



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Joint Committee on Health

Meeting

Wednesday 16th November 2022

Opening Statement

by

Mr. Stephen Mulvany

Chief Executive Officer

Health Service Executive

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

- Mr Damien McCallion, Chief Operations Officer
- Ms Mary Day, National Director, Acute Operations
- Ms Yvonne O'Neill, National Director, Community Operations
- Dr Mike O Connor, National Clinical Lead, Acute Operations

Significant investment has been received through the Winter Plans and National Service Plans (NSPs) over the past three years. This investment has enabled the Health Service Executive (HSE) to respond to the immediate demands of the COVID-19 pandemic, and enhance all healthcare services across the continuum.

The Winter Plan 2022-23 includes national and local initiatives which have been developed in an integrated manner to target admission avoidance, facilitate patient flow and discharge. The plan details leadership, governance and accountability structures at both national and local levels which are providing monitoring and reporting to support effective timely implementation over the winter period. The plan aims to prepare services and mitigate against the additional risks posed by winter pressures.

Winter Pressures

There are a number of key challenges contributing to increased pressures at an earlier point in the winter period which is resulting in a high level of unscheduled care activity with a significant sustained increase particularly in attendances and admissions for those patients greater than 75 years.

There are particular demands for our primary and community care services in responding to and supporting the health needs of those seeking international protection. These increasing demands are compounded by a shortage of healthcare workers both nationally and internationally to address and deliver the staff required for core and new service developments. New issues are being faced in maintaining and opening additional bed capacity related to infection prevention and control requirements, recruitment and staff retention challenges.

Whilst currently COVID-19 hospitalised cases are stable at 317 patients, including 11 patients in ICU, there still remains the potential of a high incidence of seasonal illnesses this winter. The numbers of COVID-19 patients still present a significant demand on acute hospitals in terms of bed capacity and increased length of stay. The Health Protection and Surveillance Centre (HPSC) has advised of increasing notifications and hospitalisations of influenza and respiratory syncytial virus (RSV) cases at an earlier point in the winter period than previous pre-pandemic winters. The incidence rates of such seasonal illness are likely to increase with the colder weather during the winter period. The HSE anticipates these seasonal illnesses (COVID-19, Influenza and RSV), coupled with other challenges, will result in high pressures in the demand and delivery of health and social services this winter. In the week ending 5th November, there were 117 influenza cases and 439 RSV cases notified.

Unscheduled Care Activity (2022)

As of the 6th November 1,211,467 patients have attended our Emergency Departments in the year to date, this equates to an additional 77,430 patients i.e. 6.8% increase in comparison to the same period in 2019. For patients greater than 75 years and older, total ED attendances for the year to date is 160,749, this represents an increase of 14.1% on the same period in 2019.

ED admissions have also increased, with 304,814 patients admitted from our Emergency Departments in the year to date, which represents a 3.4% increase in comparison to the same period in 2019. For patients aged over 75 years, ED admissions in the year to date are 10.1% greater than the same period in 2019.

Winter Plan 2022-2023

In line with previous years and in response to these demands, the Winter Plan 2022-23 national initiatives have focused on delivering additional capacity, improving pathways of care, rolling out the vaccination programme for flu and COVID-19.

Funding has been allocated for the delivery of additional capacity in both acute and community services. Within our Emergency Departments (EDs), staffing capacity is being increased through the recruitment of additional nursing staff in line with Phase II of the Safe Staffing and Skill-Mix Framework.

All hospital sites and associated CHOs will implement an integrated process for those patients with a hospital stay of over 14 days in order to improve integrated communication, patient flow and discharge.

Alternative patient pathways are being implemented during the winter period to support admission avoidance, patient flow and discharge.

- €6.8 million has been allocated to the National Ambulance Service (NAS) for winter initiatives including deploying Rapid Handover Teams.
- Funding of €500,000 have been assigned to provide 1,340 nights of palliative care nursing
- €16 million has been allocated for Transitional Care Beds to support the discharge of patients from acute hospitals.
- €4 million has been allocated to the provision of short stay respite services, providing important supports for both patients and their caregivers.
- €4m has been allocated to complex care packages which are facilitating discharge and maintaining patients with high complex care needs at home.
- €5.1 million to provide 18 residential packages to disabled people.
- €3 million has been allocated to mental health placements to assist discharge from acute hospitals.
- €4.5 million has been allocated to provide aids and appliances.
- €10 million has been allocated to GP supports including GP Access to Diagnostics and Out-of-Hours Supports which are ongoing.
- €2 million for the expansion of Community Intervention Teams (CIT) with a particular focus on the Mid- West and North- West regions.
- Enhanced Community Care (ECC) pathways and supports are targeting those at risk of hospital admission this year including the provision of ring-fenced community bed capacity and home supports for older people.

In addition to the outlined national initiatives, since 7th April 2022, individual integrated bespoke winter plans were developed for acute hospital sites and associated CHOs. A total of 447 WTEs and funding of over €54.8 million is associated with these local plans.

In total, a funding requirement of over €169 million has been approved to implement these measures over 2022/2023, including the recruitment of 608 Whole Time Equivalent (WTE) posts across a range of services.

Governance

The Chief Operations Officer is responsible for the Winter 2022-23 plan. A performance unit monitors and reports on an agreed suite of targeted KPIs and winter plan implementation. To ensure oversight at a local level, each area has Local Integrated Implementation Teams which will be jointly chaired by Hospital Groups' Chief Executive Officers (CEOs) and Community Healthcare Organisations' (CHOs) Chief Officers.

That concludes my statement.

Thank You