

ST JAMES'S HOSPITAL
Annual Report 2018



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← Admissions





St James's Hospital **Vision, Purpose and Values**

Vision

To be a leading healthcare organisation, nationally and internationally, improving health outcomes through collaboration and innovation.

Purpose

To provide the best care to every patient through our personal and shared commitment to excellence in clinical practice, education, research and innovation, while fostering our partnership with Trinity College Dublin.

Values

Patients matter most to us.

We provide care that is safe, effective and accessible so that our patients achieve the best possible outcomes and experiences of care.

Respecting people

Being kind and honest, promoting diversity, collaboration, personal and professional development.

Innovating and sharing knowledge

We learn, teach, research and innovate to improve health and well-being.

Using resources wisely

Delivering value, working efficiently and protecting the environment.

SUMMARY:

patients, respect, knowledge and resources

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HR Business Teams, Centre for Learning & Development, Workforce Information, Occupational Health, Medical Workforce Unit, Employee Relations, and Superannuation.

18 3.3 Nursing Services

Nursing Administration, Breast Care Practice, End-of-Life-Care, Nursing Practice Development Unit.

22 3.4 Facilities Management

Catering, Housekeeping, Laundry, Security, Portering, Tele-communications, Environmental, Chaplaincy, Fire Safety Services, Organisational Health and Safety, Medical Records Management, Technical Services.

24 3.5 Internal Audit

4 CLINICAL DIRECTORATE REPORTS

26 4.1 Haematology, Oncology, Palliative Care (HOPE)

Haematology, Medical Oncology including Cancer Genetics, Palliative Care, Psychological Medicine and Radiation Oncology. The National Centre for Adult Bone Marrow Transplantation and the National Coagulation Centre.

32 4.2 Medicine for the Elderly (MedEl)

The Mercer's Institute for Successful Ageing Unit, Stroke Service, Bone Health and Osteoporosis, Unit, Falls and Blackout Unit, Local Asset Mapping Project, The Irish Longitudinal Study, on Ageing, Dementia Services Information and Development Centre.



34 **4.3 Medical and Emergency (MED)**

Acute Floor (Accident & Emergency), Nurse Education, Clinical Placement, Advanced Nurse Practitioner Clinical Activity, Education Activity, Professional Development Activity and Representation, Emergency Department Activity, Cardiology, Dermatology, Endocrinology/ Diabetic Day Centre (DDC), Genito-Urinary Medicine and Infectious Diseases (GUIDe) Clinic, Hepatology Centre, Respiratory Medicine and the Respiratory Assessment Unit, Rheumatology, Neurology, Neurophysiology, Ophthalmology, Gastroenterology and Endoscopy Unit, Clinical Immunology, Nephrology and Dialysis.

36 **4.4 Surgery, Anaesthesia and Critical Care (SACC)**

Anaesthesia and Pre-assessment, Breast Care, Cardiothoracic Surgery, Critical Care, Upper and Lower Gastrointestinal Surgery to include General Surgery, Gynaecology, Oral and Maxillofacial Surgery, Orthodontics, Prosthodontics and Cleft ambulatory care, Orthopaedics, Otolaryngology, Plastics, Reconstructive and Burn Surgery, Acute and Chronic Pain Management, Vascular Surgery and Urology and The Hospital Sterile Unit.

38 **4.5 Laboratory Medicine (LabMed)**

Biochemistry (including Point of Care Testing), Cancer Molecular Diagnostics, Haematology (incorporating Coagulation and Cryobiology, Histopathology (incorporating Cytopathology), Immunology, The Irish Mycobacteria Reference Laboratory (IMRL) Microbiology (incorporating Virology and Infection Prevention and Control), The National MRSA Reference Laboratory (NMRSARL), Phlebotomy and Transfusion Medicine (incorporating Haemovigilance).

40 **4.6 Diagnostic Imaging**

Imaging services include CT, MRI, ultrasound, breast imaging, nuclear medicine, PET/CT, interventional radiology and general X-ray. A radiographic service is also provided to the Cardiac Cath Lab, Endovascular Suite, Endoscopy, DXA and Theatres.

5 **CLINICAL SUPPORT SERVICES**

42 **5.1 Speech and Language Therapy, Medical Social Work, Clinical Nutrition, Occupational Therapy, Physiotherapy (SCOPE)**

Speech and Language Therapy, Medical Social Work, Clinical Nutrition, Occupational Therapy, Physiotherapy, Pharmacy Department, Clinical Pharmacy Service, Dispensary and Distribution Services, Aseptic/ Compounding Services, National Medicines Information Centre (NMIC), Centre for Advances.

44 **5.2 Pharmacy**

Pharmacy Department, Clinical Pharmacy Service, Dispensary and Distribution Service.

46 **5.3 National Medicines Information Centre (NMIC)**

47 **5.4 Clinical Research Facility (CRF)**

48 **5.5 Research and Innovation (R&I) Office**

Clinical Research Facility

6 **PROGRAMME DIVISION REPORTS**

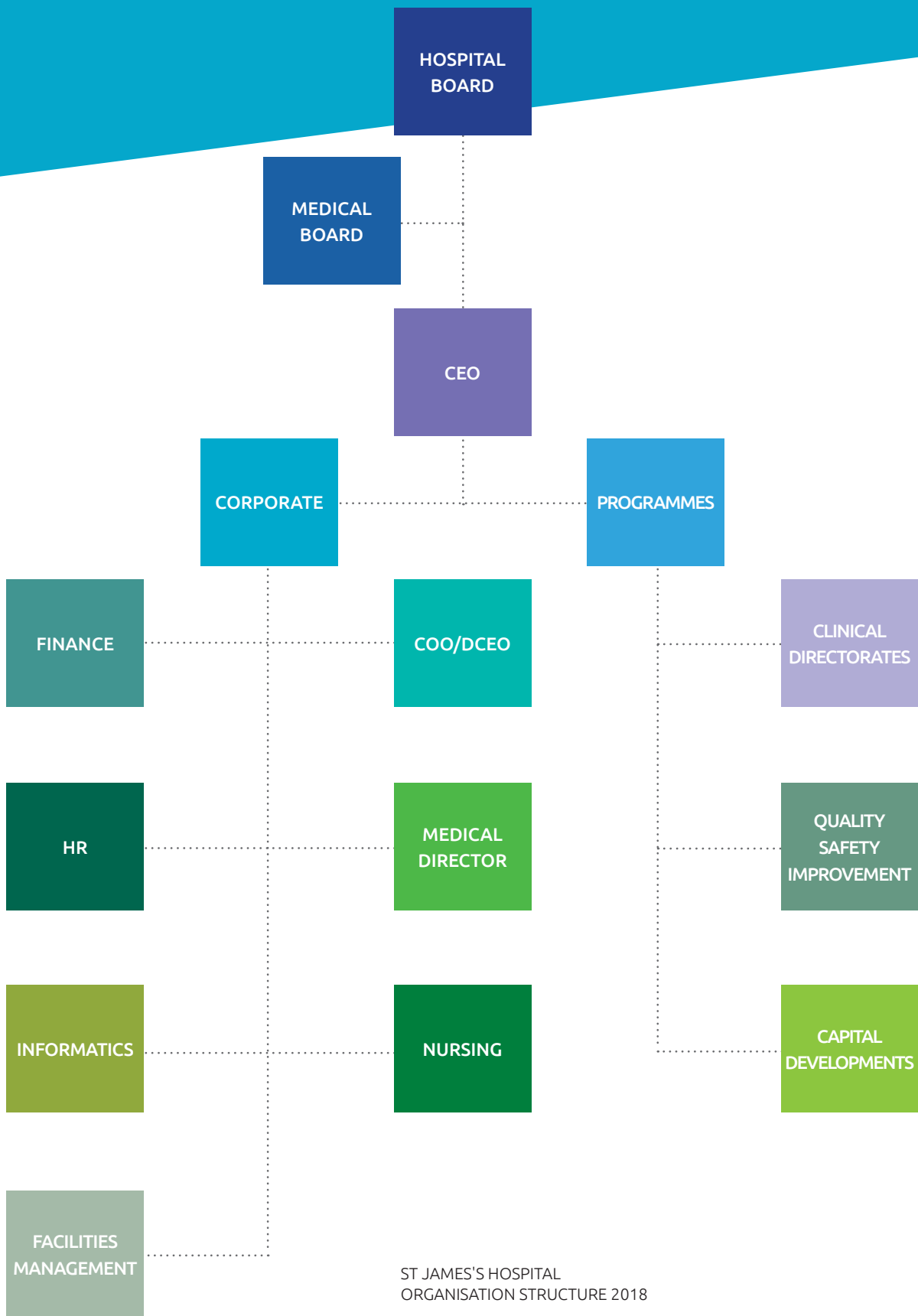
50 **6.1 Quality and Safety Improvement (QSID)**

7 **PUBLICATIONS**

52 **7.1 Publications**



1.1 Corporate Structure



ST JAMES'S HOSPITAL
ORGANISATION STRUCTURE 2018

EMG members

Mr. Lorcan Birthistle, CEO

Ms Ann Dalton Deputy CEO

Mr Simon Moores, Chief Operations Officer

Ms Joanna Bennett, Director of Finance

Dr. Una Geary, Director of Quality, Safety & Improvement

Mr. Niall McElwee, Director of Capital Projects

Mr. Vincent Callan, Director of Facilities

Mr. Hugh Duggan, Director of HR

Ms. Sharon Slattery, Director of Nursing

Ms. Gemma Garvan, Director of Informatics

Dr. Ciaran Johnson, CD DIAGIM

Dr. Conal Cunningham, CD MedEl

Mr. Vincent Young CD, SACC

Dr. Finbarr O'Connell, CD MED January – March / Declan Byrne April - December

Dr. Brian O'Connell, CD, LABMED

Dr. Eibhlin Conneally, CD HOPE January – October John Cooney – November – December

Dr. Finbarr O'Connell, Executive Medical Director from April

1.2 Legal and Banking

Bankers

Bank of Ireland
85 James Street
Dublin 8

Auditor

Controller and Auditor General
3A Mayor Street Upper
Dublin 1
D01 PF72

Solicitors

A&L Goodbody Solicitors
I.F.S.C.
25/28 North Wall Quay
Dublin 1

Insurance Broker

AON Insurance



Route 1

WELCOME TO
St James's Hospital

Wayfinding signs for various hospital departments.



2.1 Performance Highlights

ACTIVITY Levels for 2018

Period Jan - Dec 2018	2018 Activity	
	Acute Ward In-patient Discharges	Day Cases
Cardiology	3060	1797
Dermatology	12	3094
ENT	453	299
General Surgery	2633	4462
GUIDE	410	6394
Gynaecology	788	427
Haematology	1075	5985
Maxillo Facial	926	517
Medicine	6869	14192
Medicine for the Elderly	1419	2351
Oncology	1215	10246
Orthopaedics	1091	487
Plastic Surgery	1126	2452
Radiotherapy	161	2
Rheumatology	583	198
Psychiatry	3	9
Cardio-Thoracic Surgery	871	24
Urology	552	1455
Vascular Surgery	418	674
Total Acute Activity	23665	55065

Period Jan - Dec 2018	2018 Non Acute Ward In-patient Discharges
Guide	1
Haematology	1
Medicine for the Elderly	823
Medicine	38
Orthopaedics	3
Psychiatry	371
Total Non Acute Activity	1237



67,799
NEW OUT-PATIENT
ATTENDANCES

Out-Patient Activity 2018		
	New	Return
Attendances	67799	239349



23,665
ACUTE WARD
IN-PATIENT DISCHARGES
IN 2017

Note 1: Medicine Inpatients includes Respiratory/Endocrine/Gastroenterology/Neurology/Nephrology/Immunology/Pain Management/General Medical patients.

Note 2: Medicine Daycases includes Respiratory/Gastroenterology/Neurology/Nephrology/Pain Therapy/Anaesthesiology/General Medicine.

Note 3: Oncology Daycases includes Clinical(Medical) Genetics.

Note 4: Outpatient Consultant and Nurse Led Activity

3.1 Finance

The Finance Directorate incorporates three main divisions: The Transaction Processing Unit, including Accounts Payable/ Settlements, Accounts Receivable and Payroll; The Technical Expertise Unit, comprising of the Compliance Unit, SAP Support Unit and the Procurement Unit; and The Decision Support Unit, which includes the Clinical Funding Unit and the Management Accounts Unit.

The Finance Directorate currently operates over two main sites; the Transaction Processing Unit, the Compliance Unit and SAP Support Unit are based off site at the Brickfield Campus, with the remaining units based on site within St James's Hospital.

The **Transaction Processing Units** have significant experience and expertise in all transactions that are processed. The **Payroll Unit** processes payroll for over 5,000 employees and has extremely efficient controls and process in place, most of which are either electronic or online.

The **Accounts Payable/Settlements Unit** processes all invoices and again is predominantly receiving invoices electronically and allowing them to be directly uploaded without human intervention.



THE ACCOUNTS RECEIVABLE UNIT
INVOICES AND COLLECTS OVER
€100M IN REVENUE

The technical expertise which is based within the Finance Directorate is second to none. The **SAP Support Unit** ensures the financial integrity of the SAP system and provides invaluable project management expertise.

The **Compliance Unit** ensures that robust controls and processes are in place for all areas of transaction processing. The **Procurement Unit** provides procurement expertise, assists Directorates in identifying value for money initiatives through market engagement, provides oversight of the National Factor Blood budget and ensures the Hospital is compliant with all procurement legislation.

The **Decision Support Unit** has been a national leader in its ability to deliver information to end users. The core elements of the unit are developing expertise in Patient Level Costing and the new funding model (Activity Based Funding) with a real focus on Patient level Data that drives accurate costing and ensuring clinical activity is coded correctly which in turn drives the revenue.

The **Management Accounts team**, within the **Decision Support Unit**, encompasses several **Business Partners** who are providing the Directorates with a significant amount of financial expertise and guidance in service developments, identifying efficiencies and focusing on value for money initiatives. Finally, the **Data Science team** support data driven decision-making Hospital-wide through the development of visual dashboards and the automation of repetitive processes.

Performance highlights 2018 and 2019 objectives

Key highlights in 2018 include the financial performance of the Hospital. The Financial Statements for the reporting period 1st January, 2018 to 31st December, 2018 resulted in a deficit of €0.06m. The Hospital's gross expenditure was €463.78m while the income and exchequer funding amounted to €463.72m. The closing surplus now stands at €0.70m (2017: €0.76m).

Another key highlight in 2018 was a major SAP Transition programme which was completed in June, led by the SAP Support Unit, along with various stakeholders. The key deliverable from this programme was to migrate the SAP Financials system from the existing Managed Services solution to a new state of the art private Managed Services solution provided by IBM. This improved the security, stability, availability and performance of the existing system and providing a highly resilient and scalable solution to support current and future requirements.

The Procurement Unit continued to deliver on its key goals of sourcing and procuring the best technology and services at the most competitive prices in 2018. Significant contribution has been made by the unit in the procurement of revolutionary treatments for haemophilia and also in the Hospital's ongoing drive to improve energy and environmental performance through Energy Performance Contracts. Plans for a new Contract Management system are well underway which will further support the delivery of value-for-money through compliant procurement procedures in 2019.



A NOTABLE AND SUCCESSFUL PROJECT IN 2018 WAS THE ROLL-OUT OF PAYE MODERNISATION FOR HOSPITAL EMPLOYEES.

In Budget 2017, it was announced that the current PAYE system would be replaced with a real time support system called PAYE Modernisation on the 1st of January, 2019. The Payroll Department strived throughout 2018 to ensure a seamless transition and will continue to deliver this real time reporting throughout 2019.

Finally, the Decision Support Unit continued to develop skills in the use of cutting-edge data-science techniques in 2018. Key highlights include using programming to automate repetitive and time-consuming data processes and the creation of visual dashboards to support Directorate decision-making. These are ever-evolving priorities for the Unit as it seeks to find new and innovative ways to present financial information to key stakeholders across the Hospital.

3.2 Human Resources

The Human Resources Directorate, (HRD), plays a central role in helping shape the organisation through key organisational changes and development plans ensuring the Hospital successfully meets local and national key performance indicators in accordance with its mission, vision and values. Its divisions include; HR Business Teams, Medical Workforce Unit, Employee Relations, Centre for Learning & Development, Workforce Information & Planning Unit, Superannuation, Nurse Bank and Occupational Health.

HR Business Teams

The HR Business Teams deliver the full suite of recruitment and administration functions throughout the Hospital for all staff excluding Medical. Our role is focused on finding, engaging and supporting these colleagues. This contributes to the provision and delivery of safe patient care.



OUR TREND OF INCREASING RECRUITMENT ACTIVITY CONTINUED IN 2018, WITH **530 STAFF HIRED**

- Most of this recruitment was driven by staff turnover and our role as an attractive teaching hospital, where staff are offered great experience and development.
- In line with the priority of building our profile as an employer of choice, we are innovating and refining our brand in recruitment: we are more active on more social media platforms and websites (Facebook, Twitter & Jobalerts www.irishjobs.ie & www.publicjobs.ie) and are piloting a new venture with LinkedIn. This approach is helping build a more distinctive SJH brand with a broader reach, improving our ability to attract specialised staff for the Hospital, locally and from overseas, in an increasingly competitive market.

- This surge in recruitment has been matched by an increase in the volume and complexity in transactional activities as we help SJH deployment of over 4,000 staff, who all are likely to interact and require assistance with HR over the year.

Medical Workforce Unit

In May 2018, the Medical Workforce Unit saw the departure of Mr David Sweeney, Head of Medical Workforce and Communications after nearly 30 years of service to St James's Hospital. David moved to become the Director of Human Resources in Beaumont Hospital.

Ms Suzanne Roy commenced as the Head of Medical Workforce in June 2018.

The Medical Workforce Unit had a successful recruitment campaign for the July 2018 intake of Non-Consultant Hospital Doctors (NCHDs). Full recruitment and employment was achieved to deliver a safe service for the patients of St James's Hospital.

2018 was a busy year with a number of active projects:

- St James's Hospital participated in the Irish Medical Council Inspection in November 2018
- The Consultant Settlement process commenced in August 2018 and continued apace until the end of the year.

The key priorities for 2019 are:

- Full recruitment of high calibre NCHDs
- Development of a welcome pack for new consultants
- Achieving a paper light / free department by end of 2019

Employee Relations

We have continued to see improvements in attendance across the Hospital following concerted efforts by HR to work closely with local management and our Union partners.

We have continued developing our Managing People Training Course which is very popular and much sought after, mainly amongst our front-line management staff.

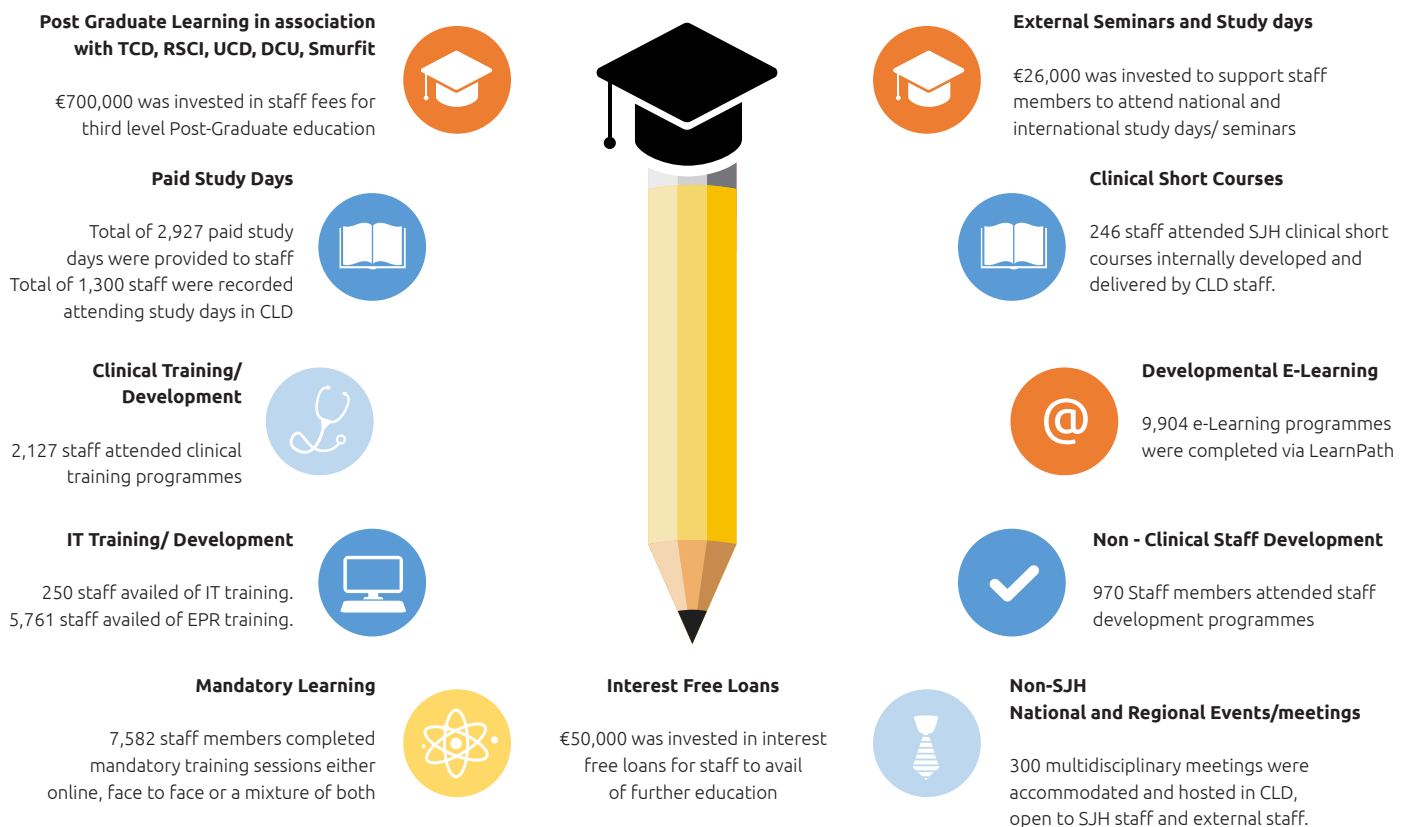
Centre for Learning and Development (CLD)

The Centre for Learning and Development is a multidisciplinary education centre supporting development for all of our non-medical staff. It designs and delivers high quality continuous education, mandatory training and personal/professional development programmes, some of which are accredited externally and offered in partnership with Trinity. All are accessible and responsive to the needs of our Hospital and our staff.

Our objectives for 2019 are in line with our strategic priorities to strengthen education and research and to be seen as an employer of choice. We will have an increased focus on

- Training and development programmes for clerical/admin staff.
- Incorporate Inter-professional Learning (IPL) into programmes.
- Utilise eLearning to help support, deliver and create training.

CLD Activity Review 2018



Workforce Information & Planning Unit

The Workforce Information Unit is responsible for providing internal and external stakeholders with accurate, current workforce information and ensuring the stability of the SAP HR & Payroll systems whilst providing end user support to the Hospital and Our Lady's Hospice. Below are some of the larger projects undertaken in 2018:

- Implemented an improved and redesigned HR document management system which has facilitated improved business data processing
- Provided support, assisted with the data gathering and clean up required for the Time & Attendance, e-Rostering Project
- Assisted with the development of attrition staffing models for local department managers
- Continued provision of system support and assistance for the end users of the SAP HR & Payroll system.

Superannuation

The HR Superannuation team maintains pension services for St James's Hospital employees and over 1,000 pensioners. The team facilitated 94 retirements in 2018, an increase of almost 11% on 2017.

Planning commenced for the production of Annual Benefit Statements for members of the Single Public Service Pension Scheme in association with HPSA- HSE. Data has been generated with testing and production due to commence in late 2019.

Occupational Health

The Occupational Health Department promotes staff health and wellbeing, protecting staff from acquiring occupational diseases and infections, by screening and running vaccination clinics. We offer a confidential service and work with sick and absent staff members to rehabilitate and help them return to work, where possible. The selection below details some of the department's key highlights of highlights from 2018:

- We worked effectively in the run up to the 2018/2019 flu season to increase our vaccination rate to 54% of eligible staff, up from 40% 2 years ago, with 52% of our nurses availing of this service. This increase was delivered by offering more lunchtime and mobile clinics.
 - Induction clinics have also been screened and 500 new hires were seen in 2018.
 - We welcomed 76 student nurses, medical interns plus 389 other new staff members.
 - Our preventative work has helped our needle stick/sharps injuries to drop to the lowest level recorded over the last 23 years. For 2019 we aim to further decrease the incidence of needle stick/sharps injuries, increase our 'Flu vaccination rates and explore how we might help staff avoid neck and back & shoulder injury.
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3.3 Nursing Services

Nursing Administration and the Nursing Practice Development Unit (NPDU) oversee, co-ordinate and support all matters relating to professional nursing practice throughout the hospital. This includes recruitment and retention of nursing and Health Care Assistant (HCA) staff; nursing practice development initiatives and projects; co-ordinating networks of communication for nursing developments and the promotion of nursing audit and the development of clinical nursing research. The NPDU also provide advice and support to other disciplines within St James's Hospital (SJH) in relation to PPPG and service development.

Throughout 2018 there was a strong emphasis on recruitment with campaigns at local, national and international levels to secure nurses and HCA's for all clinical areas. The nursing headcount as of the 31st of December, 2018 was 1,982, WTE. The HCA headcount as of the 31st of December, 2018 was 380, WTE. The annual nursing turnover rate was 8.7%. The annual rolling sick leave rate was 3.5%. The average service years for those whom left the nursing department in 2018 was 7.46 years.

Undergraduate success

The introduction and rollout of the Nursing and Midwifery Board of Ireland's (NMBI) nationally approved undergraduate Nursing Programme at SJH in collaboration with our academic Partner Trinity College Dublin (TCD); School of Nursing & Midwifery (in Q3 & Q4, 2018) took place. At the same time we supported both undergraduate student nurses and other grades of nursing staff with the existing undergraduate programmes.

In collaboration with TCD, we facilitated a pilot "Study Abroad" for undergraduate student nurses from Boston University in their clinical learning. This pilot programme has proven to be successful with a plan to continue this worthwhile initiative.

Fifty colleagues then took up staff nurse positions throughout the Hospital.



**FIFTY SIX 4TH YEAR NURSING INTERNS
SUCCESSFULLY GRADUATED
IN NOVEMBER 2018 AND WERE ELIGIBLE
TO REGISTER ON THE GENERAL NURSING
DIVISION WITH THE NMBI.**

Post Graduate research and advanced practice

Year 2 of the SJH Rotation Programme successfully facilitated eight newly qualified staff nurses to gain experience in both surgical and medical areas within their first year post graduation.

In November, the inaugural **Catherine Deegan Nursing Research and Innovation Award** was established as a tribute to one of our former colleagues, the late Ms. Catherine Deegan, RIP, who throughout her career advocated for the further development of nursing through active participation in research and quality improvement. There were nineteen submissions and the calibre of submissions was exceptional. Ms. Catherine O'Brien ANP, Cancer Survivorship was the deserving recipient of this award with her research study 'eSMART'. This was a randomised controlled trial assessing the use of remote electronic technology in the development and assessment of a tool used in symptom management of patients with breast and colorectal cancers using the Advanced Symptom Management System (ASyMS).

The Nursing Research Access Committee

continues to engage and promote nursing research.

The **11th Annual Research, Clinical Audit & Quality Improvement Seminar** was held in May where multiple MDT abstracts were received. This annual event is a great opportunity for all disciplines to network while in attendance.

The TCPHI partnership programme between SJH and TCD

continues to develop year on year. This programme is designed to underpin and strengthen research capacity between both campuses to improve clinical practice and research. The innovative and successful model ensures that St James's Clinical Nurse Specialists and Advanced Nurse Practitioners working on research in practice are linked to a dedicated academic researcher in the School of Nursing and Midwifery at TCD and have access to research infrastructure.

The development of the **Trinity St James's Cancer Institute (TSJCI)** in collaboration with Trinity College Dublin underlines St James's Hospital's commitment to advancing cancer services and positioning the hospital as one of Ireland's leading centres of cancer care as it seeks Organisation of European Cancer Institute's (OECI) accreditation. Nursing has been a key department as the Hospital transitions towards being an accredited Cancer Institute. Feedback from the peer review late in 2018 acknowledged the expertise, knowledge, clinical experience and commitment of nurses across the organisation, thus, improving the patient experience and outcomes.

The Nursing Metrics Programme took place in 2018. Ten indicators were measured. They were: Falls Prevention & Management, Pressure Ulcers Prevention & Management, Peripheral Intravenous Venous Catheter Care, Nursing Documentation, Urinary Catheter Care, Nutrition & Hydration, Medication Management, Early Warning Score, Central Venous Access Device and Patient Experience. Work is ongoing with the Analytics Department to make the above results paperless, recorded on the Business Intelligence platform and available to all.

Registered Nurse Prescribing continues to develop pan organisation. Nine new Nurse Prescribers were registered in 2018 with NMBI

which has led to the expansion of nurse led services to our patients.

Funding was secured for a second year for the **Pressure Ulcer to Zero (PUTZ) Campaign** with a nurse lead being appointed. The emphasis for year 2 of this programme was on sustaining and improving standards of care for patients at risk of developing pressure ulcers through staff education, patient engagement, audit, development and improvement of the plans from Year 1.

In continuing and sustaining the **Falls Management Programme**, a Falls Awareness Week was organised in November for all staff, patients and members of the public. A number of Quality Improvement initiatives took place including the evaluation of a patient occupancy alarm, review of the Electronic Patient Record Falls Care Pathway and documentation, rolling out of safety huddles to many clinical areas and collaboration with QSID. An evidence based medication review of inpatient sustained fractures post falls was also undertaken and again amendments to practice changed and sustained.

The nursing team was instrumental in the roll-out of **Project Oak** as we as an organisation successfully transitioned from paper to electronic documentation. Thank you to everyone for their support and enthusiasm during this period in ensuring the delivery of safe patient care.

The work of the **End-of-Life-Care Committee** continues its valuable work on improving end of life care for patients, relatives and staff. This is achieved through five work streams namely: education and training, audit and research, advocacy, improving the hospital environment and developing ongoing practical resources and support for relatives.

Developing Nursing practice and knowledge continues to be of importance. There is ongoing education and support for nurses and HCA's.



**2018 SAW THE DEVELOPMENT OF
A NEWLY DEVELOPED FOUNDATION COURSE
IN BOTH CHRONIC ILLNESS AND CARDIOLOGY.**

Advanced Nurse Practitioners registered in 2018 include Ms. Catherine O' Brien, Cancer Survivorship, Mr. Rory Wilkinson, Specialist Palliative Care and Mr. Stephen Shelley in Respiratory. **Nursing Midwifery Practice Development Unit Innovation Grants and Baggot St. Research** funding continues to support nursing education development and innovation throughout nursing in each clinical directorate.

A Professor of Nursing and Chronic Illness, Ms. Anne Marie Brady was appointed jointly between SJH and TCD in August. This role provides

leadership in practice-based research, service and practice development, teaching and a welcomed colleague to the SJH nursing team.

Funding has been secured for a **Professor in Cancer Nursing Care** post. The post will advance the research in the area of cancer nursing. The post is critical and will provide senior academic leadership to drive cancer nursing which is central to both the TCD and SJH nursing strategy.

Plans for 2019

2018 was an extremely busy year for nursing. We demonstrated our commitment to existing projects and we also involved ourselves in new and exciting organisational initiatives which required our involvement for them to be successful. In 2019 we will:

- Improve all patients' experience in both the ambulatory and inpatient setting.
- SJH nurses will continue to be recognised as leaders in healthcare nationally and internationally.
- Continue engagement and commitment towards the OECl accreditation process.
- Continue support for nurses of all grades and HCA's in their personal and professional development.
- Provide ongoing support and development of nurse led research
- Continue the retention, recruitment and development of nursing and HCA staff.

This year saw the retirement of many nursing and HCA colleagues. I would like to take this opportunity to wish them all a happy and healthy retirement and thank each for their many years of commitment to the organisation. I would sincerely like to extend a thank you to Mr Paul Gallagher, Director of Nursing from August 2006, left the organisation in May and moved to the Ireland East Hospital Group as their Director of Nursing.

As Director of Nursing I would like to thank everyone within the Nurse Executive team and all other grades of nurses for their continued dedication and professionalism in ensuring that those in our care receive patient centred care. I see the evidence of this and hear the positive feedback about this on a daily basis. 2018 saw many challenges and opportunities for the organisation and I am delighted to say that the nursing team played an integral part in addressing the challenges and seizing on the opportunities.



3.4 Facilities Management

The Facilities Management (FM) Directorate provides a full range of support services in an integrated manner that enhances the patient's experience and supports the hospital's clinical staff in treating our patients.

The FM Directorate comprises of the following disciplines; Patient Hygiene Services, Concourse, Chaplaincy, Catering, Portering, Telecommunications, Facilities Management Administration, Security and Car Parking, Logistics, Fire Safety Services, Medical Records Management, TSD/FM Engineering, Support Services Contracts, Sustainability and Mobility.

Performance highlights 2018

Projects

Reducing the amount of energy used in our campus contributes to achieving national targets for Carbon Emissions; there are also financial benefits due to reduced consumption which can be leveraged off to improve our Plant and Facilities. This is done through an Energy Procurement Contract (EPC). This project was progressed through four separate technical meetings with potential partner companies enabling the advancement of the process closer to an invitation to tender (ITT).

The *Scan for Surgery* project went live in Theatres 1 and 2 with all products used in theatre scanned by clinical staff, captured in Inventory Management solution and integrated into the SAP system. This was a ground-breaking achievement in Irish healthcare. This is now being worked on to hyphenate roll-out to other major Irish healthcare providers.

Catering

The Catering Department was rebranded with a new corporate image; which introduced a bespoke catering logo and new uniforms for management and staff.

We worked with Clinical Nutrition, Speech and Language Therapy and Clinical Photography Departments in designing our new patient menu.

Catering Meals statistics

- Patient Meals 985,500
- Textured Modified Diet 109,500
- Staff Meals 250,000

FM Engineering

Theatres 3-11 went through a refurbishment improving lighting, flooring, storage facilities, wall protection and new timing devices. This required each theatre to be closed for two weeks through rolling, planned closures.

UPS equipment was upgraded with new batteries, control boards and isometers. In some cases UPS units were replaced improving the security of electrical supply for critical life safety systems throughout the Hospital.

Over 24,800 work orders were processed and of these 8,608 were planned preventative maintenance activities.

Environmental

Risk Waste tonnage output was at 474.66 tonnes in 2018, a decrease of 7.6 tonnes on 2017.

Non - Risk Waste tonnage output was at 2,912.148 tonnes in 2018, a decrease of 47.33 tonnes on 2017.

Medical Records

The Medical Records Centre houses almost 450,000 patient charts, over 2,000,000 laboratory slides/ blocks and 10,000 microfilm tapes.

Fire safety

St James's Hospital now operates the largest advanced fire alarm network in Europe with 177 separate fire alarm panels and 8,547 devices (call-points, smoke and heat detectors). The fire alarm system has additional software that verifies fire alarm servicing has been completed to demonstrate compliance with I.S 3218 - servicing and maintenance of fire alarm system.

A new fire safety register is being maintained that records all planned preventive maintenance, annual

servicing, inspections, fault repairs, training, drills and inspections.

The key performance indicator is attendance at fire safety training; 3,615 staff attended fire safety training.

Sustainability and Mobility

All new employees are made aware of the alternatives to car usage and on the Campus Mobility Management Plan when commuting to the campus.

- Taxsaver Tickets – 1,120 tickets purchased,
- Bike to Work Scheme - 165 bikes purchased

Chaplaincy

During the past year, the chaplains attended over 950 deaths and made 250 pre-operation visits per week to patients who had requested a visit. Added to these are the informal visits made on wards by all Chaplains.

Portering and Concourse

The Christmas performances organised in the Concourse enhanced patient, visitor and staff experience over the Christmas period. Eleven performances took place in 2018.

Switch

The Switch answered and placed 433,000 calls in 2018.

Logistics

- Total Receipt Value Goods & Services €137,794,950.31
- Stock reservations processed 16,829
- Stock Receipt Value €10,966,656.76
- Consignment Issue value €5,554,956.43
- Stock vendors 136
- Stock purchase orders placed 19,425
- Managed stock lines 4953

Looking Forward to 2019

Projects

We will continue to work closely with the Decision Support Unit in Finance to develop bespoke visual analytics; that will interrogate financial data and provide insights that can be used to obtain meaningful trends and variances. The visual analytics allow us to set accountable KPI's and offers clear insights into where our resources are being consumed and areas that efficiencies can be gained.

The development of a business case for full campus-wide rollout of RFID infrastructure will continue into 2019.

Catering

We will launch our newly designed specific purpose patient menu and Therapeutic Modified Diet menu in 2019.

We are introducing the main meal in the evening time for all our patients (currently served at lunch time). We are engaging with GS1 to develop a bespoke system to track all our food products from supplier to the patient. This will include the introduction of an electronic patient meal ordering system.

FM Engineering

FM Engineering will be focusing on plans to address the significant aged plant and equipment. Due to the lack of capital funding, we will progress an energy performance contract that will significantly reduce our carbon footprint, in addition, savings from this contract can be used to address other aged plant.

Environmental

Online waste management training will be the focus in partnership with our waste disposal vendors and waste management committee. This initiative will reinforce the current trend in waste segregation, separation and correct disposal which is attributed to our waste management toolbox talks and bespoke area training.

Sustainability and Mobility

The National Transport Authority and St James's Hospital are working together to reconfigure the James Street entrance and exit to vehicle and pedestrian access.

For the initial stage of the *Green Campus Programme*, transport, travel and waste are the two core themes. As the programme develops during 2019, the focus will shift to water and energy and other themes identified in the St James's Hospital "*Sustainability in Healthcare Strategy*".

Logistics

- To roll out the Scan for Safety across more areas in the Hospital
- To continue the inventory mapping exercise in Theatres 3 and 4
- The Scan 4 Surgery integration with Cath Lab CVIS project and implementation

3.5 Internal Audit

The Head of Internal Audit reports to the Chairperson of the Audit and Risk Committee, a hyphenate subcommittee of the Hospital Board, on all operational matters. This ensures independence and direct access to the Hospital Chairman and Board if necessary. The Head of Internal Audit reports to the CEO on all functional matters.

The Annual Internal Audit Programme is a vital document as it determines the internal audit work for the year ahead. This programme is informed by previous audits and outcomes, items identified by the Office of the Comptroller and Auditor General (C&AG) or the HSE on local and national issues.

The following audits were among those reported to the Audit and Risk Committee in 2018:

- Internal Financial Controls
- Mandatory Training
- Clinical Audit Management
- Equipment Maintenance
- Follow up audits of previous internal audit recommendations

Among the audits which have been commissioned to occur during 2019 are the following:

- Staff Recruitment
 - Research Finance
 - IT Security
 - HR/Payroll Interface
 - Data Protection Follow Up
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4.1 Haematology, Oncology, Palliative Care (HOPE)

The HOPE Directorate encompasses the specialities of Haematology, Medical Oncology, Cancer Genetics, Palliative Care, Psychological Medicine and Radiation Oncology. The Haematology Department incorporates national specialities as follows: National Centre for Adult Bone Marrow Transplantation and the National Coagulation Centre.

The HOPE Directorate provides integrated care with St Luke’s Radiation Oncology Network and the Cancer Clinical Trials Programme. The HOPE Directorate is supported by the Bone Marrow for Leukaemia Trust, the Irish Cancer Society and Daffodil Centre.

The HOPE Directorate aims to provide best care for patients, based on patient experience, safety, clinical excellence and innovation.

Hospital KPIs measured in the HOPE Directorate:

Pillar	KPI
Patient safety	<ul style="list-style-type: none"> Medication safety events Adverse events
Access	<ul style="list-style-type: none"> OPD wait time Time to triage by speciality/consultant Time to Treatment
Patient flow	<ul style="list-style-type: none"> DNA rate

HOPE Directorate KPIs:

Medical Oncology monthly report to the HSE detailing:

- The total number of patients who received a new parenteral systemic therapy in the day ward.
- The number of patients who received a new parenteral systemic therapy in the day ward within 15 working days of the date of the finalised treatment plan.

Cancer Genetics quarterly report to the HSE detailing:

- Wait times for predictive and diagnostic testing.
- Number and type of laboratory tests completed.

Palliative Care monthly report to the HSE detailing:

- Inpatient and outpatient activity.
- Outcomes.
- Wait times for inpatient and outpatient consults.

Radiation Oncology monthly report:

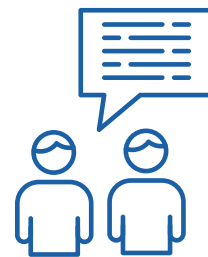
- Radiotherapy admissions.
- Radiotherapy discharges - combination of previous months admissions and transfers to Radiotherapy consultant.
- Bed occupancy.

National Adult Haematopoietic Stem Cell Transplant Unit:

- Detailed data is submitted on each transplant patient to the European Society of Blood and Bone Marrow Transplantation (EBMT).

Multidisciplinary Cancer Team Conferences (MDT):

- There are eight cancer multidisciplinary team conferences held weekly to establish consensus diagnosis and treatment plans for all cancer patients.



THERE HAS BEEN A CONSISTENT RISE IN THE NUMBER OF CASES DISCUSSED AT MDT MEETINGS YEAR-ON-YEAR, IN 2018, 10,199 CASES WERE DISCUSSED.

Number of cases discussed at MDT meetings 2010-2018 is shown below:

	2010	2011	2012	2013	2014	2015	2016	2017	2018
Upper and Lower GI	1059	1167	1109	1271	1203	1017	1228	1248	1361
Urology	623	781	942	1320	1022	958	1029	1089	1088
Gynae	1136	1158	1256	1275	1343	1238	1066	1112	1187
Breast	1947	2122	1935	2420	2256	2143	2521	2615	2463
Lung	1357	1587	1504	1599	1548	1573	1585	1609	1740
Head and Neck	638	599	689	871	934	985	1085	1144	1327
Lymphoma	388	387	429	438	453	444	436	459	467
Skin	1491	1599	369	190	243	411	651	617	566

In addition to the above, 654 patients with blood cancers and haematological malignancies were discussed at the haempath MDS in 2018.

Haempath Meeting	N/A	N/A	N/A	N/A	N/A	N/A	N/A	690	654
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Performance highlights 2018

Medical Oncology:

- Continuation of an improved shared care service with Tullamore General Hospital with the appointment of two new Medical Oncologists. Dr Petra Martin and Dr Saira Nasim both commenced on 1st February 2018, both with a commitment of 12hrs to Medical Oncology in St James's Hospital.
- Dr Fergal Kelleher took over the sarcoma medical oncology patient cohort from Dr Cliona Grant.
- Oncology outpatient and daycase activity remains high with 22,959 combined attendances in 2018.

2014-2018 figures are shown below:

	2014	2015	2016	2017	2018
Oncology Outpatient Visits	11994	10985	11756	12361	12714
Oncology Daycases	6638	8952	9805	10607	10245

Haematology:

- As the National Adult Haematopoietic Stem Cell Transplant Unit, the service carried out 175 transplants in total, 77 autologous and 98 allogeneic stem cell transplants in 2018.
- Refurbishment of the Family Room on the Denis Burkitt Ward was completed using funds donated to the Haematology service through the St James's Hospital Foundation.
- 90 Educational sessions were provided to non-consultant hospital doctors (NCHDs) working within the Haematology and Stem Cell Transplant Programme. These sessions were open for the first time to pharmacists, nurses, scientists and other health care professionals working with the HOPE Directorate and the

Stem Cell Transplant Programme.

- The five-year cancer audit report (2013-2017) was published in 2018. This included a comprehensive chapter on Haematology for the first time. The report gave a detailed overview of haematological malignancies, reporting on activity and survival outcomes for all blood cancer types including Leukaemia and Myeloproliferative Neoplasms, Lymphoma and Lymphoproliferative Disorders and Myeloma and Plasma Cell Disorders.
- In May 2018, the first phase of the application process for JACIE accreditation of the Stem Cell Transplant programme, St James's Hospital, was completed. The inspection check list and mandatory clinical and quality management documents were submitted for review by the JACIE inspectors. Following this a date for accreditation inspection was confirmed for 15th and 16th November, 2018. The two-day site inspection was carried out by six members of the JACIE inspection team, four trained inspectors and two trainees from Stem Cell Transplant (SCT) Units throughout Europe.
- The Haemoglobinopathy service continues to expand with 143 patients with Sickle cell disease and 12 Thalassemia patients attending St James's Hospital.
- The Haematology service featured on the four-part Virgin Media One documentary on the Hospital, *Inside James's*, which aired in the autumn.
- Haematology outpatient and daycase activity remains high with 15,601 combined attendances in 2018.

2014-2018 figures are shown below:

	2014	2015	2016	2017	2018
Haematology Outpatient Visits	10065	10214	10493	10963	10571
Haematology Daycases	3592	5191	5826	6112	5030

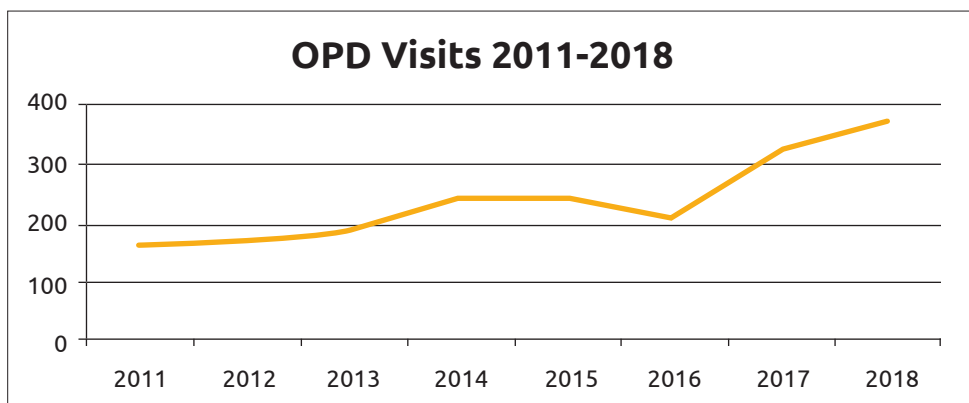
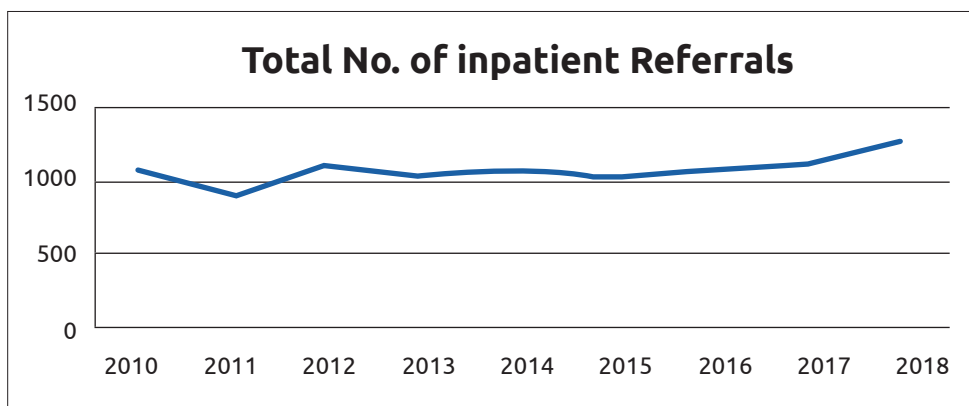
National Coagulation Centre:

- Contract for the National Haemophilia 'Lighthouse Project' was signed in late 2018, so far all is on schedule and there is a planned 'go-live' date set for October 2019.
- Switchover from Advate to Elocta. Home treatment patients (85) commenced first followed by remaining NCC patients. The changeover took approximately six months to complete.
- HPRA inspection was carried out and passed on 13th – 16th February 2018.
- Screening of the IHS film-'Facing the Rising Sun' took place in October in SJH and in the Stella Theatre.
- We updated our patient pathways, policies and procedures, consent etc. in line with the introduction of the new GDPR guidelines in May 2018.

- Preparation started in 2018 for our UKHCDO audit which takes place in March 2019.
- Tender for product Wyliate in August 2018.

Palliative Care:

- Demand for the inpatient consultation service continues to rise.
- The team comprises 0.6 wte Consultant Physician in Palliative Medicine, 1 WTE NCHD, 1 WTE Advanced Nurse Practitioner, 4 WTE Clinical Nurse Specialists (CNS), 1 WTE Medical Social Worker, 0.5 WTE Administrator. All 4 CNS posts are now permanent posts, a welcome development.
- 1,266 referrals were made for inpatient consultation in 2018, of which 69% had a malignant diagnosis.



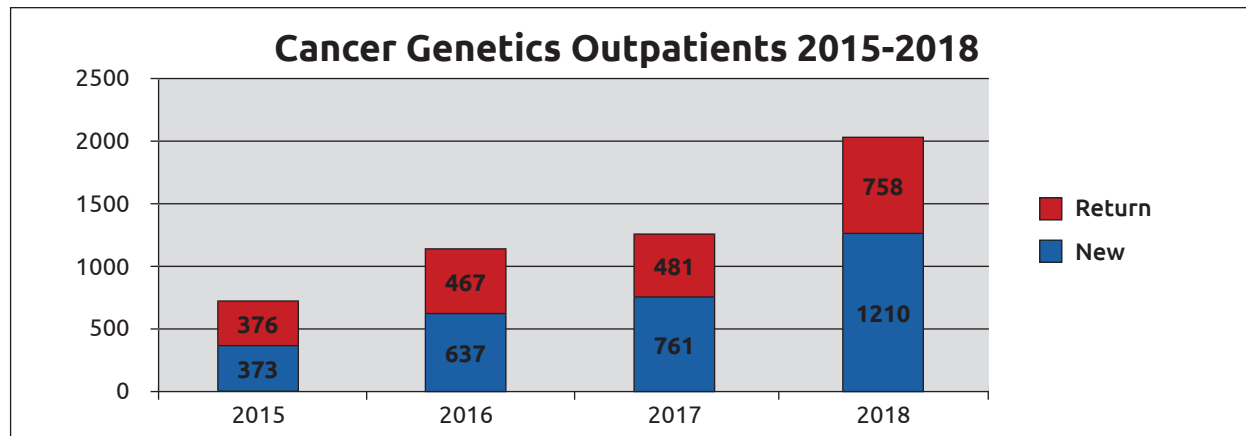
- The Palliative Care Advanced Nurse Practitioner post has enabled us to support a greater cohort of ambulatory patients year-on-year. 368 patients were reviewed in the outpatient service in 2018, a doubling since 2013.
- The biannual Remembrance Service took place in the Camino Rest in June and November, jointly organised by the Medical Social Work and Palliative Care

- teams. 181 family members attended representing 83 patients who died in St James's Hospital. Mr. Bryan Nolan's thoughtful talks on grief and loss were very well received.
- The Introduction to Specialist Palliative Care Education Programme remains very popular.
- A robust palliative care infrastructure will be an essential element of the Trinity St James's Cancer Institute.

Cancer Genetics:

- The NCCP continued to support the growth of the Cancer Genetics service under Professor Gallagher's leadership.
- Funding was secured for a third genetics counsellor in Q4 2018.
- Cancer Genetics Consultant: Post approved 2018.
- Activity continues to grow year-on-year. There was a 58% increase in activity from 2017-2018.

2015 -2018 figures are shown below:



Psychological medicine:

- The Psych-Oncology Programme continues – it is an accredited post graduate course and run in conjunction with Trinity College Dublin (TCD).
- Development of a new service for the sickle cell cohort is ongoing.

there has been a steady increase in the number of patients attending the centre. There has also been a steady increase in the complexity of the treatments delivered. The table below outlines the number of new treatment initiations, number of fractions delivered and the percentage of VMAT (rotational arc intensity modulated radiotherapy) treatment delivered since 2012.

Radiation Oncology:

- Since the commencement of the service in April 2011,

Year	Number of New Treatment Starts	Number of Fractions Delivered	% of Treatments that are VMAT	SABR Treatment (No. of Patients)	SABR Treatment (No. of Fractions)
2012	823	19,303	10%	N/A	N/A
2013	1,160	23,127	27%	N/A	N/A
2014	1,450	26,322	30%	35	156
2015	1,407	24,887	50.8%	56	259
2016	1,395	26,036	73.3%	75	360
2017	1,377	23,463	74.3%	139	754
2018	1,445	21,676	76.6%	128	669

- The number of new starts increased in 2018 by 5% but the number of fractions delivered has decreased for the second year by approximately 7.5%, following a 10% drop between 2016 and 2017. This is likely due to a combination of change in treatment fractionation for prostate patients from 37 fractions to 20 fractions and the stereotactic service which has fewer fractions per new start but has higher complexity.
- The percentage of treatment delivered with VMAT marginally increased again from 2017 to 76.6% which demonstrates that the adoption of VMAT treatment techniques for breast patients and lung cancer patients in 2016 is consistent. The increased complexity of the VMAT technique impacts both treatment planning and treatment delivery with longer time required for both.

Objectives for 2019

Developments and Specialist Services in 2018

- The stereotactic ablative body radiotherapy (SABR) programme in the St James' Centre (SJC), treating patients with early stage (usually medically inoperable) lung cancer, operational since 2014, continues to accept referrals from centres nationally who cannot provide the service. During 2018, the centre in SJC supported the expansion of the lung stereotactic service to the Rathgar department. Numbers for SJC dropped slightly for 2018 but when numbers treated in Rathgar are included the service numbers remain consistent with the rise seen in 2017. We also introduced motion management techniques in the SJC site for centrally located lung tumours during 2018. This has allowed us to treat some tumours that previously were referred to private centres for stereotactic treatment.
- Total body irradiation continues and in 2018 there was a small increase in patient numbers from 17 patients treated (89 fractions delivered) in 2017 to 20 patients (124 fractions delivered) with predominantly fractionated techniques.
- 2018 has seen the continued use of deep inspiration breath-hold for breast and lymphoma patients which aims to reduce the heart and lung doses received from the treatment.
- Radiation Oncologist Dr Naomi Lavan was appointed.

Cancer Clinical Trials:

- The percentage of patients who are enrolled onto cancer clinical trials is approximately 2%. This is in keeping with the national average.
- We created a set of Standard Operating Procedures (SOPs) for all the major processes that we undertake within our unit. These SOPs are available on the SJH intranet for reference.
- We opened our first joint clinical trial with St Luke's Hospital in Rathgar. This trial involves administering chemoradiotherapy +/- immunotherapy to patients with Head and Neck Cancer. We enrolled three patients to this trial.
- We opened our first trial involving the Nuclear Medicine Department in SJH. This trial involves administering a form of radio immunotherapy to patients with relapsed non-Hodgkins Lymphoma.

JACIE:

- No key findings were identified during the inspection that took place in November 2018. The initial inspection report has been completed by the inspectors and this report is currently awaiting review by the JACIE Accreditation Committee. The final inspection report is expected to be available in April 2019. Upon receipt of this report findings and recommendations will be shared with the CEO, QSID and the Hospital Board.

OECI:

- An OECI site visit occurred in October 2018. All those involved in cancer services continue to engage in preparation for the OECI inspection which is scheduled for April 2019.

NCIS:

- St James's Hospital continues to work with the NCCP to be included in phase 1 implementation of a National Clinical Information System (NCIS).

Trinity St James's Cancer Institute:

- The HOPE directorate will continue to work with the Trinity St James's Cancer Institute planning office.

Haematology:

- The HOPE Directorate has developed a Foundation course in Haematology and Cancer Care which will commence in the first quarter 2019.
- Expand inpatient/outpatient capacity for Stem Cell Transplantation.
- Establish dedicated ambulatory care space for the Haemoglobinopathies service.

NCC:

- New clinic initiatives were looked at to reduce waiting lists. Nurse-led clinics and telephone clinics are to commence September 2019.
- Establishment of ANP position for NCC.

Cancer Genetics:

- Establishment of educational links with Cardiff University by becoming the official host partner for this specialised MSc mandatory student placement programme.
- Appointment of third Genetics Counsellor and Consultant Geneticist to service.

Clinical Trials

- The aim over the next five years is to increase that percentage year-on-year from 2% to 8%. This will involve widening our PI (Principal Investigator) base, conducting a gap analysis of the portfolio and filling the gap ensuring that we have a 1st and 2nd line trial in all disease areas. With outside investment we would employ additional staff to allow this expansion, one such key position being a full-time research registrar.
- In 2018, we became a member of the Hovon Group, a Dutch research group specialising in malignant haematological diseases. We now have access to some very interesting haematology trials which we plan to open in 2019.

Conclusion

The HOPe Directorate continues to meet growing demands on its services while capacity still represents an on-going challenge for the directorate.

Staffing deficits in nursing, and the allied health professionals; dieticians, physiotherapy, speech and language therapists continue to be a significant challenge.

2018 saw reconfiguration of our Day Ward with the opening of an additional patient administration/ admissions office known as the 'Green Room'. This office was opened specifically to look after patients attending for treatment. The aim of this was to improve patient flow as well as separate the clinic and treatment areas of HODC. It has proved successful in improving patient flow and has proved a positive change for patients and staff.

Appointments and retirements

- Deirdre Walsh was appointed permanent Centre Manager of the NCC in October 2018
 - Marie Hughes retired after 20 years' service in the NCC in March 2018
 - Dr Niamh O'Connell was appointed Medical Director of the National Coagulation Centre in June 2018.
 - Dr Barry Kevane was appointment Locum Consultant in July 2018.
 - Victoria Graham and Emma Hayes resigned from posts in the directorate at the end of 2018 after many years' service.
 - Catherine O'Brien was appointed as registered advanced nurse practitioner RANP in Cancer Survivorship in July 2018.
 - Mr Rory Wilkinson was appointed as registered advanced nurse practitioner (RANP) in Palliative Care in 2018.
 - Carmel-Ann Galligan was appointed as haematology CNS in June 2018.
 - Kathryn Kiely retired as Medical Secretary in Haematology after many years' service in the hospital.
 - Niamh White was appointed as Genetics Counsellor in January 2018.
 - Catherine Stafford was appointed as Medical Secretary to the Cancer Genetics Service in November 2018.
-

4.2 Medicine for the Elderly (MedEL)

Medicine for the Elderly, (MedEL), forms a distinct directorate within the management structure of St James's Hospital, providing a very comprehensive range of clinical services for elderly patients. The aim of the directorate is to provide optimum patient care with maximum efficiency and effective use of resources.

Mercer's Institute for Successful Ageing (MISA) is a state-of-the art facility for integrated clinical services and is a hub for world-leading research in ageing. Two years after the opening of MISA, the extra and improved facilities available have strengthened our capacity to deliver a broader and more comprehensive service for our patients.

MISA rests on four pillars – Clinical Care, Research and Development, Education and Training and the Creative Life Programme

Performance highlights in 2018:

- **Home FIRsT Initiative** – The Home FIRsT community outreach team training took place in March 2018. The workshop aimed to enable a multidisciplinary clinical audience to develop their knowledge on whole systems approach to older persons care and, understanding and manage frailty syndromes in the emergency, acute and community settings.
- **The Bone Health Unit** continued to focus on service development and service improvement
- **Mercers Institute for Research on Ageing** continues as a hub for world breaking research in Ageing.
- **TILDA-** has now released its report on the analysis of data collected in Wave 4.
- **The Training and Development Pillar** continued to expand in 2018 with a comprehensive programme of events which promotes professional healthcare training in ageing at all levels.
- **The Creative Life Programme** has blossomed into an integral component of engagement and creativities not just within MISA, but the Hospital as a whole.

- **The DSIDC** hosted their 8th Annual Memory Clinic Conference on "Strategies for Preventing Dementia" on June 8th at the Trinity Biomedical Sciences Institute.

In 2018 Professor Brian Lawlor stepped down as Director of the Memory Clinic after a long and distinguished tenure. He has been succeeded in his role as Director by Dr David Robinson.

In October 2018, Dr Roman Romero-Ortuno was appointed as an Associate Professor in Medical Gerontology.

Objectives 2019:

- Expansion of the Falls and Syncope Unit to develop a clinical model for the Emergency Department
- Parkinson's Service – establish a new Parkinson's clinic which will offer a multidisciplinary approach, with regular assessment.
- Further expansion of the MISA Training and Development Unit
- Glanbia Bone Health Research Study to commence in 2019



The Medical and Emergency Directorate (MED) comprises all internal medicine specialties. It is organised into four administrative pillars; Acute Floor, Inpatient Care, Day Procedures and Ambulatory Care. Its mission is to provide the best care for all patients based on safety, clinical excellence and the patient experience. The agreed management process is a clinically-led cycle for continuous improvement.

The focus of the MED Directorate is on optimal acute and ambulatory care for all patients in the following specialties; Emergency Medicine, Acute and Internal Medicine, Cardiology, Dermatology, Endocrinology, Endoscopy, Gastroenterology and Hepatology, Clinical Immunology, GU Medicine and Infectious Diseases, Ophthalmology, Nephrology, Neurology and Clinical Neurophysiology, Respiratory Medicine and the Respiratory Assessment Unit and Rheumatology.

Performance highlights and 2019 objectives

The MED Directorate has continued to innovate and seek creative solutions to important clinical problems over the past year whilst maintaining high clinical standards in an environment of increasing demand. In common with other areas in the health service, MED has seen an increase in activity in all key areas within a static physical footprint and bed base.



EMERGENCY DEPARTMENT ACTIVITY GREW BY 2.2% AND ADMISSIONS INCREASED BY 1.7% COMPARED TO 2017.

In addition, there was an increase in CMI for admitted patients reflecting the increasing complexity one encounters in an ageing demographic.

THE NUMBER OF OUTPATIENT ENCOUNTERS GREW BY 4.8% AND NOW SITS AT JUST UNDER 150,000 PER ANNUM.

A key challenge will be to create a solution to the incessant growth in acute unscheduled presentations that delivers within an ambulatory care environment. The Directorate has successfully innovated in this space before with success in the epilepsy service, chest pain evaluation and respiratory assessment.

For example, the epilepsy service has achieved considerable reductions in hospital admissions and have deployed novel approaches such as 'Virtual Clinics' which have proved effective and acceptable to patients.

The Medical Ambulatory Care Suite (MACS) opened in July 2017 and is proving to be a very effective resource. This 6-bay facility enables the consolidation of multiple medical interventions to locate in a dedicated unit. It also provides a dedicated facility for medical procedures to avoid unnecessary inpatient admissions or to support an earlier patient discharge with follow up in MACS. In 2018, MACS activity delivered a bed day saving of 689. In 2019, we plan to expand this function and anticipate creating an additional three bays. 2019 will also see the launch of the narcolepsy service with the recruitment of key staff in neurology and respiratory medicine.

Key Staff changes 2018:

- Prof. Louise Barnes, SJH Medical Director and Consultant Dermatologist retired and Dr Bairbre Wynne was appointed as a full time consultant, replacing Prof. Barnes
- Ms. Sharon Slattery, ADoN Ambulatory Care appointed SJH Director of Nursing
- Anita Cafolla appointed as Dermatology NCCP Data Manager
- Dr Colin Doherty, Consultant Neurologist & National Clinical lead for Epilepsy secondment to RCSI PISCES project
- Dr Siobhan Hutchinson appointed permanent part-time
- Ms. Orla Gavin appointed Respiratory Physiologist



sysmex

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HEK-DPLS-132

WELL
HEALTH
CARE

SN: 12953
HEK-DPLS-132

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Keyboard with a ring on the left hand.

Surgery, Anaesthesia and Critical Care (SACC)

The Surgery Anaesthesia and Critical Care Directorate, (SACC), provides a range of services and specialties at a local, regional and national level. SACC's mission is to provide safe, timely and personal care to all patients.

Services provided are Anaesthesia and Pre-assessment, Breast Care, Cardiothoracic Surgery, Critical Care, Upper and Lower Gastrointestinal and Colorectal Surgery to include General Surgery, Gynaecology, Oral and Maxillofacial Surgery, Orthodontics, Prosthodontics and Cleft ambulatory care, Orthopaedics, Otolaryngology, Plastics, Reconstructive and Burn Surgery, Acute and Chronic Pain Management, Vascular Surgery and Urology.

SACC is also responsible for the Hospital Sterile Supplies Unit (HSSU).

Key highlights for 2018

The SACC Directorate experienced significant challenges during 2018. Theatre access continued to be an issue due to the difficulty in staff retention and recruitment which led to continued theatre closures. Human Resources, the directorate team and Senior Nursing team carried out several recruitment drives which included an overseas recruitment initiative, and an open day, both of which proved very successful. Continued nursing recruitment is to remain a key priority within the directorate to prevent further theatre closures.

Day of Surgery Admission (DOSA) continued to be a priority for the directorate, and following the construction of the new DOSA area within the existing theatre complex, DOSA was rolled out to include the following specialties:

- Colorectal Surgery
- Upper GI surgery
- Breastcare
- Urology

It is also important to recognise the contribution and dedicated service made by Dr Jeanne Moriarty to both the Hospital, and to the SACC Directorate. Dr Moriarty retired from her role as Consultant Anaesthetist and the directorates Clinical Director. We would like to thank Dr Moriarty and wish her well in her retirement and any future endeavours.

Key objectives for 2019

- Improve theatre access through recruitment and retention of staff to prevent the need for theatre closures. Once complete, improve efficiencies within that theatre complex.
- Seek alternative theatre capacity off-site with support of the Hospital group.
- Continue the roll out of pre-assessment and expansion of DOSA to encompass a wider group of specialties.
- Continue to pursue funding for enhanced SCOPE services for the Head and Neck and GI Cancer programmes.
- Pursue funding for additional consultant posts in Anaesthesia, Pain Medicine, Gynae-Oncology, Gastro-Intestinal, and Prosthodontics Surgery.
- Improve access in the Day Surgery Centre.
- Secure funding for a robot to deliver robotic surgery across a number of specialties.



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St. James's Hospital



sjh St. James's Hospital ✓
@stjamesdublin



Oct 2018



Home



Moments



Notifications



Messages

4.5 Laboratory Medicine (LabMed)

The Laboratory Medicine (LabMed) Directorate is a fully accredited service.

It comprises the clinical laboratory disciplines of Biochemistry (including Point of Care Testing), Cancer Molecular Diagnostics, Haematology (incorporating the National Coagulation Laboratory and Cryobiology), Histopathology (incorporating Cytopathology), Immunology, The Irish Mycobacteria Reference Laboratory (IMRL), Microbiology (incorporating Virology and Infection Prevention and Control), The Sexual Transmitted Bacterial Reference Laboratory, the National MRSA Reference Laboratory (NMRSARL), Phlebotomy and Transfusion Medicine (incorporating Haemovigilance).

Performance highlights of 2018

All laboratory departments were successful in retaining their accreditation status to ISO 15189:2012 (Medical Laboratories: Requirements for Quality and Competence) in 2018/2019 for another five year cycle (2019-2024). The whole directorate is assessed on an annual basis by the Irish National Accreditation Board for continuing compliance with this international standard. The 2018 assessment report particularly highlighted the very large repertoire of laboratory investigations that contributes to patient care, the quality and commitment of the staff and the integrated Quality Management System across all departments. The cryobiology laboratory is licensed by the Health Protection Regulatory Authority and has retained its licence in 2018 following its bi-annual inspection.

The directorate's workload is rising year on year, averaging at 3% in overall figures leading to a total test volume of just under 10 million in 2018. The rise is more significant in tests of a complex nature, particularly in the molecular diagnostic area, varying across departments from 12-25%.

Laboratory staff have been very involved in the development of the National Medical Laboratory Information System (MedLIS) project with five of its staff seconded to the national project team as discipline specific leads. Three staff members are on the National MedLIS Project Board, which meets monthly. In addition, the Hospital has a project steering committee, a hospital implementation team and a laboratory implementation team. This is a five year project, which is quite complex from a national perspective and is ongoing. The expected hyphenate go live for SJH is Q1, 2021. The overall goal of

the project is the creation of a national laboratory record for patients that will enhance patient care by ensuring clinicians have access to the whole patient's laboratory record when treating a patient.

Some specific developments in the laboratory services in 2018 include:

The Haematology Department experienced the continued expansion of the haemoglobinopathy service for adults since its establishment at St James's in 2015. Similarly, the Blood Transfusion Department experienced a significant workload increase with the expansion of the haemoglobinopathy service – not only showing an increase in red cell transfusions (+4%) but also an increase in complex serology issues (+28%). The department is continuously developing expertise to meet these increasing demands. In addition, there was a reconfiguration of equipment infrastructure in cell counting to enhance throughput and resilience.

The Microbiology department was designated as the Interim National Gonococcal Reference Laboratory providing a reference laboratory function for sexual transmitted infection (STI) diagnostics and monitoring of antimicrobial resistance in *N. gonorrhoea* in 2017, this has been extended into 2018, making a total of three reference laboratories within the Microbiology Department domain, IMRL, NMRSARL and the GCRL.

The department also introduced a number of new tests and improvements in 2018 that include:

- *Mycoplasma genitalium*: Development of a new in-house molecular assay for the detection and resistance testing of *Mycoplasma genitalium*.

- CPE: Improvements to the testing for CPE with the introduction of new routine molecular assay for CPE detection from screening swabs, new isolation media and confirmatory test thereby enabling the rapid detection CPE from large volumes of samples with a faster turnaround time.
- Irish Mycobacteria Reference Lab (IMRL): Addition of the GenoType NTM-DR assay to the suite of molecular assays to confirm the presence of M.chimaera in mycobacterial cultures.

The Immunology Laboratory

The Immunology laboratory has a proven track record of delivering translational research projects to the levels of INAB accredited medical laboratory diagnostic tests. New test modalities have been developed, in conjunction with specialist clinicians, with the aim of providing a unique National Immunology Service. Translational research projects undertaken with MISA, Neurology, Respiratory, Rheumatology Departments and paediatric Allergy & Immunology specialists in CHI have added to our repertoire. Between 2016 and 2018 eleven new tests have been awarded ISO 15189 Accreditation status. These tests cover a range of disorders including Primary Immunodeficiency, Neuro-degeneration, Autoimmune Encephalopathy and general Autoimmunity. The Immunology Department at St James's is the only national centre providing many of these tests. The services provided to users generated income and savings in 2017/8 which will be projected to increase in 2019.

Some specific developments over the past two years include:

Primary Immunodeficiency Diagnosis: Extended lymphocyte immunophenotyping panels (2016) and lymphocyte proliferation (2018).

Neurology: Alzheimer's disease biomarkers (2016), NMDA (N-methyl D-aspartate) Receptor antibody (2017), Paraneoplastic antibody screening by immunofluorescence and confirmation by immunoblotting (2017). Autoimmune-Encephalopathy 6-Mosaic panel submitted to INAB for inclusion in scope (2019)

Autoimmunity/Respiratory/: Interferon Gamma Release Assay for latent TB (2016), Immunoblots for poly-myositis/dermatomyositis (2017) and liver disease (2018), HLA-B27 by flow cytometry (2018), CTD and Centromere on EliA replacing Anti-nuclear antibody testing (2018).

The Cancer Molecular Diagnostics Laboratory (CMD)

has seen a continued development of molecular cancer services. The laboratory has received support to commence TP53 testing as a national service via the National Cancer Control Programme. Additionally, the laboratory has taken steps to manage its growing workload by implementing process automation of cancer DNA sequencing. At the end of 2017, CMD received part funding for the purchase of a robotics for cancer DNA analysis through Target Lung Cancer and the St James's Hospital Foundation. This automated platform will allow the laboratory to continue to add emerging molecular assays to its repertoire.

Histopathology Department

The histopathology service has seen an increase in growth in 2018 (total sample numbers up by 5%) relative to 2017. Histology workload is consistently higher than the average workload of the other 7 cancer centres in Ireland throughout the year and cytology workload is consistently above all other Irish hospitals for both Non-gynaecology FNA and Non-gynaecology exfoliative requests. Workload increases have affected all domains throughout the histology laboratory especially in the areas of immunohistochemistry, ISH and molecular FISH testing reflecting changing clinical demands.

Objectives for 2019

1. Continued internal reconfiguration of space to enhance service developments, such as, the creation of a Mycology laboratory and enhancement of a seminar room in microbiology
2. Expansion of Cancer Molecular Diagnostic repertoire and facilities. Specifically, the transfer of these facilities to the Trinity Translational Medicine Institute on the SJH campus, which will increase their footprint significantly
3. Development of a Biobank with Trinity College Dublin and BioBank Ireland Trust in line with best international standards
4. Progress Equipment Management Programme for Histopathology based on the decision to develop a new way of process management and the acquisition of new technology to support these new developments
5. Enhance and develop infrastructure to support service needs. This includes equipment and facilities and engaging in tenders for new or replacement equipment
6. Supporting staff needs and develop HR strategies for recruitment and retention of staff. With particular difficulties in recruitment and retention of scientific staff a coordinated approach with HR will be pursued.

4.6 Diagnostic Imaging (DiagIm)

The DiagIm Directorate provides a diagnostic imaging service to the patients and clinicians of St James's Hospital. Imaging services provided include CT, MRI, ultrasound, breast imaging, nuclear medicine, PET/CT, interventional radiology and general X-ray. A service is also provided to GP's in the catchment area as well as tertiary care to hospitals outside the catchment area. A radiographic service is provided to the Cardiac Cath Lab, Endovascular Suite, Endoscopy, DXA and Theatres. The provision of education and training is a key function of the Directorate. A training programme for specialist radiology registrars is delivered in addition to on-going clinical training of undergraduate and postgraduate radiography students.

Performance highlights in 2018

The demand for diagnostic imaging services, in particular CT, MRI, ultrasound, mammography and PET/CT continued to increase in 2018. The Directorate aims to provide timely patient access to all diagnostic imaging services provided. There was a continued focus on improving our wait times for all procedures in 2018.

The overall activity of the department increased by 3%, with a 23% increase in CT. Reduced activity in

mammography can be attributed to equipment downtime during equipment replacement in 2018.

Radiographer staffing improved significantly in 2018 with a return to normal staffing levels. The national shortage of radiographers contributed to an increased level of radiographer vacancies in 2017. The Directorate undertook overseas recruitment of radiographers to fill vacant positions and the majority of positions were filled by August 2018.

Comparable Activity Analysis by Modalities

Imaging Modality	2017	2018	Variance
General Radiology + Max Fax	114,186	114,116	0%
G.I.	744	852	15%
Mammography	8,137	7,507	-8%
Ultrasound	21,612	20,880	-3%
C.T.	30,657	37,641	23%
Interventional Radiology: Therapeutic	3,089	3,015	-2%
Interventional Radiology: Diagnostic	364	354	-3%
Nuclear Medicine	4,912	4,833	-2%
M.R.I	10,897	10,395	-5%
PET/CT	3,219	3,211	0%
TOTALS	197,817	202,804	3%

Breast imaging expansion

The demand for routine breast imaging (mammography and ultrasound) has risen significantly in recent years.

During 2018 expansion of the Breast Imaging Department was undertaken to provide additional mammography capacity. A 3rd mammography unit was installed and an existing mammography unit was



Mammography Unit Installed in 2018

replaced. The Breast Imaging Department was reconfigured to provide an additional mammography room. The department was also redesigned to improve patient comfort and privacy with a separate entrance and a dedicated breast imaging waiting room and reception area. It is expected that with the completion of these works by the end of 2018 that increased mammography activity will be achieved in 2019.



Breast Imaging Reception and Waiting Room

Expansion of CT services

The demand for CT services continues to increase per annum. In 2018, CT activity increased by 23% which can be attributed to the installation of a 3rd CT scanner adjacent to the Emergency Department in late 2017. During 2018, one of the older existing CT scanners experiencing regular downtime was also replaced. In 2018, the radiographers CT on-call service moved on-site for weekdays providing improved inpatient CT access for out of hours' emergencies. Other opportunities to increase CT capacity in 2019 will be explored.

New appointments

Dr Mark Knox joined our Department in August 2018. Mark graduated with honours from Trinity College Dublin in 2004. Following internship and two years of basic surgical training he commenced radiology specialty training at St James's Hospital in 2007. After completing his training in St James's he undertook a year of specialist training in Breast Imaging in the Mater Misericordiae University Hospital and BreastCheck. Following fellowships in Body MRI and Breast and Gynaecological Imaging in Beth Israel Deaconess Medical Centre, Boston, Mark returned to St James's in a locum consultant position. He took up a permanent consultant position in Mater Misericordiae University Hospital and BreastCheck in 2016, before returning to take up a consultant appointment at St James's Hospital in 2018,

specialising in Breast Imaging and Abdominal and Pelvic Oncological Imaging.

In 2018, Sharon Buckley was appointed to the position of Directorate Business Administrator. There were three appointments to Clinical Specialist Radiographer grade: John Ebenazer (Endovascular), Ailbhe Broderick (MRI Radiation Oncology) and Jennifer Thurman (CAMI MR).

Other 2018 highlights

Dr Niall Sheehy was appointed Dean of the Faculty of Radiologists. Dr Sheehy also completed his 2nd term as Clinical Director of the Diaglm Directorate.

During 2018 radiographers at St James's Hospital successfully completed the MSc in Medical Imaging programmes at Trinity College Dublin. In 2018, the fourth class of radiographers from the joint one year honours degree course in Diagnostic Radiography at Trinity College Dublin and Singapore Institute of Technology graduated. The Directorate facilitated the clinical placements of students during the overseas immersion programme in Dublin.

The St James's Radiographers' Education Group also facilitated the following skills courses:

- Radiation protection for Non-Radiology Medical Practitioners and Hospital Personnel
- IV skills training for radiographers

5.1

Speech and Language Therapy, Medical Social Work, Clinical Nutrition, Occupational Therapy, Physiotherapy (SCOPE)

SCOPE HSCP Directorate comprises of five departments; Speech and Language, Medical Social Work, Clinical Nutrition, Occupational Therapy and Physiotherapy. SCOPE provides a multidisciplinary client-centred holistic inpatient and outpatient service to enhance client independence and quality of life in keeping with best practice. Currently there are 179.79WTE Health & Social Care Professionals, 10.45WTE Clerical/Admin and 10.70WTE Attendants.

Performance highlights in 2018

SCOPE

- With 26% staff turnover in 2018, SCOPE managed to maintain high standard of care and activity during a very challenging year.

Clinical Nutrition

- Staff trained in Nutrition Focused Physical Examination (NFPE), informing malnutrition diagnosis.
- Senior dietitian position in gynae-oncology surgery secured.
- With Catering, a new hospital menu was created including nutritional analysis of all menu options.
- A sustainable nutrition and quality of life clinic for patients was established in oesophageal cancer survivorship.

Medical Social Workers

- Refurbishment of the main Social Work Department.
- Quality improvement for homeless patients by providing essential clothing to ensure dignity and enabling timely discharge.
- Leading Children First implementation by delivering training to line managers and devising policies and procedures as guidance for staff.

Occupational Therapy (OT)

- A Clinical Specialist post funded by the National Treatment Purchase Fund was established to assess and treat elective orthopaedic out-patients.
- Clinical Specialist OT commenced a service for people with Carpal Tunnel Syndrome, thereby reducing waiting times.



OT DEPARTMENT WAS AWARDED A NATIONAL DEMENTIA OFFICE GRANT (€25,000) FOR THE SMART (SPECIALISED MEMORY AND ATTENTION REHABILITATION THERAPY) COGNITIVE REHABILITATION PROGRAMME.

Physiotherapy

- Proactive in developing inpatient flow via implementation of: End PJ paralysis: Red to Green: Winter planning: MDT attendance & development of new MDTs.
- Innovative pathways of care for patients have been developed:
 - Prehabilitation for major cancer surgery patients.
 - Emergency Department for those attending with back pain.
 - Back pain clinic with support of orthopaedics to see long waiters from outpatient consultant lists.

Speech & Language Therapy (SLT)

- Funding received to replace the videofluoroscopy viewing equipment and software, greatly enhancing efficiency for accurate and timely reporting.
- Department received a new Rhino-laryngo-videoscope for SLT therapy led FEES clinics to assist SLT in assessment of oropharyngeal dysphagia.

2019 Objectives

SCOPE

- Pilot seven-day service for all disciplines during the winter months to improve patient flow and discharges.
- Expand HSCPs scope of practice to improve access and wait times.

Clinical Nutrition

- Embed Irritable Bowel Syndrome interdisciplinary care pathway to eliminate unnecessary invasive investigations and allow reallocation of finite endoscopy resources.
- Initiation of interdisciplinary Intestinal Failure service.
- Secure temporary dietetic post approved to optimise nutritional management of head and neck cancer surgery patients.

Medical Social Work

- Pilot site in conjunction with Mater Misericordiae University Hospital for roll out of Inclusion Health Service with new Senior Social Work Post to improve health outcomes for homeless patients
- Improve processes for the nursing home support scheme (NHSS) as part of a lean project in the hospital.

Occupational Therapy

- Balance the challenges of staff attrition with the maintenance of service development and high-quality service provision.
- Continue the delivery of responsive efficient service focussed on facilitating hospital flow.
- Address areas where service is provided in the absence of dedicated funded resources.

Physiotherapy

- Continue to develop role in patient flow within the hospital, seven days a week.
- Develop a physiotherapy gynae-oncology service.

Speech & Language Therapy

- Enhance SLT service in Head/Neck surgery specialty area, with the appointment of an additional Senior SLT.
- Support SLT community colleagues through collaboration/education, attendance at OPD videofluoroscopy / FEES clinics and departmental in-service sessions.

Awards

SCOPE QI ICT group received a highly commended award for their implementation of Electronic Paper Record at the National HSCP awards.

Senior Physiotherapist Grainne Kerr was recognised at the 2018 HSE Health Service Excellence Awards for her work by winning an Outstanding Employee Award. Grainne was also voted "Best Individual Campaigner" in the #endpjaralysis 70 Day Challenge Awards which were held across all of the UK & Ireland. Clinical Specialist Physiotherapist Yvonne Burke was invited to a HSE Excellence Awards showcase with her pilot project; The role of the Advanced Practice Physiotherapist working in the Emergency Department.

5.2 Pharmacy

The Pharmacy Department works as an integral part of the multi-disciplinary team and provides a pharmacy service that optimises patient outcomes through the safe, judicious, clinically effective, appropriate and cost effective use of medicines.

We source and procure, clinically review, dispense and distribute medicines and selected non-medicinal products within the Hospital. A full suite of pharmaceutical services is provided to the hospital and its patients. These include Pharmacy Procurement, Medicines Management, Clinical Pharmacy Services including specialist HOPE and GUIDe, Clinical Pharmacy Services and Aseptic Compounding services (ACU).

A pharmacy outpatient service is provided to TB patients and GUIDe patients. We provide pharmaceutical services, both products and staff to St Luke's Hospital, Rathgar. Both pharmacies are registered with the Pharmaceutical Society of Ireland, under the Pharmacy Act. The Pharmacy department actively contributes to the education of nursing, medical and pharmacy staff within the hospital and at undergraduate level.

Performance highlights in 2018

Electronic prescribing was implemented for inpatients in 2018. The EPMAR medications team was led by the Chief 2 Pharmacist Clinical Services with support from two dedicated senior pharmacists. A huge body of work was completed that included:



47,000 MEDICATION ORDERABLES REVIEWED AND CONFIGURED

- 14,000 order sentences
- 175 IV infusion sets
- 109 power plans

In addition to the work of the EPMAR Medications team, clinical pharmacists supported testing and training of the Electronic Patient Record in the lead up to go-live, October 2018. The Pharmacy team enabled medication transcription and validation of prescriptions for 862 beds over go-live weekend.

Medicines Management and ACU Services successfully continued throughout 2018 to provide:

- 915,000 packs purchased via Pharmacy Procurement Office to a value of €82 million
- 398,505 transactions processed through Medicines Management Dispensary Services.
- 25,604 items manufactured or processed through the Aseptic Compounding Unit

The Clinical Pharmacy service continued to provide medicines reconciliation on admission (an estimated 16,000 medication reconciliation episodes were completed in 2018), a clinical review of medication for inpatients, medicines information, promote cost effective use of medication and patient medication education.

A two-year cycle of review of IV drug administration monographs was completed in 2018. Electronic access to IV guidelines in the ward clinic rooms enabled paper IV guideline folders to be removed from wards, allowing efficient and timely content updates for approximately 120 IV medications.

The clinical pharmacy team also supported the introduction of a revised insulin paper drug chart. Three Medication safety audits were completed in tandem with the Medication Safety Facilitator:

- Prescribing of doses for nebulised medications
- Appropriate ward storage of Controlled Drugs
- Patient education on medications delivered by clinical pharmacists

The TCD MSc in Hospital Pharmacy was awarded Gradireland Postgraduate Course of the Year, in the Health Sciences category. The course coordinator, Niamh McMahon, who is a member of SJH Pharmacy department, also received the Dean of Health Sciences Award for Outstanding Contribution to Teaching in Professional Practice, Trinity College Dublin. Pharmacy staff in St James's Hospital are actively involved in the delivery of lectures and tutoring of MSc students.

2019 Objectives

In 2019 the department aims to build on the progress achieved in 2018:

- Utilise EPMAR to develop best in class workflows for our Clinical Pharmacy and Medicine Management services
- Expand our procurement activity, increase our expertise and harness greater value for money
- Demonstrate the quality and cost effectiveness of our clinical pharmacy service by relevant KPIs and research
- Review of Aseptic Compounding Services with a view to implementing NCIS and robotics

2018 was another exciting, challenging and busy year for the Pharmacy Department. The department met these challenges, maintained its core activity and also managed to expand services. In 2019 the department will continue to build and expand upon those achievements.



**915,000 PACKS PURCHASED VIA PHARMACY
PROCUREMENT OFFICE TO A VALUE
€82 MILLION**



National Medicines Information Centre (NMIC)

The National Medicines Information Centre (NMIC) provides independent, evidence-based information and advice to healthcare professionals throughout Ireland. The aim of the NMIC service is to promote the safe, effective and efficient use of medicines through information provision, mainly by means of a clinical enquiry answering service (CEAS) and proactive information provision through our publications; *Therapeutics Today* and the NMIC therapeutics bulletins. The NMIC team of pharmacists and doctors are trained in information retrieval and analysis and use a range of information sources including specialist texts, information databases and primary journals. Both NMIC publications are available on our website (www.nmic.ie) and are distributed nationally to healthcare professionals. The NMIC also has an educational role in promoting the safe and effective use of medicines. This is demonstrated through our involvement in teaching medical and pharmacy undergraduate and postgraduate students, GP trainees, NCHDs, GPs etc.

Performance highlights and 2019 objectives

2018 was a busy and productive year in the NMIC. We continued to provide information support to healthcare professionals to assist them in the management of patients with increasingly complex pharmaceutical needs. Some key performance highlights include:

- Over 78% of enquiries to our Clinical Enquiry Answering Service (CEAS) originated in primary care.



OVER 99% OF ENQUIRIES TO OUR CEAS WERE PATIENT-CENTRED.

- Information and advice was most commonly requested about the choice of therapy, drug interactions, dose and adverse drug reactions

Monthly user satisfaction surveys indicate a high level of confidence in the quality of the information provided via the NMIC CEAS. In 2018, 100% of respondents stated that they would use service again.

Building on the findings of our monthly user survey, an audit of all users of the NMIC CEAS over a 3 month period was undertaken in 2018 to examine the impact of information provided by the CEAS on patient care and outcomes. Positive responses were found in terms of

NMIC advice resolving the therapeutic issue and/or optimising patient care, minimising medication safety risk, supporting rational prescribing and saving time for busy healthcare professionals.

Education and training sessions on therapeutics delivered to GP trainees, undergraduate and postgraduate pharmacy, medical and dental students (TCD) and final year medical students (UCD).

Continued collaboration with, and support to organisations, such as the Department of Health, HPRA, HSE Medicines Management Programme, ICGP, HSE and RCPI.

Ongoing contribution to the work of the SJH Pharmacy & Therapeutics, Medication Safety, and New Drugs committees.

NMIC joined Twitter in November 2018.

Staff changes:

Dr Mary Teeling (Medical Adviser) retired. Alma Hanevy (Senior Pharmacist) left the NMIC team and Tara Glynn (Senior Pharmacist) joined the NMIC team.

For 2019:

We will endeavour to continue to provide a high quality service that remains patient-focused and responsive to the needs of our users.

Further engagement with the GP training programmes/ GP faculties nationwide to increase awareness of the NMIC as an important resource to support GPs in their everyday practice.

The Wellcome – HRB Clinical Research Facility (CRF) at St James’s Hospital supports Trinity College (TCD) and St James’s Hospital based investigators conducting clinical research with patients of the hospital. This is accomplished by providing access to a purpose built facility, equipment and specialist services that enable high quality clinical research to take place.

The CRF is funded by the Health Research Board and is jointly governed by the hospital and TCD. The CRF is a clinical area and includes clinical assessment rooms, an exercise physiology room, an electrophysiology suite, isolation rooms, a six-bed day ward, a dispensary and aseptic compounding suite and a sample processing laboratory. The services provided by the CRF include advice on the preparation of protocols and funding applications, contract negotiations, research pharmacy, research nursing, regulatory affairs advice and sample processing.

The CRF is open to a wide range of research, which includes experimental medicine and early phase clinical trials, Phase III clinical trials, studies involving exercise physiology/physiotherapy and electrophysiology studies.

Performance highlights 2018 and 2019 objectives

During 2018, there were a number of key operational and strategic developments for the CRF.

The CRF demonstrated continued growth in the number of studies supported and the number of patients attending the CRF:

- Number of studies open to patient recruitment within the CRF – 82
- Number of applications by investigators to use the CRF – 31
- Number of St James’s specialties/sub-specialties using the CRF – 26
- Number of study participant visits – 4,203
- Support provided to investigators making grant applications – 21

Notable studies in set up phase within 2018 include a gene therapy study for haemophilia Factor IX deficiency. This will involve the development of a gene therapy suite within the CRF – ensuring seamless delivery of product to the patient. This experimental treatment is now in Phase 3 development, similar studies within this patient population demonstrates extremely positive results. The CRF also have two rare disease clinical trials in set up phase in haematology and immunology.

In 2018, the CRF also launched its first call for research clinics to take place within the CRF. The purpose of the research clinics is to support clinicians in characterising their patient cohorts.

In terms of clinical trial sponsorship, TCD received its first application for a investigator led clinical trial.

The main clinical areas the CRF are currently involved include gastroenterology, hepatology, infectious diseases, haemophilia, intensive care, stroke care, oesophageal cancer, dermatology and psychiatry. The CRF has an open access policy and other clinical specialities along with allied health care professionals are encouraged to use the CRF.

In 2019, the CRF will continue expanding its levels of activity and, together with the hospital’s Research and Innovation Office, will focus on streamlining the administration of clinical research for investigators based at St James’s Hospital. There are plans for a gene therapy suite, the appointment of a Sponsorship Quality and regulatory affairs manager.

5.5 Research and Innovation (R&I) Office

The Research and Innovation (R&I) Office, formerly the R&D Hub, is a joint venture between the hospital and the Wellcome-HRB Clinical Research Facility (CRF). It entered its fourth year of operation in 2018, and acts to maintain oversight of hospital-based research activity, in addition to working to support and strengthen the research culture on campus.

An online R&I Research Application Form must be completed and submitted for review before starting any study, and applies to all forms of research and quality improvement projects. Support is provided in a “sign-posting” capacity, and includes guidance on local procedures and the local resources that are available, in addition to assistance with study classification, and clarification of any associated documentation or further approvals required.

A guidance document is available on the R&I Office webpage on the inter- and intra-net, explaining how to make an R&I application, and a number of document templates are also located there e.g. Ethics Application Form, Site Specific Agreement Form, Nursing Research Access Study Protocol, etc.. A Steering Group meets regularly, jointly chaired by Ann Dalton (SJH Deputy CEO) and Professor Martina Hennessey (CRF Director), to action a number of projects to enable and enhance research capacity, output and quality.

Performance highlights 2018 and 2019 objectives

There were 225 studies registered with the R&I Office in 2018, maintaining the number from 2017. The project types included Clinical Audit/Audit (35%), Clinical Research Studies - including diagnostics or an intervention (24%), Clinical Trials / Drug Trials (9%), Quality Improvement Studies (8%), Nursing Studies (6%), Patient Focus Groups / Surveys (4%), Epidemiological study (3%) and Other (12%).

The Financial Governance Working Group was the first established working group to come from, ‘The St James’s Hospital Research Governance and Support Framework 2017 – 2019’. The main output from this group was the development of a Finance Discussion Document, which reviewed the funding and finance arrangements with regard to clinical research, and addressed the challenges of appropriately funding research while sustaining the research environment and infrastructure. It specifically presents a collaborative approach to research related financial administration and to address financial governance difficulties posed by current practices and arrangements. This document will be tabled at the first R&I Steering Group meeting of 2019.

The introduction of the General Data Protection Regulation (GDPR) and subsequent Health Research Regulations in 2018 had a significant impact on clinical research. The R&I Office worked together with the Legal

and Insurance Office to ensure research conducted in SJH complies with the regulations. A Data Protection Impact Assessment form was introduced as part of the R&I application process; it is completed by researchers and involves documenting the types of personal data processing required as part of the project. It allows for the identification of data-related risks and the introduction of risk mitigation methods. The R&I application form will be updated in 2019 to incorporate the new legislative requirements and to assist applicants in correctly categorising their projects.

Looking ahead to 2019, the R&I Office will focus on the following objectives:

- To continue to implement the objectives of the Hospital Research Governance and Support Framework.
- To build upon the work that has commenced on ensuring compliance with data protection legislation impacting research.
- To strengthen communication within the research community in SJH.
- To develop links with the TUH/SJH Joint Research Ethics Committee.

The R&I Office Programme Manager, Declan O’Hanlon, who had been in post since the establishment of the office, departed in December of 2018. Claire Temple, who has previously worked as pharmacist for the SJH Cancer Clinical Trials Office was appointed as R&I Programme Manager in December 2018 and will take up the role in January 2019.



6.1 Quality and Safety Improvement (QSID)

The Quality and Safety Improvement Directorate (QSID) exists to help front-line and supporting services provide patient care that is safe, high-quality and person-centred. QSID teams' work includes patient safety and risk management, quality assurance, supporting effective governance, promoting person-centred care, responding to patient and family feedback on behalf of the hospital and helping staff develop and apply quality improvement knowledge and skills. QSID aims to support and enable all services in the Hospital in the effective implementation of the National Standards for Safer Better Healthcare (2012) and other national standards and guidelines relevant to their area.

Performance highlights and next year's objectives

Safe Care and Support

Safety Managers review all events reported on the Hospital's incident management system using an international rating matrix. A new suite of systems reviews has been employed using evidence-based approaches to ensure patients receive a full understanding of the factors contributing to events which resulted in harm. A shared learning approach was embraced with staff to ensure our services can improve from the clinical front-line to the Executive Management Group and Hospital Board and externally with the HSE and the State Claims Agency.

Core activities included triggering Safety Notices to prompt urgent response and action of serious risks; coordinating Safety Alerts in response to product re-calls and safety notifications; providing safety training and contributing to induction, leadership and post-graduate MSc programmes; providing safety workshops, supporting effective safety governance through the Hospital's Safety Committee and contributing to external steering groups to improve patient safety nationally.

Effective Care and Support

In 2018, the Hospital's services and directorates continued their work integrating the National Standards for Safer Better Healthcare in to their daily work supported by the QSID Team. Key events and achievements relating to quality assurance included:

- Updating the Hospital's policies and developing frameworks and procedures to adopt new legislation and national policies in the areas of Consent, Open Disclosure and Child Protection.

- Supporting the Hospital's Directorates, Services and Staff in preparing, completing and responding to announced and unannounced inspections undertaken by regulatory and accreditation agencies including:
 - An unannounced inspection of the Hospital's Prevention and Control of Healthcare Associated Infection programme and activities undertaken by the Health Information & Quality Authority (HIQA) March 2018.
 - An unannounced Aged Residential Care inspection undertaken by HIQA January 2018.
 - A preliminary accreditation site visit undertaken by the Organisation of European Cancer Institutes (OECI) October 2018.
 - An accreditation site visit undertaken by the Joint Accreditation Committee of the European Society for Blood and Marrow Transplantation and the International Society for Cellular Therapy (JACIE) November 2018.
 - Inspections of the on-site TCD Undergraduate and Postgraduate Medical Training Programmes by the Medical Council in October and November 2018.

Clinical Audit

In 2018, the Hospital's Clinical Audit programme was further developed. A Clinical Audit Oversight Committee was established to oversee the Hospital's participation in the national audit programme. The Oversight Committee advanced the establishment of a pan-hospital approach and framework for clinical audit and agreed a Clinical Audit Policy and Strategy for the hospital.

Person Centred Care & Support

QSID supports person-centred care by enabling service user involvement with the Hospital and ensuring the feedback from patients and families is available to Hospital Staff to contribute to and improve service provision. The Patient Experience Office (PEO) facilitated the following:

Patient Representative Group (PRG)

The PRG engaged with nineteen services and departments within the hospital and six external agencies. PRG members participated on the Clinical Research Facility Governance Board, Campus Mobility Committee, PCC Steering Committee and attended the Hospital's Board meeting and contributed to the Hospital strategy and cancer strategy. In 2019, PRG membership will be increased through awareness and promotion and the effectiveness of staff engagement with the PRG will be evaluated.

National Patient Experience Survey

The patients admitted to the Hospital in May 2018 participated in the National Patient Experience Survey. Of the 1,650 patients invited to participate, 49% (812) responded and 86% reported their overall experience was good or very good. Areas for improvement included communication about care and treatment, hospital food and information management after discharge. Patients highlighted that dignity and respect, protecting privacy and instilling confidence were areas the hospital did well. Quality Improvement (QI) Plans to address patients' experience have been developed and are monitored through the Executive Management Group. In 2019 the hospital will participate in the survey again and initiate further QI plans.

Person Centred Care (PCC) Governance Committee

The PCC Governance Committee met four times in 2018 to provide assurance and promote a culture of person-centred care in the organisation. In 2019, the meeting format will be restructured to showcase QI initiatives and create networking opportunities.

Management of Patient and Family Feedback

The Patient Experience Office (PEO) is a point of contact for patients, family members and advocates who wish to provide feedback to the Hospital regarding the services it provides. The PEO Team assists hospital staff in the management of feedback by processing such correspondences in accordance with legislation and hospital policy and by providing related training. In 2019, the electronic complaints management system (Datix) will be enhanced, a pilot complaints management dashboard will be tested and the complaints/concerns leaflet and information for complaints resolution meetings will be developed and enhanced.

Quality Improvement

Lean QI skills training courses at white belt level were delivered to 36 staff and 20 improvement projects were completed in 2018. Three staff members undertook the HSE/RCPI Diploma in Quality and Leadership. The Home FIRSt and Epilepsy teams participated in the IHI Open School QI training programme.

Conclusion

Healthcare quality and safety improvement can only be achieved through the constant efforts and commitment of front-line staff and supporting services, working in partnership with patients, families and carers. The QSID team acknowledges and is grateful for the collaboration of all St James's staff and patient representatives who worked with them to help make the Hospitals' services more effective, safer and constantly improve patients' and staff experiences of care.



QUALITY IMPROVEMENT

20 IMPROVEMENT PROJECTS WERE COMPLETED IN 2018

7.1 Publications

Nursing services

MEDEL DIRECTORATE: LIST OF NURSING PUBLICATIONS/RESEARCH PAPERS/POSTER PRESENTATIONS/LECTURES, AT A NATIONAL AND INTERNATIONAL LEVEL FOR THE 2018 ANNUAL REPORT

Presentations 2018 – Niamh Kiely, Cardiothoracic RANP

Society of Cardiothoracic Surgeons Great Britain & Ireland Annual Conference. 19th March 2018

Oral Presentation – ‘An investigation into the use, duration and complications of epicardial pacing wires following cardiac surgery: a prospective, cross sectional, Irish study’. Research study completed with Mary Mooney & Frances O’Brien, Trinity College, Dublin.

EuroHeartCare Annual Conference, Trinity College Dublin. 8th June 2018

Moderated Poster Presentation – ‘An investigation into the use, duration and complications of epicardial pacing wires following cardiac surgery: a prospective, cross sectional, Irish study’. Research study completed with Mary Mooney & Frances O’Brien, Trinity College, Dublin.

Nursing & Midwifery Planning & Development Unit, Dublin South, Kildare and Wicklow. 5th Annual Regional Conference 2018. 13th September 2018

Oral Presentation - ‘Nurse Led Lung Cancer Surveillance & Survivorship Service, a new initiative in St James’s Hospital’.

The Thoracic Multi-Disciplinary Team, Keith Shaw Ward also had a poster presentation in 2018 details below.

National Forum on Integrated Care. University College Dublin. 5th December.

Poster Presentation – ‘The Thoracic MDT: An Initiative to Promote Early Mobility Following Lung Resection in St James’s Hospital, Dublin.’

CNS Falls and Syncope Ms. Ciara Rice – Task Force member of the European Society of Cardiology Syncope Guidelines, published and launched March 2018 - <https://www.escardio.org/Guidelines/Clinical-Practice-Guidelines/Syncope-Guidelines-on-Diagnosis-and-Management-of>

Donnelly, S., Prizeman, G., Ó Coimín, D., Korn B., Hynes G. (2018) Voices that matter: end-of-life care in two acute hospitals from the perspective of bereaved relatives, *BMC Palliative Care* 2018; 17:117. doi.org/10.1186/s12904-018-0365-6

Korn B., Bailey-Scanlan M., Ribeiro L.H., Broderick J. (2018) Advance Care Planning Education Sessions during Pulmonary Rehabilitation in Ireland. *Journal of Cardiopulmonary Rehabilitation and Prevention*. 2019;39:E8-E10. E- Publication ahead of print. doi: 10.1097/HCR.0000000000000349

A Good Death: Progress Report. Developments in End of Life Care in Irish Hospitals. Dublin: Office of the Ombudsman; 2018 – inclusion of EOLC activities in SJH.

Ward, M., Ní Shé, É., De Brún, A., et al., The co-design, implementation and evaluation of a serious board game 'PlayDecide Patient Safety' to educate junior doctors about patient safety and the importance of reporting safety concerns, *BMC Medical Education*- In Press

HOPe Directorate

Acquired Factor Xiii Deficiency: An Uncommon But Easily Missed Cause Of Severe Bleeding: Fogarty H, Byrne M, O’Connell NM, Ryan K, White B, O’Donnell JS, Lavin M. *Ir Med J*. 2018 May 10;111(5):757. PMID: 30489053

Von Willebrand factor clearance - biological mechanisms and clinical significance. O’Sullivan JM, Ward S, Lavin M, O’Donnell JS. *Br J Haematol*. 2018 Oct;183(2):185-195. PMID: 30378120

Platelets in malaria pathogenesis. O’Sullivan JM, O’Donnell JS. *Blood*. 2018 Sep 20;132(12):1222-1224. PMID: 30237255

Significant gynecological bleeding in women with low von Willebrand factor levels. Lavin M, Aguila S, Dalton N, Nolan M, Byrne M, Ryan K, White B, O’Connell NM, O’Sullivan JM, Di Paola J, James PD, O’Donnell JS. *Blood Adv*. 2018 Jul 24;2(14):1784-1791. PMID: 30042144

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Sheil F, Donohoe CL, King S, O'Toole D, Cunningham M, Cuffe S, Ravi N, Reynolds JV. Outcomes for Esophageal Squamous Cell Carcinoma Treated with Curative Intent in a Western Cohort: Should Multimodal Therapy Be the Gold Standard? *World J Surg.* 2018 May;42(5):1485-1495.

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Facilities Management Directorate

AWARDS AND ACKNOWLEDGEMENTS

Won Best RFID Implementation in Healthcare Award at Global Journal RFID Awards in Orlando, Florida.

Scan for Surgery Project – Presentation at GS1 Global Conference in London, England.

Won award at Irish Healthcare Awards – Scan for Surgery – Best Use of Information Technology

We achieved the Bronze Award in Orchard House Restaurant awarded by the Irish Heart Foundation.

Awarded ISO 9001: 2015 Certification for the Comprehensive Management of Medical Records in May 2018

Quality Safety Improvement Directorate (QSID)

Dolan, L., Kane, M., Timmins, F., Prizeman, G., Dempsey, O. 'A hospital recreation room quality improvement intervention'. *International Journal of Healthcare Quality Assurance, VOL/ISSUE NO: 32/4; 2018.*

Geary, U. (2018) 'Accessing High-Quality Hospital Care'. *Presented to the IMO Getting Healthcare in Ireland Conference at the, Croke Park Conference Centre, 15th September 2018.*

Geary, U. (2018) 'Discovering the social impact of a new tracking technology - a healthcare case study'. *Presentation to the Workshop on Putting People at the Centre of Change organised by the Centre for Innovative Human Systems, School of Psychology, TCD, September 2018.*

Geary, U. (2018) 'Safety Positively – a seminar presentation'. *The College of Anaesthetists of Ireland, Healthcare Ethics, Law & Professionalism for Senior SAT, October 2018.*

Healy, U. (2018) 'SJH Implementation of After Action Review'. *National Patient Safety Conference, Dublin Castle, October 2018.*

Kennedy, G., Katherine Klassen, K., Morrow, S., O'Callaghan, E. and Kane, M. (2018) 'An evaluation of pilot way finding service in St James's Hospital'. *11th Annual Multi – Disciplinary Research, Clinical Audit & Quality Improvement Seminar, 2018.*

Part, S, Halpin, S, Browne, J, Slattery, S and Healy, U (2018) 'Medication review of inpatient sustained fractures post falls in an Acute Teaching Hospital'.

Stapleton, D., Kane, M., Hynes, G., Prizeman, G. and Mc Laughlin, A. (2018) 'Introducing a social work service to an established multi-disciplinary team: lessons from a hospital –led tuberculosis care programme'. *The Irish Social Worker, Spring 2018.*

SACC Directorate

Publications/Research

Buckley AM, et al. Leukaemia inhibitory factor is associated with treatment resistance in oesophageal adenocarcinoma. *Oncotarget* 2018; 14: 33634-7

Hussey JM, et al. Quantifying postoperative mobilization following oesophagectomy. *Physiotherapy*, 2018 ; S)31-9406

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Guinan EM, et al. Effect of preoperative inspiratory muscle training on physical function following esophagectomy. *Dis Esophagus* 2018. 10.1093

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Bell A, et al. Point prevalence of acute intestinal failure in the Republic of Ireland. *Ir Med J* 2018; 111.688

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O'Sullivan KE, et al. pSTAT3 levels have divergent expression patterns and associations with survival in squamous cell carcinoma and adenocarcinoma of the oesophagus. *Int J Mol Sci* 2018; 19: E1720

Baiocchi GL, International consensus on a complications list after gastrectomy for cancer. *Gastric Cancer* 2018 doi: 10: 1007

O'Neill L, et al. Physical decline and its implications in the management of oesophageal and gastric cancer: a systematic review. *J Cancer Survivo* 2018; 12: 601-8

Valkenet K, et al. Multicentre randomized clinical trial of inspiratory muscle training versus usual care before surgery for oesophageal cancer. *Br J Surg* 2018; 105: 502-11

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Hardwick R, Hoelscher A, Hofstetter W, Jobe B, Kitagawa Y, Law S, Mariette C, Maynard N, Morse CR, Nafteux P, Pera M,

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Patient experiences of a physiotherapy-led multidisciplinary rehabilitative intervention after successful treatment for oesophago-gastric cancer. Bennett AE, O'Neill L, Connolly D, Guinan EM, Boland L, Doyle SL, O'Sullivan J, Reynolds JV, Hussey J. *Support Care Cancer.* 2018 Aug;26(8):2615-2623. doi: 10.1007/s00520-018-4112-6. Epub 2018 Feb 18.

Multicentre randomized clinical trial of inspiratory muscle training versus usual care before surgery for oesophageal cancer. Valkenet K, Trappenburg JCA, Ruurda JP, Guinan EM, Reynolds JV, Nafteux P, Fontaine M, Rodrigo HE, van der Peet DL, Hania SW, Sosef MN, Willms J, Rosman C, Pieters H, Scheepers JGG, Faber T, Kouwenhoven EA, Tinselboer M, Räsänen J, Rynänen H, Gosselink R, van Hillegersberg R, Backx FJG. *Br J Surg.* 2018 Apr;105(5):502-511. doi: 10.1002/bjs.10803.

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International consensus on a complications list after gastrectomy for cancer. Baiocchi GL, Giacomuzzi S, Marrelli D, Reim D, Piessen G, Matos da Costa P, Reynolds JV, Meyer HJ, Morgagni P, Gockel I, Lara Santos L, Jensen LS, Murphy T, Preston SR, Ter-Ovanesov M, Fumagalli Romario U, Degiuli M, Kielan W, Mönig S, Kołodziejczyk P, Polkowski W, Hardwick R, Pera M, Johansson J, Schneider PM, de Steur WO, Gisbertz SS, Hartgrink H, van Sandick JW, Portolani N, Hölscher AH, Botticini M, Roviello F, Mariette C, Allum W, De Manzoni G. *Gastric Cancer.* 2019 Jan;22(1):172-189. doi: 10.1007/s10120-018-0839-5. Epub 2018 May 30.

pSTAT3 Levels Have Divergent Expression Patterns and Associations with Survival in Squamous Cell Carcinoma and Adenocarcinoma of the Oesophagus. O'Sullivan KE, Michielsen AJ, O'Regan E, Cathcart MC, Moore G, Breen E, Segurado R, Reynolds JV, Lysaght J, O'Sullivan J. *Int J Mol Sci.* 2018 Jun 10;19(6). pii: E1720. doi: 10.3390/ijms19061720.

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Point Prevalence of Adult Intestinal Failure in Republic Of Ireland. Bell A, Conway N, Courtney J, Kennedy K, Raubenheimer Z, Rice N, Kevans D, Donohoe CL, Reynolds JV. *Ir Med J.* 2018 Feb 9;111(2):688.

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Toward a Consensus on Centralization in Surgery. Vonlanthen R, Lodge P, Barkun JS, Farges O, Rogiers X, Soreide K, Kehlet H, Reynolds JV, Käser SA, Naredi P, Borel-Rinkes I, Biondo S, Pinto-Marques H, Gnant M, Nafteux P, Ryska M, Bechstein WO, Martel G, Dimick JB, Krawczyk M, Oláh A, Pinna AD, Popescu I, Puolakkainen PA, Sotiropoulos GC, Tukiainen EJ, Petrowsky H, Clavien PA. *Ann Surg.* 2018 Nov;268(5):712-724. doi: 10.1097/SLA.0000000000002965.

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Epub 2018 Mar 8.

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Evaluating the perioperative safety of laparoscopic radical nephrectomy for large, non-metastatic renal tumours: a comparative analysis of T1-T2 with T3a tumours.
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Incidence of Visible Hematuria Among Antithrombotic Agents: A Systematic Review of Over 175,000 Patients.
Bhatt NR, Davis NF, Nolan WJ, Flynn RJ, McDermott T, Thomas AZ, Manecksha RP.
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Ir J Med Sci. 2018 Feb;187(1):255-260. doi: 10.1007/s11845-017-1616-x. Epub 2017 May 4.

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Bhatt NR, Davis NF, Dalton DM, McDermott T, Flynn RJ, Thomas AZ, Manecksha RP.
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Bhatt NR, Davis NF, Dalton DM, McDermott T, Flynn RJ, Thomas AZ, Manecksha RP.
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Hintze JM, O'Hare K, McDermott T, Thomas AZ.
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Phylloides tumour of the urinary bladder: a report of a unique case.
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Moriarity A, Ellanti P, Mohan K, Fhoghlu CN, Fenelon C, McKenna J. A comparison of complication rates between locking and non-locking plates in distal fibular fractures. *Orthopaedics & Traumatology, Surgery & Research.* 2018;104(4):503-6. PMID 29581071.

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Publications

de Blacam C, Duggan L, Rea D, Beddy P, Orr DJA. Descent of the human larynx: An unrecognized factor in airway distress in babies with cleft palate? *International Journal of Pediatric Otorhinolaryngology* 2018; 113: 208-12.

Casey M-C, Orr DJA. Patent nasopalatine ducts: Evidence to support persistence of the vomeronasal system? *Eur J Anat* 2018; 22: 411-3.

Cahill KC, Orr DJA. Glossoptosis in Pierre Robin sequence. *Archives of disease in childhood* 2018.

Martin-Smith JD, Fitzgerald L, Orr DJA. How reliable is the vomer flap in early hard palate repair. *Journal of Plastic Reconstructive and Aesthetic Surgery* 2017.

De Blacam C, Smith S, Orr D. Surgery for Velopharyngeal Dysfunction: A Systematic Review of Interventions and Outcomes. *The Cleft Palate-Craniofacial Journal* 2017; 55(3): 405-22.

Eadie PA. Hand Surgery in Ireland. *J Hand Surg Eur Vol.* 2018 Oct;43(8):900-901. doi: 10.1177/1753193418774491. No abstract available.

PMID: 30215322

Invited Speaker

"State of the Art in Evaluation of VPD Outcomes"

Invited lecture and research workshops at the 2nd International Symposium on Velopharyngeal Dysfunction, September 14th-17th 2018, Columbus, Ohio, USA.

Master Class ESPRAS Cyprus October 2018 Nerve Injuries and Tendon transfers

Department of 1Clinical Nutrition, 2Surgery, 3Nuclear Medicine, St James's Hospital, Dublin, Ireland.

Oral Presentations

"Management of Robin Sequence without mandibular distraction osteogenesis".

de Blacam, C, Francis, E, Duggan, L, Javadpour, S, Orr, D.

American Cleft Association. Tucson, Arizona. April 2019

Chest surgery in Female to male Transgender patients - IAPS
May 19 Kelly G, Barrett S, Rice D, Eadie P

Research in Progress

Identification of a core outcome set for reporting outcomes of surgery for velopharyngeal dysfunction

Protocol Date: October 2018 (<http://www.comet-initiative.org/studies/searchresults?guid=3b03825b-3678-4a7a-bc9b-3d6075b0cea7>)

Study steering group/ Authors

Catherine de Blacam
Adriane Baylis
Richard Kirschner
Susan Smith
Debbie Sell
Kathy Sie
Helen Harris

NMIC

NMIC (2018) Update on management of Hypertension. *NMIC Bulletin* 24, 6.

NMIC (2018) Management of Migraine. *NMIC Bulletin* 24, 5.

NMIC (2018) Prescribing in pregnancy (3) Frequently asked questions. *NMIC Bulletin* 24, 4.

NMIC (2018) Prescribing in pregnancy (2) Frequently asked questions. *NMIC Bulletin* 24, 3.

NMIC (2018) Prescribing in pregnancy (1) . *NMIC Bulletin* 24, 2

NMIC (2018) Update on the management of Acne. *NMIC Bulletin* 24, 1

Twelve (monthly) NMIC Therapeutics Today Newsletters

SCOPE Directorate

Clinical Nutrition Department

Poster and oral presentations

EMPOWERING PATIENTS WITH CHRONIC KIDNEY DISEASE: DEVELOPMENT & PILOT STUDY OF THE "MiKidney" SMARTPHONE APP.

Laura Brennan¹, Nuala Doyle¹, Mairéad Murphy¹, Alice Waugh¹, Margaret McCann², Geraldine Prizeman²

¹St James's Hospital, Dublin, ²School of Nursing and Midwifery, Trinity College Dublin

BILE ACID MALABSORPTION POST OESOPHAGECTOMY AND GASTRECTOMY

M Fanning¹, C Donohoe², S Cournane³, J Cooke³, N Sheehy³, N Ravi², JV Reynolds²

CONTINUOUS GLUCOSE MONITORING AND A LOW GLYCAEMIC INDEX DIET IN REACTIVE HYPOGLYCAEMIA POST OESOPHAGECTOMY: A CASE STUDY

M Fanning¹, JA Elliott², C Murphy², N Ravi², JV Reynolds²

SMALL INTESTINAL BACTERIAL OVERGROWTH POST OESOPHAGECTOMY AND GASTRECTOMY: SYMPTOM RESPONSE TO RIFAXIMIN

M Fanning¹, C Murphy², P Lawlor, ³M Brennan³, B O'Connell⁴, N Ravi², JV Reynolds²

¹Clinical Nutrition, ²Department of Surgery, ³GI Function Unit, ⁴Department of Microbiology, St James's Hospital, Dublin, Ireland

THE COST SAVING EFFECT OF ADVANCED DIETETIC PRACTICE IN AN ACUTE SETTING

A Gorham, O Seery, Dr. N McEniff, S Brady, LA Healy St James's Hospital, Dublin

BREAKING THE MIDNIGHT FAST

Jones E1, Moynagh N1, Dunlevy F2, Robinson D2, Healy LA2. Department of 1Clinical Medicine and 2Clinical Nutrition, St James's Hospital and Trinity College Dublin

ACUTE MEDICAL ADMISSION UNIT (AMAU) MULTIDISCIPLINARY TEAM ASSISTING PATIENTS AT MEALTIMES

Mc Hugh, C., Conroy, D., Galvin, T

PREVALENCE OF MALNUTRITION AND SARCOPENIA RISK IN OLDER ADULTS REFERRED TO A CARE OF THE ELDERLY DAY HOSPITAL VIA A NEWLY ESTABLISHED FRAILTY INTERVENTION RESPONSE TEAM

A. McMorro¹, S. Brady¹, T. Waldron¹, L. Dooley¹ and C. Cunningham²

¹Department of Clinical Nutrition, ²Mercer's Institute for Successful Ageing, St James's Hospital, Dublin 8

EVALUATION OF THE EFFECT OF BLUE PLATES ON THE NUTRITIONAL INTAKE IN OLDER PERSONS IN AN ACUTE SETTING

O'Donoghue^{1,2}, M O'Sullivan², T Waldron³, A McMorro³, C O'Keefe³, N Cole³, S Carroll³, C Fennelly³, A Edwards^{2,3}, J Reilly³, B Doherty³, T O'Brien³

¹Dublin Institute of Technology, ²Trinity College Dublin, ³St James's Hospital Dublin

"MEALTIMES & ME": A MULTIDISCIPLINARY INITIATIVE FOR PATIENTS WITH DEMENTIA

T. Waldron, S. Carroll, S. Lavan, J. Caraher, N. Cole.

National HSPC Conference 2018

Prevalence of Malnutrition and Sarcopenia Risk in Older Adults Referred to a Care of the Elderly Day Hospital via a newly established Frailty Intervention Response Team

Aoibheann McMorro Sandra Brady Tracey Waldron Linda Dooley Prof. Conal Cunningham - St James's Hospital

Occupational Therapy Department

Oral Presentations

Keady, C (2018) Preliminary results from a feasibility study on the Specialised Memory and Attention Rehabilitation Therapy (SMART) programme. Annual Health and Social Care Professionals Conference, Dublin.

O' Donnell, M (2018) Implementation of an Occupational Therapy (OT) Carpal Tunnel Triage Clinic. Irish Hand Surgeon's Conference, Dublin.

Physiotherapy Department

Conferences 2018

Irish Society of Chartered Physiotherapists

Oral Presentation x 4

- Mark Mc Gowan
- Helen Kavanagh
- David Kennedy
- Grainne Kerr

Poster x 4

- Brona Kelly
- Yvonne Burke
- Ruth Mc Menamin
- Jonathan Moran

HSCP

Oral Presentation x 2

- Lucinda Edge
- Grainne Kerr

Poster x 4

- Ciara Gleeson
- Yvonne Burke
- Conor Stout
- David Kennedy

4th International Forum of HIV Rehabilitation (Toronto)

Oral Presentation x 1

- Chiara Reddin

Irish Gerontological Society

Oral x 1

- Sinead Coleman

Poster x 3

- Chiara Reddin
- Grainne Kerr
- Home FIRsT

International Foundation for Integrated Care

Poster x 1

- Brona Kelly

Irish Heart Foundation Stroke Day and DATHs Acute Stroke Group

Poster x 2

- Med Neuro

SLT POSTER PRESENTATIONS

The following posters were presented at the International ESSD conference in Dublin

Dysphagia Practice Patterns in Radiotherapy Treatment for Head and Neck Cancer: an Irish web based study. Stacey Daly, Claire Parkes

Oropharyngeal Dysphagia in Patients Undergoing

Chemoradiotherapy for Lung Cancer: A prospective Study. Claire Parkes, Caoimhe Mulgrew, Stacey Daly

WHAT LEVEL ARE YOU ON?

LET'S GO WITH THE FLOW: TESTING AND QUANTIFYING THE CONSISTENCY OF THICKENED ORAL NUTRITIONAL SUPPLEMENTS (ONS) USING THE IDDSI FRAMEWORK

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Pharmacy Directorate

Coghlan M, O'Leary A, Melanophy G, Norris S, Bergin C. Hepatitis C Pre-Treatment Pharmacist Assessment: the development & optimisation process for a complex intervention toolkit. *Hospital Pharmacists Association of Ireland Annual National Conference 2018 Oral & Poster presentation.*

Coghlan M, O'Leary A, Melanophy G, Norris S, Bergin C. Assessment of the feasibility of the Hepatitis C Pre-treatment Pharmacist Assessment complex intervention toolkit. *Hospital Pharmacists Association of Ireland Annual National Conference 2018 Poster presentation*

Coghlan M, O'Leary A, Melanophy G, Bergin C, Norris S. Hepatitis C Direct-Acting Anti-Viral (DAA) treatment options in patients with epilepsy. A drug -drug interaction dilemma in chronic Hepatitis C (CHC) infection. *Hospital Pharmacists Association of Ireland Annual National Conference 2018 Poster presentation.*

Coghlan M, McCarthy S, Melanophy G, O'Dwyer M. An Analysis of the Medication Reconciliation Process in an Outpatient Clinic Setting. *Hospital Pharmacists Association of Ireland Annual National Conference 2018 Poster presentation.*

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Coghlan M, O'Leary A, Melanophy G, Bergin C, Norris S. Assessment of the feasibility of the Hepatitis C Pre-treatment Pharmacist Assessment complex intervention toolkit. *St James's Hospital, Annual Multi – Disciplinary Research, Clinical Audit & Quality Improvement Seminar, May 2018. Poster Presentation*

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28th European Conference of Clinical Microbiology and Infectious Disease (ECCMID) in Madrid, Spain, 2018

"In vitro antimicrobial susceptibility of clinical and environmental *Mycobacterium chimaera* isolates"

11th Health Care Infection Society International conference in Liverpool Nov 2018

"Preliminary Blood Culture Rapid Identification and Resistance Targets Determination using GenMark Dx® ePlex® Blood Culture Identification System Improves Sepsis Management, Aids Early Antimicrobial Stewardship (AMS) Interventions and Results in Significant Cost Savings

- Diverse *SCCmec-fusC* elements among distinct community-associated MRSA strains. Brennan et al., ISSSI, Copenhagen
- The role of *Staphylococcus aureus* colonisation of healthcare workers in nosocomial transmission of *S. aureus* to patients investigated using whole-genome sequencing. Earls et al, ISSSI, Copenhagen
- Emergence and global spread of a multidrug-resistant, community-associated MRSA lineage from the Indian subcontinent. Steinig et al., ISSSI, Copenhagen
- An investigation of the prevalence and temporal dynamics of *Staphylococcus aureus* carriage among healthcare workers. Kearney et al., *Healthcare Infection Society* meeting, Dublin
- An investigation of the role of *Staphylococcus aureus* colonisation of healthcare workers in nosocomial transmission of *S. aureus* to patients in an MRSA endemic setting using whole-genome sequencing: Summary of recruitment and results of phase 1 (May-October 2017). Kearney et al., RCSI Research Day, Dublin
- Presentation: American Association of Blood Banks annual meeting, Boston, U.S.A.

Darcy,S.,Mc Cabe,J.,Gough,D.,Finucane,C.,Mc Ellistrim,C.,Mc Cann,AM.,Conneally,E.,O'Donghaile,D.

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Langabeer SE, Savage S, Travers L, Conneally E, Vandenberghe E & O'Brien C. Integrating next-generation sequencing of MPL exon 10 and JAK2 exon 12 mutations into the molecular diagnostic algorithm for myeloproliferative neoplasms. Haematology Association of Ireland, Cork, Ireland. October 2018.

Ryan E, Keane N, Langabeer S, Kelly J, Lee G, Conneally E & Flynn C. Allogeneic transplant for adults with myelodysplasia: a national experience. Haematology Association of Ireland, Cork, Ireland. October 2018.

O'Brien C, Finn SP. RNA-based NGS panel to improve diagnostic yield in NSCLC. European Thoracic Oncology Platform. Barcelona, November, 2018

Haematology Association of Ireland (HAI) October 2018: Laboratory Session Prize Winner:

'A 20 year Longitudinal Study of Stem Cells: The Effect of Long Term Storage on Haematopoietic Stem Cells' – Lisa O'Connor (MS) submitted as MSc Biomedical Science.

Lisa O Connor presented at Stem Cell User Group UK & Ireland (SCUG) Dublin, July 2018 and has been asked to present at Low Temperature Society meeting in Seville, October 2019 on behalf of the Stem Cell User Group UK & Ireland.

<https://www.sltb.info/meetings/2019/9/26/sltb-2019-at-university-of-seville>

28th European Conference of Clinical Microbiology and Infectious Disease (ECCMID) in Madrid, Spain, 2018

"In vitro antimicrobial susceptibility of clinical and environmental Mycobacterium chimaera isolates"

Diaglm Directorate

Dennan S., Malik V., Lucey J., Claxton Z., Reynolds J.V., Johnston C. 2018. EP-0963. Does measuring 18F-FDG PET-CT tumour metrics by altering thresholds affect prognosis? 31st Annual Congress of the European Association of Nuclear Medicine-EANM'18, Oct 13-17, Dusseldorf.

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Medical and Emergency (MED) Directorate

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