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Change Management, Redeployment and Designing an Integrated Labour Market Activation Service during the Irish Crisis

Stephan Köppe*, Philip O'Connell*

* University College Dublin

School of Social Policy, Social Work and Social Justice / Geary Institute for Public Policy

Corresponding Author: stephan.koepp@ucd.ie

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Abstract

This case study analyses the implementation of Intreo, the one-stop shop for jobseekers in Ireland, between 2010 and 2016. The implementation followed an iterative and incremental process, where the Department of Social Protection displayed a high adaptive capacity. Prior to the establishment of Intreo, benefit payments and activation services were highly fragmented at the organisational and policy levels. During the fiscal and economic crisis several reform strands came together that led to an organisational merger, an integrated one-stop shop service model for jobseekers and innovative alignment of labour market activation measures. The key challenges highlighted in the study are change management with limited resources, complex industrial relations negotiations to redeploy staff and designing a new service, while catering for an existing and increasing client base. Throughout the implementation process senior management and the core change team found innovative and flexible solutions to overcome the challenges. First, a small and experienced management team served as a flexible coordination hub. It shaped the broad vision and could react flexibly to changing agendas, but also relied heavily on support from other central units and frontline staff. This delegation of core tasks gave ownership of the change process to frontline staff and increased their support for the new service model. Second, the redeployment of staff benefited from coherent communication to frontline staff, respectful and strong labour relations, flexible union positions in the context of the crisis and the arbitration process set out in framework Croke Park and Haddington Road agreements. Third, the design process benefited from a broad vision right from the beginning that had been fleshed out in detail over time in an iterative process with strong involvement of frontline staff. Fourth, the national roll-out included frontline staff. This enabled the basic template for service delivery to be amended locally to suit staffing levels, client base and physical infrastructure.