

HEALTH SERVICE EXCELLENCE AWARDS AWARDS DESIGNED TO INSPIRE AND ENCOURAGE

"THE Health Service Excellence Awards are designed to identify and recognise the real value we place on excellence and innovation across all of our health service" - Tony O'Brien, Director General of the HSE.

Some 300 projects from all around the country entered the 2017 Health Service Excellence Awards and 11 of those projects got through to the final shortlist after a rigorous selection process. The annual awards are open to all staff working in the publicly funded health system.

These projects will be represented at the Health Service Excellence Awards ceremony in Farmleigh in Dublin's Phoenix Park in December where the Overall Winner will be announced along with the Popular Choice Award, the Best Team Project Award winners.

The Awards are designed to encourage and inspire our healthcare staff to develop better services that result in easier access and high-quality care for patients and to promote pride among staff in relation to our services.

Commenting on the value of the Awards HSE National Director of Human Resources, Rosarii Mannion, said: "It is our ambition for staff to have a strong sense of connection to our service, take personal responsibility for achieving better outcomes, and support their team colleagues to deliver results. The commitment of staff throughout the public health service contributes in a very significant way to the quality and satisfaction levels acknowledged by the people who use our services."

The hosting of the Health Service Excellence Awards is one of the key staff engagement areas for action in the HSE's People Strategy 2015 – 2018 Leaders in People Services.

Interim Head of the Programme for Health Service Improvement Joe Ryan said: "We are

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delighted to support the 2017 Health Service Excellence Awards. I was very impressed by the high quality of the entries from every region in the country. Many of the projects demonstrated real innovation and highlight how so many of our staff are working to deliver better services with easier access and higher quality care for patients. Really innovative changes for the better are being delivered by front-line staff. It was truly inspiring to hear their stories.

"It's important to say that the Awards are not just about those projects selected as being winners and finalists but about all of those that have been submitted and are contributing to the continuous improvement of health and social care services. This is what Building a Better Health Service is about. The Programme for Health Service Improvement is committed to supporting and promoting transformational and sustainable improvement in services.

The Awards enable us to identify great service developments that can be shared and implemented, as appropriate, in different parts of our health system."

FINALIST LIST

Nurse Led Asymptomatic Screening Clinic, Gay Men's Health Service (GMHS), Baggot Street Hospital, Dublin

Influenza Vaccination Campaign 2016/2017 at Temple Street Children's University Hospital, Dublin

Advancing the Role of the Pharmacy Technician and Delivering Better Value for Money on Hospital Drug Spend, Connolly Hospital, Blanchardstown

Innovative Support Coordination for Older Persons: HSE National Social Care Division/CHO 9 and ALONE

Frail Intervention Therapy (FIT) Team, Beaumont Hospital

Development of a Nurse Led PICC Line Insertion Service for Haematology and Oncology Patients, University Hospital Waterford Hospital

Development and Introduction of an Acute Diabetic Foot Pathway: A Multidisciplinary Approach SVUH

Trauma Assessment Clinic, Midlands Regional Hospital, Tullamore

Promoting Food First model and managing Hospital Clinical Nutrition products, St Marys Phoenix Park

Development of a Serum Eye Drop Programme in Galway Blood and Tissue Establishment (GBTE), University College Hospital Galway

Bronntanas Project, Co Mayo



MORE INFORMATION

For more information see [hse.ie/excellenceawards](https://www.hse.ie/excellenceawards)

11 PROJECTS SHORTLISTED FOR AWARDS

THE Programme for Health Service Improvement is now planning to work with a number of the projects to support the innovative work they do. The 11 projects who made it through to the final awards ceremony are:

Serum eye drops – Galway University Hospital

THE Galway Blood and Tissue Establishment (GBTE) at Galway University Hospital has dedicated years of service to obtaining the Good Manufacturing Practice (GMP) license to produce autologous and allogeneic serum eye drops.

Galway University Hospital is the only hospital in Ireland licensed to produce Serum Eye drops (SEs). SE's are a serum-derived product used to treat a range of ocular surface disorders. 2017 has been the busiest year for Serum Eye drops to date and this is attributed to the Autologous Serum Eye drops (ASE) team for delivering an efficient programme.

There are many patients throughout the country whose lives have been drastically improved thanks to this treatment. One recent patient began using ASEs in April 2017 after developing Graft Versus Host Disease (GVHD) in his eyes following an allogeneic bone marrow transplant in July 2015. The GVHD had severely affected his vision in both eyes, as well as causing severe pain and grittiness in the eyes. Since he started using the ASE's the patient's sight has drastically improved, so much so that he can now drive again. He credits the ASEs with giving him back his independence and hugely improving his quality of life.

Nurse-Led PICC line insertion – Waterford University Hospital

THIS project involved the development of a nurse-led peripherally inserted central catheters (PICC) line insertion service for haematology and oncology patients using 3CG technology. Prior to this, PICC lines were typically inserted by a consultant interventional radiologist. Two oncology clinical nurse specialists (CNSs) and one haematology clinical nurse specialist completed a training programme and competency assessment.

A pathway was developed with the community intervention team to carry out PICC line flushes in the patient's home. These occur within 24 hours post line insertion. Following this, a weekly PICC line insertion clinic commenced.

To date, 29 PICC lines have been inserted by the CNSs.

The patient no longer has to wait for extended periods of time to have a PICC line inserted. This greatly decreases the anxiety patients experience while they are waiting to begin chemotherapy treatment.

Other impacts include:

- patients also spend less time in hospital by not being admitted to a surgical day ward
- wait times for insertion of PICC lines were reduced
- patients commenced cancer treatment in a timely manner

Total savings were estimated to be €47,860.

A database has been developed to gather all the relevant evidence which will allow for a full audit after 12 months.

Innovative support coordination for older persons – National Social Care/CH09 Dublin North City and County

THE Support Coordination Service supports older people to age at home for as long as possible. The programme is a partnership project between the HSE National Social Care Division Staff and the voluntary organisation ALONE. It aims to promote independence, choice and well-being to older people.

Trained volunteers provide support to older people by providing:

- a befriending and events service
- benefit and entitlements activation
- access to primary care services
- applications and oversight of adaption grants
- end of life planning
- budgeting

The programme intends to create a cost effective, scalable, and



Serum Eye Drops Project: Margaret Tarpey, Chief Medical Scientist/Laboratory Manager, Dr. Amjad Hayat, Consultant Haematologist, Aoife Conroy, Medical Scientist/Deputy Quality Manager.



Innovative support co-ordination for older people: Samantha Rayner, Social Care Division, and Sean Moynihan, CEO, Alone.



Influenza Vaccination Campaign 2016/2017 at Temple Street Children's University Hospital, Dublin.



Nurse-Led PICC line insertion team: Michelle Hannon, Oncology Clinical Nurse Specialist; Claire Tully, Director of Nursing, Orla Kavanagh, Assistant Director of Nursing and Ada Kinneally, Candidate Advanced Nurse Practitioner (Oncology).

transferable model by working with all services in the area.

To date, 489 older people have been supported through the project. The team have developed a Management Information System (MIS) to enhance measuring and reporting.

Hospital Flu Vaccination Campaign – Temple Street Children's Hospital

THE Temple Street Children's Hospital Influenza Vaccination Campaign encouraged the uptake of the vaccine among staff through a far-reaching campaign. A number of innovative activities took place among all hospital staff. The campaign began with a 'Jabathon'. During this phase almost 25pc of the hospital staff were vaccinated.

Other campaign initiatives included:

- 'Selflu' photo competition
- pop-up clinics at locations and times designed to suit front line staff
- peer vaccinators and champions
- mannequin challenge involving hospital leaders and all disciplines to boost campaign

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- poster displayed on the website and photo of a long-term patient receiving the vaccination

The vaccination campaign was designed by the Nursing and Occupational Health Department. A wide range of individuals from all disciplines in the hospitals championed and supported the campaign.

Temple Street had the top hospital vaccination uptake for mid season influenza among HSE funded hospitals and long-term care facilities 2016-17. Uptake was with 63.7pc.

Gay Men's Health Service

THE Gay Men's Health Service, a community service funded by the HSE, set up an innovative nurse-led asymptomatic screening clinic to reduce the incidence of HIV in the MSM community and beyond. It was in response to a dramatic increase in STI's among men who have sex with men (MSM) in 2016, the Gay Men's Health Service (GMHS) set up a new walk in clinic on a Monday afternoon 2pm to 4pm to increase testing among this population.

This nurse led screening service has proved to be extremely cost effective not only in terms of the high quality of the clinical service delivered by nurses but also the numbers of service users catered for. The high detection and treatment of STIs of 15pc in this at risk group has ultimately reduced transmission and rate of spread as well as reducing ultimate cost to the HSE of untreated infections.

The measurement and results are a statement of the success of the service. The clinic has been in operation for 11 months now with over 1,000 attendees. This asymptomatic screening service is a recipe that clearly works and could be very easily transferred to other settings within the community.

Frail Intervention Therapy – Beaumont Hospital

THE Frail Intervention Team (FIT) set out to develop a whole system pathway for frail older people to ensure they are managed assertively and their length of stay (LOS) is kept to a minimum.

The team introduced an organisational quality improvement approach to ensure the care delivered is safe, effective, patient-centred, timely, efficient and equitable.

Development of integrated services for frail older people between primary and secondary care services was possible only through a partnership approach between Beaumont Hospital and CHO9. A project Steering Group and supporting Implementation Team were established in 2016, facilitating a joint approach to service redesign.

This project has reduced the requirement for additional acute care beds, rehab beds and nursing home beds by promoting a home first ethos has saved significant money.

The ultimate success of this project is that the patient gets to reduce their length of stay and go home.

There has been a 28.5pc increase in the volume of discharges by Day 10 of admission. 95pc of patients are discharged in 49 days in 2017 compared with 65 days in 2015 and bed utilisation has reduced by 13pc despite an 11pc increase in admissions as our local population gets older.

Food Project Phoenix Park

THE Food Project, Phoenix Park reduces patients' reliance on Oral Nutritional Supplements by improving mealtime practices in St Mary's Hospital for both patients and residents.

Alongside improving practices, a new ordering system for Oral Nutritional Supplements was designed by a senior dietitian to monitor usage and associated costs.

The success of this project would not have been possible without the enthusiasm and passion displayed by interdepartmental hospital staff for patient-centred care.



Gay Men's Health Service: Nurse Led Asymptomatic Screening Clinic, Gay Men's Health Service (GMHS), Baggot Street Hospital.



Frail Intervention Therapy (FIT) Team, Beaumont Hospital.



Food Project Phoenix Park: Promoting Food First model and managing Hospital Clinical Nutrition products, St Marys Phoenix Park.

The previous system was inefficient, time consuming, expensive and often led to high wastage. This project not only addressed these issues but also raised awareness around the importance of good nutrition practices. It also subsequently achieved cost savings for the hospital.

This project has demonstrated how working collaboratively, streamlining existing practices, providing education and effective communication can empower staff to apply their knowledge and expertise to make good nutrition everyone's responsibility in the hospital.

Delivering better value for money on hospital drug spend – Connolly Hospital Blanchardstown

A SENIOR Pharmacy Technician was employed in Connolly Hospital on a 12-month contract to demonstrate the savings that could be made from a targeted 'purchasing-for-quality' approach to drug procurement.

The Senior Pharmacy Technician worked closely with the Chief Pharmacist to identify and prioritise elements of the drug budget appropriate for targeted work. They then defined the appropriate criteria for assessing drugs, for example licensing status, medication safety features, lead times, continuity of supply, vendor reputation, and price.

This project seeks to both harness and enhance these skills to deliver measurable and meaningful improvements in performance. This will also, we hope, pioneer a new role for Pharmacy Technicians in Connolly Hospital



Delivering better value for money on hospital drug spend: Advancing the Role of the Pharmacy Technician and Delivering Better Value for Money on Hospital Drug Spend, Connolly Hospital, Blanchardstown.



Bronntanas Project (L-R) Brendan Cunningham, Mayo University Hospital; Catherine Healy, HSE; Liam White, Tusla Family Support Manager; Mary Cunningham, Community Volunteer; Marie Loftus, Tusla; Teresa Quinn, Tusla; Paddy Martin, Area Manager, Tusla; Nina, Community Volunteer; Sandra Loftus, Mayo County Council.



Acute Diabetic Foot Pathway: (L-R) Sean Johnston Clinical Director, Maria Mulhare SN OPD, Orlagh Claffey, General Manager, Dr. Susan O Reilly, Dublin Midlands Hospital Group CEO, Mr Eoin Sheehan, Dept. Orthopaedics, Sandra Lawlor, Physio Dept, Breda Conlon CNM2, Mr Rafaat Zaki, Dept. Orthopaedics, Siobhan Keating, Admin, Claire Hough, Admin.



Trauma Assessment Clinic: Development and Introduction of an Acute Diabetic Foot Pathway: A Multidisciplinary Approach SVUH.

and in the Irish Hospital setting more generally.

Patients demand and deserve medication of the highest quality. This project seeks to ensure that this demand is met while also delivering savings in drug spend.

Such savings, in turn, may be reinvested in services which will enhance the patient experience.

This project seeks to accept the reality of finite healthcare budgets, while also finding ways to retain a quality focus. After seven months, the savings achieved were in excess of €200,000 with total projected savings for 2017 in excess of €300,000.

Bronntanas Project – CHO 2 Mayo/Tusla

THE Bronntanas Project supports parents in Mayo who are experiencing difficulties at Christmas by providing a gift for them to give to their children on Christmas morning. Volunteers from around the county purchase a small Christmas gift for a specific child whose parents are unable to do so. The families are identified by community services or by their contact with the Scheme Coordinator. Their requests are then coded and volunteers are given brief details of what gift to purchase and a central point to drop it off.

The Scheme Coordinator coordinates the distribution of the gifts. The coordinators also share responsibility for recruiting volunteers, assessing needs and distributing gifts.

The Bronntanas Scheme demonstrates that the management and staff of the HSE and Tusla are being encouraged to be innovative in the way they support families in addition to their everyday work duties. The parents who use the scheme find the professional way in which the gifts are organised to be supportive and non-judgemental.

Every year there is more demand for gifts. Last year the scheme provided over 350 gifts for children in Mayo.

Acute Diabetic Foot Pathway – St Vincent's University Hospital

THE Acute Diabetic Foot Pathway is a multidisciplinary approach that improves patient care. Over a three-year period (2012-2015) the number of patients admitted to SVUH for the management of the acute diabetic foot increased by 52pc. These patients had an average length of stay of 26 days and a readmission rate of 43pc within two weeks of discharge. There was also a 20pc increase in the number of lower limb amputations performed.

A multidisciplinary task force was established to audit the service and identify any areas for improvement. Inpatient and theatre data over a 12-month period was retrospectively analysed.

The task force reviewed the current national guidelines and international best practice guidelines to establish a quality improvement plan. From this plan, the Acute Diabetic Foot Pathway booklet was developed.

This project has had a huge impact on patient satisfaction and outcomes. Length of stay is greatly reduced and patients are now treated at home if OPAT is available in their area. There are less major limb amputations performed and less readmissions. There was a dramatic reduction in length of stay, less readmissions within two weeks of discharge and a substantial cost-saving.

Trauma Assessment Clinic – Midlands Regional Hospital Tullamore

THE Trauma Assessment Clinic (TAC) is a new care pathway that improves and streamlines the patient journey after an injury without compromising care. The patient arrives in the ED with an injury and is treated to a recognised protocol. They are given information and a splint or cast and followed up by phone call from the orthopaedic team. Within 24 hours the patient's x-rays/notes are assessed by the orthopaedic consultant.

Run by Consultant Trauma and Orthopaedic Surgeon in the Midlands Regional Hospital, Tullamore, the service uses a team approach. This involves a consultant, a registrar (junior doctor), a CNS Clinical nurse specialist and a physiotherapist to review each patient's case.

This empowers nursing specialists to execute a treatment plan and allows local staff to deal with their own patients rather than physically referring them to a tertiary centre.

So far, the Trauma Assessment Clinic pilot project has seen 1,668 patients. 30pc of patients are discharged at this stage, 40pc are referred to an appropriate clinic or a follow up trauma clinic, 30pc are referred onto physiotherapy services. Therefore 60pc do not attend the fracture clinic. In the past 100pc of these patients would have attended the hospital clinics. Patients who don't need follow up are discharged and those that do are seen quicker and more efficiently, either in a clinic or a physiotherapy service.