

Draft Notes & Actions - ED Taskforce Implementation Oversight Group Meeting

Date: Time: Venue: Chaired by :	Monday 8th May 2017 3.30pm – 5.30pm Hawkins House Mr. Tony O'Brien and Liam Doran, General Secretary, INMO
Members attending	<ul style="list-style-type: none"> • Mr Tony O'Brien (TOB), Co-Chair • Mr Liam Doran (LD), Co-Chair • Minister Simon Harris, Minister for Health (SH) • Mr Liam Woods (LW) • Mr John Hennessy (JH) • Ms Angela Fitzgerald (AF) • Mr Stephen McMahon (SMcM) • Professor Garry Courtney (GC) • Dr. Gerry McCarthy (GMcC) • Dr Colm Henry (CH) • Ms Rosarii Mannion (RM) • Dr David O'Hanlon (DOH)
Apologies	<ul style="list-style-type: none"> • Mr Pat Healy • Mr Michael Fitzgerald • Mr Paul Connors • Mr Damien McCallion • Ms Tracey Conroy • Ms Grace Rothwell • Professor Mary Day • Ms Stephanie O'Keeffe
Attendees	<ul style="list-style-type: none"> • Ms Marita Kinsella (MF) • Ms Sarah Cooney (SC) • Ms Alison Geraghty (AG) • Ms Noreen Moran (NM) • Ms Anne Keating (AK) • Ms Ann Martin (AM) • Ms Breda Naddy • Ms Samantha Rayner (SR) • Sheila Corcoran Baxter – Secretariat
Agenda Item	
Notes and Actions from Meeting 13th March 2017:	
	<p>TOB noted the Minutes and Actions arising from the previous meeting of 13th March 2017.</p> <p>AK noted an amendment was necessary to conversion rates quoted under Item 4. It should have read: conversion rate 32%.</p> <p>Subject to this amendment the Notes and Actions were approved.</p>

<p>1. Update from Social Care :</p>	
	<p>SR provided a general update from Social Care noting the following:</p> <ul style="list-style-type: none"> a) Delayed discharges currently at 570 b) Social care continuing to support Transitional Care (TC) beds. There has been a significant increase in demand for Q1 with approvals averaging at 200 beds per week or 40 beds per day. The Service Plan target is 152 beds per week. This will need to continue to be monitored to ensure sufficient funding is available for winter months. c) Fair Deal– processing times remaining within 4 weeks of application and this will continue for the foreseeable future. d) National Community Bed Bureau is now live nationally and all Acute Hospitals and Community requesting sites have access. <p>SMcM queried the visibility of patients transitioning from TCB's. AF stated that visibility and oversight was by Community colleagues.</p> <p>LD expressed concern about the Mater's access to TC beds. SR informed the meeting that there were no issue regarding access. SR and LD to discuss off line.</p> <ul style="list-style-type: none"> • SR and LD to discuss issues regarding access to TC beds and the Mater Hospital <u>Follow up action required.</u> <p>SH stated that some hospitals, for example St Colmcille's, were not using the TC funding available to them. SR advised the Head of Social Care in that area was currently following up on this and there would be further information available for the next meeting.</p> <ul style="list-style-type: none"> • SR to provide an update on TC funding utilisation for next meeting of the ED Taskforce Implementation Oversight Group <u>Follow up action required.</u>
<p>2. Update from Primary Care:</p>	
	<p>JH provided an update from Primary Care, noting the following:</p> <ul style="list-style-type: none"> a) Decrease in attendances to GP Out of Hours in Q1 2017 approximately 90,000 – 100,000 per week b) National review of GP Out of Hours services underway to be completed by June 2017 c) CIT and OPAT across 13 sites with approximately 35,000 patient referrals year to date – averaging 700 patients/week, with new services bedding down and oversight by local PHN. d) Diagnostics – 8 centres in operation accounted for 16,000 ultrasounds in 2016, scheduled to rise to 20,000 in 2017 e) Social Inclusion – 4 clinics currently operating in Dublin with further clinics to open in Dublin and Limerick f) Palliative Care – some delays due to building works in Kerry and due to recruitment of Clinical Nurse Specialists g) Aids and Appliances - €5m investment last year helped reduced Delayed Discharges <p>The group discussed the work of outreach clinics and the services provided within communities.</p>

	<p>SH requested a review of the Out of Hours services to identify any ‘blackspots’ where the service is unavailable. JH informed the group that a number of areas such as Dublin, Limerick and Wicklow remain outside the structured system. JH informed the Group that there was opportunities to tweak the services in Cork and stated that the South Tipperary service was working well. AF stated that data was available showing a correlation between level of ED presentation and the availability of GP Out of Hours service.</p> <p>LD queried if there was a correlation between the availability of CIT and trolley numbers.</p>
<p>3. Activity Performance Overview (March Data): /</p>	
	<p>AK and AF provided an update from SDU AHD noting the following:</p> <ul style="list-style-type: none"> • Increase in admission of 0.6% - resulting in cumulative impact on available beds and AvLOS dependent turnaround time. • The on-going increase in number of older persons (over 75) presenting and being admitted. • AF outlined that the 30DMA had shown a decrease of 8% with some site performing very well while other sites were of concern. • Focus Sites – AK provided an update on the performance of the Focus Sites. • AK informed the meeting that the SDU were in the process of conducting close out visits with the Focus Sites in May 2017. <p>LD queried the performance of Portiuncula Hospital with AK informing the meeting that a combined SDU and Saolta Group intervention had led to an improvement at the site.</p> <p>LD stated that the INMO were not being informed of FCP by all sites. AK will follow up with each site to ensure notification of FCP.</p> <ul style="list-style-type: none"> • AK to check with John Joyce to ensure that LD on FCP notification list – same confirmed. <p>SH acknowledged the improved performance of the focus sites compared with last year but expressed concern about CUH.</p> <p>SH also sought clarification on conflicting trolley figures produced by the INMO and HSE. LD outlined the different metrics measure resulting in conflicting numbers. AK and DMC will meet with LD to align the figures going forward.</p> <ul style="list-style-type: none"> • AK to liaise with LD to discuss the alignment of TrolleyGar and Ward Watch before the next meeting of the Taskforce Implementation Oversight Group <u>Follow up action required.</u>
<p>4. HR Nursing Update:</p>	
	<p>RM provided an update of the on-going nursing recruitment campaign outlining an increase in recruitment with the aim of reaching the recruitment target for the year.</p> <p>SH acknowledged the work of HSE and INMO in leading to an increase in recruitment. SH queried the numbers of bed closures due to staff shortages.</p> <ul style="list-style-type: none"> • AF to provide data on number of bed closures as a result of staff shortages <u>Follow up action required.</u>

	<p>GC queried the number of NCHD's recruited to date this year.</p> <ul style="list-style-type: none"> • RM to provide update off line <u>Follow up action required.</u> <p>LD acknowledged the efforts of RM and her team in driving the recruitment campaign but noted that the number of staff nurses had decreased.</p>
5. Model of Care Moving Forward – Emergency Medicine Programme:	
	<p>GMcC discussed the work of the Emergency Medicine Programme in understanding the services provided by EDs and LIU's and the streamlining going forward to ensure patients were treated in the right place by the right person at the right time. CH noted the upcoming Trauma Report.</p> <p>SH acknowledged GMcC's paper and asked for further discussion on this topic at the next meeting of the ED Taskforce.</p> <p>FOLLOW UP ACTION -TO REMAIN ON THE AGENDA.</p>
6. Update re GE Programme:	
	<p>AK provided an update on the GE Programme noting the following:</p> <ul style="list-style-type: none"> • 2 Kaizens to take place in May • GUH examining medical flow • UHL examining discharge planning • Clinicians assigned in both sites • Increasing stakeholder engagement noted.
7. Schedule of Further meetings:	
	<ol style="list-style-type: none"> 1. Monday 3rd July 2017 at 2pm – DSH 2. Monday 4th September 2017 at 2pm – DSH 3. Monday 4th December 2017 at 2pm - DSH
8. AOB	
	<p>There was no other business.</p>
Actions	<ul style="list-style-type: none"> • SR and LD to discuss issues regarding access to TC beds and the Mater Hospital • SR to provide an update on TC funding utilisation for next meeting of the ED Taskforce Implementation Oversight Group • AK to liaise with John Joyce to ensure LD is on the FCP email notification list (same confirmed) • AK /DMC to liaise with LD to discuss the alignment of TrolleyGar and Ward Watch before the next meeting of the Taskforce Implementation Oversight Group • AF to provide data on number of bed closures as a result of staff

shortages.

- **RM to provide update on NCHD recruitment to GD off line**
- **SCB to include Model of Care Moving Forward – Emergency Medicine Programme on the Agenda of the next meeting.**