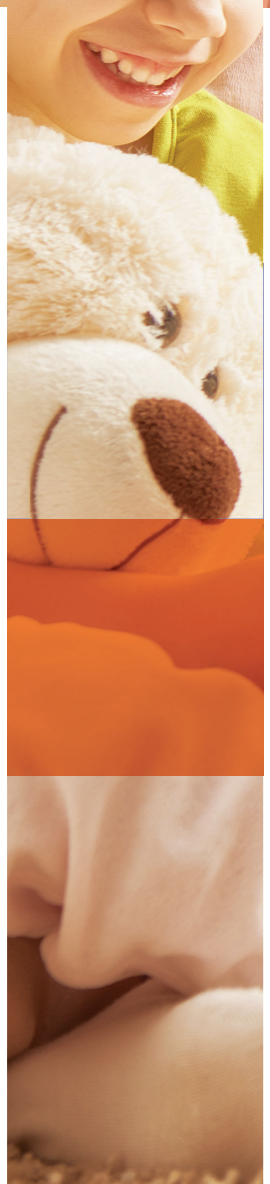
2016

ANNUAL REPORT

Supporting performance improvement to treat patients faster



ntpf

an ciste náisiúnta um cheannach cóireála
the national treatment purchase fund

Supporting performance improvement to treat patients faster

Contents

Chairman's Statement

Corporate Governance

Overview of 2016

- Acting Chief Executive Officer
- Information & Communications Technology
- Audit and Quality Assurance
- Corporate Services
- Finance, Hospital Pricing and Contracting
- Nursing Home Support Scheme
- Project Management Office

On behalf of the National Treatment Purchase Fund (NTPF), I am pleased to present the 2016 Annual Report.

John Horan
(Chairman)

This report is written against a backdrop of significant numbers of patients waiting long periods for treatment and consultation. Although the NTPF is not responsible for the performance management of the system, our offering of services in 2016 has been specifically tailored towards supporting improved systems and better use of evidence in the healthcare system to treat these patients faster.

During 2016 we developed the organisation into five dynamic functional areas – Information Technology, Audit and Quality Assurance, Project Development, Finance and Nursing Home Pricing and Corporate Services. All of this strategic planning work was designed to have the organisation fully prepared to resume its role in the commissioning of patient treatments – a role which had previously contributed to the successful reduction in waiting times for patients.

We look forward now to making an enhanced contribution to this vitally important work of getting patients treated faster.

Information Technology

Data and reporting has become a significant hub of the NTPF. The NTPF is now responsible for the collection, collation, verification and publication of waiting list information for inpatient, daycase, planned procedure and outpatient information. It also provides the Department of Health, Health Service Executive, Hospital Groups and individual hospitals with comprehensive trend analyses on waiting list information on a weekly basis. In 2017 the NTPF is providing a new suite of web- based data analysis reports to further support these stakeholders.

Audit and Quality Assurance

In 2016 the Audit and Quality Assurance (AQA) Team completed a programme of audits across the scheduled care system in 42 hospitals in Ireland. The aim and objective of this programme was to ensure that complete, accurate, validated patient information was returned by hospitals to the NTPF and to confirm that hospitals had implemented national protocols for the management of waiting lists. A total of 739 remedial action plan items were reported as non-compliant across 19 key test controls reviewed in the 42 hospitals. 57% of those have been tracked to closure and the AQA team continues to work with Acute Hospitals HSE, Hospital Groups and individual Hospitals to track remaining remedial items.

The AQA team also completed a comprehensive piece of work for the National Directors of Primary and Social Care supporting the newly established National Speech and Language Therapy review group. A total of 11 diagnostic reviews were completed in seven service areas of Speech and Language Therapy with the highest volumes of clients waiting. This programme has contributed to a reduction of 70% in the over 12 months waiters for Initial Speech and Language Therapy. It has also supported the review groups report on a new National Model of Care for Speech and Language Therapy.

Project Development

The Project Development Office was established in the NTPF in March 2016, initially to support the delivery of technical guidance materials for hospitals to ensure the highest standards of data quality and practice. The new National Inpatient, Day Case and Planned Procedure (IDPP) Waiting List Protocol was launched as part of an NTPF symposium in January 2017. This protocol was delivered in conjunction with the Department of Health, HSE, Hospital Groups and individual hospitals utilising lean methodology and tools and is intended to ensure consistent waiting list management and data practice across all 42 hospitals.

Finance and Nursing Home Pricing

A total of €34.3m was processed by the NTPF in 2016,

- €28.8 million was received by the HSE and disbursed by NTPF in order to support public hospitals reach waiting list targets. This funding facilitated the treatment of more than 40,000 patients across a wide range of specialties
- €3.9m supported the provision and maintenance of the national patient treatment register, the development of systems and initiatives in support of the overall health reform programme and responsibilities under the Nursing Homes Support Scheme
- €1.6m was allocated by NTPF to provide some limited support to public hospitals facilitating those waiting over 12 months for a colonoscopy or gastroscopy procedure.

2016 was the eighth year of the Fair Deal Scheme with the Fund continuing it's role of negotiating prices with private Nursing Homes. At the close of 2016 the NTPF had pricing contracts for a total of 433 homes at an average cost of €919 per week.

As requested by the Department of Health report on the Nursing Homes Support Scheme the NTPF will also be submitting proposals in 2017 to the Minister for Health as it relates to:

- Ensuring adequacy of residential capacity for those residents who require high level or more complex care;
- Continuing to ensure Value for Money and economy, with the lowest possible administrative costs for clients and the State and administrative burden for providers;
- Increasing the transparency of the pricing mechanism so that existing and potential investors can make as informed decisions as possible.

Corporate Services

The Corporate Services Division was established in 2016 to support the work of the NTPF by designing and implementing strategies to foster and enable performance by capable and committed individuals. Employment Control Framework restrictions during the recessionary period have imposed limitations on our available resources that have limited our work programme. The Corporate Services Division can now offer solutions to ensure organisational effectiveness whilst ensuring that the NTPF cultivates an environment where development is encouraged and potential maximised.

Additional Services 2017

Early in 2016, the Department of Health provided clarity to the NTPF in terms of areas considered appropriate for the NTPF to pursue in the short and medium term. This enabled the Board to commence the formal process of preparing a strategy to cover the next three years. During the course of preparing this strategy *A Programme for Partnership Government* was published which committed to tackling the most pressing challenges Ireland faces, including health. In particular the programme has specific actions to address patient waiting times across the health service and has committed to significant investment in the NTPF.

Our new Strategy and Action Plan 2017 – 2019 available at, **www.ntpf.ie**, commits to a range of expanded services including;

- commissioning of treatment for longest waiting patients
- exploring price commissioning in other areas of the health system
- assessing the feasibility of collection of additional waiting lists eg for extended Outpatients, Diagnostics and Community Based Services waiting lists
- development of a new Audit and Quality Assurance programme for scheduled care
- expansion of the Community Audit and Quality Assurance diagnostic review programme
- expansion of performance improvement tools for the management of patient treatment pathways
- completion of the review of NHSS pricing

Conclusion

I would like to thank Minister Harris and his Department for their endorsement and support in the development of our Strategy and Action Plan 2017 – 2019.

I would also like to thank my colleagues on the Board who have leveraged their broad range of skills to support the Executive in the development of this strategy. This places the NTPF in a unique position to continue to make a positive and valuable contribution toward shorter waiting times and to support our healthcare partners.

Finally I would like to thank and acknowledge the executive and staff of the NTPF for their continued dedication, diligence and hard work.

The NTPF is a corporate body with key functions and responsibilities set out under Statutory Instrument 179 – National Treatment Purchase Fund (Establishment) Order (2004), the Nursing Home Support Scheme Act 2009 and additional functions as set out under section 4.1 by the Minister for Health. The Board operates to best practice corporate governance principles and in line with guidelines set out in "Code of Practice for Governance of State Bodies" issued by the Department of Public Expenditure and Reform both in its own activities and in its use of committees.

The Board is collectively responsible for leading and directing the State body's activities. The Board delegates responsibility for the implementation of policy to the executive under Board supervision.

In accordance with Section 5 of the establishment order the current board of the NTPF was appointed by the Minister for Health on the 28th February 2014. The key corporate governance functions of this board under statutory instrument and as assigned under section 4.1 are as follows -

1. To make arrangements with persons, whether resident in the State or elsewhere, for the provision of hospital treatment to such classes of persons as may be determined by the Minister from time to time.
2. To collect, collate and validate information in relation to persons waiting for hospital treatment and to put in place information systems and procedures for that purpose.
3. To furnish whenever so required by the Minister or on its own initiative, advice to the Minister on issues relating to its functions under this Article.
4. To develop an outpatient waiting list register.
5. To negotiate with proprietors of registered nursing homes to reach agreement in relation to the maximum prices(s) that will be charged for the provision of long-term residential care services to Nursing Homes Support Scheme Residents and provide the HSE with the details of all approved Nursing Homes agreements.
6. To develop and implement schemes to support and facilitate the gradual reduction in maximum outpatient first appointment waiting times.

Membership of the Board

John Horan (Chairman)

John Horan was appointed as Chairman of the NTPF in 2010, having been a Director and Chairman of the Finance and Audit Committee.

He served previously in a variety of roles in the Aer Lingus Group for over 23 years and was Chief Executive of the Irish Hotels Federation for seven years and of Veterinary Ireland for ten years. He is now an Honorary Life Member of the national organisation for the Veterinary profession. For many years he represented these sectors at Council and Board levels in a range of National and European organisations.

He is an IBEC nominated Member of the Employment Appeals Tribunal and has received a Master of Science Degree in Management Practice - MSc (Mgmt) - from Trinity College, Dublin.

Sheila Bailey

Sheila Bailey is a senior charity professional and Managing Director of the Lyla Nsouli Foundation, a private charitable foundation funding research into paediatric brain cancer. She is a former CEO of The Ireland Fund of Great Britain.

She has served in a non-executive capacity on the boards of several governing bodies and is currently a Director of the Racehorse Owners Association and Retraining of Racehorses.

She was awarded in 2014 the Freedom of the City of London for her services to the Irish community in the UK.

Bernadette Costello

Bernadette Costello is a Fellow of the Institute of Chartered Accountants in Ireland and Director of Internal Audit & Risk Management, National University of Ireland, Galway. She has extensive experience in financial and management accounting, internal audit, risk management, corporate governance and related areas.

She has served on the Council of Chartered Accountants Ireland , the Connecting with Members Committee and past Chair of Chartered Accountants Ireland Audit Committee and Public Sector Committee.

She is a member of the Board of Accounting Technicians Ireland, Chair of the Education and Examinations Board and member of the Quality Assurance and Risk Committee of the Child and Family Agency (Tusla).

She holds a Bachelor of Commerce Degree and Higher Diploma in Education from National University of Ireland, Galway.

Patrick Gibbons

Patrick Gibbons is a solicitor by profession, he has a career spanning almost two decades specialising in legal and regulatory compliance, corporate governance and risk management.

Patrick has spent much of his working life in management roles in a variety of leading international insurance companies.

In more recent years, he has served on boards of directors in the private, State and voluntary sectors and has chaired or been a member of several audit, risk and finance committees.

James Melly

James Melly is a Management Consultant specialising in Organisation Culture and Change with experience in many business sectors and in organisations including Health Service agencies.

He was a Senior Executive in Aer Lingus where he served as Director of a Group company and also as CEO of a subsidiary. He was appointed head of the Personnel Management function for the Aer Lingus Group and led major change programmes in that role.

Dr. Terry McWade

(Chairman Audit and Risk Committee)

Dr. Terry McWade is a management consultant specialising in healthcare and education. He previously held the positions of Deputy CEO in the Royal College of Surgeons in Ireland, Principle in the Boston Consulting Group (London), and CEO of Servier Laboratories (Denmark).

He is a Director of the Corporate Governance Association of Ireland, and former Deputy Chair of the Dublin Dental Hospital and Chair of the European Vaccine Initiative. He serves on the Audit Committee and the Registration and Continuing Practice Committee of the Medical Council.

He qualified in medicine from TCD, and holds a MBA (INSEAD), MSc (Healthcare Ethics and Law), and Diploma in Corporate Governance (UCD).

Brendan O'Donoghue

Brendan O'Donoghue served previously as Chief Executive Officer of St Patrick's University Hospital from 1999 to 2007 and prior to that was 21 years with the Tedcastle Group. His roles included Group Finance Director and subsequently Group Operations Officer.

He is an IoD Chartered Director, qualified in 2011. He is an accountant (FCCA retired).

Dr. Jack Nagle

(Chairman of the Strategy Committee)

After more than 15 years working Internationally in a range of senior roles, Dr. Jack Nagle returned to Ireland where he worked as Operations & Engineering Director for Boston Scientific for 6 years. In 2004, he become founder and CEO of Alpha Healthcare, an Irish company dedicated to providing business management consultancy, change management, quality management systems, benchmarking support and training services to the Healthcare Sector. He set up Alpha Primary Care in 2007 to provide the same services to the UK market. He has a special interest in implementing Total Quality Management and LEAN techniques within the health sector.

He received an MBA from Cranfield University having recently received his Phd from the University of Cardiff.

Anne-Marie Taylor

Anne-Marie Taylor is a senior executive with a track record in programme management, human resources, operations and change management in Ireland and abroad. She was formerly a Senior Executive with Accenture, a global leader in consulting, technology and outsourcing. She is a member of the board of the Public Appointments Service and a member of the Preliminary Proceedings Committee of the Pharmaceutical Society of Ireland.

She has a Diploma in Corporate Governance from UCD, and a Masters degree from the University of Illinois.

Board Meetings and Attendance

The board met on 9 occasions in 2016. Two committees have been appointed to assist and advise the board in carrying out its functions - The Audit and Risk Committee and The Strategy Committee. The Audit and Risk Committee met on 6 occasions in 2016 and the Strategy Committee met on 11 occasions. Table 1; details the level of attendance of each Board Member.

Table 1.

Board members	Board Meetings (9)	Audit and Risk Committee (6)	Strategy Committee meetings (11)
Mr. John Horan (Board Chairman)	9		
Mrs. Sheila Bailey	7		8
Ms. Bernadette Costello	9	5	
Mr. Patrick Gibbons	9	6	
Mr. James Melly	9		11
Dr. Jack Nagle (Strategy Committee Chairman)	8		10
Mr. Brendan O'Donoghue	9	6	8
Dr. Terence McWade (Finance and Audit Committee Chairman)	9	6	
Ms. Anne-Marie Taylor	8		10

Acting Chief Executive Officer

Jim O'Sullivan

In recent years the NTPF did not have a direct role in the commissioning of patient treatment. In that time Jim O'Sullivan served as acting CEO on a part-time basis for a number of years.

Throughout 2016 the organisation began its preparations to continue its work on providing necessary supports to the healthcare system and to again take on a role in the commissioning of patient treatment - in line with commitments in the Programme for a Partnership Government to reduce waiting times for the longest waiting patients. Throughout 2016 he led the NTPF Executive team and worked with the Board in developing the organisation's Strategy for the years 2017-2019. This was specifically aimed at ensuring that the organisation was well placed to commence the work of delivering waiting list initiatives to reduce patient waiting times.

The work carried throughout 2016 is described in detail in the following sections of this Overview of 2016.

As the organisation moved in recent times to appoint a new full-time Chief Executive the Minister for Health, Simon Harris TD, thanked Jim O'Sullivan for his work. He thanked Jim "for his hard work and dedication in serving as Acting CEO of the NTPF over a number of years. His experience and expertise have greatly contributed to the organisation. Jim has led the organisation through a time of considerable change and has laid the foundation for its expanded role in the next few years".

Information and Communications Technology Department

Brian Parsons

The Information & Communications Technology (ICT) Department plays a key role in the delivery of the NTPF strategic objectives. Broadly speaking this entails the collection, collation and reporting of hospital inpatient, daycase and outpatient waiting list numbers, together with ensuring the availability, security and confidentiality of our ICT systems. We manage this through three teams; Data Analysis & Reporting, Infrastructure & Operations and IT Projects.

In 2016 we commenced publication of waiting list numbers on the Irish Public Sector Open Data Portal *(https://data.gov.ie)*. This portal is a rich source of open, free and reusable data for research and analysis purposes and spans a wide range of datasets. Hospital waiting list numbers are available for download in csv format at a Hospital Group, Hospital and Specialty level across the various timebands. Further work will continue on this important data transparency service in 2017.

We continued with our Data Completeness/Data Quality (DCDQ) work throughout the year, culminating in the presentation of the inaugural Data Quality Awards to a number of hospitals at the NTPF Symposium in January 2017. This is an important element in our drive to ensure that we receive consistent, quality data from the individual hospitals in order that we in turn can provide a trusted source of information to facilitate evidence-based planning and management of waiting lists at National, Group and Hospital levels. We liaise closely with our Audit & Quality Assurance team who audit and report on compliance in this area.

Mid-2016 saw the appointment of a new Health Minister which in turn brought a renewed focus on NTPF funding together with new waiting list clearance targets. The ICT team were in a position to facilitate a range of new weekly and monthly reports to various stakeholders in this regard. Indeed, the availability of timely, consistent and reliable data from us contributed greatly to the various *waiting list action plans 2016* at Group and National level. Of course this all takes place while we also must ensure the day-to-day operations are kept going – we processed over 24 million records in 2016 and distributed over 2,000 reports to the 'health system' each month. A selection of year-end reports are contained on the following pages.

Work continued in 2016 to collect and collate Radiology Diagnostics waiting lists, through a pilot project in the Dublin Midlands Hospital Group. We also worked closely with Crumlin and Temple Street hospitals to publish the numbers on the Outpatient Genetics waiting list.

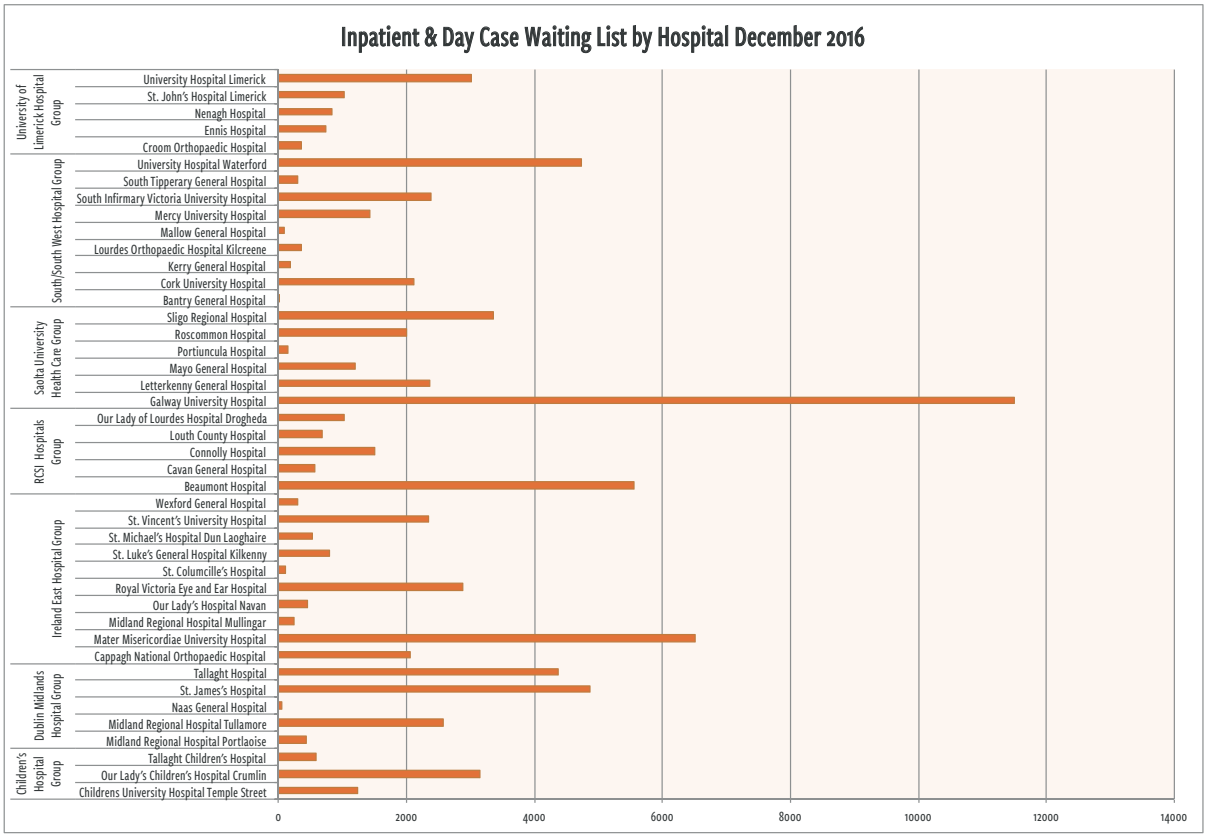
An expanded data collection, by way of a Minimum Data Set (MDS), will be introduced to the Inpatient, Daycase and Planned Procedures waiting list in 2017 and the ICT team will work closely with our Project Development team and the various hospital teams to help deliver on this. An expanded MDS for Outpatient waiting lists is also planned to commence in 2017 and we will work closely with the HSE National Outpatient Performance Improvement Programme who are leading out on this project.

The increased data requirements from the various projects mentioned above will require up-to-date technology for data storage, analysis and reporting. In this regard our IT Projects team commenced, in 2016, a major project to redesign our database platform and expect to complete this in 2017. This in turn will facilitate an expanded range of reporting and publication options through the use of the latest technology and tools. We look forward to completing the foundations for this in 2017 and building an enhanced, scalable and user-friendly information portal.

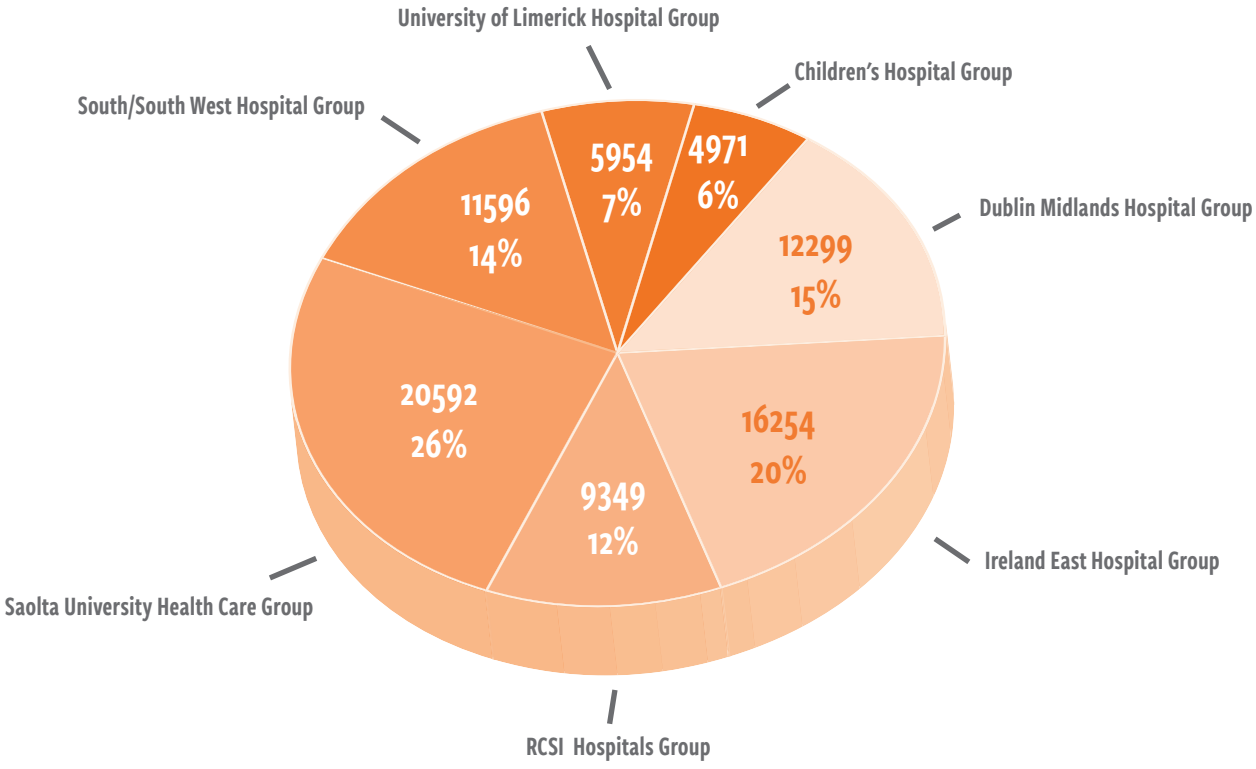
Our Projects Team also delivered on a number of important system upgrades and new solutions including the successful implementation of a digital Board Meeting system.

Our Infrastructure & Operations team carried out a number of important replacements and upgrades to our network and worked closely with the other business units to ensure the availability and security of all IT services.

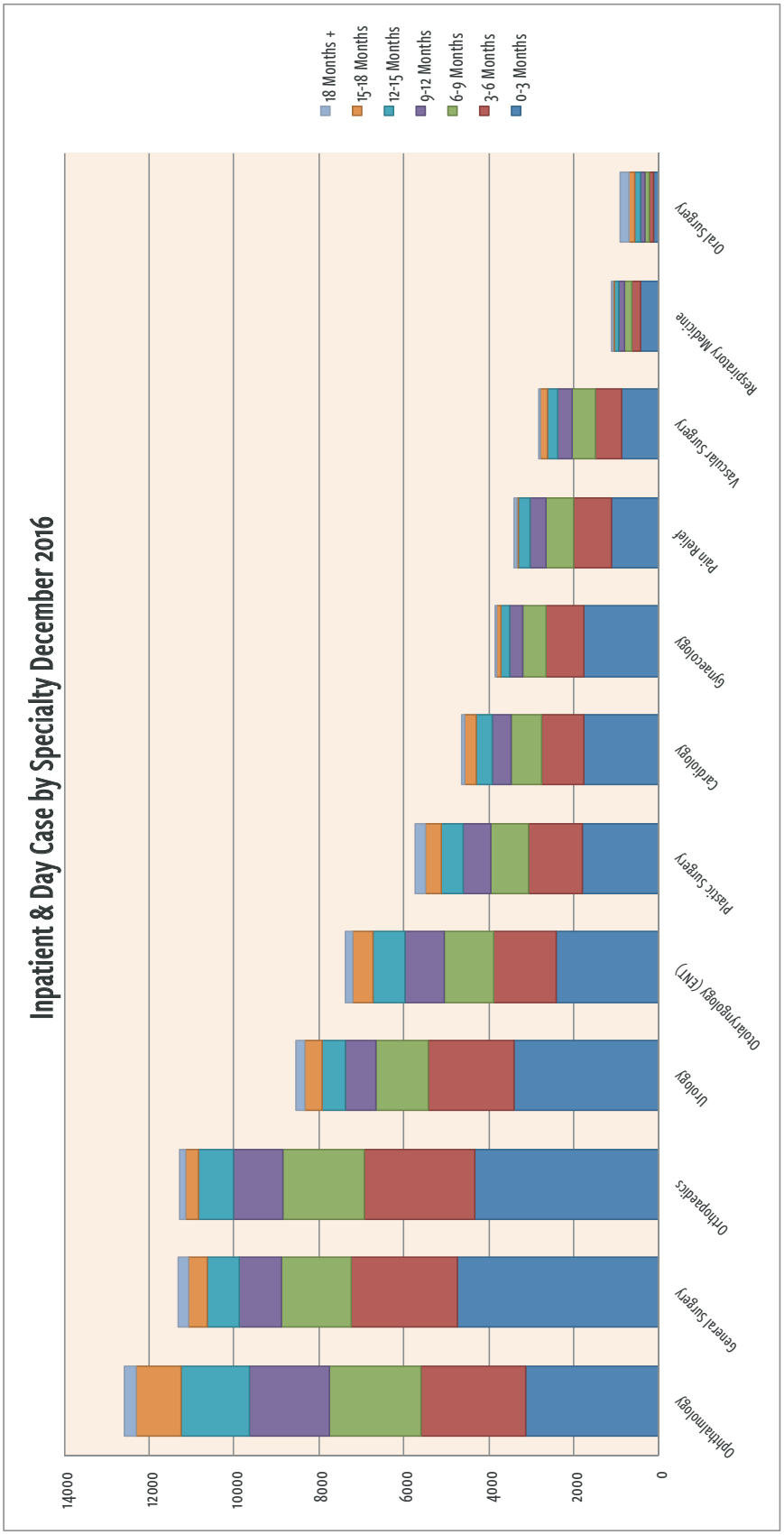
The Office of the Government CIO (OGCIO) has stated recently that Public Bodies should consider the opportunities presented by the use of Cloud services when developing business cases and making investment decisions around new business information systems. As such the NTPF are following a 'cloud first' strategy and will build on this throughout 2017.



Inpatient & Day Case Breakdown by Group December 2016

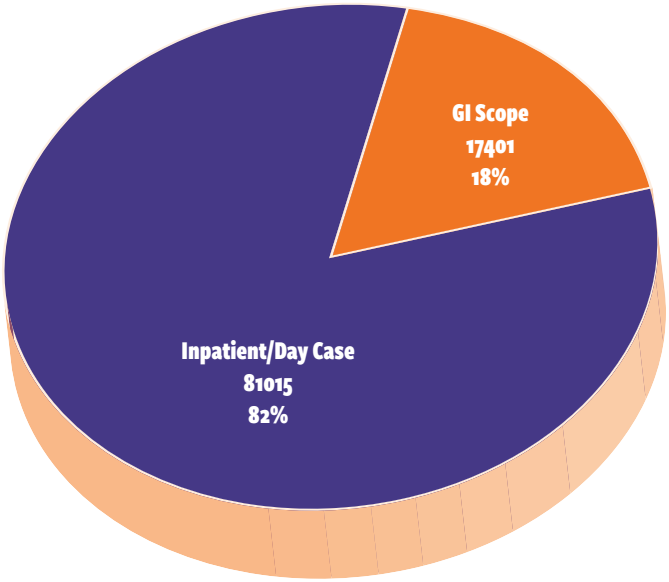


Inpatient & Day Case Waiting List Total December 2016									
Group	Hospital	0-3 Months	3-6 Months	6-9 Months	9-12 Months	12-15 Months	15-18 Months	18+ Months	Grand Total
Children's Hospital Group	Childrens University Hospital Temple Street	507	275	195	123	114	25	0	1239
	Our Lady's Children's Hospital Crumlin	1021	672	474	315	323	240	100	3145
	Tallaght Children's Hospital	176	149	98	54	49	61	0	587
Dublin Midlands Hospital Group	Midland Regional Hospital Portlaoise	164	103	69	31	65	10	0	442
	Midland Regional Hospital Tullamore	666	534	477	424	284	181	1	2567
	Naas General Hospital	35	6	6	2	0	0	0	49
	St. James's Hospital	1495	1059	851	586	454	360	73	4878
	Tallaght Hospital	1484	984	657	502	396	269	71	4363
Ireland East Hospital Group	Cappagh National Orthopaedic Hospital	650	592	456	229	129	0	0	2056
	Mater Misericordiae University Hospital	1884	1476	1164	787	722	485	0	6518
	Midland Regional Hospital Mullingar	158	45	30	3	1	0	0	237
	Our Lady's Hospital Navan	300	97	43	15	0	0	0	455
	Royal Victoria Eye and Ear Hospital	762	591	479	437	324	169	119	2881
	St. Columcille's Hospital	110	4	4	1	0	0	0	119
	St. Luke's General Hospital Kilkenny	404	164	138	63	28	9	0	806
	St. Michael's Hospital Dun Laoghaire	319	112	94	3	0	0	0	528
	St. Vincent's University Hospital	1048	602	309	190	139	66	0	2354
	Wexford General Hospital	166	106	25	3	0	0	0	300
RCSI Hospitals Group	Beaumont Hospital	2333	1334	756	490	278	169	198	5558
	Cavan General Hospital	350	158	55	15	0	0	0	578
	Connolly Hospital	745	367	215	80	73	19	0	1499
	Louth County Hospital	345	212	86	32	11	0	0	686
	Our Lady of Lourdes Hospital Drogheda	332	217	211	140	128	0	0	1028
Saolta University Health Care Group	Galway University Hospital	3188	2056	1726	1445	1138	893	1062	11508
	Letterkenny General Hospital	850	568	405	255	191	90	0	2359
	Mayo General Hospital	648	287	165	51	36	22	0	1209
	Portiuncula Hospital	68	37	30	6	2	0	0	143
	Roscommon Hospital	532	485	319	257	228	182	4	2007
	Sligo Regional Hospital	1426	823	591	316	168	42	0	3366
South/South West Hospital Group	Bantry General Hospital	8	0	0	0	0	0	0	8
	Cork University Hospital	883	379	302	215	182	105	47	2113
	Kerry General Hospital	163	25	3	1	0	0	0	192
	Lourdes Orthopaedic Hospital Kilcreene	318	31	3	0	0	0	0	352
	Mallow General Hospital	86	4	0	1	0	0	0	91
	Mercy University Hospital	554	326	210	172	122	15	33	1432
	South Infirmary Victoria University Hospital	1235	529	274	173	101	73	2	2387
	South Tipperary General Hospital	237	46	11	0	0	0	0	294
	University Hospital Waterford	1283	899	783	662	661	411	28	4727
University of Limerick Hospital Group	Croom Orthopaedic Hospital	332	20	2	1	1	0	0	356
	Ennis Hospital	252	206	111	73	54	41	0	737
	Nenagh Hospital	272	233	131	98	68	32	0	834
	St. John's Hospital Limerick	489	229	164	98	40	1	0	1021
	University Hospital Limerick	989	561	497	379	357	223	0	3006
Grand Total		29267	17603	12619	8728	6867	4193	1738	81015

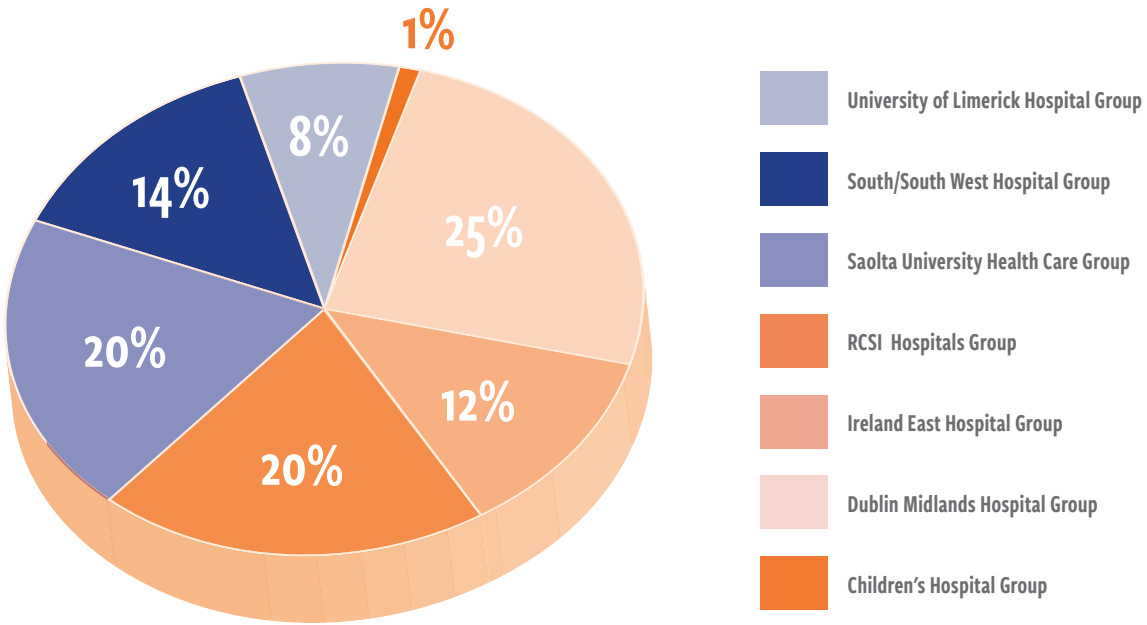

Inpatient & Day Case by Specialty December 2016
18 Months +
15-18 Months
12-15 Months
9-12 Months
6-9 Months
3-6 Months
0-3 Months
Ophthalmology
General Surgery
Orthopaedics
Urology
Otolaryngology (ENT)
Plastic Surgery
Cardiology
Gynaecology
Pain Relief
Vascular Surgery
Respiratory Medicine
Oral Surgery
14000
12000
10000
8000
6000
4000
2000
0

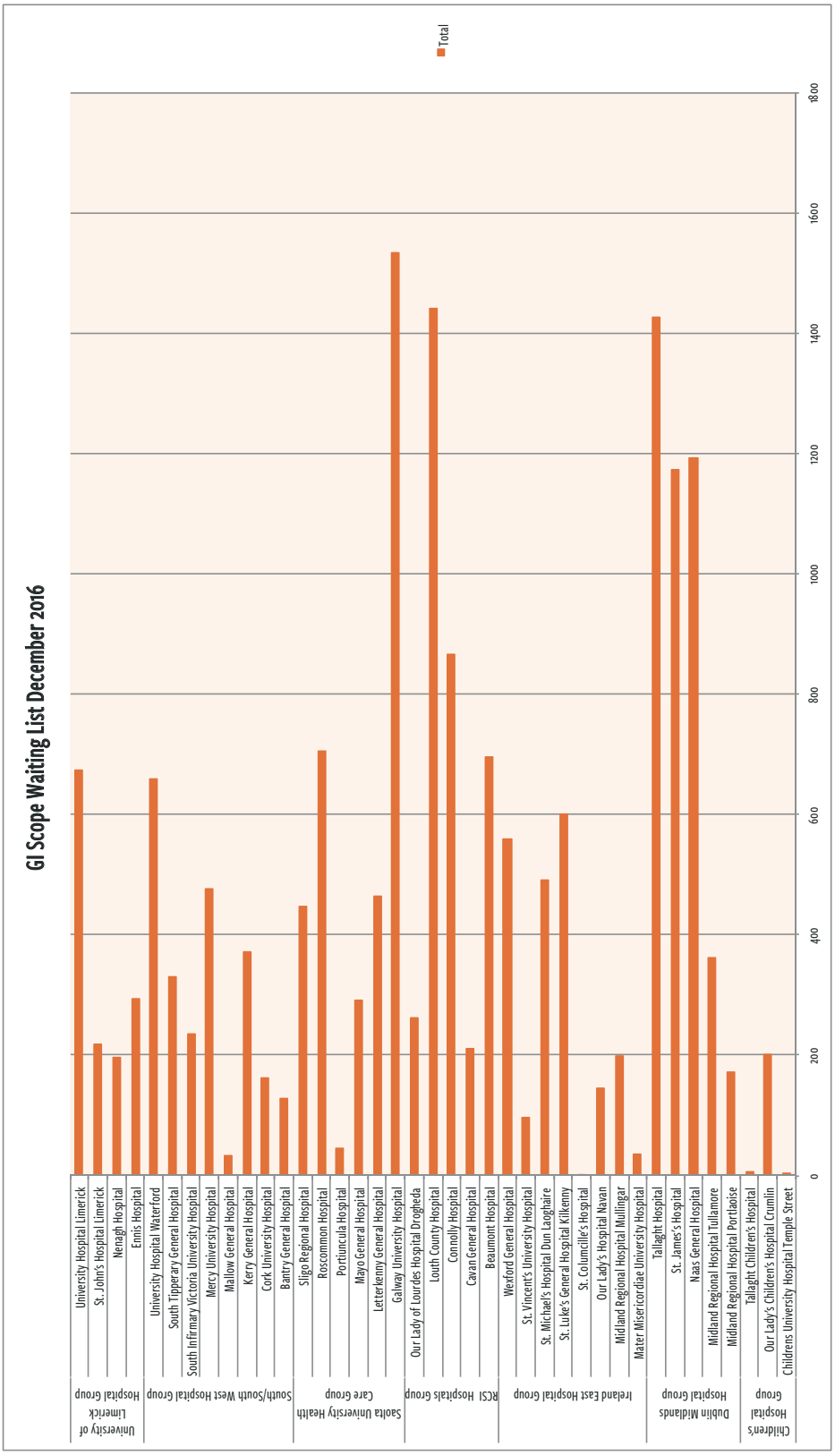
The following statistical graphing (pages 10 – 23) identifies end year position in relation to waiting list statistics and statistical analysis

GI Scope % December 2016

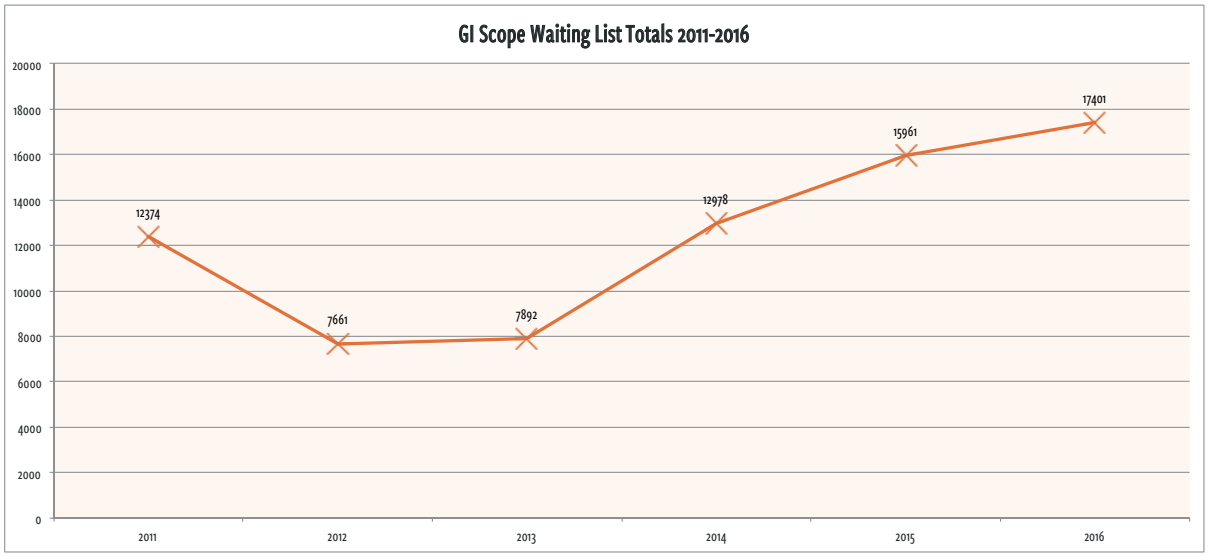


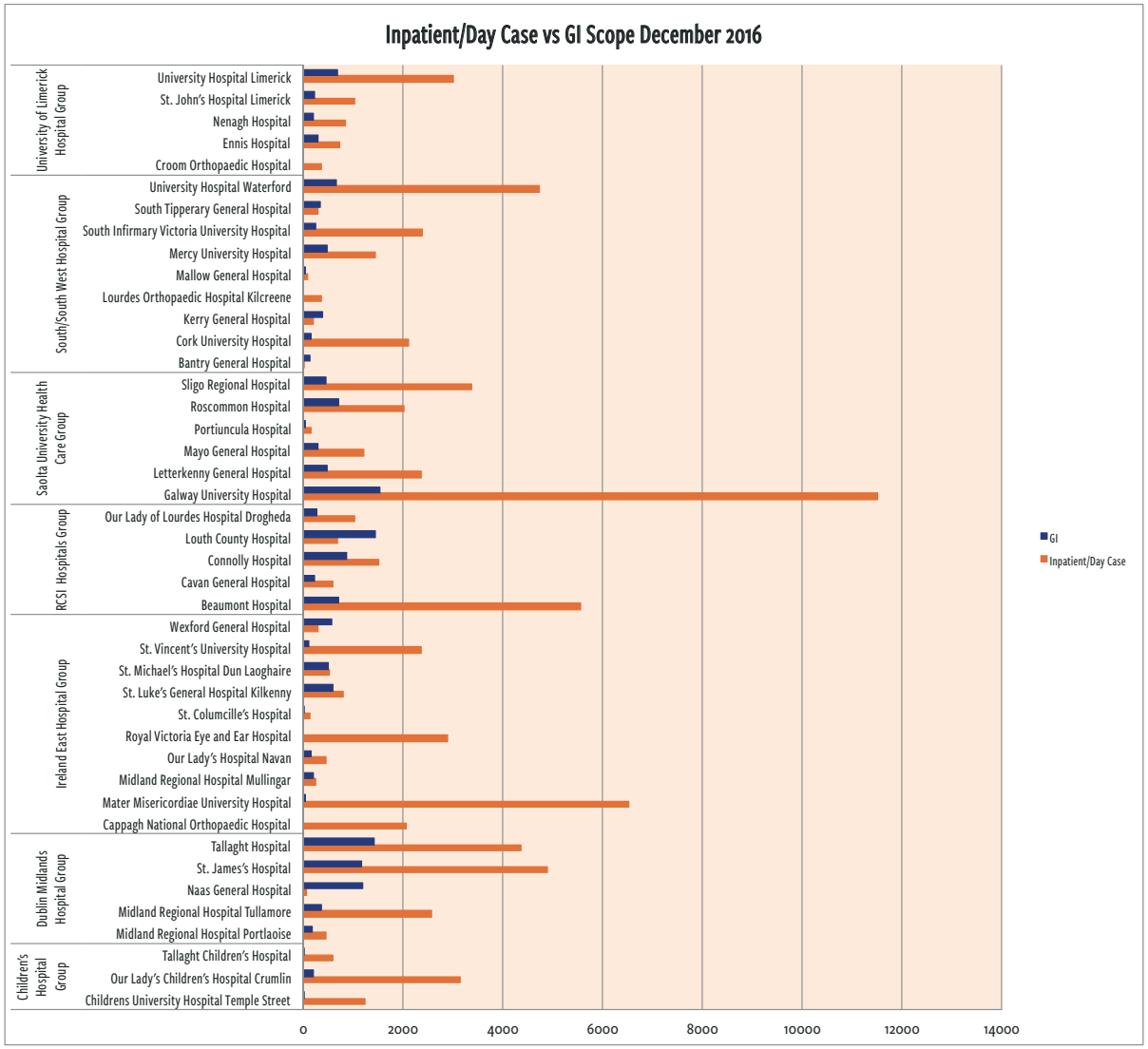
GI Scope Breakdown by Group



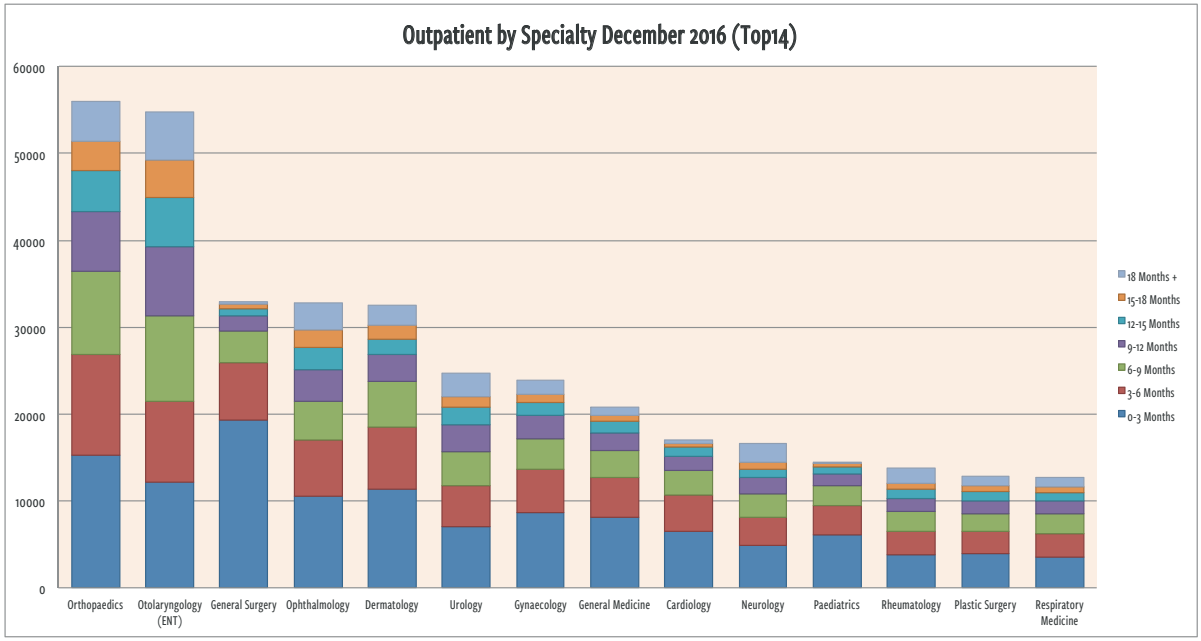

GI Scope Waiting List December 2016
Total
0
200
400
600
800
1000
1200
1400
1600
1800
University Hospital Limerick
St. John's Hospital Limerick
Nenagh Hospital
Ennis Hospital
University Hospital Waterford
South Tipperary General Hospital
South Infirmary Victoria University Hospital
Mercy University Hospital
Mallow General Hospital
Kerry General Hospital
Cork University Hospital
Bantry General Hospital
Sligo Regional Hospital
Roscommon Hospital
Portiuncula Hospital
Mayo General Hospital
Letterkenny General Hospital
Galway University Hospital
Our Lady of Lourdes Hospital Drogheda
Louth County Hospital
Connolly Hospital
Cavan General Hospital
Beaumont Hospital
Wexford General Hospital
St. Vincent's University Hospital
St. Michael's Hospital Dun Laoghaire
St. Luke's General Hospital Kilkenny
St. Columcille's Hospital
Our Lady's Hospital Navan
Midland Regional Hospital Mullingar
Mater Misericordiae University Hospital
Tallaght Hospital
St. James's Hospital
Naas General Hospital
Midland Regional Hospital Tullamore
Midland Regional Hospital Portlaoise
Tallaght Children's Hospital
Our Lady's Children's Hospital Crumlin
Childrens University Hospital Temple Street
University of Limerick Hospital Group
South/South West Hospital Group
Saolta University Health Care Group
RCSI Hospitals Group
Ireland East Hospital Group
Dublin Midlands Hospital Group
Children's Hospital Group

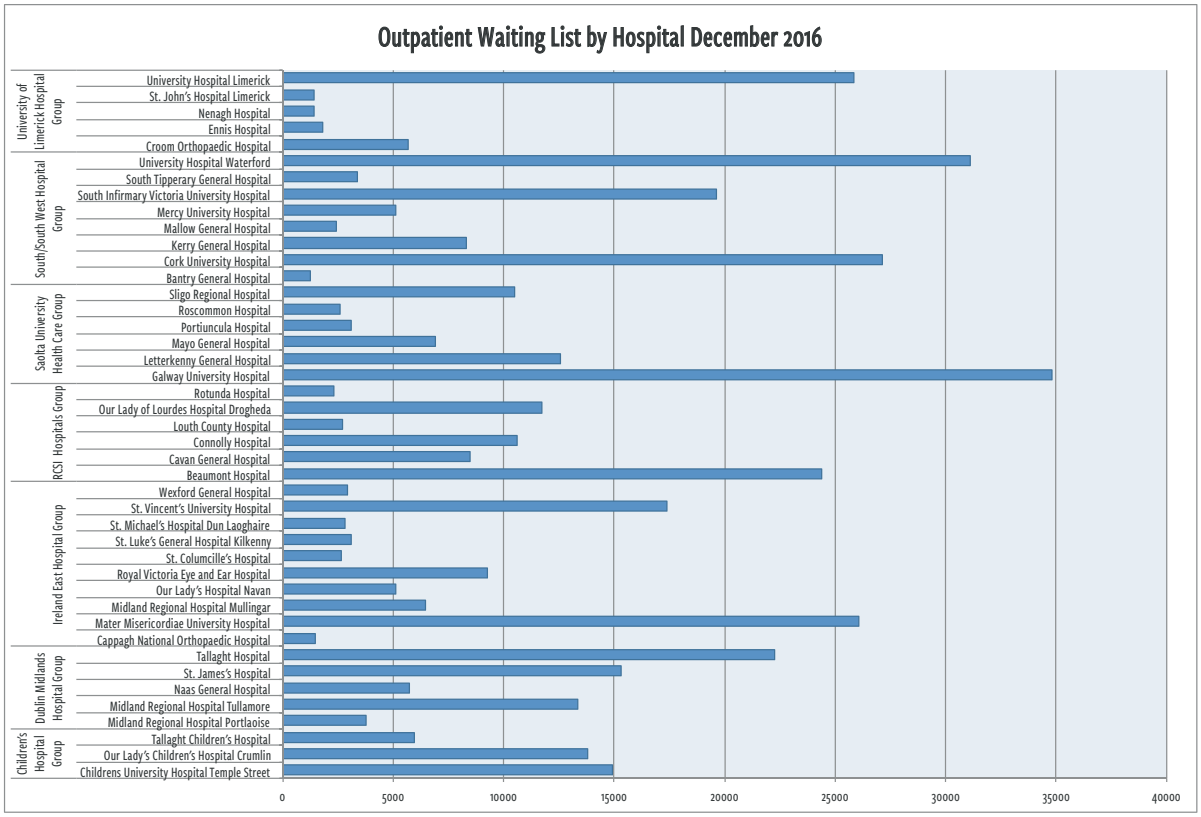
GI Scope Waiting List Total December 2016								
Group	Hospital	0-3 Months	3-6 Months	6-9 Months	9-12 Months	12-15 Months	15-18 Months	Grand Total
Children's Hospital Group	Childrens University Hospital Temple Street	3	1	0	0	0	0	4
	Our Lady's Children's Hospital Crumlin	112	66	20	2	2	0	202
	Tallaght Children's Hospital	3	4	0	0	0	0	7
Dublin Midlands Hospital Group	Midland Regional Hospital Portlaoise	59	49	39	24	0	0	171
	Midland Regional Hospital Tullamore	169	57	83	52	0	0	361
	Naas General Hospital	358	234	296	304	0	0	1192
	St. James's Hospital	732	279	162	1	0	0	1174
	Tallaght Hospital	651	387	232	156	0	0	1426
Ireland East Hospital Group	Mater Misericordiae University Hospital	19	13	3	1	0	0	36
	Midland Regional Hospital Mullingar	194	4	0	0	0	0	198
	Our Lady's Hospital Navan	111	33	0	0	0	0	144
	St. Columcille's Hospital	1	1	0	0	0	0	2
	St. Luke's General Hospital Kilkenny	354	173	73	0	0	0	600
	St. Michael's Hospital Dun Laoghaire	472	17	1	1	0	0	491
	St. Vincent's University Hospital	97	0	0	0	0	0	97
	Wexford General Hospital	237	168	146	8	0	0	559
RCSI Hospitals Group	Beaumont Hospital	378	312	5	1	0	0	696
	Cavan General Hospital	211	0	0	0	0	0	211
	Connolly Hospital	530	271	66	0	0	0	867
	Louth County Hospital	647	436	286	72	0	0	1441
	Our Lady of Lourdes Hospital Drogheda	105	32	83	41	0	0	261
Saolta University Health Care Group	Galway University Hospital	645	360	259	267	1	1	1533
	Letterkenny General Hospital	445	19	1	0	0	0	465
	Mayo General Hospital	76	55	64	92	4	0	291
	Portiuncula Hospital	41	3	0	0	0	0	44
	Roscommon Hospital	411	243	49	2	0	0	705
	Sligo Regional Hospital	387	59	0	0	0	0	446
South/South West Hospital Group	Bantry General Hospital	124	5	0	0	0	0	129
	Cork University Hospital	86	37	24	14	0	0	161
	Kerry General Hospital	354	18	0	0	0	0	372
	Mallow General Hospital	29	3	0	0	0	0	32
	Mercy University Hospital	330	137	10	0	0	0	477
	South Infirmary Victoria University Hospital	217	18	0	0	0	0	235
	South Tipperary General Hospital	330	0	0	0	0	0	330
	University Hospital Waterford	215	145	136	159	1	2	658
University of Limerick Hospital Group	Ennis Hospital	187	106	0	0	0	0	293
	Nenagh Hospital	188	8	1	0	0	0	197
	St. John's Hospital Limerick	168	48	3	0	0	0	219
	University Hospital Limerick	477	193	4	0	0	0	674
Grand Total		**10153**	**3994**	**2046**	**1197**	**8**	**3**	**17401**

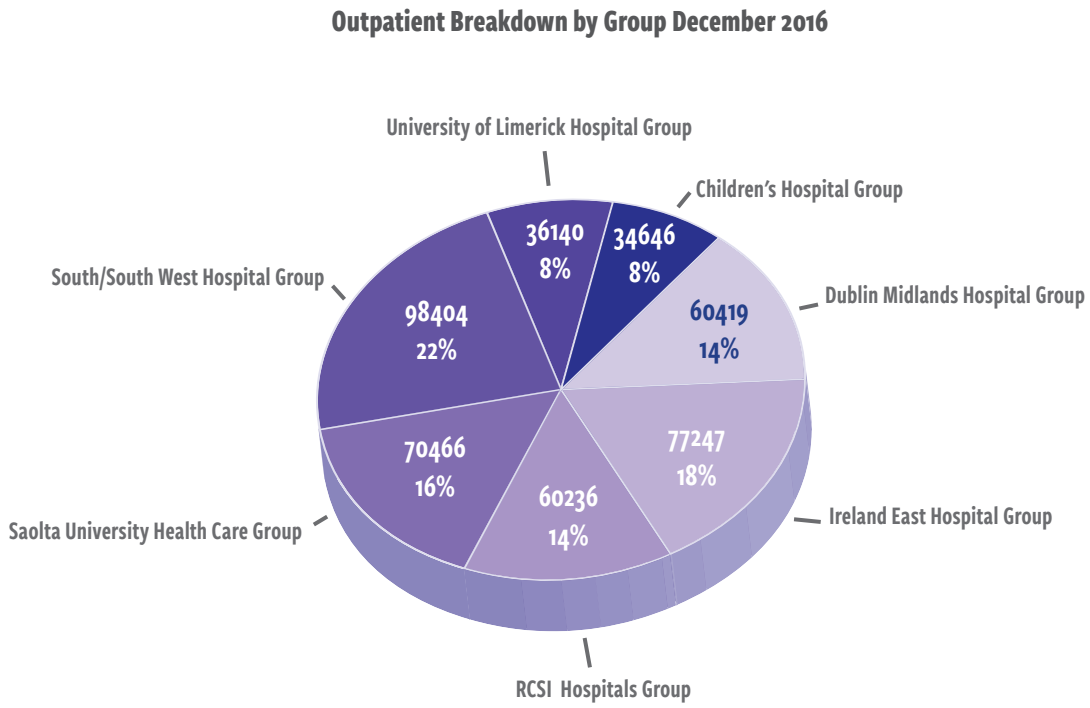

GI Scope Waiting List Totals 2011-2016
20000
18000
16000
14000
12000
10000
8000
6000
4000
2000
0
12374
7661
7892
12978
15961
17401
2011
2012
2013
2014
2015
2016

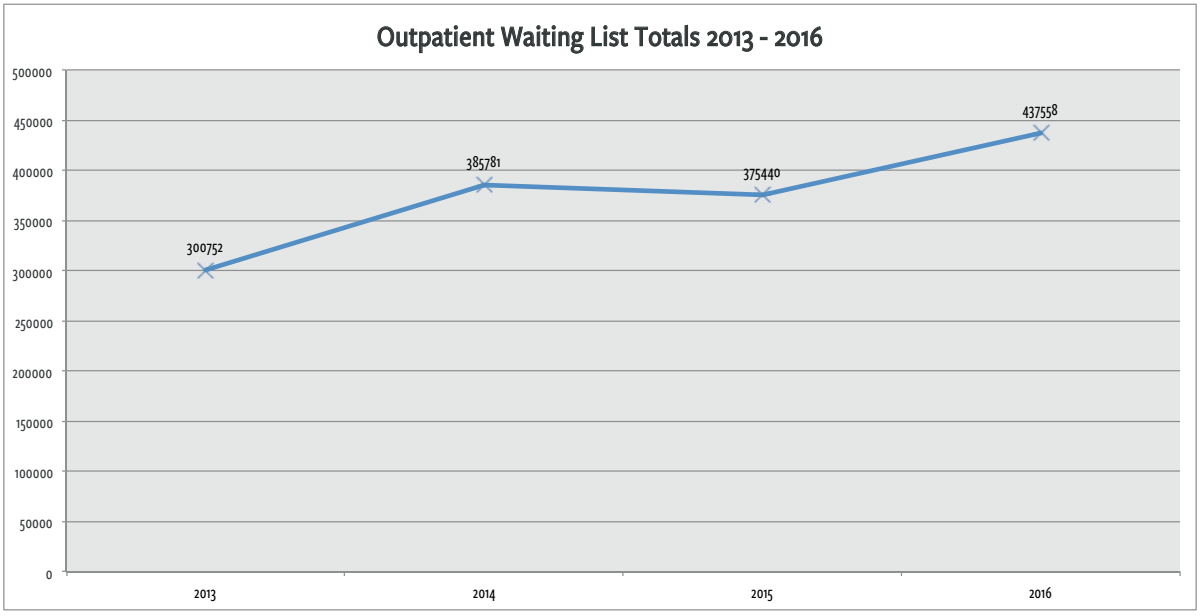

Inpatient/Day Case vs GI Scope December 2016
University of Limerick Hospital Group
University Hospital Limerick
St. John's Hospital Limerick
Nenagh Hospital
Ennis Hospital
Croom Orthopaedic Hospital
South/South West Hospital Group
University Hospital Waterford
South Tipperary General Hospital
South Infirmary Victoria University Hospital
Mercy University Hospital
Mallow General Hospital
Lourdes Orthopaedic Hospital Kilcreene
Kerry General Hospital
Cork University Hospital
Bantry General Hospital
Saolta University Health Care Group
Sligo Regional Hospital
Roscommon Hospital
Portiuncula Hospital
Mayo General Hospital
Letterkenny General Hospital
Galway University Hospital
RCSI Hospitals Group
Our Lady of Lourdes Hospital Drogheda
Louth County Hospital
Connolly Hospital
Cavan General Hospital
Beaumont Hospital
Ireland East Hospital Group
Wexford General Hospital
St. Vincent's University Hospital
St. Michael's Hospital Dun Laoghaire
St. Luke's General Hospital Kilkenny
St. Columcille's Hospital
Royal Victoria Eye and Ear Hospital
Our Lady's Hospital Navan
Midland Regional Hospital Mullingar
Mater Misericordiae University Hospital
Cappagh National Orthopaedic Hospital
Dublin Midlands Hospital Group
Tallaght Hospital
St. James's Hospital
Naas General Hospital
Midland Regional Hospital Tullamore
Midland Regional Hospital Portlaoise
Children's Hospital Group
Tallaght Children's Hospital
Our Lady's Children's Hospital Crumlin
Childrens University Hospital Temple Street
0
2000
4000
6000
8000
10000
12000
14000
GI
Inpatient/Day Case

Outpatient Waiting List Total December 2016									
Group	Hospital	0-3 Months	3-6 Months	6-9 Months	9-12 Months	12-15 Months	15-18 Months	18+ Months	Grand Total
Children's Hospital Group	Childrens University Hospital Temple Street	3899	2771	2627	1946	1378	994	1288	14903
	Our Lady's Children's Hospital Crumlin	4747	2753	1947	1363	1037	880	1052	13779
	Tallaght Children's Hospital	1691	1200	1187	828	437	158	463	5964
Dublin Midlands Hospital Group	Midland Regional Hospital Portlaoise	1294	994	685	417	234	127	40	3791
	Midland Regional Hospital Tullamore	3023	2336	2623	2103	1398	905	961	13349
	Naas General Hospital	2233	1013	766	587	382	342	394	5717
	St. James's Hospital	7084	3596	1940	1167	657	330	512	15286
	Tallaght Hospital	5966	4986	3839	2201	1636	1076	2572	22276
Ireland East Hospital Group	Cappagh National Orthopaedic Hospital	622	404	251	165	34	0	0	1476
	Mater Misericordiae University Hospital	9984	5799	3908	2505	1309	936	1636	26077
	Midland Regional Hospital Mullingar	2311	1725	1046	592	304	185	318	6481
	Our Lady's Hospital Navan	1825	1194	947	598	273	267	14	5118
	Royal Victoria Eye and Ear Hospital	2415	1828	1524	1034	813	742	897	9253
	St. Columcille's Hospital	735	396	353	254	178	164	575	2655
	St. Luke's General Hospital Kilkenny	2005	537	276	156	88	18	0	3080
	St. Michael's Hospital Dun Laoghaire	1268	684	475	206	99	60	3	2795
	St. Vincent's University Hospital	7492	3481	2702	1869	878	571	389	17382
	Wexford General Hospital	1450	697	519	245	19	0	0	2930
RCSI Hospitals Group	Beaumont Hospital	8291	4991	3022	2321	1717	1458	2610	24410
	Cavan General Hospital	2349	1891	1654	1201	764	485	108	8452
	Connolly Hospital	4010	2138	1601	1148	470	521	720	10608
	Louth County Hospital	1155	694	415	290	174	0	0	2728
	Our Lady of Lourdes Hospital Drogheda	4137	3086	2143	1299	805	235	0	11705
	Rotunda Hospital	1091	556	420	266	0	0	0	2333
Saolta University Health Care Group	Galway University Hospital	12277	6912	5095	3754	2666	1668	2435	34807
	Letterkenny General Hospital	4334	2658	1970	1383	801	382	1020	12548
	Mayo General Hospital	2671	1108	726	614	471	354	977	6921
	Portiuncula Hospital	1636	698	396	215	107	42	20	3114
	Roscommon Hospital	1064	395	365	215	154	129	282	2604
	Sligo Regional Hospital	4301	2567	1711	1159	554	107	73	10472
South/South West Hospital Group	Bantry General Hospital	713	343	160	47	12	1	1	1277
	Cork University Hospital	8656	5202	4016	3185	2144	1510	2403	27116
	Kerry General Hospital	2633	1857	1241	931	719	459	482	8322
	Mallow General Hospital	951	471	445	275	166	76	42	2426
	Mercy University Hospital	1804	967	832	468	337	210	512	5130
	South Infirmary Victoria University Hospital	5557	3640	3263	1980	1543	1348	2272	19603
	South Tipperary General Hospital	1334	844	538	349	193	122	18	3398
	University Hospital Waterford	7599	5545	4942	3820	3006	2386	3834	31132
University of Limerick Hospital Group	Croom Orthopaedic Hospital	1216	930	901	666	563	503	878	5657
	Ennis Hospital	430	324	394	296	159	124	74	1801
	Nenagh Hospital	531	245	173	119	138	132	93	1431
	St. John's Hospital Limerick	662	412	236	101	3	0	0	1414
	University Hospital Limerick	8641	4874	3824	2977	2162	1842	1517	25837
Grand Total		**148087**	**89742**	**68098**	**47315**	**30982**	**21849**	**31485**	**437558**


Outpatient by Specialty December 2016 (Top14)
60000
50000
40000
30000
20000
10000
0
Orthopaedics
Otolaryngology (ENT)
General Surgery
Ophthalmology
Dermatology
Urology
Gynaecology
General Medicine
Cardiology
Neurology
Paediatrics
Rheumatology
Plastic Surgery
Respiratory Medicine
18 Months +
15-18 Months
12-15 Months
9-12 Months
6-9 Months
3-6 Months
0-3 Months


Outpatient Waiting List by Hospital December 2016
University of Limerick Hospital Group
University Hospital Limerick
St. John's Hospital Limerick
Nenagh Hospital
Ennis Hospital
Croom Orthopaedic Hospital
South/South West Hospital Group
University Hospital Waterford
South Tipperary General Hospital
South Infirmary Victoria University Hospital
Mercy University Hospital
Mallow General Hospital
Kerry General Hospital
Cork University Hospital
Bantry General Hospital
Saolta University Health Care Group
Sligo Regional Hospital
Roscommon Hospital
Portiuncula Hospital
Mayo General Hospital
Letterkenny General Hospital
Galway University Hospital
RCSI Hospitals Group
Rotunda Hospital
Our Lady of Lourdes Hospital Drogheda
Louth County Hospital
Connolly Hospital
Cavan General Hospital
Beaumont Hospital
Ireland East Hospital Group
Wexford General Hospital
St. Vincent's University Hospital
St. Michael's Hospital Dun Laoghaire
St. Luke's General Hospital Kilkenny
St. Columcille's Hospital
Royal Victoria Eye and Ear Hospital
Our Lady's Hospital Navan
Midland Regional Hospital Mullingar
Mater Misericordiae University Hospital
Cappagh National Orthopaedic Hospital
Dublin Midlands Hospital Group
Tallaght Hospital
St. James's Hospital
Naas General Hospital
Midland Regional Hospital Tullamore
Midland Regional Hospital Portlaoise
Children's Hospital Group
Tallaght Children's Hospital
Our Lady's Children's Hospital Crumlin
Childrens University Hospital Temple Street
0
5000
10000
15000
20000
25000
30000
35000
40000


Outpatient Breakdown by Group December 2016
University of Limerick Hospital Group
36140
8%
Children's Hospital Group
34646
8%
South/South West Hospital Group
98404
22%
Dublin Midlands Hospital Group
60419
14%
70466
16%
77247
18%
Saolta University Health Care Group
60236
14%
Ireland East Hospital Group
RCSI Hospitals Group


Outpatient Waiting List Totals 2013 - 2016
500000
450000
400000
350000
300000
250000
200000
150000
100000
50000
0
300752
385781
375440
437558
2013
2014
2015
2016

Audit and Quality Assurance

Liz Lottering

1. National Scheduled Care Audit and Quality Assurance Review Programme

The National Scheduled Care Audit and Quality Assurance Review Programme was established in the National Treatment Purchase Fund in 2014 in conjunction with the National Director of Acute Hospitals, Health Service Executive. This programme is also consolidated under the NTPF's Statutory Instrument (2004, S.I. No. 179) "*to collect, collate and validate information in relation to persons waiting for hospital treatment and to put in place information systems for that purpose*"

The aim and overall objective of this programme is:

1. To audit that hospitals are returning complete, accurate, validated patient information for inpatient and outpatient waiting lists.
2. To audit that hospitals have implemented key internal management practices to manage demand, capacity and productivity ensuring equitable access to treatment for patients on inpatient and outpatient waiting lists.

The AQA team utilises a facilitative audit model which includes;

1. High level risk rating and review of hospitals
2. Pre-defined selection criteria of hospitals
3. Execution and reporting of site audit and quality assurance reports that include remedial management action plans
4. Continuous monitoring, reporting and closure of open items on hospital management action remedial plans

A rolling two year programme of 42 audits was initiated in April 2014 and completed in May 2016. Each audit consisted of a site visit testing 19 key controls comprising of 103 subtests. Individual hospitals received a report on compliance to national protocols and a remedial action plan was agreed with the Chief Executive Officer/General Manager.

A total of 739 remedial management action plan items were identified across the 42 hospitals of which a total of 418 (57%) have been tracked to closure. The AQA team continues to work with the Acute Hospitals Division, Hospital Groups and individual hospitals to track remaining remedial action plan items to closure. Table 1) summarises outstanding items by Hospital Group. Table 2) summarises outstanding items by management action plan reason.

Table 1) Total Outstanding Inpatient, Day Case, Planned Procedure and Outpatient Action Plan Items by Hospital Group

Hospital Group	Outstanding
Children's Hospital Group	31
Dublin Midland Hospital Group	45
Ireland East Hospital Group	119
RCSI Hospitals Group	12
Saolta University Health Care Group	41
South/South West Hospital Group	48
University of Limerick Hospital Group	25
Grand Total	**321**

Table 2) Total Outstanding Inpatient, Daycase, Planned Procedure and Outpatient Action Plan Items by action plan category

Management action plan category	Not Completed
Operational Process does not meet with national protocols	112
Individual monitoring KPI's are not comprehensive	89
Local hospital policy does not meet with national protocol	40
Hospital does not meet with technical extract file guidance	29
Validation process does not meet with national protocols	29
Governance arrangements for waiting list management does not meet with national protocols	22
Grand Total	**321**

2. National Speech and Language Therapy Review Group

Under the leadership of the National Directors of Primary and Social Care, the Health Service Executive (HSE) has established a Service Improvement Initiative on behalf of the Chief Officers of the nine Community Healthcare Organisations (CHOs) to address issues in Speech and Language Therapy (SLT) provision.

The aims and objectives include the achievement of short- term goals to undertake a review of waiting lists using standard methodology, improve responsiveness in respect of clients waiting for services, develop a standardised performance set, implement the electronic management system and medium- term goal to develop a model of care/service provision for primary and community care based SLT.

The National Primary Care Metrics Group through the SLT Technical Group has progressed standard definitions and key performance indicators. However, a need was identified to validate demand against agreed definitions, standards and approved sources of referral, which the NTPF agreed to facilitate through diagnostic reviews. A total of 11 diagnostic reviews were completed in the seven service areas of Speech and Language Therapy Waiting Lists with the highest volume of clients waiting.

The purpose of the diagnostic reviews was to (1) establish whether waiting list volume returns were complete and accurate and (2) to review access to the service for clients on waiting lists inclusive of referral management practices.

The NTPF diagnostic review process included (a) data sample (100 clients) and review of client case notes and (b) review checklist questionnaire completed with each nominated service lead.

Key findings included;

- National published waiting list returns were evidenced as inaccurate up to 29% and incomplete in the majority of services
- Current Primary Care Minimum Data Set Metrics are not compatible with the provision of the Disability Service
- There are no National Models of Care in respect of Primary and Disability Care services to ensure standardisation of service provision
- There is no National Clinical Priority Rating Scale to ensure clients are being managed equally
- There is no electronic integrated client management information system in place to manage client information, support the referral pathway, appointment scheduling, and facilitation of local and national reporting
- There is no formal administrative validation programme in place for client level validation
- There is significant variation in the layout and organisation of client case notes
- There is limited administration resources supporting the delivery of SLT clinical services

In the absence of an agreed National Model of Care and national guidance documentation, individual services have implemented their own Models of Care, governance framework and local protocols. This is leading to variation in referral and waiting list management, treatment care pathways, clinical prioritisation and discharge protocols across each of the service areas reviewed and as a result it is the opinion of the Audit Team that there is inequitable access across services for clients.

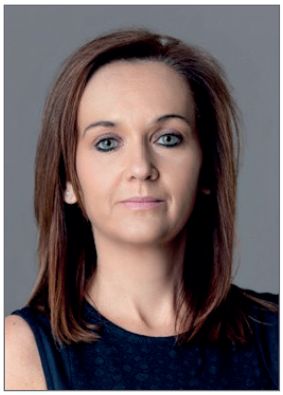
These reviews have contributed to a Speech and Language Therapy Review Group Report due to be submitted to the National Directors of Primary and Social Care to meet with the aims and objectives of the Service Improvement Initiative.

Conclusion

The team would like to express their thanks to all hospitals and primary care services reviewed for their professional approach to the audits and diagnostic reviews. The NTPF continues to work with individual hospitals regarding outstanding remedial action plans. The NTPF also continues to work with the National Speech and Language Therapy Services Review Group and is happy to report that their work has contributed to a 70% reduction in the number of children waiting over 12 months for Initial Speech and Language Therapy in 2016.

We look forward to our continued work with Acute Hospitals and our expanded work to Primary Care services in improvement plans for Physiotherapy and Occupational Therapy waiting lists in 2017.

Corporate Services



Niamh Drew

It is envisaged that 2017 will see the embedding of all areas of Corporate Services competencies, including Procurement, Organisation Development and Effectiveness, Business Planning Process, Communications and Health and Safety. The Corporate Services Division supports and informs NTPF work by designing, developing and implementing strategies designed to foster and enable performance by capable and committed individuals.

As a public sector body operating in a difficult environment, an on-going challenge is to continue to add value while working within resource constraints. The Employment Control Framework restrictions during the period have meant that there were centrally imposed limitations to our resource availabilities that impinged on our work programme.

Within the NTPF, we recognise that our staff are our most valuable asset and it is their skill, dedication and commitment that enables the organisation to fulfil its role of supporting performance improvements to treat patients faster.

Prior to 2016, a Corporate Services Unit didn't exist in the NTPF. In late 2015, the Board of NTPF established a HR working group, whose primary objective was to ensure that HR consideration would form an integral part of the strategy development process with regards to resourcing and mobility needs and also the learning and development requirements which would aid in the delivery of organisational success. Both the Chair, John Horan and Board member Jim Melly joined this group and commissioned a HR Management Strategy.

Over the course of 2016, the HR Working Group held six formal meetings;

i. 11 January 2016

ii. 31 March 2016

iii. 23 May 2016

iv. 28 June 2016

v. 15 August 2016

vi. 9 November 2016

Through the development of the HR Working Group, the need for a Head of Unit was confirmed and the process of appointing an individual in Q4 2016 resulted in the establishment of a new Corporate Services unit with a strong HR element

HR can now offer solutions to ensure organisational effectiveness while also ensuring NTPF employees receive excellent HR operational service. The NTPF strives to cultivate an environment where development is encouraged, potential is maximised and innovation thrives. We continuously review and amend policies and procedures in relation to all aspects of our business to ensure best practise throughout the organisation.

As the organisation continues to evolve it is imperative that we attract and retain individuals with the appropriate specialist skill sets and competencies. Ensuring we have the required number of skilled people is a fundamental element in the achievement of the delivery of our Strategic Plan.

Learning and development is a major component in the organisations Human Resource toolkit. Our focus is on encouraging continuous professional development. We continue to support individuals to acquire third level qualifications, and to develop leadership, management and professional skills.

It is envisaged that 2017 will see the embedding of all other areas of Corporate Services competencies.

In terms of smart working initiatives, progress this year included:

i. Development of Human Resources Strategy

ii. Design of organisation Training & Development Plan

iii. Development of standardised templates for document creation and version control.

iv. Review of internal policies and procedures

v. Establishment of organisation Communication Forum

vi. Providing in-house workshops on various competencies

In managing our organisation we are aware of our responsibility to sustainability issues. We have continued to support many green initiatives e.g. recycling bins, promoting the use of public transport by staff under the tax-saver scheme, the promotion of the cycle-to-work scheme, and energy efficient measures. We will continue to successfully seek and progress further methods and initiatives to reduce our carbon footprint.

The NTPF remains committed to the Public Service Agreement process and will continue to seek efficiency gains, we will continue to enhance individual and organisational performance together with finding ways to work more efficiently and minimise cost to the organisation.

The achievements of the NTPF are built on the commitment and quality of the employees of the organisation and we look forward to continuing to build on this throughout 2017.

Finance

Dave Allen

Funds allocated to NTPF in 2016 were disbursed as follows:

- €3.9m supported the provision and maintenance of the national patient treatment register, the development of systems & initiatives in support of the overall health reform programme and responsibilities under the Nursing Homes Support Scheme.
- €1.6m was used by NTPF to provide some limited support to public hospitals by facilitating the treatment of those waiting longest (greater than 12 months) for colonoscopy and gastroscopy procedures.
- €28.8m was received from the HSE, and disbursed by NTPF, in order to support public hospitals reach their waiting list targets. This funding facilitated the treatment of 40,379 patients over a wide range of medical specialties.

The annual financial statements of the NTPF Board are subject to audit by the Office of the Comptroller and Auditor General. Once this audit has been completed, in respect of 2016, separate financial statements will be submitted and presented in accordance with Section 11 of the Comptroller and Auditor general (Amendment) Act 1993.

Nursing Homes Support Scheme

NTPF's role in supporting this Scheme is one of negotiating and agreeing prices with private and voluntary nursing home owners. Section 40 of the Nursing Homes Support Scheme Act 2009 sets out that:

"The Minister shall, as soon as is practicable, by notice in writing designate a person to negotiate with persons carrying on the business of a nursing home for the purposes of reaching an agreement referred to in the definition of an approved nursing home."

Sections 40 and 41 of the Nursing Homes Support Act designated NTPF as that corporate person. The Act also contains a provision concerning examination of records and accounts of participating nursing homes:

"In performing its function the Board may examine the records and accounts of an approved nursing home or of a nursing home the proprietor of which proposes to enter into arrangements under the scheme."

It is important to note that the role is confined to negotiating prices with private and voluntary nursing home proprietors. Administration of the scheme, public nursing home costs, processing of applications and general management of the Fair Deal fund rest with the HSE.

Pricing arrangements with private nursing homes, that wish to be included in the Nursing Home Support Scheme, are formally committed to writing a Deed of Agreement between NTPF and the proprietor(s) of the nursing home. Amongst other things the agreement sets out:

- The definition of long term residential care;
- Responsibilities of the contracting parties (the nursing home proprietor and NTPF);
- The agreed price.

NTPF considers pricing proposals of private and voluntary nursing homes under four headings (not in any order of priority):

- Costs reasonably and prudently incurred by the nursing home and evidence of value for money;
- Price(s) previously charged;
- The local market price; and
- Budgetary constraints and the obligation on the State to use available resources in the most beneficial, effective and efficient manner to improve, promote and protect the health and welfare of the public.

Negotiations are with each nursing home (as opposed to collective negotiations with a representative body). This typically involves a series of contacts and face-to-face meetings with each proprietor.

At the close of 2016 a total of 433 homes had pricing contracts with NTPF and the overall national average price of long term residential care amounted to €919 per week. The equivalent figures for the end of 2015 were €903 for 433 homes.

In 2017 NTPF will be continuing to ensure that value is achieved for the taxpayer and that the fund made available to Fair Deal is maximised for the benefit of those assessed as being in need of long term residential care.

As recommended by the Department of Health's 2015 report on the Nursing Homes Support Scheme we will also be submitting proposals to the Minister for Health on NTPF's role as it relates to:

- Ensuring adequacy of residential capacity for those residents who require high level or more complex care;
- Continuing to ensure Value for Money and economy, with the lowest possible administrative costs for clients and the State and administrative burden for providers;
- Increasing the transparency of the pricing mechanism so that existing and potential investors can make as informed decisions as possible.

We wish to acknowledge the professionalism and courtesy shown by nursing home proprietors to our representatives during pricing negotiations and look forward to continue doing business with them in 2017.

Project Management Office

Alison Green

Introduction

The Project Management Office was established in the National Treatment Purchase Fund in 2016.

In March 2016 Ms. Alison Green was appointed to the position of Project Development Manager, to lead the advancement of the new Project Development Office (PMO) and ensure the successful delivery of the NTPF's key project requirements during the year ahead.

Background

In line with the NTPF Service Plan 2016 and on receipt of correspondence from the Department of Health (DOH) in February 2016 the NTPF was requested to undertake the following key deliverables:

- support the Health Service Executive (HSE) in the delivery of improved waiting times for scheduled care, particularly in relation to the management of inpatient, day case and outpatient waiting lists
- work with the HSE to assist hospitals in the development of local demand and capacity planning tools and mechanisms
- develop technical guidance materials for hospitals to ensure the highest standards of data quality and practice

These requirements where assigned to the PMO and thus the National Inpatient, Day Case and Planned Procedure (IDPP) Waiting List Management Project was initiated.

Inpatient, Daycase Planned Procedure (IDPP) Project

The IDPP Project was progressed utilising Lean methodology and tools. In order to achieve the requirements as set out by the DOH the project was designed in three components to be delivered over a total project lifecycle of 18 months.

	Project Component	Timeline for Delivery
1.	IDPP Waiting List Management Protocol	Q4 2016
2.	IDPP Waiting List Management Tool Kit (incl Capacity and Demand Planning)	Q1 2017
3.	IDPP Waiting List Management Training and Development Programme	Q2 2017

Fundamental to the success of this project were:

- an in-depth development, analysis and understanding of process maps to capture the true pathways of patients on IDPP waiting lists
- a number of hospital site visits conducted to review best practice waiting list management as identified by AQA Audits
- the establishment of a National Steering Group, with participation from all stakeholders including Hospital Groups, Department of Health, Special Delivery Unit and HSE.
- the facilitation of an NTPF Waiting List Management Workshop in August 2016, which 48 representatives from around the country attended and contributed to the collation of information necessary to inform the IDPP Project.
- collaboration with the National Clinical Care Programmes

The National IDPP Waiting List Management Protocol was successfully completed and endorsed by the National Steering Group in December 2016 and subsequently launched at the NTPF Symposium in January 2017. The Toolkit and Training and Development Programme are currently in development.

NTPF Symposium 2017

In August 2016 the PMO was tasked with the coordination and organisation of the NTPF Symposium 2017 to be hosted by the NTPF in the Royal Hospital Kilmainham on 19th January 2017.

The purpose of the NTPF Symposium was to host a formal event to:

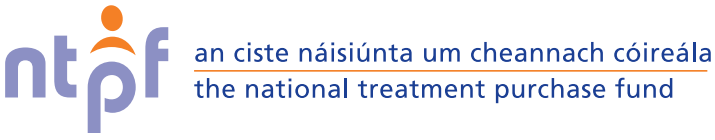
1. Launch the NTPF Strategy and Action Plan 2017 - 2019
2. Launch the National Inpatient, Day Case and Planned Procedure Waiting List Management Protocol 2017
3. Present NTPF Data Quality Awards 2016

Minister for Health, Mr. Simon Harris was in attendance and opened the event and Professor Luigi Siciliani, Programme Director, MSc Health Economics, Department of Economics, University of York was the key note speaker on the day.

Other speakers included:

- Mr. Jim O'Sullivan, CEO, NTPF
- Ms. Alison Green, Project Development Manager, NTPF
- Dr. Colm Henry, National Clinical Advisor and Group Lead, Acute Hospital Division, HSE
- Dr. Chris Steele, National Clinical Lead, Endoscopy Programme, Acute Hospital Division, HSE
- Dr. Tadgh Nagle, Lecturer Business Information Systems, University College Cork
- Prof. Mary Day, Group CEO, Ireland East Hospital Group

Approximately 300 delegates from across the Irish Health Sector attended this event. Attendees included government officials, healthcare policy drivers, executive members of the hospital groups, senior healthcare leaders and managers from both the public and private health sector.



Teach Áth na Fuinseoige, Sráid na Teamhrach, Baile Átha Cliath 2
Ashford House, Tara Street, Dublin 2