



28<sup>th</sup> April 2022

**Deputy Roisin Shortall**  
**Dail Eireann**  
**Leinster House**  
**Dublin 2**

*PQ 19141/22*

*To ask the Minister for Health his views on the previously unpublished report of the Independent Review of Unscheduled Care Performance 2018-2019 which was released under freedom of information; the steps that he has taken to address the issues identified in nine HSE hospitals; the recommendations which have been implemented; and if he will make a statement on the matter. -Roisin Shortall*

Dear Deputy Shortall,

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.

The Nine Site Review of Unscheduled Care Performance was commissioned by the HSE in 2019 to review unscheduled care performance across the nine hospitals that were under the greatest pressures in Winter 2018/2019.

At that time, the aim of the review was to provide expert insight and recommendations that could help hospitals improve processes and procedures in delivering patient care.

The response to the COVID-19 pandemic in March 2020 required the HSE to respond to the extraordinary challenges posed and in doing so resulted in the implementation of structures and initiatives to address our current and future challenges, many of which were identified in the draft review of the nine focus sites.

In this context the draft report is outdated as a result of the pandemic and the significant investment that has taken place in our hospitals during that time.

The HSE is currently experiencing a record level of unscheduled care demand. Management of this activity is challenging in the environment of COVID-19 which necessitates infection prevention and control pathways for pre-admission, post-admission and egress from the hospital.

Acute hospitals are running in excess of 99% occupancy levels with egress options for patients to either residential or home care inhibited by outbreaks in nursing homes and staff absence amongst home care staff.

The HSE received significant investment through the Pandemic Plan in March 2020 and both winter and National Service Plans in 2021 and 2022. These investments focused on developing and maintaining new COVID-19 services, providing continuity of non COVID-19 services and the enhancement of services in line with Sláintecare. Many service enhancements will ultimately provide the fundamental shift required from acute services, including emergency departments, to the community and enable the provision of “right care, in the right place, at the right time”. The delivery of these services will require time to embed.



The investments and plans made in the past two years have focused on the core priorities including building capacity, developing alternative and new pathways of care; testing and contact tracing; population health and vaccination.

Significant progress has been made in enhancing capacity in both our acute and community services to facilitate patient flow within our acute hospital system and egress and includes increased staffing levels in both Hospital Groups and Community Health Organisations and delivery of an additional 829 acute beds to date as part of the National Service Plan 2021.

There is ongoing work underway in developing alternative pathways of care to EDs and to ensure care is delivered in the right place at the right time, in conjunction with the Community Health Organisations. This includes the:

- Enhanced Community Care Programme to enhance integrated working facilitating ED avoidance and enhancing flow between services.
- GP access to Diagnostics scheme.
- Enhancement of Community intervention teams, and
- Expansion of Pathfinder which involves the National Ambulance Service and multidisciplinary teams providing alternative pathways to EDs.

I trust the above information indicates the measures in place, and future plans which will all contribute to improving the delivery of unscheduled care to our patients.

Yours sincerely,

*Jacqueline McNulty*

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