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# Executive Team



**Bill Maher**  
Group CEO



**Colette Cowan**  
Chief Director of Nursing and Midwifery



**Dr Pat Nash**  
Chief Clinical Director



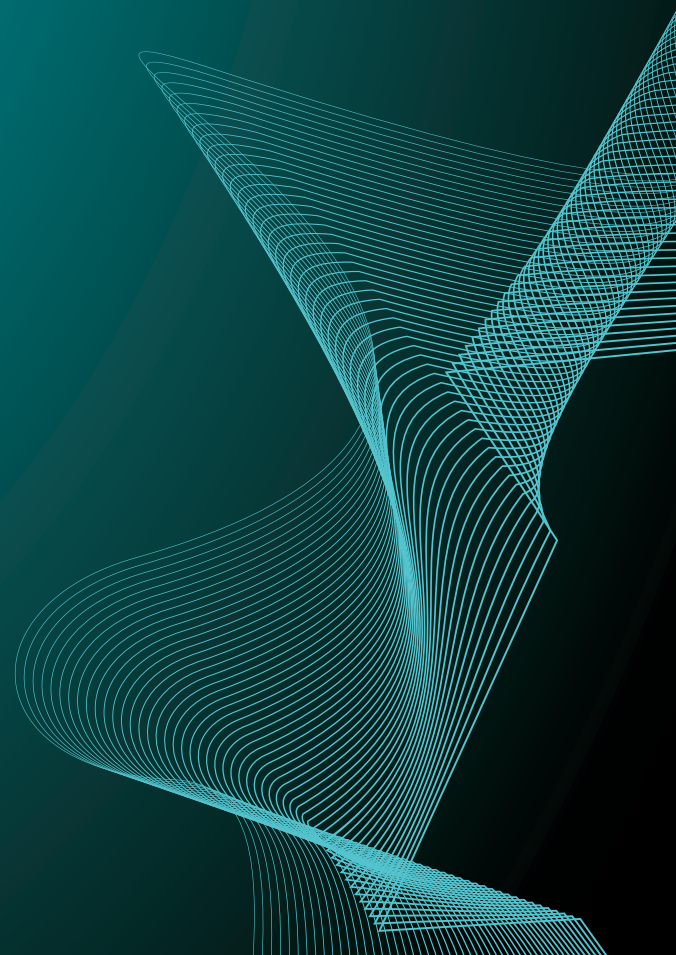
**Tony Canavan**  
Chief Operating Officer



**Maurice Power**  
Chief Financial Officer



**John Shaughnessy**  
Group Director of Human Resources



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# CEO Foreword

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**Bill Maher, Group  
CEO**

The Galway and Roscommon University Hospitals Group was originally established on 09 January 2012 and comprised Galway University Hospitals, Portlinculla Hospital Ballinasloe and Roscommon Hospital. In May 2013, Minister for Health, Dr James Reilly announced the re-organisation of all public hospitals into hospital groups as the next stage in a fundamental reform of the Irish acute hospital system. The West / North West Hospitals Group officially came into being on 29 July 2013 when the Galway and Roscommon University Hospitals Group was extended to include Letterkenny General Hospital, Sligo Regional Hospital and Mayo General Hospital with a new academic partner, NUI Galway.

2013 was most notable for two significant events; the establishment of the West / North West Hospitals Group and the flooding at Letterkenny Hospital, Donegal



Minister for Health, Dr James Reilly, TD with Seán Murphy, General Manager, Letterkenny General Hospital viewing the rebuild programme at the hospital following the flood.

The new structure brought together six hospitals on seven sites under one CEO, sharing resources, budget and service activity in order to maximise effectiveness, reduce waiting lists and provide the appropriate care for patients in the right setting.

By working as one unit, it has been possible to reduce inefficiency and maximise the use of resources to ensure that safe hospital services are provided with the best outcomes for patients.

The second significant event in the last year, for the newly formed Group, was the major flooding of Letterkenny General Hospital on 26 July. This was one of the greatest disasters to affect an acute general hospital in the history of the state.

The hospital's recovery and speed of restoration of clinical services similarly constituted not only a huge achievement for Letterkenny General Hospital but also a huge achievement for the West / North West Hospitals Group.

## Governance

The Board for the Galway and Roscommon University Hospitals Group was appointed in January 2013 and the framework for the Board was then established. The Board expanded with the addition of the Mayo, Sligo and Letterkenny Hospitals to the Group and three non-Executive Directors were added to form the Board for the West / North West Hospitals Group.

In addition, the Clinical Director structure was streamlined in 2013 from six directorates to four with the Clinical Directors and an interim Chief Academic Officer being appointed in November.

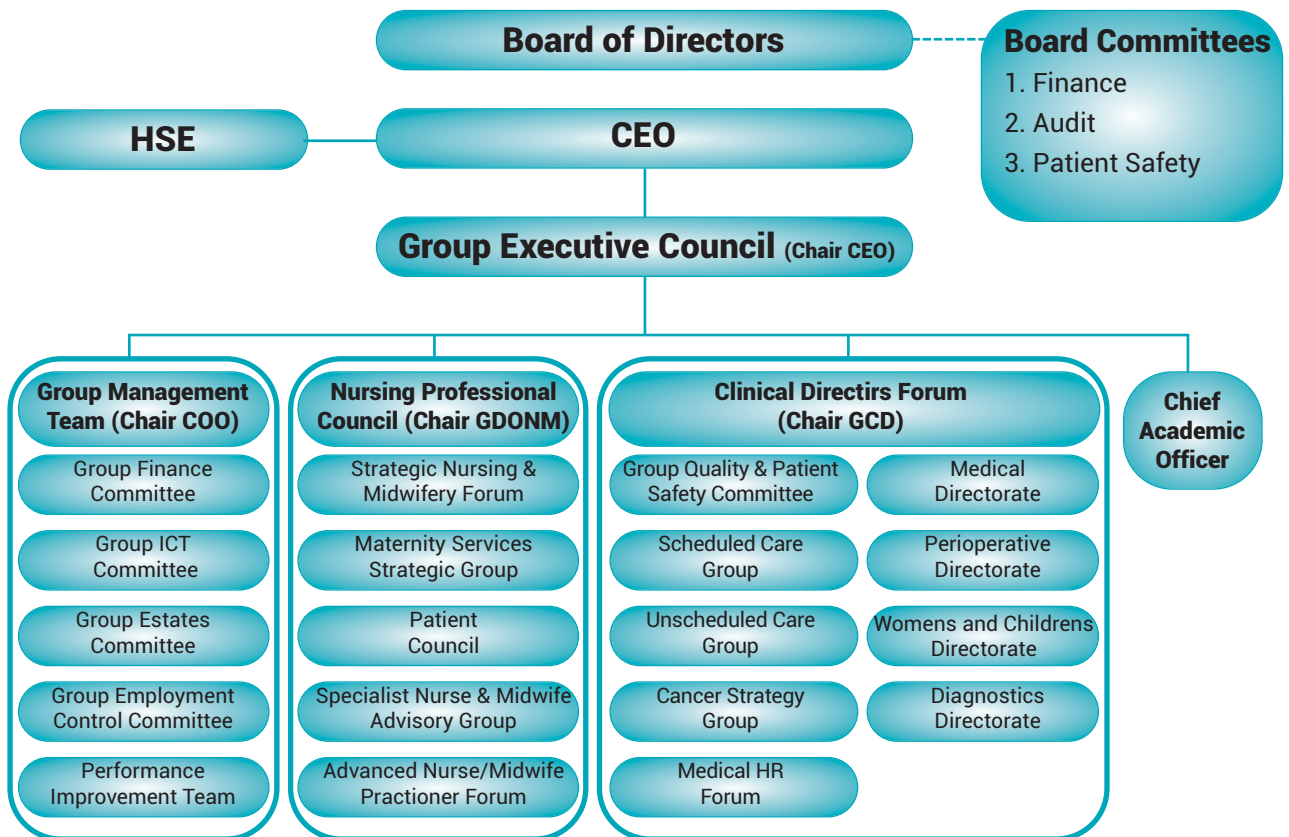


The four Clinical Directors and interim Chief Academic Officer appointed in November, from left to right: Dr Donal Reddan, Dr Colm O'Donnell, Dr Geraldine Gaffney, Dr Paul Naughton and Dr Anthony O'Regan, interim Chief Academic Officer.

The new directorates are:

- Medical Directorate – Dr Donal Reddan, Clinical Director.
- Peri-operative Directorate (incorporating Surgery, Anaesthesia and Critical Care) - Dr Paul Naughton, Clinical Director.
- Diagnostics Directorate (incorporating Radiology and Laboratory Medicine) - Dr Colm O'Donnell, Clinical Director.
- Women's and Children's Directorate – Dr Geraldine Gaffney, Clinical Director.
- The interim Chief Academic Officer - Dr Anthony O'Regan.

## Group Governance Structure



The new directorates, under the leadership of the new Clinical Directors, are responsible for providing high quality and equitable services for all patients based on excellence in clinical practice and teaching. The clinical directorates support the principle that the care of the patient comes first at all times.

The Clinical Directors are responsible for implementing the national clinical care programmes, developing service plans and setting and meeting performance targets. This in turn will lead to improved quality, enhanced performance and efficiency by bringing together the appropriate medical, allied health professionals, pharmacy, nursing, administrative and support service staff to work together as one business unit.

The Clinical Directors also play a key role in quality and safety by implementing the National Standards for Safer Better Healthcare, conducting regular clinical audits and implementing the risk management and complaints procedure in each directorate.

The interim Chief Academic Officer is responsible for developing a structured and integrated approach to education and training for all healthcare professionals in the Group. This includes establishing a Graduate Medical Education Department to co-ordinate Non Consultant Hospital Doctor and Consultant training and creating a system of support/mentoring for all trainees.

The role will also involve working closely with our academic partner, NUI Galway to ensure a cohesive and integrated approach to undergraduate medical, nursing and allied health professional education.

The interim Chief Academic Officer will also be responsible for identifying research priorities for the hospital group, with a particular focus on those that are consistent with the strategic priorities of NUI Galway and for developing relationships with industry and other strategic partners to support new innovative projects across the Hospital Group.

## Access

In 2013 all hospitals in the expanded Group met the inpatient / day case waiting list targets that no adult waited more than 8 months for an inpatient or day case procedure, no child waited more than 20 weeks and all scopes were carried out within 13 weeks. The outpatient waiting list target set by the Special Delivery Unit (SDU) was that 'no patient should wait longer than 12 months for an outpatient appointment by November 2013' (extended to December 2013). The Group also achieved the outpatient waiting list target in 2013 for all areas other than orthopaedics.

Our approach to the delivery of hospital services since the formation of the Galway and Roscommon University Hospitals Group in January 2012 has been to maximise the benefits to our patients from being part of a hospitals group. In addition to minimising the administrative overhead, operating as a Group allows us to transfer work to where we have resources and vice versa. This approach has been particularly effective in helping us to achieve the inpatient waiting list target and in reducing diagnostic waiting times during 2013. In a similar vein we will continue to develop our approach to outpatient waiting list management, through the centralisation of the referral process and through the greater use of information technology.

During 2013, the Group focused on addressing the length of time patients spent in the Emergency Department (ED) with the aim of reducing the overall numbers of patients awaiting admission on each site. Overall the numbers of patients waiting in ED for admission has decreased since 2012. Initiatives such as structured ward rounds, the development of the Acute Medical Assessment Unit at Portiuncula Hospital and extended hours of '8 to 8' in the Acute Medicine Unit (AMU) at Galway University Hospitals, have been put in place to ensure efficient use of the AMU and improve patient flow.

## Performance

Key Performance targets for each hospital in the Group were developed in 2013 and the responsibility for each lies with the Directorates, Specialties and Departments throughout the Group. The performance targets were widely distributed to focus attention and accountability so that each staff member was aware of how their contribution impacted on the Group's overall results.

In 2013 we commenced implementation of the national standards of quality and care, set out by HIQA, across the Group along with maintaining the national care programmes and the small hospitals framework.



## Strategic Plan for the Hospital Group

The Higgins Report, 'The Establishment of Hospital Groups as a transition to independent Hospital Trusts', published in May 2013, recommended that each hospital group conduct a review of the services delivered by each hospital in the group within 12 months of being established. The Group has already commenced this process in respect of Cardiology and Maternity Services. The outcomes of these reviews will be considered and brought forward for implementation in 2014. Reviews of the Urology and Orthopaedic Services will commence in 2014.

All of the above makes for Impressive reading and details of the achievements across the individual hospital sites, directorates and departments are outlined throughout this report.

It must be noted that none of the above developments could have been achieved without the efforts of staff, in every department, in every hospital across the Group. I sincerely thank you for your hard work, dedication and commitment to patient care and to the development of the West/ North West Hospitals Group during the past year.

As CEO, I am privileged to head up such a fantastic Group and I look forward to the future and achieving the Groups ambitious plans for 2014. I also look forward to your continued support in delivering high quality service during the challenging times ahead.

**Bill Maher, Group CEO**



# 1.0 Corporate and Clinical Governance

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**Noel Daly, Chair of the West / North West Hospitals Group**

In January 2013, the Galway and Roscommon University Hospitals Group Board was appointed and following the publication of the Higgins Report, the Board expanded in July 2013 to become the Board of the West / North West Hospitals Group. At that time, three additional non-Executive Directors were

appointed, following the addition of Mayo General Hospital, Sligo Regional Hospital and Letterkenny General Hospitals. These new Board members are: Gerry McManus, Sharon Moohan and Colam O'Neill.

In July 2013, the Board expanded to become the Board of the West / North West Hospitals Group

There were nine Board meetings held in 2013; two of which were held in public. The purpose of the public meetings was to provide local ownership, interest and transparency to the people that the Board represents. All Board meetings were rotated across the Group hospitals and this provided each site with the opportunity to showcase their hospital as part of the developing Group. In addition, the Board held a Special Board meeting to consider the findings and recommendations of the HIQA Report, the Coroner's Recommendations and the Clinical Inquiry into the Maternal Death at University Hospital Galway. The Board received regular reports on the implementation of the recommendations and will present a full status report at a Board meeting to be held in public in 2014.

The Group was also severely challenged on 26 July, 2013 following the severe flooding at Letterkenny General Hospital. I am pleased to report that thanks to the Group CEO and his Executive Team, the response to the crisis and the redevelopment programme showed real leadership and action.

As a Board, we aim to provide high quality care to the communities we serve. Our goal is to deliver exceptional quality to every patient in every hospital during each encounter. We strive to be the best in all that we do. We realise that we have a unique opportunity to make a difference in the lives of thousands of individuals every day. To accomplish this, we will always put patients first, and remain true to our core values.

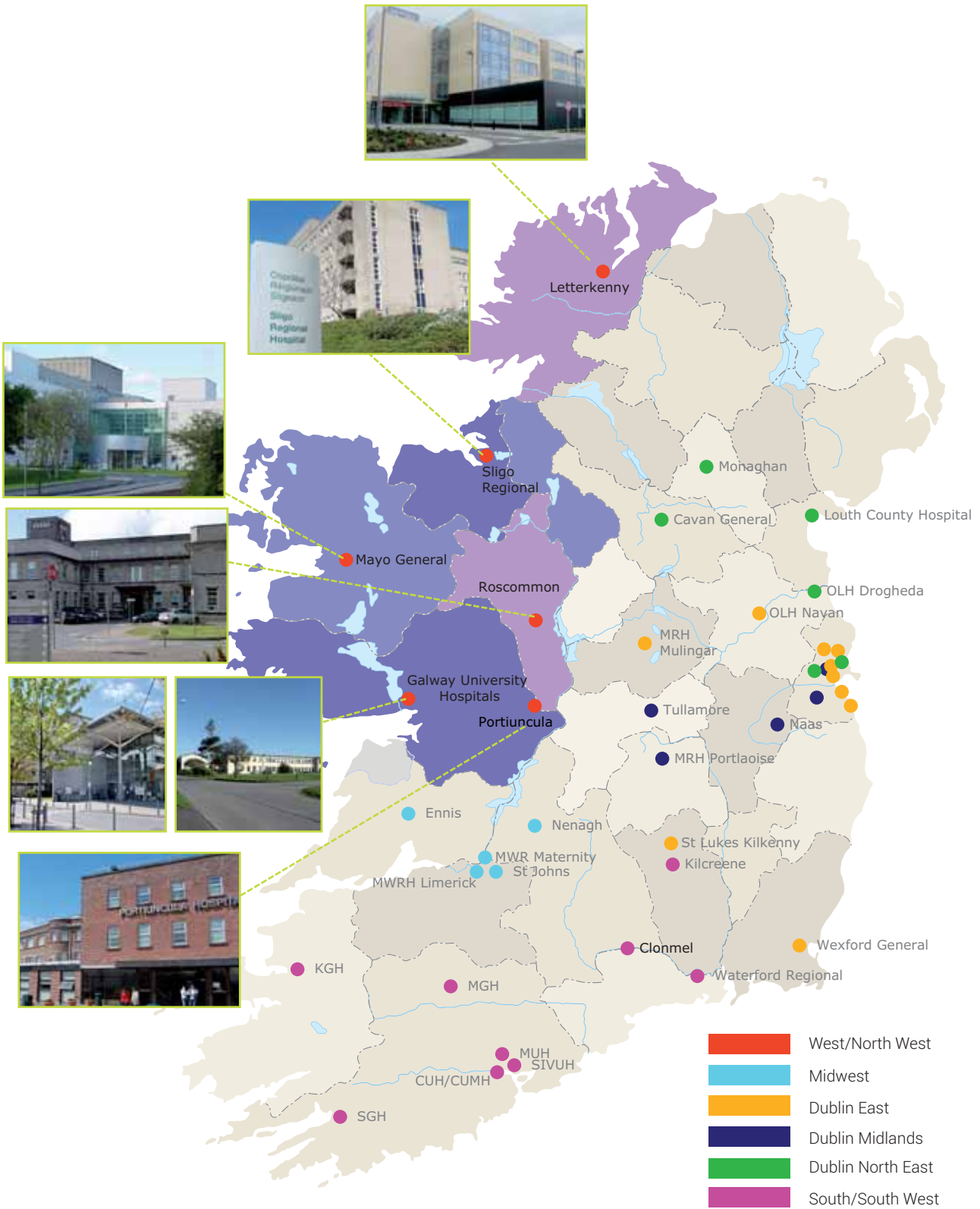
On behalf of the Board, I would like to thank all of our 8,000 staff for their professionalism and commitment during a challenging 2013, and look forward to working with you to reach and exceed our goals in the coming years.

**Noel Daly, Chair**



Board of the West / North West Hospitals Group. Back row: Dr John Killeen, non-Executive Director; Dr Jim Browne, non-Executive Director; Zubair Javeed, non-Executive Director; Gerry McManus, non-Executive Director; Dr Pat Nash, Chief Clinical Director; Colam O'Neill, non-Executive Director; Maurice Power, Group CFO. Front row: Fiona McHugh, Head of Corporate Development; Sharon Moohan, non-Executive Director; Bill Maher, Group CEO; Noel Daly, Group Chairman; Colette Cowan, Group Chief Director of Nursing and Midwifery; Phyllis MacNamara, non-Executive Director; Dr Brendan Day, non-Executive Director.

# Map of Hospital Groups





## 2.0 The People We Serve

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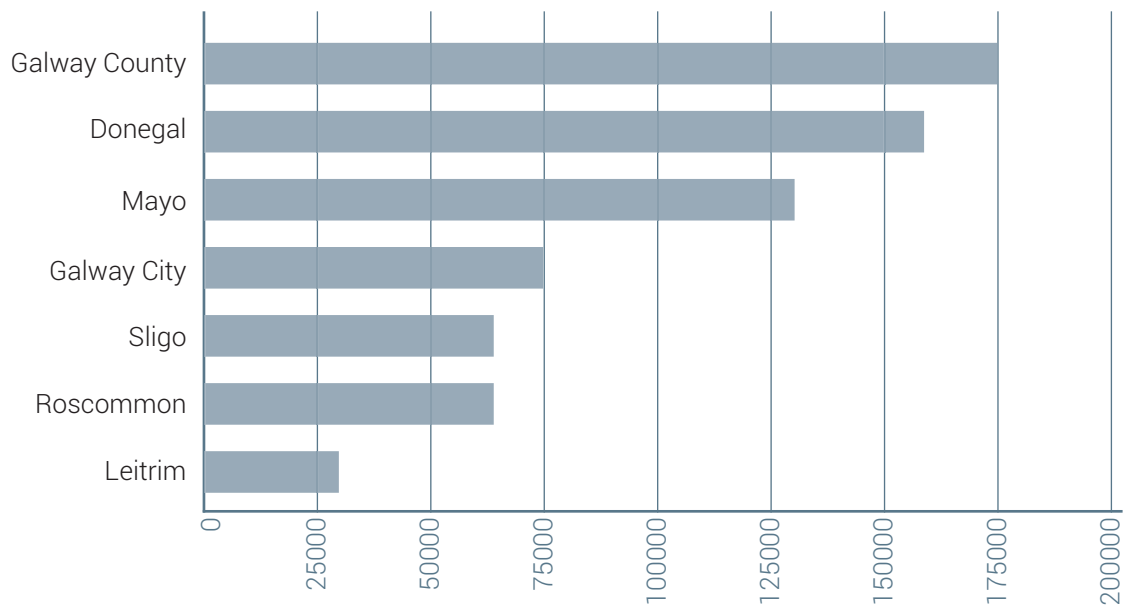
### 2.1 Demographics

The West / North West Region comprises six counties (Galway, Mayo, Roscommon, Sligo, Leitrim and Donegal) with a population in 2011 of 703,684 which is 15.3% of the National population. Galway County is the most populous county with a population of 175,124 whilst Leitrim is the least populous with a population of 31,798.

The West / North West Region comprises six counties with a population of 703,684

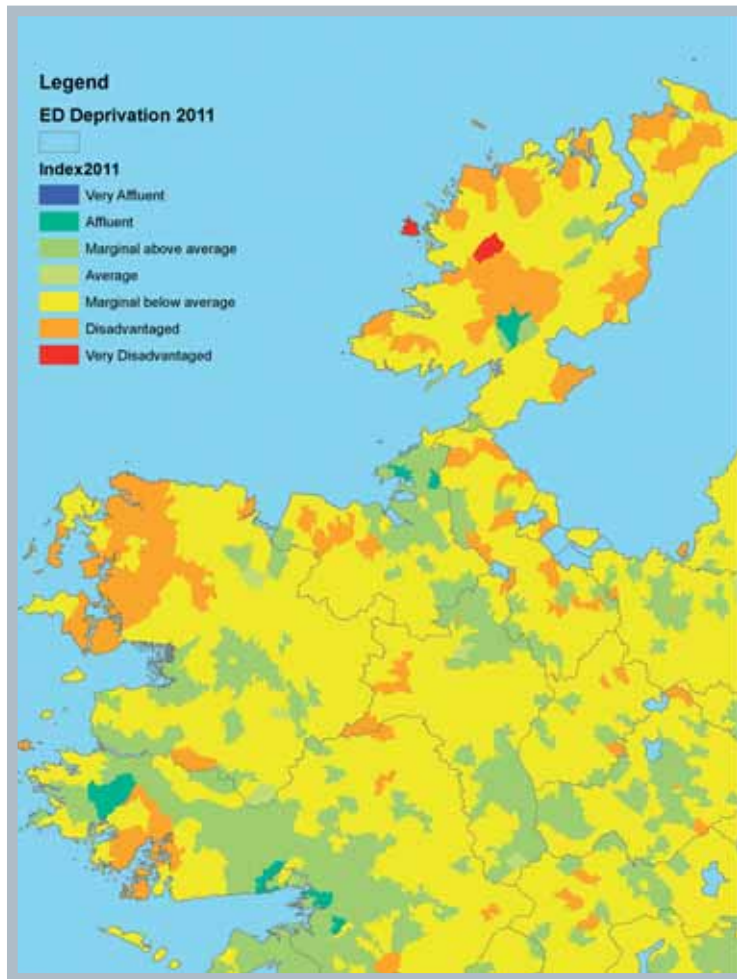
#### 2.1.1 West / North West Region Population Table

##### Population 2011: West / North West Hospital Region



### 2.1.2 West / North West Deprivation Map

The region consists of the most rural and most deprived areas nationally, mainly associated with the Western Seaboard. Donegal is ranked 33 out of 34 making it the second most deprived county in Ireland, with Mayo, Leitrim and Roscommon ranked 23, 22 and 20 respectively. This is offset by Galway City which is the third most affluent area nationally.

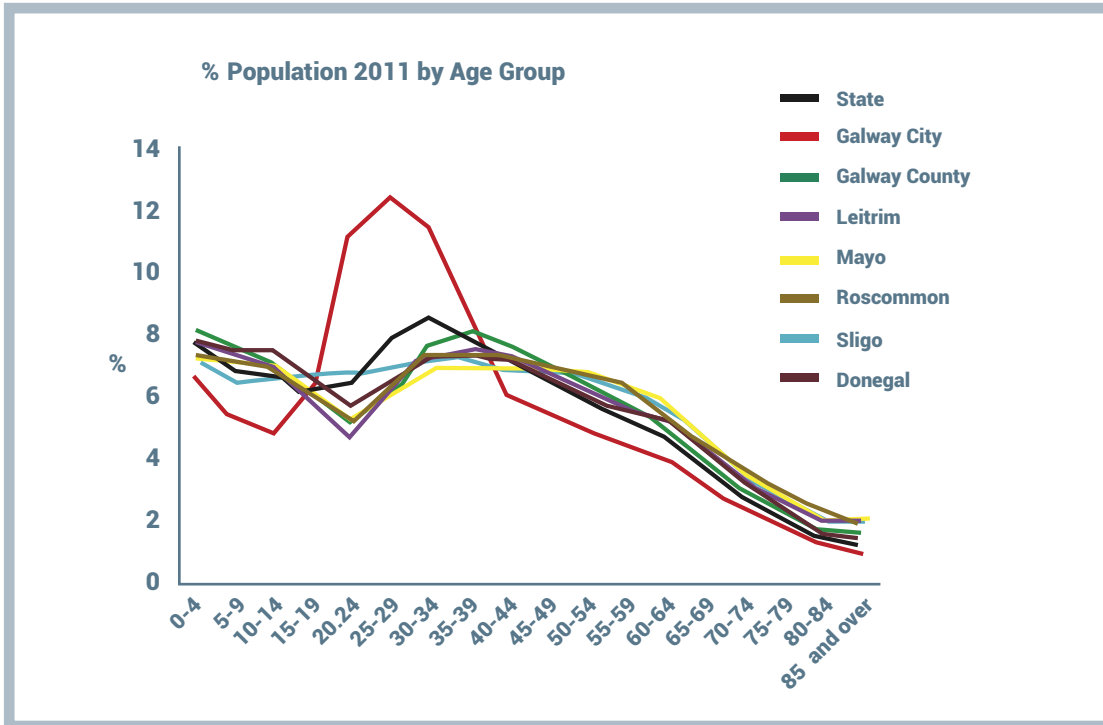


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### 2.1.3 West / North West Percentage of Population by Age Group

The age profile for the region is similar to the National picture, except for Galway city which has a much younger age profile; Galway City also had the greatest proportional increase in the 20-30 age population of all Irish cities since 2006. The age dependency rate (the number of 0-14 age groups and those aged over 65 as a proportion of the rest of the population) for all areas excluding Galway City is higher than the national average of 33% with Leitrim, Donegal, Mayo Galway and Roscommon having a dependency rates over 35%.





## 2.2 Overview of Group Hospitals

West / North West Hospitals Group Overview			
Hospital	Site	Model	Inpatient Beds
Galway University Hospitals	University Hospital Galway	*4	705
	Merlin Park University Hospital	*2	
Roscommon Hospital	Roscommon Town	*2	63
Portiuncula Hospital	Ballinasloe, Co Galway	*3	170
Letterkenny General Hospital	Letterkenny, Co Donegal	*3	308
Sligo Regional Hospital	Sligo Town	*3	262
Mayo General Hospital	Castlebar, Co Mayo	*3	273

Inpatient beds correct as of 31 December 2013.

- \* Model 4 Hospital: Admits undifferentiated acute medical patients including tertiary referred patients. Model 4 Hospitals have a category 3 or 3S ICU on site, a Medical Assessment Unit which is open on a continuous basis (24 hours, every day of the year) and an ED, including a CDU on site.
- \* Model 3 Hospital: Admits undifferentiated acute medical patients. Model 3 Hospitals have an Acute Medical Assessment Unit and an ED on site. The hospital has a category 1 or 2 ICU.
- \* Model 2 Hospital: Provides inpatient and outpatient care for differentiated, low-risk medical patients, who are not likely to require full resuscitation.



## 3.0 Patient Activity

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- There are six hospitals in the Group: Letterkenny General Hospital, Sligo Regional Hospital, Mayo General Hospital, Galway University Hospitals (University Hospital Galway and Merlin Park University Hospital), Roscommon Hospital and Portiuncula Hospital, Ballinasloe with an inpatient bed complement of 1,781. A wide range of emergency, diagnostic, treatment and rehabilitation services are provided on these sites.
- There were over 195,000 thousand attendances at the five Emergency Departments this year and 4,276 patients were seen in the Urgent Care Centre Roscommon. Over 110,000 inpatient admissions and 158,000 day cases were treated across the Group with the Outpatient Departments seeing over 519,000 patients in 2013.
- Across the five maternity units, there were 10,200 births this year.

195,000 thousand attendances at the five Emergency Departments and 4,276 attendances at the Urgent Care Centre in Roscommon. Over 110,000 inpatient admissions and 158,000 day cases were treated across the Group with the Outpatient Departments seeing over 519,000 patients



The Acute Medical Assessment Unit at Portiuncula Hospital Ballinasloe opened in March. From left: Brigid Frehill, CNM and Dr Joel Kavanagh, AMAU Consultant.

## 3.2 Group Activity

Note: Sligo, Letterkenny and Mayo joined the Group on 29 July 2013.

Activity Table for the West / North West Hospitals Group 2013			
Category	2012 Activity	2013 Activity	Variance Year on Year
Births	10,708	10,223	-4.53%
Day cases	166,587	158,379	-4.92%
ED attendances	198,670	195,843	-1.42%
Inpatients	111,998	110,924	-0.96%
Outpatients	541,688	519,603	-4.08%
Urgent Care Centre	5,091	4,276	-16.01%

Galway University Hospitals Activity 2013			
Category	2012 Activity	2013 Activity	Variance Year on Year
Births	3,383	3,141	-7.15%
Day cases	87,189	81,580	-6.43%
ED attendances	64,919	63,827	-1.68%
Inpatients	39,398*	38,482	-2.32%
Outpatients	227,371	232,489	2.25%

\*During 2013 there was a change in data definitions which resulted in cases previously recorded on some sites as inpatient activity being recorded differently.

Sligo Regional Hospital Activity 2013			
Category	2012 Activity	2013 Activity	Variance Year on Year
Births	1,608	1,543	-4.04%
Day cases	27,110	25,358	-6.46%
ED attendances	42,603	42,096	-1.19%
Inpatients	17,349	17,483	0.77%
Outpatients	110,608	102,039	-7.75%

Roscommon Hospital Activity 2013			
Category	2012 Activity	2013 Activity	Variance Year on Year
Day cases	5,127	5,337	4.10%
Inpatients	1,899	2,011	5.90%
Outpatients	14,855	15,442	3.95%
Urgent Care Centre	5,091*	4,276	-16.01%

\*During 2013 there was a change in data definitions which resulted in UCC attendance being recorded differently.

### Letterkenny General Hospital Activity 2013

Category	2012 Activity	2013 Activity	Variance Year on Year
Births	1,870	1,790	-4.30%
Day cases	17,482	18,059	3.30%
ED attendances	33,791	31,865	-5.70%
Inpatients	21,313	20,685	-2.95%
Outpatients	81,396	60,233	-26.00%

### Portiuncula Hospital Ballinasloe Activity 2013

Category	2012 Activity	2013 Activity	Variance Year on Year
Births	2,059	2,052	-0.34%
Day cases	8,775	8,299	-5.42%
ED attendances	22,893	23,861	4.23%
Inpatients	11,341	12,544	10.61%
Outpatients	46,912*	48,246	2.84%

\*During 2013 there was a change in data definitions which resulted in cases previously recorded on some sites as outpatient activity being recorded differently.

### Mayo General Hospital Activity 2013

Category	2012 Activity	2013 Activity	Variance Year on Year
Births	1,788	1,697	-5.09%
Day cases	20,904	19,746	-5.54%
ED attendances	34,464	34,194	-0.78%
Inpatients	20,698	19,719	-4.73%
Outpatients	60,546	61,154	1.00%



## 4.0 Access

### 4.1 Scheduled Care Inpatient Activity

The Group achieved all the Special Delivery Unit (SDU) inpatient and day case targets by 31 December 2013.

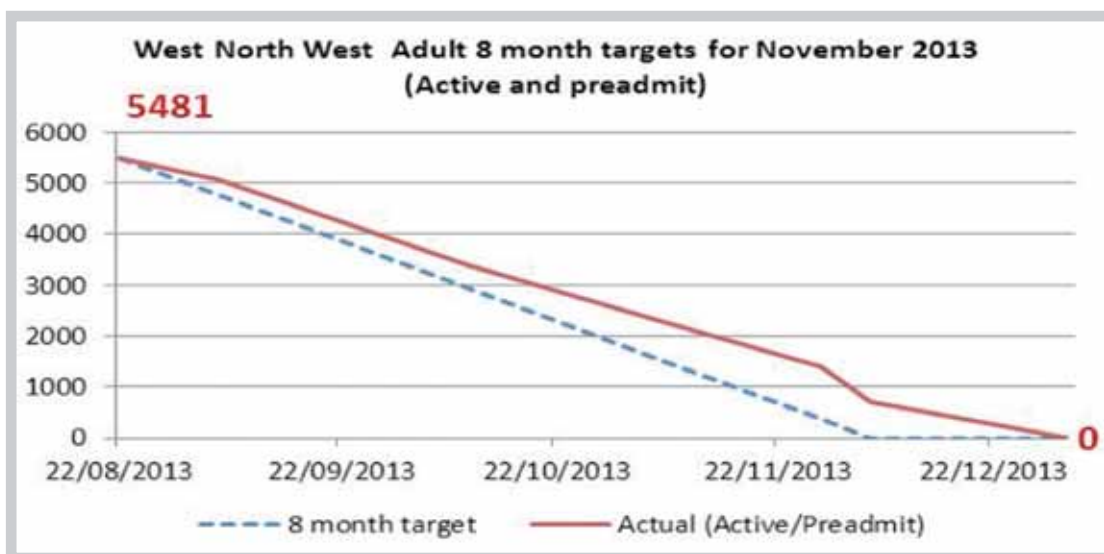
The inpatient targets set by the SDU for 2013 were:

- Adults - maximum wait time of 8 months
- Children – maximum wait time target of 20 weeks
- Scopes maximum wait time target 13 weeks (4 weeks if urgent)

At the start of the year in the Galway and Roscommon University Hospitals Group, there were initially 3,679 inpatients to be treated by the interim target of June, but it became clear in May that this interim target would not be met. Efforts then focussed on reaching the end of year targets. The tracker was reset in July 2013 and the focus was to treat the remaining 4,282 patients.

After Sligo, Mayo and Letterkenny Hospitals joined the Group at the end of July, the number of patients to be treated by year end was 5,481.

The Hospital Group met the Special Delivery Unit waiting list targets for inpatient and day cases in 2013



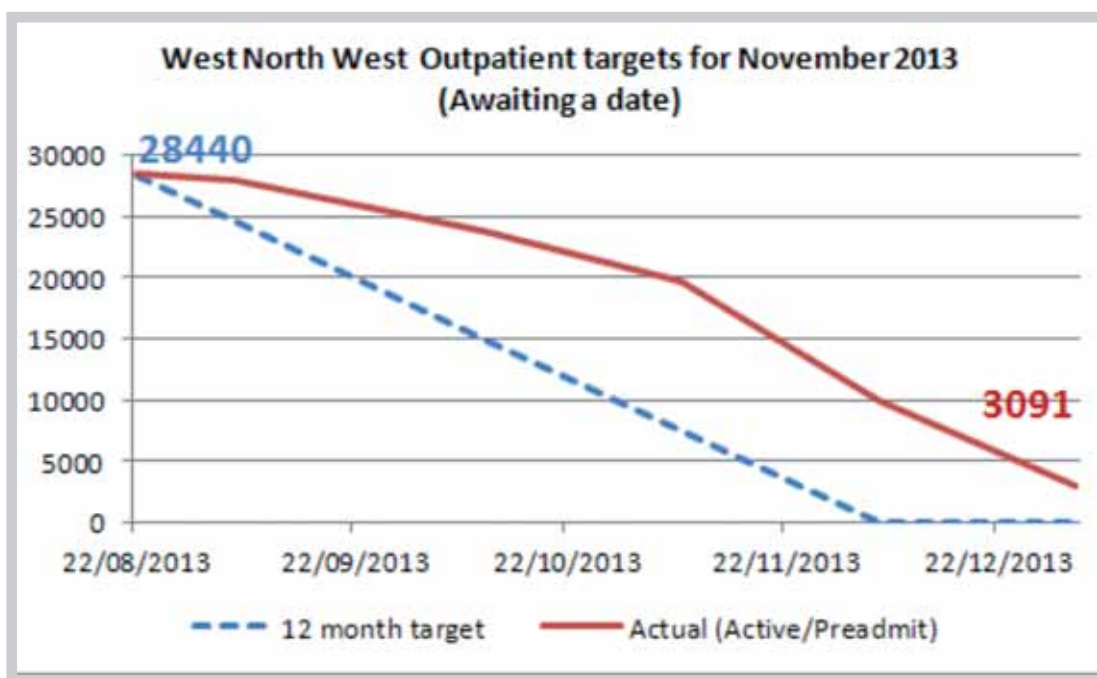
## 4.2 Scheduled Care Outpatient Activity

The Group achieved the SDU outpatient targets by 31 December 2013 for all areas apart from Orthopaedics.

The outpatient waiting list target set by the SDU was that 'no patient should wait longer than 12 months for an outpatient appointment by November 2013' (extended to December 2013).

The Galway and Roscommon University Hospitals Group started with 43,576 patients on the Priority Treatment List (PTL). By the time the West / North West Group was formed, the total waiting list across the Group was 74,758 with 28,440 patients on the PTL.

The Group achieved the outpatient waiting list target in 2013 for all areas apart from orthopaedics



Funding was secured from the SDU at the end of November to facilitate the transfer of patients to the private sector across all specialities. Capacity was sought in a variety of hospitals for the specialties that required assistance. Patients were offered appointments in the following private hospitals:

- Galway Clinic
- Bon Secours Hospital Galway
- Mater Private, Dublin
- Saint Francis Private Hospital, Mullingar
- St Joseph's Hospital, Sligo
- Barringtons Hospital, Limerick
- Altnagelvin Area Hospital, Derry

Any patient who declined the offer for an appointment in a private hospital could remain on the waiting list in the originating hospital.



### 4.3 Unscheduled Care / Emergency Department

Emergency Department activity varied across the Group in 2013.

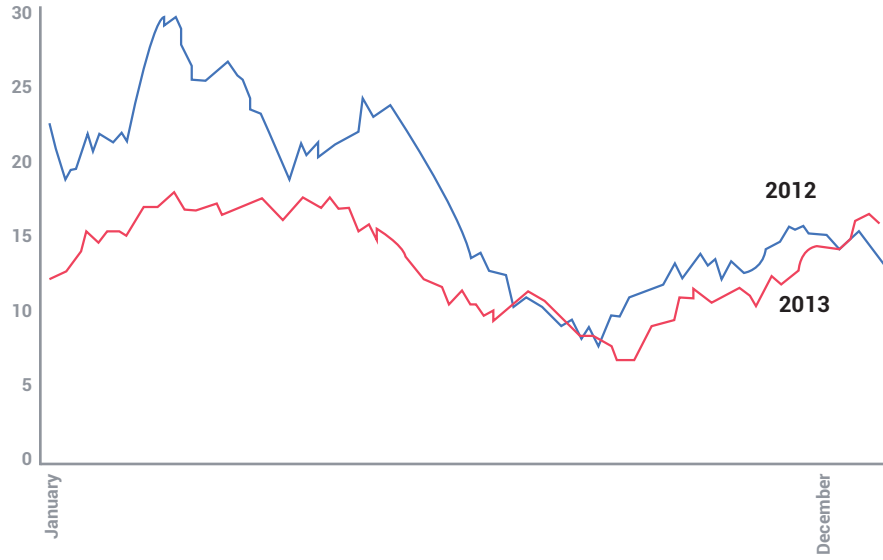
The Emergency Departments at Mayo General Hospital and Sligo Regional Hospital performed very well throughout 2013 with reduced numbers in Sligo and zero patients on trolleys in Mayo General Hospitals for a number of months in 2013. The number of patients awaiting admission to hospital accommodated on a trolley in Mayo General Hospital reduced by 25% in 2013 compared to 2012. The Letterkenny Emergency Department capacity was severely reduced for the second half of 2013 due to flooding experienced in July. Portiuncula Hospital saw an increase in activity of 4% in 2013. Galway University Hospitals had significant numbers of attendances and the overall trolley waits were lower than in 2012; however significant pressures were noted at the end of the year.

The number of patients awaiting admission to hospital accommodated on a trolley in Mayo General Hospital reduced by 25% in 2013, compared with the same period in 2012

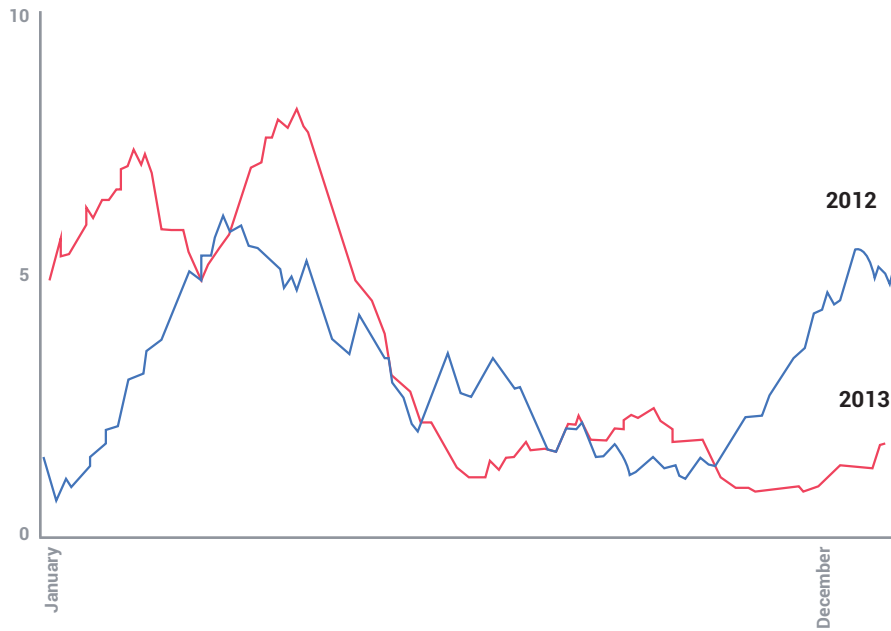
A number of initiatives were put in place to address the pressures experienced at the Emergency Departments such as:

- Structured Ward Rounds.
- An Acute Medical Assessment Unit (AMAU) opened at Portiuncula Hospital Ballinasloe.
- The AMU at Galway University Hospitals increased opening hours from 8am to 8pm/ 5 days a week.

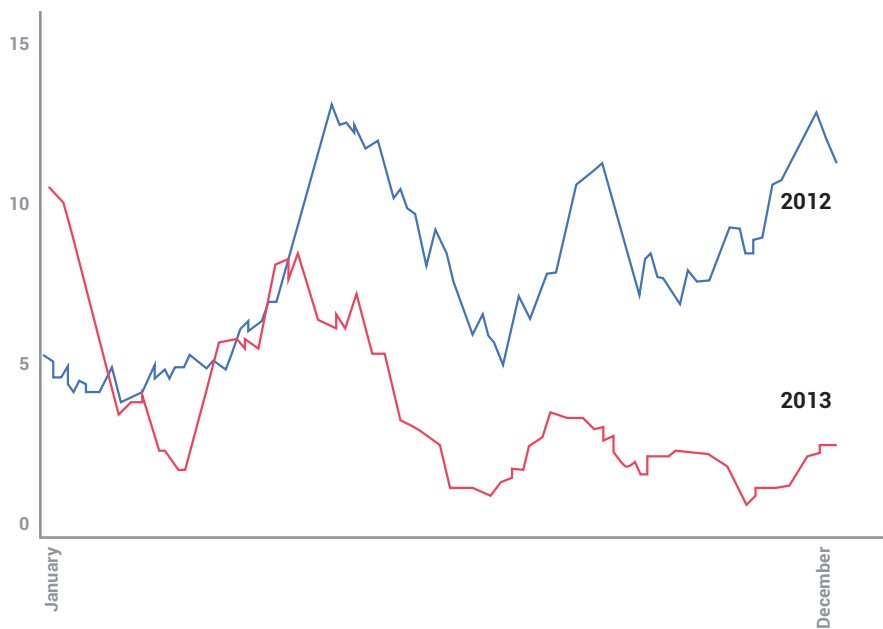
### Galway University Hospitals



### Portiuncula Hospital Ballinasloe

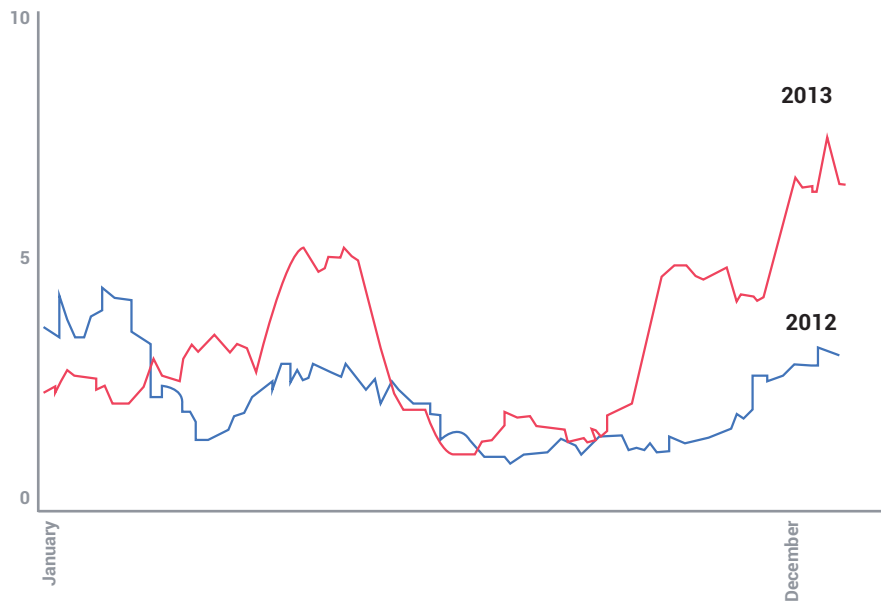


### Sligo Regional Hospital

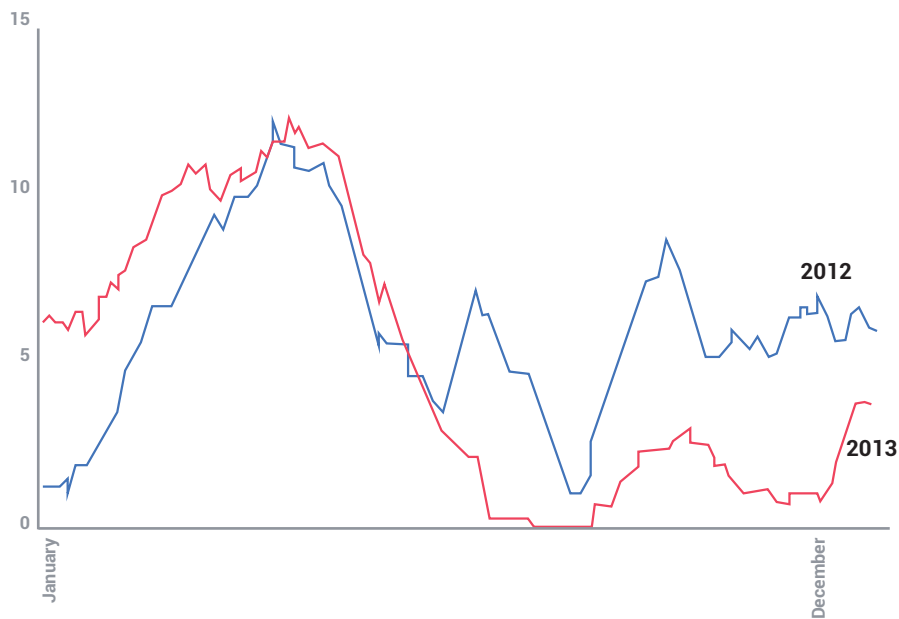


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### Letterkenny General Hospital



### Mayo General Hospital



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### Emergency Department INMO Trolley Count

These graphs show the 30 day moving average trolley count recorded by the INMO. The graphs compare the average number of patients waiting on trolleys at each hospital in 2012 (blue line) and 2013 (red line)



## 5.0 Key Service Developments

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### 5.1 Roscommon Hospital

- Development of Ambulatory Care and Diagnostic Unit (ACAD).
- Three GP Information Evenings were held in 2013.
- Urgent Care Centre Information leaflets and posters were distributed throughout the County at GP surgeries, pharmacies, banks, credit unions, local GAA centres, churches and schools.
- The Rheumatology Telemedicine Service in association with Galway University Hospitals won the "Best use of Health Technology" award at the Irish Medical Times 2013 Healthcare Awards. The Rheumatology Telemedicine Service involves a computer link-up between patients in Roscommon Hospital and Consultant Rheumatologists in Galway.
- Appointment of a new Director of Nursing.



At the new Ambulatory Care and Diagnostic Centre (ACAD) at Roscommon Hospital in February, from left: Colette Cowan, Chief Director of Nursing and Midwifery; Elaine Prendergast, General Manager; Sean O'Brien, A/Asst. Director of Nursing; Amanda O'Halloran, Staff Nurse; Edel Cox, Staff Nurse; Ms Deirdre Jones, Consultant Plastic Surgeon; Yolande Fallon, Health Care Assistant; Mary Connell, Domestic Supervisor; Aileen Banet, Clinical Nurse Manager; Michael Kilcline, Carpenter; Margaret Casey, A/Director of Nursing; Sandra Kiernan, Staff Nurse; Michael Conboy, Supplies Officer; Sandra Bracken, Staff Nurse; Bernadette McTague, Staff Nurse; Katherine Gilleran, Clerical Officer; Marie Doorly, Staff Officer; Tom Timothy, Carpenter; Mary Crowley, Clerical Officer; Bill Maher, Group CEO; and Pdraig Brennan, Maintenance Manager.



Winners of the Irish Healthcare Awards 'Best Use of Information Technology' in November, from left: Dr John Carey, Consultant Rheumatologist, Galway University Hospitals; Marie Doorly, Patient Services Manager, Roscommon Hospital; Pauline Conroy, IT Department, Roscommon Hospital; and Dr Robert Coughlan, Consultant Rheumatologist, Galway University Hospitals.

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Elaine Prendergast, General Manager, Roscommon Hospital with staff from the Urgent Care Centre with the new information leaflets and posters. Back row, from left: Dr Nivedita; Dr Bello Musa; Mary Crehan, Clinical Nurse Manager 2; Elaine Prendergast; Nadia Finneran, Clinical Nurse Manager 1. Front Row from left: Olive Arnold, Staff Nurse; Sharon O'Rourke, Staff Nurse; and Claire McDermott, Clerical Support for the UCC.

## 5.2 Portiuncula Hospital Ballinasloe

- The Acute Medical Assessment Unit (AMAU) opened in March.
- A Joint Medical Academy officially opened in January.
- Sessional commitments were secured in the following specialties: Palliative Care, Microbiology, Dermatology, Infectious Diseases, Nephrology and Speech and Language.
- New posts were appointed including an Emergency Department Advanced Nurse Practitioner, a Discharge Co-ordinator, a Hygiene Co-ordinator, a Consultant Anaesthetist and a Consultant Physician.
- IMEWS, Early Warning Score, Electronic Blood Tracking System and Q-pulse were all implemented.
- The Productive Operating Theatre (TPOT) Steering Group was established.
- HIQA Hygiene Implementation Group launched the 'It's Ok to Ask' Hand Hygiene Poster Campaign in November.
- The Tobacco Free Campus launched in December.



Portiuncula Hospital Ballinasloe was a finalist in the National Pharmacy Team of the Year and Pharmacy Manager of the Year Awards in September. Back row from left: Dello Gill, Senior Pharmacy Technician; Ann Marie Duffy, Senior Pharmacy Technician; Geraldine Colohan, Chief Pharmacist; Clare Kinahan, Senior Pharmacist; Eimear Aillis, Senior Pharmacist; and Karen Hurley, Clerical Officer. Front row from left: Sandra Breslin, Pharmacist; Sinead Donnellan, Senior Pharmacist; Helen Heery, Senior Pharmacist; and Patricia Halliday, Pharmacist.



Chris Kane, General Manager and Denis Minton, Director of Resources at the launch of the Tobacco Free Campus at Portiuncula Hospital Ballinasloe in December.



Members of the 'It's Ok to Ask' campaign, patient representatives and hospital staff at the launch of the hand hygiene awareness campaign at Portiuncula Hospital Ballinasloe in November.



### 5.3 Galway University Hospitals

- The Colorectal Screening Programme launched in May 2013.
- The 500th Prostate seed brachytherapy patient was treated in November 2013.
- The Diabetes Education Team won the IMT Healthcare Award.
- A mobile app was launched in July as part of the ongoing policy to improve antibiotic use at the hospital.
- The Structured Ward Round commenced.
- The Public Patient Involvement Strategy and Group Nursing Strategy were launched in April.



Galway University Hospitals treated the 500th prostate brachytherapy patient in November. From left: Prof Frank Sullivan, Consultant Radiation Oncologist and Lead Clinician, Department of Radiation Oncology; Martina Sweeney, Staff Nurse; Jackie Barrett, Anaesthetic Nurse; Ger O'Boyle, Clinical Nurse Manager 2; Marie Cox, Group Asst Director of Nursing; Mr Jam Khalid, Consultant Radiation Oncologist; and Mary Hodkinson, Staff Nurse.



At the launch of the Galway University Hospitals mobile app for Antimicrobial Prescribing Guidelines in July, from left: Dr Eithne McCarthy, Consultant Microbiologist; Prof Martin Cormican, Consultant Microbiologist; Kerrill Thornhill, Maithú IT Solutions; Dr Deirbhile Keady, Consultant Microbiologist; and Marie Tierney, Antimicrobial Pharmacist.

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A pilot project for multidisciplinary team Structured Ward Round was launched on St Teresa's Ward at Galway University Hospitals in March.

## 5.4 Mayo General Hospital

- The refurbished Haemodialysis Unit was officially opened by An Taoiseach, Enda Kenny in December.
- The Taoiseach also turned the first sod on the site of a new day care and outpatient Cystic Fibrosis facility for adults and children as part of an official visit to the hospital in December.
- All six laboratory disciplines were accredited to ISO 15189 by the Irish National Accreditation Board.
- Protected time for audit and education was introduced.



An Taoiseach, Enda Kenny TD, officially opened a newly refurbished and extended Renal Dialysis Unit at Mayo General Hospital in December 2013. From left: An Taoiseach, Enda Kenny TD with Elma Magner Moran, CNM at the unveiling of the plaque with Cllr John O'Malley, Chair of Mayo County Council and Dr Donal Reddan, Group Clinical Director for Medicine and Consultant Nephrologist.



An Taoiseach, Enda Kenny TD, turned the first sod on the site of a new day care and outpatient Cystic Fibrosis facility for adults and children at Mayo General Hospital as part of an official visit to the hospital in December.

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At the Antibiotic Awareness Day at Mayo General Hospital in November, from left: Grainne McHale, Clinical Nurse Specialist; Majella Sharkey, Surveillance Scientist; Rose Cafferkey, Antimicrobial Pharmacist; Ramona O'Neill, Clinical Nurse Specialist; and Andrea McGrail, Assistant Director of Nursing. The event was organised by the hospital's Infection Control Team to promote antibiotic awareness both for the general public and for staff.

## 5.5 Sligo Regional Hospital

- The National Colorectal Screening Programme commenced.
- The North West Neurological Institute was established in November (affiliate of Dublin Neurological Institute).
- 15 bed Short Stay Unit was opened.
- The Productive Ward initiative and Productive Theatre initiative were introduced.
- Cross Border Initiatives introduced in ENT, Ophthalmology, Urology and Vascular Services.
- Emergency Department developments included a new Paediatric Treatment and Waiting Area and an improved Minor Injuries Unit.
- The hospital road infrastructure was completed along with additional car parking spaces.
- Smoke Free Hospital Campus was launched.



The new CT Scanner at Sligo Regional Hospital was officially opened by Gerry McManus, non-Executive Director in December. From left: Gerry McManus; Larry Keaveney, Director and General Manager, Philips; Grainne McCann, A/General Manager; Morgan Evers, Account Manager, Philips; Therese Anderson, CT Clinical Specialist Radiographer; Anne Stevenson, A/ CT Clinical Specialist Radiographer; Dr Brendan Morrissey, Radiology Speciality Coordinator; Claire Toman, A/ Radiology Services Manager



Staff at the opening of the upgraded Oncology and Haematology inpatient ward in Sligo Regional Hospital in November with Ms Norah Casey who performed the official opening.

## 5.6 Letterkenny General Hospital

- An interim Emergency Department and Radiology Department was commissioned in August.
- An interim Outpatient Department in Letterkenny town with integrated Radiology diagnostic capacity became operational in December.
- Rebuilding works for the Emergency Department, the Acute Medical Assessment Unit and Pharmacy commenced.
- Consultants Appointments for: Haematology, Colorectal Surgery, Respiratory Medicine, Geriatric Medicine, Anaesthetics, Orthopaedics, Radiology and Nephrology.



The interim Emergency Department at Letterkenny Hospital reopened to ambulance admissions 21 days after the massive flood. From left: Dr Anne Flood, Director of Nursing and Midwifery; Dr Kieran Roaarty, Medical SMO; Dr Stuart Boyd, ED Consultant; Dr Leon Viljoen, ED SMO; Dr Sinead O’Gorman, ED Consultant; Joanne Gibson, Nursing student; Nollaig Mc Bride, Staff Nurse; Anne Neely, CNM2; Marjory Doherty, CNM2; Sean Murphy, General Manager; and Bernie Boyce, Clerical Officer.



At Letterkenny General Hospital’s Research Day Symposium in November, back row: Mr Kevin Moran, Consultant Surgeon and Urologist, Letterkenny General Hospital and Team Physician to Donegal Football; footballer Eamonn McGee; Mr Charles McManus, Director of Medical Education, Letterkenny General Hospital and Team Physician to the Donegal Football Team; and footballer Rory Kavanagh. Front row: Mr David Hickey, Consultant Urologist and Transplant Surgeon and Team Physician to Dublin Football; footballers Karl Lacey and Michael Murphy; Pat Shovelin, Manager Medical Records, Letterkenny General Hospital and goal keeping coach to Donegal Football.





## 6.0 Nursing and Midwifery

### 6.1 Public Patient Involvement Strategy

The Public Patient Involvement Strategy was launched in April 2013. This three year plan involves patients and the public in the care they receive, by involving them in decisions and choices about their service and by making them active partners with professionals through patient participation.

A Patient Experience Measurement Survey was commenced in 2013. This survey will assist in defining the future needs of patients and create a benchmark for the Group. The concept of the Patient Advice and Liaison Officer was developed as being the first point of contact for patients. These posts will be further rolled out across the Group in 2014.

The development of a Patient Council was agreed and will commence as an overarching Council to provide opinion, suggestions and new ideas to the Hospitals on the delivery of care.

A new complaint, compliments and feedback system has been developed to streamline the response, transparency and openness to patients and the public.

In 2013 planning for the development of a Centre for Leadership, Learning and Innovation that promotes lifelong learning for both undergraduate and postgraduate staff commenced



At the launch of the 'Nursing and Midwifery Strategy 2013 – 2018' in April, from left: Dr John Killeen, non-Executive Director; Colette Cowan, Chief Director of Nursing and Midwifery; and Bill Maher, Group CEO. The 'Nursing and Midwifery Annual Report 2012' and the 'Strategic Plan for Public and Patient Involvement 2013-2015' were launched the same day.

## 6.2 Centre for Leadership, Learning and Innovation

Planning for the development of a Centre for Leadership, Learning and Innovation that promotes lifelong learning for both undergraduate and postgraduate commenced in 2013. Supporting practice and developing communication, feedback and leadership skills will improve the quality of patient care and enhance patient safety across the Group. A Steering Group involving NUI Galway and Centres for Education were put in place to progress these plans.

## 6.3 Healthy Ireland

The West / North West Hospitals Group endorsed the National Strategy for a Healthy Ireland in 2013. Promoting health with staff is a core component for delivering health outcomes for patients and the public. The implementation of the Healthy Ireland strategy is in co-operation with the National Health and Wellbeing Unit.



Staff from Roscommon Hospital and Croí, the West of Ireland Cardiac Foundation provided free heart health screening to 74 people at the Roscommon Mart in February. From left: Deirdre O'Reilly and Rosemary Thorpe, Cardiac Rehabilitation Nurse Specialists at Roscommon Hospital and Croí Cardiac Nurse Specialists: Colleen Kneafsey, Caroline Kelly and Ailish Houlihan.

## 6.4 Hand Hygiene

In 2013 there was an increased focus on hand hygiene practice, compliance, signage and promotion via the Directorates. A 'train the trainer' programme was completed with an increased focus on training from Senior Management. Hand Hygiene will remain a priority for the Group for 2014.



Raising awareness of Hand Hygiene at Mayo General Hospital in October, from left: Majella Sharkey, Surveillance Scientist, Laboratory; Colam O'Neill, non-Executive Director; Catherine Donohoe, Director of Nursing and Midwifery; Charlie Meehan, General Manager; Ramona Neill, CNS Infection Prevention and Control; Colette Cowan, Chief Director of Nursing and Midwifery; Grainne McHale, CNS Infection Prevention and Control; and Dr Pat Nash, Chief Clinical Director.

## 6.5 Project ECHO (Extension for Community Healthcare Outcomes)

The Group agreed a Memorandum of Understanding with GPs to progress the implementation of Project ECHO in the areas of Rheumatology, Endocrinology and Nephrology. Project ECHO is a worldwide scheme which aims to develop the capacity to safely and effectively treat chronic, common, and complex diseases in rural areas.



Dr Sanjeev Arora, University of New Mexico, School of Medicine, visited Galway University Hospitals in November to discuss Project ECHO. Standing from left: Dr John Carey, Consultant Rheumatologist; Erika Harding, Director of International Replication, ECHO; Dr Francis Finucane, Consultant Endocrinologist; and Bill Maher, Group CEO. Seated from left: Dr Donal Reddan, Consultant Nephrologist; Dr Sanjeev Arora; and Colette Cowan, Chief Director of Nursing and Midwifery.



## 7.0 Quality and Patient Safety

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### 7.1 Quality and Patient Safety Structures

In 2013, there was a complete reconfiguration of the quality and patient safety structures in the West North West Hospitals Group. The key focus moved from a corporate function to an integrated directorate based structure, with clinical ownership and governance over all quality and patient safety functions across the group. This was critical to ensure that the directorates focused their priorities on areas of risk identified through the various functions. This process initially began with the hospitals in Galway and Roscommon with the subsequent integration of the 3 new acute hospitals with the formation of the West North West Hospitals Group.

Following the expansion of the Group a Quality and Patient Safety Manager was appointed to oversee the ongoing development of a Group-wide approach to quality and patient safety

In July, a group wide Quality and Patient Safety Manager was appointed to support the executive and to lead and manage the quality and patient safety structures all sites. The Executive Quality and Safety Committee (QualSec) provides oversight and reviews monthly reports of all aspects of quality and patient safety. The Board Patient Safety Committee ensures board oversight of these processes.

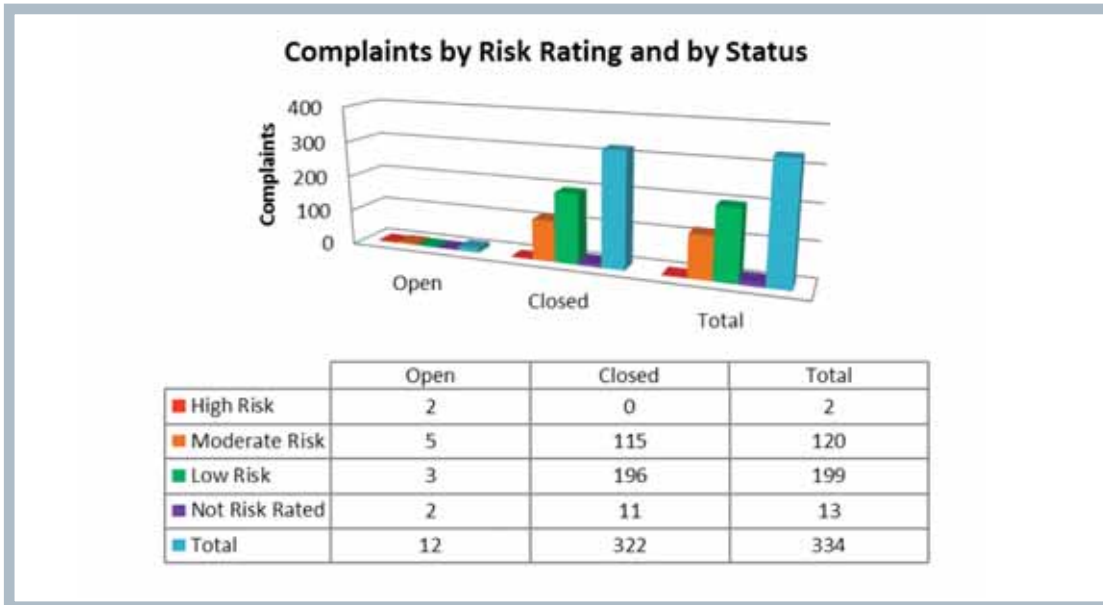
### 7.2 Quality and Safety Activities

The range of services provided and supported through the Quality and Safety Department included the following.

- Processing, investigating and managing Complaints from patients, visitors and through the 'Your Service Your Say' initiative.
- Analysing and managing incident and near miss reports using the electronic reporting module on the Q Pulse Management Information System.
- Facilitating and managing Serious Incident Reviews through the Systems Analysis approach in conjunction with frontline clinicians and managers.
- Facilitating and managing Clinical Audits and associated Quality Improvement initiatives.
- Coordinating and supporting Medication Safety across the hospital sites.
- Managing and providing support in matters related to medico-legal claims, Coroners inquests and external reviews.
- Supporting the Group in demonstrating compliance with regulatory requirements.

### 7.3 Complaints Management

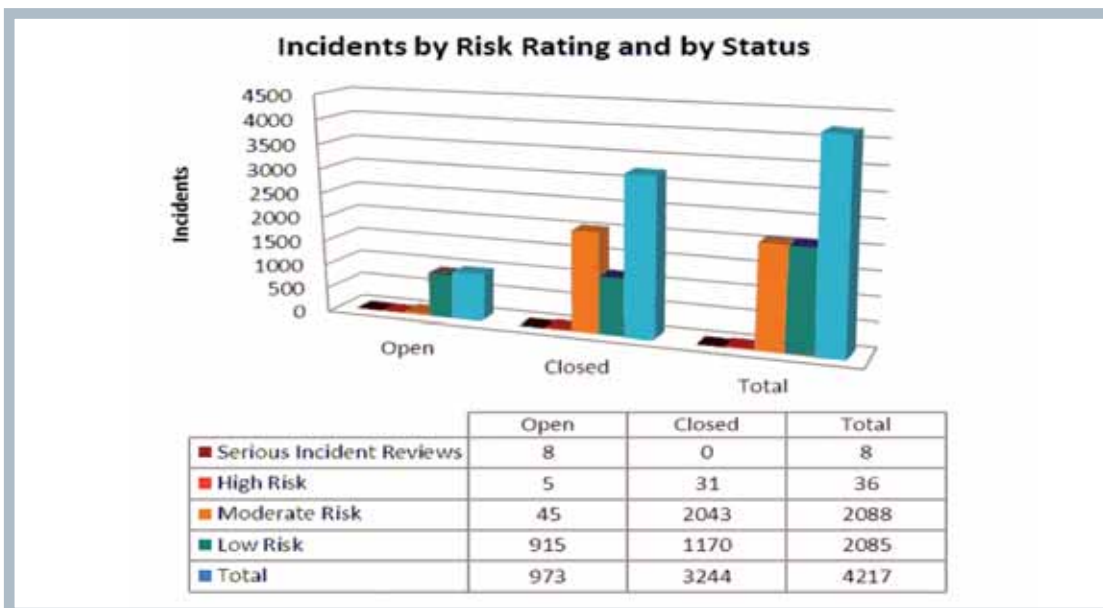
A total of 334 complaints were reported from April to December 2013. This is shown in the graph below by risk rating and status (open, closed).



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### 7.4 Incidents Management

A total of 4217 incidents were reported from April to December 2013. This is shown in the graph below by risk rating and status (open, closed). The majority of these were closed however 973 remain open which includes 13 high risk incidents (8 of which are Serious Incident Reviews) and 915 low risk incidents.



## 7.5 National Standards for Safer Better Healthcare

During 2013, the Group began the process of risk assessing all hospitals against the HIQA developed National Standards for Safer Better Healthcare. Key to the assessment process is the identification of action plans to address any areas for improvement. This process will continue during 2014.

## 7.6 Local Implementation Team / Maternity Services Implementation Group

A Maternal Services Implementation Group (MSIG) was formed in 2013 to develop and oversee the implementation of the recommendations from the HSE report, the Coroner's report and the HIQA report into the death of Savita Halappanavar. All maternity sites in the hospital group were risk assessed against all sets of recommendations. In addition each site commenced the process of developing Maternity Local Implementation Groups (MLIG) to address specific site based issues related to each recommendation. The Group continued to work closely with the National Incident Management Team (NIMT) throughout 2013.

## 7.7 Quality and Safety Executive Structure







## 8.0 Clinical Directorates

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### 8.1 Medical Directorate

- The National Bowel Screening programme commenced in Galway University Hospitals, Roscommon Hospital and Sligo Regional Hospital.
- The Merlin Park University Hospital Home Haemodialysis programme was established in September.
- An exhibition and accompanying book was launched in August which celebrated a year in the dialysis Unit at Merlin Park University Hospital.
- The Galway University Hospitals Diabetes Education Team (DAFNE and DESMOND teams) won the Patient Lifestyle Education Project Category award at the Irish Medical Times 2013 Healthcare Awards with a submission entitled "Introducing and Embedding Structured Diabetes Education Programmes in Galway"
- Dermatologists at Sligo Regional Hospital won the poster prize at the annual Irish Association of Dermatologists conference in Belfast.



At the launch of the exhibition "A Swallow's Tale in a Thousand Skies" and accompanying book by dialysis patients at Galway University Hospitals, front row from left: Dr Yvelynne Kelly, SpR Nephrology; and dialysis patients Maureen Burke, Una M Lawlor and Luke Coen. Back row: Pat O'Brien, Chair of the Arts Committee and Medical Safety Co-ordinator; Dr David Lappin, Consultant Nephrologist, with his son and Ann Cosgrove, General Manager.



Staff Nurses at the Dialysis Unit in Merlin Park University Hospital, from left: Lisa Mathew; Jacinta Reade; Justine Dawson, Health Care Attendant; Noeleen Flynn; Caroline Herwood; Christina Gardiner; Joey Twomey; and Carol Gibbons.



The Diabetes Education Team at Galway University Hospitals won the "Patient Lifestyle Education Project" category at the Irish Medical Times 2013 Healthcare Awards. From left: Bernadette McDonnell, Diabetes Nurse Specialist and DAFNE Educator; Dr Sean Dinneen, Consultant Physician and Senior Lecturer, School of Medicine, NUI Galway; Mary Clare O'Hara, Diabetes Education Project Manager and Researcher; and Carmel Murphy, Senior Diabetes Dietitian and DAFNE Educator.

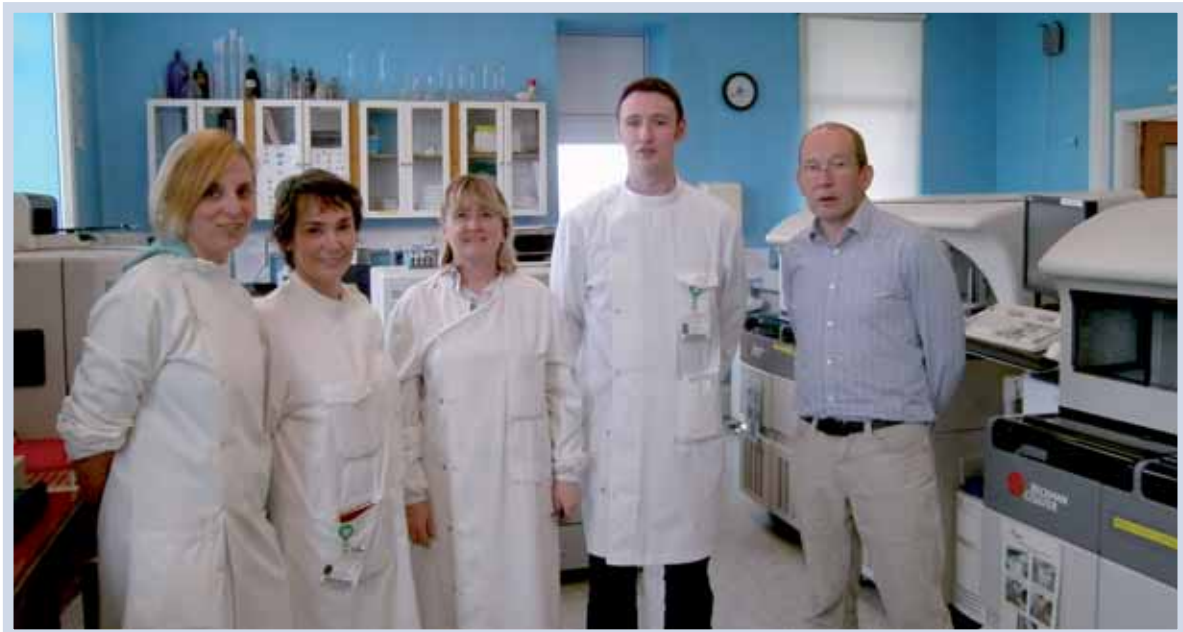
## 8.2 Diagnostics Directorate

### 8.2.1 Radiology

- RIS/PACs consolidated with Roscommon Hospital.
- The diagnostic imaging capacity was maximised across the Group which resulted in 898 patients being referred to Roscommon Hospital for CT scans.
- An equipment replacement strategy was developed in 2013 and equipment at Galway University Hospitals' fluoroscopy and Interventional rooms was replaced.

### 8.2.2 Laboratory

- Successful Introduction of colorectal screening service and achieving turnaround time requirements.
- Maintenance and extension of accreditation by Irish National Accreditation Body (INAB) to ISO 15189
- Implementation of Blood Track at Galway University Hospitals - Phase 1 September 2013.
- Integration of Clinical Biochemistry Laboratory services between Galway University Hospitals and Portiuncula Hospital Ballinasloe.
- Rapid response service introduced at Roscommon Hospital, with a sample turnaround time of less than 30 minutes for new day case services.



The Roscommon Hospital Transfusion Laboratory maintained its accreditation status following an inspection by INAB in April. Some of the Laboratory/ Haemovigilence staff involved in the accreditation process, from left: Corrina Delaney, Laboratory Assistant; Louise Talbot, Medical Scientist; Jacinta O'Boyle, Medical Scientist; Paul McArdle, Medical Scientist; and Tadhg Kenny, Chief Medical Scientist.

### 8.3 Peri-operative Directorate

- The national roll out of the Elective surgical programme saw the introduction of the Productive Operating Theatre (TPOT) programme across the Group.
- At Galway University Hospitals the capacity of the Intensive Care Unit was increased to nine beds.
- Galway University Hospitals Critical Care staff were invited to present the findings of the PROHIBIT (Prevention of Infection by Intervention and Training) study at the second International Conference on prevention and infection control (ICPIC) in Geneva, Switzerland in June.
- Representatives from the Directorate attended the official launch of the Model of Care for Acute Surgery and the National Policy and Procedure for Safe Surgery, by Minister for Health Dr James Reilly at the Royal College of Surgeons in Ireland in July.



The Productive Operating Theatre (TPOT) project at Portiuncula Hospital Ballinasloe continued to progress, from left: Breeda Madden, CNM Theatre; Yvonne Claffey, Theatre Nurse; Bernie Quinn, Theatre Nurse; Olive Brogan, Theatre Nurse; and Dr Bhagwan Das, Anaesthetic Registrar.

## 8.4 Women's and Children's Directorate

- The National Newborn Hearing Screening Programme was rolled out across the Group.
- The first Neonatal Study Day was held in May in the Maternity Lecture Theatre at University Hospital Galway.
- A Midwifery Outreach Clinic opened in Tuam.
- The Traveller, Midwifery and Gynae Working Group was shortlisted for the Innovation in Health care awards which were presented in May.
- Bikers Ride-out Fundraiser for the Neonatal Unit and Irish Premature Babies visited the Neonatal Intensive Care Unit (NICU) in April.



The National Newborn Hearing Screening Programme commenced at Portiuncula Hospital Ballinasloe in August with screening carried out by Northgate staff. From left: Máire Kelly, Clinical Support Services Director; Patricia Flattery, Screener; Sinead Courtney, Screener; Ellen O'Loughlin and baby Michael; Mary Burke, Clinical Midwife Manager 3; Emma Carolan, Screener; Helena Burke, Midwife; Charlene Hynes, Screener; and Martina Costello, Health Care Assistant.



## 9.0 Resources

### 9.1 Human Resources

#### 9.1.1 Group Staffing Profile

The Group commenced 2013 as the Galway and Roscommon University Hospitals Group with 3,998 staff, and merged in July with Mayo, Sligo and Letterkenny to become the West / North West Hospitals Group with 7,624 staff at year end.

The Galway and Roscommon University Hospitals Group absenteeism reduced from 5.7% in January 2013 to 4.08% in December 2013

December 2013	Medical/Dental	Nursing	HSCP	Management Admin.	General Support Staff	Other Patient & Client Care	Total
GUH	488	1204	412	494	276	209	3082
PHB	75	277	66	110	70	50	646
RCH	30	96	23	54	59	9	270
MGH	136	431	95	153	63	81	959
SRH	171	525	147	194	204	88	1329
LGH	147	508	130	197	222	134	1337
Total	1047	3041	873	1202	894	571	7624

#### 9.1.2 Absence Management

The Galway and Roscommon University Hospitals Group (GRUHG) absenteeism reduced from 5.7% in January 2013 to 4.08% in December 2013. Absenteeism remained a priority in 2013 with continued efforts to increase the rate of Return to Work/Review meetings, audits and training. Work also continued with respect to standardising the recording, collating, analysing and reporting of the data across the Group in order to provide accurate data going forward.

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
GRUHG	5.70%	4.32%	4.29%	4.57%	4.75%	4.04%	4.74%	5.21%	5.31%	5.16%	4.37%	4.08%
GUH	5.82%	4.36%	4.19%	4.54%	4.60%	3.85%	4.44%	5.12%	5.40%	5.08%	4.49%	4.16%
PHB	4.82%	3.92%	4.32%	4.50%	4.85%	4.82%	5.82%	5.53%	4.78%	4.80%	4.14%	3.93%
RCH	6.42%	4.67%	5.31%	5.10%	6.10%	4.50%	5.56%	5.44%	5.55%	6.95%	3.49%	3.55%
LGH								4.90%	4.10%	4.85%	4.45%	5.01%
SRH								6.15%	6.14%	5.44%	4.92%	5.30%
MGH								4.59%	4.33%	4.83%	3.70%	3.31%

### 9.1.3 Recruitment and Retention

Staff recruitment to certain key areas was one of the biggest challenges faced throughout 2013. Non Consultant Hospital Doctor recruitment was difficult across the Group and led to an increasing reliance on agency staff throughout the year. This was partly as a result of the implementation of the European Working Time Directive (EWTB) which reduced the number of hours doctors could work. The Group was 97% compliant with the terms of the EWTB at year end.

There were also significant challenges in respect of recruiting radiographers and specialist nurses for areas such as Critical Care, Emergency Departments, Theatres and Labour Ward. The additional hours made available through the Haddington Road Agreement, the Graduate Nurse and Support Staff Intern schemes have increased capacity throughout the Group in 2013.

The Group's Employment Control Committee and Medical Manpower HR Forum monitored recruitment and replacement of staff.

### 9.1.4 Staff Development

In 2013 the Group placed a particular focus on a number of management development programmes. These included:

- Clinical Nurse and Midwifery Development Programme.
- Future Leaders programme.
- National Quality and Leadership Programme in the Royal College of Physicians in Ireland.
- Clinical Director Development Programme.



Participants in the Nursing/Midwifery Management Development Programme received their certificates at a ceremony in April.



### 9.1.5 Employee Engagement

The Employee Engagement survey was carried out across all six sites in the Group. It sought a representative sample of views across all grades and disciplines. It was professionally collated, analysed, interpreted and reported upon. This was a critical part of the Human Resources agenda to engage meaningfully with staff.

The aim was to:

- Understand the main concerns of staff.
- Ask how aware they are of the Group's structure and vision.
- Ask what they see as essential matters as employees.
- Invite their suggestions to management as the best approach to meet their needs.
- Establish what staff need to know more about.
- Hear what they need to tell us.
- Increase the support that staff receives from management.
- Get staff views on planning for the future.

The results of the survey will inform and shape the HR strategy and an action plan will be developed to respond to staff concerns and feedback.

Meet and Greet Volunteers at hospitals across the Group played an important role in helping to guide visitors and patients around the hospitals.



At the five year anniversary celebrations of the 'Meet and Greet' Volunteer Programme at Galway University Hospitals in September, from right: Volunteers Patricia Dooley, Mary Heneghan, Deborah Reilly, Ronald Sayers, Phil Grealish, Mary Griffin, Muriel Silke and Alice Parsons with Jean Kelly, Director of Nursing and Midwifery.

### 9.1.6 Employee Relations

A Joint Union Management Forum was established in 2013 to promote better communication and cooperation between the employer and staff representative bodies. The group met every six weeks throughout the year.

The terms of the Haddington Road Agreement were implemented in 2013 with the reduction in pay, increased hours; annual leave /concession leave reductions; restoration of the Senior Staff Nurse Grade and Incentivised Career Break (ICB) scheme, being completed in 2013.

## 9.2 Finance

In July Letterkenny, Sligo and Mayo hospitals joined the Galway and Roscommon University Hospitals Group increasing the Annual Budget for 2013 from €320m to €594m.

It was another challenging year financially but the focus remained the same: to deliver on financial contracts while minimising the impact on services. The year-end position showed a deficit on budget of €39m. However after adjusting for expenditure incurred relating to the Letterkenny flood, the deficit position was €32m. Significant cost reductions were achieved in pay as well as through negotiated price reductions.

### 9.2.1 Income and Expenditure Report

Group Income and Expenditure Account 2013			
	2013 Summary €000	2013 Summary Allocation €000	2012 Summary €000
<b>Income</b>			
Patient Income	70,991	82,082	75,051
Other Income	14,343	18,062	18,021
	<b>85,334</b>	<b>100,144</b>	<b>93,072</b>
<b>Expenditure</b>			
Wages and Salaries	501,049	499,507	505,759
Drugs and Medicines	50,311	50,140	50,901
Bad and Doubtful Debts	4,823	512	371
Domestic	22,267	21,255	21,444
Maintenance and Energy	16,295	13,475	14,756
Clinical Costs	100,059	93,033	96,849
Non Clinical Costs	37,912	30,767	26,278
Miscellaneous	1,861	1,290	1,549
	<b>734,577</b>	<b>709,979</b>	<b>717,907</b>
<b>Net Expenditure</b>	<b>649,243</b>	<b>609,835</b>	<b>624,835</b>

### 9.2.2 Pay

In 2013 the payroll spend was reduced by €5m to €501m. This reduction is in part due to savings from the Haddington Road Agreement. It is also due to the strong focus on the reduction in premium payments. The ongoing recruitment moratorium continued to challenge recruitment of certain categories of staff. This led to increased agency costs from €10.6m in 2012 to €12.4m in 2013. However savings of €2.8m were achieved in Non Consultant Hospital Doctor overtime in 2013.

### 9.2.3 Non Pay

Despite continuous focus on cost containment plans, the non pay expenditure increased by €12m on 2012. This was largely activity related. Areas which increased include patient transport, medical and surgical supplies, and energy costs. There was an increase of €3.8m for professional services as a result of Outpatient Department initiatives.

Capitation payments increased by €1.1m on the previous year due a focus on discharging long stay patients to more appropriate care facilities.

There were some savings in areas such as blood and blood products, drugs and medicines due to price negotiations and stock management. In 2014 the Group will work closely with procurement to get the best product and unit price.

The Electronic Document Management solution will move the Group from a paper based system to a paper light system and is a significant move towards the electronic patient record

### 9.2.4 Income

Patient related income was down by €3.4m compared to 2012 due to fewer patients with private insurance. Other factors which impacted on income generation were lack of single room accommodation which is often prioritised for infection control reasons and the implementation of capacity escalation plan to reduce numbers of patients awaiting beds in the Emergency Department. Patient related income was €9.8m less than budget. The National Treatment Purchase Fund income reduced by €3.3m; this related to a change in the mechanism for funding allocation for waiting lists at national level.

### 9.2.5 Information Technology

The Development of the Group ICT Strategy to support the business and vision of the Group is a vital part of the work of the ICT steering committee which was developed in 2013.

Patient records across the Group are almost wholly managed in paper form. The continued reliance on hardcopy paper documents consumes headcount, building space, time and money. A business case for Electronic Medical Records was developed in 2013 and was submitted to the Department of Finance for consideration. The Electronic Document Management solution will move the Group from a paper based system to a paper light system and is a significant move towards the electronic patient record.

### 9.2.6 Finance Achievements

Phased implementation of the new electronic claims management system - Claimsure - continued with successful implementation in Portiuncula and the final implementation phase in Galway University Hospitals. The development of the Activity Based Costing (ABC) system also continued, with a further iteration of the 2012 Galway University Hospitals activity and costs. This introduced a more sophisticated allocation process in the high cost activity areas such as Radiology, Theatres and Laboratory.



## 10.0 Cancer Services

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### 10.1 Cancer Developments

- Cancer Services were delivered in all six hospitals across expanded Group. Stronger links between services were developed which resulted in improved patient experience and outcomes across the group.
- The National Cancer Control Programme Key Performance Indicators for cancer sites continued to drive service improvement in the West / North West Hospitals Group in 2013.
- Launch of First Cancer Services Annual Report in December.
- Inaugural Western Cancer Centre Conference took place at the Clinical Science Institute, NUI Galway in December.
- Presentation of €250,000 Colorectal Screening Funding cheque from Irish Cancer Society/National Cancer Control Programme.
- Links developed with The Galway Clinic for Robotic Prostate Surgery
- Reconfiguration of T7 in Galway University Hospitals for Urology Outpatients

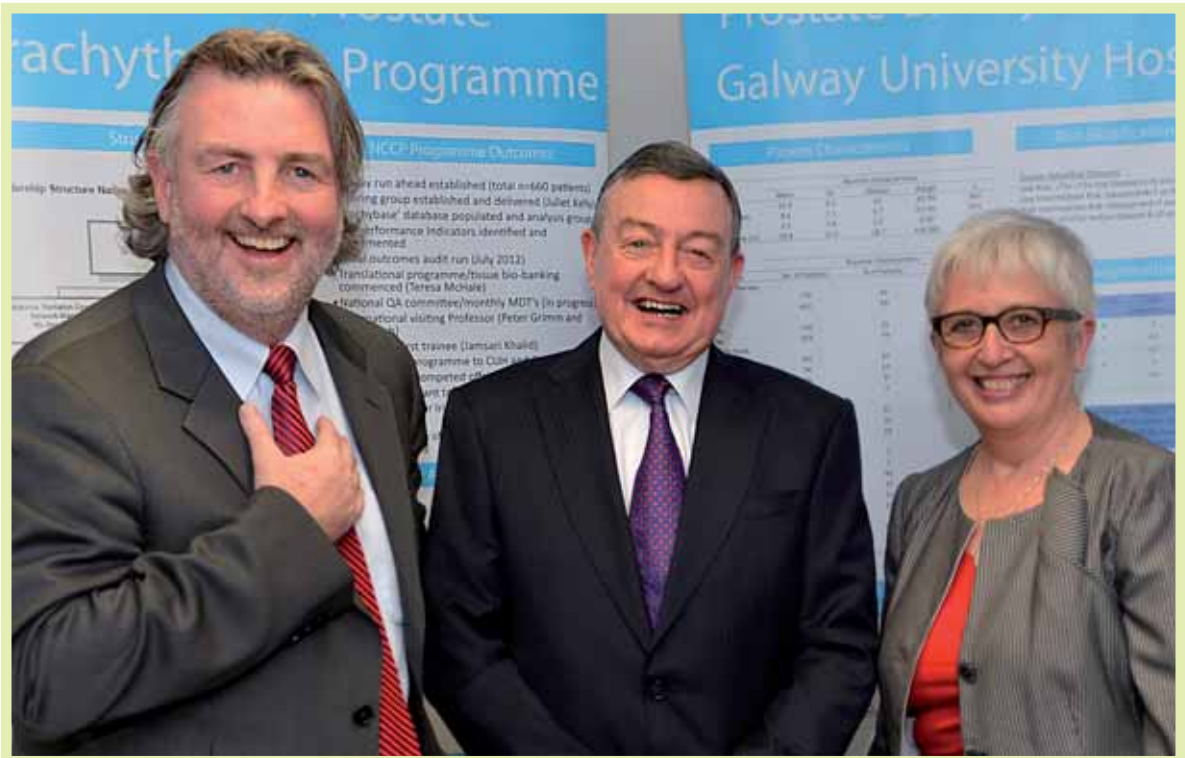
The National Cancer Control Programme Key Performance Indicators for cancer sites continued to drive service improvement in the Group in 2013



The Galway University Hospitals Cancer Centre 2012 report was launched in December at the first Western Cancer Centre Conference. From left: Marie Cox, Group Assistant Director of Nursing; Prof Michael Kerin, Chair of the Cancer Strategy Group for the West / North West Hospitals Group and Professor of Surgery and Head of Discipline at NUI Galway; Bill Maher, Group CEO; and Noel Daly, Chair of the Board.



At the launch of the 2011 Annual Report for the Symptomatic Breast Unit at Galway University Hospitals in February, from left: Bill Maher, Group CEO; Mr Kevin Barry, Consultant Breast Surgeon, Mayo General Hospital; Pauline Mc Gough, Clinical Nurse Manager II, Symptomatic Breast Unit; Mr Ray Mc Laughlin, Lead Clinician, Symptomatic Breast Service; and Geraldine Cooley, A/Business Manager, Symptomatic Breast Unit.



Prof Frank Sullivan, Consultant Radiation Oncologist and Lead Clinician, Department of Radiation Oncology, Galway University Hospitals; Peter Keane who received Prostate Brachytherapy treatment at the hospital in 2010 and Dr Susan O'Reilly, National Director of the National Cancer Control Programme at the launch of the National Prostate Brachytherapy Service in Galway University Hospitals in January.



Bill Maher, Group CEO accepting a cheque to fund bowel cancer screening equipment for Galway University Hospitals and Roscommon Hospital from Ann Flanagan, Chairperson Galway Daffodil Day Committee and Donal Buggy, Head of Services, Irish Cancer Society.





## 11.0 Estates

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Activities for the year included:

- Initial approval received to progress Interim Ward Block at Galway University Hospitals and Portiuncula Hospital Ballinasloe.
- Capital approval for Rehabilitation ward at Merlin Park University Hospital.
- Capital approval for the enabling works for the National Plan for Radiation Oncology (NPRO) at Galway University Hospitals.
- Agreed Cystic Fibrosis Unit developments at Mayo General Hospital and Galway University Hospitals.
- Renal Unit refurbishment and upgrade at Mayo General Hospital.
- Upgrade of HSSD / Endoscopy at Portiuncula Hospital Ballinasloe.
- Capital Approval for Endoscopy at Roscommon.
- Approval to develop Specialist Rehabilitation Unit Roscommon.
- Development of Hospice Facility Roscommon in cooperation with Mayo/Roscommon Hospice Foundation.
- New Waiting area and treatment space for paediatrics in the Emergency Department and improved Minor Injuries Unit at Sligo Regional Hospital.
- New CT scanner installed at Sligo Regional Hospital in December 2013.
- Completion of hospital road infrastructure and additional car parking space to prepare for the new Surgical/ED Block Development at Sligo Regional Hospital.
- A major rebuild project to return services to Letterkenny General Hospital following the devastating flood in July commenced.

A major rebuild project to return services to Letterkenny General Hospital following the devastating flood in July commenced



At the sod turning for a new Paediatric Outpatient Unit for Patients with Cystic Fibrosis at Galway University Hospitals in December, from left: Mary Lane Heneghan, Chair of Cystic Fibrosis Galway; Maureen Fitzhenry; Marian Keane and Bill Maher, Group CEO.

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The Endoscopy/Decontamination Project in the Hospital Sterile Supplies Department (HSSD) at Portiuncula, from left: Tommy Caulfield, Staff Nurse HSSD; Jackie Reamsbottom, HSSD Operative; and Mary Noone, HSSD Operative.

## 12.0 Looking Forward

### Service Priorities for 2014

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	Priority	Lead Officer	Timescale
1.	Group Configuration / Integration	Bill Maher/Pat Nash	Q4- 2015
2.	Develop Group Strategy / Application to Trust Status	Bill Maher	Q4 -2014
3.	Develop Primary Care Centre in Mayo and Galway	Bill Maher / Colette Cowan / Ann Cosgrove	Q4 -2015
4.	Develop Centre for Leadership, Learning and Innovation	Bill Maher / Colette Cowan / Anthony O'Regan	Q1- 2015
5.	Deliver Letterkenny Rebuild Programme	Bill Maher / Sean Murphy	Q4 – 2014
6.	Implement Maternity Services Review	Bill Maher /Geraldine Gaffney	Q4 – 2014
7.	Meet HIQA Standards	Pat Nash	Ongoing
8.	Implement Northwest Cardiology recommendations	Bill Maher / Donal Reddan	Q3 -2014
9.	Implement 'Money Follows The Patient'	Maurice Power	Q4-2015
10.	Meet national targets for trolley waits	Pat Nash	Ongoing
11.	Meet waiting list targets: 12 month outpatient; 8 month adult inpatient; 20 week paediatric inpatient; and 13 week scopes	Tony Canavan/ Colette Cowan	Ongoing
12.	Develop branding strategy and website	Tony Canavan	Q4- 2014
13.	Identify opportunities for cross border collaboration	Bill Maher	Ongoing
14.	Achieve financial breakeven	Maurice Power	Q4 -2014
15.	Deliver the Haddington Road Agreement recommendations	John Shaughnessy	Q4- 2014
16.	Develop CEO Awards Scheme for patient quality and innovation	Bill Maher/Noel Daly	Q3 -2014
17.	Further develop International Partnerships	Noel Daly/Bill Maher	Q4 -2014
18.	Develop Group Foundation	Noel Daly/John Killeen	Q4 -2014
19.	Develop Orthopaedic Network / Urology Network	Pat Nash/ Paul Naughton	Q4 -2014
20.	Develop and launch HR Strategy	John Shaughnessy	Q2 - 2014



# Annual Report 2013