

Board Strategic Scorecard October 2023
Annex 2 Improvement Plans

HSE Board 25 October 2023



Contents

Slide

#1 Public Health

3

#8 Prevention and Early Intervention

4

2023 Ambition Statement

Ambition Statement 2023: to maintain COVID-19 Test and Trace capacity in line with Public Health guidance and remain flexible to changing levels of demand in line with strategic direction of public health in terms of its operating model. Ensure effective delivery and monitoring of the COVID-19 vaccination programme and influenza vaccination programmes as informed by guidance/policy. Implement key priorities of Public Health Strategy.

Rating and Overview: (2) Concerns that the 2023 Ambition Statement will only be partially achieved.

Underlying Issues: Please provide details on the particular underlying issues which have led the EMT member to conclude that the ambition statement will not be met (i.e. why have KPIs not been achieved and/or deliverables delayed / not completed)

Covid-19 and Influenza Vaccination Programmes – Autumn/Winter

Reporting is in line with cohorts as approved by NIAC in the context of public health recommendations. While the performance of the Vaccination programme is measuring behind on targets, it continues to compare strongly against European counterparts (based on ECDC data) to include top in Europe for Primary vaccinations and third booster. All deliverables are on track and work continues to improve uptake for the planned autumn programmes. The national team monitors the execution and delivery of the Autumn/Winter vaccination programme. It is a targeted and closely managed programme, for example there is a 5 week timeline for LTRCFs, 8 week timeline for housebound

Issues/Risks

There is a risk that lower uptake of the 23/24 autumn/winter COVID 19 booster vaccination programme by agreed cohorts due to the change of status for the COVID 19 virus from pandemic to endemic by the WHO.

Public Health Recruitment

With the introduction of POCC 2023, documentation of Consultant positions and approval were impacted, resulting in some delays to new positions. However, 15/30 Consultants have commenced, 5 are in contracting phase, 7 WTE with interviews in the month of October, 2 have live advertising currently and 1 position is being reconfigured following a failed competition. In tandem, the final 20 positions were approved by CAAC in August with LOA's received in September. 13 are currently in active recruitment, with Interview Boards being finalised for the last 7 positions. In addition, all Public Health Consultants, with the exception of 1, have been transitioned to POCC 2023, with further work underway to transition the final position.

Mitigations/Improvement Actions: *Please provide details on the mitigating actions that are being or will be taken to improve performance in the remainder of 2023 (and beyond, as appropriate)*

Covid-19 and Influenza Vaccination Programmes – Autumn/Winter

Alignment of Programmes

The alignment of the COVID-19 and Influenza Vaccination Programmes will support the vaccine delivery for Health and Care Workers, Mobile and temporary pop up clinics will also increase access to vaccine administration. Public Health communication on benefits and risks of vaccines will form part of the overall Communication plan.

There will be provision of HCW uptake reports for HSE staff using SAP HR data – reports to be run monthly with an extra report in mid November to inform any extra actions ahead of year end expected hospital peak activity. Active review and analysis of these will inform actions

Access

GPs and Pharmacies are the primary channel for the eligible groups (80%) however the HSE has built in some contingency with an increased capacity. There has been early engagement and communication with providers on the autumn/winter booster programme, along with recruitment of additional Community Pharmacies to increase capacity. Additional vaccinations clinics will be provided where challenges in meeting demand are identified. Operational bases are identified and will provide the location from which mobile teams can be operationalised to administer vaccines. The operational bases will utilise existing HSE locations and will be cost neutral. There will be a minimum of two within each Health Region, which will accommodate a core team of staff and storage space for all relevant equipment (vaccines, devices etc.). The Workforce planning associated with the operational bases is now completed. Capacity will be based on population geographically spread. Mobile teams will be launched from the Operational Bases to provide vaccinations in temporary clinics, Pop up Clinics and Mobile clinics to eligible cohorts: HCWs, those under 12 and members of the public in areas that are under-served by GPs and Pharmacies, and hard-to-reach groups. Mobile teams will also deliver vaccines to RCFs, IPS, Hospital Inpatients and the Housebound. In order to Improve the uptake of Live Attenuated Influenza Vaccine (LAIV) in primary school children, COVID-19 mobile vaccination teams will provide LAIV on-site in schools between October & December 2023 to: Senior Infants in primary schools and Eligible children in primary age special schools. LAIV will also continue to be available to eligible children, including all aged 2-12 years, though GPs and Pharmacies.

Communication

A Public Communication Plan has been developed to support the rollout of the Autumn/Winter Booster campaign across all eligible cohorts, which includes national and local radio, social media, print advertising, direct communications SMS text/phone/email, PR launch/announcement, community stakeholder engagement and updated online information material and website content. Specific communication plans will be implemented at Hospital Group and CHO level to support increased healthcare worker uptake.

8. Prevention and Early Intervention

Month: September 2023

Rating 2

Ambition Statement: to continue to empower individuals to take greater control over their physical and mental health by: (i) delivering targeted interventions in areas to include smoking cessation, reducing alcohol consumption, promoting healthy food and exercise, establishing weight management programmes for young people; (ii) supporting positive mental health in the travelling community; (iii) reducing social isolation and promoting positive parenting; and (iv) focusing on addressing health inequalities within disadvantaged communities and vulnerable groups

Rating and Overview: (2) Concern that 2023 ambition statement will only be partially achieved on the basis that at least 50% of deliverables are currently on track

Underlying Issues: Please provide details on the particular underlying issues which have led the EMT member to conclude that the ambition statement will only be partially achieved / not achieved (i.e. *why* have KPIs not been achieved and/or deliverables delayed / not completed)

KPI 2- MECC Number of frontline staff who completed the eLearning Making Every Contact Count brief intervention training

- MECC targets are under achieved nationally, due to pressures in the healthcare system
- There is an ongoing challenge on managers to release staff for training and support MECC implementation within their service
- Time pressures are frequently noted as a barrier to complete MECC eLearning
- Digital Intervention to support reduced alcohol consumption cannot be progressed without required resource.

KPI 3 - Percentage of problem alcohol users (under 18 years) for whom treatment has commenced within one week following assessment

- There was an error in interpretation of assessment date for clients who fail to attend initial appointment which led to there being a time lag on the HRBLink in terms of date of referral to date of assessment to date of interventions/treatment being implemented. Issue relates to data returns for CHO 4 only.

Deliverable 4- Children and Young Peoples Weight Management Service

- Health & Social Care Professional recruitment in CHO's is challenging due to workforce planning issues being experienced across the board, there are more vacant posts than qualified staff available to fill and capacity to recruit.

Mitigations/Improvement Actions: Please provide details on the mitigating actions that are being or will be taken to improve performance in the remainder of 2023 (and beyond, as appropriate)

KPI 2- MECC

- Nine posts to support MECC implementation have been recruited through Sláintecare Healthy Communities to support implementation of MECC in CHOs. A similar request was submitted as part of estimates 2024 for support in Acute services.
- Work has commenced on the development of a MECC Implementation plan 2023-2027
- A review and update of the original MECC modules is currently being planned for 2024 and will provide an opportunity to consolidate content where possible and explore ways to reduce the time barriers

KPI 3

- CHO 4 has engaged with the HRB to ascertain where the breakdown occurred.
- CHO 4 has now updated and inputted all of the data for the reporting period.
- Refresher training for CHO 4 staff has been scheduled with the HRB, with a bi-annual review process to help ensure quality reporting.
- The HSE Business Intelligence Unit has outlined that once the template is submitted, the correct template will be loaded for the next quarterly reporting which will be in October.

Deliverable 4- Children and Young Peoples Weight Management Service

- Ongoing engagement with CHO's, exploring options such as re-profiling posts within pay & WTE envelope to make more attractive e.g. 1 WTE basic grade re-profile as 0.75 WTE senior grade.
- Support CHOs with implementation.