

# Reconfiguration

## CREATING A SINGLE HEALTH CARE SYSTEM FOR CORK AND KERRY

# Times

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### Navigating Change

We are not short of vision in the Irish health services! We do fall short on implementing change. How can reconfiguration in Cork and Kerry be different? One way is to think through how we are going to implement our recommendations before we publish the overall roadmap. At its last meeting, the Reconfiguration Forum agreed a detailed implementation planning Programme Management Pack drawn up with national input. This has now been accepted as a national template.

A national HSE reconfiguration group has just been established meeting every three months in Dublin. Targets are set for the subsequent three months on which the directors of reconfiguration must report.

Despite these new robust processes, our biggest challenge will still be to change the culture of our healthcare system and to ensure we motivate and enthuse all our staff. The non-executive advisory board (page 4) provides access to a fantastic range of expertise, knowhow and experience in organisational change. I value their advice, support and commitment to the reconfiguration process.

We will shortly launch the roadmap. This will contain a broad outline of the range of services each hospital will provide. There will be many recommendations, some big and some small – recommendations on governance, education and innovation, key enabling changes, clinical services and risk management. Together they will ensure we utilise our staff and facilities to much greater effect and give better health outcomes to the patients we serve. We are all privileged to work in the Irish healthcare system.



Prof. John Higgins

Prof. John R. Higgins,  
Director of Reconfiguration

### Plan to relocate orthopaedic services from SMOH to SIVUH confirmed

Last month we confirmed our plan to relocate orthopaedic services including elective in-patient, rehabilitation trauma and day surgery from St. Mary's Orthopaedic Hospital (SMOH) to the South Infirmar Victoria University Hospital (SIVUH). Trauma/emergency orthopaedic surgery will continue to be delivered in Cork University Hospital (CUH) as is the current practice.

The relocation has been prioritised by the HSE South's Business Plan for 2010. A feasibility study was prepared by Mr. Mark Dolan Consultant Orthopaedic Surgeon, who chaired the Orthopaedic Reconfiguration Subgroup, and Margo Topham Project Manager. The relocation was subsequently approved by both the Reconfiguration Forum and HSE South's Regional Management Team.

The relocation will not involve any job losses for staff at SMOH and will provide patients with a more efficient service. Three new theatres will be built to replace the existing two at SMOH. The SMOH site will continue to be a major healthcare site maintaining the existing services on campus including mental health, intellectual disability, ambulance, outreach maternity and health centre services. The newly built community nursing unit on site is due to open this year.

Staff and other interested parties will be kept updated as plans proceed.

*Further information inside*

### Cork University Hospital – a smoke free campus



The entire Cork University Hospital campus is smoke free since May 31st last. Smoking is no longer permitted anywhere on the hospital grounds i.e. entrances, doorways, walkways, internal roads, bus shelters, car parks, cars, bicycle shelters etc. The smoke free campus will ensure a healthier, safer and cleaner environment for all and better health outcomes for patients and staff. Statistics prove that there is an 80% increase in quit rates for those who smoke when they are in a smoke free environment.

**If you would like help to stop smoking contact your GP or our smoking cessation service on: (021) 49 22280 or (087) 1219633.**

## Staff Briefing on transfer of orthopaedic services from SMOH to SIVUH

Staff were briefed on the relocation by senior management including: Prof. John Higgins, Director of Reconfiguration, Mr. Mark Dolan, Consultant Orthopaedic Surgeon, Mr. Tony McNamara, CEO CUH Group, Ms. Mary Mills, Director of Nursing, Mr. Michael Murphy, SMOH Manager, Mr. Ger Reaney, Interim Hospital Network Manager and Barry O'Brien, Assistant National Director for HR, prior to the public media briefing. Approximately 120 staff attended the presentation.

Mr Dolan gave staff a general overview on the recommendations of the feasibility study and a proposed timetable for the relocation to SIVUH.

This was followed by questions from the audience during which staff raised their concerns over the move. The main issues raised included:

- redeployment – conditions, location, opportunities at SIVUH, education and training, parking at SIVUH
- Cork City Council plans for the site
- other services operating on the site such as physiotherapy, pain medicine and plastic surgery.

Barry O'Brien gave reassurances in terms of employment, saying that there would be "no job losses for the 220 staff currently working in SMOH". He added that he had "made contact with staff representatives so that both staff and their union representatives would be an integral part of the information and consultative process". He said that he would be inviting staff representatives to a briefing session on the project shortly.

Ger Reaney informed those present that the HSE is in discussions with Cork City Council and other partners on the future use of the site for development of additional health facilities such as a major primary care centre.

Prof. Higgins put the relocation into context in terms of the overall reconfiguration plan for the region and told staff that "no expert would recommend that orthopaedics should remain as a stand alone service. It needs to be integrated with other complementary services such as rheumatology." He also told them that the other services at SMOH such as pain and plastic surgery are being analysed in terms of the overall reconfiguration plan for Cork and Kerry.

### Public Announcement

We also informed the media, public representatives and other interested parties of our intention to relocate the service. Speaking at the media briefing, Regional

Director of Operations HSE South, Mr. Pat Healy said "I am confident that the relocation of orthopaedic services from a stand alone site at SMOH to the SIVUH, an acute hospital with other complementary specialties on site, will best serve our patients' needs.

In addition to enhancing the quality of care provided to patients, the move demonstrates that the SIVUH will have a significant role to play in acute hospital services in Cork city into the future. The decision now, to move to the next phase of the development, will allow us to secure the €4m capital investment to enable the SIVUH to carry out the necessary construction work following normal tender arrangements.

"I wholeheartedly acknowledge the contribution of the staff at SMOH, both past and present, in looking after patients in a most caring and professional manner."

"The HSE is fully committed to the future use of the site as a health complex. The newly built community nursing unit on site is due to open this year. In addition, we have had discussions with Cork City Council and we are working with them and other partners on the future use of the site for development of additional health facilities such as a major primary care centre. This will be undertaken as part of the City Council's review of the master plan for the area."

Director of Reconfiguration Prof. John Higgins said "we will now enter a phase of detailed implementation planning to relocate the service which will include installing three new theatres and refurbishing patient accommodation at SIVUH. We hope to complete the relocation early next year. It is also our intention to incorporate a paediatric orthopaedic service at SIVUH, for children in the region who currently have to travel to Our Lady's Children's Hospital Crumlin for treatment."

### SIVUH Management

SIVUH's Chief Executive Officer Mr Ger O'Callaghan said "Management and staff at SIVUH look forward to working closely with our colleagues at HSE South throughout the relocation process. Starting with implementation planning right through to the transfer, we will be working hand in hand to ensure that patients and staff will have a smooth transition to the relocated service."

### Timeline

A project group will shortly be established under the chairmanship of Mr. Dolan to carry out detailed implementation planning. It is anticipated that the service should be relocated in the first quarter of 2011 should everything go to plan.

## Update on Acute Medical Units



Dr. Jennifer Carroll who is leading up the AMU programme in Cork and Kerry

Work has continued since the conference on acute medical units (AMUs) was held in April. Each hospital has established a project team to carry out detailed implementation planning. Our aim is to have five AMUs in the following locations: Bantry General Hospital (BGH) which opened in February last, Cork University

Hospital (CUH), Kerry General Hospital (KGH), Mallow General Hospital (MGH) and the Mercy University Hospital (MUH). Each hospital is at a different stage in the planning process as follows:

### BGH

An AMU opened in February with four assessment beds and a co-located four bed short stay admission area. It is proving very popular with general practice for assessment. A number of in-patient beds have been replaced with day assessment beds and BGH has managed to maintain throughput without the need for extra beds on corridors. The Reconfiguration Team recently met with clinical staff in Bantry to review progress.

### CUH

There are two components to the AMU at CUH, an acute medical assessment unit (AMAU) and a medical short stay unit (MSSU). A project team meets weekly to prioritise the implementation of the MSSU initially. The MSSU will assess and manage acute medical admissions fast tracked from the ED. Patients will be assessed and reviewed by the consultant on call for the day and a management plan for the patient will be deployed on the day of admission. The consultant physician will not have any fixed commitments while on duty for acute medicine that day.

It is expected that the MSSU will open initially on a three month pilot basis towards the end of this year. An AMAU should be opened following the pilot phase. Patients will then be referred directly by their GP or from the ED. These patients will be assessed and diagnosed and either discharged or admitted rapidly to either the MSSU or a hospital ward if their expected length of stay is more than three days. Workshops for GP practices and other stakeholders will be held in advance of opening.

### KGH

KGH has set up a project team to reconfigure the existing medical assessment unit to an AMU with a planned completion date for August. The AMU will accept direct assessments and admissions from GPs. An engagement process will take place with GPs as part of the implementation planning process.

### MGH

Staff from HSE South's Estates Department are carrying out an option appraisal for a suitable location for an AMU.

### MUH

MUH physicians and their teams hope to have an AMU established, during the coming months, in an existing four bed observation ward in the ED on a pilot basis. The patients presenting will be seen directly by the admitting medical team and managed accordingly. In this way the hospital team will have a clear operational strategy for the AMU before it accepts the transfer of acute medical patients from SIVUH. The project team is working on a larger site for the AMU but this is dependant on other moves being considered under the reconfiguration process.

## GP Subgroup Formed



Dr Andy Lyne, chair of the GP Subgroup

A general practitioner liaison subgroup is the latest branch to be created in the Reconfiguration advisory process. According to Prof. Higgins, "GP involvement is a pivotal hinge in determining the success of the Reconfiguration process. Their input and advice will be warmly welcomed."

The members, who agreed to meet biannually, include representatives of local ICGP faculties, the IMO, UCC, Southdoc and the GP unit. The first meeting was held in May and was attended by: Dr Vivian Foley, Carrigaline; Dr Ronan Boland, Blackpool; Dr David Moloney, Mallow; Dr Ciaran Donovan, Parklands, Cork City; Dr Gary Stack, Killarney; Dr Andrew Crosbie, Douglas; Dr. Donal Coffey, Killarney; Dr. Joe Moran, Fermoy and Dr. Joan Lynch, Bantry. The subgroup is chaired by Dr. Andrew Lyne, GP. Blarney.

## Non-executive Advisory Board

A non-executive advisory board supports the work of the Reconfiguration programme. The board has 17 members who bring a variety and depth of experience to the programme from the areas of business, education, public service, health and sport. In the normal course of events, this expertise would not be freely accessible to health services. The board has met on five occasions so far and members receive no remuneration for their participation and give their time and advice freely.

Professor John Higgins stated that he is “delighted to have such a range of expertise and advice available and is particularly grateful that board members give of their time freely. Their commitment and enthusiasm underscores the significance of the work underway to reconfigure our health services in Cork and Kerry and to ultimately improve services for both patients and the staff who deliver them.”

The terms of reference for the non-executive advisory board are to:

- Act as a “sounding board” for the Director of Reconfiguration and the HSE South management.
- Provide business advice and guidance.
- Enable the Director of Reconfiguration “test-drive” options for reconfiguration prior to decision and implementation.
- Provide support for the programme.

The board is chaired by Mr Michael O’Flynn, Managing Director of the O’Flynn Group and members are Mr Brendan Tuohy, retired Secretary General of the Department of Communications, Energy and Natural Resources; Mr Pat Lyons, Chief Executive of Bon Secours Health System; Mr Des Murphy, Chair of Mercy University Hospital Board and managing partner Carroll Murphy Quantity surveyors; Mr Paul Breen, President and Chief Operating officer of Élan Pharmaceuticals International Ltd; Prof. Cillian Twomey – retired consultant physician in geriatric medicine, Cork University and St. Finbarr’s Hospital Cork; Dr Paddy Crowley, General Practitioner; Mr Kevin Kenny Tax Partner, Ernst & Young; Mr Sean O’Driscoll, Chief Executive of Glen Dimplex; Donal Horgan, Managing Director, Musgrave Retail Partners Ireland; Prof Geraldine McCarthy, Professor and Dean of the Catherine McAuley School of Nursing and Midwifery at the National University of Ireland, Cork; Mr Aidan O’Brien, Horse Racing Trainer; Mr Pádraig O’Riordáin, Managing Partner, Arthur Cox’s Solicitors; Dr. Michael Murphy, President, University College Cork and Prof. Gerry O’Sullivan, Professor of Surgery and Director of Cork Cancer centre and Mr. Pat Healy, Regional Director of Operations, HSE South.

## Reconfiguration Calendar

During April and May, we continued to inform, consult and engage staff and key external stakeholders on reconfiguration. Here’s some of those whom we met:

### APRIL 2010

- 2 Urology consultants
- 12 NCCP - High Level Steering Group  
Enterprise Ireland
- 15 Clinical directors workshop  
Laboratory Services
- 16 Reconfiguration Forum  
Conference on Acute Medicine Units
- 19 Consultant cardiologists and medical physicians  
Histopathology services  
HIQA
- 21 National Reconfiguration Workshop, Dublin
- 22 Advanced paramedic services  
Radiology subgroup
- 28 North Cork GPs

### MAY 2010

- 4 GP Liaison subgroup
- 7 Reconfiguration Forum
- 10 Advisory Board
- 11 Colorectal surgical services
- 12 Rehabilitation services  
Bantry General Hospital on the acute medicine unit  
SMOH staff briefing on the transfer of orthopaedic services to SIVUH
- 13 Media briefing on the transfer of orthopaedic services from SMOH to SIVUH  
SIVUH staff briefing on the transfer of orthopaedic services from SMOH  
Consultant cardiologists - Kerry
- 14 Roundtable discussion on single acute hospital system  
Immunology services
- 17 Reconfiguration Forum
- 19 HSE National Consumer Affairs Department and Irish Society for Quality and Safety in Healthcare (ISQSH)  
Clinical Directors Workshop, Dublin
- 20 CUH Development Plan  
Association of Hospital Chief Executives  
Histopathology services
- 24 NCCP - High Level Steering Group  
Maxillofacial services, MGH
- 26 Ophthalmology services
- 28 HSE National Director for Quality and Clinical Care
- 31 Reconfiguration Forum

## Lean Project Update

The Reconfiguration Team are getting very positive feedback from staff involved in the Lean projects. Comments received back have been: “the wards are much tidier and consequently much easier to work in”, “we are making savings on stock by ordering just what we need for short term use” and “staff in other wards are approaching us to help them introduce Lean in other areas.” These comments are the proof of the pudding and speak for themselves in terms of the benefits of Lean to health care provision both now and in the coming years.

In April, Ward 1B in CUH and 2 East in CUMH implemented their planned events. Approximately 300 staff attended 5S information sessions given by the team involved in the two wards. These wards have benefited from improved use of available space, reduced stock and clearer locations for all items. Large amounts of space were created in stock rooms by the elimination of unneeded and excess stock. Improved ability to find equipment and stock has been observed since the event.

The challenge was made all the more significant with the linkage of Ward 1B with an existing CUH Lean procurement project on implementing new shelving systems to facilitate Kanban, (a Japanese system of signals which helps to control stock at required levels and therefore maintain costs at a minimum). Billy Drake, Supplies Officer, Louise Hannon, Supplies Manager and Sheila Lordan, CNM2, Ward 1B will be working together over the coming weeks to replace the existing systems. This should further enhance the gains made with the 5S Lean project. These benefits will require the support of everyone to make sure they are sustained.

The SIVUH and MGH have been completed more recently and significant gains have also been reported. Supplies and maintenance departments in the hospitals have worked very hard alongside ward staff to implement physical changes to improve space, lighting and reduce stock holdings.



Above: Staff reaping the benefits of working in a ward at CUMH that has gone through the Lean process

Top left: Staff of the Mercy University Hospital's Lean Team

Left: Some members of CUH's Lean Team

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