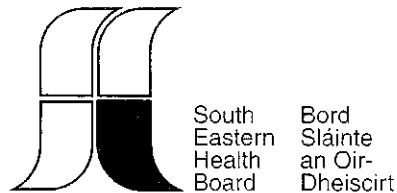
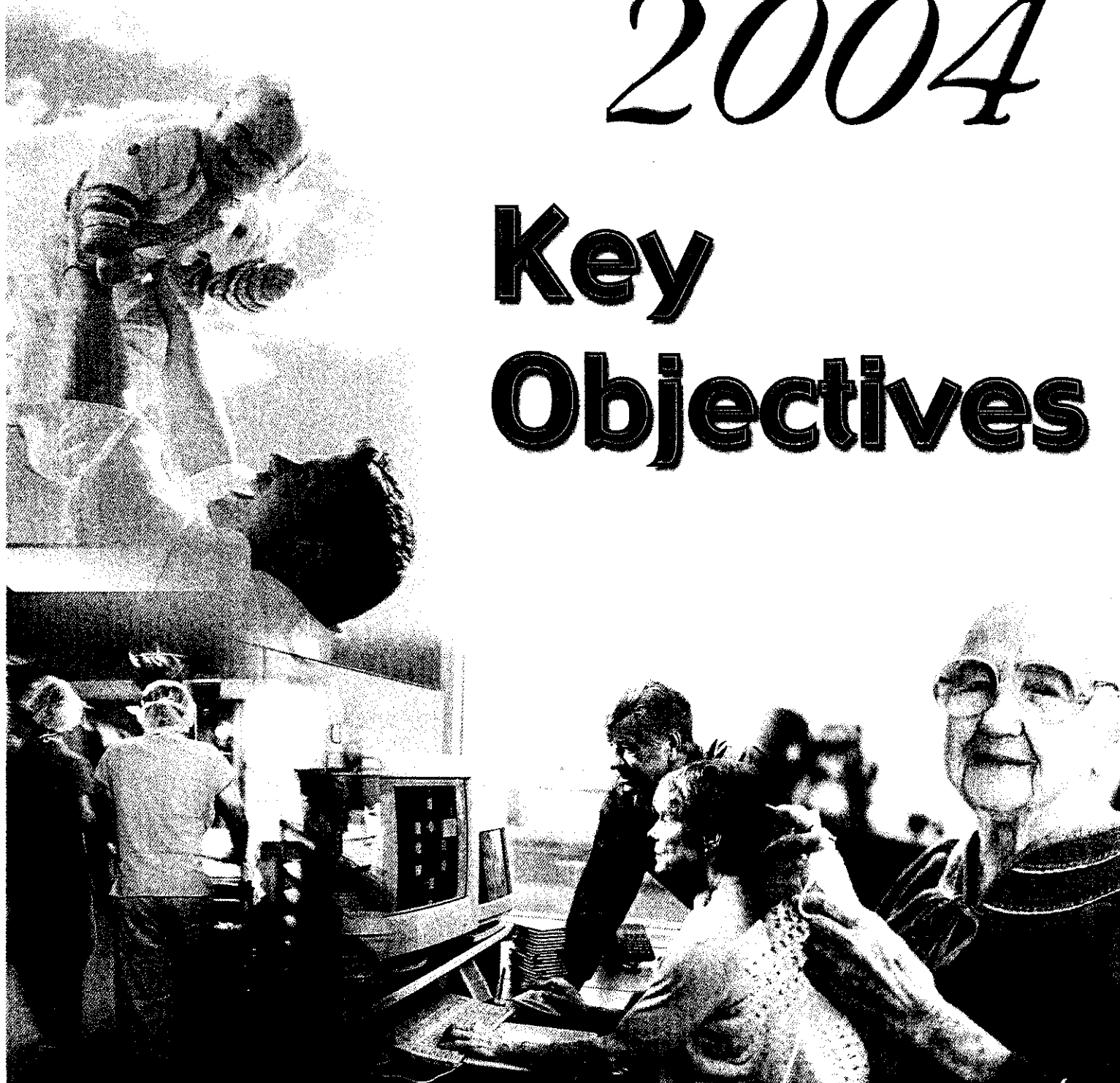


**South Eastern
Health Board**



Service Plan *2004*

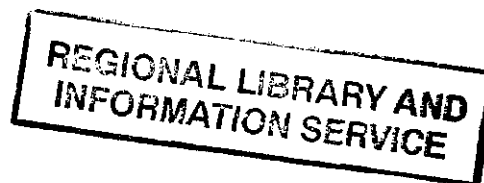
Key Objectives



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The primary function of the service plan, is to provide 'a statement of services – and estimates of income and expenditure' for the coming year. The SEHB Service Plan has been framed around the vision and principles set out in the National Health Strategy 'Quality and Fairness a Health System for You' (2001), which was launched in November 2002 (available from the library and intranet site). This summary gives key points and a brief overview of the key service plan issues for the different services in the SEHB. The full report, which runs at almost 200 pages is on the intranet site and will be lodged in SEHB libraries around the region.



Objectives

The priority objectives for the Board in 2004 are:

- To protect and develop key strategic services that improve and maintain health.
- To protect the existing level of services at the level planned for 2003.
- To address the modernisation objectives set out for the Health Services under Sustaining Progress; to improve the quality of services to our customers; to improve the quality of life in the workplace; to improve through Performance Management, the efficient and effective use of resources and to achieve greater value for money.

Letter of Determination

The letter of determination from the Department for Health and Children sets out the amount of funding for delivering ongoing services in 2004 (€708.592 m), along with specific funds for new developments or initiatives and other key instructions and information. The following points are important in the context of the Letter of Determination:

- The planned date of transfer to the new Health Services Executive is January 2005.
- The Service Plan has been drafted on the basis that the range of services outlined can be delivered within the financial framework and determination set out in the Letter of Determination and within the overall approved level of employment.
- The Board will establish a contingency fund of €6 m for 2004.
- The Management will control expenditure to the advised level and will comply with the templates and schedules as required by the Department of Health and Children.
- The Board have a programme in place to reduce expenditure by €5.7 m under Value for Money initiatives and other general reductions.
- Employment Control will be maintained within the limit advised and staff associations will be consulted on the reduction of 36 posts in the administrative/management area.
- The service profile is outlined in the report and the existing management structure will remain unchanged in 2004.
- The financial and accountability provisions, which apply to the Board will be applied to the non-statutory sector by the Board.

Pat McLoughlin
Chief Executive Officer

**REGIONAL LIBRARY AND
INFORMATION SERVICE**

Population Health

At the last census in 2002, there were 423,616 individuals living in the South Eastern Health Board region. This represents an 8% increase since 1996. The number of children under four years of age had increased by 14%, this increase was particularly noticeable in counties Carlow and Wexford and was almost double the increase in this age group in the country as a whole. Persons over 65 year olds accounted for 12% of the population, and there was an actual increase of 3,184 in the elderly population.

The all cause age standardised mortality rate in the S.E.H.B. in 2001 was 749.9 per 100,000 population. This is higher than the rate for Ireland of 734.3 per 100,000 population. Diseases of the circulatory system are the commonest cause of death in the S.E., as in the rest of Ireland with malignant neoplasms being the second most common cause. The pattern of major causes of death in the region reflects the country as a whole.

A detailed population health survey was undertaken in 2001 measuring the health status of the people of the S.E. The major findings include;

- Of the respondents, self-perceived health declined with increasing age and physical health declined to a greater extent. Medical card-holders and people of lower socio-economic groups reported poorer health compared to non-GMS cardholders and people from higher socio-economic groups.
- Of the respondents, the rate of reported problems with quality of life increased with age, with decreasing socio-economic grouping, with a positive medical card status and with the female sex.
- Of the respondents, 22% were current smokers, with a higher prevalence in males and in lower socio-economic groups.
- Of the respondents, a high prevalence of mental ill health was reported with 17% stating that they have poor mental health.
- Of the respondents, almost one in 20 reported a long lasting disability, with increasing prevalence with age and in the male sex.

The National Health and Lifestyle surveys 2003 provides information on adults and young people in the South East and in the country as a whole.

These studies, conducted in 2002, found that 26% of SEHB adults are cigarette smokers, while amongst school children (10 to 17 years of age), 29% of boys and 25% of girls classified themselves as current smokers. The rates among school children were the highest recorded by the study for all health board regions. It is disappointing to note that the rates in children in the SEHB have increased since the previous HBSC study in 1998 when 24% of boys and 22% of girls were current smokers.

In 2002, boys in the SEHB, aged 12 to 14 years, were more likely to report having been really drunk (32%) than were boys in the rest of the country (21%). Likewise amongst children aged 10 to 17 years of age, 39% of boys and 33% of girls in the SEHB reported drinking alcohol in the past month, higher percentages than in any other region.

The SEHB has a significant amount of morbidity and mortality among its population. The strong association between health, socio-economic factors and the environment is well recognised. The Health Board, in addition to providing health services, needs to work with other agencies to improve the health of its population.

Community Services

The main aims of the Community Services for 2004 are:

- To deliver services, which are person focussed, quality orientated and achieve the greatest possible outcome from available resources, in the appropriate setting.
- To further develop integration of services and improve linkages across service boundaries so that the system can position itself to fully deliver national strategies and new structures.

These aims will be achieved through a series of objectives across primary care, community based services and specialist care services. The principal objectives are outlined in respect of the range of services.

Child Care and Family Support Services:

- To further strengthen the Regional Strategic Planning Group for Children Services, in order to integrate initiatives to improve children's health and welfare.
- To implement the report on the Review of Residential Care and achieve the strategic shift from residential care to earlier interventions with families in adverse circumstances.

Women's Health:

- To continue developing a health service, which is responsive to the needs of women.
- To complete the establishment of a Sexual Assault Treatment Unit in Waterford Regional Hospital.

Environmental Health Services:

- The continued promotion and protection of public health, by providing an advisory and education service, with appropriate enforcement of legislation in the area of environmental health.
- To develop compliance building measures to complement the implementation of Tobacco Control Legislation.

Immunisation and Vaccinations:

- To continue to develop and implement immunisation programmes within national guidelines and in accordance with best practice.
- To provide a cost-effective vaccine supply chain management system, which is compliant with all relevant legislation and best practice.

Child Health:

- To continue developing services for pre-school children and provide school based services in accordance with Best Health for Children and the National Children's Strategy.
- To implement the Best Health For Children report on Training of Doctors and Public Health Nurses in child health surveillance.

Dental Services and Orthodontic Service:

- To enhance existing linkage within SEHB to the orthodontic service.
- To link with the Health Promotion Department and other care groups in developing oral health promotion activities amongst different groups.
- To continue developing orthodontic services by the compilation of a Regional Orthodontic Plan, in accordance with identified need.

Primary Care:

- To further develop the new model of primary care, by conducting a geo-mapping exercise to assess *potential future primary care teams and networks*.
- To extend the GP Out of Hours services to Waterford.
- To further enhance linkages in diagnostic services for GPs and hospitals.

Sexual Transmitted Infections:

- To continue providing a confidential, accessible quality service, advice and information, in enhanced premises, in Waterford and Carlow.

Ophthalmology Service:

- To expand screening services for diabetic and glaucoma patients and promote eye-care and health promotion, within available resources.

Adult Counselling Services:

- To provide a high quality accessible counselling service throughout SEHB.
- To promote service integration so as to ensure a seamless service for the service user.

Community Welfare Services:

- To advance the implementation of a more responsive and equitable community welfare service, within available resources.
- By monitoring access to and expenditure under various schemes.
- To continue developing and implementing interagency linkages.

Health Promotion:

- To pilot a project in 2004 in partnership with GAA which will address alcohol misuse, especially among adolescents and young adults.
- To continue developing programmes in line with national priorities.

Social Inclusion:

- To promote social inclusion by eliminating barriers for disadvantaged groups and facilitating access to services, in order that they enjoy greater health and social gain.
- (Drug Misuse) - To co-ordinate and consolidate a comprehensive and responsive substance misuse service within SEHB.
- (Drug Misuse) - To establish a Service Users Charter for Addiction Services.
- (Adult Homeless) - To devise and implement customer feedback mechanisms for homeless persons in South East Region.
- (Adult Homeless) - To produce an information booklet on services for homeless people in the South East.
- (Asylum Seekers) - To continue to co-ordinate the provision of Health Board services to asylum seekers and refugees in an equitable and user friendly manner.
- (Travellers' Health) - To progress the implementation of the National Traveller Health Strategy.
- (Travellers' Health) - To promote various peer-led initiatives to strengthen the links between travellers and various health services.

Child and Adolescent Psychiatry:

- To provide a service, which is fully integrated with other core services in child health, child care and child disability.
- To progress initiatives to reduce the rate of suicide and intentional self-harm.

Palliative Care Services:

- To continue the development of infrastructure and service provision necessary to provide a comprehensive palliative care service in line with identified needs and recommendations set out in the report of the National Advisory Committee.
- To develop a service level agreements with Home Care Teams to further enhance and co-ordinate the regional delivery of the service.

RAPID

The SEHB remains involved in Revitalising Areas by Planning, Investment and Development (RAPID) as resources permit. A number of initiatives are based in RAPID designated areas, (identified in main text), and serve to empower disadvantaged communities and families by providing opportunities and means to advance social and health well-being. A process is also currently being put a place to seek to utilise funding from the Dormant Accounts Fund to strengthen and enhance such initiatives into RAPID designated areas.

Acute Hospital Services

The Department of Health & Children Letter of Determination for 2004 contains significant additional funding most of which has already been identified for specific purposes. The winter initiative funding will meet the 2004 cost of four additional Accident & Emergency Consultants. New funding for Renal Dialysis will be utilised for the increasing number of patients in the demand led service. Six additional dialysis stations at Waterford Regional Hospital are planned for introduction, during 2004 .

The allocation to address service pressures in Oncology/Haematology will be used to meet the high costs of medicines. The Pre-Hospital Emergency Care Services received an allocation to meet the cost of eliminating on-call and stand by duties, by rostering staff on a 24 hour basis.

The South Eastern Health Board is committed to the principle of Accreditation in its acute hospitals and Waterford Regional Hospital and St Luke's Hospital, Kilkenny will complete their pre-accreditation preparation in 2004.

The Home Birth/Domino Services have now been funded on an ongoing basis.

The Board's overall objectives for acute hospital services in 2004 are

- To reduce waiting times for public patients.
- To progress the goal of achieving accreditation in the Board's acute hospitals.
- To continue the integration, which has been achieved with hospitals and community services, within the region.
- To secure Department of Health & Children approval to proceed with some of the major capital projects, for which briefs have been submitted.
- To develop a regional A & E service by the appointment of Consultants in Emergency Medicine at Waterford Regional Hospital (2nd post), Wexford General Hospital, St. Luke's Hospital, Kilkenny and South Tipperary General Hospital.
- To maintain the Board's ongoing impetus towards the establishment of new services, with the eventual goal of self sufficiency.
- To implement the new Hospital Information Systems.

The key objectives for 2004 in the respective hospitals are detailed in the full service plan.

Regional pathology/laboratory service

- Replacement of priority equipment.
- Quality and Accreditation process to continue.

NATIONAL TREATMENT PURCHASE FUND

The NTPF arranges treatment in Ireland, Northern Ireland and the United Kingdom for those waiting longest on hospital inpatient waiting lists.

- Continue to treat NTPF eligible patients at hospitals within the region.
- Refer patients for treatment outside the region where additional capacity is not available with the Board's hospitals.

HIPE AND CASEMIX

The Board is continuing to develop the HIPE and Casemix functions, ensuring a high standard of coding and the submission of accurate and timely HIPE data, by all hospitals to achieve positive casemix budget adjustments.

PRE HOSPITAL EMERGENCY CARE SERVICE

The main objectives are:

- To eliminate On-Call from all ambulance stations.
- To continue upgrading the ambulance transport fleet.
- To enhance performance management with special emphasis on clinical audit and monitoring of response times.
- To conduct a review of the service.

MENTAL HEALTH SERVICES

Aims and Objectives for 2004

The Service Plan for 2004 is again re-emphasising the urgent need to continue the development of mental health services in the Board's region. The services continues to be guided by the key principles and objectives as set out in the National Health Strategy 'Quality and Fairness a Health System for You' (2001). There is now a need to update mental health policy, to take account of recent legislative reform, developments in care and treatment of mental illness and current best practice. To this regard it recognises that policy and objectives for mental health services need to be updated.

- In 2003, the Board established a review group whose function was to develop, over a defined period of time, a comprehensive strategic and policy framework for the development of its mental health services and thereafter a comprehensive plan for its implementation in the Board's area. In 2004, this policy statement, action and implementation plan will be developed in co-operation with those who avail of the Board's services, staff, voluntary organisations and the public who wish to have an input into this process.
- In the National Health Strategy 'Quality and Fairness a Health System for You' (2001), it is recognised that there is a need to generate greater public awareness and understanding of mental illness and to change attitudes to mental illness among the general public and health professionals. The development of advocacy services for people with mental health problems has emerged as an issue. In terms of the principle of people centred health services, the strengthening of advocacy services is a priority. The Board intends to develop its participation in advocacy provision in conjunction with the voluntary agencies including the Irish Advocacy Society, GROW, AWARE, Schizophrenia Association and Mental Health Association of Ireland.
- There is a need to further develop the Board's acute inpatient services.
- The Board will continue to provide data on National Performance Indicators for inpatient settings e.g. admission rates.
- Consolidation of 2003 developments.

REGIONAL SUICIDE RESOURCE OFFICE

The objective of the Regional Suicide Resource Office is to seek a reduction in the incidence of suicide and para-suicide in the Board's region in response to recognised need and in accordance with the principles of equity, people centredness, quality and accountability. The overall objectives for 2004 are:

- The further expansion of the Liaison Psychiatric Nursing Service for self-harm to all the acute hospitals in the region.
- The evaluation of current training programmes delivered by the Training/Development Officers of the Regional Suicide Resource Office.

- The continued support of the National Suicide Research Foundation, World Health Organisation Multicentre study into para-suicide.
- The training of health care staff, teachers, youth workers and members of the community in suicide awareness along with skills based training using the ASIST model.
- The continued implementation of the recommendations in the Report of the National Force on Suicide 1998.
- The provision of services through the office to voluntary community groups outside normal working hours two days per week.

Services for Older People

The main focus of Services for Older People is to provide the supports to ensure that older people are enabled to continue living independently in their own homes and communities for as long as possible. The Board's services for older people will continue to support independent home living in as far as it is possible to do so and to provide high quality hospital/residential care when this is required. The following are the main actions to be achieved in 2004:

- Establish a regional consumer panel, which will meet every two months. This panel will be comprised of people who are aged over 65 years and who have experience of the Board's services. The role of the consumer panel will be to influence change and to comment on services based on their experiences.
- To continue to support voluntary agencies in their work which greatly enhances and compliments the Health Board's services.
- To continue to provide the community rehabilitation services in Wexford Community Care area.
- To implement and develop home care programmes to enable older people to live independently at home.
- To proceed with the appointment of a Quality Assurance Officer for services for older people, which will incorporate responsibility for the Programme for the prevention of Elder Abuse.

CORPORATE SERVICES

Communications Department

The Communications Department is a key resource to the media, general public, Board Members and staff. The Department is committed to developing effective, timely and appropriate communications with the people who receive services from the Board; between the Board and other agencies and among the staff who deliver services.

In addition to the core communications functions that include media relations, media crisis management, public relations, internal communications, publishing, corporate identity, Irish language development, the communications function has set the following objectives:

- Develop a communications strategy for the SEHB in conjunction with the Regional Partnership Committee to ensure an open and encompassing strategy.
- Review SEHB Hospital Radio systems with a view to improving access to information for hospital patients.
- Develop an in-house media-training module to improve the delivery of health information by availing of media opportunities offered by regional broadcasters.
- Undertake a review of SEHB official openings and launches.
- Continue to improve internal communications through the development of a communications network, utilising existing staff in main centres across the region.
- Enhance working relationships with local, regional and national media.
- The Communications Department will prepare the Board to meet the requirements from the introduction of the Official Languages Equality Act. Further opportunities for SEHB staff to learn and use the Irish language will be provided.

Clinical Risk Management

The South Eastern Health Board continues to support the Risk Management policy to reduce the risk of harm to its patients and the organisation, by actively examining and managing the underlying systems failures, when identified that contribute to error.

Key Priorities for 2004:

- To conclude the Fall Prevention Review and seek agreement to implement recommendations.
- To conclude the Medication Management Review and seek agreement to implement the recommendations.
- To progress the appointment of
 - Two Clinical Risk Managers – Waterford and Special Risk Management Projects.
 - Legal Executive.
 - Regional Clinical Risk Manager – operations.
- To co-operate fully with the implementation of the planned National Clinical Risk Management Incident Database, National Clinical Risk Management Strategy and National Clinical Risk Management Standards.

QUALITY/ACCREDITATION SERVICE

Aims and Objectives For 2004

- To facilitate the accreditation process in Waterford Regional Hospital to initial survey.
- To establish a regional accreditation steering team.
- To develop a framework for quality & accreditation process for non acute sector.

PLANNING AND EVALUATION UNIT.

The Planning and Evaluation Unit supports Corporate Services and Service Managers in the areas of Service Planning, Monitoring and Evaluation, by providing the link between National Fora and the regional structure.

The unit currently concentrates on: Service Planning, collection and monitoring of Performance Indicator data across the services and reviewing and reporting on the implementation of the National Health Strategy 'Quality and Fairness a Health System for You' (2001).

Key Priorities for 2004:

- To implement the Operational Plan Template, which has been agreed through a joint project with Partnership.
- To continue developing the planning and monitoring processes, with particular emphasis on the Operational Plan in 2004.
- Through working with the National Partnership Forum, continue to provide education programmes and evaluate the existing processes, in consultation with staff.

REGIONAL APPEALS AND COMPLAINTS OFFICE

The Regional Appeals and Complaints Office has been working over the last 18 months to devise best practice guidance documents in relation to decision making, appeals, comments, compliments and complaints. Last year 1,073 appeals were received and along with 222 carried forward from 2002 a total of 1,072 were finalised by the Office. A further 223 carried forward to 2004.

The main focus of attention for 2004 will be the dissemination to staff of the best practice policy documents on Decision Making and Appeals and 'We're Listening to You'. This will involve training key personnel in each area who will ensure that all staff are familiar with the Board's policies. The 'Take Action' information system will be extended to ensure that data is collected from all areas in relation to satisfaction or dissatisfaction with services. Highlighting of the complaints and appeals process will be a key priority to ensure that the public are aware of their rights and to enable them to have ease of access to address their dissatisfaction. There will be liaison with staff in other Health Boards to ensure equity, consistency and fairness in the decision making process and that people in similar circumstances will be treated consistently.

Freedom of Information/Data Protection

The Freedom of Information staff ensure the Health Board's compliance with Freedom of Information and Data Protection legislation. This is a two-tiered responsibility: to members of the public who seek their records and provide training, advice and support to Board staff and decision makers.

Key priorities for 2004 include:

- The implementation of legislative changes contained in the Freedom of Information (Amendment) Act 2003 and the Data Protection (Amendment) Act 2003.
- To provide training, advice and support to staff and decision makers dealing with requests.
- To provide training and education to all staff on their responsibilities under FOI and DP Acts.
- To complete the best practice record keeping guidelines for health professionals and the staff handbook on personal information.
- To work with the National FOI Group to finalise a public information leaflet on rights as set out under FOI & DP Acts.

INTERNAL AUDIT

The South Eastern Health Board is committed to providing a quality Internal Audit Service. The role of Internal Audit is to undertake a detailed examination, evaluation and testing of Financial and Management Systems in order to ascertain the adequacy of the Board's internal control systems. The South Eastern Health Board in conjunction with the other Health Boards/ERHA have been working together to develop audit standards, audit manual and a risk based approach to auditing.

Key priorities for 2004 include:

Best practice dictates that a risk assessment should be undertaken to ensure that the risk areas are identified and agreed. The 2004 audit plan will be based on a risk assessment jointly undertaken by Managers and Internal Audit.

An Audit Committee will be established in 2004 under an External Chairperson. The Institute of Public Administration will provide induction training for the Audit Committee. The Audit Committee's primary role is to independently contribute to the Board's overall governance by ensuring that an effective internal control system is in place and operating. The primary responsibility for internal controls rests with the Management of the Board.

HUMAN RESOURCES (HR) DEPARTMENT

The role of the corporate HR function is to work with service managers to ensure that staff are managed effectively and in line with national and regional policies and to work with corporate management to monitor and evaluate the effectiveness of HR policies. The HR function also contributes at national level to the development of effective HR policies.

Key priorities for 2004 include:

- **Manage people effectively**

The corporate HR function will work with service managers, particularly in the area of manpower planning, to ensure that human resource issues are addressed in a service delivery context.

- **Improve the quality of working life**

Focus on the findings of the Well Being in the Workplace Survey conducted in 2003 and through the continued development a positive safety culture at all levels in the organisation.

- **Devise and implement best practice employment policies and procedures**

Ensuring the completion of the PPARS project plan for 2004 and the issuing of 'Best Practice Guidelines' and revised HR policies, which details the terms and conditions as set out in the PPARS Rule Book.

- **Develop the partnership approach further**

Mainstreaming the partnership approach to working and the development of mediation skills in conjunction with the Unions to support the introduction of Dignity at Work.

- **Invest in Training, Development and Education**

Identifying training, development and education needs relating to annual service plans, taking into account the recommendations of the HSNPF HR Group Report on training/lifelong learning and the introduction of a learning contract.

- **Promote Improved Employee and Industrial Relations**

The Regional Employee Relations Department will provide support, advice and guidance to regional and local management and represent the Board at third party level, thus ensuring that national agreements are implemented promptly.

- **Develop Performance Management**

Introduction of a system of performance measurement and feedback actions to achieve this objective will include the continued participation of the Acute Psychiatric Unit at St Luke's Hospital, Kilkenny in the national performance management pilot projects and the introduction of Personal Development Planning in 2004, which will be linked to the nationally agreed competency frameworks.

NURSING & MIDWIFERY PLANNING & DEVELOPMENT UNIT (NMPDU)

The activities of the NMPDU are classified under six strategic themes – leadership, workforce planning, practice development, continuing professional development, research and quality of service.

Submissions to the National Council for the Professional Development of Nursing and Midwifery largely have their origins at service level. To date, funding for 24 projects in the SEHB have been approved. Ten projects are currently in progress and will continue in 2004.

Full lists of the wide range of objectives for the department are contained within the main service plan.

REGIONAL LIBRARY SERVICES

The Board aims to ensure that all SEHB staff and students who are in training or on placement with the Board, have access to a comprehensive range of information for professional, educational and managerial purposes.

Key priorities for 2004 include:

Actions will include:

- Providing greater equity of access for all staff.
- Expand the functionality of the Unicorn computerised library system.
- Set up a library web page from which users can access medical and nursing databases, electronic journals, the regional library catalogue, and links to key health web sites.
- Establish a pilot user group to look at usage of, and access to, library services in Wexford.
- Provide regional reference, loan, enquiry, and research services – for personal callers at each library, and by post, telephone and email, this includes a service for staff who, due to work commitments, cannot come to the library themselves, or who need assistance with computer searching.
- Complete an assessment of the conservation needs of the Board's archives.
- Provide targeted computer training to specific groups of staff.
- Evaluation of library services.
- Accreditation requirements and national standards of library provision will be met.

Information Technology Department

A summary of the key actions planned for 2004 is as follows: -

- Provide sufficient support and maintenance services to ensure that all IT systems continue functioning satisfactorily, including upgrades to various systems.
- Complete the process of deploying Microsoft Windows 2000 Server and the full use of Microsoft Active Directory across the Board.
- Implement the new National Hospital Information System at St. Luke's Hospital, Kilkenny, and prepare detailed plans for its extension to other SEHB hospitals in 2005.
- Progress the implementation of PPARS to ensure completion in the SEHB by mid-2005.
- To participate as required in the National Financial Information Systems Project.
- To commence implementation of the interim Child Care System and the new IT systems that are being provided nationally for the Clinical Indemnity Scheme and NDP Expenditure Reporting.
- To complete the implementations of various projects that were started in 2003, including Laboratory, Pharmacy and GP Electronic Links.
- To participate in the ongoing HeBE-sponsored GP Messaging Project.
- To participate in the National Project for implementation of the new European Health Insurance Card.
- To provide appropriate IT support for the development of the Cashel Primary Care Centre.
- To continue work on the implementation of the formalised Information Security Management System.
- To support the full implementation across the SEHB of the new National Civil Registration System.
- To procure and implement a new IT system to support the introduction of Flexitime across the Board
- To procure and implement a new IT system for Nursing Homes Registrations/Subventions

PUBLIC HEALTH DEPARTMENT

Population Health

The National Health Strategy 'Quality and Fairness a Health System for You' (2001), and the Chief Medical Officer's Report (Population Health) emphasised the role of population health in the health service. In the South Eastern Health Board this function has been undertaken by the Department of Public Health. The key themes for objectives under population health in 2004 include

- Health information
- Infectious Disease
- Health Protection
- Health Promotion
- Social Inclusion and Inequalities
- Health Service Planning

The full list of objectives is contained within the Service Plan.

Key Issues

Implementation of the new infectious diseases regulations is a major new area of work for the Public Health Department and may displace other planned work as the implications of new legislation are clarified. Large infectious disease, vaccination or environmental incidents, which may occur unexpectedly, will disrupt this planned schedule.

Cardiovascular Disease Strategy

'Building Healthier Hearts' was launched in 2002 as a five year strategy to improve cardiovascular health and for the development of Cardiac Services. Considerable advances in service development have been achieved to date in the South East.

Key Objectives for 2004

- Health Promotion
To combat both primary school and secondary school childhood obesity.
To decrease the prevalence of smoking.
- Primary Care
To evaluate and continue working on the national pilot project 'Heartwatch', in the secondary prevention of modifiable risk factors, in those individuals with established heart disease.
- Pre-Hospital
To continue training frontline staff to high competency levels and maintain this level of expertise with re-training as required.
- Hospital Services
The urgent need for the provision of regional cardiac catheterisation capabilities is reinforced.
To ensure that all heart failure patients are managed appropriately with the establishment of beta-blocker and heart failure clinics in the four acute hospitals.

Cardiac Rehabilitation

All four phases of cardiac rehabilitation will be available.
The establishment of a specifically designed phase III of cardiac rehabilitation for Heart Failure patients.

Information systems, audit and research
Full implementation and integration of the TOMCAT cardiology information management system.
The establishment of a regional resuscitation database.

Finance

The Board will have an increased involvement in the national Financial Information Systems Project and Team, which will include working with Business Implementation Partners in project preparation, preparation of specification for system configuration and roll out to a pilot site before year end.

The preparation for the implementation (in 2005) of national standard PPARS System will continue in 2004. This process will require inter alia the rationalisation of the existing pay group structure.

The review of the Board's financial policies and regulations will be finalised and full implementation of the Local Finance Unit concept, across all Hospitals and Community Care areas, will be achieved.

TECHNICAL SERVICES / CAPITAL DEVELOPMENTS.

The purpose of the Technical Services Department is to provide professional technical advice to the Chief Executive Officer and the Management Team, on all matters relating to the physical resources of the Health Board, including the procurement and management of the latest developments in medical equipment and facilities. The department also provides the professional technical advice and project management on the Capital Investment programme, which amounted to approximately €22 m, in 2003. The department also manages a design office, which provides the professional services for the design, project management and implementation of minor capital projects.

Key Issues for the Year Ahead

The advancement of the National Development Capital Programme is a primary objective but is dependent on capital funding being provided by DOH&C.

The commencement of an environmental management programme by the engagement of an environmental scientist and implementation of a priority programme on water quality.

CAPITAL PROJECTS

A full list of all of the capital projects to be undertaken in 2004 are listed in the Service Plan along with key developments that the SEHB is seeking funding and approval from the Department of Health and Children.

Fire Safety

- It is intended to increase the number of drills to in excess of 250 and attendance level to over 3000.
- To carry out inspection/risk assessment in a more formal manner with an annual report for each building, and twice annual report for each high risk area such as a Hospital, Residential Care Building.
- Continue the work of preparing fire evacuation plans.

Regional Materials Management Service

The Regional Materials Management Service is responsible for the development of the Board's procurement and logistics functions, consistent with South Eastern Health Board's policy and strategy and the Health Sector and Government procurement strategies.

The Board's efforts during the current year, will concentrate on achieving sustainable value for money through the development of the Board's procurement organisation and the further development of its internal logistics and customer support services.

This will involve closer co-ordination of the Board's purchasing activities for consumable products and services, equipment and also exploring the benefits to Voluntary Bodies availing of the Board's contracts. Many categories of products will in future be contracted at Health Sector Level or National Government Contract level. The Regional Materials Management service will support the establishment and operation of the Health Sector and National purchasing agencies.

The Community Asset Management Service successfully piloted in Carlow/Kilkenny, will be established on a regional basis. This will greatly improve access and reduce waiting times across the South Eastern Health Board area clients requiring aids and appliances.

The other major activities in the 2004 Service Plan concern developing the Board's purchase to pay business processes and systems to enable efficient implementation of SAP ERPS (Enterprise Resource Planning System) and supporting the newly established Business Efficiency Unit in value analysis activities and procurement advice.

REGIONAL MEDICAL RECORDS PROJECT

Aims And Objectives For 2004

- Develop and implement regional policy in relation to:
 - Chart retention.
 - Temporary charts.
 - Chart security and access.
 - Culling and secondary storage.
 - Chart retention.
- To establish a Community Care based project concerning 'Home Based Records'.
- To investigate issues regarding secondary storage and to recommend solutions.
- To provide manual handling training for Medical Records Staff.
- To standardise the chart numbering systems regionally.
- Contributing to the HeBE National Medical Records Management Project.
- Work closely with HISP on the introduction of an electronic Chart Tracking system in St Luke's Hospital, Kilkenny.

Key activity/performance indicators will be developed specifically in relation to medical records management.

Finance Plan 2004

1. Letter of Determination 2004 provides for:

- A level of expenditure of €708.592 m in 2004
- A revised level of expenditure of €679.832 m for 2003

The following table sets out the computation of these figures:

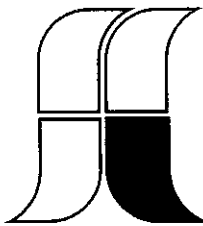
	€ m
Original Determination 2003	629.959
Additional Allocations 2003	49.873
Revised Determination 2003	679.832
Less Once Off in 2003	16.030
Base 2004	661.541
Additional Funding 2004	44.790
Level of Determination 2004	708.592

2. The net additional funding provided in 2004 of €44.790m may be summarised as follows (with corresponding 2003 figures for comparison):

	2004 €m	2003 €m
(i) Service Development		
Community Care	3.364	5.905
General Hospitals	2.059	10.282
Special Hospitals	0.375	3.331
Central & Regional Services	0.324	1.471
Service Developments Total	6.122	20.989
(ii) Pay Awards & Non Pay Funding	47.868	22.347
Sub Total	53.990	43.336
(iii) Less Deductions	9.200	8.557
(iv) Additional Funding (Net)	44.790	34.779

3. The Board's Finance Plan for 2004 reflects the above figures and provides for:

- 2003 planned level of service to be maintained.
- 2003 approved level of employment to be continued.
- Core service budget difficulties in 2003, which cannot be avoided in 2004 being funded.
- Additional funding made in 2004 Letter of Determination being available plus the continuation, at a reduced level, of savings arising from delayed developments and unfilled posts.
- Target set for value for money (VFM) savings requirement being achieved and discretionary areas of expenditure being curtailed.
- Contingency fund of €6 m being created and available to meet unforeseen and unavoidable service and cost pressures.
- Budget 2004 being within level of funding provided.



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