



# Annual Review 2017



**Ospidéal OL  
UL Hospitals**

Working together, caring for you



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive



William Crowe, Castleconnell, County Limerick, is visited by members of the All-Ireland winning Limerick U-21 hurling team at the Children's Ark UHL in September 2017.

**Front Cover**  
Prof Roy Philip, Consultant Neonatologist and Paediatrician and little Mary McMahon from Kilalloe, County Clare, pictured at the University Maternity Hospital Limerick (UMHL) Prem Party in the Limerick Strand Hotel. The event reunites premature babies with staff from the Neonatal Unit and is part of the annual fundraiser, the 95-Stop Tour for Limerick Kids with Limerick's Live 95FM.

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## Mission Statement

“All of the staff of this hospital group will work together in a respectful, caring and professional way to deliver the best possible patient experience in a safe and clean environment and in the most effective way possible.”



# Chairman's Message



Above  
Graham Knowles,  
Chairman,  
UL Hospitals Group

Whilst challenged across a range of fronts, most visibly our acknowledged under-capacity on our University Hospital Limerick site, the Group continues to outperform across the majority of activity and quality metrics. Group activity overall outstripped target by 5.5% in 2017. These targets have been increasing year on year as we have improved our productivity – they are not a static, constant figure rolling from one year to the next without being increased. Delivering more and better healthcare services within existing resource levels has been a challenge to which the Group continues to respond positively.

The Group has positioned itself well for the future. We are the only Hospital Group in the country that is geographically coterminous with our partner Community Health Organisation. We have worked to transfer lower acuity and elective procedures to our smaller hospitals wherever clinically appropriate. There can be no doubt that without these initiatives, the capacity deficit issues that manifest in unacceptable delays experienced by patients in the Emergency Department would be even

greater. That transfer of activity has also enabled us to be a top or high level performer nationally across a range of areas. Our service configuration reduces the likelihood of cancellation of elective procedures during periods of peak demand, meaning that the waiting times across the group are not increasing in line with the national picture.

In 2017 we opened our new Emergency Department, undoubtedly the most modern and best designed in the country. In and of itself however, this was never presented as the resolution of the issues experienced by patients and faced by staff on a daily basis. We are delighted that the need for additional beds has been accepted and will work to expedite delivery. We were equally pleased to see the inclusion of the transfer of the University Maternity Hospital Limerick to the UHL site in the 10-year plan.

During 2017 we developed a new strategic plan to cover the period 2018 to 2022. This identifies four key strategic priorities. Clinical Transformation building on work to date and further consolidating and redesigning services across our sites and developing models of integrated care with our partners in community and primary care; Digital Health developing our capacity and capability to support patient care; Education, Research and Innovation deepening our relationship and joint work with University of Limerick; Collaboration and Alliances recognising that partnership-based approaches are key to delivering enhanced outcomes. We will actively monitor progress against these priorities and have identified that the key to our success are our people and the culture of the organisation.

It would be remiss of me not to thank our former Chair, Prof Niall O'Higgins, who stepped down during 2017.

We have a largely new Board and will seek to add to it in the coming period. The Board is focused on enhancing further the modern governance infrastructure to support the delivery of high quality health care services. The management team, under the leadership of our CEO, work relentlessly to enhance and improve services and the patient experience. Both clinical and non-clinical staff throughout the organisation show exemplary commitment, dedication and professionalism on a daily basis in often difficult circumstances. On behalf of the Board, I thank each and every one of you. We also have dedicated volunteers throughout the service whose contribution should never be underestimated and is greatly appreciated.

The coming period, in terms of national policy and its translation locally, promises to be both challenging and exciting. We should look forward to a period of positive improvement in health and healthcare services for our local population.

**“The Board is focused on enhancing further the modern governance infrastructure to support the delivery of high quality health care services. The management team, under the leadership of our CEO, work relentlessly to enhance and improve services and the patient experience.”**

# CEO's Introduction



Above  
Prof Colette Cowan,  
Group CEO,  
UL Hospitals Group

The publication of the Slaintecare Report in May 2017 was a watershed moment and signalled a new consensus approach to how we organise healthcare in this country.

These reforms will have far-reaching consequences on how hospital care is provided in the Mid-West and I was glad, along with Prof Paul Burke, to appear before the Oireachtas Committee on the Future of Healthcare and help shape what is an ambitious vision for a better health service.

That ambition is some way from realisation and, in the meantime, all at UL Hospitals Group have continued to demonstrate their commitment to providing the safe, quality care that is our hallmark.

Demand on our services continued to increase during 2017; both in terms of volume and in higher patient expectations. We strive to meet this demand within the financial envelope available to us and it was encouraging that UL Hospitals remained one of the top-performing groups on waiting list targets.

During the era of austerity, we became accustomed to doing more with less and we continue to apply those lessons. The LEAF (Leading Enhanced Access and Flow) programme was established last year, for example, applying LEAN methodology to improve patient flow.

We welcome the commitment from Government to investing the significant sums required to make Slaintecare a reality. But we must also acknowledge the support we received for a number of major capital

projects during those lean years, not least of which was the new Emergency Department which opened in May 2017. We were scrupulous in our messaging in advance of opening that it could not solve our widely recognised under-capacity. But we can all be proud of delivering for this region Ireland's most advanced ED. It has resulted in a better patient experience and improved outcomes; allowing for earlier diagnostics and treatment of the sickest patients, improved pathways for major trauma/critical care and quicker door-to-needle times for stroke.

The opening of the Charles Centre for Dermatology in 2017 is but one example of the expansion of specialist services in Medicine, allowing for advanced confocal microscopy for melanoma.

Buildings, of course, can only be as good as the people working in them and the Group is fortunate to have professionals as dedicated as our ANP Sheila Ryan, who won the Stone Award, the highest honour that can be conferred in dermatology nursing. Our advanced nurse and midwifery practitioners have been at the forefront of delivering excellence. Over 7,000 patients were seen by RANPs in the ED and in Injury Units last year, an increase of 12%. And we also secured seven new ANP posts.

In addition to new consultant posts filled during the year, the Group put in place 16 extra NCHDs to ensure we have additional staffing at night.

Allied health and social care professionals are essential to our services and, in Fiona Steed, we have appointed a new lead in Health and Social Care to support this dedicated group of professionals.

Administrative staff continue to be supported through

**“There are over 4,000 staff working across our sites and they now operate within and are supported by a clearly defined governance structure.”**

iLEAD and the CEO Scholarship diplomas at UL. And in Operational Services, we continued to insource more of our own cleaning staff.

There are over 4,000 staff working across our sites and they now operate within and are supported by a clearly defined governance structure.

Our Quality and Safety Executive – and its clinical and health and safety committees – strives to ensure our care is safe and of the highest quality. The excellent results of UMHL, published monthly in patient safety statements, are but one illustration of the focus on quality.

Technological advances continue to drive improvement and significant progress was made during 2017 on various eHealth projects such as electronic discharges and the Irish National Orthopaedic Registrar.

Welcome as they are, these advances will fail unless we have the people and the culture to implement them. Through initiatives such as Values in Action (Group), Cultures of Person-Centredness (Croom) and What Matters To You (Ennis) we have a chance to revive those old values of care and compassion that brought us into healthcare in the first place.

And the signs are it is keenly appreciated by those who matter most of all – our patients. In 2017, the first ever National Patient Experience Survey found 8 out of 10 patients in the Group (and 49 out of 50 in Nenagh) rated their overall experience as good or very good. These are excellent results to build on, something I am sure each member of staff looks forward to doing in 2018.

**Prof Colette Cowan,**  
Group CEO, UL Hospitals Group

# General Information

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# About UL Hospitals

UL Hospitals Group is the primary provider of acute hospital services to the approx 385,000 (Census 2016) people who live in the counties of Limerick, Clare and North Tipperary. This does not include those from beyond the Mid-West catchment (north Cork, north Kerry, south Tipperary) who also use our services. The Group is one of the largest employers in the region, employing over 4,000 people from throughout the Mid-West of Ireland.

Services are delivered at six different sites across the three counties.

- University Hospital Limerick (UHL)
- Ennis Hospital (EH)
- Nenagh Hospital (NH)
- Croom Orthopaedic Hospital (CH)
- University Maternity Hospital Limerick (UMHL)
- St John’s Hospital Limerick (Voluntary) (SJHL)

There is one Model 4 hospital (UHL) within UL Hospitals. UHL is one of the eight designated cancer centres in the country and is also a designated 24/7 Primary Percutaneous Coronary Intervention (PPCI) centre for STEMIs and a thrombolysis centre for the management of acute stroke. UHL is the only hospital site that has a full 24/7 emergency service and critical care service.

There are two Model 2 hospitals, Ennis and Nenagh, and one Model 2S (St. John’s Hospital). All three hospitals have being reconfigured to provide service in line with the Small Hospitals Framework published by government in July 2013.

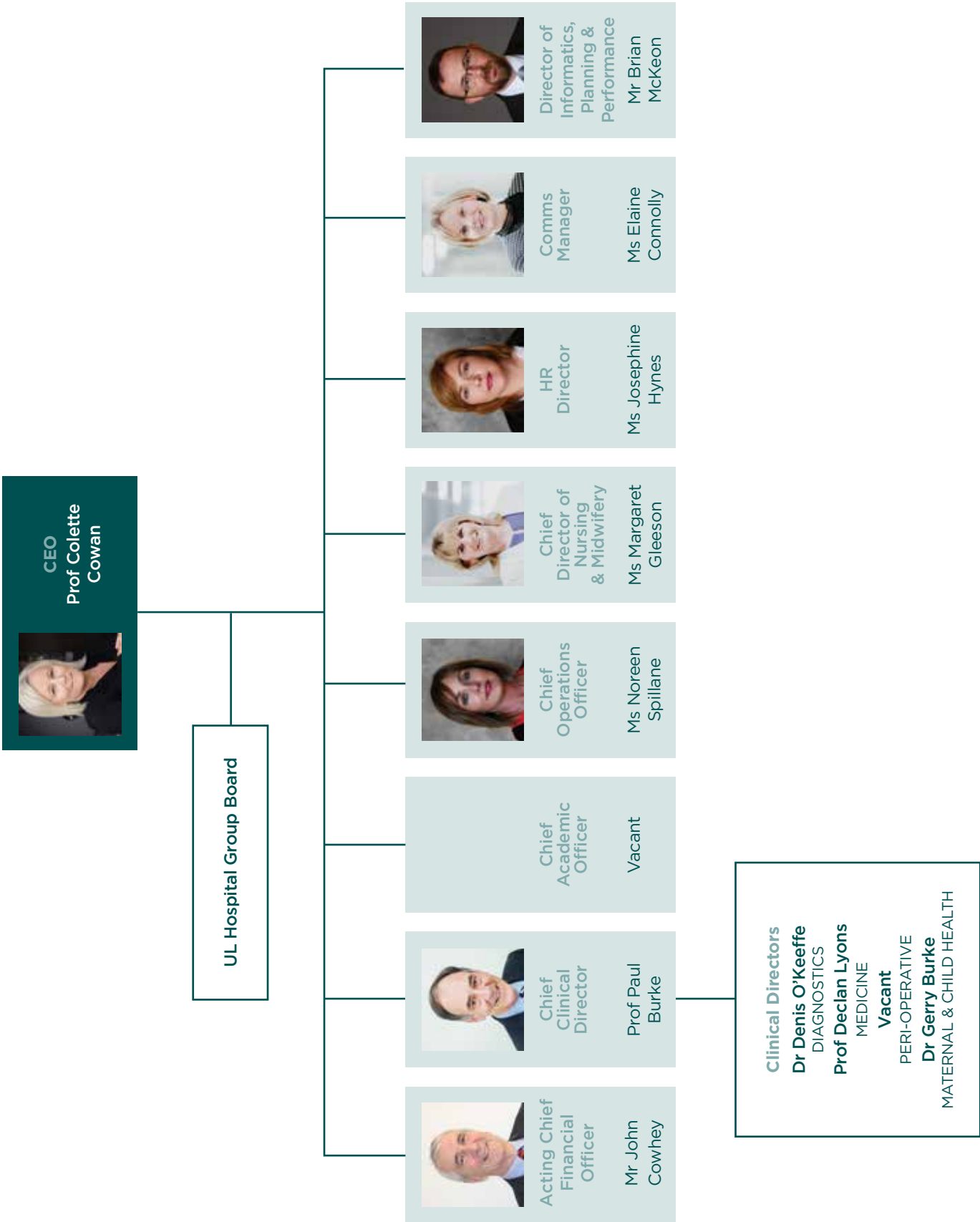
University Maternity Hospital Limerick has

approx 4,500 births a year and has a Level 3 Neonatal Intensive Care Unit. Croom Hospital supports Orthopaedic, Specialist Pain Management and Rheumatology services.

### GOVERNANCE

UL Hospitals is governed by an interim board and an executive management team lead by a CEO who reports to the board. The CEO is also accountable to the National Director Acute Services within the HSE. Delegated authority for the operation of the services is through the National Director Acute Services to the CEO of UL Hospitals.

Our services are delivered across the six sites under the leadership of four clinical directorates, namely: Medicine Directorate; Peri-operative Directorate; Diagnostics Directorate and Maternal and Child Health Directorate. Each directorate is led by a team of staff bringing together clinical management and financial expertise to provide quality-driven safe services, focused on the experience and outcomes for the patient. Their work is supported by the Operational Services Directorate.





THE BOARD OF UL HOSPITALS GROUP

Back row, (L-R) Jim Canny, Alec Gabbett, Dr Mary Gray and Graham Knowles (chairman) and, inset, below, Michael Mulcahy SC and, bottom, Dr Des Fitzgerald.



HOSPITALS

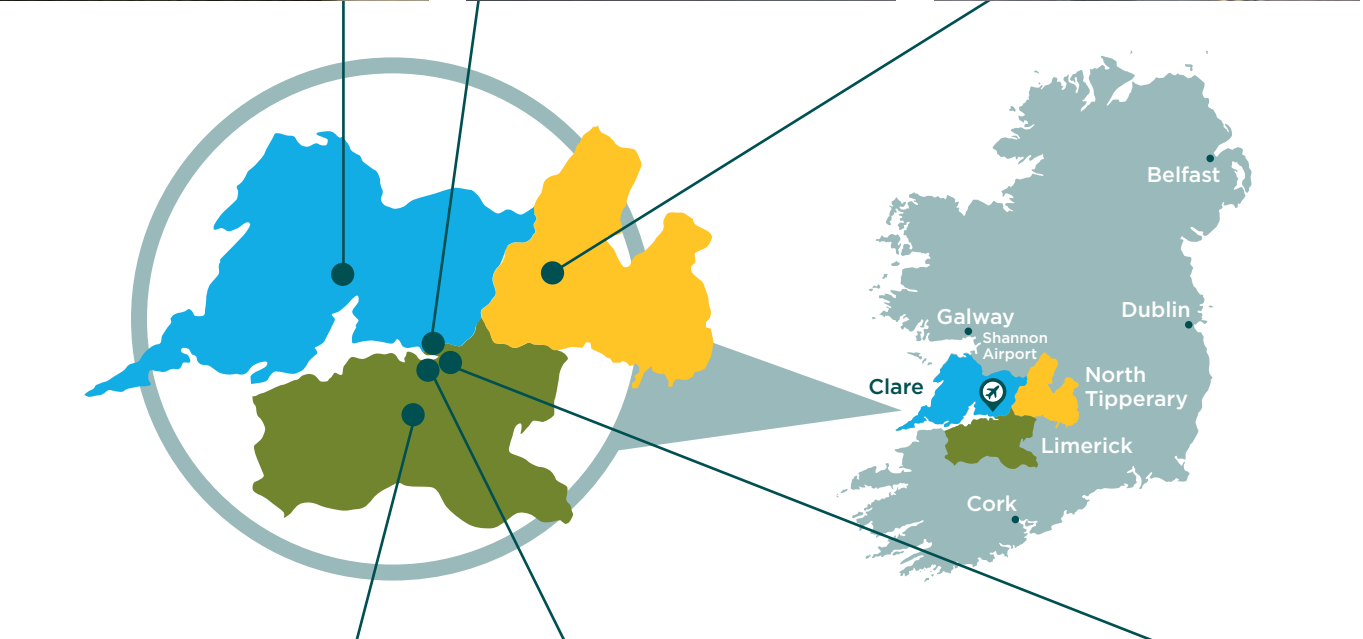
Ennis Hospital



University Maternity Hospital Limerick



Nenagh Hospital



Croom Orthopaedic Hospital



University Hospital Limerick



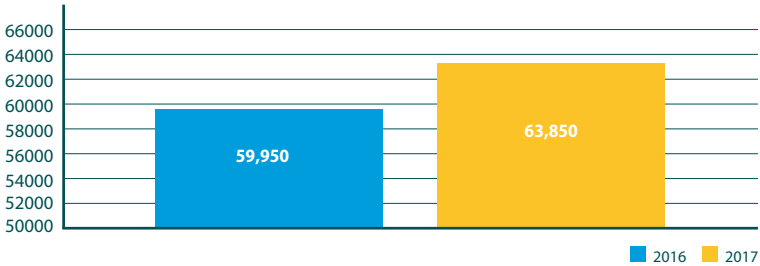
St. John's Hospital



# Activity & Operational Performance 2017

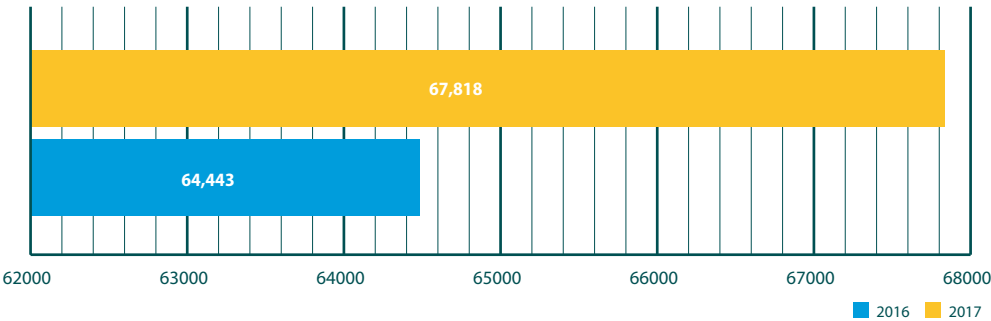
## UNSCHEDULED CARE

New ED Attendances UHL 2016 & 2017



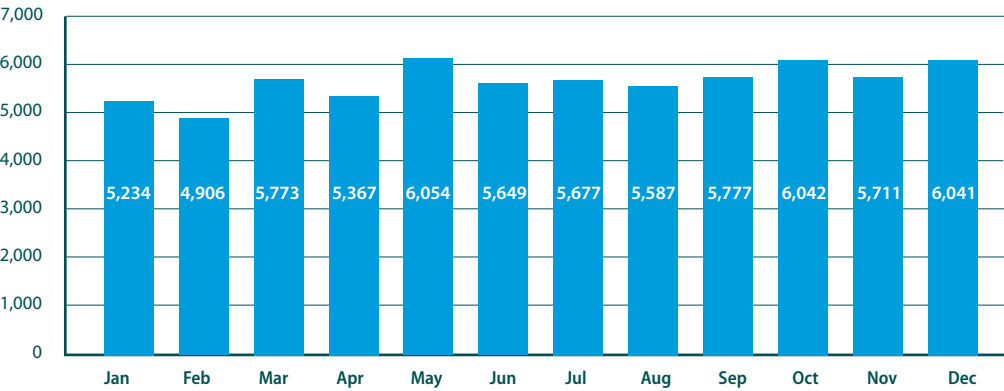
New ED Attendances increased by 6.5% from 2016 to 2017.

Total ED Attendances UHL 2016 & 2017



Total ED Attendances (i.e. New and Return) at University Hospital Limerick have been steadily growing over the last number of years. 2017 saw a presentation increase of over 5% on the previous year.

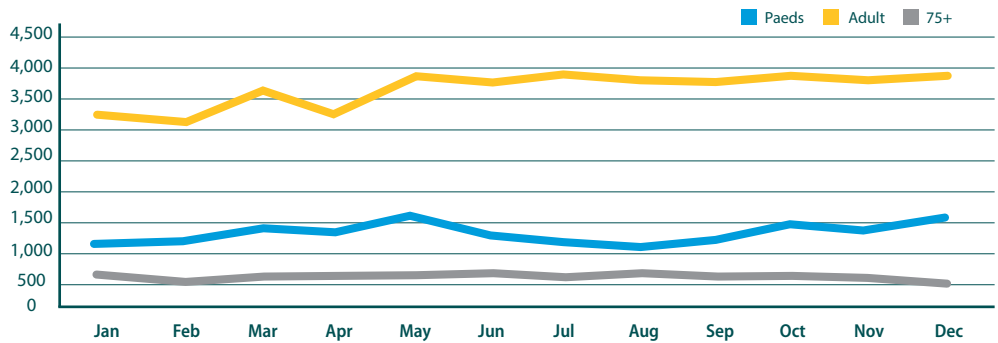
ED Presentations 2017



This graphs shows the monthly breakdown of all ED attendances to UHL throughout 2017.

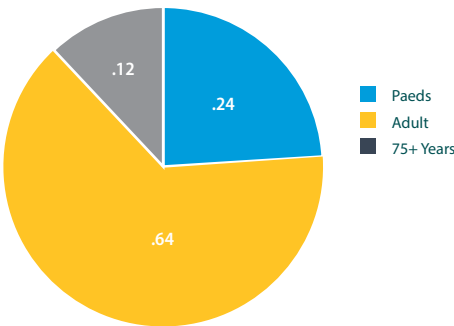
## UNSCHEDULED CARE

ED Attendances UHL by Age Profile 2017

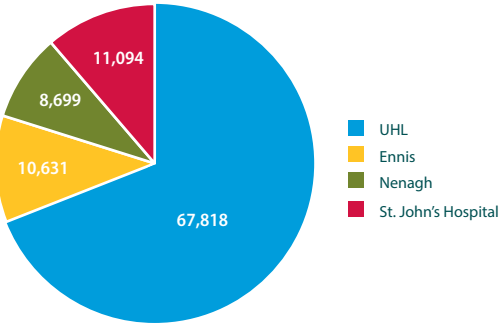


Presentations are broken down by age profile i.e. Children/Minors, Mid-Age/Adults and those aged 75 years and over.

2017 Total % ED Attendances by Age Category

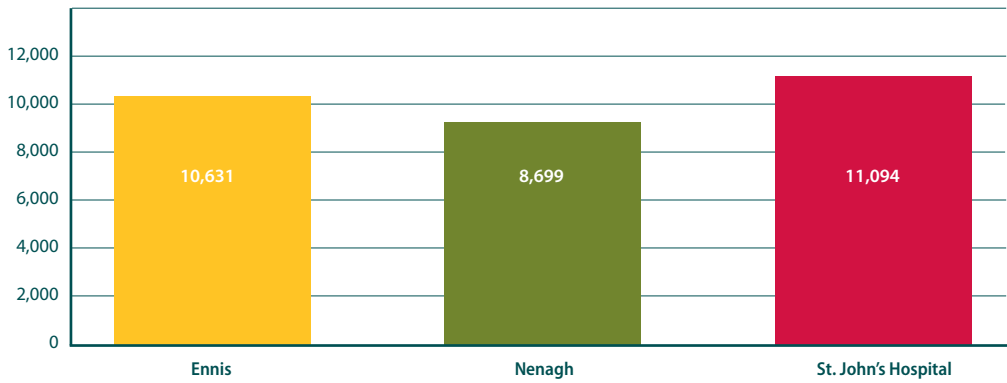


Total ED/IU Attendances YTD Dec 2017



Injury Units account for approximately 31% of all Emergency Presentations across the Group. Attendances throughout 2017 to the IUs grew by 8.3% when compared to 2016.

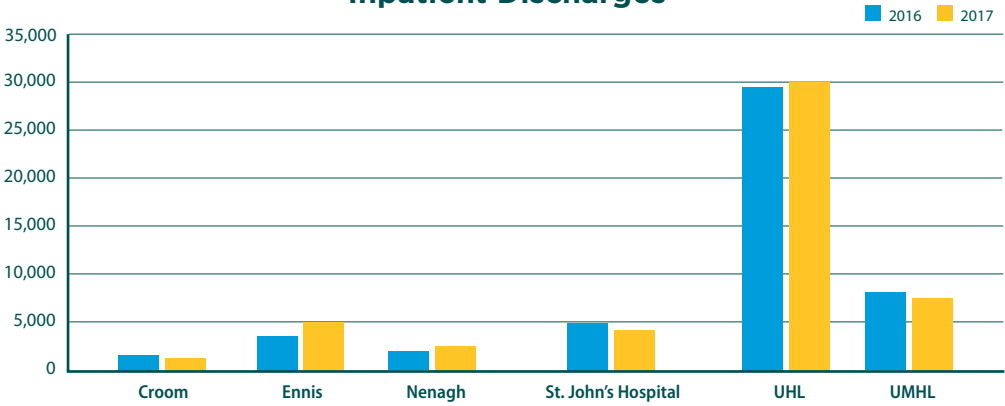
Injury Units 2017



In addition to ED attendances, there was in excess of 30,000 presentations to UL Hospitals Group Injury Units (IUs) throughout 2017. These units are located in Nenagh General, Ennis General and St. John's Hospital, Limerick.

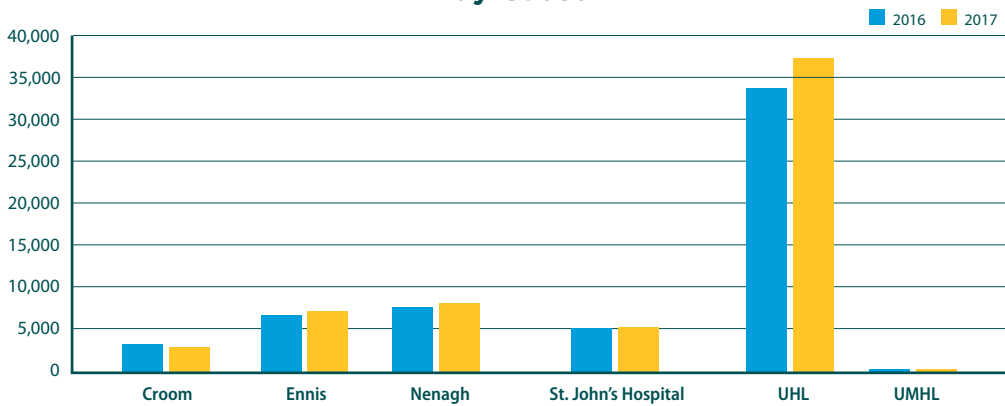
SCHEDULED CARE

Inpatient Discharges



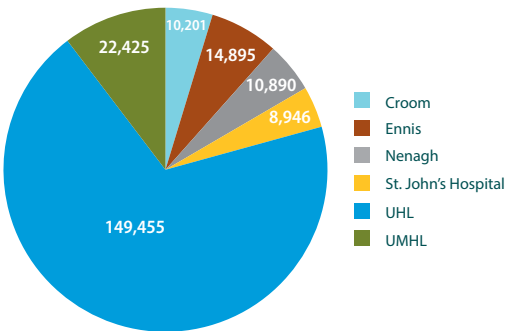
Inpatient discharges across the Group in 2017, with an outturn of nearly 52,300 have increased by 4% when compared to the same period in 2016.

Day Cases



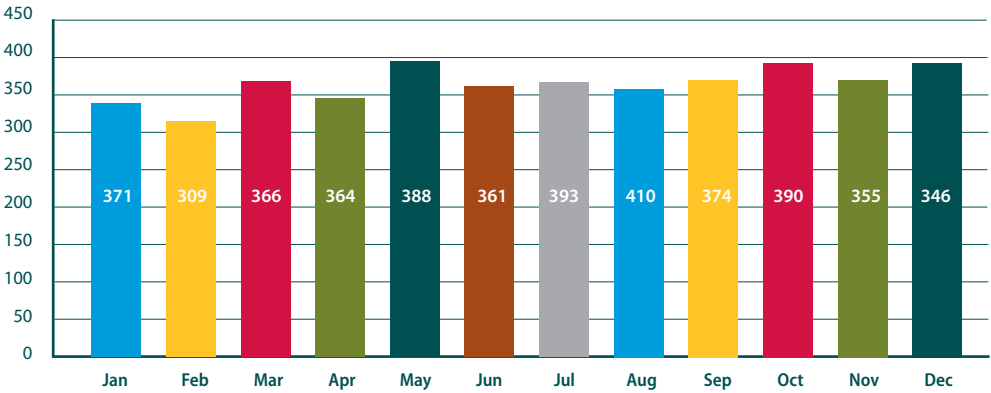
Day case activity in 2017 has also shown a significant growth, an increase of 7.4% when compared to 2016.

OPD Attendances



Outpatient attendances for 2017 across UL Hospitals Group are standing in excess of 216,000.

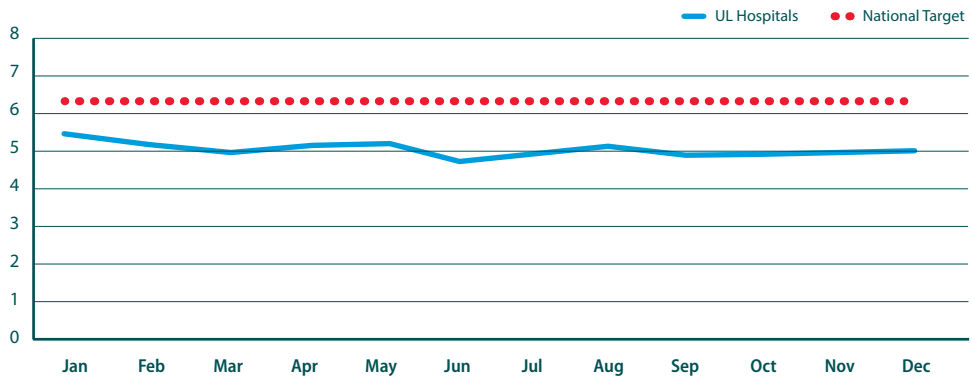
Total Births UMHL 2017



Outside of the main maternity centres in Dublin and Cork, University Maternity Hospital Limerick (UMHL) is one of the busiest sites with over 4,400 births during 2017.

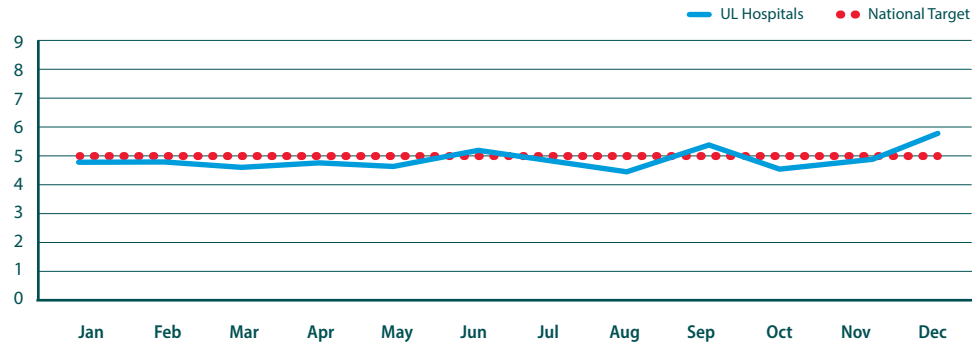
AVERAGE LENGTH OF STAY (ALOS)

Medical ALOS ULHG 2017



UL Hospitals Group consistently remained under the 2017 national benchmark target of 6.3 days for Medical Average Length of Stay (ALOS).

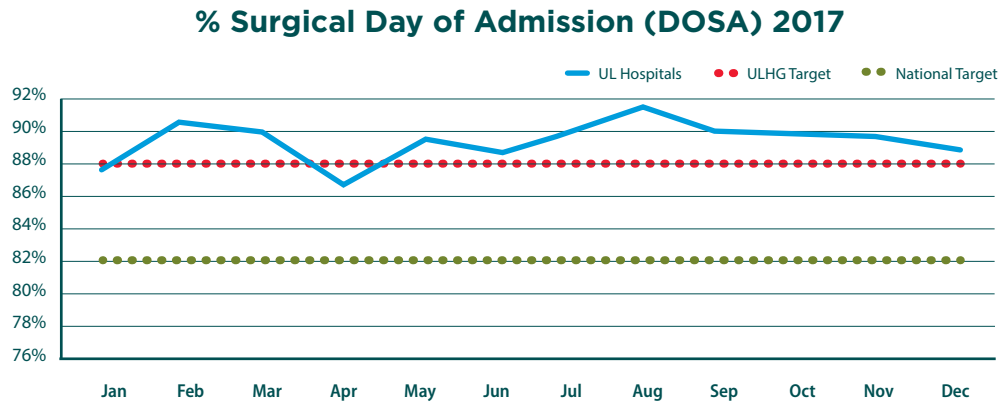
Surgical ALOS ULHG 2017



The 2017 National KPI target for Surgical ALOS is 5 days. Throughout the year, for the most part, ULHG remained below or at this benchmark.

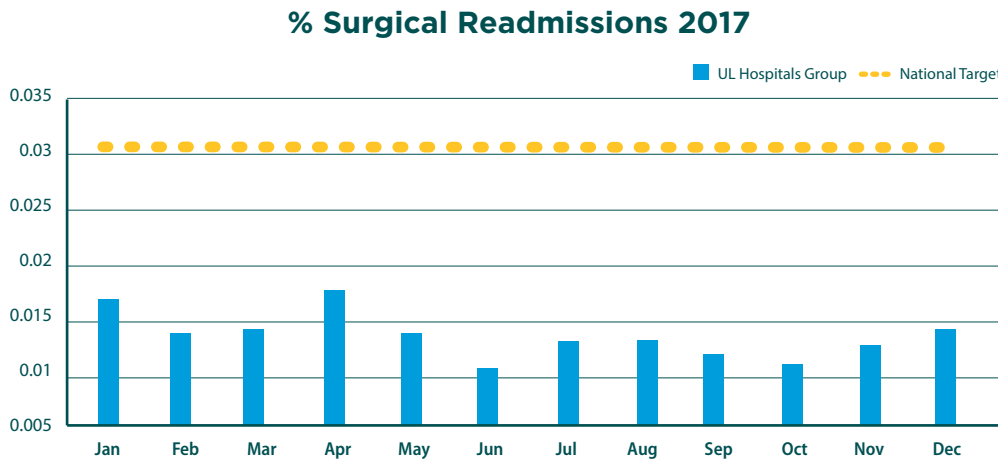
DAY OF SURGERY (DOS)

This graph shows the % of elective surgical inpatients who had their principal procedure conducted on the day of admission. The 2017 National Target of 82% was exceeded throughout the year.

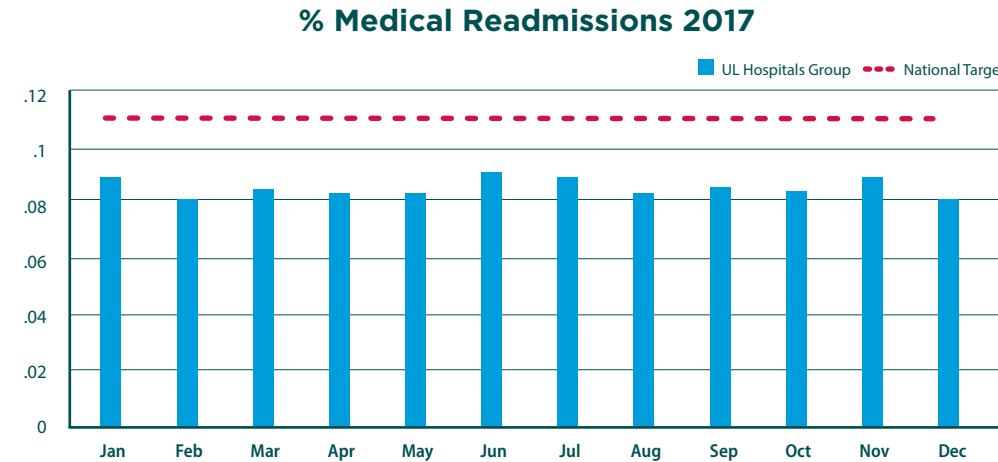


READMISSION RATES

This graph shows the % of Surgical Readmissions to the same hospital within 30 days of discharge. The 2017 National Target is <3%. UL Hospitals Group consistently came in under this target.



This graph shows the % of Emergency Readmissions for acute medical conditions to the same hospital within 30 days of discharge. The 2017 National Target is 11.1%. As can be seen, UL Hospitals Group has come in under this benchmark throughout 2017.



Priorities 2017

At the outset of 2017, UL Hospitals Group established a number of key strategic and service priorities, among them:

- To progress the development of UL Hospitals Group next five-year strategy 2018 – 2022
- To progress an Academic Hub with University of Limerick focusing on all health sciences
- To review Medicine Divisions and agree a new system of medical rotas and equal access
- To improve educational and other supports for NCHDs as part of a strategy to attract and retain professionals at UL Hospitals Group
- To open a new Emergency Department that is aligned to new pathways, improving patient access across the services
- To review Department of Radiology, enhancing workflow across the Group and supporting diagnostic services.
- To review UL Hospitals Group approach to eHealth and enhance our ICT team function underpinned by a clear strategy for eHealth.
- To progress our Perioperative Strategy to include: increasing surgical procedures at Nenagh and Ennis hospitals; developing a national centre for robotic surgery; and progressing the opening of the the Vascular Hybrid Theatre at UHL
- To progress the planning process for major capital development projects including the relocation of University Maternity Hospital Limerick to the UHL site and the development of a 96-bed block at UHL
- To embed the QRPS function across the Group with clear oversight and accountability on all aspects of QRPS
- To agree a clear approach to research at UL Hospitals Group with the University of Limerick and seek Research Board funding and acknowledgement
- To implement the Accountability Framework across the Executive and Directorates in line with national performance requirements
- To deliver on the Pay and Numbers Strategy and manage costs in line with the budget
- To progress the Values In Action project across all MDT to improve culture
- To progress the National Maternity Strategy
- To support and lead out on the LEAF Project at UL Hospitals to improve efficiency



# 2017 At a Glance

## JANUARY

**Data Awards for St John's, Ennis, Nenagh and Croom**  
Minister for Health Simon Harris has congratulated staff at St John's, Ennis, Nenagh and Croom Orthopaedic Hospitals in meeting exacting standards on data quality for their day case and inpatient waiting lists.

The minister was speaking at the National Treatment Purchase Fund (NTPF) Conference in Dublin Castle, where he congratulated teams from 22 hospitals across the country – including four at UL Hospitals Group – in meeting all 23 standards measured under the NTPF's Data Quality Project.

"The Data Quality Project has delivered tangible and sustainable improvements in data completeness, classification and waiting list management processes," said Minister Harris.

"I would like to congratulate the teams at those hospitals for their effort and commitment to improving how waiting lists are managed. I would encourage you all to redouble your efforts, as better waiting list data and management procedures mean that we use hospital resources more effectively and efficiently for the benefit of patients."

## FEBRUARY

**Donation of iPads for Children on Day Ward**  
BRAND new iPads were just what the doctor ordered for young patients at the Children's Ark, UHL, as the paediatric department gratefully accepted a donation from the UL Medical Society.

There was great excitement on the Caterpillar Day Ward as the medical students dispensed the type of tablet kids were least likely to refuse. Staff expressed their gratitude that the donation would help break up the day for young patients attending for services.

"We were able to make this donation through the generous support of everybody who attended or contributed to one of the many fundraising events we held over the last year," said Patrick Moynagh, President, UL MedSoc.

"Many of us are training here in the hospital and we have learned a lot more from the patients here, including on the Children's Ark, than they could ever possibly hope to learn from us," said Mr Moynagh.

## MARCH

**Strides For Life programme at UHL**  
The Midwestern Cancer Information and Support Centre at UHL has commenced its 'Strides for Life' Programme for walkers for 2017.

'Strides for Life' is a 16-week walking programme developed by the Irish Cancer Society for cancer survivors.

To date, 10 cancer survivors from across the Midwest have signed up to take part in the 'Strides for Life' programme in Limerick for 2017. The Programme was developed specifically by the Irish Cancer Society for cancer support services around the country.

'Strides for Life' brings participants through a structured walking programme, gradually increasing fitness levels over its course.

The programme aims to bring the individual to a level of fitness where they can help reduce their risk of a recurrence of the cancer and improve their health and quality of life.

## APRIL

**Oak Room at Ennis officially opened**  
A FAMILY room for relatives of patients who are at or near the end of life has enormously improved experiences at Ennis Hospital.

The Oak Room was officially opened this Monday, April 10th, by Dr Michael Harty TD and Colette Cowan, CEO, UL Hospitals Group.

Of the approximately 30,000 deaths in Ireland every year, more than two in five occur in acute hospitals. And UL Hospitals Group is working with the HSE nationally and with partners such as the Irish Hospice Foundation (IHF) to further improve palliative and end-of-life care in its hospitals.

Speaking at the opening, Dr Harty said: "This facility is a very welcome and necessary innovation in the compassionate care for patients and their families when end of life approaches. In a caring society we must recognise that emotional and human caring is as important as the medical and physical caring that we all expect in our medical institutions."

### March

Assembled for the Strides for Life programme were front row (l to r) Pauline O'Doherty, Ciara Mc Namara, Breeda Gleeson, Mary Keane, Meave Kerley, Kaye Waters, and back row (l to r) Catherine Hand (Strides for Life volunteer), Fidelma Hackett (Strides for Life Volunteer and Clinical Nurse Specialist, UHL), Kate Whyte, Michael Phylan, Jim O'Grady, Maria Keane (Manager, Midwestern Cancer Centre), Becky Hand (Strides for Life Volunteer).

### April

Dr Michael Harty TD and Prof Colette Cowan, CEO, UL Hospitals Group, do the honours at the official opening of the Oak Room in Ennis Hospital.



**May**  
Supporting Heart Failure Awareness in Nenagh Hospital were, front row (l-r) Ann Cantwell (Cardiac Rehabilitation Co-Ordinator), Sinead Killeen (Senior Physiotherapist), Dr S. F. Abbas, (Consultant Cardiologist), Jacinta Walsh (CNMII, Heart Failure Support Unit), Kathryn O'Brien (CNS, Heart Failure Support Unit), and back row (l-r) Agnes Carroll, (Admin), Dr Zia (Cardiology Registrar), Dr Hassan (Cardiology SHO), Cathrina Ryan (Operational Director of Nursing).

**June**  
Dr Czara Kennedy is presented with the O'Higgins Medal by Prof Niall O'Higgins, outgoing chairman, UL Hospitals registrar.

**July**  
Staff and students from UL Hospitals and the University of Limerick in Ghana to deliver Pre-Hospital Emergency Care training to local health workers.

**August**  
Aine Fitzgerald, assistant editor of the Limerick Leader presents the Limerick Person of the Month Award to Margaret Hynes and Margaret O'Leary, lactation consultants, UMHL, with Pat Reddan, general manager, Clayton Hotel and Dave O'Hora, Southern Media  
*Photo Credit: Adrian Butler /Limerick Leader*

MAY

**Heart Failure Awareness Event at Nenagh**  
International Heart Failure Awareness Week was marked at Nenagh Hospital with an Information Day for members of the public and staff on Thursday, 4th May.  
  
Over 50 people attended the event and heard first-hand from patients about their experiences in the heart failure clinic and in cardiac rehab.  
  
Nenagh Hospital runs a specialist nurse-led heart failure clinic for outpatients and also runs cardiac rehabilitation classes for around 80 patients per year. There was plenty of information and advice around heart health from specialist nurses, dietitians and physiotherapists during an event that coincided with International Heart Failure Awareness Week.  
  
Patient Peter Thornton, from Nenagh, said: "after nearly three years of heart difficulties, I ensure that I attend regular clinics here in OPD in Nenagh and have never cancelled any appointment or failed to fulfil one".



JUNE

**Dr Czara Kennedy Awarded the O'Higgins Medal**  
Dr Czara Kennedy, a native of Adare, County Limerick, and 2017 graduate of the University of Limerick Graduate Entry Medical School (GEMS), has been presented with the O'Higgins Medal at UHL.  
  
The O'Higgins Medal is presented by UL Hospitals Group to the GEMS graduate with the highest mark in their final examinations in the combined subjects of Medicine and Surgery.  
  
The award is sponsored by Professor Niall O'Higgins, the outgoing Chairman of the Board of UL Hospitals Group, who presented the honour to Dr Kennedy ahead of his final board meeting.  
  
"It is a distinct pleasure to present this medal to Dr Czara Kennedy, to congratulate her on this achievement and to wish her great success in her medical career. Promoting scholarship, cherishing students and actively supporting training of specialists are essential components in our mission to develop our hospitals as academic institutions and, in so doing, to improve the care of patients."



JULY

**Friends of Ghana train 80 health workers**  
A TEAM from UL Hospitals Group and the University of Limerick has delivered a programme in Pre-Hospital Emergency Care to 80 health workers in the remote Upper West Region of Ghana.  
  
The programme was one of the first objectives of Friends of Ghana, an NGO formed last year by UL Hospitals Group and its academic partner. Friends of Ghana work with the national health service in the west African nation and with Ghana Medical Help, a Canadian charity founded by UL GEMS student Kelly Hadfield.  
  
"Working with the Ministry of Health in Northern Ghana, we identified the training needs for the region and we were able to have a team from Limerick trained to deliver the programme developed by the Paramedic School in UL," explained Katie Sheehan, Assistant Director of Nursing, Croom Orthopaedic Hospital.  
  
"With the assistance of Ghana Medical Help, we trained 24 staff from eight hospitals and 56 nurses from the CHPS (Community-Based Health and Planning Services) facilities in the region"



AUGUST

**Limerick Person of the Month Award for Lactation Consultants**  
Congratulations to our two lactation consultants, Margaret Hynes and Margaret O'Leary at UMHL on being named Limerick Persons of the Month for August 2017.  
  
The awards are sponsored every month by the Limerick Leader, Southern Media and the Clayton Hotel.  
  
'The Two Margarets' were nominated for tireless advocacy of breastfeeding, helping thousands of mums in the MidWest to nurse, and were added to the shortlist for Limerick Person of the Year 2017. Past winners include Paul O'Connell & JP McManus.  
  
The nomination arose from positive patient feedback from numerous women in the MidWest who had been advised and encouraged by these dedicated professionals.





November

Deputy Jan O'Sullivan with members of An Garda Síochána and staff of UL Hospitals and partner agencies working with the victims of domestic violence mark 16 Days of Action on Violence Against Women.

December

Members of the catering team at Croom Orthopaedic Hospital with nursing staff and Rachel Flynn, HIQA, promoting the National Patient Experience Survey 2017. Croom scored higher than the national average on quality of food, choice of food, assistance in eating and replacement meals.

**September**  
Minister of State Catherine Byrne, second from right, with Margaret Quigley, Director of Midwifery, UL Hospitals Group; Dr Gerry Burke, Clinical Director, Maternal and Child Health, UL Hospitals Group, and Mary O'Brien, Directorate General Manager, Maternal and Child Health, UL Hospitals Group.

**October**  
Seven-year-old Ellie Noone with her poster project at the Model School and, from left, Anne King, first class teacher; Breda McCarthy, senior infants teacher; and Deirdre Murphy, SNA.

09

SEPTEMBER

Minister Catherine Byrne Visits UMHL

Minister of State for Communities and the National Drugs Strategy Catherine Byrne visited University Maternity Hospital Limerick on Friday, September 22nd to discuss the new national drugs strategy 'Reducing Harm, Supporting Recovery 2017-2025' and to hear from staff how they manage issues of drugs and alcohol in pregnancy.

This is part of a series of visits Minister Byrne has been making to larger maternity units around the country. Minister Byrne has responsibility for Health Promotion and the National Drugs Strategy.

Minister Byrne was briefed by Anne Hegarty, Head of Medical Social Work Services, on the work done with mothers and families and by Dr Gerry Burke, Clinical Director, MCHD on activity, services and development plans for UMHL.



10

OCTOBER

Diabetes Education in Primary Schools

SEVEN-YEAR-OLD Miss Ellie Noone from the Ennis Road, Limerick, is proof that with the right supports and education, children with Type 1 diabetes can live life to the full.

Ellie, in turn, has been educating her classmates at the Model School, O'Connell Avenue, on her condition through a collaborative poster project on living with type 1 diabetes mellitus (T1DM).

Speaking at the Model this week, Prof Clodagh O'Gorman, Consultant Paediatrician in Diabetes and Endocrinology, University Hospital Limerick, said: "We work with schools in the region and we organise an annual education session in paediatric diabetes for teachers, delivered by the paediatric multi-disciplinary team. This is aimed at teachers who have children with T1 diabetes in their classroom. Almost 130 teachers attended this year's event. I know that here in The Model School, led by Priomhoide O Murchu, staff have been very supportive of Ellie and her family in managing her diabetes".



11

NOVEMBER

16 Days of Action on Violence Against Women

UL Hospitals staff have joined forces with An Garda Síochána, Adapt House, Clare Haven and Ascend Services as part of the international campaign 16 Days of Action on Violence Against Women.

The campaign links actions in Ireland to global action on violence against women. Violence against women is embedded as one of the UN's Sustainable Development Goals which the international community have signed up to in order to address global problems of poverty and inequality.

As part of the campaign, the Medical Social Work (MSW) Team at UL Hospitals invited staff, partner organisations and members of the public to their annual event.

The MSW team offer a confidential, support and information service to those who are affected by domestic violence across all the UL Hospitals Group. They meet and work with women, children and families who attend our hospitals having experienced or who are at risk of abuse.



12

DECEMBER

First results for National Patient Experience Survey

THE results are in for Ireland's first ever National Patient Experience Survey and the feedback provided by over 1,000 inpatients across the UL Hospitals Group will prove an invaluable driver for improving services.

Within the Group as a whole, 84% of patients said they had a good (29%) or very good (55%) overall experience while in hospital, corresponding exactly to the national average. In Nenagh Hospital 98% of patients rated their experience as good or very good; as did 94% in Ennis Hospital, 93% in Croom Orthopaedic Hospital, 92% in St John's Hospital and 79% in University Hospital Limerick.

The NPE Survey asked every patient who had spent at least one night in an acute hospital during May 2017 for their feedback through 61 detailed questions and UL Hospitals achieved an excellent response rate of 52%, well above the target of 40%.





# Executive Team

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# Chief Clinical Director



Above  
Prof Paul Burke,  
Chief Clinical Director  
UL Hospitals Group

I am extremely proud of the professionalism, dedication and commitment demonstrated by all our staff throughout 2017, as they strived to deliver high quality care to all our patients. This has been a huge challenge for our hospital which is now recognised as one of the busiest in the country, but still lags behind others in terms of infrastructural support and capacity.

## ACHIEVEMENTS

The new Clinical Education and Research Centre (CERC) came into full use in 2017. This has been a milestone achievement for University Hospital Limerick (UHL) in collaboration with the University of Limerick (UL) and the Graduate Entry Medical School (GEMS). It heralds in a new era of opportunity for all medical, nursing and allied health professionals working in the region, as well as giving our GEMS medical students a wonderful home on the hospital campus.

The opening of our new Emergency Department (ED) on 29th May is a wonderful achievement for all those who worked so hard to bring it about. We are very proud to be able to offer care to patients in this state-of-the-art facility. Our ED is now one of the busiest in the country with a 9.9% increase in attendances compared to the same period last year which is well above the national average.

The new €24 million ED, includes cutting edge diagnostics such as a unique track-mounted CT scanner, resuscitation suites, dedicated triage and isolation rooms and a separate children's area. It has tripled the space available for patient care and improved the patient experience in terms of dignity and privacy. Overcrowding, however, still occurs there, because of insufficient inpatient bed capacity at UHL. I am heartened by the commitment of funding for a new 96 bedded block at UHL, and in the interim during 2017 an additional 16 inpatient beds were opened to support patient care in a more appropriate setting. Other significant infrastructure developments during 2017, such as the development of a new hybrid vascular theatre and the refurbishment of the Nuclear Medicine Department, will also help to provide the appropriate specialist environment that ensures all our patients have access to care at the highest level within their own region.

Increased bed capacity alone will not resolve the overcrowding problem in our hospital, and we must actively engage with all our health partners to optimise the way we deal with patients in the acute hospital setting. Allied to this has been the establishment of a centralised booking system, the Bed Bureau, which guarantees GPs immediate access to the hospital booking system to determine where best to send their patients within the UL Hospitals Group for early or immediate assessment.

The Medical Assessment Units and Injury Units in Ennis, Nenagh and St John's, along with the Medical and Surgical Assessment units at UHL have provided assessment and treatment for over 36,600 patients in 2017 which meant that these patients did not need to attend the ED.



Below  
An education and social event was held in the Clinical Education and Research (CERC) Centre on Wed 6th Sept for Non Consultant Hospital Doctors (NCHDs). Speakers at the event included: Dr Catherine Nix, Group Training Lead Dr Maria Costello NCHD Lead, Prof Paul Burke, Chief Clinical Director and Dr Peter O'Reilly, NCHD Lead.

## Work with NCHDs

Non-Consultant Hospital Doctors (NCHDs) are core to the provision of patient care at UL Hospitals Group and we are proud to have two NCHD Leads who take an active role in the Clinical Director Forum which meets on a weekly basis. I wish to thank Dr Aisling O' Riordain and Dr Michelle Canavan who served in these roles until June, and have now been succeeded by Dr Maria Costello and Dr Peter O'Reilly; who are the voice of NCHDs at the senior clinical management table. Together we have facilitated a number of NCHD events including a Careers Evening and a Health and Wellbeing Evening. There are NCHD representatives on core hospital group committees such as the Drugs and Therapeutics, Resuscitation, Hospital Infection Prevention and Control, Clinical Audit and Quality Improvement committees. Their contribution to the work of these committees is invaluable.



### Keeping General Practitioners informed

I, along with the clinical directors regularly meet our GP representative colleagues to try and develop greater understanding and communication between the acute hospital and primary care physicians. New initiatives such as an Electronic Discharge Summary for widespread use throughout the hospital and developed by our own IT department with huge input from both consultants and NCHDs, is a very significant step forward in improving the quality and timeliness of inpatient discharge information. We hope to develop these systems even further in the coming year.



Earlier this year, a directory of consultants in UL Hospitals Group was produced for GPs and was greatly welcomed. The directory contains useful information on Medical Assessment Units, the Surgical Assessment Unit, Acute Medical Unit and Injury Units across all sites in the Group along with an overview of

e-referrals and an update on the centralised referral management system.

The directory provides a listing of consultants by hospital site, directorate and speciality along with their secretaries' contact details and the details of their outpatient clinics.

We also hosted a GP Study Evening in the new CERC in September. This event was attended by over 80 GPs and the feedback was very positive. I would like to acknowledge the huge work done by the General Manager in the Chief Clinical Director's office Ms Deirdre King de Montano, who has worked closely with our GP colleagues on all these initiatives over the last year.

A regular bulletin is issued to GPs with service updates and information on new developments in the Group.

Finally, I would also like to acknowledge the tremendous support from all my Consultant colleagues throughout the year. I would particularly like to highlight the exceptional leadership shown by my clinical director colleagues, Dr Gerry Burke, Dr Denis O'Keeffe and Prof Declan Lyons. On behalf of UL Hospitals I wish to thank Prof Declan Lyons for his commitment to the Clinical Director post throughout his two year term. I also wish to thank Mr Tony Moloney and Dr Diarmuid Hilton for their services as Associate Clinical Directors in Surgery and Medicine respectively, and hopefully they will come back as Clinical Directors in the future! I also warmly welcome Dr Catherine Peters as the new Clinical Director for Medicine, Dr Nuala O'Connell as Associate Clinical Director in the Diagnostics Directorate and Dr Imcha Mendinaro as Quality Improvement Lead and Associate Clinical Director in Informatics. I wish you all every success in your new roles.

Prof Paul Burke  
Chief Clinical Director, UL Hospitals Group

**Above Left**  
Dr Aoife Leahy and Dr Shahril Hashim, attending NCHD education and social event.

**Above**  
Dr Maeve Skelly, Dr Hilary O'Leary and Dr Matt Kiely attending GP Study Evening.

## Quality & Patient Safety



**Left**  
Quality & Patient Safety Team at UL Hospitals Group  
(l to r) Annette Ridley, Ber Nolan, Anna Farrell, Eleanor Mann, Marie O'Keeffe, Evelyn Canavan, Joanne O'Connor, Eoin Kennedy.

The monitoring of the quality and safety of healthcare is becoming increasingly important internationally and many countries use quality indicators to monitor the performance of their health services and to highlight issues that need further exploration in relation to quality and safety. Quality assessment and quality improvement have become increasingly critical and unless we actually measure the quality and safety of care, we cannot determine if improvements are being made.

UL Hospitals benchmarks its performance against targets or expectations in order to identify where there is room for improvement. The methods used include findings of regulatory inspection, survey of consumer experiences, third-party assessments as well as measurement of safety indicators.

### QUALITY AND SAFETY EXECUTIVE (QUALSEC)

Significant work has been undertaken at UL Hospitals Group during 2017 to embed our governance arrangements and to develop supports for staff. QUALSEC was established in 2016 and met quarterly in 2017.

Through this structure we strive to achieve a comprehensive picture of the quality of care which we provide, ensure a common understanding of same and demonstrate the hospital's accountability on the quality of clinical care delivered. The key clinical and health and safety committees (Level 1) that report to QUALSEC are as follows:



| Clinical                                  | Health & Safety  |
|---|------------------|
| Hospital Infection Prevention and Control | Health & Safety  |
| Drugs & Therapeutics                      | Radiation Safety |
| Clinical Audit                            | Laser Safety     |
| Quality Improvement                       | MRI Safety       |
| Risk                                      |                  |
| Patient Engagement                        |                  |
| Healthcare Records                        |                  |

The Chair of each committee along with the Directorate General Managers report quarterly to QUALSEC. Notable progress has been made in particular in the development of robust governance structures for drugs and therapeutics.

I wish to thank the Directorate Management Teams and Chairpersons of the many committees across the organisation for their expertise and leadership pursuing the goals of high quality safe care with such energy and vision.

Each month, we publish the UL Hospitals Group Safety Indicator report which contains information on 11 metrics under the following headings - health care associated infections, surgery, access, waiting times, colonoscopy/gastrointestinal service and incidents and events. The University Maternity Hospital Limerick also publishes a Maternity Patient Safety Statement. This is one of the key ways in which key performance indicators can have a positive impact for patients and service users, and provides patients and the public with assurance that our hospitals deliver services in an

environment that promotes open disclosure and patient safety. The data generated informs management and assists them in carrying out their role in promoting patient safety and quality improvement. Finally, these metrics also assist as an early warning mechanism for issues that require action.

PATIENT ADVOCACY & LIAISON SERVICE (PALS)

The main aim of PALS is to work to ensure that patients have the best experience possible during their time in hospital.

The PALS team were key drivers of the National Patient Experience Survey at UL Hospitals in 2017. The aim of the survey is to understand the experience of patients, and use this feedback to inform the future developments, planning, design and delivery of improved patient-centered care in Irish hospitals. NPES results are available on [www.patientexperience.ie](http://www.patientexperience.ie) Overall UL Hospitals had the highest response rate and whilst there are many areas for improvement, the results were encouraging. A Quality Improvement Plan is now in place to address the shortcomings identified.

The work of the Health Literacy and Leaflet committees, chaired by PALS Manager, Miriam McCarthy, aims to improve the quality and consistency of patient information.

PALS also completed the 'UL Hospitals Patient and Public Participation Strategy' in 2017, with significant contribution from the Patient Council members.

The PALS volunteer service continues to grow and thrive, notably playing a significant role in the opening of the new ED.

CLINICAL AUDIT

UL Hospitals Executive Management Team remains committed to the development of a sustainable Clinical Audit Programme through the directorate model of governance. Through this we encourage ongoing review of clinical practice, measuring structures, processes and outcomes to make improvements. UL Hospitals also participates in a number of National Clinical Audits:

- Major Trauma Audit (MTA), clinically led by Mr Ashish Lal
- National Intensive Care Audit (ICU Audit), clinically led by Dr John O'Dea
- Irish Hip Fracture Database (IHFD), clinically led by Mr Finbarr Condon
- National Audit of Hospital Mortality, clinically led by Dr John Kennedy
- National Perinatal Epidemiology Centre (NPEC) clinically led by Dr Gerry Burke.
- Irish National Orthopaedic Register (INOR), clinically led by Mr Brian Lenehan

Following the appointment of Dr Imcha Mendinaro as Quality Improvement Lead for the Group, the Quality Improvement Committee was established to promote and advance continuous Quality Improvement (QI) programmes, to develop and deliver an integrated QI program and to support cross-directorate learning which will be introduced in three phases, Awareness, Appreciation & Accountability.



Below  
Jo Moloney, PALS Volunteer, Ennis Hospital.

The University Maternity Hospital Limerick has piloted this methodology and established a number of QI projects during 2017. Over time this will be replicated across the organisation. All staff are encouraged to identify and participate in QI initiatives within the group and the Clinical Audit and QI Conference planned for June 2018 will provide an opportunity to showcase this outstanding work.

# Chief Operations Officer



Above  
Noreen Spillane,  
Chief Operations Officer,  
UL Hospitals Group

UL Hospitals Group faced a number of challenges during 2017 while there were also many highlights to choose from. The directorate structures were further embedded across the Group, in particular the new Operational Services Directorate, which was established in Q4 2015.

During 2018, the focus will be on developing the health and social care professionals' governance arrangements. I am very proud of the care we provide and the high patient satisfaction we achieve, which was evidenced in the Group's results in the first National Patient Experience Survey, carried out in 2017.

## KEY ACHIEVEMENTS

- On May 29th UL Hospitals Group opened a new state-of-the-art Emergency Department in University Hospital Limerick which was on time and within budget. The ED was officially opened by Minister Simon Harris and Minister Michael Noonan on Monday, June 13th. It is Ireland's largest and most advanced ED and spans 3,850 square metres of floor space, over three times the size of the old department. It includes cutting edge diagnostics such as a unique track-mounted 128-slice CT scanner and dedicated triage and isolation rooms. The new department is laid out in pods with individual treatment rooms.

- There are separate areas for major injuries, minor injuries, resuscitation and diagnostics - and a dedicated space for paediatric patients with separate triage, waiting and treatment areas. The opening of the new ED marked a major milestone for UL Hospitals Group.
- The UL Hospitals Group Strategy 2018-2022 was completed in Q4 2017 after an extensive consultation process. The new strategy provides a vision and direction for the group for the next five years.
- UL Hospitals Group was one of the top performers among hospital groups in terms of both adult inpatient/day case and children inpatient waiting lists in 2017
- Nationally, UL Hospitals Group was among the best group performers in terms of the number of patients on outpatient waiting lists in 2017.
- The Leading Enhanced Access and Flow (LEAF/GE) programme was established at UL Hospitals Group to improve patient flow efficiency. A number of operational projects called 'Kaizen' were rolled out. Kaizen I concentrated on improving pre-noon discharges, hospital discharge suite utilisation, split take, e-discharge summaries and whiteboard rounding resulting in bed turn-around time being reduced and pre-noon discharge increasing. Work continues through the continuous improvement group taking forward the successful tests of change. Kaizen II focused on acute medical flow/acute medical unit. Excellent engagement and participation was witnessed from all staff involved in each of the projects.
- The directorate teams celebrated with many winners at the Staff Recognition Awards in January.

Below  
The ED team along with the Executive Management Team on the day of opening.



## SERVICE DEVELOPMENTS

### Unscheduled Care

The winter plan 2016/2017 was updated in conjunction with the MidWest Community HealthCare Organisation in order to plan for the management of the surge in activity experienced in the winter months. Part of the UL Hospitals Group initiative in dealing with emergency department overcrowding was to appoint an Unscheduled Care Lead to work with the Patient Flow teams.



**Above**  
Bed Bureau Team  
Pictured are Ms Mary Hayes, Ms Angela Cullen,  
Ms Stacey Roe and Mr Jim Keogh.  
Missing from photograph are: Julia Walsh,  
Bridget O'Donnell and Caroline Atkinson.

The Unscheduled Care Group continue to meet regularly, with sub-group committees meeting in the interim.

- An initiative as part of the Unscheduled Care project has been launched to help prioritise patients aged over 75 in the ED. Patients are identified on triage and flagged to all team members. Green folders and paper are used to highlight these patients.
- A 17-bedded short-stay medical unit (Ward 1A, previously the old ED Department) opened on September 18th 2017. The ward takes medical patients from the ED and the Acute Medical Assessment Unit (UHL) who require admission with an expected stay of no greater than 48 hours.

**Bed Bureau**

The success of the Bed Bureau continues and plans to expand the service to the Acute Surgical Assessment Unit to allow for increased services in gynaecology and urology service.

**Clinical Education and Research Centre**

- Initial meetings held with the President of the University of Limerick to discuss plans for Academic Sciences as a collaborative with a focus on health informatics and chronic diseases.

**Maternity Development and Design**

- Work is ongoing to progress the re-location of University Maternity Hospital Limerick to the UHL campus, subject to capital funding. The Maternal and Child Health Directorate are working closely with the National Women and Infants Health Programme (NWIHP) to implement the National Maternity Strategy 2016 - 2026.

**Major Emergency Plan**

- Now that the new Emergency Department is open, the Group's Major Emergency Plan is being reviewed to incorporate the new department. A dedicated MEP Lead has been assigned to complete this project.

**2017 New Appointments**

**Paula Cussen - Murphy** – General Manager, Unscheduled Care Lead  
**Helen McCormack** – General Manager, Medicine Directorate  
**John Doyle** – General Manager, Peri-Operative Directorate



# Nursing & Midwifery



Above  
Margaret Gleeson,  
Chief Director of Nursing and Midwifery,  
UL Hospitals Group

As the Chief Director of Nursing and Midwifery at UL Hospitals Group, I would like to take this opportunity to thank all the nurses, midwives and healthcare assistants (HCAs) throughout the Group for their continued commitment to the delivery of safe, quality-driven care to all patients using our services. The cornerstone of the profession is having the patient at the centre of all that we do.

Our key priorities and objectives for 2017 focused on: governance, leadership development, education strategy, quality assurance, workforce planning, workforce stabilisation, development of clinical nurse specialists (CNS)/advanced nurse practitioners (ANPs)/clinical midwifery specialists (CMSs)/advanced midwifery practitioners (AMPs) and engagement with service users with a focus on the Patient Council.

It was another busy, challenging year for the office of the Chief Director of Nursing and Midwifery in the recruitment of nursing, midwifery and HCA staff as we expanded services. We worked with our colleagues in HR to provide nursing staff for the new Emergency Department (ED), the new Dialysis Unit and Ward 1A in University Hospital Limerick. Over 170 nurses and midwives were recruited in 2017. Permanent contracts were offered to all of our new graduates and recruitment of overseas nurses, which was supported

by an adaptation programme, ran locally through the Nurse Practice Development Unit (NPDU).

UL Hospitals Group continued to work with our academic partners, the University of Limerick (UL), in both undergraduate and postgraduate nurse and midwifery education. In 2017, UL increased general nurse training positions by five in order to support future staffing requirements.

Throughout 2017, ULHG Nursing and Midwifery continued to sit on several national working groups, including:

- Health Service Capacity Review
- Taskforce on Staffing and Skill Mix Phase 1, which focused on Medical and Surgical Wards and Phase 2 ED.
- National Acute Quality care Metrics Working Group.
- HSE Framework for Professional Development Plans for Nurses and Midwives.

The National Chief Director of Nursing and Midwifery Forum, working alongside the Chief Nurse Office in the Department of Health, continue to inform and support national policy on nursing and midwifery matters.

Senior nurses and midwives have been supported to represent the UL Hospitals Group at national and international events, fora and conferences throughout the year.

The Senior Nursing and Midwifery Leadership Team governance saw a number of new appointments during 2017.

- Ms Ber Murphy was appointed as Operational Director of Nursing (ODON) for UHL. The ODON is responsible and accountable for the day-to-day operations and service delivery on the UHL site.
- Mr Declan McNamara was appointed as Director of Nursing, Perioperative Directorate.



Below  
Pictured (left to right) Ber Murphy,  
Declan McNamara, Margaret Quigley & Mairead Cowan.

- Ms Margaret Quigley was appointed as Director of Midwifery, UL Hospitals Group. The role of the Director of Midwifery is to provide the leadership necessary to ensure that the UL Hospitals maternity services are high quality, evidence-based, woman-centered and cost-effective.
- Ms Mairead Cowan has been Director of Nursing, Medicine Directorate, since August 2015. She is part of the directorate management team along with the General Manager and Clinical Director and she is responsible for nursing services within the Medicine Directorate.

## STAFF TRAINING & DEVELOPMENT

The National Pilot Programme for ANPs was launched through the Chief Nurse Office in the Department of Health. UL Hospitals Group made a successful application which resulted in seven candidate ANP posts in phase one. These are in rheumatology, acute medicine/ unscheduled care and older persons services.

The ongoing development of CNS/CMS and ANP/AMP roles remains a key priority.

We continue to support nurses and midwives through education and professional development. The Center for Nurses and Midwifery Education (CNME) continued to provide a wide variety of training and education. The Office of Nursing and Midwifery Services Director (ONMSD) and Nurse Midwifery Practice Development Unit (NMPDU) continue to support staff by providing the required funding.

During 2017, an education framework was developed for HCAs which will be rolled out during 2018.

In order to support the new staff in ED a bespoke foundation programme was commenced in January 2017.

The Renal Unit at UHL was approved as a clinical site with Trinity College for postgraduate students to undertake a specialist postgraduate diploma/MSc in renal nursing.



**“We continue to support nurses and midwives through education and professional development. The Center for Nurses and Midwifery Education (CNME) continued to provide a wide variety of training and education.”**

**Above Left**  
Mary Bedding Group Sepsis Lead RCSI Group, Christina Doyle Sepsis Programme Manager, Celine Conroy Group Sepsis Lead Ireland East, Ronan O’Cathasaigh Group Sepsis Lead Saolta Group, Dr. Vida Hamilton National Clinical Lead Sepsis, Yvonne Young Group Sepsis Lead ULHG, Sinead Horgan Group Sepsis Lead South/SouthWest Group, Karn Cliffe Group Sepsis Lead Dublin Midlands Hospital Group.

**Above**  
Group Chief Director of Nursing and Midwifery, Margaret Gleeson, and Nursing Practice Development Co-ordinator, Gerardine Kennedy, and staff at the launch of the new nursing documentation for UL Hospitals Group.

**PATIENT COUNCIL**

The UL Hospitals Group Patient Council is a partnership of community members and hospital personnel committed to improving the patient care experience through the delivery of patient and family centered care.

In 2017, there were five meetings held, rotating across the hospital sites in the UL Hospitals Group. Members represent the voice of the patient and public on the following hospital committees: Nutrition and Hydration, Arts Committee, Signage, Health & Wellbeing; Health Literacy; Paediatric End-of-Life Care; End-of-Life Care in Nenagh Hospital; Clinical Ethics; and various work streams in ED planning including Communication, Patient Flow and Facilities. Members of our Patient Council were also active participants in the ED simulation prior to its opening on May 2017.

The Patient Council is also represented on the National Patient Experience Survey (NPES) working group. Members contributed to the development of the National Patient Experience Survey and one of the members sits on the national oversight group for the NPES, representing the voice of patients. This involvement has been of huge benefit to the survey development and ongoing quality improvement plan development.



**Below**  
Sheila Clarke Bursary winner Anne Ryan with Cathleen Osborne, CNM3 Cancer Services.

**Bottom**  
International Nurses Day 2017.



# Finance

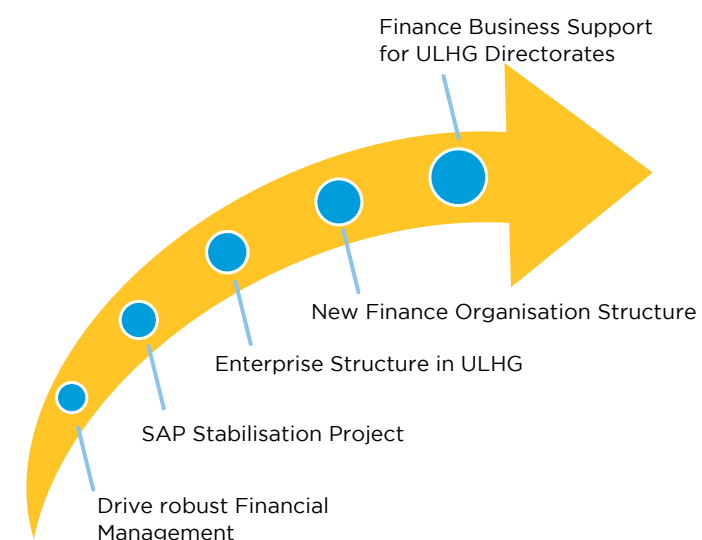


Above  
**John Cowhey**,  
Acting Head of Finance  
UL Hospitals Group

In 2017, UL Hospitals Group reported a gross expenditure, pay and non-pay, at €381.493 million financial spend for the six hospitals in the group. This spend represented a 7% variance in budgeted spend for the group in the fiscal year 2017. Income of €69.89 million was raised for the year.

It was an important year for the ULHG Finance Department, as a number of key strategic projects were delivered and robust financial management processes were enhanced across the group.

## ACHIEVEMENTS IN 2017



**Right**  
Finance Department Staff Finance Department Staff  
Sandra Noonan, Sinead O'Rourke, Mary Shanahan,  
Margaret Woods, David Frawley, Joanne McNamara,  
John Cowhey (Acting Head of Finance) and Tadhg Murnane.

### Drive robust financial management:

- Streamlining of financial accounting and management accounting functions
- Finance support to HSE corporate, executive and senior management teams
- Compliance with National Financial Regulations and legal/ tax obligations, internal audit and C&AG
- Memorandum of compliance with VHI - implementation of Phase II. This is a national agreement between the HSE and the VHI and the UL Hospitals Group is engaged in ensuring compliance with this.

### Sap stabilisation project:

- The purpose of the SAP Stabilisation project was to replace an old legacy system which was no longer fit for purpose.
- Much progress has been made on the SAP Finance and Materials Management system. The SAP system is a major investment by the HSE for the Hospital Group which brings a modern up to date system to the group.
- Key player in driving finance and procurement efficiencies, working in collaboration with Health Business Services and Directorates within the group.
- Monitoring and reporting of SAP material code usage for purchases of goods and services across ULHG, resulting in 80% usage in 2017. This will be of major benefit to budget holders and management as far more detail relating to purchases is now available.

### Enterprise structure in ULHG:

- New cost centre structures implemented to re-align to clinical specialities, which support clinical budget management.
- Standardisation of cost centres on Finance and HR systems rolled out, to enable fully aligned pay and numbers reports by department/cost centre across the UL Hospitals Group. This will enhance the support to the directorates in relation to budget management.

### New finance organisation structure:

Following a period of engagement with finance staff, a new finance structure was proposed and approved by the Hospital Group Executive. The new finance structure is now implemented. The main benefit of this is that staff have clearly defined roles and responsibilities.



This will enhance the streamlining of finance functions and processes which will develop the support to the directorates and Hospital Group Executive.

In conjunction with the development of the Organisation Structure, a significant part of the Finance Department have now relocated to a new off-site office location.

### Finance business support for ULHG Directorates:

- Financial performance monitoring for Medicine, Peri-operative, Diagnostics, Maternal and Child Health and Operational Services Directorates
- Provided finance support for new service development, such as opening of the new Emergency Department and Ward 1A short stay unit

## FOCUS ON PEOPLE

From a Learning and Development perspective, finance staff completed a number of important training programmes in 2017, including:

- Tax Training
- National Financial Regulations (NFRs)
- Children First Training
- First Time Managers Programme
- HSE Finance Future Leaders Programme
- Customer Service Excellence
- Understanding Conflict
- Advanced Excel Training
- People Management - Legal Framework

### New Appointments

**David Frawley** - General Manager, Finance  
**Joanne McNamara** - A/General Manager, Finance  
**William Collins** - Staff Officer, Direct Payments  
**Anne Marie O'Donnell** - Grade IV, Direct Payments  
**Melanie Meade** - Staff Officer, Accounts Payable/ Payroll



# Human Resources



Above  
Josephine Hynes,  
Group HR Director,  
UL Hospitals Group

### ACTIVITY OVERVIEW

Key goals for the HR Department in 2017 included the additional recruitment of approximately 200 staff, 100 of whom were to support the opening of the new Emergency Department (ED) at University Hospital Limerick (UHL). Another key success for HR in 2017 was the further development of our staff through internal and external training opportunities. The number of staff now undertaking academic training at the University of Limerick (UL) increased from five in 2016 to 10 in 2017. We also strengthened our links with our academic partners through the involvement in various research projects.

### ACHIEVEMENTS

#### Employment Control Framework

The Pay and Numbers Strategy is a key component of the HSE Accountability Framework to ensure that we manage our staffing numbers and remain within funded targets. Tight and effective employment control processes remain in place. These controls cover both the short and long term filling of vacancies that arise and they provide a framework for managing staffing levels in line with our financial resources.

| Staff Category                    | Dec 2016 | Dec 2017 |
|-----------------------------------|----------|----------|
| Medical/Dental                    | 474      | 504      |
| Nursing                           | 1439     | 1559     |
| Health & Social Care Professional | 366      | 388      |
| Management/Admin                  | 602      | 646      |
| General Support Staff             | 264      | 331      |
| Patient & Client Care             | 450      | 547      |
| Total                             | 3595     | 3975     |

“We retained the majority of our nurse graduates in 2017 with the offer of permanent contracts.”

### RECRUITMENT

In 2017 we remained focused on reducing our reliance on agency staff and directly employing staff. The recruitment divisions carried out a significant amount of activity in 2017 along with the additional challenges of recruiting for a new ED. We also saw the recruitment of overseas nursing staff from Croatia, Spain, Portugal and the Philippines in 2017.

| Activity             | 2016 | 2017 |
|----------------------|------|------|
| Advertisements       | 49   | 74   |
| No of hires          | 492  | 793  |
| No of interviews     | 45   | 90   |
| No of interview days | 119  | 111  |
| No of applicants     | 1812 | 963  |

Attendance at recruitment expos in Dublin and Edinburgh formed part of our recruitment planning activity in 2017. To support the recruitment for the new ED and to promote awareness of the Group, we held recruitment open days in Clonmel, Cork and Galway, supported by newspaper, radio and billboard advertising as well as social media posts on Twitter.

Below Left  
Recruitment Campaign for the new Emergency Department, UHL

Below  
CEO Sponsored Scholars, pictured with other graduates from the University of Limerick (second row, sixth and seventh from right) Denise Kiely and Assumpta Coyle, BA in Management Practice.



We utilised Shannon Airport and Colbert Station for advertising over the Christmas period in 2017, targeting nurses returning home for the festive season. We retained the majority of our nurse graduates in 2017 with the offer of permanent contracts.

### MEDICAL MANPOWER

Significant work was undertaken in the Medical Manpower division to reduce its reliance on agency staffing in 2017. This had the impact of ensuring an increase in directly recruited staff and, in some specialties where they had been reliant on agency staff, now having a full complement of directly recruited NCHDs.

A number of new consultants joined UL Hospitals in 2017 in the areas of ENT, obstetrics and gynaecology, neonatology, anaesthetics, general medicine, paediatrics and surgery.

Below left  
CEO Sponsored Scholars (left to right)  
Kate Foley, Dip in Management, Aisling  
Guinan, Certificate in HealthCare  
Management, Valerie Enright, Certificate  
in HealthCare Management.



Key areas include recruitment and retention, succession planning and training and education for staff across UL Hospitals.

The Diagnostics Directorate engaged with our HR Business Partner to successfully negotiate the transfer of the Pathology Department from St Johns Hospital to UHL. To comply with Section 21 of the Children and Vulnerable Persons Acts 2012-2016, UL Hospitals Group commenced retrospective Garda vetting of all employees who have not been previously vetted by their employer.

An in-depth analysis of support staff vacancies was conducted. An exercise in relation to development posts was also undertaken to enhance the services in UL Hospitals.

The HR Department also worked closely with our colleagues in the Communications Department to develop promotional material in the form of a video and booklet to support recruitment. It was also a fantastic honour for the recruitment, medical manpower and communications departments to be nominated for a Staff Recognition Award for this work.

### LEARNING & DEVELOPMENT

We conducted a second training needs analysis to identify the learning and development requirements from each area within the hospital group. This work informed the training prospectus for 2016 and ensured the prioritisation of the training resource.

In 2016 we saw the commencement of two new training programmes in conjunction with UL and the Kemmy Business School, in customer service and effective communication. Programmes on recruitment and selection were also developed.

The first six of our staff who were sponsored by our CEO, Colette Cowan to undertake a programme of study in UL, graduated in 2016.

We continue to implement the European Working Time Directive for NCHDs working in UL Hospitals Group. Our EWTD steering committee remained in place in 2017, chaired by the Chief Clinical Director, and our two Groups Lead NCHDs remain members of that committee.

### ABSENTEEISM

Our absenteeism reduced in early 2017 but deteriorated in the latter part of the year. Ongoing training and support for managers remained the focus. A number of HR workshops for all staff took place on the Managing Attendance Policy.

### EMPLOYEE RELATIONS

It was a busy year in relation to engagement with unions, both directly and under the auspices of the WRC, to introduce changes in some areas. Our discussions and negotiations continued under the various public service agreement principles.

In Q1 2017 engagement continued with unions to around the new ED.

The Employee Relations team continued to engage with unions on a number of individual and collective issues throughout the year covering various topics including developments and innovations.

## Health & Wellbeing

Below  
5K team 2017, Nenagh Hospital.

### ACHIEVEMENTS

National Workplace Wellbeing Day was celebrated and acknowledged on all sites in April 2017 with Croom Orthopaedic Hospital going to very creative lengths to encourage physical activity amongst staff during the working day.

June 2017 saw the first collaboration with the Health and Wellbeing Division of the Mid West Community Healthcare Organisation (CHO) on a large-scale physical activity event for staff and their families. The Summer Games took place on the UL campus and the activities on offer included: a 5km riverbank walk, 5-a-side soccer, tag rugby, tug of war, cricket demonstrations, large variety of children's entertainment and games from Limerick Sports Partnership coaches. This event was very well attended and feedback from staff will inform the changes and additions to subsequent offerings.

Further integration was displayed in September 2017 when the 2017/2018 flu vaccine campaign for the group was jointly launched in the CERC auditorium between the UL Hospitals Group and the Mid-West CHO. This event was endorsed by both the Chief Executive Officer of UL Hospitals and the Chief Officer of the CHO and supported the first viewings of a flu vaccine video campaign which featured staff from across the group and community healthcare.

The UL Hospitals annual 5km run has now become a feature on the summer athletics calendar for Limerick and entries from the local population of Raheen and Dooradoyle are growing every year. The 2017 run had over 200 participants and raised almost €3,000 for the Friends of Ghana, UL Hospitals Group charity. The staff of Nenagh Hospital took part in a training programme for the 5km, which was organised by the physiotherapy



department and Nenagh Hospital hosted its own 5km timed run to also support the charity.

### SERVICE DEVELOPMENT

The Healthy Ireland steering committee for the Group continues to meet quarterly under the chair of the Chief Director of Nursing and Midwifery. Each hospital in turn presents to the steering committee on updates and issues and the committee has representation from both the local authority and the Mid-West CHO.

The committee of the Sports and Social Club have agreed on a charter, created project plans following a staff survey and expanded their membership in 2017. There is now representation from five hospital sites on the committee. The committee organised another very successful Christmas party in December 2017 which as always was an excellent night for colleague and friends to catch up.



# Academic Activities



The Group Tobacco Free Campus Committee continues to work on redeveloping the policy on tobacco use on all hospital sites and has agreed on supports to assist staff to make a smoking cessation attempt. Healthy Ireland implementation committees in Ennis Hospital and UMHL have held regular meetings and introduced diverse initiatives for staff, including health screening, a staff choir and lunchtime set dancing classes.

Health and Wellbeing continues to input to many quality initiatives with the aim of supporting patients in the self-management and prevention of chronic diseases. These include health literacy, leaflet holders and noticeboard working groups.

Reaching out to the community is an important feature of the Healthy Ireland Implementation plan and the inaugural public lecture series commenced in the CERC auditorium in the winter of 2017. These lectures included topics such as heart disease and mental health and are held monthly on Tuesday evenings.



**Top left**  
National Health and Wellbeing Day 2017, Croom Orthopaedic Hospital, left to right, Caroline McNamara, Rosalie Stack, Katie Sheehan, Sean Guiney, Mary Russell, Anne Fitzpatrick and Laura Tobin.

**Above**  
'Tug-of-War' at the UL Hospitals inaugural Summer Games at the University of Limerick.



**Above**  
Prof Paul Burke  
Interim Chief Academic Officer,  
UL Hospitals Group

UL Hospitals Group is fully committed to establishing a world class Medical and Allied Health Services Academic Centre. This is in line with the Government's initiative to reorganise the public acute system around academic health institutions. The appointment of a Chief Academic Officer (CAO) is critical to formally enabling co-operation and collaboration between UL Hospitals and the University of Limerick (UL), the Group's primary academic partner.

Prof Paul Finucane, our first CAO, retired in Autumn 2016 and the Chief Clinical Director at UL Hospitals Group now fulfils this role. Recruitment for a CAO commenced in 2017 and we look forward a new appointment in 2018.

## CLINICAL EDUCATION AND RESEARCH CENTRE (CERC)

2017 was a historic year for both UL Hospitals and UL with the opening of the CERC, which has transformed the learning experience for healthcare professionals in the Mid-West. It is home to the Graduate Entry Medical School's (GEMS) clinical programme, the Mid-West Intern Network, the Regional Medical Library and the Health Research Institute (HRI).





Leading-edge teaching facilities including advanced audio-visual equipment and 3D projection of robotic surgical procedures from the operating theatres, together with a large clinical area for simulation and research, mean that we now have the capacity to mimic a typical hospital ward or intensive care unit.

I wish to thank Prof Mike Larvin Head of GEMS and Prof Alison Perry, Executive Dean, Faculty of Education and Health Sciences for their relentless commitment and dedication to the completion of the CERC building. I wish them every success in their future careers. I welcome Prof Des Leddin as Head of GEMS along with Prof Rachel Msetfi, Executive Dean, Faculty of Education and Health Sciences and look forward to working closely with them to strengthen even further the strong relationship between UL Hospitals and UL over the coming years.

The CERC building is now a busy and well-loved space with both undergraduate, postgraduate and medical department teaching taking place there every day. The CERC hosted many symposia and meetings throughout 2017 including the Sylvester O'Halloran (in

Below  
Prof Austin Stack coordinated the Health Research Symposium 2017 that brought over 250 delegates to a wonderful exposition of research findings in health sciences at the CERC building in UHL. Pictured at the Symposium were (l to r) Dr Hussain Mahdi, Professor Austin Stack, Professor Cathal Walsh, Mr Brian McKeon & Professor Richard McManus, University of Oxford.

conjunction with UL), the Health Research Symposium and Perinatal Mental Health conference. In addition, the UL Hospital Grand Rounds programme is hosted in the auditorium every Friday as well as weekly journal clubs.

EDUCATION & TRAINING

During 2017, the intake of UL's Graduate-Entry Medical School (GEMS) into their clinical training across years three and four peaked at 130 students. The medical students rotate through the disciplines of Medicine, Surgery, Paediatrics, Obstetrics and Gynaecology and Psychiatry throughout the academic year across most of the UL Hospitals Group sites. The new CERC building has greatly enhanced the student experience, as it is the location for their lectures, tutorials and journal clubs notwithstanding the new study and library facilities in the building.

The relationship between GEMS and UL Hospitals continues to grow stronger. We are the principal clinical training site for students across various health science programmes provided by UL our academic partner. UL supports tutors in all of the clinical disciplines who contribute to both the academic and clinical mission in the UL hospitals network. This relationship has translated into the hospitals having the highest number of interns to date, a majority of whom graduated from UL. The local intern network executive office is based in the CERC building and its excellent team led by Dr Margaret O Connor and Ms Anne Merrigan provides an outstanding teaching and career guidance programme for all the interns.

UL Hospitals continue to work with UL to drive a structured and formalised approach to the healthcare education, research and innovation functions of Group. During 2017, Dr Catherine Nix was appointed Training Lead for UL Hospitals Group and through her office, the ULHG Training Lead Role has developed a high profile

within the organization supported by our NCHD Leads creating created greater focus at ULHG on NCHDs training needs.

RESEARCH & INNOVATION

The HRI UL/UL Hospitals Clinical Research Unit (CRU) took up residence in its new home on the third floor in the Clinical Education Research Centre (CERC) in January 2017.

A wide range of industry sponsored and academic studies /research projects were supported through the CRU in 2017, through collaboration between UL academics and UL Hospitals clinical staff such as:

- Nephrology
- Vascular Surgery
- Colorectal surgery
- Critical care
- Occupational Health

In 2017 the CRU ran a successful educational program consisting of the Foundation series and CASPIR program. CASPIR is the Irish branch of the internationally recognised Critical Appraisal Skills Programme (CASP) and is a collaborative programme between HRI, UL Hospitals Group and the Department of Public Health in the Mid-West co-ordinated through the CRU. Through both the Foundation Series and CASPIR, multiple workshops were delivered by experts from a range of disciplines to help participants use tools developed by CASP, develop critical appraisal skills and put this knowledge into practice. Over 300 participants attended these events during the year and very positive feedback was received.

In 2018 we will complete the basic science research laboratories and recruitment of technical staff to allow them to become operational. This, combined with the



Below  
CRU team (l to r) Maria Ryan, Siobhan Egan, Fiona Leahy, Elaine Conway and Rita Hinchion.

formation of several research groups, will move the UL-UHL collaboration to a new level, and drive both clinical and laboratory based research on the UHL campus.

I would also like to congratulate all our medical, nursing and Allied Health professional colleagues on the outstanding research many of them have carried out throughout the year.

Details of academic achievements may be found at <https://bit.ly/2GJrRxF>

FRIENDS OF GHANA

Friends of Ghana is a project set up between the UL Hospitals Group and UL partnered with Ghana Medical Help to provide Pre-Hospital Emergency Training (PHET) to Community- Based Health Planning and Services (CHPS) regions in Wa, the Upper-West Region of Ghana, Africa.

A PHET program was developed following an exploratory visit to Ghana in 2016 and during 2017 eighty (80) nurses from CHPS facilities and eight doctors from hospitals received training on their CHPS emergency medical kit. Research in relation to training and outcomes is being collated through UL.

Prof Paul Burke  
Chief Clinical Director, UL Hospitals Group

# eHealth Division



Above  
Brian McKeon,  
Director of Informatics, Planning and Performance  
UL Hospitals Group

While the previous year saw the creation of the eHealth Division, the focus in 2017 was consolidation of our core functions and planning for the years to come. Major projects in the group formed the substantial part of our work (ED, LEAF, Unscheduled Care etc.) but it is an integral part of our business to react and handle emergencies when they arise. During the cyber attack and Storm Ophelia, the dedication and diligence of our staff was outstanding. There are few industries that can match healthcare for the ability to stand shoulder to shoulder in the face of a crisis and we were proud to play our part in providing continuity of care for our patients.

Towards the end of 2017, we participated in the development of the UL Hospitals Group Corporate Strategy and in particular Digital Health as one of the four key pillars. There is a recognition of our current maturity and the journey we need to go on, but we are encouraged by the acknowledgement of the potential for digital health to make a real difference to peoples' lives. We look forward to realising that potential over the next five years.

## PLANNING, PERFORMANCE & BUSINESS INFORMATION DEPARTMENT

The Planning, Performance and Business Information (PPBI) Department is charged with supplying a high level of specialist data and technical expertise by facilitating a group view of planning, performance reporting and measurement using information from our business intelligence systems

In 2017 the PPBI Department continued to support our core operational data requirements, but also supported the UL Hospital Group's major initiatives including, Unscheduled Care, LEAF, National Patient Experience Survey and Irish National Orthopaedic Register. Our business intelligence supports service and operational planning, liaising with the Acute Hospital Division, clinical programmes and a number of national bodies.

PPBI also undertook the development and rollout of the eDischarge system. Requested through the groups GP Forum, this system allows doctors in the hospital to record a HIQA standard data set and transmit to the patients GP ICT system immediately on discharge through the HealthLink messaging system. It is in use in a number of specialties throughout the group and in 2017 began sending messages to a small group of pilot GPs. This system was developed in UL Hospitals for the use of the HSE as a whole and it is envisaged that it will move to other HSE sites in 2018.

## ICT DEPARTMENT

The ICT Department's function is to maintain the computer network and all ancillary services and provide a complex platform on which hardware and software solutions may be delivered to its user base.

In 2017 there was a large amount of organisational



Below  
e-discharge team: Brian McKeon, Director of Informatics, Planning and Performance Ms Michelle Rafferty, Cardiac Physiologist; Rob Hamilton, Senior Database Analyst; Audrey Allen, Data Analyst; Mark Ryan, ICT Dept; Jennifer Madden, Business Manager Cardiology Dept and Dr JJ Coughlan, Specialist Registrar Cardiology.

reform in the ICT department. It is a measure of the professionalism of our staff that after years of difficulty and underinvestment, they have embraced this change and are working to create a structure that will deliver a new level of customer service for staff and patients in our group. Operational reform also commenced through systematic audits and quality improvement initiatives to address depreciated ICT assets and identify potential improvements in our infrastructure.

In May the HSE Office of the Chief Information Office and our ICT Department worked tirelessly to prevent the global cyber attack (Wannacry) from entering the health network, rolling out virus patches and upgrading windows on all PCs in the six hospital sites.

Less than two weeks later the new Emergency Department opened and it was one of the largest individual ICT infrastructural projects ever to be undertaken in UL Hospitals, deploying over 80 PCs, 14 workgroup printers, television screens, switches and a clinical-grade wireless network on time for the opening. May also saw the opening of the state of the art Charles Centre for Dermatology in the new Leben building.



**Bottom Left**  
Gerard O'Driscoll, Group Head of ICT; Stephen Culligan, Senior Information Analyst, PPBI Department; Ruth McGuinness, Business Manager, eHealth Division; Brian McKeon, Group Director of Informatics, Planning & Performance; Trina Dooley, Group HIPE Manager.

**Below**  
UHL opening  
Mark Ryan, ICT and Colette Cowan, CEO on the opening day of the ED.

# Communications

Keeping staff, our stakeholders and the public informed of hospital activity and plans is the mainstay of the Communications team.

During 2017 we supported many project leads, to ensure their messages were received and understood. We also developed a range of materials and publications to improve how we share information with staff, stakeholders and the public.

2017 HIGHLIGHTS

The opening of the new ED was a major project for the hospital group and we worked closely with the ED Project Lead to ensure that staff were kept up to date on progress in preparation for the opening. We also worked closely with the Recruitment Team developing a range of collateral to support the recruitment of the nearly 100 new staff members that were needed for the opening.

We continued to support the CEO and Directorate teams with holding quarterly roadshows to improve face-to-face communications between the leadership and staff.

We supported the Sports and Social team with the development of their new logo which helps to give them a unique identity.



There was good progress in planning for the future and we worked to plan for iPMS Version Five, an integrated infection control system and exploratory discussions on the adoption of cloud-based technologies amongst other initiatives.

CLINICAL CODING (HIPE) DEPARTMENT

The HIPE Department provides the clinical coding function across five sites – UHL, Ennis, Nenagh, Croom Orthopaedic and University Maternity Hospital Limerick, coding just under 97,000 inpatient and day case discharges in 2016. HIPE Coders extract relevant medical information from patient charts and translate it in to international ICD-10 codes. Apart from ABF funding, the HIPE data is used locally and nationally for measuring quality, clinical audit, investigation, health technology assessment, policy and research.

A number of posts were appointed in 2017, including the Group HIPE Manager and two group-wide auditing posts. These roles will enable us to increase our clinical coding quality and, most importantly, expand our



engagement with clinical colleagues to help accurately reflect our case complexity. Given the change in staff, the department continually improved their coding level with only six charts uncoded for the deadline in December. This month-on-month improvement means the hospital group doesn't lose out on activity based funding and accurately reports activity figures nationally. A number of quality improvement initiatives were undertaken in 2017, including analysis of stroke coding which led to greater accuracy and a potential for higher level of funding under ABF.



**Above**  
Elaine Connolly  
Communications Manager,  
UL Hospitals Group



**Below**  
Communications Team  
Mike Dwane, Communications Officer; Katrina Quinlan, Values in Action Co-ordinator; Niamh Quinn, Communications Officer; Elaine Connolly, Communications Manager; Mikeala McMahon, Clerical Officer.



In 2017 we produced two editions of InTouch, our staff magazine, which featured many news stories and updates from across the group. We very much thank staff who agreed to feature in the magazines and share their stories.



Anticipating the future needs of our patients and of the group also featured in the work we did throughout 2017. We were delighted to be part of the working group to develop the five-year strategy for the group. We also had an opportunity to work with our national communication colleagues to develop a new Operating Model for a Communications function. This operating model helps to develop a template for how local communications teams should be set up across the acute and community setting. In addition we contributed to the development of Communicating Clearly Guidelines.

Working with our community healthcare and other public service colleagues, we developed a #limericktogethercampaign. The focus during the winter months was to improve awareness around safe driving, taking care of vulnerable neighbours, increasing uptake of the flu vaccination and awareness of the benefits of exercise. We look forward in 2018 to building on this work and further engagement with our colleagues.

We continue to build relationships with the local and national media, responding to queries and sharing with them stories of the great services and people we have in all our hospitals.

The inaugural Summer Games were held in June at the UL Campus and we were delighted to support the organising team.

Developing a new website for the Group is a key priority for the team. Together with a representative from the Patient Council, we engaged with staff and stakeholders through focus groups to get an insight of requirements for our website. During 2018 we will start to build the website in conjunction with our colleagues in the National Digital Team.

We developed our social media presence through our Twitter account, @ulhospitals in 2017 and had over 1500 followers at the end of the year. It continues to grow as a channel for us to communicate and build awareness with key stakeholders.

The launch of the National Patient Experience Survey allowed us as a group to gain a better insight into the patient experience. As part of the NPES working group we raised public awareness of the survey and the results.

Working with the Health and Wellbeing team, we developed solutions to increase the profile and awareness around the flu vaccine in order to achieve our target of 40% staff take up.

**Below**  
Communicating Clearly  
Niamh Quinn pictured with the Communicating Clearly working group at the launch in the Ashling Hotel, Dublin. Pictured are Gemma Murphy, Sheila Caulfield, Niamh Quinn, Sarah Woods, Eamon Keogh, Audrey Lambourn, Front: Ciara McWeeney, Norma Deasy, Lynda Murphy.



Ensuring we keep our public representatives informed by answering their questions and supporting them in their public service role is a key priority for the Communications Team. In 2017 we were delighted to be one of the best performing groups for our response times to parliamentary questions and public representations.

## Values in Action

Value in Action is about actively developing a culture where our values of care, compassion, trust and learning are a visible part of our everyday actions, throughout the health services in the Mid-West.

Throughout 2017, Values in Action has continued to grow. In just over one year following the launch, our champion base across the Mid-West has grown from 161 to 478. That is 478 champions who are making our values a way of life and spreading our nine behaviours.



With Values in Action we have chosen to proactively develop a culture in the Mid-West health services that is something we can all be proud of so that, in the future, in our organisation people are empowered by a culture that delivers better experiences to patients/ services users and creates better working environments for our staff.

In 2017 we identified a group of local leaders from amongst the champion community who are helping to support and mobilise champions in the workplace. These local mobilisers have an informal role in growing the community of champions and play an important part in sustaining the culture change that is already underway.

Our Values in Action champions and mobilisers are creating a bottom-up, grassroots movement that is spreading through their peers and colleagues and leading the culture change by bringing the behaviours that underpin Values in Action to life in our health services.



Below Left  
Results from 12 months Values in  
Action Champion Survey.



Sharing the stories of the behaviours being demonstrated is a unique feature of Values in Action. Through Yammer, Twitter, Health Matters, InTouch, TeamTalk and other channels, we proactively share stories from champions and patients where they see a behaviour being demonstrated and the impact this has on people's experience of the health service.

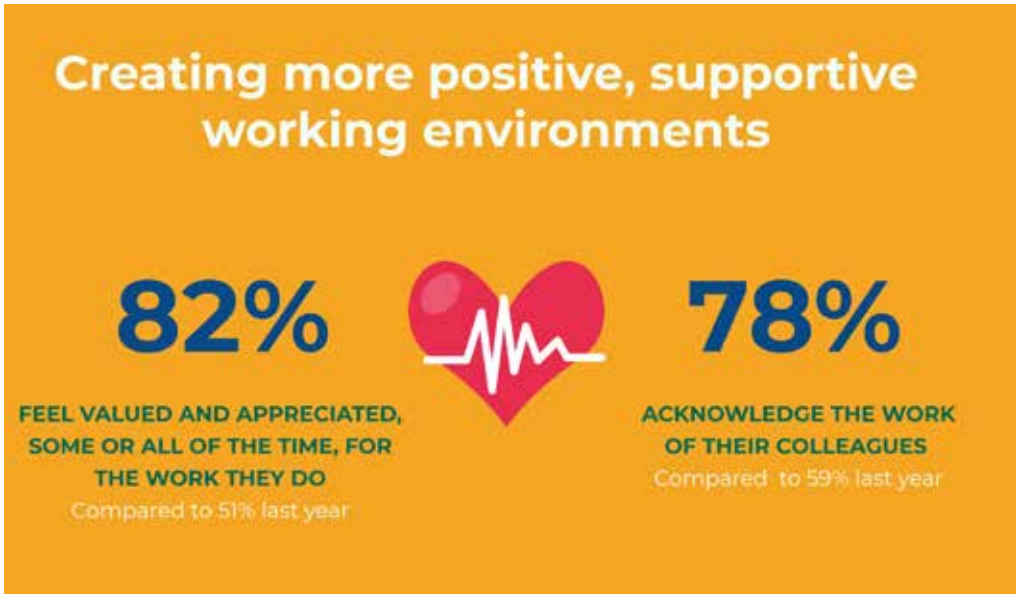
In October 2017, 12 months after Values in Action was launched, we carried out a survey with our champions and results show an awareness and demonstration of the behaviours.

Against the backdrop of the very positive impact demonstrated by Values in Action in the Mid-West, in the UL Hospital Group and in Mid-West Community Healthcare, in 2017 the HSE established a small team to bring Values in Action to other parts of the organisation with the support of the Director General. The aim is to reach and spread the Values in Action message to over 110,000 employees delivering health services to the entire population; improving the health service for our staff and for users of our services.

Find out more at [www.hse.ie/valuesinaction](http://www.hse.ie/valuesinaction) follow the conversation @hsevalues



Below  
Results from 12 months Values in  
Action Champion Survey.



Below  
Values in action, our 9 behaviours



The peer-to-peer engagement taking place through everyday conversation demonstrates that our champions are influencing their peers and creating an environment where our behaviours are becoming commonplace in everyday practices.

As our champions are living the behaviours, others are copying and adopting those behaviours.

Stories of the behaviours are been shared by our champions when they see them.

# Directorates

|                                     |    |
|-------------------------------------|----|
| Medicine Directorate                | 64 |
| Perioperative Directorate           | 72 |
| Maternal & Child Health Directorate | 76 |
| Diagnostics Directorate             | 80 |
| Operational Services Directorate    | 84 |



# Medicine Directorate

The Medicine Directorate has the responsibility for the medical requirements of all patients across UHL, Ennis and Nenagh hospitals. The Directorate is responsible for managing both inpatients and outpatient services, including patients who present to the Emergency Department, UHL; Injury Units and Medical Assessment Units.

The Medicine Directorate is structured around general medicine and specialist services including gastroenterology, cardiology, acute medicine, neurology, emergency medicine, nephrology, respiratory, dermatology, rheumatology, endocrinology, oncology, haematology, palliative care and infectious diseases.

There were significant developments within Medicine in 2017 which have had a positive impact on outcomes, quality, patient experience and performance in line with the service plan. This Directorate has overseen many projects in 2017 including the following:

- The opening of the new Emergency Department.
- The development and opening of a Medical Short Stay Unit (MSSU Ward 1A).
- The rollout in partnership with the CHO of the Early Supported Stroke

Discharge Team.

- Second Cath Lab opened three days per week to address inpatient acute patients and to address the requirements of the national clinical programme.
- International recruitment of Nursing staff for new ED and MSSU. The staff were fully supported with induction and adaption programmes.

## ACHIEVEMENTS

### New Emergency Department

A €24 million state-of-the-art emergency department was opened at University Hospital Limerick in May 2017.

The new ED, which has 49 single treatment rooms for patients offering better isolation facilities and more privacy, is designed to improve patient flow and decrease the amount of time they spend in the department.



It is bright and spacious with different areas set out in pods for major and minor injuries, resuscitation and diagnostics. It also has a separate and dedicated paediatric space.

The opening of the new Emergency Department has significantly enhanced the facilities for any patient presenting to ED at UHL.

### 'What Matters to You' Garden Ennis

Responding to the "What Matters To You" campaign, patients at Ennis Hospital had asked for an outdoor space that they could access where they could sit and where they could go with their visitors. In support of the patients, a group of volunteers from Ennis Hospital took on the task of redeveloping the courtyard garden which was in need of some TLC. The team of volunteers came in on their days off, spruced up the garden and planted new flowers and shrubs. It's now a wonderful safe enclosed space that patients and their families can enjoy. The Burren Garden, "What Matters to You", lead by staff member Joan Ryan was the winner in the Best Patient Experience Category, Staff Awards 2018.



**Left**  
Clinical Nurse Manager 2 Liz Barry seeing the first patient in the new Emergency Department, Slavek Rezvovs from Rhebogoe, Limerick.

**Below**  
Lynne Skrine, second from right, President British Dermatology Nursing Group, presents Sheila Ryan, RANP Dermatology, UL Hospitals, with the Stone Award, with, from left, Dr Bart Ramsay, Consultant Dermatologist; Staff Nurses Aoife Walsh and Margaret Meehan, and Evelyn Power, Clinical Nurse Specialist Unit team in Ennis Hospital.



### Sheila Ryan

Sheila Ryan, Dermatology RANP was awarded the Stone Award in June. The Stone Award is the highest award given by the British Dermatology Nursing Group for contribution to dermatology nursing.

### Best Team

The Medicine Directorate Team were delighted to win "Best Team" for their hard work and dedication at the ULHG Staff Recognition Awards.



Left  
Some of the team from Ward 1A, Sarah Casey, Nora Barry (Medicine Directorate), Aine McCarthy, Bettymol Phillipos, Mairead Walsh, Helen Sheehy, John Conmy and Leeann Flynn.

SERVICE DEVELOPMENTS

Medical Short Stay Unit (MSSU) – Ward 1A

A 17-bedded medical short stay unit opened in September following a successful submission by the Medicine Directorate in the “Dragons Den” competition to secure the vacated ED space. These new beds provide targeted care for those patients requiring brief hospitalisation. Ideally, those patients who are identified on admission to the hospital with an expected length of stay of less than two days are admitted to the ward. This targeted approach and management of these particular patients ensures that there is maximum use of the 17 beds available while also assisting in reducing the number of patients on trolleys in the Emergency Department.

Early Supported Discharge Team

The launch of the early supported discharge (ESD) service allows patients who have had a stroke to be discharged earlier from hospital and continue with rehabilitation and assessment in their own home, under the care of specialist services. The ESD team for stroke consists of a physiotherapist, an occupational therapist and a clinical nurse specialist. They provide a multidisciplinary assessment and therapy, all

incorporated into a rehabilitation plan that is tailored for the patients’ needs.

The ESD Stroke team meets weekly to discuss their patient’s progress and offer support for up to eight weeks while all the time keeping community health organisation services and the clinicians fully informed.

Cardiac Services

Cardiac Services have seen extensive developments in 2017. The partial opening of a second Cardiology Cath Lab in UHL has enabled the designation of a lab specifically for the inpatient workload to ensure that no patient is delayed in getting access to the lab while also ensuring that patients are processed as efficiently as possible.

Digitisation of Cardiology Service: Cardiology has made great strides in e-health advancements in 2017 and the team were nominated for a staff award under the category of Innovation in a Clinical Area. Electronic discharges along with electronic referrals for consults, echoes and stress tests were fully implemented throughout the Cardiology Dept in 2017.

Lifenet System which allows National Ambulance Service to transmit ECGs to Cardiologists on call using iPhone technology was also activated in November 2017.

**Stock Management:** Kanban system for management of stock and SAP Financial System fully implemented in Cardiology for management of non-stock consumables which allows for value improvement, cost saving and management and control of stock.

Endocrine Service

Focus on the development of endocrinology services in the Mid-West has been on-going in 2017.

The National Clinical Programme for Diabetes were invited to UHL in October 2017. A comprehensive presentation on the challenges and key priorities for the service was made by Dr Eoin Noctor.

We were successful in securing 2 additional NCHDs to support the endocrine service in July 2017.

The multidisciplinary diabetic team from ULHG and CHO undertook an extensive two-day training course in November on insulin pump therapy. This course was given by STENO Diabetes Centre Copenhagen and

held in CERC at UHL. All staff completed this essential training without interruption to service delivery. This education programme was supported with funding from Nursing and Midwifery Planning and Development Unit (West)

Cancer Services

**GP Study Evening:** As part of Breast Awareness month in October 2017, a Breast GP Study Evening took place in October in the Leben building. The GP study evening forms part of the ongoing education and engagement by the Symptomatic Breast Unit with the GP community in the MidWest, with the overall aim of developing links with general practitioners to enhance the quality of patient care in the breast unit.

Breast Services

Breast educational sessions with staff at UHL were undertaken by the breast team throughout 2017: breast consultants, clinical nurse specialist, breast radiographers were all involved in breast awareness, family history talks etc.

Breast Services 2017 Fundraising

Ongoing fundraising efforts by patients and families, members of the public and fundraising groups to support and enhance the Breast Service. Fundraising activities include coffee mornings, International Woman’s Day Lunch, cycles, dances etc.

Rapid Access Cancer Services

A local implementation group consisting of three sub-groups for breast, prostate and lung was established in conjunction with the NCCP to implement the recommendations specified by the National Cancer Control Programme. Monthly meetings are held on the third Thursday of each month with a progress report provided to the NCCP thereafter. This continuing collaboration between UHL and the NCCP is designed to reduce our current waiting times and move towards a more accessible service to all patients in the Mid-West Region.

Two Advanced Nurse Practitioners (ANPs) were registered with Nursing and Midwifery Board of Ireland this year – one is for Rapid Access Lung Cancer and the other for Rapid Access Prostate Cancer. A third ANP Oncology was approved and is currently being progressed.

Renal Services

Renal services continued to expand through 2017 with the appointment of key staff and the expansion of key services. A Clinical Nurse Manager 3 was appointed for the renal service along with additional NCHD resources secured to support the inpatients and dialysis caseload. Additional funding to support home therapies equipment and training was also secured.

UHL Ward 1B was designated as a renal inpatient ward. To support ongoing specialist nurse training, the ward has been approved as a postgraduate clinical placement site for renal postgraduate course in Trinity College Dublin. This approval, along with the development of designated renal beds in Ward 1B, will support the ongoing development of nursing and MDT specialist renal skills and expertise.

Advanced Nurse Practitioners

As part of a National ANP demonstrator site pilot initiative led by the Chief Nurse Office DOH, ULHG was successful in securing Candidate ANP posts. In total, seven were secured:-

- Older person x 3
- Acute Medicine x 2
- Rheumatology x 2

The successful candidates have commenced or are in the final stages of their postgraduate education.

Outpatient Parenteral Antimicrobial Therapy (OPAT) Service

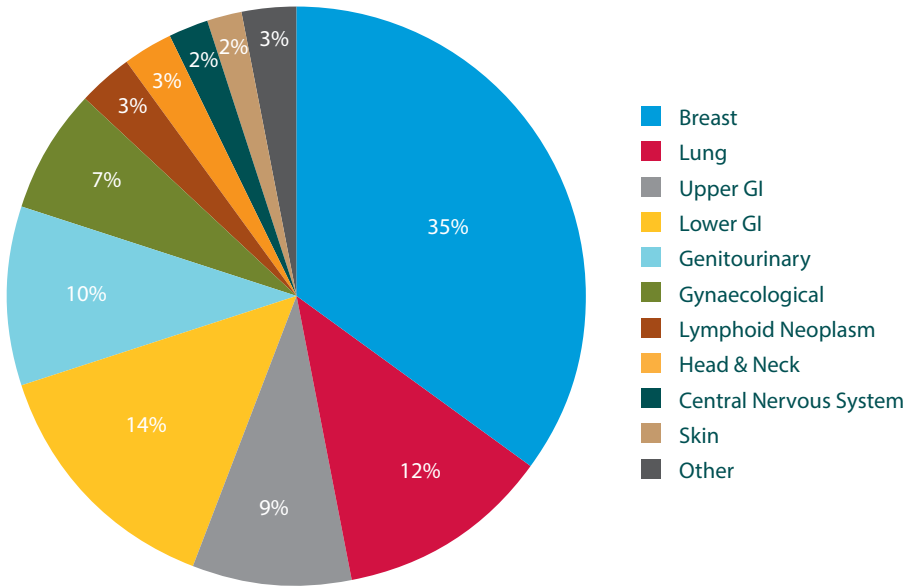
OPAT / Infusion diseases service supports hospital avoidance and reduced lengths of stay in the acute setting. This service was recommenced in early 2017 under the governance of the ID consultant. A Clinical Nurse Manger 2 was appointed to the service in early 2017 and outpatient clinics were established .The numbers receiving OPAT service continues to increase.

NENAGH HOSPITAL

New InPatient Unit: The Refurbishment of Male Medical Ward 1 commenced in 2017 and when completed will comprise:

- Phase 1 – 16 single rooms
- Phase 2 – 4 two-bedded rooms

Distribution of Referrals per Disease Site for Medical Oncology



A robust awareness campaign around the National Patient Experience survey was conducted in Nenagh. Overall, patients’ ratings of their experiences were above the national average. 98% of patients at UL Hospital Nenagh said they had a ‘very good’ or ‘good’ experience, compared with 84% nationally.

ENNIS HOSPITAL

Medical Assesment Unit

Ennis site took over the management of Bed Bureau at weekends. The Bed Bureau is managed at UHL site from Monday to Friday.

Paramedic Training

In mid-2017, paramedic students started attending Medical Assessment Unit in Ennis as part of a practical training module

Heart Failure

A Clinical Nurse Specialist leads the clinic and nurse prescribing service four days a week in Ennis. The CNS works between Ennis and UHL and has developed pathways for patients requiring medical assessment attending service with Professor Peirce.

Gastroenterology

Advanced Nurse Practitioner commenced in 2017. Successful Joint Advisory Group on Gastrointestinal Endoscopy (JAG) re- accreditation audit in January 2017.

Respiratory

Clinical Nurse Specialist recently completed a masters in respiratory. This nurse-led clinic was set up on iPMS

in 2017 to capture activity. Staff education was ongoing throughout the year and a staff education day was held in the canteen. A very successful inhaler education study day and COPD education day with spirometry was also held in 2017.

ACTIVITY 2017

Cancer Services

MidWestern Cancer Centre

- 1,013 patient referrals received in the Department of Medical Oncology.

The above pie chart shows the distribution of referrals per disease site for Medical Oncology. Breast Cancer accounts for 35% of all referrals, 23% of referrals were patients with a gastrointestinal diagnosis and the third largest patient group were patients with a Lung Cancer Diagnosis at 12%.

Breast Services

- 4,730 referrals to the Symptomatic Breast Unit
- 138 new patient clinics
- 172 review patient clinics
- 3, 534 new attendances
- 3,710 return attendances
- 218 cancers treated.

Cardiology Services

- 2209 Elective patients treated
- 1091 Inpatients treated
- 215 STEMI’s and FEMI’s performed



Below  
Pictured here: Josie Dillon CNM3 Cardiology, Brian Carey CNM3 Renal, Breda Fallon A/ Director of Nursing Medicine, Mairead Cowan Director of Nursing Medicine, Patricia Donovan A/ Director of Nursing Medicine, Mary Corry CNM3.



Below  
Pictured in the What Matters to You Garden, Ennis Hospital were Cllr Tom McNamara, Carol Cotter, Jo Crowe, Joe Cassidy, Sheila Mulcair. Sitting: Cllr Ann Norton, Margaret Gleeson, Patricia O’Gorman.

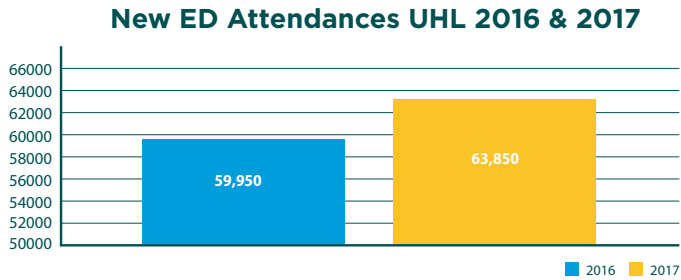


Above  
Administrative staff from Medicine pictured at the launch of their Lenten campaign booklet.

Emergency Department

The numbers of patients presenting at our Emergency Department continued to increase throughout 2017.

The below graph show New ED Attendances in 2017 compared to 2016.



Total ED Attendances (i.e. New and Return) at University Hospital Limerick have been steadily growing over the last number of years. 2017 saw a total presentation increase of over 5% on the previous year.

Nenagh Hospital

- 1,257 in-patients (overnight)
- 12,597 outpatients ( new and review all specialities)
- 8,687 Injury Unit Attendances
- 9,702 Day Ward / Endoscopy
- 2,620 Medical Assessment Unit Attendances
- 1,942 Pre-Op Assessments
- 1,061 Infusion Room Attendances

End of Life

A priority for the Medicine Directorate is providing support to patients and families who are at the final stages of their illnesses.

- Medicine Directorate (UHL) Deaths in Single rooms 71%
- Medicine Directorate attendance at Final Journeys Study Days 72 staff
- Do Not Attempt Cardiopulmonary Resuscitation Policy (DNACPR) launched January 2017, compliance 95%
- The Medicine Directorate committed to refurbishment of end-of-life room in 3A.
- Palliative Care week held 3-9th September 2017
- End-of-life care week held 7-10th November 2017

Compliments and Complaints Management

The Medicine Directorate remains committed to engaging with all service users and welcoming their comments and complaints which helps us to develop and grow.

- 184 complaints closed
- 77 compliments recorded

PEOPLE

Values in Action

A Values in Action Lenten campaign was rolled out in 2017 with all of the admin staff. Weekly meetings were held to discuss each of the nine behaviours and staff were asked to focus on a different behaviour each week. Staff were encouraged to share stories of each behaviour being implemented by themselves or their colleagues. The stories were then compiled into a book of Values in Action at the end of Lent.



Ennis Hospital have been powering ahead with staff engagement around Values in Action. A promotional coffee morning was held in 2017 where an additional 25 staff members signed up as champions. A total of 70 Values in Action champions are currently on site at Ennis Hospital and that number is still growing

Staff have also been promoting Health and Wellbeing at work by engaging in lunchtime activities 4 days a week ranging from set dancing to lunchtime walks and lunchtime swim.

New Appointments

- Ms. Patricia Donovan**, Assistant Director of Nursing  
**Ms. Mary Liston**, Assistant Director of Nursing, Cancer Services  
**Mr. Brian Carey**, CNM3 Renal Service  
**Ms. Josie Dillon**, CNM3 Cardiology  
**Dr. Nemar Osman**, Consultant Oncologist  
**Dr Grzegorz Korpany**, Consultant Oncologist  
**Dr. Sarah O Connell**, Consultant in Infectious Diseases  
**Prof Alan Watts**, Consultant in Emergency Medicine  
**Prof Deirdre McGrath**, Consultant in Respiratory Medicine



# Perioperative Directorate

The Perioperative Directorate is a vibrant, cohesive and motivated clinical directorate which is driven by its own Strategic Plan 2016-2020 and the HSE Strategic Plan 2013-2018. Through its strategy, the Directorate strives to create a safe, streamlined, effective and efficient perioperative service for all of our patients, supported by a culture of innovation, research and education. The Directorate is responsible for managing surgical scheduled and unscheduled care across UL Hospitals Group.

Below  
Robotic Surgery streamed live from Theatre 7, UHL to CERC.



The Directorate Management Team is led by a Clinical Director, General Manager and Director of Nursing. During 2017, the post of Clinical Director remained unfilled. Mr Dermot O'Farrell held the position of Associate Clinical Director and Mr Tony Moloney was also an Associate Clinical Director until June 2017. The service delivery is structured around the patient's experience before, during and after a surgical operation and specialist services include colorectal, breast, vascular, maxillofacial, urology, ophthalmology, gynaecological, otolaryngology, trauma/orthopaedic, emergency, dental, plastics, anaesthetics/pain management and endoscopy. The Directorate is proud to be a designated national cancer centre of excellence for breast and colorectal cancer as well for national screening



programmes for colorectal cancer, prostate cancer, breast cancer and diabetic retinopathy.

## ACHIEVEMENTS

### Ring-fenced beds

The Perioperative Directorate was supported in the ring-fencing of one Neck of Femur bed and one High Dependency Unit bed in December 2017. These protected beds are to permit the fast-tracking of patients to the most appropriate ward and thus ensuring the best possible opportunity for a positive outcome.

### Main theatre refurbishment

Our main theatre complex in the University Hospital Limerick (UHL) was opened in 1998 and consisted of eight main theatres and one dedicated day theatre. Much of the physical infrastructure has remained unchanged. The Directorate commenced refurbishment in the main theatre complex in 2017 and hopes to continue to improve the facilities over the next number of years.

### 360° live-streaming of robotic surgery

UL Hospitals is now using 360° live-streaming of robotic surgery to train doctors and healthcare professionals of the future. In November, over 100



consultant urologists, colorectal surgeons, senior registrars, gynaecologists and health professionals from around the country attended the annual South West Urological Meeting at the Clinical Education Research Centre (CERC), where an inaugural live-stream of a robotic surgical procedure took place. The surgery was carried out by renowned consultant urological surgeon and honorary senior lecturer, Guy's Hospital & King's College London, Mr Ben Challacombe, who was invited to perform this surgery by the UHL team.

360° live streaming will now form part of surgical training and medical education for University of Limerick Graduate Entry Medical School (UL GEMS) and staff from ULHG.

The robotic programme at UL Hospitals Group was further developed in 2017 and is in alignment with the international quality standard of robotic surgery, providing equity of access to all patients. Robotic surgery at ULHG has started to replace keyhole surgery with benefits to the patient of a reduction in blood loss, post-operative length of stay and length of recovery. One year on, over 110 colorectal, adrenal, kidney and other urological cases have been performed. The surgeons involved include Professor J. Calvin Coffey (colorectal surgeon), Mr Subhasis Giri, (urologist) and by Mr Colin Peirce (colorectal surgeon).

Left  
At South West Urology Meeting, CERC, (l to r) Mr Subhasis Giri, Consultant Urologist, UHL; Prof Colette Cowan, CEO; Prof J Calvin Coffey, Foundation Chair of Surgery, UL GEMS, and General and Colorectal Surgeon; and Prof Austin Stack, Consultant Nephrologist, UL Hospitals Group.

Below  
Pictured at the announcement of the refurbishment of the Acute Medical Assessment Unit and Pre-Operative Assessment Unit were (l to r) Margaret McAuliffe, CNM2; Mary Dalton, CNM3; Shona Tormey, Consultant Breast Surgeon; Mr Tony Moloney, Consultant Vascular Surgeon and Associate Clinical Director, Perioperative Directorate; Helen McCormack, General Manager, Perioperative Directorate; Mags Coleman, Consultant Anaesthetist; and Michelle Cooke, CNM2.



UL Hospitals Group acknowledges and thanks the Midwestern Hospitals Development Trust, the JP McManus Benevolent Fund, UL and the UL GEMS for their generous support on this fantastic collaborative project.

The Directorate continues to work towards launching its Hybrid Operating Theatre in UHL with an anticipated commencement date of Q2 2018.

Croom Orthopaedic Hospital National Orthopaedic Register

Work commenced in 2017 at Croom Orthopaedic Hospital with the National Office of Clinical Audit on the roll out of the Irish National Orthopaedic Register (INOR).

INOR is a national electronic register of patients receiving joint replacement (hip and knee) surgery in Ireland. Croom Orthopaedic is the largest site to date and the third hospital in Ireland to introduce the Register.

Acute Surgical Assessment Unit and Perioperative Assessment Unit to relocate

The refurbishment of the old Intensive Care Unit (ICU) at UHL commenced in 2017, with plans advanced to house an expanded Acute Surgical Assessment Unit (ASAU) and Pre-Operative Assessment Unit in line with the Perioperative Strategy 2016-2020 objectives. This plan is built around how we can best optimise patient care through the most efficient use of resources in the UL Hospitals Group. The expanded units will both benefit from increased capacity which will mean that more patients will receive pre-operative assessment, thereby increasing the level of care in the elective pathway.

ACTIVITY

Inpatient activity for 2017 for the Perioperative Directorate is slightly down at 12,206 compared with 12,414 in 2016. During 2017 the Directorate experienced a slightly reduced level of activity. This reduction is directly due to the pressure on available beds for elective non-emergency surgery and the conversion of inpatient procedures to day case procedures. Overall in 2017, the Directorate has seen an increase in day case activity to 23,209 in 2017 compared with 22,616 in 2016.

UL Hospitals Group continues to remain one of the top performers of all hospital groups for the management of outpatient waiting lists. The results are being achieved through collaboration with the Scheduled Care Lead and the Directorate. The Directorate has managed to maintain the national target of 28 days for urgent colonoscopies and has not had a breach in respect of urgent colonoscopies.

PEOPLE

Values in Action

Values in Action commenced in late 2016 in UL Hospitals Group and the Perioperative Directorate has seen a number of champions nominated. The purpose of Values in Action champions in the directorate is to create better workplaces for our staff and to deliver better experiences to those who use our services through cultural change. Our champions have been involved in events to explain the behaviours and the difference they could make for us in our workplace and for our patients and service users. The adoption of this cultural change has brought about many positive impacts to both staff and patients alike.



Open Disclosure training

On the occurrence of adverse events, patients and families sometimes feel that there is a lack of openness and poor communication when something goes wrong. In an effort to best support Open Disclosure, training commenced through the Perioperative Directorate across all health and social care services in relation to the implementation of the National Open Disclosure Policy and Guidelines.

Management of actual and potential aggression

Staff and allied health professionals throughout the Directorate have participated in the Management of Actual and Potential Aggression. The course has enabled participants to recognise the verbal and non-verbal signs which precede an aggressive episode



Decontamination of reusable invasive medical devices

A certificate course for the Central Sterile Service Department on the Decontamination of Reusable Invasive Medical Devices has been undertaken by a number of staff in the Perioperative Directorate to ensure best practice in decontamination.

New Appointments

Mr Declan McNamara, Director of Nursing Perioperative Directorate, took up his permanent post in August 2017. Mr Stephen Ryan, Consultant, Ear Nose and Throat/Head and Neck Surgeon.

Several new consultant appointments progressed during 2017.

Left  
(l to r) Dr Dermot O'Farrell, Associate Clinical Director, Helen McCormack, General Manager , and Declan McNamara, Directorate Nurse Manager, Perioperative Directorate 2017.

Below  
CSSD staff in UHL. Certificates in the decontamination of reusable invasive medical devices were completed by a number of staff through the year.

# Maternal & Child Health Directorate

## ACHIEVEMENTS

- The Directorate developed alliances and collaboration with the National Women and Infants Health Programme for the implementation of the National Maternity Strategy 2016-2026: 'Creating a Better Future Together' and with the National Clinical Programme for Paediatrics and Neonatology for the implementation of the Integrated Paediatric Model of Care
- The Directorate successfully planned and delivered two CTG masterclasses in February and October 2017 and the positive benefit of delivering this ongoing continuous professional

Below  
UL Hospitals Group and Mid West Community Healthcare staff at the successful inaugural Perinatal Mental Health Conference hosted at the CERC UHL in December 2017.



development is evident in the delivery of clinical care. No baby has had a fetal blood scalp sample taken since June 2017. This masterclass is free to all-comers as a public service by ULHG/UMHL to prevent neonatal brain injury.

- The Directorate held a very successful inaugural Conference on Perinatal Mental Health Awareness: 'Bridging the Gap' in December 2017. This conference was held in the CERC building in UHL and attracted national and international speakers. This conference was the foundation stone for sharing best practice as UMHL embarks on securing resources to develop and establish a perinatal mental health service.
- The Directorate Operational Plan was delivered in full for 2017. The commitment and dedication of all staff within the Directorate enabled this to happen.
- There was a successful bid for national funding from Irish Hospice Foundation's Design and Dignity grants to renovate the Rose Room, a private and dignified space for women who receive bad news following an ultrasound scan.
- The paediatric CF team collaborated and participated in the UHL CF therapies training and education video for our PWCF (paediatric and adult), which is available on Youtube.

### Below

Pictured in the refurbished home birthing room at University Maternity Hospital Limerick were Patricia Lenihan, CMM2, Labour Ward; Dr Mark Skehan, Consultant Obstetrician/Gynaecologist; Bernadette Toolan, Clinical Placement Co-ordinator, Midwifery; Helen Coe CMM3, Community Midwifery; Amy Barry, Student Midwife; Joan Fitzgibbon, CMM2 Labour Ward; Mary Bolger, Staff Midwife and Sandra O'Connor, CMM3, Labour Ward/Theatre.

### Below

A still from the educational video featuring members of the Paediatric CF multidisciplinary team.



([www.youtube.com/watch?v=JhJcBTcKOxA](https://www.youtube.com/watch?v=JhJcBTcKOxA))

With regards to innovation, the Paediatric CF team collaborated with UL in designing a bespoke gastrostomy tubing. This work has been accepted and is now published in the BMJ. "The use of 3D Printing to Create a Bespoke Repair of a Percutaneous Endoscopic Gastrostomy (PEG) Tube in a Patient Unfit for Surgical Replacement" (<https://mc.manuscriptcentral.com/bmjinnov>)

- LCI (Lung Clearance Index) testing performed on all patients over three. This is a new type of lung function equipment and UHL is the only centre in Ireland currently offering this service.
- Catherine Byrne, Minister of State for Communities and the National Drugs Strategy, visited UMHL in September in relation to services/programmes offered to expectant mothers with illegal drug or alcohol-related issues during pregnancy. The focus is on this following the launch of the new drugs strategy "Reducing Harm, Supporting Recovery: A health-led response to drug and alcohol use in Ireland 2017-2025"
- Regional Senior Children's Nurse's Network Forum took place in UHL in February 2017



## SERVICE DEVELOPMENTS

- There was a fantastic turnout for a quality event held in UMHL in September, showcasing quality improvement, with 46 posters submitted and displayed in the canteen. A plan for a weekly quality learn and lunch is to be rolled out to Paediatrics.
- Renovation of 'Home from Home' delivery suite with addition of a bath for immersion in labour as form of analgesia for low risk women.
- Establishment of Community Midwifery Advisory Steering Committee to govern the development and introduction of community midwifery service.
- Paediatric Diabetes are exploring the development of virtual clinics
- UMHL commenced Caring Behaviours Assurance System Ireland (CBAS-I) on ward M1 in December as a quality and safety initiative.
- Medication Safety Committee established in 2017 in Paediatrics
- Additional neonatologist started in 2017, consolidating separate rota for neonatology (only the fifth unit in the country)



Below  
Dr Gerry Burke, Clinical Director, with his colleague, Consultant Obstetrician and Gynaecologist, Dr Una Fahy on the occasion of her retirement.

Right  
Staff midwife Jean Rafferty received a special award from National HR Director Rosarii Mannion for her dedication and commitment to women attending the Early Pregnancy Unit.

Far Right  
Master baker Cora Larkin delivered an amazing Bat Cake for the Children's Ark for Halloween. Cora spent 30 hours on this work of art, being admired above by Kris Buckley, play specialist, and Ingrid Tam, Children in Hospital Ireland volunteer and UL GEMS student.

|      | Mothers | Babies | Induction of labour | Lower Segment Caesarean Section | Instrumental Deliveries |
|------|---------|--------|---------------------|---------------------------------|-------------------------|
| 2017 | 4332    | 4425   | 29.8%               | 34.8%                           | 16.9%                   |
| 2016 | 4392    | 4488   | 35.1%               | 34.6%                           | 17.5%                   |
| 2015 | 4619    | 4710   | 32.6%               | 33.7%                           | 16.0%                   |
| 2014 | 4385    | 4443   | 32.9%               | 30.3%                           | 12.7%                   |



ACTIVITY

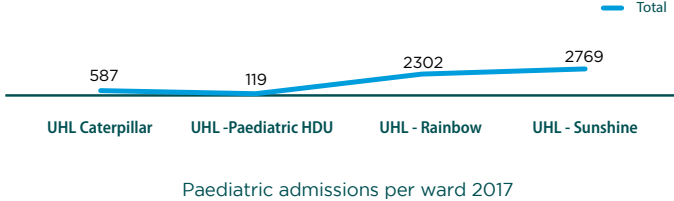
UMHL Activity

- Headline figures: 2016 Adjusted Perinatal Mortality rate: 2.0 per 1000 (the lowest of the country's 19 units); 2016 hypoxic ischaemic encephalopathy requiring therapeutic cooling 0.7 per 1000 (less than half the national rate). Just a 1% decline in births in 2017 compared with 2016.
- UMHL continues to provide excellent access to ultrasound. It is the only large unit providing a routine third trimester scan to detect growth restriction and prevent stillbirth.
- 136 medical students who completed the course at UMHL and 17 new midwives qualified in 2017.

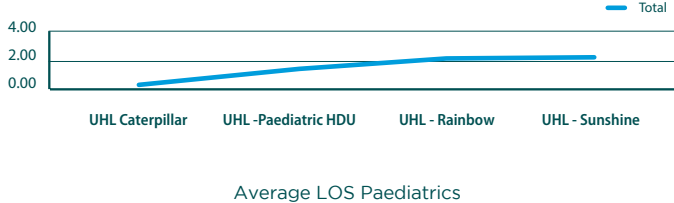
Paediatrics

- From the May 30th 2017, the age profile for paediatrics increased from the eve of 14th birthday to the eve of the 16th birthday. This age increase impacted on the department with approx. 30% of beds occupied by adolescents. Staff have embarked on training and education to support managing this cohort of patients.

Total Admissions per ward 2017



Average Length of Stays 2017



CF Unit

- The home IV therapy OPAT service is managed by the paediatric CF team and includes initiation, training and education, review and attendance for antibiotic level monitoring. In 2017 there were 40 episodes of OPAT care, some patients receiving intravenous antibiotics three times in the year. This service has saved 40 admissions to UHL to receive scheduled IV therapy.
- In 2017, 32 inpatient admissions (ED avoidance) were managed via the CF Day Unit with a total of three admissions via the ED pathway (out of hours).

FOCUS ON PEOPLE

- The Maternity Emergency Unit (MEU) staff were so proud and delighted to share with staff that Jean Rafferty, Staff Midwife, received a Staff Recognition Award following nomination by National Director of Human Resources Rosarii Mannion through the HSE HR communication forum. Jean is so deserving of this award for her dedication and commitment to the women attending the Early Pregnancy Unit. Her kindness, compassion and care has been repeatedly acknowledged by these women, therefore it is fitting that she was recognised nationally as well. Jean attended a presentation of the award in July in Galway.
- Margaret O'Leary, CMS Lactation Consultant and Margaret Hynes, CMS Lactation Consultant were jointly nominated for the Limerick Person of the Month Award for August 2017. This is in recognition

of their support to mothers who are breastfeeding their babies. They were also well deserving of this recognition and attended a presentation in August in Limerick and featured in the local media both on radio and in the newspaper.

- There were great celebrations for staff midwife Sandra Healy as she achieved her PHD in Clinical Nursing Studies. This is a huge accolade for her and a fantastic personal and professional achievement.

New Appointments

**Bernadette Nolan**, Safety Manager  
**Dr Rizwan Khan**, Consultant Neonatologist,  
**Margaret Quigley**, Director of Midwifery  
**Helen Coe** CMM3 Community Midwifery with responsibility for developing community midwifery service  
**Dr Orla Neylon**, Consultant Paediatric Endocrinologist  
**Eimear O'Donovan**, ADON Paediatrics  
**Maria Quirke**, Section Officer

Retirements

**Staff midwife** Linda Geaney  
**Dr Una Fahy**, Consultant Obstetrician & Gynaecologist  
**Staff midwife** Noreen Fitzgibbon  
**Dr Michael Mahony**, Consultant Paediatrician

# Diagnostics Directorate

The Diagnostics Directorate provides diagnostic, therapeutic and pharmacy services across UL Hospitals Group. In addition to the activity set out below, 2017 was also a year where the Directorate laid the foundations for a number of new initiatives and service developments to commence in 2018.

## ACHIEVEMENTS

- Radiology successfully opened two new digital radiography x-ray rooms in the new ED, one of which has a new digital OPG x-ray machine. There is a new digital mobile x-ray machine for the resus patients and a state-of-the-art CT with a sliding gantry which

- can move between the CT room and one of the resus rooms in ED. This eliminates the need to move critically ill patients
- Refurbishment works on the new Nuclear Medicine Department were completed and the department is waiting to be licenced by EPA. The radiography staff were amazingly flexible throughout the building project and went to Tullamore Hospital to scan our patients. This involved many very early starts and late finishing days for the radiographers. A big thank you to Tullamore Radiology Department who enabled this to happen
- St. John's Hospital Laboratory was successfully amalgamated into UHL Laboratory and is the first department within Diagnostics to have a completed integrated service across all six sites within the UL Hospitals Group

Below  
Minister for Health Simon Harris is briefed on the new CT in the Emergency Department by Prof Fergal Cummins, Consultant in Emergency Medicine.



Left  
Peig Hartnett, CNS CF, and Senior Adult CF Physiotherapist Ciara McDonnell in the new gym for CF patients in the Leben Building.

Right  
Pictured at University Hospital Limerick to mark the signing of a new three year service level agreement with Blood Bike Mid West for emergency transport services were, left to right, Brendan Caffrey, Chairman, and David Scullane, Treasurer, Blood Bike Mid West; Prof Colette Cowan, CEO, UL Hospitals Group; Larry Hunt, Operations, Blood Bike Mid West; Mary Donnellan O'Brien, Directorate General Manager, Diagnostics, UL Hospitals Group, and Kevin O'Connell, Pathology Laboratories Manager, UL Hospitals Group.



- UL Hospitals Laboratory launched their Department of Pathology 2017-2021 Strategy
- Medical Social Workers Unit successfully launched the Children First Policy. A number of information sessions were held throughout the year to inform and advise staff on their legal requirement to undertake mandatory training
- UHL Physiotherapy opened a purpose built adult cystic fibrosis gym in the Leben Building and CF services have been extended with the appointment of a Clinical Specialist in adult CF

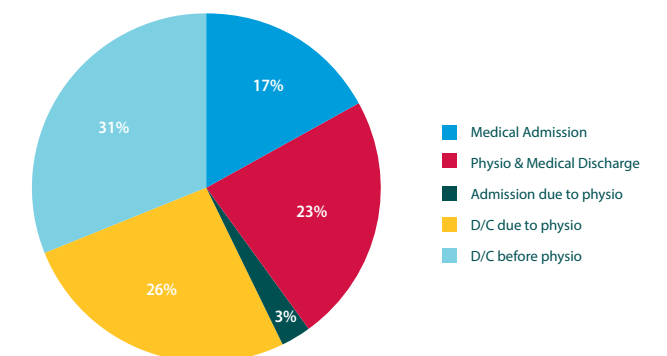
## SERVICE DEVELOPMENT

- There were a number of service developments across the Directorate in 2017:
- A pharmacist-led oral chemotherapy clinic commenced and a new prescription template for prescribing clinical trial medicines in oncology was developed. There was a 12.7% increase in the number of oral doses of parenteral anticancer treatments dispensed.
- Approval was provided for clinical pharmacist services to commence in Paediatrics UHL and Emergency Department UHL. A suite of stewardship initiatives were implemented across the group to enhance appropriate use of antimicrobials. A pharmacist-led project aimed at enhancing quinolone stewardship at UHLG commenced in October 2017. This project will report in quarter 1 2018.
- An Early Intervention Discharge (ESD) Programme was established with occupational therapists and

physiotherapists working as part of a multidisciplinary team to facilitate early discharge home of stroke patients who do not require acute care

- In January 2017 one 45 minute physiotherapy slot was allocated to MAU Monday - Friday. Over the year, 366 physiotherapy referrals were received. The table below details the outcome post physiotherapy assessment in the MAU of those referred to physiotherapy. 26% of those referred and assessed by the physiotherapist were discharged same day from the MAU and an additional 23% of those referred to physiotherapy were discharged the same day as a result of collaborative medical and physiotherapy assessment.

## Outcome Post Physiotherapy Assessment



- The objective of the pilot physiotherapy input to MAU was to examine the impact of a physiotherapist contribution to MAU in diverting from in-patient admission for physiotherapy and complying with the National Acute Medicine



Below  
Last year saw the publication of the  
Department of Pathology Strategic Plan 2017-2021.

Common Screening Tool SOP and Frailty Care Pathway which promotes collaborative working and timely referrals to Health and Social Care Professionals (HSCP) following the initial first contact HSCP screening. Of note, 31% of the overall referrals could not be seen within the one 45 minute physiotherapy slot allocated per day and we are working towards increasing the resource allocation to MAU as a result of the successful pilot.

- A physiotherapy assistant (PA) was appointed in July 2017. In the six-month period July to December 2017 the physiotherapy assistant had 996 inpatient treatment contacts. Of the 996 contacts, 296 of these contacts were to assist the ward physiotherapist with patients that required assistance of more than one therapist. Prior to this appointment, in this scenario the treating physiotherapist would have to request assistance from another ward physiotherapist in turn this would divert time from their inpatient clinical caseload.
- The laboratory server was upgraded in 2017 which allows for a faster turnaround time of the reporting of sample results. A survey conducted following the installation among GPs found a satisfaction rate of 94% amongst a 60% response rate.

## ACTIVITY

| Pharmacy UHL          | % Difference |
|-----------------------|--------------|
| Dispensing            | ↑9%          |
| Medicines Expenditure | ↑11%         |

| Physiotherapy Services: UHL, Croom & Maternity | Total for 2017 |
|--|----------------|
| Referrals                                      | 20,667         |
| Treatments/ Attendances                        | 69,164         |

| Nenagh Physiotherapy Services | 2017 Total | 2016 Total | % Difference |
|-------------------------------|------------|------------|--------------|
| Outpatients                   |            |            |              |
| New Patients                  | 963        | 752        | ↑28%         |
| Contacts                      | 4202       | 3402       | ↑24%         |
| Inpatients                    |            |            |              |
| New Patients                  | 1034       | 703        | ↑47%         |
| Contacts                      | 4448       | 4133       | ↑7.7%        |

| Radiology UHL            | 2017 Total | % Difference |
|--------------------------|------------|--------------|
| ED General X-ray Studies | 39,517     | ↓3.2%        |
| CT                       | 17,360     | ↑10.4%       |
| MRI                      | 4,583      | ↑10%         |
| IR                       | 1,244      | ↑14%         |
| Ultrasound*              | 8,476      | ↓13.2%       |
| Brest Ultrasound         | 3,621      | ↑10%         |
| Mammogram                | 5,670      | ↑6.2%        |
| Theatre 8 Vascular       | 119        | ↑3.4%        |
| Theatre 5 Trauma**       | 1,142      | ↓2.6%        |

\*A waiting list project in 2016 caused a spike in 2016 figures  
\*\* Access at weekends was limited at times

| Radiology Nenagh      | % Difference |
|-----------------------|--------------|
| General X-ray Studies | ↑8%          |
| CT                    | ↑21%         |
| Ultrasound            | ↓9%          |

| Radiology Nenagh services provided to MAU | 2017 Total Difference | 2016 Total | % Difference |
|---|-----------------------|------------|--------------|
| General X-ray Studies                     | 2,449                 | 1,371      | ↑44%         |
| CT  | 459                   | 210        | ↑54%         |
| Ultrasound*                               | 133                   | 125        | ↓6%          |

MAU Radiology activity has consistently increased throughout 2017 across all modalities, with Radiology offering a large percentage of this activity as a same day service

| Laboratory          | 2016 Total Difference | 2017 Total       | % Difference          |
|---------------------|-----------------------|------------------|-----------------------|
| Haematology         | 542,157               | 552,410          | ↑1.1%                 |
| Biochemistry        | 709,906               | 665,291          | ↓6.2%                 |
| Serology            | 55,166                | 53,938           | -2.1%                 |
| Blood Bank          | 33,468                | 33,868           | ↑1.2%                 |
| Microbiology        | 223,760               | 222,357          | 0.01%                 |
| Histopathology      | 21,393                | 22,491           | ↑5.1%                 |
| Ennis Hospital      | 183,837               | 195,835          | ↑6.5%                 |
| Nenagh Hospital     | 18,236                | 23,028           | ↑26.3%                |
| St. John's Hospital | 52,353                | 52,095           | ↓0.5%                 |
| <b>Total</b>        | <b>1,839,276</b>      | <b>1,800,375</b> | <b>(38,501) 2.12%</b> |

## FOCUS ON PEOPLE

The Diagnostics Directorate remain proud of our staff and support them in their professional development goals as well as encouraging all staff members to learn new skills.

- In 2017 a Senior Radiographer based in Nenagh Hospital attained a postgraduate masters in Computed Tomography (CT) from Trinity College Dublin. Nenagh has now a fully trained ultrasonographer
- The Laboratory staff had 15 publications in Peer Review Journals throughout 2017
- The Physiotherapy staff in UHL have undertaken 15 research projects and presented their work throughout 2017
- The Microbiology Laboratory facilitated six staff members in pursuit of their MSc. Three members of staff were conferred with their MSc. in 2017
- One Senior Podiatrist successfully gained a BA in Management Practice
- Continued links with UL to enhance and increase the intake of BSc and MSc physiotherapy students across all sites and
- UHL Physiotherapy delivered and number of training courses in relation to physiotherapy and physiotherapy techniques



- UHL Physiotherapy held an information session to promote physiotherapy as a career in collaboration with UL, attended by 150 transition year students
- UHL Physiotherapy Team partook in "A Guna for Ghana" Fundraising Event with Cake Sale raising €1,600 to support a Physiotherapist who travelled with the UL ULHG Team to Ghana

## New Appointments

2017 saw the new appointment of Ms Fiona Steed as Group wide Allied Health Manager whose remit includes speech and language therapy, occupational therapy, physiotherapy, podiatry, clinical nutrition and dietetics and medical social workers.

Other positions appointed across the Directorate to fill vacant posts included:

- 1 Radiology Nurse
- 4 Radiographers
- 1 Speech and Language Therapists
- 0.5 Occupational Therapists for Early Supportive Discharge Programme
- 1 Physiotherapist for Early Supportive Discharge Programme
- 1 Senior Physiotherapist
- 1 Clinical Specialist Physiotherapist
- 2 Dieticians
- 0.7 Pharmacy Technician
- 0.9 Pharmacist

# Operational Services

The Operational Services Directorate continues to go from strength to strength since its inception in 2015. During 2017, a number of key appointments were made, including: Katiana Picolli, Hygiene Services Manager; John Heelan, Mechanical Services Manager; Kevin Mahoney, Electrical Services Manager; Anthony McMahon, Building Services Manager; Cathal Russell, Catering Services Manager; Theresa Fallon, Facilities Manager; and Mark Kelly, Electrical Services Manager.

## ACHIEVEMENTS

### Hygiene

Hygiene working groups continued across all sites during 2017. The Hygiene Services Manager is now participating in the peer hygiene audits and UV

audits have been reinstated. The Linen Committee was also re-established.

Discharge teams were extended across UHL, providing discharge cleans up to midnight Monday to Friday, with one team allocated to the paediatric department. The team also participated in peer hygiene audits and progressed UV audits within the Hospital.

### Catering

The UHL Catering Department catered for on average 6,500 weekday services including breakfast, lunch, supper, hydration rounds, evening tea, Emergency Department, day cases, T & T and staff restaurant during 2017. Throughout 2017, they implemented improvements in UHL catering services and menus through internal feedback

from patient groups and external bodies such as HIQA. A number of policies and procedures have been implemented through the Nutrition and Hydration Committee.

### Porter Services

A porter roster review at UHL was completed and a number of appointments have been made with further anticipated in 2018.

### Clinical Engineering Department

The team successfully managed the 2017 National Equipment Replacement Programme for the Hospital Group. The department was involved in all aspects: from liaising with the National Project Lead, National Procurement and the Mid-West Regional Estates Department to commissioning and decommissioning of equipment. The funding provided to UL Hospitals Group in 2017 was €2.49m.

The Clinical Engineering Department was also involved in a number of capital and hospital equipping projects throughout 2017, including the new Emergency Department at UHL, Nenagh Hospital Medical Ward Extension, Critical Care Clinical Information System and Laboratory Blood Sciences. Their role included reviewing and drafting specifications, reviewing tender documentation, equipment evaluations, receipt and commissioning of equipment and asset registration. The department was also involved in the SAP Stabilisation Project and the implementation of SAP within the department as a designated hub.

### Other activities included –

- Management of medical device alerts for the

Hospital Group

- Management of medical equipment procurement requests, submitted to the UL Hospitals Medical Equipment Procurement Committee.
- Annual In-house Preventive Main Service Programme. Department completed 531 PM services on medical devices/equipment in 2017
- Call out activity – Department responded to 1,052 call outs in 2017
- Medical equipment in-house repairs. Department completed 3,584 medical equipment repairs in 2017

### Maintenance Department

The Maintenance Department responded to over 23,000 reactive calls in 2017, with a resolution rate of 97%. The department also managed and executed over 280 planned preventative maintenance contracts on plant and equipment with external specialist contractors.

The substantial process of bringing planned preventative maintenance of the Critical Care Block in-house was commenced in 2017 in preparation for external contract end in early 2018. Additional electrical and plumbing staff resources were recruited. Maintenance procedures, policies and routines for new developments such as the new ED/Renal, Leben and CERC builds, were developed and implemented.

The Maintenance Department had significant involvement in all phases of Estates Department-run capital infrastructural improvement projects across all hospital sites. Such projects included the new ED, theatre 8 endovascular suite, nuclear medicine refurbishment, Ennis Hospital fire-related works, Nenagh Hospital ward extension project, ASAU

**Below**  
Killian Mahon, Porter  
meets Minister Simon Harris  
during the official opening of the  
new ED, UHL.







Left  
Operational Services, Directorate Management  
Team Theresa Fallon, Facilities Manager;  
Larry Murphy, Maintenance Manager; Niamh O'Grady,  
General Manager; Eilis Power, Assistant Staff Officer; Bernard Ryan,  
Clinical Engineering Manager; Linda Fahy, Business Manager.

project, redevelopment of Old ED to Fracture Clinic/ Medical Short Stay unit, Maternity home birthing room, Nenagh Hospital AMAU. The Maintenance Department assisted with strip out, live area interfacing works, commissioning, equipping and occupations stages of each project.

The Maintenance Department implemented a payments hub as part of the SAP Stabilisation Project and developed processes for dealing with RCT (relevant contracts tax) payments to vendors.

The Maintenance Department carried out a number of environmental improvements in 2017, as follows:

- Maternity Hospital CCTV Installation
- Replacement of the nurse call system in the labour ward
- Installation of bed pan washers in inpatient wards in place of macerators
- Refurbishment of accommodation spaces and corridors in UHL Nurses Home
- Built CCTV equipment room in UHL

- Continued landscaping programme in UHL
- Pharmacy upgrade for fire safety and accommodation improvements
- Additional Neonatal fire escape ramp
- UHL AMU expansion
- Developed new wayfinding scheme for UHL
- Internal painting programme in Croom Hospital
- Replaced brick paving and set down area at main reception in UHL
- Prepared Ward 1A for occupation
- Refurbished UHL Chapel
- Replaced healthcare records lift
- UHL theatre complex UPS replacement
- UHL old dialysis area refurbishment for Vascular laboratory
- UHL designated exemption area under Tobacco Free Campus policy

SERVICE DEVELOPMENTS

Emergency Department

Facilities, Maintenance and Clinical Engineering had a significant input into the opening of the new ED, UHL. A number of additional appointments were made with the most significant being in portering and hygiene. The hygiene team is an in-house team who are working tirelessly to maintain the busy department to the highest standard of hygiene.

A new café also opened in the ED waiting room which is externally managed.

Following a review of hygiene in theatre, a night hygiene attendant commenced in theatres seven nights per week, providing 24-hour hygiene services in theatres.

Catering

Frontline catering hours have been extended to wards 3A, 3B, 3C, 1B, 1D and the Trauma Ward to provide extended meal times. This service improvement commenced in November. This expansion in our frontline catering service is in line with the HIQA Report on Nutrition and Hydration in Public Acute Hospitals.

The revised meal serving times on these wards is:

- 8.30 am Breakfast
- 10.30 am Drinks round which includes tea, coffee, milk, water and juice
- 12.30 pm Dinner
- 3.00 pm Drinks round which includes tea, coffee, milk, water & juice
- 5.00 pm Supper

There is full catering cover on all of these wards from 8.00am to 6.30pm daily with two shifts in place 8.00am to 6.15pm and 8.30am to 6.30pm. All breaks are staggered to ensure a presence on the wards at all times. There is also a full service provided from 8.00am to 6.30pm for tea and toast for patients post scans/ procedures etc.

Radiology

Additional attendants were appointed to the Radiology Department to implement a new roster. An attendant service is now in situ from 8.00am to 6.00pm Monday to Friday and 8.30am to 5.00pm Saturday and Sunday.

PEOPLE

Staffing reviews commenced on all sites in 2016 for hygiene, catering and portering and continued into 2017 with some reviews already completed. A group review of catering services commenced in November.



Below  
Isabella Tom at the new cafe in the Emergency Department.

A total of 77 attendants and 21 porters across the group took up duty during the year which has further enhanced our portering, hygiene and frontline catering services.

Children First training was completed across the directorate.

Training on the safe handling of medical gases was organised for porters as well as an ongoing program of animate and inanimate manual handling training. Hand hygiene courses were also provided and a number of staff from the directorate are now trainers on hand hygiene.

# Infection Prevention & Control



# Infection Prevention & Control

UL Hospitals Group is committed to providing infection prevention and control (IP&C) services, which espouse the core principles and values in the updated National Standards for the Prevention and Control of Healthcare-Associated Infections in Acute Healthcare Services (2017) and Guidelines on Core Components on IP&C Programmes at the National and Acute Healthcare Facility Level (2016).

**Below**  
The UHL IP&C Team:  
Dr Lorraine Power, Maeve Crawford A/CNM II, Sarah Kennedy CNM II, Mary Tutty, Admin, Dr Nuala O Connell, Barbara Slevin, ADON, IPC.  
Front row: Front: Marie Byrne, CNM II, Eleanor McCarthy, CNM II, Mary P Fitzgerald, CNM II.



Throughout 2017, the IP&C Team continued to build on work, liaising closely with each directorate in the group, focusing on these core principles and on specific key performance indicators (KPIs) as outlined in the National Service Plan for 2017, including

hand hygiene, C difficile and staph aureus bacteraemia.

In May 2017, UL Hospital Group participated in an extensive Point Prevalence Survey (PPS) of Hospital-Acquired Infections & Antimicrobial Use in European Acute Care Hospitals, coordinated by the Health Protection Surveillance Centre (HPSC).

### HAND HYGIENE

The cornerstone of IP&C focuses on hand hygiene and throughout 2017, the IP&C team led many initiatives, including training and supporting over 140 multidisciplinary hand hygiene trainers.

The IP&C Team led annual initiatives to drive hand hygiene compliance for staff and the public, marking World Health Organisation (WHO) Hand Hygiene Day on May 5th, which focused on “Fighting Antibiotic Resistance”.

### Hand Hygiene Audits

| Directorate          | National Target % | Period 14 Oct 2017 | Period 14 Oct 2017 | Period 13 June 2017 | Period 12 October 2016 | Period 11 June 2016 | Period 10 October 2015 | Period 9 June 2015 |
|----------------------|-------------------|--------------------|--------------------|---------------------|------------------------|---------------------|------------------------|--------------------|
| Medicine Directorate | 90%               | 89.5%↓             | 89.5%↓             | 90%↓                | 95.2%↑                 | 92.4%↑              | 93.3%↑                 | 87.1%↓             |
| Perioperative        | 90%               | 94.3%↑             | 94.3%↑             | 92%↑                | 88.1%↓                 | 89%↓                | 92.9%↑                 | 86.7%↓             |
| Maternal & Child     | 90%               | 91%↑               | 91%↑               | 94%↑                | 85.2%↓                 | 89.5%↓              | 92.4%↑                 | 85.7%↓             |

The 2017 biannual national hand hygiene audits demonstrated that all directorates improved upon and achieved the 90% target.

### EDUCATION & TRAINING

The IP&C team continued to provide ongoing education and training on all topics. Overall, 5,623 individual IP&C educational opportunities were provided in structured sessions at departmental level and in collaboration with the Centre for Nurse and Midwifery Education (CNME). Mandatory hand hygiene training accounted for 2,732 individual hand hygiene training opportunities.

The inclusion of surveillance data updates and the provision of education encompassing the Core Infection Prevention and Control Knowledge and Skills (HPSC 2015) were delivered. Specialist microbiologist presentations were provided; linking basic microbiology to the role staff play in the prevention of spread of multi-drug resistant organisms (MDROs) to patients.

The IP&C Team continued to deliver specialist lectures and training at the IP&C in Healthcare module at the University of Limerick. There was on-going training provision to non-HSE staff including building contractors, volunteers, undergraduate and postgraduate students.

The IP&C Team continued to provide ongoing support to the dedicated UHL IP&C Cohort Ward, with IP&C training needs, assisting with the management of patients with MDROs and supporting patient flow. “What Matters to You” was piloted on this ward.

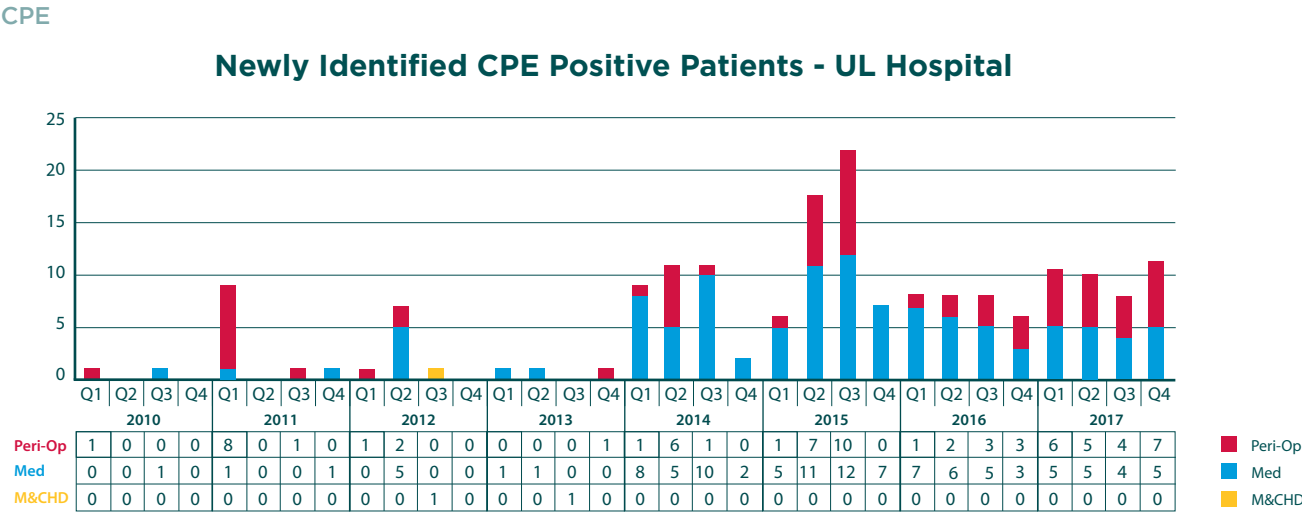
### SURVEILLANCE DATA

Comprehensive surveillance for healthcare associated infections and epidemiologically significant organisms is conducted with in-depth analysis by the surveillance scientists. This data is reported back to the UHL IP&C committee, the executive management team, the board and directorate management teams. Trends are monitored in line with national targets and KPIs.

**Below**  
Staff in Nenagh promoting WHO World Hand Hygiene Day 2017, led by trained trainers, Elaine O’Sullivan, Siobhan Twomey, CNM II, Brigit Kelly, CNM II and Caroline Valette, ADON.



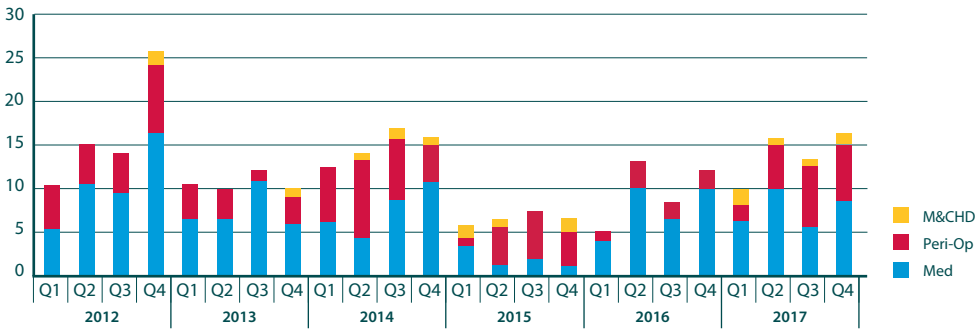
Right  
Barbara Slevin,  
presenting at ECCMID,  
Vienna April 2017.



There were no CPE bacteraemia cases detected in 2017 with the last detection in June 2015.

C.difficile

New C. difficile Infections “Associated” With the UL Hospital

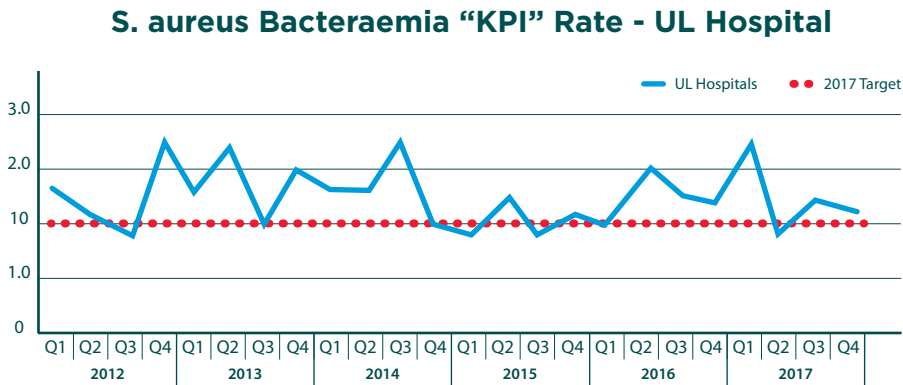


Analysis of Clostridium difficile detection is conducted. The HSE National Service Plan 2017 reduced the KPI target to <2.0 new cases. All healthcare-associated infections (HCAI) patients have their isolates sent for ribotyping to check for cross-transmission, and where epidemiologically linked patients are found with the same ribotype, further analysis (genetic fingerprinting) is performed.

S.aureus Bacteraemia

Staphylococcus aureus bacteraemia surveillance is central to infection prevention and control practices. (HCAI) National KPI target for 2017 is < 1/10,000 bed days used. These data are also collected monthly by the HSE “BIU” as a performance indicator for each hospital.

HIQA conducted an announced inspection in UHL in September, visiting Ward 2D, Ward 4B and Ward 1D. There was an unannounced inspection Nenagh Hospital in August, Infusion Room and Medical Ward



PEOPLE

Five new IP&C CNM IIs were appointed: Eleanor McCarthy, Sarah Kennedy, Marie Byrne, Mary P Fitzgerald and Maeve Crawford. Two of these positions were to backfill posts vacated through promotion.

Achievements

The IP&C Team continued to develop their academic profile throughout 2017 with the participation at national and international meetings, and over 12 publications in peer-reviewed journals on topics such as hand hygiene, CPE, cystic fibrosis, ESBL and microbiology.

Dr Nuala O Connell, Ms Barbara Slevin and Ms Patricia Treacy were shortlisted for the Health Service

Excellence Awards for their RCPI Diploma in Leadership project work on CPE.

Oral presentations were given at the following national and international conferences:

- The 27th European Congress of Clinical Microbiology and Infectious Diseases (ECCMID) in Vienna
- The Infection Prevention Control Ireland (IPCI) Annual National Conference-“ New challenges in 2017 – The multidrug resistance crisis” May 2017
- Safe Patient Care Conference-“Bugs and Drugs” The ongoing challenge of Multidrug Resistant Organisms (MDRO) and Antimicrobial Resistance (AMR), UCC, September 2017. All were given by Barbara Slevin.



# Estates & Capital Projects

# Estates & Capital Projects

For UL Hospitals, 2017 saw further tangible progress in realising the Group's ambitions for developing first-class infrastructure and facilities as a key enabler of high quality healthcare.

The opening of Ireland's largest and most advanced Emergency Department on Monday, 29th May 2017 at University Hospital Limerick has heralded a new era for unscheduled care in the MidWest and takes pride of place in our review of our 2017 capital investment programme.

The new ED spans 3,850 square metres of floor space, over three times the

size of the old department. The facility is separated into different pods and zones, allowing for paediatric patients, major cases, minor cases etc to be treated separately, matched to the most appropriate clinical expertise and moved to the next stage of their care in the most efficient manner.

Each separate area has its own isolation facilities that offer a gold standard in infection prevention and control. The number of triage areas has increased from one to four, including a separate room for paediatric triage. It has been equipped with the latest technology such as the most advanced diagnostic equipment of any such facility in Ireland or the UK, including a c. €1 million, 128-slice CT scanner which is mounted on a track to minimise the movement of the sickest patients in Resuscitation, allowing for earlier diagnosis and treatment of stroke, trauma etc. Also included is an advanced pharmacy dispensing system located adjacent to the staff bases throughout the department.

Below  
HSE Estates staff with members of the design and construction teams for the new ED at UHL.



This highly complex project was delivered on schedule and, with careful planning, was safely and successfully put into immediate operation. Great credit is due to all involved in all aspects of the project.

The new Clinical Education and Research Centre (CERC), a partnership project with our academic partners the University of Limerick, was equipped and commenced operation during January 2017 and has been of immense benefit ever since.

A "Dragons Den" was held during May 2017 to consider proposals for clinical care use of the old Emergency Department. In total nine worthy bids were pitched by staff on the day. The available footprint was subsequently allocated for three of them, namely the streamlining of the Oral Maxillofacial Service, a new Medical Short Stay Unit and the phased development of an Acute Fracture Unit (AFU). An interim medical Short Stay Unit (MSSU) was initially opened in part of the old ED and in late 2017 construction works commenced on the conversion of the old ED into an appropriate environment for these three successful service development bids. All bids were well received and an alternative accommodation solution is to be considered to try and accommodate a further number of the ideas put forward.

A number of other capital priorities at UHL have also made good progress. Construction work commenced on the conversion of the former ICU area into a new facility for pre-operative assessment, day of surgery admissions and an acute surgical assessment unit. An interim office block was provided to decant pathology staff and create space in the existing department to enable the delivery of the Blood Sciences Project. Plans also progressed for the redevelopment of the Acute Medical Assessment Unit (AMAU) with planning permission now achieved and the detailed design scheme developed.

A complete redevelopment of the Nuclear Medicine Department was carried out to support a new Spec CT

Below  
A view of the auditorium in the Clinical Education and Research Centre, UHL.



for the hospital. In total, the group's capital equipment replacement programme resulted in circa €2.8 million capital expenditure across the hospital group sites in 2017.

A number of our other hospital sites also saw a variety of construction activity during 2017. At Nenagh Hospital work continued on the redevelopment of the male medical ward. Land was also acquired directly adjacent to the hospital to expand the overall Nenagh healthcare campus.

A new home birthing room was progressed at University Maternity Hospital Limerick and internal refurbishment works were completed in Ennis Hospital with the fit out of the viewing room to follow in 2018. A new Outpatients Department solution for Ennis was identified and a design scheme for the facility has been developed. Extensive fire safety upgrade works were carried out at St John's Hospital including the installation of new fire alarm and emergency lighting systems and passive fire safety upgrade works.

During 2017 the government invited consultation on their plans for Project Ireland 2040, a national planning framework which was subsequently published in February 2018 alongside a new 10 year capital plan. UL Hospitals Group contributed to the process outlining in our March 2017 submission the importance of high quality healthcare for the mid-west region to achieve its potential and in particular the need for both additional acute bed capacity at UHL and the clinical imperative to relocate the University Maternity Hospital to the Dooradoyle campus.



# People

Staff Recognition Awards 100

# Staff Recognition Awards

The staff awards take place annually and recognise the important role that staff play in delivering services to our patients, and to celebrate the many achievements of the Group.

The winners of the 2017 awards were announced at a Gala dinner held at the Strand Hotel, Limerick on 23rd February 2018.

Staff were recognised across eight categories, Exceptional Patient Experience, Innovation in a Clinical Area, Innovation in a Non-Clinical Setting, Education and Training, Research, Best Team, Quality Improvement, Unsung Hero.

Nearly 100 nominations were received and these were reviewed by an

independent judging panel before deciding on the overall winners.

The CEO also presented two special awards on the night for outstanding contributions made by staff throughout 2017. The first award was presented to Prof Tom Peirce and the second award was presented to the Clinical Nurse Managers II.

Pictured below and over the page are the award winners who were presented with their trophy by CEO Colette Cowan.

- 03: Winner of Best Patient Experience was Joan Ryan What Matters to you Garden, Ennis Hospital who was joined on stage by her colleagues from Ennis Hospital
- 04: Winner of Best Education and Training was the ED Department Training
- 05: The Paediatric Diabetes Team won Innovation in Clinical Area
- 06: Quality Improvement Award was won by the Haematology/Oncology Day Unit

- 07: The LEAF Programme, Workout 2 & 4 won the Innovation Non Clinical Area award
- 08: Clinical Nurse Managers II were joined on stage by Directors of Nursing Mairead Cowan, Declan McNamara and and ADON Ber Murphy after winning the CEO Award
- 09: The Medicine Directorate Team won the Best Team award
- 10: Prof Tom Peirce being presented with his CEO award



03



04



05



06



07



08



01



02



09



10





Pictured above is Brendan Bugler with his wife Jo Crowe, Clinical Nurse Manager 2, Burren Ward at the opening of the new What Matters to You garden in Ennis Hospital.



**Ospidéal OL  
UL Hospitals**

Working together, caring for you



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive