

04th February 2022

Deputy Duncan Smith, Dáil Éireann Leinster House Dublin 2. Rannan na nOspideil Ghearmhíochaine Aonad <u>4A</u> – 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
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Dublin 8.

<u>PQ 3121/22</u>* To ask the Minister for Health the number of cancelled appointments in the past year for hospitals for services for disabled persons; his plans to ensure disabled persons can access services and appointments

Dear Deputy Smith,

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

Since the onset of COVID in early 2020 to date as each wave of COVID has developed there has been significant disruption to scheduled care activity across Acute Services in terms of outpatient appointments, inpatient and daycase services. Cancelled services have been directly as a result of National Guidance or Hospital decisions that have been made at local level due to infection control risks, staffing challenges linked to COVID, localised outbreaks etc.

Interim guidance was developed in the context of all scheduled services to support resumption of activity in 2020. This guidance was approved by the Expert Advisory Group (EAG) and has been issued to all hospital groups/hospitals to support the resumption of scheduled care. This guidance outlined the measures that need to be undertaken to ensure safety for both patients and staff and vary depending on the type of appointment or treatment the patient is receiving. Key advice for both patients and staff has been provided depending on the above relating to measures required during the various steps in the Patient journey. In addition to the above, guidance has been provided specifically for individual specialties to support prioritisation of patients during this time of constrained activity.

These measures were implemented as services resumed in 2020 however they are restrictive and have resulted in a reduction in capacity. The restrictions are multifactorial in the context of such elements as workflow, patient pathways, patient engagement and communication, infrastructure, physical distancing, capacity and

resources. The capacity available under these measures will vary from one site to the next and indeed from one service to the next.

In the latter part of 2020, as services adapted to new workflows and processes associated with providing care within a COIVD environment, the number of patients treated began to increase, however as outlined service provision have and can be disrupted and impacted by local COVID outbreaks or other conditions as a result of an outbreak.

Centralised data associated with patient activity is based on medical speciality and sub speciality, and centralised data would not capture if individuals attending these are doing so exclusively related to a medical condition or if this condition is secondary or in conjunction to them having a disability.

With specific reference to your request in terms of details of Hospital appointments that have been cancelled in the past year, in this instance the National Treatment Purchase Fund (NTPF) are not in a position to provide the requested cancellation data, as within their remit they do not collect and collate cancellation activity, namely; numbers treated /cancellations, etc. There are challenges arising with the data collected by the NTPF, not all hospitals return cancellation information thus impacting a true reflection of overall numbers. In addition, there are a number of caveats related to data validity and furnishing this data would not provide an accurate reflection of the cancellation status nationally.

The NTPF have advised that releasing data that is heavily caveated is not ideal as these caveats are often missed or misunderstood, therefor in this instance the data will not be available.

Significant funding has been identified through the 2022 estimates process to support access to care. The HSE is working with Hospital Groups to ensure that available additional funding is targeted at access to care for patients where care delivery has been affected by the Pandemic.

I trust that this answers your question.

Yours sincerely,

Trish King

General Manager Acute Operations

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