

# Employee Engagement Roadshow 2017



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive



**Saolta**

Grúpa Ollscoile Cúram Sláinte  
University Health Care Group

# Agenda

1. Information Update
2. Finance Update
3. HR Update
4. Key Priorities for the Group in 2018
5. Site Specific Priorities
6. Capital and ICT Developments on Site and for the Group
7. Strategic Developments for Group
8. Integration Project Update

# Information Update

**Service Plan 2018 Key Priorities**

**National Patient Experience Survey Results**

**Patient Flow Project**

**Board Update**

**National Developments**

**Waiting List Update**

**Winter Plan Update**

# Key Priorities for the Group in 2018

**National Patient Experience Survey**

**Quality, Safety & Risk**

**Winter Plan 2017-2018**

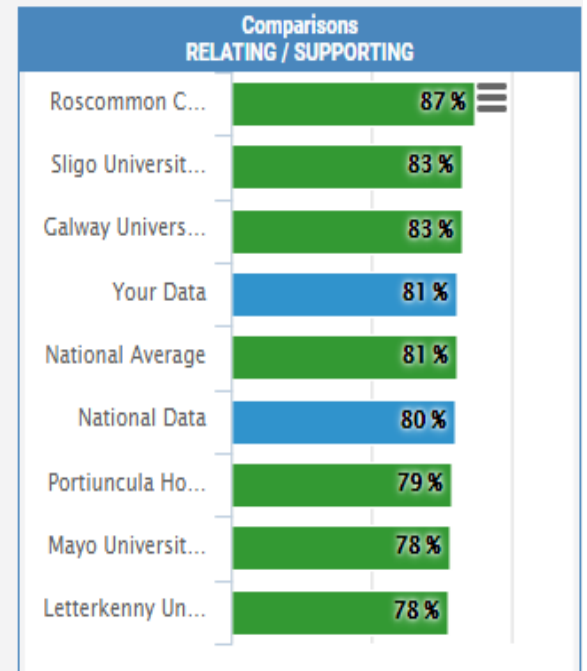
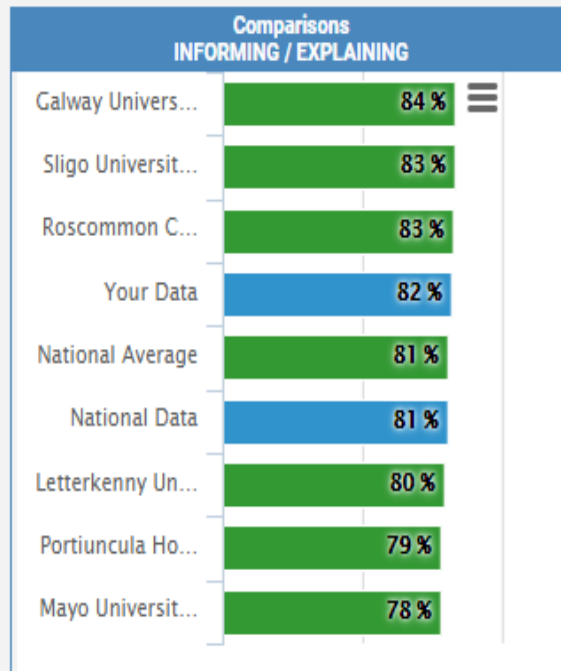
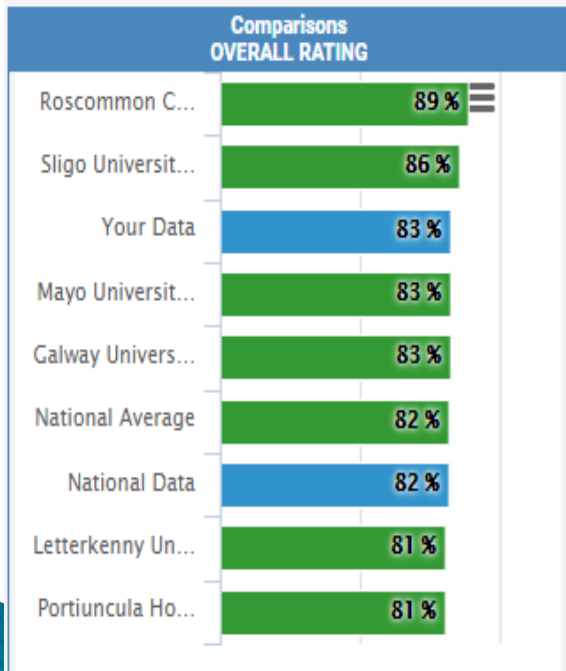
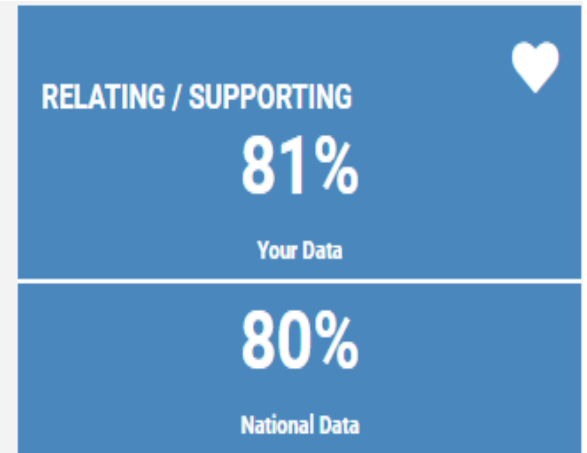
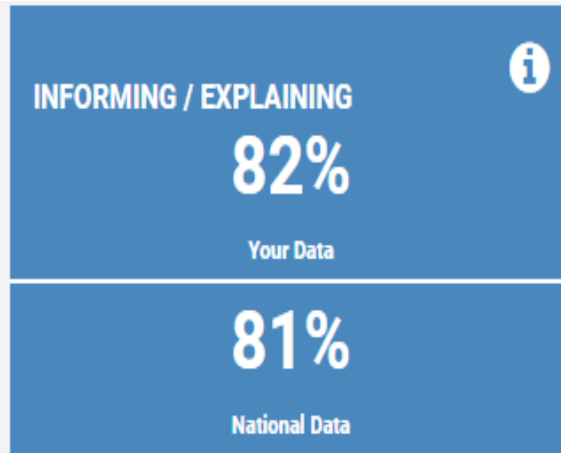
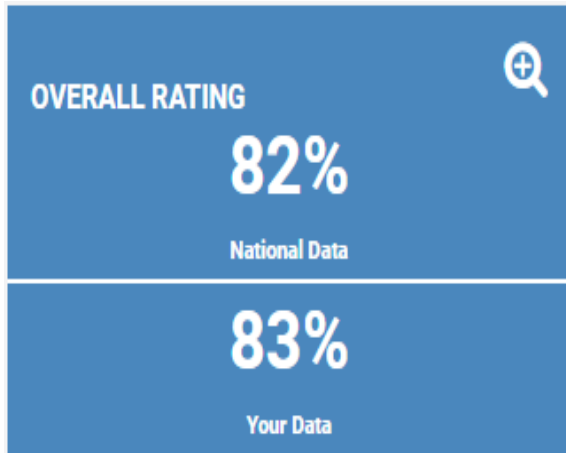
**Hand Hygiene HACI – CPE**

**Flu Vaccine**

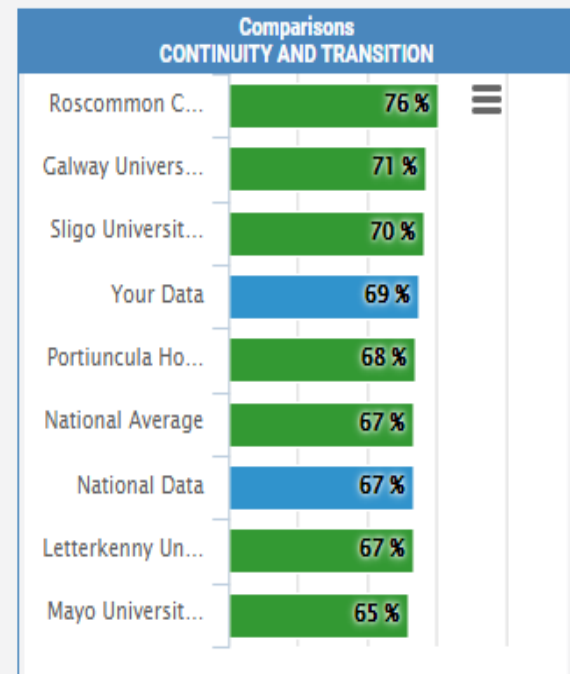
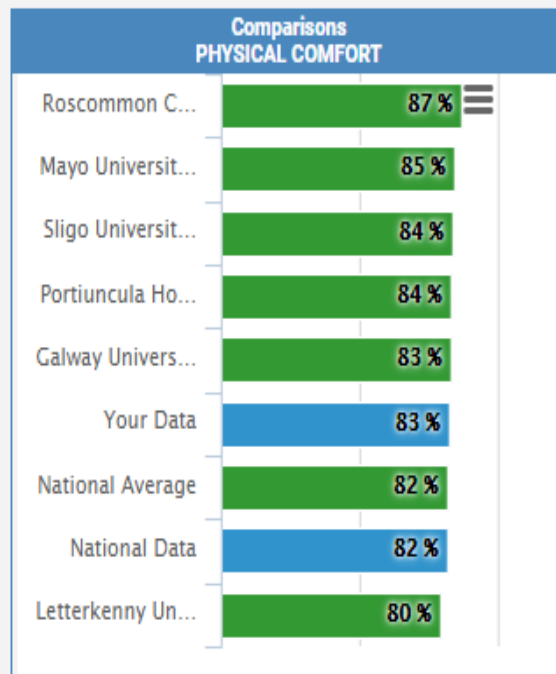
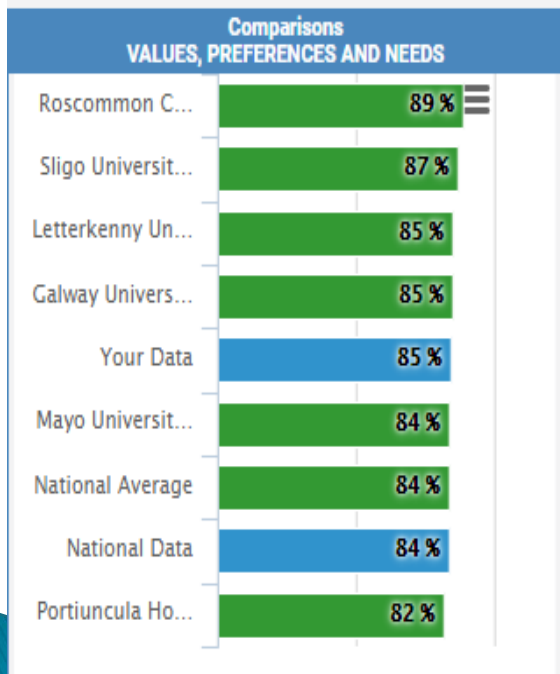
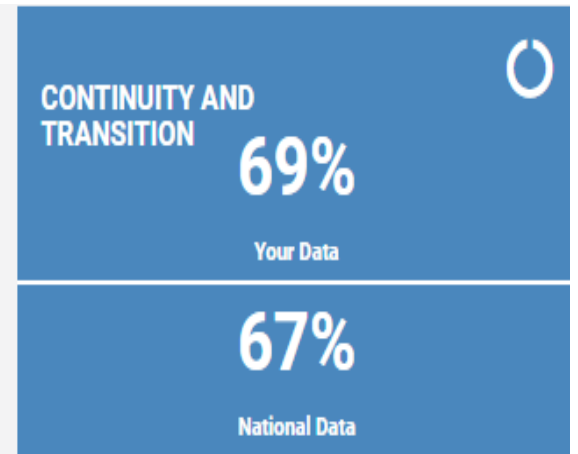
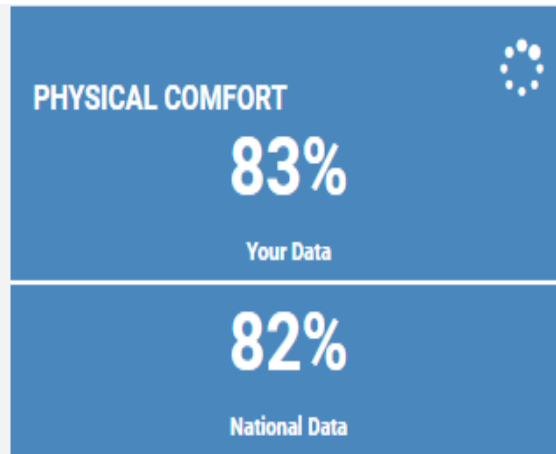
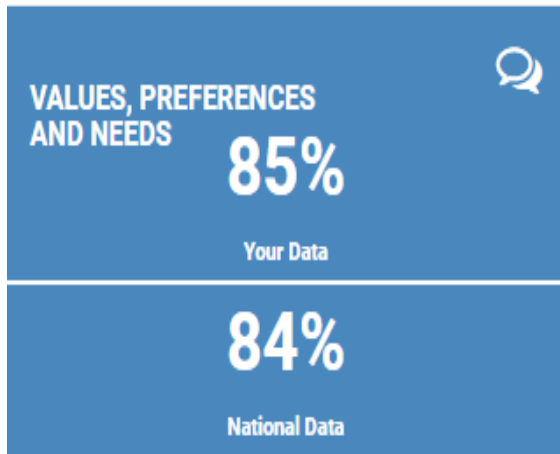
**Waiting List Targets**

**Scheduled Care Plan 2018 onwards**

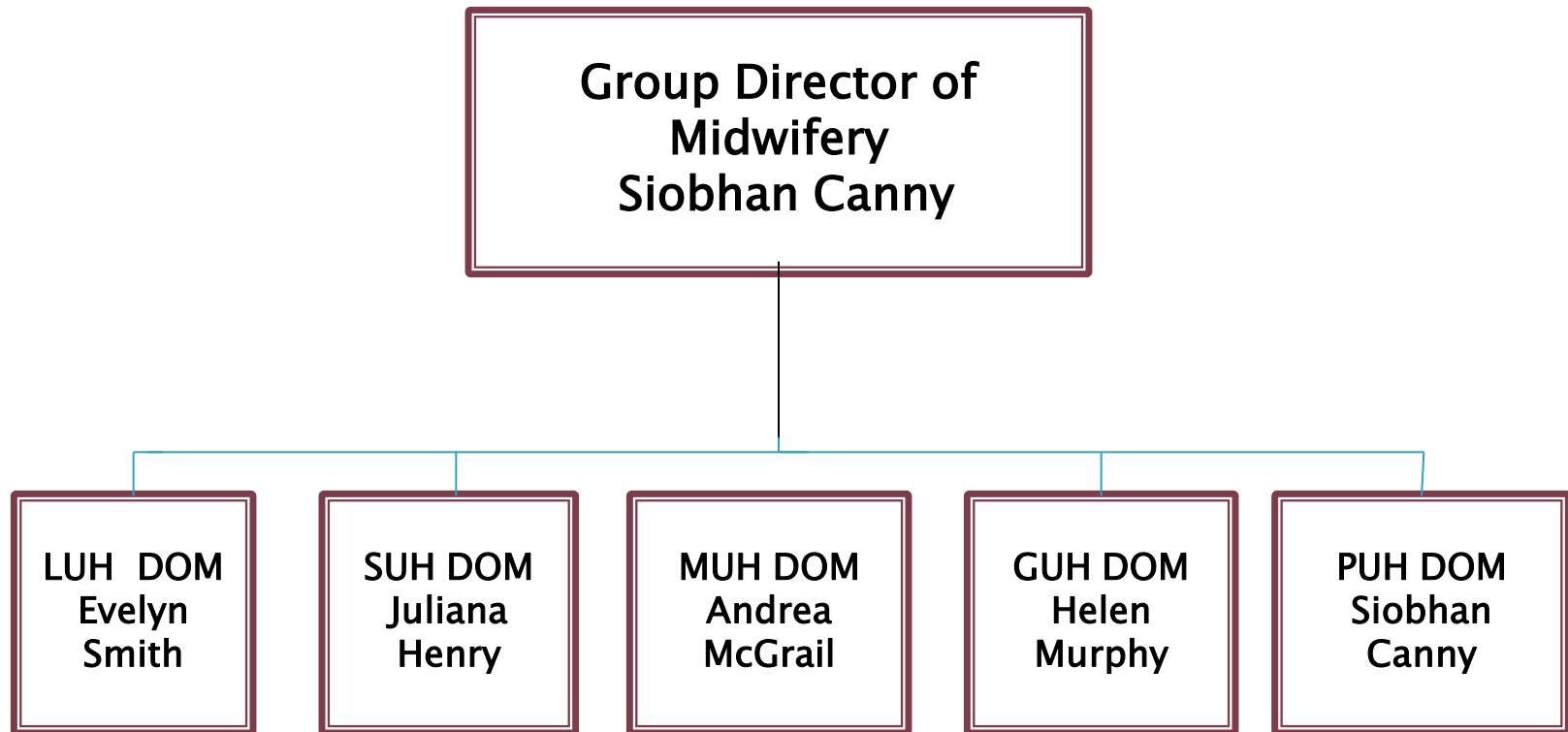
# National Patient Experience Survey



# National Patient Experience Survey



# Midwifery Governance Structure



# Influenza Vaccination

Why should Health Care Workers be vaccinated?

Healthy people can get seriously ill from flu

20% of HCWs get flu every year (may only have mild symptoms and continue to work)

Provides indirect protection against influenza to the high-risk patients.

20 enthusiastic Peer Vaccinators in the Group in addition to Occupational Health clinics.

Over 400 staff vaccinated = over 4,000 children helped in the first week (1 'flu vaccination = 10 Polio vaccinations to UNICEF)

UNICEF “19.4 million children missed out on basic vaccines needed to stay healthy last year”.

Uptake of flu vaccinations in Saolta

2015/2016 – 16%

2016/2017 – 24%

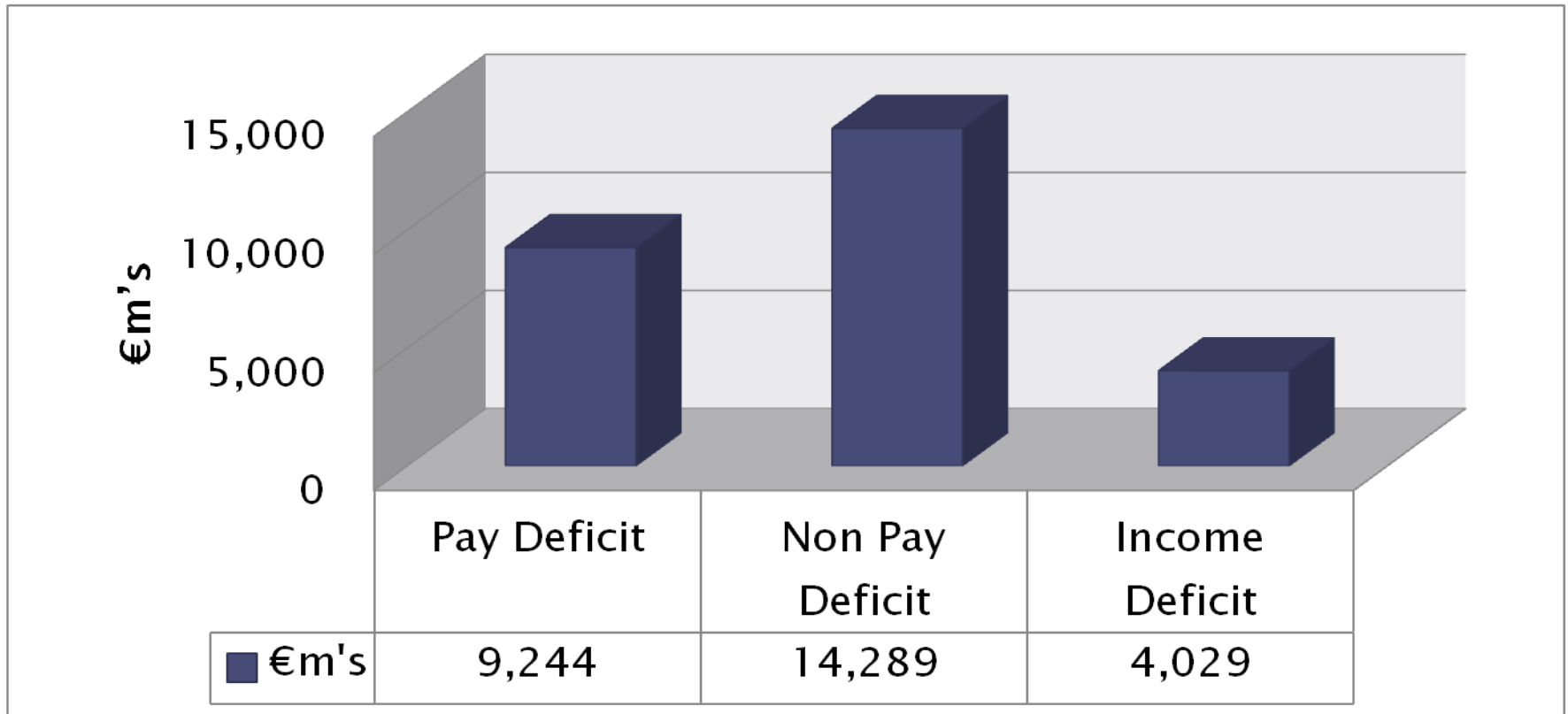
2017/2018 – let's make it over 40%

Play your part – get your vaccine.





# Finance Update – Deficit as at end September 2017



At the end of September the Group has a total expenditure of €564.3m this is a deficit of €27.6m on budget. There has been an increase of €30.0m on last years expenditure – €17.9m relates to payroll costs.



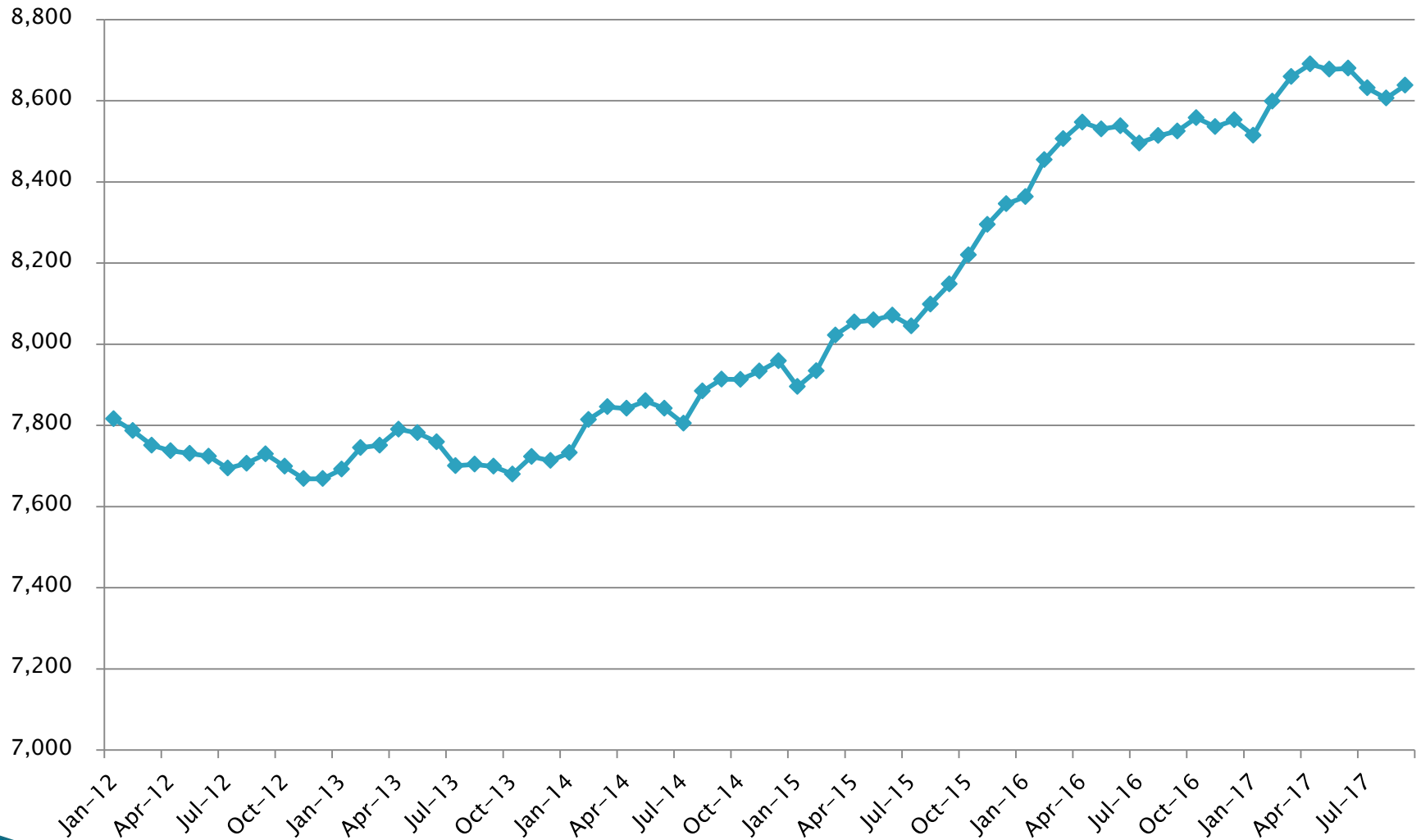
# ABF Performance

Activity Based Funding (ABF) for Saolta is currently showing a surplus of €5.4m when comparing ABF spend to ABF revenue (July 2017 results).

The ABF model aims to increase the Value for Money achieved over time and fund the hospitals for actual activity undertaken



# WTE Growth Trend January 2012 to September 2017

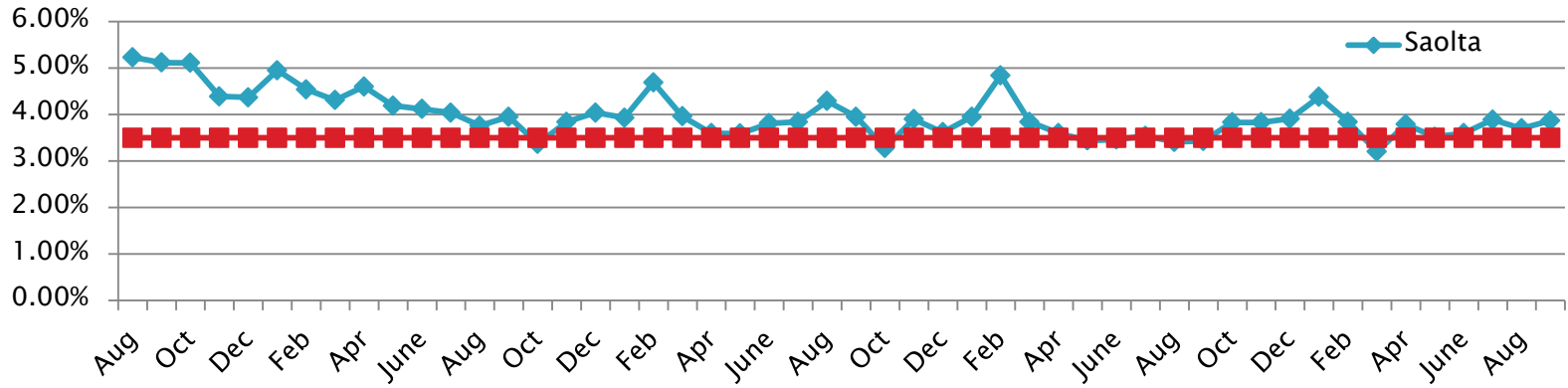


# WTEs – lows and highs

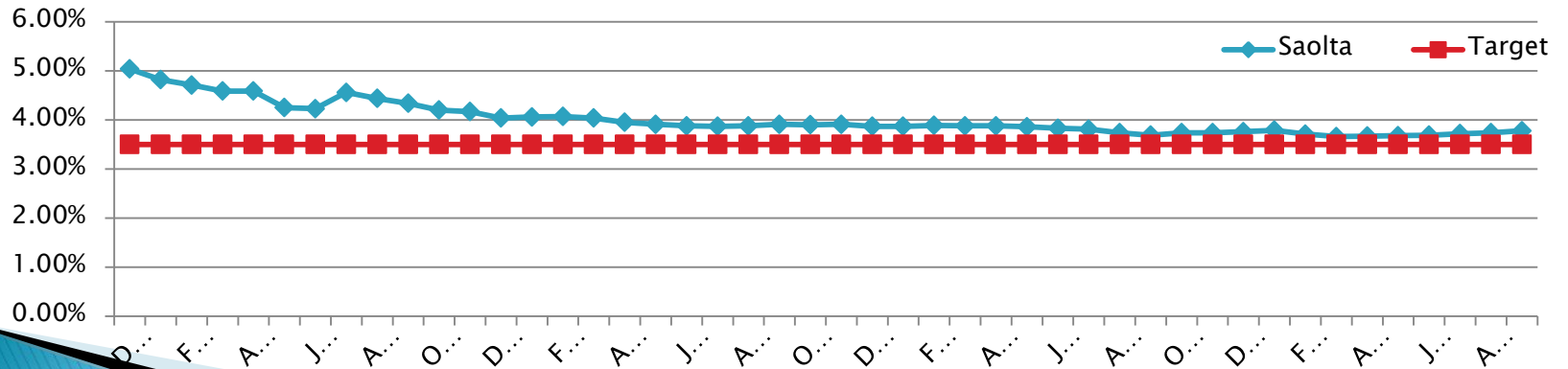
	Lowest WTE	Date	Highest WTE	Date	Current WTE (September 2017)	% WTE change lowest to highest	% WTE change lowest to current
<b>MUH</b>	<b>955</b>	<b>Dec-12</b>	<b>1,066</b>	<b>June 2017</b>	<b>1,056</b>	<b>11.62%</b>	<b>10.58%</b>
<b>Saolta</b>	<b>7,594</b>	<b>Oct-13</b>	<b>8,613</b>	<b>April 2017</b>	<b>8,629</b>	<b>13.42%</b>	<b>13.63%</b>



# Absence Levels



	September 2016	September 2017	12 month running average
GUH	3.02%	3.82%	3.44%
PUH	2.38%	3.59%	3.49%
RUH	4.75%	3.35%	3.89%
LUH	3.99%	4.38%	4.52%
SUH	3.50%	3.99%	3.76%
MUH	4.15%	3.48%	4.04%
Saolta	3.43%	3.89%	3.78%



# 'Healthy Ireland'

2016 Annual Report highlights significant progress in a number of areas

'Flu vaccination initiative – a 50% increase in uptake but still very low level (24%).  
2017/18 season underway and ambitious target set.

Stress control training on all sites with more scheduled for Winter.

A lot of work has been done in relation to Calorie posting, Vending Compliance, Arts in the workplace, Arts for Patients, Exercise programmes, Walking Trails, Pilates, Yoga, Mindfulness etc.

Other initiatives include Website development, partnership with the CHOs and supporting two initiatives in relation to Bariatric services.

Published a Health and Wellbeing Training Plan – first in Ireland.

Challenges remain with respect to the Tobacco-free campuses



# Capital Developments

## GUH

ED

Heli-pad

Cath Labs

Orthopaedic Theatres MP

Blood and Tissue Laboratory

## PUH

50 bed Ward Block

## MUH

Tenders out for design services for HSSD, Pharmacy Isolator, Mortuary, Fire Upgrade

Additional Capacity AMU/ED

# Capital Developments

## **RUH**

Rehabilitation Unit - going to tender for design team in coming weeks.

## **SUH**

ED/Surgical Block Sligo - Stage 2a report nearly complete will be submitted for approval to proceed to stage 2b in last quarter 2017.

Diabetic Day Centre - requires uplift of funding, for decision at next national Capital Steering Meeting.

Medical Academy Sligo - remedial works on cladding (fire safety). Academy operating normally.

## **LUH**

Radiology rebuild project - to commence 4<sup>th</sup> Quarter, 2017.



# ICT Developments for the Group

**Group PAS** – workshops underway, discussions with CHOs have taken place on project governance

**EDRM** – ‘Evolve’. Contract signed June. Go live first specialty – end of Q2 2018

**MOCIS** – UHG and MUH

**AFIS**

**E-Health**

**NIMIS** – Letterkenny went live on Tuesday 26<sup>th</sup> September

**ICT Core Rooms** – UHG and PUH design process in progress. An action plan is being progressed in relation to ICT infrastructure in PUH – capital submissions in progress.

# MUH Priorities

## Progress the Framework for Quality Improvement:

1. Patient Engagement
2. Staff Engagement
3. Measurement
4. Leadership workshops
5. Use of information, Wifi and update MUH website

## Address capacity for the entire site:

1. Inpatient
2. Outpatient
3. Day case
4. Emergency access
5. Escalation space
6. Office space

Progress the temporary ED and AMAU as a matter of urgency in 2018

Progress with the DCP

# MUH Priorities

Complete specification for a ward block 50% replacement 50% new.

Maximise on recruitment increasing Resources for the hospital to achieve appropriate responsiveness to need.

Progress the requirement of the maternity strategy in MUH appointment of posts.

Prioritise plan to maximise intermediate and minor surgeries

1. Complete business case regarding this last quarter 2017.
2. Ring-fence beds and create more day case space.

# Priority Strategic Developments

1. Group Integration
2. Group Clinical and Corporate Strategies

# Saolta University Health Care Group Vision

*Our Vision is to be the leading  
academic Hospital Group,  
delivering excellent integrated  
patient-centred care through  
skilled caring staff.*



# Saolta Guiding Principles

To work in partnership with other healthcare providers across the continuum of care:

1. To deliver high quality, safe, timely, and equitable patient care by developing and ensuring sustainable clinical services to meet the needs of our population.
2. To deliver integrated services across the Saolta Group Hospitals with clear lines of responsibility, accountability and authority whilst maintaining individual hospital site integrity.
3. To continue to develop and improve our clinical services supported by research and innovation in partnership with NUIG and other academic partners.
4. To recruit, retain and develop highly-skilled multidisciplinary teams through support, engagement and empowerment .



# A Clinical led/professionally managed integrated governance structure will enable:

Bringing decision making closer to the point of care – responsiveness

More streamlined clinical pathways for patients within and across specialities

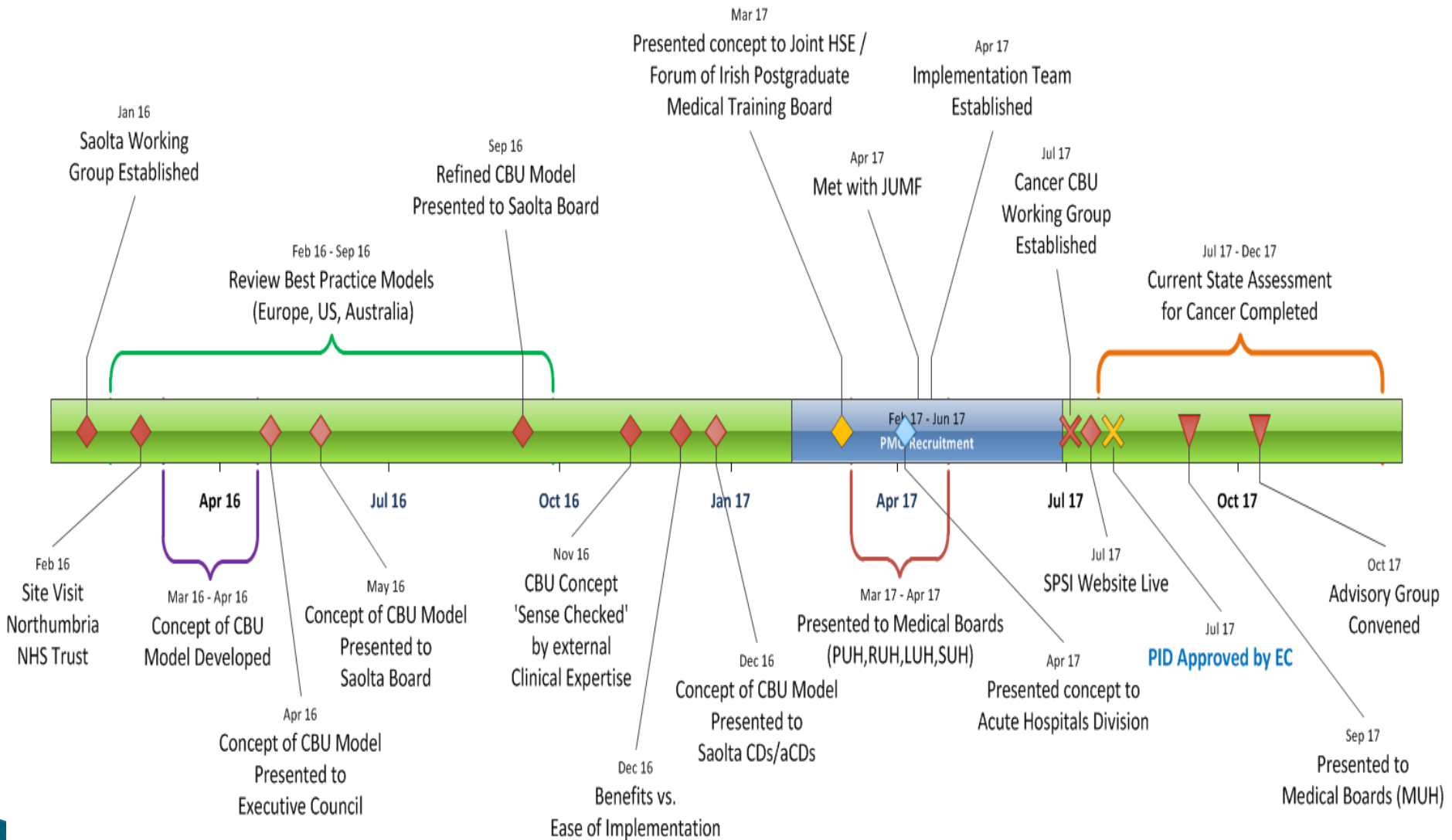
Clarity of responsibility and accountability

Integrated planning across the pathway of care

Optimisation of resources across services and hospitals in Saolta



# INTEGRATED GOVERNANCE JOURNEY TO DATE

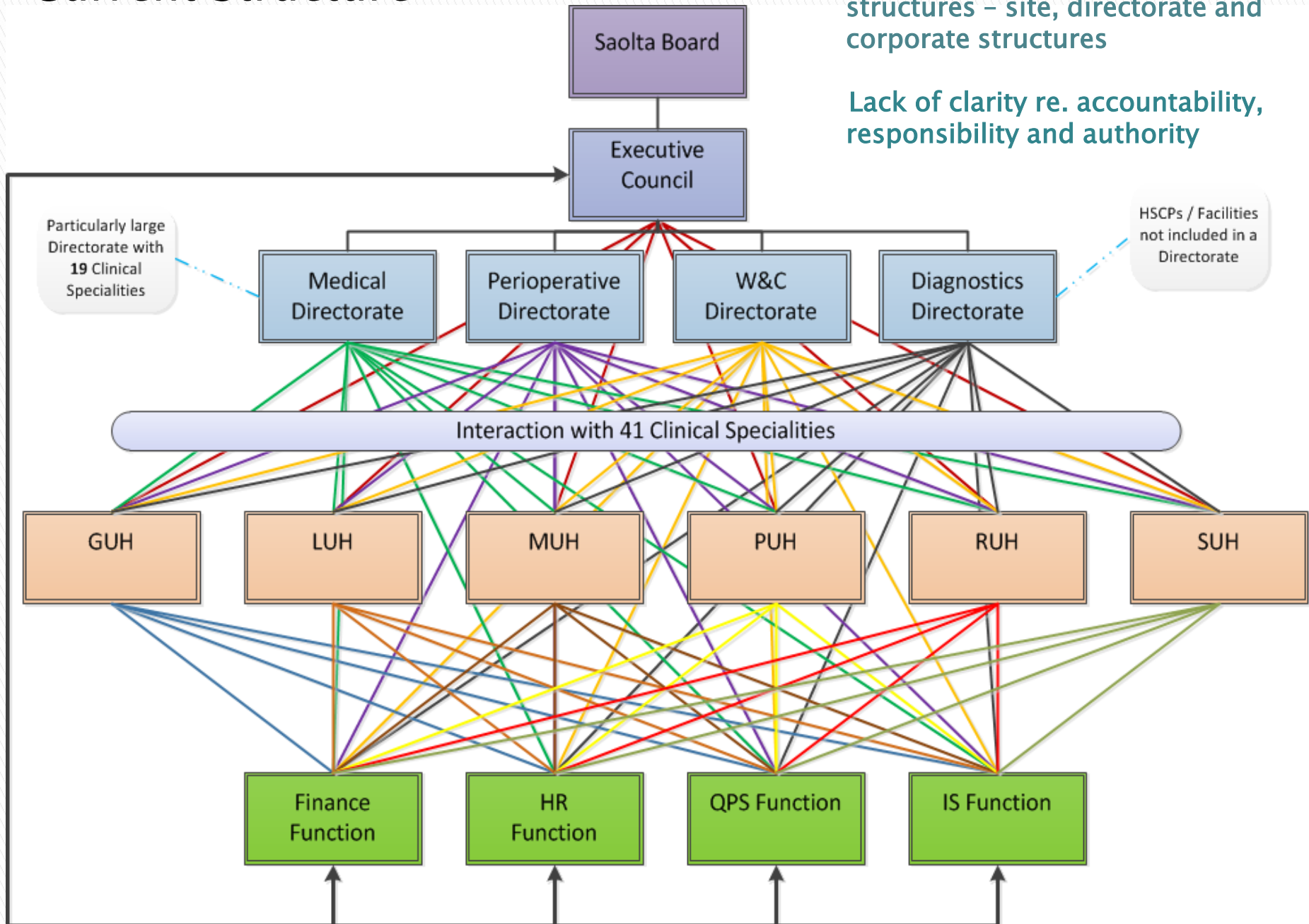




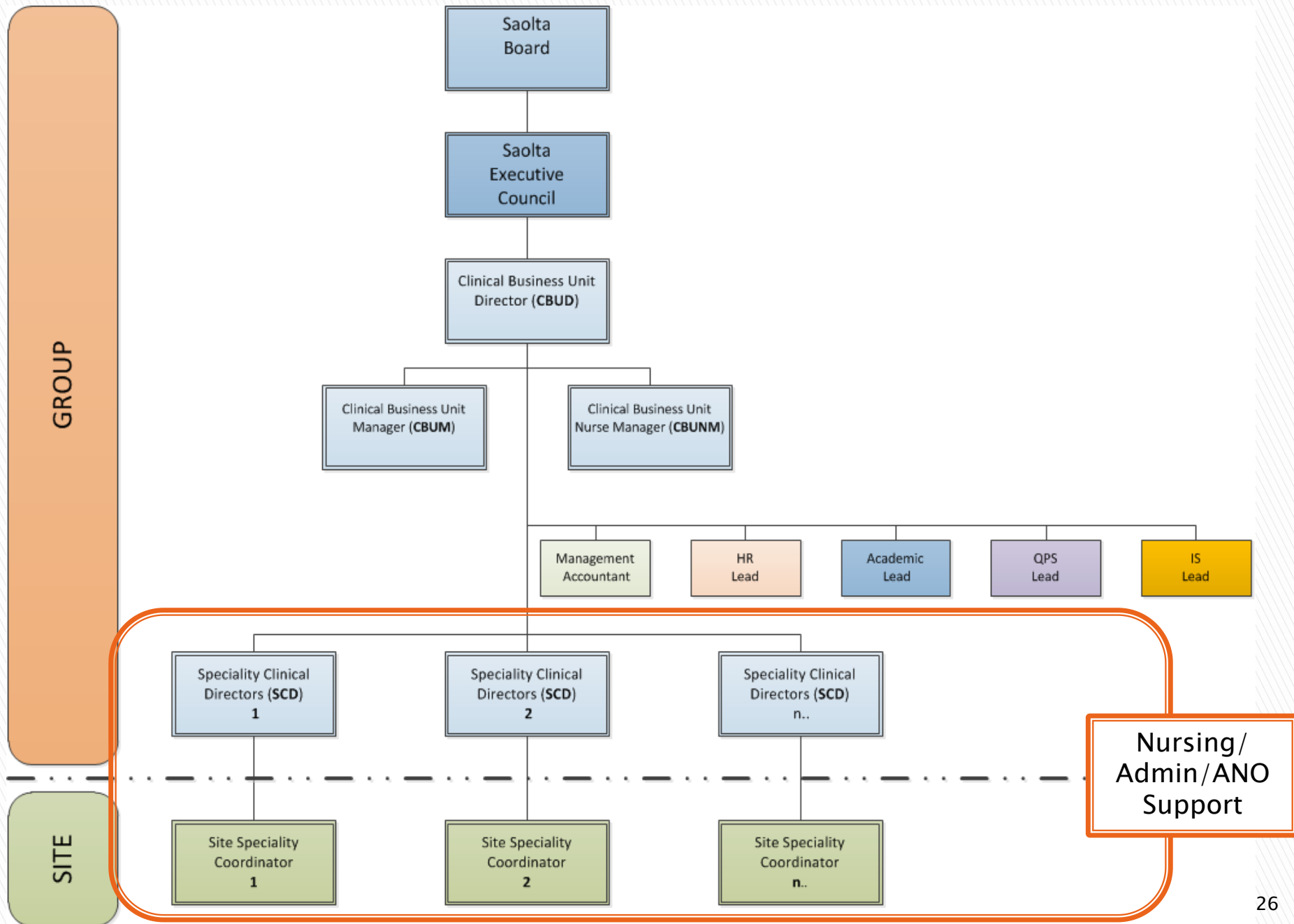
# Current Structure

Currently multi layered governance structures – site, directorate and corporate structures

Lack of clarity re. accountability, responsibility and authority

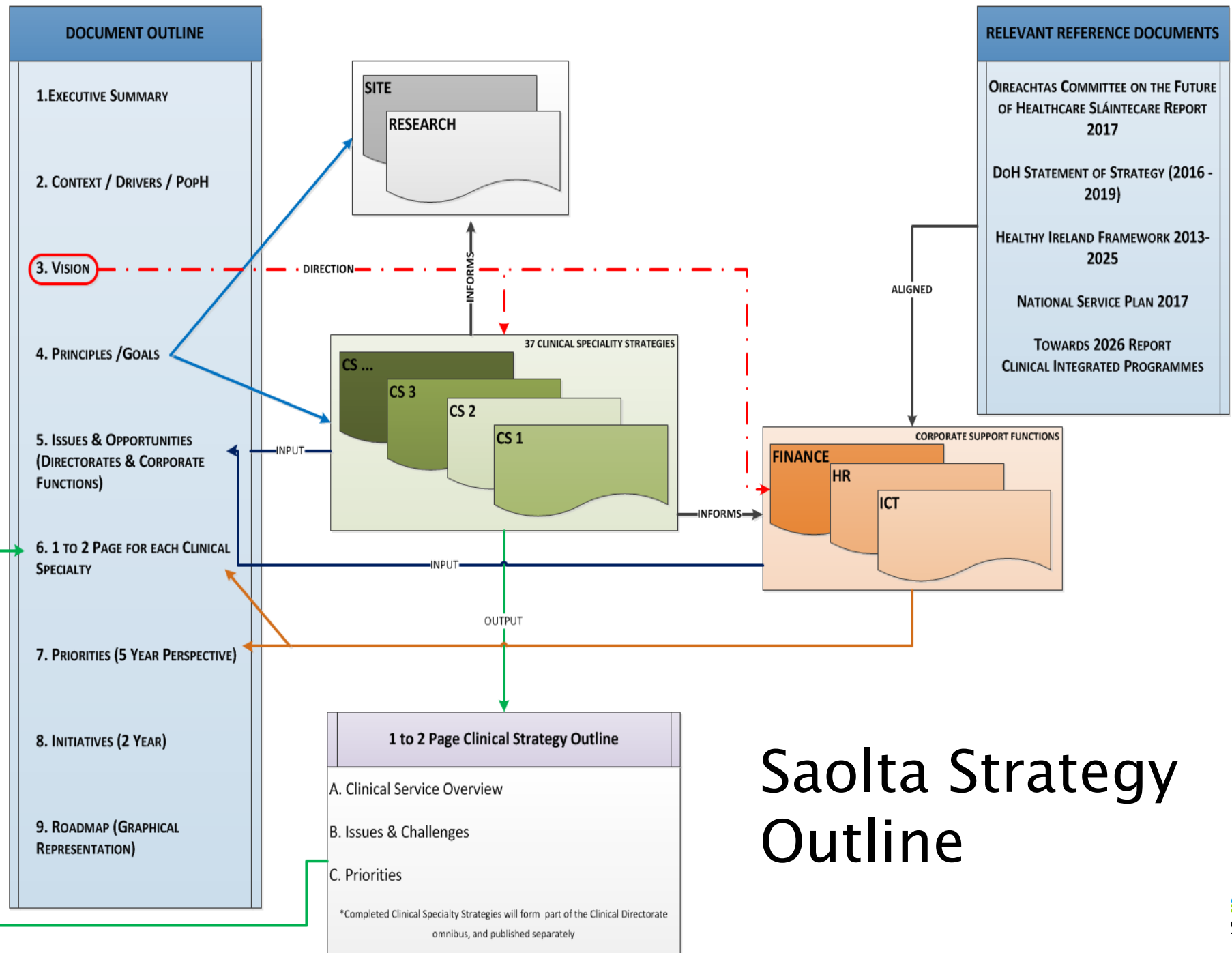


# Clinical Team Based Approach



# Clinical Business Unit Working Model

UNSCHEDULED CARE	CBU2	CBU3	WOMEN'S & CHILDREN'S	CANCER	DIAGNOSTICS/HSCPs	SHARED CLINICAL SERVICES	SUPPORT SERVICES
Acute Medicine	Cardiology	Rheumatology	Women's Services	GI Surgery / Upper	HSCPs	Anaesthetics	Medical Records
Elderly Care /Stroke Care	Cardiothoracic Surgery	Orthopaedics	Paediatrics / Neonates	GI Surgery / Lower	Laboratory	ICU /HDU	Central Appointments
Emergency Medicine	Respiratory	Immunology		Breast	Radiology	Theatres /CSSD/Endoscopy	Central Services
General Surgery	Gastroenterology	Dermatology		Medical Oncology	Pharmacy	Outpatients	Maintenance
	Vascular Surgery	Plastic Surgery		Radiation Oncology		Bed Management	Portering
	Infectious Diseases	Maxillofacial Surgery		Palliative Care		Day Services	Housekeeping
	Nephrology	ENT		Haematology		Infection Control	Catering
	Urology	Endocrinology					Stores
		Ophthalmology					Medical Physics/Clinical Engineering
		Neurology					



# Saolta Strategy Outline

# Key Strategic Themes Informing Goals

1. Patient Access
2. Quality & Safety
3. Governance & Integration
4. Staff Support/Development
5. Information, Communication & Technology
6. Education, Research & Innovation
7. Infrastructure



# Thank You.