



An Roinn Sláinte
Department of Health

Muriel Farrell

Sláintecare
HMI West Regional Meeting
18th November 2019

#Sláintecare
#RightCareRightPlaceRightTime

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Right Care.Right Place.Right Time.

1

**Improving the patient experience is a
fundamental Sláintecare goal and
underpins all of our actions**

2

The goal is to enable...



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Through:


- Population based approach to planning services
- Clear pathways between GPs, community and social care services, and hospitals within geographical regions
- Empowerment of front-line staff, devolved responsibility and decision-making
- One budget per region



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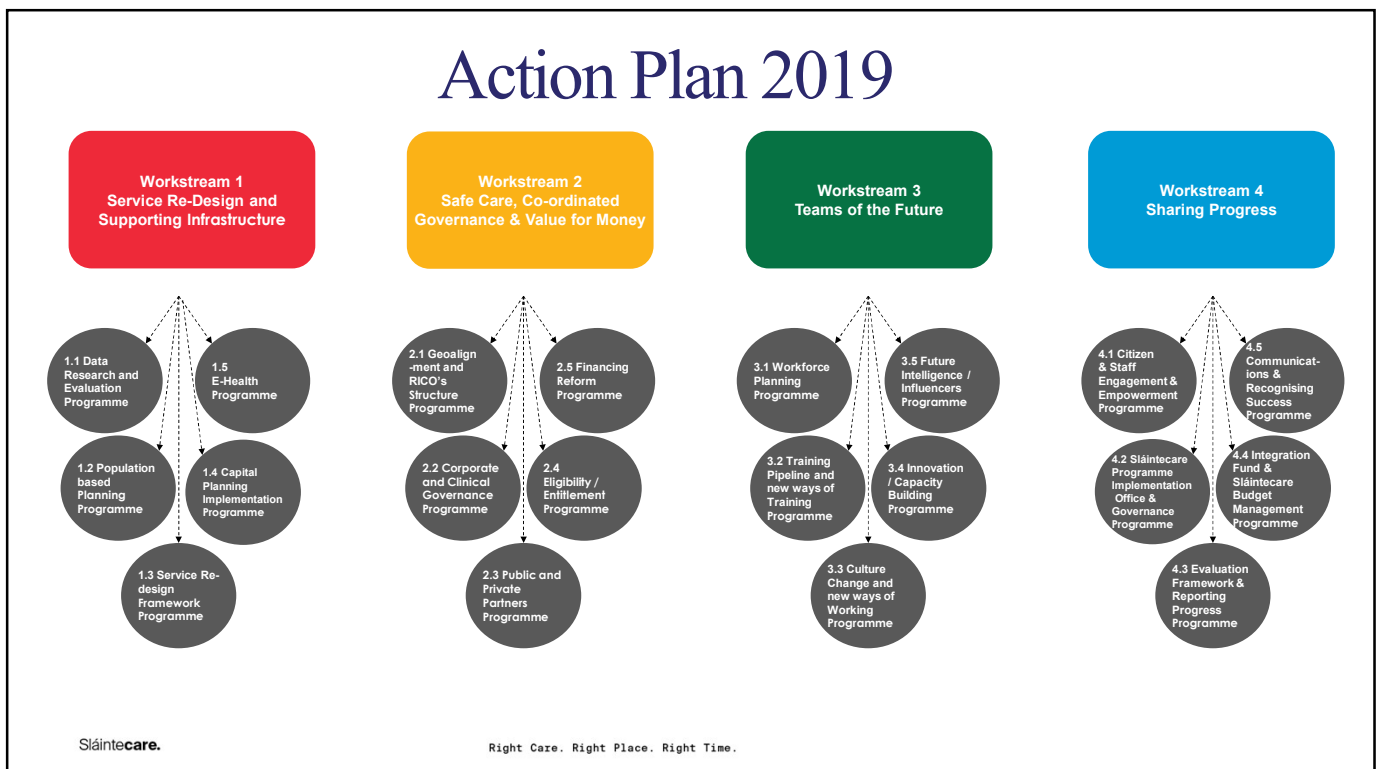
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Progress To Date

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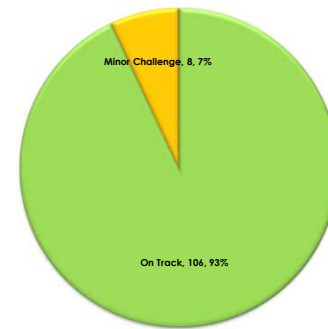
Sláintecare Q3 Deliverables

► 114 deliverables to September 2019

► 93% on track with 7% having minor challenges

(to be delivered before year-end)

January to September 2019 Status Overview of Deliverables



■ On Track ■ Minor Challenge ■ Significant Challenge ■ On Hold

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Foundational Decisions

- Six new Regional Health Areas
- New HSE Board & CEO in place
- GP Contract
- Enhanced Nurse Contract agreed
- National Clinical Programmes Review and Recommendations
- Dialogue Forum to strengthen relationship with Voluntary providers
- Community Health Care Networks
- De Buitléir Report published

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Regional Health Areas



Details of the Counties, CHOs^[1], LHOs and Hospitals in each of the six new regional health areas

Geography	CHO Area covered	Counties/LHOs (Local Health Offices)	Hospitals (Model 4 hospitals ^[2] in bold)	Population (Census 2016, rounded)
A	All of CHO 9	Dublin North Central, North West Dublin, North Dublin, Meath, Louth,	Beaumont Hospital Capangan National Orthopaedic Hospital Cavan Monaghan Hospital Connolly Hospital Blanchardstown Louth County Hospital, Dundalk Mater Misericordiae University Hospital Our Lady's Hospital Navan Our Lady of Lourdes Hospital Drogheda Rotunda Hospital Dublin	1,080,000
B	All of CHO 7	Dublin South City, Dublin South West, Dublin West, Kildare West Wicklow, Laois/Offaly Longford/Wexmouth	Coombe Women & Infants University Hospital Midland Regional Hospital Mullingar Midland Regional Hospital Portlaoise New General Hospital Tallaght University Hospital St. James's Hospital	1,000,000
C	All of CHO 6	Dublin (South East), Dun Laoghaire, Wicklow,	Lourdes Orthopaedic Hospital Kilmenee National Maternity Hospital, St. James's Street Royal Victoria Eye & Ear Hospital St. Columba's Hospital St. Luke's General Hospital Kilkenny St. Michael's Hospital, Dun Laoghaire St. Vincent's University Hospital South Tipperary General Hospital University Hospital Waterford Waterford General Hospital	900,000
D	All of CHO 4	West Cork, Cork South Lee, Cork North Lee, North Cork, Kerry	Barry General Hospital Cork University Hospital Cork University Maternity Hospital Mallow General Hospital Mercy University Hospital South Infirmary-Victoria University Hospital University Hospital Kerry Westford General Hospital	690,000
E	All of CHO 3	Limerick, Clare, North Tipperary/East Limerick	Coombe Hospital Limerick Ennis Hospital Nenagh Hospital St. John's Hospital Limerick University Hospital Limerick University Maternity Hospital Limerick	390,000
F	All of CHO 2	Galway, Roscommon, Mayo, Sligo/Letrim ^[3] , Donegal	Galway University Hospitals Letterkenny University Hospital Mayo University Hospital Portlaoise University Hospital Roscommon University Hospital Sligo University Hospital	710,000

[1] CHO: Community Healthcare Organisations

[2] Model 4 hospital: This type of hospital provides regular acute and elective inpatient and ambulatory care, managing high acuity procedures and patients, cancer care and single national surgical specialties, and there is an Emergency Department

[3] West county Carraig: A small portion of west county Carraig continues to be aligned with Sligo/Letrim for health services.

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Community Health Networks



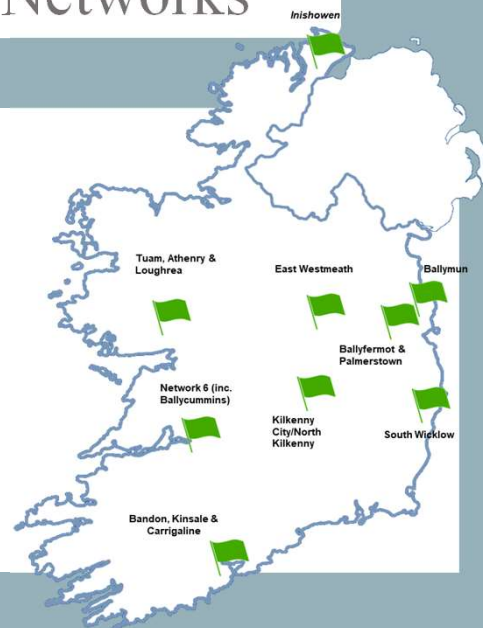
50,000
Avg.
population
per Network

96
Networks

4-6
Primary
Care
Teams per
CHN

9 Network
learning
sites in
2019

1
Community
Healthcare
Network
Manager per
Network



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Capacity Plan

Capacity Plan/ Waiting List Implementation Framework As per the Health Service Capacity Review to 2031

Projected 2031 demand
+7,150 acute beds
+2,930 primary workers
+11,900 residential beds
+11,130 home care pm
+7.2m home help hrs

Capacity Targets:
2,600 Acute beds
2,100 Independent beds
 500 day beds
 190 Adult CCU beds
3,840 Primary Workers
1,800 GPs
 1,200 PNs, 1,100 PHNs, 120 APPs
13,000 Residential beds
19,460 Home care packages
12.5m home help hours

Impact of Reform
+2,600 acute beds
+3,840 primary workers
+13,000 residential beds
+19,460 home care pm
+12.5m Home help hrs

Sláintecare Reform Initiatives:

Healthy Living Pillar

-990 acute beds
 -530 primary workers

Associated activity to include:

- Implementation of Healthy Ireland Framework
- Making Every Contact Count
- HSE National Priority Programmes including: Health Childhood; Healthy Eating & Active Living; Reducing Alcohol Consumption; Smoking cessation; Obesity management; Cardiac/pulmonary rehab;
- Positive Ageing
- National Screening Service
- National Immunisation Programme
- Public Health Protection
- Promoting patient self-care and improving healthy behaviours

Enhanced Community Care Pillar

- 1,900 acute beds
+1,230 primary workers
+600 residential beds
+7,200 home care pm
+4.8m home help hrs

Associated activity to include:

- Development of and investment in comprehensive and integrated community based services (National/Regional/CINs)
- Redesign and implementation of integrated care for older people and chronic disease management across primary care, acute hospitals and services for older persons via CHNs /Regional Areas /Integrated Care Programmes
- Increased eHealth infrastructure
- Enhancing social care provision to provide timely step down and home care support
- Development of community-based diagnostic facilities
- National adoption of ambulatory emergency care model
- Social Inclusion Measures
- Hospital Avoidance Measures

Hospital Productivity Improvements Pillar

- 1,670 acute beds
+190 primary workers
+500 residential beds
+1,130 home care pm
+0.5m home help hrs

Associated activity to include:

- National adoption of ambulatory care models
- Improved ward management – including 'Home by 11' and 'Discharge to assess'
- Shift of procedures to lower acuity settings – including day case and outpatients
- Improved management of outpatients, reducing ratio of follow-up appointments.
- Reconfiguration of service into networks (major trauma centres, stroke, complex surgery)
- Establishment of elective specialist centres
- Better use of Model 2 hospitals for high-volume low complexity cases

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Budget 2020

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Budget 2020 and Sláintecare, including..

Amount 2020	Funding Areas
€10 million Enhanced Community Fund (€60 million in 2021)	Up to 1,000 therapists, nurses and other frontline staff to care for people in the community, including advisers for people with Dementia. This will allow us to treat people in the community, closer to their own homes, reducing community waiting lists.
€20 million Integration Fund	Scaling successful projects for: -Engagement and Empowerment of People in the Care of their own health -Moving care from the hospital to the community -Care of Chronic Diseases and Older Persons
€12 million Care Redesign Fund	Care redesign - providing care at the least form of complexity, in accordance with the clinical care programmes, to people in the right location.

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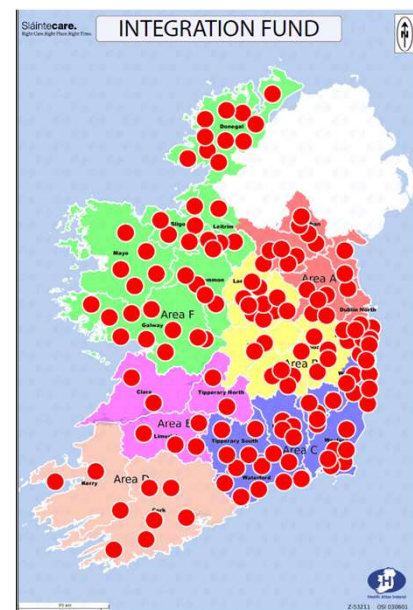
Improving the patient experience

Integration Fund

477 applicants

122 successful projects

- Promote the engagement and empowerment of citizens in the care of their own health
- Scale and share examples of best practice and processes for chronic disease management and care of older people
- Encourage innovations in the shift of care to the community or provide hospital avoidance measures



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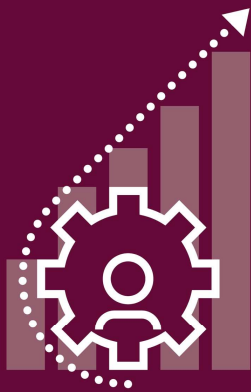
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And others... 300 staff
within the Integration
Fund projects

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What's happening
next...

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Leading Health. Policy Implementation

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- Planning and co-design for the regional areas
- Ongoing programme of citizen and staff engagement and empowerment
- Decision on de Buitléir Report
- Decision on elective hospitals location
- Supporting pathways that keep people well and independent



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Sláintecare, working together, across the system



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Sláintecare in Action



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Project Name	Lead organisation	Total
Development of a Respiratory Team for Co Monaghan	CHO 1	2.5
Development of the physiotherapy led Pulmonary Rehab services in primary care Co Mayo	Mayo University Hospital/Primary Care	2.5
Donegal Heart Failure Integrated Care Service	Letterkenny University Hospital	5.5
Donegal Primary Care Optometrist	CHO 1 HSE PCCC North West	2.0
Electronic ordering for GP lab tests	Saolta Hospital Group	0.6
Establishment of Oxygen assessment clinics in Primary Care Donegal	CHO 1	0.5
Expansion of the Model of Diabetes Integrated Care throughout Sligo	LeitrimWest Cavan	1.5
Extension of Stanford Chronic Disease self-mgt to all of CHO 1	CHO 1	1.5
Galway University Hospital Community Cardiac Diagnostics	Galway University Hospital	1.5
Heart Failure Improving Patient Outcomes and Health Service Efficiency by Comprehensive and Innovative Integration of Care Across the Continuum of Healthcare Settings	Portiuncula University Hospital/Primary Care Galway	3.3
Implement a structured exercise programme for people with Diabetes	CHO 2 & Saolta Hospital Group	1.0
Improving Access to Healthcare : Spread and Scale-up of a HSE Health Passport for individuals with an Intellectual Disability in acute hospital and primary care settings	CHO 1 & Saolta Hospital Group	3.0
Initiate Specialist Medical Retina services and intravitreal injections in Community Ophthalmics Service, Co Donegal	CHO 1	2.0
Integrated Care for Older People Model for falls prevention and management	CHO 1 & Sligo University Hospital	5.0
Integrated Population based Falls Model for Mayo	CHO 2 & Mayo University Hospital	2.0
My Home MHCIS	CHO 2	3.0
My Slainte Community Lifestyle Programme	National Institute for Prevention and Cardiovascular Health	4.8
Osteoarthritis Knee Pathway	CHO 2 & Saolta Hospital Group	2.0
Pain management education programme	Sligo University Hospital	4.5
Post Diagnostic Support worker for people with dementia Inishowen	CHO 1 Older Persons Services	1.0
Selective Laser Trabeculoplasty for Community Ophthalmic Service Donegal	CHO 1	0.2
Social Prescribing for improved Health and Wellbeing	CHO 1	2.3
Stanford Chronic Disease Self-Management Programme in CHO 2	CHO 2	1.1
Telemedicine for CF	Galway University Hospital	1.0
Urology Pathway- Proof of Concept Project	Saolta Hospital Group	3.0
Western Alzheimers Befriending Service	Western Alzheimers	1.0
Grand Total		58.2

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Heart Failure – Innovative Integration of Care Across the Continuum

Dr. Chris McBrearty
SláinteCare Project Manager
Portiuncula University Hospital

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The Challenge...



10,000+

new cases of Heart Failure each year



90,000

people in Ireland
suffer with Heart Failure

160,000

people with impending
(asymptomatic) Heart Failure¹



High re-admission rates

24 - 44%

Re-hospitalisation rates after discharge^{2h}



7%

of all HSE inpatient bed days
are Heart Failure related³

231,042

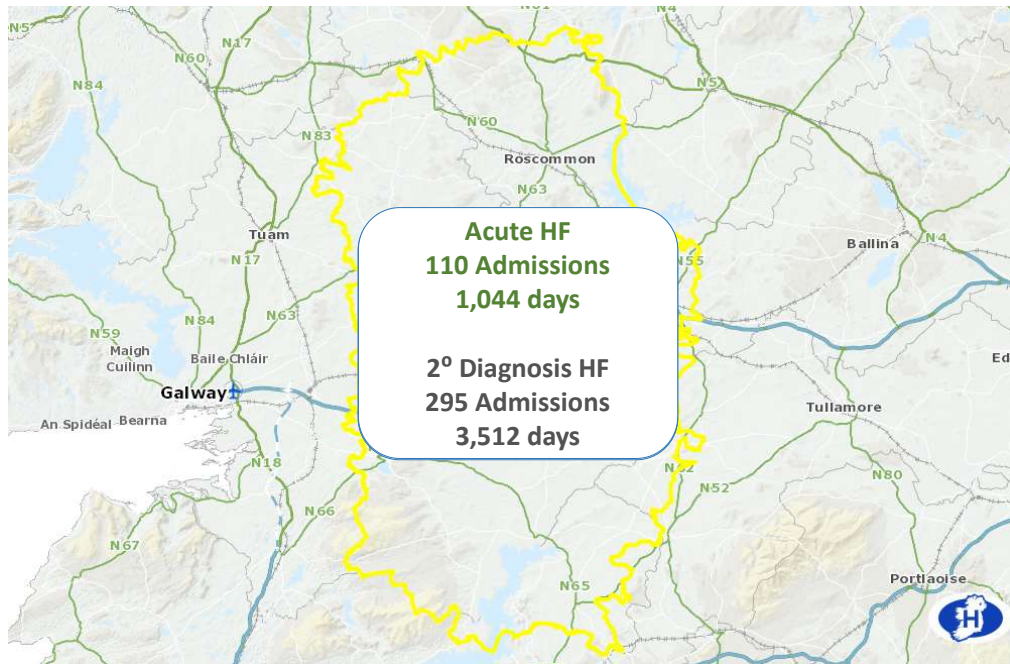
Total hospital
bed days⁴



The total cost of Heart Failure
is estimated at

€660m⁵

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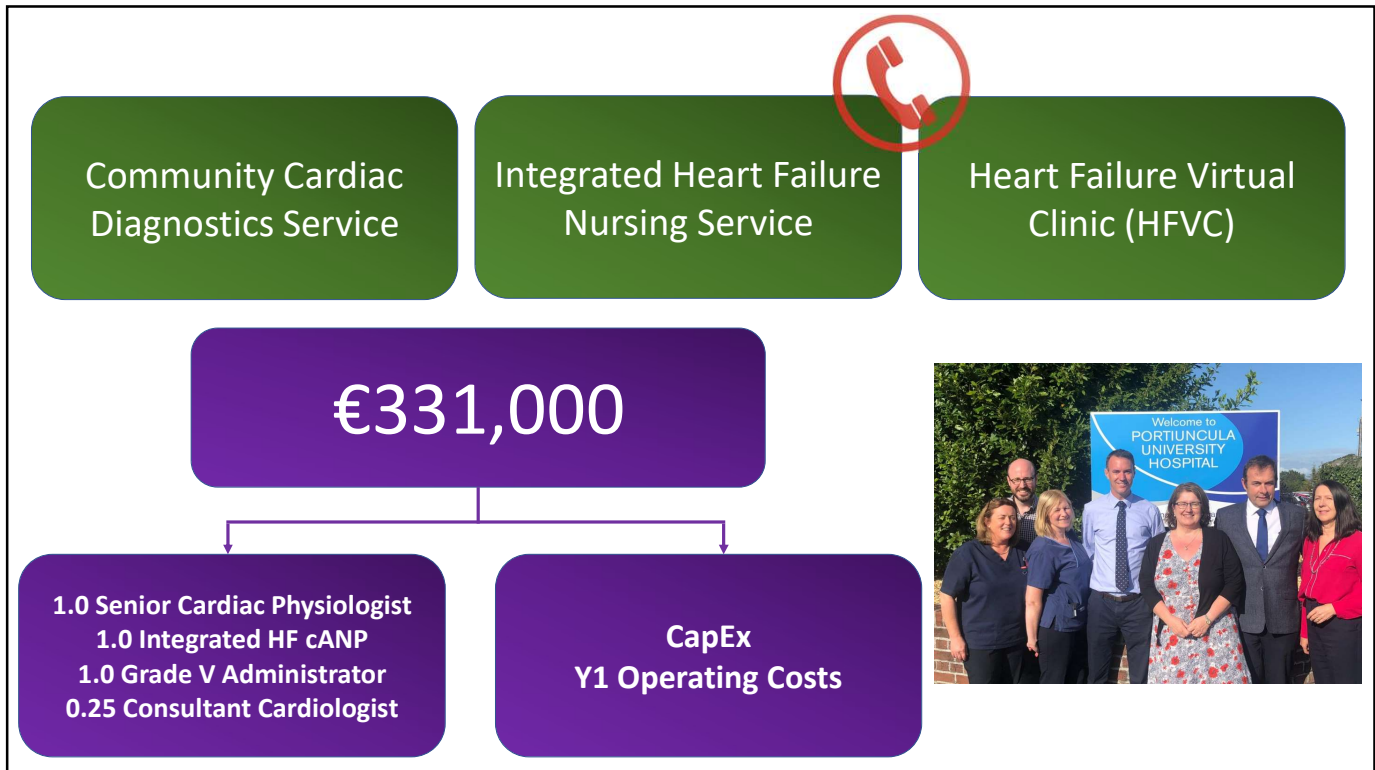
Integration Fund



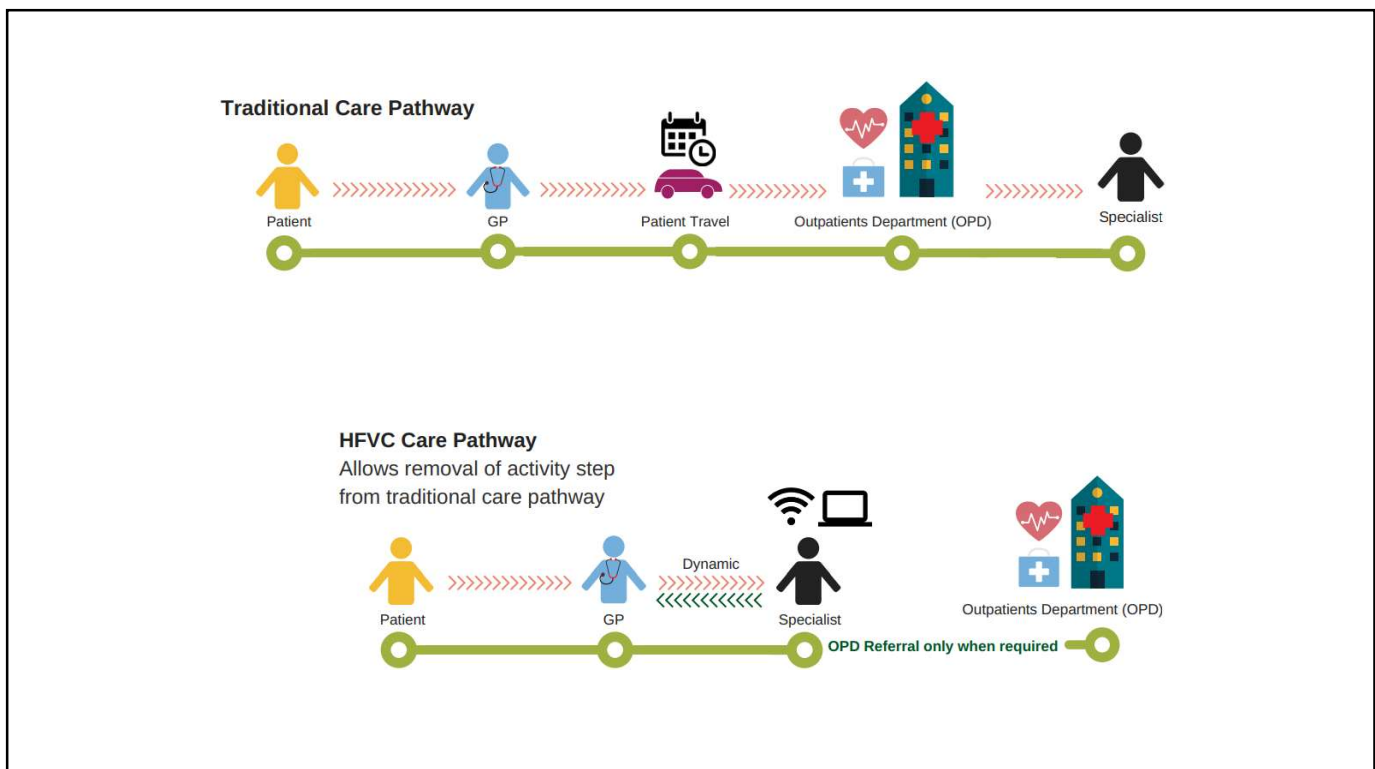
Rigorous Process

- Demonstrate Integration
- Patient-centered
- Improve Patient Experience
- Scalability
- Time to Implementation
- Measurable Outcomes

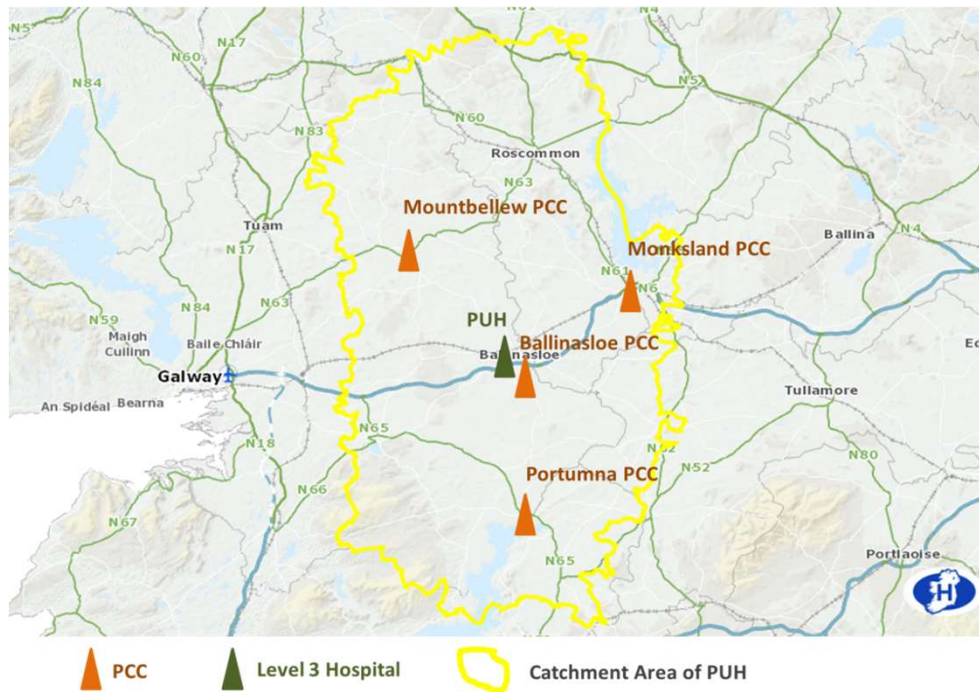
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Integrated Heart Failure CNS

Integrated Heart Failure cANP

Senior Cardiac Physiologist

Consultant Cardiologist

Inpatient Heart Failure CNM

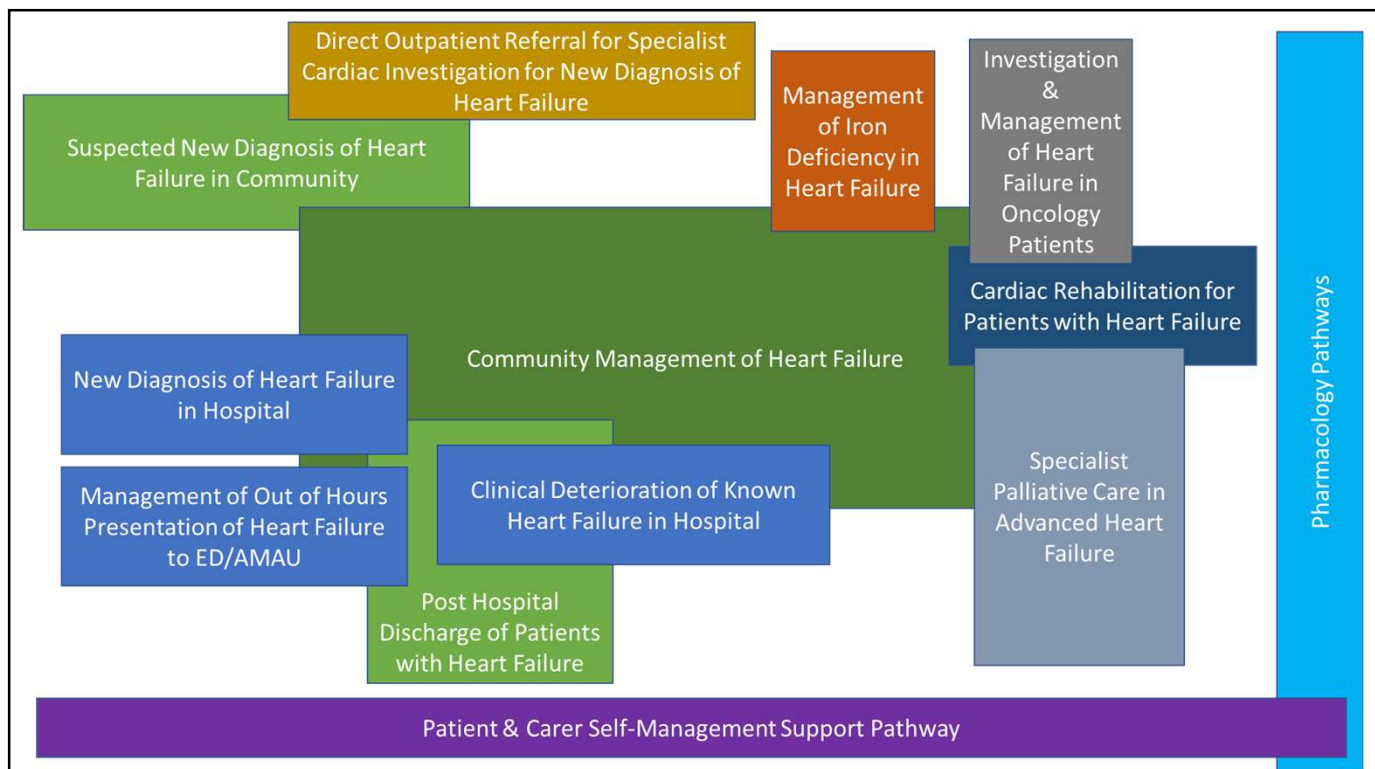
Grade V Administrator

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Projected Outcomes

- 40% reduction in PUH Cardiology OPD appointments for patients with heart failure
- Avoidance of 20% of admissions for primary diagnosis of heart failure
- 20% reduction in AvLOS of patients admitted with primary diagnosis of heart failure
- 10% reduction in AvLOS of patients with admission complicated by heart failure (secondary diagnosis)
- Displacement of 400 Echocardiograms from PUH Cardiac Investigations Department to community
- >50% of PUH admissions with primary diagnosis of heart failure accessing early supported discharge services
- Increase percentage of patients requiring hospitalisation with heart failure that are admitted electively to 10%
- >80% Patient Satisfaction with experience of service

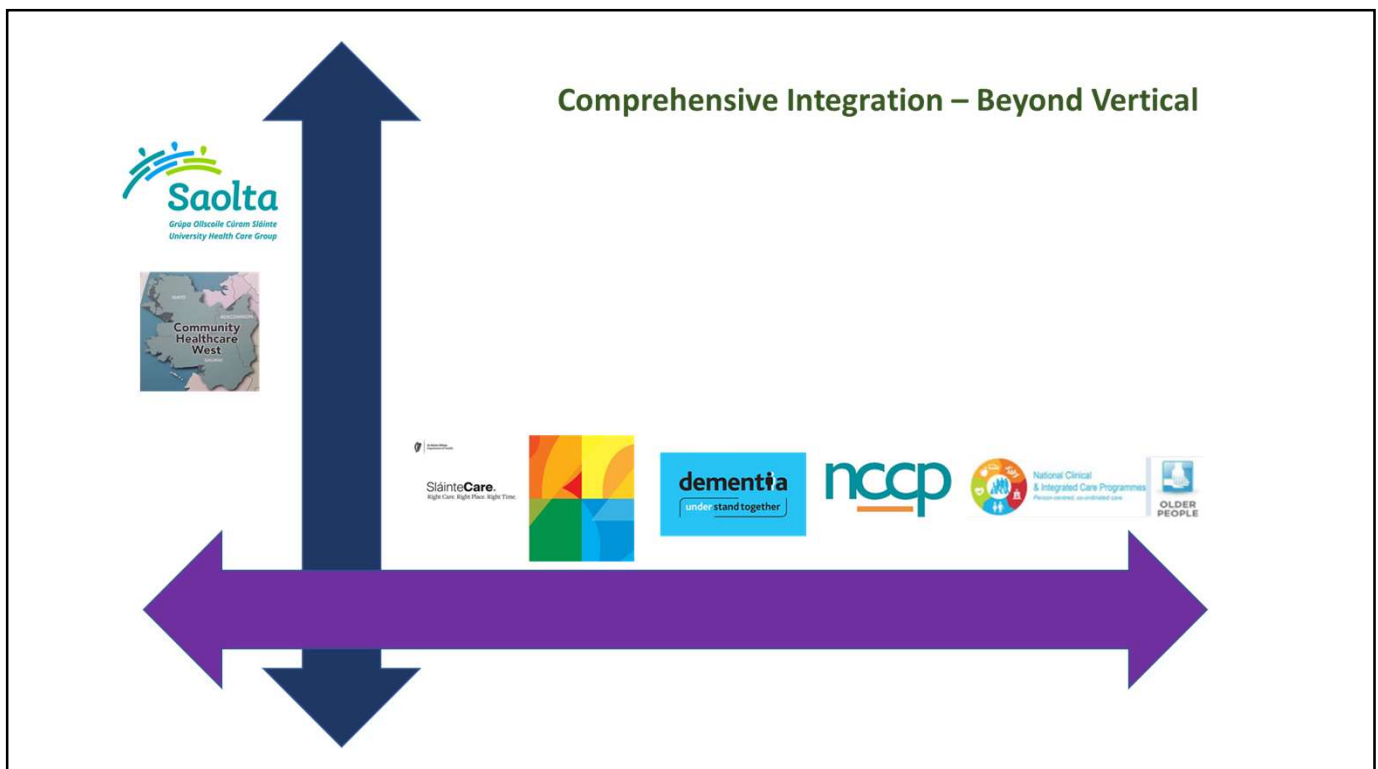
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Next Steps

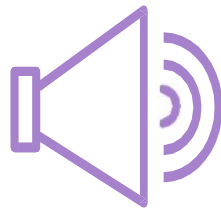
- Recruitment & Procurement
- Stakeholder Engagement
 - Pathway Development
 - Communication of Service Goals & Logistics
- Geographic Validation of PUH Echo List for Redistribution
- Reconfiguration of current staff roles
- Launch Community Diagnostics Service
- Launch Heart Failure Virtual Clinic
- Expansion of Integrated HF Nursing Services
- Robust Data Collection

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Questions?

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Sláintecare would like to hear
from you!



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How, as managers, can we continue to facilitate and empower frontline staff and teams to work collaboratively to develop clear pathways between GPs, community and social care services, and hospitals within the region?



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Department of Health

Sláintecare Integration Fund Learning Network Kick Off Meeting

Tuesday 10th December, 2019 from 10.00-16.00, Radisson Blu Hotel Athlone, Northgate St,
Athlone, Co. Westmeath

We want to bring all of the successful Sláintecare Integration Fund projects together for a kick-off meeting to:

- Network and learn about each other's projects,
- Outline the aims and ways of working of the Sláintecare Integration Fund Learning Network,
- Outline Sláintecare's communications campaign for the Integration Fund,
- Updates on project management, engagement and support in 2020.

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Thank you!

helloslaintecare@health.gov.ie

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