and matters as described below:

- In our opinion, based on the work undertaken in the course of the audit, the information given in the Trustees' Report (incorporating the Directors Report) for the year ended 31 December 2020 is consistent with the financial statements and has been prepared in accordance with applicable legal requirements.
- Based on our knowledge and understanding of the company and its environment obtained in the course of the audit, we have not identified any material misstatements in the Trustees' Report (incorporating the Directors' Report).

Responsibilities for the financial statements and the audit

Responsibilities of the directors for the financial statements

As explained more fully in the Directors' Responsibility Statement, the directors are responsible for the preparation of the financial statements in accordance with the applicable framework and for being satisfied that they give a true and fair view.

The directors are also responsible for such internal control as they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the directors are responsible for assessing the company's ability to continue as a going concern, disclosing as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the company or to cease operations or have no realistic alternative but to do so.

Auditors' responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (Ireland) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Our audit testing might include testing complete populations of certain transactions and balances, possibly using data auditing techniques. However, it typically involves selecting a limited number of items for testing, rather than testing complete populations. We will often seek to target particular items for testing based on their size or risk characteristics. In other cases, we will use audit sampling to enable us to draw a conclusion about the population from which the sample is selected.

A further description of our responsibilities for the audit of the financial statements is located on the IAASA website at:

https://www.iaasa.ie/getmedia/b2389013-1cf6-458b-9b8f-a98202dc9c3a/Description_of_auditors_responsibilities_for_audit.pdf

This description forms part of our auditors' report.

Use of this report

This report, including the opinions, has been prepared for and only for the company's members as a body in accordance with section 391 of the Companies Act 2014 and for no other purpose. We do not, in giving these opinions, accept or assume responsibility for any other purpose or to any other person to whom this report is shown or into whose hands it may come save where expressly agreed by our prior consent in writing.

Other required reporting

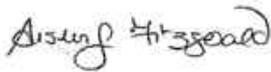
Companies Act 2014 opinions on other matters

- We have obtained all the information and explanations which we consider necessary for the purposes of our audit.
- In our opinion the accounting records of the company were sufficient to permit the financial statements to be readily and properly audited.
- The financial statements are in agreement with the accounting records.

Other exception reporting

Directors' remuneration and transactions

Under the Companies Act 2014 we are required to report to you if, in our opinion, the disclosures of directors' remuneration and transactions specified by sections 305 to 312 of that Act have not been made. We have no exceptions to report arising from this responsibility.



Aisling Fitzgerald
for and on behalf of PricewaterhouseCoopers
Chartered Accountants and Statutory Audit Firm
Dublin
30 September 2021

STATEMENT OF FINANCIAL ACTIVITIES
Financial Year Ended 31 December 2020

	Notes	Rest. Funds €	Unrest. Funds €	Endow. Funds €	Total 2020 €	Total 2019 €
Income and endowments from:						
Donations and legacies	7	-	-	-	-	878,278
Earned from charitable activities	8	137,591,029	-	-	137,591,029	128,756,618
Earned form other trading activities	9	215,700	-	-	215,700	407,924
Other income	10	<u>2,772,974</u>	-	-	<u>2,772,974</u>	<u>2,670,090</u>
Total income and endowments		140,579,703	-	-	140,579,703	132,712,910
Expenditure						
Expenditure on charitable activities	11	130,147,979	-	891,675	131,039,654	125,001,551
Other expenditure	12	<u>7,603,613</u>	-	-	<u>7,603,613</u>	<u>7,160,961</u>
Total expenditure		137,751,592	-	891,675	138,643,267	132,162,512
Net income/(expenditure) on charitable activities		2,828,111	-	(891,675)	1,936,436	550,398
Transfer between funds		-	-	-	-	-
Net movement in funds		2,828,111	-	(891,675)	1,936,436	550,398
Reconciliation of funds:						
Total funds brought forward		<u>(1,411,451)</u>	<u>271,556</u>	<u>28,062,411</u>	<u>26,922,516</u>	<u>26,372,118</u>
Total funds carried forward		<u>1,416,660</u>	<u>271,556</u>	<u>27,170,736</u>	<u>28,858,952</u>	<u>26,922,516</u>

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

STATEMENT OF FINANCIAL ACTIVITIES - continued

	Notes	Rest. Funds €	Unrest. Funds €	Endow. Funds €	Total 2019 €
Income and endowments from:					
Donations and legacies	7	-	-	878,278	878,278
Earned from charitable activities	8	128,756,618	-	-	128,756,618
Earned from other trading activities	9	407,924	-	-	407,924
Other income	10	2,670,090	-	-	2,670,090
Total income and endowments		131,834,632	-	878,278	132,712,910
Expenditure					
Expenditure on charitable activities	11	124,108,515	-	893,036	125,001,551
Other expenditure	12	7,160,961	-	-	7,160,961
Total expenditure		131,269,476	-	893,036	132,162,512
Net (expenditure)/income on charitable activities		565,156	-	(14,758)	550,398
Transfer between funds		-	-	-	-
Net movement in funds		565,156	-	(14,758)	550,398
Reconciliation of funds:					
Total funds brought forward		(1,976,607)	271,556	28,077,169	26,372,118
Total funds carried forward		(1,411,451)	271,556	28,062,411	26,922,516

BALANCE SHEET
As at 31 December 2020

	Notes	2020 €	2019 €
Fixed assets			
Tangible fixed assets	18	<u>29,042,205</u>	<u>28,261,325</u>
Current assets			
Debtors and prepayments	19	8,212,262	7,802,799
Bank and cash on hand		<u>6,925,402</u>	<u>4,403,749</u>
		15,137,664	12,206,548
Creditors - amounts falling due in less than one year	20	<u>(15,320,917)</u>	<u>(13,545,356)</u>
Net current liabilities		<u>(183,253)</u>	<u>(1,338,808)</u>
Net assets		<u>28,858,952</u>	<u>26,922,517</u>
Funds of the charity			
Restricted funds	21	1,416,660	(1,411,450)
Unrestricted funds	21	271,556	271,556
Restricted endowment funds	21	<u>27,170,736</u>	<u>28,062,411</u>
		<u>28,858,952</u>	<u>26,922,517</u>

The financial statements were approved and authorised for issue by the board on 28.09.2021

Sr G Butler

Eioneth Butler

Sr J O'Brien

Justine O'Brien

STATEMENT OF CHANGES IN FUNDS
Financial Year Ended 31 December 2020

	Rest. Funds €	Unrest. Funds €	Endow. Funds €	Total €
Balance at 1 January 2019	(1,976,607)	271,556	28,077,169	26,372,118
Total Comprehensive Income – 2019	565,156	-	(14,758)	550,398
As at 31 December 2019	<u>(1,411,451)</u>	<u>271,556</u>	<u>28,062,411</u>	<u>26,922,516</u>
Balance at 1 January 2020	(1,411,451)	271,556	28,062,411	26,922,516
Total Comprehensive Income – 2020	2,828,111	-	(891,675)	1,936,436
As at 31 December 2020	<u>1,416,660</u>	<u>271,556</u>	<u>27,170,736</u>	<u>28,858,952</u>

CASH FLOW STATEMENT
Financial Year Ended 31 December 2020

	Notes	2020 €	2019 €
Cash flows from operating activities:			
Net cash inflow from operating activities	22	4,392,046	2,954,574
Cash flows from investing activities			
Payments to acquire fixed assets		(1,870,393)	(426,099)
Proceeds on disposal of fixed assets		-	235,000
Net cash used by investing activities		(1,870,393)	(191,099)
Change in cash and cash equivalents in the reporting period		<u>2,521,653</u>	<u>2,763,475</u>
Cash and cash equivalents at the beginning of the reporting period		4,403,749	1,640,274
Change in cash and cash equivalents		<u>2,521,653</u>	<u>2,763,475</u>
Cash and cash equivalents at the end of the reporting period		<u>6,925,402</u>	<u>4,403,749</u>

NOTES TO THE FINANCIAL STATEMENTS

1 General information

The principal activity of the company is providing support to persons with an intellectual disability in the Dublin, Limerick and North Tipperary/Offaly areas.

2 Statement of compliance

The entity financial statements have been prepared on a going concern basis and in accordance with the Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) (effective 1 January 2015) – (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UP and Republic of Ireland (FRS 102) and the Companies Act 2014.

3 Summary of significant accounting policies

The significant accounting policies used in the preparation of the group and entity financial statements (the Charity) are set out below. These policies have been consistently applied to all financial years presented, unless otherwise stated. The charity decided to prepare the 2020 financial statements in accordance with FRS 102 and Charity SORP (FRS 102).

The preparation of financial statements in conformity with FRS 102 requires the use of certain key assumptions concerning the future, and other key sources of estimation uncertainty at the reporting date. It also requires the Directors to exercise their judgement in the process of applying the company's accounting policies. The areas involving a higher degree of judgement or areas where assumptions and estimates have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are disclosed in note 4.

(a) General information

The Daughters of Charity Disability Support Services is a company limited by guarantee not having a share capital (CLG) under Part 18 of the Companies Act 2014. The address of its registered office is St. Catherine's Provincial House, Dunardagh, Temple Hill, Blackrock, Co Dublin. The Companies Registration Number is 527694, the Charities Regulator Number is 20084035 and the Charity Number is CHY21097. The company's operations and its principle activities are set out in the Trustee's Report (incorporating the Directors' Report on page 3.

(b) Basis of preparation

The financial statements have been prepared in accordance with the Charities SORP (FRS 102) - Statement of Recommended Practice applicable to charities preparing their accounts in accordance with The Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019) and the Companies Act 2014.

The Daughters of Charity Disability Support Services clg meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

The Directors have determined the profit and loss formats as required by Schedule 3 of Companies Act 2014 be adapted to present results in accordance with the formats provided by Charities SORP (FRS 102) which details the income and expenditure by nature. Given that the company is a company limited by guarantee, the capital and reserves section of the balance sheet has been adapted accordingly to reflect this fact. The directors consider that the layout adopted more correctly reflects the nature of the entity given that the entity is a not-for-profit organisation which is limited by guarantee.

3 Summary of significant accounting policies - continued

(c) Accounting Convention

The company's functional and presentation currency is the euro, denominated by the symbol "€".

(d) Income

State funding represents amounts received from state agencies (primarily the HSE) to enable the company to provide services. Such revenue grants are recognised once the granting agency has indicated the allocation of grant assistance to the company.

Other revenue grants are accounted for as revenues once the performance conditions relating to their recognition have been satisfied.

State funding includes amounts deducted from employee payroll in respect of pension as the HSE has indicated that such amounts should be recognised as income of the company. Such income is recognised as it is deducted.

RSSMAC income

Income in respect of residential support maintenance and accommodation contributions represents contributions payable by patients and it is recognised as it arises.

Earned from other trading activities

Income earned from other trading activities includes sales of food in canteens and refunds from the Department of Social Protection. Such income is recognised as it is receivable.

Other income is recognised when the company has entitlement to the funds and assets, any performance conditions attached to the items of income have been met and it is probable that the income will be received and the amount can be measured reliably.

Donated assets or cash are recognised in the financial statements when there is evidence of entitlement to the gift, receipt is probable and its amount can be measured reliably. 6 December 2018 is considered to be the accounting reference date for the transfer of certain properties to the company as this was the date that the declarations of trust for the transfer of properties was signed.

(e) Deferred income

A grant that is subject to performance-related conditions received in advance of delivering the goods and services required by that condition or is subject to unmet conditions wholly outside the control of the recipient charity, is accounted for as a liability and shown on the balance sheet as deferred income.

(f) Funds

All transactions of the Charity have been recorded and reported as income into or expenditure from funds which are designated as "restricted", "endowment" or "unrestricted".

Restricted funds

Income is treated as restricted where the donor has specified that it may only be used for a particular purpose or where it has been raised for a particular purpose. All other income is treated as unrestricted. Expenditure is treated as being made out of restricted funds to the extent that it meets the criteria specified by the donor or the terms under which it was raised. All other expenditure is treated as unrestricted. The Daughters of Charity Disability Support Services consider all funding received from the Health Service Executive to be restricted. Furthermore, any income received as a direct result of HSE funded activities is also considered restricted.

The balance on each restricted fund at the end of the year represents the asset held by the Company for particular purposes specified by the donors. The balance of the unrestricted fund at the end of the year represents the assets held by the Charity for general use in furtherance of its work.

Unrestricted funds. All other income is treated as unrestricted and relates to the core objective of providing services in accordance with the overall charity objectives.

3 Summary of significant accounting policies - continued

Endowment Funds

Endowment funds are a permanent fund whereby the initial capital amount invested will not be accessed but rather the return on the initial investment will provide funding or access to fixed assets on an annual basis. The transfer of beneficial ownership of a number of properties in 2018 and the funding of the refurbishment of premises by the Daughters of Charity of St. Vincent de Paul are considered to be restricted endowment funds. Any loss of value due to depreciation or impairment is charged to the endowment fund.

The balance on each restricted fund at the end of the year represents the asset held by the organisation for a particular purpose specified by the donors. The balance of the unrestricted fund at the end of the year represents the assets held by the organisation for general use in furtherance of its work. Endowment funds represent amounts held for investment or specific charitable purpose. In this instance it represents the depreciated value of donated assets and are restricted.

Unrestricted funds

All other income is treated as unrestricted and relates to the core objective of providing services in accordance with the overall charity objectives.

Endowment Funds

Endowment funds are a permanent fund whereby the initial capital amount invested will not be accessed but rather the return on the initial investment will provide funding or access to fixed assets on an annual basis. The transfer of beneficial ownership of a number of properties in 2018 and the funding of the refurbishment of premises by the Daughters of Charity of St. Vincent de Paul are considered to be restricted endowment funds. Any loss of value due to depreciation or impairment is charged to the endowment fund.

The balance on each restricted fund at the end of the year represents the asset held by the organisation for a particular purpose specified by the donors. The balance of the unrestricted fund at the end of the year represents the assets held by the organisation for general use in furtherance of its work. Endowment funds represent amounts held for investment or specific charitable purpose. In this instance it represents the depreciated value of donated assets and are restricted.

(g) Expenditure

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

- Costs of raising funds – currently there is no fundraising function in the Daughters of Charity Disability Support Services.
- Expenditure on charitable activities includes the costs incurred in undertaking the various charitable activities which are performed for the benefit of Daughters of Charity Disability Support Services beneficiaries, including those support costs and costs relating to the governance of the Charity apportioned to charitable activities.
- Other expenditure represents those items not falling into any other heading.

(h) Allocation of support costs

Support costs are those functions that assist the work of the Charity but do not directly undertake charitable activities. Support costs include general management and back-office costs, IT, finance, HR, payroll and governance costs which support the Charity's programmes and activities.

(i) Employee benefits

The company provides a range of benefits to employees, including short term employee benefits such as paid holiday arrangements and post-employment benefits (in the form of defined benefit or defined contribution pension plans).

(i) Short term employee benefits

Short term employee benefits, including wages and salaries, paid holiday arrangements and other similar non-monetary benefits, are recognised as an expense in the financial year in which employees render the related service. An expense is recognised in the profit and loss account when the company has a present legal or constructive obligation to make payments under the plan as a result of past events and a reliable estimate of the obligation can be made.

3 Summary of significant accounting policies - continued

(i) Employee benefits - continued

(ii) Post-employment benefits

Superannuation benefits for the employees are governed by the Nominated Health Agencies Superannuation Scheme (NHASS) or the Single Public Service Pension Scheme (SPSPS). The NHASS and SPSPS are State plans for the purposes of FRS 102.

The NHASS is administered, funded and underwritten by the Department of Health. The company operates as an agent in the operation of the scheme and does not contribute financially to the scheme.

The directors believe that the liability in respect of pension benefits payable to employees who are members of the NHASS will be met in full by the Department of Health, the company is not exposed to the actuarial risk arising from the NHASS and from the company's perspective the NHASS is, in substance, a defined contribution scheme.

Contributions from employees who are members of the scheme are credited to the Income and Expenditure account when received. Payments in respect of pensions and lump sum payments are charged to the Income and Expenditure account as amounts become payable.

With effect from 1 January 2013 the Single Public Service Pension Scheme (SPSPS) commenced. Most new employees will be members of the Single Public Service Pension Scheme (SPSPS). Pension contributions are remitted to the Department of Public Expenditure and Reform. The administration of the scheme is operated by the Department of Public Expenditure and Reform. The Department of Public Expenditure and Reform is responsible for the payment of lump sums and pensions on behalf of the SPSPS without recourse to the company.

(j) Income tax

The company has been granted charitable tax exemption by the Revenue Commissioners and is a recognised charity under Section 207 of the Tax Consolidation Act 1997, registered charity number CHY 21097.

(k) Operating leases

Operating leases do not transfer substantially all the risks and rewards of ownership to the lessor. Payments under operating leases are recognised in the profit and loss account on a straight-line basis over the term of the lease.

(l) Tangible fixed assets

Tangible fixed assets are carried at cost less accumulated depreciation and accumulated impairment losses. Cost includes the original purchase price, cost directly attributable to bringing the asset to the location and condition necessary for its intended use, removal and restoration costs.

Depreciation and residual values

Depreciation on assets is calculated using the straight-line method over their estimated useful lives, as follows:

Leasehold improvements	2.5%
Land and buildings	2.5%
Vehicles	20%
Office equipment and furniture	20%

(i) Depreciation and residual values - continued

The assets residual values and useful lives are reviewed, and adjusted, if appropriate, at the end of each financial year. The effect of any change in either the residual value or the useful life is accounted for prospectively.

(ii) Subsequent additions

Subsequent costs are included in the assets carrying amount or recognised as a separate asset, as appropriate, only when it is probable that economic benefits associated with the item will flow to the company and the cost can be measured reliably.

Repairs and maintenance costs are expensed as incurred.

3 Summary of significant accounting policies - continued

(l) Tangible fixed assets - continued

(iii) De-recognition

Tangible fixed assets are derecognised on disposal or when no economic benefits are expected. On disposal, the difference between the net disposal proceeds and the carrying amount is recognised in profit and loss.

(m) Financial instruments

The company has chosen to apply the provisions of Sections 11 and 12 of FRS 102 to account for all of its financial instruments.

(i) Financial assets

Basic financial assets, including trade and other debtors, cash and cash equivalents, short-term deposits and investments in corporate bonds, are initially recognised at transaction price (including transaction costs), unless the arrangement constitutes a financing transaction. Where the arrangement constitutes a financing transaction the resulting financial asset is initially measured at the present value of the future receipts discounted at a market rate of interest for a similar debt instrument.

Trade and other debtors, cash and cash equivalents, investments in corporate bonds and financial assets from arrangements which constitute financing transactions are subsequently measured at amortised cost using the effective interest method.

At the end of each financial year financial assets measured at amortised cost are assessed for objective evidence of impairment. If there is objective evidence that a financial asset measured at amortised cost is impaired, an impairment loss is recognised in profit or loss. The impairment loss is the difference between the financial asset's carrying amount and the present value of the financial asset's estimated cash inflows discounted at the asset's original effective interest rate.

If, in a subsequent financial year, the amount of an impairment loss decreases and the decrease can be objectively related to an event occurring after the impairment was recognised the previously recognised impairment loss is reversed. The reversal is such that the current carrying amount does not exceed what the carrying amount would have been had the impairment loss not previously been recognised. The impairment reversal is recognised in profit or loss.

Such financial assets are subsequently measured at fair value and the changes in fair value are recognised in profit or loss, except that investments in equity instruments that are not publicly traded and whose fair values cannot be measured reliably are subsequently measured at cost less impairment.

Financial assets are derecognised when (a) the contractual rights to the cash flows from the asset expire or are settled, or (b) substantially all the risks and rewards of ownership of the financial asset are transferred to another party or (c) control of the financial asset has been transferred to another party who has the practical ability to unilaterally sell the financial asset to an unrelated third party without imposing additional restrictions.

(ii) Financial liabilities

Basic financial liabilities, including trade and other creditors, bank loans, loans from fellow group companies and preference shares, are initially recognised at transaction price, unless the arrangement constitutes a financing transaction. Where the arrangement constitutes a financing transaction the resulting financial liability is initially measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Trade and other creditors, bank loans, loans from fellow group companies, preference shares and financial liabilities from arrangements which constitute financing transactions are subsequently carried at amortised cost, using the effective interest method.

Fees paid on the establishment of loan facilities are recognised as transaction costs of the loan to the extent that it is probable that some or all of the facility will be drawn down. In this case, the fee is deferred until the draw-down occurs. To the extent there is no evidence that it is probable that some or all of the facility will be drawn down, the fee is treated as a prepayment for liquidity services and amortised over the period of the facility to which it relates.

3 Summary of significant accounting policies - continued

(m) Financial instruments - continued

(ii) *Financial liabilities - continued*

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of business from suppliers. Trade creditors are classified as due within one year if payment is due within one year or less. If not, they are presented as falling due after more than one year. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

Financial liabilities are derecognised when the liability is extinguished, that is when the contractual obligation is discharged, cancelled or expires.

(n) Scope of the financial statements

The following services are included in the statement of financial activities and the balance sheet:

Daughters of Charity Disability Support Service – Dublin Service

Daughters of Charity Disability Support Service – Limerick Service

Daughters of Charity Disability Support Service – North Tipperary/Offaly Service

4 Judgements in applying accounting policies and key sources of estimation uncertainty

Estimates and judgements made in the process of preparing the charity entity financial statements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances. The trustees make estimates and assumptions concerning the future in the process of preparing the entity financial statements. The resulting accounting estimates will, by definition, seldom equal the related actual results. The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are addressed below.

(i) *Impairment of debtors*

The directors make an assessment at the end of each financial year of whether there is objective evidence that debtors are recoverable. When assessing impairment of such debtors, the directors consider factors including the current credit rating of the debtor, the age profile of outstanding invoices, recent correspondence and historical experience of cash collections from the debtor. See note 19 for the net carrying amount of the debtors and the impairment loss recognised in the financial year.

(ii) *Tangible fixed assets depreciation and useful economic lives*

The annual depreciation on tangible fixed assets is sensitive to changes in the estimated useful economic lives and residual values of the assets. The useful economic lives and residual values are reviewed annually. They are amended when necessary to reflect current estimates, based on technological advancement, future investments, economic utilisation and the physical condition of the assets. See note 18 for the carrying amount of the tangible fixed assets.

5 Donated services and properties

Donated professional services and donated properties are recognised as income when the charity has control over the item, any conditions associated with the donated item have been met, the receipt of economic benefit from use by the charity of the item is probable and that the economic benefit can be measured reliably.

On receipt, donated professional services and donated properties are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain on the open market; a corresponding amount is then recognised in expenditure (for professional services) and tangible assets (for donated properties) in the period of receipt.

5 Donated services and properties - continued

Beneficial ownership of properties

The company uses properties belonging to the Daughters of Charity of St Vincent de Paul to provide charitable services. On 6 December 2018, the company recognised certain of these properties at their respective fair values on the balance sheet with a corresponding amount being recognised as income in the statement of comprehensive income. The total fair value of the properties recognised amounted to €14,165,000 (see note 18).

6 Going concern

The Company has net assets of €28.859m, net current liabilities of €0.183m and cash balance of €6.925m. The Company furthermore generated an operating surplus of €1.936m for the current year.

The Daughters of Charity Disability Support Services is primarily dependent on funding from the HSE to enable it to continue as a going concern.

The Company meets its day-to-day working capital requirements through its cash balances. The company is primarily dependent on the HSE for funding and is confident that the HSE will advance additional funding to manage the net current liability situation should the situation arise.

We have modelled the likely continuing effects of COVID 19 on our cash forecast for the next 12 months, and we are comfortable that the company will be in a position to meet its obligations as they fall due. The directors are comfortable that the forecasts they have prepared have considered a number of sensitivities, including a range of outcomes, and that in all cases their remains sufficient mitigation measures available to the directors to ensure that cash-flows are managed and that the company can continue to meet its obligations as they fall due for the period of at least 12 months from signing the financial statements. Therefore, these financial statements have been prepared on a going concern basis.

The company will continue to address these operational cash requirements through a combination of additional funding from the HSE and the conversion of agency staff to employees. If additional funding from the HSE is not forthcoming and/or the agency conversion process proves unsuccessful then the company will consider reducing services supported individuals and their families. These measures should generate sufficient resources to enable the company to continue as a going concern. The HSE has to date provided the funding required to address any incremental costs arising as a result of COVID-19. Furthermore, the HSE has not given any indication that it will withdraw its financial support from the company in foreseeable future.

7 Donations and legacies

	Rest. €	Unrest. €	Endow. €	Total €
2020				
Donation of property	-	-	-	-
2019				
Donation of property	-	-	878,278	878,278

8 Earned from charitable activities

	Rest. €	Unrest. €	Endow. €	Total €
2020				
Health Service Executive Allocation	122,397,135	-	-	122,397,135
Health Service Executive Income	7,971,065	-	-	7,971,065
Department of Education & Skills	509,600	-	-	509,600
SEI Grant	39,829	-	-	39,829
Additional Superannuation Contribution	2,251,432	-	-	2,251,432
RSSMAC	4,066,265	-	-	4,066,265
Department of Social Protection	355,704	-	-	355,704
	137,591,029	-	-	137,591,029

2019

Health Service Executive Allocation	117,351,574	-	-	117,351,574
Health Service Executive Income	3,825,179	-	-	3,825,179
Department of Education & Skills	458,288	-	-	458,288
SEI Grant	42,903	-	-	42,903
Additional Superannuation Contribution	2,470,848	-	-	2,470,848
RSSMAC	4,241,133	-	-	4,241,133
Department of Social Protection	366,694	-	-	366,694
	128,756,618	-	-	128,756,618

9 Earned from other trading activities

	Rest. €	Unrest. €	Endow. €	Total €
2020				
Canteen receipts	54,399	-	-	54,399
Sundry income	161,301	-	-	161,301
	215,700	-	-	215,700
2019				
Canteen receipts	107,644	-	-	107,644
Sundry income	300,280	-	-	300,280
	407,924	-	-	407,924

10 Other income

	Rest. €	Unrest. €	Endow. €	Total €
2020				
Nominated Health Superannuation Scheme	<u>2,772,974</u>	-	-	<u>2,772,974</u>
2019				
Nominated Health Superannuation Scheme	<u>2,670,090</u>	-	-	<u>2,670,090</u>

11 Expenditure on charitable activities

	Rest. €	Unrest. €	Endow. €	Total 2020 €	Total 2019 €
2020					
Pay	108,712,173	-	-	108,712,173	104,395,158
Drugs and medicines	534,954	-	-	534,954	556,553
Medical and surgical appliances	1,276,966	-	-	1,276,966	1,150,716
Catering	2,482,722	-	-	2,482,722	2,538,340
Power, heat and light	1,805,363	-	-	1,805,363	1,854,073
Cleaning and washing	1,874,573	-	-	1,874,573	1,112,506
Hardware and crockery	176,590	-	-	176,590	256,152
Bedding and clothing	177,568	-	-	177,568	29,326
Maintenance	4,014,297	-	-	4,014,297	2,998,861
Farm and grounds	204,976	-	-	204,976	215,280
Transport and travel	1,447,772	-	-	1,447,772	1,958,531
Bank interest & charges	9,606	-	-	9,606	13,520
Insurance	280,121	-	-	280,121	237,069
Rent & water charges	711,210	-	-	711,210	699,409
Security	347,534	-	-	347,534	274,677
Trainee allowances	11,571	-	-	11,571	29,543
Training courses	216,864	-	-	216,864	255,498
Service user activities	228,042	-	-	228,042	283,020
Membership subscriptions	190,739	-	-	190,739	200,690
Depreciation	197,837	-	891,675	1,089,512	1,009,237
Sundries	213,649	-	-	213,649	348,664
Support costs	4,864,523	-	-	4,864,523	4,434,100
Governance costs	168,329	-	-	168,329	150,628
	<u>130,147,979</u>	-	<u>891,675</u>	<u>131,039,654</u>	<u>125,001,551</u>

11 Expenditure on charitable activities - continued

	Rest. €	Unrest. €	Endow. €	Total €
2019				
Pay	104,395,158	-	-	104,395,158
Drugs and medicines	556,553	-	-	556,553
Medical and surgical appliances	1,150,716	-	-	1,150,716
Catering	2,538,340	-	-	2,538,340
Power, heat and light	1,854,073	-	-	1,854,073
Cleaning and washing	1,112,506	-	-	1,112,506
Hardware and crockery	256,152	-	-	256,152
Bedding and clothing	29,326	-	-	29,326
Maintenance	2,998,861	-	-	2,998,861
Farm and grounds	215,280	-	-	215,280
Transport and travel	1,958,531	-	-	1,958,531
Bank interest & charges	13,520	-	-	13,520
Insurance	237,069	-	-	237,069
Rent & water charges	699,409	-	-	699,409
Security	274,677	-	-	274,677
Trainee allowances	29,543	-	-	29,543
Training courses	255,498	-	-	255,498
Service user activities	283,020	-	-	283,020
Membership subscriptions	200,690	-	-	200,690
Depreciation	117,562	-	891,675	1,009,237
Sundries	347,303	-	1,361	348,664
Support costs	4,434,100	-	-	4,434,100
Governance costs	150,628	-	-	150,628
	124,108,515	-	893,036	125,001,551

12 Other expenditure

	Rest. €	Unrest. €	Endow. €	Total €
2020				
NHASS	7,603,613	-	-	7,603,613
2019				
NHASS	7,160,961	-	-	7,160,961

13 Analysis of governance and support costs

	Support Costs €	Governance Costs €
2020		
Pay - finance	1,426,615	-
Pay - human resources	736,979	-
Pay - information technology	184,575	99,233
Computers and office expenses	1,990,954	-
Professional services	525,400	69,096
	<u>4,864,523</u>	<u>168,329</u>
2019		
Pay – finance	1,407,803	-
Pay - human resources	675,617	-
Pay - information technology	181,345	95,264
Computers and office expenses	1,683,285	-
Professional services	486,050	55,364
	<u>4,434,100</u>	<u>150,628</u>

Support costs basis of allocation is time for employee related costs or based on specific expenditure plus pro rata of costs.

Governance costs include audit fees and GDPR costs.

14 Operating Expenses

	2020 €	2019 €
The following operating expenses have been recognised:		
Directors' remuneration		
<i>Emoluments</i>		
- For services as directors	-	-
- For other services	-	-
<i>Pension</i>		
- For services as directors	-	-
- For other services	-	-
Depreciation	<u>1,089,512</u>	<u>1,009,237</u>
	1,089,512	1,009,237

15 Auditors' remuneration

Remuneration (excluding VAT and other expenses) for the statutory audit and other services carried out for the company by the company's auditors is as follows:

	2020 €	2019 €
Audit of entity financial statements	47,911	45,011
Other non-audit services	<u>-</u>	<u>-</u>
	<u>47,911</u>	<u>45,011</u>

16 Employees and directors

(i) Employees

The average number of persons employed by the company during the financial year was 1,897 (2019: 1,849)

	2020	2019
	€	€
Wages and salaries	100,912,925	97,326,512
Social insurance costs	10,246,650	9,428,674
Other retirement benefits	7,603,613	7,160,961
	<u>118,763,188</u>	<u>113,916,147</u>

(ii) Salary range (excluding pension contributions)

	2020	2019
	Number	Number
In the band €60,001 to €70,000	220	196
In the band €70,001 to €80,000	110	57
In the band €80,001 to €90,000	40	25
In the band €90,001 to €100,000	3	8
In the band €100,001 to €110,000	3	-
In the band €110,001 to €120,000	1	1
In the band €120,001 to €130,000	1	1
In the band €180,001 to €190,000	1	1
In the band €290,001 to €300,000	1	1
In the band €300,001 to €310,000	1	1
	<u>381</u>	<u>291</u>

The salary bands include all payments to staff, including premiums and overtime in respect of front line staff working nights and weekends.

(iii) Employees

The average number of persons employed by the company during the financial year was 1,897 (2019: 1,848)

	2020	2019
	Number	Number
Management and administration	108	107
Medical	5	4
Nursing	515	494
Health and social care professionals	347	321
General support services	144	144
Other	779	778
	<u>1,897</u>	<u>1,848</u>

(iv) Directors/trustees

The trustees received no remuneration (2019: Nil) and incurred no expenses (2019: Nil) during the reporting period in carrying out their duties.

There were no loans advanced to directors/trustees during the year and no loans outstanding at 31.12.2020.

(v) Indemnity insurance

The charity paid a premium of €15,989 (2019: €13,065) for the purchase of directors' and officers' liability insurance with an indemnity of €5,000,000.

16 Employees and directors - continued

Key management included the directors and members of the executive staff. As mentioned above, none of the directors are in receipt of any remuneration whatsoever. The compensation paid to the executive staff is as follows:

	2020 €	2019 €
Salaries and other short-term benefits	1,098,421	948,855
Social insurance costs	108,538	96,287
Post-employment benefits	-	-
	<u>1,206,959</u>	<u>1,045,142</u>

The CEO received remuneration of €120,560 (2019: €115,803)

17 Post-employment benefits

All staff employed by the company are members of either Nominated Health Agencies Superannuation Scheme (NHASS) or the Single Public Service Pension Scheme (SPSPS).

Nominated Health Agencies Superannuation Scheme (NHASS)

The NHASS is a 'pay as you go' state plan administered, funded and underwritten by the Department of Health. It is the Directors' understanding that the funds required in the future to pay pension benefits under the NHASS, as they arise will be reimbursed to the company in full by the Department of Health or the HSE.

Therefore, the Directors have concluded that from the entity's perspective the NHASS is, in substance, a defined contribution scheme and that it is not necessary for the financial statements of the company to include any liability at the balance sheet date in respect of pension entitlements accrued to that date by employees of the company, nor the disclosure requirements of FRS 102 in respect of defined benefit schemes. The above issue is similar to that applying in the majority of publicly funded organisations

In the year ending 31 December 2020 the company received €2,772,974 (2019: €2,670,090) in contributions from members of the NHASS. The company also received €4,861,302 (2019: €4,782,099) from the HSE in respect of the NHASS costs, this amount is included with the main revenue grant received from the HSE during the year. €7,603,613 (2019: €7,160,961) was paid out in lump sums and pensions during the year. All these amounts are included in the Statement of Comprehensive Income.

With effect from 31 December 2012 the Nominated Health Agencies Superannuation Scheme (NHASS) was closed to new members.

Single Public Service Pension Scheme (SPSPS)

With effect from 1 January 2013 the Single Public Service Pension Scheme (SPSPS) commenced. Most new employees will be members of the SPSPS which will provide Consumer Price Index linked defined benefit pensions based on career average pay. The company's obligation under the SPSPS is to deduct pension contributions from employees who are members of the SPSPS and remit those pension contributions to the Department of Public Expenditure and Reform. The Department of Public Expenditure and Reform are responsible for payments under the SPSPS.

18 Fixed assets	Leasehold improvements	Land and buildings	Office Equipment & Furniture	Vehicles	Total
	€	€	€	€	€
Cost					
At 31 December 2019	15,300,529	14,137,223	804,562	561,907	30,804,221
Additions	-	1,678,922	8,013	183,458	1,870,393
At 31 December 2020	15,300,529	15,816,145	812,575	745,365	32,674,614
Depreciation					
At 31 December 2019	1,109,329	701,681	473,188	258,698	2,542,896
Charge for the year	382,514	395,411	162,515	149,073	1,089,513
At 31 December 2020	1,491,843	1,097,092	635,703	407,771	3,632,409
Net book value					
At 31 December 2019	14,191,200	13,435,542	331,374	303,209	28,261,325
At 31 December 2020	13,808,686	14,719,053	176,872	337,594	29,042,205

Up until 6 December 2018, the Daughters of Charity of St Vincent de Paul Order held the beneficial ownership and legal title to various properties which were used by Daughters of Charity Disability Support Services CLG in providing services to clients. On 6 December 2018, a declaration of trust was signed between the Order and the Daughters of Charity Disability Support Services CLG which transferred the beneficial ownership of various properties for nil consideration to Daughters of Charity Disability Support Services CLG. The properties were valued on 28 October 2018 by De Courcy Estate Agents and Lloyd Daly & Associates Ltd on the basis of fair market value on an existing use basis at the date of transfer.

19 Debtors and prepayments	2020	2019
	€	€
Debtors	385,139	1,079,073
Other debtors	794,293	559,034
Amounts due from the HSE	7,032,830	6,164,692
Provision for bad debts	-	-
	<u>8,212,262</u>	<u>7,802,799</u>

20 Current liabilities - amounts falling due in less than one year	2020	2019
	€	€
Trade creditors	1,442,208	1,174,782
Other creditors and accruals	10,867,462	9,895,996
Income tax deducted under PAYE & PRSI	3,011,247	2,474,578
	<u>15,320,917</u>	<u>13,545,356</u>

Trade and other creditors are payable at various dates in the three months after the end of the financial year in accordance with the creditors usual and customary credit terms. Creditors for tax and social insurance are payable in the timeframe set down in the relevant legislation.

21 Funds of the Charity

Movement in funds	Rest.	Unrest.	Endow.	Total
	Funds	Funds	Funds	€
	€	€	€	€
Balance at 1 January 2019	(1,976,607)	271,556	28,077,169	26,372,118
Total Comprehensive Income - 2019	565,156	-	(14,758)	550,398
As at 31 December 2019	<u>(1,411,451)</u>	<u>271,556</u>	<u>28,062,411</u>	<u>26,922,516</u>
Balance at 1 January 2020	(1,411,451)	271,556	28,062,411	26,922,516
Total Comprehensive Income - 2020	2,828,111	-	(891,675)	1,936,436
As at 31 December 2020	<u>1,416,660</u>	<u>271,556</u>	<u>27,170,736</u>	<u>28,858,952</u>

Restricted funds

Income is treated as restricted where the donor has specified that it may only be used for a particular purpose or where it has been raised for a particular purpose. All other income is treated as unrestricted. Expenditure is treated as being made out of restricted funds to the extent that it meets the criteria specified by the donor or the terms under which it was raised. All other expenditure is treated as unrestricted. The Daughters of Charity Disability Support Services CLG considers that the revenue allocation received from the Health Service Executive in accordance with the service level agreements with the HSE is restricted income. The designation as restricted is based on an agreed assessment of same with the HSE.

21 Funds of the Charity - continued

Unrestricted funds

All other income is treated as unrestricted and relates to the core objective of providing services in accordance with the overall charity objectives.

Endowment funds

A gift of an endowment, where there is no power to convert the capital into income is known as a permanent endowment fund. In 2018 the Daughters of Charity of Saint Vincent de Paul transferred the beneficial ownership of a number of properties to the company. Furthermore between 2017 and 2019 the Daughters of Charity of Saint Vincent de Paul also funded the extensive renovation works at Saint Vincent's Centre, Navan Road. The value of all these properties is considered to be an endowment fund. The only expenses charged to this endowment fund relate to depreciation or impairment of the particular asset.

22 Reconciliation of net income to cash flow from operating activities	2020	2019
	€	€
Surplus	1,936,435	550,399
Adjustment for:		
Depreciation		
Depreciation on disposed of fixed assets	1,089,513	1,009,237
Increase in debtors	-	(5,875)
	(409,463)	774,478
Increase in creditors		
	<u>1,775,561</u>	<u>626,335</u>
Net cash provided by operating activities	<u>4,392,046</u>	<u>2,954,574</u>

23 Related party transactions

The Daughters of Charity of St Vincent de Paul commenced providing specialised services to person with intellectual disability on 1 January 1926. These services were eventually transferred to the Daughters of Charity Disability Support Services on 1 January 2015. The company continues to use, free of charge, many properties belonging to the Daughters of Charity of St Vincent de Paul.

All the members of the company are also members of the congregation of the Daughters of Charity of St Vincent de Paul.

24 Commitments

Future minimum lease payments under non-cancellable operating leases at the end of the financial year were:

	2020 €	2019 €
Payments due		
Not later than one year	456,884	399,691
Later than one year and not later than five years	880,876	945,869
	<u>1,337,760</u>	<u>1,345,560</u>

25 Ultimate controlling party

The ultimate controlling party of the Daughters of Charity Disability Support Services Limited is the congregation of the Daughters of Charity of St Vincent de Paul in Ireland.

26 Events since the end of the financial year

Coronavirus disease (COVID-19) and the consequences continue to pose challenges to service delivery but we are confident these will not impact the organisation financially.

A more recent development is the ransomware attack and the consequent shutdown of all HSE IT systems. Presently all HSE funding was continued uninterrupted but certain electronic regulatory reporting mechanisms remain unavailable at the time of this report. However, alternative methods have been put in place.

Both of these are considered to be a non-adjusting post balance sheet event, no events have taken place subsequent to the period-end which would require reflection in these financial statements.

27 Approval of financial statements

The financial statements were approved by the board on 28.09.2021