



Limerick, Ireland



Strategic Plan

2015 - 2018

Mission Statement

Faithful to our tradition, we provide the highest possible standard of care and treatment in a professional and compassionate manner to every person who avails of our services

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Message from the Chairman of the Management Committee

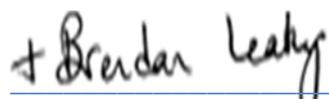
Most Rev. Brendan Leahy

The Management Committee on behalf of its patients and staff are pleased to present St. John's Hospital Strategic Plan for the period 2015 – 2018. The Plan reflects on the needs of our patients and the commitment of our staff to strive to deliver high quality safe and effective care over the next three years.

The Hospital is cognisant of the current challenging times in healthcare with an increasing emphasis on delivery of national healthcare reform programmes, an ever increasing demand on services and staff in a climate of financial constraint and reducing budgets. The recent healthcare reform publications and the move towards the establishment of hospital Trusts pose significant challenges for the hospital in the years ahead. The new structures have challenged all voluntary hospitals to look at their fundamental roles and functions as service providers and consider how they will operate within the new landscape. The absence of legislation to back up the reform programme means that in the interim, St. John's must continue to operate under its own Scheme of Management.

The hospital will be challenged by many of these developments over the next three years.

I would like to thank the staff of St. John's Hospital for their contribution to the development of this Strategic Plan and for their dedication and commitment to providing the highest possible standard of care and treatment to all our patients. Their continued participation in quality improvement initiatives and willingness to embrace the ever changing healthcare system will ensure the success of this Strategic Plan and ensure that the ethos and core values of the hospital's long tradition in Limerick, will live on.



+Brendan Leahy, D.D.,
Chairman
Management Committee

Message from the Chief Executive

Mr. Fearghal Grimes

The purpose of any strategic plan is to provide direction to an organisation on its future journey and for it to be effective it should be based on sound reasoning and considered judgement.

The development of this Strategic Plan was overseen by the Management Committee. The strategy development process sought to be inclusive and was developed in consultation with key stakeholders including:-

- Management Committee
- Strategy Group
- Medical Board
- Service/Department Heads
- Patient Partnership Forum
-

A draft Strategic Plan was circulated for feedback. The feedback was reviewed and all contributions were considered in finalising the Plan.

This process has resulted in 5 clearly defined strategic objectives which will guide the hospital in its activities over the next three years. The underlying principles of this Strategic Plan are person-centred, safe effective care and support as set out in the National Standards for Safer Better Healthcare

The delivery of the Strategic Plan objectives will be delegated to the Chief Executive and executive management and will be monitored by the Management Committee on a regular basis. We do not see the achievement of these goals as easy but we are committed to ensuring they are delivered on to the best of our ability.

We would like to thank everyone who took time to contribute to the development of this Strategic Plan. Your input has been invaluable.

Our valued, dedicated and professional staff is key to ensuring the success of this Strategic Plan. We hope to continue our engagement with you throughout its delivery over the next three years.



Fearghal Grimes
Chief Executive

History



St. John's Hospital was founded in 1780 by Lady Hartstonge and other benefactors as a Fever and Lock Hospital. It treated epidemics during the Great Famine (1845-1847). The Hospital fell into disrepair during the 1850's to the 1880's.

In 1888 the then Bishop of Limerick, Bishop Edward Thomas O'Dwyer invited the Nursing Sisters of the Little Company of Mary to the Hospital. St. John's was the first site in Ireland where the Little Company of Mary Nursing Sisters came to work. Since then, on-going refurbishment and development has continued to take place.

Today, the hospital has 89 in-patient beds, 10 day-care beds and an Urgent Care Centre incorporating a Medical Assessment Unit and Local Injuries Unit.

Since 2013, St. John's Hospital is one of six hospitals in the University of Limerick Hospital Group.

St. John's Hospital is proud of its history and tradition since its foundation of providing kind and compassionate care to the people of Limerick and its environs. It is held in very high esteem by the local community, making it a hospital where patients want to come for treatment. We remain faithful to the mission of our founders and we are committed to their pursuit of providing excellent care now and into the 21st century.

Mission Statement

St. John's Hospital has a long and proud tradition of providing high quality care to the people of Limerick and the surrounding areas. The ethos and core values of the Little Company of Mary are still evident today. The commitment and dedication of our staff and the management team ensure that the hospital lives its Mission Statement in its daily activities. The hospital's status as a Voluntary hospital is core to our ethos and values.

Mission Statement

Faithful to our tradition, we provide the highest possible standard of care and treatment in a professional and compassionate manner to every person who avails of our services.

Vision and Values

Based on our Mission Statement, our vision and values are:

- To **build a first-class patient focussed service** based on high quality and evidence based practice throughout the organisation
- To provide this service **as close to the patient as possible**, in a well-managed and appropriate environment
- To promote a culture that will:
 - Ensure **high quality safe effective care/service** is provided
 - Ensure that decisions regarding delivery of care/service are **patient focused and evidence based**
 - Support and invest in education and training, thereby **promoting the continuous development of the workforce** in order to maximise the potential of staff at all levels

Goals

Our goals are to:

- Focus on our patients and deliver high quality service
- Continuously improve all our services through quality management
- Involve all our partners in our quality improvement activities
- Empower employees to make appropriate decisions
- Have the highest degree of respect for one another and value diversity
- Use training, teamwork and open communication to enable all employees to achieve their full potential
- Recognise and reward employees' contributions
- Take all reasonable steps to ensure that patients, visitors, staff and all others in contact with the Hospital are afforded the safest possible environment
- Maintain the highest ethical standards in protecting the public and the environment
- Measure the effectiveness of our activities and monitor progress towards achieving our Vision

Introduction

This Strategic Plan is focused on the period 2015 – 2018. The strategic aim of St. John's Hospital is to continue to play a vital role in the development and provision of acute hospital services in the Mid-West Region.

Key issues relating to delivery of the hospital's Strategic Plan

- Strategic working relationships with the Department of Health and the Health Service Executive
- Operational working relationships with the other acute hospitals in the University of Limerick Hospital Group
- Funding arrangements, both capital and revenue

Scope

Any Strategic Plan for the expansion of existing services or the introduction of new services in the Hospital is dependent on a number of key issues.

Key issues relating to expansion of existing services or the introduction of new services

- The implications for existing resources and the requirement for additional resources
- How they relate to/complement existing and new services planned for the region as a whole and National Clinical Programmes
- The legislative frameworks in place
- The infrastructural requirements

Governance and Management

St. John's Hospital is a registered charity under the Charities Acts and is managed and administered under a Scheme of Management approved by the High Court.

Board of Governors

The Hospital is controlled by a Board of Governors. There is an Annual General Meeting of the Board of Governors and at this meeting the Annual Accounts are submitted, the Management Committee is constituted, the Auditors are appointed and any other business may be considered or adjourned or referred to the Management Committee.

An extra-ordinary meeting of the Board may be requisitioned by members of the Board or by the Management Committee.

Management Committee

The management and business of the Hospital is conducted by the Committee. The operation of this function is delegated by the Management Committee to the Chief Executive who heads up the Hospital's Management Structure (*Appendix 1*).

Medical Board

The Medical Board acts as an advisory body to the Management Committee and reports to the Management Committee on any matter which it considers should receive the consideration of the Management Committee.

Chief Executive

The Chief Executive is responsible for the day-to-day management of the Hospital, including:

- Responsibility for the executive management of the Hospital
- Monitoring the delivery of agreed levels of clinical activity within approved financial allocations
- The recruitment, supervision and remuneration of staff
- The implementation of service plans and ensuring that the net expenditure determined by the Health Service Executive is not exceeded.

Strategy Group

The Strategy Group is responsible for reviewing strategic issues and developing strategic plans.

Service Heads

Each Service Head is responsible for the day-to-day management of his/her service area.

Department Heads

Each Department Head is responsible for the day-to-day management of his/her department.

Health Service Reform

The Minister for Health published a major plan of health reform in November 2012 ***Future Health: A Strategic Framework for the Reform of the Health Services 2012 - 2015*** which promised the most fundamental reform of health services in the history of the State which has major implications for the future direction and role of St. John's Hospital as a health service provider. The following are extracts from this publication:

Structural Reform: We recognise that structural reform of the health service will be key to addressing the problems with our current health system, and will also be critical in the journey to UHI. We acknowledge that getting the structures right will be a complex task and, as such, we intend to evaluate each phase of the transition carefully as we progress towards UHI. For this reason, we do not attempt to give a detailed description now of how the later phases will operate. Instead the focus is on the key elements that need to change. Among our key concerns are to promote good governance, avoid duplication and ensure a strong regional focus in managing performance and delivering value for money.

The first phase of the process will deliver a greater degree of accountability for the HSE to the Minister. It includes abolition of the Board of the HSE, establishment of a Directorate and a new management structure in the HSE. Hospital groups will be established on an administrative basis, with Group Chief Executives having budgetary and staff responsibility for both the HSE and voluntary hospitals in their group. Smaller hospitals will be developed in tandem with the establishment of hospital groups. There will be a review of Integrated Service Areas which will (i) ensure maximum alignment between all service providers at the local level; (ii) review executive management and governance arrangements; and (iii) inform new structures for the delivery of primary care. This phase will also see the establishment of the new Child and Family Support Agency. The legal status of the HSE will not change during phase 1 and HSE employees will remain employees of the Executive.

The second phase will involve the development of a formal purchaser/provider split and, effectively, the dissolution of the HSE. The third phase, to be implemented as we move to UHI, will move us from a tax-funded system to a combination of UHI and tax funding. ***Future Health*** sketches out the main elements of the second and third phases and notes that there will be a high level of collaboration with stakeholders on the detailed design of the new structures.

Hospitals: ***Future Health*** identifies three main areas of reform for the hospital system. We will deliver more responsive and equitable access to scheduled and unscheduled care for all patients through continued implementation of the Special Delivery Unit's initiatives in this area. Public hospitals will be reorganised into more efficient and accountable hospital groups that will harness the benefits of increased independence and a greater control at local level. The introduction of hospital groups and the development of smaller hospitals are interrelated. A Framework for the Development of Smaller Hospitals will be published shortly which will ensure that smaller hospitals will play a vital role in service delivery.

The subsequent publications in 2013 ***Securing The Future of Smaller Hospitals: A Framework for Development*** defined the role of the smaller hospital in service delivery.

Context

National

The 2011 Department of Health ***Future Health: A Strategic Framework for Reform of the Health Services 2012 – 2015*** promised the most fundamental reform of our health services in the history of the State. The two main elements of this Framework are:

1. A single-tier health service supported by Universal Health Insurance (UHI) which guarantees access to medical care based on need, not income
2. Develop independent not-for-profit hospital trusts in which all hospitals will function as part of an integrated group.

Future Health provides the overarching framework for the establishment of hospital groups. It states;

“The current system of governance in the Irish hospital sector is unsatisfactory. The distinction between the voluntary and statutory sectors has created an uneven terrain for optimising patient care and has restricted the development of the management systems and leadership we require to run a world-class national hospital network. We want to take the best of the governance and autonomy currently found in the voluntary sector and create a new governance system that can give the benefits of increased independence and greater control of local clinical and managerial leaders to every hospital in Ireland.”

Future Health identified that the development of smaller hospitals was interrelated to the introduction of hospital groups and in 2013 published a framework for smaller hospitals ***Securing The Future of Smaller Hospitals: A Framework for Development***. This framework clearly states the government’s commitment to securing and further developing the role of smaller hospitals. It also provides the opportunity for smaller hospitals to have a sustainable and central role into the future. This secured the role of St. John’s role in the delivery of health services in the Mid-West. It states:

“No acute hospital will close. We believe that there is a strong role for smaller hospitals, in which they will provide more services, not fewer. The challenge is to make sure that they provide the right type of services, which can safely be delivered in these settings, so that we maximise the benefit to patients.”

This Framework for Smaller Hospitals defines the role of the smaller hospitals. It identifies the activities that can be performed in smaller hospitals in a safe and sustainable manner so that a high volume of care can be provided locally. St. John’s Hospital is a designated Model 2S hospital under this framework.

The Establishment of Hospital Group as a transition to Independent Hospital Trusts known as the ‘**Higgins Report**’ published in 2013 recommends what these groups should be and sets out a governance and management framework.

Local

St. John's Hospital is one of six hospitals in the University of Limerick Hospital Group (UHLG). As a voluntary hospital, it operates under its own Scheme of Management. The other five hospitals in the group are managed by a single executive.

Services are provided by way of an annual Service Level Agreement (SLA) which outlines what services will be provided and the funding arrangement for same. On a quarterly basis operational and financial performance is reviewed against the SLA with executive representatives from ULHG.

The formation of hospital groups has thrown up many challenges both nationally and locally and it is clear that there will be a significant time lag for legislation to formalise this process and provide certainty. Until such times St. John's, while aiming to play its part in the local group of hospitals, must be mindful of its legal status and autonomy. Nevertheless, there is no reason to believe that under a banner of mutual respect and co-operation, there is much scope for St. John's to work with her sister hospitals in the group whilst still maintaining its own identity and ethos.

Service Delivery Model

St. John's Hospital is an acute general Public Voluntary Hospital and is a service provider to the Health Service Executive as provided for in Section 38 of the Health Act 2004. It is a member of the University of Limerick Hospital Group, which serves a population of 400,000 people. Services are delivered in line with an agreed annual Service Level Agreement with the Health Service Executive. An annual budget is allocated to the Hospital by the Health Service Executive.

Services are provided in line with National Health Strategy and delivered in line with National Clinical Programmes.

St. John's Hospital - Model 2S Hospital

Under the Smaller Hospitals Framework, St. John's has been designated a Model 2S Hospital - a hospital that can carry out intermediate surgery, which cannot be carried out on a day case basis and would require in-patient stay and accommodation. Also, Model 2 hospitals may only admit "scheduled" (non-emergency) medical patients and this can only be done through either a Medical Assessment Unit (A&E units can only be operated by Model 3 & 4 hospitals) or directly by hospital Consultants. St. John's Hospital does not admit unscheduled, undifferentiated medical or surgical patients. There is significant inter-linking of services between St. John's and the other hospitals in the University of Limerick Hospital Group.

Inpatient consultant services provided include general medicine and elective 5-day non-cancer surgery (breast surgery, general surgery, urology and gynaecology). The hospital has a 10-bedded day care unit for general surgery, general medicine, gynaecology, maxilla-facial surgery, gastroenterology, pain management and infusion services. St. John's provides a range of inpatient and outpatient services in pathology, radiology and endoscopy; An Urgent Care Centre comprising of a Local Injury Unit and a Medical Assessment Unit was opened in September 2013. There are outpatient clinics in general surgery, general medicine, diabetes, gynaecology, ENT and pain management.

National Health Strategies

1. *Future Health: A Strategic Framework for the Reform of the Health Services 2012 - 2015*
2. *The Establishment of Hospital Groups as a transition to Independent Hospital Trusts (The Higgins Report)*
3. *Securing The Future of Smaller Hospitals: A Framework for Development*

National Clinical Programmes most relevant to St John's Hospital

- The Acute Medicine Programme (AMP)
- The Emergency Medicine Programme (EMP)
- The National Clinical Programme in Surgery (NCPS)

The Management Committee has a number of key Committees in place to assist it in its work, which include:

Medical Board whose primary function is to act as an advisory body to the Management Committee.

Audit Committee whose primary function is to provide an independent and objective review of the hospital's financial reporting process, management of financial risks, Value for Money (VFM) management and internal and external audit processes.

Safer Better Healthcare Committee whose primary function is to implement the National Standards for Safer Better Healthcare which will contribute to high quality safe healthcare for service users and enable a culture of quality and safety. These national standards will lead on to the development of a licensing system to be operated by the Health Information and Quality Authority (HIQA).

Infection Prevention and Control Committee whose primary function is to actively manage and ensure that effective practices such as hand hygiene, surveillance, antibiotic prescribing and the provision of a clean and safe environment are in place that prevent and control Healthcare Associated Infections.

The Drugs & Therapeutics Committee whose primary function is to oversee medication safety and management, antimicrobial stewardship, clinical pharmacy and pharmacy regulation.

Strategic objectives for 2015–2018

The Management Committee has identified five key strategic objectives for the period 2015 – 2018. The following identifies these strategic objectives and how the hospital will deliver on them.

Objective 1	Sustain and expand the delivery of high quality safe services	
	Key Actions	<ul style="list-style-type: none"> • Focus on the further development of acute scheduled medical services and specialist surgical services, linking with the national clinical programmes and the various directorates in ULHG • Participate in any review of the Acute Medicine Programme • Increase the number of Consultant Physicians working in the hospital • The Safer Better Healthcare Committee will drive quality improvements to ensure full compliance with the National Standards for Safer Better Healthcare and demonstrate the provision of a safe and quality service to all our patients and staff
Objective 2	Demonstrate that our corporate governance framework is effective and robust	
	Key Actions	<ul style="list-style-type: none"> • Review current governance structure and amend to ensure structures and processes are in line with good international practice • Participate in HSE Service Level Agreement and Annual Compliance Statement process • Develop a Memorandum of Understanding with University of Limerick Hospital Group to define more precisely the relationship with St. John’s Hospital as a Model 2S Hospital, having cognisance of the ethos and separate governance of St. John’s as a voluntary hospital • Be an active partner in the newly established national Voluntary Healthcare Forum

Objective 3	Upgrade information and communication technology systems to national standards	
	Key Actions	<ul style="list-style-type: none"> • Ensure that information is used and managed effectively in accordance with legislation and best available evidence • Replace current aging Patient Administration system as part of the national iPM system • Implement the national radiology system (NIMIS) • Replace existing pathology IT system with the iLAB system
Objective 4	Continue to develop the hospital infrastructure to underpin the quality of service we provide and to provide a positive patient experience	
	Key Actions	<ul style="list-style-type: none"> • Reactivate the Major Capital Development of the hospital proposed previously to provide new inpatient accommodation in line with current standards i.e. single patient rooms and new theatres. Then redevelop the decanted current inpatient accommodation to provide a new Day Care Unit, a new Out-Patients Department, etc. • Continue to upgrade patient rooms and wards/departments to meet SBH/HIQA hygiene standards pending the proposed new Capital Development • Continue to apply for capital funding to maintain hospital infrastructure and replace equipment (clinical and non-clinical)
Objective 5	Build on our reputation as a patient centred care provider	
	Key Actions	<ul style="list-style-type: none"> • Continue to work with the hospital Patient Partnership Forum and develop the partnership • Provide facilities for relatives of dying patients

Resource, staffing and financial requirements

To achieve the objectives set out in this Strategic Plan, we will require sufficient resources to carry out the work identified. The hospital's primary source of income is the annual budget from the Health Service Executive.

The hospital is cognisant of the current economic climate and the pressures on public finances and is committed to using its resources in an effective and efficient manner.

As well as continuing our current activities, the Hospital will need to be sufficiently resourced and support will be required to continue to develop our infrastructure to underpin the quality of the service we aim to provide over the period of this Plan.

The other source of income is fees received from regulated insurance providers and patients. These fees are set by the Minister for Health. They contribute to the daily running costs of the hospital.

The key resources we require are people with the appropriate skills, knowledge, experience and capacity to help us deliver our objectives.

We are committed to providing staff with the necessary information and communication technology systems and resources to enable them to work efficiently.

We are also committed to providing managers and staff with learning and development programmes that support their development and corporate objectives.

Our commitment to deliver on these objectives is dependent on the availability of the appropriate resources.

Service Developments 2015 - 2018

Medical

Consultant staff, medical and surgical, are central to the efficient functioning of St. John's Hospital. Currently the three hospital physicians carry an excessive clinical caseload and the appointment of additional medical consultant sessions to St. John's is critical. Additionally St. John's, despite not being allowed to hold any new contracts going forward, must lead and be directly involved in appointments critical to its future.

Nursing

Recruitment and retention of nursing staff, as always, will continue to challenge St. John's as it does all hospitals. Over the next three years, the biggest challenge will be maintaining our own independent nursing service/department in spite of the push for a single ULHG nursing service. 2016 should also see the appointment of our first Advanced Nurse Practitioner in the Urgent Care centre – a welcome expansion of the role of nursing in St. John's Hospital.

Diagnostics

Rapid access to diagnostics is the cornerstone of every hospital and every effort will be made to continue the high quality service currently available. In Radiology the switch to NIMIS will allow all St. John's reports to be read externally on the "national" system. In addition to this the proposed appointment of replacements for St. John's two vacant Radiologists posts to ULHG has the potential to de-stabilize the current excellent turnaround times available to our clinicians and hospital management will fight to ensure this is not the case. Finally, the decision to stay with the current tele-radiology providers (Global Diagnostics) will be reviewed in light of developments with the appointment of the two radiologists.

The pathology service at St. John's is also facing change. The Management Committee has agreed for the service to be transferred to ULHG and for pathology service to be delivered on site in St. John's by way of a contracted service. It is proposed that a "stat lab" with appropriate "point of care" systems remain on site. This on-site stat laboratory in conjunction with the laboratory at UHL will provide the current 24/7 level of pathology service.

Health and Social Care

The changing patient profile associated with the transition to a Model 2S hospital will see developments in Physiotherapy, Pharmacy and Dietetics. The older, frailer patients with more co-morbidity and poly-pharmacy will mean that physiotherapy will have to develop a more focussed in-patient rehabilitation aspect with a probable demand for increase in resources. The continued push to drive down “average length of stay” and pharmacy costs will mean that the Physiotherapy and Pharmacy services will remain central to the efficient running of the hospital.

Support Services

As with the clinical areas throughout the hospital, the non-clinical areas continue to work through the effects of the recruitment moratorium and decreasing budgets and subsequent lack of investment. The ICT department will finally get a new Patient Administration system in 2014/2015 as part of the roll-out of the national iPM system, providing much needed stability to the hospital IT platform after years of crisis. Patient services, Finance, Human Resources and general administration will continue to struggle to provide support and management services to the hospital from an ever decreasing pool of staff. Undoubtedly, the drive nationally to a shared service model will increase this pressure further but St. John's will continue to try and retain its own autonomy and protected on-site delivery.

The Future of St. John's Hospital

As part of the development of this Strategic Plan, the Hospital undertook an analysis of the strengths, opportunities and challenges that the hospital faces in light of the national programme for the reform of health services. The outcome of the analysis show that the hospital has many positive contributions to make to the delivery of health services in the Mid-West. It also acknowledges that there are many challenges that need to be addressed if the hospital is to delivery care to its full potential. The following is a summary of the analysis:

Strengths

- City centre location and its close proximity to University Hospital Limerick ideally places St. John's Hospital to provide acute services to the Mid-West Region. The hospital has easy access via the local motorway network. 75% of the population live within 25 miles of Limerick.
- Potential to provide services as a Model 3 Hospital in the University of Limerick Hospital Group, subject to receipt of national funding

HIQA in its Report of the review of the governance arrangements as reflected in the safety, quality and standards of services at UL Hospitals state:

“ULH is unique among the proposed hospital group structures nationally in that at the time of the Authority's review, it was the only group that did not have a model 3 hospital.”

The then Minister for Health, Dr. James Reilly said following publication of the HIQA report:

“I am committing to exploring that lack of a model 3 hospital in the group. I am not committing to putting one in or building one so it's not a mention of building a new one but I believe the changes that we're bringing in here in relation to the hospital group is going to devolve more authority and more autonomy locally, to the people locally and give them much greater say in how their service is configured and delivered and I think that's an important thing”

The Management Committee has indicated to the Department of Health that St. John's Hospital is very willing to be involved in any review process of a Model 3 status Hospital for UHLG

- The hospital site has potential for further development/expansion as outlined in the previous Hospital Development Plan and it is proposed to attempt to re-activate the capital development with the HSE/Department of Health
- The hospital has solid structures in place for the delivery of high quality safe care. This was evidenced by its two successful accreditation awards. The hospital continues its pursuit of high quality care through the implementation of the National Standards for Safer Better Healthcare

- Patients are very satisfied with service delivery and overall quality of care they receive and this is evidenced by on-going positive patient feedback and the hospital's continual high ratings on the 'Rate My Hospital' website
- The hospital has a highly qualified, dedicated and committed workforce
- St. John's Hospital is held in very high esteem by the local community

Opportunities

- Location of the hospital and its proximity to University Hospital Limerick provides long-term opportunities to deliver and develop acute medical and surgical services in the Mid-West region. St. John's Hospital is the ideal location for a Model 3 Hospital in the University of Limerick Hospital Group
- Current ED bed pressures following the re-configuration of the JENs Emergency Departments to Urgent Care Centre's may require a review of this decision and the possibility of a re-opening of a limited opening Emergency Department in St. John's with appropriate resources and support
- Capacity to increase day care and in-patient surgical activity with a view to becoming a centre for specialist minor surgery
- Explore strategies to extend the clinical criteria accepted as appropriate for care in our local injuries unit
- Further expand the delivery of chronic disease management e.g. diabetes, respiratory, cardiology in line with the national clinical programmes and the development of outreach programmes
- Develop services to meet the changing needs of our patient population
- Further GP access to hospital services with regard to MAU and/or direct in-patient access

All of the above opportunities are resource dependent

Challenges

- Maintaining the acute voluntary status of St. John's Hospital and its independent governance structure from both a clinical and corporate perspective. The Management Committee believe that its model of governance is key to ensuring that St. John's Hospital is an effective and high quality care provider

- The establishment of a satisfactory working relationship with the University of Limerick Hospital Group and the need for governance arrangements, mechanisms, assessment criteria and performance indicators which will ensure that as identified by the Department of Health, the need for governance arrangements, mechanisms, assessment criteria and performance indicators which will ensure that:
 - the primary focus will be on the **patient** and patient outcomes;
 - the services of the **smaller hospital** will be enhanced;
 - hospital group behaviour and decision making will be underpinned by mutual respect and parity of esteem principles;
 - the intended relationship with the primary academic partner (whether or not the Academic Healthcare Centre Model is utilised) is fully developed and will work for all hospitals;
 - the available resources, clinical and financial, will be allocated fairly;
 - greater autonomy will displace a bias towards command and control; and hospital group performance, at the end of the transition period, will be assessed in a manner that is robust, comprehensive and incorporates an assessment of how all hospitals in the group have fared

- Baseline funding for the hospital needs to be agreed at national/group level

- The impact of Consultant appointments on service delivery and corporate governance

- National NCHD staff shortages and resulting increase in dependency on agency staff

- The upgrading of information and communication technology systems e.g. NIMIS, iPM, iLAB. St. John's Hospital ICT systems are unable to accommodate these ambitious targets and significant resource will be required to allow the hospital meet its responsibilities in this area

- Hospital casemix and costing of services (Money Follows The Patient)

- Change in patient profile due to an ageing population (each year the number of people over the age of 65 grows by around 20,000) and significant growth in chronic illnesses due to lifestyle factors. Both these trends present huge challenges for resources and capacity.

- Providing a 21st healthcare service in an infrastructure dating back to 1780.

- Securing funding for the major capital development

- Ability to recruit and retain qualified staff as a model 2 hospital

- The current moratorium on recruitment presents a challenge for the hospital in the planning and delivery of services

Conclusion

This Strategic Plan reflects the need to continue providing high quality safe and effective services. It sets out the key objectives for the hospital over the next three years.

The fundamental reform of our health services nationally and locally mean that it is not possible to predict with certainty every detail of the Plan. The Plan will be monitored, reviewed and revised by the Management Committee as necessary.

The Management Committee deems this Strategic Plan to be a realistic appraisal of the objectives and the role which St. John's Hospital can and should play in the provision of acute hospital services in the Mid-West region. The Management Committee acknowledge that it will be subject to review and modification as new policy and developments emerge.

The hospital recognises the importance of its stakeholders, primarily its patients, its funders the HSE, its colleagues in healthcare provision in the region including other hospitals, primary care providers and education institutions. The hospital is an active and committed working partner for co-ordinated and integrated services and is keen to further develop these relationships based on trust, respect and two-way communication to assist the hospital in continuing to be a key provider of health services in the region.

Our valued, dedicated and professional staff are our greatest asset and are key to the success of this Strategic Plan. We will have to change the way we organise our services and the way we deliver our services. Our future success depends on every one of us working together and supporting each other in the future direction of the hospital.

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