USING QUALITY TO DRIVE TRANSFORMATION IN HOSPITAL SERVICES
REPUBLIC OF IRELAND
SOME FACTS : IRELAND

- Population (2011): 4,588,252
- Number of Hospitals: 47
- National Referral: 9
- Regional: 6
- County/Local: 28
- Other: 4
- Ownership: 31 State Owned/Funded
- 16 Voluntary Organisation Owned/State Funded
Organisation/Governance

Pre 2005

Department of Health | 16 Voluntary Hospitals
10 Health Boards (including 31 State Owned Hospitals)

• Independent Actors
• Lack of Accountability
• Lack of Governance, system wide and clinical
• Lack of regulation
• No agreed formal definition of standards
• Problems and patient safety issues
2005 – 2009

Department of Health

Health Service Executive

PCCC Community & Primary Care

Population Health

National Hospitals Office

Finance
Estates
ICT
HR
Logistics

Included Patient Safety & Quality Section

9 Hospital Networks
(All hospital: Public & Voluntary)
• Emergence of patient safety and quality agenda
• Accreditation programme for hospitals
• Need for strategic national approach to service planning and delivery
• Need for formalisation of quality agenda and independent oversight
• Health Information Quality Authority (statutory basis 2008)
2009 – 2012

Special Delivery Unit (SDU) → Department of Health → Health Service Executive → Support Services (HR, ICT, Finance etc) → Quality & Clinical Care Directorate

Population Health

National Clinical Programmes

Business Intelligence
   • Healthstat
   • Compstat

National Director Performance & Financial Management

4 Operational Regions incl. All Hospitals: Public & Voluntary

• Emergency of HIQA & QCCD: Formalisation & Mainstreaming
• Development of National Clinical Programmes
• Special Delivery Unit (SDU)
Health Information & Quality Authority (HIQA)

- **Established 2008 as a Statutory Authority**

- **Main Responsibilities**
  - Driving improvements in the quality and safety of healthcare on behalf of patients
  - Develop standards across services
  - Monitor and report on compliance with standards
  - Conduct investigations and issue reports to continuously improve service quality
  - Health Technology Assessments to inform investment and disinvestment decisions
  - Has the power and authority to withdraw services from hospitals where service quality is not of the required standard and where there are patient safety concerns

- **At Hospital Level**
  - Accreditation inspections for services e.g. breast cancer services against prescribed performance criteria
  - Announced/unannounced visits to confirm appropriate governance (including clinical) over service areas e.g. Infection Control, Emergency Departments
HIQA: National Standards for Safer Better Healthcare

- Launched by Government in June 2012
- HIQA has authority to monitor compliance
- IMPORTANT: National Standards are for service users (including patients, carers and family and representatives) to understand:
  - What high quality and safe healthcare should be
  - What users should expect from a well run service
  - For service users to clearly voice their expectations
The Standards 2012 – 2015

1. Person Centred Care & Support
2. Effective care and support
3. Safe care and support
4. Better health & well being
5. Leadership, governance, management
6. Workforce
7. Use of resources
8. Use of information

Compliance Monitoring by HIQA

Licensing of Hospitals on Statutory Basis
Quality & Clinical Care Directorate

- National Standards: Implementation Oversight
- Clinical Governance: Development Initiatives
- Service User Involvement/Advocacy Unit
- Health & Patient Information
- Healthcare Systems Audit
- National Office for Clinical Audit – Irish Audit of Surgical Mortality (Sept 2012)
Management of Quality in 2012

- Special Delivery Unit
  Department of Health
- National Clinical Programmes
- Quality & Clinical Care Directorate

National Service Plan 2012
Performance Indicators

- Weekly/monthly monitoring
- Monthly/quarterly reporting
- Quarterly reviews
## 2012 Example Performance Indicators (Mandatory Reporting for all Hospitals)

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Reporting Frequency</th>
<th>Target 2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>ED: % of all patients arriving by ambulance, wait&lt;20 minutes for handover to Doctor or Nurse</td>
<td>Monthly</td>
<td>95%</td>
</tr>
<tr>
<td>Inpatient: % of elective patients who had principal procedure conducted on day of admission</td>
<td>Monthly</td>
<td>75%</td>
</tr>
<tr>
<td>ED: % of all attendees at ED who are discharged or admitted within 6 hours of registration</td>
<td>Weekly</td>
<td>95% by Sept 2012</td>
</tr>
</tbody>
</table>
COMPSTAT

QUALITY

Safe, high quality, patient centred service

ACCESS

RESOURCE
CompStat

A Performance Management system, underpinned by:

- Timely performance measurement and reporting
- Monthly engagements
- Web enabled presentation & interpretation
## HSE South

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Adult &gt;9 Months</th>
<th>Child &gt; 20 Weeks</th>
<th>GI Scope &gt;13 Weeks</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>Cork University Hospital</td>
<td>160</td>
<td>35</td>
<td>20</td>
<td>215</td>
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<tr>
<td>Lourdes Orthopaedic Hospital Kilcreene</td>
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<tr>
<td>Mallow General Hospital</td>
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<tr>
<td>Mercy University Hospital Cork</td>
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<tr>
<td>Wexford Hospital</td>
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<td>0</td>
<td>3</td>
<td>4</td>
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<tr>
<td>Bantry General Hospital</td>
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<tr>
<td>Kerry General Hospital</td>
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<td>0</td>
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<tr>
<td>South Infirmary Victoria Hospital</td>
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<tr>
<td>South Tipperary General Hospital</td>
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<tr>
<td>St Luke’s General Hospital K</td>
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<td>0</td>
<td>0</td>
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<tr>
<td>Waterford Regional Hospital</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>TOTAL HSE SOUTH</strong></td>
<td><strong>163</strong></td>
<td><strong>36</strong></td>
<td><strong>23</strong></td>
<td><strong>222</strong></td>
</tr>
</tbody>
</table>
CompStat – The Process

Final Receipt of Performance Data
Available on CompStat
Hospital Preview
Performance Review
Overall Hospital Rating & Formal Feedback

20th Month
22nd Month
2 Days
Final week of month
First week of subsequent month
We start here with simplified, clearer targets that better reflect the patient journey.

We hold leaders personally accountable for performance against KPIs.

We clarify sanctions and incentives (an essential part of the leadership challenge).

We establish systematic, comprehensive and validated weekly/daily monitoring systems.

Performance Improvement Wheel:

- **Intervention**
- **Escalation**
- **Monitoring:** Frequency, Quality, Lag
- **Numeric Objectives**
PROPOSED NEW PERFORMANCE REGIME

Definition

- Persistent performance issues or no confidence standards will be delivered
- Ongoing performance issues or low confidence standards will be delivered
- Some performance issues or medium confidence standards will be delivered
- On trajectory or high confidence standards will be delivered

Significance

- Expectation of change in hospital leadership
- Very high frequency monitoring, high concern
- Closer monitoring, elevated concern
- Light touch monitoring, hospital entitled to priority for strategic developments

This scheme entails the introduction of a hospital-level scorecard with hard targets.