



Existing Strategies, Plans, Review Documents Healthcare Environment

To inform preparation of
Health Service Executive Corporate Plan
2020 - 2022

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1. Introduction

This paper has been produced to support Health Service Executive (HSE) Board deliberations around the development of the Corporate Plan 2020-2022. The document aims to present a broad overview and synthesis of a selection of strategies, reports, plans and reviews relevant to the Irish healthcare environment and to provide some insight into the current direction and priorities of the health service.

Review Process: A long list of strategies and documents (n=155) was agreed by the project team, with this being composed of published and draft documents, legislative pieces and programme outputs. This list was by no means exhaustive given the breadth and complexity of the field. A shortlisting exercise was conducted, with the rationale for selection being:

- (i) Relevance
- (ii) Being up to date or current and
- (iii) An exemplar or solid example of publications in that group.

This process resulted in 32 documents, in addition, to the current HSE's *Corporate Plan 2015-2017* being included in the initial rapid review. After review and compilation of key content, further short-listing resulted in 19 documents being retained as primary sources. The 32 items are listed in Appendix 1.

Caveats/Limitations: This was a rapid review of a selection of high level documents related to the healthcare environment. Other documents or outputs may be required to fully inform the corporate plan development process. Operational plans and condition or group-specific strategies, models or plans have not been reviewed.

Many of the documents reviewed are accompanied by separate, detailed implementation plans and in some cases, full implementation programmes and offices. These plans are not specifically reviewed in this document due to the requirement for brevity.

The Paper: This document sets out overview and thematic findings from the documents reviewed under the following headings:

- Strategic Commitments and Active Implementation
- High Level Strategic Themes Identified
- Other Findings
- Insights for the Corporate Plan.

The HSE's current corporate mission, vision, values and goals are set out in Appendix 2 to aid comparison.

Linking to Corporate Plan Principles

We have considered the key principles which will guide the corporate plan and highlighted below which principle this research paper will support.

Corporate Plan Principles	
Focused on the People Who Use Our Services	✓
Evidence Based	✓
Outcomes Based	✓
Written in Simple, Plain English	
Real and Achievable	✓
Implementation Ready	✓

2. The HSE’s Strategic Commitments and Active Implementation

The HSE’s obligations and commitments are evident in the major documents reviewed, revealing the complexity of services provided. The documents set out **‘what we will do’, ‘actions’ or ‘strategic priorities’** at various levels of granularity across all services covering acute hospital care, disability services, mental health services, services for older persons, preventative and screening services and administrative services such as the primary care reimbursement service. For example:

- National reports, such as *Sláintecare*, set out an agreed vision of healthcare in Ireland, with associated programme office and implementation plans, that will require immense changes to the current model of delivery, at the same time as maintaining core health services in a safe, quality manner
- The *National Cancer Strategy* commits to 52 recommendations set out in detail relating to cancer prevention, detection, care and research
- The *National Maternity Strategy* commits to four strategic priorities, with multiple actions and sub-sets
- The *Healthy Ireland Framework* commits to six key themes, which generates a body of additional strategies, programme offices and implementation plans
- Function-specific strategies set out strategic commitments at a granular level, with reports such as the *Intercultural Health Strategy* and the *National Ambulance Service Vision* setting out service-specific detailed commitments.

Strategic commitments across reports can be grouped thematically as follows with each of these groups containing multiple activities at service level:

Improving services for patients	Continuous service improvement activities
	Improving clinical services, offering new treatments
	Putting the patient at the centre
Quality, safety, value for money	Various quality initiatives, Implement standards, evidence-based healthcare
	Implement accountability structures
	Implement patient safety initiatives
	Deliver value for money and efficiencies
Attracting, retaining and developing staff resources	Invest in people and teams
Infrastructure	Advance components of e-health
	Improve existing infrastructure
	Develop new infrastructure
Align services with Sláintecare, doing things differently, new models of care	Align services with Sláintecare
	Implement new ways of delivering services (new staffing models, primary care delivery)
	Expanding aspects of primary and social care
	Consolidation/rationalisation of services
Population health approach	Implement lifestyle changes into service
	Encourage screening programmes

A vast number of commitments are in active implementation at the time of review. While implementation plans are presented in various levels of detail in the reports reviewed, a significant number have accompanying, separate implementation plans and in some cases, have established programme offices responsible for implementation. Some examples of on-going implementations are as follows:

- The *National Cancer Strategy* is in active implementation through the National Cancer Control Programme, with an implementation report published in 2018
- The *National Maternity Strategy* has a supporting implementation plan with an annual report being presented to the Minister yearly
- The *National Sexual Health Strategy*, with a separate implementation plan, is being implemented by a national programme, the HSE Sexual Health Crisis Pregnancy Programme (SHCPP)
- *Connecting for Life – Ireland’s National Strategy to Reduce Suicide 2015-2020* is in active implementation through the National Office for Suicide Prevention, and has a separate implementation plan and a set of local action plans. Implementation also includes the provision of an excellent website with resources
- *Healthy Ireland* is accompanied by *Healthy Outcomes Framework (2018)* to monitor and drive the achievement of Healthy Ireland’s targets and performance indicators is a key action identified in the Healthy Ireland Framework. Of note, Healthy Ireland has generated a number of other programmes with implementation plans and offices such as the Healthy Eating and Active Living Programme, The Healthy Childhood Programme, the Alcohol Reducing Harms Programme and the Staff Health and Wellbeing Programme.

A number of reports set out key performance indicators (KPIs) in the body of the strategy document, such as the *National Cancer Strategy 2017-2026*, *Sláintecare* and the *HSE Corporate Plan*, with others setting these out within the accompanying action and implementation plans. A number of more recent reports indicate that KPIs are being developed revealing an acceptance of the requirement for KPIs as measures of success.

In summary, the healthcare environment has set out multiple, broad-ranging strategic priorities and commitments across the domains of provision of services and quality improvement, staff development, infrastructural enhancement and governance and accountability. These commitments are being implemented in a structured manner, in a number of cases with specific programmes, utilising multiple KPIs as part of the on-going monitoring process.

3. High Level Strategic Themes Identified

The organisation’s reports and strategies set out to convey the principles of inclusiveness, partnership, patient-centeredness, transparency and quality, and are recognising the transformative and challenging space that we stand in vis-à-vis achieving *Sláintecare* goals.

Service-providers are envisaging forward-thinking, innovative services, responsive to patient needs, with quality and transparency at the core. There is recognition of the need to do things differently, namely, extending staff roles and responsibilities and providing care in different locations and times that has previously been the case (e.g., in the community, home, at weekends, etc.).

The strategic challenges remained the same across the majority of documents:

- To reorient resources to deliver care in keeping with *Sláintecare*, utilising different models of service delivery
- To remain responsive and operate as per core values in an ever-evolving political, economic and healthcare environment
- Responding to increased demand from the ageing population
- To match capacity to demand
- To continuously improve the quality of care delivered and minimise risk
- To deliver services within budget
- To ensure maximisation of all resources
- To address inequalities in healthcare
- To overcome recruitment and retention challenges
- To develop our infrastructure, including the move to e-health.

The impact of *Sláintecare*: Many service-providers are integrating *Sláintecare* themes into more recent vision statements. This has significant implications for any future planning documents given the current gap in service structure, targets and models of care.

The organisation will be challenged to deliver on and meet existing targets, while at the same time, reorienting services to deliver on the longer-term *Sláintecare* vision. The clearly-stated national vision for healthcare challenges the organisation to respond immediately if the ten-year plan is to be realised. The immediate challenge for the organisation is moving from current service plan targets, KPIs and outcomes to the significantly different outcomes set out in *Sláintecare*, and in producing an appropriately detailed and resourced planning and implementation process to achieve this.

Learning from national/government healthcare inquiries: The learning from recent inquiries, such as the Scally Inquiry into CervicalCheck, and previous reports such as the Hayes and Lourdes Hospital inquiries, highlight the organisation's obligation to put the patient at the centre and to improve clinical and administrative governance structures to prevent harm or distress to any patient.

4. Other Observations from Strategic Documents

a. Mission, Vision, Values

- Strategic reports and corporate plans were typically structured with a statement of what the organisation is about and where they want to get to. There was, however, a lack of standardisation as to how this was structured
- The organisational 'mission' was not commonly stated and while the vision was more commonly stated, it was not a standard in every document
- The function or mission of the organisation was often stated within the text in introductory sections or was occasionally contained in the foreword of the document. It appears that many organisations assume the mission or purpose is implicit
- Vision statements were typically lofty, aspirational statements or 'something to aspire to'
- In contrast to the mission statements which describe '**what we do**' vision statements are trying to indicate '**where we are going**'. Vision was sometimes alluded to, such as in *Sláintecare*, with authors describing the report as 'the vision'
- Values were typically presented in diagrammatic format and ranged from three to five items.
- Compassion was the most common value used across reports
- Occasionally, values were not stated as such, but rather as 'guiding principles'
- In some cases values were not stated explicitly but were evident in themes or major headings within the document, such as the *National Cancer Strategy 2017-2026*, where sections regarding optimising patient care and increasing patient involvement contain headings such as 'getting the

diagnosis right’, ‘getting the treatment right’, ‘safe, high quality patient-centred care’ and ‘quality survivorship’

- The HSE values of care, compassion, trust and learning were commonly repeated in the HSE document set indicating a transfer of these values across the organisational space
- Sample statements are set out below, with Table 1 summarising common words used as mission, vision and values.

Sample mission statement:

‘To ensure people can access a high quality, integrated, holistic outpatient services when they need it’

Strategy for the Design of Integrated Outpatient Services 2016-2020 (OSPIP)

Sample vision statements:

‘an Ireland where fewer lives are lost through suicide, and where communities and individuals are empowered to improve their mental health and wellbeing’

Connecting for Life – Ireland’s National Strategy to Reduce Suicide, 2015-2020

‘a healthy Ireland, where everyone can enjoy physical and mental health and wellbeing to their full potential, where wellbeing is valued and supported at every level of society and is everyone’s responsibility’

Healthy Ireland (HI) A Framework for Improved Health and Wellbeing, 2013 – 2025

Common words utilised when describing the mission, vision and values, either formally or within the text are set out in Table 1.

Table 1: Mission, vision and values – common words		
Mission	Vision	Values
Consistent	Closer-to-home	Collaboration
Efficient	Integration	Commitment
Equality	Quality	Compassion
Inclusion	Reaching full potential	Connectedness
Innovation	Responsiveness	Continuous improvement
Patient-centred	Safety	Engaging
Quality	Supportiveness	Evidence-based
Safety	Togetherness	Flexibility
Serve the needs	Wellbeing	Integrity
Support		Learning
Timely		Person-centred
Transformative		Recognising inequalities
Transparent		Respectful
		Sustainability
		Timeliness
		Transparency
		Trust

b. Objectives & Goals

This section comprised the body of many reports. Many reports set out objectives and then provided detail within each objective as to 'what we will do'. These objectives were sometimes conceptualised as aims or tasks, and were occasionally extrapolated from recommendations.

The task at hand for the various organisations, conceptualised as goals, objectives, tasks, aims are grouped as set out in Table 2.

Table 2: Goals/Strategic objectives	
Providing fair access	Improving infrastructure
Appropriate waiting times	Transparency and accountability
Capacity management	Governance structures
Efficient use of resources	Risk reduction
Improving outcomes	Accounting for incidents/negative events
Providing a quality service, excellence	Reorienting care towards the community
Training, professional development	Promoting health and wellbeing
Investing in staff	Addressing inequalities

c. Funding, consultation, health service reviews and enquiries

Funding commitments: Very few documents set out approved or detailed funding commitments. The *HSE Capital Plan*, *Sláintecare*, *Primary Care Centre Progress Report*, *Primary Care Reimbursement Service (PCRS)* and *the National Development Plan (NDP)* set out budget allocations. A number of reports stated that a commitment to fund will be required, indicating that the strategies were published without pre-approved funding.

A separate analysis would be required to undertake a full costing requirement against all of the priorities set out in the various documents. However, a good guide is that on average each year, over the last number of years, the HSE had sought in excess of between €800m and €1 billion of new service development funding from the Department of Health.

Consultation: A high number of strategies engaged in consultation, through workshops, online surveys, focus groups, public consultations, face-to-face interviews and meetings. Consultation took place with members of the public, patient groups and service users and staff at various grades and roles. Of note, consultation processes increasingly involve commissioning advice from international healthcare organisations.

Health service reviews: The *Health Service Capacity Review 2018*, *Review of Health Demand and Capacity Requirements in Ireland to 2031* provides valuable scenarios to enable planning and strategy, highlighting the requirement for technical advice when deciding the future direction of the organisation.

Health inquiries: A number of inquiries were reviewed as part of the process, spanning approximately a decade. The *Scoping Inquiry into the CervicalCheck Screening Programme (Dr G. Scally)*, *The Hayes Report* and the *Lourdes Hospital Inquiry* reveal the importance of governance and accountability at all levels of the organisation in the provision of healthcare and therefore the need to embed these in any corporate plan development process.

5. Insights for the Corporate Plan

The rapid review provides the following insights in relation to the corporate plan development process:

- Core services must be maintained and delivered safely while the organisation puts plans in place to respond to Sláintecare's goals. *Sláintecare* goals challenge the organisation given the gap in current services and this will have to be reconciled in the corporate plan
- There is an appetite for change within the organisation, as evidenced by the inclusion of *Sláintecare* targets in more recent strategies. This change will have to be underpinned by realistic planning and funding of required changes
- A large number of critical core programmes are in active implementation, with the majority of goals and objectives being aligned with *Sláintecare*. Hence, good work is underway, and was already underway prior to *Sláintecare*. This should work should be built upon and recognised
- The language of many reports is 'lofty' and distant. The language used should speak to all stakeholders alike and say (i) what we do, (ii) where we are going, (iii) how we are going to get there and (iv) what will help us get there
- The key concerns extracted from the strategies were enduring, long-standing concerns:

- **Patient-centeredness, transparency, serving the population**
- **Safety and continued quality improvement**
- **Doing our business differently as an organisation, as individual staff members, and as service-users**
- **Developing our infrastructure, both physical and virtual to enable change**
- **Improved access, equality, eligibility for all**
- **Providing care in appropriate settings, closer to home, in less complex environments**
- **Extending and developing the workforce to deliver a sustainable health service.**
- **Managing and responding to risk, improving transparency, strengthening governance, prioritising high impact, potentially fatal diseases and responding efficiently to prevent further risk to patients and service-users**
- **Investing in staff to deliver world class service**
- **De-medicalising healthcare**
- **Responding to diversity, the marginalised, minority groups, those with disability, mental health issues and high health needs. Working to deliver care fairly to those most in need.**

Appendix 1: Shortlist of Documents Reviewed

Predecessor / current plan	HSE Corporate Plan 2015-2017	
National reports/strategies	Oireachtas Committee on the Future of Healthcare - Sláintecare Report – how do we incorporate this?	
	National Cancer Strategy 2017-2026	
	National Maternity Strategy 2016-2026	
	National Sexual Health Strategy 2015-2020	
	Connecting for Life – Ireland’s National Strategy to Reduce Suicide 2015-2020	
	eHealth Strategy for Ireland, 2013	
	Working Together for Health – A National Strategic Framework for Health and Social Care Workforce Planning, 2017	
	National Dementia Strategy 2014	
	Draft Climate Change Adaptation Plan, September 2019	
	National Policy and Strategy for the Provision of Neuro-Rehabilitation Services in Ireland 2011-2015	
HSE reports/strategies	Healthy Ireland (HI) A Framework for Improved Health and Wellbeing (2013 – 2025) Supporting strategies include: <ul style="list-style-type: none"> • The Healthy Eating and Active Living Programme • The Healthy Childhood Programme • Alcohol Reducing Harms Programme • The Staff Health and Wellbeing Programme. 	
	Strategy for the Design of Integrated Outpatient Services 2016-2020 (OSPIP)	
	National Ambulance Service Vision 2020 Patient Centred Care 2016-2020	
	HSE Capital Plan 2019 - 2021	
	A National Framework for Recovery in Mental Health 2018-2020	
	Patient Safety Strategy 2019 -2024 (Pre-consultation draft)	
	Intercultural Health Strategy 2018-2023	
	Knowledge and Information Strategy - Delivering the Benefits of eHealth in Ireland, 2015	
	DOH/Government reviews/inquiries	Health Service Capacity Review 2018 – Review of Health Demand and Capacity Requirements in Ireland to, 2031
		Scoping Inquiry into the CervicalCheck Screening Programme (Dr G. Scally), 2018
Additional national strategies/reports/policies	Sláintecare Implementation Plan	
Additional HSE reviews/reports Additional inquiries	A Policy on the Development of Graduate to Advanced Nursing and Midwifery Practice, 2019	
	HSE People Strategy 2019-2024 (working draft update on previous published report)	
	A Trauma System for Ireland, 2018	
	HSE Best Practice Guidance for Mental Health Services, 2017	
	HSE Integrated Risk Management Policy 2017	
Additional inquiries Additional other organisation strategic documents	Transforming Lives Progress Report 2016 (Purpose of Transforming Lives Programme is to: ensure full inclusion and self-determination for people with disabilities.)	
	Primary care centres progress report, 2019 (key dependency for delivering services differently and closer to home for patients)	
	Report of the Review of Radiology Reporting and the Management of GP Referral Letters at Tallaght Hospital, 2010	
	The Lourdes Hospital Enquiry (M. Harding), 2006	
	Kerry Radiology Look Back Report, 2018	
	Report of the investigation into the safety, quality and standards of services provided by the HSE to patients in the Midland Regional Hospital, Portlaoise	

Appendix 2: HSE Corporate Plan 2015-2017 - Mission, Vision, Values, Goals

