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Géaroibríochtaí

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Deputy David Cullinane  
Dáil Éireann  
Leinster House  
Dublin 2

15 June 2022

**Re:** Parliamentary Question (PQ) 29684/22

Dear Deputy Cullinane,

I refer to the following parliamentary question which you recently submitted to the Health Service Executive;

***PQ 29684/22** - To ask the Minister for Health the number of scheduled care cancellations, by appointment type in the month of May, by hospital group and hospital in tabular form; the cause of cancellations that is hospital initiated, patient initiated and so on; and if he will make a statement on the matter.*

This response to the above parliamentary question will define a hospital initiated scheduled care appointment cancellation and the likely reasons for a cancellation. The rescheduling of patient appointments, including patient initiated appointment cancellations is also addressed in the response below. The Health Service Executive does not collect data in relation to patient initiated cancellations of scheduled care appointments.

Appendix I identifies the number of hospital initiated appointment cancellations in the month of May 2022.

#### **I. Definition of a hospital initiated inpatient/day case or outpatient cancellation**

A hospital initiated cancellation of a scheduled care appointment is defined as the rescheduling of a patient To Come In (TCI) date by the hospital due to circumstances beyond its control.

#### **II. Reasons for cancellation of scheduled care appointments**

Hospitals may have to cancel scheduled care appointments due to factors outside their control including the following;

- I. Increased ED attendances and admissions resulting in a requirement for surge inpatient bed capacity
- II. Unforeseen circumstances, e.g. weather events, infection outbreaks or industrial action.

#### **III. Rescheduling of hospital initiated inpatient/day case appointments**

Hospitals endeavor to provide the patient with as much notice as possible in relation to the cancellation of elective inpatient/day case appointments. The National Inpatient, Day Case, Planned Procedure (IDPP) waiting list management protocol 2017 issued by the National Treatment Purchase Fund requires hospitals to reschedule elective care appointments within six weeks of cancellation, subject to patient confirmation regarding their availability to attend. Clinical guidance must be sought when managing and rescheduling patients appointments cancelled by the hospital. This is necessary to ensure that urgent and vulnerable patients are rescheduled appropriately. Patients cancelled by the hospital will not have their waiting list date reset.



#### **IV. Rescheduling of hospital initiated outpatient appointment cancellations**

In accordance with the 'Management of Outpatient Services 2.1, OSPIP 2014' following a hospital cancellation;

- I. Urgent patients must be rescheduled and seen within one week
- II. Semi-urgent and non-urgent patients, issued with the next available appointment slot based on their clinical prioritisation category and clinically recommended timeframe.
- III. In accordance with best practice, semi-urgent and non-urgent patients, where possible, should be rescheduled and seen within three weeks.
- IV. If there is no available capacity within these timeframes, the clinician must be informed, and allocate the next available appointment unless otherwise instructed.
- V. Hospital cancellations do not incur a wait time clock reset.

#### **V. Hospital initiated cancellations in May 2022**

The Health Service Executive's Business Intelligence Unit is working with Hospitals and Hospital Groups to develop a robust process for the collection of data on hospital initiated cancellation of patient appointments.

Appendix I (attached excel workbook) shows the details of hospital initiated cancellation of patient appointments in the month of May 2022. Work is ongoing to validate the data and in this context the data may be subject to change.

#### **VI. Patient initiated cancellation of inpatient/day case appointments**

When a patient cancels a first To Come In date they are informed that if they cancel a second appointment or if they fail to attend the appointment, they will be removed from the waiting list. Clinical guidance must be sought when managing urgent and/or vulnerable patients who cancel an appointment. Following clinical review, it is sometimes necessary to assign another appointment. It is mandatory that the source of referral and the GP are notified of the patient's cancellation history. Patients must also be notified that as a result of their cancellation their waiting list clock will restart at national level. The patient's waiting list clock will not be restarted in the event that they cancel a TCI date due to clinical reasons.

#### **VII. Patient initiated cancellation of an outpatient appointment**

If a patient or their guardian cancels and requests to reschedule an outpatient appointment, they should be offered a second appointment with regard to their clinical prioritisation category. Patients clinically prioritised as urgent should be given a new appointment date immediately. A patient or guardian who cancels and requests to reschedule an appointment on two or more occasions should be brought to the attention of the clinician who will determine if they should be offered an additional appointment or be discharged back to the referrer.

In some cases patients can be identified by the clinician as urgent and/or high clinical and/or social needs from the information contained in their referral letter or medical record. Consideration should be given to the management of patients identified as high clinical need and/or social needs throughout the outpatient pathway. A patient who is not identified by a clinician as urgent and/or high clinical and/or social needs on their referral letter should be removed and returned to their GP and/or source of referral.

I trust the above response answers the parliamentary question to your satisfaction.

Yours sincerely,

**Carmel Beirne  
General Manager  
Acute Operations**