



HSE Board Briefing Template

Subject: Elective Care Centres
Submitted for meeting on: 27 July 2022
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Why is this information being brought to the Board's attention? For Information
Is there an action by the Board required, if so, please provide detail? The Board is asked to note the progress to date with the development of Elective Care Centres in Ireland and the next steps.
Please indicate which of the Board's objectives this relates to; <ul style="list-style-type: none">▪ The development and implementing of an effective Corporate Governance Framework, incorporating clinical governance and a performance management and accountability system; <input type="checkbox"/>▪ Developing a plan for building public trust and confidence in the HSE and the wider health service; <input type="checkbox"/>▪ Ensuring the HSE's full support for and implementation of the Government's programme of health reform as set out in the Sláintecare Implementation Strategy; <input checked="" type="checkbox"/>▪ Exercising effective budgetary management, including improving the value achieved with existing resources and securing target saving, with the objective of delivering the National Service Plan within Budget. <input type="checkbox"/>
Brief summary of link to Board objectives. Linked to the Corporate Plan Objective 3 - Improve scheduled care to enable more timely access and reduce the number of people waiting for services. The objective and the actions we are taking forward to transform services are fully aligned with Sláintecare and the Programme for Government.
Background - provide context in order to ensure that the Board fully understand the issue. The development of dedicated Elective Care Centres was identified as a priority in the Sláintecare Report (2017). The Sláintecare Implementation Strategy (2018) states that a national approach will be taken to the development and construction of separate ambulatory elective facilities, appropriately sited in Dublin, Cork and Galway, where volumes are sufficient to merit them. Additionally, capital investment for dedicated ambulatory elective-only facilities is indicated as part of the National Development Plan 2018 – 2027. - Progress to Date The “Elective Hospitals Oversight Group”, under the joint governance of the HSE and DoH, has been guiding the development of the Elective Care Centres proposals, following the process outlined in the updated Public Spending Code, setting out the value for money requirements for the evaluation, planning, and management of large public investment projects. As outlined to Board members in February's CEO report, a Strategic Assessment Report was completed, reviewed by the Department of Public Expenditure and Reform and approved by the Department of Health in the first quarter of 2021 (Decision Gate 0). This set out the rationale for investment, the alignment of the programme with strategic requirements of Government, some initial options and potential costs, and the governance of the programme. A Programme Preliminary Business Case was in turn completed in 2021. The Minister announced in December 2021 the Government's approval of the Sláintecare National Elective Ambulatory Care Strategy for the development of Elective Care Centres. The Government agreed that the elective

care scope of services will be developed in two phases, commencing with day cases, diagnostics, and outpatients and then followed by consideration of in-patient treatment demand needs. The Elective Care Centres will be designed to support the provision of additional capacity to respond to current and future service needs and the evolving landscape of healthcare policy and practice.

The approved National Strategy notes that Elective Care Centres will focus on high volume, low complexity procedures and a range of related diagnostic services, initially on a day case only basis. These three centres will provide coverage for c60-70% of the overall population, catering for up to 940,000 procedures annually (approximately 215,000 day case surgeries and minor operations, 115,000 endoscopy procedures, 400,000 outpatient diagnostics and treatments, and 200,000 outpatient consultations) across the three Centres. Day procedures offered in the first phase will include Gastro-intestinal, Gynaecology, Ophthalmology, and Orthopaedics.

- **Next steps planned**

I. Decision Gate 1 “Approval in Principle”

Building on the work already undertaken in 2021 to prepare the Programme Preliminary Business Case, individual Preliminary Business Cases for each location are due to be finalised before the end of 2022. These individual Preliminary Business Cases will include the following for each location:

- Confirmation of the strategic relevance of the proposal
- Detailed specification of objectives, measuring the problem to be solved
- Description of the short-list of potential options to deliver the objectives
- Detailed demand analysis and description of underlying assumptions
- Detailed options appraisal including both financial and economic appraisal
- Analysis of affordability within existing resources
- Consideration of deliverability
- Risk assessment and allowance for optimism bias
- Outline procurement strategy
- Analysis of options for implementation and operation.

II. Decision Gate 2 “Pre-tender Approval”

Following “Approval in Principle” of the three Preliminary Business Cases, the next step in this process will be to secure pre-tender approval (Decision Gate 2). To achieve this, detailed project briefs and procurement strategy documents for each location are to be completed and will include the following:

- Confirmation of scope
- Confirmation of underpinning assumptions
- Assessment of risks and development of Risk Management Strategy
- Development of detailed Delivery Programme
- Clear articulation of all design requirements and restrictions
- Reassessment of costs
- Procurement Strategy
- Project execution planning.

At this point, the draft (pre-tender) Final Business Cases for each location will also be produced and tender documentation prepared.

The approval of the detailed project briefs, procurement strategies and draft (pre-tender) Final Business Cases will allow the projects to proceed to tender.

III. Decision Gate 3 “Approval to Proceed”

Once the tender process is complete, Final Business Cases will be completed for each location. These individual Final Business Cases will include the following:

- Update of Detailed Project Brief Based on Procurement Process
- Re-appraisal of proposal following on tendered costs (including both economic and financial appraisal)
- Full assessment of affordability
- Detailed sensitivity and scenario testing
- Benefits realisation plan
- Systems integration planning
- Full risk management strategy.

Audit and Risk Committee (ARC) and the Board Oversight

Regular briefings and updates will continue to be provided to ARC and the Board, and appropriate approvals sought, as this process progresses through the various decision gates. Every effort will be made to ensure timelines are effectively managed to ensure the earliest delivery of the new facilities.

Highlight any implications that the Board should be made aware of in its consideration: See above

Conclusion

See above

Recommendation

N/A – Update is provided for information only at this point.