

Roscommon Hospital





Overview of Presentation

- Governance
- Roscommon Hospital a 2.5 year History
- Where is Roscommon Hospital now?
- Current Services at Roscommon Hospital
- Vision for Roscommon Hospital
- Roscommon Hospital Statistics
- Capital Projects



Governance



University Hospital Galway

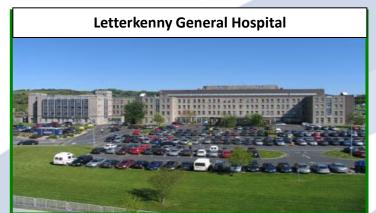






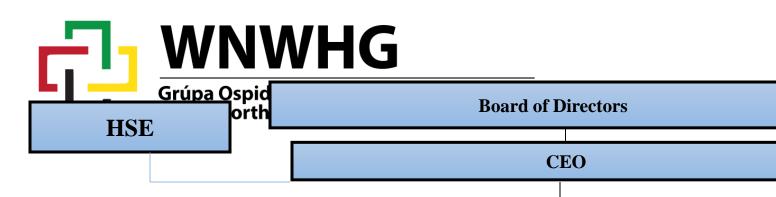












Board Committees

- 1. Finance
- 2. Audit
- 3. Patient Safety

Group Management Team (Chair COO)

Group Finance Committee

Group ICT Committee

Group Estates
Committee

Group Employment Control Committee

Performance Improvement Team

Nursing Professional Council (Chair GDONM)

Group Executive Council
(Chair CEO)

Strategic Nursing & Midwifery Forum

Maternity Services Strategic Group

Patient Council

Specialist Nurse & Midwife Advisory Group

Advanced Nurse /Midwife Practitioner Forum

Clinical Directors Forum (Chair GCD)

Group Quality & Patient Safety Committee

Committee Directorate

Scheduled Care Group

Directorate

Medicine

Perioperative

Womens and Childrens

Directorate

Unscheduled Care Group

> Diagnostics Directorate

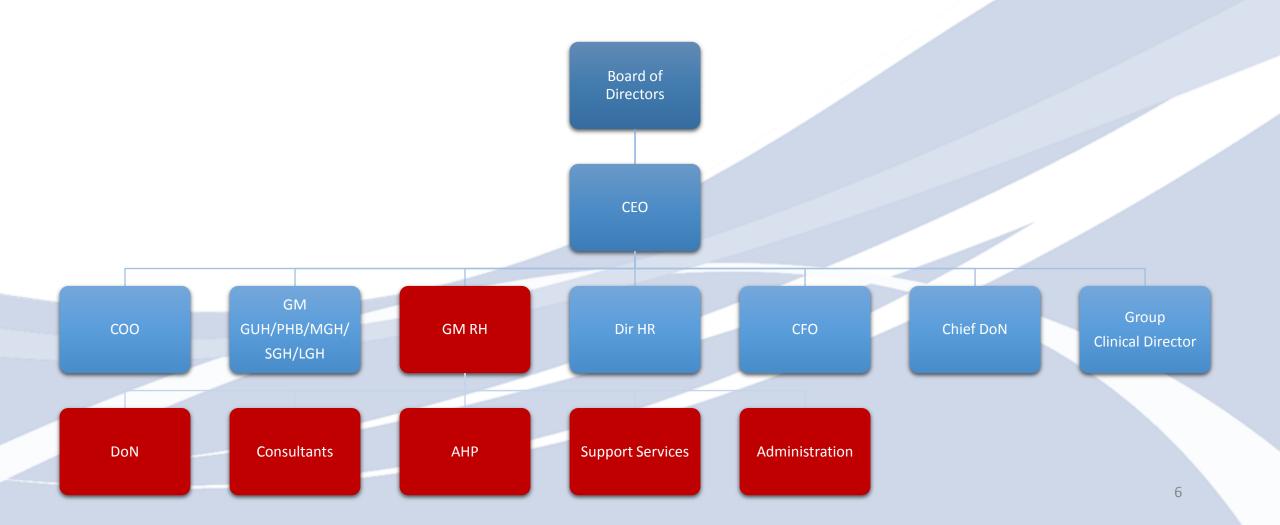
Cancer Strategy Group

> Medical HR Forum

Chief Academic Officer

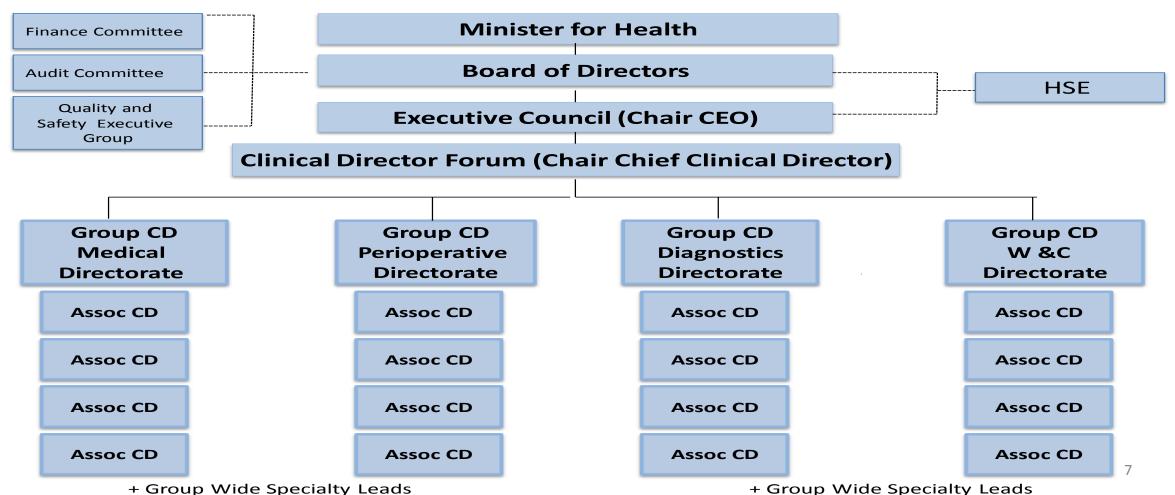


Roscommon Hospital Governance





Clinical Director Structure





Roscommon Hospital 2.5 Year History



11 July 2011.....

- Emergency Department closes and is replaced by an Urgent Care Centre
- Reconfiguration of Roscommon Hospital as a Model 2 Hospital commences
- Compliance with HIQA Ennis and Mallow Reports commences
- DoH Small Hospitals Framework document used for guidance



From July to December 2011

- Negative publicity locally and nationally
- > Headline news most days
- No plan for hospital
- > Fear of outright closure staff
- ➤ Public thought hospital was closed
- > Low staff morale
- > Political fallout
- Resurgence of protest groups



Where is Roscommon Hospital now?



January 2012 onwards

- Galway and Roscommon University Hospitals Group born on 09 January 2012. Replaced by the WNWHG on 29 July 2013
- Development of the Hospital Group
- Establishing the Hospital Group Management Team and Committee Structure
- Developing Clinical Directorate Structure on Group-wide basis
- Establishing Internal & External Communication Strategy
- Developing Performance Management Culture
- Delivery of Patient Treatment List (PTL) target and OPD targets
- Developing and delivering 2012 and 2013 Hospital Group Service Plans
- Meeting Public Representatives and Public Interest Groups
- Reconfiguring exiting services and developing services at Roscommon Hospital



Roscommon Hospital as part of WNWH Group

- Governance and Management structure which is in compliance with the HIQA Mallow and Ennis Reports
- Clinical Directorates Structure in place
- Quality and Risk –Lead by Group Clinical Director
- Development of services on Roscommon Hospital site
- Joint waiting lists with GUH, including day surgery, endoscopy, CT
- Setting up of joint OPD waiting lists with GUH Orthopaedics and Urology

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Acute Medicine Programme

Roscommon Hospital works as a Model 2 Hospital within the GRUH Group

• Model 2 hospital - "Smaller Hospital"

These hospitals provide the majority of hospital activity including extended day surgery, selected acute medicine, local injuries, a large range of diagnostic services (including endoscopy, laboratory medicine, point of care testing and radiology specialist rehabilitation medicine and palliative care.



Services that can be delivered at a Model 2 Hospital

- Day services/ambulatory care assessment for older persons
- Antenatal care/postnatal care
- Gynaecology Clinics
- Full range of Endoscopy
- PEG tube insertion
- Non-invasive cardiology
- Cardiac failure OPD clinic
- Cardiac rehabilitation service
- Venesection, infusion and transfusion therapy
- Bone marrow aspiration and trephine biopsy
- Abdominal paracentesis and thoracentesis
- General Rehabilitation medicine
- Prosthetic and Orthotic clinic

- Lumbar puncture
- Diabetic day centre including foot care and eye care
- Rheumatology day services/Clinics
- Dermatology day services/Clinics
- Oncology/haematology day ward/Clinics
- Mental health day services/Clinics
- COPD outreach/Clinics
- Pulmonary rehabilitation/Clinics
- Hepatology day services/Clinics
- Diagnostic imaging
- Rehabilitation day services/Clinics



Services not available in a Model 2 Hospital

- *****Emergency Department
- **★**Critical Care including ICU, CCU, HDU
- *****Acute Surgery
- **X**Non Elective Surgery



Services at Roscommon Hospital



Services in Roscommon Hospital

46 In-patient Medical Beds

• 17 In-patient Surgical beds

• 15 Day Surgery Beds

• MAU

• UCC – Minor Injuries

Medical Day Services

OPD

Radiology

• Lab

Physio/OT/Dietetics/S<

Cardiac Investigations

Cardiac Rehabilitation

24/7 Mon-Fri

Mon-Fri

Mon-Fri

Mon-Sun

Mon-Fri

Mon-Fri

24/7

24/7

Mon-Fri

Mon-Fri

Mon-Fri



Medicine

3 Consultant	46 inpatient beds Supported by Physio OT SLT Dietetics CNS	Medical Assessment Unit & Rapid Access Clinics	Medical Day Services Unit	Cardiac Investigations	Cardiac Rehabilitation	Out Patients General Medicine & Speciality Clinics
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Medical Assessment Unit

Open Monday to Friday

9:00 a.m. to 5:00 p.m.

Consultant Physician delivered service

Supported by,

Nursing

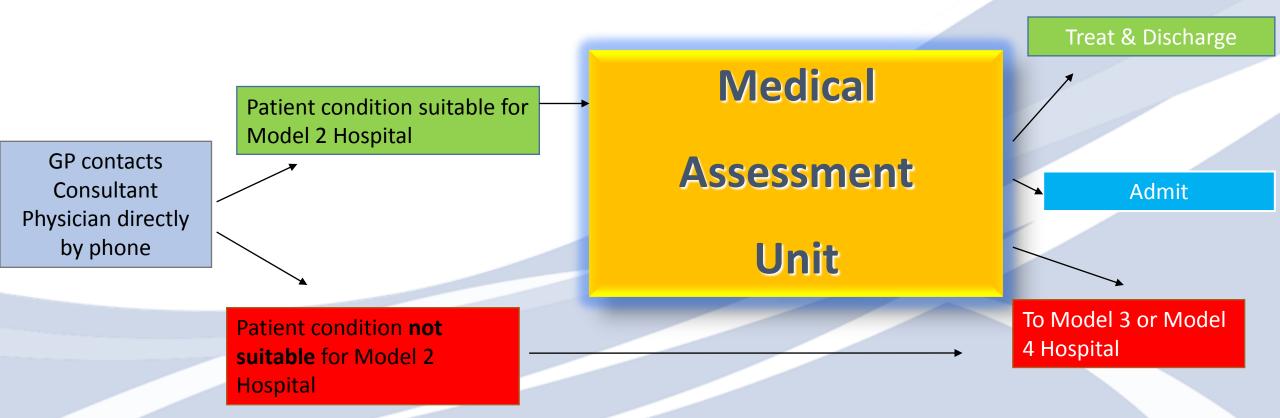
NCHDs,

Diagnostic Services

access to other health care staff



Medical Assessment Unit



Referral Pathway as defined by the Acute Medicine Programme for Model 2 Hospital



Rapid Access Clinics

Runs with MAU for Urgent GP referrals. Bloods/Scans on the same day with Consultant assessment and decision making.

Average 20 new patients per week

Average 30 follow up patients per week – from RAC and MAU

GP Feedback is good

3 levels of Medical referral

Same/Next Day = MAU

Within 2 weeks = RAC

Routine = OPD



Medical Admissions Model 2 Hospital

- Low risk differentiated patients with direct GP to consultant referral (via MAU) can be admitted
- Patients who do not require full resuscitation or ICU / CCU / HDU care.
- Patients requiring palliative care, and or rehabilitation.
- Transfers from associated Model 3 or 4 for ongoing treatment following stabilisation.



Anaesthetics

2 Theatres

2 Consultants Pre admission assessment clinics



Surgery

2 Consultants	17 inpatient beds closed at weekends	15 Day Surgery/Endoscopy beds	Visiting Consultants Plastic Surgery Dental General Surgeon Urology (2014) Ophthalmology	Urgent Care Centre Minor Injuries Unit	Surgical Outpatients
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Elective Surgery

Surgical procedures are performed include:

- Hernia Repair
- Laparoscopic Cholecystectomy
- Varicose Veins
- Carpel Tunnel decompression
- Injection of Piles
- Haemorrhoidectomy
- Endoscopy –including GP Direct Access Endoscopy
- Dental Surgery
- Circumcisions
- Anal Fissure
- Excision of Deupytrens Contracture
- Excision of Ganglion
- Vasectomy
- Excision of Pilonidal Sinus
- Plastic & Reconstructive Surgery
- Ophthalmic
- Other minor elective procedures

These procedures are available to patients referred by GP's to RCH Consultants and to patients on GUH waiting lists.



Urgent Care Centre – Minor Injuries Pathway

Treat & Discharge

Self
Referral

Urgent Care
Centre

Assess & transfer to other hospital, ie, condition not suitable for UCC

Diagnose and refer to other hospital/ specialty, ie, Fracture

Urgent Care Centre/Minor Injuries Unit

Open 7 days per week

08.00am to 20.00 daily.



Radiology 24/7

2 Consultants	General X-Rays				
Joint Department of Radiology with Portiuncula Hospital	Walk in service Monday – Friday 10:00 – 12:00 2:00– 4:00 No appointment necessary	СТ	FLUOROSCOPY	MRI – in PHB	Nurse X-Ray Prescribing



Laboratory 24/7

Haematology

Biochemistry

Access to all tests in GUH lab & electronic reports



Outpatient Services

Out Reach Services

ENT
Urology
Paediatrics
Orthopaedics
Rheumatology (Telemedicine)
Plastic & re Constructive Surgery
Gynaecology
Orthotics

RCH Consultant Clinics

Warfarin
Respiratory
Endocrine & Diabetes
Falls Assessments – Elderly
Memory Clinics
General Medicine
General Surgery
Psychiatry



Hospital Stats

	Inpatient Discharges	Day Cases	Outpatients	ED	UCC	MAU	ED/UCC /MAU totals	Endoscopy	WTE	Head count	Expenditure €m
2009	4,917.00	3,817.00	13,108.00	14,083.00		Inc in ED	14,083	1,757.00	332.63	381	24,633
2010	4,741.00	3,798.00	13,212.00	13,349.00		Inc in ED	13,349	1,698.00	325.90	370	22,273
2011		3,789.00		6,722.00	2 655 00	Inc in ED &			301.37	349	
	3,565.00	·	12,836.00	0,722.00	2,655.00		9,377	1,708.00			21,230
2012	1,896.00	5,133.00	14,855.00		5,940.00	Inc in UCC	5,940	2,340.00	285.16	328	18,399
2013	2,011.00	5,337.00	15,455.00		4,261.00	917	5,178	2,388.00	281.92	320	17,820
Jan-14									270.19	306	
2013 V 2009	- 2,906.00	1,520.00	2,347.00				- 8,905	631	- 62.44	- 75.00	- 6,813
2013 v 2011	- 1,554.00	1,548.00	2,619.00				- 4,199	680	- 19.45	- 29.00	- 3,410
2014 V 2011									- 31.18	- 43.00	31



Roscommon Hospital updates

- Endoscopy Suite —construction to commence in 2014- tenders for builder due 13/03/14
- Sleep Studies Service 350+ patients per year
- Roscommon Hospice Mayo Roscommon Hospice Foundation to fund the building of an 8 bedded Hospice on the Ground of RCH.
- Plastic & Reconstructive Surgery continued service development NCSS Non pigmented lesions pilot for electronic referral
- Radiology IT linking with GUH system —Patients on GUH waiting lists having CT scans in Roscommon Hospital 900+pts in 2013
- NRH satellite Specialist Rehabilitation Service –Approval given to proceed to Stage 1 Design phase for a 20 bed rehab unit in 2014
- Colorectal Screening Centre Endoscopy JAG Accreditation on 28/11/12. Roscommon Hospital has become a centre for Colorectal screening under the governance of the National Cancer Screening Service (NCSS). Screening Commenced in March 2014
- Ambulatory Care & Diagnostic Centre (ACAD) Service Plan 2014 Proposal recruit staff to open 5 days per week
- Advanced Nurse Practitioners ANP Plastics, ANP Diabetes, & ANP Minor Injuries commencement of the education & training to commence in 2014 2 year programme to full ANP.
- GP meetings 3 per year with CME points



Nursing Initiatives

- Nurse Prescribing Diabetes, Palliative care, warfarin, Pre Op Assessment, Cardiac Rehabilitation Respiratory
- Nurse X-ray prescribing UCC/MAU nurses
- Nurse led clinics Aim to introduce Diabetes, Respiratory, Cardiac Rehab.
- Appointment of a Colorectal Clinical Nurse Specialist in association with the National Cancer Screening Service
- Advanced Nurse Practitioners Minor Injuries, Plastics & Diabetes
- Productive Ward / Productive Operating Theatre "releasing time to care"



Vision

- Showcase Roscommon Hospital as a Model 2 Hospital
- Integration and development of Roscommon Hospital within the Hospital Group
- Further **Development of Services** on site
- Capital Development of the Endoscopy Unit
- Capital Development of Mayo/ Roscommon Hospice on Roscommon Hospital site
- Set up a Rehabilitation Service in association with the NRH & capital development of rehab unit.
- Communication Strategy
- Ongoing Public Engagement



Other Roscommon Hospital achievements

- First hospital in Ireland to introduce the Early Warning Score for all patients.
- One of the first smaller hospitals to achieve J.A.G. accreditation for Endoscopy Services
- First hospital to implement the NHS Productive Ward initiative
- All HIQA Ennis and Mallow recommendations implemented and official sign off as a Model 2 Hospital requested.
- Roscommon Hospital staff leading out on Group Colorectal Screening Programme in association with NCSS



ASSESSMENT OF THE CONTROL OF THE CON

Patient Passport in association with the Brothers of Charity 20/01/14





Irish Medical Time

– Healthcare

Award (IT)

Nov 2013

Rheumatology Telemedicine

Recent Media Events

UCC Public Information leaflet 16/12/13





RCH Smoke Free Campus 06/01/14



Before & After Photos of New Endoscopy Unit









Hospice & Rehab



One site option for location of Hospice and Rehab Units