



Oifig an Stiúrthóra Náisiúnta Straiteis Pobail agus Pleanála
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**Deputy Denis Naughten,
Dáil Éireann,
Leinster House,
Dublin 2.**

25th January 2021

PQ Ref: 44382/20 - To ask the Minister for Health the resources to be made available for the development of the ambulatory care hubs; the location of the first phase of hubs; the reason level 2 hospital sites were not considered for such hubs in view of the fact that many are already dealing with large numbers of older persons and those with chronic illness; and if he will make a statement on the matter. - Denis Naughten

Dear Deputy Naughten,

I refer to your recent parliamentary question which was passed to the HSE for response.

The Enhanced Community Care (ECC) model creates specialist ambulatory care hubs as a secondary care model for the management of chronic disease and older people with complex needs, designed to bring care closer to the patient in line with the aims of Sláintecare. The ECC model uses the Community Healthcare Networks (CHNs) as the basic building block for the delivery of health care services to a defined population within those networks. The networks provide structures that enable the professional staff and teams to work together in a more coordinated and consistent way, based on the assessed needs of the local population enabling integrated care across hospital and community services.

The recruitment of specialist integrated care teams allows for scaling integrated care for older people and chronic disease. Each of the specialist teams will cover a number of CHNs (2-4 based on population, geographic spread, age profile, deprivation levels) and will operate from a specialist ambulatory care hub. However, it is important to stress that the hub is not designed as a static location for the members of the teams. The team members will provide service across each of the networks in their catchment area and will see and treat patients as close to home as possible. This will be done through the use of other HSE facilities in each of the networks covered, and through domiciliary visits, seeing patients in their own homes. The teams will work with HSE colleagues across the end-to-end pathway of care for older people that will include primary care, acute hospitals, the local authority, and the various third sector organisations catering for the needs of older people in the county.

The HSE Recovery and Transformation priorities outline the approach to the reintroduction of acute and community services during Covid-19 at the same time as progressing significant transformation opportunities over the 18 month recovery period. It looks to ensure that the acute hospital system operates to ensure patient flow and avoid trolley waits, while also recognising emerging infection prevention and control requirements. The necessity to provide community pathways for densely populated urban areas as an alternative to acute hospital attendance was a key determinate in identifying the 11 acute hospital locations to which the ambulatory care hubs are clinically aligned to, while remaining focused on working with HSE colleagues across the end-to-end pathway of care for older people that will include primary care, acute



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hospitals, the local authority, and the various third sector organisations catering for the needs of older people in the county.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'G. Crowley'.

Geraldine Crowley,
Assistant National Director,
Primary Care Strategy and Planning