Health services, 2016

Joanna O’Riordan

Institute of Public Administration, Ireland

New ministers

The inconclusive outcome of the general election in February 2016 led to protracted negotiations on the formation of a new government. However, subsequent to being re-elected as Taoiseach of a minority coalition government of Fine Gael and a number of like-minded independents, Enda Kenny, TD, announced a major reshuffle of Cabinet positions. Leo Varadkar, TD, the Minister for Health since the departure of James Reilly, TD, in 2014, was moved to the Department of Social Protection, with Simon Harris, TD, promoted to Minister for Health. The Department of Health also now has four ministers of state: independent TD Finian McGrath, who has Special Responsibility for Disabilities, and Fine Gael TDs Catherine Byrne, Marcella Corcoran Kennedy and Helen McEntee, who have Special Responsibility, respectively, for Communities and the National Drugs Strategy, Health Promotion, and Mental Health and Older People. This represents an increase of two ministers of state on the previous administration.

Industrial relations and staffing

There were threats of industrial action by the Irish Nurses and Midwives Organisation (INMO) at both the start and the end of the year. Strikes threatened in hospital emergency departments for January were called off following the intervention of the Workplace Relations Commission (WRC) in late 2015. In early January the

national executive of the INMO recommended acceptance of the proposals of the WRC. In a subsequent ballot, union members voted by a majority of 71 per cent to accept the proposals. The deal included an education grant for all nurses or midwives joining the health system and additional promotional positions in emergency departments to encourage experienced staff to remain in the area. This was followed in February by an announcement of increased pay for student nurses and midwives on work placements undertaken during the fourth year of their degree course.

In February Minister Varadkar launched the first national framework for safe nurse staffing and skill mix in acute hospitals, in order to improve workforce planning. The objective of the initiative is to end the practice of calculating nurse staffing levels on the basis of ward size, and instead allocate nurses according to the needs of the particular patients in that ward.

Also in February, final agreement was reached with respect to the transfer, when appropriate, of four key tasks (taking blood, discharging patients, administering drugs intravenously and giving first-dose antibiotics) from junior doctors to nurses. The agreement was reached within the context of the Haddington Road Agreement, whereby pay is restored in return for changes in work practices. It was further agreed that the initiative would initially be introduced on a pilot basis with a training and implementation phase, followed by a verification and evaluation phase.

However, notwithstanding this initiative and an increase of 1,200 in the number of nurses employed by the HSE during the period from September 2014 to September 2016, understaffing remained a major issue, with 3,400 less nurses in the public health system than in 2007 (HSE, 2016). Recruitment campaigns continued, in particular targeting the Christmas period, with relocation packages offered to qualified nurses willing to return to Ireland.

By the turn of the year, emergency department overcrowding had again reached crisis level, with the number of people across the country on trolleys waiting admittance to a hospital ward rising above 600. While a number of hospitals moved to open their closed wards it was unclear how these would be staffed. Once more the INMO threatened industrial action over understaffing, pressurised working conditions and, according to INMO General Secretary Liam Doran, 'the abject failure of management and politicians to plan, implement preparations for the changing demand and fund the necessary size of the health service' (Clarke, 2017).

Waiting lists also remained a contentious issue in 2016. In August Minister Harris announced an action plan to be implemented, aimed at reducing waiting times. The action plan encompassed short-term measures, whereby each hospital group is required to develop a waiting list improvement plan for the period until the end of the year, with more detailed initiatives to commence in 2017. These will include a reactivation of the National Treatment Purchase Fund to outsource treatment for those waiting more than one year for certain procedures.

In August, also following the intervention of the WRC, the Psychiatric Nurses Association reached agreement with the HSE and ended their ongoing work-to-rule.

Foster care abuse inquiry

In February, with the general election ongoing, the former government committed to establishing a statutory commission of investigation to examine allegations of neglect and sexual abuse at a foster home in Waterford. Forty-seven vulnerable adults and children with intellectual disabilities were placed by the health services in the foster home between 1983 and 1996. While most of the people placed in the home were removed in the mid 1990s after allegations of abuse, one woman, referred to as 'Grace', remained there until 2009 and a further woman, placed there by arrangement with her family, remained until 2013.

However, it emerged that the commission could not immediately be established because in September 2015 Kathleen Lynch, former Minister of State at the Department of Health with Special Responsibility for People with Disabilities, had asked Conor Dignam, SC, to carry out a review into certain aspects of the case, and it was deemed necessary to wait for this report.

The report by Mr Dignam, in accordance with his terms of reference, did not look at the substantive issues relating to the care of the people in the home but instead looked into certain matters relating in particular to two unpublished previous reports commissioned by the HSE into the foster care case. These reviews were by Conal Devine & Associates, carried out in 2012, and by Resilience Ireland, carried out in 2015.

Mr Dignam's report, published in November, generally found serious deficiencies in the HSE's handling of the case. With regard to the two previously commissioned reports Mr Dignam concluded that the HSE's procurement for the two reviews did not meet its own rules

and did not ensure that the best price was obtained. He also found that the procedures followed were not adequate to ensure the independence of those carrying out the reports. Mr Dignam also concluded that the Garda investigation into the case should not preclude the publication of the reports by Conal Devine & Associates and Resilience Ireland, as stated by the HSE.

On publication of Mr Dignam's report it was noted by the Department of Health that his recommendations would form the basis of the terms of reference for the commission of inquiry, which were being finalised. However, as of the end of the year, the terms of reference for the commission had not been brought to government.

Maternity matters

In January Minister Varadkar launched Ireland's first *National Maternity Strategy*. The strategy represents a roadmap for the improvement in maternity services over the next ten years. The strategy was drafted by a 31-member steering group, chaired by Sylda Langford, retired director general of the Office of the Minister for Children and Youth Affairs. The strategy emphasises that women should have access to safe, high-quality, nationally consistent, woman-centred maternity care. In terms of how maternity care is organised, the new strategy proposes a fundamental overhaul of services from the current hospital-based and consultant-led service.

The strategy also emphasises that leadership, governance, clinical commitment and clinical effectiveness approaches are required to deliver safe, quality maternity care. Consequently, each maternity service will be required to have a defined patient safety and quality oversight function.

The vision for maternity services articulated in the strategy is for 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; and parents are supported before, during and after pregnancy to allow them give their child the best possible start in life' (Department of Health, 2016).

In August the HSE published the *National Standards for Bereavement Care Following Pregnancy Loss and Perinatal Death*. The purpose of the standards is to enhance bereavement care services for parents who experience a pregnancy loss or early infant death. The standards cover all pregnancy loss situations from early pregnancy loss

to infant death, as well as situations where there is a diagnosis of a condition that will be life-limiting or may be terminal, with services available to all parents irrespective of when the bereavement occurred.

In November Minister Harris announced that agreement had been reached between the National Maternity Hospital (NMH) and St Vincent's Hospital Group on the relocation of the NMH to the Elm Park campus. Following independent mediation provided by former head of the WRC Kieran Mulvey, both hospitals agreed new governance arrangements for the colocated hospitals.

In June the second annual report on the Protection of Life During Pregnancy Act, 2013, was put before the Houses of the Oireachtas, as is required under Section 20 of the Act. It stated that twenty-six abortions were carried out in Ireland during 2015 under the Act.

The new National Children's Hospital

In April, and marking the end of a very protracted and difficult debate, An Bord Pleanála granted planning permission for the new National Children's Hospital on the St James's Hospital campus in Dublin. The new hospital, which will amalgamate the existing Temple Street, Crumlin and Tallaght Children's Hospitals, will be the single biggest capital project in the history of Irish healthcare.

Catheterisation lab at University Hospital Waterford

At the request of Independent Alliance TD and Minister of State with Special Responsibility for Training and Skills John Halligan, a second specialised cardiac treatment lab was planned for University Hospital Waterford (UHW). However, following an independent review of cardiac services at UHW, it was found that there was no need for a second lab. Mr Halligan initially threatened to resign from government at the findings, but subsequently decided to continue.

The government committed to implementing the further recommendations of the independent review, aimed at reducing waiting times for patients at UHW and improving access for patients.

Public health reports

A number of reports aimed at improving public health were published. The *National Physical Activity Plan*, published in January, focuses on

different types of action and sustainable solutions aimed at making people in Ireland more physically active and reshaping the environment for physical activity. A related publication, *A Healthy Weight for Ireland: Obesity Policy and Action Plan 2016–2025*, was published in September. In November *Positive Ageing 2016*, the first national positive ageing indicators report, was published. The report outlines the broad range of areas in which people need to be supported in order to enjoy a positive ageing experience. Lastly, the government agreed in May to establishing a cross-party committee to develop a ten-year vision for healthcare and health policy in Ireland.

Budget 2017

At the publication of the HSE's *National Service Plan* for 2017 in December, Minister Harris announced that the health sector budget for 2017 would be €14 billion, an increase of €1 billion on 2016.

References

- Clarke, V. (2017, January 6). *Health service was not 'adequately prepared', says Harris*. Retrieved from <http://www.irishtimes.com/news/health/health-service-was-not-adequately-prepared-says-harris-1.2927640> [17 January 2017].
- Department of Health. (2016). *Creating a better future together: National maternity strategy 2016–2026*. Dublin: Department of Health.
- HSE. (2016). *Health in Ireland: Key trends*. Retrieved from http://health.gov.ie/wp-content/uploads/2016/12/Health_in_Ireland_KeyTrends2016.pdf [17 January 2017].