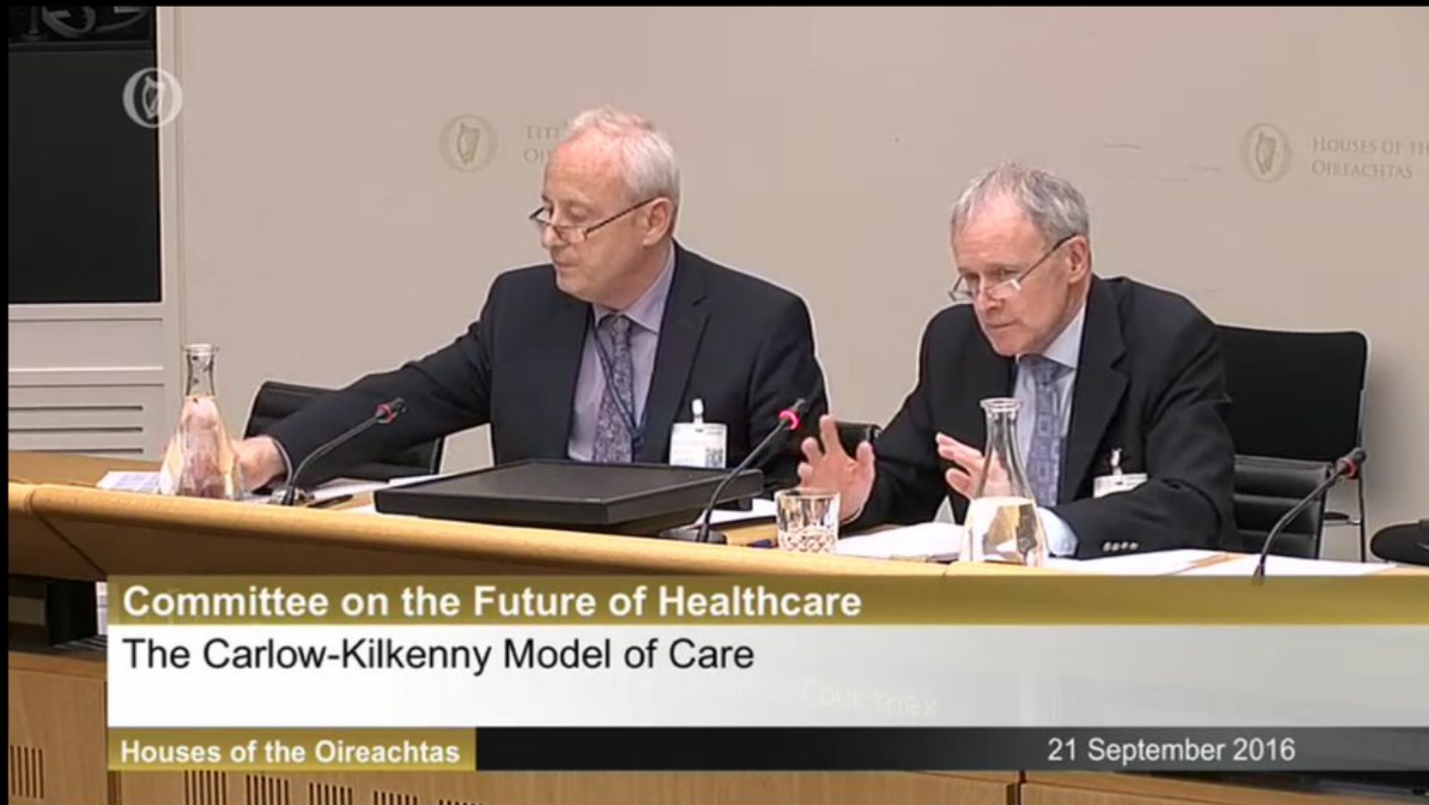


Integrated Care to Reduce Patient Risk

Streaming right care, right place, right time
The Carlow – Kilkenny Model

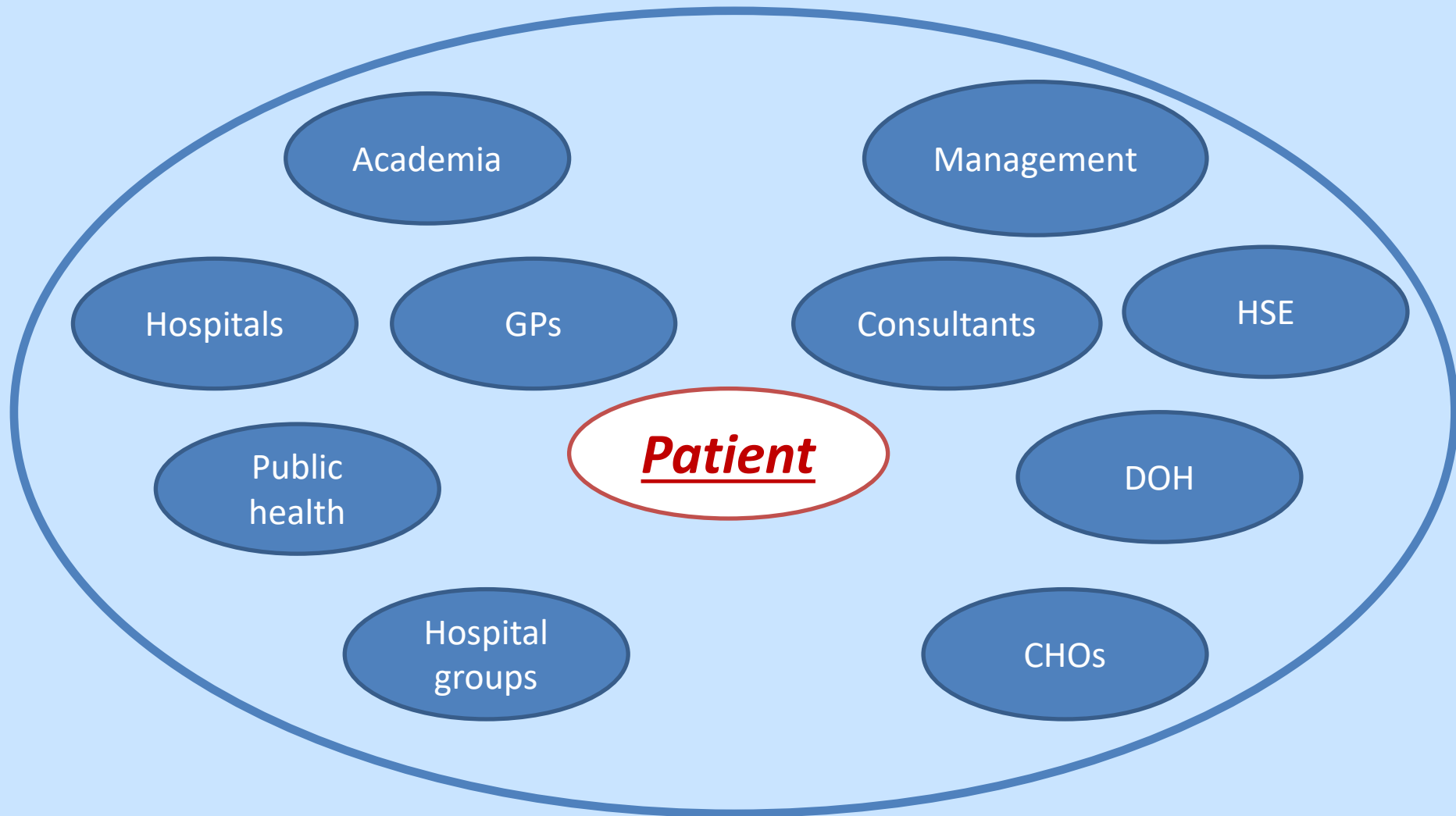
SCA Webinar 14/10/21

The CK Model



Culture and structure of collaboration

From silos to systems



We will explore:

- Quality, Clinical risk & Patient safety through the Carlow-Kilkenny story of innovation and collaboration toward a safer, more cohesive, integrated health system
- *or How to get better outcomes from excellent, hardworking, committed staff toiling in an inefficient, exasperating, morale sapping and risky system!*

Covid 19 Epidemiology

Week 10 '20 – Week 39 '21

Epidemic curve of COVID-19 cases notified in Ireland

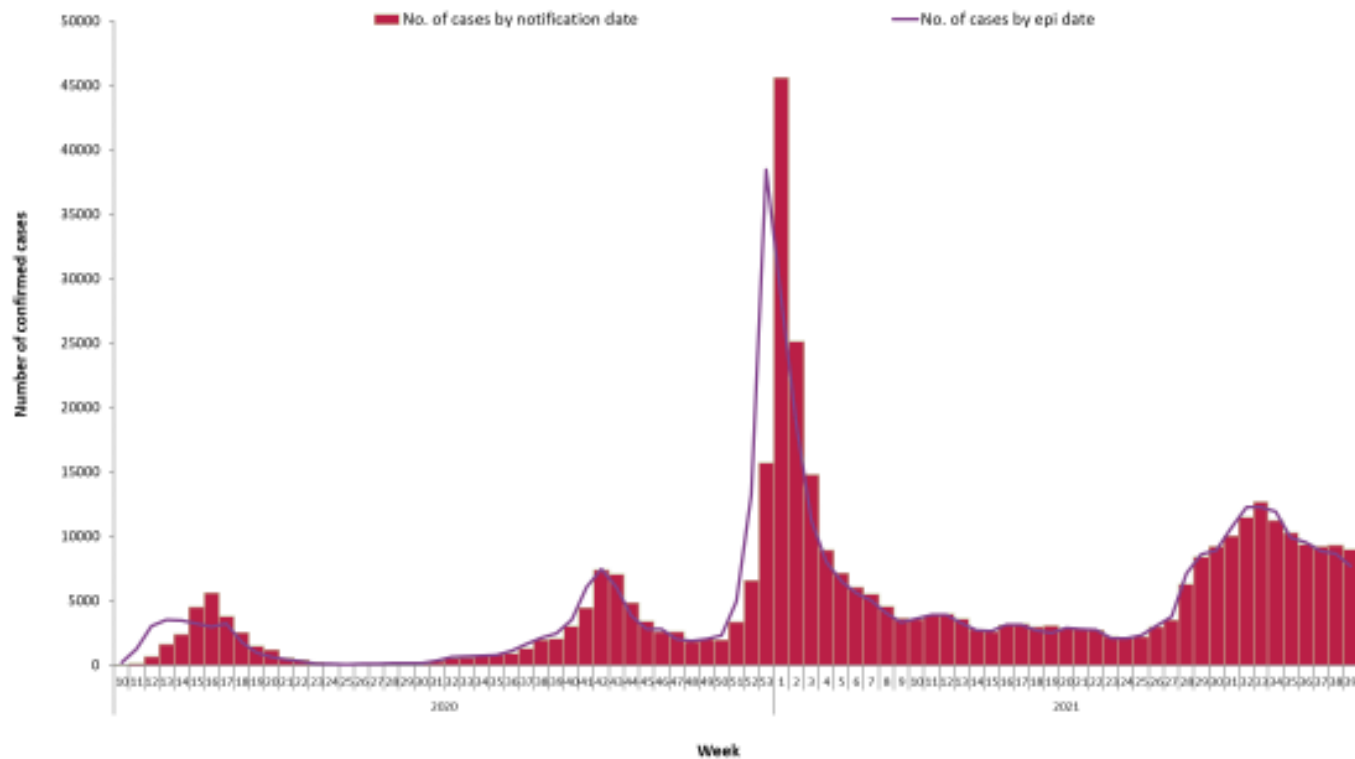


Figure 1: Number of confirmed COVID-19 cases by notification week and [epidemiological date](#) in Ireland between week 10, 2020 and week 39, 2021

Daily numbers of Covid-19 admitted cases St Luke's General Hospital for Carlow Kilkenny (Apr 2020 to Oct 2021)

[Back to report](#)

CASES ADMITTED 8AM BY STATUS DATE AND HOSPITAL

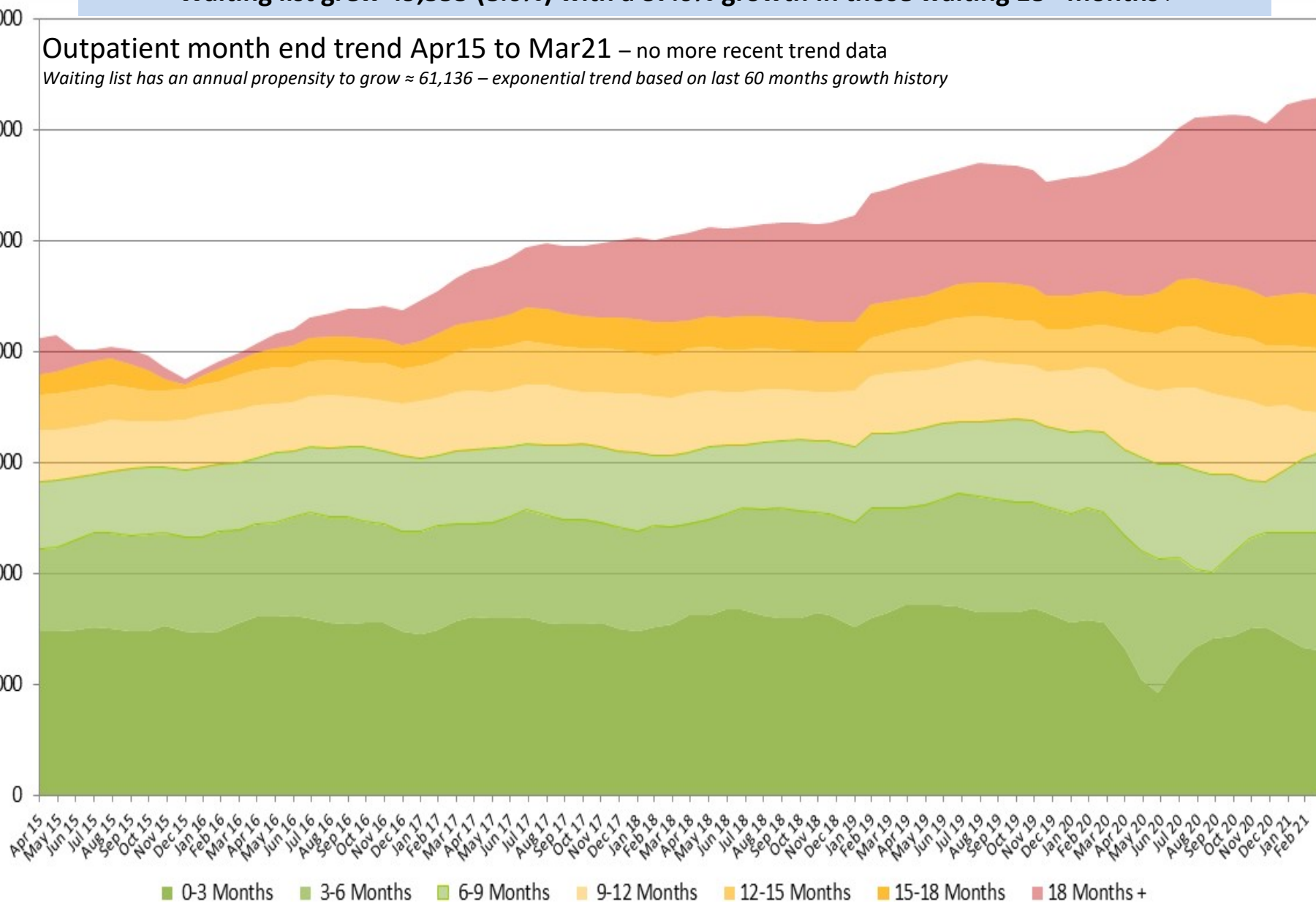


National Outpatient waiting list trend and 1 year comparative metrics 2nd Sept'21 to 3rd Sept'20

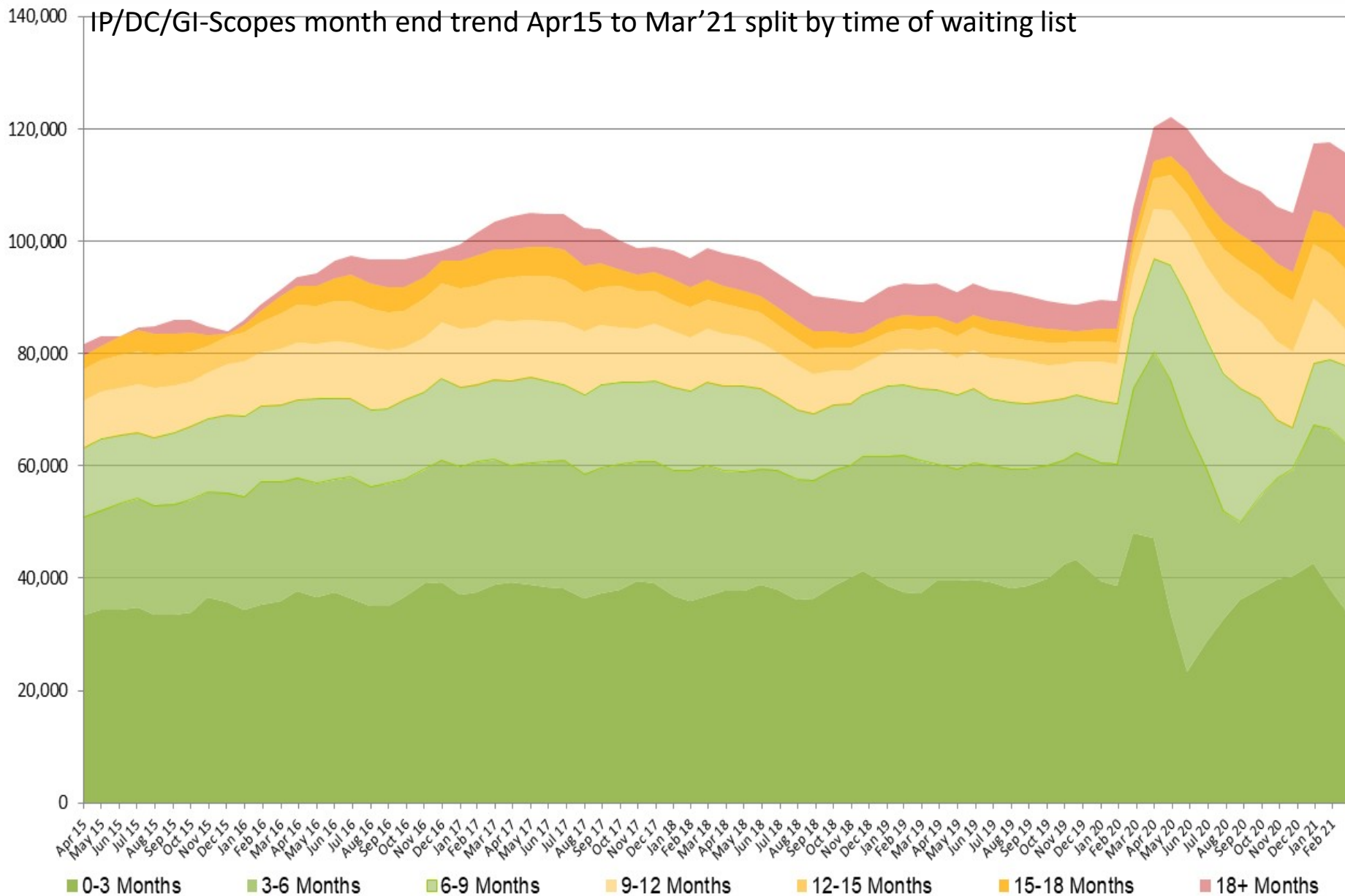
Waiting list grew 49,555 (8.0%) with a 37.0% growth in those waiting 18+ months .

Outpatient month end trend Apr15 to Mar21 – no more recent trend data

Waiting list has an annual propensity to grow $\approx 61,136$ – exponential trend based on last 60 months growth history



National IP/DC/GI-Scopes waiting list trend and 1 year comparative metrics 2nd Sept'21 to 3rd Sept'20
Waiting list dropped 4,327 (-3.8%) with 96.6% increase in 18+ month waiters.



Inpatient waiting list (snapshot of top procedures & area of residence – Oct 2021)



Hospital Overview: St. Luke's General Hospital Kilkenny

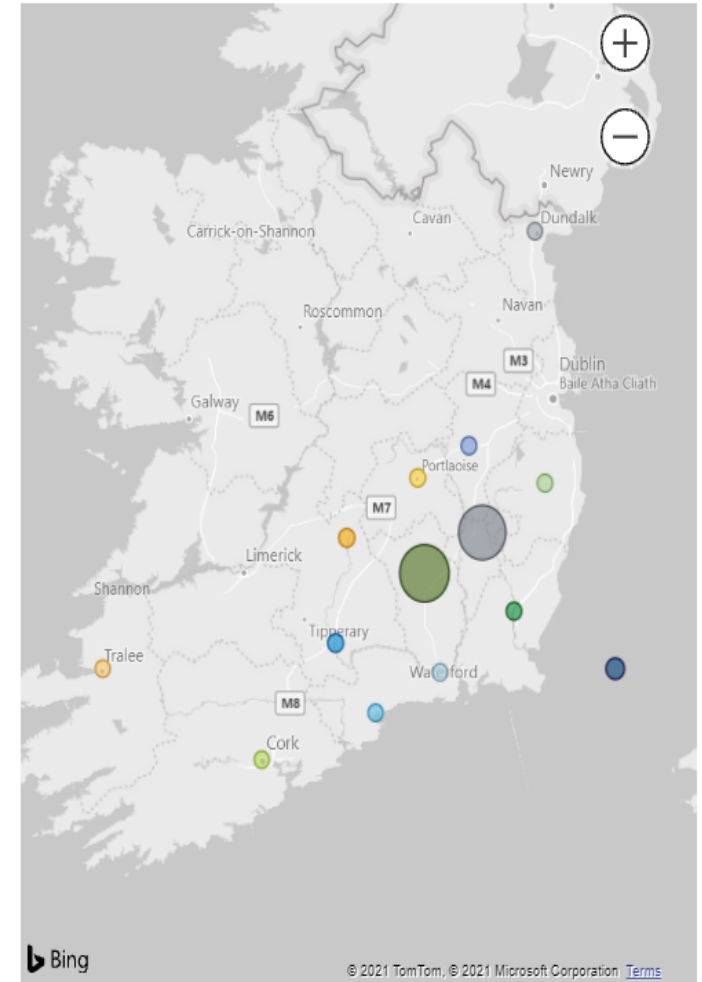
Total Number of Records



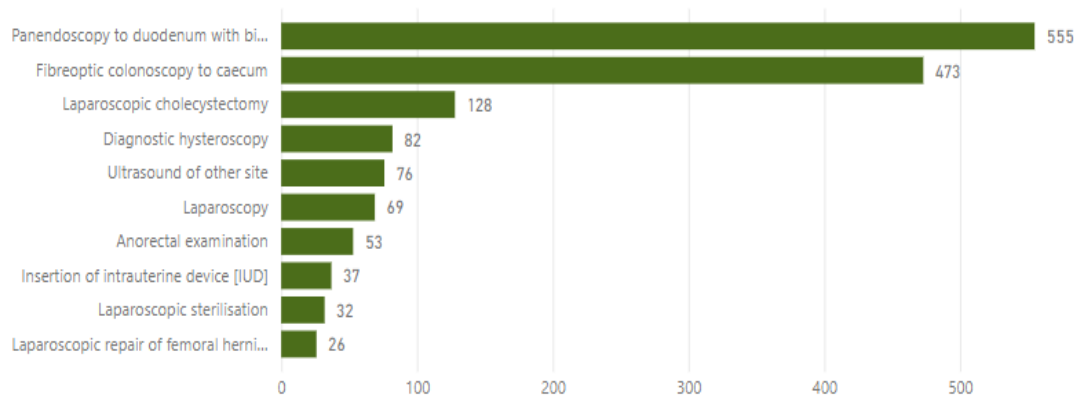
Number of Records by AOR Name



Number of Records by AOR Name, AOR Latitude and AOR Longitude



TOP 10 Procedures



Change (Reform)

“All change is
difficult,
even from worse to
better!

Richard Hooker
(1554 – 1600)



"If you want
to make
enemies, try
to change
something."

-Woodrow Wilson

(1856– 1924)

Why Change?

Health Budget
in real terms

Trolleys

Waiting
Lists

Population

Fair Deal
Bed demand

Age of
Population

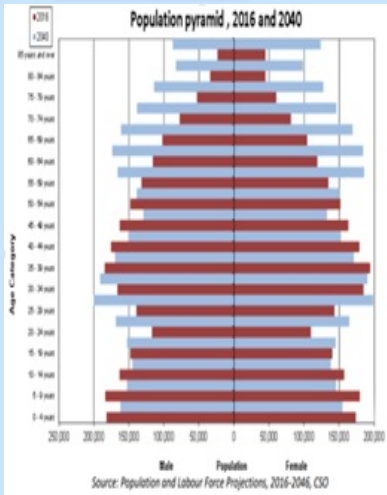
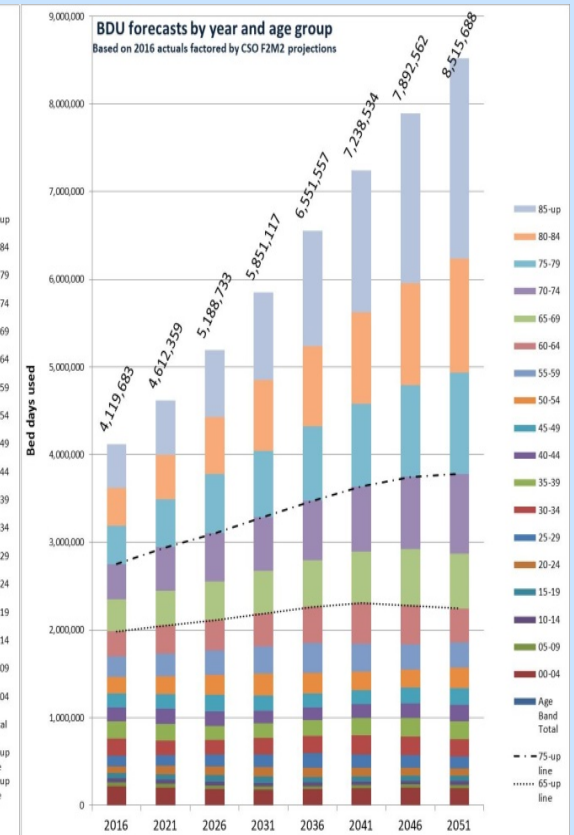
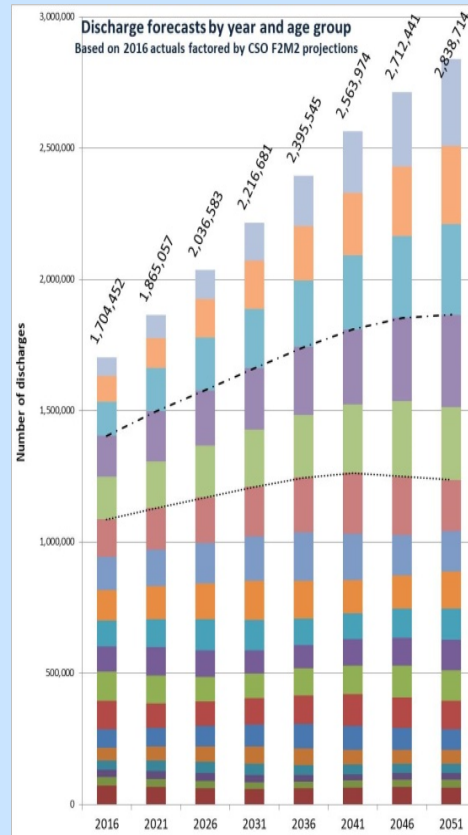
Complexity

Wage
Pressure

Pension
Burden

Winter
Pressure

Covid19

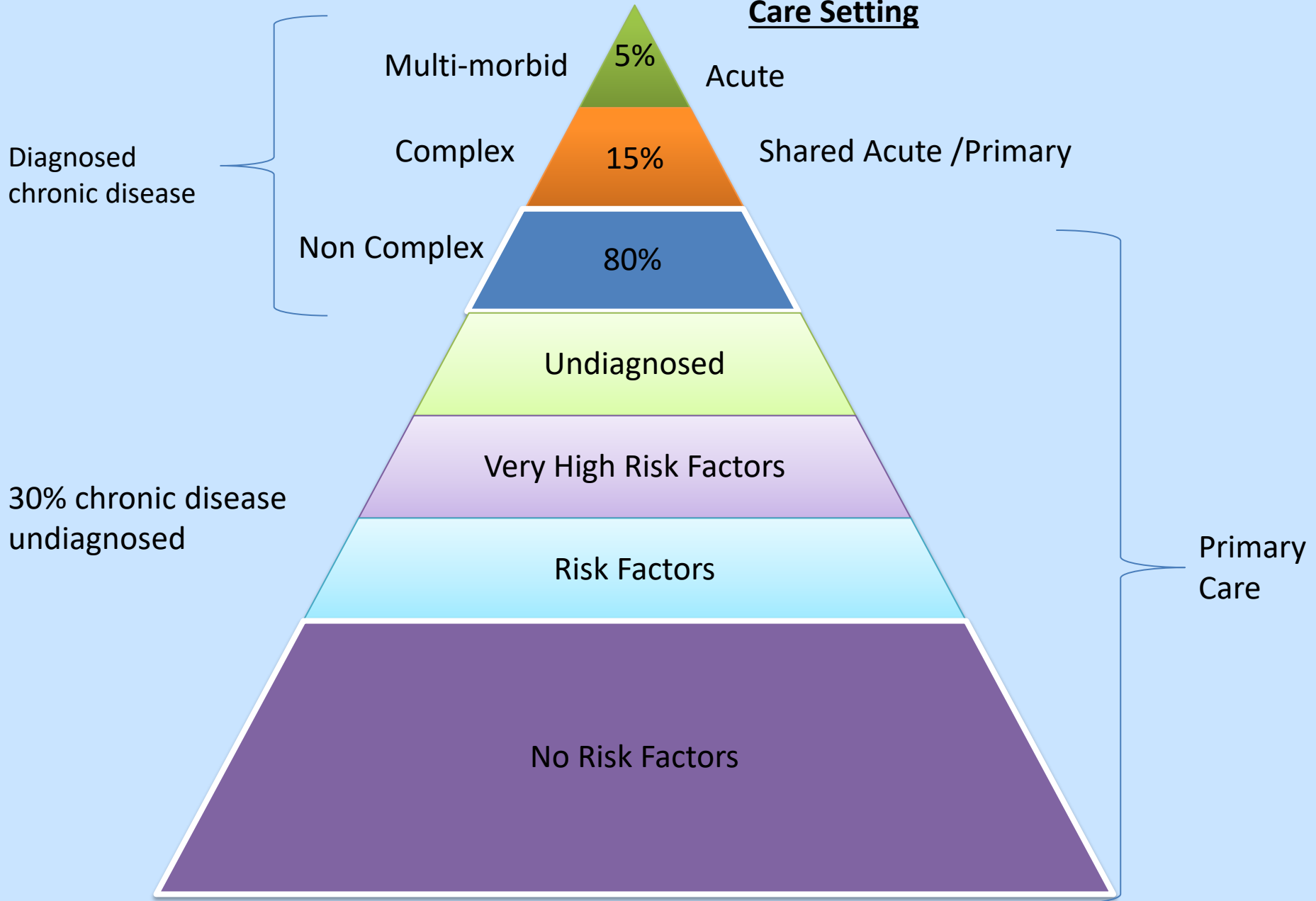


	2016	2021	2026	2031	2036	2041	2046	2051
Total BDU	4,119,683	4,612,359	5,188,733	5,851,117	6,551,557	7,238,534	7,892,562	8,515,688
% 65-up	51.9%	55.6%	59.3%	62.6%	65.4%	68.1%	71.1%	73.6%
% 75-up	33.2%	36.2%	40.2%	43.8%	47.0%	49.8%	52.5%	55.6%

Build extra M3's in each 5 year interval	5.0	5.8	6.7	7.1	7.0	6.6	6.3	Tot: 44.6
--	-----	-----	-----	-----	-----	-----	-----	-----------

Population Health Pyramid

Care Setting



How to change

- Relentless focus on improving communication and collaboration between management and healthcare professionals across acute hospitals and community (staff & patients)
- VEHICLE: Local Integrated Care Committee (LICC)

CK LICC

- Monthly meetings between GPs, Consultants (including Psychiatry and Public Health), NCHDs, Pharmacy, Management (hospital and Community), **GP Chair**
- Agenda, Minutes, Data, Actions, Timelines, Review (SMART Principles)
- Open discussion in a safe, blame-free environment to develop contact, respect, trust
- No changes adopted without discussion and agreement
- Then tested, reviewed and refined

Look at the Big Picture

- What's in it for me?

LICC Bonus

- Twinned to Carlow–Kilkenny Clinical Society
(Education and CPD)
- Collegiality, networking, ventilation,
decompression, listen and learn, staff morale,
recruitment, retention, job satisfaction,
accomplishment - all improved

Some Carlow-Kilkenny initiatives

- First annual ICGP study day 1989
- Home Care Team: end of life care 1989
- ICGP Liaison Committee 1990
- Caredoc GP Co-op 1999
- AMAU 1st in Ireland 2000
- CIVU 2006
- GP-led CIT (Caredoc) 2011
- ASAU 2014
- Acute Floor: 1st AEC centre in Ireland 2016
- Direct GP Access to Minor Injuries Unit (MIU) at ED 2016
- GEMS: Frail Elderly Acute Service 2017

Some recent CK partnership projects

- Acute Arthritis Clinic - with SVUH/IEHG 2015
- Heart Failure Virtual Clinics - HSE/IEHG/HSE 2016
- Clinical Pharmacy Project for complex discharges to reduce error and readmissions. Now 100% compliance with HIQA 2016
- GP-led Gynaecology Clinic at St Luke's 2016
- MECC Project on obesity/smoking/alcohol: for CK GPs on Risk Reduction and Brief Interventions 2016/17/18
- UCD Medical Students: First exposure to clinical medicine for 136 students in 3rd Med was given in General Practice placements with hub in Carlow-Kilkenny 2016 & 2017 & 2018
- New DVT Pathway to AMAU/ED 2018
- Joint management of Covid-19 in St Luke's & Community hubs 2020/21

VIRTUAL CLINIC FOR HEART FAILURE 2016

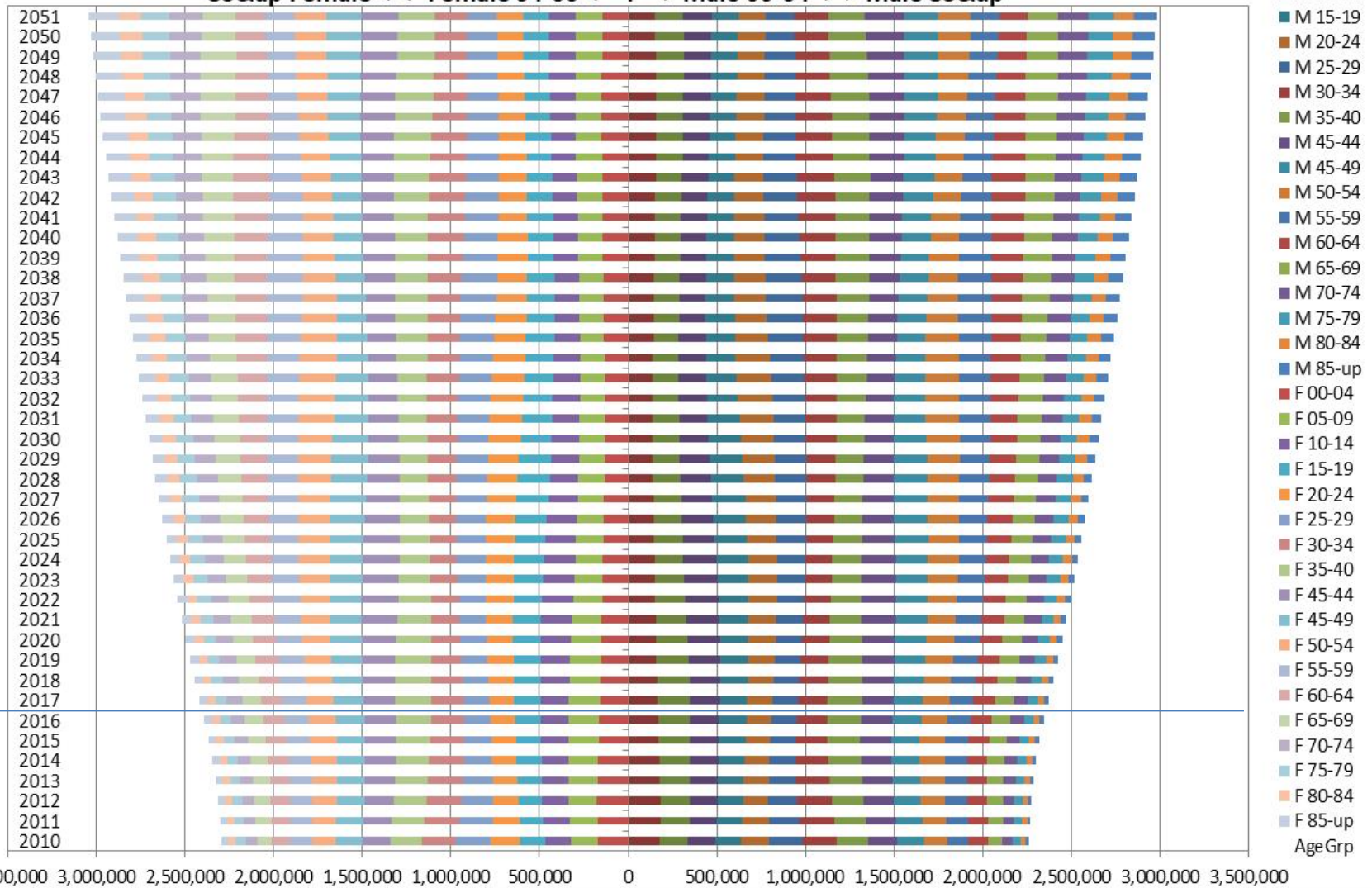


Increasing and aging population

Population volumes by age band and year 2010 ... 2051

85&up Female <-<- Female 04-00 <- - | - -> Male 00-04 ->-> Male 85&up

Year



Forecasts
Last Census

CSO
projections
M2F2 model

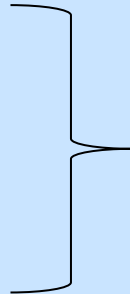
Year	2010	2015	2020	2025	2030	2035	2040	2045	2050
Pop 000's	4,554.8	4,687.9	4,944.9	5,166.2	5,358.3	5,536.6	5,709.6	5,870.2	6,006.9
% Ovr 65	11.3%	13.0%	14.6%	16.3%	18.2%	20.0%	21.9%	24.0%	25.7%
% Ovr 85	1.2%	1.4%	1.6%	1.9%	2.3%	3.0%	3.6%	4.2%	4.9%

Clinical setting now perceived as **HOSTILE:**

- Increasing risk environment (work demands/complexity, staff shortages, superbugs, polypharmacy, lack of support, burnout, etc, etc, etc.)
- Increasing medicolegal threats/litigation
- Increasing regulation
- All leading to a concerning cultural change in professional work practices within and between primary and secondary care

Response: Defensive posture

Over specialisation
Over investigation
Over diagnosis diseases
Over treatment
Soaring waiting lists



Chasing
'incidentalomas' and new diseases
and 'worried well'

Expense escalation
Opportunity costs
Cutbacks
Staff shortages (short notice rota gaps, burnout)
Misdiagnosis
Legal costs
Malpractice Insurance
IMC
HIQA
Stress, rumination, anxiety, doubt, burnout, career loss
Defensive posture and re-enforcement of current biases

Everybody loses!



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

**Roinn
Sláinte Gairme
Occupational
Health
Department**

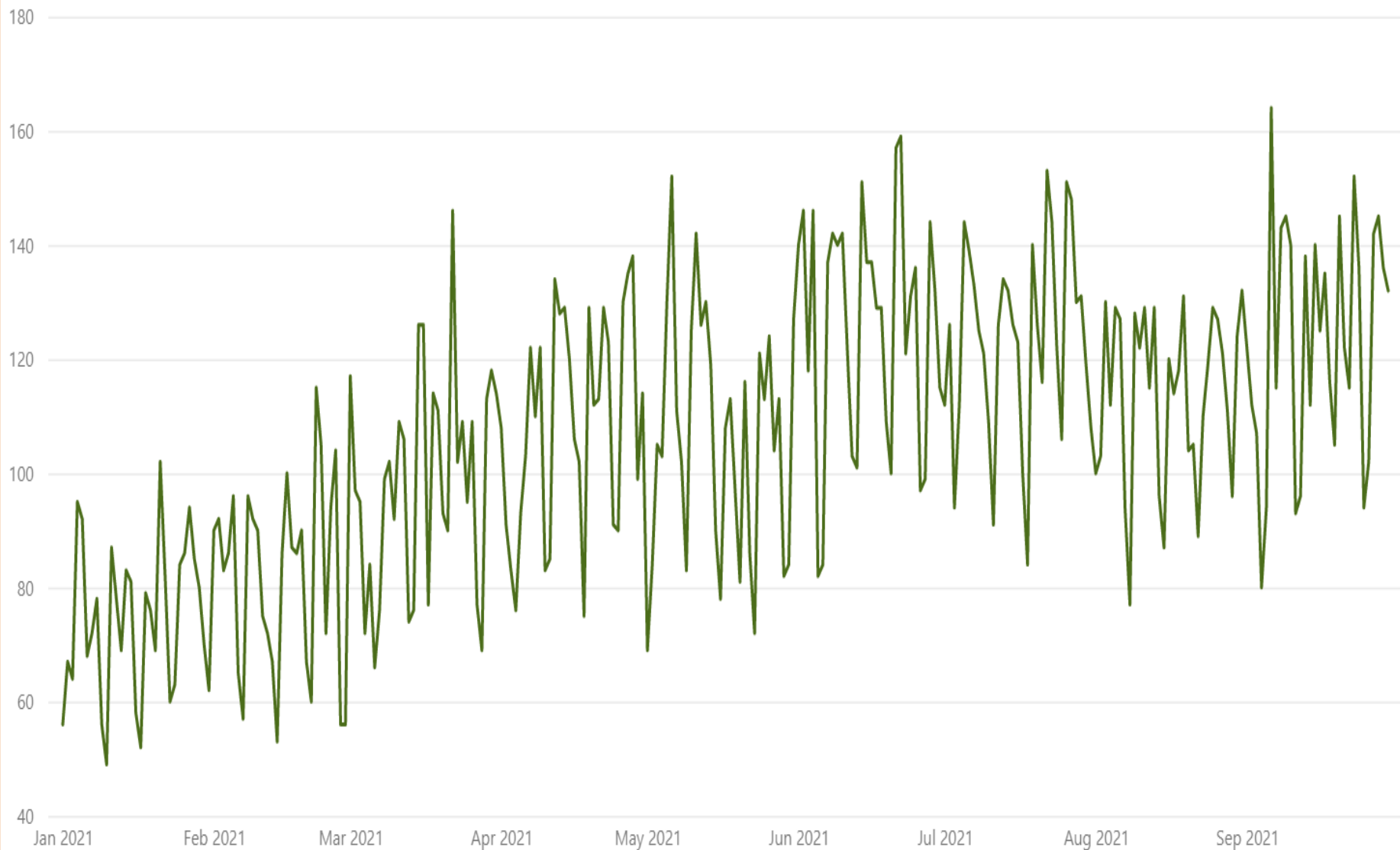
Total daily emergency attendances St Luke's General Hospital for Carlow Kilkenny (1st Jan to 30th Sept 2021)



[Back to report](#)

ATTENDS

BY DATE

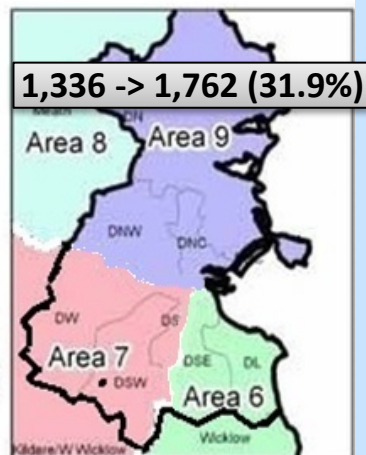
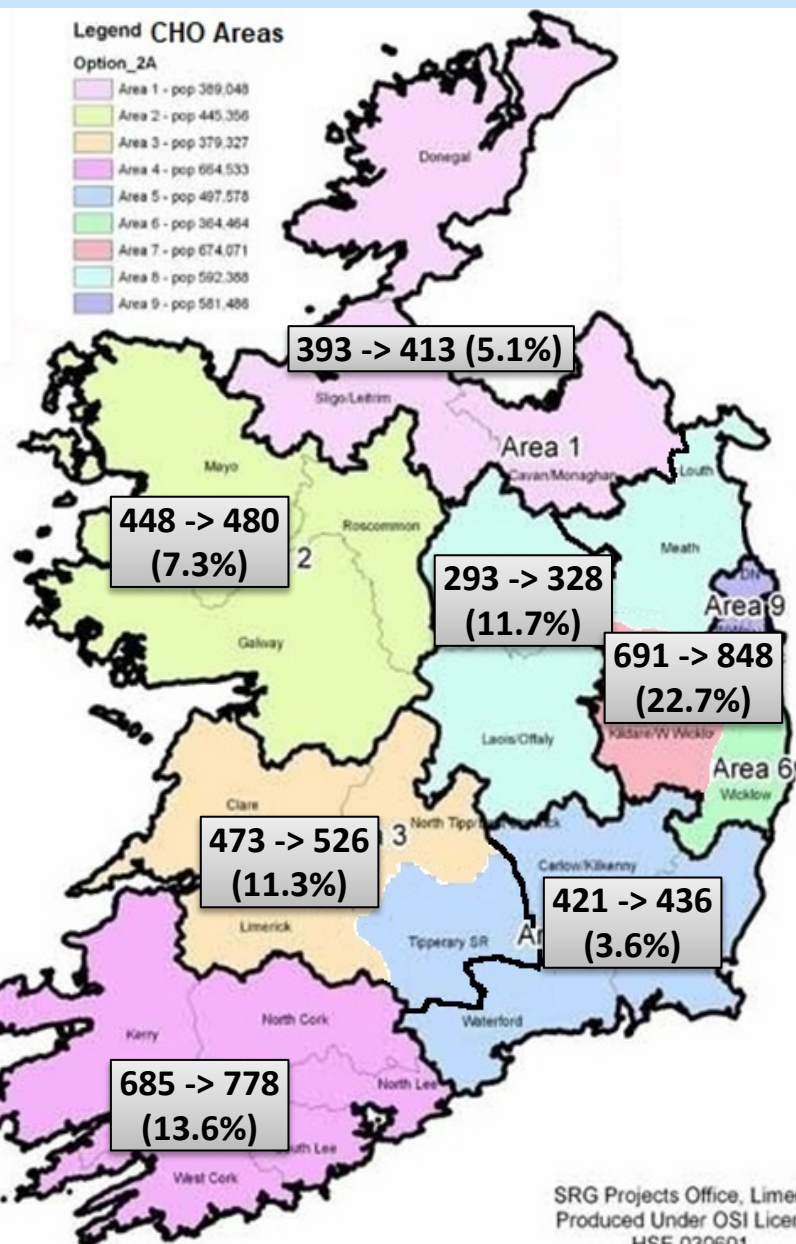


CSO Regional population projections 2016 → 2036

Legend CHO Areas

Option_2A

- Area 1 - pop 389,048
- Area 2 - pop 445,356
- Area 3 - pop 379,327
- Area 4 - pop 654,533
- Area 5 - pop 497,578
- Area 6 - pop 364,464
- Area 7 - pop 674,071
- Area 8 - pop 592,355
- Area 9 - pop 581,486



Ethical Challenges

- Individualized medicine over Society's needs
- Miracle drugs (super costly)
- Dr. Google/Internet/Social Media Campaigns
- Unrealistic expectations of outcomes
- Media Interest
- Political demands
- Cost Effectiveness (VFM, MFTP)
- *Acute care career avoidance*

Crises Catalyse Change

via the Covid 19 Lens:

The pandemic harshly revealed a hidden truth:

- The Irish health System was/is fragile, unsustainable and inherently risky
- Also expensive with no clear evidence of returns on investment
- Hidden deprivation effects have disproportionate adverse outcomes

Solutions

Spend to save to deliver sustainable change

- with evidence and accountability

(pouring more money into a failing system increases dysfunction)

1. Control immediate (Pandemic) risks (short term)
2. Reinvigorate, innovate, learn from success (medium term)
3. Invest and learn - People, Plant, Process, ICT, Research and Education (long term)
4. Develop safe, stable, cohesive, self sustaining and integrated high quality care across acute/community interface (Slaintecare)

(New ways of working, data driven models of care, streaming, ambulatory care, ANPs, Occ. Health, patient involvement in self care)

Investigate to Discharge **NOT** Admit to Investigate as Ambulatory Care from Chronic Disease Management Hubs in local community settings

Requires Leadership (and bravery)!

Education is not the
learning of facts. It's
rather the training of
the mind to think.

- *Albert Einstein*



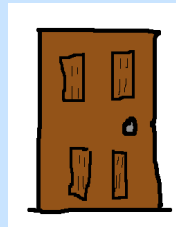
Acute Floor

St. Luke's General Hospital, Carlow/Kilkenny

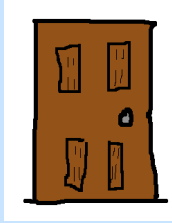
Scheduled Care



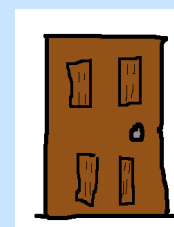
AMAU



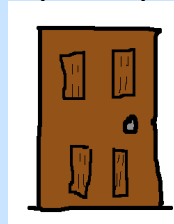
ED



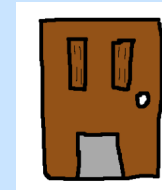
ASAU



Psychiatry



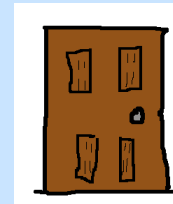
Access
via
Streaming



Older
Persons with
frailty



Paediatrics



OBGYN





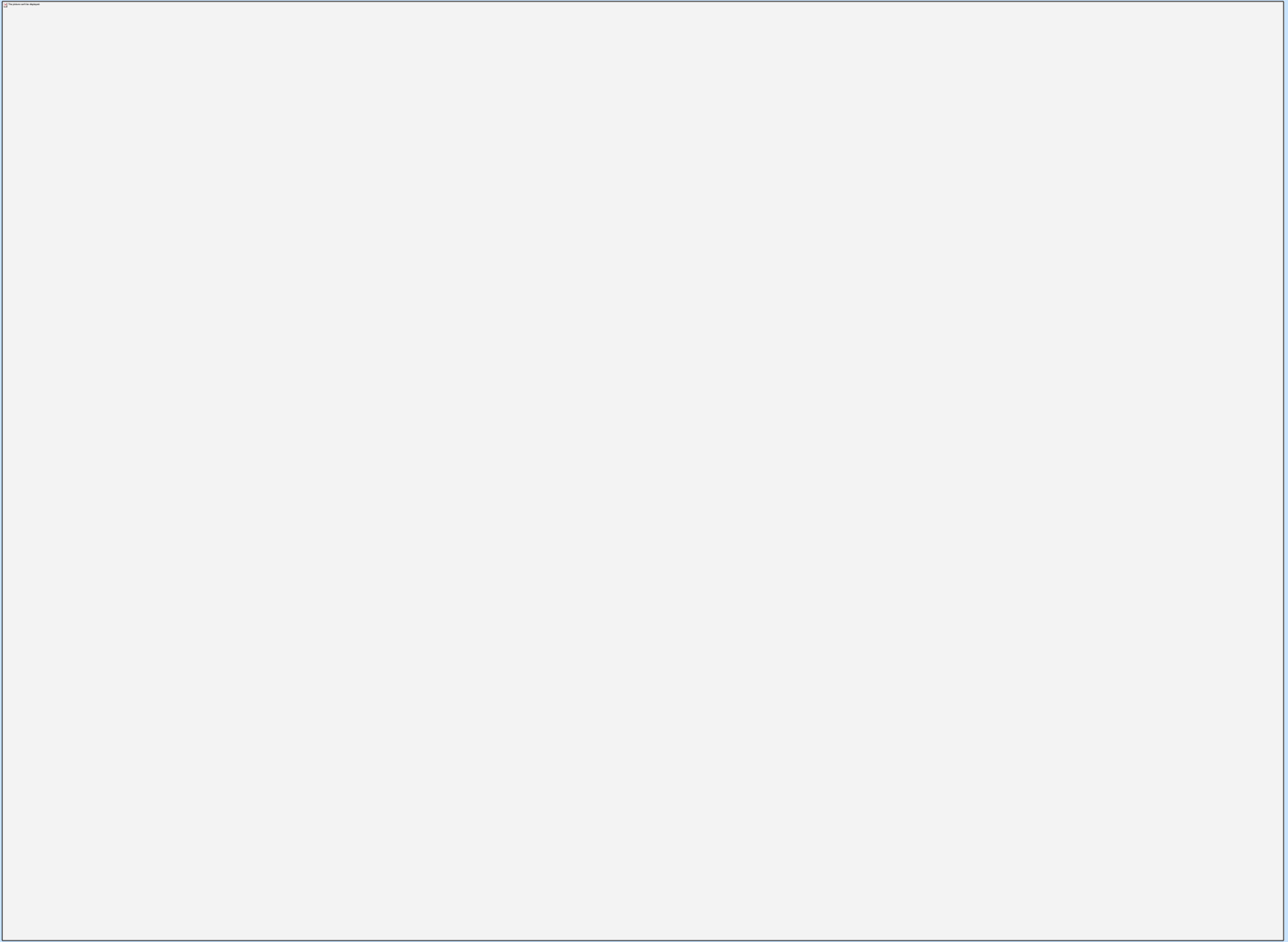


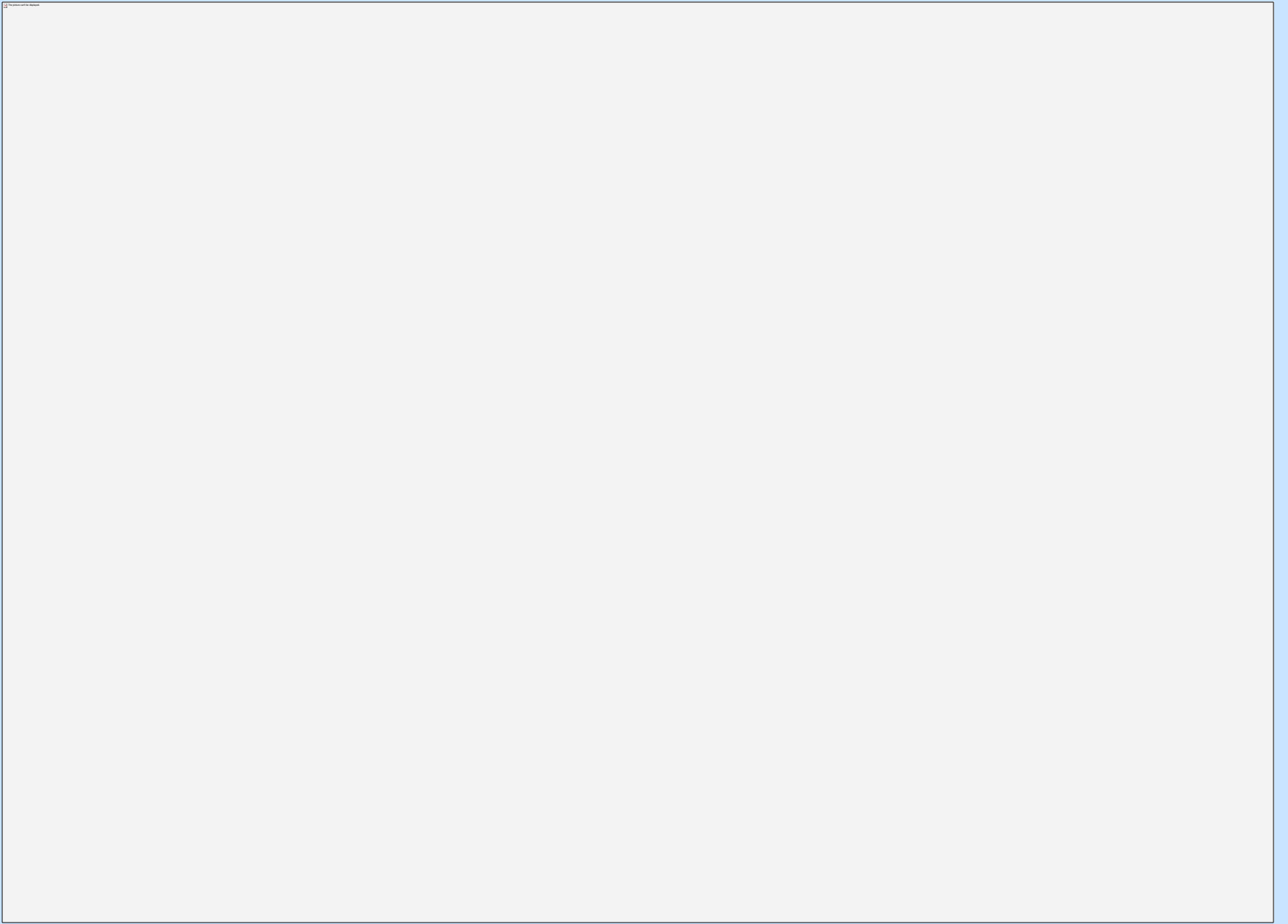


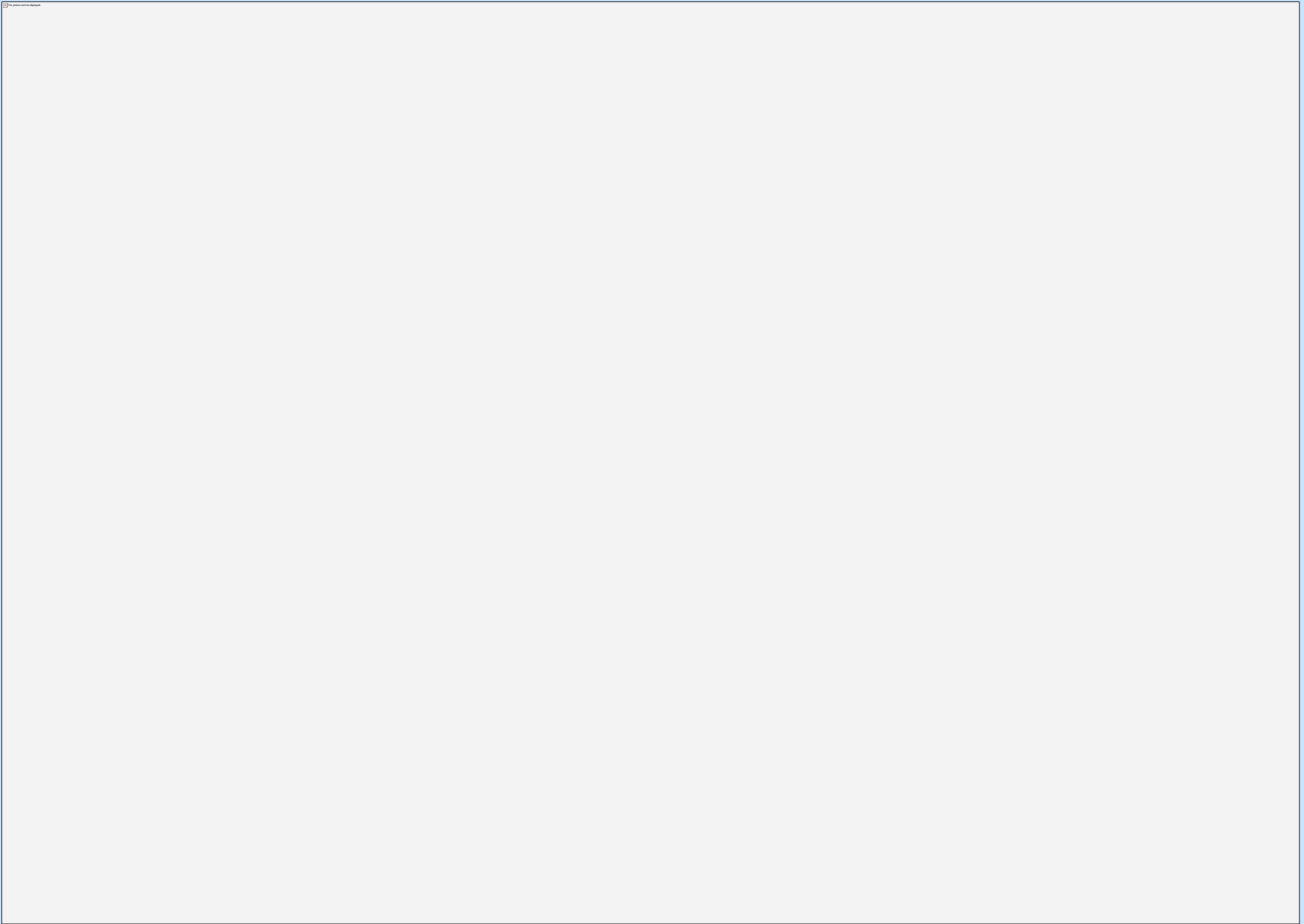


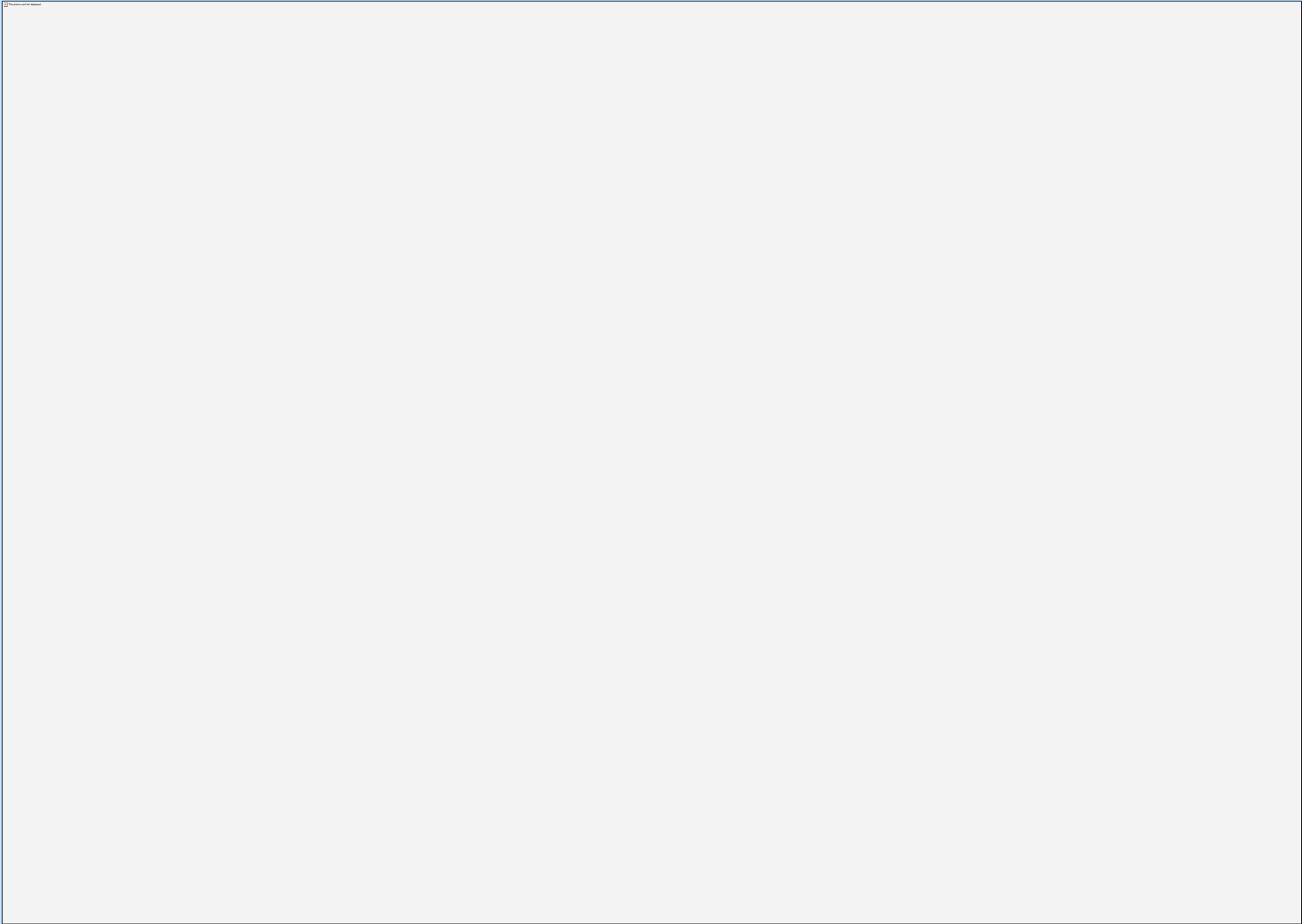


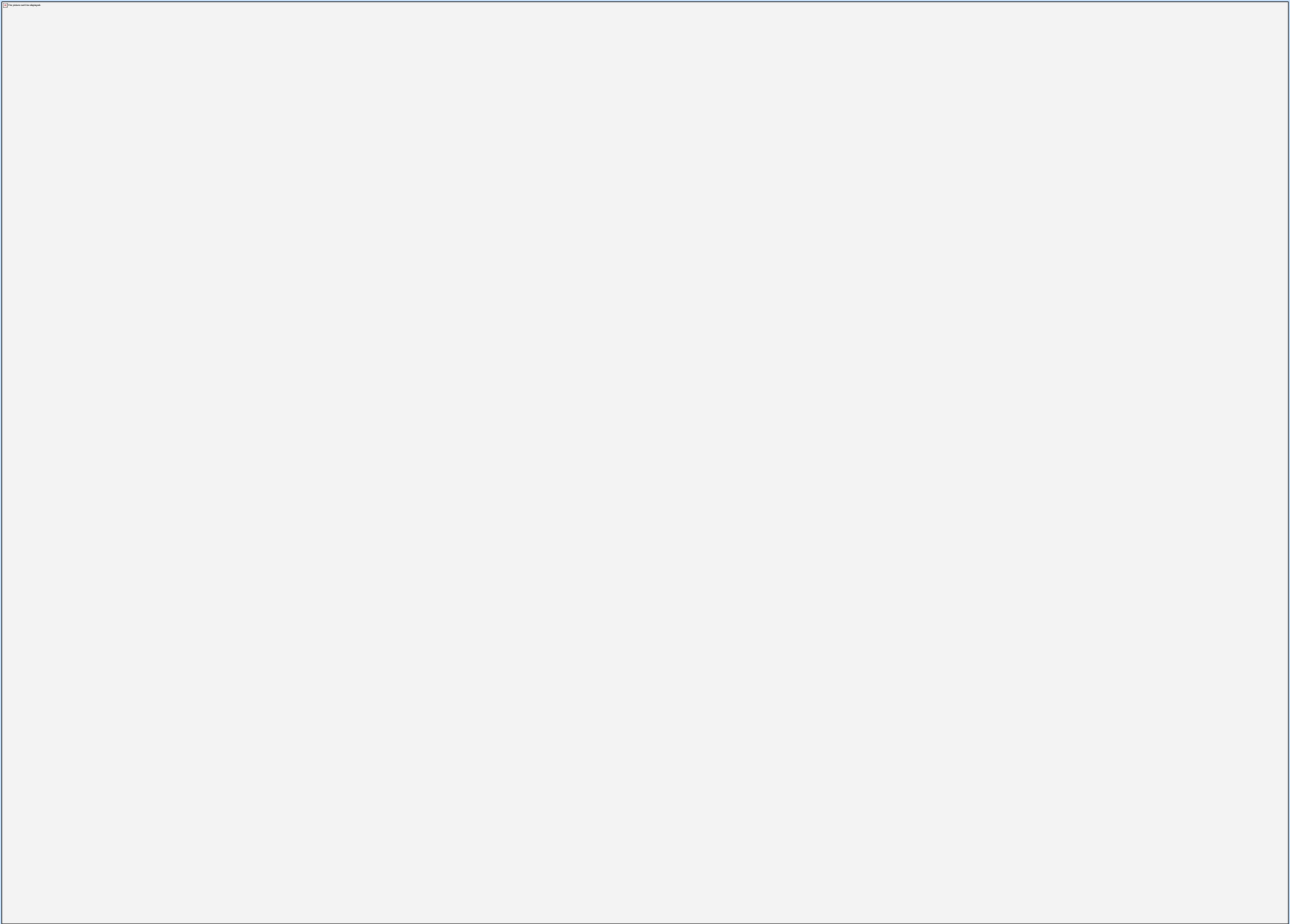


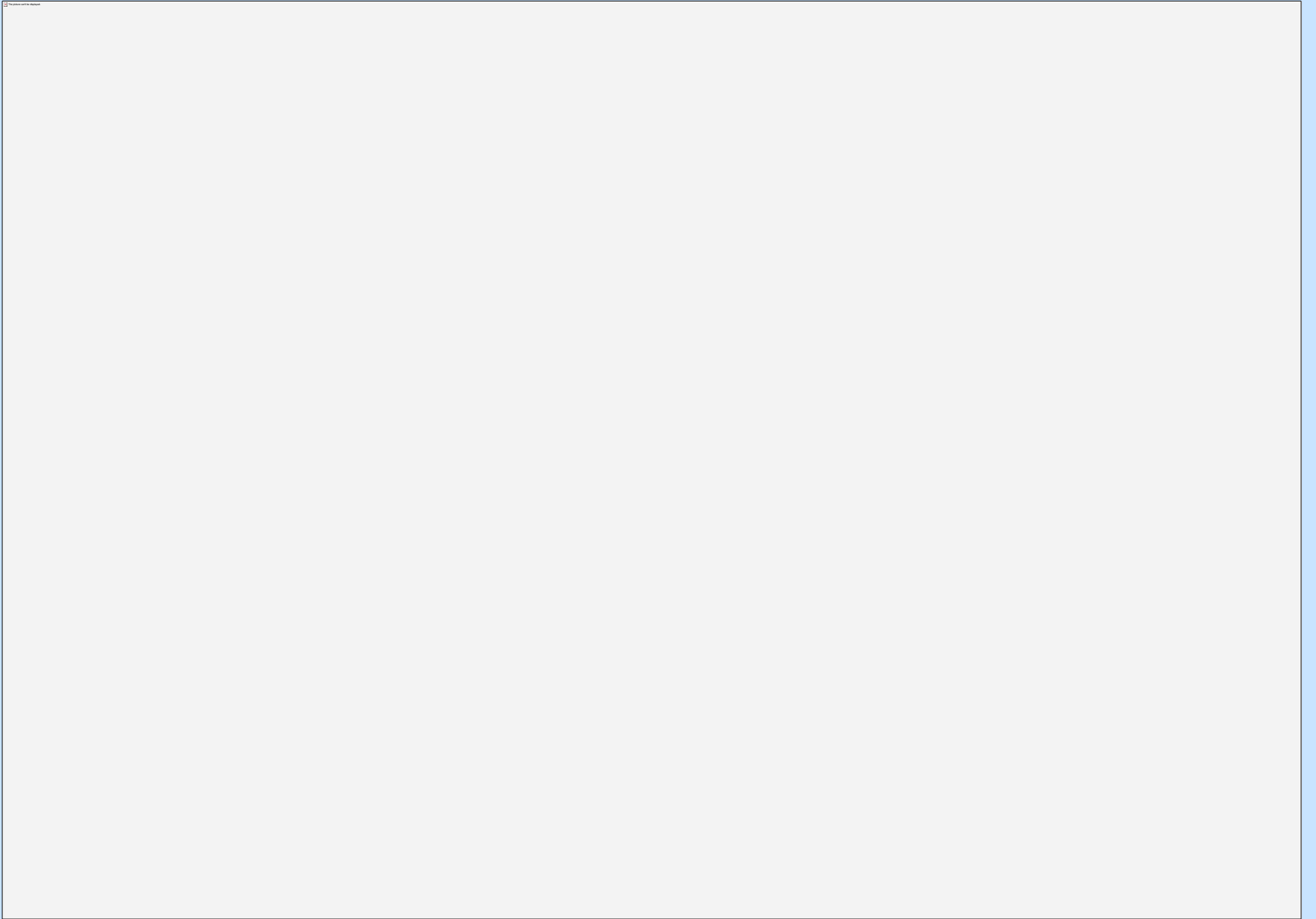












Conclusion



