



Multidisciplinary falls prevention roadshow and information sharing day at Mayo University Hospital

Josie Doolan, Falls Team Chairperson, Stephanie Gilger CNM, Lucy Martindale, Assistant General Manager, MUH, Peter Grealis, HCA Manager, Grainne Guiry Lynskey, Quality and Patient Safety Facilitator, Andrea McGrail, Director of Nursing, Catherine Donohue, General Manager MUH, Gracia Gomez Kelly, Occupational Therapy Manager, Mary Weir McDonnell, Senior Physiotherapist, Mary Conlon CNM, Dr Syed Rizvi, Consultant Medical Physician

The falls prevention and management team at Mayo University Hospital recently held a multidisciplinary falls roadshow and information sharing event. The event took place to officially launch the new falls prevention and management policy, a multidisciplinary policy which clearly outlines the roles and responsibilities of all staff in the prevention of falls and the responses when a patient suffers a fall.

Falls among patients in hospitals are the most commonly reported adverse event and is a problem which continues to challenge all healthcare facilities internationally. For patients, in-hospital falls can lead to physical and emotional distress, fear of falling, functional decline, and in some cases serious injury or death.

The policy developed by the team at MUH is based on best international evidence, it involves multi factorial risk assessment, implementation of an appropriate care plan based on the individual patient's needs, early referral to physiotherapists and occupational therapists, pharmacy and other speciality services. It also includes guidance on the use of falls prevention equipment and technology to ensure that falls prevention equipment is used safely and in line with the supporting evidence.

All members of the multidisciplinary team were involved in the development of the policy which also includes clear measures to be taken if a patient does fall and the medical and nursing interventions necessary.

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For feedback, comments and suggestions, please email newsletter@saolta.ie

Welcome...

Welcome to the Spring 2017 edition of the Saolta University Health Care Group newsletter. In this month's issue, we feature Mayo University Hospital and highlight some of the developments taking place there, including a feature on the new falls prevention and management policy at the hospital, a look at the work undertaken by the occupational therapy department and an update on the quality and safety developments at the hospital.

We take a detailed look at the radiology department in GUH and find out more about a new website launched by a Saolta Dietician for World Kidney Day. There are lots of developments and new projects underway in all our hospitals and we would encourage you to take the time to read about them and learn some more the work of your colleagues across the Group. As always we encourage you to send your feedback on this month's issue. If you have any other comments, queries and questions or stories you would like us to feature, please get in contact with us at newsletter@saolta.ie

Saolta Newsletter Team

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Top Tweets for January

Top Tweet earned 2,727 impressions
 Neurotransmitter Innovation evening.
 Thursday 26 January at 6pm. University
 Hospital Galway. For further information call
 091 493 251. pic.twitter.com/zOLEB3KXdd



Top media Tweet earned 1,509 impressions
 Staff settling into the new Shannon Ward in
 75 bed ward block at University Hospital
 Galway pic.twitter.com/B40Lg9PISP



Top Tweets for March

Top Tweet earned 2,623 impressions
 New leaflets and posters "How to protect
 yourself from falls" launched today in MUH.
#Mayoagainstfalls.
pic.twitter.com/eS0tsv5OEA



Top media Tweet earned 2,190 impressions
 Falls Prevention and Management
 roadshow in Mayo University Hospital today.
 great MDT input into a challenging problem
pic.twitter.com/PF65p6H1V7



Top Tweets for February

Top Tweet earned 3,320 impressions
 Brand new cross border facilities for cancer
 patients in @WesternHSCTrust Altnagelvin
 Hospital @roinnslaiste @SimonHarrisTD
pic.twitter.com/ncs3RN6Xmy



Top media Tweet earned 3,190 impressions
 Staff at @hselive @saoitagroup
 @Healthyireland @getirelandactive "Love
 Life, Love Walking Day" 5k run & walks @
 Merlin Park Galway #HSEOTwalk
pic.twitter.com/CbOoEWZDKb



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Chief Executive Officer

Dear colleagues,

Welcome to the spring 2017 edition of our newsletter. Once again, quarter one of 2017 continues to see demand for our services grow across all sites and work is continuing to manage patient flow in all our hospitals to minimise the length of time our patients wait to be treated. Despite the pressures on our service, we continue to strive to improve the quality of care delivered by you on the ground to our patients every day. Our Operational Plan for 2017, which is available on the Group's website, outlines the key objectives for this year, along with the target patient activity figures, financial budget, and key performance indicators. We expect to care for around one million patients this year and we will again be very busy across all categories of patient activity.

We recently welcomed Minister Harris to the UHG site and used the opportunity to update him on the developments and challenges across the Group. The Minister visited the ED and saw the challenges faced by patients and staff based in infrastructure that is not fit for purpose. The Minister has provided funding to move to the design phase for a new Emergency Department and work is continuing to progress this development with our colleagues in HSE estates. In parallel to this work we are also undertaking an options appraisal for the future development of services across both the UHG and Merlin Park sites. We are opening the beds in the new 75 bed ward block on a phased basis and it is expected that it will be fully operational in the coming months. In relation to developments in across hospitals in the group, we also continue to work on our submission to the mid-term capital review.

I was delighted to recently attend the final presentation of the Saolta Clinical Directorate Team Leadership Development Programme. This Programme is a partnership with RSCI and is supported by Dr Philip Crowley, National Director Quality Improvement Division. Led by Dr Kevin Clarkson and Dr Ethel Ryan, both team's presentations showcased the ability of Saolta staff as well as the benefits of multi-disciplinary teams, while highlighting the effectiveness of the directorate model in the Saolta group.

We are continuing to prioritise our efforts to reduce the numbers of patients who wait for hospital appointments across the group. Plans are in place in each hospital in the group to work towards meeting the new targets set by Minister Harris and we are working hard to reduce



Maurice Power, CEO

the number of patients waiting for inpatient treatment. As part of these efforts, some noncomplex work is being outsourced and we have established a number of in-house waiting list initiatives and clinics in different specialities across the group.

I would like to congratulate our colleagues in Sligo University Hospital who were recently nominated for a number of Irish Health Care Awards. The dermatology department was nominated for their Generation Sunsmart initiative, the ophthalmology department was nominated in the clinical team of the year category, the end of life care bereavement pack, the older persons care service, the pre-admission unit conference and the initiative in the ante-natal clinic to reduce waiting times were all nominated in the healthcare department initiative category. We hope to facilitate opportunities over the course of the year to share the learning from the many innovative practices that are taking place across the group.

The National Patient Experience survey takes place in the coming weeks and will be formally launched by Minister Harris together with HIQA and the HSE in early April. This survey has the potential to provide all our hospitals with very valuable feedback on our services. The data coming from it will have an important role to play in the development of our services over the coming years and I would urge you all to encourage patients to fill in this survey.

I look forward to continuing to working with you over the coming months to progress many of the positive initiatives and developments underway

Mr. Maurice Power
Group CEO

Group Chief Operations Officer

Dear colleagues,

As we come to the end of quarter one 2017, I would like to take the opportunity to update you on activity and developments to date this year. It has been an extremely busy start to 2017 particularly in all of our Emergency Departments. We continue to work closely with all our hospitals to reduce the length of time patients wait in our EDs. All our hospitals are working very hard on measures to improve the flow of patients through the hospitals including a focus on early discharge as appropriate, and close cooperation with the relevant community services in relation to home supports and transitional care. The pilot patient flow project underway in UHG in conjunction with GE Healthcare Fingamore continues and significant progress continues to be made in a number of services including the Emergency Department. Through a number of prioritised projects, we hope that this programme will deliver visible, effective and sustained improvement to patient flow, and also develop key skills of our clinical and operational staff for ongoing change and improvement. The first of these improvement projects has been focussed on our operational flow management at GUH, including our processes related to bed management and patient flow. I know many of the ED staff in UHG are involved in this project and I believe the learning and progress being made there can be shared throughout the Group. The Minister for Health Simon Harris recently visited the UHG site and we took the opportunity to again highlight to the Minister the issues facing the ED at UHG. We are very pleased that the Minister announced funding to go to design phase for a new Emergency Department.

We are continuing to work hard to reduce the numbers of patients who wait for hospital appointments across the Group. There are new inpatient and day case waiting time targets set for 2017 which state that no patient should breach 18 month waiting time by June 2017 and no patient should breach 15 month waiting time by October 2017. These are challenging targets to meet however each of our hospitals have put in place plans to reduce both the numbers of patients waiting and the length of time they wait. University Hospital Galway as the level four site makes up approximately 50% of waiting lists for the Group and is also the designated cancer centre. The Group is implementing a variety of measures to reduce the numbers of patients waiting and the length of time they wait, these include; validating existing lists, moving activity between hospitals, running additional clinics, new appointments to key specialties, the development of health and social care professionals and nurse led clinics and the transfer of surgical activity from UHG to other sites in the Group. We have sought funding to enable additional work to be undertaken internally and await national decision on this. We recognise that the size of



Ann Cosgrove, Group Chief Operations Officer

our waiting lists are so significant that we need to have a more long term approach to really bring the waiting lists to a manageable level for some of our hospitals.

In relation to scope waiting list initiatives all sites are working to address waiting lists with some increased capacity in UHG and Roscommon showing a positive impact. The group is currently working with the HSE in relation to securing additional capacity to address endoscopy waiting lists.

The group has received its capital allocations in respect of capital projects at varying stages of progression across the sites, the total allocation in 2017 is €19.7m. The capital budget nationally is limited currently and a midterm review of the rolling 5 year plan is currently underway and we have submitted all identified priorities across all the sites as part of this review. Projects progressing include the rebuild project Letterkenny, the Diabetic Centre, Interventional Suite Sligo, the replacement ward block Portiuncula, additional capacity Mayo, Specialist Rehabilitation Centre Roscommon and in Galway, replacement Cath Labs, Blood Science Project, radiation oncology and design for ED.

We have also received our equipment replacement allocation €5.6m, which all sites are now working on the progression of procurement. The allocation does not meet requirements but we will continue to seek additional resources and to ensure we fully utilise allocated resources in this regard.

The Saolta Operational Plan 2017 was agreed at Executive Council and can be accessed at www.saolta.ie We are now commencing the collation of the 2016 Annual Report which will be a snap shot of services delivered across all of the hospitals for 2016. If you would like to include 2016 developments in your service please send the information to Anne Conroy in my office. Email address is anne.conroy@hse.ie.

The first National Patient Experience Survey will shortly take place across acute hospitals nationally and will ask patients about their recent experience in hospital in order to inform and guide quality improvement initiatives for the health service at local and national level. All survey responses will be combined to produce reports on the quality and safety of care in Irish hospitals. You will shortly be receiving information on the survey and I would urge you to take the time to read it and encourage your patients to participate in the survey. This is a very important initiative as the information gained will be used to set priorities for the delivery of a better healthcare service for all patients.

As always, I would like to acknowledge the on-going work and commitment of all staff across the Group who deliver such a broad range of services to our patients. I know that staff deal with many challenges during the course of their work but remain focused and committed to providing a high quality service to their patients. I hope that you get the opportunity to have some time off over the Easter period and I look forward to continuing to work with you throughout 2017.

Anne Cosgrove
Chief Operations Officer

Group Chief Financial Officer

BUDGET 2017

Dear colleagues,

The Saolta University Health Care Group has reviewed its budget allocation for 2017 and while we are pleased to see that the budgets are maintained at the 2016 levels with additional allocations for pay restoration, the Group still faces significant challenges for 2017.

The summary budget allocation is as follows:

Budget 2017	
Pay	563.8
Non-Pay	256.8
Income	-109.8
Grand Total	710.9

Tight controls will remain in place in respect of all pay expenditure in order to facilitate remaining within the budgets set. We will also continue to progress agency conversions where possible and limit overtime expenditure.

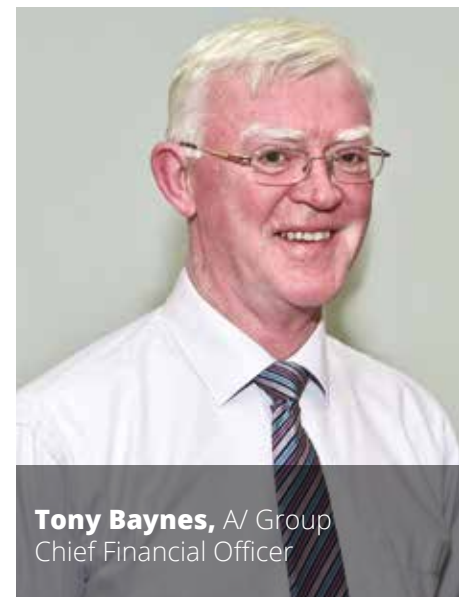
Remaining within the budgets set for nonpay will be a challenge. We are in the process of determining the actual savings that can be delivered in the areas of

1. Drugs and medicines
2. Blood sciences/laboratories

3. Medical and surgical

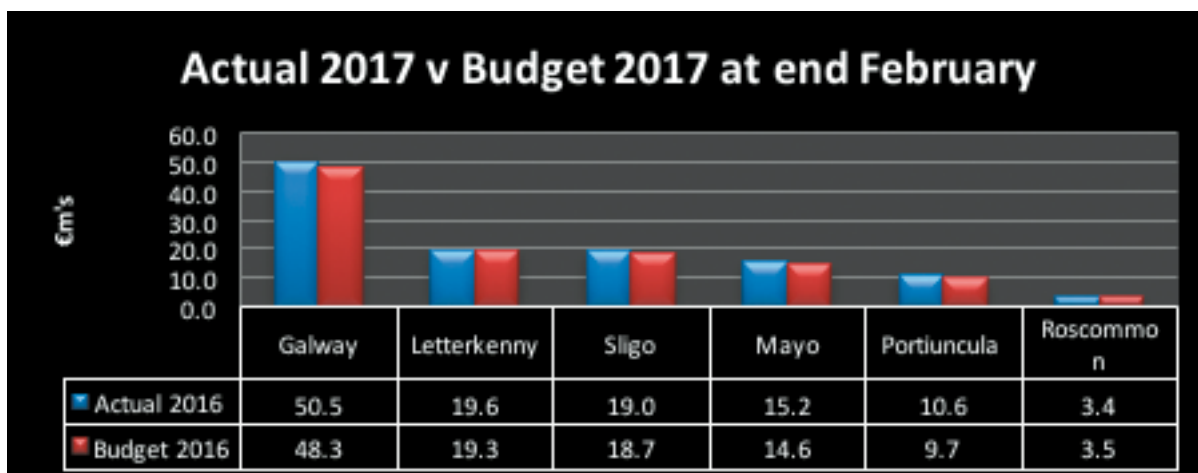
To this end the Group will prepare a submission to the National Acute Office to employ a procurement resource to manage contracts resulting in

- Achieving uniform prices across the seven hospitals in the Group
- Implementing and measuring savings
- Ensuring the Group is compliant with procurement regulations and legislation
- Serving as a link with National



Tony Baynes, A/ Group
Chief Financial Officer

Procurement and the Group.



Financial Performance – at 28th of February 2017

The graph above shows the hospitals expenditure versus budget for the first two months of 2017. At the end of February the group's expenditure was €118.3m an overspend of €4.3m (3.8%) versus budget and an increase in expenditure of €2.1m (1.8%) on the same period last year.

Pay expenditure is over budget by €0.8m (1%) with a growth of €1.3m (1.4%) versus the same period last year mainly due to the increase in WTEs of 144.

Non-pay expenditure has grown by €1.3m year on year and is €2.1m over budget. This growth in non-pay expenditure is mainly in the areas of drugs and medicines and medical and surgical supplies.

Patient related income has increased by €0.4m on the same period last year and is €0.2m below budget.

ACTIVITY BASED FUNDING

Over the next 5 years the allocation of funding to

hospitals and hospital groups will transition from an historical block budget allocation to an Activity Based Funding (ABF) model. Hospitals will now receive their funding based on the number of types of patients that they treat. Funding will be provided for an agreed level of activity at the average national price for the bundle of services that they deliver.

2017 is the first year in which annual budgetary allocation has been adjusted to take account of the cost of delivering that activity. Hospital group budgets have been adjusted by 10% of the ABF surplus/deficit based on activity and cost from 2016.

The table below shows the current ABF funding position for all hospitals groups for 2017. The first column shows the current difference between block budget allocation and ABF budget allocation for each hospital group. At present the amount of funding received through the block grant for Saolta is €16.6 million more than what we would receive under ABF funding. The 2nd column shows the adjustment to funding for 2017 for each group. Saolta

block grant has been reduced by €1.6 million (10% of ABF deficit) based on ABF performance for 2017.

Hospital Group	Full ABF Funding Adjustment 2017	Actual ABF Budget Adjustment 2017
1. Ireland East	15,877,430	1,587,743
2. Dublin Midlands	3,782,078	378,208
3. RCSI Group	-16,271,840	-1,627,184
4. Childrens Group	1,264,798	126,480
5. South Southwest	13,302,458	1,330,246
6. UL Group	-1,262,100	-126,210
7. Saolta	-16,692,824	-1,669,282
Total Adjustment	0	0

Tony Baynes

I/ Group Chief Financial Officer

Group Director of Human Resources

Dear colleagues,

The Saolta Employee Engagement Staff Survey took place in August and September last year and a total of 1,642 staff aired their views on a wide range of areas affecting their work, the Group's plans and our services. Response rates varied across the hospitals from 10% to 33%, and also across staff categories. The data has since been collated and analysed and an overview was presented to the February meeting of the Group's Executive Council in advance of presentations being delivered to each hospital's management teams over the coming weeks. There will also be presentation to staff at the Employee Roadshows which take place on each site every year.

In the meantime, I want to share some of the overall findings of the survey in this short summary.

The results provided us with a valuable comparison with the findings of the 2013 survey, with notable improvements reported by the respondents in respect of the following:

- Happy with work relationships
- Manager is fair with all people
- Manager operates as a coach
- Good two way communication
- People matter to top management
- Manager deals with poor performance
- Hospital has strong patient care values
- Manager sets clear standards of performance
- Informed about developments affecting hospital
- Relations between managers and staff are good
- Manager gives feedback when necessary/deserved

Unfortunately, there were negative comparisons in respect of the following:

- Teamwork
- Work is fairly distributed
- Managers seek employee opinions/ideas

In respect of staff contentment/happiness in work, there was only a very minor change with 54% indicating they are happy/content compared to 53% in 2013, and 22% indicating they are not happy/ content compared to 24% in 2013. Across staff categories, there was no real change on this theme for Nursing, Clerical/Administrative or Health and Social Care Professionals, while Medical/Dental (+18%) and Services Staff (+15%) reported a significant improvement.



John Shaughnessy,
Group Director of Human Resources

Among the factors associated with being happy and contented in work were:

- Feeling valued
- Feeling respected
- Satisfaction with career
- Having someone to talk to
- Strong feeling of teamwork
- Staff-management relations
- Personal satisfaction with work
- Having open dialogue with manager

In this survey we added a section on Health and Wellbeing, particularly relevant in the context of the Healthy Ireland policy. The findings in this section indicate that 60% of staff believe they have a role in supporting the smoke-free campus (15% feel they do not); only 41% feel that calorie posting influences their choice of food at work (31% feel it does not); 44% feel staff should avail of the 'flu vaccination (24% feel they should not); only 28% are satisfied with mental health supports (32% are not); 50% indicate they get their lunch break (40% indicate they do not); 26% feel regularly stressed (56% do not) and 34% feel the employer values staff health and well-being (42% feel they do not).

When the key themes which were targeted in the 2013 survey are compared with staff views on the same themes in 2016, the following findings emerge:

Leadership - staff feel they matter to senior management and that senior management are approachable. However staff do not feel senior management have a clear vision and strategy nor are they providing visible leadership

In respect of developing staff, there was an improvement in the view that managers coach and develop staff.

On the question of performance management, respondents indicated that there was an improvement in their manager giving feedback and dealing with poor performance.

In respect of communications, the responses indicate that there is better two way communication and that staff are being kept informed about developments.

Where to next?

We now need to plan how to address the findings of the 2016 survey and particularly address the areas identified as most in need of improvement. To ensure we take a sensible approach, we will prioritise a limited number of areas, likely to include improving the distribution of work, further improvement in seeking staff opinions and inputs (inclusion and involvement), and a stronger focus on teamwork.

Additionally, there will be an emphasis on increasing the visibility of leadership, ensuring the Group's vision is better communicated and improving our caring areas, for example health and well-being and stress management.

While the survey points out some shortfalls in how we currently interact with each other and how the employer can improve the experience of working for staff, if we work on the areas in need of improvement we will enhance the way we work together, we will improve how we deliver services and we will continue to move the Saolta University Health Care Group forward in a progressive and inclusive manner.

John Shaughnessy

Group Director of Human Resources

Group Director of Nursing and Midwifery

Dear colleagues,

Saolta continues to recruit Nurses/Midwives for all areas in our 7 sites. If you have nursing friends abroad who may like to come home to work please let them know we have jobs available. We will be interviewing all our new graduates in April and will have a position for the majority of them. If at first there are not enough positions in your base hospital there will be positions available across the group.

I would like to congratulate our latest Advanced Nurse Practitioners who were approved by the NMBI, we look forward to working with you. Nursing in collaboration with Nursing and Midwifery Planning and Development Unit continues to support Nurse/Midwifery education. In 2016 over one million euro was spent on Nurse/Midwifery Education. I am very grateful for this funding and appreciate how our patients benefit from this investment.

In May 2017, the experience of patients across Ireland will be captured through the National Patient Experience (NPE) Survey Programme. This programme is a collaboration of the HSE, HIQA and the Department of Health.

All adult patients (aged 18 and over), who spend a minimum of one night in a public acute hospital in May 2017, will be invited to participate in the NPE Survey Programme. Postal surveys will be issued to all eligible participants two weeks after their discharge. This will be followed by a reminder letter and a final survey pack. The survey pack can be completed by post or online. Participation will be voluntary and strictly confidential.



Jean Kelly, Interim
Chief Director of Nursing
and Midwifery

Listening to patient's perceptions of their care will allow us to see what is good about the health service and where we can improve. In order to make this survey a success we need a high response rate. Hospital staff can assist by informing and encouraging all relevant patients to participate in the survey. Each hospital site will make all the relevant information available for staff and patients.

Since the last newsletter we have had our launch of the GUH #hellomynameis initiative. Firstly I would like to commend the work of all involved in organising and secondly, to you the staff who participated by pledging to adopt the initiative within your own working lives, thank you for supporting such a positive concept. Over 1500 staff have pledged to adopt the idea and are wearing the badge. For more information please contact the PALS office and also look out for our next information day. There are plans at various stages to roll the #Hellomynameis initiative to all Saolta Hospitals.

Our Schwartz Rounds are being received extremely well with the test of concept being run in GUH. Due to the ongoing success we are expanding our steering committee and plan to expand the programme to other sites within Saolta in the coming year. Our Round, held on the 16th February dealt with feelings and emotions around coming 'Back to Work'. We are consistently receiving large numbers in attendance so please come early so as not to be disappointed. The following Round took place 31st March and the topic was 'A Day in the Life of...'

Jean Kelly

Interim Chief Director of Nursing and Midwifery



The Women's and Children's Directorate

HypnoBirthing® comes to Mayo University Hospital.

The basic philosophy of Hypnobirthing is that normal, healthy women carrying healthy babies and having healthy pregnancies are able to anticipate and experience the labour of their choice.

The Hypnobirthing view of birth is a well thought out philosophy which includes;

- Deep Relaxation
- Special Breathing Techniques
- Self Hypnosis
- Visualisations
- Affirmations

Relax, Release, let go.

This results in eliminating the **Fear-Tension-Pain Syndrome** before during and after birth.

Hypnotherapy uses hypnosis as a tool to facilitate change in the subconscious mind. Self hypnosis can physically and chemically affect one's body and reprogrammed behaviours. When in self-hypnosis one visualises their birth scene, the brain becomes saturated and imprinted with positive pictures.

Change may be slow but Hypnobirthing is designed to remedy factors that affect public attitude, opinion and beliefs with regard to birth.

Words affect our thinking, changing the language we use for birth, refusing to accept myths or listen to horror stories all helps for more positive, joyful outcomes.

Refute the belief that pain is an inherent part of birthing. Opening our minds, question and enquire.

Two midwives in Mayo University Hospital trained in the Mongan Method of HypnoBirthing®. Following two pilot courses which took place last year, the Antenatal Education Service started to offer Hypnobirthing classes to all women and partners using maternity services in MUH in January this year.



Visit of National Programme Director for Women and Infants Health

Mr. Kilian McGrane, the newly-appointed National Programme Director for Women and Infants Health, visited the five Saolta maternity units during February and March. The purpose of the visits was to meet the staff in the units and gain an understanding of the main issues for each unit.



Maternity Digital Challenge



The Maternal and Newborn Clinical Management System (MN-CMS) Project is the design and implementation of an electronic health record for all women and babies in maternity services in Ireland. The MN-CMS allows immediate access to a complete clinical history, 24-hours a day, including results of medical investigations. It ensures that ongoing patient care is based on the most up to date, comprehensive, accurate information.

On 24th January, the five Saolta maternity units were visited by members of the MN-CMS team as part of a Maternity Digital Challenge which involved visiting 17 of the 19 maternity units in the State in a 24-hour period (of the other two units, Cork has already implemented MN-CMS and Kerry are due to implement it shortly).

The visit marked the launch of this health care initiative and provided information to identify the 'digital gap' to be remedied at each site ahead of the system implementation.

A summary report was prepared for the Minister for Health, Simon Harris, and is available at the link below:

<https://www.joomag.com/magazine/hse-digital-maternity-challenge-2017/0398938001486048935?short>



European Cervical Cancer Prevention Week



Back row: Mr. Domhnall McLoughlin, Assistant General Manager; Dr. Heather Langan, Consultant Obstetrician/Gynaecologist; Dr. Nirmala Kondaveeti, Consultant Obstetrician/Gynaecologist; Dr. Vimla Sharma, Consultant Obstetrician/Gynaecologist & Lead Colposcopist; Ms Juliana Henry, Director of Midwifery. Front Row: Ms Monica Hopper, Clerical Officer, Colposcopy; Ms Sinead Griffin, A/CNM2, Colposcopy; Ms Grainne McCann, General Manager; Ms Mary Kinirons, RGN, Colposcopy.

European Cervical Cancer Prevention week took place from 22-28th January 2017. To mark the occasion, the nursing staff of the colposcopy unit in Sligo University Hospital hosted an information morning to promote regular cervical screening and provide advice to staff, patients and visitors. Women were encouraged to check when their next free smear test is due, or register to have their first smear test, at www.cervicalcheck.ie or by calling freephone 1800 45 45 55. Women were also urged to share the wisdom about the importance of regular cervical screening with other women. Free pearls of wisdom pins, the emblem of cervical cancer prevention, were distributed.

Each of the nearly 200 women who visited the stand were entered into a raffle and prizes were kindly sponsored by Dr. Vimla Sharma Lead Colposcopist, RGN Mary Kinirons, Accuscience and O'Leary Medical. Prize winners on the day included Ruane Ducusin (Sligo town), Naomi Skinner (Ballina, Co. Mayo) and Anne Marie Redican (Ballymote, Co Sligo).

Cervical cancer affects about 300 women in Ireland each year and over 90 women die from the disease. The best prevention is through regular screening by smear tests. Through CervicalCheck, women aged 25 to 60 can avail of free regular smear tests from any registered practitioner of their choice.



Ms Monica Hopper, Clerical Officer, Colposcopy; Ms Mary Kinirons, RGN, Colposcopy; Ms. Sinead Griffin, A/CNM2, Colposcopy.



Ms Mary Kinirons, RGN, Colposcopy; Ms Jennifer Curley, RGN, Colposcopy; Ms Sinead Griffin, A/CNM2, Colposcopy.

New Directorate General Manager

The new General Manager for the Women's and Children's Directorate is Mr. James Keane.

Mr. Keane is the General Manager of Portiuncula University Hospital and was formerly the Group Medical Manpower Manager.

We would like to welcome Mr. Keane to the Directorate and wish him every success in his new role. We would also like to thank the previous Directorate General Manager, Mr. Charlie Meehan, for his contribution while he was in the role.

New Associate Clinical Director in MUH

The new Associate Clinical Director for the Women's and Children's Directorate in MUH is Dr. Hilary Stokes, Consultant Paediatrician. We would like to welcome Dr. Stokes and wish her every success in her new role.

We would also like to thank the outgoing Associate Clinical Director, Dr. Michael O'Neill, for his contribution while he was in the role.

Retirement of Oonagh McDermott

Ms Oonagh McDermott, Unit Nursing Officer/ Services Manager, Women and Children Services, Sligo University Hospital, retired at the end of 2016 after 40 years working in maternity services, 27 of which were in Sligo.

Oonagh joined what was then Sligo General Hospital in 1989, initially as a Ward Manager, and was promoted to Unit Nursing Officer / Service Manager in 1996.

Oonagh's vision for the service was ahead of its time and she was a powerhouse in driving midwifery forward in Sligo. She worked tenaciously to improve services, with the aim of providing the best care possible to women and children. She was pivotal in establishing many initiatives in Sligo, such as the midwifery-led clinic, the Fetal Assessment Unit and the Early Pregnancy Unit.

Oonagh was a member of many national and regional midwifery, neonatal and children's committees, e.g. the National Clinical Programme in Obstetrics & Gynaecology and the national Perinatal Mortality Group. She was generous with her knowledge and supportive of her colleagues. Oonagh's expertise, dynamism and strategic thinking will be hugely missed, as will her kindness and warm personality.



Hopefully retirement will allow Oonagh to spend more time on her interests, which include cycling with the Innisfree Wheelers Cycling Club and playing golf.

We would like to thank Oonagh for her dedication and commitment to women's and children's services and we wish her a long and happy retirement, and the very best of luck in the future.



The Radiology Directorate

Case Study at Radiology Department at GUH

BACKGROUND

The staff at the Radiology Department at Galway University Hospitals had a vision in the mid 1990's of where they wanted to be in regard to radiology patient pathways. Newly appointed Radiologists came with experience of electronic workflows from both the UK and the USA and combined with young enthusiastic administrative and radiographic staff, they championed the concept of automating what were then paper-heavy, film and human resource dependent processes - the norm for Ireland at that time.

The implementation of PAS (Patient Administration System) at University Hospital Galway in 1994 followed by a Radiology Ordercoms/Results module in 1997 introduced radiology staff and hospital clinicians to an electronic-based workflow for the first time. Due to restricted system functionality of that first RIS, they were unable to remove paper from the workflow and of course film was still in use as this was pre-PACS in Ireland. PACS was transforming radiology workflow worldwide and in 2004 a project team was set up involving key radiology staff, hospital clinicians, IT staff, medical physics, nursing and hospital management. Their task was to seek an electronic solution for the paper-heavy and film-based radiology workflow for the region. Their aim was to work towards a solution which would ensure a patient's radiology data was available to authorized users at any time and in any location with 99.8% uptime. It would also allow clinicians place orders, receive and acknowledge results electronically.

After an EU procurement and tendering process, Galway University Hospitals selected Agfa Healthcare to provide the solution by means of a managed service contract into which they built refresh, upgrades and maintenance of system software and equipment. They also replaced a lot of end of life radiology equipment as part of this contract as all equipment needed to be PACS compatible.

In November 2005 the first paperless/filmless radiology department in an Irish public hospital was established. It has grown from strength to strength in the following years. Due to the system's ability to interoperate and integrate with other systems, Galway University Hospitals and Roscommon University Hospital have a robust interoperable electronic radiology record enabling a filmless/paperless workflow with which to serve their patients.

For the purpose of demonstrating the solution, which is a full electronic radiology patient record, the following case study will outline the pathway of a sample patient of Galway University Hospitals and its healthcare partners.

https://www.youtube.com/watch?v=Npj_SkP2cu4#action=share

CASE STUDY (ALL NAMES USED ARE FICTITIOUS)

Padraig, a 67 year old male patient from North Donegal visits his GP for a check up and has a routine blood test which indicates a high PSA level. He is referred to the Rapid Access Prostate Service (RAPS) at Galway University Hospitals to be reviewed by a Consultant

Urologist; Mr Waters. Pdraig attends RAPS in Galway and using Mediweb (radiology EPR) Mr. Waters selects Pdraig's name from a list of patients registered to his clinic that day. He places an order for an Ultrasound Transrectal Prostate Biopsy (TRUS). Pdraig goes to the Radiology Department where his TRUS is performed. His electronic record is updated via RIS and images are transmitted to PACS. The staff in RAPS can track Pdraig's pathway through radiology on Mediweb and can see when his examination is finished and when he has left the department.

The study is reported on RIS/PACS by the Consultant Radiologist using voice recognition, the report is immediately available to Mr Waters in his personal "My New Reports" folder on Mediweb. He accesses his reports on Mediweb daily and marks them as read. Pdraig's biopsy has been sent to the laboratory and Pdraig returns home to Donegal.

Pdraig is diagnosed with prostate cancer based on the results of his biopsy. Mr. Waters receives the laboratory results at his office. He logs on to Mediweb, brings up Pdraig's record and creates an order for an MRI Prostate scan and an Isotope Bone Scan to help him plan a pathway of care. The MRI and Isotope Bone scan orders are vetted by a Radiologist on RIS and are given a high priority status. High priority orders are accessed on RIS promptly by Radiology staff and early appointments are scheduled and sent to Pdraig by post. An SMS reminder for his appointments is transmitted from RIS, days before his scheduled appointment. Pdraig travels to Galway the following week for his MRI Prostate and Bone Scan. Both exams are performed on the same day.

When reporting the MRI Prostate and Bone scan, the Radiologist issues an Unexpected and Clinically Significant Result alert to Mr Waters, Consultant Urologist via the embedded RAD Alert system. He wants to communicate the findings of bone metastases found on Pdraig's scan immediately. Mr. Waters receives the RAD Alert notification to his smart phone. He views the report on the App and accepts the Rad Alert. The Radiologist gets a pop-up notification on his workstation confirming that Mr. Waters has accepted the alert and he is assured that Mr. Waters is aware of the significant findings. Mr Waters, who is not on site when he receives the alert, logs in remotely to the PACS Xero Viewer (PACS web browser application) on his tablet and views Pdraig's images. He arranges for Pdraig's case to be discussed at the next Multi disciplinary meeting. Following discussion at that meeting it is decided that hormone treatment followed by radiotherapy will be recommended to Pdraig. Pdraig agrees to have the hormone treatment at his local GP surgery and asks if his Radiotherapy can be performed in Altnagelvin Hospital, Derry as it is nearer to his home. He says this will make it easier for him and his family.

Attending Altnagelvin will reduce his journey time on treatment days from 7 hours to 40 mins. Pdraig gives consent for his radiology data to be made available to clinicians in Derry. Using Agfa's Engage Suite for Integrated Care, Pdraig's radiology data from Galway and local hospital Letterkenny can be viewed in Derry by authorized users. This allows his live radiology record, storing his most recent data be viewed by his treating clinicians. If at any stage they require the data within their own Northern Ireland PACS (NIPACS), that data can be downloaded and stored locally with a simple click and store function.

Pdraig had his hormone injections at his GP's surgery and his radiology data was assessed in Altnagelvin. He will have his Radiotherapy treatment in Derry. Pdraig is very satisfied with the speedy care pathway from his initial visit to his GP right through to the recent offer to provide his radiotherapy treatment in Altnagelvin. The interoperable electronic radiology record at Galway University Hospitals has facilitated this efficient workflow. The vision held by staff in Galway in the mid-90's has now come to fruition.

Benefits:

- Paperless and filmless workflows
- Access to patient data for authorized users; anytime, anyplace, anywhere
- Report turnaround time reduced significantly
- Automated workflow processes including results delivery and results acknowledgement
- Patient and result tracking available for all relevant hospital staff
- Electronic alerts for Referring Clinician gives a view of report on App
- External sites can consume data without a need to move the data (safe and efficient)
- Easy retrieval of data for management reports, dashboards, analysis and research

NEXT STEPS:

- Interoperate with NIMIS to allow image/report sharing across the Saolta Group and beyond
- Integration with Electronic Document Management Record at GUH
- Single sign-on for all systems
- Integration with EPR

For further information please contact Gina Naughton, RIS/PACS System Administrator

Galway University Hospitals at 091 542361, gina.naughton@hse.ie



Ciara Crofton presenting at the conference

ECR 2017

Radiology at Galway University Hospital was very well represented at ECR 2017 which took place in Vienna from 1st -5th March. Four radiographers and two SpRs presented at the meeting.

Senior radiographer Stephen McNulty presented the multidisciplinary 'Hospital Inpatient Turnaround Team' (HITT) which was established in UHG radiology in an effort to reduce inpatient radiology waiting times. Through integration of the varied radiology disciplines and implementation of a clear workflow process the median inpatient radiology waiting time was reduced by 30.7%.

Radiographer and UCD graduate, Ciara Crofton, presented her final year research project. The project investigated mobile phone use in the radiology department and the success of an awareness campaign at reducing the associated nosocomial infection risks. The project established that radiographers are unaware of mobile phone infection risks and an awareness campaign could play an important role as an education tool to improve awareness.

Frances Glynn, Radiographer and UCD graduate, also presented her final year research project. The project investigated the use of the anode heel effect to optimise image quality. The project established that significant dose reductions can be achieved when the patient's head is positioned towards the x-ray tube anode during thoracic spine radiography.

Eileen Kelly, Radiography Services Manager 1, presented at the rising stars session for Radiographers. The presentation considered the role of a clinical manager, the pathway involved, the competences required of a successful manager and the challenges and positive aspects of management.



Dr Sinead Culleton, Radiology SpR, presented an investigation into the effect of iodinated contrast administered during a CT pulmonary angiogram during pregnancy on neonatal thyroid function. All CTPAs performed at UHG during 2011-2015 and neonatal TSH screening records were reviewed. A control group of unexposed infants from the same time period was chosen. The study showed no adverse effect on neonatal thyroid function following a single exposure to iodinated contrast in utero.

Dr Tara Tarmey, Radiology SpR, presented her study looking at the ability of CT-TAVI to identify significant coronary artery disease. Her study looked at the diagnostic performance of a 64-slice CTCA with retrospective ECG-gating for the detection of coronary

artery stenosis among patients being evaluated for transcatheter aortic valve implantation (TAVI). Results show a higher sensitivity and specificity at detecting stenosis in the more proximal segments. For all segments, the negative predictive value was high especially in the proximal artery segments at 98% in the left main artery. CT angiography is a promising alternative to invasive coronary angiography in patients being referred for TAVI.

Galway University Hospitals was one of the best represented hospitals in the country at ECR demonstrating that GUH is at the forefront in terms of research and development within the professions of Radiology and Radiography.

Appointment

Adria Woods has been appointed to the position of RSM1 in Letterkenny University Hospital. Adria has worked as a Radiographer in Letterkenny University Hospital since 1998. She was instrumental in coordinating a cross-border fluoroscopy service for Donegal Patients in Altnagevlin Hospital in 2013. She has been a prominent contributor to the Letterkenny Radiology Rebuild Team and the LUH Health and Safety Committee. She was key in the roll-out of a Radiographer-led Barium Swallow service in Letterkenny. Additionally Adria is trained in Ultrasound and CT



Spring came to Mayo

Spring came to Mayo with a significant milestone for Mayo University Hospital with half a million radiology requests processed via NIMIS in the Hospital since going live in November 2012.

NIMIS is the National Integrated Medical Imaging System. Sligo University Hospital was the first site to go live with NIMIS in June 2011 and has been joined by a further 56 hospitals and imaging centres throughout the HSE. Within the Saolta Group the NIMIS hospitals are Sligo, Mayo and Portlinculla University Hospitals. Letterkenny University Hospital is preparing to go live in late May.

NIMIS has been a great success and has been nominated for and won several awards including;

- 2015 - Finalist in the European IT Awards - Public Sector and Utilities Solution of the Year
- 2014 - Winner of Best Improvement in Patient Safety - IMSTA Med Tech Awards
- 2014 - Winner of IT Project of the Year - Public Sector, Tech Excellence Awards
- 2013 - Winner of Diagnostics category in Irish Healthcare Innovation Awards
- 2010 - Winner of the Inaugural National Procurement Award in Healthcare

Awards - 2016

2016 – Highly Commended IMSTA **2016 Winner HMI Leaders Major Project Award** **2016 Highly Commended in HSE Excellence Awards**

2015 - Finalist in the European IT Awards - Public Sector and Utilities Solution of the Year
2014 - Winner of Best Improvement in Patient Safety - IMSTA Med Tech Awards
2014 - Winner of IT Project of the Year - Public Sector, Tech Excellence Awards
2013 - Winner of Diagnostics category in Irish Healthcare Innovation Awards
2010 - Winner of the Inaugural National Procurement Award in Healthcare

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NIMIS in Numbers

1,500 TB+ Storage
4 hours saved for each NCHD each week

4M+ Patients

10.75 M X-Rays

200,000 Patient updates daily

57 Hospitals and Imaging Centres Live

1.6 M CTs

25,000 Active Users

99.99% uptime

18 M+ Patient Records

€300,000 saved in 1 year with electronic only GP reports

5 National Awards

2,964 GP Practices

600,000 MRIs

1 System

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INTERESTING FACTS AND FIGURES ABOUT NIMIS (DEC 2016)

Clinicians in Galway University Hospitals who would benefit from view access into the NIMIS system can contact Eric McSpadden (eric.mcspadden@hse.ie) in the IT department in UHG to complete the relevant user access forms.

Mayo University Hospital - Featured News

- Falls Prevention launch
- Tracheostomy
- The Occupational Therapy Department
- My clinical life – Katie Moore
- Quality and Patient Safety agenda at MUH
- Castlebar Social Services
- Stress Control
- Taking one step at a time
- Toy donation
- World Kidney Day
- Lung cancer awareness day

Multidisciplinary falls prevention roadshow and information sharing event at Mayo University Hospital

CONTINUED FROM COVER PAGE.

The team also launched their new posters and information leaflet for patients and families to reduce the risk of harm from falls at home. This is an invaluable tool in the pre-discharge education of patients, it includes simple, easy to read information and informative graphics to equip people to stay safe from falls.

The event at MUH also included a number of education stands in the foyer of the hospital where staff and visitors met members of the falls team and had the opportunity to discuss all elements of the falls prevention and management policy and how to implement it. Falls prevention technology was on display in the lecture hall as well as a video on the falls policy which was created by

the falls team in MUH. The afternoon session included a series of short information sessions on multidisciplinary topics related to falls prevention and management linked to the policy.

This event raised awareness about the steps necessary to keep patients safe from falls while in hospital and after discharge. More information on the event is available from the falls management team at MUH (Josie.doolan@hse.ie and mary.weir@hse.ie).

There is a more comprehensive educational event planned for the 11th May next and further information is available at CNME, GMIT, Castlebar, Co Mayo.

MUH Tracheostomy Safety Working Group Established to Improve Care and Standards for Tracheostomy Management

The MUH Tracheostomy Safety Working Group was established in June 2016 to address the needs of tracheostomy patients within the hospital.

The group is co-chaired by Ciara Canavan (Consultant Anaesthetist) and Erica Bajar (Senior Physiotherapist) and has team members from ICU, medical, surgical, nursing, physiotherapy, and speech and language therapy. The focus of the group is comprehensive and it was recognised that key actions were required in policy update and governance, training and education, risk assessment, and practical management.

Work commenced on updating the hospital tracheostomy policy to include a comprehensive multi-disciplinary focus from insertion through to decannulation. A Self-Directed Learning Package, supported by Nurse Practice Development is also being developed.

Key achievements to date include:

- A pre-stocked tracheostomy management trolley which improves ease of access to tracheostomy

equipment regardless of patient location

- A bedside emergency trache-case which ensures all emergency equipment is standard and readily accessible
- A tracheostomy documentation package to capture all relevant tracheostomy information and provide prompt to achieve daily care and management tasks
- Development of a weekly tracheostomy multi-disciplinary team round to facilitate progression and weaning of the tracheostomy, as well as learning and development of health care staff
- Development of a database to capture patients for future analysis

The focus for the remainder of 2017 will be to complete the Policy and Self Directed Learning Package and an implementation plan regarding training and education. A process to improve the ordering of consumables is also under way.

The Occupational Therapy Department, Mayo University Hospital continues to develop and advance



Pictured Left to right: Sarah Ronayne, Lisa Jolly, Niamh Kelly, Gracia Gomez- Kelly and Denise Carthy

The Occupational Therapy Department in MUH was first established in 2002 with one single clinician. From then, through pathways of care developments, the allocation of a permanent department base, developing standards, creating a profile and the hospital growing in awareness of the services the OT department continues to develop and expand.

A great deal of Occupational Therapy clinicians, OT students and volunteers throughout the years have passed through the department assisting us to further progress achievements.

Many patients' lives have been touched and a lot of learning and experience from patients was brought forward to new cases. The team see patients in the Emergency Department and the wards, assist the quality and safety of a patient's stay by planning for a new beginning following a sudden life event or, allowing patients the ultimate goal of returning home supported with dignity and comfort.

Along the way many strong relations with front line MUH counterparts were formed. The number of referrals to the OT service is consistently increasing from 2042 referrals in 2015 to 3133 in 2016.

In 2015 1427 medical and peri-operative patients were assessed and in 2016 the department increased their intervention to 1836 of which 58 % were medical referrals. These represent the biggest demand in acute hospital services.

My Clinical Life



Katie Moore with MUH staff, family and friends and members of Mayo County Councils Art Office

Mayo artist Katie Moore has created an exhibition of art work inspired by her experience as an artist with a long term illness. Katie has spent a lot of time in hospital isolation and uses her experiences, feelings and memories as subject areas for her work. Katie's work was recently exhibited at Mayo University Hospital.

Katie Moore is a young and passionate visual artist based in the west of Ireland. Katie uses textiles, stitching and installation in addition to drawing and video to create visual experiences of the world. Her work is very conceptually driven, every stitch has a purpose. 'The work I make comes from a feeling of being compelled to make it, giving the topic a voice, telling a story, an act of memory' explains Katie.

My Clinical Life was part of UPSTART 2016, a programme of art activities in celebration of International Day of Persons with Disabilities. UPSTART is an initiative with Mayo County Councils Art Office.



Quality and Patient Safety agenda at Mayo University Hospital

The commitment to excellence and quality improvement at Mayo University Hospital (MUH) continues and the most recent annual Quality and Safety Symposium focussed on a new direction for the hospital with the launch of a strong commitment to person and family centred care through meaningful engagement with patients and staff.

The work on the engagement project started in August 2016 following a meeting with the Quality Improvement division in the HSE. Implementation of the Framework for Improving Quality is key to the success of this work. Ms Deirdre O’Keeffe, Quality and Safety Manager, attended the symposium to give her support and leadership to the launch and she will support the hospital in implementing the Framework for Improving Quality. Greg Price from the Quality Improvement Division has agreed to be part of the MUH patient engagement team.

Catherine Donohue, General Manager, MUH, in her opening address spoke of new beginning for the hospital and of the importance of embedding person centred, safe and effective care throughout the hospital. This approach requires the combined efforts of staff, patients and their families to make the changes required to deliver better outcomes and a better experience of care.

“It is about empowering the staff so that we can have true, meaningful staff and patient engagement so as we are meeting the patient’s needs, and not just what we think are their needs.”

The keynote speaker on the day was Eleanor Rivoire, from Accreditation Canada, an organisation which sets standards for the Canadian healthcare system. Ms Rivoire had spent some time in the hospital meeting with both staff and patients, prior to the Symposium and will be working with the Hospital Management Team to support staff and patient engagement within the hospital. Ms Rivoire advocates for strong patient engagement in the design, planning and delivery of care

“If you are truly going into a partnership with a patient and you fear they may be unreasonable – have you already decided what the outcome is going to be? And if you have already decided what the outcome is going to be then you are not going into the discussion in a spirit of partnership.”

The need for patient engagement was highlighted with the presentation from patient advocate, Ms Margaret Murphy who received a standing ovation. In 1999 Ms Murphy’s 21-year-old son Kevin died as a result of a series of missed diagnoses and she spoke with great clarity and poise about how listening to a mother’s concerns could have saved her son.



Margaret Brennan



Margaret Murphy

Margaret is a member of the Medical Council and the External Lead Advisor, WHO Patients for Patient Safety. The focus of her work relates to seeing adverse events as having the potential to be catalysts for change as well as being opportunities for learning, identifying areas for improvement and preventing recurrence.

“We are asking the healthcare system and individual practitioners within that system, to conduct the business of healthcare in a culture of openness, safety, transparency and professionalism. And in so doing, they prove themselves worthy of the trust placed in them by vulnerable patients and concerned carers.”

Integral to this new direction in Mayo is staff engagement, which is critical to achieving quality care. The first staff engagement session was held in September 2016 and there is a commitment from the Hospital Management Team to ensure ongoing, meaningful staff engagement. Ms Rivoire will be supporting the hospital to put in place the required organisational accountability structures to support engagement. Margaret Brennan, Quality and Patient Safety Lead, Acute Hospitals attended the Symposium and commended the work and the transparency being employed at MUH. She said it is “important to tackle the behavioural culture of your

organisation” and have “aims that will restore trust to the public.”

Staff believe that the symposium promotes good interdisciplinary networking and instils in them a great pride in their work. There is an opportunity to showcase improvement initiatives being undertaken at the frontline. The staff presentations at the Symposium this year were:

- Quality Improvement in Nutrition and Hydration
- The Frail Elderly Project in Mayo and
- Teamwork in Sepsis Management – Lessons learned.

Ms Brennan commended the staff involved on their achievements.

There were also 30 clinical posters on display at the event, showcasing a variety of staff projects and achievements throughout the year. The Symposium is important to acknowledge the good work being

continually done in MUH.

The multidisciplinary panel discussion, at the end of the day, was facilitated by Deirdre Walsh from the State Claims Agency and focussed on the commitment in Mayo to person centred family care and how to include patient representatives on some hospital committees.

Overall the Symposium was a great success and was supported by Maurice Power, CEO, of the Group. He encouraged Mayo to move forward on the journey and noted that the ‘invited speakers brought a wealth of knowledge and experience and provided insights and learning on clinical leadership, quality improvement and changing culture’.

In particular, he mentioned Ms. Margaret Murphy who spoke so powerfully about the need for patient involvement and her experience of the health service. ‘I hope that we can create more opportunities for staff to hear Margaret share her views and experience’.

Castlebar Social Services



Pictured Back: Catherine Donohoe GM, Mary O'Donnell, MUH Deirdre Waldron (Castlebar Social Services) Patricia Freyne, MUH, Ailish Lawless, MUH
Front Row: Finnian Berry, Aine Berry (ticket sellers)

€1,300 was raised for Castlebar Social Services by the staff and visitors of Mayo University Hospital who purchased raffle tickets recently. Staff members MUH had also donated the items for inclusion in these hampers.

Castlebar Social Services provide a day centre of safety and comfort and a general drop in centre for the elderly where they can avail of their restaurant services. They provide outreach meals on wheels services to approximately 80 clients every day, some of who reside as far as 14 miles from the centre at a cost of €5 for three course meal. They also offer a basic laundry service and a free community bus service two days per week. They

facilitate GP visits, hairdresser appointments and other medical and social requirements for clients. In good weather, they provide social outings by taking clients on scenic tours and trips. During the winter months they organise special attentive supports to the elderly such as advice from visiting state agencies and artistic and recreational activities such as art classes, music and dance or gentle aerobics. They also provide security devices for the homes of the elderly such as pendant alarm.

From the centre they run a telephone befriending service free of charge to the elderly. This is serviced by trained volunteers with the support of the HSE West.

Stress Control – Mayo University Hospital

Stress Control is a stress management course created by Dr. Jim White, a Scottish Clinical Psychologist over 30 years ago. It is now the most widely used stress management programme within the NHS and HSE, with large numbers attending. Independent research over decades has demonstrated that most participants find it helpful in regaining control over their stress.

The Saolta University Health Care Group has begun the roll out this programme to staff in most of its hospitals. The course runs over 6 sessions of 90 minutes, with a focus on the provision of detailed information how stress manifests itself in our lives, through our bodies, thoughts, actions and feelings. It also teaches skills on how to control stress. The skills and techniques used

to reduce stress are cognitive-behavioural. There is no discussion of personal problems in the class.

Research shows that reducing stress does not necessarily result in better wellbeing; therefore stress control combines stress management with mindfulness and positive psychology strategies to boost wellbeing.

The course facilitators are Saolta staff members who have been trained by Dr. Jim Whyte to deliver the course. In Mayo University Hospital the facilitators are Angela Blendell, Eileen Keigher and Séamus Moran.

The first of the 6 weekly sessions commenced in Mayo University Hospital on 2nd March 2017. There were 37 attendees at the first session and the overall feedback from those present was very positive.

Taking one step at a time...

As members of the Healthy Ireland Committee in MUH, the importance and promotion of physical activity is recognised for both staff and patients alike. The hope for the coming year is to promote awareness of the health benefits of increasing physical activity in our lives and in particular helping staff achieve even a small proportion of this during their working day.

Aileen Shaw, physiotherapist has recently introduced such an idea. Phrases such as 'Take the stairs instead of the lift... your heart will thank you for it,' and the cheapest gym anywhere-the stairs', can be seen at the stairwells and lifts of MUH. These captions are strategically placed to hopefully entice people to make the change and in a simple way increase their physical activity levels. These signs will be replaced with different captions at intervals throughout the year.

On Valentine's Day, Operation Transformation, 'Love life love- walking day,' was promoted with heart shaped signs and balloons throughout the hospital and wards were encouraged to send staff on one of the three walks that were planned for the day. Over 60 people took part in the walks and the participants in the 11am walk coincidentally had the added benefit of receiving a red rose sponsored by a local car showroom prior to their departure!

In the coming weeks the Saolta Hospital Walks initiative in partnership with the National Health and Wellbeing Division and the Department of Health Promotion, HSE www.hospitalwalks.com will be official launched at MUH. Staff, patients and visitors will have access to planned, timed and measured walks in the areas around MUH. The routes were chosen and planned to facilitated the



Pictured are Runagh Burke and Aileen Shaw

time that staff would have available at their breaks i.e. 10, 20 and 30 minute duration walks. It is hoped that employees of MUH will see walking as accessible during their working day and realise that it is a wonderful form of exercise that can keep you healthy, reduce stress in your working day and provide encouragement and motivation to stay active. Maps and Apps of the route will be available for staff to see the routes in detail.

A new fitness information board will shortly be in place at the entrance to the canteen area so employees can access information on the range of sporting and leisure activities that are available in the locality. MUH is putting its best 'foot forward' in relation to increasing awareness around the importance of increasing physical activity in our lives.

MUH Dietitian Launches New Website for World Kidney Day



Pictured at the launch of Irishkidneydiet.ie are the renal dietitians involved: (L to R) Celene Sands, Theresa Rennick, Orla Power, Bernice Moore, Pauline Connolly

To coincide with World Kidney Day on March 9th, Mayo University Hospital dietitian Celene Sands highlighted the critical role of diet for patients with chronic kidney disease with the launch of irishkidneydiet.ie, a new Irish website for patients with kidney disease.

It is estimated that up to 280,000 people in Ireland and more than 70 million people worldwide have Chronic Kidney Disease (CKD). Diet is a critical part of treatment for patients with CKD and there are a number of dietary changes these patients will need to make. This can be a difficult time for those newly diagnosed and something which state registered renal dietitians support patients with on a daily basis.

Irishkidneydiet is the brain child of a small group of dietitians from the Renal Interest Group of the Irish Nutrition and Dietetic Institute. The vision behind the website was to create a patient education website covering all aspects of the renal diet for people with chronic kidney disease and their carers. Previously the only sites providing relevant information were often American or Canadian and therefore were not 100% suitable for the Irish patient group (due to differences in teaching methods, renal diet allowances used and availability of food items in recipes).

Celene Sands, a senior dietitian at Mayo University Hospital and a member of the Renal Interest Group of the Irish Nutrition and Dietetic Institute, spends a proportion of her working hours advising patients with kidney disease about a lower salt, fluid restricted, modified protein diet, depending on their condition. "When the patient goes home, they can struggle to

find new ideas and new recipes", Ms Sands explained, "and this is where irishkidneydiet.ie comes in. This Irish resource uses readily available ingredients and Irish weights and measurements to make it easier for patients and their carers to find what they need. The website also gives lots of practical advice for salt, fluid and phosphate restriction – all components of the kidney diet for Irish patients".

Irishkidneydiet.ie will help those interested to understand the kidney diet better, to explore new avenues with regard to cooking on a kidney diet and to improve the food choices and variety available to them. The website contains over 40 tasty recipes, a selection of daily meal plans, useful videos and lots of FAQs to help patients on their journey.

All of this information can be found on www.irishkidneydiet.ie



Donation to Paediatric Department



MUH were delighted to recently receive two baby doll cribs which were donated by the pilot Men's Shed group in Castlerea Prison to the MUH Paediatric Outpatient Department.

Picture shows Ms Cora Staunton, Primary Health Care Coordinator, Mayo Traveller Support Group; Mr. Martin Francis Ward, Mayo Traveller Support Group; Ms Frances Burke, CMM2; Ms Ann Doherty, Pregnancy Support Counsellor.

Lung Cancer Awareness Day MUH



Lung Cancer Awareness Day took place recently at Mayo University Hospital. Pictured at the event were Runagh Burke Smoking Cessation Advisor and Sinead Fallon CNS Oncology



In Other News

Left to right sitting; Brid Gavin O'Connell and Pamela Normoyle; Left to right standing; Rachel Macken and Marie Tierney.

Launch of Stress Control Programme at Saolta

The Saolta Group recently launched its Stress Control Programme. The objective of the programme is to support and empower staff, service users and

community members through health behaviour change and lifestyle modification.

The National Patient Experience Survey

MAY 1ST TO MAY 31ST 2017

WORKING TOGETHER TO DELIVER WORLD CLASS PATIENT CENTRED CARE

The National Patient Experience Survey is a new nationwide survey asking patients about their recent experience in hospital. The purpose of the survey is to learn from patients' feedback to improve the planning and delivery of healthcare.

The survey offers our patients the opportunity to tell us about their experience in hospital. Their responses will provide valuable information on the standard of services and help set priorities for improvements to healthcare in Ireland.

Staff and management in all Saolta Group hospitals will be participating in workshops to prepare for the National Patient Experience Survey. Hospital representatives will be holding staff awareness events throughout April in order to ensure that every hospital in the Saolta



University Health Care Group are working to encourage their patients' participation in this extremely important survey.

Key dates and events to be aware of:

- April 5th, Launch NPE Survey ~ Mater Misericordiae University Hospital
- April 24th, - Displays, Posters, Leaflets and Table Toppers delivered to all hospitals
- April 30th, Distribution of Promotional Napkins to Patients

If you have any questions or to enquire about how you can help make the National Patient Experience Survey (NPES) a success, please contact your hospital management or media@saolta.ie

Cheque presentation to Roscommon University Hospital



L:R - Marie Doorly, Interim General Manager, RUH; James Gately, Chrissie Gately (parents of the late Alan Gately, RIP); Vincent Pearse, St. Dominic's GAA Club and Ursula Morgan, Director of Nursing, RUH.

Mr. Vincent Pearse on behalf of St. Dominic's GAA club recently presented €1,918 to Roscommon University Hospital Patient Comfort Fund. The monies raised were from the Alan Gately Memorial Tournament held last October from the club's annual Hurling and Camogie blitz.

The Management and Staff at RUH are extremely grateful to Mr. Pearse and the members of St. Dominic's GAA club, and the parents of the late Alan Gately, RIP, James and Chrissie Gately who nominated Roscommon University Hospital Patient Comfort Fund as their charity.

Twenty Seven Heart Attack Patients from County Donegal Benefit from Cross Border Service in Northern Ireland

A cross border cardiology service at Altnagelvin Hospital in Derry/Londonderry has enabled 27 patients (to date) from County Donegal with a diagnosed ST-Elevation Myocardial infarction condition (heart attack) to receive lifesaving primary Percutaneous Coronary Intervention (pPCI Services) treatment.

The 24/7 clinical service commenced on 4th May 2016 with the co-signing of a comprehensive cross border Service Level Agreement by the Western Health & Social Care Trust (WHST) and Saolta University Health Care Group (Saolta). This has made provision for potentially 50 to 60 patients per year receiving this life-saving care.

The first-of-its-kind cross border service is the result of a review of Cardiology Services in the North West

area, completed in 2013 and chaired by Dr Colm Henry, National Clinical Advisor for HSE Acute Hospitals. A key recommendation in the report stated that patients requiring pPCI who are within 90 minutes road time from Derry should be referred to Altnagelvin Hospital.

Dr Jim Crowley, Clinical Lead for Saolta said "The cross border cardiology service between Saolta and the Western Health and Social Care Trust is working extremely well. Patients from County Donegal who suffer a heart attack receive emergency potentially life-saving coronary intervention treatment at Altnagelvin Hospital".

The patients from County Donegal who received pPCI treatment at Altnagelvin Hospital were successfully treated and transferred after their procedure by ambulance to Letterkenny University Hospital or Sligo



Pictured is recently PPCI treated County Donegal patient Mr Donie Cronin (Centre) in Altnagelvin Hospital along with clinical personnel (left to right) Bernie McCallan, Dr Aaron Peace, Dr Godfrey Aleong and Dr Albert McNeill.

University Hospital. Mr Donie Cronin from County Donegal was one of those patients.

Dr Albert McNeill, Clinical Lead for WHSCT commented on the benefits of the service: "Receiving this treatment as soon as possible improves patient survival and reduces the long term heart damage caused by heart attacks. The clinical service is a good example of how health care organisations and professionals across jurisdictions can work together for the benefit of patients."

The pPCI service developed as a result of close co-operation between medical, nursing, ambulance and managerial staff from various stakeholder organisations North and South of the border. These included Saolta University Health Care Group, the Western Health & Social Care Trust, Health & Social Care Board (NI), Public Health Agency for NI, the HSE National Ambulance Service, Northern Ireland Ambulance Service (NIAS), Cooperation & Working Together (CAWT) partnership and County Donegal General Practitioners.

Western Trust Chief Executive, Elaine Way said "We are delighted to be working collaboratively with our colleagues in Saolta University Health Care Group as we work towards enhancing cardiology services for patients living in County Donegal. The new service is being delivered by an exceptional cardiac intervention team and provides real benefits to heart attack patients through rapid access to high quality, life-saving services."

Saolta Group Chief Executive, Maurice Power stated: "It's great to see this cross border patient service up and running. In another joint effort between the Western Trust and the Saolta Group, patients from Donegal now have access to radiotherapy services at Altnagelvin. There are long established working relationships between our services and the Western Health & Social Care Trust and these can be developed further in the future, where there is mutual benefit for each of our populations and services"

Sean Murphy, General Manager of Letterkenny University Hospital added, "This service has delivered the appointment of a second cardiologist in LUH who also undertakes sessions in Altnagelvin and participates in their emergency on-call rota. Donegal patients who would have previously been transferred from LUH to Dublin or Galway can now have their procedure in Altnagelvin and are then transferred back to LUH".

The cross border cardiology service is available for patients in the County Donegal area who become ill with a suspected heart attack. Patients are encouraged to follow the normal processes for seeking medical attention in the jurisdiction. Protocols are in place for the diagnosis of their condition and where it is deemed appropriate for pPCI treatment, the National Ambulance Service will transfer the patient across the border to Altnagelvin Hospital.

Alzheimer Society of Ireland Mobile Information Service visits University Hospital Galway



On Wednesday, 15 February 2017, Galway University Hospitals in conjunction with the Alzheimer Society of Ireland hosted on site the "Alzheimer Society Mobile Information Service Bus".

The bus was on site to provide information and support to people living with dementia and their families as well as those who are concerned about their cognitive health. There are approximately 55,000 people in Ireland living with dementia and 500,000 live in families who have been affected by dementia. It is vitally important that people have access to the information they need to live well with dementia. Any one of us can get dementia, but every one can make a difference by understanding more.

Orla Sheil, Occupational Therapist, GUH said, "The bus was located in front of the hospital and all were invited on board to ask any questions about dementia and to learn more about the resources in the local area. During the day hospital staff including geriatricians, occupational

therapists, dieticians, physiotherapists and social workers were available to answer any questions people may have relating to concerns regarding dementia or the care of a loved one with dementia. Alzheimer's Society staff and volunteers distributed practical information leaflets, provided information on their services and facilitated private one-to-one conversations on board"

Galway Dementia Adviser with The Alzheimer Society of Ireland, Maureen Mannion said, "The Alzheimer Society of Ireland were thrilled to bring our new Mobile Information Service to the University Hospital Galway campus on its very first trip to the county. Our aim is to ensure that people with dementia and their families have access to high quality information and advice in their community. Working with UHG, we brought this vital service to Galway and provided a new opportunity for people to engage with our Dementia Adviser service and the services provided through the hospital."

GUH Interventional Radiology broadcast live procedures for LINC conference



Dr Gerry O'Sullivan, Consultant Interventional Radiologist, GUH pictured with theatre staff during a live case procedure for the LINC international interventional radiology conference.

Galway University Hospitals (GUH), a leader in interventional radiology once again recently showcased the expertise of the Interventional Radiology Department when they hosted "live cases" for the LINC international interventional radiology conference which took place in Germany.

Interventional Radiology is an independent medical specialty providing minimally invasive image-guided diagnosis and treatment of diseases in every organ system. More than 80 cases were performed from 13 international centres worldwide and transmitted real-time online to a wide medical audience who had the opportunity to ask questions as the operations occurred.

GUH continues to be the only hospital in Ireland or the UK to be involved in this project, which is one of the biggest meetings of its kind in the world. This is Galway's fourth year to take part in this Interventional course. University Hospital Galway is one of the leading centres in Europe for acute deep venous thrombosis work and through this broadcast the hospital was able to share their expertise and experience with a large group of international colleagues.

Commenting, Dr Gerry O Sullivan, Consultant Interventional Radiologist at Galway University Hospitals said, "It is an honour and a privilege to showcase the skill, expertise and team work which the Interventional Radiology unit display daily to a wider worldwide audience. We perform more acute, single session deep vein thrombosis treatment than all but a handful of centres worldwide. Recently we performed three such interventions. The long awaited *ATTRACT trial will be published shortly and we believe this will confirm the value of the procedures we perform."

* The ATTRACT Study is sponsored by the National Heart Lung and Blood Institute (NHLBI), a part of the National Institutes of Health. Patients who have been diagnosed with a blood clot in the leg, also known as Deep Vein Thrombosis or DVT, and are a perfect fit to participate in the ATTRACT study will have the best treatment determined for them by national physician experts in DVT treatment.

For further information on the ATTRACT study visit <http://attract.wustl.edu/>

Launch of Saolta University Health Care Group Cancer Centre Annual Report 2015



The Minister for Health Simon Harris TD recently launched the Saolta University Health Care Group Centre Annual Report for 2015.

Commenting Maurice Power, CEO of the Saolta Group said, "I would like to thank Minister Harris for launching this report for the Group. The Saolta University Health Care Group provides an integrated cancer programme that involves diagnosis, treatment, supportive and palliative care across all cancer specialities. Improving patient access to rapid access clinics is a key on-going priority for the Saolta Group. This report highlights a number of key milestones in the delivery of cancer services across the Group including the new electronic patient record system (Mosaiq) for radiation oncology patients which was successfully implemented in UHG and made available to all sites across the group. Progress is continuing on the development of a new radiation oncology facility in Galway as part of the National Programme for Radiation Oncology and the on-going development of the cross border radiotherapy project in conjunction with our partners the Western Health and Social Care Trust enables Donegal patients access radiotherapy treatment in Altnagelvin. I would like to

pay tribute to the many staff working to provide cancer services across the Group and thank them for their commitment to the delivery of quality healthcare".

Professor Michael Kerin, Chair, Cancer Strategy Group, Saolta University Health Care Group added, "At the core of the national cancer strategy is the patient's individualised treatment plan which must be designed and delivered by the multidisciplinary team. In our programme, the multidisciplinary team lies at the core of the Cancer Centre's activities. This report highlights the very significant programme of cancer care taking place across the Saolta Group. This involves the delivery of cancer surgery predominately in UHG, radiation oncology at UHG and medical oncology across Portiuncula University Hospital, Mayo University Hospital, Sligo University Hospital, Letterkenny University Hospital and UHG. Best outcomes for cancer patients are achieved in an environment that is clinically driven and research led. The development of the Lambe Institute and Medical Academies across the Group's hospitals continues to enable this environment".

The Saolta University Health Care Group Cancer Centre Annual Report 2015 is available to download [here](#)

Endoscopic Vein Harvesting (EVH) procedure is a first for UHG



Dr Alan Soo, Consultant Cardiothoracic Surgeon pictured with his team and patient Thomas Harney who underwent the first ever Endoscopic Vein Harvesting procedure for Coronary Artery Bypass Surgery at University Hospital Galway. L:R Liesta Lisaba, Theatre Nurse; Dr Alan Soo, Consultant Cardiothoracic Surgeon; Thomas Harney, patient; Amanda Flaherty, Operating Department Assistant and Lisa Owens, Clinical Nurse Manager 2, Theatre.

The Department of Cardiothoracic Surgery, University Hospital Galway have introduced a new technique for harvesting veins for use in coronary artery bypass surgery (CABG). Dr Alan Soo, Consultant Cardiothoracic Surgeon and his team performed the first ever endoscopic vein harvest (EVH) for Coronary artery bypass graft (CABG) in February at University Hospital Galway. UHG is the first public hospital in the Republic of Ireland to offer this type of surgery.

CABG is a common surgery for patients suffering from heart disease. For this operation, surgeons will have to harvest veins from the leg for use as a conduit to bypass stenosis/blockages in the coronary arteries (blood vessels supplying blood to the heart). Depending on the number of bypasses, surgeons in the past would have to make a lengthy incision along the inner leg and thigh to harvest the veins; this is called the open technique. With recent advancement in technique and technology, surgeons are now able to harvest these veins through a keyhole technique with 2-3 small stab incision measuring around 1cm using a video camera and specialised instrument. This technique is known as Endoscopic Vein Harvesting (EVH). The benefit of this procedure is that it will reduce patient discomfort, reduce wound infection rate and have better cosmetic effect.

The Department of Cardiothoracic Surgery, University Hospital Galway, started performing EVH in February 2017 when the first patient, Mr Thomas Harney from Ballinasloe, underwent CABG surgery with vein harvested endoscopically. The surgery was a success and since then, a number of patients have undergone the procedure successfully.

Dr Alan Soo, Consultant Cardiothoracic Surgeon, UHG said, "EVH represents another forward step in surgeons making cardiac surgery less invasive for the patients and hence faster recovery. This procedure has been proven by multiple randomised trials to be cost effective and beneficial to the patients in terms of patient discomfort and wound infection rate. We, in Galway, are proud to be the first public hospital to be able to implement this new service that will bring significant benefit to the patients."

KEYHOLE LUNG SURGERY

The Department of Thoracic Surgery, University Hospital Galway is also offering keyhole lung resection (VATS lobectomy). Lung resection surgery, mainly performed as part of a treatment for lung cancers and some other conditions, is traditionally performed in an open fashion whereby a large incision is made at the side of the patient's chest. With improvement in surgical techniques and instruments, surgeons are now able to perform this surgery with much smaller incision in a keyhole technique with the aid of specialised instruments and video camera. This is known as video assisted thoracoscopy surgery (VATS). With this technique, surgeons are now able to perform various surgery in the thorax minimally invasively including lung resection surgery (lobectomy).

Surgeons in the Department of Thoracic Surgery, UHG are performing this technique since October 2016. Instead of a large incision, surgeons now make a smaller incision measuring around 4-6cm to perform this surgery.

Diabetes Integrated Care Workshop with the National Clinical Programme for Diabetes



Speakers at Diabetes Integrated Care Conference L to R: Niamh Smyth, Programme Manager, National Diabetes Clinical Care Programme, Professor Sean Dinneen, Clinical Lead, National Diabetes Clinical Care Programme, Deirdre Moyna, Diabetes Nurse Specialist, Cavan and Monaghan Hospital Group, Margaret Humphreys, National Diabetes Selfcare Project Coordinator, Paula Gallagher, Physiotherapy Manager, Cavan / Monaghan, Niamh Fitzpatrick, Senior Dietician Cavan and Monaghan Hospital Group and Dr. Poochellam Muthalagu, Consultant Physician, Cavan and Monaghan Hospital Group.



Diabetes Nurses L to R: Claire Maye, Diabetes Nurse Specialist, Sligo University Hospital, Kathleen Crerand, Diabetes Nurse Specialist, Donegal PCCC, Patricia Murray, Advanced Nurse Practitioner, Integrated Care Diabetes, Sligo University Hospital, Caitriona Coleman, Diabetes Nurse Specialist, Integrated Care, Sligo/Leitrim, Anne Griffin, Diabetes Nurse Specialist, Letterkenny University Hospital and Deirdre Moyna, Diabetes Nurse Specialist, Cavan and Monaghan Hospital Group.

On 22nd February a workshop was hosted by Community Healthcare Organisation Area 1 (Cavan, Donegal, Leitrim, Monaghan & Sligo) in conjunction with the National Clinical Care Programme for Diabetes.

The integrated care workshop was attended by Health professionals across the CHO 1 area, Saolta Group and RCSI Hospital Group (Cavan & Monaghan Hospitals). Diabetes Ireland representatives also attended and conveyed the importance of the patient voice. The workshop consisted of presentations and facilitated group sessions. It also provided participants with an opportunity to view a series of posters displaying research and clinical project work undertaken in the area of diabetes.



Conference Delegates

Professor Sean Dinneen, the Clinical lead on the National Clinical Care Programme for Diabetes gave an update on the National Clinical Care Programme. He spoke about his vision for diabetes integrated care and how communication between the community and acute sectors is essential in order to overcome the barriers to delivering patient care.

There were presentations by the three diabetes teams that cover Donegal, Sligo/Leitrim and Cavan/Monaghan. Dr Amjed Khamis, Consultant Physician/ Endocrinologist at Letterkenny University Hospital, Dr Catherine Mc Hugh, Consultant Endocrinologist at Sligo University Hospital and Ms Deirdre Moyna, Diabetes Nurse Specialist, Cavan and Monaghan Hospital Group spoke on behalf of the teams.


Mr John Hayes, Chief Officer, CHO Area 1 closed the workshop by stating 'Events such as this help to ensure that as health professionals in both the hospital and community services we can share knowledge and learning and translate this into building and improving upon the care we deliver to our patients'.

Infection Prevention Control Ireland Annual Conference to take place in May

The annual national conference this year is based around the theme of “New challenges in 2017: the multi-drug resistance crisis” and focuses upon raising awareness and reducing adverse outcomes from emerging multi-drug resistance organisms.

Download application form and flyer [here](#)

The conference, which this year is an open event for all healthcare professionals will be held in the Citywest Hotel & Golf Resort, Saggart, Co Dublin on the 23rd May 2017.



**Infection Prevention
Control Ireland**

Annual National Conference

**“New challenges in 2017 – the multi-drug resistance
crisis”**

Venue
City West Conference suite,
Citywest Hotel, Saggart, Co Dublin

Date
Tuesday 23rd May 2017

Delegate Registration Fees
Non-members registration fee €50

(Includes delegate pack, all refreshment breaks and sit down lunch)

IPCI members attend for free
(annual membership of €50 includes free attendance at member's dinner on the 22nd
and conference on the 23rd May 2017)

Closing date for entry to Poster Competition 29th April 2017
(Prize: €1000 towards attending Infection Prevention Control Conference of choice)

Exhibition Registration Closing Date: 25th April 2017

Registered Office: IPCI, Wheatfield House, Phibsboro, County, Co. Donegal, Ireland
Company Registration Number: 570285

National Laboratory Managers Group established to examine Laboratory Cost Savings

The Saolta Group CEO Maurice Power recently established a “Laboratory Cost Savings/Containment National Laboratory Managers Group”, The Steering Group is chaired by the CEO and a Working Group is chaired by Margaret Tarpey, Interim Laboratory Manager for GUH, PUH and RUH. These Groups are comprised of nominated Laboratory Managers from the different Hospital Groups, representatives of the Acute Division of the HSE, a member from HSE Finance, the project lead for the Laboratory Modernisation Group, a HSE Transfusion / Tissue HSE representative and representatives from Grant Thornton.

The Group has been tasked with identifying areas where savings can be achieved in laboratory expenditure by individual hospitals within each Hospital Group and related dependencies, risks and challenges associated with the proposed saving measures be provided.

During 2016, terms of reference for this Group were created and signed off and a number of Steering and Working Group meetings have taken place.

Over the course of the year, the Group sent out several templates to all hospitals and requested information relating to:

- a) Revenue expenditure on unexpected / unplanned equipment requirements
- b) Activity levels in terms of GP specimens received and areas where increased activity is evident in this area
- c) A comprehensive list of all tests performed in each laboratory in Ireland
- d) A template business case to capture any ideas each Laboratory Manager may have in terms of cost containment to be committed to a specific national business case format.
- e) Laboratory referral details in terms of those referrals to other HSE hospitals (within own Group and outside to another HSE Group), externally to other testing facilities (non-HSE) in Ireland and those outside of Ireland also, the cost and numbers of these referrals and the mode of transport used.

The Working Group created the templates and the Chair issued these to the representative Laboratory Managers who in-turn forwarded on to the other Laboratory Managers in their Group.

Within Saolta, each of the Laboratory Managers within each hospital; hold regular monthly meetings where

issues relating to laboratory testing are discussed and it was through this forum, requests and templates for this “Laboratory Managers Group” were discussed. All Laboratory Managers within this Saolta Group worked cohesively and as part of a team to ensure data was accurate and returned by due dates.

Collation work was completed by the Working Group and Grant Thornton and the returns have been very interesting to date.

- a) A return has been submitted to the Acute Division in terms of last year’s unavoidable and unexpected equipment replacements and this partially provides detail of increased costs where revenue had to be used to purchase equipment.
- b) In terms of data received in relation to GP activity levels, the returns are still being reviewed by the Group, however areas of exponential increase are obvious and clinicians with administrative responsibilities are being requested to demand manage these areas and highlight to GPs that test numbers are rising exponentially in this area. The net effect of this initial initiative hopes to cost save in terms of stemming unnecessary tests referred to the Laboratory from GPs.
- c) A national registry of testing sites has been created and this provides information on what tests each hospital performs. This will shortly be made available for reference and national use. It is hoped that if laboratories reference this document they may find it more cost effective to enter negotiations on referrals.
- d) Numerous business cases were submitted by Laboratory Managers throughout Ireland on cost saving / containment measures. These will shortly be forwarded to the national acute hospital division to review and it is expected that Laboratory Managers will, in turn discuss with their CEO if viable and worthwhile for implementation and progression.
- e) A large amount of time was spent reviewing returns received for referrals. It is being examined currently if these can be repatriated within our own Groups, to another HSE Groups or indeed if a national contract can be sought for those sent to other testing organisations. It is hoped savings could be realised by doing so. It is also hoped the Group will also look at collaborating with National Procurement to create a national tender with remit to deliver specimens throughout Ireland – much like that created for

dispersion of Blood and Blood products. Where repatriation is a possibility, it has been noted that laboratories willing to take on repatriated specimens will require resources to do so and even with this requirement it is obvious large savings can still be realised.

This Group spent a large part of 2016 seeking and collating data, it is only now data returns are being validated and reviewed for possibilities of substantial cost savings. These will progress further in 2017 and it is hoped substantial savings and efficiencies will be achieved.



News from across the Group

The ANP service

The ANP service in the Emergency Department was introduced in UHG in September 2012. The first ANP was Shirley Angland and she was joined a year later by Sharon Kennedy and Naomi Davies. Eadaoin Ni Neachtain joined the team in 2014 and Emer Duffy was appointed in March 2015. Madge Kennedy commenced her role in February 2016.

The service runs seven days a week from 7.30am-8.30pm. On average the ANPs see between 20 and 30 patients per day who present to the ED with a variety of minor injuries. In 2016 they treated over 8,500 patients. The average length of time patients wait to be seen by the ANP is under an hour and 90% of their patients are seen, discharged or referred onto the specialty within two hours of registration.

Feedback has been extremely positive from patients who have used the service. A recent patient satisfaction survey that was carried out in the ED showed that 98%

of patients were extremely satisfied with the service. The ANPs strive to continue to develop the service further by expanding their scope of practice and by providing patients with expert, timely care in a friendly and holistic environment.

ANPs treat patients age 4 and up with the following injuries/conditions:

- Abscess
- Abrasion
- Ankle Injury
- Animal and Human Bites
- Clavicle Injuries
- Closed Achilles tendon injuries
- Cellulitis of the limb
- Eye Injuries and conditions
- Fish Hook Removal
- Foot Injuries
- Hand Injuries
- Knee Injuries
- Paronychia
- Scalds and Burns
- Shoulder Injury
- Wound Management
- Wrist Injury

GUH/ NUI Galway Scholarships Established in Memory of the Tarpey Sisters



Picture (back row, l to r): Dr Francis Finucane, Áine Cunningham (DNS), Mary Elwood, Dr Derek O'Keeffe and Dr Marcella Horrigan-Kelly, (front row, l to r): Susan McCurtin, Mary Tarpey, Prof Tim O'Brien, Helen Burke (APN), Marie Gately, Prof Sean Dinneen, Tim Tarpey, Ruth Tarpey and Dr Róisín Dwyer

The Tarpey family presented a cheque for €3,000 to the Diabetes Team in Galway University Hospitals for the Hazel and Tanya Memorial Fund, bringing the total fund amount in the fund to €12,919. The memorial fund will be used to establish two annual research student scholarships in NUI Galway, one each in the School of Medicine and the School of Nursing and Midwifery.

Hazel and Tanya Tarpey were sisters who have left a long lasting impression on many members of staff who encountered them in the Diabetes Centre and across every ward and discipline in the hospital before they both passed away of a rare genetic autoimmune disease that affects the endocrine glands called APECED (autoimmune polyendocrinopathy-candidiasis-ectodermal dystrophy). Tanya was just 21 years old when she died in September 2003, eleven years later, in October 2014, Hazel passed

away. Their parents, Tim and Mary and siblings, Ruth and Dermot wanted to honour the memory of Hazel and Tanya by fundraising to establish these two annual scholarships in their names.

The scholarships will support a nursing and medical student each year to undertake research and education to advance patient-centred care. Dr Róisín Dwyer from the School of Medicine in NUI Galway and Dr Marcella Horrigan-Kelly from the School of Nursing and Midwifery were present to accept the cheque. Professor Tim O'Brien and Professor Sean Dinneen who cared for both sisters said they "left a deep and lasting impression on all who encountered them, especially because of their extraordinary courage".

For more information on the Hazel and Tanya Memorial Fund, please contact Marie Gately, Diabetes Centre on 091-542524.

New Urology Unit Outpatient Flexible Cystoscopy Service in UHG

At the end of February 2016, a new outpatient flexible cystoscopy service was commenced in the urology outpatient/day unit in UHG. The initiative was led by Consultant Urologists Mr Frank D'Arcy and Ms Catherine Dowling, while Robert McConkey, candidate Advanced Nurse Practitioner in Urology coordinated the setup and delivery of the service.

This involved identification and addressing training needs, and liaising with interested supportive partners such as the peri-operative directorate, nursing administration, infection control, microbiology, decontamination coordinator, endoscopic decontamination unit – who supply and process the cystoscopes, HSSD, bioengineering, building and maintenance, medical records, admissions, cleaners, secretaries, and clerical staff. The initial purpose of this unit was to tackle the long waiting list for patients awaiting a flexible cystoscopy. The most urgent of these patients, those presenting with visible blood in their urine (a potential indicator of bladder cancer) are prioritised for the procedure.

Flexible cystoscopy is an important tool used in the diagnosis, management and surveillance of bladder cancer. It is also used in the assessment of lower urinary tract symptoms, for removal of JJ stents, diagnosing other causes of haematuria, and investigating other abnormalities of the bladder and lower urinary tract. The service operates three sessions per week with six patients booked to each clinic. The scopes are performed by a urologist or registrar assisted by two nurses. By December 1st, 2016, over 550 flexible cystoscopies were performed in the outpatient urology unit. In this period, 17 new, and 12 recurrent cases of bladder cancer were identified on flexible cystoscopy. 293 secondary procedures/assessments have been performed at time of cystoscopy appointment including bladder biopsy (26), diathermy (20), Urethral dilatation (11), Bladder washout (8), removal of JJ stents (64), amongst others.

There has been a DNA (Did Not Attend) rate of over 13% (74 patients) since the service started, however, through proactively managing the service, 74 patients have been accommodated who were either inpatients on the emergency list, or attending an OPD clinic. The successful delivery of the current service has benefited many, however the waiting list continues to grow, but plans are in place to expand the service to five days.

Staff Uniform Project

Radiography Tutor GUH Ms Gina Dawson painted by Ms Roisin Cure as part of the GUH uniform recognition project that was launched in conjunction with #hellomynameis

The campaign has been developed to help patients identify the role of the many different staff members they encounter when they attend the hospital. This project has been supported by the GUH Arts Trust. Commenting Olive Gallagher, Patient Advice and Liaison Officer at GUH said, "We understand that patients and their families may often feel overwhelmed by the number of different staff they meet during the course of their treatment or hospital stay. With our new uniform recognition campaign we are hoping to help our patients more clearly identify the role of the staff member caring for them".



SCHWARTZ ROUNDS

Galway University Hospitals / NUI Galway

Talking about care

How sharing experiences promotes compassion

Schwartz Rounds are a multidisciplinary forum designed for staff to come together once a month. Their purpose is to discuss and reflect on the emotional and social challenges associated with working in healthcare. Rounds provide a confidential space to reflect and share experiences.

Have you a story to share ?

OR

Is there a theme that you would like us to explore?

You can let us know by emailing:-
siobhanm.murphy@hse.ie

Love Life Love Walking Awareness Day At UHG



Physical activity awareness day took place recently at University Hospital Galway - 'Love Life Love Walking' in association with Healthy Ireland and Operation Transformation.

Join our Workplace Walks / Run!



Roscommon University Hospital staff took part in the recently held Healthy Ireland Walks Day.

Four walks were organised over the course of the day so that all staff got an opportunity to participate.

The I/General Manager acknowledged the contribution made by Ms. Mary Connell, Ms. Susan McGinty and Ms. Tina Vaughan in organising and hosting the initiative, which was very successful and saw a large turnout of staff from various disciplines across the hospital.



Love Life Love Walking Day

PORTIUNCULA UNIVERSITY HOSPITAL

As part of the “Love Life Love Walking” initiative, a Valentine’s walk was organised in Portiuncula University Hospital (PUH). The walk took place at lunchtime for thirty minutes on the state of the art athletics track in Dunlo Recreational Park.

35 members of staff participated and it was a very successful and positive event, summed up eloquently by one of the attendees “Thanks a million for organising the walk today – really enjoyed it, it was great to interact with other staff in the hospital, very positive and uplifting. The cup of tea and sandwiches were beautiful!!”



Further Success for Clinical Coders at Portiuncula University Hospital



Graduation Photo DIT.

Clinical Coders Marion Burke and Amy Moran recently qualified as Certified Clinical Coders, having successfully completed the Diploma in Clinical Coding at DIT.

A trained Clinical Coder is central to the collection of high quality data in the hospital. Clinical Coders provide quality, accurate and timely medical data, and are the key to success for Activity Based Funding. Clinical Coders ensure that the activity and complexity of the care provided to patients is accurately recorded so that the costs of treatment are accurately accounted for.

Congratulations to both staff.



Amy Moran and Marion Burke, Certified Clinical Coders PUH.

Portiuncula University Hospital promotes Health and Wellbeing in the Workplace

The dieticians and nursing staff from the Cardiac Rehab and Heart Failure Service at Portiuncula University Hospital recently hosted a health promotion event which was attended by approximately 70 staff. They were provided with the opportunity to have their blood pressure, height, weight and body mass index (BMI) measured and receive some healthy eating and exercise tips and booklets. BP measurements were within healthy range for the majority of attendees.



L to R: Ms Anita Murray, CNS Cardiac Rehab, Ms Carmel Boyle, CNS Cardiac Rehab, Ms Catherine Nixon, CNS Heart Failure.

Registration for a 'Portiuncula Fit For Life Operation Transformation' group was also facilitated on the day and over 20 staff signed up to a "Fitness" or "Weight Loss" goal. Staff were encouraged to follow an eight week exercise and nutrition plan of one of the Leaders on Operation Transformation <https://ot.rte.ie/get-involved>.

The 'Portiuncula Fit For Life' group has been meeting on Monday and Thursday evenings at 5pm for a planned walk, jog or run, with the opportunity for a private weigh in before or after.



L to R: Ms Lizzy O'Sullivan, Dietitian, Ms Maeve Holmes, Dietitian Manager, Ms. Sandra Brandon, Speech and Language Therapist.

Remembrance Service at Portiuncula University Hospital

The annual Remembrance Service was held recently at Portiuncula University Hospital. This service brings together parents who have experienced bereavement through the death of a child or who have lost a baby through miscarriage, stillbirth or neonatal death and gives them an opportunity to reflect, to grieve, to

remember and to pray for their children. There was a beautiful reflective atmosphere in the hospital chapel throughout the service, with music provided by Ailbhe and Megan Lohan. Parents were invited to light a candle in memory of their child and to place it on the altar.

New Associate Clinical Director in Portiuncula University Hospital

The new Associate Clinical Director for the Diagnostics Directorate is Dr Niall Gough, Consultant Radiologist. We would like to welcome Dr. Gough and wish him every success in his new role. We would also like to thank the outgoing Associate Clinical Director, Dr. Vincent Parsons, for his contribution while he was in the role.

The new Associate Clinical Director for the Perioperative Directorate is Dr Aine Ni Chonchuhair, Consultant Anaesthetist. We would also like to welcome Dr. Ni Chonchuhair and wish her every success in her new role.

Portiuncula University Hospital Hosts General Practitioner Study Evening

Portiuncula University Hospital recently hosted a General Practitioner Study Evening. Consultants from a number of specialities including cardiology, respiratory, medical assessment, emergency medicine and surgery presented on a range of topics.

A large number of General Practitioners attended from a wide catchment area and there was extremely positive feedback from General Practitioners on the night. There was an opportunity to discuss the topics which was followed by lively questions and answers session.

A further Study Evening is planned for the 29th May 2017.



General Practitioners attending the evening



Mr. Joe Garvin, Consultant Surgeon



Dr. Aidan Flynn, Consultant Cardiologist

TOPICS AND SPEAKERS:

Topics	Speakers
Non Invasive Cardiovascular Imaging	Dr. Aidan Flynn, Consultant Cardiologist
Your Local Respiratory Service	Dr. Hilary McLoughlin, Consultant Respiratory Physician
Medical Assessment Unit Pathway	Dr. Florrie Daniels, Consultant Physician, AMAU
Emergency Department at Portiuncula University Hospital	Dr. Kiren Govender, Consultant in Emergency Medicine
Warning Symptoms for Colorectal Disease	Mr. Joseph Garvin, Consultant Surgeon



In Other News - RUH

Launch of the Roscommon Hospital Arts Committee and Exhibition by the Mote Park Artist's Group

Elaine Prendergast launched the RUH Arts Committee under the Healthy Ireland umbrella. It is a Saolta Staff Health and Wellbeing priority to have an active arts committee in each hospital.

The arts committee's mission is to enhance the hospital environment for the benefit of patients, relatives, visitors, staff and the wider community through the medium of the arts.

Even before the arts committee was established RUH participated in the Poems for Patients initiative with all patients receiving poems with their main meal. The poems were also at each table in the hospital restaurant for staff and visitors to enjoy and in clinic waiting rooms.

During the summer there was an exhibition of Hugh Barr's art work displayed in the hospital which was enjoyed very much by staff, patients and visitors using the hospital street to access hospital services.

Art classes for RUH staff are being arranged and we look forward to seeing some of the staff's art work on display here on the hospital street later in the year.

Elaine was very pleased to welcome the Mote Park Artists Group to the hospital and exhibit some of their wonderful art work on the hospital street.



The Mote Park Artists group was formed approximately three years ago. For the past number of years the group have been meeting weekly at the Irish Girl Guides Centre which is located in the inspirational woodland surroundings of Mote Park, a short distance from the hospital and Roscommon town. Members are all from the Roscommon area and include some RUH staff.

Some of the members have taken up art in recent years and others are seasoned artists. The group recently hosted its first very successful exhibition at the Core Centre in Roscommon town. The artists take their inspiration from the Roscommon countryside, nature and daily life and present their art through various media including watercolours, acrylics, oils and pastels.

Best Wishes to Elaine Prendergast departing General Manager, RUH



Members of Roscommon University Hospital Management Team, Saolta Executive and staff all gathered recently to wish General Manager, Ms. Elaine Prendergast a fond farewell. Elaine has taken up the post as Head of Services, Social Care, Community Health Organisation 2.

Elaine had worked in the role of Medical Manpower Manager prior to taking up the role of General Manager of RUH in April, 2009.

Elaine can rightly be very proud of the great legacy of achievements and success which she left in Roscommon University Hospital.

The major tangible achievement is the delivery of the Endoscopy unit. Others include the on going refurbishment, painting and enhancement of wards and patient areas, replacement and updating of equipment, her constant drive to ensure that all our vacancies are

filled. The foundation work for the development of the Specialist Rehab Unit on site has commenced and an allocation of €1.5m has been secured to progress this.

Since the move of Endoscopy service to its own suite Elaine had a very ambitious focus to attract new services to RUH to enable it fulfil a very important role and function within the Saolta Group and ensure that two theatres were operational full time in order to promote and develop surgical and day services at the hospital.

Elaine always displayed compassion and empathy for patients and their families. Her chief concern was that patients were well cared for while in Roscommon University Hospital and experienced kindness, professionalism and comfort in a friendly, warm local environment.

We wish Elaine the very best of luck in her new role.

Announcement of new General Manager For RUH

The RUH Hospital Management Team and staff recently welcomed the news that Ms. Mary Garvey was successful in securing the post of General Manager. Mary holds the position of Finance Manager for Mayo and Roscommon University Hospitals.

Mary will be taking up the role in a few months' time and will receive the support and assistance of all staff in her new role.

Implementation of Care Bundles for the management of peripheral vascular cannulae and the management of indwelling urinary catheters at RUH

A care bundle is a collection of interventions that are evidenced based (HPSC 2011). It is a means to ensure the consistent application of a set of interventions for all patients at all times. Roscommon University Hospital (RUH) implemented locally adapted care bundles for the management of peripheral Vascular Cannulae and the management of indwelling urinary catheters.

At Roscommon University Hospital, Practice Development implemented care bundles and audit tools for PVC's and U/C's in line with national guidelines HPSC 2011 and EPIC 3 2013 across all clinical areas. Education sessions were delivered for all staff over an eight week period. An implementation date as agreed at the beginning of the project and the use of the PVC and UC Care Bundles commenced in April 2016. Fortnightly audits are conducted which identify outcome measures. The results of these audits are circulated amongst staff and action plans completed if required.

A Standard Operating Procedure was devised outlining the process of auditing the care bundle to ensure uniformity of practice. This was presented to and approved by the Professional Practice Committee and Quality and Safety Committee. Fortnightly audits are now conducted which identify outcome measures. The results of these audits are circulated to staff and action plans completed if required.

The implementation of a care bundle at Roscommon University Hospital supports and strengthens best practice in the care of patients with PVC or a UC. The audit findings highlight the commitment of nursing staff and the need to continually drive for excellence.

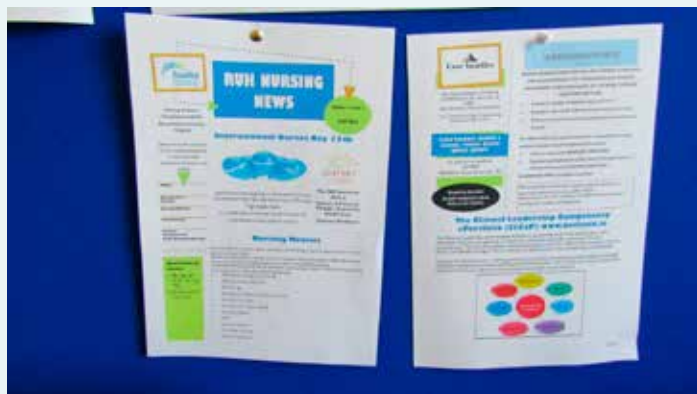
For further information, contact: Ms. Niamh Mc Keon, Practice Development Facilitator, Roscommon University Hospital. Mrs. Mary Farrell, Clinical Placement Co-ordinator, Roscommon University Hospital.

Roscommon University Hospital re-launches Nursing Newsletter

Roscommon University Hospital (RUH) has relaunched its 'RUH Nursing Newsletter'. Its release in conjunction with International Nurses Day allowed its publication to commence on a celebratory tone for RUH nursing and its achievements.

Its quarterly publication has become an excellent additional to update staff on nursing news. While many are aware of the ongoing and hard work in their own departments, the newsletter has allowed nursing staff to become aware of what is happening in the different departments throughout RUH.

It has provided a forum to update staff on initiatives, education, new research and the opportunity for nurses to submit articles on current research and practice. Feedback has reinforced that RUH nursing newsletter has been positively received by all staff and enhances communication within nursing for RUH.



Registered Advanced Nurse Practitioners in Roscommon University Hospital

Roscommon University Hospital welcomed its third Registered Advanced Nurse Practitioner (RANP) following a successful Nursing and Midwifery Board of Ireland site accreditation visit in February 2017. Amanda O'Halloran has been appointed RANP Plastic Surgery – the first RANP post in Plastic Surgery in Ireland, Amanda joins RANP's already in post, Margaret Kelly (Diabetes) and Maggie Mew (Emergency).



RANP Diabetes Margaret Kelly

RANP Diabetes Margaret Kelly completed her general nurse training in Belfast City Hospital, Belfast, Northern Ireland and worked as a Staff Nurse in London where she acquired experience in diabetes and endocrinology and decided to pursue this area of nursing. She completed the first ever ENB Diabetes course in England in 1988 and worked as Diabetes Sister in University College Hospital, London and Guys Hospital London. During this time, Margaret worked alongside renowned Diabetes Physicians/Researchers, Prof. Harry Keen and Prof. Stephanie Amiel. Margaret commenced working in RUH in 1998 and provided diabetes nursing advice and was appointed CNS Diabetes in 2005. She completed a higher diploma in diabetes nursing in UCD in 2003, a Masters Health Science (ANP) in NUI Galway in 2009 and Nurse Prescribing Cert, RCSI 2011 and ACLS certificate 2016. She is a member of several diabetes professional bodies both locally and nationally.

The Registered Advanced Nurse Practitioner (RANP) Diabetes Mellitus in RUH provides a service for patients with Type 2 Diabetes Mellitus (T2DM) from diagnosis and throughout the disease continuum. She provides an autonomous caseload management for patients with T2DM by providing a RANP led Rapid Access Clinic, an Outpatient RANP led Diabetes Mellitus Clinic, RANP inpatient reviews, and RANP telephone follow-up. Margaret also treats patients in the Sacred Heart Hospital in Roscommon town, a HSE long stay facility which is governed by a memorandum of understanding between the two sites. She is supported by and meets regularly with her clinical supervisor, Dr. Aonghus O'Loughlin. RUH very much embraces this post and recognises that these services provide early interventions and reduces waiting times and enhances patient care and improves clinical outcomes for patients with T2DM.



RANP Emergency Maggie Mew

RANP Emergency Maggie Mew first entered nursing in Stewarts' Hospital in Dublin where she obtained a certificate in Intellectual Disability Nursing. She obtained a Diploma in General Nursing and in Midwifery in Cape Town and returned to nursing in her home town in 2002 in Roscommon University Hospital. Later she achieved a Post Graduate Diploma in Emergency Nursing in NUI Galway and continued to work in the Emergency Department and later in the Injuries Unit in RUH. In 2014 having achieved Certificates in Prescribing Ionising Radiation (X-Ray) and Nurse

Prescribing Medicines, Maggie undertook a Masters Degree in Nursing Science (Advanced Practice) in NUI Galway which she completed in 2016. She was appointed to the RANP post in December 2016 and also rotates to University Hospital Galway Emergency Department one day each week. Clinical governance and supervision is provided by the Consultant General Surgeons in RUH and the Emergency Medicine Consultants in UHG.

The Registered Advanced Nurse Practitioner (Emergency) posts have been developed as part of reforms instigated through recommendations from the Emergency Medicine Programmes (EMP) model of care (HSE 2012a) and Guide (HSE 2013b) and in response to national, regional and local demands on emergency services. Additionally the role streamlines the care of patients within the local community, decreases wait times and reduces admission rates while ensuring patient safety as well as equitable standards of care within the Emergency Care Network (ECN). Quality safe care is provided to patients with non-life non-limb threatening injuries. This is achieved by the RANP in emergency nursing managing their own caseload, autonomously, through comprehensive expert assessment, diagnosis, treatment and referral and/or discharge of patients and is guided and supported by collaboratively agreed guidelines, within an agreed scope of practice using a holistic approach to care. The RANP supports patients in the management of their injury through the provision of timely and appropriate health promotion and education which will potentially mitigate against re-injury.

RANP Plastic Surgery Amanda O'Halloran

qualified as a Registered General Nurse in St. James Hospital and commenced working in RUH in 2005. Amanda has had a keen interest in clinical care and patient quality improvement since her student days and her interest in plastic surgery came to the forefront when she began to work alongside Dr. Deirdre Jones, Consultant in Plastic Surgery in late 2011. Amanda completed the Burns and Reconstructive Acute Clinical Pathway in the University of Brighton. She undertook her MSc in Advanced Practice with Nurse Prescribing in NUI Galway. One of her achievements was as a member of the team who won first prize for a poster named the "See and Treat Model of Care" at the inaugural Integrated Care Conference at Dublin Castle in June 2015. This See and Treat Model of Care continues to be used at RUH and means that the patients receive their consultation and procedure during the same visit.



RANP Plastic Surgery Amanda O'Halloran

The aim of the RANP Plastic Surgery role is to provide a timely service to the plastic surgery patient that encompasses a holistic approach to their healthcare needs through the establishment and maintenance of multidisciplinary relationships. The philosophy of the role is to provide the patient with an advanced nursing service which impacts on the skin cancer epidemic and the lengthy waiting times for non-urgent cases which causes distress. This is achieved by working in collaboration with the Plastic Surgery and Multidisciplinary team and also by seeking new ways to deliver innovative plastic surgery nursing care. Clinical governance and supervision is provided by Dr. Deirdre Jones.



New Integrated Blood Sciences Department opens at Sligo University Hospital

The new Integrated Blood Sciences Department at the Laboratory in Sligo University Hospital was recently officially opened. The facility was formally opened by Michael O'Brien who was the first member of staff in the laboratory in SUH and who worked there for 25 years.

The Integrated Blood Science Department is a major collaborative project between the Pathology Departments at Sligo University Hospital and Letterkenny University Hospital.

Commenting Grainne McCann, General Manager Sligo University Hospital said "The continuous drive for quality, responsive and efficient services was the reason we embarked on this project. An inter hospital multidisciplinary blood science team was established to facilitate the project and an integrated automated system was developed. On both the Sligo and Letterkenny sites five laboratories, encompassing general biochemistry, haematology, coagulation, endocrinology and serology (blood sciences) are amalgamated into one blood science section: unified under a managed service contract and a modern Laboratory Information System. The Department provides the most up to date technologies both in the analysis of and tracking of patient samples.

Michael O'Brien who formally opened the Blood Sciences Department said, "I am delighted to open this new facility today. Over the years in Sligo General Hospital, now Sligo University Hospital, there has been a transformation in the techniques and technologies used in our laboratories. This new integrated blood sciences department brings state of the art technologies and process to Sligo".

Dr John Williams, Laboratory Manager stated that "By establishing this Managed Service Agreement with Roche Diagnostic we have modernised and streamlined our processes, integrated and consolidated the key processes while utilising the maximum amount of automated pre-analytical sampling handling. The main analytical system allows to continue and expanding our test menu while mainlining the quality of our service and maximising resource utilisation. This is all good news for our patients."

Grainne McCann added, "The implementation of this ambitious inter hospital project is a testimony to the cooperation between all involved. It demonstrates that through close collaboration with our colleagues in other hospitals we can provide improved services to our patients while making better use of our allocated resources".



Sligo University Hospital launches Calorie Posting Policy as part of HSE's Healthy Ireland Policy



Sligo University Hospital officially launched their Calorie Posting Policy recently. As part of the HSE's Healthy Ireland Policy, Sligo University Hospital began rolling out the HSE Calorie Posting Policy in October 2015 and introduced a 6 Phase Plan to complete this process for all hot and cold food items and beverages in the staff canteen/coffee dock. By December 2015 phase 1 was implemented which outlined the calorie content for all breakfast items displayed and by the end of 2016 all phases of the project were implemented.

The development and implementation of a Calorie Posting Policy is an important initiative supporting two key policy priority programmes – Healthy Eating and Active Living, and Staff Health and Wellbeing. The purpose of this policy is to promote awareness and increase consumption of healthier food and drink choices amongst HSE staff and the public using and visiting HSE healthcare facilities, by highlighting the calorie content of food and drinks provided in HSE facilities.

Commenting on the success and eagerness of the staff at Sligo University Hospital in implementing the HSE policy on calorie posting, Grainne McCann, General Manager, said "Calorie Posting is a key element of the HSE's Healthy Ireland Policy. Research suggests that when menus display calories, people eat 6% less calories each day.

Calorie posting focuses on displaying calories at the point of choice on food and beverages. It recognises that putting calories on menus makes the healthier choice the easier choice. This policy will make our staff and visitors more aware of the calories in the food they eat and provide information regarding healthy eating options which in turn leads to healthier lifestyles."

Managing weight and obesity is a public health priority. It is recognised that no single initiative will reverse the growing obesity trend, but a combination of measures, one of which is calorie posting on restaurant menus, should make a difference. This initiative in Sligo University Hospital is a move towards addressing this national priority.

Patricia Lee, Services Manager, Sligo University Hospital commented, "Celebrating the launch of the Calorie Posting Policy was testimony to the fusion of effort and energy of staff from different Departments within to drive our Healthy Ireland agenda. As chair of the calorie posting subgroup, I had an easy task supporting the implementation of calorie posting. I was most fortunate to be surrounded by a very determined, creative and motivated team with a firm belief in putting the calorie information out there to inform, and hopefully change eating habits".

Sligo University Hospital unveil 'bench project' as part of Health and Wellbeing initiative



As part of the HSE Healthy Ireland Policy and HIQA Nutritional & Hydration Standards Better Health & Wellbeing, Sligo University Hospital is actively promoting healthy lifestyle initiatives. On Wednesday March 1st last, the hospital announced its 'bench project' as part of their Health and Wellbeing initiative.

Sligo University Hospital established a local Healthy Ireland local implementation group to progress various initiatives under the strategy and one initiative they have progressed the use of benches around the hospital to promote health and wellbeing.

Patricia Lee, Services Manager, Sligo University Hospital explains "Hospital life encapsulates the whole range of emotions from joyful celebrations, relief at a positive health outcome/relinquished health fears, to a place of

utter despair, acute emotion and stress as tragic and/or life changing events unfolds, sudden deaths, accidents, tragedies, profound grief, disbelief and loss. With this in mind it was decided to create an outdoor space with benches for staff, families, patients and service users alike to avail of. We were very fortunate to receive five benches which were sponsored to the hospital by the SUH Sports and Social Club, BDS Vending Solutions, RICOH, Abbott Diagnostic and Aramark. These benches will give people a chance to take some time out to reflect, relax or just simply take a break.

The benches are located on the hospital grounds at strategic points near the emergency department, oncology area, dialysis area and medical/surgical area.

Neighbours Walking Together

Peter Sweeney, Emma O' Toole, Ciara Glynn and Simon Fahy are final year students from Public Health and Health Promotion in IT Sligo. They have been working in partnership with Sligo University Hospital in creating a supportive environment for staff, patients, visitors to SUH and the IT Sligo population to undertake physical activity. This has involved mapping and developing appropriate walking routes around the SUH / IT area area.

The aim of the initiative is to create a supportive environment to help increase physical activity levels among staff, patients, visitors of SUH and the IT Sligo population. This in turn will help to improve their health and wellbeing.




Mapped walking routes around Sligo University Hospital and IT Sligo have been developed and published online on the hospital walks website <http://www.hospitalwalks.com/>

One such walk begins at the main doors of Sligo University Hospital and continues down to the Fish Statue and on to the Sligo IT. "Sligo IT Walk One" (which can be seen via the link) goes along the Slí na Slainte walking route around the IT Sligo campus.

For more information, contact:

- Peter: s00146915@mail.itsligo.ie
- Ciara: s00145962@mail.itsligo.ie
- Emma: s00144953@mail.itsligo.ie
- Simon: s00144578@mail.itsligo.ie

NEIGHBOURS WALKING TOGETHER


Aim: To promote physical activity in IT Sligo and Sligo University Hospital populations through mapped walking routes

Launch of the walks: March 15th

Time: 12:30pm


Location: Main entrance of Sligo University Hospital or "The Fish" at IT Sligo

Sligo IT Walk Two
 1.5 KM | 20 Mins | 1,800 Steps




Sligo IT Walk Two

St. John's Walk
 1.1 KM | 15 Mins | 1,400 Steps




St. John's Walk

Internal Loop Walk
 1.25 KM | 15 Mins | 1,640 Steps



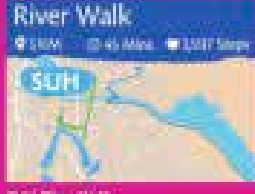
Internal Loop Walk

Sligo IT Walk One
 2.2 KM | 30 Mins | 2,800 Steps




Sligo IT Walk One

River Walk
 1.5 KM | 20 Mins | 2,000 Steps



River Walk

Outer Loop Walk
 1.4 KM | 20 Mins | 1,800 Steps



Outer Loop Walk



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