

Notes & Actions - ED Taskforce Implementation Oversight Group Meeting

Date Time Venue Chaired by	2nd November 2015 8:30am – 11.00am Training Room 1, Brunel Building, Heuston South Quarter Tony O'Brien, Director General, HSE
In attendance – (Members) :	<ul style="list-style-type: none"> • Leo Varadkar – Minister for Health • Tony O'Brien – Director General, HSE • Liam Woods – Interim National Director, Acute Hospital Division, HSE • Liam Doran – Irish Nurses & Midwives Organisation • Brian Murphy – Special Advisor to Minister Varadkar • Angela Fitzgerald – Deputy National Director, Acute Hospital Division, HSE • Tracey Conroy – Department of Health • Gerry McCarthy – HSE Emergency Medicine Programme • Steve McMahon – Irish Patients Association • John Hennessy – HSE National Director Primary Care • Pat Healy – HSE National Director Social Care • Gary Courtney – HSE Acute Medicine Programme • Mary Day – CEO, Ireland East Hospital Group • David Hanlon – Group Lead Primary Care Integrated Care Programme • Michael Fitzgerald – Head of Operations & Service Improvements for Older People, Social Care • Siobhan Kennelly – National Clinical Programme for Older People • Colm Henry – National Clinical Advisor and Group Lead for Acute Hospitals, HSE • Anne Keating – SDU
In attendance	<ul style="list-style-type: none"> • Paul Connors – Head of Communications, HSE • Rosarii Mannion – National Director, HR, HSE • Miriam Joyce – Department of Health • Avilene Casey, Exec. Performance Improvement Lead, Office of the Director General, HSE • Ann McCloone – Lead for Communications, for Acute Hospitals, HSE • Willie Reddy – SDU • Fionnuala Duffy – Department of Health • Brian O'Dwyer – 'Project Vision' Manager • Killian Keogh – 'Project Vision' • Brigitte Burke - HSE Acute Hospitals Division, HSE • Catherine Cullen - HSE Acute Hospitals Division, HSE
Agenda Item	Notes and Actions
Notes & actions of previous meeting	<p>The notes and actions of the meeting of 12th October were discussed and amendments were agreed.</p>
Progress Report on Agreed Integrated Winter Resilience Plans: (a) 8 focus sites (b) Winter Initiative, including staff recruitment	<p>Angela Fitzgerald presented an update in relation to the winter resilience plans and advised as follows:-</p> <p>Trolley Targets / Volumes</p> <ul style="list-style-type: none"> • The new lower 9 hr daily of 64 has been implemented. • Significantly improved sites re 9hr target include St. James's and St. Vincent's • Sites for more targeted engagement include Tallaght and Naas – St. James's to mentor those sites. development (Actions: RM to engage directly with Dublin Midlands HG, Naas and Tallaght re staffing issues) <ul style="list-style-type: none"> • It was noted that Portlaoise was now appearing as 'Red' which was a new

development **(Actions: AF/LW to work with HG, to identify emerging issues in Portlaoise)**

Improved sites – Key Characteristics

- Evidence available indicates that key contributors to improvement were the sustained reduction in DDI numbers (St. James's, St. Vincent's) and 'Speciality Intake' (St. James's, St. Vincent's, Limerick and Connolly) and the continuing development of Frail Elderly Pathway.

Garry Courtney advised the meeting that four Surgical Assessment Units were now in place and working well. He further noted that there is provision in the National Surgical Programme for 'Speciality Intake'. It was agreed that the further implementation of the Programme would be supported. Liam Woods offered his full support.

Steve Mc Mahon requested further information regarding the number of beds in the system, by hospital. **(Action : AF to issue)**

Winter Planning Follow up Actions

- Winter Plan Preparedness - Plans for four HG's provide strong evidence of preparedness to ensure improved performance over the winter period. Two HG's (Dublin Midlinds & RCSI) require further engagement. **(Action: AF / LW to progress)**
- CIT – increase in overall uptake of 30% advised. Evidence is available of improved CIT uptake in three sites including Naas, OLOL and Galway. Collaborative work is ongoing to increase clinical governance and overall update. **(Action: JH/LW/AF to continue working collaboratively to improve uptake)**
- Diagnostic – more capacity can be generated through improved structuring of the day, vetting of ordering process by senior decision makers (example MRI triaging in St. Vincent's, and St. James's implementing 8am to 8pm) **(Action: AF/GC /LW to progress)**
- Risks – key risks and actions to mitigate were presented. The challenges regarding nursing recruitment and retainment was discussed and Mary Day advised that the Nurse Bank was now in place in IE and that the benefits will be fully realised in 2016.

The meeting was further advised that hospitals with applications from nurses with geriatric experience were cognisant that there are vacancies in the community also. Gaps in nursing home bed capacity was discussed and it was noted that Waterford and Clonmel had particular challenges.

Liam Doran queried the situation regarding Cuan Ros and was advised by Pat Healy that there is a dedicated team looking at staffing of this facility. He further advised that HIQA has allowed the facility to remain open into Spring 2016.

Liam Doran put the group on notice that there may be local IR/HR issues with regard to the outsourcing of nursing recruitment in relation to opening 31 beds in Cork. It was noted that there was no alternative other than leave beds closed.. Rosarii Mannion noted these concerns and advised that she will take up the issue with HG **(Action: RM to review IR concerns with SSWHG/CUH)**

- Closed Beds – The meeting was advised that of the 120 beds closed on 20th October approximately 100 would open by end of November plus an additional 10 beds in Sligo. Approval to open 11 additional beds in Naas was discussed and the meeting was advised that evidence of improvements in internal processes and senior decision making on this site would need to be in place before this proposal

	<p>could be considered.</p> <ul style="list-style-type: none"> • Winter Capacity – Additional Funding – All sites reported as Green or Amber with two sites, Tallaght and Navan in ‘Red’ category. <p>The meeting was advised of good engagement with Beaumont and it was agreed that support should be given to the Board and CEO in their efforts to address the challenges in ED.</p> <p>It was noted that in OLOL a modular building is being used creating additional bays to support the ED which is very small.</p> <ul style="list-style-type: none"> • Escalation Policies – Angela Fitzgerald advised that there was evidence of very good practice across the system, with CUH noted as a particularly good model. Work to continue with less developed sites to review further escalation thresholds and actions. It was agreed that escalation needs to be triggered before a critical level is reached with beds on wards to be the last action taken. Liam Doran raised concerns regarding the level of awareness of, and engagement with, key staff and IMO representatives within the hospitals in relation to the implementation of the Escalation Policies. Concerns were also raised regarding the governance and standardisation of policies across the hospitals. This point was accepted and it was agreed that the level of communication and awareness of escalation procedures would be reviewed (Action: AF/LD to engage with ND and HG’s) • Oversight Arrangements - Angela Fitzgerald advised that the appointment of Head of Special Delivery Unit was progressing well with interviews scheduled for 9th November. The meeting was also advised of the establishment of a Clinical Advisory Team with representation from the National Clinical Programmes, SDU, Acute Hospital Division, Clinical advisors and external input from NHS. Angela Fitzgerald confirmed that nurses would be represented on this group. The meeting was advised that an interim CEO had been appointed in RCSI with a CEO about to be appointed. <p>It was agreed that the Minister would be provided with weekly updates on the capacity coming on stream (Action: AF/LW to provide weekly capacity updates to DoH)</p>
<p>Progress Report on Agreed Integrated Winter Resilience Plans: (c) CHO engagement</p>	<ul style="list-style-type: none"> • It was agreed that in some areas there needed to be better engagement with CHO’s. • John Hennessy advised that palliative care beds in the GUH will be opening in November. • The meeting was advised that although some CHO’s were experiencing financial deficits, services continued to be provided. • It was noted that no constraints were being applied on nursing home care. North Dublin and the West are articulating concerns re HIQA, private nursing home beds and CIT. • In response to a query regarding the challenges in Cork in relation to home care, Pat Healy advised that private provision is limited. • With regard to Northern Cross- a proposal has been put to the board but there are a few issues to be ironed out. Tendering team has been identified, tender still has to be agreed but it is entering critical phase, Registration of nurses is an issue but not the main block. . • CIT - It was agreed that governance issues in relation to the overall management and engagement across divisions needed to be reviewed (Action: JH to progress)

	<ul style="list-style-type: none"> • John Hennessy advised the meeting that work on initiatives for hospital avoidance continues. The meeting was advised that COPD is a major cause of unplanned admissions. The Minister raised the OECD stats regarding COPD and it was agreed that the Clinical Care Programme for COPD needs to be revitalised. (Action: CH/LW to review the implementation of this Programme) • GP access to Diagnostics – Concerns regarding problems arising in relation to Euromedic scanning facility were raised. It was agreed that there needs to be agreed clinical protocol and quality assurances put in place. It was suggested that putting the results on NIMIS would eliminate much of the concern. (Action: JH to engage with HG’s to explore options)
Progress report on actions identified at last meeting:	<p>Delays in access to diagnostics – direct access for GPs Task transfers – Rosarii Mannion noted that she intended to progress as a matter of priority in collaboration with INMO (Action: RM to progress)</p> <p>The issue of the Triage nurse role in x-ray, early access to diagnostics was discussed and Liam Doran queried how this can be moved forward. It was agreed that Liam Woods and the HG CEO’s would support IMNO regarding triage nurse training and LIT. (Action: LW to support HG’s re implementation)</p>
Engagement with Stakeholders	<p>Tony O’Brien advised the Group that he met with the IMO and they would like to be part of the engagement.</p> <p>Liam Doran suggested that it would be helpful to have a formal constructive engagement with key officials from stakeholders i.e. Siptu, Impact, ICHA (Action: RM to progress through the HR Directors Joint Union Forum)</p> <p>It was agreed to share the ED Taskforce Implementation Plan with the former ED Taskforce members. (Action: AF/LW to provide update – to be signed by Co-Chairs and issued)</p>
AOB	<ul style="list-style-type: none"> • Steve McMahon raised an issue regarding HIQA standards in relation to nutrition / hospital food. • Practice regarding hospitals and community pharmacies re bouncing costs across divisions was mentioned. • Liam Doran gave notice of upcoming meetings of INMO and that INMO would be releasing the figures for October and that they will also be writing to HSE/Minister.
Future Meetings	Next Meeting will be held on Monday 30 th November at 08:30 in the Brunel Building