



HSE Board Briefing Template

Subject: Infrastructure to support the development of a Major Trauma Centre (MTC) at The Mater Misericordiae University Hospital; Strategic Assessment Report

Submitted for meeting on: 21 March 2023 (EMT), 24 March 2023 (ARC), 31 March 2023 (Board)

Name & title of author: Dean Sullivan, Chief Strategy Officer

Why is this information being brought to the Boards attention?

For consideration and approval to proceed. The estimated capital cost of this proposal will likely be in the order of [REDACTED]. Projects of such scale and value require specific approvals at various stages of the project lifecycle in accordance with the current Public Spending Code. The first stage of the process involves the preparation and approval of a Strategic Assessment Report (SAR) for the project.

Is there an action by the Board required, if so please provide detail?

This proposal was approved at EMT and ARC, it is recommended that the HSE Board consider the strategic context for the capital investment proposal as set out in this paper [REDACTED] and endorse the case that is being made for infrastructure to support the development of a Major Trauma Centre (MTC) at The Mater Misericordiae University Hospital. At this preliminary stage the initial cost estimate for the range of options to deliver the proposal is in the order of [REDACTED]. Formal approval of the SAR (Decision Gate 0) will be requested from the Department of Health in order to proceed to the next stage of the process namely, the preparation of a Preliminary Business Case.

In developing the Preliminary Business Case, a multi-criteria analysis of the options to deliver the proposal will be undertaken leading to a preferred option. Approval of the Preliminary Business Case (Decision Gate 1) will lead to the development of a Project Brief and this will provide greater visibility of cost and timelines for completion. Following approval of the Project Brief and Procurement Strategy (Decision Gate 2 pre-tender approval) tenders will issue and following final approval of the costs associated with the tenders (Decision Gate 3), the construction phase of the project will commence.

Please indicate which of the Board's objectives this relates to;

- The development and implementing of an effective Corporate Governance Framework, incorporating clinical governance and a performance management and accountability system;
- Developing a plan for building public trust and confidence in the HSE and the wider health service;
- Ensuring the HSE's full support for and implementation of the Government's programme of health reform as set out in the Sláintecare Implementation Strategy;
- Exercising effective budgetary management, including improving the value achieved with existing resources and securing target saving, with the objective of delivering the National Service Plan within Budget.

Brief summary of link to Board objectives.

The proposed project is in line with HSE and wider Irish Public Healthcare Policy, notably Sláintecare and Ireland 2040 -which are both stated Board objectives.

This project will also enable implementation of another key government and HSE Board objective by ensuring appropriate Major Trauma Services for the general public, as stated in the Trauma Steering Group's 2018 report '*A Trauma System for Ireland*'.

The capital investment required for the preferred proposal will be determined at Project Brief stage (between Decision Gate 1 'approval in principle' and Decision Gate 2 (pre-tender approval)) but cost estimates of the options set out in the SAR are [REDACTED]. The final capital investment required to deliver the proposal will be determined following return of tenders at Decision Gate 3.

The HSE as Sponsoring Agency will have primary responsibility for evaluating, planning and managing this public investment project within the parameters of the Public Spending Code. The Board will require assurance that processes underpinning these responsibilities are robust and that risks associated with large capital projects such as cost and completion time are mitigated.

Background - provide context in order to ensure that the Board fully understand the issue.

The Trauma report "*A Trauma System for Ireland*" takes a whole-system approach to addressing all elements of the trauma care pathway including prevention, pre-hospital care, acute hospital care, rehabilitation and supported discharge. It recommends the establishment of an inclusive trauma system, where a network of facilities and services co-ordinate in the care of injured patients along standardised pathways. Inclusive trauma systems in similar jurisdictions to Ireland have been shown to significantly reduce the number of deaths and disabilities caused by major trauma.

The new trauma system in Ireland will consist of two trauma networks:

1. The Central Trauma Network
2. The South Trauma Network.

The trauma networks will each have a *Major Trauma Centre (MTC)*, and also a number of Satellite Trauma Units.

The Major Trauma Centres will provide the highest level of specialist trauma care to the most severely injured patients on a single hospital site and the Satellite Trauma Units will deliver more general trauma care to the majority of patients who do not need the specialist expertise of a Major Trauma Centre.

A key step to deliver the Central Trauma Network was the designation of The Mater Hospital, as announced by Minister for Health Stephen Donnelly TD, in April 2021 (the other is based in Cork University Hospital servicing the South Trauma Network).

The purpose of the Mater Hospital MTC is to ensure high-level care for patients with serious trauma and to provide leadership and clinical governance for trauma care in the overall Central Network - in an inclusive hub and spoke model. This is in addition to the oversight and expertise in the areas of injury prevention, trauma research and innovation and trauma training and education

Physical reconfiguration of The Mater Hospital Campus is required to accommodate the proposed MTC. Consequently, the following infrastructural capital works, which will take place over a number of phases are necessary:

- ✓ **Phase 1A** – This Phase included an ED extension and reconfiguration, the installation of new CT Machine, and the replacement of an existing Interventional Radiology Machine. Phase 1A is currently ongoing and is scheduled to be operational Q2 2023.
- ✓ **Phase 1B** – This Phase includes 2 dedicated Trauma Theatres, a diagnostics suite which will include an

MRI Machine and a further CT diagnostic Machine.

- ✓ **Phase 2** – This Phase consists of a multi-storey building comprised: 120 inpatient beds; 20 ICU beds; 4 Theatres; Radiology Dept; Hospital Street, shops, public space, offices; plant room; car parking; and ancillary space. Bed numbers are indicative at this SAR stage, and will be model tested and option validated during the next PBC stage.

This SAR recognises the development of the Trauma Centre over the three phases noted above.

Project Rationale & Objectives

The rationale for the Project is twofold: i. Enhancement of Critical Care Services & ii. Reconfigurations of Trauma Services in Ireland

i. Critical Care Objective

In seeking to facilitate the smooth implementation of the Strategic Plan for Critical Care, the Trauma SAR endeavours to achieve key clinical adjacencies to maximise the development potential of the site.

ii. National Trauma Strategy Objectives

“A Trauma System for Ireland” outlines its vision as:

“The vision for the National Trauma System for Ireland is that it will reduce both the incidence and burden of trauma and increase the survival rate of major trauma patients by delivering a seamless transition between each phase of care.

A fully resourced Trauma System for Ireland will, when implemented, save lives, and enhance the health, safety, and wellbeing of the population, through an organised system of injury prevention, pre-hospital care, acute care and rehabilitation.

It will be fully integrated within the wider healthcare system and supported by other key sectors. The development of this policy is consistent with the mission of the Department of Health, which is to improve the health and wellbeing of people in Ireland.”

The four key principles underpinning the vision of the National Trauma System for Ireland: “A Trauma System for Ireland” are as follows:

1. Patient centred: There should be a focus on the delivery of patient-centred services at all stages along the trauma care pathway from wellbeing and prevention through to rehabilitation and supported discharge.
2. Patient safety: Patient safety and quality will be assured through the sustained implementation of a set of patient safety initiatives delivered in a systematic consistent manner across all stages of the trauma pathway.
3. Whole system: There should be a whole system approach, rather than a hospital-centric approach, to the prevention and treatment of injury and to the rehabilitation of patients, with necessary collaboration across care areas.
4. Responsive: The trauma system should be responsive, adaptive, and enabled to evolve over time on the basis of learned experiences.

Some objectives for development of the Major Trauma Centre on the Mater Misericordiae Site are:

- Optimise early access to focused care and intervention
- Reduce trauma wait times before seeing a consultant
- Increase access to required diagnostics i.e. access to CT within 1 hour of arrival
- Reduce the number of transfers to other hospitals
- Deliver high level care by appropriately trained and skilled practitioners at the earliest time
- Provide patient centred trauma services including enhancing the care for older persons presenting with major trauma

- Improve the survivability for victims of major trauma by 20-27% and prevent unnecessary deaths
- Reduce cost of staff turnover
- Reduce costs as patients treated in the right place at the right time.

At the next stage, and as part of developing the Preliminary Business Case, a 'long list' of options -as per the SAR multi-criteria analysis- will be considered and therefrom the preferred option will be determined. The development of the MTC together with the associated capacity requirements in the Mater Hospital will be subject to detailed validation as part of the Preliminary Business Case process.

Approval of the Preliminary Business Case will lead to the development of a Project Brief which in turn will provide greater level of cost and programme certainty.

As the project progresses through the project lifecycle it will be referred to EMT, ARC and the Board again for endorsement at three further stages in addition to this paper, namely for endorsement of the Preliminary Business Case (Decision Gate 1) and for endorsement of the Final Business Case which comprises two approval gates (Decision Gate 2 and Decision Gate 3).

Highlight any implications that the Board should be made aware of in its consideration such as;

- **Current status**
Seeking HSE Board Approval of the Strategic Assessment Reports (SAR)
- **Budget**
This is a large and complex project. The SAR recommends a number of options to deliver the project with preliminary capital costs in the [REDACTED]. A multi-criteria analysis of the options will be undertaken as part of the development of the Preliminary Business Case leading to a preferred option. Further cost certainty will be developed at the initial stages of the design and planning processes through the development of the Project Brief.
The proposed project will also involve additional operational revenue which will be further analysed at PBC stage.
- **Source of Funding**
The project is included in the HSE Capital Plan, with appropriate allocations to initiate it. Greater definition and allocations will be included in due course to reflect the developed understanding from the PBC stage work.
- **Programme**
Preliminary programmes and timelines will be reviewed as part of consideration of options during the PBC process. Early delivery of new facilities and enhanced capacity is recognised as a key clinical and operational priority.
- **Resources**
Additional WTE staffing will be required to open the new facilities. A detailed financial review of the projected incremental costs and revenue will be completed as part of the PBC, for each of the shortlisted options. MMUH will participate in specialty costing programmes and any proposed revenue costs will be assessed against appropriate benchmarks and agreed staffing ratios.
- **Impact to delivery of services**
The proposed facility will provide compliant, appropriately located, key clinical capacity in the correct configuration to support key health service delivery. It will significantly assist in achieving improved outcomes.
- **Corporate Plan**
Aligned with HSE Corporate Plan & Service Plan
- **Sláintecare**
Aligned with Sláintecare on delivery of services. Aligned with the Strategic Plan and the capacity plan; on delivery of beds and services - National Trauma Strategy Development Plan.
- **Social factors** (e.g., impact on specific area such as the elderly, disabilities)
The provision of the new facility will significantly improve the quality of the environment in which care is delivered to patients, and enhance the experience of patients, family members, and staff.
- **Legal factors**
Legal arrangements in relation to the forms of contracts, grant arrangements etc. will be considered further as the project proposals advance.

Sustainability

The new developments at the Mater Hospital will be designed to fully support Government and HSE climate action and decarbonisation ambitions and commitments.

Conclusion

The Strategic Assessment Reports (SAR) for this project has been prepared by KPMG in accordance with the current Public Spending Code requirements. It sets out the scope of the project and the potential options considered. It also examines the cost and benefits arising. It recommends that the Approving Authority grant formal approval to progress to the next stage of the project lifecycle process.

Recommendation

It is recommended that the HSE Board approve the attached Strategic Assessment Report for submission to the Department of Health for their formal review and approval to progress to the next stage of the project lifecycle. As noted earlier, the proposed development of the MTC together with the associated capacity requirements in the Mater Hospital will be subject to detailed validation as part of the Preliminary Business Case process.