

**Briefing note for Department of Health  
15<sup>th</sup> April 2024**

**Contents**

<b>Overview – UL Hospitals Group</b>	<b>2</b>
<b>Mid West population profile</b>	<b>2</b>
<b>Inpatient Bed Capacity</b>	<b>4</b>
<b>Staffing levels UL Hospitals Group</b>	<b>4</b>
<b>Urgent and Emergency Care</b>	<b>4</b>
<b>Medical Assessment Units</b>	<b>5</b>
<b>Injury Units</b>	<b>6</b>
<b>Capacity Options</b>	<b>7</b>
<b>Update on additional measures of support</b>	<b>8</b>
<b>Nenagh CNU</b>	<b>9</b>
<b>Waiting Lists update</b>	<b>10</b>
<b>Scheduled Care deferrals</b>	<b>10</b>
<b>Ennis Dialysis Unit</b>	<b>11</b>
<b>Medium /Longer term developments</b>	<b>12</b>

## **Overview – UL Hospitals Group**

UL Hospitals Group (ULHG) comprises of six clinical sites functioning collectively as a single hospital system providing a range of acute inpatient, day case and outpatient services to a population of 403K people from Clare, North Tipperary and Limerick.

Services are delivered at six different hospitals across the three counties: University Hospital Limerick (UHL), Ennis Hospital, Nenagh Hospital, St John's Hospital (voluntary), Croom Orthopaedic Hospital and University Maternity Hospital Limerick (UMHL).

UHL is the only Model 4 Hospital in the Group and provides major surgery, cancer care treatment and emergency care in the region, as well as a range of other medical, diagnostic and therapy services. There are 535 beds available at UHL of which 51 are paediatric beds.

All critical care services are located at UHL and it has one of the busiest Emergency Departments in Ireland with presentations totalling 80,113 in 2023, the busiest year to date.

The Model 2 Hospitals, Ennis and Nenagh provide inpatient medical beds, medical assessment units, injury units and day surgery. St. John's is a voluntary Model 2 hospital and provides the same services as Ennis and Nenagh along with providing 5 day surgery.

Model 2 hospitals are governed by strict criteria based on the Small Hospitals Framework document which defines the centres as less complex care with the removal of acute surgery, closure of critical care and emergency departments in line with clinical safety guidelines.

UMHL and Croom Orthopaedic Hospitals are specialty hospitals providing, respectively, obstetric/neonatal and orthopaedic care.

Recent mortality and morbidity statistics from the National Audit of Hospital Mortality Report have reflected safe care since the framework was implemented.

## **Mid West population profile**

The total population in the HSE Mid West increased by 7.3% in 2022 to 413,059. There are eight Community Health Networks (CHNs), with populations ranging in size from 36,000 (East Clare) to 77,000 (West Clare). Our population is older than the national average. The 75-79 year age group increased by almost 40% between 2016 and 2022 and the 85 years and older age group increased by 25%. Conversely, the largest decrease occurred in the 0-4 year age group. These changes in age structure have increased the dependent population, which now comprises over one-third (36%) of the population. Our ability to deliver services in a saturated way is complicated by the fact that age structures across the region, particularly the number of people in age-dependent categories, differ significantly between CHNs.

The population is more socioeconomically deprived than the national average. In 2022, 24% of the population in Limerick were considered disadvantaged, very disadvantaged or

extremely disadvantaged; 21% in Clare; and 23% in North Tipperary. Considerable variation in deprivation levels are seen between CHNs across the region. Two CHNs with the greatest proportion of people who are very or extremely disadvantaged are South Limerick City (22.5%) and North Limerick City (17.1%) and the two CHNs with the lowest are East Limerick (2.5%) and South Limerick (3.9%). Census 2022 estimated the White Irish Traveller population as 0.6% of the total population and is four times the national average in West Limerick CHN.

Self-perceived health status provides a well-validated and widely used measure of actual health. Self-reported health in the region is lower than national levels. This is particularly pronounced in South Limerick City CHN. The national (21.5%) and Mid West (22.2%) proportions of people with a disability (recorded as "at least one long-lasting condition or difficulty to any extent") are similar. Proportions are highest in North and South Limerick City CHNs which are also higher than the national average. Third level education levels are slightly lower than national averages, being significantly lower in South Limerick City.

Improving access to timely Urgent & Emergency Care services is a key priority for the HSE Mid West. We recognise the high number of attendances to our Emergency Department is based on a number of factors, not least sociodemographic factors, and as such many more improvements are required to meet our population needs, particularly the urgent requirement to lean in on our community services to deliver care in the right place at the right time in a way that is accessible for the population.

Similar to the rest of the country, HSE Mid West has experienced increased attendances at our Emergency Department (ED) and Injury Units (IUs). During 2023; 80,113 patients attended our ED and over 40,000 people attended our IUs. Based on ED presentations and those who required admission to hospital, we have an abundance of evidence to support the need to urgently reconfigure our community services to meet urgent care needs across our region.

This reconfiguration will be supported by our in depth population health and ED demand analysis. Nationally Urgent and Emergency Care demands have increased by 13% YTD versus 2023. In contrast, UHL ED attendances have increased by 14% when compared to the same period 2023. Attendances to the ED by patients over the age of 75 ranks in the median range when compared to other Model 4 hospitals, however, admissions for this cohort is the highest in the country. Year to date, our average discharges are 59 per day, which is in line with weekday performance across other model 4 hospitals, however, we are significantly below all other model 4 hospitals in respect of our weekend discharge performance. Our PET performance is third best for a Model 4 hospital in the country, an average of 8.4 hours and median 5.4 hours.

Data in relation to each CHN can be accessed here:

<https://www.hse.ie/eng/about/who/healthwellbeing/knowledge-management/population-profiling-maps.html>

### Inpatient Bed Capacity

There are 872 inpatient beds across UL Hospitals Group.

Please see below for a breakdown:

Hospital site	Bed Capacity
University Hospital Limerick	535 (of which 51 are Paediatric beds and 28 critical care)
St. John's Hospital	89
Ennis Hospital	50
Nenagh Hospital	52
Croom Orthopaedic Hospital	44
University Maternity Hospital Limerick	83 inpatient beds 19 cots in the Neonatal Unit

### Staffing levels UL Hospitals Group

At the end of January 2024, there were a total of 5,769 WTE staff employed at UL Hospitals Group.

### WTE Position for University Hospital Limerick

Month/Year	WTE
Jan 2024	3,997
Dec 2022	3,641
Dec 2021	3,560
Dec 2020	3,122
Dec 2019	2,792

### Urgent and Emergency Care

UHL has one of the busiest Emergency Departments in Ireland with presentations totalling 80,113 in 2023, the busiest year to date.

During the first quarter of this year there have been 21,298 presentations to the Emergency Department at UHL, representing a 14% increase on the same period last year.

In 2023, UHL had the second best admitted PET performance of any model 4 in the country with an average of 12.6 hrs and median of 7.9hrs.

In the YTD 2024, the median ED PET for all patients at UHL was 5.4 hours, below the national average of 5.85 hours.

UL Hospitals Group and HSE Mid West Community Healthcare have developed an integrated unscheduled and emergency care plan for the Mid West region. The first phase of this plan focuses on capitalising on existing pathways.

Over the past year we have increased ED staffing and enhanced alternative care pathways to reduce demand on the department and better facilitate patient flow. These have included but are not limited to the following:

- **ED admission-avoidance for over-75s:** The Geriatric Emergency Medicine (GEM) unit at UHL recently expanded to 9 treatment bays and to 24-hour operations during weekdays. This unit assesses elderly patients in ED with a view to avoiding unnecessary admission to hospital. This unit is open 7 days a week. Data for the first quarter of this year shows of the 617 patients seen, 54% of patients were discharged home, 10% were transferred to a model 2 hospital and 36% were admitted to UHL.
- **Pathfinder:** A collaborative ED-avoidance programme run by the Group's allied health staff and the National Ambulance Service (NAS). Pathfinder aims to deliver safe alternative care at home for over-65s in the Mid West region. Data for the first quarter of this year shows of the 137 patients assessed by the regional Pathfinder team, 64% were supported at home without the need to go to the ED.
- **Alternative Pre-Hospital Pathway:** A new collaboration between UL Hospitals Group and the National Ambulance Service sees definitive care provided in the community by emergency medicine doctors and paramedics to patients who call 999/112. This reduces the number of ambulances bringing patients directly to the ED. Data for the first quarter of this year shows that this service saw 212 patients. Of these, 51% of patients were seen via an alternative care pathway and 49% were conveyed to the ED at UHL.
- **Safer Staffing:** Safer Staffing levels for ED nursing staff have been reviewed and national approval was received to recruit 21.5 WTE additional staff nurses. Recruitment for these posts is now complete with 21.5 staff nurses in post since September 2023. Safer Staffing has also been implemented on medical and surgical wards at UHL.
- In the past year, an additional two consultants in emergency medicine have been recruited for the Emergency Department in addition to an extra 20 NCHDs (registrars and SHOs)

### Medical Assessment Units

The expanded Medical Assessment Unit services across UL Hospitals Group are making a significant and positive impact on delivering timely care to thousands of patients referred by their GPs to hospital for urgent medical attention.

All three Mid West MAUs are currently open from 8am-8pm. We are working with all stakeholders on planning for the continued expansion of our MAU services including a further extension of opening hours (please see further detail below).

MAUs provide diagnosis and treatment for patients referred with a wide variety of medical conditions, including chest infections, COPD (chronic obstructive pulmonary disease), pneumonia, urinary tract infections, fainting episodes, clots in the leg, and anaemia. Patients

are reviewed by a senior clinician and may require x-rays, blood tests, scans or further diagnostic imaging.

In 2023, 15,006 patients were referred to our Medical Assessment Units in Ennis, Nenagh and St John's, representing an 18% increase on 2022. Please see below the number of attendances at our MAUs between 2020-2023:

<b>MAU attendances</b>				
	<b>2020</b>	<b>2021</b>	<b>2022</b>	<b>2023</b>
<b>Ennis MAU</b>	6,228	6,791	7,735	7,397
<b>Nenagh MAU</b>	1,904	1,303	2,470	4,146
<b>St John's MAU</b>	1,960	2,477	2,478	3,463
<b>Total</b>	<b>10,092</b>	<b>10,571</b>	<b>12,683</b>	<b>15,006</b>

During the first quarter of this year 4,091 patients attended our three MAUs, representing a 9% increase on the same period last year.

### **Injury Units**

Our Injury Units in St John's Hospital, Ennis Hospital and Nenagh Hospital are open every day for injuries in adults and children aged 5 and upwards.

More than one in three of all unscheduled care presentations to our services are now taking place at our Injury Units. All three are achieving the national targets of patient experience times of under two hours.

In 2023, 46,702 patients attended our Injury Units in Ennis, Nenagh and St John's, representing a 6% increase on 2022 and since 2019 attendances have grown by 40% - see below:

	<b>2019</b>	<b>2022</b>	<b>2023</b>
<b>Ennis Hospital</b>	<b>11,517</b>	<b>13,251</b>	<b>15,245</b>
<b>St John's Hospital</b>	<b>11,534</b>	<b>17,187</b>	<b>17,583</b>
<b>Nenagh Hospital</b>	<b>10,215</b>	<b>13,566</b>	<b>13,876</b>
<b>Annual Group Total</b>	<b>33,266</b>	<b>44,004</b>	<b>46,704</b>

During the first quarter of this year 11,020 patients attended our three Injury Units, representing a 6% increase on the same period last year.



## **Capacity Options**

Additional bed capacity is a key priority for UL Hospitals Group.

Details of current and planned projects which will help address capacity shortages and improve patient flow in the coming years include:

### **96-bed block**

Work commenced on the first 96-bed ward block at UHL in September 2022. It is currently envisaged that the construction phase will be complete by Q1 2025. Once handed over by the contractors, the new build will need to be equipped and commissioned and staff trained following the completion of a recruitment campaign. We anticipate that this much-needed additional bed capacity for the region will become operational in mid-2025.

We are pleased to confirm that this bed block will provide 71 new beds and 25 replacement beds to the UHL bed stock next year. Recruitment for this bed block will commence in the near future to ensure immediate readiness in 2025.

### **Second 96-bed block**

Excavation works are due to begin in the coming weeks on the second 96 bed block and a design team will be appointed in the near future to complete the planning application. The construction phase of this bed block will be completed in two stages, and will be carried out directly adjacent to the 96-bed block currently under construction at UHL.

Subject to planning and procurement, it is envisaged this project will be delivered by 2027. This bed block will provide 96 new beds comprising of 48 medical beds and 48 surgical beds

### **Rapid build ward**

The HSE has submitted a planning application for a 16-bed rapid-build ward at University Hospital Limerick, a development that is part of the overall package measures recently outlined by the Minister of Health to manage high demand for emergency care at the hospital.

The development will provide for 16 single inpatient bedrooms, staff facilities, and car parking, as well as space for future medical use.

It is envisaged that this capacity will be available in advance of next winter's surge.

**Surgical Hub**

We are pleased to have recently lodged a planning application with Limerick City and County Council for the proposed surgical hub at Scoil Carmel in Limerick.

Surgical hubs are a key priority for the HSE and UL Hospitals Group in improving access for surgical patients and reducing waiting lists. These plans are aligned with the Programme for Government and key HSE policies including Sláintecare and the National Waiting List Action Plan.

Our planning application provides for two new operating theatres and two procedure rooms in a state-of-the-art development on the Scoil Carmel site. It is proposed that the new surgical hub will operate as a satellite of University Hospital Limerick with key staff moving between the sites.

A further information request has recently been issued by the planning authority in respect of the planning application for the site. There have also been a number of observations received by the planning authority in respect of the proposal. Additional information will be submitted in due course to the planning authority following consideration of the matters raised.

**Update on additional measures of support**

UL Hospitals Group welcomes the significant additional in-year investment announced by the Minister for Health Stephen Donnelly TD during his recent visit to University Hospital Limerick, representing an additional €160m in capital funding and €79m recurring revenue funding. Please see below progress to date on the additional measures announced:

- Safer Staffing will be extended to all wards in UHL with immediate sanction to commence recruitment.
- A change in the bed profile for the first 96 bed block increasing the number of additional beds from 48 to 71. We have approval to immediately commence recruitment for opening these beds in mid-2025.
- 16 additional beds in a rapid build ward are to be commissioned at UHL with this capacity to be available in advance of next winter's surge. We have received the go ahead to immediately commence recruitment for this ward.
- A further 20 permanent step-down transition and rehab beds will be procured in Clare.
- The procurement process is underway for the temporary operation of the 50-Bed Community Nursing Unit in Nenagh as a step down sub-acute and rehabilitation facility for one year until the first 96 bed block at UHL is opened.
- The opening hours of the region's three Medical Assessment Units at Nenagh, Ennis and St John's are to be extended to 24/7 on a phased basis.
- GP and Advanced Nurse Practitioner-on-the-door services for the ED in an effort to alleviate overcrowding and allow the ED staff to treat urgent and emergency patients in a more timely manner which has already commenced.



- A Social Inclusion integrated Hospital to Community Team that will tackle the demographic and social challenges which lead to over utilisation of hospital pathways.
- A CAMHS Paediatric Liaison Team to provide in reach into the paediatric wards to support children with mental health needs.
- Sanction to immediately recruit an additional 31 WTEs for Chronic Disease Management and ICPOP Teams

### **Nenagh CNU**

The HSE is seeking to support UL Hospitals Group by temporarily running the new Community Nursing Unit (CNU) in Nenagh as a step down sub-acute facility.

Nenagh CNU has capacity for 50 residents. An additional 65 WTEs are required to facilitate the opening of this facility as a CNU.

The additional 65 WTEs are now approved and a recruitment plan is under development. Initial indications indicate a timeline of approximately one year to recruit these staff.

On this basis, the REO decided to repurpose the facility in the interim pending HIQA registration and the recruitment of staff.

This temporary measure is intended to provide immediate services to elderly people in north Tipperary who have been identified for sub-acute and rehabilitation needs.

This unit will be used for a period of about one year as a step down sub-acute facility which will be run by a private provider with expertise in such services. A procurement process has commenced to identify a suitable provider in line with HSE procurement rules. The facility will be a collaborative partnership between the HSE and the successful provider.

It is intended that this arrangement will be reviewed within one year and that Nenagh CNU will open 12 – 18 months after the contract commences with the private provider. This interim use will greatly support the region pending the completion of the first of two new 96 bed blocks for UHL scheduled to be completed in early 2025.

The Mid-West Regional Executive Officer (REO) met with union representative bodies on the 19<sup>th</sup> & 21<sup>st</sup> March 2024, among the issues discussed was the interim arrangements for Nenagh CNU. The REO has directed the establishment of a HSE Mid West union forum, with representative bodies meeting regularly with members of Mid West Acute and Community Senior Leadership Teams. The first meeting of this engagement is due to take place on the 23<sup>rd</sup> April 2024.

### Waiting Lists update

ULHG met all waiting list targets as set out in the National Waiting List Action Plan 2023, the only Group to do so.

Waiting List	Target	ULHG Performance (December 2023)
<b>Outpatients</b>	90% of patients to be seen within 15 months with no patient waiting longer than 30 months	< 15 months – 93.5% < 30 months – 100%
<b>Inpatients</b>	90% of patients to be seen within 9 months for an inpatient or day case procedure	< 9 months – 93.6% < 18 months – 100%
<b>GI scopes</b>	95% of patients to be seen within 9 months	< 9 months – 100% < 18 months – 100%

Our outpatient waiting list reduced from 61K in January 2022 to 35K in December 2023. The vast majority of our patients are now waiting less than 24 months for an appointment and by the end of Q2 2024 we will have no patients waiting longer than 24 months for an appointment. In relation to surgical patients, no patient is waiting longer than 15 months and all our wait times in this category are in line with national targets.

### Scheduled Care deferrals

There have been some deferrals of scheduled elective activity since the beginning of the year. This measure is taken when UHL is at its highest state of escalation in order to create surge capacity to care for medically unwell patients.

Postponement of scheduled elective activity is a decision of last resort that no hospital wishes to make, and UL Hospitals Group regrets the impact that these deferrals have on our patients. Affected patients are contacted by our staff and rescheduled at the earliest opportunity possible.

Decisions to defer scheduled activity are not made lightly, especially in the cases of patients who have already faced long waits for treatment. We apologise to affected patients for any distress or inconvenience caused.

Please see below the number of procedures that have been deferred since the beginning of the year by hospital site up to the 24th March 2024:

Hospital site	Number of cancellations
University Hospital Limerick	239

St John's Hospital	149
Nenagh Hospital	143
Ennis Hospital	27
Croom Orthopaedic Hospital	44
<b>Total</b>	<b>602</b>

Despite these deferrals, 2,333 procedures went ahead as planned. Please see below for a breakdown up to the 24th March 2024:

Hospital site	Number of procedures that took place
University Hospital Limerick	465
St John's Hospital	517
Nenagh Hospital	383
Ennis Hospital	363
Croom Orthopaedic Hospital	605
<b>Total</b>	<b>2,333</b>

### Ennis Dialysis Unit

UL Hospitals Group is seeking to establish a haemodialysis service in Ennis. We envisage that this unit will be similar to the satellite centre already in place in the Fresenius Medical Care Centre, Limerick.

The tender process for the contracted satellite haemodialysis unit in Ennis is now complete and we have identified a supplier. HSE Mid West has identified funding to support the commencement of this vital service in the interim in 2025. As the contract value is in the region of €3m per annum and the total amount of the contract exceeds what can be approved locally, a number of steps to finalise the arrangements are ongoing.

Governance of this unit will be provided for by UL Hospitals Group with a designated Consultant Nephrologist from the Renal Unit at University Hospital Limerick providing the overall clinical governance.

The development of the unit in Ennis will allow patients to benefit from better quality of life by being able to avail of treatments closer to home. It will also help ease pressure on the Renal Department at University Hospital Limerick and on the satellite unit in the Fresenius Medical Care Centre, Limerick.

The tender specification document provides for four isolation rooms, a gowning area suitable for patients with blood-borne viral illnesses including Hepatitis B in line with national guidelines and would facilitate 1:1 and 1:2 nursing.

It is envisaged that the satellite facility will provide the following services:

- Consultant-directed medical care for chronic haemodialysis patients.
- Nurse-delivered / supervised haemodialysis delivery and care with regular consultant led reviews

- Regular dietetic review and support
- Other clinical supports as required, such as pharmacy services
- Administrative support

At present, patients from Co Clare are currently seen in the Renal Department at University Hospital Limerick or in our satellite centre located in the Fresenius Medical Care Centre, Limerick.

UL Hospitals Group is committed to working with all relevant stakeholders to ensure the delivery of this unit.

### **Medium /Longer term developments**

#### Maternity relocation/Capital Build

Funding has been secured for a Strategic Assessment Report and design of our new Maternity Hospital which is planned to be relocated to the UHL campus. This is a significant build and will be aligned to the National Maternity Strategy.

This new build will address some of the current safety risks of having an off-site location and managing high risk patients. Enabling works funding will also be sought to progress the first steps of this project which is likely to take a 7 -10 year timeframe overall to deliver.

#### Enhanced Community Care Strategy

UL Hospitals Group and HSE Mid West Community Healthcare have formalised a governance structure to deliver on the investment in community care, hospital avoidance, chronic disease and older persons.

Under the joint governance structure of this project, a number of sub-committees have been formed. These are jointly chaired by staff from UL Hospitals Group and HSE Community Healthcare Mid West. The sub-committees include:

- Older Persons Integrated Care Workstream
- Chronic Disease Integrated Care Workstream
- Integrated Care CHNs Programme
- Health Pathways Programme
- Integrated Decision Making Forum Project

In addition, an Integrated Care Enablers Programme has been formed to support each of these workstreams and programmes ensuring support from IT/Telehealth/Data, Communications, Diagnostics, and HR.