



Ospidéal Naomh Eoin St John's Hospital

Cúram Gairmiúil agus Atruacha
Professional and Compassionate Care



Annual Report

2024

Ospidéal Naomh Eoin

St. John's Hospital

Is í ár bhfís a bheith mar phríomhsholáthraí seirbhíse cúram sláinte ina bhfuil nuálaíocht agus sármhaitheas ag croílár eispéireas an othair.

Our vision is to be a leading provider of healthcare service where innovation and excellence are at the heart of the patient experience.



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Foreword

I am delighted to present our Annual Report for 2024. The report covers the period from 1st January to 31st December and gives an overview of our progress and performance over that time. The year's achievements demonstrate again that our staff continue to work at their very best, committed to delivering high quality care to our patients. In this report, you will read how we have continued to improve our services in response to growing demand again.

Following Minister Donnelly's visit in 2023, we were very pleased to be given the green light by government a year later to progress to the next stage on our 78-bed block plan. On this matter, we completed a Preliminary Business Case with plans to commence the design stage in early 2025. The Board have carried on advocating for this very necessary development to enable us to continue providing clinical services long into the future. We would like to acknowledge the support of Ms Sandra Broderick, Regional Executive Officer, in relation to our work in this area.

Other developments saw the launch of our new Day of Surgery Admissions (DOSAs) Unit to improve patient flow and access to surgery. The Board and I are grateful to our staff for progressing this initiative, alleviating much of the daily pressures on inpatient bed capacity, resulting in far fewer theatre cancellations. Patient waiting times continued to improve throughout 2024 with the majority of wait times reduced to 12 months or less by year end. This was an improvement on the previous year, and we remain committed to reducing wait times further in the coming year.

Our financial position remained difficult throughout 2024 due to a combination of historical funding deficits and high cost expenditure on agency staff on whom we were reliant to deliver services whilst we addressed longstanding recruitment gaps. By the end of the year, we achieved a significant reduction in agency expenditure thanks to successful staff recruitment initiatives. We continue our work to achieve a stronger financial position in 2025 and to advocate for the correction of previous years' funding deficits.

I would like to thank all the staff for their dedication and commitment to the provision of first-class patient care. In particular, I thank Emer Martin, CEO and her executive team for their continuing leadership in improving our services. I would also like to thank the HSE and our Patient Partnership Forum for their ongoing support and assistance to St John's. The Board and I look forward to working with you all in the coming year as we work together to ensure that St. John's Hospital continues to provide high quality care, in keeping with our tradition and long history.



A handwritten signature in dark ink that reads "Brendan Leahy".

Bishop Brendan Leahy, D.D.
Bishop of Limerick



A close-up, low-angle shot of a large, weathered metal sign for St. John's Hospital. The sign is made of light blue-grey metal with large, raised, gold-colored letters spelling out 'ST. JOHN'S'. The sign is part of a larger structure with vertical bars and horizontal beams. The background is a cloudy sky.

Executive Summary

Report from the Chief Executive

This Annual Report for the year ending 31 December 2024 provides a summary of our key activity and financial performance.

It has been another challenging year, dominated by high demand for our services, complex operational pressures and staffing challenges. Despite these pressures, our staff have continued to work tirelessly to provide compassionate, high quality care and meet rising service demands. By the end of 2024, we achieved stability in our workforce through recruitment and retention initiatives, thanks to the hard work of our HR department, service managers and all our staff.

Our Staff

I would like to thank each and every member of staff for their valuable contribution to the work of the Hospital throughout 2024. Our staff are the face of St. John's Hospital, living out our mission statement in their daily work and in their interactions with patients, families and colleagues. I am constantly impressed by the resilience, resolve, compassion and strength shown by our staff each day.

Our Patient Partnership Forum

I would also like to acknowledge our Patient Partnership Forum for their continued support throughout 2024 as they provide valuable assistance to us in improving the quality of services to our patients. The Patient Partnership Forum has proven to be a valuable partnership to assist hospital staff in evaluating our services and identifying opportunities for further improvements in patient experience.

Our service delivery is guided by an annual service arrangement with the HSE and also our six key Strategic objectives as per our Hospital Strategy 2022-2027. This report highlights many examples of progress made across all six areas of work throughout the year, thanks to the hard work and dedication of our staff.

Following implementation of the new HSE Health Regions in 2024, we welcome the appointment of Ms Sandra Broderick, Regional Executive Officer HSE Midwest. We look forward to working with Sandra and all HSE colleagues as we work together to develop the quality of services for patients in the Midwest.

Performance metrics

In November 2023 St John's had one of the busiest endoscopy and elective surgery lists in the country. In 2024, we continued the hard work achieved in 2023 by making further progress in extending the level of scheduled services to patients and by reducing patient wait times, with the majority patients waiting 12 months or less for elective procedures by the end of the year. We continue our efforts to reduce waiting times further and achieve the Slaintecare waiting target of six months.

We continued to improve the number of new patients seen in our outpatient clinics and medical assessment unit. At the end of 2024, we were operating at 38% above our Service Agreement targets set by the HSE. This was noted across all areas of patient activity⁶ including surgery, medicine, outpatients, endoscopy and urgent care. Inpatient occupancy levels averaged at 95-102% throughout the year.

Our annual funding and financial performance have a big impact on what we are able to do. The continued rise in activity levels throughout 2024 and legacy funding deficits had notable impact on our expenditure, most notably in staffing costs. Agency costs in nursing, medicine and support staff groups was driven by the continuous high level of inpatient service demand coupled with a high vacancy factor. We also saw an increase in inpatient occupancy levels, Injury Unit (IU) attendances, our Medical Assessment Unit and our Endoscopy Department all of which had an impact on expenditure. We discussed our funding concerns with the HSE throughout the year and advocated for legacy funding shortages be addressed. It was clear that ongoing focus on the level of agency staff would need to be maintained in order to work towards an improved year-end financial position. From Quarter three onwards, significant savings were achieved in agency expenditure by successfully driving our cost savings programme and recruiting to long term vacancies. Whilst we still had an overall deficit at year end, this reduced considerably as a result of our cost saving efforts.

On quality and innovation, we were delighted extend our digital bed tracker to other departments in the hospital throughout 2024. In 2023 we gained national recognition from HSE Spark who sponsored our digital quality improvement initiative to boost patient flow and discharge planning through the creation of a patient flow data management system. We value the opportunity to have played a key role in this joint project initiative with the UL Rapid Innovation Unit. Undoubtedly, our patients and staff benefit significantly from collaborative opportunities. The Rapid Innovation Unit (RIU), an outlet of the Department of Science and Engineering University of Limerick works jointly with clinical stakeholders in St John's and across UL Hospitals to bring patient-centric, innovative solutions from the development laboratory to the bedside with the help of 3D printing.



A stylized, handwritten signature in black ink.

Emer Martin
Chief Executive

Our Services

St. John's is an acute general public Voluntary Hospital. It is a registered charity under the Charities Acts (Registered Charity No. 20000394) and is administered and managed in accordance with a Hospital Constitution approved by the Charities Regulatory Authority. The hospital property is vested in Trustees.

The Hospital is the second busiest general hospital in the Mid-West, serving the population of Limerick city and county and the Mid-West. It has a total of 99 beds comprising 89 in-patient beds and 10 Day care beds, 7 Medical Assessment Unit bays, 4 Injury Unit bays and 4 Ambulatory Day care beds. The In-Patient specialties are General Medicine, General Surgery, Gynaecology and Urology. It has an Urgent Care Centre incorporating an Injuries Unit and Medical Assessment Unit. Other services include:



Diagnostic Radiological and Laboratory services



Endoscopy and Bowel Screening



Clinical Nurse Specialists
in the areas of Diabetes, Tissue Viability, Continence Management, Respiratory Care, Infection Control, Palliative Care and Pain Management

History

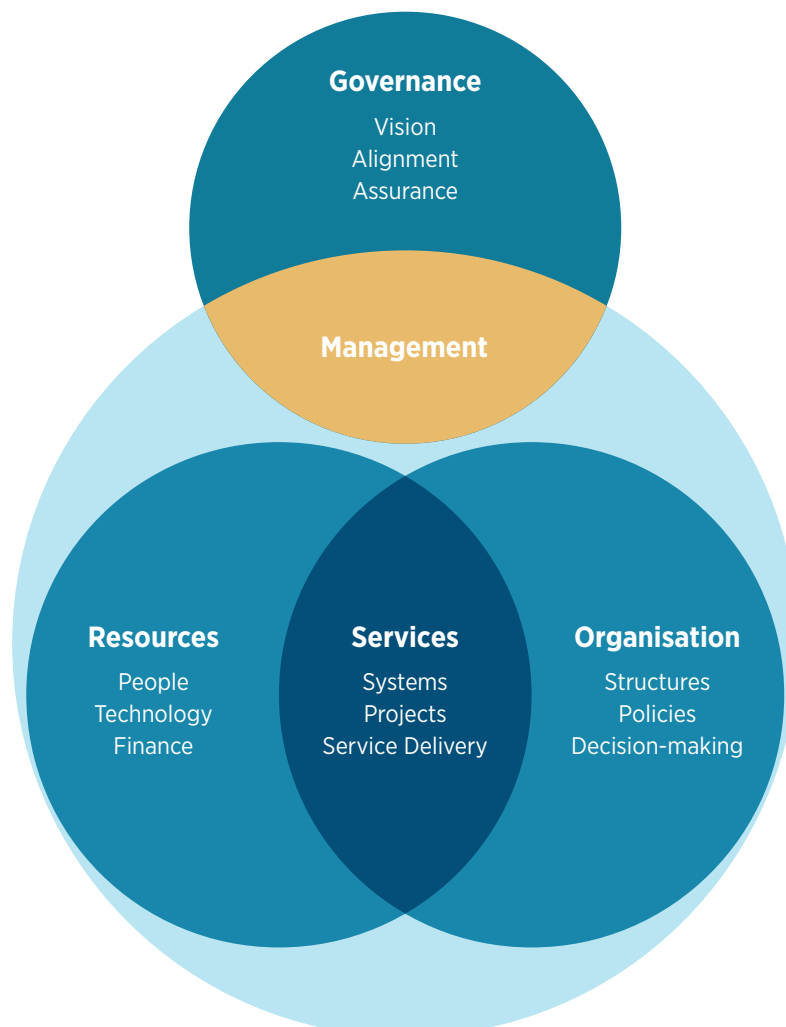
St. John's Hospital has a pioneering history. The hospital was founded in 1780 by Lady Hartstonge and other benefactors as a Fever and Lock Hospital, being the first of its kind erected in the empire of Britain. It played a major role in controlling the spread of fever by admitting patients and isolating them from the community. The success of St. John's in treating fever patients was based on a combination of core principles still applicable to modern day medicine: routine hygienic practice, nourishing food, and the knowledge of Dr John Geary – a prominent local physician of the time, being able to distinguish between different fevers. In 1845, the hospital admitted more than 5000 fever-ridden patients during the outbreak of famine fever in Limerick city and also managed to maintain a relatively low mortality rate during that time. In 1888, the then bishop of Limerick, Bishop Edward Thomas O'Dwyer invited the Nursing Sisters of the Little Company (LCM)

to the Hospital. St. John's was the first site in Ireland where the LCM Nursing Sisters came to work. They led the nursing services of the hospital from 1888 to 2001, when the first lay person was appointed as a Director of Nursing. St. John's Hospital was the first acute public hospital in Ireland to be accredited under the Irish Health Services Accreditation Board in 2003 and was the only acute hospital to be re-accredited under the scheme in 2007. Since the national reconfiguration of health services into Group in 2013, St. John's is one of six hospitals in the University of Limerick Hospitals Group. We are proud of our history and tradition since our foundation in providing high quality, compassionate care in a warm and friendly manner to the people of Limerick and its environs. We remain faithful to the mission of our founders and we believe that being a smaller hospital ideally positions us for excellence in person centred care.

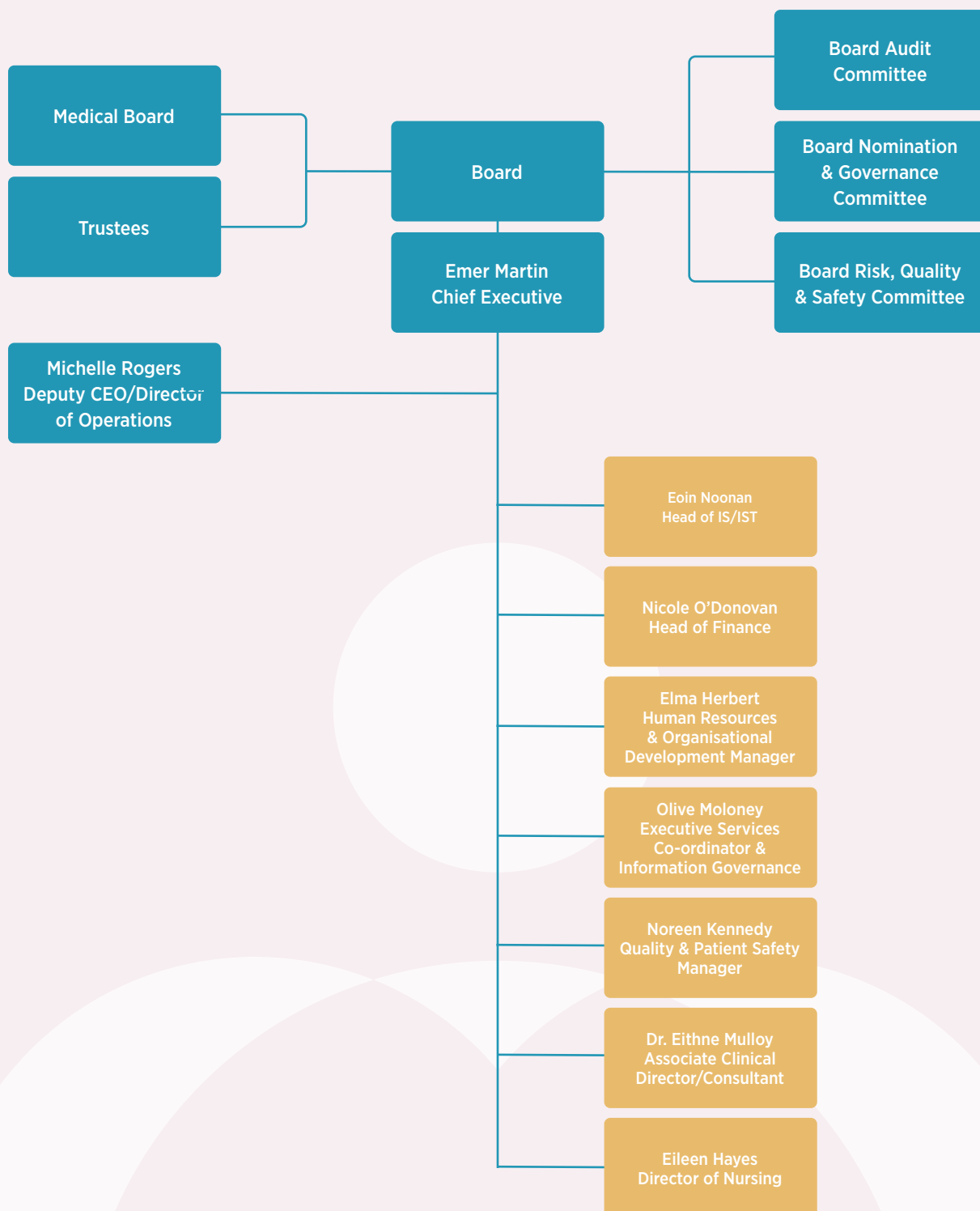
Hospital Governance

Chaired by Bishop Brendan Leahy, the Board of Directors of St. John's Hospital serves as the hospital's principal governing body, providing strategic leadership and oversight. The governance of St John's Hospital is devolved to a non - executive Board of Directors, (Board Members), who are appointed by the Trustees. The Board Members give their time voluntarily to the hospital and do not receive any remuneration for their role. The Board is responsible for defining and reviewing the hospital's mission, setting its strategic direction, and ensuring effective corporate governance. It oversees the performance of the Chief Executive Officer, focusing on strategic development, regulatory compliance, risk management and stakeholder engagement. The Board operates within a framework of controls which enables risk to be assessed, mitigated, and managed.

The Board comprises up to twelve Directors. The term of office for each Board Member is three years and a Board Member may be appointed for two further terms. Board membership is based on skills, experience and knowledge. The Sub Committees of the Board are established in accordance with the hospital's Constitution in order to delegate the consideration of certain issues and functions in more detail. Each Sub Committee has responsibility to conduct oversight of its mandate as defined by its terms of reference approved by the Board. The following Sub Committees are in place with defined terms of reference: Audit & Finance; Risk, Quality & Safety, and Nominations & Governance.



Governance Structure



Board of Directors

The Board of Directors of St. John's Hospital serves as the hospital's principal governing body, providing strategic leadership and oversight. Chaired by Bishop Brendan Leahy, the Board is comprised of eleven members who are appointed for an initial three-year term, with the possibility of reappointment for up to a maximum of nine years.

The Board is responsible for defining and reviewing the hospital's mission, setting its strategic direction, and ensuring effective corporate governance. It oversees the performance of the Chief Executive Officer and the Executive Management Team, focusing on strategic development, regulatory compliance, risk management, and stakeholder engagement. In 2024, the Board convened on six occasions to fulfil its governance and oversight responsibilities.



Most Rev. B. Leahy
D.D. Chairman



Mr Richard Leonard
Vice-Chairman



Mr Raphael Keane
Board Member



Ms Audrey Fehily
Board Member



Canon Gerard Garrett
Board Member



Anne Fahy
Board Member



Dr. Catherine Casey
Board Member



Fasih Khan
Board Member



Miriam Callanan
Board Member



Kieran O'Hanlon
Board Member



John O'Brien
Board Member

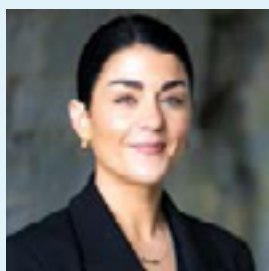


Mayor Gerard Mitchell
Board Member

Senior Leadership Team



Emer Martin
Chief Executive Officer



Michelle Rogers
Deputy CEO & Director of Operations



Eoin Noonan,
Head of IS/ICT



Eileen Hayes,
Director of Nursing



Noreen Kennedy
Quality & Patient Safety Manager



Nicole O'Donovan,
Head of Finance



Olive Moloney
Executive Services Co-ordinator



Elma Herbert
Head of People & Organisational Development

Board Member	Role	Appointment Period
Most Rev. B. Leahy, D.D.	Chairperson	On holding office
Dr Fasih Khan	Director	January – December 2024
Mr. Ralph Keane	Director	January – December 2024
Dr Catherine Casey	Director	January – December 2024
Dr Miriam Callanan	Director	January – December 2024
Ms. Anne Fahy	Director	January – December 2024
Ms. Audrey Fehily	Director	January – December 2024
Mr. Richard Leonard	Director	January – December 2024
Cllr. Kieran O'Hanlon	Director	January – December 2024
Very Rev. Canon Garrett	Director	On holding office
Mayor Gerard Mitchell	Director	January – June 2024

Attendance at Board Meetings

For the period 01/01/2024 to 31/12/2024

Board Directors	Attendance
Most Rev. Brendan Leahy (Chairperson)	5/6
Mr. Ralph Keane	4/6
Mr. Richard Leonard	4/6
Cllr. Kieran O'Hanlon	3/6
Dr Catherine Casey	5/6
Dr. Miriam Callanan	3/6
Ms. Anne Fahy	6/6
Ms. Audrey Fehily	5/6
Mayor Gerard Mitchell	2/3
Very Rev. Canon Gerard Garrett	3/6
Dr. Fasih Khan	3/6

Executives in Attendance

For the period 01/01/2024 to 31/12/2024

Name	Role
Emer Martin	Chief Executive (Secretary)
Michelle Rogers	Deputy Chief Executive/ Director of Operations
Eileen Hayes	Director of Nursing
Nicole O'Donovan	Head of Finance
Olive Moloney	Executive Services Co-Ordinator

Sub-Committee: Audit Committee

The Committee met on 4 occasions during the year

Attendance at Meetings

For the period 01/01/2024 to 31/12/2024

Audit Committee	Attendance
Mr. Richard Leonard, Chairperson	3/3
Mr. Ralph Keane, Member	2/3
Ms. Catherine Sheehan, Member	3/3

In Attendance
Ms. Emer Martin, Chief Executive
Ms. Michelle Rogers, Deputy Chief Executive
Ms. Nicole O'Donovan, Finance Manager
Ms. Olive Moloney, Executive Services Co-ordinator

The hospital's Audit Committee produced its Annual Report to the Board at its Annual General Meeting in November 2024. It outlined the Committee's activities and included a performance review and evaluation. The Committee noted significant progress in key areas of compliance including Information Governance

(GDPR) and cybersecurity. The Committee gratefully acknowledged the funding received from the HSE to replace legacy servers and operating systems. The Board was satisfied with the activities of the Audit Committee and approved its Annual Report.

Sub-Committee: Risk, Quality & Safety Committee

The Committee met on 4 occasions during the year.

Attendance at Meetings

For the period 01/01/2024 to 31/12/2024

Board Risk, Quality & Safety Committee	Attendance
Ms Audrey Fehily Chairperson	3/4
Ms Anne Fahy, Member	3/4
Dr. Fasih Khan, Member	2/4
Ms Emer Martin, Member	
Ms Noreen Kennedy, Member	
Ms Geraldine Creaton, Member	
Ms Eileen Hayes, Member	
Ms Maeve Gallagher, Member	
Ms Olive Moloney, Member	

The hospital's Risk, Quality and Safety Committee produced its Annual Report to the Board at its Annual General Meeting in November 2024. It outlined the Committee's activities and included a performance review and evaluation.

The Board noted the development of a Risk Strategy for the hospital in addition to various quality improvements implemented throughout the year to enhance patient safety and experience.

The Board also noted the important role of patient feedback and how it was used to drive quality improvements.

The Board was satisfied with the activities of the Audit Committee and approved its Annual Report.



Sub-Committee: Nominations & Governance Committee

The Committee held a virtual meeting during the year.

Attendance at Meetings

For the period 01/01/2024 to 31/12/2024

Nominations and Governance Committee	Attendance
Dr. Catherine Casey, Chairperson	1/1
Dr. Joseph Lee, Member	1/1
Mr. Tim Kennelly, Member	1/1

The hospital's Nominations and Governance Committee produced its Annual Report to the Board at its Annual General Meeting in November 2024. It outlined the Committee's activities and included a performance review and evaluation. The Board noted the Committee's work in relation to the Hospital Constitution and membership queries which arose throughout the year.

The Board was satisfied with the activities of the Audit Committee and approved its Annual Report.



St. John's Hospital Strategy 2022 – 2027

Progress on Our Strategy

Central to how we work at St John's is the belief that patients come first, to act with integrity at all times and to strive for excellence. Our Strategy is built around the hospital's vision of being a leading provider of healthcare services where innovation and excellence are at the heart of the patient experience. It was developed by the Board and Senior Leadership Team following deep consultation with all staff, partners at the University of Limerick Hospital Group, University of Limerick, GPs, St. John's Hospital Patient Partnership Forum and the wider public.

The hospital's five-year strategy outlines a clear vision to deliver high-quality, patient-centred care while strengthening collaboration, innovation, and staff wellbeing. The strategy reflects lessons from the pandemic, including the need for greater investment in technology and infrastructure. As a Model 2 'S' hospital within the Mid-West, the Strategy emphasises shared leadership, closer ties with community healthcare, and a continued focus on compassionate, local care. Our key strategic goals include enhancing patient experience and outcomes, supporting and developing our staff, achieving financial sustainability and delivering operational effectiveness.



Strategic Objectives

Strategic Priority 1

Development of our Infrastructure

The hospital's five-year strategy sets a clear direction to deliver high-quality, patient-centred care, support staff wellbeing, and ensure long-term sustainability. Building on lessons from the COVID-19 pandemic, it focuses on innovation, collaboration with community partners, and investment in infrastructure and technology. The strategy reinforces the hospital's role within UL Hospitals Group and is guided by a strong commitment to compassionate, locally delivered care.

The Board and Executive continue to pursue our Capital Development programme. Our plan for additional bed capacity is influenced by a broader reform of the health care system supported by population projections and assessment of needs in the Midwest, of which St John's is a core provider of healthcare.

Strategic Priority 2

Timely Access to Scheduled Care

We will enhance scheduled care delivery within UL Hospitals by improving patient access, reducing wait times, and maximising current resources in response to rising demand and post-COVID backlogs.

In 2024 we achieved improvements in waiting times due to streamlining our work and implementing more effective processes to meet the demand on our services.

Strategic Priority 3

Driving Excellence in Patient Experience

St. John's Hospital is committed to excellence in patient care through a culture of leadership, continuous learning, and innovation. As a member of the international Learning from Excellence community, the hospital operates a philosophy of learning from positive outcomes and replicating good practice.

Through collaboration with the Rapid Innovation Unit - University of Limerick, pioneering technologies deliver patient-focused solutions, ensuring that patient experience is central to care delivery, and that staff are supported to develop innovative solutions to everyday problems.

Strategic Priority 4

Investing in our People and their Wellbeing

St. John's Hospital values its diverse and dedicated workforce of 400 staff as the foundation of its success. Through a supportive culture and strong Health & Wellbeing Plan, the hospital promotes an inclusive, safe, and supportive workplace, aimed at attracting and retaining top talent while delivering compassionate, competent, patient-centred care. Our hospital made significant progress in 2024 to enhance job satisfaction, secure a stable workforce and maximise career development opportunities for our staff.

Strategic Priority 5

Advancing our Key Strategic Partnerships

St. John's Hospital is committed to developing strong partnerships in areas of clinical, academic, and the community sector to learn from others and improve how we deliver our services. Through integrated care pathways and initiatives like Sláintecare, we believe these collaborations support innovation, resource sharing, leading to ultimately better outcomes for patients.

Strategic Priority 6

Financial Sustainability & Operational Effectiveness

St. John's Hospital is focused on achieving financial and operational sustainability to ensure service quality, operational efficiency and long-term resilience. It works to achieve this through optimising income, reducing avoidable expenditure and investing in sustainable practices.

The Year in Review

Our Capital Plan

In 2024, we progressed our work on our capital development programme for a new 78-bed bedblock. We finalised our Strategic Assessment Report, followed by completion of a Preliminary Business Case which was submitted to the HSE in October.

We were delighted to hear the news that our 78-bed block development has been included in the Government's capital infrastructure plan for the acute hospital sector. We continue our work to move to the next stage of our plan which is the Design Stage. Design works are due to commence in Spring 2025.

Improving Patient Access to our Services

Please see p.56-59

Driving Excellence in Patient Experience

Please see p.68-72

Throughout the year, our quality improvement programmes were reflective of our focus on enhancing patient experience, ensure that person-centric care is central to our decision-making

Enhancing Our People and their Wellbeing

Please see p.31-35 and p.46-50

Throughout the year, our quality improvement programmes were reflective of our focus on enhancing patient experience, ensure that person-centric care is central to our decision-making.

Advancing our Key Partnerships

Please see p.22-23

Throughout the year, we continued to focus on advance our collaboration opportunities and key partnerships with a variety of stakeholders including the HSE, our Patient Partnership Forum, the Rapid Innovation Unit, University of Limerick-our academic partner, the Irish Voluntary Healthcare Association and other community and healthcare organisations in our region.

Our staff held a variety of fundraising activities for national and local charities including Jigsaw.

We are grateful to our staff for their generosity and support towards helping others in need.



Other Key Achievements

Financial and Environmental Sustainability

For St John's Hospital to be a truly sustainable organisation, we recognise the valuable role that all our staff can play in delivering on our Sustainability objectives, also recognising the actions already undertaken as we embark on our pathway to change.

Whilst progress has been made in many areas, we recognise that we need to do more. As future services are developed, we will incorporate sustainable actions in line with local and national policies. Our Sustainability Objectives act as a strong foundation to ensure that we embed our ambition into every aspect of our activity in tangible and measurable ways.

We recognise the enormous challenge that climate change, air pollution and waste have on our environment. We are taking significant steps to address our carbon footprint and deliver a net zero hospital. To achieve this we need to continue our work in embedding sustainability within every aspect of the organisation and to work with the HSE, SEAI and other stakeholders to deliver this goal.

The United Nation's 17 Sustainable Development Goals, 2015-2030 are an ambitious collection of global aims intended to encourage countries to end all forms of poverty, fight inequalities and climate change, whilst ensuring that no one is left behind. By embedding sustainability and carbon reduction as core objectives in our hospital's activities, we believe we can drive long-term success and ensure positive change. Amongst other objectives, we will initiate collaboration projects with suppliers to help meet our targets and to share our learnings across the wider healthcare network

Our Sustainability goals

1. To embed sustainability at every level in St. John's Hospital.
2. To increase staff engagement by establishing stakeholder groups and hospital wide training for staff.
3. To implement energy efficient programmes, reducing costs and carbon emitting practices for existing facilities.
4. To embed sustainability in all procurement policies and tenders.
5. To promote and implement digital transformation.

Some of our Achievements in 2024

Our Catering Department introduced a variety of sustainable measures, for example eliminating the use of cardboard cups in our canteen, showing positive impact on our carbon footprint and reducing the hospital's operational costs.

We initiated a project in our Theatre Department to reduce CO2 emissions associated with anaesthetic gases.

We introduced a Digital Bed Tracker in clinical departments, achieving national recognition and funding support from HSE Spark.

Mayoral Reception – 5th June 2024

On 5 June, representatives from St John's Hospital were honoured at a Mayoral Reception hosted by Mayor Gerard Mitchell. The event celebrated the hospital's outstanding contributions, both to Limerick and beyond.

In his remarks, the Mayor commended St. John's staff for delivering "compassionate, holistic and loving care centred around the individual needs of each patient and family....your patients come first, thanks to your qualified, skilled and dedicated team who support one another to achieve success."

He continued by acknowledging the rich history and invaluable service of St. John's to the Limerick community over the years. Concluding his speech, he offered his warmest congratulations: "I salute you and wish you every success in all your future endeavours. We—the people of Limerick—are indebted to you for your tireless and selfless efforts. We are proud of you. You are exemplary ambassadors for Limerick City and County. Thank you."

Councillor Kieran O'Hanlon also attended and spoke affectionately of his own experiences with St. John's Hospital, paying tribute to its longstanding importance to both city and county.

My heartfelt congratulations go out to every member of St. John's Hospital whose dedication has earned this recognition, presented by Mayor Mitchell on behalf of all councillors at Limerick City and County Council.

The Milford Care Centre was also present at the Reception and recognised for its specialist palliative care and services for older adults in the Mid-West. Having been nominated as "Person of the Year 2023," we also extend our warm congratulations to Milford and wish them continued success.

Research & Publications

Following submission in December 2024 (subsequently published in January 2025), Eolas showcased the hospital's catering team for its outstanding contribution to staff health and workplace inclusivity. St John's Hospital, as featured in Eolas Magazine, garnered national attention for its exemplary standards in staff wellbeing and patient-centred innovation.

Leadership in Health and Inclusion – Under the leadership of the head chef, catering supervisor, and head of catering services, the department was awarded the Irish Heart Foundation's Happy Hearts Gold Award for the third consecutive year. Their efforts included reducing fat, salt, and sugar; increasing whole grains, fresh fruits, and vegetables; and introducing culturally inclusive meals and dishes celebrating diverse culinary traditions, highlighting a broader commitment to staff wellbeing and cultural unity. CEO Emer Martin praised the efforts, stating the initiative "recognises the hospital's efforts in promoting heart-healthy eating options for staff in the hospital's restaurant, showcasing a commitment to improving the overall health and wellbeing of its workforce".

Immersive Design-Based Healthcare Innovation - also in Eolas Magazine, the hospital's partnership with the University of Limerick's Rapid Innovation Unit (RIU) was featured for integrating immersive design thinking into clinical settings. This collaboration led to practical solutions, including custom cutlery holders for a patient with advanced rheumatoid arthritis and a live electronic patient-tracker to improve efficiency. Additionally, an innovative constant-pressure saline irrigation tool developed through the program won the 2023 HSE Spark Ignite Award.

Together, these Eolas Magazine features present a comprehensive picture of St John's Hospital's commitment to provide health-conscious, inclusive meals and pioneering design-driven improvements to patient care and hospital operations, setting a benchmark for holistic hospital leadership in 2024 and beyond.

Leadership in health and inclusion: St John's Hospital catering department's milestones in 2024



The catering department at St John's Hospital is setting a new standard in healthcare catering through innovative initiatives focused on wellbeing and cultural inclusivity.

Recently awarded the Irish Heart Foundation's Happy Hearts Gold Award, the department is recognised for its dedication to promoting heart health across meal offerings, ensuring that nutrition remains a core pillar of wellness for both patients and staff.

The Happy Hearts at Work Programme, an initiative by the Irish Heart Foundation, encourages workplaces across Ireland to support their employees' cardiovascular health by offering nutritious, heart-friendly meals. This prestigious award highlights the department's commitment to integrating cardiac health principles into each meal, providing nutritionally balanced options that align with the highest standards of care.

Emer Martin, CEO, says: "This accolade recognises the hospital's outstanding efforts in promoting heart-healthy eating options for staff in the hospital's restaurant, showcasing a commitment to improving the overall health and wellbeing of its workforce."

Allen Moore, Head of Catering Services and a recent Trinity College graduate in healthcare innovation, expressed his pride in the team's achievement: "Ensuring that our staff have access to healthy, balanced meals is not only a part of our responsibility but also a vital aspect of fostering a productive and health-conscious work environment. We have taken significant steps to ensure that the meals provided in the staff restaurant meet the highest standards of heart-healthy eating. This includes

offering lower-fat options, reducing salt and sugar, increasing the availability of fresh fruits and vegetables, and incorporating whole grains into the daily menu."

In addition to this health-focused achievement, the team at St John's is devoted to fostering an inclusive work environment that celebrates the diverse backgrounds of its staff.

In September, the department organised an Onam celebration to honour the significant contributions of South Indian nursing staff who play a vital role in the hospital community. Onam, a major festival from Kerala, India, symbolises unity and abundance, themes embraced by involving nursing staff in the preparation and presentation of a traditional Onam Sadya feast.

This initiative not only celebrated the hospital's south Indian colleagues but also enriched the cultural fabric of the institution, promoting cross-cultural understanding among staff. More recently, Multicultural Day was celebrated, culminating in an international presentation of culinary delights from a diverse representation of our staff.

The Catering department members are champions of innovation, health, and inclusivity, reflective of St John's own mission statement and values. Their leadership unites staff through food, creating a health-focused and culturally inclusive environment within the hospital.

St John's remains committed to building on these achievements, continuing to develop initiatives that reflect the health and diverse spirit of its hospital community. "Our staff are the face of St. John's, living out our vision and mission statement in their interactions with patients, families, and colleagues. I am constantly impressed by the resilience, resolve, compassion, and strength shown by our staff towards their patients and work each day," says Emer Martin.

Immersive design-based healthcare innovation



Emer Martin Chief Executive Officer St. John's Hospital and Siobhan Meany Clinical Lead RIU and Spark Clinical Fellow.

Leonard O'Sullivan, Director RIU, School of Design, Health Research Unit, University of Limerick, talks about the Rapid Innovation Unit (RIU), an immersive design-based healthcare innovation collaboration between St John's Hospital Limerick and the University of Limerick.

The collaboration involves a targeted programme of clinical immersion with direct staff engagement to identify, validate, and create innovations to improve patient care and service delivery.

An inherent outcome of this collaboration at a hospital level is increased creative thinking regarding identifying improvement opportunities, and then also in implementing solutions. The application of design and innovation methods through a collaboration approach with staff enables new approaches to address needs from specific patient through to system level innovations and changes.

In one example, the RIU worked with the team in the Clinical Recovery and Support Unit (CRSU) at St John's to deliver a solution for a patient with advanced rheumatoid arthritis who spent a month in intensive care following emergency bowel surgery.

The patient, a 68-year-old woman, had difficulty gripping utensils to feed herself due to hand arthritis. Both regular cutlery and special arthritic cutlery were unsuitable for her. After meeting with the patient and the clinical team, the RIU team designed and made bespoke holders to adapt cutlery to fit her hands and the limit grip she had (Figure X). Three versions were created to suit a knife, fork, and spoon.

The design enabled the patient to feed herself independently. In another example staff reported that a manual way of noting patients' locations in units of the hospital using a white board was inefficient. The RIU team and staff designed a live electronic patient tracker board which detailed the unit of care in the hospital in which the patients currently were. The IT staff of the hospital then implemented the solution. This system has now been expanded to several units of the hospital wherein it

has significantly increased patient flow and efficiency.

A key feature of the RIU collaboration in the hospital is the composition of multi-disciplinary innovation teams comprising both clinical experts and design innovators. St John's Hospital seconded Siobhan Meany, Clinical Nurse Manager Perioperative Care, to the RIU as clinical Innovation Lead where she worked alongside designers. In her role Meany leads the clinical innovation strategy by way of a programme of engagement with clinical groups. In this role, Meany has led local innovation initiatives through to implemented solutions which have subsequently been shared with clinical colleagues on the national stage. One such initiative was the design and implementation of a novel constant pressure saline irrigation solution for laparoscopic surgery which was awarded the Spark Ignite award by the HSE in 2023. Since then, Siobhan was awarded HSE Spark Clinical Fellow. The collaboration between the RIU and St John's Hospital demonstrates the high impact of multi-disciplinary innovation teams in healthcare systems.



Bespoke cutlery aid for patient with hand arthritis.

St John's Hospital
St John's Square, Limerick, V94H272
T: (061) 462 222
W: www.stjohnshospital.ie

Financial Overview

Going concern

The Board has a reasonable expectation that the Hospital will continue in operational existence for the foreseeable future. For this reason, the directors have adopted the going concern basis in preparing the accounts. The financial reporting framework applicable to public bodies, derived from the Department of Expenditure, National Delivery and Reform, defines that the anticipated continued provision of the entity's services in the public sector is sufficient evidence of going concern.

The increase in funding allocation was due to recognition of additional funding requirements, increased activity, inflationary pressures and compensation for the falloff in private patient income.

The comparable figures for 2024 and 2023, under the headings of non-capital income and expenditure, is shown hereunder. The accumulated deficit at 31st December 2024 was €5,512,000 which was carried forward into 2025.

Allocation from Health Service Executive

The allocation from the Health Service Executive in 2024 was €41,821,000 which was an increase of €6,648,000 compared to 2023.

Non-Capital Income & Expenditure	2024 €'000	2023 €'000	% Increase/ (Decrease)
(Surplus / Deficit B/F from previous year	4,192	950	
Pay	34,343	31,429	9.2%
Non-Pay	10,995	9,056	21.4%
Total expenditure	49,530	41,435	19.5%
Income	2,196	2,070	6.08%
Net expenditure	47,333	39,365	20.2%
Allocation fro health service executive	41,821	35,173	18.9%
(Surplus) Deficit	5,512	4,192	

Pay Related Expenditure

Pay costs increased by €4,397,000 (16.3%) compared to 2022, mainly driven by the requirement of agency staff to ensure services operate to a safe standard.

Non-Pay Expenditure

Overall non-pay costs increased by €1,939,000 (21.4%) compared to 2023, driven by:

	2024 €'000	2023 €'000	% Increase/ (Decrease)
Xray & Medical Equipment (Incl. Contract Provision)	1,756	1,262	39.1%
Catering provisions	465	431	7.8%
Heat, light & power	425	350	21.4%
Cleaning & washing	1,136	1,031	10.1%

Pharmacy costs decreased by €1,939,000 (21.4%) compared to 2023 due to favourable changes in drugs and medicines pricing:

	2024 €'000	2023 €'000	% Increase/ (Decrease)
Drugs & Medicines	1,106	1,139	(2.9%)

- Patient related expenses increased due to higher activity levels and upward inflationary pressures.
- Heat, Light & Power increased due to a number of unit price increases.

Income

Income increased by €126,000 (6.08%) compared to 2023.

	2024 €'000	2023 €'000	% Increase/ (Decrease)
In-Patient Income	2,196	2,070	(6.08%)

- Ability to raise in-patient income is limited due to the majority of Public Only Consultant Contracts in place.

Summary

Throughout the year, the hospital relied heavily on cash acceleration requests and an overdraft facility approved by the HSE to meet cashflow requirements. The historical deficits have meant that, as we commence each new financial year we do so in deficit, which in turn affects our cashflow position throughout the year.

In 2024 the hospital operated in excess of its budget in order to achieve increased annual service targets set by the HSE, alongside maintaining existing services, all of which are essential to meet patient demand.

Whilst the hospital worked hard to achieve its cost savings programme, the sum of the historical deficits proved too large to be addressed through cost saving interventions alone, raising liquidity concerns and additional financial workload for the hospital.

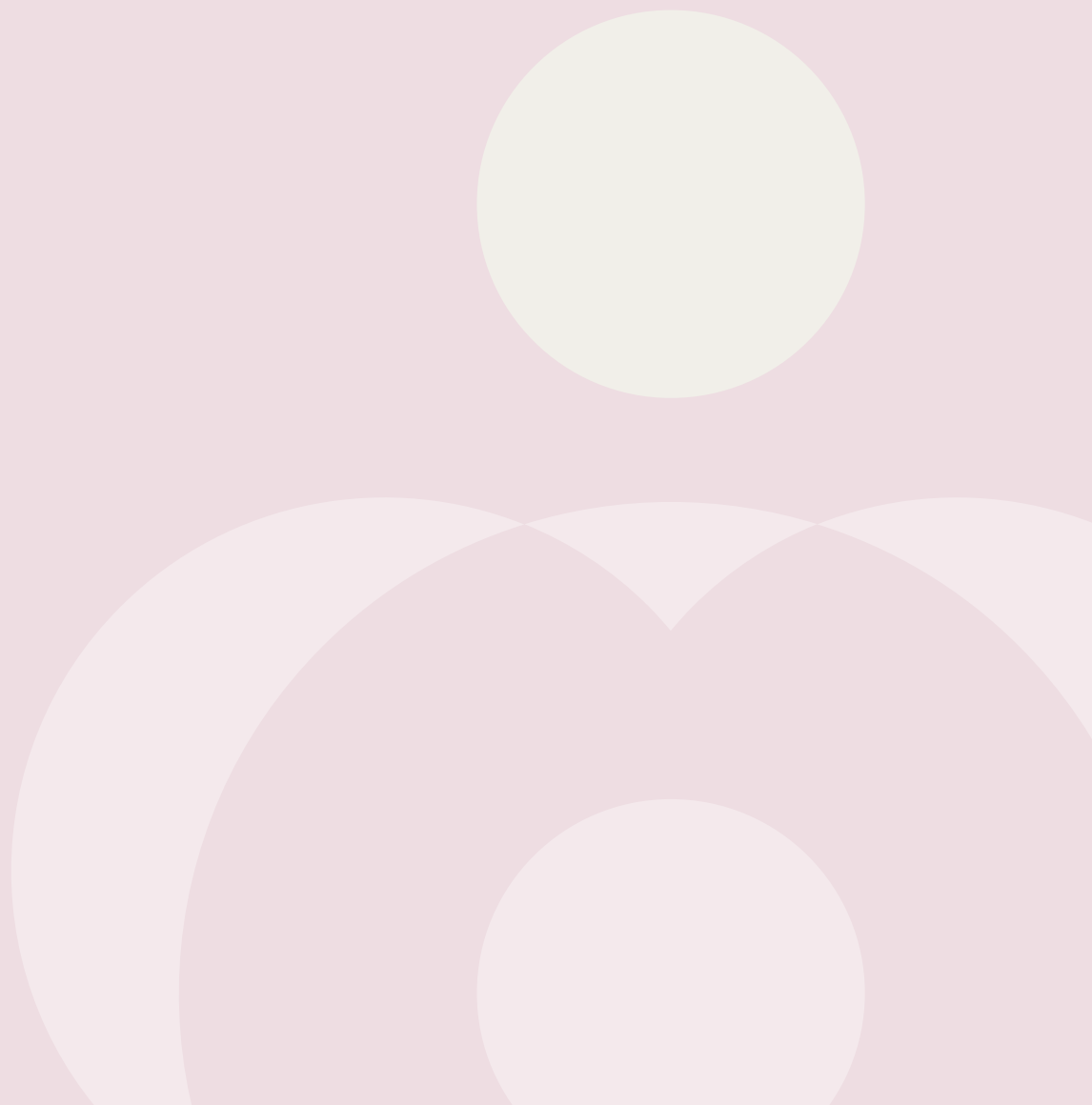
The Board continues to advocate strongly for the historical gaps in funding to be resolved.

Financial Sustainability

To achieve greater financial sustainability, we are committed to the following

- To increase productivity wherever possible, balancing activity and cost with safe, effective care and outcomes
- Identify cost saving measures by engaging staff at all levels in the organisation to contribute and make a difference
- Rationalise all expenditure, seeking the best value for money in our procurement decisions

Hospital Committees





Health & Wellbeing Committee

Introduction

The Health and Wellbeing Committee in St. John's Hospital is supported by Senior Management, the University Hospital Group Limerick (UHGL) Steering Committee and Healthy Ireland. The Committee continues to lead meaningful and inclusive initiatives aimed at enhancing staff wellbeing and fostering a culture of care and connection.

Performance Highlights 2024

Happy Hearts Gold Award: St. John's Hospital was proud to receive the Happy Hearts Gold Award from the Irish Heart Foundation, acknowledging our commitment to cardiovascular health promotion across the hospital.

Healthy Ireland Funding Success: The hospital secured €3,000 in 2024 funding from University Hospital Limerick, with an additional €5,000 committed for 2025, to support wellbeing initiatives and staff facilities.

St. John's Day Celebration: This year's St. John's Day was a resounding success, celebrated under sunny skies. Thanks to generous sponsorship from UHL, an ice cream van was on site, adding a festive touch to the day.

Seasonal and Cultural Celebrations: The Committee supported themed events throughout the year, including Valentine's Day, St. Patrick's Day, Diwali, and the newly introduced South Indian Harvest Festival, Urum, celebrating the hospital's cultural diversity.

Multicultural Day: This annual highlight took place in November and showcased the wide range of nationalities and traditions among staff. The event included food, music, and cultural displays, reflecting the hospital's commitment to inclusion and respect.

Poetry Day: A new addition to the calendar, Poetry Day created a space for creative expression and literary engagement among staff.

Art and Creativity: A visiting artist worked with staff in October, delivering a Halloween-themed decoration workshop and demonstration. Staff participated actively in making decorations for display. The artist returned in December to guide a session on creating handmade Christmas decorations, further enhancing the festive spirit in the hospital.

Arts Funding Secured: Funding from the Hospital Arts Committee was successfully obtained to install new artworks in the Staff Restaurant, creating a more welcoming and aesthetically uplifting environment.

Lifestyle and Health Support: Staff availed of Irish Heart Foundation lifestyle assessments, support from a financial advisor, and engagement with a smoking cessation officer. NRT (nicotine replacement therapy) remains available to all patients on admission, with helpline numbers provided for staff who wish to quit smoking.

Wellbeing Infrastructure: The Health and Wellbeing Room continues to serve as a valuable resource for staff. The covered outdoor seating and garden areas, developed through earlier Healthy Ireland funding, remain well-used and appreciated.

Exercise and Yoga Classes: Classes were again provided to support staff physical wellbeing, including access to yoga and other movement-based activities.

Ongoing Enhancements: Decorative displays and seasonal planting in the hospital's outdoor planters continued throughout the year, brightening the surroundings and supporting staff morale.



Objectives for 2025



Celebrate **St. John's Day** with expanded staff and community engagement.



Retain the **Happy Hearts Gold Award** through ongoing cardiovascular health promotion.



Re-host annual events such as **Multicultural Day**, **Poetry Day**, and seasonal festivals.



Promote smoking cessation with enhanced visibility of NRT and engagement events.



Continue delivery of **exercise and wellness** classes, including yoga.



Sustain the **Health and Wellbeing Room** and outdoor garden facilities as core resources.



Expand **on-site access to financial wellbeing supports**.



Launch a **Long Service Awards Programme**, recognising staff at 5, 10, 20 years' service, with presentations and service pins awarded by the CEO.



Continue partnership with the **Hospital Arts Committee** to further enhance staff spaces through creative and artistic initiatives.

Conclusion

The Health and Wellbeing Committee at St. John's Hospital remains a dynamic and collaborative force, supported by Senior Management and key departments including Nursing, Physiotherapy, Health Promotion, Occupational Health, Maintenance, Administration, Patient Services and patient representatives.

The Committee's initiatives in 2024 demonstrate its continued dedication to nurturing a healthy, inclusive and supportive workplace culture. These efforts reflect the values of St. John's Hospital and will be carried forward with renewed energy into 2025 and beyond.





Infection Prevention & Control Committee

Introduction

The IPC team provide specialist advice on matters relating to the identification, prevention, and management of infection within the hospital. The team works to an agreed annual programme of work. IPC Annual Plan programme 2024 spearheads the focused approach of the IPC department for delivery of service and embeds KPI and audit culture to enable, equip the hospital staff with an older infrastructure. Among the three clinical wards, there can be between 20-30 approx. IPC in-patient cases for prioritisation for isolation based on risk assessment by the team on daily ward rounds and outbreaks.

1. Developing our People

IPC took verbal feedback from all staff regarding education sessions on the ward areas which resulted in increased attendance. A quality initiative is in place re IPC training also. A senior hospital management hospital plan in Dec '24 was put in place to address the HSEland eLearning programmes for all clinical and non-clinical staff.

2. Exemplary Nursing Care

All policies updated accordingly as due for 2024. IPC have inputted specialist advice to CSSD, physiotherapy, Hygiene services PPGs from an IPC perspective.

3. Leadership to Transform

IP&C CNM111 with two other team members was accepted onto The RCPI Postgraduate certificate in Quality Improvement Leadership in Healthcare. When a deteriorating patient (INEWS >3) must be transferred to a higher level of care, University Hospital Limerick (UHL), a Protocol 37 is initiated which involves activating a call to the HSE National Ambulance Service to facilitate the timely transfer. National Ambulance Service guidelines for Protocol 37 state these transfers must occur immediately, or in 30 minutes or between 30 minutes and 1 hr, depending on the urgency of the transfer. The team have identified that while these transfers are necessary for safe patient care, the process itself is not always timely impacting on the domains of quality. This QI project set out to gather baseline data using QI tools and examine the number of Protocol 37s over a 12-month timeframe considering stable and unstable deteriorating patient cases. The project remains ongoing and will involve stakeholder analysis with nursing and medical teams.

4. Enabling and Innovative Culture

The IPC ICNET online interface system is a timely based system where IPC can input IPC information regarding cases and can be viewed by UHL IPC & CONS Microbiology teams and CNM group online.

Strategic Goal 1: Development of our Infrastructure

- Amric funding secured to complete refurbishment of four rooms on the First Floor. We continue to strive towards upgrading of accommodation for patient comfort.
- Plan for replacement of non-compliant handwash basins in the clinical areas in 2025.

Strategic Goal 2: Timely Access to Scheduled Care

- To work to achieve our BIU KPI metrics as a team
- To participate with QRPS department in roll out of online NIMS incident system in 2025.

Strategic Goal 3: Driving Excellence in Patient Experience

- To work with The ONMSD digital roadmap for services for digital assessment tools when rolled out and HSE AMRIC guidance.
- To liaise with Hygiene Chair and the Rapid Innovation Unit to assist in creating a digital method for bed management to track & monitor bed locations across the site especially IPC element.

Strategic Goal 4: Investing in our people and their wellbeing

- To successfully complete the Sparks project with the implementation project with the vein finder by Autumn 2025 with Sparks project lead. The finding to be disseminated to staff and embed core values and culture across work units.
- To facilitate and promote career progression and educational opportunities for IPC CNMs.

Strategic Goal 5: Developing Partnerships with key stakeholders.

- Submit IPC KPIs for BIU and CDOMN audit metrics
- To introduce the Balance scorecard
- To participate in the annual National Care Experience programme
- To continue building strong working relationships with IPC UHL department weekly teleconference calls.



Radiation Safety Committee

Introduction

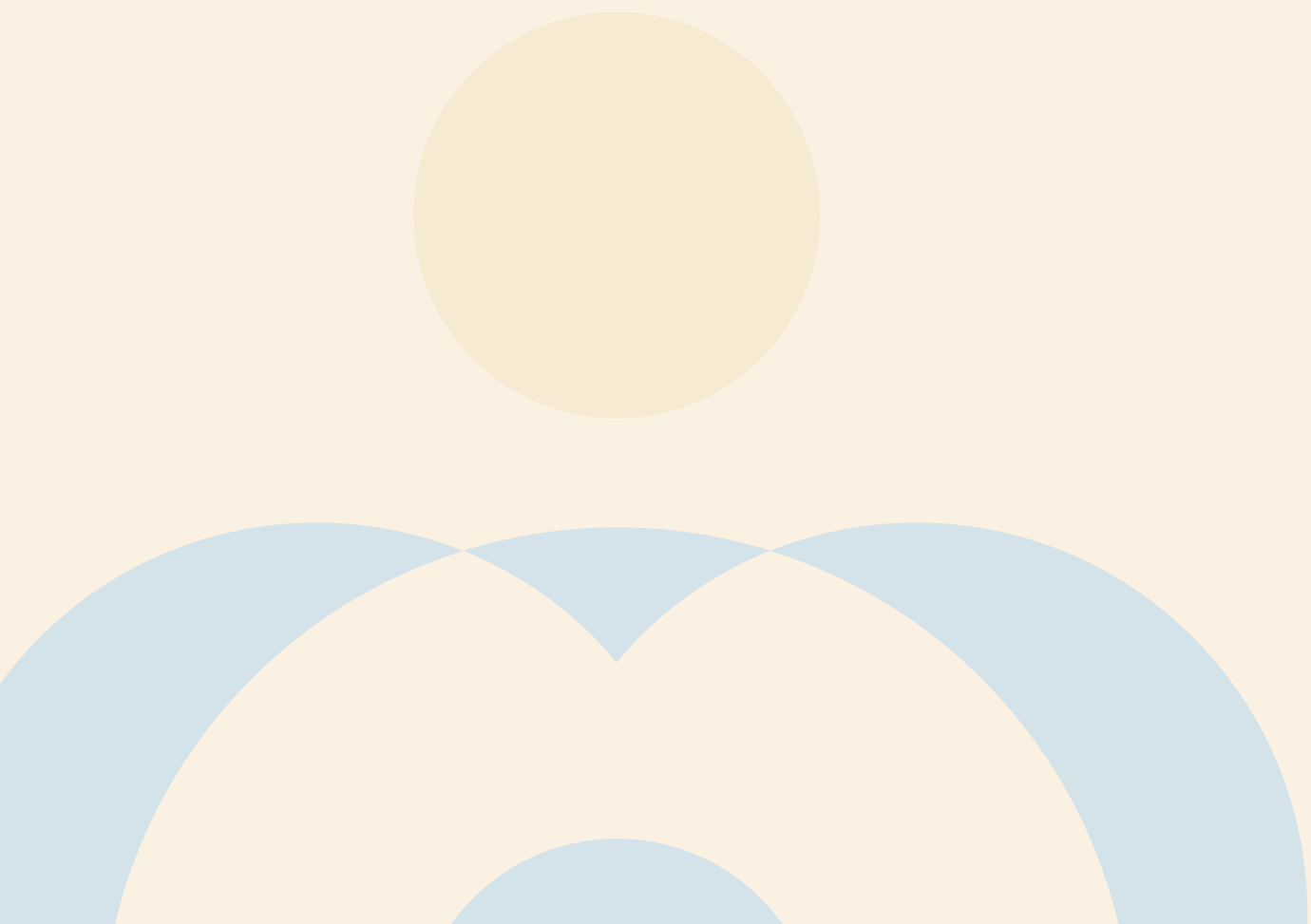
St. John's Hospital Radiation Safety Committee is dedicated to providing the highest standards of radiation safety to our patients, staff and the general public. The Radiation Safety Committee continues to ensure that the use of ionising radiation for diagnostic imaging within the hospital is conducted within the framework of a Licensing/Authorisation System operated by the Environmental Protection Agency (EPA) and the legal and administrative requirements of the Department of Health and the Health Information and Quality Authority (HIQA).

The committee's scope includes all of the regulated activities involving ionising radiation that occur in St. John's Hospital.

- The Radiation Protection Unit (RPU) met in February & November 2024, in accordance with its terms of reference.
- The Radiation Safety Committee met in May & November 2024, in accordance with its terms of reference.
- Radiation safety badges are reviewed monthly. All of which are discussed and monitored locally as well as at the Radiation Safety Committee meetings. Issues with the dosimetry provider are ongoing national, St. John's Hospital has had one minor issue with dosimetry which has been communicated to the EPA.
- Monthly quality assurance testing has been carried out, any discrepancies discussed and reviewed with service engineers and medical physics team.
- Annual quality assurance testing was carried by the Department of Medical Physics, St. James Hospital for ionising radiation imaging modalities. All reports were reviewed by the Radiation Protection Advisor.
- Audits are ongoing within the Radiology department, they are discussed at the Radiology Clinical Audit Meetings and subsequently relayed to the Radiation Safety Committee.
- Owing to staffing deficits within UHL group medical physics dept. St. John's Hospital was unable to progress Local Diagnostic Reference Levels (DRL's) in 2024.



Departmental Reports



Department of Medicine

Introduction

Over the past two years, medical staffing at St. John's Hospital has strengthened. The appointment of experienced consultants, Dr Amjad Ali and Dr Faizal Wahab, alongside Dr Eithne Mulloy's leadership role as Associate Clinical Director, has enhanced consultant coverage in the Medical Assessment Unit (MAU) and wards. With five full-time physicians in place, the hospital has a more robust on-call system with reduced reliance on agency locums, serving to strengthen patient care and team governance.

Performance Highlights

Despite high patient demand with over 100% ward occupancy, the team's focus on admission avoidance from the MAU, rapid diagnostics access (including weekend radiology), and improved junior doctor training fosters efficient and high-quality service delivery. Recent NCHD wellbeing initiatives include eliminating 24-hour shifts, upgrading doctors' residences, and providing digital tools for ward rounds. Collaboration with the Irish Medical Council and Royal College of Physicians and the University of Limerick school of medicine ensures ongoing junior doctor placement, training and professional development of doctors from International Medical Graduate (IMG), BST and GP training schemes along with Medical Intern Trainees.

Looking ahead to 2025, the hospital aims to increase permanent consultant physician appointments, secure specialist registrations, and expand outpatient cardiology services in partnership with UHL. Plans include acquiring new echocardiography equipment, establishing pulmonary function testing, and launching a Day of Surgery Admission (DOSa) unit to optimise surgical patient flow and bed availability.

Objectives 2025

1. To further develop medicine, surgery and anaesthesiology services by developing shared goals between St John's Hospital, the HSE and other relevant stakeholders including the training colleges.
2. Develop a robust succession plan to ensure continued success of the Clinical Director role at St John's Hospital.
3. Recruit permanent consultants to approved permanent posts in order to reduce reliance on temporary consultant appointments.
4. Continue to strengthen integrated care pathways aligned to national clinical programmes.
5. Continue to support the learning and development needs of our NCHDs.

Conclusion

Overall, these advancements reflect a proactive approach to delivering excellent medical care while preparing for future growth and innovation. The Department of Medicine will continue to provide a quality service in line with national and local guidelines and service plans.

Senior Medical Staff

Anaesthetists	*Andas Mikor *Catherine Nix *John O'Dea *Hugh O'Callaghan *Margaret Coleman *John Kennedy *Gerard Crosse *Patrick Dillion	*Patrick Kennelly *Saad Mahdy *Seosamh O'Riain *Walter O'Brien *Yasmin Mazhar *Nicholas Barrett *James Shannon
Emergency Medicine	*Gareth Quin	
Gastroenterologist	*Maeve Skelly	
Gynaecologists	*Sucheta Johnson *John Slevin *Kevin Hickey *Mark Skehan *Naro Imcha *Uzma Mahmood *Katie Field * Daniel Borlase	
Colorectal	*Calvin Coffey *Colin Pierce *Eoghan Condon	
Pathologists	Peter N. Faul *Maeve Leahy *Nuala O'Connell *Denis O'Keefe	
Surgeons	Paul E. Burke *Anne Merrigan *Mamun Abdelrahman	
Endocrinology Service	*Eoin Noctor	
Urology	*Mamoun Adbelrahman *Mr Thomas Jacob *Mr Subhasis Giri	
Vascular Service:	*Mr Tony Moloney *Mr Yasser Abdeldaim *Mr Mekki Medani	

*Denotes sessional commitments from Consultants holding their contracts with the HSE Mid-Western Regional Hospital/University of Limerick Hospital Group.

Dietetics

Introduction

The senior dietitians provide a dietetic service to all inpatients referred via the medical teams. All inpatients have a comprehensive food, nutrition and hydration needs assessment completed on admission to hospital by nursing.

It includes nutrition screening for risk of malnutrition, identifying existing therapeutic or texture modified dietary requirements, existing requirements for nutrition support, requirement for feeding assistance, identification of diagnosed food allergy or intolerances. Based on this initial assessment, appropriate referrals completed by the patients' medical team are received and triaged by the dietitian, using patient prioritisation.

A patient centred care plan is developed, initiated and reviewed by the dietitian, and communicated to all relevant medical, nursing and catering staff.

As a key stakeholder member of our Food, Nutrition and Hydration (F.N.H) committee, the senior dietitians attend meeting quarterly and is involved in objectives and initiatives to support and progress the implementation of current National Food, Nutrition and Hydration Policy (2018), and National Clinical Guideline No.22 (NCG 2020), regarding nutrition screening and use of oral nutritional support for Adults in acute care setting (2020).

Scheduled education and training sessions to nurses and health care assistants, on nutrition education are provided as part of planned induction programmes.

Performance Highlights

The Dietetics department continues to provide a comprehensive dietetic inpatient service to support inpatients referred by medical teams.

The Dietetics department progressed with quality initiatives identified at National F.N.H Policy (2018) where possible, in co-operation and collaboration with other keys stakeholders, Medical, Nursing, SALT, Catering, Pharmacy Audits were completed on compliance with Malnutrition Screening, Protected meal times and QI plan were developed at the Nutrition and Hydration meeting.

Received support from management, to ensure the service of 1.25 WTE equivalent dietitians provide the hospital service.

Objectives 2025

- 1. Further develop the service, by continue to work with hospital management.**
- 2. Continue to provide a comprehensive service to all referred inpatients.**
- 3. Ensure nutrition care pathways and care plans are utilised correctly by appropriate staff by providing education and training to Nursing, Healthcare and Catering and medical staff Currently limited due to staff.**
- 4. Continue to identify and amend any nutrition policies or guidelines or resources.**

Conclusion

Summarised from the points made above, the Dietetics Department will continue to provide quality driven service in line with National Guidelines, with the desire to support and adapt its resources to provide quality service.

Human Resources

Introduction

2024 marked a busy and productive year for the Human Resources Department, with the workforce expanding by 23 clinical staff. This growth significantly contributed to the stabilisation of staffing across Nursing and Medicine and fostered continued development in Pharmacy, Radiology, and Physiotherapy.

The Human Resources team provided comprehensive support to managers and staff across recruitment, compliance, induction, training, policy development, performance achievement, and investigations.

We are proud of our dedicated colleagues throughout the hospital. The HR and Occupational Health teams continue to prioritise staff safety, wellbeing, and satisfaction through an open-door policy that welcomes and supports all staff and managers.

In alignment with our sustainability and paperlight initiatives, Q4 2024 saw the rollout of electronic tablets for interview board members. This innovation improved efficiency and reduced costs associated with paper and printing.

Management Development Training

St John's Hospital designed and funded a CPD Certificate in Managing People Skills, delivered on-site by IBEC trainers and accredited by Technological University Dublin (TU Dublin) at Level 6 on the NFQ.

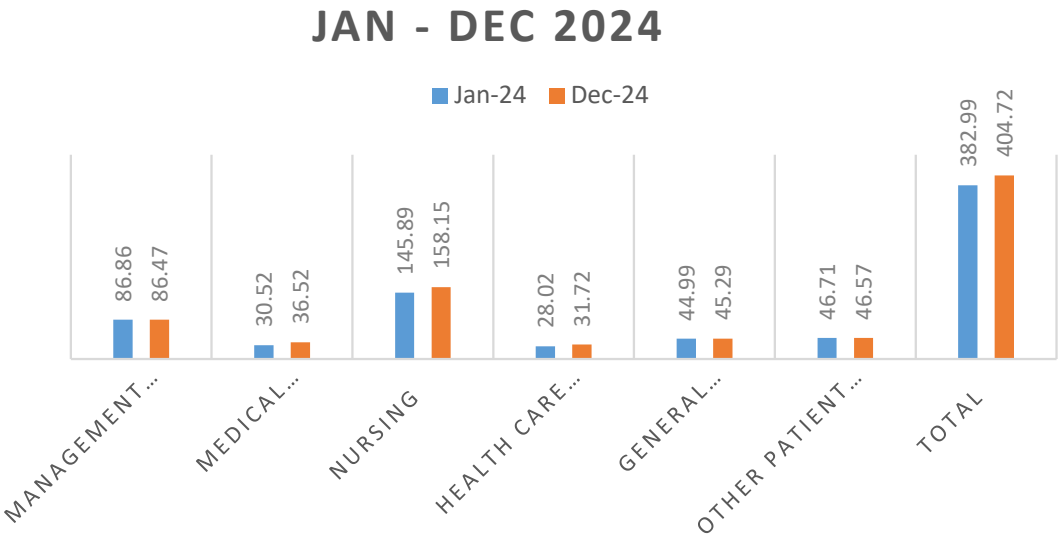
The four-day programme equipped 14 clinical and non-clinical managers to effectively address challenges and opportunities in people management. Modules included:

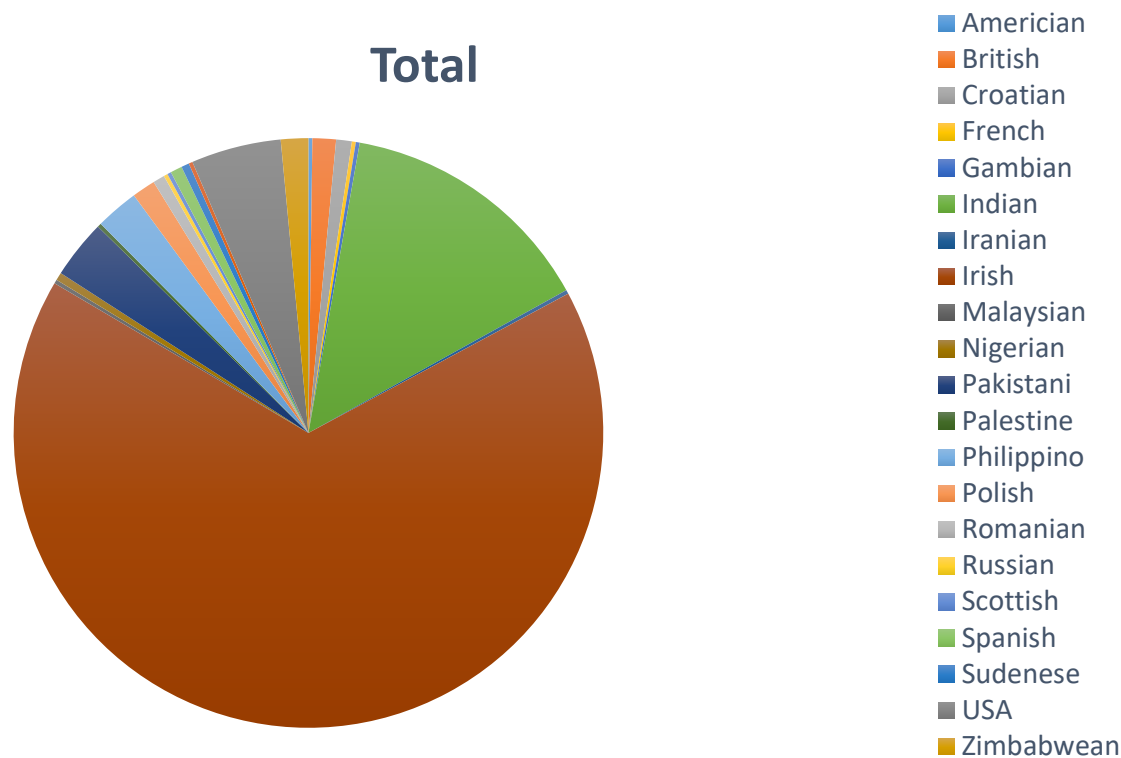
- The Role of the Manager
- Managing Performance
- Employment Law and Industrial Relations
- Time and Stress Management
- Diversity and Inclusion
- Interview Skills

All participants successfully completed the training and were awarded certificates by TU Dublin.

Recruitment and Succession Planning

In 2024, recruitment and succession planning remained key strategic priorities, despite constraints under the HSE 'Pay and Numbers Strategy.' Proactive efforts led to the successful recruitment of key Nursing, Medical Consultant, and Health & Social Care Professional roles.





Diversity Snapshot

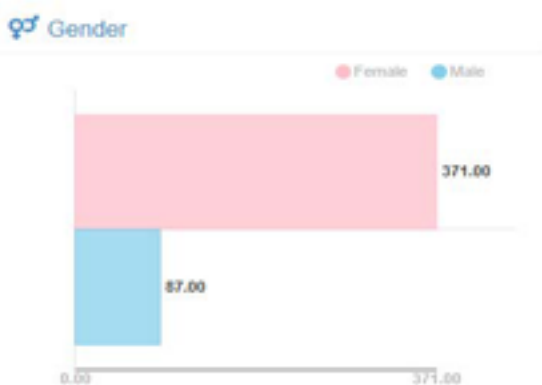
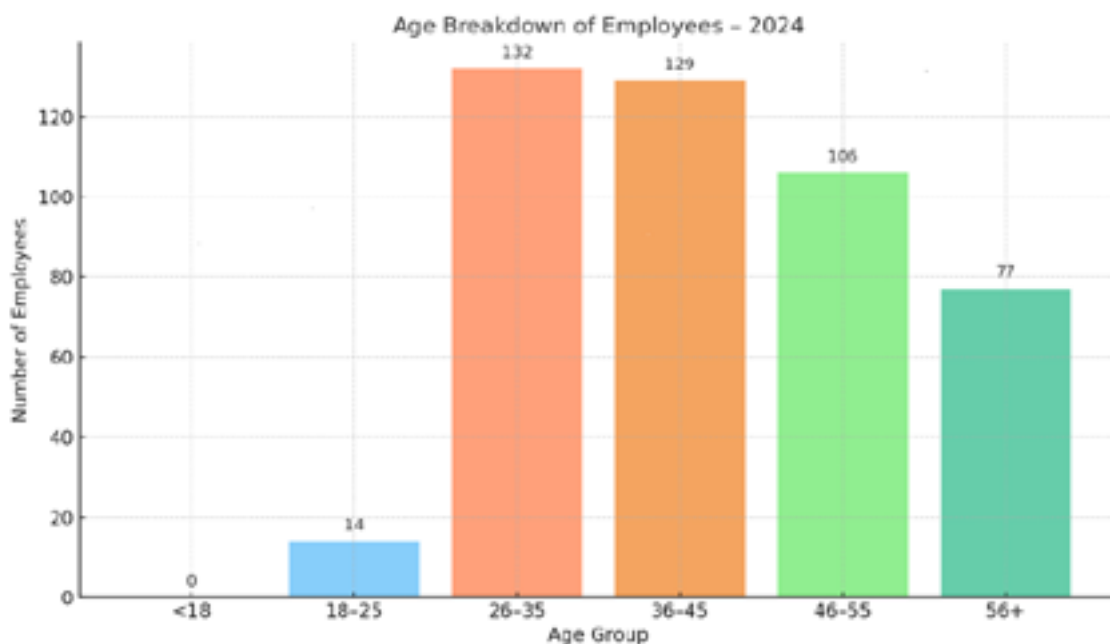
St John's is proud to employ staff from 22 different nationalities. While 66% of staff are Irish nationals, the growing multicultural community enriches the hospital environment by bringing fresh perspectives, ideas, and learning opportunities.

Workforce Overview & Demographics

The workforce increased by 5.5% in 2024, with growth across Nursing, Medical, and Health & Social Care roles.

Absenteeism remained stable at approximately 6.5%. HR and Occupational Health collaborated with managers to deliver effective rehabilitation support for long-term or chronically ill staff through phased returns, job duty modifications, and workplace adjustments.

Turnover was high in Q1 and Q2 but stabilised notably in Q3 and Q4, with attrition decreasing by 50%, indicating a more satisfied and engaged workforce.



Medical Manpower

Medical manpower saw strong progress, with 95% EWTB compliance among NCHDs. Notably, St John's became one of the first hospitals in Ireland to abolish 24-hour shifts for NCHDs as of July 2024—well ahead of national timelines.

Improvements were made to NCHD induction programme and staff booklets, receiving positive feedback and resulting in easier integration of NCHDs with associated benefits of reduced reliance on agency staffing during changeover periods.

The hospital welcomed new NCHDs from the IMGTI scheme, GP trainee rotations, BST training, and Medical Intern placements.

Key Actions for 2025

Initiative	Goal	Timeline
Reduce Sickness/Absence	Reduce absence from 6.5% to 5%	Q2
Manager Training	Handling Disciplinary/Grievances	Q3
Employee Supports	Improve EAP usage	Q1-Q4
Improve Wellbeing	Achieve Keep Well accreditation	Q4
Time & Attendance System	Full implementation of SoftWorks	Q2 onward

Conclusion

2024 was a transformative year for the Human Resources Department at St John's Hospital, marked by growth, innovation, and collaboration. As we look ahead to 2025, we remain committed to enhancing the employee experience, driving strategic recruitment and training initiatives, and fostering a resilient and diverse workforce. Our collective focus on wellbeing, performance, and sustainability ensures we are well-positioned to meet future challenges and continue delivering excellence in patient care through the strength of our people.

Human Resources

Introduction

The on-site Occupational Health (OH) Department at St John's Hospital continues to be a vital contributor to the health, safety, and performance of our workforce. In 2024, the department supported clinical and non-clinical teams through proactive health surveillance, risk assessment, health promotion, and responsive care.

The presence of a dedicated OH team provides significant benefits to the hospital and its staff:

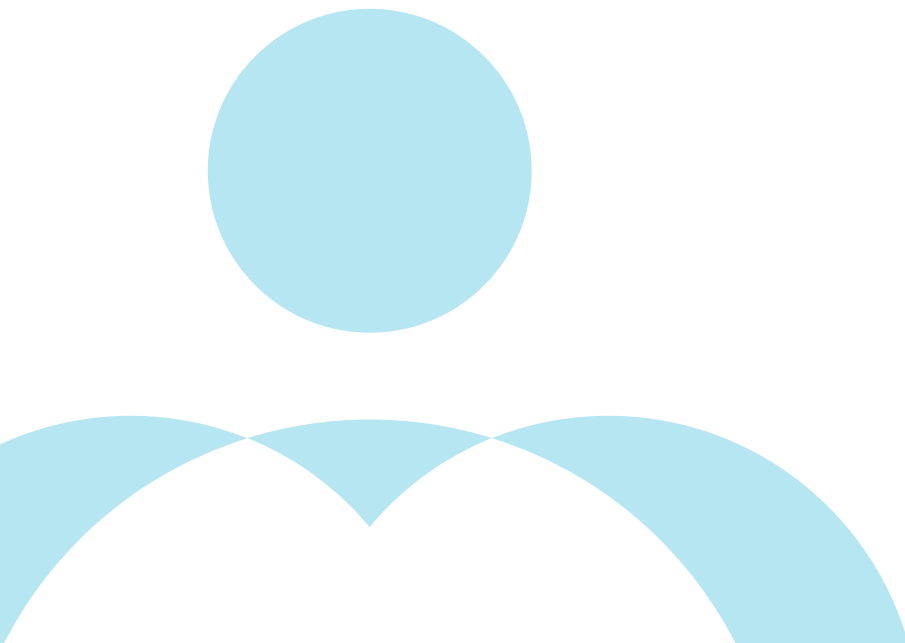
Benefits to the Hospital

- **Workforce Continuity & Reduced Absenteeism:** Early intervention, tailored rehabilitation plans, and risk assessments enable faster, safer returns to work and minimise long-term absences.
- **Regulatory Compliance:** Ensures the hospital meets HSE standards and legislative requirements, including vaccination reviews, manual handling training, TB screening, and infection control measures.
- **Operational Efficiency:** The on-site team facilitates quick decision-making, reduces reliance on external services, and supports timely clearance of new hires, contributing to smoother recruitment and onboarding processes.
- **Incident Management:** Immediate assessment and support in response to workplace injuries (e.g., needlestick and manual handling incidents) reduce risk and improve outcomes.

Benefits to Staff

- **Confidential Health Support:** Staff benefit from accessible, confidential support for work-related and general health issues, including mental health resources through EAP services.
- **Health Promotion & Education:** On-site training and health awareness initiatives improve staff knowledge and workplace safety.
- **Personalised Assessments:** Services like VDU eye exams, workplace ergonomic reviews, and respiratory surveillance help ensure individuals are fit for role and their environments are adapted to their needs.
- **Wellbeing Advocacy:** As active members of hospital committees, the OH team plays a central role in promoting staff wellbeing and a culture of health and safety.

In summary, the on-site Occupational Health Department is a strategic asset to St John's Hospital, fostering a healthy, engaged, and compliant workforce. Its integration into daily operations supports both individual and organisational resilience, helping to ensure high standards of patient care through the health of our people.



Information Systems

Introduction

The Hospital is an intensive generator and user of digital information and makes extensive use of a wide range of information and communications technologies in the delivery of its healthcare services and in the general administration and running of the Hospital.

The Information Systems / Information Communication Technology - IS (ICT) department provides and maintains the Hospitals computer, telecommunications and audio-visual systems and provides technical support to c.500 users of these systems.

The IS (ICT) department is also responsible for the security of the Hospital's information and communications systems and for the security of the data contained therein. The Hospital has robust measures in place to ensure constant confidentiality, integrity and availability of both systems and data.

Service Highlights during 2024

There was a continued focus on improving the organisations cyber-security posture by implementing multi-factor authentication on our mail environment, requiring users remotely accessing the St. John's Outlook Web Access portal to go through an additional security step of entering a code sent by text to their mobile phone, as well as their domain login credentials.

To allow us to better comply with the NIS2 directives requirements around asset identification, classification and vulnerability scanning we implemented Lansweeper Pro monitoring software which provides us with digital hardware and software asset registers while also allowing us to identify un-patched assets for remediation.

We also applied for and received funding for a Datto Sirius backup appliance which allows us to backup critical servers to the appliance and also to the Datto Cloud. This aligns with the NIS2 and NIST CSF principle of Recovery and increase our cyber-resilience posture.

Further to this we replaced our 4 remaining Windows Server 2012 servers which had reached end-of-life

with HSE funded Windows Server 2022 servers. These included 3 of our most critical servers including our file & print server and 2 Hyper-V virtual host servers which host 10 and 11 servers respectively which were successfully migrated to the new host servers. These were our only remaining end-of-life servers as of 2024.

With a view to Business Continuity, we implemented a secondary firewall to handle failover from our primary to secondary internet connections, eliminating a potential single point-of-failure.

We undertook a major body of work to replace all the network switches throughout the hospital, replacing the end-of-life HP equipment with Extreme Networks switches. We were successful in applying for, and being approved for, HSE funding for this initiative. For 2024, we rolled out a major new in-house program in the Local Injury Unit titled InjuryNet. This was developed in-house and is a bespoke digital patient clinical record and unit worklist. It streamlines patient flow tracking, enhances the accuracy and legibility of clinical documentation, and facilitates efficient e-referrals to GPs, Physiotherapy and the Fracture Clinic. By eliminating paper-based processes, we have reduced clinician fatigue, expedited patient care, and enabled customised reporting for discharged coding and unit activity. This project was put forward for the HSE 2025 Spark Summit award and won the Best Digital Product award.

We also developed a Pharmacy Dispensary tool. This tool allows the Pharmacy department to track which drugs are with which patient and allows for easy documentation and management of patient care. This has allowed the Pharmacy to easily ingest patient data through PID patient search and apply dispensary comments behind authenticated logged in accounts for auditing purposes.

A small major emergency tool was developed for the hospital. This allows managers to send site-wide SMS text messages to hospital staff in the event of a major emergency. This uses the Essendex API to facilitate sending messages. The tool allows a manager to send an SMS to one or multiple recipients.

Quality Initiatives/ Improvements achieved during 2024

1. Upgraded the previous HP network switching infrastructure, which was end-of-life, with Extreme Networks solution incl. the replacement of 17 network switches throughout the hospital campus. The topology employed is a 'collapsed backbone'. The primary server room is the 'network hub' and the 11 remote comms cabinets located throughout the campus are interconnected with 1000FX fibre cable. Funding for this project was provided through the HSE Cyber Funding initiative.
2. Implemented Lansweeper Pro monitoring software, which consolidates all hardware and software asset details in a centralized system of record, providing visibility of the organisations I.T environment. Also provides vulnerability assessments of assets, allowing for the identification and remediation of potentials cyber security risks.
3. Implemented multi-factor authentication for remote email users. Improves the hospitals cyber-security posture by requiring an extra layer of authentication for users remotely accessing the Hospitals email server via Outlook Web Access.
4. Removed old analog TV distribution system, leaving only new digital system providing better picture quality, greater range of channels available and improving the patient experience.
5. Installed new fibre cabling to network switch in Stores/Purchasing building. This now provides a 1GB speed connection to the network switch in that building, replacing the previous 100MB speed link.
6. Replaced 11 tablet devices used to conduct MEG audits throughout the hospital.
7. Upgraded Citrix Netscaler and underlying Citrix environment to latest versions. Improves organisations cyber security posture as this is one of our services exposed to the public internet.
8. Installed 2nd Fortinet 60F firewall to provide failover to existing firewall. These specific firewalls provide switching between our primary fibre internet connection and our backup wireless connection in the event of an outage on the primary connection.
9. Implemented Datto Siris disaster recovery device which allows for local and cloud based backups of critical servers, improving both disaster recovery and business continuity as it allows for the creation of both a local virtual server or a cloud-based replica of the backed up server in the event of the failure of the server. Funding for this project was provided through the HSE Cyber Funding initiative.
10. Replaced 4 end-of-life Windows Server 2012 servers with Windows Server 2022 servers. These included our main file & print server and 2 Hyper-V Virtual Host servers. Funding for this project was provided through the HSE Cyber Funding initiative.
11. Replaced 22 client pcs with newer models as part of the ongoing rolling client hardware refresh. Have begun rolling out Windows 11 operating system to new client pcs, ahead of Windows 10 imminent end-of-life status. 19 client pcs currently running Windows 11.
12. Applied for and received HSE funding for Pathfinder Sentinel Cardiac Assessment system, replacing existing end-of-life system. On order and to be deployed Q2 2025.

Strategic Goals for 2025



M365 migration project



Megapay cloud migration project



Nimis CRIS project
(HSE National Project)



Cardiac Assessment system upgrade



Endoscopy system rollout
(HSE National Project)



NIS2 EU Directive on Cyber Security compliance project

Conclusion

The department will continue to provide both a responsive and a proactive service and looks forward to the adoption of the Hospital's strategic plan which will provide direction to the department's future activities and enable us to support the Hospital in achieving its strategic objectives.

Cyber-security and the rolling replacement/upgrade of older equipment, applications and services will remain a key area of focus in the coming years.

The migration to Microsoft 365 will be a major undertaking but will bring us in line with HSE requirements and allow for the use of security and resilience features that it enables. We are looking forward to the implantation of the capital development plan, with the opportunities for improvement and investment in services that may follow in its wake.

Nursing Department

Introduction

Throughout 2024 the Nursing Department exhibited a commitment to delivering high quality care to all our patients. We faced challenges in the early months of 2024 but surmounted these through discussion and agreement resulting in close out on the work to rule which had commenced in 2023. Our goal is to secure funding for Safer Staffing with business case submitted and approved nationally ensuring an attractive workplace for the modern Nursing workforce.

In collaboration with our colleagues throughout the group the Nursing and Midwifery Strategy 2023-2027 continued to define our direction in promoting a culture dedicated to the delivery of quality and safe patient care. We have embraced a culture of creative thinking, digital advancements and are open to exploring new approaches to care throughout the team.

We look forward to an increase in student Nurse placements in 2025 and are critically assessing expanded areas within St John's Hospital for education and training. These will incorporate the Day Unit and also the Day of Surgery Unit when fully open functioning.

Focus on meeting National KPI's on completing Performance Achievement and Professional development plans for all staff to encourage and motivate staff to further develop their own nursing Profiles. Encouraging staff to participate in Leadership courses to enhance their leadership skills.

Strategic Goals for 2025

Strategic Goal 1: Development of our Infrastructure

Antimicrobial Resistance and Infection Control (AMRIC) funding was secured to undertake complete refurbishment of four single occupancy rooms on the First Floor. We continue to work on upgrading accommodation and infrastructure for patient comfort and safety.

Strategic Goal 2: Timely Access to Scheduled Care

We achieved continued approval from the HSE to carry out Bowel Screen Colonoscopy for the National Cancer Screening Service throughout 2024, supported by our Registered Advanced Nurse Practitioner in Gastroenterology.

Strategic Goal 3: Driving Excellence in Patient Experience

In striving to improve patient care and experience, staff secured funding through the national Spark Innovation Programme and the Nursing and Midwifery Professional Development Unit to purchase simulation equipment. Simulation-based learning has become embedded in healthcare teaching and it has evolved from classroom learning to more accessible and flexible based learning. This enables St John's Nursing team to enhance their continuous professional development.

Strategic Goal 4: Investing in Our People and Their Wellbeing

Following engagement with staff and trade union representatives, we were pleased to see that industrial relations issues concluded in January under the auspices of the Workplace Relations Commissioner (WRC). A targeted recruitment drive helped to increase staffing levels to support our nurses and healthcare assistants. We continue to work towards implementation of safer staffing in accordance with the national Safer Staffing Framework for safe, high quality nursing care.

We enjoyed celebrating International Nurses Day, highlighting the achievements of the Nursing team.

Strategic Goal 5: Developing Partnerships with Key Stakeholders

In line with the objectives of the Integrated Health Areas the clinical Nurse Specialist team collaborated with their colleagues across the hospital group to meet the needs of individuals and our communities.

In collaboration with colleagues across the group the Assistant Directors of Nursing (ADON) team have now joined the ADoN Group Council to strengthen leadership across the group.

Patient Services/ Operations

The Patient Services Department provides administrative, clerical and porter support to all clinical and support departments within the following areas, In-Patient/Day Case services, Endoscopy services, Local Injury Unit, Medical Assessment Unit, Outpatient services, Physiotherapy, Pharmacy, Radiology, Cardiac Assessment Unit, Pre-Assessment Admission and Clinical Nurse Specialists.

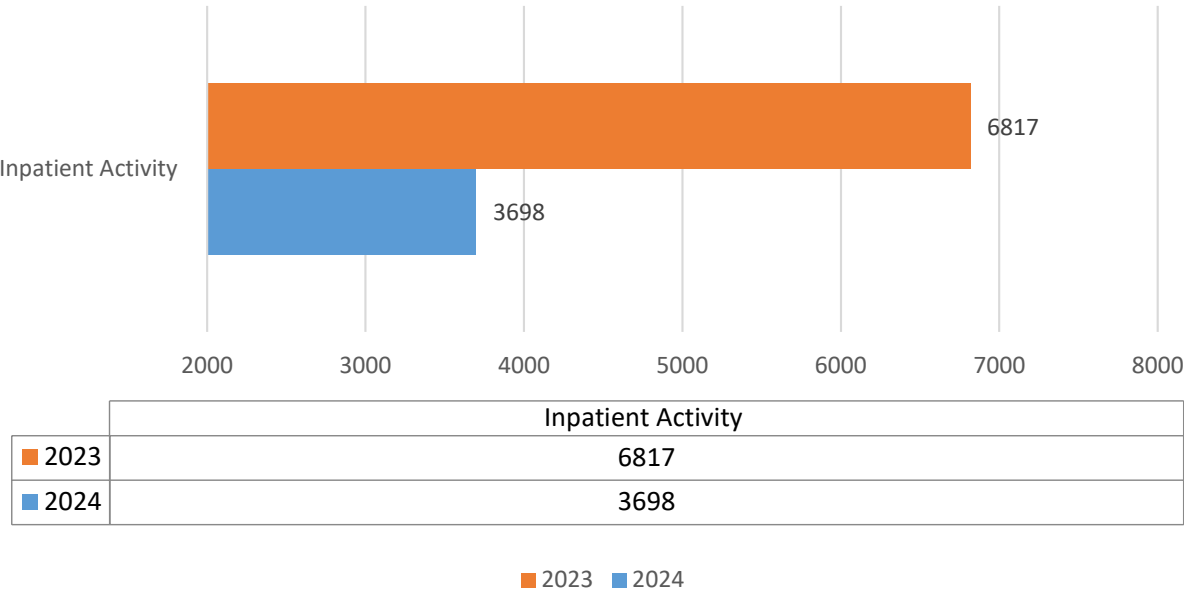
The Patient Services Manager is supported by a team of highly skilled and dedicated clerical and porter staff.

The Patient Services Manager has overall responsibility for the administrative day-to-day management of operational services affecting patients within the hospital. Patient Services strive to ensure an efficient delivery of services is provided to all patients attending the hospital.

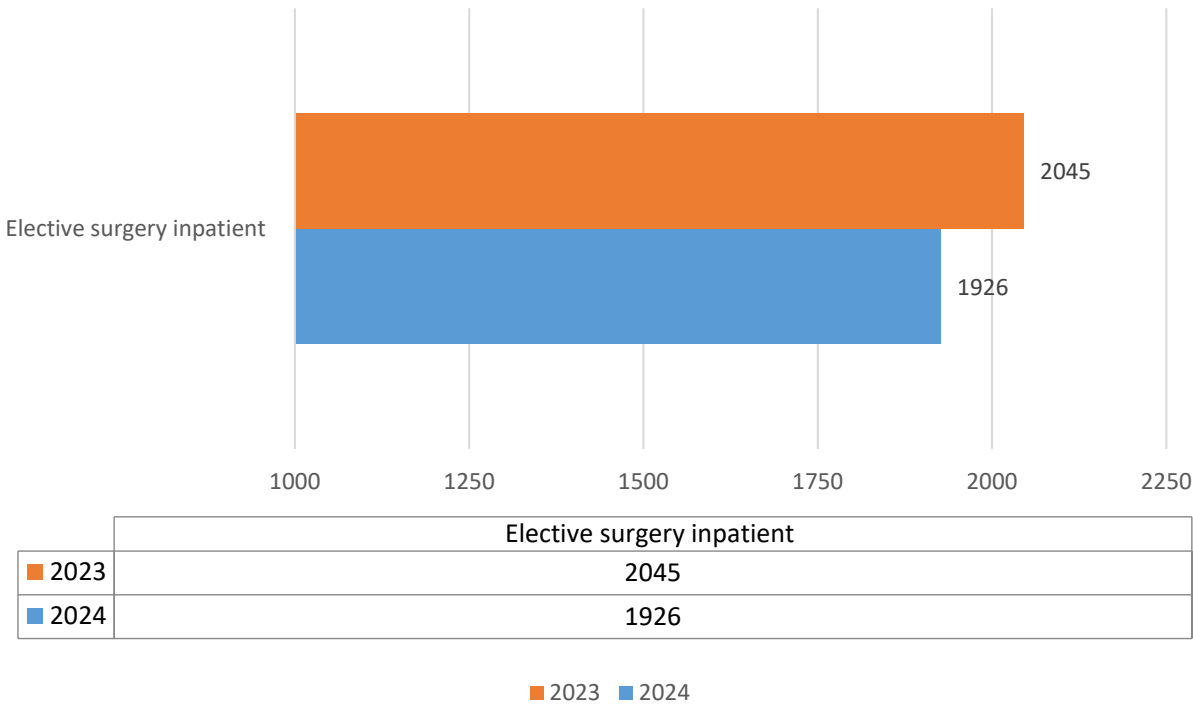
This report will compare activity levels between 2023 and 2024.

Highlights

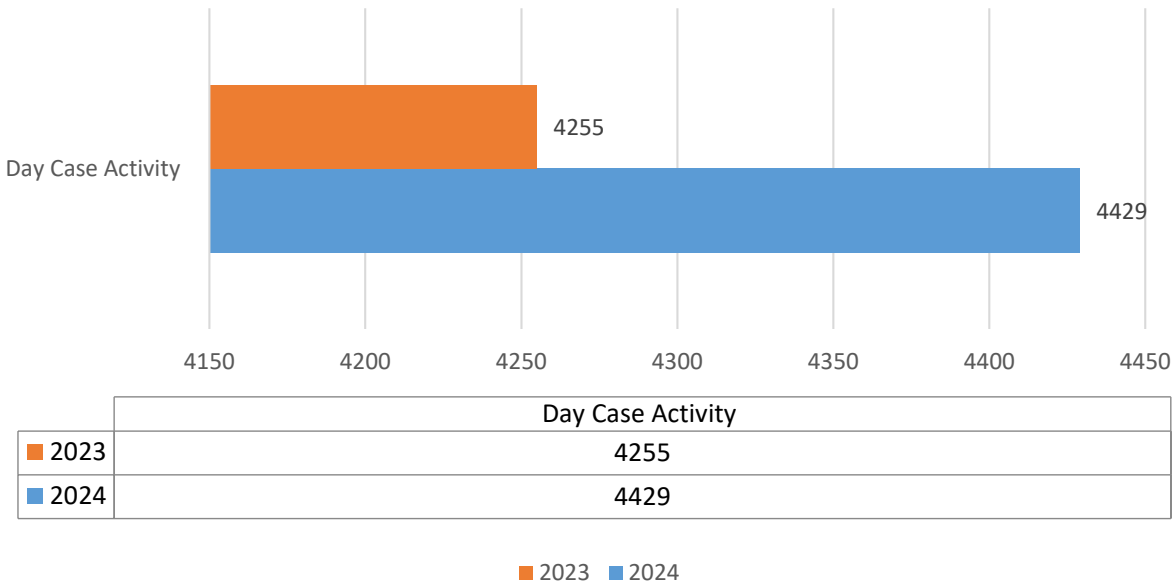
Inpatient Statistics 2023 V 2024



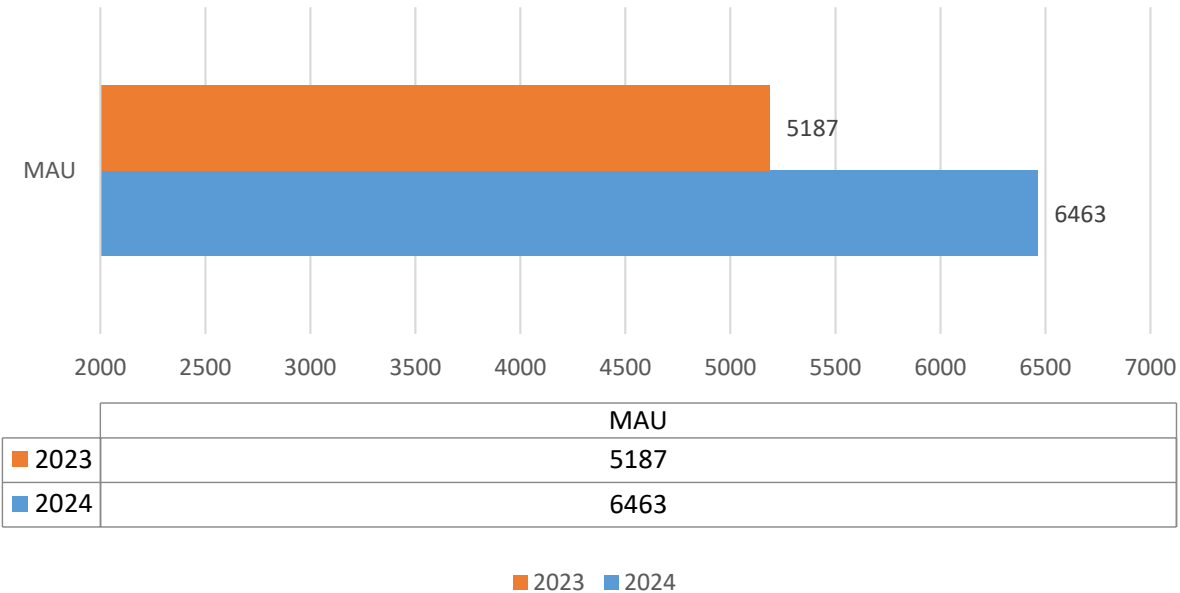
Elective Surgery – Inpatient



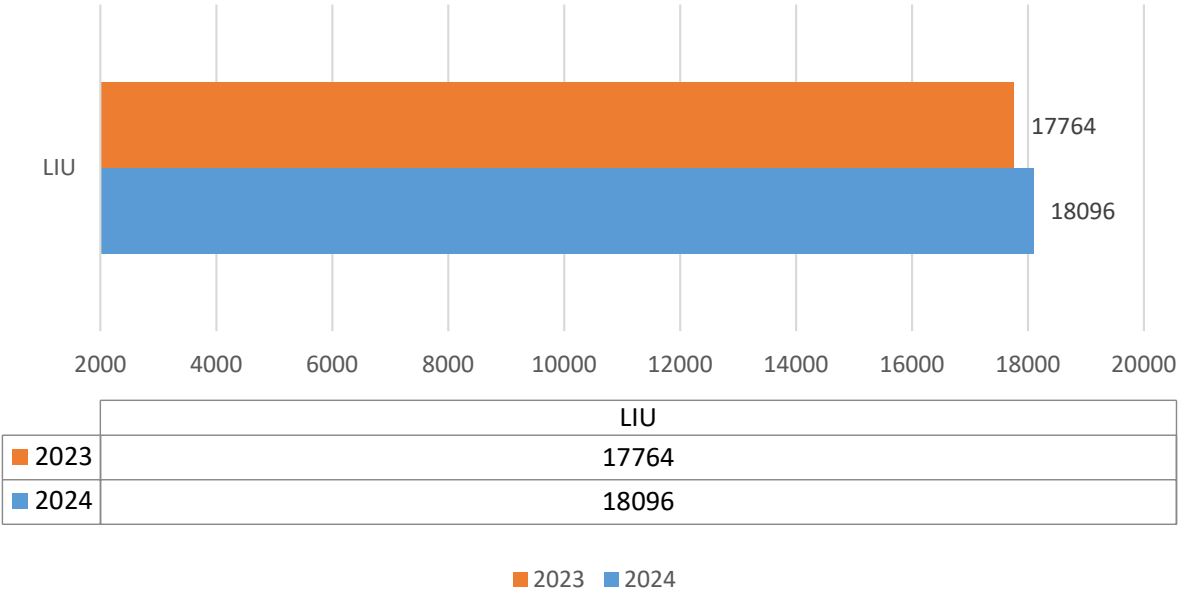
Day Case Activity 23 V 24



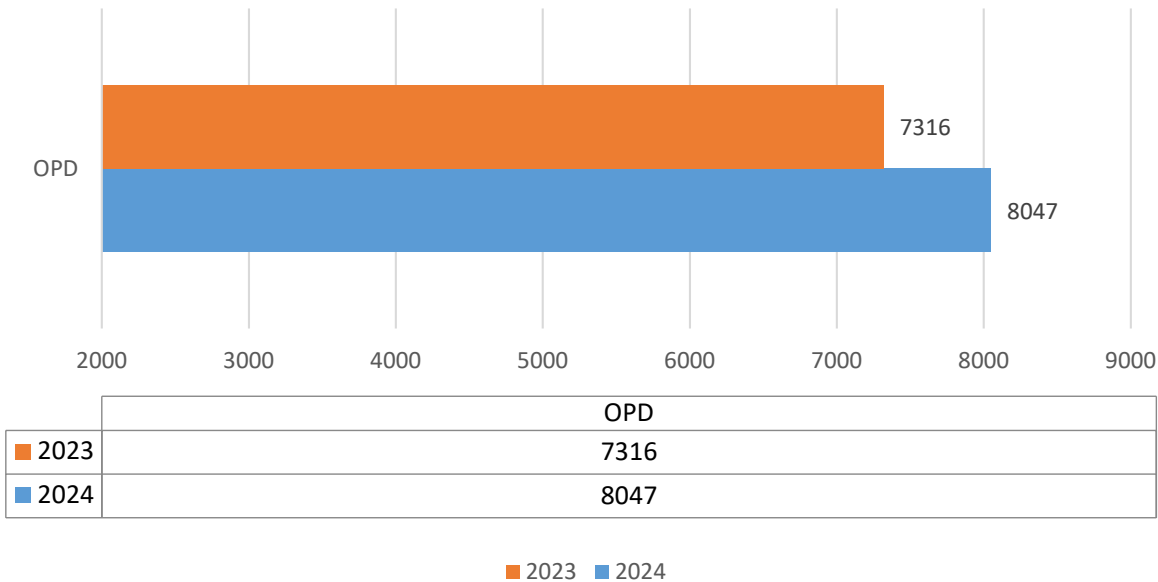
Medical Assessment Unit Activity 23 V 24



Injury Unit Activity 23 V 24



Outpatient Activity 23 V 24



Key Highlights Patient Services

The demand for unscheduled and scheduled care within our services continues to grow on a weekly/monthly and yearly basis. Patient Services aim to continue to support the increased activity throughout the organisation by implementing effective processes to meet the demand on our services.

Healthmail and T-Pro have been successfully rolled out across Patient Services and to follow on from this we are now in the process of setting up all admin support staff

within patient services with access to healthlink. This will allow for instant receipt of referrals from within the hospital group and external sources such as GP's and community care.

Supporting staff morale and efficient administrative and portering processes to support patient care is a priority for 2025.

Pharmacy

Pharmacy Service

Key Service Highlights during 2024 including any particular challenges, how these were overcome and any Quality Initiatives /Improvements achieved or under way.

Key Service Highlights 2024

The Pharmacy Team consists of Pharmacists and Pharmacy Technicians, supported by a clerical officer and a Pharmacy Porter. The service delivers wide range of services across the hospital including clinical pharmacy, antimicrobial stewardship, medication safety and anticoagulation stewardship, supporting appropriate prescribing, patient education, monitoring and follow-up and medication reconciliation. Pharmacy Team members contribute to the work of fourteen different committees, including two within ULHG and two at national level.

The Department enjoys links with the Affiliation for Pharmacy Practice Experiential Learning (APPEL), the School of Pharmacy at University College Cork, and the University of Limerick GEMs and, through facilitating another pharmacy student for work experience, Queens University Belfast School of Pharmacy.

Through these and other opportunities, the Pharmacy Team supports the advancement of Pharmacy Practice with the patient at the centre of what we do, while supporting the hospital's strategic goal strengthen our academic, research and innovation profile and capability.

The Hospital Pharmacy operates a continuous quality improvement model in delivering our internal departmental goals, namely

- **Safe, effective and economic use of medicines**
- **Promotion of medicines optimization for best possible patient outcomes**
- **Delivery of excellence in the Practice of Pharmacy**

Challenges during 2024

Drug shortages require multiple pharmacy hours each week

Drug shortages had an impact on the hospital throughout the year. Successful management of each individual drug shortage was achieved through sourcing initiatives from external markets, clinical pharmacist interventions, sharing information between hospital, and national initiatives, such as new clinical guidelines on a specific shortage that was adopted by the hospital in anticipation of a forthcoming drug shortage.

Drug shortages are occurring at an increasing rate over last number of due to a number of factors; supply chain issues, increasing global demand, raw material shortages, and the withdrawal of some medicines that are not economically viable.

The impact of drug shortage can be experienced at any stage throughout the patient journey; admission, during the patient stay in hospital, at and beyond the hospital discharge. Clinical pharmacist involvement added a focus on prevention of a potential 'failed' discharge through lack of availability of a particular medicine when the patient goes home.

Medication Reconciliation and significant increase in patient acuity

Medication reconciliation rates were lower in the first half of the year due in part to a pharmacist deficit. Higher patient acuity also played a part, with more patients requiring higher levels of clinical pharmacist input and time. One in four patients needed a higher level clinical pharmacist input in 2024 than in 2023

Investment in digital transformation of clinical pharmacy workflow and process continued to reap rewards however, allowing the patients with the highest need and greatest risk reviewed first. This approach reflects international best practice in clinical pharmacy, and is of growing interest in Ireland. St John's Hospital Pharmacy is at the pioneering edge with its digital approach, with opportunities to present its work to a wider clinical audience taken during 2024.

The impact of a filled pharmacist post was demonstrated by improved rates of medication reconciliation for the latter part of the year. Higher demand on pharmacist resources associated with higher acuity naturally led to limits on projects, other than prioritised projects, that could be initiated or closed out.

More prescribed medicines per patient

This third challenge of an increase in the number of prescribed medicine per patient was met by review and update of the variety of drugs held at ward level. The pharmacy procurement process for medicines, ward ordering processes and drug delivery schedules were refined to meet demand.

Other initiative included increased visits by Pharmacy Technicians to wards. These face-to-face interactions were well received by nursing staff and helped problem solving with regard to drug stock locations and supply on the ward. Pharmacy also facilitated the induction of new nurses on the drug ordering and drug storage systems.

Resources to support drug administration were developed, with access to these improved through the creation of dedicated customised specific digital links on the formulary resources for nurses.

2024 Quality Initiatives/ improvements

Unexpected gains with the Anticoagulation Clinic move

The Pharmacist-led Anticoagulation Clinic location moved at the latter part of the year. A process was developed to support patients who were familiar with attending a particular location for many years to enable the smooth running of the clinic for the weeks before and after the move. At the same time, pharmacists, in an effort to improve throughput of patients and streamline processes, took this opportunity to designate one session per week wholly focussed on warfarin, while the other managed patients on other anticoagulants and 'urgent' warfarin reviews. Patients transitioned well to the new location and arrangements, with clinic clerical and nursing staff also playing pivotal stabilising and reassuring roles. The benefit to Pharmacist workflow is expected to be reaped in 2025.

Prevention of omitted or delayed doses – two initiatives, one aim

Pharmacy undertook two projects with the specific goal of supporting nursing staff by enabling the timely dispensing; thereby reducing omitted or delayed drug doses.

The first project was in relation to patients admitted from the hospital's MAU following extended hours and transfers from UHL A&E.

The usual process for ordering drugs for a new patient is to wait until the patient is transferred from MAU to the receiving Ward. The nurse then writes up a drug requisition for a drug that is not on ward stock for the patient. The requisition is then transferred to the Pharmacy, the drug dispensed and delivered to the ward.

To simplify this process and speed up the time taken for the prescribed drug gets to the patient, a pharmacist was deployed to MAU to review the patient's prescription prior to transfer to the ward. Any non-stock drugs for this patient were prepared in Pharmacy, delivered to MAU and then transferred with the patient from MAU to the receiving ward once a bed became available.

The second project focused on a limited number of patient who have planned longer lengths of stay. The Pharmacy Technician checked the patient's drug stocks on the ward and dispensed more as needed to ensure that there was sufficient on the wards to meet their requirements for the next week. Data showed improvement in drug ordering and supply.

Reducing interruptions: increasing communication; a safety initiative

From the Human Factors perspective, spoken and written communications are crucial to maintaining patient safety. Effective communication is essential when a medication query is handed over to a clinical pharmacist for follow-up and timely response, where the potential for medication error is identified in the Pharmacy Dispensary.

For Pharmacy Dispensing Service operations, the typical procedure is that the dispensary pharmacist phones the query through to the Clinical Pharmacist, who reviews the prescription and then telephones back the recommended action to the Dispensary Pharmacist. This procedure also works in the opposite direction: the Clinical Pharmacist needs to raise an alert to the Dispensary Pharmacist or Pharmacy Technician regarding a patient's prescription on the Kardex.

Multiple phone calls were lead to multiple interruptions; that interruption is known to be a risk factor for medication error is well recognised.

In order reduce interruptions to maintain a safe working environment for the pharmacy team on the ward and the dispensary, an excel file was created that could be used for two-way communication. A trial period to evaluate its effectiveness was undertaken. Phone calls and interruptions reduced significantly; written communication ensured timely information transfer to enable the right drug to be dispensed for the right patient at the right time.

However, use of an excel file by multiple users had limitations and the next step taken was an approach to IS Department to build a programme from the excel file. This became the 'Pharmacy Communication Whiteboard', with individual password access and time-stamped communications. The experience of using this programme has already delivered a verdict - the best work-environment quality improvement we have experienced in the Pharmacy, notwithstanding medication and patient safety benefits.

Building research capability and best practice in Care of the Elderly Patients

'Building partnerships' is identified as an important theme of the hospital's strategy 2022-2027. One of our 2024 goals was to develop research capability in dementia and Care of the Elderly with a university partner and begin to implement National Clinical Guideline 2 (Appropriate Prescribing of Psychotropic Medication for Non-cognitive Symptoms in People with Dementia).

The realisation of this goal has started. The partnering university is UCC (School of Pharmacy). A pharmacist successfully applied for a work-based funded PhD in UCC. This will be the second doctoral candidate to undertake research while working as a clinical pharmacist in St John's Hospital.

Strategic Goals for 2025

The 2025 Strategic goals for the Department of Pharmacy are aligned with the St John's Hospital's Strategic Objectives 2022-2027 as follows:

1. Driving excellence in patient experience

Align the Clinical Pharmacy Service with National Clinical Programmes.

In light of unique Model 2S status of the hospital and publication of Model of Care for Preassessment Services by the National Clinical Programme for Anaesthesia, develop a business case and recruit a clinical pharmacist with a surgical specialisation.

2. Driving excellence in patient experience

Maximise the implementation of digital tools to release pharmacy time to patient care

3. People

Positively support professional development and retention

- Achieve recognition of specialist clinical pharmacist roles
- Support achievement of clinical pharmacy qualification for new pharmacist recruits
- Further develop and diversify the Pharmacy Technician role

4. Financial sustainability

- a. Strengthen successful approach to drug shortages by extending supplier and pricing options
- b. Use positive engagement with HSE Access and Integration Drugs Management Programme to exploit new opportunities to improve value for money in the procurement of targeted pharmaceuticals

5. Financial sustainability

Continue engagement in the national Hospital Medication Management System project to prepare for the new pharmacy software system.

Physiotherapy

Introduction

As a contributor to St. John's Hospital's health service, the Department of Physiotherapy plays a key role in improving function, mobility and quality of life for referred inpatients and outpatients. Inpatient physiotherapy services have a fundamental impact on patient discharge management and hospital bed management.

The department supports quality practice, patient safety, service development, patient empowerment and positive health outcomes.

The Department of Physiotherapy delivers inpatient and outpatient services to specific patient cohorts, both on an individual basis and as part of multidisciplinary programmes of care.

Inpatient Surgical: Gynaecology surgery, General minor surgery,

Inpatient Medical: Respiratory, Neuro-gerontology (elderly mobility)

Outpatient: Musculoskeletal including the Virtual Fracture Assessment Clinic (VFAC) support, Pelvic Health, Pain Management and Respiratory.

The main challenges for this department during 2023 continued to be an escalating referral rate throughout the service and the high dependency of the elderly inpatient population adding to the demands on the service.

The main challenges for this department during 2024 continued to be an escalating referral rate throughout the service and the high dependency of the elderly inpatient population adding to the demands on the service. These challenges however have been met by a skilled and dedicated physiotherapy team delivering evidence-based practices to optimise therapy outcomes.

Outpatient Musculoskeletal Physiotherapy

The large increase in referrals to physiotherapy from the Injury Unit, particularly for ankle injuries has driven an innovative programme to manage this patient cohort; The Ankle Sprain Physiotherapy Programme as introduced by the Physiotherapist as a first-contact-clinician in the unit. This streamlined hybrid programme offers appropriate physiotherapy input for each patient without the need for a waiting list.

The introduction of the ROAST Guideline and Talocast splinting for ankle injury management in the Injury Unit by the on-site Physiotherapist in 2024, has led to a reduction in Fixed Walker boot use with positive therapy outcome measures.

The orthopaedic Virtual Fracture Assessment Clinic (VFAC) physiotherapy support from this department also operates a hybrid programme with a zero waiting list.

Outpatient Physiotherapy Clinic Activity	2023	2024
Injury Unit Referrals	1436	1,749 (↑ 22%)
VFAC Clinic Referrals	580	730 (↑ 26%)
Ankle Programme Clinic Referrals	461	643 (↑ 39%)

Outpatient Women's Health Physiotherapy

The Clinical Specialist Physiotherapist (CSP) continues to deliver a pelvic health service for referred male and female patients. The department's contribution to the Midwest Ambulatory Gynae physiotherapy service, was

acknowledged with the pathway being nominated for the HSE Excellence Awards in 2024.

The CSP began a series of education awareness sessions in 2024, for Primary Care physiotherapists and nurses to highlight the referral pathway process.

Inpatient Physiotherapy

The addition of a Staff Physiotherapist to the inpatient physiotherapy team in 2024 led to a reconfiguration of the service, with increased opportunity for patient contact and a dedicated Physiotherapist now assigned to each inpatient floor.

Clinical Education for Physiotherapy Students

Experienced physiotherapy staff continued to deliver in their roles as Clinical Educators in 2024, for both BSc and MSc Physiotherapy students from the University of Limerick. Clinical placements were also offered to undergraduate students from the Netherlands and for CORU (physiotherapy regulation body) recognition applicants.

Department Administration

2024 saw the introduction of shared digital calendar for Physiotherapists, which has removed all paper-based diaries and improved the overall appointment management process.

2024 also saw the progression to using e-referrals from the Injury Unit to the Department of Physiotherapy, with a digital pathway on IU Tracking System for physiotherapy access.

St. John's Hospital Strategy for 2022-2027 provides a clear roadmap to guide each of the hospital department's priorities and objectives over the coming years. The operational objectives for the Department of Physiotherapy for 2025 directly mirror the strategic goals of the hospital.

Strategic Goal 1: Development of our Infrastructure

- Continue to work with the Maintenance Department to reconfigure a reception area and virtual clinic workspace to improve patient flow, department administration processes and patient confidentiality.

Strategic Goal 2: Timely Access to Scheduled Care

- In line with the development of unscheduled care in the Injury Unit, continue to review the physiotherapy input into the IU with a view to the multidisciplinary management of the injured patient with input from a full-time Clinical Specialist Physiotherapist.
- Review of the CRSU service to standardise admission criteria and prepare a Business Case to support adequate physiotherapy resourcing for patient focused rehabilitation and discharge planning.

- Development of the respiratory physiotherapy service in line with the overall respiratory service to improve patient clinical experience and the patient flow process. Business Case presented to EMT to support the objective.

Strategic Goal 3: Driving Excellence in Patient Experience

- In line with the strategic theme of driving excellent in-patient experiences, there is a need to update the clinical governance framework to include and strengthen the HSCP leadership and accountability systems.
- To maintain the established links with the Learning from Excellence community, promoting this philosophy while delivering a Safety II approach to quality improvement and risk management.
- Full implementation of the PJ Paralysis throughout the hospital to promote patient independence and autonomy.
- Development of the inpatient rehabilitation input through supported service delivery implemented by a Physiotherapy Assistant for each ward area; Business Case presented to EMT.
- CSP in Pelvic Health to deliver an independent Pessary Service as a support for the gynaecology team; this will reduce the burden on the Consultant to solely deliver this service.

Strategic Priority 4: Investing in our people and their Wellbeing

- Provide support for all Physiotherapists through implementation of the Professional Supervision framework in a structured programme of scheduled meetings

Strategic Priority 5: Advance key strategic partnerships

- Create a regular partnership with the Rapid Innovation Unit based on the success of past joint projects

Strategic Priority 6: Sustainability and Operational Effectiveness

- Appoint a Green Champion for the Department to support and advocate for climate change action and sustainability

Quality, Risk & Patient Safety

Introduction

Quality Risk and Patient Safety Department Annual Report 2024

The Quality, Risk and Patient Safety Department (QPPS) supports the hospital in its commitment to deliver high quality, safe and effective patient care and service delivery. This is achieved through the adherence to the HSE Incident Management Framework (2020), HSE Enterprise Risk Management Policy & Procedures 2023, National Open Disclosure Framework 2023 and adherence to the Health Information and Quality (2023) National Standards for Safer Better Health Care 2024.

Risk Management

The hospital maintains a corporate risk register and departmental risk registers. The corporate risk register is reviewed quarterly by the Executive Management Team and submitted to the Hospital Board for oversight. The hospital risk register's address both clinical and non-clinical risks which have an impact on service delivery within the hospital.

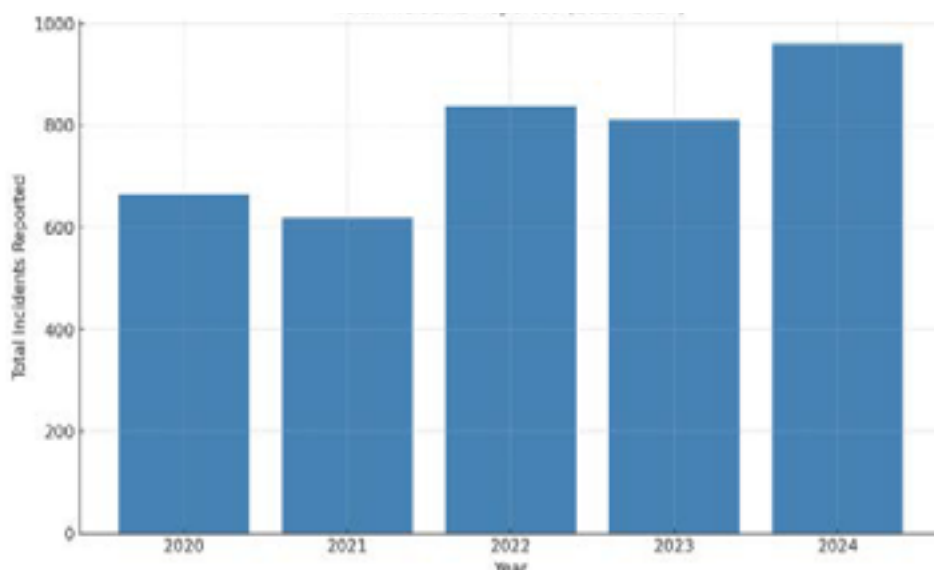
Top 3 Organisational Risks 2023 on the Corporate Risk Register:

- Risk of transmission of infection due to infrastructural challenges.
- Risk of financial uncertainty and insolvency due to legacy funding shortages and accumulated deficit impacting on cashflow.
- Risk of harm to patients and delayed diagnosis due to the backlog in surveillance waiting lists as a result of reduced capacity.

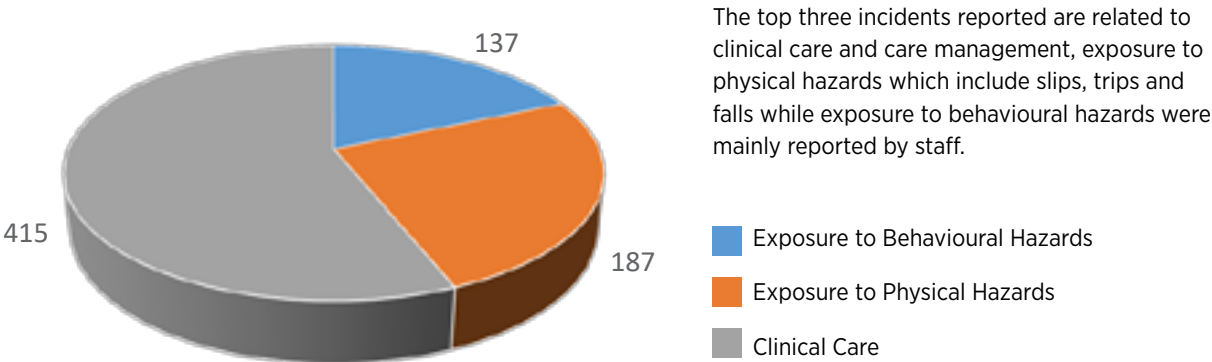
Incident Management

All relevant incidents are reported on the National Incident Management System (NIMS) and reviewed accordance with the HSE's Incident Management Framework. There has been a 30% increase in incident reporting over the last five years in the Hospital and in 2024 a total of 960 incidents were reported, 415 (43%) were clinical and 545 (57%) were non-clinical.

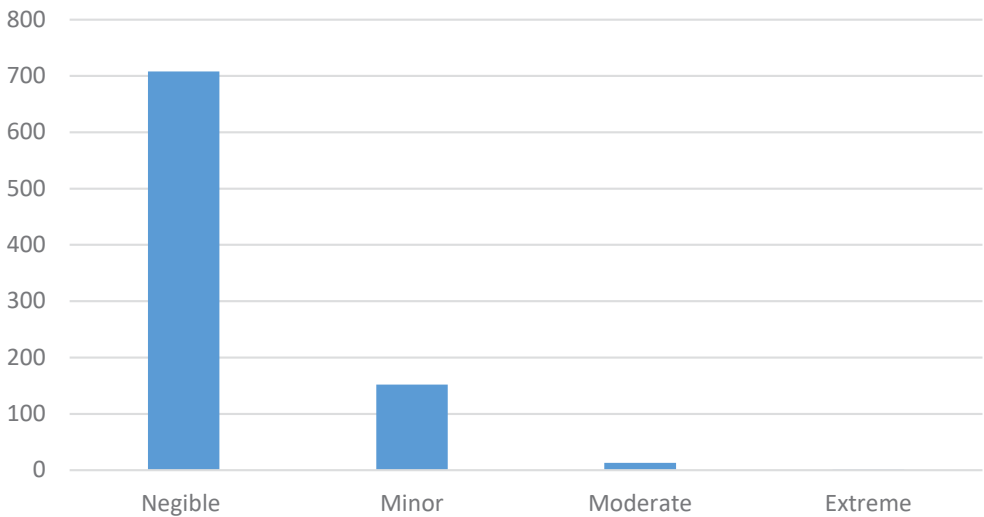
Total Incidents Reported (2020-2024)



Top 3 Incidents in 2024 by Hazard Category



Severity of 2024 Incidents



In 2024, both interactive and paper-based National Incident Report Forms (NIRFs) were used across the hospital, supporting timely and efficient incident reporting.

All Category 1 and 2 incidents, along with Serious Reportable Events, were reviewed in line with the *Incident Management Framework*. The QRPS department is committed to learning and quality improvement following patient safety incidents reviews by engaging with departmental heads in relation to incidents reported and their quality improvement plans.

A total of 14 complaints were received and managed in line with the *Your Service, Your Say (YSYS)* Framework. All complaints were closed within the required timeframe, with no requests for review in 2024.

Key complaint themes identified included:

- Access, including visiting arrangements
- Communication and provision of information
- Safe and effective care

A total of 320 compliments was received from services users and their families. This feedback is made available to staff and key themes of compliments included; cleanliness of the hospital, kindness and professionalism.

Open Disclosure

The QRPS Department have continued to drive and support the implementation of the Open Disclosure (OD) Framework 2023 across St. John's Hospital.

Health & Safety

The States Claims Agency carried an announced audit in September 2024. The objective of the audit was to evaluate the Risk Management System (RMS) to ensure compliance with regulatory requirements, such as the Safety, Health and Welfare at Work Act, 2005 and HSA guidance.

National in-Patient Experience Survey 2024

In 2024 feedback from the National In-Patient Experience Survey highlighted high levels of satisfaction across key areas of care. Patients consistently praised the cleanliness of the hospital environment, the timely support provided by staff and the respectful and dignified manner in which they were treated. They also expressed strong confidence and trust in the hospital team. These results reflect our continued commitment to delivering safe, compassionate, and patient-centred care.

Patient feedback highlighted areas for improvement, including some limited access to food outside set meal times and a need for clearer communication in relation to discharge. Action plans have been developed with the teams to address this feedback.

Key Service Highlights during 2024

Members from the Patients Partnership Forum supported the management team in mapping improvements for external signage within the Hospital. New signage is now in place ensuring an improved experience on wayfinding in the hospital.

The hospital has engaged an external fire company to provide Fire Marshall training and assist with fire evacuation drills in the hospital.

Several teams presented posters at the UHL Healthcare Audit Conference and the National Patient Safety Office Conference Dublin Castle 2024:

- Correlation between timing of swabbing and physiological deterioration of patients who experience acute respiratory symptoms.
- Determining the quality of pain assessment and management amongst older medical in-patients in St. Johns Hospital; A Preliminary Audit
- Audit of Care of the dying Patient in St. Johns Hospital
- Enhancing Sustainability and Patients Satisfaction in Hospital Catering Services
- Usage of Non-Invasive ventilation (NIV) in patients with acute hypercapnic respiratory failure in comparison to the British Thoracic Society guideline
- Using the HSE Patient Safety Strategy Commitments to improve the Management and Prevention of Falls
- New Confusion Think Delirium

Plans progressed for the transition from paper-based incident reporting to the Electronic Point of Entry (ePOE) system on NIMS. The hospital's QRPS department, in collaboration with the National QPS team, developed project plans to support a smooth and structured implementation of the direct entry system. ePOE offers a user-friendly and reliable platform that enhances incident reporting by reducing duplication, enabling real-time data access, supporting patient safety monitoring and addressing challenges associated with paper-based systems.

Key Quality & Safety Plans for 2025

In line with the hospital's strategic focus on excellence in patient experience and operational efficiency, several key initiatives are planned for 2025.

To support operational efficiency, an IT-based system will be sourced for the storage and management of Policies, Procedures, Protocols, and Guidelines (PPPG). This will ensure staff have quick access to up-to-date, approved documents which support a regulatory compliance, efficient workflows, and effective training. It also improves document control, reduces risk, and ensures the hospital is audit-ready at all time.

The HSE Open Disclosure Policy 2025 launched on June 17, updates the 2019 policy to reinforce compassionate, honest communication following incidents. It prioritises support for patients, their representatives and staff, aiming to reduce harm and promote a culture of transparency. The policy aligns with the *Patient Safety (Notifiable Incidents and Open Disclosure) Act 2023* and the Department of Health's National Open Disclosure Framework. The QRPS department will continue to ensure the Implementation of the updated policy, supporting compliance by adherence to the checklist, while providing ongoing staff training to build confidence and consistency in applying the policy.

The rollout of the Electronic Point of Entry (ePOE) system will continue in 2025. The QPRS team will support departments in effectively managing the system by promoting timely reporting of patient safety incidents, accurate incident categorisation, and building the capability of managers and teams to analyse and learn from incident data.

These initiatives are designed to enhance safety, accountability and service quality while supporting staff and strengthening systems that deliver high-quality patient care.

Radiology

Introduction

The Radiology Department in St. John's Hospital provides crucial diagnostic support across the entire hospital. Playing a key role in supporting all areas of healthcare to provide the necessary care to our patients. Imaging modalities include x-ray, computed tomography (CT), ultrasound, PACS - picture archiving systems, mobile fluoroscopy in theatre and mobile X-ray imaging on the wards. Diagnostic Imaging services are provided to Out patients, In patients, GP's, LIU, MAU and the Dayward. St. John's Hospital is part of the National Integrated Medical Imaging System (NIMIS). The NIMIS PACS allows users to view images and reports within St. John's Hospital and all other NIMIS sites. Medica (Global Diagnostics) Ireland provided Radiologist reporting remotely. It has been particularly challenging this year to balance the increased demands on our service with recruitment of staff needed to maintain the service. Especially as there is a national shortage of Radiographers and a national recruitment moratorium in place.

Quality Initiatives/ Improvements achieved during 2024

- St. John's Hospital radiology dept. carried out nearly 30 thousand examinations across all modalities. With a median turnaround time of 1 day & 2 hrs from ordered to reported. Indicating an annual increase in throughput and a decrease in turn-around time.
- CT continues to support MAU over 7days. The only model 2 hospital in the group to provide this service.
- Continue to support the Rapid Access Lung Clinic UHL to access CT. 50% of all CT requirements of the Rapid Access Lung Clinic in UHL are now provided by St. John's Hospital CT dept.
- Radiation Protection Unit (RPU) met in February & November 2024, in accordance with its terms of reference.
- Diagnostic Reference Level's reviewed and re-established for 2024, inc. paediatric DRL's
- Annual QA completed for 2024, on all modalities.
- Radiography support provided support to LIU for the extension of their opening hours.

- The performance achievement process was completed for all Radiology staff with a review for each staff member before end of 2024.
- Experienced Radiographers continue to deliver in their roles as Clinical Educators for the duration of clinical placements for BSc & MSc Radiography students from the University College Dublin BSc Radiography programme and University College Cork MSc Radiography programme.

Strategic Goals for 2025

- Recruitment and retention will remain a core area of focus in 2023.
- Continue to review and update all Radiology policies & implement relevant policies.
- Looking at current staffing levels in all modalities, anticipated future needs and implementing plans to deliver on any deficits which exist.
- Strengthen radiation safety practices within the hospital.
- Support the hospitals strategic objectives and continuously review the potential for increased capacity in the department.
- Motivate and encourage staff to participate in research initiatives within the Radiography team.
- Continue to build a competent and skilled workforce to lead and deliver on patient centred quality service.

Conclusion

St. John's Hospital Radiology Department will continue to support services across the hospital and will grow in line with these services. Radiographers will continue to expand on their clinical and technological expertise, providing timely and efficient patient care.

Acht na dTeangacha Oifigiúla (Leasú), 2021

Réamhrá

Aithnítear tábhacht na Gaeilge mar chéad teanga oifigiúil an Stáit ní hamháin mar chuid luachmhar d'oidhreacht an oileáin seo ach, níos tábhachtaí fós, mar theanga bheo i measc pobal ar fud na tíre agus sa Ghaeltacht ach go háirithe.

Píosa reachtaíochta nua; achtaíodh Acht na dTeangacha Oifigiúla (Leasú), 2021 ar an 22 Nollaig 2021. Is láidriú í an reachtaíocht seo ar Acht na dTeangacha Oifigiúla 2003 a chuirfidh go mór le caighdeán na seirbhísí a chuireann comhlachtaí Stáit ar fáil don phobal.

Gné shuntasach agus thábhachtach den Acht is ea caighdeán teanga a thabhairt isteach do chomhlachtaí poiblí in áit chóras reatha na scéimeanna teanga, rud a chuirfidh ar chumas na gcomhlachtaí poiblí sin a bhíonn ag idirghníomhú níos mó leis an bpobal caighdeán níos airde a bhaint amach. Ar cheann de na príomhfhorálacha beidh dualgas ar chomhlachtaí poiblí cabhrú le daoine a n-ainmneacha agus a seoltaí a úsáid agus iad i dteagmháil le comhlachtaí poiblí. Chomh maith leis sin, beidh ar gach comhlacht poiblí nua ainmneacha teanga a bheith acu.

Leagtar dualgas reachtúil nua ar Ospidéal Naomh Eoin in Alt 10A d'Acht na dTeangacha Oifigiúla (Leasú), 2021 maidir le fógraíocht, cumarsáid ghinearálta agus cumarsáid tráchtála a bhíonn ag plé leis an bpobal.

Is iad seo a leanas príomhspríocanna an Achta:

- Beidh 20% d'earcaigh sa tseirbhís poiblí inniúil sa Ghaeilge faoi dheireadh 2030,
- Beidh ar chomhlachtaí poiblí cabhrú le daoine a n-ainmneacha agus a seoltaí a úsáid i nGaeilge agus iad i dteagmháil le comhlachtaí poiblí
- Agus caighdeán teanga a thabhairt isteach do chomhlachtaí poiblí a leagann dualgas reachtúil nua ar chomhlachtaí poiblí maidir le fógraíocht, cumarsáid ghinearálta agus cumarsáid tráchtála a bhíonn ag plé leis an bpobal.

Tháinig na forálacha in Alt 10A. (Fógraíocht ag Comhlachtaí Poiblí) d'Acht na dTeangacha Oifigiúla (Leasú) 2021 i bhfeidhm ar an 10 Deireadh Fómhair 2022.

Deirtear in Alt 10A. (Fógraíocht ag Comhlachtaí Poiblí) d'Acht na dTeangacha Oifigiúla (Leasú) 2021:

- (a) is i nGaeilge a bheidh 20% ar a laghad d'aon fhógraíocht a chuirfidh an comhlacht in aon bhliain, agus
- (b) is i nGaeilge trí mheán Ghaeilge a bheidh 5% ar a laghad d'aon airgead a chaithfidh an comhlacht ar fhógraíocht in aon bhliain áirithe. (Ciallaíonn "meán Ghaeilge" aon mheán ina bhfuil 50 % nó níos mó d'ábhar na meán sin trí Ghaeilge).

Oibríonn an tOifigeach Gaeilge go dlúth leis an bhFoireann Acmhainní Daonna chun a chinntiú go bhfuil fógraíocht ar earcaíocht ag teacht leis na dualgais mar atá leagtha amach in Alt 10A d'Acht na dTeangacha Oifigiúla (Leasú), 2021. Beidh ar Ospidéal Naomh Eoin tuairisceán comhlíonta a uaslódáil chuig an gCoimisinéir Teanga i mí an Mhárta 2024.

Ag deireadh 2023, chuir an Coimisinéir Teanga in iúl don ospidéal go raibh gearán faighte acu faoi lógó nua an ospidéil a bhí á úsáid ag an ospidéal ó 2021. Cé nach raibh aon dualgas reachtúil ag an bpointe sin go mbeadh aon lógó i nGaeilge nó dátheangach níor bhain an díolúine seo leis an ospidéal sa chás go n-úsáidfí an lógó ar chomharthaíocht ospidéil nó ar stáiseanóireacht. Rinne ospidéal Naomh Eoin leasú cuí ar an lógó chun an leagan Gaeilge d'ainm an chomhlachta poiblí - Ospidéal Naomh Eoin - a léiriú.

Dul chun cinn maidir le cur i bhfeidhm ailt an Achta:

Buaicphointí Seirbhíse le linn 2023:

- Ag obair i gcomhar leis an rannóg Acmhainní Daonna chun seirbhís aistriúcháin a bhunú chun a chinntiú go n-aistrítear na foirmeacha earcaíochta cuí go Gaeilge chun cur ar chumas an ospidéil riachtanais fógraíochta S.10A den Acht a chomhlíonadh.

Plean Gnó do 2024:

- Leanúint ar aghaidh ag obair go dlúth le hAcmhainní Daonna chun an tseirbhís aistriúcháin a chothabháil chun riachtanais fógraíochta S.10A den Acht a chomhlíonadh.
- Riachtanais Acht na dTeangacha Oifigiúla a chomhlíonadh de réir mar a chuirtear i bhfeidhm iad.

The Official Languages (Amendment) Act 2021

Introduction

The importance of the Irish language as the first official language of the State is recognised as not just a valuable part of the heritage of this island but, more importantly, as a living language among communities throughout the country and in the Gaeltacht in particular.

A new piece of legislation; the Official Languages (Amendment) Act 2021 was enacted on the 22nd of December 2021. This legislation is a strengthening of the Official Languages Act 2003 which will make a significant contribution to the quality of services in Irish provided to the public by State bodies.

A significant and important aspect of the Act is the introduction of language standards for public bodies to replace the current system of language schemes, which will enable those public bodies which interact more with the public to achieve higher standards. One of the key provisions will be the requirement of public bodies to facilitate people to use their names and addresses in Irish when contacting public bodies. In addition, all new public bodies will be required to have Irish language names.

Section 10A of the Official Languages (Amendment) Act 2021, places a new statutory obligation on St. John's Hospital in relation to advertising, general communications and commercial communications which engage with the public.

The main goals of the Act are:

- 20% of recruits to the public service will be competent in Irish by the end of 2030,
- Public bodies will be required to facilitate people to use their names and addresses in Irish when contacting public bodies
- And the introduction of language standards for public bodies which places a new statutory obligation for public bodies in relation to advertising, general communications and commercial communications which engage with the public.

The provisions in Section 10A. (Advertising by Public Bodies) of the Official Languages Act (Amendment) 2021 came into effect on 10th October 2022.

Section 10A. (Advertising by Public Bodies) of the Official Languages Act (Amendment) 2021 states that:

- (a) at least 20% of any advertising placed by the body in any year shall be in the Irish language, and
- (b) at least 5% of any monies spent on advertising by the body in any year shall be in the Irish language through Irish language media. ("Irish language media" means any media where 50 % or more of the content of that media is through the Irish language).

The Irish Officer works closely with the Human Resources Team to ensure that advertising on recruitment aligns with the obligations as set out in Section 10A of the Official Languages (Amendment) Act 2021. St. John's Hospital will be required to upload a compliance return to An Coimisinéir Teanga in March 2024.

In late 2023, An Coimisinéir Teanga notified the hospital that they had received a complaint regarding the hospital's new logo being used by the hospital from 2021. Although there was no statutory obligation at that point in time for any logo to be in Irish or bilingual this exemption did not apply to the hospital in the event that the logo was used on hospital signage or stationery. St. John's hospital duly amended the logo to reflect the Irish version of the name of the public body - Ospidéal Naomh Eoin.

Service Highlights during 2024:

- Working in conjunction with the HR department in establishing a translation service to ensure the relevant recruitment forms are translated into Irish to enable the hospital meet the advertising requirements of S.10A of the Act.

Business Plan for 2025:

- To continue to work closely with HR to maintain the translation service to meet the advertising requirements of S.10A of the Act.
- To meet the requirements of the Official Languages Act as sections are implemented.

2024 Audited Report & Accounts are published on our website

Legal and Banking 2024

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Grant Thornton,
Chartered Accountants &
Statutory Audit Firm, Mill
House, Henry Street, Limerick.

Bank

Bank of Ireland,
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Legal Advisors

Dundon Callanan LLP 17 The
Crescent, Limerick.

Insurance Brokers

AON Ireland,
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