

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

25th October 2021

Deputy Ivana Bacik Dáil Éireann Leinster House Dublin 2. Acute Operations Health Service Executive Unit 4A - The Dargan Building Heuston South Quarter Military Road Kilmainham Dublin 8.

<u>PQ 49197/21</u>*To ask the Minister for Health if his Department has developed contingency plans to ensure that services for conditions such as COPD, cystic fibrosis and lung fibrosis are protected in the event of an upsurge in Covid-19 infections

Dear Deputy Bacik,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response.

Response

In recognition of the significant and sustained effect of the Pandemic on both unscheduled and planned work, the HSE Service Plan 2021 set out specific actions and funding to support improved access. This additional capacity has been to support services during the COVID waves and in addition to enable recovery due to lost or reduced capacity and supports both emergency and scheduled patient care pathways.

Specifically, in terms of Respiratory the clinical programme has advised that during COVID they have adapted the models of care where possible and safe to do so, to hybrid models to include virtual services and also make use of monitoring at home. Examples of this are

- Pulmonary rehab which is now offered as a virtual and/or face to face service in most sites.
- COPD Outreach teams are utilising remote monitoring and virtual patient engagement.
- Outpatient clinics for Respiratory services (including COPD, cystic fibrosis and lung fibrosis) are delivered virtually where appropriate

The programme have outlined that they plan to continue to use these hybrid models on a longer term basis and have developed guidelines for virtual services for a number of areas including Pulmonary rehabilitation, Asthma and COPD all of which are available on the HSE library. Additionally, the National Clinical Programme for Cystic Fibrosis (NCPCF) also has a range of contingency measures in place to ensure service continuity. Cystic Fibrosis centres have access to telehealth facilities, prescribers have access to online prescribing services ensuring immediate access for people with Cystic Fibrosis to the medication(s) they require, and the NCPCF has developed a COVID committee who make recommendations on Cystic Fibrosis care during this pandemic.

The HSE's critical care bed target was to deliver an additional 66 critical care beds by 31 December 2021 bringing the total to 321 beds. There are currently 42 of these 66 beds open, which is a total of 297 critical care beds now open.

The HSE received funding approval in 2021 to open 1,146 acute beds. A number of these beds were already open in 2020 and funded under the HSE's Winter Plan or on a once off basis by the National Treatment Purchase Fund (NTPF). The 2021 budget provided funding on a recurring basis for the beds that were previously funded by the NTPF. There is a total number of 762 acute beds open to date. A further 165 acute beds are expected to open before year end which will result in additional acute bed capacity of 927 beds in 2021. The opening of the remaining acute beds is delayed for the following reasons;

- Recruitment of staff
- Capital delays including planning permission

The additional bed capacity is welcome having regard to the pressures experienced by hospitals resulting from increased ED attendances and admissions, as well as infection, prevention and control requirements during the covid-19 pandemic.

In addition to the developments in public capacity during the various waves of COVID arrangements have been made with private hospitals to support again both emergency and scheduled patient care pathways with a particular focus on patients who require urgent or time critical access.

The HSE has also continued to work with the NTPF to support access to routine patient care for both outpatients, inpatients and day cases.

In regard to the efforts being made to reduce pressure on bed capacity facing winter 2021, the Health Service Executive is developing a new winter plan which seeks to build on the success of the Plan for last winter including consolidation of COVID /non COVID pathways, strengthened measures for egress from hospitals including home supports, long term care and enhanced primary care measures to ensure that patients use other options for accessing urgent care including Pharmacist, GP, GP Out of Hours Services and Minor Injury Units. In an emergency situation, Emergency Departments continue to deal with all medical emergencies.

I trust that this answers your question.

Yours sincerely,

Trush Ky

Trish King General Manager Acute Operations