

Scheduled Care Network Webinar

Waiting List Action Plan- 'Beyond the Wait'





Sinéad Geraghty Access Programme



Join our webinar to discover how services are managing demand to improve access to care for patients

This month's topics are: Managing demand in Dublin South and Wicklow Mental Health Services and ENT Service in Our Lady of Lourdes Hospital

Register now



Thursday 26 June 2025 12:00pm - 1:00pm



Timing	Agenda Item	Speaker					
12.00– 12.05	Introduction	Sinéad Geraghty Access Team					
12.05-12.15	Beyond the Wait in Mental Health Services	Linda Moore					
12.15 – 12.30	Managing demand in ENT in OLOL	Ms Anel Naude ENT Consultant Ms Valerie Casserly CS Physiotherapist					
12.30 – 12.40	How to analyse demand on IIS						
12:40-12:55	Q&A	All Speakers					
12.55 – 13.00	Thank you & next Steps	Sinéad Geraghty					



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 during the session and at the end.



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





Access.Programme@hse.ie



Beyond the Wait in MHS

Ms Linda Moore



Key Focus for Mental Health Services (MHS)

- > Promotion of Mental Health
- > Prevention and Treatment of acute mental illness
- ➤ Maintenance of optimum health for persons experiencing enduring mental health problems

In line with National Policy & Legislation, Regulation, Rules and Codes of Practice.

CAMHs Standard Operating Procedure

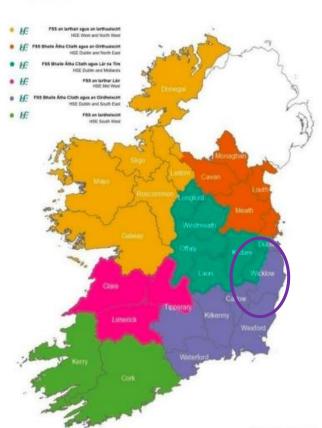
Considering Slainte Care - Alignment, collaboration and access to other services



MHS IHA Dublin South Wicklow - Overview

- Acute Inpatient Services 3 approved centres
- Liaison Psychiatry provided at SVUH
- CAMHS Teams and Crises Hubs
- Adult Community Mental Health Services MDT
- Crises Team and Solace Café
- Psychiatry of Later Life
- Mental health of Intellectual Disability for Children and Adults
- Adapt- ADHD
- Rehabilitation Services
- Community Residential
- Continuing Care Residential Services
- National Counselling Service
- Eating Disorders Team Catchment area wide with specialist beds at SVUH
- Mental Health Engagement, Peer Support and Recovery College Education Service
- Mental Health Services support to the National Gender Service at SCH
- Talking Therapies
- Detect







Data and KPIs-AMS, POLL and ED Liaison

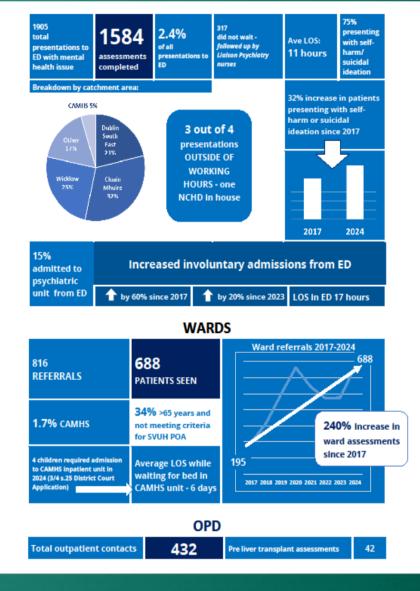
AMS



POLL

ISE Dublin & South East	Wicklow POA		20.658	10	.00	-11	- 9	10	10	. 9	-1	0 00		10 1	0	100.0%	100.01	100.01	5 .17
	3		Yea	ar to	Date		W.					v 11						y .	
Health Region (HR)	IHA/Group/CIT/Team/Hospital	Popular	tion Ac 65 Clinic	tual al WTE	Referrals	Accepted	New/Re- Ref Appt Offered	New/Re- Ref Seen		Ro-Ref Seen	New/Re- Ref DNA	% DNA (< 3%)	Offered New/Re- Ref seen 3/12	New/Re- Ref Seen 3/12	DNA in 3/12	% offered Appt in 3/12	% seen in 3/12	% seen in 3/12 excl DNA	B/C's
ISE Dublin & South East	Total	161,	_	81.40	820	736	727	69	3 476	217	34	47%	707	674	33	97.2%	92.7%	97.3%	666
ISE Dublin & South East	Dun Lidghaire POA	49.4	447	27.00	280	255	269	25	7 17	7 80		45%	261	250	- 11	97.0%	92.9%	97.3%	226
ISE Dublin & South East	Wicktow PGA	20.6	658	10.00	70	60	58	5	8 4	3 13	2	24%	58	56	2	100.0%	96.6%	100.0%	62
								Ra	tes Ye	ear to	Date	(per 1	10,000)					
Health Region (HR)	IHA/Group/CIT/Team/Hospital	Population >65		Actual Clinical WTE per 10,000	Referrals per 10,000	Accepted per 10,000	New / re- ref Appts Offerred per 10,000		New Refs seen per 10,000	Re-refs seen per 10,000	New / re- ref DNA per 10,000	% DNA	Offered New / re- ref seen in 3/12 per 10,000	ref sees is		er % Offere	NSP (App3) % seen in 1/12	The second second	0/Cs per 10,000
HSE Dublin & South East	Total	161,196	161,196	5.0	50.9	45.7	45.1	43.0	29.5	13.5	2.1	4.75	43.9	41.8	1 1/2	2.0 97.21	92.7%	97%	41.3
HSE Dutnin ils South East	Dun Lacghary PCA	45.447	49,447	5.5	56.6	51.6	54.4	52.0	35.8	16.	2.4	-48	52.1	50.6		22 97.0	52.95	97%	45.7
HE Duttlin It South East	Widdow POA	20,658	20.658	. 21	35.9	29.0	28.1	27.1	204	6.	1 10	2.0	26.1	27.1		1.0 100.0	56.65	100%	30.0

ED





Key Issues & Challenges facing MHS in IHA DSWW

Balancing demand for both scheduled and unscheduled care

Nature of voluntary and involuntary mental health status

Data quality is person dependant

Needs oversight and scrutiny

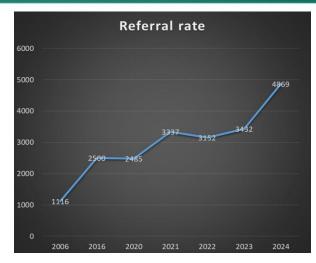
Validation

Training of staff

Used for service planning

CAMHS specific:

- Significant under resourced teams
- Unmet need
- Waiting lists
- Postcode service access
- Maskey
- MHC



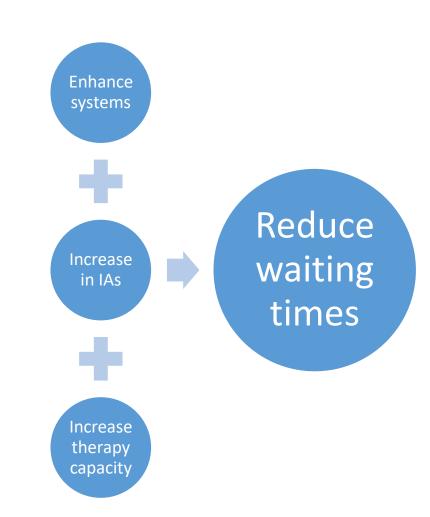






CAMHs Waiting List Initiative 2023/2024

- CAMHS initiatives that target accessonly, reduce waiting times but increase team burden by creating internal waiting lists for therapies
- Similarly, initiatives that focus only on therapy capacity, leave external waiting lists unaddressed
- This project integrated system changes, increased initial assessments and enhanced evidence-based treatment into one, effective, sustainable strategy

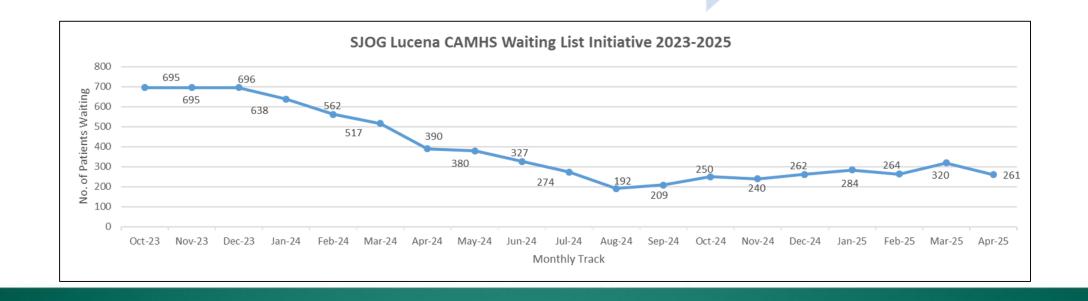




Impact on CAMHs Waiting list and Access 2023 - 2025

April 2023 Recruitment commenced September 2023 Initiative commenced (waitlist backlog) October-November 2023 DBT staff training and planning December 2023 COG Co-Ordinator (ADHD IAs plus system change)

January 2024 Change to funding model communicated Jan 2024-Dec 2024 MF Skills, Family Connections, Comprehensive DBT





Waitlist initiative key elements

1. Increase Initial Assessments

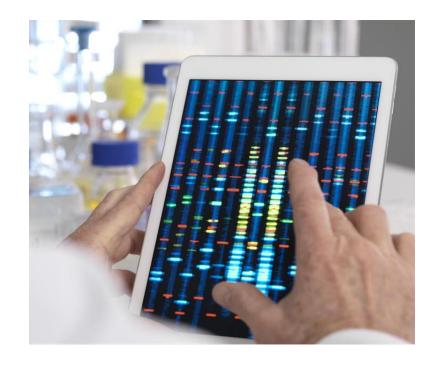
- Provide appointments to those waiting longest
- Focus on ADHD
- 432 additional assessments were completed

2. System and pathway changes across the service

- Comply with the COG
- Implement the recommendations of the Maskey & MHC reports
- Standardise screening and WL acceptance across teams

3. Emotion dysregulation pathway using DBT as a MOC

- Equity of access to comprehensive DBT for the most at-risk clients
- Equity of access to Family Connections
- Access to evidence-based skills only groups
- Reduce the burden on teams in order to increase capacity to improve access





KEY CHANGES TO SYSTEMS/PATHWAYS Standardisation of Screening for Acceptance to the Service

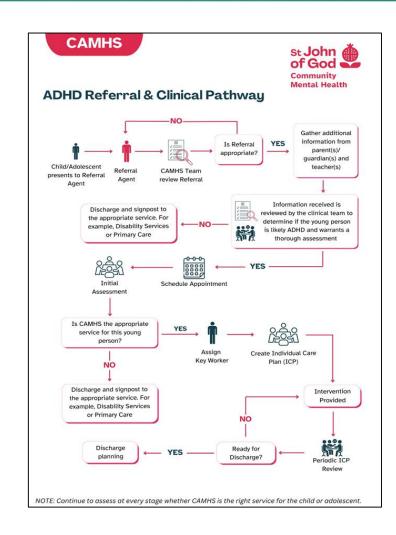
Meeting with the clinical teams

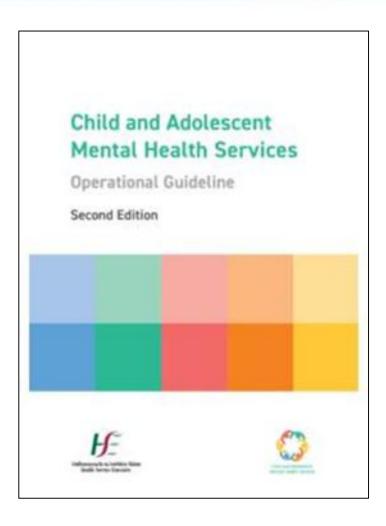
Referrals meetings

Excel file to monitor progress e.g. length of time since referral, return of consents or additional information, contested consent

Templates on MHIS for correspondence

ADHD Screening





EPR template standardisation & Co-working for Change

EPR Template Standardisation

- Consent forms in line with MHC
- Intake assessments
 - ADHD
 - Mental Health
 - Eating Disorders (on clinical teams)
- Common correspondence (Reviewed and approved by NALA)
 - Acceptance to the service for MH
 - Screening for ADHD
 - · Additional information required
 - Non-return of consents/requested materials
- Uncommon correspondence
 - Re-assessment for ADHD off medication
- Risk assessments

Co-working for Change

- Extending Hospitality to our Neurodivergent Service Users Project
 - Neuroaffirmative working group
 - CAMHS made simple booklet
 - Information sheets on what to expect in the service
 - Clinic directions sheets
 - A new website
- Team Co-ordinators and Clinical Administrators embedding their roles on the teams
- Admin Team
- Clinical Teams
- Management
- External agencies e.g. other CAMHS, PSI, ADHD Ireland, government bodies, other allied health professionals



Clinical Governance Group Remit

Monthly Meetings
– 2nd Wednesday

Quality Patient Safety Compliments and Complaints

Referral Numbers, Accepted and not accepted

Waitlist numbers

Discharges

Open cases

WTE numbers

Activity Levels

HE

Numbers removed from waiting list by initiative staff

- ✓ WL removals by initiative staff returned monthly to HSE
- ✓ Source of funding under the new funding model (2,400 per removal)
- ✓ Total removals = **432**; but funding capped at 250
- ✓ All waiting times now COG compliant



EMOTION DYSREGULATION PATHWAY USING DBT AS AN MOC: REDUCING THE BURDEN ON TEAMS & ENSURING EQUITY OF ACCESS



We had a committed multi-disciplinary DBT team, but access to **comprehensive DBT** was not equal across the 9 teams



In addition, we wanted to broaden access to **Family Connections**

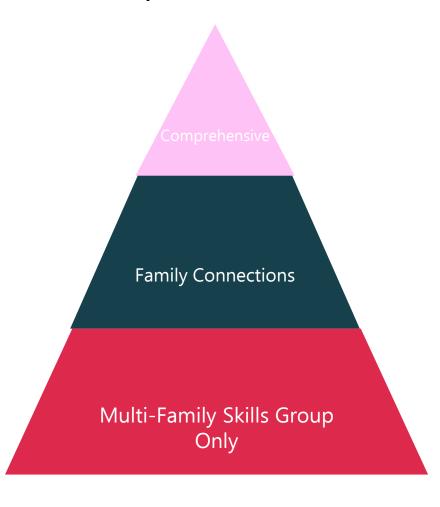


We wanted a pathway that included a **skills-only** option that had a strong evidence base and involved parents and carers



We wanted to **reduce the burden** on the MDTs of offering individual skills, separate parents support and frequent psychiatry reviews

Therapeutic Model





Multi-Family DBT Skills Training outcomes 2023-2024

Number of Individuals Self-Harming

- 33 young people DSH 6 months prior to the intervention
- 12 young people DSH during intervention

Suicide Attempts

- 5 attempts 6 months prior to the intervention
- 3* attempts during treatment (NB: These YP are in enhanced care and meet criteria for comprehensive program)

A&E Presentations

- 14 A&E presentations 6 months prior to the intervention
- 6 A&E Presentations during treatment

Hospital Admissions

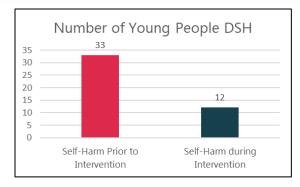
- 4 hospital admissions 6 months prior to the intervention
- 2 hospital admissions during treatment

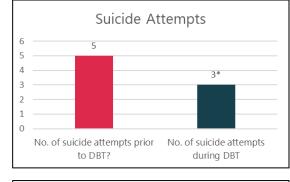
Duration of Time Spent in Hospital

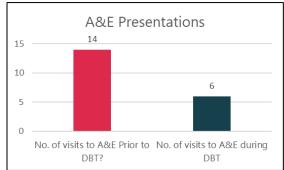
- 12 days 6 months prior to the intervention
- 0 Days during treatment

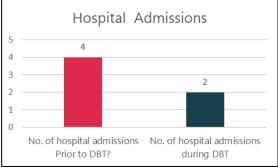
Psychiatry Input

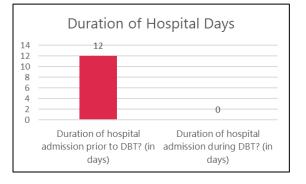
- 124 Hours prior to the intervention
- 41 Hours during treatment (majority on ADHD meds)

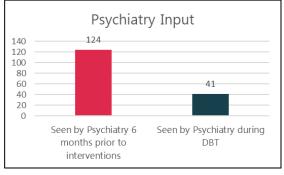














WL initiative 2025/6 aims & Challenges

Aims:

- We will work to retain and refine the new systems and pathways in line with the COG and MHC recommendations
- We will continue to support standardisation in the interest of ensuring timely access to CAMHS assessment and intervention, regardless of postcode
- We will re-employ appropriately trained fixed term staff to support assessments and system change
- We will reinstate the role of the COG co-ordinator for a limited time

Challenges:

- Pay & numbers
- WL funding not multi-annual
- WL list funding confirmation not made until March
- Loss of those trained
- MHIS support and access
- No consultation with the service prior to allocation of posts
- Accommodation a huge barrier to service delivery in some areas especially Bray – severely impedes access

Stabilise

Monitor

Review demand, operational

Roll out to AMHS

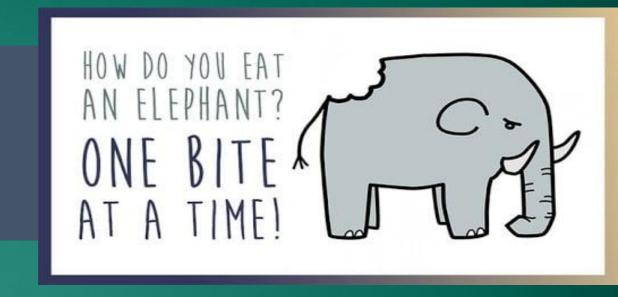


Questions?





Our Lady of Lourdes Drogheda
Otolaryngology Unit



Ms Anél Naudé, ENT Consultant.

Ms Valerie Casserly, Clinical Specialist Physiotherapist in Vestibular Rehabilitation,



The WORK: Booming Referral Rate

❖Peads:

'21 vs '24 =

1988%

Increase

Adults

'20 vs '24 =

290%

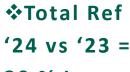
Increase

❖Total Ref

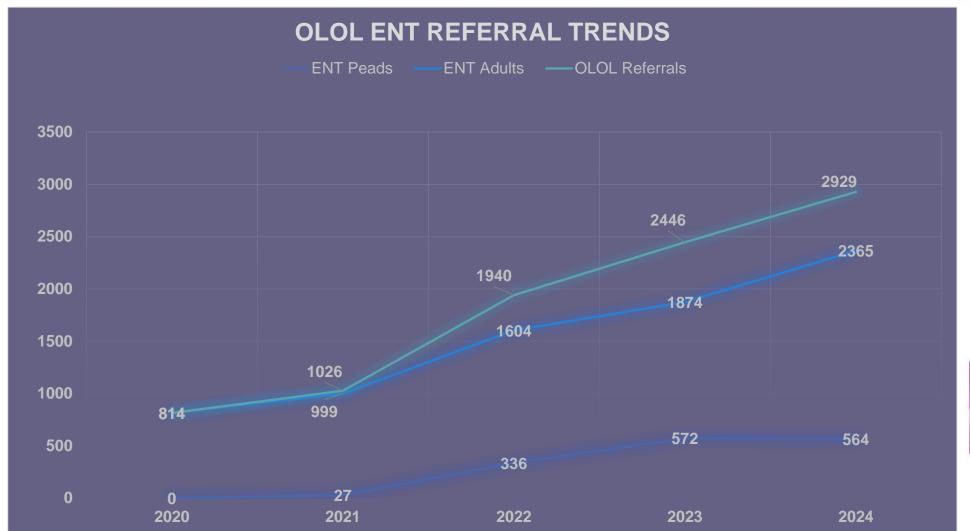
'20 vs '24 =

260%

Increase









Link to Waiting List Action Plan 2025



The WORK: Booming Population



= 70%

Increase

= 15%

Increase

* '02 vs '11

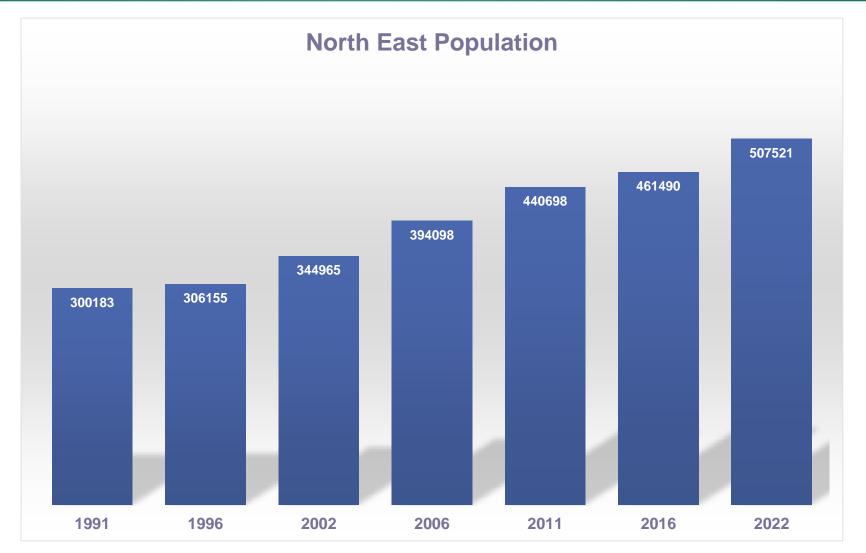
= 28%

Increase



= 15%

Increase





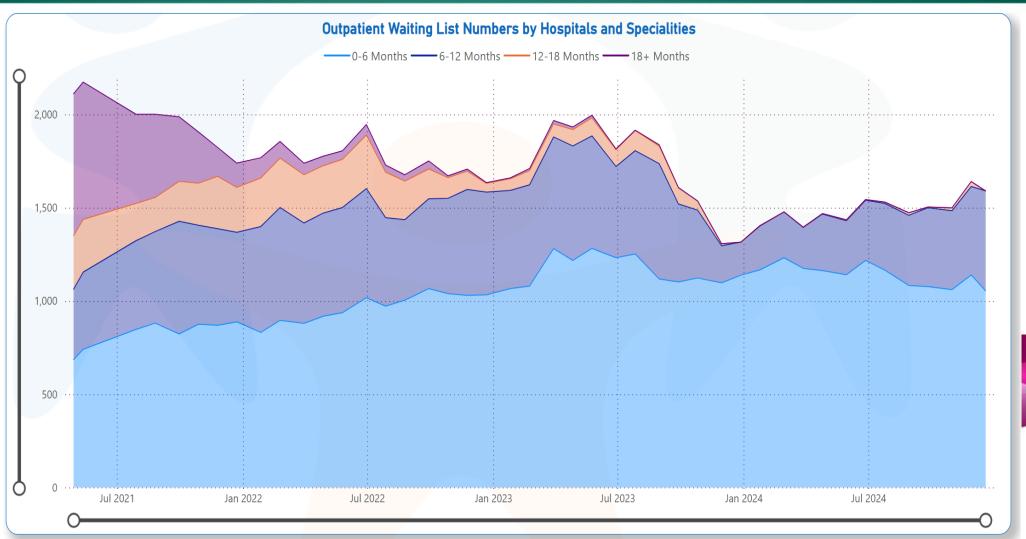
Link to
Waiting
List Action
Plan 2025



The AIM: Reduction of OLOL OPD Waiting List

Patients waiting > 15mth

- ♣ Apr '21
 = 49%
- ❖ Dec '24
 = 0%



Link to
Waiting
List

Action
Plan 2025

Waiting List

Action Plan 2025

D Latest Publication Date: 19 Dec 2024



The AIM: Relief Pressure on Beaumont

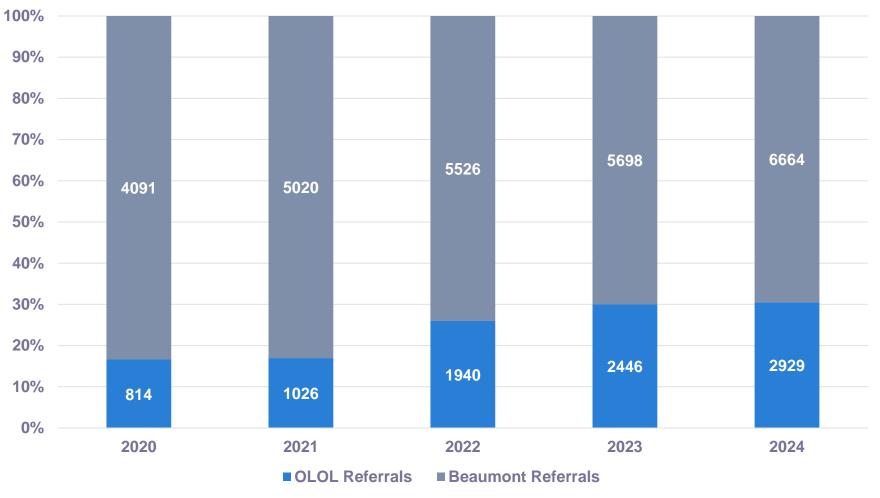
OLOL % from Total Referrals

4 '20 = 17%

4 '24 = 31%

= 82% Increase







Link to
Waiting List
Action Plan



The SOLUTION: The ENT TEAM

	<2021	Post 05/2022	95
Consultants	1x WTE	2x 0.6 WTE, 1x 0.5 WTE = 1.8 WTE	
Theatre Sessions/week	2.5	4.5	
OPD Sessions/week	2.5	5	
NCHD	0	2x WTE (07/2023)	
HSCP	0	1x WTE CS Vestibular Physio (09/2022) 1.5 WTE Senior Audio (01/2024)	
Admin	1 WTE	3.3 WTE	



Waiting List Action Plan 2025

Link to
Waiting
List
Action
Plan 2025



The SOLUTION: The Pathways







Otolaryngology Head & Neck Surgery A model of care for Ireland

ENT OUT-PATIENT CLINIC OLOL
URGENT DI ROUTINE DI
EAR DI NOSE DI THROAT DI PAEDS DI
DIRECT AUDIOLOGY DI DIRECT PHYSIO DI
DIRECT SALT DI DIRECT TONSIL DI
DIRECT EPISTAXIS DI OSA DI
SIGN DATE

- DATP = Direct Adult Tonsillectomy Pathway
- DAP = Direct Audiology Pathway
- DAVP = Direct Audio-Vestibular Pathway
- DEP = Direct Epistaxis Pathway
- DSALT = Direct Speech and Language

HOW DO YOU EAT AN ELEPHANT? ONE BITE AT A TIME!
2024

Pathway	2024
DATP 04/21	197
DAP 01/22	389
DAVP 09/22	207
DEP	
Totals	793



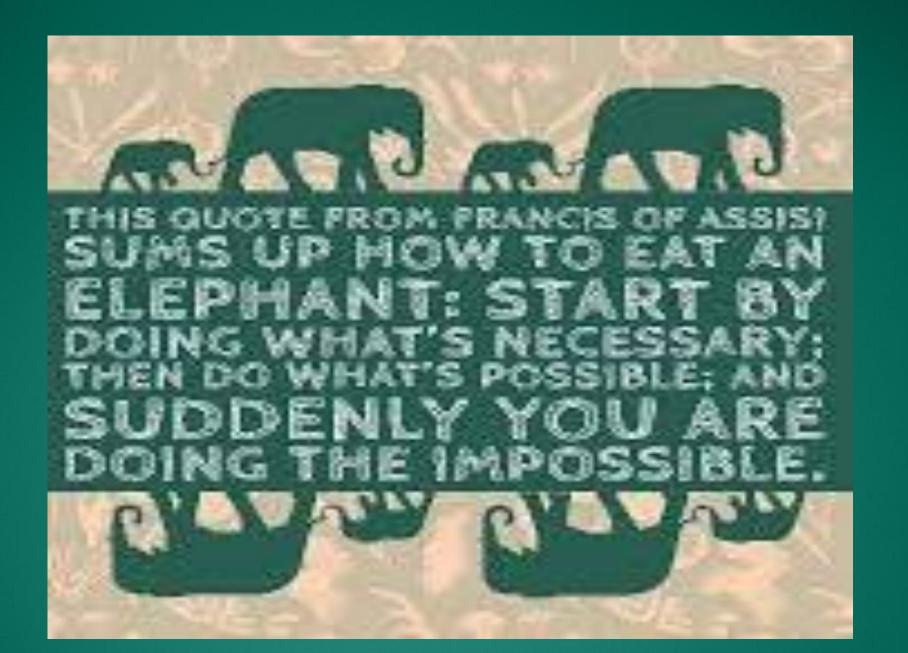


The Pathways – Benefits

- Front Triaging/Categorising of Referrals Letters
- Reduced waiting time for patients
- Increase ENT OPD capacity for more complex cases
- Decreased Admin Support Standardised Paperwork & Communication to Pts and GP's
- Sustainable Solution One stop diagnostic appointment/ Reduced follow up appt / No Travel
- Consultant Led Health Care Teams









Our Lady of Lourdes Drogheda
Otolaryngology Unit

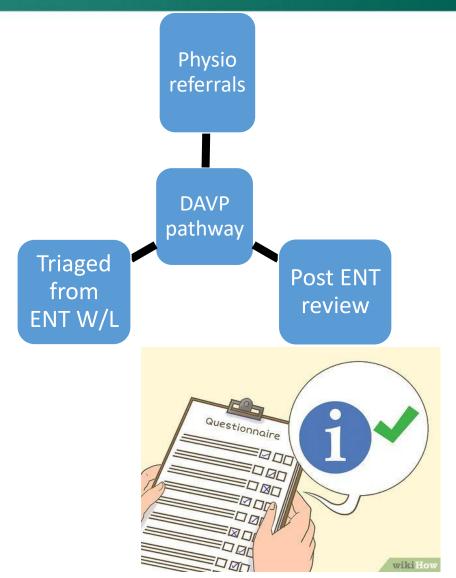
Ms Valerie Casserly, Clinical Specialist Physiotherapist in Vestibular Rehabilitation,



Background

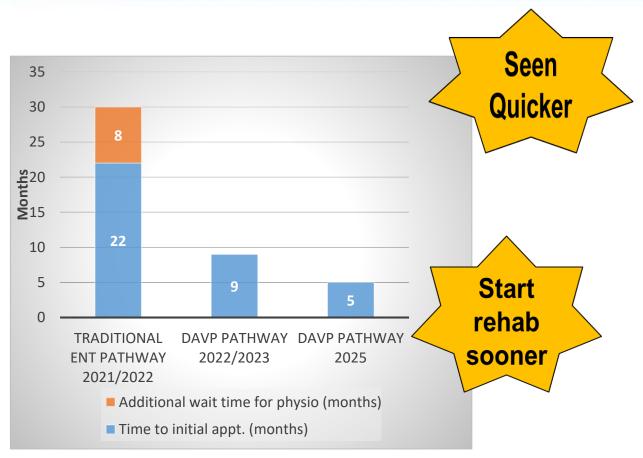
- Direct Audiology and Vestibular Physiotherapy (DAVP) Pathway 2022
 - Parallel format MDT clinic
 - HSCP first contact practitioners

 Based on ENT model of care 2019.

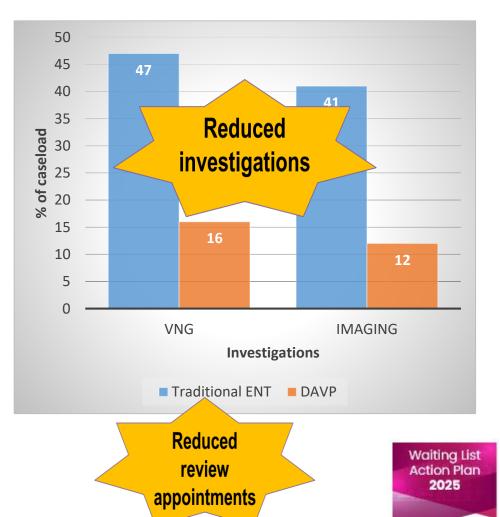












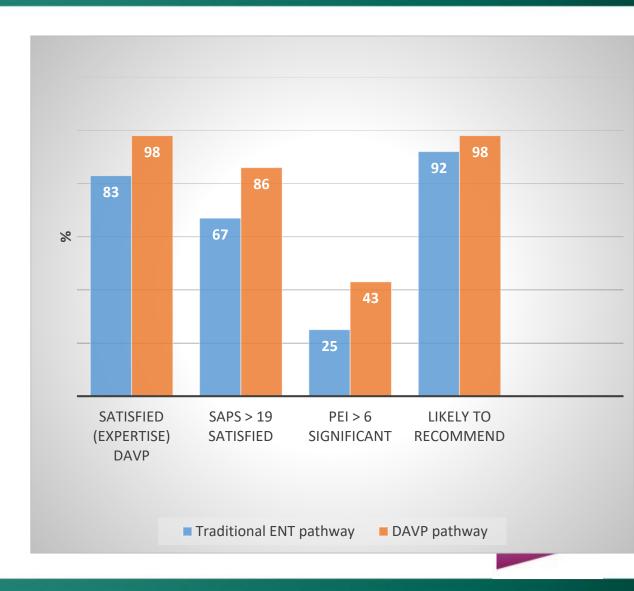


Increasing ENT capacity

85% of vestibular patients managed
 without any formal ENT appointment

Releases 408 ENT clinic appointments/year (102 hours/ 12.75 days/year)

98% patient satisfaction





Current Focus/ Future

- Salaso
- Spark
- Community Integration

- Scope
 - Guidelines
 - Falls
 - Acute/ED
 - Pathfinder

	cHINTS	vHINTS	MRI B (<48 hours)
Accuracy of detecting a central pathology	88.3%	94.2%	
Sensitivity	90.9%	100%	85.1% *false negative in 15% strokes*
Specificity	85.7%	88.9%	



Questions?

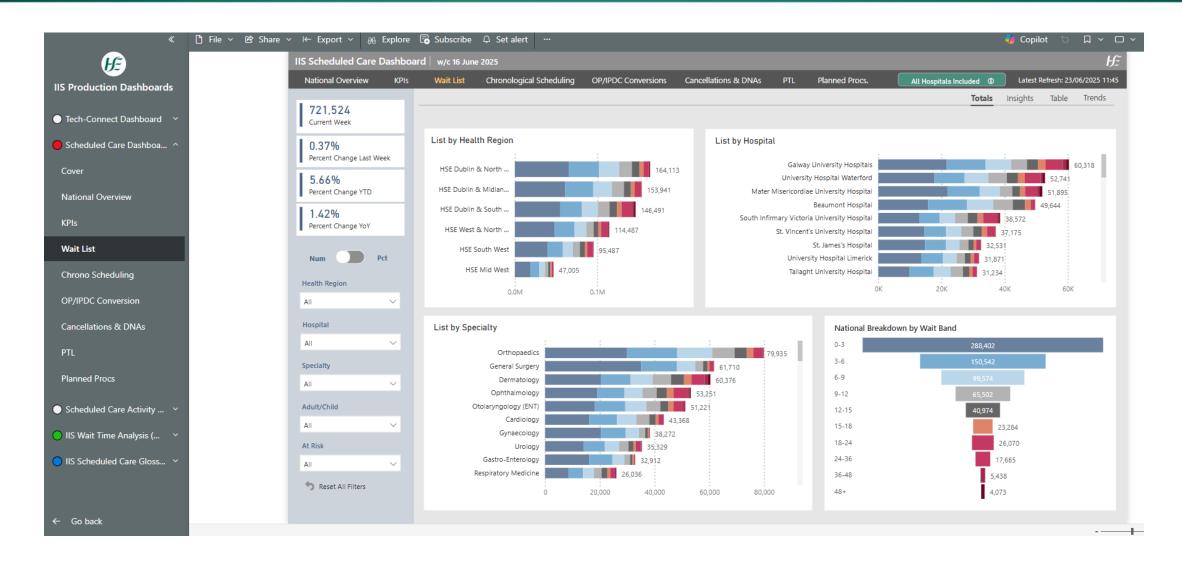




Demonstration of Analysing Demand on IIS Dashboard

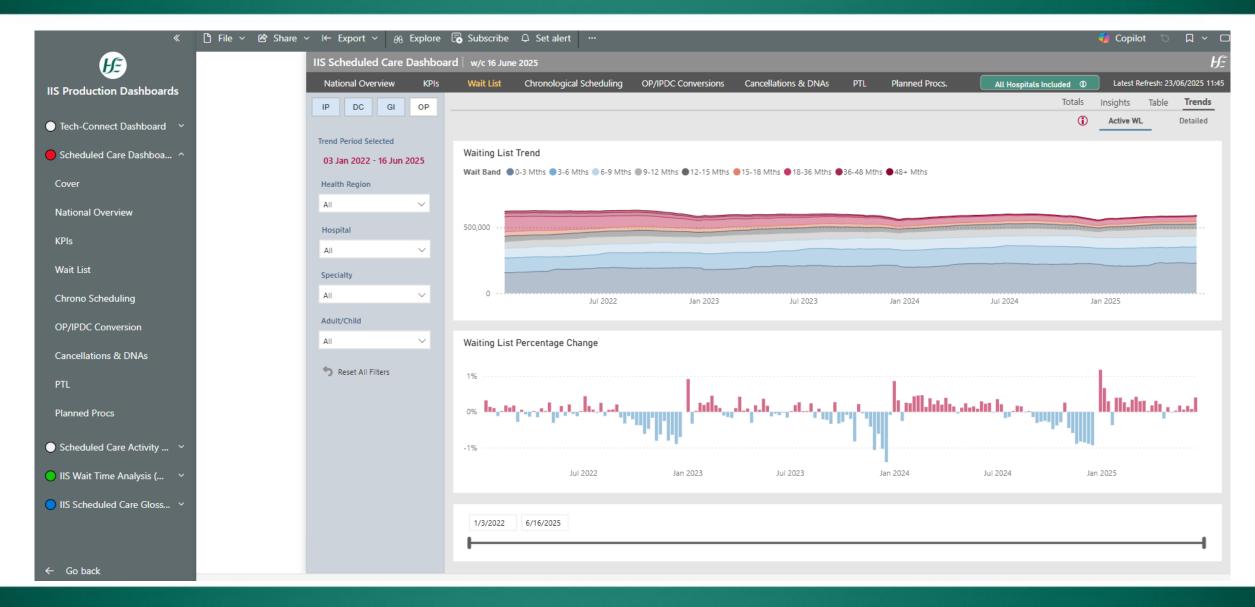


Schedule Care Dashboard- waiting list



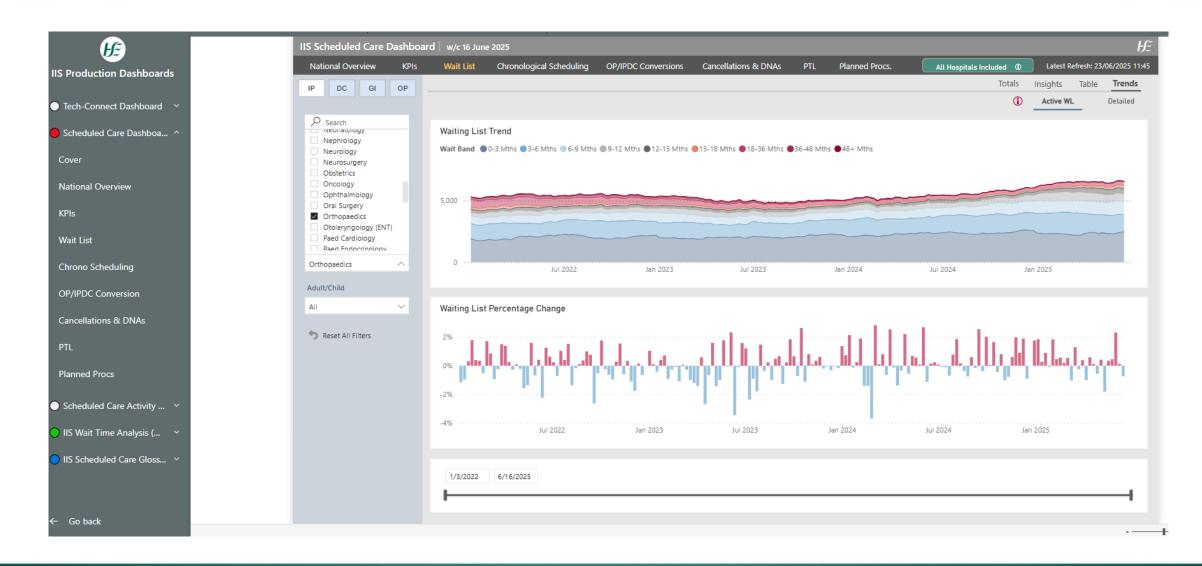


Schedule Care dashboard- waiting bands





Schedule Care Dashboard- time bands by speciality





Questions for all panelists?





IIS Scheduled Care Dashboard Demos Day	Date	Time
<u>Friday</u>	27/06/2025	1100 – 1200
<u>Monday</u>	21/07/2025	1600 – 1700
<u>Thursday</u>	21/08/2025	1400 - 1500



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 <u>Waiting List</u>
 <u>Improvements</u> and the link shared with all of you post Webinar.
- Dates for your diary:
 - ➤ September 3rd
 - ➤ October 1st
 - ➤ November 5th
 - ➤ December 3rd



Access.Programme@hse.ie

