



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

**Implementation of the Hayes Review of Radiology Reporting
and the management of GP referral letters at Adelaide and
Meath Hospital, incorporating the National Children's
Hospital, (Tallaght Hospital)**

March 2012

1. Introduction

The HSE is publishing a brief progress report on the implementation of the recommendations of the Hayes Review at Tallaght Hospital and nationally.

In March 2010, the HSE commissioned an independent review from Dr Maurice Hayes into the circumstances that led to the accumulation of unreported x-rays and delays in the management of GP referral letters at Tallaght Hospital.

The Hayes Review of Radiology Reporting and the management of GP referral letters at Adelaide and Meath Hospital, incorporating the National Children's Hospital, (AMNCH) [Tallaght Hospital] was published in November 2010. Its aims were to identify, describe and analyse:

- the circumstances and factors that had led to the accumulation of unreported x-rays
- the Hospital's management of the backlog when identified
- the Hospital's management of GP referral letters

and to make recommendations that would improve services at the Hospital, which might be applied to other voluntary and HSE-operated hospitals, leading to increased patient and public confidence.

The HSE and Tallaght Hospital fully accepted Dr. Hayes's findings and, since the publication, have worked together on an implementation plan, to ensure that all of the recommendations are acted upon. Significant work has been carried out at Tallaght Hospital, where the CEO, clinicians and managers have co-operated fully in this joint exercise.

Over the past fifteen months, a joint group has overseen the implementation of the forty-six recommendations, including representatives from the Royal College of Surgeons and Royal College of Physicians in Ireland, the HSE, Tallaght Hospital and a service user. This group has worked with clinicians and managers in the fields of radiology, GP referrals management and governance, both at Tallaght Hospital and nationally. The HSE commissioned an independent Quality & Patient Safety audit, which reported in October 2011 and confirmed significant progress in radiology and the Out Patients Department at Tallaght Hospital.

The HSE would like to recognise the enormous effort invested in and outcomes for patients achieved so far by Tallaght Hospital, particularly over the past two years. The HSE has assisted the hospital where possible; but responsibility for the improvements, both already achieved and ongoing, lies principally with staff at Tallaght Hospital.

Briefly, the Hayes Review recommended the following:

(a) Radiology

- Tallaght Hospital: staffing levels to be increased and Information Technology systems improved
- Nationally: the 2010 HSE national guidelines on radiology reporting to be implemented; staffing should be reviewed and workforce planning improved; maximum efficiencies sought; maintenance and replacement of equipment planned and existing systems validated against the standards of the ongoing National Integrated Medical Imaging System (NIMIS) project

(b) GP Referral Letters

- Tallaght Hospital: a robust solution should be put in place to deal with the remaining backlog (in 2010) and to prevent a recurrence. There should be new policies with timelines at the Out Patients Department; performance monitoring; systematic communication with GPs; introduction of a single point for registration of GP referrals; and clearer definitions of clinical accountability
- Nationally: further development of clinical directorate structures; better records management; and a national strategy for orthopaedic services

(c) Common Themes and Governance

- Tallaght Hospital: the Board should be reduced in size and management structures revised; GPs and service users should be actively involved
- Nationally: clinical governance and accountability to be further developed; HSE Management Framework for the Governance and Funding Arrangements with the non-statutory (voluntary) sector to be introduced, including monitoring of these recommendations.

The Hayes recommendations are being implemented in parallel with the ongoing development of a series of national clinical programmes within the Irish health system. These programmes outline the future framework for the delivery of our services, in order to improve patient care. The HSE has appointed Dr Philip Crowley as National Director of Quality and Patient Safety with the objective of improving risk management and quality systems across the health service. Tallaght Hospital has also appointed a Director of Quality Safety and Risk Management, Dr. Daragh Fahey.

The HSE NIMIS (National Integrated Medical Imaging System) project is investing in providing state of the art electronic radiology systems for 35 Irish hospitals. This new imaging system allows doctors to electronically view their patients' diagnostic images, such as X-Rays and CT Scans, quickly and easily. The rapid access and availability of patient records to health professionals is a significant step forward for patient safety.

2. Progress Report – March 2012

2.1 Implementation - Radiology

At Tallaght Hospital, the Hayes Review had identified staffing and Information Technology (IT) issues as having contributed to the delays in turnaround times for radiology reports. The HSE has approved funding for additional equipment, including a gamma camera, endoscopy equipment and a CT scanner. The complement of consultant radiologist posts has been increased by two and the recruitment process has commenced for a further two posts.

The hospital has upgraded its radiology related IT infrastructure. A new disk based storage system was put in place in 2011 to replace the problematic tape storage system. A voice recognition system has been approved which will save on radiologist and clerical time; this was installed on a pilot basis in 2011 which proved effective in reducing reporting time, as reports are generated automatically - using voice recognition technology - as opposed to transcribing and typing.

The Tallaght radiology IT systems will be reviewed in 2012 against the criteria recommended in the Hayes Review.

At national level, the National Radiology Programme has set as its priority for 2012 the collection and analysis of data in order to make informed decisions and plan for the best delivery of Radiology services to meet the needs of the patients. This information will assist all hospitals with issues that include assessment of waiting times and workforce planning, both in a national context and in the context of ongoing developments at a local level.

The HSE national guidelines on radiology reporting are in place since 2010 and hospital level monitoring will be complemented from the second quarter of 2012 by a system of formal monitoring at regional and national level.

As a result of the above improvements, Tallaght Hospital has been able to assure the HSE that no backlogs exist in reporting radiology investigations.

2.2 Implementation - GP Referral Letters

At Tallaght Hospital, a quality action plan has been put in place to improve all aspects of healthcare records management. The backlog of GP referral letters was cleared by December 2010.

New protocols are now in place to ensure the original failings do not recur, with all referrals now registered in a Central Referrals Office. Turnaround times are monitored against standards and progress is steady; the turnaround time is five working days. The hospital is rolling out referral functionality as part of its IT systems, which will give real time data on compliance with the policy and will facilitate rapid follow up for any deviation.

Acknowledgements are sent to GPs and patients in cases where a timely appointment cannot be offered for routine checks. Direct engagement with GPs has led to a number of improvements, including direct two-way communication; direct access to the Paediatric Chest X Ray Clinic and input to decisions on demand management and to Medical Assessment Unit development. The Tallaght GP Liaison Committee meets monthly.

In the Tallaght Hospital catchment area, as elsewhere, there is still room for progress regarding decisions to refer patients to the Out Patients Department at the hospital or to treat them in the community. There are significant benefits to patients if they can avoid attending hospitals in situations where viable alternatives exist.

Clinical Directors have clear job descriptions. Work is on going on a new code of conduct for staff at Tallaght Hospital, using the HSE code as a basis, to ensure clear levels of accountability for all staff and this is expected to be in place before the summer.

At national level, the HSE established an Outpatient Performance Improvement Group in 2011. The Group has designed a suite of policies, as part of the Outpatient Services Performance Improvement Programme, to enhance the delivery of out patient services nationally.

A “whole system” approach has been taken to address the entire patient care pathway (i.e. from GP referral to discharge) with a view to improving access for patients (e.g. patients have a say in when their appointments are scheduled), increasing efficiency and driving better performance (so that patients are seen by the appropriate health professional in a timely manner), and replicating good practice (i.e. ideas that work well in one or more sites) across all hospitals. The HSE is now working in close collaboration with the Department of Health Special Delivery Unit, to finalise a new policy framework for out patient services nationally.

In anticipation of the new HIQA standards for healthcare services, the HSE is developing a simpler self-assessment/reporting system for hospitals to report on implementation of the Code of Practice for healthcare records management.

The Hayes Review made a number of recommendations around the organisation of orthopaedics services at Tallaght and Naas Hospitals, in the context of delays in processing GP referrals. The HSE is working with the Irish Institute of Trauma and Orthopaedic Services (IITOS) on the reconfiguration of orthopaedics services. For reasons of patient safety, this must be progressed within the overall context of the national reconfiguration of services.

2.3 Implementation - Common Themes and Governance

Since October 2011, the Minister and the Department of Health have been working with the Board and CEO of Tallaght Hospital on governance arrangements. Sir Keith Pearson is the new Independent Chair of Tallaght Hospital Board. A new Interim Board was appointed and met on 21 December 2011. The Interim Board comprises nine non-executive members, who were appointed based on competencies identified for good governance. Taken together, the executive and non-executive directors make up a smaller Board than before. The current structures provide the framework for the Board to receive appropriate management information and to take the lead rapidly on remedial action should the need arise.

A new CEO, Eilish Hardiman, was appointed to Tallaght Hospital in August 2011 and the hospital executive management structure has been revised. The patient forum will be enhanced through a User Engagement Strategy, due to commence in March 2012.

Nationally, significant progress has been made in the development of the clinical directorate model and work continues across the country to develop clinical directorates in line with agreed principles. As of 6 March, thirty two clinical directors have been appointed in the acute hospitals sector.

Finally, a new governance framework between the HSE and HSE funded agencies was introduced in 2010. Since that time formal, signed Service Arrangements are required to be signed between the HSE and individual agencies on an annual basis.

In 2011, the HSE established the second phase of the governance development project to:

- Strengthen the HSE's monitoring and management of the individual funding relationships with non-statutory agencies in terms of both the quality and quantity of services being delivered by those agencies
- Update the existing Service Arrangement documentation.

The project completed its work in 2011 and these new arrangements were introduced from the 1st January 2012.

A full report on each recommendation from the Hayes Review is available below.