

National Programmes Day
National Clinical Programmes-Recovery,
Resilience, Reform
#3RsBetterHealthNCP2022

Sláintecare.

Right Care. Right Place. Right Time.



National Clinical Programme Paediatrics and Neonatology (NCPPN)



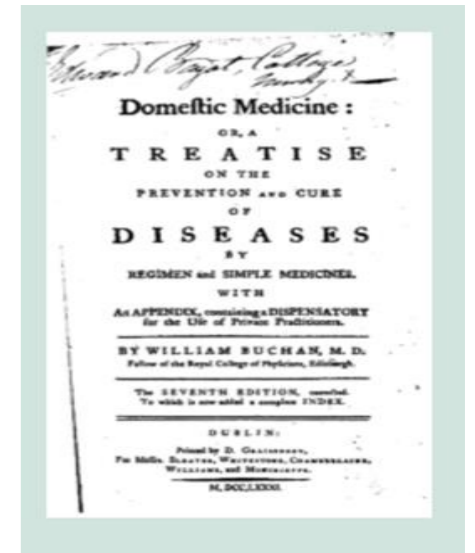
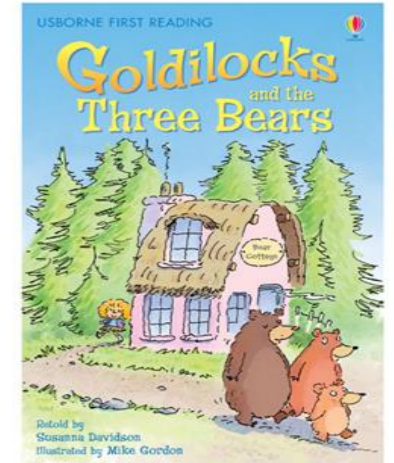
Introduction : Dr Ciara Martin NCAGL
for Children and Young People

**Programme information, highlights
and vision:** Dr Ellen Crushell
Co- Clinical Lead for NCPPN



Goldilocks and the 3 R's

Getting it 'just right' for children and young people



Organisation of Services for Children & Young People



NCAGL function

- Clinical governance, planning and development of healthcare services for children and young people considered in its totality (age 0 to 25)
- Services organised around population health need
- Aligned development and integration of services for children, young people and their families

= **Operational Integrated Model of Care for Children and Young People**

NCAGL Children and Young people principles

- Needs distinct from adult population
- Progressive and valued early prevention and intervention
- Seamless access to services close to home (and home from home)
- Supported transition to adult services
- Evolve with changing needs



What is an NCAGL for Children and Young People

- To listen to and to advocate for clinical issues affecting those ages 0 to 25
- Work with Health Care Professionals and planners and with Young People and their families to guide the design and delivery of Children and Young People's health services for now and for the future
- To be attentive at times of crises to the impact it may have on health for children, young people, their carers and families and to work with colleagues to mitigate that impact



The National Clinical Programme for Paediatrics and Neonatology

Dr Ellen Crushell

Prof John Murphy

Dr Nuala Murphy

Ms Jacqueline de Lacy



Children in Ireland

- 25% of population, highest in EU
- Well educated 95% to Leaving Cert
- 22 routine health interactions between birth – 14yrs
- 4% children have a complex disability
- Challenges impacting on child health:
 - 1 in 11 living in consistent poverty
 - Rising family homelessness and migration
 - > 5,000 children in hotels or direct provision
 - Mental health challenges
 - Low breastfeeding rates
 - Obesity and chronic disease
 - Access to health services

ROYAL COLLEGE OF PHYSICIANS OF IRELAND

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The Impact of Homelessness and Inadequate Housing on Children's Health

A position paper by the Faculties of Public Health Medicine and Paediatrics, Royal College of Physicians of Ireland

Children in direct provision

May 2021

A POSITION PAPER ON
BREASTFEEDING

by the Faculty of Paediatrics, Faculty of Public Health Medicine and Institute of Obstetricians and Gynaecologists
Royal College of Physicians of Ireland

ROYAL COLLEGE OF PHYSICIANS OF IRELAND

National Clinical Programme for Paediatrics and Neonatology

Background

- Established 2011 HSE/Faculty of Paediatrics, RCPI
- Governance of the CCO via National Clinical and Advisory Group Lead
- Supported by two Clinical Advisory Groups, Faculty of Paediatrics RCPI

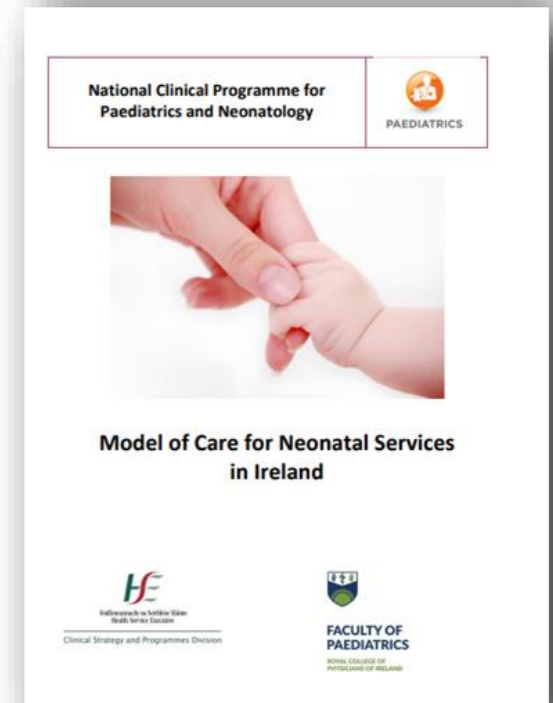
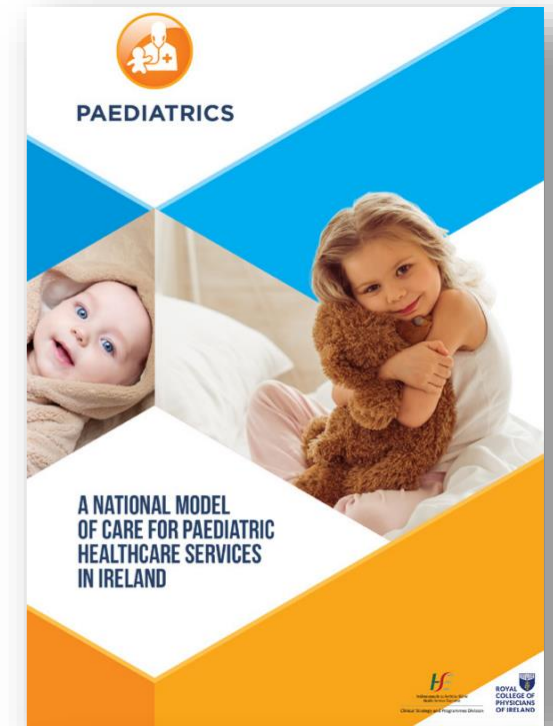
Objectives

- Involve clinicians in health service planning and design
- Improve outcomes for children's health through improvements in quality, access and value

Context

- New Children's Hospital for tertiary and quaternary care
- Paediatric acute services disjointed with poor connectivity e.g. very premature babies
- Very low staffing levels throughout the country, and vulnerable national specialties

Tasked to Develop a National Model of Care for Paediatric Services and for Neonatal Services



Model of Care for Paediatric Healthcare

Describes how **acute** paediatric services should be provided across **36*** paediatric specialties

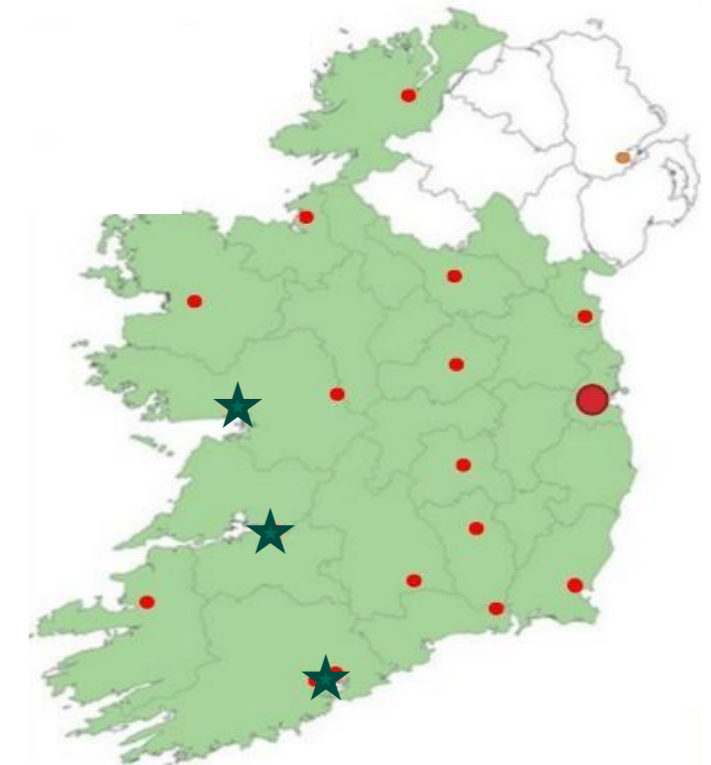
➤ **Fundamental principles :**

- Care as close to home as clinically appropriate
- Access to safe, high quality services within network at the appropriate level

➤ **From 19 paediatric units with much duplication in services to :**

- New children's hospital (including 2 UCC sites) providing national services
- 3 Regional units (inc. reorganisation in Cork)
- 13 Local units
with clear guidance on appropriate services at each level and how services should align with the NCH

➤ **Significant increase in acute workforce required to support existing services and enable service development**



- CHI
- ★ 3 Regional Paediatric Units
- 13 Local Paediatric Units

...Models of Care at Work

- In CHI: Consolidation and expansion of general paediatrics and paediatric emergency med
 - Interests within general paediatrics e.g. eating disorders, adolescence
 - Enable specialities to develop further
- National neonatal transport service 24/7 to safely transfer newborns
- Standardisation of paediatric diabetes care with networks of care
- National Services for children affected by child sexual abuse
- Development of children's palliative care services
- Building adult metabolic service to allow transfer of adults from Temple st
- National paediatric specialist gynaecology service design and implementation



REFORM:

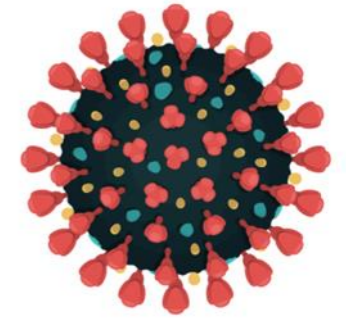
Barnahus Model for Child and Adolescent Sexual Assault Treatment Services (CASATS)

- Services for Children suspected of having been sexually abused have been poorly organized. Multiple interviews and interactions required – traumatic, often delays and travel required
- Barnahus model brings services together under one roof
 - 3 sites : Dublin, Cork, Galway
 - 7/7 forensic service
 - specialist paediatricians
- Interagency collaboration between
 - Health** (Forensic Medical Examiners)
 - Gardai** (Specialist Gardai Interviewers)
 - Tusla** (Social Workers)
- Avoids re-traumatization of the child



Resilience : COVID-19

- The NCPs provided a system to engage clinicians and develop guidance quickly
- Working groups were set up in collaboration with HPSC, Public Health, Primary Care, NIO, NPHE to develop clinical guidance in relation to children and infants – testing, school return, vaccines, PIMS...
- Collaborative reports highlighted the wider effects of the pandemic on children :
 - Actions to address the Impact of the COVID-19 Pandemic on Children experiencing marginalisation and homelessness- Jan 2021
 - National Clinical Review on the Impact of COVID-19 Restrictions on Children and Guidance on Reopening of Schools and the Normalisation of Paediatric Healthcare Services in Ireland- Aug 2020



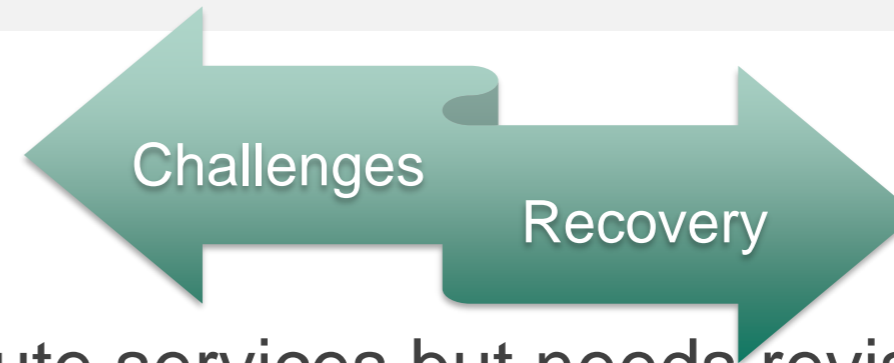
Actions to address the Impact of the COVID-19
Pandemic on Children experiencing
marginalisation and homelessness

National Clinical Programme for Paediatrics and
Neonatology

Clinical Design and Innovation, Health Service Executive



Challenges

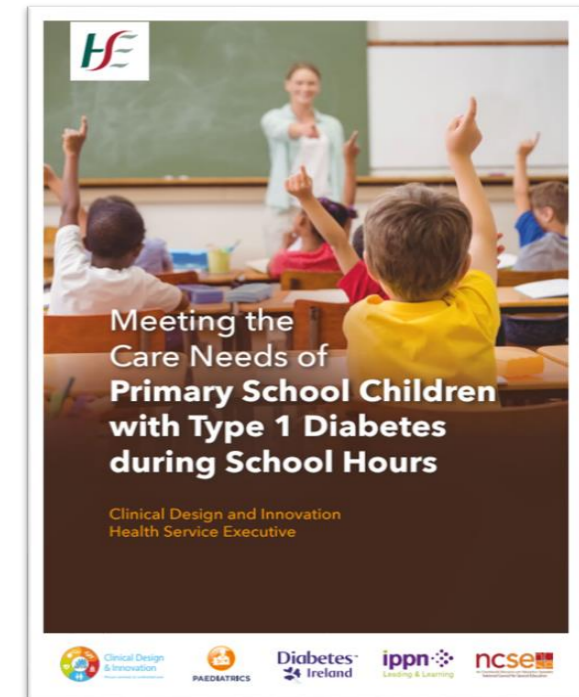


- MOC was necessarily focussed on acute services but needs revisiting in light of recent developments in wider health services e.g. Slaintecare
- Resources primarily assigned to CHI at present, challenging to seek funding for other sites
- Ongoing impact of the COVID pandemic on paediatric services
- Increased specialisation within adult specialties – relevant to all sites outside of Dublin... patient drift to CHI
- Recruitment e.g. for paediatric transport (IPATS), CDNTs
- Adolescent services and transition to adult healthcare
- **Integration of care:** Lack of clinically designed strategy for integration of care for children

Recovery: Building the future

- 24/ 7 Transport service (IPATS) for critically unwell children
- Adolescent service and Transition of Care
- Paediatric Surgery Model of Care
- National Diabetes register
- Tripartite (NCP, CHI, Faculty) national clinical practice guidelines
- Focus on Marginalised and Homeless Children - 2021 report

- Collaborative Design of model of integrated care in the context of RHAs, with a focus on Population Health



Thank you

