



Reach in. Reach out.

IAPC Strategic Plan 2023 – 2025

Irish Association for Palliative Care



Contents

Welcome and Introduction 1

1. About IAPC 3

- 1.1 IAPC The Voice of Palliative Care
 - 1.2 IAPC Constitution
 - 1.3 IAPC Vision
 - 1.4 IAPC Mission Statement
 - 1.5 IAPC Values informing the Strategic Goals
-

2. IAPC Governance 7

3. IAPC Membership 8

4. Key achievements 2021–2022 9

5. What is palliative care? 12



6. Moving Forward	14
6.1 The future of Palliative Care in Ireland <i>Dr. Feargal Twomey, Clinical Lead HSE</i>	
6.2 The future of Palliative Care Europe <i>Prof Sonja McIlfatrick, EAPC Board Member</i>	
6.2.1 About EAPC	
6.2.2 EAPC Mission and Strategic Objectives	
6.2.3 Future of Palliative Care	
6.2.4 EAPC: Working towards our goals	
7. Strategic Review Process	18
8. Four Key Strategic Goals:	19
1. Harness and further develop new opportunities for membership to network	
1.1 Reach in.	
2. Promote the IAPC, Communicate with members and grow membership	
2.1 Connect	
3. Advocate, influence and grow	
3.1 Reach out.	
4. Ensure the efficient delivery of the strategic objectives	
4.1 Governance	
4.A Implement and evaluate the Strategic Plan	
4.A.1 Governance Implementation	
9. Jacinta Cuthbert - CEO	24



Welcome and Introduction

The future holds exciting opportunities for the IAPC and its membership. The progress that has taken place under the direction of the previous strategic plan will serve as a strong foundation and launchpad for future developments in the IAPC. The focus of the association remains on the value of its multidisciplinary membership, of the diverse knowledge, expertise and experience of the members. The IAPC provides an exciting and unique opportunity to harness shared learning, collaboration and collegial support. This is borne out in the establishment of the new fora (nursing, pharmacy and ethics). Going forward, the fora will be shaped and adapted to the needs of the members, with the potential to become a resource that forms an ongoing intrinsic component of the IAPC.

The Education and Research Forum continue to run their successful annual seminar. This remains a valued opportunity for our membership to showcase the research, audits and quality improvement work that has taken place in the palliative care space nationally. The forum has also made strides to expand on education opportunities for our membership. Webinars, workshops and other educational events will form an important part of our ongoing work in this area.

The connection between paediatric and adult palliative services is of vital importance to ensure equitable and seamless provision of services across ages and regions. The IAPC has provided an opportunity to strengthen these relationships, with a desire to build on this into the future.

The IAPC has served to strengthen ties between other organisations in the palliative care space nationally. This will continue, and the spirit of collaboration will ensure that resources and knowledge is shared and widely dispersed for all.

Our new strategic plan will serve as a guidance framework to ensure the positive activities and developments that have taken place to date, continue to flourish, with the involvement and support of our membership.



Dr. Hannah Linane
Chair of IAPC Board of Directors



Networking

Research

Governance

Challenge

Sharing & Learning

Representation

Collaboration



1. About IAPC

1.1 IAPC – The Voice of Palliative Care

Established in 1993 as an all island body with the purpose of promoting palliative care nationally and internationally, the Irish Association for Palliative Care (IAPC) is a multi-disciplinary membership non-government organisation. The intention of the founders was that IAPC would be identified by its inclusiveness and would encompass the whole island of Ireland.

The IAPC membership reflects the entire spectrum of all those who work in or have a professional interest in the provision of palliative care, i.e. doctors, nurses, social workers, chaplains and pastoral carers, pharmacists, psychologists, physiotherapists, occupational therapists, dietitians, as well as executive staff and academics and educationalists. Membership also includes clinicians and allied health professionals working in related areas such as geriatrics, oncology, psycho-oncology, paediatrics, and pain management. Membership is also open to clinicians and health and social care professionals from areas aligned to palliative care such as:

- Gerontology
- Oncology
- Psycho-oncology
- Paediatrics
- Pain management
- Intellectual disabilities
- Mental health
- Neonatology
- Those working with people with chronic non-malignant life limiting illness such as, but not exclusively, cardiology, respiratory care and neurology.

The IAPC is organised around a number of working groups designed to create forums for shared best practice and learning opportunities, and for members to further their professional development, education and research.



The Association pursues its objectives through providing structured opportunities for:

- **Networking,**
- **Sharing and learning,**
- **Educational offerings,**
- **Promoting evidence-based research,**
- **Publications,**
- **Representation on national bodies and influencing the development of national policy.**

Internationally it is strongly aligned with the European Association for Palliative Care (EAPC). At an international level, the IAPC is a member of the EAPC and supports its work through attendance at conferences, seminars and by contributing to international policy development of palliative care.

The IAPC Working Groups inform the strategic direction and policy decisions of the Board, thereby creating a strong foundation for the IAPC's position as the primary collective voice for palliative care in Ireland. Currently the IAPC have four (4) active forums that are supporting the work of the organisation and its membership. As part of the ongoing review and development of the various fora, there will be continuous discussion on each fora and its relevance to the future outcomes of the Strategic Plan.

- **IAPC Education and Research Forum – *active***
- **IAPC Nursing Forum – *active***
- **IAPC Ethics Forum – *active***
- **IAPC Pharmacy Forum – *active***

The Board of the IAPC have agreed to monitor, evaluate and review the workings of each Forum and its contribution to the overall IAPC Strategic Plan. Following the review, the Board will make decisions on which Forum to re-active going forward.

- **IAPC Psychology Group – *to be discussed***
- **IAPC Older Person Care Special Interest Group – *to be discussed***
- **IAPC Primary Palliative Care Special Interest Group – *to be discussed***
- **IAPC Spirituality in Palliative Care Special Interest Group – *to be discussed***
- **IAPC Children's Palliative Care Special Interest Group – *to be discussed***

The IAPC were successful in obtaining POBAL funding from July 2022 to June 2025 to cover the salaries of all three part time staff. We also receive project funding through the HSE which contributes to the overall funding of the IAPC offices. . We are a registered charity and a company limited by guarantee. A plan for funding the Organisation and allowing it to continue to meet its objectives, will form part of the ongoing sustainability of the Organisation.



1.2 IAPC Constitution

A voluntary committee drew up the Constitution for the Association which was ratified in 1993. The IAPC has amended its Constitution over the years to reflect the changes to Company Law and the changing needs of the organisation.

1.3 IAPC Vision

The Vision of the IAPC is using our collective expert voice to advance palliative care in Ireland.

1.4 IAPC Mission Statement

The mission of the IAPC

As a multi-disciplinary membership organisation, the Irish Association for Palliative Care brings practitioners together in order to influence palliative care policy and practice.

We do this:

- By engagement with our members;
- By supporting education and research in palliative care;
- By working through special interest groups within the membership i.e. the Forums
- Through collaboration and involvement with the palliative care community, service users and others.



1.5 IAPC Values informing the Strategic Goals

- | | |
|---------------------------|--|
| Challenge | The Irish Association for Palliative Care will challenge whenever it is appropriate, both internally and externally, to ensure good palliative care policy and practice. |
| Collaboration | The Irish Association for Palliative Care will collaborate with others to ensure good palliative care policy and practice. |
| Independence | The Irish Association for Palliative Care will seek to remain independent of any vested interests in order to help it ensure good palliative care policy and practice. |
| Governance | The Irish Association for Palliative Care will ensure that it is accountable and transparent in its working and decision-making. |
| Multi-disciplinary | The Irish Association for Palliative Care will encourage the participation and development of all relevant healthcare disciplines in order to ensure good palliative care policy and practice. |
| Valuing all voices | The Irish Association for Palliative Care work to hear and value the perspectives of all participants in order to ensure good palliative care policy and practice. |



2. IAPC Governance

The Governing Body of the Organisation is the Board of Directors, in accordance with the Companies Act 1963, and comprises:

- Ten elected membership members, “members” as outlined in the Constitution; of which there will be Four Officers. The four Officers constitute the Officer Board and includes the Chairperson, the Vice-Chairperson, the Honorary Secretary, and the Honorary Treasurer.
- And up to five additional co-opted Directors.
- The Board shall not exceed 15 Directors.

The Board of Directors, take on the responsibilities of Governance in conjunction with the CEO, to continually interrogate and update policies and procedures in line with current legislation. To develop and maintain a strong and sustainable organisation the Board of Directors has to possess the capacity and willingness to use their expertise to assist the organisation in meeting its policy and operational functions.

The key role of the Board of IAPC is to provide efficient and effective leadership for the Organisation within a framework of practical controls. The Board performs three roles. It firstly provides strategic direction to IAPC based on listening to, understanding and representing the needs of the members and relevant stakeholders. Secondly it has specific oversight responsibilities in respect of executive functions and thirdly it self-regulates and evaluates to ensure the Board functions efficiently and effectively.

In 1995 the Committee on Standards in Public Life (The Nolan Committee) drew up seven principles of conduct. The principles which are now widely used in relation to the directors of charitable organisations are: Selflessness, Integrity, Objectivity, Accountability, Openness, Honesty, and Leadership (Nolan, 1995). These principles are the bedrock of excellent governance and should be practised to ensure the governance of IAPC is continually striving to achieve the pinnacle of success.



3. IAPC Membership

With over 250 members from the broad spectrum of palliative care provision in Ireland the IAPC regards its membership as a key resource which provides the organisation with a frontline, authentic reflection of the multi-disciplinary teams working in the sector. The membership profile comprises a rich mix of professionals who work in or individuals who are deeply involved or have a special interest in the development of palliative care in Ireland. Our members are genuinely involved in and committed to the concept of equal palliative care for all in need. IAPC affords its members a unique space to meet and reflect on how provision for people with palliative care needs can be improved.





4. Key achievements 2021 – 2022

The key achievements under the 4 goals of the strategic plan 2021-2022 are listed below; however a more detailed outline of the work strands are outlined and available in the Annual Reports 2021 and 2022. The organisation has continued to ensure that the organisation is operating at a high level of human, Information Technology and financial efficiency.

Goals: 2021 – 2022

1. Grow and support the membership of the organisation by providing information, networking and education opportunities for members:

- Delivered two (2) Annual general Meetings
- Successfully delivered two (2) Lecture Series
 - 2021 – Rev Joan Halifax
 - 2022 – Dr. Kathryn Mannix
- Successfully delivered two (2) Education and Research Seminars
 - 2021 – Prof Andrew Davies
 - 2022 – Prof Catherine Walshe
- Continuing our collaborative work we dually hosted (3) membership workshops with, HRB, AIIHPC, IHF, EAPC
 - 2021 cancelled due to COVID
 - 2022 hosted the meetings cancelled in 2021

2. Ensure the collective voice of the IAPC is represented on appropriate external bodies

- Stakeholder engagement:
 - Continued our meetings with AIIHPC, to identify collaborative areas of work
- HSE engagement
 - Palliative Care Lead
 - Palliative Care Clinical Lead
 - Primary Care
- A Member of the Irish Palliative Medicine Consultants Association sits on the Board of IAPC.



3. Influence legislative and policy changes to further the aims of IAPC

- Established and supported 3 new Fora:
 - a. Ethics
 - b. Pharmacy
 - c. Nursing
- Continued to support the Education and Research Forum.

4. Ensure good governance and build organisation capacity

4.A Implement and evaluate the Strategic Plan

- Stable and fully operational Board
 - Cross representation of the membership
 - Held 14 meetings in total over the period of the Strategic Plan
- Stabilised and grew membership
- Increased the funding for the organisation over the period of the Strategic Plan
- All regulatory and reporting requirements up to date including:
 - Charities Regulator
 - Revenue Requirements
 - POBAL reporting
 - Health Service Executive reporting
 - Hospital Saturday Fund Reporting
 - Companies Registration Office
 - Register of Beneficial Owners
- Promotion of General Manager to CEO
- Recruitment of a Communications and Digital Marketing Officer
- Held four (4) externally facilitated review meetings to monitor and implement the Strategic Plan
- Achieved additional funding through POBAL for three years
- Achieved additional funding through Hospital Saturday Fund to support the purchase of Ex-Ordo licence



5. What is palliative care?

Palliative care is, first and foremost, about life. It is an approach to care that is life-affirming and life-enabling.

“You matter because you’re you, and you matter to the end of your life. We will do all we can not only to help you to die peacefully, but also to live until you die.”

Dame Cicely Saunders

Dame Cicely Saunders, one of the founders of the modern hospice movement, captures the person-centred and life-enabling approach that underpins palliative care. The ultimate aim of palliative care is to enable every person with an illness from which he/she will not be cured, to live as well as possible right up until he/she dies. In its modern sense, this is a relatively new concept, originating in the late 1960s / early 1970s.

The World Health Organisation (WHO) 2002 defines Palliative Care as follows:

Palliative care is an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.



6. Moving Forward

6.1. The future of Palliative Care in Ireland

Dr. Feargal Twomey, Clinical Lead, HSE Palliative Care Clinical Care Programme

The coming years promise to be exciting for those of us working to deliver palliative care in Ireland. 2023 will see the publication of a new National Palliative Care Policy to replace the 2001 National Advisory Committee report that has served our sector well. That the new policy will be launched with a detailed implementation plan over the next seven years underlines the importance that the Minister for Health and the Department place on the provision of high quality and evidence-based palliative care to every person in Ireland who needs it.

Palliative care services are an exemplar of care provision by healthcare teams delivering care across locations –including, in most regions, each of the acute hospital, community and specialist palliative care inpatient unit settings. This should translate into palliative care services being well positioned to embrace the principles of Sláintecare – the right care, at the right time, in the right place for the individual – and delivered by the right people.

The challenges of preparing for the transition to the Regional Health Authorities structure in 2024 mirror the real opportunities for palliative care to participate in greater integration with Enhanced Community Care including the Integrated Care Programmes for Older Persons.

Palliative care has long had a culture of making the individual(s) who need(s) our services central to everything we do. We must do more to improve access to palliative care services to all who require them, including those in our society who often either don't or can't access palliative care and to all, both in and out of normal working hours.

In the modern healthcare milieu, it is incumbent upon palliative care services to anchor the delivery of care in robust clinical and organisational governance, guided by evidence-based national guidelines that are consistently applied by all. We must also build upon the public's confidence in their palliative care services a commitment to continuous improvement in palliative care policy and practice. This will be evident by demonstrating through quality improvement and research that the work we do leads to the best possible outcomes for individuals and their families.



6.2. The future of Palliative Care Europe

Prof. Sonja McIlfatrick, *EAPC Board Member*

6.2.1 About EAPC

The European Association for Palliative Care (EAPC) is the leading palliative care organisation in Europe. The EAPC aims to advance, influence, promote and develop palliative care throughout Europe and beyond. EAPC is a membership organisation that provides a forum for all of those either working, or with an interest in palliative care.

6.2.2 EAPC Mission and Strategic Objectives

The EAPC mission is to promote the development of high-quality palliative care across the life span by fostering and sharing palliative care education, research, policy, and evidence-based practice. This work is motivated by our vision which is “a world without preventable suffering where those with life-threatening illnesses and their families have timely access to high quality palliative care as an integral part of the healthcare system”.

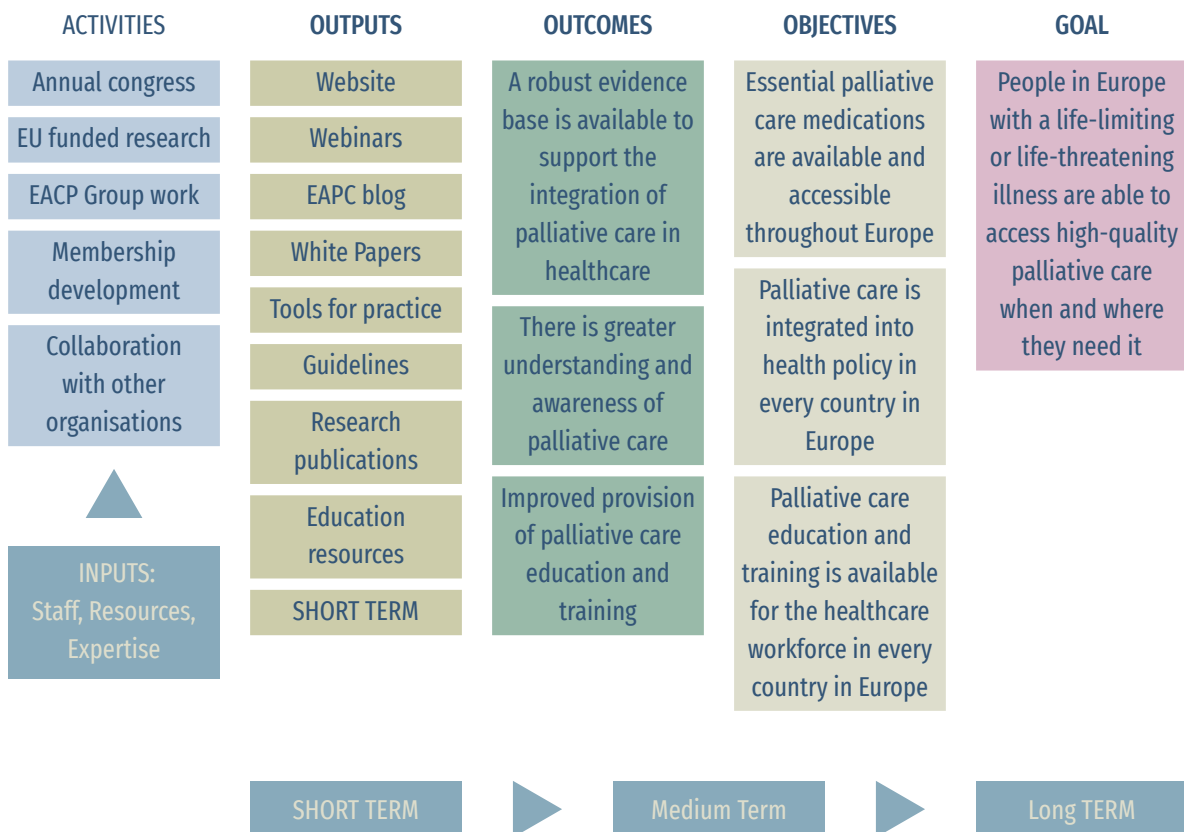
6.2.3 Future of Palliative Care

The World Health Organisation (WHO) estimates that globally, currently, only about 14% of the 56.8 million people that need palliative care annually receive it. As populations age and the burden of non-communicable disease increases, the need for palliative care globally will grow. Latest data for the European region estimates that annually 4.4 million people in Europe need palliative care (EAPC Atlas of Palliative Care in Europe 2019). Data also demonstrates that across Europe there is huge variation in the provision, quality, and integration of palliative care into health services. Findings suggest that in many European countries palliative care is not included in national policy. In addition, issues remain regarding access to essential medicines used in palliative care, including strong opioids for the management of pain and other distressing symptoms. Another challenge which impacts on awareness and the quality of service, is that education and training in palliative care is not routinely included in healthcare workforce education and training programmes. These disparities mean that vulnerable people and their families who are living in Europe with a life-limiting illness are experiencing preventable and unresolved suffering. The EAPC seeks to address these issues.



6.2.4 EAPC: Working towards our goals

Through all our activities with our members, and the wider palliative care community we aim to speak with one voice and have one vision, to support and promote equitable, timely access to palliative care across Europe. Whilst promoting this collective approach, we also consider the social, cultural, economic, and legal variations which impact our members, enabling us to support them appropriately.





Strategic
Goals



7. Strategic Review Process

The Board and CEO have committed to reviewing the organisation and its work streams on a bi-yearly basis. This allows us time to reflect and evaluate our progression in line with the current strategic plan. The previous Strategic Plan finished in December 2022. An external facilitator was engaged to assist the Board in continually reviewing the work streams. This work allowed the Board to reassess the position of the IAPC in the wider context of the palliative care environment. We had two review meetings in 2021, and two in 2022. The 2021 meeting was to develop the strategic plan and the following two were to evaluate our strategic objectives against actions with the fourth being to develop the new strategic plan up to 2025.

The strategic plan is the combined result of the review process. It is set for January 2023 to June 2025 in line with POBAL funding for the salaries of the staff team. The core principles of the strategic plan are: Membership, Policy and Partnerships, underpinned by good governance and building organisational capacity. This Strategic plan will continue to build on the success of 2020 to 2022.



8. Four Key Strategic Goals:

1. Harness and further develop new opportunities for members to network

1.1 Reach in.

- **Get to know our members, through membership form on website**
(Include: expertise, geography and area of interest)
- **Work with previous platform presenters**
 - to harness people to join Forums, Board etc.
- **Define the benefits of networking, evidence based outputs**
- **Ensure forum objectives are aligned with Board objectives and inform each other**
- **Develop potential cross projects and potential for connectivity**
- **Host the Education and Research Seminar – annually**
- **Host in collaboration with others, workshops and webinars to further the education and training opportunities of members**
- **Host the IAPC AGM and Lecture series – annually**
- **Continue to support, evaluate and monitor the progress of the four IAPC fora**
 - Education and Research Forum
 - Ethics Forum
 - Pharmacy Forum
 - Nursing Forum
- **Develop further fora following indicators of existing fora**



2. Promote the IAPC, Communicate with members and grow membership

2.1 Connect

- **Development of website as an internal and external communication tool**
- **Website will focus primarily on three sections:**
 - About us – join membership, events, what is palliative care etc
 - Membership login area
 - Directional information for the general public
- **Communications workplan (from scorecard) with clear KPIs for how and when IAPC communicates** – internally and externally (within Fora's and intra-fora)
- **Promote all IAPC discussion documents/publications/policy statements**
- **Promote all IAPC events and achievements**
- **Keep members informed on the work of organisation, through our Newsletter, Website and social media**
 - Utilise newsletter through Polls/Questionnaires to obtain members input to work streams
 - Increase social media outlets
- **Strengthen our members knowledge of relevant policy developments in the sector to assist members to engage with policy debates/consultations/submissions**
- **Communicate stakeholder engagement to the membership**



3. Advocate influence and grow

3.1 Reach out.

- **Collaboration:**
identify new strategic partners within areas of relevance, to support our strategic goals Continue to engage with partners and stakeholders
i.e. HSE/AIIHPC/IHF/HRB/EAPC.
- **Create section on website to inform the public on current policy**
- **Establish processes and engage with partners to influence Policy**
- **Develop a membership recruitment strategy, using IAPC outputs and other forms of engagement:**
 - Identify areas that have worked previously
 - Identify new avenues to recruit members
- **Promote IAPC**
 - Through attendance at conferences/seminars
 - Through website and social media outlets
 - Through Palliative Care education and training courses
- **Develop other social media outlets**



4. Ensure the efficient delivery of the strategic objectives

4.1. Governance

- **Discuss, agree and implement CEO Succession Plan**
 - To be complete by June 2024
- **Develop the capacity of the staff team to deliver the work plan through continuous professional development.**
- **Grow the capacity of the Board to provide good governance for the organisation, through training and development and to draw on their expertise in the sector.**
- **Manage effectively and make best use of financial, human and IT resources available to the organisation, and grow funding streams.**
- **Ensure all regulatory requirements are met and in a timely manner.**
- **Continue to improve our own capacity to gather and disseminate data both from and to our members and other stakeholders.**
- **Ensure regular review of work progress is on every Board meeting agenda.**

4.A Implement and evaluate the Strategic Plan

4.A.1 Governance Implementation

- **Develop annual workplans for each staff member and track progress**
- **Review twice yearly**
- **Hold six Board meetings each year to monitor the progress of the plan.**
- **Prepare annual reports and financial statements.**
- **Report to the General Membership at the Annual General Meeting**
- **Submit annual reports and financial statement to IAPC funders: HSE & POBAL & HSF**
- **Seek additional funding**





9. Jacinta Cuthbert – CEO

Through the implementation of the last Strategic Plan, I have witnessed enormous change and development, both in the membership and the work outputs of the IAPC. This is the second Strategic Plan that has been developed to further strengthen and continue to build on the momentum that we have gained over the past four years. It has been an exciting time in the IAPC and within the palliative care environment. Many changes are happening with new legislation influencing “how” people work in palliative care and the challenges that demands.

As part of strengthening the organisation and having a voice at the table, the new Ethics Forum has agreed to take on the very difficult and challenging issues that arise due to legislation or work procedures being implemented. This has been of enormous assistance to the Board and respectively to our members.

The Pharmacy Forum has taken shape and has agreed a work agenda and plan for going forward. The outputs will be delivered over the course of this Strategic Plan and will continue to be supported by the IAPC. Again this forum will strengthen our voice and assist the Board to make informed decisions.

Our newest Forum, Nursing has recently commenced work and will develop along with the other Fora, to deliver on outputs agreed and in line with the strategic plan goals.

These are exciting changes and developments in the organisation and I look forward to working with the members of each forum to further the aims of the IAPC.

A special thanks to the members of the Education & Research Forum who work tirelessly to ensure that the Seminar is one of great success and of interest to our members. Evidence has shown that the number of participants has increased during this four year period and we will continue to support them in their quest for excellence.

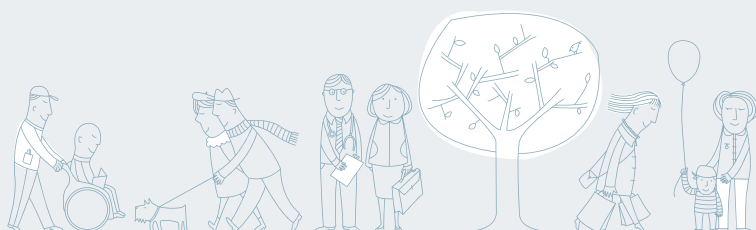
The POBAL funding secured for the three part-time staff, will provide stability and opportunities to develop the IAPC over the course of this strategic plan. This will facilitate the continued growth and development of the organisation.

I am delighted to have been part of this growth and I wish to gratefully acknowledge the co-operation, support and guidance I have received from the Officer Board, in the first instance, and then the Board in full. It is invaluable to me and the staff team to have their full support to progress the goals of the organisation.

Finally, it goes without saying that the membership of the organisation, is at the core of all decisions relating to the strategic goals and work streams of the IAPC.

Many thanks for your continued support

Jacinta Cuthbert – CEO



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The IAPC is organised around a number of working groups designed to create forums aimed at promoting best practice, professional development, research and learning in palliative care. education and research.

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www.iipc.ie for more information and on-line membership application