

Ireland 2040

National Planning Framework

**Submission by
UL Hospitals Group
30th March 2017**



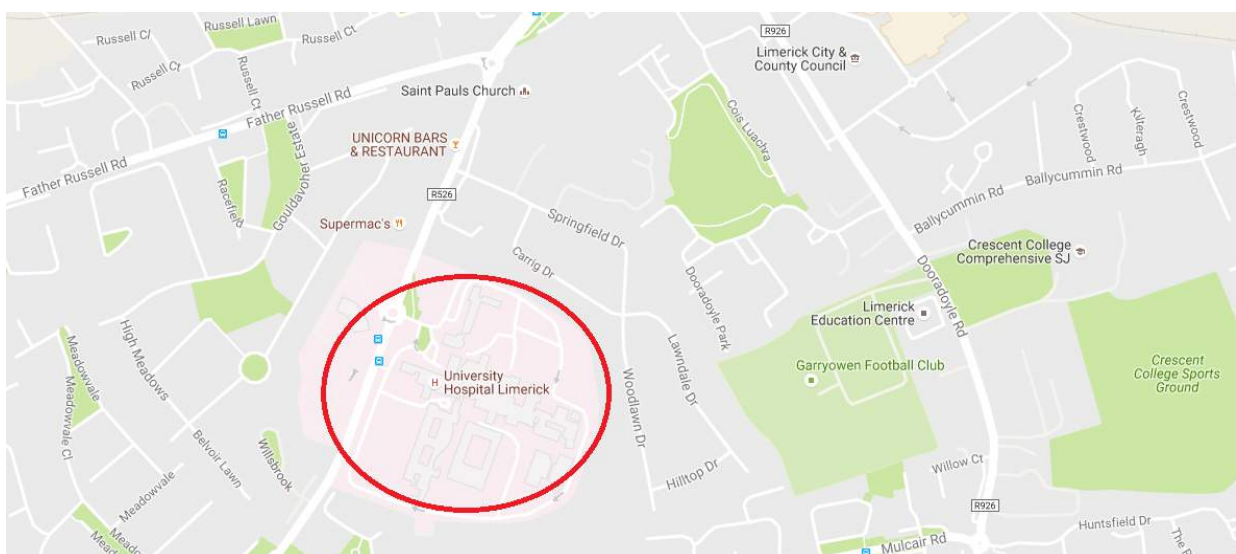
1. Background

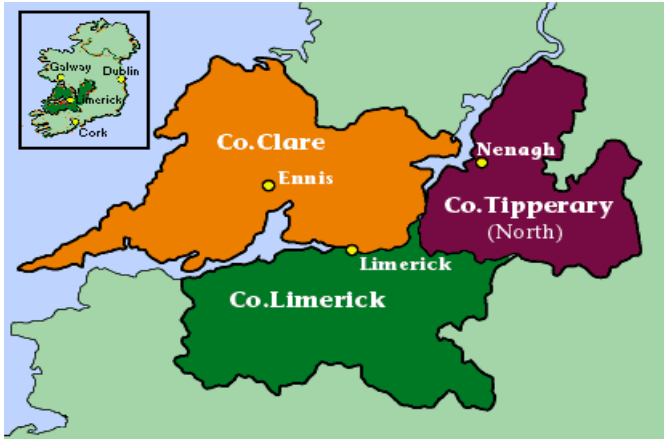
The state currently provides health, personal and social services to approximately 385,000 people in the Mid-West region which comprises Limerick City and County, North Tipperary and County Clare (former Mid-Western Health Board area). The area is substantially rural, covering 3,000 sq. miles with Limerick City being the main urban population centre.

Acute hospital services in Ireland are organised into Hospital Groups. The Group Chief Executive of each Hospital Group currently reports to the HSE National Director for Acute Services and is accountable for their Hospital Groups planning and performance under the HSE Accountability Framework.

Acute Services in the Mid-West are provided via the UL Hospitals Group. UL Hospitals is governed by an interim Board of Directors, an Executive Management team led by the Chief Executive and supported by 5 Directorates across the Group. UL Hospitals, with over 3,000 direct employees provides these acute services from various sites throughout the mid-west such as Ennis (Model 2), Nenagh (Model 2) & St John's Hospital (Model 2s) and also the University Maternity Hospital and Croom Orthopaedic Hospital along with the Group's largest acute hospital, University Hospital Limerick located in Dooradoyle on the periphery of Limerick City.

The Report of the Acute Medicine Programme (2010) classified all acute Hospitals in Ireland under generic models that describe in precise detail what services can safely be provided at each site. University Hospital Limerick is the Model 4 hospital for the region, one of only three such Model 4 hospitals outside of the Dublin area and provides major surgery, cancer treatment and care, emergency department services, as well as a range of other medical, diagnostic and therapy services. It is where all critical care services are located in addition to a 24/7/365 Emergency Department and it is a designated cancer centre.





University Hospital Limerick, Dooradoyle

As the main acute hospital site for the Mid-West, UHL currently serves a catchment area of approximately 385,000 people. This includes Limerick City & County, Clare and North Tipperary

Each of the six clinical sites making up ULHG has a proud history, has a track record of effectively meeting the needs of its particular population and has considerable local community support. The six hospitals were previously grouped together under the old Mid-Western Health Board structure, so therefore the notion of an alliance of clinical sites is nothing new to this region. However, significant reconfiguration of acute services has been successfully delivered in recent years and road networks have improved to such an extent that all of the clinical sites are now within relatively easy reach of one another, facilitating patient and staff flow so as to ensure that appropriate and safe care is provided to the right patients at the appropriate site.

The reconfiguration of acute services in the mid-west has been quickly followed by the establishment of Hospital Groups and the development of a Strategic Plan for UL Hospitals and the mid-west to guide the growth and improvement of services. There has been a real focus on developing a functioning single hospital across multiple sites, providing a quality, safe and efficient service, developing ICT systems, promoting clinical education and research in association with the University of Limerick and prioritising capital investment as a critical enabler of these key goals.

The recent government report "Securing the Future of Smaller Hospitals: A framework for Development", published in February 2013 is being fully embraced in the mid-west with a strong role envisaged for our smaller hospital providing more services into the future.

The change in medical technology and patient expectation over the last number of decades has resulted in a greater reliance on hospital care particularly in the final stages of a patient's illness. Diagnostics have become more sophisticated and treatment of acute illness more effective. The result is that the family practitioner is no longer able to manage all the episodes of care which they would have in the past.

Models of care, technology working practices and incentives need to be used to reverse this trend.

The concept is that the modern major acute hospital should be predominantly composed of (i) emergency and critical care departments for the acutely ill patients who require those services and (ii) specialist services requiring in-patient care. Most other patients can be treated in primary care, outpatient and day care (and occasionally 5-day) settings. These needs require careful planning and implementation as has been the case in the reconfiguration of services in our region

Enhancing and developing care in the community through earlier intervention will require support from acute hospitals e.g. hospital in the home.

Focus is required on the elderly population due to projected growth in over 65's.

As the Mid-West Community Health Organisation and the UL Hospitals Group uniquely share the same geographical area, joint programmes of activity are facilitated in the mid-west as we strive to achieve maximum efficiencies and effectiveness from a whole healthcare service delivery perspective.

eHealth Ireland

The national EHR Programme, and the Individual Health Identifier as a key enabler, represents a significant transformation in the use of technology and data to underpin effective and efficient care. The UL Hospitals Group believe these eHealth Ireland programmes will result in improved population wellbeing, health service efficiencies and economic opportunity through the use of technology-enabled solutions.

The role and development of ICT is central to a reimbursement strategy. ICT in the statutory hospital system has been underinvested in for a very long number of years.

Health & Wellbeing

In line with the Healthy Ireland Strategy, there is a need for resources to further develop Health & Wellbeing initiatives for staff and the public which will have positive impact for staff morale, service delivery, mental health and hospital avoidance.

Future of Healthcare Committee

The future development of the UL Hospitals Group will need to be viewed in the context of the recommendations from the Future of Healthcare Committee who are due to publish their findings in April 2017 and will be setting out a 10 year plan for healthcare delivery in Ireland. The Committee are focusing on delivering a plan that addresses the severe pressures on the Irish health service, the unacceptable waiting times that arise for public patients, and the perception of poor outcomes relative to cost. The need for consensus at political level on the health service funding model based on population health needs is a key focus as is the desire to establish a universal single tier service where patients are treated on the basis of health need rather than on ability to pay. To maintain health and well-being and build a better health service, we need to examine some of the operating assumptions on which health policy and health services are based.

To achieve the best health outcomes and value for money we need to re-orientate the model of care towards primary and community care where the majority of people's health needs should be met locally. Acutes services will also need to continue to evolve to deliver the high class healthcare that future generations will require and demand. Adequate infrastructure and healthcare equipment are critical to the delivery of safe modern health and social care services. In this context the capital budget for Health has not been restored to the allocation levels prior to 2008 notwithstanding the fact that there are also additionally a significant number of major government priority projects identified for Health. There is therefore an urgent need for increased capital funding in the Health Sector in the short to medium term and this will also need to be addressed as part of the overall 10 year plan.

2. Future Vision for the Mid-West Limerick City Region

The guiding principal is that the National Planning Framework provides a unique opportunity to plan now for a better future for all by firstly setting out a vision for our country which should include effective regional development, playing to the strengths of each area and by then considering the types of infrastructure that we will need in the future to achieve that vision. The plan cannot be a continuation of “business as usual” and will need real focus once adopted to drive through the changes and investment projects need to successfully deliver it.

The local authorities of Clare and Tipperary County Councils and Limerick City and County Council together with Shannon Group, University of Limerick, Limerick Institute of Technology, Shannon Foynes Port Company and the Mid West Action Plan for Jobs, working in collaboration have set out a clear vision that the Mid West Limerick City region, building on the strong governance structures that already exist can in the future deliver much more for the country, both nationally and internationally through becoming a dynamic Tier 2 City Region, identified in the NPF as a focus for growth which can exert critical mass leverage to contribute towards national development and competitiveness.

A key part of the vision is the ambition of the mid-west region to become a global centre of economic activity with a population of 800,000 by 2040 and the joint submission on behalf of these six bodies demonstrates how the region is effectively structured to justify that ambition becoming a core element of the overall national plan for Ireland 2040.

At UL Hospitals Group we are committed to delivering high class healthcare and with the University of Limerick as our Academic Partner feel we are well on our way to achieving our stated aim of becoming one of Ireland’s top three university teaching hospitals by 2018. We believe that the significant reform agenda delivered in healthcare services in the mid-west in the last decade and the unprecedented scale and pace of our ongoing change programme across all our sites means that we now have the core service elements in place to be able to effectively and efficiently respond to such population growth with careful planning & investment support in future years. We have also developed strong working relationships with all our partners in the HSE and the Irish Health Services in general and fully understand the benefits of collaborative working to drive real change and achieve success.

UL Hospitals Group currently serves the smallest population of any of the hospital groups yet is probably further advanced in terms of reforming service delivery than many of the larger hospital groups. It is now ideally placed to grow efficiently and effectively in accordance with emerging future healthcare delivery models working with the Community Healthcare Organisation on the same geographical basis to provide the high quality of healthcare that will be demanded by future generations’ at best overall value in terms of cost. Recent service developments have been based upon very strategic priorities for the future and the recent phased capital investment

at UL Hospitals Group has been fully aligned with our service needs and our service development plans.

The result of this careful planning means that the hospital group has been growing over the past number of years and we have added important facilities to our UHL campus including a state of the art Critical Care Unit, a 24 hour cardiology service, a Cystic Fibrosis Inpatient and Outpatient Unit, new Breast Unit, Acute Inpatient Stroke Unit, new Dialysis Unit and our new Emergency Department which is due to open shortly. Our new Clinical Education & Research Centre, a joint initiative with the University of Limerick now accommodates and supports the educational training and research needs of both the UL Hospitals Group clinical community and the UL Graduate Entry Medical School, the School of Nursing & Midwifery and the School of Clinical Therapies at UL.

UL Hospitals Group has a very clear vision for the continued phased development of its infrastructure and services across all sites based upon strategies developed by the hospital group, national clinical programmes and the national services directorates. A capital investment strategy in healthcare infrastructure must form a key component of any investment plan in the Mid-West Limerick City Region if the region is to meet its potential and become a tier 2 city region.

The new vision for Maternity Services in Ireland is a good example of what is needed overall for health as a key part of the Ireland 2040 plan. With the launch of Ireland's first National Maternity Strategy by the Minister for Health on 27th January 2016 the required maternity services vision is now in place and the focus needs to be on delivering the strategy.

1.2 VISION

Our vision for maternity services is an Ireland where:

“Women and babies have access to safe, high quality care in a setting that is most appropriate to their needs; women and families are placed at the centre of all services, and are treated with dignity, respect and compassion; parents are supported before, during and after pregnancy to allow them give their child the best possible start in life.”

To realise this vision, four strategic priorities have been identified:

1. A Health and Wellbeing approach is adopted to ensure that babies get the best start in life. Mothers and families are supported and empowered to improve their own health and wellbeing;
2. Women have access to safe, high quality, nationally consistent, woman-centred maternity care;
3. Pregnancy and birth is recognised as a normal physiological process, and insofar as it is safe to do so, a woman's choice is facilitated;
4. Maternity services are appropriately resourced, underpinned by strong and effective leadership, management and governance arrangements, and delivered by a skilled and competent workforce, in partnership with women.

The most significant healthcare infrastructural investment required and planned for the mid west arises from the government decision to relocate the University Maternity Hospital from its city centre location to the University Hospital Limerick campus at Dooradoyle. The current multi-site service has long been identified as a clinical hazard that needs to be resolved.

Whilst this decision is referred to in the government's capital investment plan "Building on Recovery: Infrastructure and Capital Investment 2016 – 2021" as part of the programme for modernising healthcare provision, specific seed capital funding would need to be immediately allocated in the current Government Mid-Term review in order to progress the planning process and subsequently the enabling works required to prepare the campus for the ultimate delivery of the new maternity facility. If the State is serious about developing increased population centres outside of the greater Dublin region then strategic projects to develop key infrastructure in targeted regional centres will need to be given national priority.



(Image of RELOCATION OF UNIVERSITY MATERNITY HOSPITAL LIMERICK to new site on campus of adult teaching hospital, University Hospital Limerick, Dooradoyle)

It is nationally recognised that part of what is necessary for the ongoing growth in the mid-west is to be able to attract international technology talent. In order to attract, and more importantly retain, that international talent, Ireland and the mid-west specifically must be able to offer the standards of family healthcare that specialist highly skilled workers from the US, the UK, the EU, Scandinavia, Australia and New Zealand will expect to be able to access as a matter of course.

Currently, the mid-west cannot offer this standard in maternity care provision for example. The Association for Improvements in the Maternity Services (AIMS) Ireland have publicly stated that they have written to two separate government departments, the Department of Health, and the Department of Jobs, Enterprise and Innovation in order to highlight a trend in women contacting them who have moved to Ireland from these areas for highly skilled jobs for either themselves or their partners and have informed AIMS Ireland that they are refusing to stay in Ireland as a result of their experiences in the Irish maternity services.

It is clear that a key part of attracting and retaining the international talent and the business leaders necessary to aid continued growth in enterprise and technology development in the greater mid-west area is the standard of healthcare provision we can offer; with the delivery of the proposed new maternity hospital in Limerick, the available standard in maternity and women's health services would be greatly increased.

Further, the expected impact of Brexit on the greater Limerick region could potentially be a positive one; the port at Foynes and the corridor to Limerick city along the N69 has been highlighted as a specific one for continued growth, noted as it is by the EU as a "core European port" and already achieving business growth year on year exceeding that of the height of the boom years. Limerick city centre and the National Technology Park at Castletroy are seeing ongoing investment and job development from multinational technology companies in particular; Dell, J&J, Uber, Analog Devices, Redfaire and others are among the many companies, and indeed many local start-ups, creating a much more vibrant jobs market in the greater Limerick area.

High quality healthcare will be important if the region is to achieve its real potential. While the overall healthcare strategy will need to be based upon the development of primary care, ongoing phased investment in our acute services such as the planned prioritised bed capacity increase at University Hospital Limerick will also be needed to meet the population's needs. This need to increase bed capacity at University Hospital Limerick is now generally acknowledged and plans are being progressed to deliver an additional 96 inpatient beds in the short term subject to funding being made available as a result of the current mid-term capital review. We also have longer term plans for addressing ward quality by providing further new inpatient beds when the entire new block facing St Nessian's Road is ultimately completed.

The plan for Ireland in 2040 will need to ensure that our healthcare infrastructure is of commensurate standard in the Mid West Limerick City Region if the region is to complement the country's capital city Dublin and genuinely become a global centre of economic activity. Expansion of cancer services nationally is another example of the challenges facing the Irish Health Service. We have set aside the required expansion space on our model 4 hospital campus for potential development of replacement facilities at some point in the future and no doubt there will be many other such initiatives to be considered for all our hospital sites along the road to the Ireland of 2040.

3. Conclusion

UL Hospitals Group acknowledges that there is a very strong rationale for significantly developing the potential of the mid-west region by 2040 as a key component of the National Planning Framework and welcomes the opportunity to make this submission both in support of the plan for our region and to highlight the need for future healthcare planning to be included in the process.

There has been significant progress and investment in key acute healthcare services in the mid-west in recent times. We now have a very significant and strategic capital investment programme scoped and already put forward via the overall HSE input into the Department of Health's submission to the Department of Public Expenditure and Reform as part of the government's current mid-term capital review.

We acknowledge that all our ambitions cannot be achieved immediately. However we have the plan and the vision and with continued careful planning & ongoing investment support in both infrastructure and human capital by the State over the next 20 years the hospital group is well placed to build on the significant achievements to date and to successfully enable and support the collaborate vision of the Mid West Limerick City Region for 2040. We look forward to playing our part in developing both our infrastructure and our services and working with all stakeholders toward successfully delivering the overall plan for Ireland 2040 and the Mid West Limerick City Region in particular.