

Scheduled Care Network Webinar

Waiting List Action Plan – ‘Beyond the Wait’

Monday 31st March 2025

Ms Sheila McGuinness

Director Access Programme



Waiting List Action Plan ‘Beyond the Wait’

Press release

Minister Carroll MacNeill publishes the Waiting List Action Plan 2025

From [Department of Health](#)

Published on 12 February 2025

Last updated on 20 February 2025

- focus on further reductions in waiting times for scheduled hospital care
- funding of €420 million has been allocated to the WLAP 2025

Minister for Health Jennifer Carroll MacNeill has today (12 February) published the Waiting List Action Plan (WLAP) 2025, Government’s commitment to reducing waiting times for patients and improving access to hospital care.

Contact us: Access.Programme@hse.ie



[Link to Waiting List Action
Plan 2025](#)

Waiting List Action Plan 'Beyond the Wait' Welcome to our First Webinar



The illustration shows a waiting room with a green sofa, a potted plant, a water dispenser, and a door. Five people are present: a staff member standing on the left, and four patients (three on the sofa and one in a wheelchair) waiting. The text 'Reducing patient waiting times' is overlaid on the illustration, along with the HSE logo.

Reducing patient waiting times

The Waiting List Action Plan 2025 'Beyond the Wait'
Join our webinar to discover how the action plan aims to improve access to care for patients and more

Register now

 **Monday 31 March 2025**
12:00pm - 1:00pm

Waiting List
Action Plan
2025

[Link to Waiting List Action Plan 2025](#)

Timing	Agenda Item	Speaker
12.00 – 12.10	Waiting List Action Plan ‘Beyond the Wait’ Welcome and Introduction	Sheila McGuinness Director, Access Programme
12.10-12.20	Delivering Capacity in 2025 and for the future	Ms Marianne O’Connor Access Lead
12.20 – 12.30	Reforming Scheduled Care	Ms Emma Smyth Access Lead
12.30 – 12.40	Enabling Scheduled Care in 2025 and into the Future	Ms Trish King Access Lead
12.40 – 12.55	Q&A	All Speakers
12.55 – 13.00	Thank you & next Steps	Sheila McGuinness





Housekeeping



Please note that this session will be recorded



Please remain muted during the presentation



Please **Type questions** to our Q&A feature
We will do our best to answer any questions at the end.

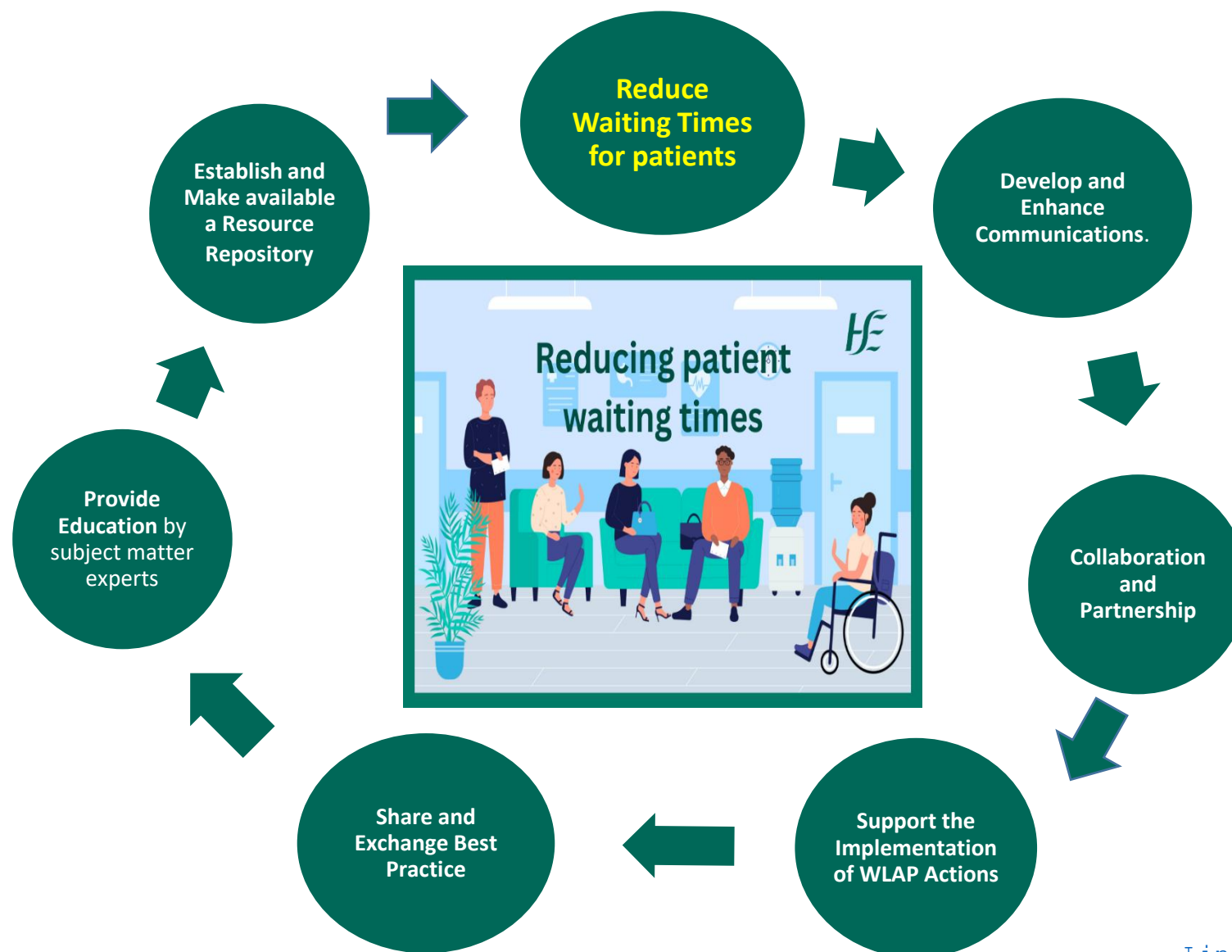


Please complete the **survey** at the end of Webinar to tell us what you need to know in Scheduled Care

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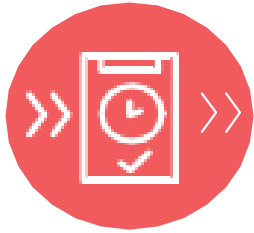
[Link to Waiting List Action Plan 2025](#)

Introduction to Scheduled Care Network of Practice



Introduction to Scheduled Care Webinars

Webinars –monthly on *key areas of focus*



Delivering Capacity **June 25th**



Reforming Scheduled Care **April 30th**



Enabling Scheduled Care **May 28th**

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[Link to Waiting List Action Plan 2025](#)

Waiting List Action Plan (WLAP) 2025 –Targets

WLAP 2025 – Where we are.

Number of Patients **Waiting** the Longest for Care

77.5% reduction (Dec 2024) in the number of patients waiting > **24 Months** or at risk

% of Patients **Waiting** Less than 12 Months for Care

OPD: 84.3 % of patients waiting < 12 months

Weighted Average **Wait** Time

6.8 months

Sláintecare **Wait** Time Targets (OPD <10 weeks; IPDC <12 weeks)

30.5 % overall

WLAP 2025 – Where we need to go.

Number of Patients **Waiting** the Longest for Care

90% reduction in the number of patients waiting > **24 Months** or at risk

% of Patients **Waiting** Less than 12 Months for Care

OPD: 90% of patients waiting < 12 months

Weighted Average **Wait** Time

5.5 months

Sláintecare **Wait** Time Targets

OPD: 50%
IPDC : 50%

Ms Marianne O'Connor

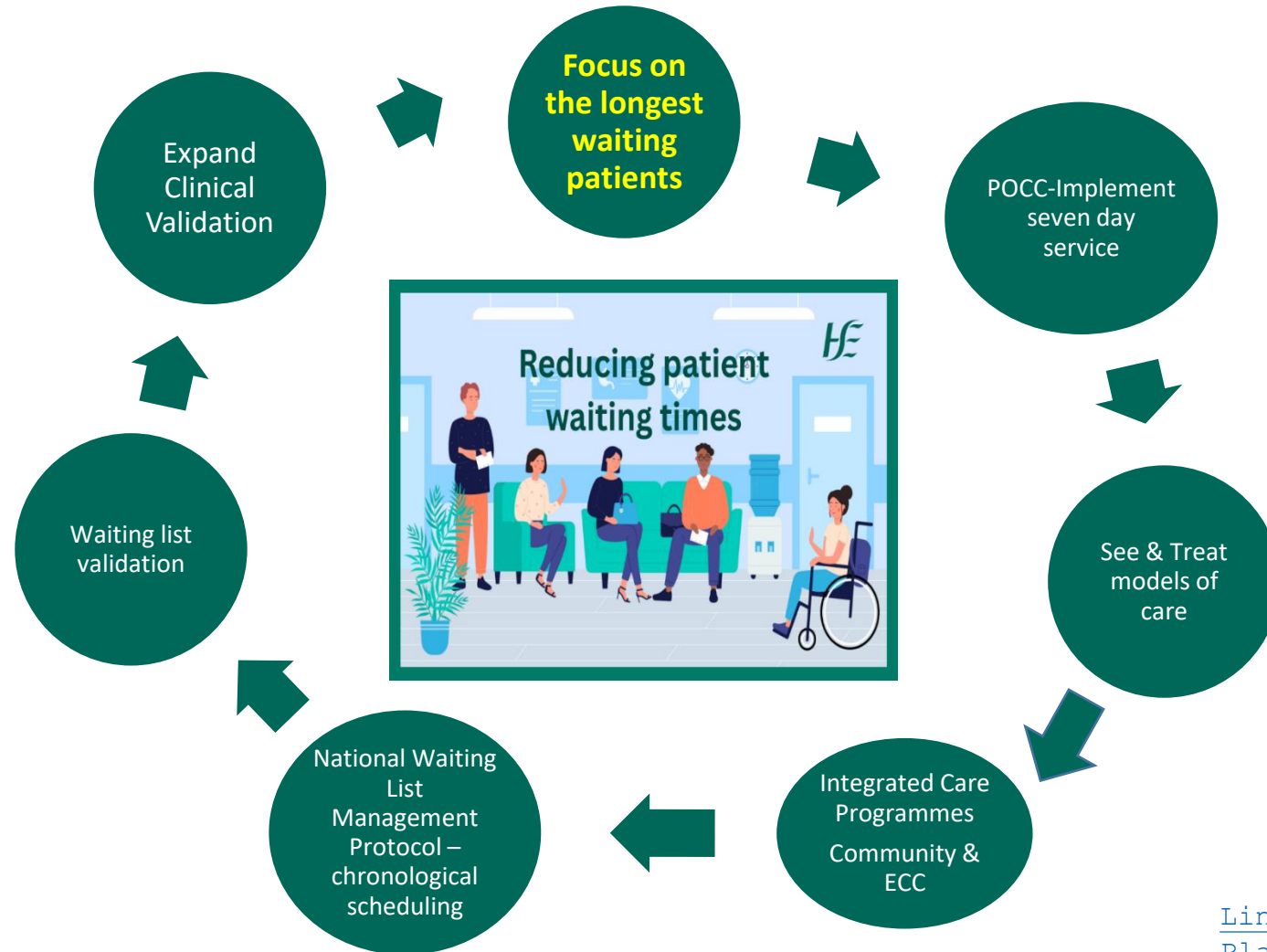
Delivering Capacity 2025 and for the Future



Delivering Capacity in Scheduled Care- Core Activity

HSE Capacity Optimisation

Ongoing focus to maximise the **impact of core activity** to achieve NSP targets, improve access for patients and reduce patient wait times



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[Link to Waiting List Action Plan 2025](#)

Delivering Capacity in Scheduled Care-2025 WLAP Actions



Action #	Action Title	Action Narrative
1	Capacity Optimisation – Additional HSE Insourcing (HSE)	<p>HSE ATC funding for non-recurrent initiatives. Non recurrent initiatives describes any funded additional activity that is delivered above hospital's core activity, and can be delivered within the hospital.</p> <p>Outline of process to request HSE ATC insourcing funding</p> <ul style="list-style-type: none"> Hospitals/ regions submit a request for Non-recurrent funding using Access to care funding template. All additional activity funded through Access to Care must be above core activity and support achievement of WLAP wait time targets. Funding letters will be issued to hospital sites/ region. All reporting of additional activity will be reported via the Access to care/ UAN portal once activity has been delivered.
2	Capacity Optimisation – Additional HSE Outsourcing (HSE)	<p>HSE have a surgical services and OPD framework in place that enables Hospitals to refer patients to private providers for procedure or OPD consultation (this is for procedures / specialties that are not available or provided by NTPF).</p> <ul style="list-style-type: none"> To access this Funding, Hospitals will raise referrals via the UAN portal, once capacity has been identified in private hospital and patient has accepted offer of care. Reporting of the utilisation of this activity will be available at both regional and hospital level Payment of this activity is made directly to the provide provider is through the Access to care portal (Claims system)
3	NTPF – Commissioning (NTPF)	<p>Commissioning is one of the primary roles that the NTPF is funded for and the HSE will continue to liaise with NTPF regarding targeted commissioning.</p> <p>In 2025, the NTPF will extend the current range of specialties and procedures tendered to better support the longest waiting patients nationally. Schedule care teams to liaise with NTPF to maximise commissioned offers of treatment for waiting list patients</p>
4	NTPF – Validation (NTPF)	<p>Validate patients on OPD and IPDC waiting lists more than 3 months.</p> <p>Target - provide 126,110 removals from waiting lists (108,829 OPD, 17,281 IPDC)</p>

Delivering Capacity in Scheduled Care-2025 WLAP Actions



Action #	Action Title	Action Narrative
5	NTPF – Triage & Clinical Validation (NTPF)	<ul style="list-style-type: none">Clinically validate 1,500 GI patients.
6	Surgical Hubs (HSE)	<ul style="list-style-type: none">Deliver 5,400 additional procedures as day case/Minor Ops.Deliver 450 additional OPD appointments.
7	New & Surveillance Endoscopy Capacity (HSE)	<ul style="list-style-type: none">There will be no people waiting > four weeks for access to an urgent colonoscopy.50% of patients waiting less than 12 weeks for a GI Scope appointment by end of year
8	HSE Community Capacity (HSE)	<ul style="list-style-type: none">Progress actions under Primary Care, Social Inclusion Services and CAMHS

Ms Emma Smyth

Reforming Scheduled Care



WLAP 2025 Reforming Scheduled Care

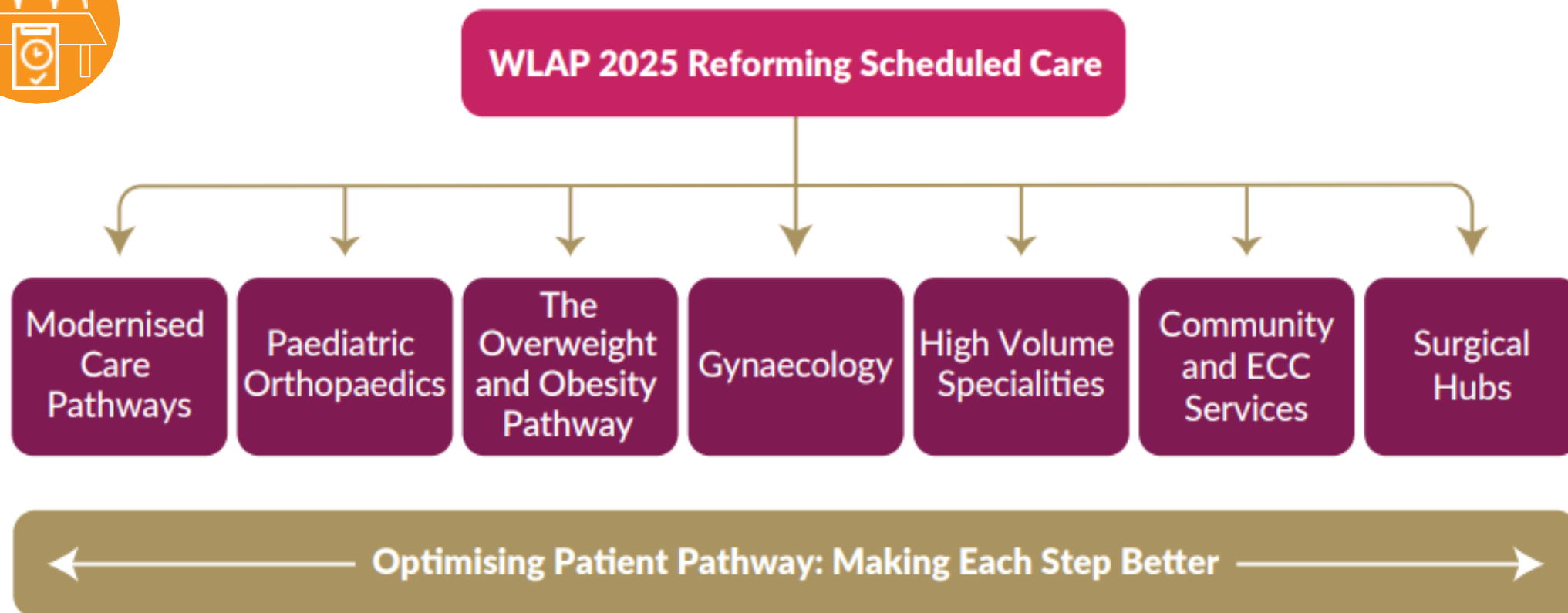


Figure 3.1: Illustrating the Portfolio of Reform Initiatives in WLAP 2025

Optimising the Patient Pathway through Scheduled Care

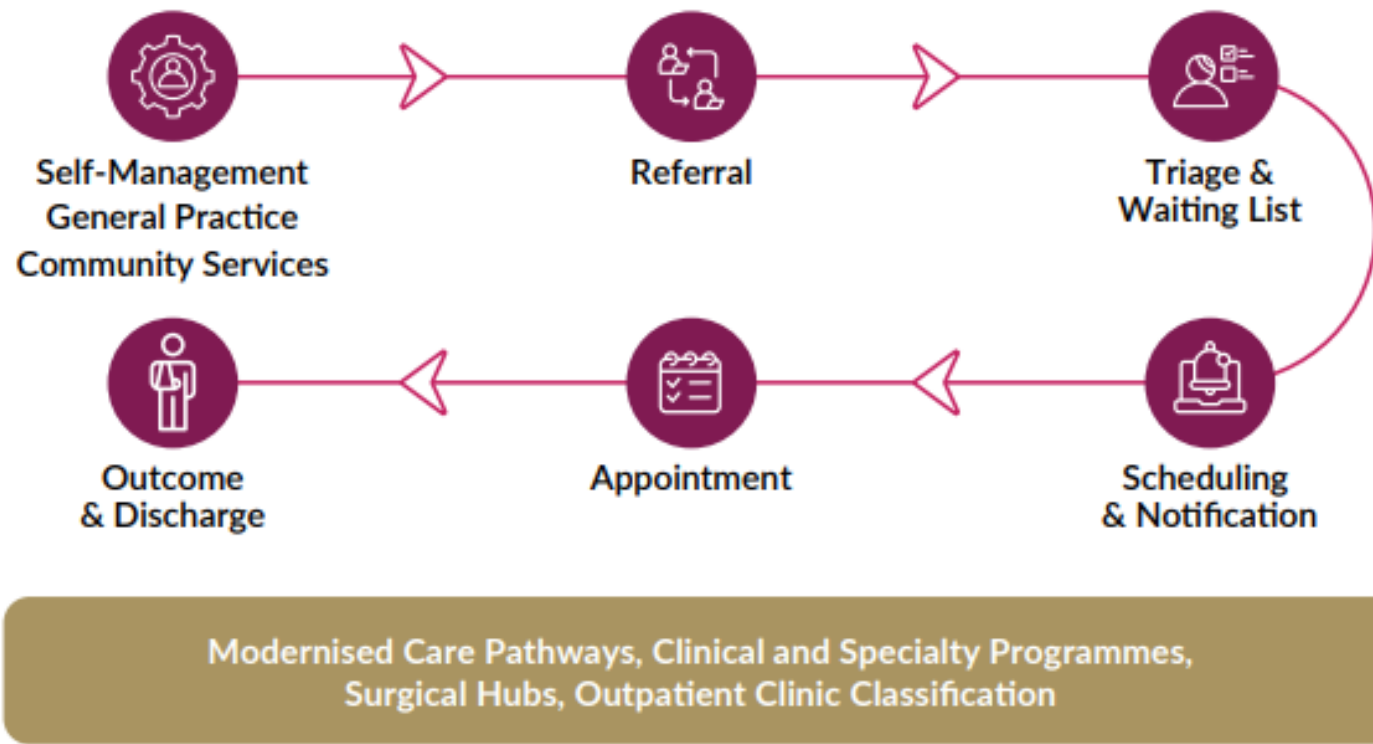
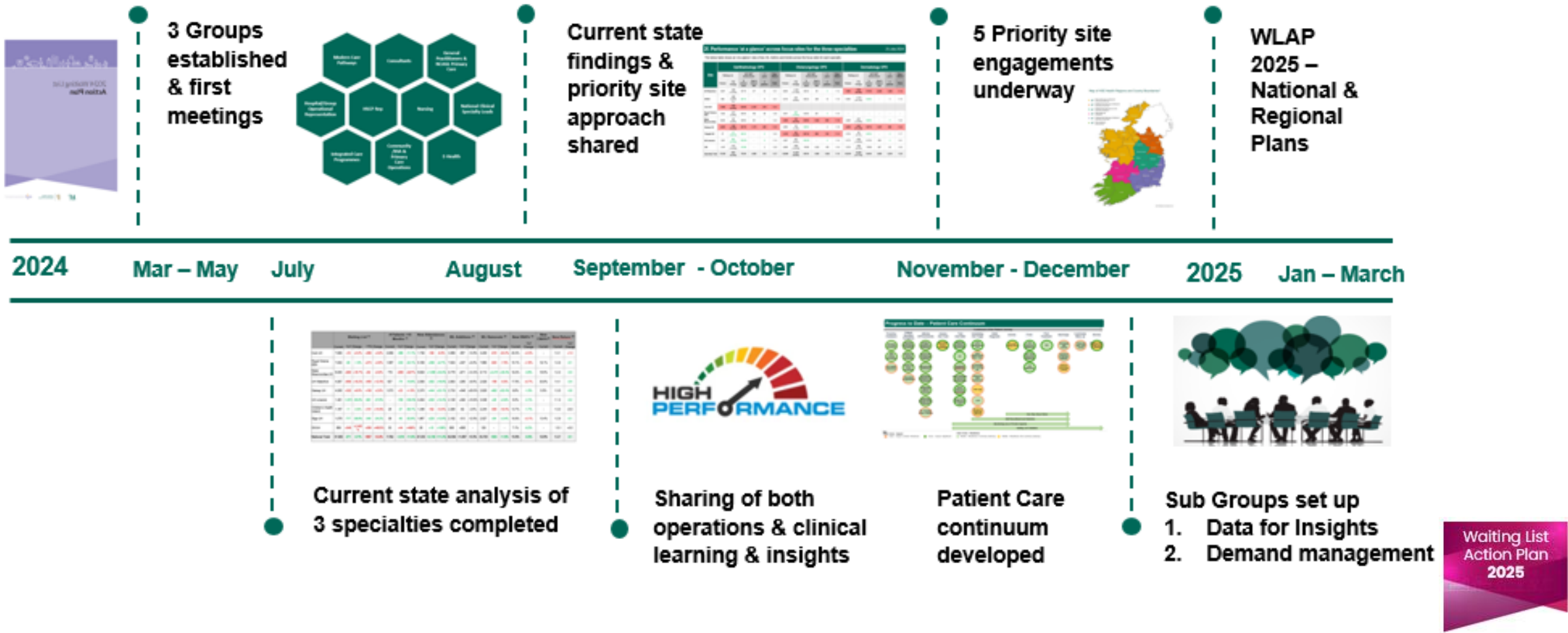


Figure 3.2: The Patient Pathway

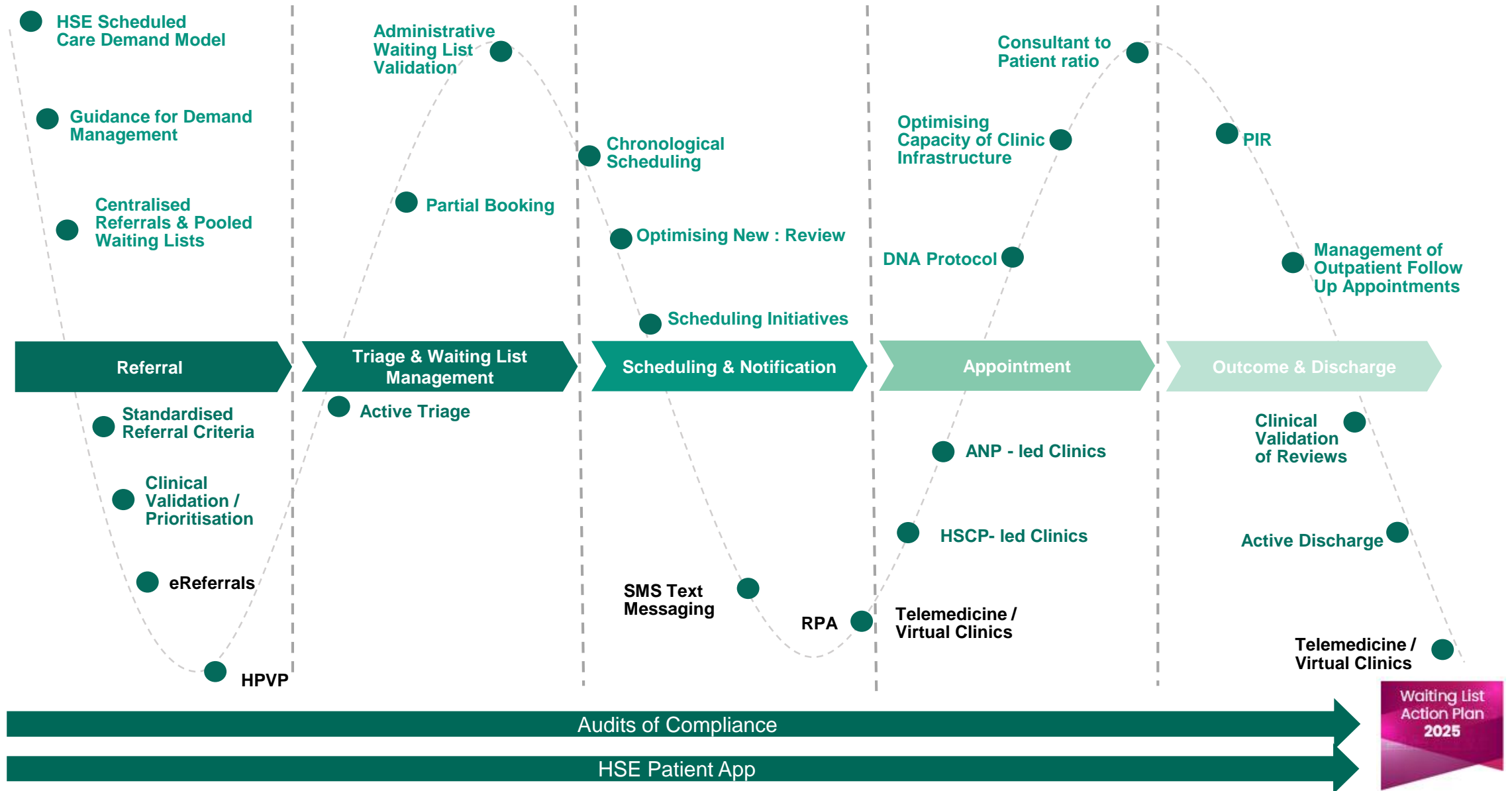


Delivering Sustainable Care Groups – High Volume Specialties Focus

Dermatology / Ophthalmology / Otolaryngology (ENT) / Plastics (later in 2025)



WLAP 2025 A Programmatic Approach to Improving the Patient Journey



Ms Trish King

**Enabling Scheduled Care in 2025 and
into the Future**



Enabling Scheduled Care



Action #	Action Title	Action Narrative
15	Integrated Patient Management System (IPMS)	<p>SMS:</p> <p>Enable two-way solution to go live in UHL, Ennis, Nenagh, Croom, St. John's, UHL Maternity, National Maternity Hospital (NMH).</p> <p>Assess and determine the requirement for enablement in further sites.</p> <p>E-Referral Management Module</p> <p>Technically enable multiple sites to support the full implementation of the e-referral management module.</p> <p>Develop and share national guidance and toolkit to support roll out and implementation.</p>
16	Data Visualisation (HSE)	<p>IIS Scheduled Care Dashboard: addition of IHI to enrich datasets.</p> <p>Outpatient Attendance Dashboard: add 5 more hospitals to the dashboard.</p> <p>Data Visualisation: roll out to a further 5 hospitals.</p>
17	Robotic Process Automation (HSE)	<ul style="list-style-type: none"> Extend the rollout of RPA to manage patient suspensions to support removal of patients as part of ongoing validation cycles Expand the deployment of RPA in the areas of DNA and CNA management to all HSE Health Regions
18	Healthlink	<p>Endoscopy: Implementation of Healthlink's electronic referral form to all sites providing Endoscopy services</p> <p>High Volume Specialties: Implementation of specialised electronic referral forms for the High-Volume Specialties.</p>

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[Link to Waiting List Action Plan 2025](#)

Enabling Scheduled Care



Action #	Action Title	Action Narrative
19	Data Mining	Proof of value extension.
20	Telemedicine	Work in collaboration with regional structures and Clinical Leads to harness opportunities to: <ul style="list-style-type: none">• Provide OPD services virtually, in line with the specialty level model of care• Promote remote monitoring to support chronic health conditions• Increase access to educational resources
21	HSE Patient App (HSE)	Appointments: ability to view appointment details, receive appointment reminders Referrals and Waiting lists: ability to see waiting time information at hospital and specialty level and for the patient to be able to see what waiting lists they are on and the status of their referral. Self-care support: ability to access health, wellbeing and support information relating to their condition
22	Endoscopy Reporting System	Roll out to 5 hospitals in 2025

Section 3.2 WALP 2024 “Outpatient Clinic Classification”

HPO developed the Outpatient Clinic Group (OCG) for the purpose of reporting and funding hospital OPD clinics.

These clinics were grouped into a similar structure that reflects the allocation of cases to admitted patient Diagnosis Related Groups (DRGs).

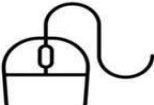
As this work progresses in 2025, working closely with the Regional Structures, Business Information Unit (BIU) and Access & Integration, the following is expected;

- Improving standardisation of patient activity through the minimum data set.
- Optimising work locally by collecting data once for multiple uses but with the consistency and comparability of a classification

Questions ?



Thank-you and Next Steps

- Thank-you for attending today
- We look forward to your feedback contained in our survey which can be filled out immediately after this Webinar.
- A copy of this Webinar will be made available on [Waiting List Improvements](#) and the link shared with all of you post Webinar.
- **Dates for your diary:**
 - ***April 30th WLAP 25 Reforming Scheduled Care***
 - ***May 28th WLAP 25 Enabling Scheduled Care***
 - ***June 25th WLAP 25 Improving Capacity Scheduled Care***
-  **Access.Programme@hse.ie**

