Toolkit and Guidelines for the Employment of Travellers in the Health Service Executive

TRAVELLER HEALTH UNIT, EASTERN REGION
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ORGANISATIONAL STRUCTURE OF THE HSE
The Traveller Health Unit (THU) in the Eastern region contracted Tanya Lalor of Third Systems Approach to undertake this piece of work earlier this year. We were conscious that there were a range of targeted initiatives being undertaken by the HSE to address Traveller health issues, such as the significant Primary Health Care for Travellers Projects, of which there are 9 in our THU region. However we were equally conscious that the HSE, as the largest employer in the State, has the potential to recruit Travellers to a range of mainstream employment positions. The report was to identify a series of good practice guidelines that could be put in place in order to maximise the employment of Travellers in the HSE.

While this report is focused on the HSE the learning documented could have the potential to improve employment and further training outcomes for Travellers across the country in a range of settings. The report offers practical advice drawing on a range of developments with Travellers and good practice developed with other sectors including people with a disability and minority ethnic groups.

Among other issues, the report stresses the importance of:

- Ensuring that any special initiatives provided for Travellers are provided on the basis of providing quality work opportunities and are accompanied by progression opportunities for Travellers
- Additional training and support budgets should be provided in the workplace to enable Travellers with skills gaps to access employment opportunities
- Employment opportunities should be geared towards Travellers of different age groups and in non traditional areas to deconstruct stereotypes of Travellers that confine them into narrow areas of employment
- Engaging with Traveller representative organisations
- High level organisational commitment and support and the availability of staff to support and mentor Travellers

We look forward to working with the HSE to advance the implementation of the report findings and recommendations. We also recognise that the findings have much wider applicability than the HSE and are hopeful that this toolkit can be used by a range of sectors in recruiting and promoting Travellers to a variety of workplace settings.

Fergal Black, Chairperson, THU
November 2007
According to CSO data 2006, there are approximately 12,540 Irish Travellers between the ages of 15 and 64, representing 56% of the Traveller population in the country. Given the young age structure of the Traveller population, this number will continue to increase. To date, Travellers remain largely excluded from mainstream employment. According to Census 2000, 74.9% of Travellers in the labour force are unemployed (comprising 63.8% who have become unemployed having lost or given up previous job and 11% of looking for their first job). The corresponding unemployment figure for the national population is 8.5%.

This piece of research is undertaken in the context of existing and proposed initiatives to promote public sector employment of Travellers in the past year, including actions undertaken within the Health Service Executive (HSE). While Government bodies in Ireland do not have a statutory duty to promote equality of opportunity for minority groups (as they do for example, in Northern Ireland), there has been significant attention within the public sector at policy and senior management level, and through the High Level Officials Working Group.

This document was commissioned by the Traveller Health Unit of the HSE and it seeks to provide a practical guide and toolkit to assist the HSE in the implementation of any positive action measures, which seek to promote employment and progression opportunities for Travellers. However, its application should be wider than the HSE, as it draws on the national policy context, research on barriers to labour market participation experienced by Travellers and initiatives that have already been undertaken in the public sector to date.

1.1 OBJECTIVES OF THIS RESEARCH

The objectives of the piece of work are to:

>> Establish the opportunities within the HSE (in the Eastern Region) for Travellers, across a range of services and positions.

>> To put in place a series of guidelines, which could be instituted in order to maximise the employment of Travellers within the HSE.

>> To make recommendations in relation to the challenges posed in relation to welfare, participation in training and employment.

>> To address the issues of Travellers engaging in the public sector who may not have leaving certificate qualifications (i.e. alternative equivalence routes e.g. FETAC).

1.2 ACTIONS AND OUTCOMES

The research actions undertaken as part of this research process, as outlined in the research proposal, included:

>> Scoping Exercise – to establish the range of opportunities and positions in the HSE that could be accessed by members of the Traveller community. These would include positions across a range of grades, and selection would also be drawn on the basis of opportunities for career progression.
>> **Needs Analysis** – to consider some of the barriers experienced by the Traveller community with regard to accessing employment in general, and how these barriers might present in the context of public sector recruitment.

>> **Best practices** – for example, experiences of individual Travellers, Traveller organisations and public sector organisations/other employers in the recruitment and successful employment of members of the Traveller community. This would also draw from good employment practice (in general) and good employment practice of groups that have traditionally been excluded from mainstream employment⁴.

>> **Policies and Practice** – following on from the previous three stages, the work would comprise a series of practical policies and procedures to assist in the process. These will draw upon existing employment policies and practices and suggest how these could be modified to incorporate best practices and needs. Sections will include:
   a. Overall recruitment and selection policies.
   b. Consultation measures prior to embarking on a recruitment process.
   c. Recruitment and selection, including policies and practices for the selection process, application process, advertising and recruitment panel, etc.
   d. Staff reporting procedures, mentoring and support, supervision, training and development supports.

1.3 METHODS UNDERTAKEN

Methods used in completing this work included the following:

>> **Desk research:** including policy and HSE documentation, research, case studies and evaluations undertaken.

>> **Primary research:** interviews and focus groups with public service staff, Travellers, and Traveller organisations.

1.4 FORMAT OF THE REPORT

Chapter Two provides the national policy and legislative context for positive action in the labour market for Travellers and other minority ethnic groups. Following this, in Chapter Three, an overview of research on the labour market barriers experienced by Traveller is undertaken: this includes barriers relating to employment, training, participation on labour market programmes, and progression barriers. It also includes means of overcoming barriers that have been identified in the research. Chapter Four details positive action initiatives that have been undertaken in the public sector in Ireland. Chapter five undertakes an analysis of positions and opportunities within the HSE, which could be used as a basis for a positive action initiative. On the basis of the findings in each of these phases, Chapter six presents recommendations as well as a practical toolkit for the employment of Travellers in the HSE Eastern Region. The findings of the research, while undertaken in the context of the HSE, is intended to have practical application in the public sector as a whole, and has been developed with this in mind.

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⁴ For example, a significant body of work has been done in relation to the employment of people with disabilities and the employment of people from minority ethnic groups. These best practices will be drawn upon in devising this toolkit.
2.0 Policy Context and Legislation

This research is undertaken in the context of a range of public policy measures undertaken, which have all raised the issue of Travellers’ employment in general as well as employment in the public sector.

2.1 FIRST REPORT OF THE TASK FORCE ON THE TRAVELLING COMMUNITY

The labour market inequalities experienced by Travellers and the actions required to address these were detailed in the report of the Task Force on the Travelling Community (1995):

Traveller participation in the mainstream labour force is very low for many reasons, including low pay and poor work conditions, need for training, cultural factors, lack of acceptance by ‘settled’ counterparts. (p.19)

The report emphasised the importance of strategies to increase the employment of Travellers in the public service, particularly in those areas providing services to Travellers. With regard to progressing specific recommendations in the first report of the Task force, Crowley noted that:

Significant challenges remain, however, to secure their realisation. An institutional infrastructure has been developed, based on the participation of Travellers and Traveller organisations, to drive the implementation of the recommendations. However, progress has been slow (p.181)

Further, the Monitoring Committee’s first progress report on the Task Force report noted that:

The committee points out that in terms of access to the mainstream labour market the participation of Travellers continued to be very low. The difficulties stem from the discrimination Travellers experience in school, in training courses, accessing and/ or in the work environment; nomadism and the desire for self-employment; a logical choice given the levels of discrimination; early school leaving; and a shortage of skills to enable access to the mainstream labour market, in particular employment prospects. (p.73)

The labour market situation has not significantly changed for Travellers, according to the Work Research Cooperative (2003). In its report, ‘Accommodating Diversity in Labour Market Programmes’ the point is made that relative to the increase in average levels of educational attainment amongst new entrants to the labour market, the labour market situation has deteriorated in real terms.

2.2 HIGH LEVEL GROUP ON TRAVELLER ISSUES

The High Level Group on Travellers issues operates as a sub-group of the senior officials group on social inclusion and reports to the Cabinet Committee on Social Inclusion. It consists of policy makers and service providers from relevant public service organisations including government departments, local authority county managers and Health Service Executive senior staff. The High Level Group on Traveller issues reported to Government in March 2006. The group made 11 recommendations in relation to employment issues within the Traveller community, including the following:

The Department of Finance should develop within one year, in consultation with Traveller organisations and the Public Appointments Service, initiatives to assist Travellers to obtain public service employment. The public service trade unions should co-operate in facilitating positive action measures to secure public service employment for Travellers. Such initiatives could encompass work experience opportunities, building on the model provided by the Department of Communications, Marine and Natural Resources.

Local Authorities, the Office of Public Works and other State employers of manual workers should pursue the possibility of employing Travellers and engage with FÁS in relation to appropriate training programmes in manual skills. The work of South Dublin County Council would be of particular relevance in this regard.

The State, as employer, is capable of making significant impact on Traveller employment.

A sub-group on the delivery of employment and training for members of the Traveller community was established with a remit to develop an employment and action plan for Travellers; to generate activity in this area; and to encourage greater co-operation among the relevant statutory agencies in the implementation of initiatives arising from the plan. The report of the High Level Group states that:

The work of the Sub-group of the High Level Group on Employment and Training of Travellers will continue. It should be the focus for the development of interdepartmental co-operation on Traveller employment and training issues.

2.3 THE NATIONAL WORKPLACE STRATEGY

The report of the Forum on the Workplace of the future (2005), 'Working to our advantage - a national workplace strategy', includes the following key actions under strategic priority of 'Access to Opportunities':

- Champion proactive strategies for diversity
- Improve childcare access, affordability and choice
- Encourage greater participation amongst key groups

Further, the strategy notes that 'there is a particular need to develop initiatives that will encourage greater participation by groups that are still under-represented in the work-force,' and that 'the public sector, as a major employer, needs to be a leader in equality and diversity.'

2.4 TOWARDS 2016 NATIONAL PARTNERSHIP AGREEMENT

The lifecycle approach agreed under 'Towards 2016' provides a framework which seeks to address key social inclusion challenges. It adopts the perspective of the individual as the centrepiece of social development and requires the development of policy in an integrated manner.

Under the 'Lifecycle Framework' in part 1 of the plan, section 3, 'people of working age' includes the following priorities and actions.

Innovative Measures: Travellers

An integrated approach to providing services and supports to Travellers will be developed in line with the recommendations of the Report of the High Level Group on Traveller Issues, taking account of the Second Progress Report of the Traveller Monitoring Committee. The Government and social partners agree to give concentrated attention to achieving progress on this approach, including opportunities for Travellers to participate in employment in the public, private and voluntary sectors and to support measures to improve communication between Travellers and the general population.
Issues of targeting and life-long learning are also noted in the same section, under Employability

In the context of enhancing employability [priorities include]...the ability of employees to continuously develop their skills and competencies through lifelong learning and up-skilling; supports for those with caring responsibilities and greater flexibility in work organisation, such as multi-tasking and more adaptable work schedules and practices.

Actions to be prioritised include:

Increasing participation in lifelong learning for those...[who are] low-skilled/low paid by enhancing opportunities to access education and training, the development of new skills, the acquisition of recognised qualifications, and progression to higher level qualifications to equip all individuals with the skills, capacity and potential to participate fully in the knowledge-based society and progress to better quality jobs;

Focusing on helping adults from disadvantaged communities...to acquire basic literacy, numeracy and IT skills and tackling barriers/disincentives to lifelong learning.

Providing targeted support for employees participating in part-time courses at third level

Formulating a National Skills Strategy which will put in place a strategic framework for the implementation of skills and training strategy into the medium term. This strategy will recognise the respective roles of the public, and private sectors with the emphasis of the former on where the market fails, including the low-skilled;

Under Equality/Equal Opportunities, Key priority actions to be pursued include:

Continue to encourage companies and organisations to meet proactively the challenges of diversity and equality, and;

Collecting data to support policies for the promotion of equality of opportunity across the nine grounds covered by equality legislation.

Education, Training and Employment priorities in this section for young adults (18-29 years) include:

Investing in further support measures in the areas of further and higher education to enhance participation by those from disadvantaged backgrounds, in particular: socio-economically disadvantaged school leavers, members of the Traveller community and ethnic minorities, mature students, lone parents and students with a disability. These measures will include; needs assessment, technology support, community based strategies, childcare supports and access routes, and;

Focusing specifically on young people as part of the increased training for the low-skilled in employment, FÁS will continue to work in partnership with the Community Training Centres to provide early school leavers with basic skills and work experience and to assist with progress to further training and development.

Specific measures in part Two of Towards 2016 (Section 7) in relation to Workplace Learning and Up-skilling include:

The allocation for the Workplace Basic Education Fund, aimed at increasing numeracy and literacy skills in the workplace, will be increased.

A targeted fund will be put in place to alleviate the fees in public institutions for part-time courses at third level by those at work who have not previously pursued a third level qualification.
2.5 NATIONAL DEVELOPMENT PLAN PROVISIONS

The policies of lifelong learning to promote access and participation in the labour market are further outlined in the National Development Plan. In general terms, the NDP states that

The Government is committed to the implementation of a Lifelong Learning policy and to the modernisation of the workplace...one of the high level objectives to be reached is to drive the lifelong learning agenda by enhancing access to training, the development of new skills, the acquisition of recognised qualifications and progression to higher level qualifications...The continued implementation of policy in these areas will be supported through providing second chance education and training for those with low skills and addressing access barriers through a strengthening of supports, guidance, counselling and childcare services and increased flexibility of provision.

Specific to Travellers, the plan states that:

The Report and Recommendations for a Traveller Education Strategy has been prepared by the Advisory Committee on Traveller Education and was launched by the Minister for Education and Science in November 2006. The report covers aspects of Traveller education from pre-school right through to further and higher education within a lifelong learning context and includes recommendations across the education spectrum for parents, pre-schools, primary, post-primary, further, higher education and other areas. The implementation of the Committee’s recommendations will be assisted under this Sub-Programme, as appropriate.

In relation to third level access, the NDP states that:

The new Higher Education Authority (HEA) funding model for higher education institutions will include core funding to achieve equity of access and builds on monies available through HEA targeted/strategic initiatives from 1996-2005. In the new model, an additional 33% of funding is allocated for each student from an under-represented group.

In addition to the education measures outlined above, the Human Capital Priority Chapter details measures under the training and skills development programme aimed at improving workforce adaptability, participation and activation measures, with a particular focus on vulnerable persons such as the unemployed, people with disabilities, lone parents, Travellers, women and prisoners. Improving access to the labour market and the services and training available to groups outside the labour market is critical for the promotion of social inclusion.

2.6 LEGISLATION

Positive action initiatives to improve labour market participation are facilitated in legislation: The Employment Equality Act, 1998 and the Equal Status Act, 2000 allow positive action measures to be undertaken. Under the Employment Equality Act, 1998 this is provided in relation to:

- The gender ground
- People over 50
- People with a disability
- Members of the Travelling community
- Training or work experience (provided by or on behalf of the state) for any disadvantaged group (if the Minister certifies that it is unlikely that the group would otherwise receive similar training or work)

Under the Equal Status Act, positive action initiatives can be undertaken in relation to disadvantaged groups or measures that cater for the special needs of persons.
Such measures are intended to reduce or eliminate the effects of discrimination in the past and secure the integration of these groups into workplaces and can take place during the recruitment process.

**SUMMARY AND CONCLUSION**

The public policy context has acknowledged the need for Traveller inclusion in the labour market, and has specifically identified this need in respect of the public sector, highlighting a leadership role that the sector has to play in this regard. Positive action measures are consistent with Employment Equality and Equal Status legislation, and Travellers are specifically mentioned as one of the groups for whom positive action can be undertaken. Key policy and national agreements also have a consistent emphasis on life-long learning in the workplace in particular for low skilled and low paid workers. In the next section, consideration is given to the specific barriers that would need to be overcome for Traveller inclusion in the labour market.
Research commissioned by the Traveller Economic and Social Inclusion Programme in 2002 found that Travellers were interested in active participation in the mainstream labour market but experienced discrimination in accessing employment. In this section, literature and research undertaken on Travellers' participation in the labour market is summarised in terms of barriers to participation.

### 3.1 BARRIERS TO PARTICIPATION ON TRAINING AND EDUCATION PROGRAMMES

The labour market report on Travellers examined issues related to their participation in education, training, and employment, with a particular focus on their participation in training (Pearn Kandola, 2003). On the basis of a literature review of Traveller participation in training programmes, the report concluded that the factors responsible for the low level of participation and outcomes secured by Travellers, particularly in programmes not targeted toward Travellers or so-called 'mainstream programmes', fall into three categories:

1. **A lack of recognition of the Traveller culture in the planning and delivery of programmes**
2. **A lack of additional support during programmes**
3. **A lack of follow up and development following programmes**

The issues identified under the first category include the use of recruitment methods and selection criteria that may exclude Travellers, for example, relying on written materials to provide information on programme content, and the absence of proactive strategies aimed at recruiting Travellers. More generally, providers of training were seen as operating with an ethos and a set of practices (for example in relation to the times that programmes were available or specifying minimum educational qualifications) that did not take into account aspects of Traveller culture or the circumstances of most Travellers. Other issues identified under this heading include a lack of trust in the relationship between providers of training and Travellers.

The issues identified under the second of the above categories are presented as follows:

> "Because of the high poverty levels among Travellers they may require additional supports to attend programmes. These supports may include a gradual build-up of the formality of training, the provision of a comfortable training environment, flexible hours, and childcare support." (cited in Pearn Kandola, 2003:17)

The labour market report on Travellers recommended supports include flexible training provision, childcare support and financial assurances (for example, consideration needs to be given on the impact of participation on income, and impacts on social welfare and medical card entitlements. This issue is given further consideration in a section below).

The central issue arising under the heading of a lack of follow-up and development following participation in training programmes is progression or, more accurately in the context of Traveller participation, the lack of progression. The limited movement from participation in programmes targeted toward Travellers to more mainstream programmes is one aspect of this lack of progression.

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Another aspect of this issue is the limited progression of Travellers participating in training to mainstream employment (following training). Among the factors identified as contributing to this situation is the absence of specific provision to assist Travellers to secure places on mainstream training programmes; the limited engagement with Travellers and advocacy on their behalf by employment services; and the presence of negative attitudes toward the employment of Travellers held by many employers. In this regard a key conclusion of this report is the absence of institutional responsibility for securing Traveller progression within the system of education and training provision.

A number of other specific barriers to Traveller’s participation in training included:

- The lack of information about training programmes among Travellers.
- Fears of losing welfare entitlements as a result of participating in training.
- The perception that participation in training will, by necessity, inhibit travelling.
- Negative perceptions of training resulting from prior negative experiences in the school system.
- Low expectations that participating in training will actually lead to employment.

The presence of these barriers, arising as they do from the perceptions and attitudes of Travellers toward participation in educational and training programmes, points to the need for the providers of training to engage more systematically with Travellers, in order to address dispositions and attitudes acting as barriers to participation.

### 3.2 LOSS OF BENEFITS AND BARRIERS TO PARTICIPATION

Research has referenced the issue of loss of benefits as a barrier to accessing the labour market for those who are unemployed.\(^8\) Research undertaken by Pavee Point has also acknowledged the issue of benefits trap, and recommended that Travellers would maintain their medical cards for the first number of years in employment, or until Travellers socio-economic status improves. (Traveller inclusion in the mainstream labour market – job vacancies, vacant jobs). Loss of secondary benefits such as the medical card has been widely cited elsewhere as a specific barrier for Travellers.\(^9\)

The evaluation of the South Dublin County Council\(^10\) initiative for employing general operatives from the Traveller community, states that one of the reasons for targeting young men for the initiative was that they were ‘unlikely to have family responsibilities with the supporting income from social welfare – this would help overcome barriers of foregoing such income experienced by those taking up short-term opportunities.’ (p.10). This point is reiterated in the WRC report, which notes that a fear of loss of benefits, in addition to the opportunity costs of participating in labour market initiatives can represent a significant barrier (see below). Travellers who do have family responsibilities are likely to be affected to a greater extent than younger Travellers who are just finishing their formal education. They may be less likely to take up employment opportunities or participate in positive action initiatives – this in itself is likely to limit the application of such initiatives, and ensure that they are likely to remain irrelevant to many Travellers.

The evaluation of the ‘Special initiatives to expand employment prospects for Travellers’ (McVeigh, 2006)\(^11\) identified the loss of medical cards as a particular barrier for Travellers to participation in employment. The report recommends that Travellers should be able to maintain the right to a medical card over a period of five years once they have entered the labour market as an employee, or become self-employed.

Loss of the medical card has been discussed in relation to the lower standard of health experienced by Travellers in comparison to the general population. It has been proposed that Travellers should be permitted to maintain secondary benefits particularly the medical card for a period of time when they are working, particularly in view of the health circumstances of the Traveller population. There is sufficient precedent for maintenance of welfare payments and secondary payments (for example, the Back to Work initiative) to enable a mechanism to be instituted which would enable Travellers to maintain their medical cards in this way. This would contribute to Travellers with children and dependents to participate in the work place, rather than those Travellers who have recently completed education.

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10 This initiative is discussed in the following chapter.

11 A FÁS led initiative which set out to develop innovative responses to Travellers’ employment needs, and which focused on employment, enterprise and training. Funding was distributed across eight FÁS regions each of which developed individual responses to Travellers’ employment and self-employment needs.
Loss of secondary benefits with regard to rent arises in particular for those Travellers who live in private rented accommodation, and who are claiming supplementary welfare allowance.\textsuperscript{12} The loss of rental allowance in the private sector makes participation in the labour market costly: this cost is exacerbated for those with families and children.

For Travellers living in public sector accommodation, and whose rents are regulated by local authority ‘differential rents’, participation in the labour market will not adversely effect rental payments to the same degree as those living in the private rented sector. The Rental Accommodation Scheme may provide some alleviation to individuals living in the private rented sector, as payments for participants on the RAS will be based on differential rents.

### 3.3 ISSUES OF IDENTITY FOR TRAVELLERS

Workshops undertaken by Pavee Point\textsuperscript{13} revealed that a perceived need to hide one’s identity arises for many Travellers and has been identified as a major challenge to gaining employment. The workshop findings concluded that there is a need for recognition of Traveller identity and for Travellers to claim ownership of their identity and challenge notions of inferiority. There is an ongoing concern that identity denial creates a lack of positive role models within the workforce, which in turn impacts on further Traveller recruitment.

The need for positive role models is also emphasised in the Kandola research, which cited the importance of positive role models for Travellers. Positive action redresses under-representation of key groups in work places; seeks to challenge any prejudices that may exist in the workplace; and creates the conditions by which underrepresented groups can more effectively participate in the workplace. It can do this by identifying and planning for cultural differences that need to be accommodated in the workplace. In addition, those who have accessed the workplace from particular groups can act as role models and have a multiplier effect within their own communities, thereby reinforcing the effectiveness of positive action.

It is in this context that the issue of identity and participation must be addressed. There is a view amongst Traveller organisations that those who participate on any positive action initiatives should not hide their identity as this can undermine successes of overcoming barriers in the workplace, and will not address any prejudices that may exist. Where prejudice is expressed in the workplace, the employer should address it at the workplace level. The view was expressed in these consultations that hiding one’s identity as a Traveller can undermine the rationale for undertaking any positive action programmes, as well as constituting a lost opportunity for settled and Traveller people to engage with each other in the work place.

### 3.4 PROGRESSION BARRIERS

Research undertaken as part of the ‘Equal at Work’ initiative\textsuperscript{14} in relation to barriers to progression to employment for Community Employment (CE) participants, identifies the following barriers:

- Literacy confidence (to a greater extent than literacy problems).
- Educational qualifications – particularly where the Leaving Certificate is an entry level requirement for jobs.
- Ageism – particularly for those older workers who have not had the opportunity to complete the Leaving Certificate.
- Prejudice in relation to where people live.
- Confidence.

\textsuperscript{12} Rent Allowance
\textsuperscript{13} Following on from their research ‘Job vacancies – vacant jobs’ in 2002
\textsuperscript{14} Murphy, P. (2003): Report on Community Employment Skills and Progression. Report carried out by Equal at Work on behalf of South Dublin Public Sector Site
While the research is not solely focused on Travellers, it does identify barriers for those distanced from the labour market and presents useful learning. It notes that there should be recognition of ‘the equivalency of prior life and work training experience of older workers to the more formal leaving certificate and other similar qualifications that younger workers may have.’

Barriers to progression were subject to an ‘Equal at Work’ action in Tallaght Hospital, to assist progression for Entry Level Grade 3 Clerical Officers to Grade 4 positions, via a training programme on medical secretary (four full days). The training was also offered to CE/JI participants who were not directly employed by the hospital. Additional supports offered to these participants were:

- Training delivered locally and within community based organisations in Tallaght.
- Extra support provided by the Local Employment Service.
- Additional support to bridge the period after training before exams, such as dictaphones, medical dictionaries, in addition to Tallaght Partnership supported workshops.
- Work experience in the hospital (for the 12 people who completed the training).
- After the exams, a ‘Steps’ motivational programme was delivered by the LES as a continuing support.

11 people sat the exam: 9 of these successfully completed all elements of the exam.

According to the ‘Equal at Work’ evaluation, training gaps may exist at lower level clerical grades, and a life-long learning policy could begin to address these gaps. This initiative has relevance to the Traveller community, as it identifies the types of measures required to assist progression from entry-level grades.

The Pearn Kandola research on progression for Travellers (in relation to labour market programmes) notes the importance of having advocates acting on behalf of Travellers, and provision of training in areas not traditional for Travellers in order to deconstruct stereotypes that act to categorise Travellers into narrow areas of employment.

### 3.5 Typology of Barriers to Participation on Labour Market Measures

Research on barriers to participation on labour market programmes by Work Research Cooperative (2003) is presented and described below in terms of a typology of barriers. This typology was identified as having an affect on a range of groups excluded from the workplace (including Travellers). They are useful insofar as they indicate how barriers can exist across a range of dimensions, and can assist in any future interventions or programmes geared towards improving participation.

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15 Their profile included people from specific target groups such as three having a disability, one former drug user, one Traveller woman, eight lone parents and two widows.

Table 3.1 Typology of barriers to participating on labour market programmes and their application to the Traveller community

<table>
<thead>
<tr>
<th>TYPOLOGY</th>
<th>EXAMPLE</th>
<th>APPLICATION TO TRAVELLERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONTEXTUAL BARRIERS</td>
<td>Contextual barriers include prevailing labour market conditions and trends, the policy stance towards issues such as social exclusion, equality and educational disadvantage and the mix of programmes available as well as their target populations.</td>
<td>Decline in unskilled employment&lt;br&gt;Increased emphasis on qualifications&lt;br&gt;Negative public/ social perceptions</td>
</tr>
<tr>
<td>INSTITUTIONAL BARRIERS</td>
<td>Institutional barriers concern factors relating to the image, ethos, administration and practices of education and training providers...only in more recent years have mainstream providers begun to consider how they might attract and cater for 'non standard' participants.</td>
<td>Lack of recognition &amp; response to minority ethnic cultures&lt;br&gt;Inappropriate locations and timing of programmes&lt;br&gt;Lack of orienting &amp; pre-vocational provision&lt;br&gt;Lack of childcare/ care of older people&lt;br&gt;Operation of welfare and duration of unemployment eligibility criteria</td>
</tr>
<tr>
<td>INFORMATIONAL BARRIERS</td>
<td>The third set of barriers concerns information about education and training opportunities and related issues such as information on the relationship between education/ training and outcomes such as securing employment, employment stability over one's labour market career and potential income.</td>
<td>Absence of outreach/ specific efforts to recruit from group&lt;br&gt;Poor tailoring of documentation regarding issues of language and literacy</td>
</tr>
<tr>
<td>SITUATIONAL BARRIERS</td>
<td>These include lack of time, family/ care commitments and the cost of participation and they play an important role in restricting access to education &amp; training. These barriers include what are termed participation costs &amp; opportunity costs. The former are the additional expenditure incurred in participating – transport, books &amp; materials. The latter include foregiving the opportunity to earn income by taking up a place on a programme.</td>
<td>Participation costs&lt;br&gt;Opportunity costs&lt;br&gt;Fears relating to loss of welfare entitlements&lt;br&gt;Loss of ability to generate casual income for male Travellers</td>
</tr>
<tr>
<td>PERSONAL/ DISPOSITIONAL BARRIERS</td>
<td>The final set of barriers arises from personal / dispositional factors. Included under this heading are demographics, particularly gender and age, initial educational levels and a range of experiential, attitudinal and motivational factors.</td>
<td>Negative attitudes towards participation based on prior educational experiences; this arose in the case of Travellers more than any other groups&lt;br&gt;Low expectation of benefits of education and training</td>
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</tbody>
</table>


The barriers were identified in respect of four labour market groups: older people, people with a disability, Travellers and members of minority ethnic groups. The research however, comments on the disproportionate impacts of barriers on certain groups:

It is clear...that while fears relating to the loss of welfare entitlements arise to some extent in the case of members of all groups, this barrier represents a more significant issue for members of the Traveller community than the other three groups. (p. 30)
The study concludes that:

The challenge of addressing the labour market disadvantage and inequality experienced...can be presented as the challenge of ensuring that education and training provision is open and actively responsive to the diversity of the situations, needs and identities...Responding to this challenge in an effective manner will require the development of organisational policies and practices with equality at their core and the development of appropriate packages of programmes and implementation strategies to secure equality of access, participation and outcome.

3.6 OVERCOMING BARRIERS

The research undertaken by Pearn Kandola Occupational Psychologists, 'Travellers Experiences of Labour Market Programmes: Barriers to Access and Participation', makes the following practical recommendations as regards overcoming barriers to participation:

» To create links between key stakeholders (for example, Travellers, Traveller support groups, programme providers) to identify those who will benefit most from inclusion in programmes.

» To develop concrete objectives for the inclusion of Travellers in programmes. This will allow for formal evaluation of programmes in terms of their inclusiveness of Travellers.

» Messages used to attract participants should be tailored to highlight Traveller needs and dispel negative perceptions that Travellers have of programmes.

» Media should be audited to determine their suitability for use with the Traveller community.

» Group-focused needs analysis should be conducted to determine the training needs and additional supports required by Travellers as a group.

» Validity of criteria for selecting participants for programmes should be checked to ensure fairness and ensure that they do not discriminate either directly or indirectly.

» Individual needs analysis and career planning should be conducted to develop a plan for the medium-term development of individual participants.

» Meeting basic needs of Travellers should incorporate the provision of additional supports such as particular hours of attendance and childcare.

» Meeting higher level needs of Travellers should involve a three-phased approach that will build a Traveller’s sense of belonging by training all programme providers in valuing diversity, build the confidence of Travellers by accommodating the needs of Travellers, and increase self-esteem by acknowledging the Traveller culture within the content of programmes.

» Monitoring outcomes should involve the formal evaluation of programmes to determine their suitability for Travellers.

» Bridging the gaps between programmes should involve setting targets to measure the value added by programmes to the lives of Travellers and clarifying whose responsibility it is to facilitate the progression of Travellers.

This report has outlined a model charting stages of recruitment and selection and identifying key questions that need to be addressed at each one. This is reproduced on the following page.
The evaluation of the special initiatives to expand employment prospects for Travellers (McVeigh, 2006) included the following amongst the key aspects of the initiative:

- Interagency approach: including Traveller representation and consultation.
- Staff: the importance of having staff with the ability to build relationships with Travellers based on respect, equality, openness and understanding.
- An outreach approach: regarded as essential in engaging Travellers.
- Mentoring and high support: in particular to support the transition to the world of work.
- Flexibility and innovation.
- Access to Travellers through outreach and engagement of Traveller organisations.

The importance of role models was evidenced by the positive outcomes for Travellers, influenced by those participating, to access training, employment, and self-employment.

3.7 LABOUR MARKET INEQUITY

Labour market inequity for groups including Travellers can arise directly from their membership of the Traveller community per se (issues relating to discrimination, unequal treatment or failure to accommodate diversity), and also as a result of factors which disproportionately affect Travellers, most notably, poor educational attainment. These dimensions of labour market disadvantage can occur separately or together and can manifest themselves in entirely different types of circumstances and with individuals with different skill and education sets. Consequently, tackling both will usually require varying and different interventions.

A policy of equality of labour market access will seek to address both these factors. In this sense, if an approach of equality of access is adopted, it will require an acknowledgement of the broader issues that may result in labour market disadvantage.

One example of this is minimum education requirements for carrying out particular jobs in the workplace, and there has been a move towards removal of unnecessary education requirements, and using competency-based recruitment instead. This is discussed below.
It should also be borne in mind that factors might arise to a varying degree amongst Travellers: for example, older Travellers may have fewer formal educational qualifications. Any positive action measures should seek to address the labour market disadvantage of Travellers by addressing the different levels of need within the Traveller community. In this regard, caution should ensue when the issue of ‘job readiness’ comes to the fore: given the lower educational attainment of Travellers in comparison with the settled population, care should be taken that a formal qualification should not automatically be taken as a proxy measure for suitability for positions. This matter is discussed further, below.

3.8 POLICIES AND PRACTICE TO OVERCOME BARRIERS

Positive action

The essence of positive action is to monitor employment policies and practices to ensure that they are not discriminatory by intent or default. This involves monitoring the workforce, establishing under-representation, setting in motion positive action procedures to rectify the imbalance and then continued monitoring. Examples of positive action measures include objective criteria for hiring, full advertisement of positions, active recruitment of minority candidates, career advancement training and the provision of childcare centres.

It is important to point out that while it is legal for Irish organisations to develop and implement positive action programmes, it is not a legal requirement. The Employment Equality Act, 1998, provides for equality reviews and action plans. Effective positive action practice, according to the Equality Authority, will require:

- Clarity of what is to be achieved through positive action, by developing clear equality objectives with targets and timescales.
- Access to a detailed picture of the current situation in the workplace in relation to the presence, position and experience of employees across the nine grounds so as to provide a rationale for positive action and information on how best to design and deploy it.
- A dialogue with employees from across the nine grounds and organisations articulating the interests of those experiencing inequality to shape and design relevant programmes of positive action.
- A partnership approach involving management, trade unions and employees to build and sustain a consensus behind the positive action being used.
- A creativity and an ambition in devising initiatives within the parameters of the equality legislation that will realise tangible change in the workplace.

Accommodating diversity

According to the Equality Authority, differences encompass:

- Identity: the values and norms held by a particular group.
- Experience: the relationships between the group members and employers/service providers and the wider society.
- Situation: the status of the group in terms of employment, income, education, health and accommodation.

Accommodating diversity in employment therefore involves:

- Taking account of these differences and the needs of a diverse staff in workplace policies and practices and in the organisation of work.
- Developing this understanding of difference as a dimension to policy-making so that workplace services are designed to be relevant and accessible to a diversity of employees.
- Creating a positive environment so that diverse employee groups feel welcomed and a sense of their identity being valued.
- Staff having an understanding of diversity and its practical implications and an understanding of difference as it relates to the various groups covered by equality legislation.

In all this work, the Equality Authority has sought to promote and support planned and systematic approaches to workplace equality. Such an approach is characterised by:

- Commitment set out in equality policies.
- Capacity developed through equality and diversity training.
- Expertise held by an Equality Officer and an Equality Committee.
- Activity to promote equality and combat discrimination based on evidence gathered through reviewing workplace policies, practices, procedures and perceptions.
- Participation by those experiencing inequality in decision-making that shapes workplace organisation, practice and culture.

Equality and diversity management initiatives should simultaneously address organisational culture, systems, policies, practices and people.

In this respect, research by the Traveller Economic and Social Inclusion Programme in 2002 identified ways in which attention to the particular needs of Travellers can be managed in the design and delivery of programmes – firstly by proofing actions and designing programmes which include Traveller perspectives: this can be done by engaging with Traveller representative organisations to ensure that Traveller’s needs are included from the earliest stage of the programme.

Further, the Pearn Kandola study on Traveller participation on labour market programmes concludes that:

‘Travellers cannot adequately and fairly participate within mainstream labour market programmes without reasonable accommodation of their particular needs and culture at each step in the cycle of programme planning and provision’ (p.9).

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SUMMARY AND CONCLUSION

Factors identified in research resulting in a low level of participation in the labour market by Travellers include:

- A lack of recognition of Traveller culture
- A lack outreach or specific efforts to recruit Travellers, and poor tailoring of recruitment documentation to meet the needs of Travellers
- A lack of additional support for Travellers, for example, childcare supports
- A lack of progression options as a result of participating on (particularly) labour market programmes
- Loss, or fear of loss, of welfare and secondary benefits

Labour market research on participation of Travellers also identifies good practice for overcoming barriers and low participation rates. They must be considered at all stages of the recruitment process, from planning to delivery, and they include:

- Adopting an inter-agency approach, including engagement with Traveller representative organisations
- Availability of additional supports to Travellers throughout the recruitment process
- The availability of dedicated staff to build relationships and support Travellers: mentoring and high support is seen as particularly important
- An outreach approach, and engagement with local Traveller organisations in attracting Travellers to programmes
- Flexibility and innovation in delivery of programmes

Finally, the importance of Travellers who have participated on programmes and in the workplace as role models is seen as very important, both in the workplace and also amongst the Traveller community as a whole.
4.0 Positive Action Initiatives Undertaken in the Public Service

There is already a range of initiatives undertaken across the public sector that have provided employment for Travellers. There is an Equal Project, led by the Dublin Employment Pact, which seeks to improve access to the labour market for a range of groups, hitherto experiencing barriers to labour market participation. As part of the research, Government departments and agencies were consulted, and here we identify good practice and case studies.

4.1 REMOVING ENTRY BARRIERS – OPENING UP LOCAL AUTHORITY RECRUITMENT

Minimum education requirements can indirectly discriminate against groups that have a lower level of education attainment, if such requirements are not necessary for carrying out the work. Competency based recruitment is not based on proxy indicators such as educational attainment and therefore better conforms to good recruitment practice.

A job analysis exercise was undertaken in local authorities as part of the Equal At Work Initiative, in order to shift recruitment processes to competency based recruitment. The anticipated outcome was a fairer, more accessible recruitment process, thereby enhancing the quality of recruitment decisions.

The particular action involved examination of mandatory minimum educational requirement of leaving certificate for the positions of clerical officer in local authorities. As there was no such mandatory requirement for general operative positions, the action sought to link this position to competencies. The partners for this action were Dublin City Council (DCC) and South Dublin County Council (SDCC). It involved job analysis and development of competency frameworks for the two positions, with the support of the Local Government Management Services Board, the Office of the Civil Service and Local Appointments Commission and involving significant consultations with job incumbents.

Competency based recruitment in this context means ensuring that those with the competencies to complete the job are not excluded from the process, and this requires an analysis of the recruitment processes to ensure that:

- A detailed job analysis has been undertaken, which identifies the required competencies for undertaking the work
- The second involves reviewing the selection process for the roles to ensure that people with the requisite skills can access the roles, whatever their background or circumstances. This includes understanding how people become aware of available positions, as well as examining all aspects of the application and selection process, with a focus on ensuring that the process does not discriminate unfairly against applicants with the competencies to undertake the roles.

Following the development of the Clerical Officer competency framework the Equal at Work programme made representations to the Department of Environment, Heritage and Local Government that including minimum educational requirements such as the leaving certificate could be discriminatory, following which the Department issued a circular in April 2004 entitled 'Amendment of Clerical Officer Qualifications', which stated:

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22 This is not to suggest that barriers to recruitment are entirely removed once a shift to competency based recruitment takes place. There are cultural and situational issues which must also be addressed.
23 The focus of the Equal at Work project has been to change systems and processes in organisations and in the labour market. This has been a deliberate focus of the project to create long-term strategic change in organisations and in the labour market to promote inclusion, equality and diversity.
24 Or equivalent educational qualification.
25 A copy of which is included in the appendices.
The effect of the order is to amend the Clerical Officer Qualifications to enable relevant experience to be taken into account for the purposes of admitting potential candidates to Clerical Officer competitions where such candidates may not fulfil the Leaving Certificate requirement.

In the Civil Service, there have been no minimum education requirements, and therefore it is not a requirement for those applying for clerical officer positions to have completed the Leaving Certificate examination.

However, across the public sector as a whole, unnecessary mandatory requirements may act as a barrier to progression. This action provides a model for undertaking competency-based job analysis at senior grades within the public sector.

4.2 TRAVELLER ORGANISATIONS AND CIVIL SERVICE INITIATIVES

At the beginning of 2002, Pavee Point, the Irish Traveller Movement (ITM) and Exchange House met with the Public Appointments Service (formerly, the Civil Service Commission) and representatives of the Department of Finance’s Equality Unit to discuss:

- The merits of confined competition as opposed to a targeted marketing campaign around an ‘open’ competition.
- Potential numbers applying for clerical officer competition.
- Geographic location.
- Overview of a typical recruitment campaign for clerical officer competition.
- Potential issues arising.

The Dept of Finance sanctioned:

- A targeted promotion of the Clerical Officer competition, by advertising and awareness raising specifically aimed at the Traveller community.
- Elimination of any cultural bias in the tests, if found necessary.
- No dilution or lowering of current test standards.
- Supportive induction programme and working environment to the developed with destination departments.

Two workshops were undertaken, one in Pavee Point and one in the Public Appointments Service offices. Turnout was lower than expected and one of the barriers to interest was believed to be the fact that the Clerical Officer exams could not be predicted as exams are driven by the need for places. It was cited that there would be a need for support for Travellers prior to sitting exams and practice for exams, which was noted to be hard to take place if the date for exams is not known well in advance.

Arising from these experiences and relationships came a Traveller internship programme in the Department of Communications, Marine and Natural Resources: this offered a three month summer work experience for Travellers. The initiative caught the attention and interest of the Department of Justice, Equality and Law Reform and the High Level Working Group, which has led to further initiatives, building on these developments – one of these, the Civil Service internship programme is discussed below.
4.3 CIVIL SERVICE TRAVELLER INTERNSHIP PROGRAMME

Background and description of actions

The Civil Service internship programme arose as a result of the High Level Working Group recommendations in March 2006. The programme offers placement for Travellers for a period of six months (the Civil Service is bound by legislation which limits recruitment to permanent positions to open competition only). The aim of the programme is to provide temporary employment opportunities for Travellers within the Civil Service. Its objectives are to improve pathways for Travellers to enter the Civil and Public service and to increase skill development for such placements. Training and work experience provided included clerical and general operative work skills, as well as training in preparation for the Civil Service open competitions and interview skills. Following its completion, the internship programme provided that the interns would receive a job reference, notification of any Civil Service competitions, and on-going and active support from FÁS to find permanent employment.

The actions undertaken in the programme included:

- A working group was established comprising government departments, FÁS, Public Appointments Service; representative of the (civil service) Personnel Officers Group; South Dublin County Council.  
- The Assistant Secretary General of the Department of Finance circulated information on the programme and a request to participate to Government departments. Eleven government departments agreed to participate on the programme.  
- Information sessions with six Traveller support organisations to provide information on the programme.  
- Follow-up visits to the same organisations four months later at which point interested candidates were introduced to the programme.  
- Invitation of interested candidates to complete an application form, and those who did were all invited to interview. 50 individuals completed application forms.  
- Informal 20 minute interview: a panel of two interviewers were present and the interview focused primarily on people skills, personal organisation, commitment and educational/training achievement. The programme co-ordinator sat in the room during the interview process as a support to candidates. 42 individuals attended for interview (32 female and 10 male). All candidates were young men or women, mostly aged less than 20 years of age. Mentor support was provided to participants prior to the interview process, as well as debriefing after the interview process by the project co-ordinator.  
- Of the 32 females who attended for interview, 22 were successful and were placed in government departments and agencies (2 of the young women did not take up their positions for personal reasons).  
- Of the 10 males who attended for interview, all were successful but at the start of the programme, only three general operative positions were available (and these were with the OPW).  
- Significant face-to-face work was undertaken by the project co-ordinator with staff in the various participating departments, line managers and personnel managers as well as Employee Assistance Service staff to introduce the programme.  
- Candidates met with the co-ordinator of the programme prior to starting work and visited the department in which they would be placed as well as their line manager.  
- Interns were paid according to the first rate on the Clerical Officer pay scale, and completed a 35 working week.  
- Two interns were generally placed together in a Government department for the purposes of securing ‘peer support’ if required.  
- Training in interview skills, undertaking Civil Service open competitions and applying for jobs was undertaken as part of the internship programme.  
- Ongoing briefing and mentor support to the interns delivered by the project co-ordinator.

26 Which had previously undertaken a similar initiative
27 This latter point was not discussed with those applying for general operative internship positions, as education or training participation did not apply to this group.
Commitment required and key success factors

Consultations with participants and staff on the internship programme were undertaken as part of an evaluation of the initiative within the Civil Service. Key success factors cited included:

- The availability of a single individual to co-ordinate the process, support interns and liaise with line managers. The Equality Unit of the Department of Finance led the process, and the co-ordinator was an Equality Officer located in this unit. This individual was engaged from the outset of the programme.

- The commitment of senior management and their engagement across government departments seeking their participation.

- The 6-month duration of the internship was regarded as essential for interns to fully engage in their roles – any period of shorter duration was considered to be not adequate for participants to engage in their work. Similarly, meaningful work and a 'project' in which to be involved was considered to be very important.

- Personality and characteristics of co-ordination staff was important.

- The issue of loss of benefits such as medical cards did not arise: because of the temporary nature of the work, medical cards would not be lost as a result of participating on the programme.

Views of participants

Three participants on the internship programme were interviewed as part of this process, and all reported the experience as a very positive one: they noted that the key element of good practice was the support offered throughout the process. This included support throughout all stages of the application process, and also support in meeting colleagues and line managers prior to starting work.

The point was also made that while the programme suits young Travellers, those with their own children and greater family responsibilities may find it more of a challenge, principally as a result of working for a full day. While part-time work is available, suggestions that this could be configured along the lines of morning work for the full five days were made.

4.4 Work experience initiatives – South Dublin County Council General Operative Programme

This programme was initiated in 2005. It arose as a result of a trawl of advertised positions by the Human Resources (HR) Manager in South Dublin County Council (SDCC) who established that no applications for positions had come from a Traveller in the previous four years. An investigation into employment opportunities for Travellers was initiated and training was identified for general operatives from the Cookstown FÁS Training centre.

The programme sought to:

- Recruit and train 8–10 general operatives for work in the Parks Dept. The training would be provided for 3 days and work on site for 2 days with SDCC. The parks department was identified as the most relevant department. Reasons for this included:
  - Work is practical and training would encompasses skills such as kerbing, concreting, paving as well as safe pass.
  - There is a high return on training and opportunities for progression in terms of the types of skills and jobs completed. It is easy to quickly progress onto more interesting work and this proved to be the case during this programme.
  - People were based in SDCC Parks Depots close to where they lived, to minimise barriers to participation and the need for independent transport to access work.
The training was delivered such that no more than one hour per day would comprise class based training. In addition, SDCC was conscious that many people would not have had positive experiences of class based education, and that some individuals may have literacy difficulties. The training lasted for six months in total.

A great deal of preparation was undertaken in advance of recruitment. Initially, SDCC made contact with Tallaght Travellers Development Group, Local Employment Services and Social Welfare. Twenty-four named individuals were identified and these were invited to an information day. The information day was held off site, in the Plaza Hotel in Tallaght, attended by the HR manager and the Parks Dept head. At this training day, the details of the programme were outlined, which included:

>> Payment for programme participants would be based on the starting rate for a general operative @ 500 per week. This was therefore not a training programme. Absence on a day would result in payment being lost for that day.

>> If participants successfully completed the programme, they would be offered a permanent job

Interviews for each position were held off site – it was believed important that trust would have to be built up on account of tensions between the local authority and Travellers and that it was appropriate not to hold interviews in the council offices.

Of 19 people who had applied for the position and offered interview, 18 people attended on the day, with an additional three people attending on the day. 12 people were offered positions (originally 10 people). All were men from the Tallaght area, were aged between 17-19 years with the exception of one man who was 23 years. All of the participants had ceased full-time education prior to leaving certificate.

Two induction training days were offered:

>> One training day within the council itself in relation to policies and procedures, including those around bullying and harassment

>> One training day within the training site (FÁS Cookstown training centre), delivered by the trainer about the rules and regulations there.

In addition to this, diversity training was also provided to Parks Department staff in advance of the project.

The senior HR Manager who had led the programme was the contact person and organisation link for the participants. He held group meetings and one to one meetings with the participants at least once every six weeks. It was felt that it was important for one person to build trust and relationships and represent the organisation in this regard. This support continued into permanent employment, following participants’ completion of the programme.

Other than that, participants were organised into teams for the two-day work placement within the Parks Dept, and no two Travellers were placed within the one team. The experience of SDCC was that team building was needed, particularly around the need to be on time to allow groups to attend to work across the county area – when one person was late, this interfered with the team’s ability to deliver.

**Outcomes**

>> 12 people originally participated – two of these later withdrew from the programme.

>> 8 people completed the programme.

>> 7 people were offered full time employment.

>> 4 of these people are still working in SDCC Parks Dept.

>> The remaining three people have left, two of whom have progressed onto employment elsewhere.

>> 66% of the original participants completed the programme (accredited).

>> 50% of the original programme participants are currently in full time employment.
Commitment required and key success factors

- Time from SDCC staff and a single staff member to provide support. According to the evaluation of the initiative, a key success factor was the existence of ‘a champion for the project within the HR department, who helped maintain the momentum of the project’, as well as ‘leadership from the County Manager and from elected members’.

- It was important for participants to be treated as staff and to feel that they were staff.

- Need for flexibility at the start particularly around issues such as time-keeping.

- Also a need to ensure that Travellers would be aware that policies and procedures were there for everyone and would be applied across the board.

- Offer of work at the end of the process – important to have tangible benefits to participants.

- Payments for participation were comparable to those for the job – not a training scheme.

- Local (depot) managers and foreman in the Parks Dept were very supportive.

- Support of families of the men.

- The age range of the men was believed to have made it particularly successful.

Needs identified

- Confidence boosting was a major need.

- Issue of nutrition and health arose (for example, shoe sizes of participants were smaller than general operatives and uniform shoes were too large – this is an indication of the lower health status of Travellers when compared to the general population).

4.5 HEALTH SERVICE EXECUTIVE

Work placement initiative in the HSE Local Health Office Dublin West

Drawing on the experiences of other initiatives (discussed above), the HSE Local Health Office (LHO) in Dublin West has provided employment opportunities on a pilot basis for two Traveller women who had completed their Leaving Certificate examination. The initiative arose out of discussions between the Local Health Manager and the visiting teacher. Two Traveller women were identified for work placement, and both were provided with a 12 week summer placement programme and the support of a member of staff in the LHO who was appointed as their mentor. Informal interviews were undertaken with the women prior to their appointment. This followed the model and approach used by SDCC and the Civil Service: the mentor met regularly with the women (during the work placement, on a daily basis), and carried out induction training with them.

Following the completion of the 12-week work placement, both women have been offered full-time temporary work in the HSE. One of the features of this initiative was that women were offered part-time work (during the work placement phase of work), and this part-time work was undertaken in the morning times only. The ability to work part-time, spread over a five day week rather than a 2.5 day week (in the latter case, the working day is a full one), was identified as an important consideration for many Traveller women (particularly those who have family commitments), by Travellers participating on the Civil Service internship programme.

Arising from this experience, the HSE plans to further development initiatives across the Dublin Mid-Leinster region, whereby Local Health Managers will be requested to provide 2 work placements for Travellers.

Training and employment for household staff

An accommodation unit is due to be opened for elderly people in Cherry Orchard Hospital. This provides employment opportunities for Travellers (positions identified include household staff and care attendants). In order to realise these opportunities, the HSE is planning a 12-week course with FÁS: this will provide accredited training in literacy and hygiene for household staff. Following successful completion of this course, an 8-week work experience will be offered to women.

4.6 ROYAL COLLEGE OF SURGEONS

In 2005, the Royal College of Surgeons (RCSI) developed an access programme for students. Following this, it has undertaken an initiative to further widen access routes to students previously under-represented at third level. As part of this initiative, the college started to work with Pavee Point in 2006 to provide scholarship support to enable suitably qualified Travellers to join its medicine, physiotherapy and pharmacy programmes. Two scholarships per course per year will be made available (in total, six per year) over the coming years.

A steering group was established to develop criteria and guidelines for the initiative. The scholarships cover both tuition fees and associated costs to ensure that the student will be relieved of the financial burden normally incurred by participation in third level education. One of the areas under consideration as a means of enabling access is the establishment of third level foundation courses for inclusion as part of the funding package.

While this initiative is not an employment measure, nor is it part of the public sector (directly), it is relevant to any positive action strategy in the HSE as such training and education initiatives will be important elements in providing for progression opportunities and participation of Travellers in clinical and medical roles within the HSE and HSE supported services.

A Traveller man has commenced the course in medicine in Autumn 2007.

4.7 THE AUSTRALIAN PUBLIC SERVICE EMPLOYMENT AND CAPABILITY STRATEGY

This strategy was developed to encourage pathways to employment in the Australian Public Service (APS) for indigenous Australians. The objectives of the strategy are to identify alternative pathways to recruitment to APS employment, promote the APS as an attractive employer and improve the ‘job readiness’ of potential employees. The following table outlines some of the key result areas of the strategy.

Table 3.1 key elements of the australian public service employment and capability strategy for indigenous Australians

<table>
<thead>
<tr>
<th>ATTRACTION &amp; RECRUITMENT</th>
<th>Make employment information more accessible</th>
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<tbody>
<tr>
<td></td>
<td>Remove employment barriers</td>
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<tr>
<td></td>
<td>Promote culturally appropriate recruitment and selection procedures</td>
</tr>
<tr>
<td>ENTRY TO WORK</td>
<td>Identify, establish and promote agency specific and whole of government support networks</td>
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<tr>
<td></td>
<td>Provide culturally appropriate orientation and induction processes</td>
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<tr>
<td>CAREER PROGRESSION</td>
<td>Promote career planning and support processes</td>
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<tr>
<td></td>
<td>Promote and support life work balance and recognise community and family responsibilities</td>
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<td></td>
<td>Provide role models and mentors to support ongoing development</td>
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<tr>
<td>INCLUSIVE WORKPLACE CULTURE</td>
<td>Promote cultural understanding</td>
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<tr>
<td></td>
<td>Foster culturally appropriate work life balance policies and practices</td>
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<tr>
<td></td>
<td>Support the establishment of agency specific and whole of government support networks</td>
</tr>
<tr>
<td>PARTNERSHIPS ACROSS THE PUBLIC SECTOR</td>
<td>Conduct research into specific employment issues</td>
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<tr>
<td></td>
<td>Share knowledge and promote better practice approaches</td>
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<td></td>
<td>Encourage collaboration between agencies</td>
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</table>
The strategy acknowledges that a time and resource commitment is required of agencies, noting that:

*In the short term, strategies that enhance indigenous employment are likely to require a degree of commitment from agencies, in terms of time, financial and staff resources and goodwill. But this cost is necessary in order to achieve longer term equity and employment goals.*

As well as commitment, it notes that it will require 'championing by agency heads.' This finding mirrors the experience of SDCC and the Civil Service.

## SUMMARY AND CONCLUSION

The above initiatives demonstrate some success to date in positive action to support the recruitment of Travellers to the public sector. Some of the key elements of these initiatives have been:

- Commitment and support of senior staff to the initiatives.
- Availability of staff and resources dedicated to the initiative.
- Removal of unnecessary entry requirements and conforming to best recruitment practice.
- Continuing support in the form of mentoring.
- Making available 'real' work for substantial periods of time (no less than six months is recommended).
- Providing a tangible outcome to participants in programmes.
- Issues such as loss of medical cards and other secondary benefits were not perceived to arise due to the age structure of participants – however, it was acknowledged that such issues might arise for older participants with greater family commitments.
5.0 Opportunities for Employment in the Health Service Executive

The Health Service Executive (HSE) is the largest public service sector in Ireland: the national employment ceiling for the health service currently stands at 108,000 (whole-time equivalents), and it currently employs in the region of 100,000 staff: of these 65,000 are directly employed by the HSE and a further 35,000 in voluntary bodies funded by the HSE. This compares to approximately 30,000 staff in the civil service.

Across the HSE, there are approximately 500 different roles and positions are placed in over 1,000 locations. The number of staff employed in the health services has increased by 7,634 in the last two years. The number of medical staff has increased by 12%, Health and Social Care Professionals by 16% and Nursing staff by 7%. This trend will continue during 2007. According to the National Director of Human Resources, employment will grow by up to 5,000 in the year as major service developments in the area of disabilities, services for the elderly and primary care continue to be implemented.

5.1 STAFFING ROLE CATEGORIES IN THE HSE

Staffing roles in the HSE are broadly grouped into the following categories:

**Medical.** Positions and roles include:
- Consultants - Specialty areas
- Chief Medical Officer
- Registrars
- Public Health Doctors
- Area Medical Officers
- Senior House Officers
- Psychiatrists

**Dental.** Positions and roles include:
- Dental Surgeon
- Dental Craftsman

**Nursing.** Positions and roles include:
- Clinical Nurse Managers
- Clinical Nurse Managers - Specialty areas
- Staff Nurses - Specialty Areas
- Midwives
- Clinical Nurse Specialists
- Staff Nurses - All Disciplines
- Public Health Nurses

**Allied Health and Social Care Professionals.** Positions and roles include:
- Physiotherapists (Basic Grade, Senior, Manager)
- Speech & Language Therapy (Basic Grade, Senior, Manager)
- Social Work (Basic Grade, Senior, Manager)
- Audiologist
- Radiography (Basic Grade, Senior, Manager)
- Occupational Therapy (Basic Grade, Senior, Manager)
- Emergency Medical Technicians
- Psychologist

**Science / Laboratory.** Positions and roles include:
- Analytical Chemist
- Medical Scientist
- Physicists
- Biochemist
- Pathology Technician

Management / Admin / Information and Communication Technology (ICT). Positions and roles include:

- General Administration
- Specialist Areas:
  - Finance
  - Human Resources
  - ICT
  - Corporate Affairs etc

General Support Staff. Positions and roles include:
- Attendants
- General Operatives
- Home-helps

Technical and Maintenance. Positions and roles include:
- Draughtsman/Technician
- Engineer/Engineering Officer
- Mechanic
- Plumber

Catering and Housekeeping. Positions and roles include:
- Catering Officers
- Chefs
- Cooks
- Dining Room Staff
- Housekeeping Staff
- Porters
- Laundry Staff

As at end May 2007, there were 194 positions in the HSE advertised. The majority of these positions were in the Allied Health and Social Care professionals (37% of all positions); followed by nursing (28%); Medical and Dental services (including Registrars and Senior House Officers) (23%); General support staff (7%); management/ICT (4%) and finally, there was one position advertised from the Catering and housekeeping category (<1%). It should be noted however that positions available are likely to vary over time and that the above gives an indication of positions available at a single point in time.

In the consultations that arose as part of this work, the HSE was viewed as having particular opportunities for employing Travellers for the following reasons:

- The HSE is a large employer with a range of job opportunities across a range of locations.
- The HSE has the opportunity to pilot measures and replicate models on a national basis by virtue of its structure.
- The ability to continue to provide employment beyond the ‘work experience’ stage (e.g. temporary contracts) was seen as advantageous and enabled continuity.
- The method of recruitment to permanent contracts is not by examination which can be intimidating for some Travellers.
- The absence of minimum educational requirements for entry-level positions.

Consultations undertaken with Travellers and Traveller representative organisations indicated that the following issues for positions needs to be considered:

- Suitable positions should seek to provide employment opportunities for both men and women.
- Suitable positions should seek to provide employment for those across a range of ages, and with varying education attainment.
- Certain conditions of work could exclude some Travellers (for example, full-time positions) which would need to be addressed.
- Mandatory requirements which are not essential for positions may be in place that affect Travellers – these should be reviewed in line with best practice and competency based recruitment and selection.

30 http://www.careersinhealthcare.ie/
The criteria for positions to be selected should not be on the basis of the nature and purpose of the work (i.e. work that would ‘suit’ Travellers, or positions whose customer base is primarily Travellers). In other words, an inclusive approach to employment and progression across a range of positions and roles should be prioritised.

There should be a consideration of progression prospects for Travellers, and attention should be given to barriers that may exist in progression as well as employment. These would include educational qualifications and a requirement for life-long learning measures to be put into place.

A cursory review of job descriptions undertaken as part of this process indicates that many positions have not specified a minimum level of education: in addition to this, a set of revised qualifications for clerical officer grades to grade VII were issued to the Regional CEOs and CEOs of funded organisations in 2004. These revised requirements demonstrate that leaving certificate is not a mandatory requirement. Applicants for such positions are required to have any one of a number of requirements: these include Leaving Certificate; having passed an examination of an equivalent standard; having relevant skills and experience; and having experience in similar clerical positions in local authorities or health authorities. Similarly, positions currently being advertised such as health care assistant, family support worker have in place mandatory requirements based on practical experience and relevant education (for example, Fetac level 5 accreditation) which is more accessible to those who may have been educationally disadvantaged.

However, the extent to which these requirements are in place across comparable grades and positions is not clear. This points to a need to ensure that all positions in the HSE are devoid of mandatory requirements that are not necessary for the position. It also points to a need to ensure that those positions with mandatory requirements such as accredited training and education are accompanied by life-long learning and career planning programmes for those who are educationally disadvantaged, such as Travellers, to enable them to achieve career progression.

5.2 OPPORTUNITIES FOR EMPLOYMENT

Organisational structure of the HSE and area

The HSE is organised into three main areas of Health and Personal Social Services, Support Services and Reform & Innovation. All of these services provided by the HSE to the public are delivered through four Administrative Areas - HSE West, South, Dublin Mid-Leinster and Dublin North-East.
According to the National HSE Employee Handbook (January 2007), the main staff centres are the National Hospital Office (NHO) and the Primary Community and Continuing Care (PCCC) sections. The employment numbers of these sections is outlined below:

### NHO Staffing Levels

<table>
<thead>
<tr>
<th>Staffing Level</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing</td>
<td>19,321</td>
<td>39%</td>
</tr>
<tr>
<td>General Support Services</td>
<td>7,628</td>
<td>16%</td>
</tr>
<tr>
<td>Management/Admin</td>
<td>7,552</td>
<td>15%</td>
</tr>
<tr>
<td>Health &amp; Social Care Pros</td>
<td>5,604</td>
<td>11%</td>
</tr>
<tr>
<td>Medical/Dental</td>
<td>5,528</td>
<td>11%</td>
</tr>
<tr>
<td>Other Patient and Client Care</td>
<td>3,704</td>
<td>8%</td>
</tr>
<tr>
<td>Total</td>
<td>49,337</td>
<td></td>
</tr>
</tbody>
</table>

### PCCC Staffing Levels

<table>
<thead>
<tr>
<th>Staffing Level</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing</td>
<td>15,774</td>
<td>32%</td>
</tr>
<tr>
<td>Other Patient and Client Care</td>
<td>9,549</td>
<td>20%</td>
</tr>
<tr>
<td>Health &amp; Social Care Pros</td>
<td>8,198</td>
<td>17%</td>
</tr>
<tr>
<td>General Support Services</td>
<td>7,466</td>
<td>15%</td>
</tr>
<tr>
<td>Management/Administration</td>
<td>6,482</td>
<td>13%</td>
</tr>
<tr>
<td>Medical/Dental</td>
<td>1,617</td>
<td>3%</td>
</tr>
<tr>
<td>Total</td>
<td>49,086</td>
<td></td>
</tr>
</tbody>
</table>


As can be seen in the above table, support services staff is included in the above. The table demonstrates that staff of the HSE is almost evenly placed between the PCCC and NHO services. Many of the 35,000 staff funded by the HSE but located in voluntary and community organisations are included in the above, and are most likely to occur within the hospital services, given the historical involvement of the voluntary sector in the delivery of hospital services in Ireland. In addition, PCCC services have a greater number of non-medical and clinical staff, which indicates that these services would have greater opportunities for the recruitment of staff to entry-level positions.

For this reason, the PCCC services, as delivered by Local Health Offices (LHOs) in the country are specifically identified in this report for attention.

### Primary, Community and Continuing Care Services in the Dublin Mid-Leinster Administrative Area

PCCC services are delivered through the 32 Local Health Offices, and in the Dublin Mid-Leinster administrative area (which this report is primarily concerned with), nine LHOs exist. Each LHO delivers similar services and each structure is broadly homogenous. This is beneficial in that experiences and learning generated in one LHO can apply to others. It is also worth noting that initiatives that have already taken place within the HSE regarding positive action for Travellers have taken place at local level. Local level initiatives have the advantage of being able to build relationships with local and national Traveller organisations.

In the Dublin Mid-Leinster region, the nine LHOs account for just fewer than 9,000 staff members - and just less than one-fifth of all PCCC staff in the HSE (18%).

31 These positions also include Community Welfare and Environmental Health Services staff.
5.3 POSITIONS WITHIN THE HSE

The following list includes a range of positions within the HSE: these are drawn from a list of pay scales and pay grades in the service. It should be noted that these have been selected on the basis of criteria for entry-level positions, which this report is primarily geared towards.

Secondly, some of these positions will be placed in agencies funded by the HSE who deliver services on their behalf. However, because such organisations employ approximately 35% of HSE funded positions they should also be approached to engage in positive action measures.

Entry-level grades

The roles are outlined according to the HSE staff categories of health and social care professionals; support services; and clerical, administration and related grades. They indicate a range of positions which could conceivably be entry-level positions (however, some of these may need specialist training) as well as the progression opportunities within these categories of positions. These lists are drawn from existing roles and positions within the HSE – the number of these positions, and the likelihood of vacancies arising from them may vary across HSE regions and activities.

<table>
<thead>
<tr>
<th>HSE DUBL IN MID-LEINSTER AS AT OCT 2006</th>
<th>No. of Staff</th>
<th>% of total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dun Laoghaire</td>
<td>978</td>
<td>10.9%</td>
</tr>
<tr>
<td>Dublin South East</td>
<td>651</td>
<td>7.3%</td>
</tr>
<tr>
<td>Dublin South City</td>
<td>768</td>
<td>8.6%</td>
</tr>
<tr>
<td>Dublin South West</td>
<td>853</td>
<td>9.5%</td>
</tr>
<tr>
<td>Dublin West</td>
<td>582</td>
<td>6.5%</td>
</tr>
<tr>
<td>Kildare/ West Wicklow</td>
<td>1,078</td>
<td>12.1%</td>
</tr>
<tr>
<td>Wicklow</td>
<td>829</td>
<td>9.3%</td>
</tr>
<tr>
<td>Laois/ Offaly</td>
<td>1,644</td>
<td>18.4%</td>
</tr>
<tr>
<td>Longford/ Westmeath</td>
<td>1,558</td>
<td>17.4%</td>
</tr>
<tr>
<td><strong>Total Primary Community &amp; Continuing Care</strong></td>
<td><strong>8,941</strong></td>
<td></td>
</tr>
</tbody>
</table>
## Support Services Roles in Existence (Entry Level Opportunities)

- Assistant foreman
- Attendants
- Groundsman
- Care assistant
- Care officer
- Caretakers
- Charge attendant
- Chargehand
- Cleaners
- Craftsmen’s mate
- Dark room porters / attendants
- Domestics
- Drivers
- Garden labourers
- Gate keepers
- General labourers
- Groundsmen
- Health care assistant
- Home helps
- Laundry workers
- Mini bus drivers
- Mortuary attendants
- Porters
- Storeman
- Stores porters / attendants

## Senior Support Service Roles in Existence (Progression Opportunities)

- Theatre porters / attendants
- Tractor and van drivers
- Porter
- Builders labourers
- Boilermen
- Catering supervisor
- Craftsmen
- Dining room supervisor
- Domestic supervisor
- Emergency medical controller
- Emergency medical technician
- Foreman
- Family support workers
- Head attendant
- Head gardeners
- Head groundsman
- Head porter
- Laundry supervisors
- Linen room supervisor
- Medical laboratory aides
- Nurses aides
- Supervisor
- Radiography assistant
- Speech and language therapy assistant
- Gardener

## Clerical, Admin and Related Grades (Entry Level Opportunities)

- Clerical officer grade (Grade III)
- Cook, trainee

## Senior Clerical, Admin and Related Grades (Progression Opportunities)

- Assistant technical services officer
- Catering manager
- Clerical officer grades IV, V, VI, VII
- Catering officer
- Chief assistant technical services officer
- Chef
- Chef, executive
- Chef, senior
- Community welfare officer
- Dental surgery assistant
- Draughtsman/technician
- Fire prevention officer
- Home help organiser
- Senior assistant technical services officer
- Superintendent community welfare officer
- Head of catering
- Supervisor, welfare home
- Supplies officer grade
- Technical services officer

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32 Progression beyond Grade VII: Grade VIII positions are in the table that follows this one, and includes roles such as financial accountant, industrial relations officer executive, internal auditor, IT personnel, management accountant, social inclusion manager, manager services for older persons, area administrator, manager services for people with disabilities.
Further management and progression opportunities

The following positions are a sample of higher clerical and administration and management grades within the HSE which provide opportunities for progression. They include clerical/management grades above Grade VIII.

<table>
<thead>
<tr>
<th>CLERICAL AND ADMINISTRATION MANAGEMENT GRADES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulance officer</td>
</tr>
<tr>
<td>Area Administrator</td>
</tr>
<tr>
<td>Assistant Director Finance/ HR / ICT</td>
</tr>
<tr>
<td>Assistant Director National Hospitals Office</td>
</tr>
<tr>
<td>Assistant Director Population Health</td>
</tr>
<tr>
<td>Assistant Director Primary, Community &amp; Continuing Care</td>
</tr>
<tr>
<td>Asst. Technical services manager</td>
</tr>
<tr>
<td>Chief ambulance officer</td>
</tr>
<tr>
<td>Chief ambulance officers</td>
</tr>
<tr>
<td>Child care manager</td>
</tr>
<tr>
<td>Deputy general manager (hospitals)</td>
</tr>
<tr>
<td>Director of corporate planning and control processes</td>
</tr>
<tr>
<td>Director of estate management</td>
</tr>
<tr>
<td>Director of finance</td>
</tr>
<tr>
<td>Director of HR</td>
</tr>
<tr>
<td>Director of information technology</td>
</tr>
<tr>
<td>Director of planning &amp; commissioning</td>
</tr>
<tr>
<td>Director of population health</td>
</tr>
</tbody>
</table>

The previous research has indicated that educational disadvantage and confidence issues can present as key barriers to progression. With regard to educational disadvantage, mandatory educational requirements and proxy indicators (such as second level education requirement) can present as a barrier when included in job descriptions for promotional grades. While life-long learning and training opportunities should be a cornerstone for a positive action measure, such training outcomes and adult experiences should form the basis of any mandatory requirements rather than second level educational outcomes, and a proofing and job analysis exercise to ensure that such unnecessary requirements are not in place.

5.4 CLINICAL AND MEDICAL POSITIONS

It should be noted that nursing, clinical and medical positions together account for the largest single grouping of staff within the HSE. Between them, they account for over 43% of HSE staff. These are also positions that are subject to labour shortages. Chapter 4 of this report cited scholarship programmes established by the Royal College of Surgeons in Ireland (RCSI) in its medical, physiotherapist and pharmacy programmes. It is proposed that the HSE (e.g. National Hospitals Office) establishes linkages with training hospitals and third level institutions to explore opportunities for specialist training in these areas for Travellers, in collaboration with Traveller organisations.

In addition, for those Travellers who engage with training and employment initiatives with the HSE, for example, those who participate in social care training or undertake such positions should have consideration of further training (for example, nursing training) as part of their career planning programmes.
MEDICAL AND PROFESSIONAL SPECIALIST POSITIONS

<table>
<thead>
<tr>
<th>Area Medical Officer</th>
<th>Pharmaceutical technician</th>
</tr>
</thead>
<tbody>
<tr>
<td>Audiologist</td>
<td>Pharmacist</td>
</tr>
<tr>
<td>Biochemist</td>
<td>Physicist</td>
</tr>
<tr>
<td>Chiropodist</td>
<td>Physiotherapist</td>
</tr>
<tr>
<td>Counsellor therapist - national counselling service</td>
<td>Play specialist</td>
</tr>
<tr>
<td>Dental hygienist</td>
<td>Play therapist</td>
</tr>
<tr>
<td>Dental Surgeon</td>
<td>Psychiatrist</td>
</tr>
<tr>
<td>Dietician</td>
<td>Senior Registrar</td>
</tr>
<tr>
<td>Environmental health officer</td>
<td>Social worker</td>
</tr>
<tr>
<td>Medical scientist</td>
<td>Speech and language therapist</td>
</tr>
<tr>
<td>Medical social worker</td>
<td>Staff nurse</td>
</tr>
<tr>
<td>Occupational therapist</td>
<td>Public Health Nurse</td>
</tr>
<tr>
<td>Pathology technician</td>
<td></td>
</tr>
</tbody>
</table>

SUMMARY AND CONCLUSION

The HSE is the largest public sector employer in the country with 100,000 staff employed either directly or through funded agencies. The section of the HSE with the greatest opportunities for direct employment by the HSE is most likely to be the area of Health and Personal Social Services, and most specifically, Primary, Community and Continuing Care services: these are delivered through 32 Local Health Offices. There are nine Local Health Offices in the Dublin Mid-Leinster administrative area.

A number of positions are outlined in the categories of Health and Social Care Professionals: Support services roles; clerical administration and related grades. These should be considered for entry-level positions, which could be targeted for Travellers of different age levels and levels of educational attainment.

A number of other, more senior grades in the clerical, administrative and management roles have been identified which could be progression routes for Travellers in the HSE. In addition, clinical, medical and nursing positions should also be considered. Initiatives focusing on recruitment of Travellers through specialist training initiatives (drawing on the scholarship programme of the Royal College of Surgeons in Ireland and also linkages between the HSE and Blanchardstown Institute of Technology) should be pro-actively developed. These could apply to Travellers who express an interest following employment in the HSE or Travellers interested in pursuing careers in the HSE.
6.0 Recommendations Actions and Toolkit

These recommendations and the toolkit that follows have been devised on the basis of:

>> Labour market participation barriers affecting Travellers that have been identified

>> Best practice measures, drawing on guidelines on developing diversity in the workplace policies and practices

>> Key success factors of initiatives developed to date: arising from consultations with public service and HSE staff; Travellers; and Traveller organisations

6.1 RECOMMENDATIONS

1. The Health Service Executive (HSE) should establish a working group to oversee the development of a positive action programme for Travellers. This should include membership of senior management staff such as: the Regional Health Office Director (Dublin Mid-Leinster); the Local Health Office (LHO) Manager with lead responsibility for Social Inclusion from the Dublin Mid-Leinster area (Dublin West LHO); the National Director of Human Resources (HR) and/or Assistant National Director of Performance and Development or the Assistant National Director (HR) Dublin Mid-Leinster. Traveller representative organisations should participate in this structure, as also should other related organisations, such as training organisations (e.g. FÁS, VEC). This structure should report to the Travellers and Minority Ethnic Groups National Working Group.

2. This working group should establish clear objectives of the initiative, with regard to the targets for recruitment, across a range of positions and grades. Long-term career progression objectives should be established. They should consider what groups of Travellers are being targeted for employment and what groups may need particular supports, etc. Objectives should also relate to broader cultural diversity objectives and enable organisational change if required. Clarity around objectives will ensure that outcomes and impacts will be monitored and evaluated better and learning will be better disseminated.

3. A group needs analysis should be undertaken by this working group in the design stage of the initiative: consultations with individual Travellers, including those employed in the HSE as well as Traveller organisations will assist in the development of a group needs analysis.

4. With regard to additional supports and training, additional training budgets should be secured for this initiative, given an assumption that Travellers, as a group who are educationally disadvantaged, will require additional training to assist in the transition to work, and the progression within work.

5. The working group should appoint a staff member within the HSE who will act in the capacity of project co-ordinator. Practice has shown this to be an important aspect of successful initiatives. This role should be responsible for implementing a recruitment process; attending information workshops with potential participants; providing mentor support to participants throughout the stages of recruitment and following employment in the HSE. This position should also liaise with line managers and internal staff within the HSE involved in the initiative.
6. Anti-racism and diversity training should be delivered to all staff within the HSE who would engage with the initiative and with participants on the initiative.

7. The working group should promote engagement by the HSE with training institutions, and draw from the experience of LHO Dublin West’s links with Blanchardstown IT and the Royal College of Surgeons scholarship programme. Such engagement should pro-actively seek to support specialised training for Travellers who are already in employment with the HSE or those not already in employment. Educational opportunities and initiatives should seek to provide employment opportunities within the specialist medical and nursing training, consistent with an approach to maximising career progression for Travellers. The National Hospitals Office (NHO) could also engage in this action.

8. The working group should also recommend that the HSE seek to extend the positive action programme to funded organisations, given that over one third of HSE funded personnel are employed by third party organisations. This process could be undertaken as a second phase in the positive action programme, when the initiative has first been tested within the HSE.

9. It is proposed to recruit Travellers in a single geographic area, for example, one LHO (e.g. Dublin West, which has been involved in initiatives to employ individual Travellers) and then gradually roll it out over the region. It should then be applied to all regions.

10. With regard to employee retention, there is a need for further analysis to the effects of loss of secondary benefits and welfare entitlements, in particular for Travellers who have families and dependents. The HSE should consider researching in detail these issues. This would consider the issues for Travellers with regard to loss of benefits following employment; the extent to which this is a fear of loss or more substantial barrier to participating in the labour market; and what groups are most likely affected by such barriers. It should also consider the feasibility of Travellers retaining the medical card following employment, for a number of years.

11. Detailed actions to be undertaken throughout each of the recruitment, selection and support in the workplace are outlined below. It is recommended that this toolkit is adopted by a working group and used as a basis for action.

6.2 TOOLKIT: INTRODUCTION

This section is organised according to the following stages:

- Design of programme and planning
- Recruitment process
- Support in the workplace
- Progression
- Monitoring and evaluation of programme

6.3 DESIGNING AND PLANNING THE INITIATIVE

Key tasks:

- To identify opportunities for positions arising in the sector.
- To identify positions and departments.
- Identification of needs associated with age groups and gender.
- Identification of organisational issues and preparation.
- Appointment of staff member dedicated to the implementation of the initiative.
### 6.4 DESIGNING AND PLANNING THE PROGRAMME

<table>
<thead>
<tr>
<th>PLANNING AND DESIGN</th>
<th>RECOMMENDED ACTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MANAGEMENT STRUCTURE</strong></td>
<td>Establish a working group/structure to oversee the process. The process should be formally supported by senior management in the HSE and membership should therefore include positions such as: the Regional Health Office Director (Dublin Mid-Leinster); the LHO with lead responsibility for Social Inclusion from the Dublin Mid-Leinster area (Dublin West LHO); the National Director of Human Resources and/or Assistant National Director of Performance and Development or the Asst National Director (HR) Dublin Mid-Leinster. Traveller representative organisations should participate in this structure, as also should other related organisations, such as training organisations (e.g. FÁS, VEC). It should report to the Travellers and Minority Ethnic Groups National Working Group.</td>
</tr>
<tr>
<td><strong>PREPARATORY ACTIONS</strong></td>
<td>Identifying barriers and group needs: care should be taken to identify barriers that are likely to exist across a range of positions and for Travellers (including consideration of different age groups, gender, etc.).</td>
</tr>
</tbody>
</table>

In identifying barriers, preparatory actions should also consider the range of positions that could be targeted. Positions should be geared towards Travellers who have completed formal education and those who have not.

A proofing exercise should be undertaken to establish whether terms and conditions of work and criteria for jobs have an indirect discriminatory effect: for example, minimum age requirements, hours of work, and whether any of these can be removed. A job analysis exercise similar to that undertaken by DCC as part of the Equal at Work programme could be undertaken for those positions where it is considered.

Workplace preparation should be undertaken, to include: discussions with line management staff and internal awareness-raising; discussions with staff and trade union representatives to secure buy-in; anti-racism and diversity training for staff (this latter has been cited as a key element of promoting diversity in organisations and benefits to the organisation will extend beyond this initiative). Any communications should be led and endorsed by the Local Health Manager and other senior staff in the HSE.

These actions should be overseen by the Working Group and undertaken by a dedicated staff member who will be assigned to this project. This staff member will also engage directly in a mentoring and support capacity with Travellers and should ideally also have experience in recruitment and selection. On the basis of previous initiatives, this will probably require full-time engagement with the process.

Actions should relate to specific programmes, such as a work-placement / training programme or internship style programme, as well as tackling barriers in the workplace for those who are employed directly by the HSE.

For work placement programmes, a minimum participation phase of six months is recommended, particularly with an internship style programme, in order to facilitate full engagement and adaptability to the position. It is also recommended that participants be allocated to a single department, where they can maximise learning, develop competencies in a single area and can be attached to a particular ‘project’ or work activity.
### 6.5 RECRUITMENT AND SELECTION STAGES

In this phase, it is important that Travellers are being adequately identified and attracted to employment. Culturally appropriate recruitment and selection procedures should be in place: information should be accessible and there should be recognition that innovative ways may be needed in order to affect positive outcomes. Previous experience demonstrates that word of mouth is an effective way of disseminating information about employment opportunities, and working with Traveller organisations is an important means of attracting candidates.

<table>
<thead>
<tr>
<th>STAGE OF RECRUITMENT</th>
<th>RECOMMENDED ACTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOB ANALYSIS</td>
<td>Are there any requirements which could militate against Traveller involvement and which are not necessary requirements? A job analysis process, utilising the model developed by Dublin City Council as part of the Equal at Work initiative should be considered. Such an action would contribute to good practice anti-racism and diversity policies in general and would have a benefit to the HSE as a whole.</td>
</tr>
<tr>
<td>JOB DESCRIPTION</td>
<td>Salary scale for the placement role should be starting position for that role – similar to the approach adopted by the Civil Service Internship programme. Conditions of work should be assessed to establish whether they are compatible with the needs of Travellers, e.g. childcare obligations, and a reported need for part-time positions for those Travellers with childcare and family obligations.</td>
</tr>
<tr>
<td>ADVERTISING AND ATTRACTION OF CANDIDATES</td>
<td>Engagement with local Traveller organisations at earliest stage of preparation (in addition to national Traveller organisations through their membership of the Working Group). Ensure that formal (written) and informal (verbal) means are used to provide information. There is a need to take account of possible literacy difficulties and to promote literacy confidence. The use of language should be considered, and all use of jargon avoided. Ensure that a single individual be used as liaison and management throughout the information and support process. This should be the project co-ordinator. Provide comprehensive information on effects of participation on benefits and allowances. On-site visits should be undertaken to attract and source candidates. Local meetings in venues close to where Travellers live, and in collaboration with Traveller representative organisations should form a part of this. Research and practice notes the importance of face-to-face contact and outreach actions in attracting candidates.</td>
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Incentives and tangible outcomes are important at the end of the programme – e.g. full time work. Opportunities for generating income are very important, particularly because of the potential loss of secondary benefits. It has been recommended in other research that loss of secondary benefits, and specifically the medical card, should be phased out over a number of years following accessing employment – this recommendation is reiterated here: it is the loss of the medical card that arose throughout consultations for this research. However, the real or perceived loss of benefits has elsewhere been identified as a significant labour market barrier for Travellers and it is elsewhere recommended that this issue receive further examination to establish what measures, in addition to retention of medical cards, could be undertaken in order to promote access to the labour market.

Pre-work training programmes should be sponsored for older Travellers who are interesting in securing employment but who are likely to find the transition more daunting.

In addition to engagement with Traveller representative organisations, local Traveller groups and Travellers already working in the HSE should be consulted throughout initiative, for example, in relation to attracting candidates for positions and work placements.
ADVERTISING AND ATTRACTION OF CANDIDATES (continued)

There should be a consciousness that negative experiences may have arisen in the past for Travellers in their engagement with the HSE and that this may be a specific barrier.

Allow a longer than usual time between providing of information and application deadline in order to allow dissemination by word of mouth.

One-day introduction to the nature of the work to ensure general understanding before the interviews should be considered.

Need for support for those individuals whose families may not be as supportive. An outreach function should be considered for these individuals for providing additional supports, as well as comprehensive information to families.

APPLICATION FORM

An application form, if it exists, should be brief. If possible, one should not be used, particularly if literacy is not a requirement of the position being applied for.

SCREENING

In a targeted initiative, all candidates should be interviewed.

INTERVIEWS

Interviews – beware of over formalised and unnecessary barriers such as tables and large panels. Inform participants of the format of interviews and what is to be expected.

Preparation for candidates and support in advance of interviews.

Room set-up should be informal, avoiding the use of tables, etc. A gender-balanced interview panel of two people is ideal – any more should be avoided. If possible those who are on the interview panel should be introduced to candidates in advance, for example, through information meetings.

Attendance at interview by co-ordinator / mentor is preferable as support to candidates.

Debriefing of candidates afterwards should take place.

Feedback for those who have not been successful should be given.

Consideration of a neutral interview venue (local hotel, etc.) for interviews may be required.

Interviews should be structured and the candidate should be comfortable and informed of the structure and what types of interview questions should be asked. This briefing should be provided by the mentor/ project co-ordinator but the interview panel should also outline what the structure of the interview will be.

Interview questions should be based on the competencies required to participate, rather than unnecessary criteria such as qualifications or minimum level of education.

6.6 SUPPORT IN THE WORKPLACE

WORK SUPPORTS

RECOMMENDED ACTIONS

INDUCTION AND TRAINING

Induction training should be tailored towards people who have little experience of the labour market. An organisational handbook should be circulated – any existing organisational handbooks should be proofed to ensure that they use accessible language.

Practical support and advice should be offered for Travellers in respect of issues such as opening bank accounts where required, for example, to access wage and salary payments.

A training needs analysis should be undertaken for new employees.

Anti-racism and diversity training should be received by line managers of employees/ work placement and internes prior to their starting in their positions, as part of the HSE 'pre-employment induction' if the line managers have not already received such training.
### SUSTAINING PARTICIPATION

It is recommended practice that there are opportunities for peer support for Travellers who are recruited as part of a positive action measure, and that this can best be provided for by the placement of two Travellers in a single department. However, it is also recommended that they are not placed in the same direct environment.

Utilise work-life balance measures and ensure that they are relevant (for example, enabling part-day work as a part-time measure) and culturally appropriate.

Sustaining participation measures should be in place, such as having on-going contact with mentor / project co-ordinator. This contact should identify needs for confidence building, advocacy and belongingness, and barriers identified within the organisation.

Establish opportunities for those Travellers who have been through the recruitment process to act in the capacity as mentors to those new to the process.

Ensure that needs not already considered may arise, and that flexibilities are built in to the process.

Support for Travellers should be present regarding fears around disclosure of identity – the objectives of the programme should be clear, and that any negative responses are dealt with through normal disciplinary procedures. It should be stated that the objective of the programme is to enable greater participation of Travellers in the workplace, which can be undermined through hiding ones identity.

Confidence boosting measures such as graduation for work-placement staff/ interns as well as accreditation for training are important and should be recognised.

### OTHER SUPPORTS

#### ENTRY TO WORK

Based on needs assessment and discussions with Traveller organisations, consideration should be given to supporting those Travellers who may require pre-work supports. As with all other supports, it is important that acknowledgement is given to negative experiences of class-based education that Travellers may have encountered.

Such training programmes should be closely linked to progression to the work place: low expectations of the benefits to be gained from training (specifically in terms of actually securing employment) have been identified in previous research and should inform any training and education initiatives as part of an employment initiative.

Training programmes initiated should allow for verbal reading of questions and multiple choice answers to overcome literacy barriers as far as is possible and for those roles where a particular standard of literacy is not regarded as an essential competence.

#### CAREER PROGRESSION

Opportunities for career development should be identified and one to one career coaching and support should be undertaken on an ongoing basis and following completion of an initial work placement programme.

#### LIFE LONG LEARNING

An accredited return to learning programme specifically arising from career progression opportunities for grades and positions occupied should be developed.

Innovative means of developing progression opportunities, such as broadening work experience in new positions should be promoted.

Job descriptions and person specifications for relevant staff supervisory and managerial grades should be reviewed for the appropriateness of mandatory requirements, and proofed for their exclusion of Travellers.

Additional support measures (such as those used in the Equal At Work Tallaght Hospital Training initiative should be considered) as part of progression training opportunities.

A monitoring of outcomes and progression rates as well as participation in relevant training should be ongoing.

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33 It is common practice for part time or job share positions to comprise a 2.5 full-day working week, rather than a 5 half-day working week, so flexibility and adjustments may be required.

34 WRC (2003)
6.8 EVALUATION AND MONITORING

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<tr>
<th>EVALUATION &amp; MONITORING</th>
<th>RECOMMENDED ACTIONS</th>
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<tr>
<td>OBJECTIVES</td>
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<td></td>
<td>Quantitative and qualitative data should be gathered and monitored in relation to the objectives of the programme and these should consider issues such as:</td>
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<td>- Proportion of candidates successful at interview stage.</td>
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<td>- Categories of work that individuals are involved in (and distribution of participants across categories and grades).</td>
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<td>- Rate of participation in training and life-long learning programmes.</td>
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<td></td>
<td>- Numbers of staff who have participated in anti-racism and diversity training.</td>
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<td></td>
<td>- Ongoing barriers and issues that have arisen as part of the programme.</td>
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<td></td>
<td>- Work life balance issues and needs that have arisen.</td>
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<td>- Progression rate of staff.</td>
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<td>REVIEW</td>
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<td>Review should be undertaken at specific stages in an initiative to explore</td>
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<td></td>
<td>- Job advertising and interview processes.</td>
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<td>- Pay terms and working conditions.</td>
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<td>- Promotion processes.</td>
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<td>- Working terms and conditions.</td>
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<td>- Organisational barriers and issues arising.</td>
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<td></td>
<td>- Application of the process throughout the HSE as a whole and modifications.</td>
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Dublin City Council and South Dublin County Council (2004): General Operative Job Analysis (carried out on behalf of the ‘Equal at Work’ Project)


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Dublin: National Centre for Partnership and Performance


### Customer Care
- Is respectful, courteous and professional when dealing with customers
- Understands their needs and expectations and acts on these appropriately
- Is willing to represent the Local Authority in a positive manner through delivery of a prompt and efficient service
- Is capable of dealing with difficult customers in an effective manner

### Working with People
- Is aware of the importance of working as part of a team in order to meet targets
- Actively participates as a team member and is co-operative and helpful to colleagues
- Has an ability to develop and maintain good working relationships with fellow team members and other colleagues within the organisation

### Thinking and Doing
- Adheres to set practices and procedures in order that work is completed to a high standard
- Demonstrates an ability and a willingness to identify relevant information
- Prioritises workload and generates effective solutions

### Commitment
- Demonstrates commitment to the role and delivery of a high quality service
- Is flexible and adaptable in their approach to work
- Is interested in their job and willing to learn new skills
- Uses initiative to suggest and try a better way of doing things

### Managing Information
- Has a good written communication skills in order to understand correspondence and reply accordingly
- Has an ability to do basic calculations unaided by a calculator
STRUCTURE OF THE HSE

The HSE is organised into three main areas of Health and Personal Social Services, Support Services and Reform & Innovation. All of these services provided by the HSE to the public are delivered through four Administrative Areas: HSE West, South, Dublin Mid-Leinster and Dublin North-East.

HEALTH AND PERSONAL SOCIAL SERVICES are divided into three areas:

i. **Population Health** promotes and protects the health of the entire population; health promotion roles

ii. **Primary, Community and Continuing Care (PCCC)** delivers care in the community, and this is delivered through 32 Local Health Offices, of which Dublin West is one. Four Area Assistant National Directors are responsible for the efficient and effective delivery of high quality primary, community and continuing care services to the population of each HSE Area. They also provide leadership and line management to the Local Health Managers. In order to ensure consistency across the 32 Local Health Offices and to utilise on a national basis the knowledge and perspective of the delivery system, each Assistant National Director, Service Management, is assigned national responsibility for designated service areas. An outline of activities within the local health offices is outlined below.

iii. **National Hospitals Office (NHO)** provides acute hospital and ambulance services. With the establishment of the National Hospitals Office (NHO), acute hospital services are now managed on a single national basis. The NHO manages acute hospital services in 51 hospitals nationally. It also provides Pre-hospital Emergency Care Services (ambulance and emergency response services).

SUPPORT AND SHARED SERVICES enable the organisation to function efficiently and cost effectively.

i. **Human Resources**: The key role of HR is to ensure that the HSE has the right number of people, with the right skills, in the right place, and at the right time. This involves managing staff turnover. It also requires focusing on staff training and paying particular attention to recruiting specialist disciplines. Operates from Dublin, Offaly and Kildare.

ii. **Finance**: The overall aim of the Finance Directorate is to provide strategic and operational financial support and advice to the various streams of the Health Service Executive in achieving the organisational goals of providing high quality, integrated health and personal social services. The objectives of the finance team are to manage the finances of the HSE, to deliver enhanced accountability and value for money, to develop a standardised Financial Management framework for the HSE. Operates from Co Kildare; Limerick; Dublin; Offaly; Galway; Cork.

iii. **Information and Communications Technology**: ICT provides essential support for all administrative and support services and, increasingly, patient care delivery. It embraces all voice, video and data communications technologies and provides one central management point for all purchases of hardware, software, telecommunications, ICT development and advisory services. This department operates from Dr Steevens Hospital.

iv. **Estates**: The HSE is responsible for managing and maintaining a very substantial estates portfolio. There are opportunities to maximize the value of this portfolio, release resources and redirect them to service improvement. The HSE has established a new office with specific responsibility for managing the estates portfolio, including the organisation’s 10 billion capital infrastructure and the annual capital plan. This department operates from Dublin, Galway, Cork, Meath and Co Kilkenny.

v. **Procurement**: Procurement ensures that the HSE maximises its purchasing power. With a procurement bill running into billions of euro, it is imperative that the HSE secures major savings through integrated procurement. With this in mind, a new office with specific responsibility for Procurement has been established, and they operate from Offaly, Limerick, Cork, Sligo, Dr Steeven’s Hospital (Dublin 8).

The development of support services shared across the HSE has the objective of delivering economies of scale, enabling expertise and overheads to be shared, encouraging innovation and allowing customers to concentrate on their core business which is health care. The NSS will operate from five sites located in Finglas, Swords, Kilkenny, Manorhamilton and the multifunctional shared services centre at Dr Steevens Hospital Dublin.

THE OFFICE OF THE CEO has a number of key corporate functions to support the HSE as a whole:

i. **Board Affairs**

ii. **Parliamentary Affairs**

iii. **Quality and Risk Management**

iv. **Consumer Affairs**: The Consumer Affairs division is responsible for developing best practice models of customer care, including a statutory complaints handling system, implementing the FOI and Data Protection Acts, and the statutory appeals system. Operates from Naas, Co. Kildare; Kilkenny; Limerick; Co Meath; Offaly.
v. National Communications Unit: The NCU is responsible for developing and managing the HSE’s internal and public communications initiatives and provides consultancy advice and support to staff across the organisation. The NCU comprises the National Press Office, Public and Internal and Corporate Communications, and an Area Communications Manager in each HSE Area.

Area Communications Managers The four Area Communications Managers work closely with the Network Managers, Primary Care and Continuing Care Assistant National Directors, Local Health Office Managers and Regional Health Office Directors. They provide a range of communications services: press, internal and public communications, and support the development of national communications; policies and initiatives. The Unit operates from Co Meath, Offaly, Cork and Galway.

vi. Regional Health Forums: Each of the HSE’s four administrative areas has a Regional Health Forum, which includes representatives from the city and county councils within that area. The Forums make representations to the HSE on the range and operation of health and personal social services in their area, and the HSE in turn provides administrative services to the Forum.

The four Regional Health Forums are each located in the four administrative areas of the HSE, and Regional Health Offices are managed by Directors, whose role is to support the Regional Health Forums and to engage and consult with the public, patients, and service users as necessary and in consultation with the HSE directorates. They also facilitate work at a regional level, particularly in the areas of integration and effectiveness of hospital and PCCC services.

vii. Corporate Pharmaceutical Unit: The Pharmaceutical Unit promotes best practice across the organisation in relation to the use of drugs and medical devices. It is responsible for evaluating the many schemes that exist in relation to the provision of drugs and devices for patients. Operates from Dublin 8.

LOCAL HEALTH OFFICES
There are 32 local health offices in the HSE area; nine of these are located in the Dublin Mid-Leinster administrative region of the HSE. According to the HSE website, ‘the Local Health Office is often the first port of call for the public to access community services…The Local Health Office structure ensures an integrated approach to the management of all PCCC related services. Each Local Health Manager works closely with the hospital managers in their geographic area to ensure that patient/client needs are met. This national focus ensures an integrated system and plays a central role in meeting the objective of delivering consistently high-quality services within each community.’

The wide range of services that are provided through Local Health Offices and from Health Centres include general practitioner services, public health nursing, child health services, community welfare, chiropody, ophthalamic, speech therapy, social work, addiction counselling and treatment, physiotherapy, occupational therapy, psychiatric services and home help. Local Health Offices also have a social inclusion function, and each office employs a social inclusion manager. The aim of Social Inclusion is to improve access to mainstream services, target services to marginalised groups, address inequalities in access to health services and enhance the participation and involvement of socially excluded groups and local communities in the planning, design, delivery, monitoring and evaluation of health services. Substantial research evidence demonstrate the links between socioeconomic status and health status and has resulted in a better understanding of the determinants in health that impact on access to health services.

REFORM AND INNOVATION drives the HSE’s strategic and corporate planning processes:

i. Corporate Planning and Control Processes: This Directorate is responsible for driving corporate planning by adopting best practice processes and methodologies and providing a project management capability. The Directorate is responsible for leading the preparation of the HSE’s Corporate and Service Plans and ensuring that the HSE complies with its legislative requirements in relation to planning and monitoring.
Positive action redresses under-representation of key groups in workplaces; seeks to challenge any prejudices that may exist in the workplace; and creates the conditions by which underrepresented groups can more effectively participate in the workplace. It can do this by identifying and planning for cultural differences that need to be accommodated in the workplace. In addition, those who have accessed the workplace from particular groups can act as role models and have a multiplier effect within their own communities, thereby reinforcing the effectiveness of positive action.”