



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Joint Committee on Health

Meeting

Wednesday 18th October 2017

Opening Statement

by

Mr. Tony O'Brien

Director General

Health Service Executive

Good morning Chairman and members of the Committee. Thank you for the invitation to attend the Committee meeting. I am joined today by my colleagues:

- Mr. Liam Woods, National Director, Acute Hospitals Division.
- Ms. Rosarii Mannion, National Director, Human Resources Division.

The Committee requested information and replies to a number of specific questions prior to this meeting and you will have received a written response to them. I will therefore confine my opening remarks to the following.

Hurricane *Ophelia*

There was a significant impact on the vast majority of health and social care services due to the adverse weather conditions in recent days.

We can expect a gradual return to normal services over this week. Any patients who had appointments cancelled will be contacted by the relevant service as soon as possible to be rescheduled.

Since the hurricane passed, our Community Services focused on dealing with the most vulnerable patients and clients in the first instance. This includes discharging elderly patients, whose discharge may have been delayed due to the weather, to the most appropriate facilities as quickly as possible.

Regarding Acute Hospital, they are gradually returning to normal, with all outpatient and urgent elective procedures now operating. Our Emergency Services have continued to function through the recent severe weather. We will continue to experience some pressures in our Acute Hospital system for the remainder of this week.

The HSE Emergency Planning Framework and Severe Weather Planning kicked into action over the weekend. While we will reflect on any lessons learned it is fair to say that this proved very successful in ensuring our services were well prepared and able to manage through the difficulties that presented. This was done in conjunction with our colleagues in other Government and Public Services Departments right across the country.

The recent days have been very challenging for the health services and all other response agencies. The response has been extraordinary and I would like to take this opportunity to thank all of those involved. The health services' priority is to restore all of our services as quickly as possible and to deal with the backlog of cancelled appointments that arose due to the weather crisis.

Acute Hospitals

The HSE, working with the NTPF and the Department of Health have developed Waiting List Action Plans over the last number of months for the Inpatient and Daycase (IPDC) Waiting list, Outpatients Waiting list and for Scoliosis.

Inpatient Day Case

The agreed IPDC plan identified 38,991 patients will be waiting greater than 15 months at the end of October 2017. The plan targets a 75% reduction in this number by the end of October 2017. To date we have removed almost 28,000 patients and our target for the end October is 9153. We are currently below that with 8542 patients waiting over 15 months. We expect to maintain this performance to the end of October. The HSE has worked closely with NTPF to optimise public and private capacity in the system in meeting these targets. As part of our joint efforts we are targeting the longest waiters with a view to having a plan for every patient. With the additional funding received in the budget 2018 for waiting lists, we expect to continue our collaboration with NTPF to the year end and into 2018 to offer additional treatment options for patients so that access times can be further improved.

Outpatients

In relation to OPD, the HSE and DOH agreed a 50% achievement outpatient target by October 31st 2017. The target was set at 95,508 long waiting patients to be seen by October 31st. To date 89,505 patients have been seen as at the 5th of October and we are ahead of that target. We expect to meet the target by the end of October.

Scoliosis

In relation to scoliosis, our objective is to ensure that no child is obliged to wait over 4 months for scoliosis treatment by the end of the year. The HSE action plan projected 447 procedures would need to be done to meet this target.

In 2017 to date, 272 procedures have been carried out in the public hospitals in Ireland and in Stanmore Orthopaedic Hospital in the UK. As a result of an EU tender, we have secured additional capacity in private hospitals overseas and patients are being offered the option of immediate treatment in these facilities. Our plan is to offer a further 173 procedures by the year end in order to meet the target of 4 months. We are urging patients and their families to take up these options for immediate treatment, given the capacity constraints in the Irish paediatric hospitals.

Emergency Departments

Emergency Departments are reporting increased demand in terms of the numbers of patients attending for treatment, with an increase of 1.9% year to date September versus the same period last year. There is an increase in the number of patients aged 75 and over attending ED. On average, hospitals are reporting a 5% increase in the number of older patients attending ED with some EDs experiencing upwards of 10%.

At any one time 140 beds can be closed for infection control, essential refurbishment and staffing reasons. Despite these pressures, trolley performance is equivalent to 2016 levels. Also our wait times as measured by Patient Experience Times have improved with 98% compliance with the 24 hour target. We continue to drive further improvements in this target.

The Hospital Groups and CHOs are finalising their Winter Plans which will include provision for surge capacity, additional home supports and transitional care beds. They will also set out clear escalation measures to mitigate risks of overcrowding during periods of surge attendances. I am convening a Winter Summit on the 23rd of October with senior managers and clinicians to ensure that we have all of the arrangements in place for winter and that we build on learning from previous years.

Primary Care

Further developments this year in the Primary Care area include the review of Eye Care Service which was published in June 2017.

The HSE is currently establishing a Primary Care Eye Services Oversight Group to plan the implementation of the recommendations and the future Model of Care. Funding of €1m was made available in 2017 to progress the development of eye services in the Dublin area initially. The development of a Supervised Injecting Facility is also progressing following legislation passed in May 2017. A procurement process was undertaken by the HSE to identify an appropriate service provider. The tenders are currently being evaluated and the location of the facility will be in the Dublin inner City Centre area.

In the area of Palliative Care, a further 15 beds will open in Kerry later this year and a three year Development Framework for further Palliative Care services is due to be published in November 2017. The Framework will build on existing national policy to progress the development of Palliative Care services within Acute and Community settings.

Mental Health

Within Child and adolescent mental Health (CAMHS) the CAMHS Waiting List Initiative continues to focus on ensuring that no-one is waiting over 12 months in a context where challenges exist around vacant posts and recruitment difficulties. At the end of August 2017 the total CAMHS waiting lists continued to show month on month decreases for the previous 4 months in all time bands.

The HSE National Office for Suicide Prevention (NOSP) Annual Report 2016 and National Suicide Research Foundation Self-harm Registry Annual Report 2016 were both launched on the 27th of September 2017. The NOSP report highlighted a recent decrease in deaths with provisional data for 2015 and 2016 suggesting a decreasing trend in Ireland's suicide rate, which is a positive sign. As we move forward, attention is now on ensuring that all of the relevant agencies work together to implement *Connecting for Life* Ireland's National Strategy to Reduce Suicide 2015-2020,

The mental health division is working to plan for the further development of 7 day services. It is envisaged that implementation of this plan will commence in late 2017 with an initial additional allocation of approximately 50 posts (WTEs).

Service Plan 2018

Following on from Budget 2018 announcement last week we are currently working on a draft Service Plan for 2018. As soon as the draft plan is completed it will, in line with the legislative requirements, be submitted to the Minister for Health for consideration and approval.

This concludes my opening statement and together with my colleagues we will endeavour to answer any questions you may have.

Thank you.