



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

30 December 2020

Deputy Louise O Reilly
Dáil Éireann
Leinster House
Dublin 2.

Rannan na nOspideil Ghearmhíochaine
Aonad 4A – Áras Dargan
An Ceantar Theas
An Bothar Mileata
Cill Mhaighneann
BÁC 8

Acute Operations
Health Service Executive
Unit 4A - The Dargan Building
Heuston South Quarter
Military Road
Kilmainham
Dublin 8.

PQ 43559/20 *To ask the Minister for Health the reason ultrasounds for letters issued to women in the highest at risk category of ovarian cancer are saying the waiting list is six to 12 weeks when the women themselves are being informed that they are running at 27 plus weeks; and his views on whether this is an acceptable wait time for a scan to detect a cancer that is the fourth most common cancer in women in Ireland and has a significant fatality rate.*

Dear Deputy O'Reilly,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted for response. I have examined the matter and the following outlines the position.

The Deputy may be aware that the HSE does not have detailed information regarding ultrasound waiting lists centrally however; outpatient and in-patient waiting lists for gynaecology services are collected centrally, are available and can be shared with the Deputy as required. However, in the context of specific question raised it would be helpful if the Deputy could identify the Hospital or Hospitals where these specific issues have been identified and we can seek a detailed response.

The Deputy will be aware that in response to COVID outbreaks in early 2020 there was a significant reduction in all scheduled care activity across all Acute Services including outpatient clinics, inpatient and day case procedures in line with the National Action Plan on COVID-19 (page 20). <https://www.gov.ie/en/publication/47b727-government-publishes-national-action-plan-on-covid-19/>

The reduction in activity was to ensure patient safety and that all appropriate resources, both physical and human, are made available for COVID-19 related activity. Time-critical essential work continued throughout the system in line with the National Action Plan, Clinical Programme and World Health Organisation recommendations.

Arising from the NPHET decision in early May regarding resumption of services and aligned with the roadmap for reopening society and business, Phase 1 <https://www.gov.ie/en/publication/ad5dd0-easing-the-covid-19-restrictions-on-may-18-phase-1/#health-and-social-care> , interim guidance was developed the resumption of scheduled care services. This guidance was approved by the Expert Advisory Group

(EAG) and was issued to all hospital groups/hospitals to support the resumption of patient treatment.

In terms of diagnostics the clinical programme for Radiology have advised that a number of services were reduced or suspended in response of the government restrictions including:

- CT-colonography
- Out-patient CT, MRI and US vetted as routine
- Out-patient nuclear medicine studies vetted as routine
- GP requested US/CT/MRI vetted as routine
- DEXA scans

Radiological services have now resumed however, there are constraints in terms of physical infrastructure, workflow, cleaning of equipment etc aligned to the new guidelines.

Significant funding has been identified through the 2021 estimates process to support access to care. The HSE is working with Hospital Groups to ensure that available additional funding in 2021 is targeted at access to care for patients, including diagnostics, where care delivery has been affected by the Pandemic.

I trust that this is of assistance.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Robert Kidd', written in a cursive style.

Robert Kidd
Assistant National Director, Acute Operations