

The 18th National Health Summit

SPECIAL REPORT



Dr. Gabrielle Colleran, vice-president, Irish Hospital Consultants Association; David Beirne, managing director, UPMC Ireland
Dr Sara Burke, research assistant professor, public health & primary care, Centre for Health Policy & Management, School of Medicine, Trinity College Dublin and Dr Audrey Derveloy, general manager and country president, Novartis Pharma



Martin Curley, director, digital transformation and open innovation, HSE; Verena Murphy, head of research and business development, Cancer Trials Ireland; Marc Butterly, business creation lead, EIT Health Ireland-UK; Deirdre Poretti, personalised healthcare lead, Roche, and Thomas Sharkey, healthcare lead, AWS Ireland

Pictures: Maura Hickey

Preparing for life in a post-Covid world

The 18th Health Summit, held virtually on February 8, addressed a changing sector still reckoning with the limitations of the past while starting to engage with transformational ideas.

Roisin Kiberd reports

The 18th National Health Summit took place virtually on February 8, with presentations, panels and keynote speeches focused on the question of whether the health service can disrupt and innovate in a post-Covid-19 landscape.

Hosted by RTE Morning Ireland presenter Audrey Carville, the event brought together policy makers and professionals in healthcare management and delivery to discuss subjects including regional healthcare, innovation and the challenges to delivering universal health coverage. The day began with a keynote address from David Nicholson, former chief executive of the NHS in Britain, and chair of Herefordshire and Worcester Integrated Care System and Sandwell and West Birmingham Hospitals NHS Trust.

"The detailed implementation of any healthcare system is critical – in fact, it's the place where most of the problems occur," said Nicholson. "For health reform in general, there is no blueprint. You can't take one model and bring it to another country. The experience is rooted in the community we serve."

Robert Watt, secretary general of the Department of Health, delivered an update on the implementation of Sláintecare, beginning with the need to adapt to an increased life expectancy in Ireland.

"The context for healthcare is that the system is under enormous pressure, and those demands will only increase over time," said Watt. The current Sláintecare Reform Programme's goals include enhancing community care, integrating care between settings, reducing waiting times and providing care on the basis of need, rather than the ability to pay.

With the first panel of the day, Sheelah Connolly, re-

search officer at the Economic and Social Research Institute, commented on the slow pace of Sláintecare's implementation: "In Irish healthcare reform there's a particular issue, going back to 20 years ago, when extensive reform was envisaged for the primary healthcare system, many will agree that these reforms have not been implemented."

Dr Eddie Molloy, director of Advanced Organisation, said that the issue was political: "The people running regional health systems need clear authority to make decisions. That means no interference. We've previously had a decentralised health service with the Health Board, but it didn't work, because there was constant interference."

Tony O'Brien, former director general of the HSE, said that leadership from the centre of government was required. "Previous reforms were half-attempted, but not followed through," he said. "I would share the concerns of our audience, that unless this has some real impetus behind it, it won't be followed through on."

Dr Donal de Buitléir, chair of the Independent Review Group that examined private activity in public hospitals, said that the current situation is comparable to when free secondary education was introduced to Ireland in 1966: "We can either do this the right way, or blow the opportunity."

Speaking on the topic of "driving health transformation through modern data platforms", John Ward, partner and head of digital and emerging technologies at EY Ireland, listed data accessibility as a key challenge for healthcare providers. "EHR [electronic health record] is talked about as the holy grail of healthcare," he said, "but what we actually have are many different EHRs, providing only a fragment of each patient's information. Creating a holistic view of a



Joanelle O'Cleirigh, partner, Arthur Cox LLP; Tadhg Daly, chief executive, Nursing Homes Ireland and Dr Lorraine Nolan, chief executive, Health Products Regulatory Authority



Derick Mitchell, chief executive, Irish Platform for Patient Organisations, Science and Industry; Conchuir MacGloinn, strategic partnerships manager, Roche; Mary Day, chief executive, St James's Hospital, and Padraig Duff, commercial director, TCP Homecare



Jean Long, research officer, Health Research Board; Clare Harney, executive director, HealthTeach Ireland and RCSI programme director; Padraig Duff, commercial director, TCP Homecare and Tracy Folliard, systemic therapy programme manager, National Cancer Control Programme



John Ward, partner and head of digital and emerging technologies, EY Ireland; and Audrey Carville, broadcaster and host, Morning Ireland, Radio 1

patient's health is very challenging."

The programme was divided into three streams: "Building back better or continuing as we are?", "Delivering on the promise of integrated care", and "Healthcare innovation and the future patient experience". Siobhain Duggan, Director of Innovation and Healthcare, GS1 Ireland and Clare Harney, Executive Director, HealthTeach Ireland and RCSI Program Director moderated the latter streams.

Speaking on the health systems and resilience, Francesca Colombo, head of the health division of the Organisation for Economic Cooperation and Development, said that the pandemic was "a powerful reminder that our health systems are not as resilient as they should be, and that this has an economic impact, and consequences for the global economy".

Jean Long, research offi-

cer at the Health Research Board, and co-author of Regional Health Organisations: An Evidence Review, discussed "the evidence for effective delivery" in creating regional healthcare services, listing utilisation of resources, healthcare outcomes, efficiency, equity, patient flow and cost as measures of success.

Investing in innovation

A panel on "Innovative ways to tackle the backlog and improve healthcare delivery" featured Dr Thorsten Giesecke, general manager of Commercial Business at Janssen Sciences Ireland UC, Yvonne Goff, national director of change and innovation at the HSE, Declan Murphy, chief executive of Servisource Workforce Solutions and Nicola Byrne, chief executive at Shine.

Dr Giesecke said: "Now is a fantastic time to invest in innovation. Covid-19 has been a catalyst for change; if we try to go back to the health system we had before, it won't help. Waiting lists won't go away, and it will put more strain on healthcare systems." Dr Niamh Lennox-Chhugani, chief executive of the International Foundation for Integrated Care, delivered a keynote address on "Delivering the promise of person-centred care in Ireland". She said: "Integrated care systems seek to balance two things. They want to encourage collaboration across a system, while establishing a local community focus."

Dr Brian Turner, lecturer at

the Department of Economics at University College Cork, gave a presentation on "Creating an Irish NHS". Dr Turner said that 9 per cent of people with private health insurance have plans that provide mainly for public hospital cover: "20 per cent of the claims paid in 2020 were made to public hospitals, a significant portion of what is paid."

A panel on "The future shape of healthcare" included Conchuir MacGloinn, strategic partnerships manager at Roche; Mary Day, chief executive at St James's Hospital; Derick Mitchell, chief executive of the Irish Platform for Patient Organisations, Science and Industry; and Padraig Duff, commercial director of TCP Homecare.

Day said that elective hubs will provide a model for the future. "We need to look at how we separate elective care from our current high level of care we provide in our model 4 hospitals," she said.

Duff added that the last two years had shown us that "a number of patients are accessing acute care, in hospitals, who could benefit from home care instead." Discussing patient needs, Mitchell said that they want access to healthcare records, and more engagement, especially in relation to consenting to the use of their data.

Verena Murphy, head of research and business development at Cancer Trials Ireland, and Deirdre Poretti, personalised healthcare lead at Roche, spoke on the National Molecular Tumour Board Programme, while another pan-

el in Stream 2 explored "An integrated community care model for oncology patients". Tracy Folliard, systemic therapy programme manager at the National Cancer Control



Declan Murphy, chief executive, Servisource Workforce Solutions



Siobhain Duggan, director of innovation and healthcare, GS1 Ireland

Programme, said that there were many opportunities out there to address the issues with capacity the system has experienced in recent years.

A panel asking "What will Ireland's regional healthcare organisations look like?"

featured Sarah Pinto-Duschinsky, consulting leader of Health Sciences and Wellness at EY; Andy Bleanden, community director at ECHA-Ireland; Dr Phil Richardson, chief system integration officer at NHS Dorset Clinical Commissioning Group; and Dr Brendan O'Shea, GP and assistant adjunct professor at Trinity College Dublin.

O'Shea said that smaller hospitals need to strengthen their expertise in gerontology and geriatrics to address the ageing population, and that new structures must increase the number of specialists and senior decision-makers. "If we don't do that, new acute beds will be flooded with the right patients at the wrong time."

Telehealth here to stay

Another panel, addressing "Transformative trends to advance patient care", included Marc Butterly, business creation lead at EIT Health Ireland-UK; Martin Curley, director of digital transformation and open innovation at the HSE; Myles Murray, chief executive officer at PMD Solutions; and Thomas Sharkey, healthcare lead at AWS Ireland.

Sharkey said that there are opportunities to change how citizens engage with healthcare, and develop new "healthcare pathways" post-Covid-19. "Patients want more digital in their healthcare," he said. "Telehealth is here to stay, and there's more data available over time to give us trends in health on a national scale, which we

“The pandemic was a powerful reminder that our health systems are not as resilient as they should be

should be making use of." Curley, meanwhile, said that collaboration between organisations has meant that they can deliver solutions far faster than they can alone. "The cyberattack on the HSE has proven how important cybersecurity is to healthcare, and AWS, Microsoft and Google Cloud can afford to spend more on it than any smaller organisations."

Speaking on a panel about "The future of healthcare regulation", Joanelle O'Cleirigh, a partner at Arthur Cox LLP, said that there's no regulation in the homecare sector, and that it is called for.

"I'm aware there's a bill in Dublin's programme for passing legislation, but I'm not sure it's a priority, and in my mind it's a gap in Ireland's healthcare", said O'Cleirigh, naming mental healthcare as another field in need of more attention.

Paul Reid, chief executive officer of the HSE, spoke on the question of "What will the new reality look like?" Citing the government-funded vaccination programme and testing and tracing as examples of 'universal healthcare in practice', Reid said that bringing together the two models of private and public healthcare in Ireland would help to address long waiting lists.

The final panel of the day took stock of positive service shifts accelerated by the pandemic.

David Beirne, managing director of UPMC Ireland, said that a "patient-centred approach with collaboration and partnership" helped the Irish healthcare system get through the last two years: "Cardiology services are now integrated, oncology services and radiology are too, and across cybersecurity, after the attack, we saw the collaborative approach in action too."

Audrey Derveloy, general manager and country president of Novartis Pharma, said that her organisation had a commitment to addressing chronic disease management, in particular that of cardiovascular diseases: "If we look at cardiovascular disease in Europe, it's still killing more than 50 per cent of patients per day," she said.

Looking to a future where the healthcare organisations build on progress forced upon them by Covid-19, the National Health Summit addressed a changing sector – one still reckoning with the limitations of the past, but beginning to engage with transformational ideas and new technologies.



Darragh Frawley, healthcare strategy and value manager, Janssen Sciences Ireland, and Dr Thorsten Giesecke, general manager, commercial business, Janssen Sciences Ireland UC