

43RD ANNUAL REPORT

2023



National Rehabilitation
University Hospital

PLACING PATIENT'S NEEDS AT THE HEART OF OUR WORK



Commission for Accreditation
of Rehabilitation Facilities
Details of NRH Accreditation on
www.nrh.ie

Our Mission

The National Rehabilitation Hospital espouses the values established by the Sisters of Mercy to provide high quality care and treatment to patients irrespective of background or status, but on the basis of need. The hospital, in partnership with the patients and families, endeavours to achieve health and social gain through effective treatment and education of patients who, following illness or injury, require dedicated interdisciplinary rehabilitation services. The hospital aims to achieve this in a manner that is equitable and transparent in its service delivery, sensitive and responsive to those availing of its services and supportive of the staff entrusted with its delivery.

Patient Activity 2023

Inpatient Service	Discharged
Spinal Cord Injury	127
Brain Injury Traumatic	54
Brain Injury Non-Traumatic	34
Other including Neurological	8
Stroke Service	108
Prosthetic Service (Inpatient and Day-patient)	120
Paediatrics (Inpatient and Day-patient)	101
Total	527



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Chairman's Report



Kieran Fleck
Chairman

In April 2023, the NRH, in line with national public health guidance, announced that wearing face masks was no longer a requirement in clinical settings. This major milestone was widely welcomed throughout the hospital as it essentially marked the end of the COVID-19 pandemic.

For three years, staff within the NRH commendably navigated the complex challenges associated with the global pandemic. Programmes and Services continued to ensure that each patient admitted was given the best chance to maximise their recovery potential and receive a personalised rehabilitation programme. The Board of the hospital have extended their deep appreciation to every member of staff for their ongoing flexibility and commitment to patient centred care, and empathy for colleagues during the course of the prolonged pandemic.

The Annual Report captures many key milestones, developments and achievements for each Programme and Service during 2023, and common among the themes are:

- A focus on completion of the NRH redevelopment plan to ensure it is advanced as quickly as possible. Phase One facilitates only some of the hospital services in the new environment, while other services remain in the original building (Cedars) until completion of Phases Two and Three. There are increased costs and inefficiencies managing and running the hospital across two sites, therefore it is vital that the development project is progressed as speedily as possible.

- Patients and staff were truly elated to move into the new hospital building, however, it was unfortunate that due to the vital COVID-19 restrictions at that time, the celebrations envisioned for the opening of the new hospital could not be fulfilled. In light of services having returned to normal, the management will explore opportunities to have a formal celebration to mark the new hospital facility having opened with the new environment enhancing the delivery of rehabilitation services for the national population.
- In the context of staffing shortages in the healthcare system nationally, vacant posts combined with planned and unplanned absences created a serious challenge across services within the NRH, and in particular, the Physiotherapy and Occupational Therapy disciplines. Managers have worked closely with HR to look creatively at recruitment solutions and teams worked collaboratively to ensure sufficient therapeutic activities were available for patients. The issue is ongoing and the HSE Recruitment Embargo exacerbated these challenges in 2023.

The New Hospital Development

The Strategic Assessment Report (SAR) has been submitted to the HSE. The NRH is proceeding to seek full planning and design of Phases Two and Three, with plans to deliver 235 beds in accordance with an NRH brief for the long-term development of the campus. The Board is involved in all decision-making processes in relation to the development plan.

NRH Reporting Structure

In 2023, the HSE published its restructuring plan that will include six new Health Regions as one of the reforms set to be implemented under Sláintecare, stating that a Health Region approach will play a pivotal role in supporting the achievement of integrated care and moving toward universal healthcare. The NRH reporting structure will transfer from the Ireland East Hospital Group to the HSE Dublin South East Region, We look forward to developing strong links and working together with our DSE colleagues.

Corporate Governance

In line with the principles of good corporate governance, the NRH Board structure incorporates annual evaluation of the Board and its meetings; review of the Terms of Reference of Board sub-committees; review of duties and liabilities of Board members; compliance with legal and regulatory frameworks and GDPR regulations. Membership of staff and patient representatives on the Board greatly enhances its knowledge and understanding of hospital matters. Board members attended training and external review during 2023 as part of its robust corporate governance practices.

NRH Board of Management

On behalf of the patients we serve, I thank each Board Member for your ongoing work and commitment to the NRH. We highly value the contribution each Board Member makes in sharing their expertise and experience towards achieving the hospital's strategic objectives.

We warmly welcomed Ms Eilish Macklin, Ms Andrea Hanson and Mr Michael Meghen to the Board in April, and also Mr Brian Crowley who was appointed to the Audit Committee.

Mr Robert Costello stepped down from the Board in December and has kindly agreed to be accessible in the future should the need arise. I thank Robert for his valuable contribution to the NRH.

We were saddened to learn of the passing of Sr Josephine Burke in February, aged 100. Sr. Josephine was one of the original members of the hospital Board of Management. We were also very sad to learn of the passing of Dr Frank Keane, retired Consultant in Rehabilitation Medicine. Dr Keane gave very many years of dedicated service to the hospital and made a very significant contribution to the NRH. May they Rest In Peace.

Quality Improvement and CARF Accreditation

The Board participated in the CARF survey in June 2023, within the Leadership and Governance Accreditation Standards. Following an extensive three-day Digitally Enabled Site Survey of the hospital's clinical and business services, the NRH was awarded a further three-year accreditation by CARF which is an independent, international accrediting body for Rehabilitation Services. The hospital staff deserve enormous credit for the ongoing dedication to improving services to our patients, even in the most challenging circumstances.

Technological Initiatives

Opportunities to tailor the delivery of rehabilitation services through technology and innovation are being met with great enthusiasm by staff. These include the new Electronic Patient Record (EPR) TrakCare, which has been successfully rolled out in phases during 2023 and is ongoing; the ROSIA (Remote Rehabilitation Service in Isolated Areas) Project is an EU funded project designed to deliver rehabilitation programmes remotely, through a cutting-edge innovation ecosystem, to people in isolated areas, thereby increasing access and duration of rehabilitation to these patients. The NRH is a procurer and pilot site for this project; and the launch of the 'Smart Home' technology in Woodpark pre-Discharge Unit. Many other technological initiatives are detailed in the Annual Report.

Future Developments

Moving into 2024 it is intended that the Hospital will transfer from the Trust established under the patronage of the Sisters of Mercy to a new company limited by guarantee which will continue to embody the voluntary charitable ethos of the NRH and dedication to service of those most in need of our care. The next Hospital AGM is envisaged to be convened under the new company structure.

Note of Appreciation

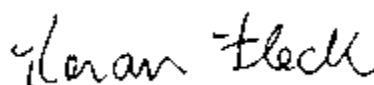
We extend our grateful appreciation to Sr Brenda Dolphin, Provincial Leader, for the continued support and contribution of the Sisters of Mercy. We also thank the HSE and the IEHG for their ongoing support and look forward to working constructively together to maintain and improve the invaluable services provided by the NRH. We are grateful for the continued assistance and services from Mason Hayes + Curran, Solicitors; and our Auditors, Robert J. Kidney and Company. The members of the Board of Management and of its subcommittees in 2023 also deserve our thanks, namely:

- the Medical Board,
- the Audit Committee,
- the Nominations Committee,
- the Executive Committee,
- the Finance Committee,
- the Ethics Committee.

The Chairpersons and members of each committee give their time, voluntarily and without remuneration, in the interests of the hospital and the patients we serve.

2023 was a very significant year in the history of the NRH as we marked the retirement of our Chief Executive, Derek Greene in December, following almost 25 years of loyal and assiduous service to the NRH and the patients we serve. During his tenure, Derek led and supported the management and staff in the delivery of extraordinary major change, initiatives and developments. Derek ensured that the safety of patients, staff and families was at the core of every decision taken. The completion of Phase One of hospital redevelopment project, and the successful transfer of services into the new building is a testament to Derek's stalwart perseverance and unstinting hard work. The Board is extremely thankful for the immense contribution Derek has made to the NRH, and the lives of our patients and staff. We extend every good wish for a long and happy retirement.

June Stanley was appointed Interim CEO pending the recruitment process and we wish June every success in the role.



Kieran Fleck
Chairman



Chief Executive's Report



Derek Greene
Chief Executive

Delivering and Developing Specialist Rehabilitation Services Nationally

In 2023, in line with public health guidelines, COVID-19 restrictions were finally lifted. Visiting times reverted to normal and this was a very welcome development for patients and families. The management team and Board of the hospital have continued to extend their sincere appreciation and gratitude to every member of staff who rose admirably to meet the challenges posed to them by the protracted pandemic over a period of three years.

The New Hospital Development

The business case developed by the NRH management team in preparation for the appointment of a Design Team for Phase Two of the New Hospital Project on the NRH Campus, as part of the HSE's Strategic Assessment Report (SAR) process, was submitted for approval. The focus of the NRH is to provide as a matter of urgency the additional rehabilitation beds required to meet the increasing needs of those requiring complex specialist rehabilitation services nationally. We would hope that all of the additional beds needed will be provided in Phase Two.

Hospital Activity and Performance Data Reporting

The above monthly reports are circulated to the Board to ensure its members are fully informed in relation to all key issues, milestones and developments. In addition, the Board meetings include presentations delivered on a rotational

basis by representatives of hospital Departments and Services to illustrate to Board members the patient-centred approach applied by clinical and non-clinical team members to delivering optimal care and treatment to achieve best outcomes for all patients.

Staffing Matters

Recruitment and retention was a health sector-wide issue in 2023. It was compounded by the recruitment embargo imposed by the HSE in the second half of 2023. A very substantial effort went into recruitment during the year and this remains a significant challenge for HR, and in particular for Nursing and Health and Social Care Professional (HSCP) Managers in the current climate. Staff shortages posed organisational challenges, however, teams worked together and achieved the target to open the five remaining beds in the new hospital.

Highlights and Key Issues in 2023

DELAYED TRANSFERS OF CARE

The ongoing significant challenge of Delayed Transfers of Care (DToC) for the NRH affects patients' admission to our services. A working group of representatives from the HSE and the NRH are working to explore if an improved funding model can be developed to reduce the impact of this issue on all services. This initiative has already resulted in some positive outcomes to date.

DEVELOPMENT OF AN NRH ELECTRONIC PATIENT RECORD - PROJECT FUSION

In 2023, the Project Fusion Team, as part of the implementation of the TrakCare Electronic Patient Record (EPR), successfully launched the Patient Administration System (PAS) 'go-live' in May, followed by the Clinical 'go-live' in October and the Electronic Prescription and Medication Administration (ePMA) system in November. Some of the key benefits of the transfer from paper-based healthcare records to Electronic Patient Records include:

- Enhanced quality and real-time patient data.
- Enhanced access to information for clinicians to support collaborative decision-making in the care of patients.
- Improved Patient experience
- Improved co-ordination of processes across the patient journey
- Reducing duplication of information relating to patient care - freeing up clinicians and care staff to care for patients.
- Access to a single source of information to support auditing, reporting and service development requirements.
- Increased data security.

THE ASSISTED DECISION MAKING (CAPACITY) ACT (ADMA)

In 2023, the NRH prepared for the implementation of the Assisted Decision Making (Capacity) Act 2015 (ADMA). Two NRH representatives have been seconded as the key designated persons for all matters pertaining to the new ADMA legislation and a communications action plan was implemented across the hospital on this topic. A dedicated NRH ADMA Office has been established to support staff members in applying the provisions of the Act in the NRH.

The NRH Board

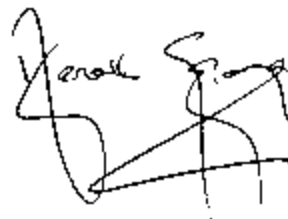
On behalf of the staff, I would like to formally acknowledge all the work that the Board undertakes to maintain our governance structure to the highest possible standard. The Board guides us through difficult times and continues to promote the case for Phases Two and Three of the new hospital for the benefit of patients and staff. The NRH is deeply appreciative to have the Board and Chairman, Mr Kieran Fleck, who support the hospital as diligently as they do. Thank you sincerely for your ongoing support, and your time and commitment to the hospital, which is given on a voluntary basis by every member of the Board.

In Conclusion

2023 has been a momentous year for me as I retire from the Health Service. On joining the NRH in 1999, I was unaware of the impact that working in the hospital would have, and the opportunities it presented me with to work with such excellent and skilled staff as the those in the NRH. It was a privilege to engage with patients at sentinel points in their lives and to work with such a skilled team of Clinicians and Healthcare Professionals. While the HSE and Healthcare landscape has changed, the long-held values of the Hospital have remained intact, in caring for those in difficulty, putting the patient first and going the extra mile to help patients on their journey towards recovery. Thanks to each and every member of staff and volunteers. The role you play is a vital part in team NRH and I encourage you to put your best foot forward in continuing on this journey.

Ms June Stanley was appointed by the Board as Interim CEO and I would like to wish June every success in the role.

With heartfelt thanks and appreciation to all.



Derek Greene
Chief Executive

Councillor Denis O'Callaghan Cathaoirleach of Dún Laoghaire-Rathdown County Council, and Rosie Kelly, Physiotherapy Manger at the launch of the 10th Annual Sports Championships at the NRH.





JUNE STANLEY

Deputy CEO, Director of Operational Services

During 2023, some COVID-19 vaccination and booster clinics continued in the NRH. When our numbers requiring vaccination reduced, our staff and Inpatients were accommodated through the COVID-19 vaccination centres and visiting vaccination teams. Sincere thanks to all the staff involved in the clinics during the three years of the pandemic, which thankfully came to an end with the lifting of COVID-19 restrictions in April 2023.

Hospital Major Emergency Plan

The Hospital Major Emergency Plan (HMEP) was further developed in 2023. The plan outlines the responsibilities of individuals and departments in the event of a major emergency. It prioritises specific requirements and actions and establishes how the major emergency should be managed. The Dublin Fire Brigade (DFB) agreed to be part of the Emergency Management Group. As part of emergency management planning, the first full Unit evacuation of patients was scheduled and fully tested with the oversight of DFB. In addition, the HMEP was successfully activated in response to a power outage and the learning was extremely beneficial.

New Hospital Development

In relation to the next phase of the redevelopment project, a Strategic Assessment Report (SAR) has been submitted and work continues under the direction of O'Connell Mahon, Lead Architects and Indecon who are working closely with the HSE on the feasibility study.

National Trauma Strategy

Rehabilitation is an integral part of a trauma network, and as the national provider of complex specialist rehabilitation services, the NRH continued its involvement in the process for the National Trauma Strategy launched by the HSE and Department of Health. Mr Keith Synnott is National Clinical Lead for Trauma Services in Ireland. Dr Éimear Smith is Clinical Lead for the Central Trauma Network. In 2023, the Deputy CEO was NRH lead representative and work in ongoing on this key initiative.

Developments in 2023

ENERGY & SUSTAINABILITY AND CLIMATE ROADMAP, 2023

The hospital's Energy & Sustainability Committee is led by David Donohoe, Foreman, Technical Services Department. The NRH Climate Road Map was approved by the Board and was submitted to the SEAI as part of the Health Services commitment to the National Climate Action Plan. Pauline Sheils served as the Board representative on the NRH Energy Sustainability Management Committee in 2023.

NATIONAL INSPECTIONS

A HIQA inspection of the Radiology Department was carried out in May and an announced HIQA Inspection was carried out over two days in September. A HSA Inspection was also carried out in 2023. All three reports were very positive and complementary, with some learnings also, for example around policies and Standard Operating Procedure development.

Rehabilitation is an integral part of a trauma network, and as the national provider of complex specialist rehabilitation services, the NRH continued its involvement in the process for the National Trauma Strategy launched by the HSE and Department of Health.

Paul McNeive, representing the Board at the official opening of the 10th Annual Sports Champions at the NRH.



NRH ORGANISATIONAL REVIEW

With the Board's agreement, an independent organisation was engaged to carry out a review of the NRH and its interactions with stakeholders. There was consensus that the hospital should have a clear strategic direction particularly in light of the ongoing New Hospital Project and its involvement with the Trauma Steering Group. An extensive survey was undertaken and all stakeholder representative groups were invited to participate in the review over several weeks. The report, with the addition of a preamble to contextualise its findings as requested by the Board, was presented to staff attending both in person and online. The staff feedback session was facilitated by the survey team from IFIC (International Foundation for Integrated Care), a recording of the session was made available online for staff members. A joint meeting of members of the Executive and the Operations Management Committee was held to review the report and develop a future strategy and this work is ongoing.

NRH - IEHG RAPID IMPROVEMENT EVENT TO STREAMLINE AND IMPROVE NRH REFERRAL PROCESSES

The NRH participated in a Rapid Improvement Event (RIE) in collaboration with the Ireland East Hospital Group (IEHG) focusing on the NRH referral pathway, commencing in 2023. The RIE reviewed the current processes from receipt of referral to when a patient is admitted to Inpatient services or attends their first Outpatient appointment, with a view to providing a more patient-centred solution which streamlines the referral process across the NRH, removes non value-added activities and optimises timely triage. The report-out from the RIE will be finalised in early 2024.

I would like to take this opportunity to sincerely thank Derek Greene, Chief Executive, for his ongoing encouragement and support throughout the years. Derek retired in December and I extend every good wish for the future.



NRH Board of Management



Mr Kieran Fleck
Chairman



Mr Henry Murdoch



Mr Derek Greene
Secretary



Prof Jacinta Morgan
Clinical Director



Prof Áine Carroll



Ms Breda Moriarty



Ms Fiona Marsh
Acting Director of Nursing



Mr Paul McNeive



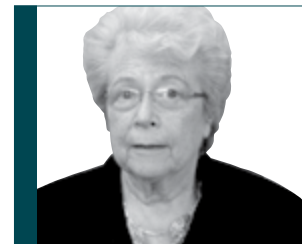
Dr John O'Keeffe



Ms Pauline Sheils



Ms Elizabeth Maguire



Sr Helena O'Donoghue



Mr Robert Costello



Mr Terence Liston



Ms Andrea Hanson
(from April)



Mr Michael Meghan
(from April)



Ms Eilish Macklin
(from April)

NRH Committees

Board of Management

Mr Kieran Fleck <i>(Chair)</i>	11/11*
Mr Derek Greene <i>(Secretary)</i>	11/11*
Mr Henry Murdoch	9/11*
Sr Helena O'Donoghue	8/11*
Mr Paul McNeive	10/11*
Prof Jacinta Morgan	11/11*
Ms Elizabeth Maguire	10/11*
Ms Pauline Sheils	11/11*
Dr John O'Keefe	10/11*
Ms Breda Moriarty	7/11*
Prof Áine Carroll	11/11*
Mr Robert Costello	7/11*
Mr Terence Liston	11/11*
Ms Fiona Marsh (A/DON)	10/11*
Ms Eilish Macklin (from April)	9/11*
Ms Andrea Hanson (from April)	8/11*
Mr Michael Meghan (from April)	7/11*

* Total Board Meeting Attendance

Executive Committee

Mr Derek Greene
(Chair)

Prof Jacinta Morgan

Ms June Stanley

Mr Sam Dunwoody

Ms Elayne Taylor

Ms Fiona Marsh

Dr Áine Carroll

Dr Amanda Carty

Ms Rosemarie Nolan

Ms Olive Keenan

Ms Anne O'Loughlin

Ms Rosie Kelly

Ms Cathy Quinn

Medical Board

Prof Áine Carroll
(Chair)

Dr Jacinta McElligott

Prof Jacinta Morgan

Prof Robert Flynn

Dr Brian McGlone

Dr Nicola Ryall

Dr Éimear Smith

Dr Susan Finn

Dr John MacFarlane

Dr Paul Carroll

Dr Cara McDonagh

Dr Eugene Wallace

Dr Jacqui Stow

Dr Raymond Carson

Dr Maria Frampton

Dr Mairead Hayes

Dr Laura Ryan

Dr Kinley Roberts

Dr Sabrina McAlister

Dr Aaisha Khan

Dr Kieran O'Driscoll

Dr Irwin Gill

Dr Kirk Levins

Dr Lilia Zaporojan

Dr Shane Hanratty
(from July)

Ethics Committee

Ms Elizabeth Maguire
(Chair)

Mr Derek Greene

Dr Jacqui Stow

Dr Simone Carton

Ms Elayne Taylor

Ms Fiona Marsh

Ms Pauline Sheils

Fr Michael Kennedy

Ms Breda Moriarty

Ms June Stanley

Mr Sam Dunwoody

Dr Cliona McGovern

Mr John Maher

Ms Ruth Maher

Ms Rita O'Connor
(from September)

Mr Asmin Sheik
(from March)

Patients Forum

Mr Tim Rice
(Chair)

Ms Carol Barton
(to July)

Ms Paula Carroll
(from August)

Representative from Therapeutic Recreation Service

Mr Mark Barry (IWA Sport)

Ms Esther Fitzgerald

All Patients and family members are invited to attend

In attendance:

Member of NRH Executive Committee

Finance & General Purpose Committee

Mr Kieran Fleck
(Chair)

Mr Robert Costello

Mr Terence Liston

Ms Fiona Marsh
(A/DON)

Prof Jacinta Morgan

In attendance:

Mr Derek Greene

Ms June Stanley

Mr Sam Dunwoody

Audit Committee

Mr Dermot Quinn
(Chair)

Mr Henry Murdoch

Mr Terence Liston

In attendance:

Ms June Stanley

Mr Sam Dunwoody

Mr Robert Costello

Nomination Committee

Ms Elizabeth Maguire
(Chair)

Mr Kieran Fleck

Mr Derek Greene

Ms Breda Moriarty

Ms Eilish Macklin
(from February 2023)



Financial Statement



Sam Dunwoody
Director of Finance

The NRH Hospital reporting structure in 2023 is to the Ireland East Hospital Group (IEHG), while also working with the HSE on some National Strategies including the National Trauma Network and Delayed Transfers of Care.

Aligned with the above, the NRH continued to strive to increase bed capacity and occupancy while maintaining a safe, person-centred environment for both patients and staff. There was ongoing recruitment of the additional staffing required to manage the significant changes in service demands and increased caseload complexities throughout 2023 and to ensure provision of safe care for our patient population. Bed occupancy increased to full capacity by early September 2023.

Financially 2023 began with an opening funding allocation from the HSE for service provision of circa €8.0m less than our predicted funding requirements to cover service costs for the year with additional beds. The opening allocation was €56.413m. This included €3.300m allocated for known pay cost increases in 2023. The NRH was expected to maintain existing level of service for 2023 as part of our Service Level Agreement with the HSE while also opening the remaining new beds. The hospital continued to negotiate with the IEHG/HSE for further funding due to increased bed capacity in new hospital as well as providing services in the original hospital buildings. There were further additional once off allocations resulting in a combined €6.869m uplift allocated by January 2024 and a final supplementary once off funding allocation of €1.065m, bringing the final allocation to €62.222m for ongoing services with a further €2.124m funding for pension and retirement lump sums. The final allocation for 2023 was €64,346,514.

2023 Fiscal Outcome

The year-end final allocation was €64.347m (2022: €56.433m) and our total net expenditure incurred in 2023 was €64.139m (2022: €56.573m). This resulted in an overall cumulative temporary surplus in funding of €20,7877 to year ending 31st December 2023. The majority of this surplus is related to savings in delayed filling of approved service posts of €0.276m with a small overspend in non-pay expenditure of €0.109m and a small surplus in receipts income of €0.041m. The net result over the last number of years is now showing a cumulative temporary surplus of just €0.208m (0.003%) due to the hospital's very tight fiscal policy, monitoring of expenditure across all areas and was only achievable with very strong working relationships with budget holders and line managers across the organisation, and the final supplementary funding provided by the HSE. Appreciation and thanks to all the staff for their continued support and commitment in managing costs to maintain delivery of safe services for our patients. The pressure of managing the same level of care and services while controlling expenditure will increase further into 2024 while we await appropriate allocation from the HSE. There is again a high level of 'once off' funding in our opening allocation for 2024 and the additional expenditure associated to the new Public Only Consultants Contract, the new Electronic Patient Record Management System and the resources to manage the new Assisted Decision Making Act requirements not been funded in the current allocation for 2024 services.



The Project Fusion Team celebrated the roll-out of the Electronic Patient Record (EPR), TrakCare in three phases during 2023.

A summary of the 2023 Revenue Income & Expenditure Account is as follows:

	Budget 2023 €000	Actual 2023 €000	Variance Current Year €000	Actual 2022 €000
Opening Deficit / Overspend		37		37
Pay Expenditure	55,047	54,771	(276)	48,002
Non-Pay Expenditure	17,825	17,934	109	16,69666
Gross Expenditure	72,872	72,705	(167)	64,737
Less Income Receipts	(8,525)	(8,566)	(41)	(8,164)
Net Expenditure	64,347	64,139	(208)	56,573
Revenue Allocation	64,347	64,347		56,433
Closing Deficit / Overspend		(208)		140

Income and Expenditure Account

Service-related pay costs increased from €44.325m to €50.580m – an increase of 14.11%. Payroll costs increased by €6.255m due to increased staffing levels related to increased inpatient bed capacity, cover for COVID-related absences, national pay increases, service increases and pressures, and increased maternity leave cover. Excluded from this figure is the Pensions and Lump Sums expenditure of €4.050m (202: €3.677m). The current level of funding is affecting the level of service provision, making it increasingly difficult to meet the demands for rehabilitation programmes as our patient complexity continues to increase including increased levels of enhanced nursing care for patients with highly complex needs.



Non-Pay expenditure shows an increase of €1.236m – an increase of 7.4% on the previous year's expenditure. The majority of this increased expenditure related running costs of the new hospital including energy and maintenance contracts and some elements of increased cost due to the treatment and care of patients with highly complex needs.

The main areas of expenditure were: the cost associated to the manufacture and supply of Artificial Limbs and Orthotics which made up 21.78% (€3.906m) of expenditure (2022: €4.215m). Other categories of Non-Pay expenditure which changed were Energy down €0.249m (17.34%), Drugs & Medicines increased by €0.030m (6.13%), there were increases in Medical and Surgical, Catering, Cleaning, Patient Transport, Maintenance, Insurance and Administration and Computer Supplies. Radiology, Lab costs increased 36.36% and 5.58% respectively. There were increases also in bank interest and fees, Legal costs, Insurance premiums with the remaining categories in line with 2022 expenditure.

As a Teaching Hospital it is vitally important that the NRH continues to invest in staff training and education across the organisation to support our teams in delivering this specialised national service. In previous years increases in income receipts helped offset much of the non-pay and pay overruns and this again occurred but to a lesser extent due to the restrictions imposed by COVID. We again received grants from the NRH Foundation which help fund the purchase of new ward and therapy equipment as well as supporting a number of embedded researchers as part of our INSPIRE Project

2023 saw the overall income receipts increase by €0.403m to €8.567m (2022: €8.164m) an increase of 4.94% on 2022). The main income changes of note were Sales of Artificial Limbs and Orthotics which decreased to €3.912m (2022: €4.207m), Income from External Agencies increased by €0.838m. This was made up of a once off increase of €519,000 in funding from the Department of Finance related to the Disabled Drivers Medical Board of Appeal, and increased receipts of €260,800 as Grant Aid from the NRH Foundation, from €250,444 in 2022 to €511,285 in 2023. 2023 saw an increase in canteen and other income receipts of circa €109,000 to €0.557m (2022: €0.448m). 2023 saw a large reduction in receipted income from approved charges related to Road Traffic Accidents insurance claims of €0.484m (49.12%) from €984,500 (2022) to €500,900 received in 2023. The inflow of income receipts from Road Traffic Accidents is extremely unpredictable and the major decrease in receipts in 2023 below our budget projections has added to the overall net result in 2023.

Capital Grants

Capital Funding approved during 2023 was as follows:

	2023 €	2022 €
Capital Project		
New Hospital Redevelopment Project Phase 1 – HSE	1,438,320	1,333,874
New Hospital Redevelopment Project Phase 2 – HSE	137,834	–
Minor Capital – Projects		
NERP - Replacement Equipment Defibs	–	66,814
eHealth Projects – Equipment	207,139	–
New Clinical Management System – FUSION Project	1,916,993	1,403,976
Energy / Electrical Upgrade Project	74,504	77,444
AMRIC – Infection Control Projects	78,025	–
Infrastructural and Risks Projects	100,000	–
Security System Review	–	1,845
	3,952,805	2,883,983

📣 Our sincere gratitude and thanks to all those who have donated and fundraised over the last year - your kind generosity has and will continue to make a difference to the lives of our staff, the patients we serve, their families and carers. 📣

Developments

Hospital Senior Management met with the designated IEHG Senior Management Operations Team as part of a continuous review process and to discuss a number of issues including temporary bed closures, COVID-19, New Hospital Development and reopening beds, additional service funding, current staffing and related funding levels, increased delayed transfers of care, the National Clinical Programme for Rehabilitation Medicine, ongoing service pressures, service developments and waiting list initiatives, employee levels and revenue allocation adjustments and submissions. Two projects in particular are of major importance to the development of the NRH. Phase 2 of the New Hospital Development for which a business case and schedule of accommodation were submitted for approval to complete the Strategic Assessment Report (SAR) and Feasibility Study for Phase 2. The Second project related to the Electronic Patient Record which was approved by DPER/HSE. The two-phase Go-Live met its target dates in 2023, with a completion timeline by Q1 2024.

The NRH is also involved in a European Union Horizon 2020 Research and Innovation Project funded under Grant Agreement No 101017606 – Remote Rehabilitation Services for Isolated Areas (ROSIA). This is a PCP project involving 12 consortium members representing five EU countries. This is a very exciting project which involves the hospital being one of three procurer and pilot sites, with Spain and Portugal, and the commencement the pilot phase is scheduled to commence in June 2024.

The Hospital continued to seek additional minor Capital funding throughout 2023 in support of services in our original hospital buildings. Grant funding was sought for replacement Emergency Response Equipment, eHealth projects for a number of our Services and Programmes, improvements in our infection control and infrastructural facilities. We are very thankful that these items were funded by the HSE and IEHG which has helped to maintain our safe services in line with international standards and best practice.

The Hospital received €511,285 in Grant Aid from the NRH Foundation in support of INSPIRE embedded researchers, replacement equipment, support of our four Rehabilitation Programmes and Therapy Services and some new diagnostic and monitoring equipment, all of which was very much appreciated. These additional services and equipment will all go towards service enhancements for patients. Our sincere gratitude and thanks to all those who have donated and fundraised over the last year - your kind generosity has and will continue to make a difference to the lives of our staff, the patients we serve, their families and carers.



Sam Dunwoody
Director of Finance



Clinical Director's Report



Prof Jacinta Morgan
Clinical Director NRH

Dr Paul Carroll, NRH Consultant in Rehabilitation Medicine, continued as clinical lead of the National Clinical Programme for Rehabilitation Medicine (NCPRM).

As part of the operationalisation of the Department of Health's Sláintecare programme the POCC23 (public-only consultant contract) was introduced in March 2023.

The Assisted Decision-Making (Capacity) Act of 2015 commenced in April 2023. The NRH demonstrated great prescience by convening a high-level working group which has ensured the competence and compassion of our clinical teams in applying this paradigm-altering legislation to the needs of our patient constituency. Two senior HSCP clinicians (Ms Renee Summers, Senior MSW and Dr Claire McMoreland, Senior Clinical Neuropsychologist) have been seconded to ADMA support roles to apply the provisions of the act in the NRH, particularly in expediting decision-making representative (DMR) legal applications for a significant minority of our patients.

National Context

In 2023 the impact of the COVID-19 pandemic receded greatly. The NRH COVID-19 working group, convened in March 2020, held its final meeting on 7th February 2023. Application of national guidelines relating to COVID-19, other respiratory viruses and MDROs (multidrug-resistant organisms) reverted to the NRH Hygiene and Infection, Prevention and Control Committee (HIPCC), chaired by the Director of Nursing and reports directly to the NRH Board of Management. Special gratitude is due to Dr Laura Ryan, NRH and SVUH Consultant Microbiologist, and the NRH Occupational Health Department led by Ms Rose Curtis, Occupational Specialist, for their exceptional commitment and work ethic in supporting patients and staff during the most difficult periods of the active pandemic.

The NRH continues to contribute significantly to the evolution of trauma services with deputy CEO (Ms June Stanley to January 2024) and Consultant in Rehabilitation Medicine (Dr Éimear Smith) representation on the National Trauma Strategy Group (TSG). The NRH is considering how best to align its planned capital development (Phase Two) and workforce expansion with the specialist rehabilitation needs identified and planned by the National TSG. Several cross-agency consultant posts involving the NRH are under development to support the long-term rehabilitation needs of patients who sustain severe traumatic injuries.

NRH Clinical Services

The NRH quality, safety and risk (QSR) committee is supported by the IEHG quality and patient safety function in its efforts to strengthen and develop clinical governance policies and procedures within the NRH. The clinical director chairs this committee and reports its activities directly to the Hospital Board. The Deteriorating Patient Committee, chaired by Ms Attracta Kennedy, Resuscitation Officer, and its two sub committees (Sepsis and CPR), are now well established and their activities are driving greater compliance with mandatory clinical training and clinical competence relating to emergency care. After accreditation by the IHF (Irish Heart Foundation), the NRH now delivers all its own training courses in basic and advanced life support.

The QSR training subgroup, since early 2023, has been analysing, organising and systematising delivery and monitoring of mandatory training in close co-operation with the HR department. This parallel operational stream will inform the training module of the planned update of HR CORE software in 2024.

In the IEHG's 2023 Sepsis Awareness Campaign the NRH demonstrated *'Most Improved Compliance'* in iNEWS and Sepsis training (out of 13 hospitals in the group).

Again special gratitude is due to our Risk Manager, Ms Elayne Taylor, for her exceptional commitment in ensuring our regulatory compliance, particularly during two national inspections in 2023 (HIQA and HSA). Elayne is supported by Ms Alex Craft who commenced as the Quality and Accreditation Officer in early 2023. Ms Clare Slevin continues to demonstrate her outstanding administrative competence as support to these clinical governance committees and to all clinical director activities, including administrative aspects of Medical Board activities.

The work of two critical in-house projects continued in 2023. (i) The IEHG RIE (rapid improvement event) was facilitated by the IEHG transformation team with a cross-organisational team from the NRH in late 2023, focusing on the NRH referral pathway. So far, a more efficient and effective process has been developed and will be rolled out in mid-2024. (ii) The FUSION e-health team, led by John Maher and Paul Griffin, delivered electronic patient administration, the new NRH electronic health care record and electronic prescribing, underpinned by an extensive staff training programme, on time and with a high degree of satisfaction among the NRH staff who now use it daily.

We hope that the pragmatic and visionary recommendations from the IFIC (International Foundation for Integrated Care) organisational review can guide us in realising the remarkable potential of the NRH.

NRH demonstrated great prescience by convening a high-level working group which has ensured the competence and compassion of our clinical teams in applying this paradigm-altering legislation to the needs of our patient constituency. »

The NRH facilitates Medical, Nursing and Health and Social Care Professional clinical placements each year across all NRH Clinical Programmes and disciplines.





Admitting Consultants (Consultants in Rehabilitation Medicine)



Prof Jacinta Morgan
Clinical Director



Prof Áine Carroll
Chairperson, NRH Medical Board



Dr Nicola Ryall



Dr Jacinta McElligott



Dr Éimear Smith



Dr Susan Finn



Dr Eugene Wallace



Dr Paul Carroll



Dr Jacqui Stow



Dr Cara McDonagh



Dr John MacFarlane



Dr Kinley Roberts



Dr Sabrina McAlister



Dr Raymond Carson



Dr Irwin Gill



Dr Shane Hanratty

Consultants with clinical attachment at the NRH



Dr Maria Frampton
Consultant Psychiatrist



Dr Laura Ryan
Consultant Microbiologist



Dr Brian McGlone
Consultant Radiologist



Prof Robert Flynn
Consultant Urologist



Dr Mairéad Hayes
Consultant Intensivist



Dr Kirk Levins
Consultant in Pain Medicine



Dr Lilia Zaporozhan
Rehabilitation Medicine, NRH and MMUH

Medical Board Report



Prof Áine Carroll
Chairperson, NRH Medical Board

Once again, as Chair of the Medical Board, I have the honour of reflecting upon the achievements and advancements of the past year. In the complex adaptive system of healthcare, where compassion converges with cutting-edge science, our journey has been nothing short of remarkable.

This report serves as a testament to the unwavering dedication and collective efforts of our exceptional medical staff, whose commitment to excellence has fuelled the transformative impact we continue to make in the lives of those we serve. Throughout the challenges faced, our hospital community has emerged stronger, more resilient, and deeply connected to the core values that define us. Together, we have transcended boundaries, embraced innovation, and nurtured a culture of compassion that extends far beyond the confines of our building.

As you read this report, may the narratives within inspire and reinforce our collective commitment to advancing the frontiers of healthcare.

Let this whole annual report stand as a testament to the indomitable spirit that propels the NRH family forward, guiding us towards a future where every patient receives not just medical care, but integrated care and the warmth and reassurance of a compassionate healing touch.

My thanks to my colleagues for your unwavering support, dedication, and tireless efforts in shaping a healthcare landscape that truly makes a difference.

Clinical Leadership Roles

The Medical Board wish to thank Prof Jacinta Morgan for her continued outstanding leadership and another year of hard work and commitment as Clinical Director.

Professor Morgan participated in the Ireland East Hospital Group Rapid Improvement Event (RIE) as the NRH process owner. The RIE reviewed the NRH varying access points for referral with an aim to provide a more patient centred solution which streamlines the referral process across the NRH. The event was deemed a huge success.

Dr Éimear Smith remains as co-sponsor for the Rehabilitation Workstream of the Trauma System Implementation Programme. There are three key recommendations for rehabilitation in the Trauma Strategy for Ireland document:

1. All trauma patients can access rehabilitation and will have their rehabilitation needs assessed within 48 hours of admission, generating a flexible personal prescription that should accompany the patient through the pathway.
2. Rehabilitation services in acute and community settings adopt a person-centred approach.
3. HSE should ensure coordinated development of regional and community services, and long-term support to meet the needs of all trauma patients within a trauma network.

Rehabilitation Needs Assessment and Prescription are in use in the Major Trauma Centres. The first review meeting with relevant stakeholders took place in December 2023, which will result in changes to this documentation and how it is used. The National Office for Trauma Services (NOTS) carried out a national mapping project of all post-acute rehabilitation services which will assist with service development in the future. This is moving through the HSE reporting structure for final approval. In addition, Phase One of a point prevalence survey was carried out in all HSE governed hospitals (excluding CUH) to determine the rehabilitation needs of the population. This data is under analysis at present. A second phase will be completed in due course, of all other hospitals, which will take additional preparation to ensure adherence to all data protection guidelines outside of HSE governed hospitals.

Dr. Paul Carroll continues the role of Clinical Lead for the National Clinical Programme for Rehabilitation Medicine. Current workstreams include the development of links with the South and Southwest and West of Ireland to explore potential service expansion, development of community specialist neurorehabilitation teams, with some initial funding available, as well as trauma rehabilitation links and designing of a new curriculum for rehabilitation medicine.



Members of the Interdisciplinary Teams from the POLAR and SCSC Programmes.

Dr. Paul Carroll also continued the role of National Speciality Director in 2023 while Dr. Raymond Carson commenced the roll of Basic Speciality Training (BST) lead. The NRH Consultants contributed to a varied and detailed schedule of training and teaching throughout the year which was widely attended and appreciated by the wider medical department.

Dr. Brian McGlone achieved accreditation by examination from the International Society for Clinical Densitometry (ISCD) as a Certified Clinical Densitometrist (CCD).

We bade farewell to our colleague Dr. Kieran O'Driscoll who retired, and we wish him every happiness on his next phase.

We welcome Dr. Lilia Zaporozhan back to the NRH on a sessional capacity. Over 105 patients have been reviewed in the acute settings, 87% with neurorehab needs and 17% post amputation. Dr. Zaporozhan has convened a Brain Injury IDT clinic in NRH and a small BI clinic in MMUH where patients who do not have complex rehabilitation needs are seen (including non-complex spasticity management).

Milestones for the Medical Department 2023

REGIONAL DEVELOPMENTS

Dr Ruairi Connolly was appointed as a Consultant in Cork and Dr Marie Boland was appointed as a Consultant in Trauma Rehabilitation in MMUH. Dr. Shane Hanratty was appointed as a Consultant colleague at NRH. The medical board congratulate them and wish them every success and happiness in their new roles.

HIGHER SPECIALIST REGISTRAR TRAINING PROGRAMME

The NRH welcomed Dr Papa'a Kadafa on to the Higher Specialist Training programme in Rehabilitation Medicine and we wish her well in her training programme.

NCHD AND BST TRAINING PROGRAMME

The Medical Board congratulate Dr Shane Hanratty and Dr Marie Boland for successfully obtaining their CSCST in 2023.

The Medical Board would like to express its heartfelt gratitude for the unwavering dedication, hard work, and exemplary patient care demonstrated by all our trainees. Their efforts have significantly benefited our patients and have strengthened the collaborative efforts of the Interdisciplinary Team across the entire hospital.

In particular, we want to recognize and commend the support and contributions of all the Non-Consultant Hospital Doctors (NCHDs) to our clinical audit activities. Their commitment has led to substantial improvements in clinical services, patient care, and overall patient outcomes. The advancements we have achieved are a direct result of their continuous efforts and dedication.

ACADEMIC ACTIVITY

The NRH continues to serve as a vibrant teaching site for the training of undergraduate Medical Students from Trinity College Dublin, University College Dublin, and the Royal College Surgeons of Ireland. The Medical Board sincerely thank Dr Prasanna K Venkatesh and Dr Ahmed Omer Ali, Clinical Tutors for their hard work and contribution to our undergraduate medical programmes throughout 2023 at the NRH.

We welcomed 98 students for Clinical placements from RCSI, 81 from TCD and 3 from UCD; a total of 182. In addition, we had 2 site visits from UCD General Practice Medicine module for a total of 20 students.

Knowledge mobilisation activities by Medical Staff in 2023

1. **Prof Áine Carroll:** *ROSIA (Remote Rehabilitation Service for Isolated Areas) project: Improving access to rehabilitation for people in isolated and remote areas through the development of cutting-edge digital solutions and innovative service delivery* **Platform Presentation.** 3rd Asia Pacific Conference on Integrated Care, September 2023 - **International.**
2. **Prof Áine Carroll:** *A Qualitative Exploration of The Challenges of Interdisciplinary Teamworking In Rehabilitation Services* **Platform Presentation** 3rd Asia Pacific Conference on Integrated Care September 2023 - **International.**
3. **Prof Áine Carroll:** *Physician Wellbeing in a National Rehabilitation Hospital, a qualitative study utilizing Maslow's hierarchy of needs as a Framework for analysis.* **Oral Poster** 3rd Asia Pacific Conference on Integrated Care September 2023 **International.**
4. **Prof Áine Carroll:** *Learning health systems in rehabilitation care - findings and recommendations from a scoping review* **Poster presentation** 16th European Public Health Conference 2023 - **International.**
5. **Prof Áine Carroll:** *Medical Consultants' Experience of Collective Leadership in Complexity: A Qualitative Interview Study That Formed Part of Preunderstanding Activities Prior To a Co-operative Inquiry* **Platform presentation** 11th International Action Research Colloquium June 2023 - **National.**
6. **Prof Áine Carroll:** *Patients' Perspectives Regarding Digital Health Technology to Support Self-management and Improve Integrated Stroke Care.* **Platform presentation.** International Conference on Integrated Care ICIC23, Antwerp, Belgium May 2023 - **International.**
7. **Prof Áine Carroll:** *Integrating Irish health care: How can we use the United Nations Convention on the Rights of Persons with Disabilities and Nine Pillars of Integrated Care?* **Platform presentation.** International Conference on Integrated Care ICIC23, Antwerp, Belgium May 2023 - **International.**
8. **Prof Áine Carroll:** *Interdisciplinary Teamworking in Rehabilitation: Key learnings and perceived challenges to change from healthcare professionals at a National Rehabilitation Hospital* **Poster presentation.** International Conference on Integrated Care ICIC23, Antwerp, Belgium May 2023 - **International.**
9. **Prof Áine Carroll:** *Application of complexity theory in health and social care research: a scoping review.* **Poster presentation.** International Conference on Integrated Care ICIC23, Antwerp, Belgium May 2023 - **International.**
10. **Prof Áine Carroll:** *How do Researchers Address the Criteria for Quality of Action Research Studies in Healthcare: A Scoping Review* **Poster presentation.** International Conference on Integrated Care ICIC23, Antwerp, Belgium May 2023 - **International.**
11. **Prof Áine Carroll:** *Conducting Co-Design with Older People in a Digital Setting: Methodological Reflections and Recommendations.* **Oral Presentation.** All-Ireland Integrated Care Conference, March 2023 - **National.**



12. **Prof Áine Carroll:** *Implementation of digital health for older person integrated care in Ireland: Reflections from The ValueCare Project*, **Poster Presentation**. All-Ireland Integrated Care Conference March 2023 - **National**.
13. **Prof Áine Carroll:** *Integrated care in Ireland, where are we now?*. **Keynote speaker**. All Ireland Conference on Integrated Care AICIC23, March 2023 - **National**.
14. **Dr. Brian McGlone:** *DXA in an Inpatient Brain Injury Population: A single centre audit*. (Dr. Susie van Baarsel, Dr. Unice Vorster, Dr. Brian McGlone and Prof Jacinta Morgan). Irish DXA Society Annual Meeting, March 2023 - **National**.
15. **Dr Éimear Smith:** *Traumatic central cord syndrome: Neuropathology, diagnosis & prognosis Instructional course*. International Spinal Cord Society (ISCoS) annual scientific meeting October 2023 - **International**.

NRH Research, Quality Improvement and Clinical Audit Awards 2023

1. Quality Improvement & Clinical Audit Categories:

- **Dr. Kinley Roberts:** *Impact of Specialist Inpatient Rehabilitation on Stroke Survivors Level of Disability* (Dr. Kinley Roberts, Kate Curtin). 1st Place in the Effective Care and Support Category.
- **Dr. Éimear Smith:** *Improving our knowledge of the ISNSCI/ASIA examination – A crash course*. (Dr. Éimear Smith) 1st Place in the Workforce Category.

2. Research Improvement Categories:

- **Dr. Brian McGlone:** *The Value of Renal Tract Imaging as Part of Annual Genito Urinary Review for Patients with Spinal Cord Injury* (Dr. Brian McGlone, Rosie Conlon, Joao Cardoso, Clodagh Reilly) 1st Place in the Undergraduate Category.
- **Dr. Éimear Smith:** *Traumatic spinal cord injury in Ireland: an epidemiological update, 2017 – 2022*. (Dr. Éimear Smith, Ili Nadia Binti Modh Fuad). 2nd Place in the Undergraduate Category.
- **Dr. Paul Carroll:** *Dissociating the impact of alexithymia and impaired self-awareness on emotional distress and aggression after traumatic brain injury*. (Dr. Paul Carroll, Dr. Suvi Dockree, Cathal French, Jodie O'Hara, Paul Dockree, Brian McGuire) 1st Place in the Postgraduate Category.

- **Prof Áine Carroll:** *A Person Centred, Interdisciplinary Approach to Goal Setting in Ireland's National Rehabilitation Hospital* (Prof Áine Carroll, Áine Traynor, Dr. Zsofia Torok and Dr. Lauren Christophers) 1st Place in the Research Team Category.
- **Prof Áine Carroll:** *ROSIA – Rehabilitation Services for Isolated Areas* (Prof Áine Carroll, Aisling Weyham, Dr. Cara McDonagh, George Dunwoody, Joan Monahan, John Maher, Kate Traynor, Maeve Turner, Rajni Mamgain, Rosemarie Nolan, Sadb Ni Ghiollain and Sam Dunwoody) 2nd Place in the Research Team Category.

Invited Presentations

1. **Dr Éimear Smith:** *From SCI Pre-clinical Models to Patients: the challenges and complexities of recovery and rehabilitation*. International Online Spinal Cord Injury Seminars (I-OSCIRS), 10th January 2023.
2. **Dr Éimear Smith:** *Predicting neurological recovery in tetraplegia*. Irish Hand Surgery Society, 10th March 2023.
3. **Dr. Brian McGlone:** *Challenges and Opportunities for DXA in Ireland 2023 – a Radiologists Perspective and The Diagnosis of Osteoporosis*. Irish DXA Society Annual Meeting, 20th March 2023.

Publications

1. **Dr. Irwin Gill:** *Rehabilitation for Children and Young People in Ireland following Acquired Brain Injury: current services and potential future directions*. (Childrens Health Ireland, ABI Ireland, Brain Tumour Ireland)

JOURNAL PUBLICATIONS

1. Carroll Á. 2023 Corporate governance – the Emperor's new clothes? Irish Medical Journal; July-August; Vol 116; No. 7; P803
2. Fagan, N., Browne, F., Dvorakova, V., Carroll, Á. and Irvine, A.D., 2023. 'Guidelines are not the issue, access to support and advice is the problem': a cross-sectional survey of general practitioners referring to paediatric dermatology. *Clinical and Experimental Dermatology*, p.llad284.
3. Fagan, N., Browne, F., Dvorakova, V., Carroll, Á. and Irvine, A.D., 2023. Getting it right the first time: an Irish paediatric dermatology perspective from a national care centre. *Clinical and Experimental Dermatology*, p.llad269.

4. Bally, E.L., Cheng, D., van Grieken, A., Ferri Sanz, M., Zanutto, O., Carroll, A., Darley, A., Roozenbeek, B., Dippel, D.W. and Raat, H., 2023. Patients' Perspectives Regarding Digital Health Technology to Support Self-management and Improve Integrated Stroke Care: Qualitative Interview Study. *Journal of Medical Internet Research*, 25, p.e42556.
5. Bally, E.L., Cheng, D., van Grieken, A., van Dam-Nolen, D.H., Macchione, S., Sanz, M.F., Carroll, Á., Roozenbeek, B., Dippel, D.W. and Raat, H., 2023. A Qualitative Study of the Values, Needs, and Preferences of Patients Regarding Stroke Care: The ValueCare Study. *International Journal of Integrated Care*, 23(3), pp.2-2.
6. Torok, Z., O'Keeffe, A., Darley, A. and Carroll, Á., 2023. A protocol for a scoping review of methodologies used to explore patient experience in post-acute rehabilitation settings. *HRB Open Research*, 6(5), p.5.
7. Christophers, L., Torok, Z., Cornall, C. and Carroll, A., 2023. Pilot of a person-centred, interdisciplinary approach to goal setting in Ireland's National Rehabilitation Hospital: a study protocol. *HRB Open Research*, 6(28), p.28.
8. Carroll, Á., Collins, C., McKenzie, J., Stokes, D. and Darley, A., 2023. Application of complexity theory in health and social care research: a scoping review. *BMJ open*, 13(3), p.e069180.
9. Casey, M., Coghlan, D., Carroll, Á. and Stokes, D., 2023. Towards a Checklist for Improving Action Research Quality in Healthcare Contexts. *Systemic Practice and Action Research*, pp.1-12.
10. Carroll, Á., Sukumar, P. and O'Keeffe, A., 2023. The impact of road safety strategy and policy on admissions to a national rehabilitation hospital; a 5-year retrospective review and reflection on trauma data. *BMC health services research*, 23(1), pp.1-8.
11. Casey, M., O'Connor, L., Cullen, W. and Carroll, Á., 2023. Role dimensions of general practice nurses in Ireland. *Rural and Remote Health*, 23(1), pp.8128-8128.
12. Torok, Z., O'Keeffe, A., Darley, A. and Carroll, Á., 2023. A protocol for a scoping review of methodologies used to explore patient experience in post-acute rehabilitation settings. *HRB Open Research*, 6(5), p.5.
13. L. Gander, R. Stanila, E. Doran, K. Crowley, L. Healy, A. Gough, C. Sinnot, C. Behan, S. Wilson, D. Cunningham, S. Kurian, A. Cope, A. Laffan, D. O'Rourke, L. Zaporozhan, C. Doherty, Science Direct February 2023.



Key NRH Developments and Initiatives

IDT Quality Care

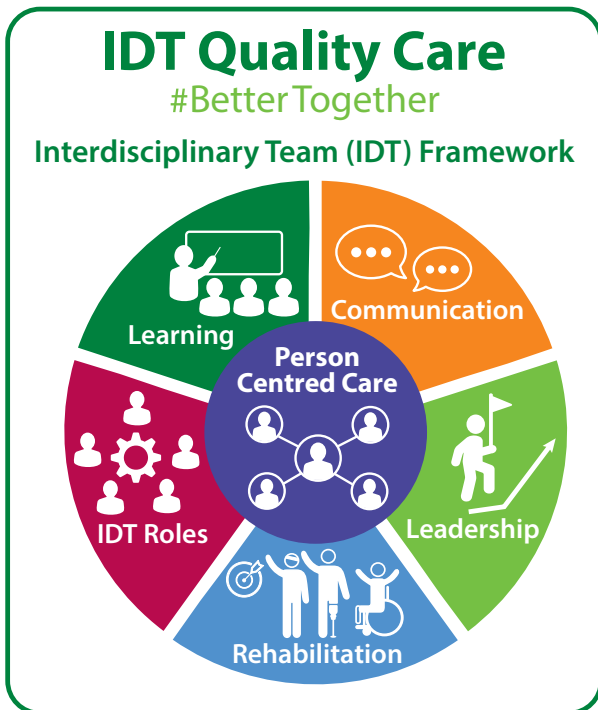
'BUILDING A FRAMEWORK AND CULTURE OF INTERDISCIPLINARY TEAM WORKING IN THE NRH'

This hospital-wide initiative is focussed on the continuous development of Interdisciplinary Team (IDT) working in line with the hospital's overall strategy to deliver safe and effective rehabilitation services in the new state-of-the-art hospital environment.

Benefits of IDT Working

- Developing a common language and shared understanding around the provision of rehabilitation
- IDT Working has positive outcomes for patients, staff and the organisation
- A shared understanding of IDT Working and individual roles within the IDT team

The NRH IDT Framework **was developed with staff and patients** through the integration of research, patient and staff experiences. The core components of the IDT Framework are shown in the symbol below. The expanded framework is available on the NRH Intranet and website. It can be used as a reference to support and guide teams and individuals in their everyday work.



The framework describes what each component is and isn't, why it's important and what it means from the perspectives of different team members. The IDT Framework provides a common reference for IDT working. It is a prompt for all staff to think about:

- individual role(s) within a team,
- the knowledge and skills brought to a team,
- the impact of behaviours or actions on others in a team,
- how everyone can integrate their knowledge and skills with those of colleagues, the patient and their family to achieve the best outcomes for everyone.

IDT GOAL SETTING PROCESS

The NRH has changed the way we approach goal setting and review. Changes made to the rehabilitation goal process were designed with stakeholders in the context of international best practice. Throughout 2024, Unit teams have worked together to make the process more person-centred and collaborative, and grounded in best practice. The introduction of the electronic patient record (EPR) allowed the design of documentation that supported these changes and prompts unit teams to collaborate, review and update information in a holistic way, based on the individual's rehabilitation goals.

The work of the NRH-INSPIRE embedded researchers is a catalyst for further learning and continuous improvement as staff and individuals' experiences of the new process are studied. Some of the preliminary results are shown below.

NRH-Inspire Project Staff Survey relating to the new Goal Setting Process

100%

of staff indicated their willingness 'to work with colleagues in new ways to use the new goal setting process'

68.3%

viewed the new process as a normal part of their work

65%

rated the new goal setting process as familiar

NRH-Inspire Project Patient Surveys relating to the new Goal Setting Process

83.3%

of patients rated their goals as very meaningful and important to them

91.7%

were very motivated to work on their goals

100%

felt that significant efforts were made to understand their priorities and incorporate these into rehabilitation decisions

'I was an active participant in the Goal Setting session'

25% Agree
75% Strongly Agree

'My views and opinions about the goals were listened to'

17% Agree
83% Strongly Agree

National Rehabilitation Hospital Clinical Audit & Quality Awards

All NRH programmes, departments, teams and committees were invited to submit details of their Audit or Quality Improvement Initiative for the inaugural NRH Clinical Audit and Quality Awards. The Awards were initiated by the Quality, Safety and Risk Committee. The awards were based on projects that excelled in the development of any new pathways of care; introducing changes that enhance patients' experience; introducing new information for patients; or any projects that helped staff wellbeing. A total of over 40 submissions of extremely high quality were received from across the hospital and the inaugural Awards event was held in December.



Dr George Dunwoody and Prof Áine Carroll, Principal Investigator in the NRH for the ROSIA Project.

The ROSIA Project

The NRH is one of the 12 partners in the European funded ROSIA Project, as well as being a lead procurer and one of three Pilot Sites for the project.

ROSLA (Remote Rehabilitation Service for Isolated Areas) is a European Commission Horizon 2020, Pre-commercial Procurement (PCP) project, consisting of 12 partners across five countries (Ireland, Spain, Portugal, Netherlands and Denmark).

ROSLA's main objective is to address healthcare provision shortcomes and advance innovative digital solutions with development of devices and applications enhancing community care services for patients in their rehabilitation journey.

ROSLA will create a catalogue of technology-based products and solutions enabled by technological advancements (telerehabilitation) and disruptive technologies (virtual-augmented reality, depth cameras, sensors, IoT, or artificial intelligence) as part of a new and comprehensive service delivery for patients across Europe.

The project has a planned duration of 54 months, from January 2021 until August 2025. Phases one and two of project are complete and Phase three (the pilot phase, focusing initially on the NRH Outpatient Department) will commence in 2024.

ROSLA PROCURERS AND TEST SITES

ROSLA buyers' group represents three different European healthcare systems: the **National Rehabilitation Hospital, Ireland; SALUD**, a regional authority from **Aragon, Spain**; and **Coimbra Univ. Hospital** from **Portugal**. Validation will take place in two shires or localities per country. These public procurers plan to acquire, through the Public Procurement of Innovation instrument (PPI), the design of the future's tele-rehabilitation services for remote areas.

The ROSIA project aims to accomplish a triple victory: Patients, Healthcare and Entrepreneurship. Patients in rural areas will be empowered; they will be able to work through their rehabilitation programmes from home. The healthcare system will be empowered; it will be able to meet its patients' needs without requiring them to travel long distances. And the European business community will be empowered; it will have a chance to invest in new ideas and to find a way to market them.

INSPIRE-NRH - An Innovative, Specific People Initiated Research Evaluation

The INSPIRE-NRH project follows an embedded research model, and the academic researchers work collaboratively with a team of multi-disciplinary clinicians within the hospital (the IDT Quality Care Team) and two former patients on a co-research team. Together, the co-research team identify, and pursue research questions related to interdisciplinary teamwork and patient-centred care within the NRH. Through a mixed-methods, co-research approach we aim to explore ways to facilitate quality improvement in interdisciplinary teamwork within the hospital. Data collection is currently underway for a study focused on the new IDT goal setting process, from the perspective of both staff and patients – the protocol for this study can be found on HRB Open (<https://doi.org/10.12688/hrbopenres.13700.1>). The INSPIRE-NRH project team consists of Áine Trayer, George Hong, and Zsofia Torok, research assistant, working under the supervision of Professor Áine Carroll.



NRH-Inspire Research Team: Zsofia Torok, Áine Trayer, Prof Áine Carroll, George Hong.

Dr Éimear Smith, with colleagues from the Spinal Cord System of Care Programme developed a suite of six booklets 'Spinal Cord Injury – what you need to know' as a valuable resource for people with spinal cord injury and their families and carers.





SECTION 2

NRH REHABILITATION PROGRAMMES

Brain Injury Programme





Kate Curtin
Programme Manager



Dr Raymond Carson
Medical Director

The Brain Injury Programme at the National Rehabilitation Hospital, in collaboration with the patients, their families and carers, provides specialist brain injury rehabilitation designed to assist people with Acquired Brain Injury (ABI) to achieve optimum functional independence, social participation and community integration.

The programme provides the national, and only, post-acute complex specialist Inpatient rehabilitation service for people with acquired brain injury in the Republic of Ireland. The programme also provides the only specialist Inpatient rehabilitation beds for patients with a Prolonged Disorder of Consciousness (PDOC), and patients with neurobehavioural disorders. As a national tertiary level service, referrals are received from acute hospitals, through Managed Clinical Rehabilitation Networks (MCRN), HSE service areas, GPs and other primary care services nationally.

The Brain Injury Programme has developed a full continuum of care which includes:

- Brain Injury Comprehensive Integrated Inpatient Rehabilitation Programme (CIIRP)
- Brain Injury Outpatient Rehabilitation Programme
- Brain Injury Home and Community Based Rehabilitation Programme
- Brain Injury Vocational Programme

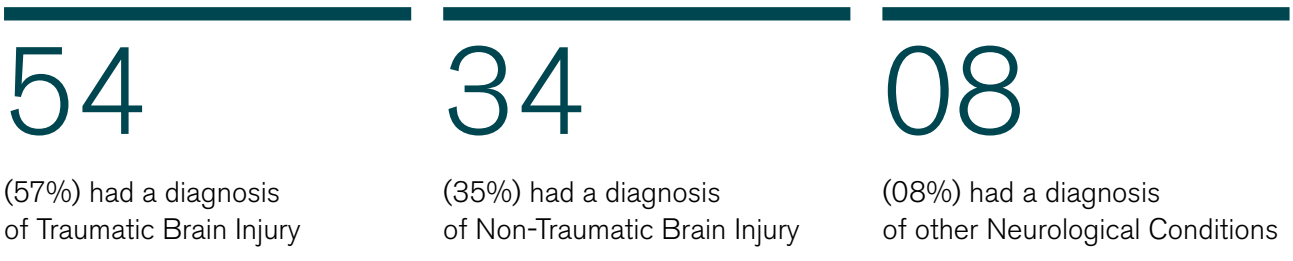
The Brain Injury Programme is accredited by CARF (the Commission for Accreditation of Rehabilitation Facilities) as a Specialty Programme of Rehabilitation for Inpatient, Outpatient, Home & Community Services and Vocational Services.

Demographics, Activity and Outcomes for Inpatient Services – 2023

108 patients received Inpatient rehabilitation services in 2023. Of the patients discharged from the programme, 96 were admitted to the Comprehensive Integrated Inpatient Rehabilitation Programme (CIIRP), and 12 patients were admitted for review or assessment.

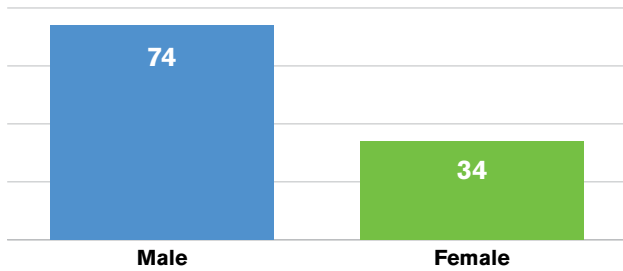
DEMOGRAPHICS AND ACTIVITY

Of the 96 patients admitted to the Inpatient Programme:





GENDER OF INPATIENTS SERVED BY THE BI PROGRAMME IN 2023



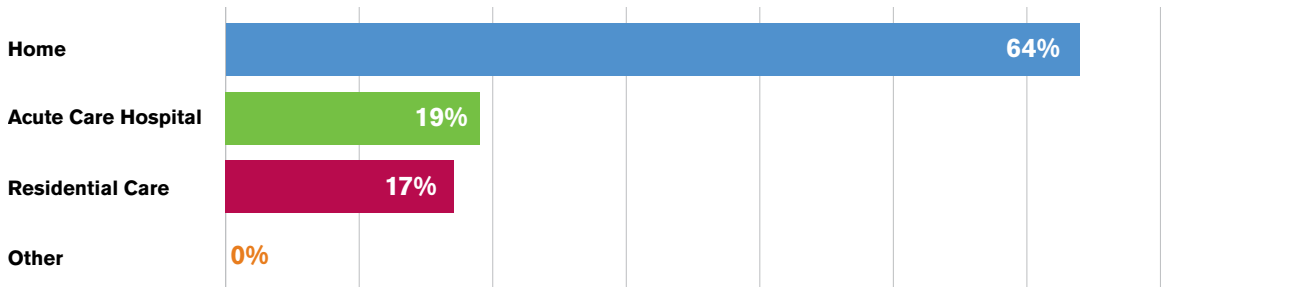
AGE PROFILE OF INPATIENTS SERVED BY THE BI PROGRAMME IN 2023

Average age	46 years
Lower age range	18 years
Higher age range	73 years

Outcomes

EFFECTIVENESS, EFFICIENCY OF, AND ACCESS TO THE DAY PROGRAMME

DISCHARGE LOCATION OF INPATIENTS SERVED BY THE BI PROGRAMME IN 2023



Indicator	Target Set – 2023	Outcome
Average Days Waiting for Admission	Average days waiting for admission would be less than 90 days	Patients waited an average of 170 days for admission to the programme
Incidence of Positive Change in Outcome Measure at Discharge	Improvement in Functional Independence Measure (FIM) Score – 90%	97% of patients
	Improvement in Barthel Score – 90%	74% of patients
Average Score Change in Outcome Measures at Discharge	Patients would improve on average by at least 10 points as measured on the FIM and Modified Barthel	FIM Average Improvement 18 points Barthel Average Improvement 13 points
Average Rehabilitation Length of Stay	Length of stay would be less than or equal to 84 days	105 days
Discharge to Home Rate	75% of patients would be discharged to home	64% of patients were discharged directly to home

The programme continues to deliver high quality, effective rehabilitation in a national context of increasing patient numbers, increasing demand for earlier access, and a higher proportion of all patients having higher complexity of needs. Our Interdisciplinary Teams of experts continue to deliver consistent and excellent patient outcomes.

Programme Goals and Achievements in 2023

2023 was a very busy and exciting year for the programme. We continued to successfully operate during periods of significant staffing shortages across the Interdisciplinary Teams, with particular emphasis on providing continued access and high-quality safe care for patients and support to families. Some key achievements of the programme this year include:

- In June 2023 the Prolonged Disorder of Consciousness (PDOC) steering group delivered their first PDOC Study Day with significant demand for places. There is a plan to build on this in 2024.
- PMAV (Prevention and Management of Aggression and Violence) training was made available to staff on the programme in response to needs on the Unit.
- New Goal Setting Processes were implemented.
- The BIAFF (Brain Injury Awareness for Family and Friends) information sessions were re-established (post-COVID).

Programme Manager

Kate Curtin commenced as Programme Manager for the Brain Injury Programme and Stoke Specialty Programme in February 2023.

Clinical Services delivered within the Brain Injury and Stroke Specialty Programmes

- **Medical**

Patient care and treatment is delivered by Consultant led Interdisciplinary Teams (medical, nursing, health and social care professionals). Clinical responsibility is held by Dr Raymond Carson (Medical Director of the Brain Injury Programme) in collaboration with Consultant colleagues Prof Jacinta Morgan, Dr Jacinta McElligott, Dr Paul Carroll and Dr Sabrina McAlister. Dr Eugene Wallace, and Dr John McFarlane provide rehabilitation input on behalf of the NRH in major referring hospitals in Dublin and Cork respectively. A rotating team of NCHDs continue to provide medical support at the NRH.

- **Nursing – Holly, Rose, Ash and Pine Units**

Rehabilitation nursing staff provide nursing care, support and direction to patients. They act as an important communication link with the patients' family, visitors and with other members of the Interdisciplinary Team. Nursing staff assist patients in practicing what they are learning in therapies and teach patients how to manage their personal care, along with their families and carers.

- **Clinical Psychology**

Led by Dr Suvi Dockree, Principal Clinical Specialist in Adult Neuropsychology, the psychologists in the Brain Injury and Stroke programmes developed the 'NRH Neuropsychology Vision and Strategy 2023-2026' to guide professional neuropsychology practice at NRH. Central to this strategy is the promotion of rehabilitation psychology, stepped-care approach to delivering psychological care, and application of scientist-practitioner model 'in everything we do'. Key service innovations and KPIs for 2023 included the implementation of a psychological well-being screen for patients, Acceptance and Commitment Therapy (ACT)-informed psychological intervention group, and the development of a sleep assessment service. Psychology team members provided specialist clinical neuropsychology services to Ash, Rose, Holly, and Pine Units, working with patients, families and health care colleagues to manage the cognitive, psychological, behavioural, decision-making, and adaptive functioning changes following brain injury. Psychology, with Medical Social Work, developed psychological patient and family support services within the prolonged disorders of consciousness (PDOC) service.

- **Creative Arts Therapy (CAT) – Music Therapy and Art Therapy**

Music Therapy: Music therapy IDT group sessions take place weekly, focusing on physical, communication and social goals. Interdisciplinary Team (IDT) assessment and treatment sessions for individual patients take the form of collaborative sessions where the music therapist works with other professionals on addressing specific shared rehabilitation goals through music. IDT treatment sessions also take place with patients' family members as appropriate. The Music Therapy Assessment Tool of Awareness in Disorders of Consciousness (MATADOC) is used with prolonged disorder of consciousness patients (PDOC) as part of the IDT battery of assessments. A weekly Therapeutic Instrumental Music Performance (TIMP) involves neurologic music therapy group sessions with physiotherapists within the sports therapy service.

Art Therapy: Weekly collaborative interdisciplinary sessions take place to maximise patients' assessment and rehabilitation goals through arts-based means, such as physical and cognitive goals through manipulation of art materials.



- **Nutrition and Dietetics**

In 2023, the service was provided to Inpatients of the Brain Injury Programme. The service primarily provides one-to-one interventions in patients with therapeutic and complex dietary needs. At any one time, 20-25% of BI patients require feeding via enteral feeding tube. This is a dietetic intensive intervention and is prioritised during periods of reduced staffing. Group education is delivered to empower patients in managing chronic disease and preventing recurrence of Stroke. The department is represented on the Stroke Education Working Group and delivers a number of patient education sessions including: ABCs (Anticoagulants, Blood Pressure and Cholesterol), Eating and Drinking Well after Brain Injury, and Eating and Drinking Well after Stroke.

- **Occupational Therapy**

The Occupational Therapy (OT) Team provides a service to individuals with an acquired brain injury (BI) across 60 beds within the Brain Injury Programme. A prioritisation system was developed to support a transparent and considered approach to patient care during times of reduced staffing. In planning and prioritising the delivery of OT services across the BI programme, the initiative to view the OT service through three different lenses: Prolonged Disorders of Consciousness (PDOC), Stroke, and Acquired Brain Injury has been useful to date. An evidence-based cognitive rehabilitation group was developed to maximise intensity of cognitive rehabilitation for Stroke; an interdisciplinary run daily Breakfast Group on the Stroke Unit encourages, supports and improves patient's independence in making and eating breakfast, and the team have added thinking and learning skills education session to 'Theme Of The Week'.

In 2023, Siobhán Kerr and Jordan Collins presented at the National AOTI Conference on 'Brain Gym' and were awarded Best Clinical and Innovation Abstract, they were also awarded 1st place in the person-centred care and support category at the NRH Quality Improvement Awards for 'Brain Gym – An Evidence Based Cognitive Rehabilitation Group on an Inpatient Stroke Unit'. Jordan presented at the National AOTI Conference on addressing sexual well-being following Stroke. Fiona Haughey presented at the Neurology Advisory Group on Sensory Rehabilitation post Stroke and also presented at the IBIA conference on 'Training needs of clinicians using the Coma Recovery Scale- Revised'. Barry McGarvey presented about the role of OT in the Assisted Decision Making and Capacity Act at the Neurology Advisory Group.

Challenges in 2023 include the delivery of an occupational therapy service during times where there have been high volumes of unplanned leave, annual leave as well as providing cover for vacant posts.

- **Pharmacy**

Pharmacy staff work as part of the Interdisciplinary Team (IDT) - they attend consultant rounds; and medicines prescription reviews to optimise medications in conjunction with patients. Unit pharmacists liaise with community pharmacy and other services where necessary to ensure continuity of pharmaceutical care for patients on discharge. Pharmacists provide a personalised Medicine List to each patient following discussion with IDT members, and also provide group education sessions on medications to patients (and families or carers as appropriate). The introduction of education for staff and patients as a fundamental part of the Stroke Unit led to the introduction of an Education Checklist and Theme of the Week.

- **Physiotherapy**

The Brain Injury Programme Physiotherapy service provides specialist neurological assessment and treatment to meet the specific and varied needs of the 60 patients across the five Brain Injury Units and include specific services to patients with Stroke and those with a prolonged disorder of consciousness (PDOC).

Highlights in 2023 include adopting a positive and innovative approach to the increased demands for training and supervision with a significant reduction in staffing, to maintain the high standards of treatment expected within the NRH (ongoing health service recruitment challenges have impacted on the Brain Injury Programme and service development, as elsewhere in 2023). The changed work patterns of both evening and Saturday working have been appreciated by many patients and families with opportunities for training and treatment being facilitated outside of the traditional hours. An emphasis on developing opportunities to increase levels of activity for patients has been a particular focus of activity on Willow Unit in line with Stroke Guidelines. This has been a collaboration with the IDT team, in particular members of the nursing team in supporting and encouraging activities, and Mark Barry from IWA with regular sports sessions. Changes in staffing have however led to challenges in maintaining previous positive developments in Supporting Upper Limb recovery. We continue to provide telephone and in-person support to colleagues from other facilities in the management and treatment of patients with Stroke and ABI. A number of Senior physiotherapists attended training in the use and programming of the Mollii suit which will facilitate the use of this adjunctive treatment.

- **Radiology**

The Diagnostic Radiology service supports Inpatient and Outpatient management following Brain Injury and Stroke. Ultrasound-guided botulinum toxin injection into salivary glands in conjunction with the Medical teams is available for use in selected brain-injured patients with sialorrhoea. DXA surveillance for those at risk of low bone density is widely used in BI patients. Preventative screening of the urinary tract by Ultrasound and X-ray are also employed to detect occult pathology in the most immobile patients. Case review and discussion at monthly Clinical Interdisciplinary Radiology Meetings of pre- and post-admission brain CT and MRI scans is provided to facilitate understanding of structural brain deficits and to assist with ongoing Inpatient management.

- **Social Work**

The Social Work service is offered to all Inpatients and their families attending the Brain Injury Programme, and on a referral basis for Outpatients. Social Work with the patients' support system is a key part of the role, and the Brain Injury Awareness for Friends and Family (BIAFF) programme was reinstated in 2023. This programme, open to relatives and friends of patients is now being offered on a number of Saturdays to facilitate families who can only attend outside of working hours. In addition, social workers were involved in the Stroke Family Day and a day for families of our Holly patients both of which received excellent feedback from attendees. The Outpatient BI Social Workers initiated a pilot peer support group as a space for patients at different stages of their journey to reflect on their adjustment to life after brain injury and offers psychoeducation in an informal setting. The Complex Discharge Social Work service works with the BI pre-admission co-ordinators to facilitate earlier assessment and discharge planning for a number of complex cases.

- **Speech & Language Therapy**

The SLT team provides specialist assessment and intervention to the Brain Injury, Stroke and Prolonged Disorders of Consciousness programmes. We work closely with IDT colleagues to provide patient and family-centred rehabilitation to meet the needs of these specialist and complex patient populations. The SLTs carry out both formal and informal assessment of speech, voice, language, cognitive-communication and swallow function. Assessment and intervention for the ability to swallow, eat and drink may include a combination of bedside and FEES swallow assessments. This is done in close collaboration with patients, their family and IDT to ensure joint decision making in line with the patients' will and preferences. Intervention includes individual, group and IDT sessions, community outings and family sessions. In addition, we contribute to diagnoses of awareness, spanning the continuum of consciousness. Family members contribute to joint sessions, receive training, education and support for adjusting to life after a brain injury or Stroke. The SLT team runs several groups targeting specialist skills, peer support, use of strategies, education and functional communication. These groups include Cognitive-Communication Group, Theme of the Week, Patient Education and Peer Support groups.

- **Therapeutic Recreation Service**

The NRH Therapeutic Recreation Service encourages and facilitates patients' participation in leisure and recreation activities. It provides an opportunity to explore how patients can return to hobbies or interests they enjoyed before their injury, or to explore new leisure pursuits. The ultimate aim is reintegration back into the community through involvement in hobbies or interests.



SECTION 2

NRH REHABILITATION PROGRAMMES

Stroke Specialty Programme





Kate Curtin
Programme Manager

Dr Kinley Roberts
Medical Director

The Stroke Specialty Programme at the National Rehabilitation Hospital, in collaboration with the patients, their families and carers, provides specialist Stroke rehabilitation aimed to lessen the impact of impairment and to assist people with Stroke to achieve optimum functional independence, social participation and community integration.

The programme provides the national post-acute complex specialist Inpatient rehabilitation service for people with Stroke in the Republic of Ireland. Referrals are received from acute hospitals, HSE service areas, GPs and other primary care services nationally. The Stroke Specialty Programme is accredited by CARF (the Commission for Accreditation of Rehabilitation Facilities) as a Specialty Programme of Rehabilitation for Inpatient, Outpatient and Home & Community-based services.

Demographics, Activity and Outcomes for Inpatient Services – 2023

108 patients received Inpatient rehabilitation services in 2023. Of the patients discharged from the programme, 106 were admitted to the Comprehensive Integrated Inpatient Rehabilitation Programme (CIIRP), and 2 patients were admitted for review or assessment.

DEMOGRAPHICS AND ACTIVITY

Of the 106 patients admitted to the Inpatient Programme:

21

(20%) had a diagnosis of Haemorrhagic Stroke

76

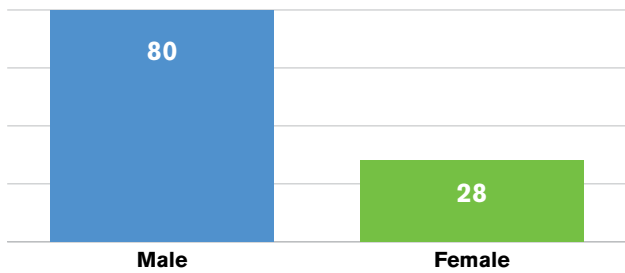
(72%) had a diagnosis of Ischaemic Stroke

09

(08%) had a diagnosis of other Stroke



GENDER OF INPATIENTS SERVED BY THE STROKE SPECIALTY PROGRAMME IN 2023



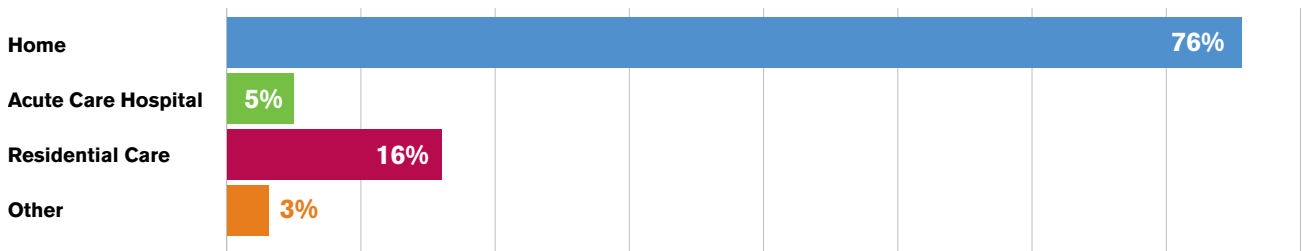
AGE PROFILE OF INPATIENTS SERVED BY THE STROKE SPECIALTY PROGRAMME IN 2023

Average age	55 years
Lower age range	26 years
Higher age range	77 years

Outcomes

EFFECTIVENESS, EFFICIENCY OF, AND ACCESS TO THE PROGRAMME

DISCHARGE LOCATION OF INPATIENTS SERVED BY THE STROKE SPECIALTY PROGRAMME IN 2023



Indicator	Target Set – 2023	Outcome
Average Days Waiting for Admission	Average days waiting for admission would be less than 70 days	Patients waited an average of 166 days for admission to the programme
Incidence of Positive Change in Outcome Measure at Discharge	Improvement in Functional Independence Measure (FIM) Score – 90%	93% of patients
	Improvement in Barthel Score – 90%	79% of patients
Average Score Change in Outcome Measures at Discharge	Patients would improve on average by at least 10 points as measured on the FIM and Modified Barthel	FIM Average Improvement 21 points Barthel Average Improvement 13 points
Average Rehabilitation Length of Stay	Length of stay would be less than or equal to 60 days	92 days
Discharge to Home Rate	75% of patients would be discharged to home	76% of patients were discharged directly to home

The programme continues to deliver high quality, effective rehabilitation in a national context of increasing patient numbers, increasing demand for earlier access, and a higher proportion of all patients having higher complexity of needs. Our Interdisciplinary Teams (IDT) of experts continue to deliver consistent and excellent patient outcomes with reduction in resources throughout IDTs over the year.

Programme Goals and Achievements in 2023

2023 was challenging and exciting year for the programme. Some key achievements of the programme this year include:

- Establishing the Stroke Programme as part of the Managed Clinical Rehabilitation Networks (MCRN) in May 2023
- World Stroke Day event October 2023
- Review of the Stroke Education programme
- Emphasis on establishing patients' daily routine in the rehabilitation day including introduction of breakfast group and increased use of dining area for meals
- New Goal-Setting Processes were implemented

Programme Manager

Kate Curtin commenced as Programme Manager for the Brain Injury Programme and Stoke Specialty Programme in February 2023.

Clinical Services delivered within the Brain Injury and Stroke Specialty Programmes

- **Medical**

Patient care and treatment is delivered by Consultant led Interdisciplinary Teams (medical, nursing, health and social care professionals). In 2023, Clinical responsibility was held by Dr Kinley Roberts (Medical Director of the Stroke Specialty Programme) in collaboration with Consultant colleagues Prof Jacinta Morgan and Dr Sabrina McAlister. A rotating team of NCHDs continue to provide medical support at the NRH.

- **Nursing – Willow Unit**

Rehabilitation nursing staff provide nursing care, support and direction to patients. They act as an important communication link with the patients' families, visitors and with other members of the Interdisciplinary Team. Nursing staff assist patients in practicing what they are learning in therapies and teach patients how to manage their personal care, along with their families and carers..

- **Health and Social Care Professional (HSCP)**

Health and Social Care Professional (HSCP) and other clinical services delivered as part of the Brain Injury and Stroke Specialty Programmes are listed on page 29 of this report. These include:

- Clinical Psychology
- Creative Arts Therapy (Music Therapy and Art Therapy)
- Nutrition and Dietetics
- Occupational Therapy
- Pharmacy
- Physiotherapy
- Radiology
- Social Work
- Speech & Language Therapy
- Liaison and Outreach Service
- Therapeutic Recreation Service



Rehabilitative Training Unit

MAUREEN GALLAGHER
 REHABILITATIVE TRAINING UNIT MANAGER

The Rehabilitative Training Unit (RTU) is part of the NRH Brain Injury Programme continuum of care. The 'Next Stage Programme' at the RTU provides group and individual rehabilitative training (RT) for adults with acquired brain injury. It is a national service, and for service users who do not live within commuting distance of the NRH, an accommodation facility is available on-site. The accommodation (Corofin Lodge) provides seven single occupancy en-suite rooms.

The RTU delivers two integrated CARF accredited programmes: The Home & Community Programme and the Vocational Programme. The programmes are delivered in a hybrid format, both in-person and online on two platforms, MS Teams and Attend Anywhere. Allocation to a programme is determined by each person's goals, as determined at referral and throughout the Individual Training Plan while on the programme. Training is delivered through 25 training modules across the following areas: Brain Injury Awareness and Management; Personal and Social Development; Life Skills Management; Information Technology; Educational and Project Support; and Vocational Assessment, Planning and Exploration.

The RTU operates under the New Directions Framework, delivering a person-centred, holistic service with the service user at the centre of decision making. Each trainee is allocated a caseworker and has a personal development plan, individualised training plan, and engages in a comprehensive discharge planning process. Outcomes are measured by the achievement of individualised rehabilitation goals as identified by the trainee and their family in collaboration with the team.

EFFECTIVENESS, EFFICIENCY, AND ACCESS TO THE RTU NEXT STAGE PROGRAMME

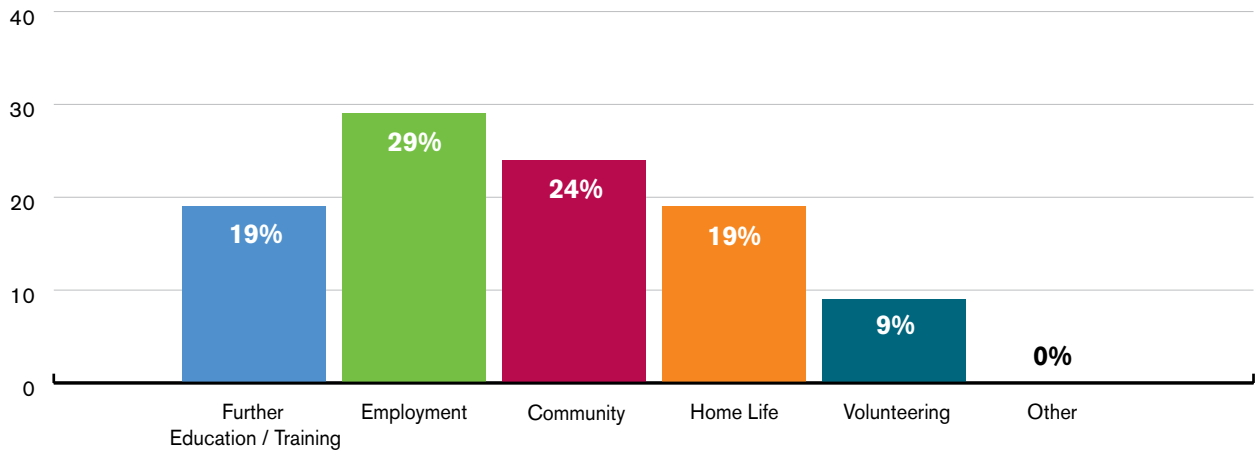
Indicator	Target Set – 2023	Outcome
Discharge to employment, training or education	50% discharged to training, employment or education	48% (10) trainees were discharged to training, employment or education
Average days waiting for access to the programme (Day-place or with onsite accommodation)	Average days waiting will be less than 360 days (Lodge), 300 days (Day place)	Lodge - average days waiting was 256 days Day place - 43% (9) were waiting less than 300 days. Overall, 62% (13) were waiting less than 360 days
Average active length of stay	Average number of active training days will be less than 365 days	Average number of active training days was 299 (range 39 – 627)
Completion rate of outcome measures	90% completion rate of outcome measures - Mayo-Portland Adaptability Inventory (MPAI)	85% (18) had MPAI completed and documented in their files.
Incidence of positive participation score change	75% will show a positive change on exit MPAI	77% (14, 18) showed a positive change on exit MPAI
Individual Training Plan (ITP) timelines	75% will have ITP completed within 42 days of admission	81% (17) ITPs were completed within 42 days of admission.
Programme throughput	17 trainees will be discharged in 2023	A total of 21 trainees discharged during 2023.

The variance in waiting times for access to the service reflects the person-centred approach to management of the preadmission waiting list. Each individual is afforded the time they require to be ready to undertake their training place. Engagement with referrers, family and the individual during this process ensures a comprehensive evaluation of their needs and readiness for the Programme.

The RTU has an allocation of 17 WTE training places funded by the HSE. The number of referrals, waiting times, and active training days continued to be impacted by the ongoing effect of COVID-19. The RTU received 30 referrals in 2023, a slight increase on the previous year, 17 for trainees requiring accommodation and 13 for day places. In 2023, 20 (95%) males and 1 (5%) females were discharged from the training programme.

RTU 2023 OUTCOMES

In 2023, 29% (6) trainees were discharged to employment, 19% (4) were discharged to education and training programmes, 24% (5) were discharged to community services and 19% (4) were discharged to home life having reached their community reintegration goals at discharge. 9% (2) trainees were discharged to Volunteering.



New Developments and Services

We continued to develop our hybrid programme in 2023 with trainees accessing training both onsite and remotely. Access to Taster Sessions and tours of the RTU continued for Inpatients from the Brain Injury Programme, which gave the RTU trainees opportunities for peer mentoring roles. We worked with NRH Outpatient vocational service on a vocational pilot project to improve access to and efficiency of the vocational programme. In 2023 we were funded by Active Disability Ireland and HSE and delivered our first Active Healthy Me Programme, with 7 trainees graduating from the programme. This provided enhanced health benefits for those participating. In June 2023 the RTU successfully achieved 3-year CARF accreditation.

Stakeholder events in 2023 included: Trainee Reunion, Family Information, and Family Education and Awareness Days. We extended our programmes of invited speakers and past trainees. RTU Trainees presented to the NRH Careers Evenings and to the Inpatient Brainworks groups and Brain Awareness Week. RTU staff were actively involved in several NRH committees, attended conferences and gave presentations.

Trainees provided feedback on their programme experience through the HSE 'How is your Service Doing?' survey. In 2023 76% (16) of trainees discharging from the programme completed an Exit Questionnaire. 75% (12) rated 5/5 and 25% (4) rated 4/5 on their overall level of satisfaction with the programme.

Future Developments

With the reopening of services following COVID-19, the RTU will focus on renewing working links with our partners in the community. This in turn benefits the service users and advocates for brain injury awareness and support in the community.

The RTU is very appreciative of the support that it has received from the wider NRH community throughout this challenging year.



SECTION 2

NRH REHABILITATION PROGRAMMES

Spinal Cord System of Care (SCSC) Programme





Eugene Roe
Programme Manager



Dr Cara McDonagh
Medical Director,
SCSC Programme

The Spinal Cord System of Care (SCSC) Programme at the NRH has developed a continuum of care for people with spinal cord dysfunction. This encompasses the Inpatient rehabilitation phase, an Outpatient phase with the capacity to see patients in interdisciplinary clinics, consultant only clinics, single therapy treatments and advance nurse practitioner (ANP) clinics. Further linkages to community services include a nursing liaison service, a pilot vocational programme and links with the voluntary organisation Spinal Injuries Ireland (SII).

Spinal cord dysfunction may result from traumatic injury or non-traumatic injury including such disorders as benign or malignant spinal cord tumours, demyelination, vascular or inflammatory disorders. The SCSC Programme also includes the management of patients with peripheral neuropathies, such as Guillain Barre Syndrome as similar principles of rehabilitation apply to these conditions.

Persons with spinal cord dysfunction have many needs and may face wide-ranging long-term restrictions in their ability to live independently, to drive or use public transport, return to work or education, participate in leisure and social activities, fulfil family roles, and maintain personal, sexual and family relationships. The SCSC Programme at the NRH is designed to assist patients and their family or carers to manage their impairments and to promote greater levels of functional independence, social participation, and community reintegration.

Patient care and treatment is delivered by an Interdisciplinary Team (IDT) with overall clinical responsibility led by the Medical Director of the Programme, Dr Cara McDonagh. Dr Éimear Smith and Dr Shane Hanratty complete the Consultant body in the SCSC Programme. Dr Smith is also Rehabilitation Medical Lead in the National Trauma Strategy.

Demographics, Activity and Outcomes for Inpatient Services – 2023

In total, 127 patients were discharged from the SCSC Programme in 2023. Of these patient, 115 were admitted for a full Inpatient goal-setting rehabilitation programme (Comprehensive Integrated Inpatient Rehabilitation Programme - CIIRP) and 12 patients were admitted for review or assessment.

DEMOGRAPHICS AND ACTIVITY

Of the 115 patients admitted to the Inpatient Programme:

44

(38%) had a diagnosis of Traumatic Spinal Cord Injury

55

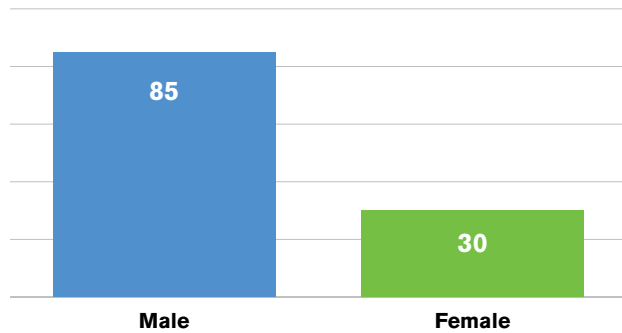
(48%) had a diagnosis of Non-traumatic Spinal Cord Injury

16

(14%) had a diagnosis of neuropathies and various other neurological disorders



GENDER OF INPATIENTS DISCHARGED BY THE SCSC PROGRAMME IN 2023



AGE PROFILE OF INPATIENTS DISCHARGED BY THE SCSC PROGRAMME IN 2023

Average age	52 years
Lower age range	17 years
Higher age range	85 years

Outcomes

EFFECTIVENESS, EFFICIENCY OF, AND ACCESS TO THE PROGRAMME

Indicator	Target Set – 2023	Outcome – 2023
Average Days Waiting for Admission	Target: Patients would be admitted within 60 days.	Average wait for admission was 78 days. *This outcome was due to the increase in Delayed Transfers of Care (DToC) impacting access to beds.
Average Rehabilitation Length of Stay (LOS)	Target: Average length of Inpatient stay would be less than 90 days.	Average LOS was 104 days. *The LOS is negatively impacted by DToC. Excluding the six longest DToC beds, the average LOS falls to the target of 90 days.
Delayed Transfers of Care (DToC) DToC is the term used when patients have completed their rehabilitation programme and are medically fit for discharge but cannot be discharged	Target: To lose less than 8% of bed days due to Delayed Transfers of Care cases.	21% of bed days were lost due to Delayed Transfers of Care cases in 2023.
Discharge to Home Rate	Target: To discharge at least 75% of patients to home.	78% of patients were discharged directly to home. *14% of discharged patients returned to the acute referring hospital.

Some Programme Highlights in 2023

- In 2023 the required additional nursing posts were filled to open the final five beds in the programme bringing the total beds to forty.
- The development of a Rapid Access Bed allowed early access to a four-week rehabilitation programme for patients who could achieve an uncomplicated discharge.
- In association with the National Clinical Programme for Rehabilitation Medicine (NCPRM) the SCSC Programme played a key role in the collaboration with HIQA in the publication of a Health Technology Assessment (HTA) for the national systematic provision of a pathway for domiciliary ventilatory support for adults with a spinal cord injury.
- Spinal Injuries Ireland continued to sponsor the very popular Pizza Night with peer support workers in attendance.
- The Education and Peer Support Officers continued to develop the patient education programme with new approaches to engage patients in their understanding of their diagnosis.
- The Education Committee launched the new educational materials for patients, families, and healthcare professionals and began work on a visual poster library for the Level 2 corridor.

A series of additional events, mainly taking place on Saturdays included: Wheelchair Skills Day; 13th Annual Reunion for Women with a Spinal Cord Injury; Family Information Day; Attendance at the National Ploughing Championships; Inaugural Men's Information Day; Gaming Day, and Healthcare Professionals Day.

Programme Manager's Report

Eugene Roe is Programme Manager for the Spinal Cord System of Care Programme.

2023 was a further year of challenges, in particular with the filling of vacant posts in both nursing and therapy services. The SCSC Programme continues to operate over both the new and old hospital buildings and this remains an operational challenge for the team.

2023 saw the largest ever increase in bed days lost due to Delayed Transfer of Care, with challenges for community services in the recruitment and training of carers and the continuing challenge of the built environment. The focused management of admissions resulted in a consistently high bed occupancy rate of 98%. As ever, the SCSC Programme was supported by generous fundraising undertaken by individuals and groups in 2023 and these efforts are very much appreciated by both patients and staff of the programme.

Medical Director's Report

Dr Cara McDonagh is Medical Director for the Spinal Cord System of Care Programme.

In 2023, the SCSC programme welcomed a third rehabilitation medicine consultant, Dr Shane Hanratty, and this was timely as we increased our capacity to 40 beds. Our Interdisciplinary Team continues to work hard to deliver patient-centred care and a key tenet of this is educating the patient, their family and the wider healthcare community on spinal cord injury. This year the Interdisciplinary Team excelled in this regard. Staff ran many events for current and previous patients with a focus on education, peer support and fun.

Over 50 attendees from the acute and community sector attended a health and social care professionals day in September 2023 where they received invaluable education on spinal cord injury. The new NRH patient education booklets were released and are being distributed to patients and their families. The visual library project on the 2nd floor corridor is well progressed and we will continue to add to the posters providing education and information to patients and their families. Emma Brennan, Senior Clinical Psychologist, along with the suicide awareness group launched the suicide awareness toolkit in Autumn 2023. All these endeavours take huge staff commitment and enthusiasm to reach fruition.

We were delighted to see the appointment of two new spinal cord injury advanced nurse practitioners (ANPs) in 2023 - Paula Keane and Siobhan O'Driscoll. The ANPs have many roles including providing Outpatient assessment and review to help reduce our waiting lists. Paula has also worked on updating the neurogenic bowel training resources for healthcare professionals with financial aid from a MASCIP Bursary (Multidisciplinary Association of Spinal Cord Injury Professionals) and the NRH foundation. Siobhan is at the core of our ventilated patient programme in Fern Unit which has now evolved to take brain injury patients when the need arises.



Our staff in SCSC continue to showcase the programme and NRH at national and international events and conferences. Staff from the SCSC and other Rehabilitation Programmes had a stand at the National Ploughing Championships. The SLT Department organised a National SLT Conference in October entitled 'Supporting recovery after Brain Injury or Spinal Cord Injury'. Ten staff members attended the International Spinal Cord Society Conference in Edinburgh in September. Claire Hickey, senior physiotherapist delivered an oral presentation on her research about the use of fitness apps in wheelchair users with spinal cord injury and Niamh O'Donovan, clinical specialist SLT presented a poster detailing a case study on treating pharyngeal sensation to improve swallow in spinal cord injury. Dr Éimear Smith organised and presented an instructional course on central cord syndrome for international colleagues. The ROSIA project (Remote Rehabilitation Service for Isolated Areas) is entering phase 3 where technologies and platforms will be tested on a cohort of spinal cord injury and brain injury patients via the Outpatient Department. I continue to work closely with this European project as an expert evaluator.

As Medical Director of the SCSC programme, I am very grateful to the staff for their hard work and dedication; there are already many planned events scheduled for 2024 and projects evolving based on previous success and new ideas and I look forward to an exciting year ahead.



The NRH had an exhibitor stand at the National Ploughing Championships to offer injury prevention advice, support and education to some of the 300,000 visitors attending this event. The event offered the NRH a unique platform to promote recruitment and fundraising opportunities.

Clinical Services delivered within the SCSC Programme

- **Medical**

The Medical Director of the Programme is Dr Cara McDonagh who works in collaboration with Consultant colleagues Dr Éimear Smith and Dr Shane Hanratty.

- **Nursing – Lily, Oak and Fern Units**

Rehabilitation nursing staff provide nursing care, support and direction to patients. They act as an important communication link with the patients' family, visitors and with the other members of the Interdisciplinary Team. Nursing staff assist patients in practicing what they are learning in therapies and teach patients how to manage their personal care, along with their families and carers.

- **Clinical Psychology**

Amalgamating the psychological services of SCSC and POLAR under the overarching title of Acquired Physical Disability continues to bring psychological practice together and create a psychological synergy between these two programmes. The collaboration of clinical knowledge across programmes continued with bimonthly meetings with the psychologists, with the aim to identify the unique clinical, research, and educational needs of people with acquired physical disability, as well as supporting those working with them and to meet these needs effectively and efficiently. Key areas identified for this cohort include psychological approaches to the management of pain and broadening the psychological understanding of trauma for patients at NRH.

- **Creative Arts Therapy (Music Therapy and Art Therapy)**

Music Therapy: Individual IDT treatment sessions involve the music therapist working with other IDT colleagues to address specific shared rehabilitation goals through music, with a focus on physical and social-emotional goals. The 'Voice Group' for patients with spinal cord injury is a collaborative Interdisciplinary Team (IDT) initiative with Music Therapy, Speech and Language Therapy and Physiotherapy colleagues where specific singing techniques are used to address vocal strength and breathing.

Art Therapy: The weekly group session is held in the evening to support extended access to services and develop peer support through creative means.

- **Nutrition and Dietetics**

In 2023 the service was provided to Inpatients of the SCSC programme. The service is primarily delivered on a one-to-one basis and aims initially to ensure that patients are adequately nourished to fully engage in their therapy programme. As recovery progresses the focus shifts to address issues with long term health issues such as excess weight gain. The dietitians deliver regular group education sessions 'Healthy Eating after a Spinal Cord Injury' in conjunction with physiotherapy colleagues.

- **Occupational Therapy**

Occupational Therapists (OTs) in Spinal rehabilitation work with adults, presenting with both traumatic and non-traumatic spinal cord injury, including other neuropathies, to optimise their ability to participate in meaningful everyday activities ranging from personal care, home and community activities to vocational and leisure pursuits. OTs support patients in discharge planning arranging for assessment of the home environment and recommendation of equipment required to maximise independence and safety. 2023 saw the successful introduction of the new OT-specific Inservice programme, OT Journal club, Tetraplegic Upper limb Assessment Questionnaire (TUAQ), new IDT patient education programme and delivery of education to acute hospitals on pressure injury, prevention and management. The OT team have been involved in: Initiating and forging links with Grainne Colgan, Surgeon in the Mater around pathways for tendon and nerve transfer surgeries for NRH SCI patients; meeting and organising an Inservice with Dr. Michael Trueman, Clinical Lead in SyncVR around virtual reality and the use with spinal pains for upper limb rehabilitation and pain management; submitting an abstract to The European Seating Symposium to present on the successful outcomes of the wheelchair skills group for SCI patients and the benefits of outreach work for those who have been discharged. Staffing levels in 2023 across the SCSC OT team, paired with increased complexity of patients were challenging. The OT weekly planning meeting allowed for discussion around patient prioritisations and along with rolling out the Inservice programme helped with case load management and OT's ability to competently treat patient with an array of complex needs.



- **Pharmacy**

Pharmacy staff work as part of the Interdisciplinary Team (IDT), they attend consultant rounds and reviews to optimise medications in conjunction with patients. Pharmacists provide education to patients on their medicines. A personalised Medicine List is provided to each patient, as well as practical tools to assist with the taking of medications, after discussion with other members of the IDT. Unit pharmacists liaise with community pharmacy and other services as necessary to ensure continuity of pharmaceutical care for patients on discharge. Staff also answer medication queries and provide education sessions for IDT colleagues.

- **Physiotherapy**

2023 proved another challenging year for the SCSC Physiotherapy team owing to significant understaffing throughout the year in addition to providing significant additional cover for specific services throughout of the year. Claire Hickey gave a platform presentation of her MSc feedback at the ISCoS Annual Scientific Meeting in Edinburgh. Aoife Henry led on the creation of a patient education video for the NRH website on managing physical health after spinal cord injury. John Lynch was co-lead in the creation of our Visual Library on the Level 2 corridor and this process is continuing into 2024 as part of our ongoing commitment to patient education and high-quality care. Conor White was accepted to commence a PhD in UCD looking at the use of exoskeletons in neuropathic pain management. The SCSC Physiotherapy team have also led on establishing new approaches to staff education with rapid-fire learning for new staff across a variety of topics to help ensure the standard of care remains high across the team.

- **Radiology**

Key amongst the Radiology services provided are regular Inpatient and Outpatient imaging of the renal tract using ultrasound and x-ray to detect stones and other complications in order to prevent the morbidity and mortality associated with occult urinary tract disease, including sepsis. For newly admitted high dependency cervical SCI patients, the assessment of diaphragmatic function by ultrasound and the radiographic evaluation of spinal instrumentation are essential tools. An on-call 24-hour x-ray service is also provided, mainly used for acute chest and musculoskeletal conditions. DXA evaluation of baseline bone density is available for all SCSC patients. A Hologic Discovery a DXA System has been installed enabling new state of the art equipment for identification of patients at risk from osteoporosis and other debilitating conditions.

- **Social Work**

The Social Work service is offered to all patients and their families within the SCSC Programme. Social Work involvement continues throughout the rehabilitation programme and in the immediate post-discharge stage as required. The Social Worker on the Outpatient SCI service attends clinics and accepts referrals for patients requiring a service ranging from a single consultation to a number of counselling or follow up appointments: an online peers group focused on a common interest in gaming has been successfully initiated and there is further development work ongoing. In 2023, Aidan Trant led out on a proposal to bring an NRH stand to the National Ploughing Championships and this was a very successful event in terms of outreach for the NRH. The Social Workers participated in the annual events such as the SCSC Professionals Day and the Men's Day for current and past patients. The development of a resource pack for parents with SCI in conjunction with team colleagues has been completed and is due to be published shortly.

- **Speech & Language Therapy**

The Speech & Language Therapy (SLT) service on the SCSC programme includes assessments and intervention for voice and swallow as well as education and training for patients, their families and IDT colleagues. Supporting patients to eat and drink with acknowledged risk of aspiration or choking is an aspect of the SLT service delivery. Empowering patients with accessible information, joint decision-making, with their team and family and supporting their autonomy is fundamental to their care. SLT on the SCSC Programme also contributes to a number of groups including the Voice Group provided in conjunction with Music Therapy. This group aims to improve patient's breath support and speech volume as well as peer support and learning. Supporting admissions of patients with tracheostomies and ventilator dependent patients is a vital aspect of the role along with provision of IDT education sessions.

- **Spinal Liaison Service**

The Liaison Service is a nurse led service offered to all patients who come through the Spinal Cord System of Care. The service covers 26 counties and offers: education and advice both for patients and family members; attendance at family and community conferences during the Inpatient stay at the NRH; active involvement through the delivery of specialised knowledge helping to prevent complications; pre-admission assessments; post-discharge review and annual review.

- **Therapeutic Recreation Service**

The NRH Therapeutic Recreation Service encourages and facilitates patients' participation in leisure and recreation activities. It provides an opportunity to explore how patients can return to hobbies or interests they enjoyed before their injury, or to explore new leisure pursuits. The ultimate aim is reintegration back into the community through involvement in hobbies or interests.

The Spinal Cord System of Care Programme were delighted to see the appointment of two new Advanced Nurse Practitioners (ANPs) in 2023.





SECTION 2

NRH REHABILITATION PROGRAMMES

Prosthetic, Orthotic and Limb Absence Rehabilitation (POLAR) Programme





Dr Jacqui Stow
Medical Director



Dr Nicola Ryall
Consultant in
Rehabilitation Medicine



Aoife Langton
Programme Manager

The Prosthetic, Orthotic and Limb Absence Rehabilitation (POLAR) programme provides a continuum of care for people with congenital limb absence and limb amputation. The Programme provides pre-amputation consultations, assessment of rehabilitation needs post amputation, both Inpatient and Day-patient rehabilitation, Outpatient follow-up and therapy services, and links to community services.

Persons with limb absence have many and varied needs. Many may present with a previous complex medical history, others because of their limb absence may face wide-ranging long-term limitations in their ability to return to their previous living arrangements, their previous work or education, leisure and social activities, or limitations in fulfilling family roles or maintaining personal relationships.

The POLAR Programme provides care through the full continuum. Most patients commence their primary rehabilitation as an Inpatient or a Day-patient. The programme has twelve Inpatient beds based on Poppy Unit and a capacity of seven Day-patient places. In partnership with Opcare (formerly Ability Matters), the programme offers an Outpatient prosthetic-led service and also has the capacity to see patients in Interdisciplinary clinics, Consultant-led clinics, as well as offering some single therapy treatments. In 2023, the rehabilitation co-ordinator role which provides a link not only for patients who are awaiting rehabilitation but also aims to be the key contact person over the full continuum of their care, increased to 30 hours weekly on a temporary basis.

There was an increase in Rehabilitation Consultant's hours with Dr Jacqui Stow uplifting from 0.5 WTE to 1.0 WTE. Dr Stow provides care for Inpatients and Day-patients undergoing rehabilitation, and Consultant-led IDT clinics for both primary and established patients. Dr Nicola Ryall, Consultant in Rehabilitation Medicine, provides specialist upper limb and complex cases clinics.

The feedback received from patients throughout 2023, as part of the durable outcomes questionnaire, has been positive in general, praising the dedication and expertise of our staff in the POLAR Programme, despite the challenges posed by a difficult year. On average, patients rated their Inpatient and Day-patient satisfaction at 9/10.

Demographics, Activity and Outcomes For Inpatient Services

DEMOGRAPHICS AND ACTIVITY

In 2023, the total number of patient discharges from the POLAR Programme was 126. Of these, 120 individual patients were discharged, as 6 of the total number were patients discharged more than once during the same episode of rehabilitation for a variety of reasons including family circumstances, movement between the Inpatient service and the Outpatient day service, or a break in the rehabilitation programme for medical reasons, such as wounds.

83 patients were discharged from the Inpatient programme in 2023. 72 patients (87%) were discharged following a full Comprehensive Integrated Inpatient Rehabilitation Programme (CIIRP) and 11 patients (13%) were discharged following a short admission for many reasons including assessment for prosthetic usage or were deemed not medically ready for a rehabilitation programme following admission.

Of 37 patients discharged from the Outpatient POLAR Day Programme, 34 (92%) were discharged following a full Comprehensive Integrated Outpatient Rehabilitation Programme (CIORP) and 3 patients (8%) were admitted for a short admission or were deemed not medically ready for a rehabilitation programme following assessment. When primary patients moved from Inpatient to Day-patient, and vice-versa, this was done depending on patients' clinical need. Data pertaining to these patients is included in the most appropriate area on a case-by-case basis.



Of the 120 patients discharged from the POLAR Programme:

59

(49%) sustained their amputation as a result of vascular disease

26

(22%) as result of diabetes

16

(13%) as a result of trauma

6

(5%) as a result of cancer

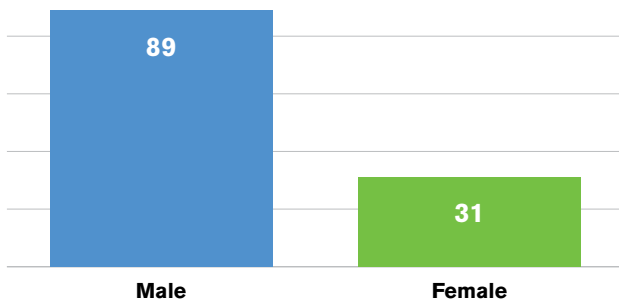
11

(9%) as a result of another diagnoses

2

(2%) as a result of congenital limb absence

GENDER OF PATIENTS DISCHARGED FROM THE POLAR PROGRAMME IN 2023



AGE PROFILE OF PATIENTS DISCHARGED FROM THE POLAR PROGRAMME IN 2023

Average age	63 years
Lower age range	28 years
Higher age range	89 years

Types of Amputation	Inpatients (83)	Day-patients (37)	Total Patients (120)
Below knee	46% (38)	41% (15)	44% (53)
Above knee	37% (31)	41% (15)	39% (46)
Bilateral Below knee lower limb	5% (04)	5% (02)	5% (06)
Upper limb	0% (00)	0% (00)	0% (00)
Bilateral Above Knee Amputation	5% (04)	0% (00)	3% (04)
Through knee	0% (00)	3% (01)	1% (01)
Through hip	2% (02)	5% (02)	3% (04)
Partial Foot	0% (00)	0% (00)	0% (00)
Above and Below	5% (04)	5% (02)	5% (06)
Total	83	37	120

Outcomes

EFFECTIVENESS, EFFICIENCY, AND ACCESS TO THE PROGRAMME

Indicator	Target Set – 2023	Outcome
Average Days Waiting for Admission from referral to Inpatient waiting list	Target: Admission of patients within 40 days.	Average waiting for admission was 53 days. *Referrals increased by 40% from 2022.
Average Rehabilitation Length of Stay (LOS) for Inpatients (CIIRP)	Target: Average admission length of stay less than 60 days.	Average LOS was 58 days.
Average Wait times for admission to the POLAR Day Unit	Target: Admission of Day-Patients within 30 days.	Average waiting time for admission was 40 days.
Delayed Transfers of Care	Target: To lose less than 2% of bed days to delayed transfer of care cases.	0% bed days lost to delayed transfer of care cases.
Increase in functional improvement	Target: 90% of patients (CIIRP) will improve their Barthel score.	93% of patients improved their Barthel score during their admission.

Some Programme Highlights in 2023

- The POLAR programme continued to lead out on community, outreach and satellite clinics throughout the country. Clinics are based in Galway on a weekly basis, and a monthly clinic occurs in Leitrim, Donegal and Mayo, along with a six-weekly consultant visit to Galway. 2023 saw the introduction of a satellite clinic in Tipperary.
- In line with hospital developments, the POLAR programme continued to be involved in the Maximising Rehabilitation programme.
- The POLAR events this year included HSCP POLAR Education Day and also the 'Paediatric-POLAR Day' allowing paediatric patients and their families attend the hospital for peer support and a day of fun-filled clinical activities.
- The Programme received CARF specialist accreditation.

Medical Director and Programme Manager Report

Aoife Langton is Programme Manager and **Dr Jacqui Stow** is Medical Director of the POLAR Programme.

Over the past year the Prosthetic, Orthotic and Limb Absence (POLAR) Programme has continued to grow and develop. We have seen increasing referral numbers from a low of 146 in 2018, to 322 in 2023. We are in the early stages of exploring strategies to optimise our rehabilitation capacity while still ensuring patients avail of a full IDT rehabilitation programme that meets all their needs and supports them to achieve their rehabilitation goals.

The introduction of the electronic patient record (EPR) has helped to streamline many processes resulting in less duplication and greater availability of information. Transition to digitally recorded information has improved surveillance of waiting times and supports us in ensuring that patients are not waiting excessively for services. We are continually seeking to ensure that patients have timely access to our services to avoid delays negatively impacting outcomes. Our Rehabilitation Coordinator post plays a vital role in providing pre-prosthetic support and information and ensuring that patients, ready to move to the prosthetic phase of their rehabilitation, are assessed and admitted to the programme in as timely a manner as possible.

We participated in the CARF accreditation survey and continue to perform well in meeting the CARF standards, which provide guidance in ensuring our programme performs with excellence against international standards and puts our patients' needs at the heart of the programme. Results from a review of durable outcomes for patients from our programme who were five years post-discharge reflected the continual success of the interdisciplinary teamwork in the POLAR programme, with most discharged patients continuing to walk with a prosthesis and all of these improving in their mobility following discharge.



In 2023, the programme introduced a specialist IDT clinic for partial foot amputees. This clinic provides assessment for orthotics to optimise walking and also provides guidance on environmental adaptations, driving, care of remaining foot and pre-amputation counselling. This clinic is still in its infancy, however the demand has increased exponentially and strategies to help meet this demand are being explored.

Our complex patient clinic was held regularly in 2023. This brings together the combined expertise of Dr Jacqui Stow, Dr Nicola Ryall, Prosthetic Rehabilitation Consultant and Dr John MacFarlane, Rehabilitation Consultant for POLAR services in Cork to ensure that best outcomes can be achieved for patients with highly complex rehabilitation needs.

A very successful Prosthetic Rehabilitation Education Day was held in 2023 and was well received with clinicians from a wide range of disciplines benefitting from the shared experiences and expert knowledge of various members of our Interdisciplinary Team. Our team members continue to avail of higher education courses to enhance their skills and knowledge base.

We also ran a very successful peer support day for our paediatric prosthetic patients and their families. The POLAR and Paediatric Programmes work collaboratively to deliver quality prosthetic rehabilitation for children. The numbers of children needing input from the dual services has continued to grow.

SATISFACTION WITH OUR SERVICE:

Quotes from patients from durable outcomes questionnaire.

'The service was excellent the staff were caring and kind and easy to talk to. My experience was 100% positive.'

'I wish that every hospital was as good as the NRH. All the staff were fantastic. The service was brilliant.'

Clinical Services delivered within the POLAR Programme

• Pre-Admissions Coordinator

The quality improvements that occurred in 2023 include:

- An information pack is now given to patients who are suitable for admission at the time of assessment. This includes an explanation of service, education, and training links.
- The increase in referrals saw the introduction of a second assessment clinic. This is a consultant, prosthetic and nursing clinic which has also enabled patient pathways to be developed further ensuring that goal setting commences at the referral stage and continues following discharge.
- Due to the increase in paediatric referrals it is hoped that 2024 will see the development and adoption of a pathway of care for paediatric POLAR patients.

• Nursing – Poppy Unit

The POLAR Programme consists of 12 Inpatient beds in Poppy unit and also accommodates seven Day-patients from the POLAR Programme, with a staff nurse dedicated to this day service. Professional development continues to be a focus for the nursing staff on Poppy Unit and Continuous Professional Development remains a priority. Members of nursing staff from Poppy Unit continue to be involved in the following committees: Drugs and Therapeutics Committee; Smoking Cessation; National Pressure Ulcer Collaborative Steering Group; Falls Prevention Group; Quality, Safety and Risk Committee; Productive Ward steering committee and Catheter Care Bundles.

- **Clinical Psychology**

Psychology staff from the POLAR Programme delivered education on the psychological aspects of limb loss to students attending the UCC MSc Older Person Rehabilitation Programme in 2023 and provided educational input to the MSc Clinical Neuroscience course in UCD jointly with SCSC Psychology. POLAR Psychology aims to further enhance service provision by offering Eye Movement Desensitization Reprocessing (EMDR) therapy to patients as recommended in NICE Guidelines (Dec. 2018) and by the World Health Organization (2013) for the treatment of trauma.

- **Creative Arts Therapy (CAT) - Music Therapy and Art Therapy**

Music Therapy: Music therapy input is provided weekly to both Day-patients and Inpatients through a music therapy and IDT group session. The aim of the sessions is to use music-based methods to support patients in addressing pain relief and to facilitate physical, emotional, and social interaction goals. In 2023 extra group sessions were provided to support IDT working. Feedback is consistently positive with large numbers of patients attending sessions.

Feedback received from a patient in the POLAR Programme:

*'I look forward to the music therapy group all week.
All patients should have music therapy as part of their rehabilitation programme'*

Art Therapy: The weekly Art therapy individual and group sessions continue for Day-patients and Inpatients with aims to support peer and emotional support and develop communication and social skills. Feedback in relation to the art therapy group has been very positive, specifically in relation to peer support and social interaction.

- **Nutrition and Dietetics Report**

The goal of nutritional therapy is to support patients in optimising control of chronic conditions such as Diabetes and Chronic Kidney Disease. There has been a tenfold increase in referrals for renal diets in the past three years, in line with international experience. Patients requiring renal diets require intensive education from a highly skilled dietitian. To facilitate this, the dietitian attended an All-Island Renal Study Day organised by the Renal Interest Group of the INDI. The dietitians also attended Behaviour Change Skills Training in order to facilitate patients in making behavioural and lifestyle changes to improve their long-term health. Dietetic Interventions are delivered on a one-to-one basis and through the POLAR Healthwise Talks.

- **Occupational Therapy**

Occupational Therapists (OTs) in prosthetic rehabilitation work with both adult and paediatric patients presenting with upper and lower limb absences, congenital or acquired, to support and enable independence in their daily lives, through functional occupations. The Occupational Therapy team provided a guest lecture to the students of Trinity College Dublin on the role of OT in amputee rehabilitation. The team have also begun the process of establishing a special interest group for OTs in Ireland who have an interest in prosthetic and amputee rehabilitation, to share information and showcase the services we provide at the NRH. In 2023, the POLAR team devised a prioritisation tool, and updated contingency training and upskilling for all grades within the programme.

- **Pharmacy**

Pharmacy staff work as part of the Interdisciplinary Team (IDT) - they attend consultant rounds; and medicines prescription reviews to optimise medications in conjunction with patients. Staff also answer medication queries and provide education sessions for IDT colleagues. Unit pharmacists liaise with community pharmacy and other services where necessary to ensure continuity of pharmaceutical care for patients on discharge. Pharmacists provide a personalised Medicine List to each patient and also provide group education sessions on medications to POLAR patients.



- **Physiotherapy Report**

The POLAR physiotherapy team provided a service to Inpatients and Day-patients for prosthetic and non-prosthetic rehabilitation along with an Outpatient service provided to patients with established limb absence. Education and support were also provided to acute and community services via the outreach service, including visits to St. James's Hospital, Clontarf Hospital and home visits with patients' families and carers. This allowed the continuation of their rehabilitation to be facilitated at a local level. In March 2023, the physiotherapy team were involved in organising and running the education day "An Overview of Amputee Rehabilitation" for healthcare workers working with people with limb loss. This is planned to become an annual event. The Physiotherapy Team attended and represented the NRH at the BACPAR Vascular Society Joint Symposium 2023, which took place in Dublin, providing an opportunity to strengthen links with our UK counterparts. A member of the POLAR physiotherapy team also secured funding from the programme to complete an education course in Queen Marys Hospital, Roehampton.

- **Radiology**

Specific to the POLAR Programme, Radiology provides X-ray and Ultrasound imaging of soft tissues of the residuum following amputation to assess for acute and chronic complications causing residual limb pain and other limb-fitting issues. Aspiration of fluid collections and haematomas can also be performed under ultrasound guidance in specific circumstances. Estimation of fracture risk is guided by DXA evaluation of bone density, which is often decreased on the side of lower limb amputation.

- **Social Work**

Medical Social Workers on the POLAR Programme work with patients to ensure a safe discharge is accomplished when patients have completed their Inpatient rehabilitation programme. We offer additional supports to patients with complex psychosocial issues, not only as Inpatients and Day-patients, but also through peer support. An online peer support group offered former patients an opportunity to discuss limb loss related issues and access further information, support, and advocacy.

- **Speech & Language Therapy**

The SLT Department provides a service to the POLAR programme as required which consists of communication and swallowing assessments and interventions, and hearing screens. Patients referred from this Programme typically present with voice disorders and neurological communication and swallowing disorders on backgrounds of vascular disease.

- **Therapeutic Recreation Service**

The NRH Therapeutic Recreation Service encourages and facilitates patients' participation in leisure and recreation activities. It provides an opportunity to explore how patients can return to hobbies or interests they enjoyed before their injury, or to explore new leisure pursuits. The ultimate aim is reintegration back into the community through involvement in hobbies or interests.

Strategic Partnership: Opcare Ireland (formerly Ability Matters)

The Strategic Partnership Agreement continues to provide strategic oversight and governance of the POLAR Programme. Strategic Partnership Meetings, held bi-monthly, continue to serve as a formal setting to monitor governance and service performance, and day-to-day liaison between AMG and the NRH is effective and efficient. Ability Matters has now rebranded to Opcare Ireland as part of a group-wide exercise to reflect the company values and its continued growth.

All satellite clinics run at full capacity. A new prosthetic clinic commenced at Nenagh General Hospital in early 2023.

Prosthetics – Demographics, Activity and Outcomes for Prosthetic services in the NRH and Satellite clinics in 2023

Prosthetic Activity Data: There were a total 4,850 attendances to Opcare prosthetic clinics which continue to run at the NRH, and at local satellite clinics to allow patients receive care as close to home as possible.

As well as management of established patients, Opcare's new prosthetic referrals increased by 20% (this includes patients referred to the Mercy University Hospital in Cork) in 2023. Of these 262 patients assessed and reviewed, 160 patients were deemed suitable for prosthetics and prescriptions were raised to assist with their care plan. This is in line with previous years and national data from the AMG services in the UK. Prescriptions are not raised due to patient capability, often linked to comorbidities such as vascular status, delayed or failed wound healing and physical robustness.

Orthotics Service

The orthotics service operates across all of the specialist rehabilitation programmes, POLAR, Spinal and Brain Injury, with daily clinics serving both Inpatients and Outpatients. Our Orthotists specialise in whole body orthotics and combine traditional assessment methods with state-of-the-art technology to provide premium quality orthotic devices. A full patient assessment enables our clinicians to understand and determine the type of orthotic device required to allow patients to function to the best of their ability. Our clinicians prescribe a full range of bespoke and off-the-shelf orthoses, manufactured by hand or through our advanced robotic machinery.

In 2023, there were 2,378 attendances to the orthotic clinics. This is a continued increase, in part, supported by the investment in additional clinicians and the expansion of some satellite service activity; this year we welcomed a new orthotist along with a graduate orthotist-prosthetist to the team.

We have introduced REHAPP (our clinical information management system) into the orthotic service - this has been used for several years in prosthetics and will help manage the patient pathway and capture outcomes of appointments and episodes of care.



Patients and staff are delighted with the new purpose-built environment specifically designed to provide specialist rehabilitation services.



SECTION 2

NRH REHABILITATION PROGRAMMES

Paediatric Family-Centred (PAEDS) Rehabilitation Programme





Dr Susan Finn
Medical Director,
Paediatric Programme

Clare Hudson
Programme Manager

The Paediatric Family-Centred Rehabilitation (PAEDS) Programme at the National Rehabilitation Hospital (NRH) is the national tertiary rehabilitation service for children and young people requiring complex specialist interdisciplinary rehabilitation after an injury or illness.

The NRH Paediatric Programme provides post-acute complex specialist rehabilitation for children and young people up to 18 years of age with:

- Acquired brain injury both traumatic (traffic accidents, falls, assaults, sport injuries) and non-traumatic (tumour, Stroke, infection)
- Acquired spinal cord injury both traumatic (traffic accidents, falls, assaults, sport injuries) and non-traumatic (transverse myelitis, tumour, Guillian-Barre Syndrome)
- Acquired and congenital limb absence requiring prosthetic intervention

The rehabilitation services are provided in the purpose-built child and family friendly Daisy Unit. The Unit accommodates eight Inpatients, where the child and parent stay overnight, and two Day-patients, where the child and parent attend daily. Daisy Unit typically operates a five-day per week service, Monday to Friday. Specialised services, camps and training are also held on Saturdays to accommodate family involvement. A young person of 16 – 18 years may be considered for an NRH Adult Programme if appropriate.

Paediatric Programme Philosophy

The Paediatric Programme recognises the unique nature of neurological injury that occurs during childhood. Firstly, the child is part of their family, and the impact of the injury can affect all family members, including parents and siblings, who will need emotional and educational support. Secondly, the injury occurs while the child is still developing physically, cognitively, emotionally, and socially. As a result, the full extent of the child's needs may not be apparent at the time of injury and may change as the child matures and develops. The child and family, therefore, need specialist rehabilitation supports throughout childhood to address their changing needs. Thirdly, the impact of injury for each child often affects many areas of their development and therefore requires specialist skills and knowledge from multiple healthcare professionals who work very closely together with the child and their family in a team-based approach.

The philosophy of care of the NRH PAEDS Programme is Child and Family Centred, where multiple healthcare professionals work together with the child and family through an interdisciplinary teamworking approach, offering services that support and augment other rehabilitation services throughout childhood.

Paediatric rehabilitation is designed to improve the abilities and function of children and young people following their injury or illness, and aims to maximise the ability of the child or young person to participate in activities at home, school, and the community. The services offered by the Paediatric Programme in 2023 included:

- The Comprehensive Integrated Inpatient Rehabilitation Programme (CIIRP*) for new patients
- The Comprehensive Integrated Inpatient Rehabilitation Programme (CIIRP*) for return patients
- Specialist Interdisciplinary Pre-admission Assessment
- Outpatient Review Clinics for children with Acquired Brain Injury (ABI) and Spinal Cord Injury (SCI), including follow-up with school and community services
- Outreach activities, both pre-admission and follow-up after discharge
- Specialist Outpatient events and activities - Whizzy Kids' wheelchair skill and support; SibShop sibling support programme



Referrals and Access

Referrals are received from across Ireland. Major referring hospitals are Children's Health Ireland (CHI) at Crumlin, Tallaght and Temple Street, Beaumont Hospital, and Cork University Hospital neurosurgical units. Referrals are also accepted directly from general practitioners (GP) and practitioners in the community. The Paediatric Programme received 75 new referrals in 2023. Of the new referrals, 51 were placed on Paediatric Programme waiting lists, 24 did not meet admission criteria and were redirected to NRH or community services as appropriate.

Demographics, Activity and Outcomes for the PAEDS Services – 2023

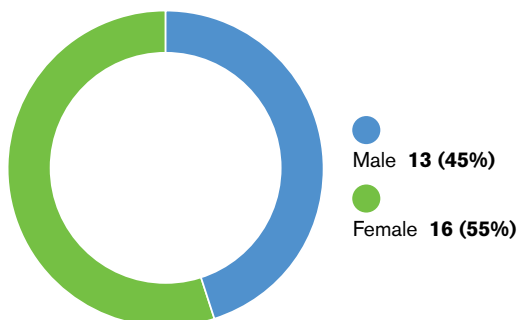
DEMOGRAPHICS & ACTIVITY

In 2023 the Paediatric Family-Centred Rehabilitation programme served 101 Children and Young People (CYP) in Inpatient or Day-patient programmes; of which 43 were 'new patients' to the programme and 58 were 'return patients' including patients for whom a review rehabilitation programme has been planned due to age, developmental stage or change in circumstances.

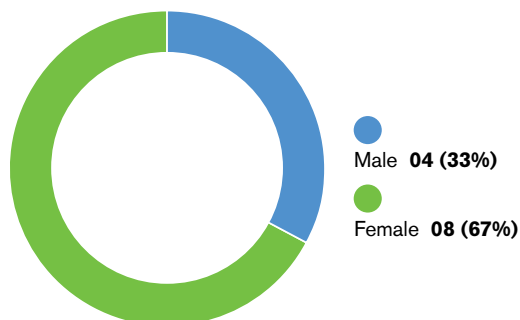
Type of Rehabilitation Admission / Activity	Description	Number in 2023
PAED 1a – Full Rehabilitation Programme (CIIRP) for New Patients	Children and young people (New Patients) admitted for their main rehabilitation programme, either as Inpatient or Day-place. The full programme meets CIIRP standards.	29
PAED 1b - Full Rehabilitation Programme (CIIRP) for Return Patients	Children and young people (Return Patients) admitted for their main rehabilitation programme, either as Inpatient or Day-place. The full programme meets CIIRP standards.	12
PAED 2a - Assessment and or Specialist Programme for New Patients	Children and young people, who are New Patients, assessed for a particular goal such as cognitive assessment, either as Inpatient or Day-place, or for an MDT pre-admission assessment of rehabilitation needs	14
PAED 2b - Assessment and or Specialist Programme for Return Patients	Children and young people, who are Return Patients, assessed for a particular goal such as cognitive assessment, either as Inpatient or Day-place	46
Outpatient Clinic Services	Review clinics for children and young people with Spinal Cord Injury (SCI) and Acquired Brain Injury (ABI). These are annual for SCI, and at planned intervals for children and young people with ABI	94 SCI 29 ABI 65
Outpatient and Outreach Therapy Services	Therapy treatment and or reviews by team member(s)	1,370 contacts

The figures below show the breakdown of gender, and average age profile of the CYP who were discharged from the CIIRP Full Rehabilitation Programme in 2023, identifying those who were new patients (PAED 1a) and return patients (PAED 1b).

CIIRP NEW ADMISSIONS PAED 1A

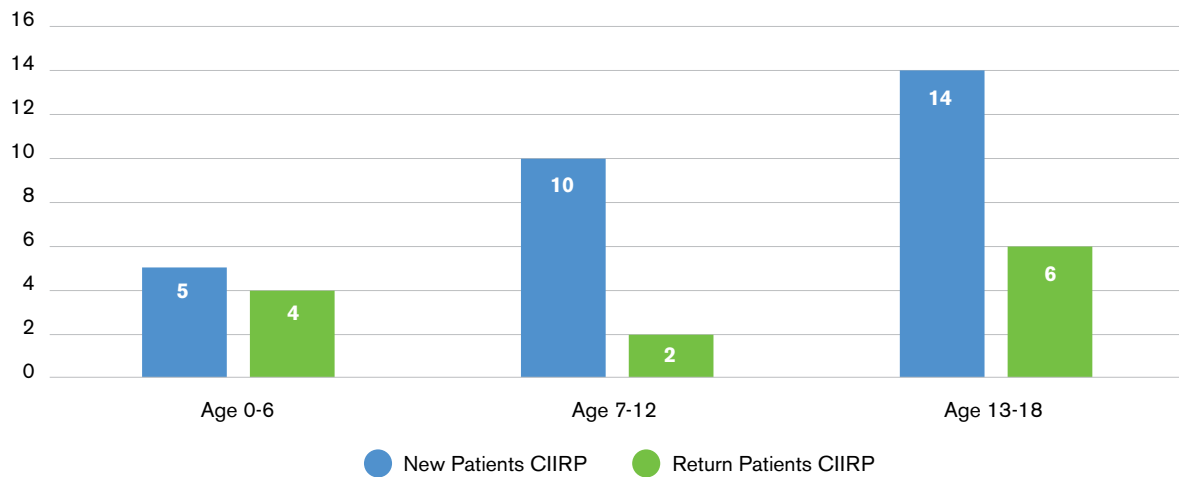


CIIRP RETURN PATIENTS PAED 1B



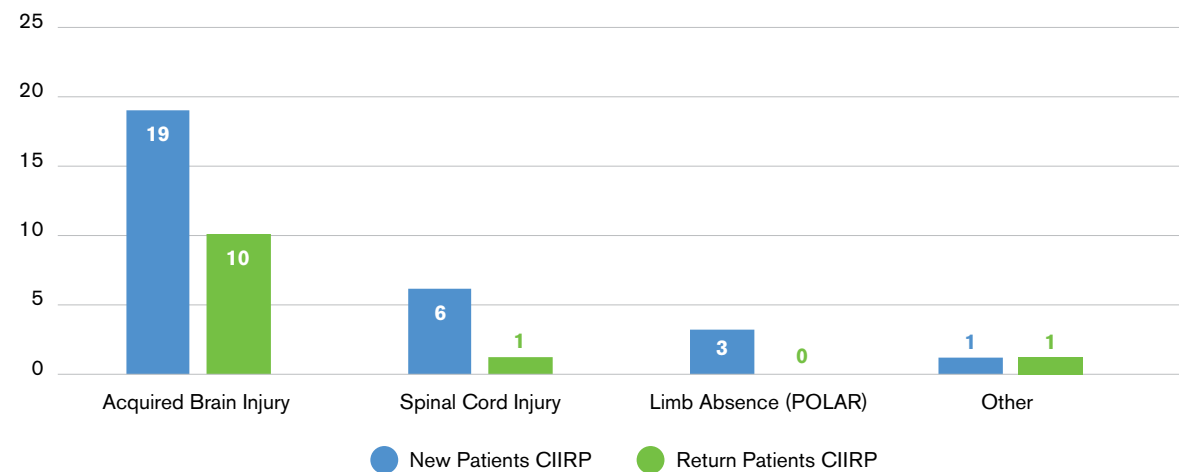
The figure below shows the number of CYP, new patients(PAED 1a) and return patients (PAED 1b), discharged from CIIRP Programme and in 2023 by age category.

BREAKDOWN OF NEW AND RETURN PATIENTS DISCHARGED FOLLOWING A FULL PROGRAMME OF REHABILITATION IN 2023



The figure below shows the number of CYP, new patients and return patients, discharged from CIIRP Programme (PAED 1a and PAED 1b) in 2023 by diagnosis.

BREAKDOWN OF DIAGNOSES OF NEW AND RETURN PATIENTS DISCHARGED FOLLOWING A FULL PROGRAMME OF REHABILITATION IN 2023



The table below shows the number of CYP, new patients, discharged from the full Inpatient rehabilitation programme (CIIRP Programme, PAEDS 1a) by more specific diagnostic category.

CIIRP NEW PATIENT

Traumatic Brain Injury (TBI)	Brain Infection	Brain Tumour	Aneurysm, AVM	Subarachnoid Haemorrhage	Other non-traumatic BI	Stroke	Traumatic Spinal Cord Injury	Other Spinal Injury	Spinal Cord Tumour	Limb Absence	Neurological Disorder	Total
5	1	4	4	2	2	1	1	2	3	3	1	29



Outcomes

EFFECTIVENESS, EFFICIENCY OF, AND ACCESS TO THE PAEDS PROGRAMME

The indicators and outcome targets shown below relate specifically to the CYP discharged from the full Inpatient Rehabilitation Programme (CIIRP Programme) in 2023.

Indicator	Target Set – 2023	Outcome	Note / Trend
Discharge to Home Rate	75% of CIIRP patients (PAEDS 1a and PAEDS 1b) to be discharged home	98%	One patient was discharged to an acute hospital
Average Days Waiting for Admission	80% of new admission CIIRP patients (Full Rehab) to be admitted within 85 days	17% were admitted within 85 days	The average wait was 174 days. Range is from 42 – 391 days. Difference by diagnosis and need
Average Rehabilitation Length of Stay (LoS)	Length of stay of CIIRP patients (Full Rehab) to be less than 90 days	Average LoS for CIIRP new patients was 65 days Average LoS for CIIRP return patient 86 days	The range for new patients was 23 days – 151 days. The range for return patients was 18 days – 165 days
Improvement shown on Outcome Measure	80% of new and return patients in CIIRP improve or maintain scores on Modified Barthel	90% of CIIRP new and return patients improved or maintained score	New outcome measure identified during 2023, implementation required in 2024
Delayed Transfers of Care	Less than 1% of bed days available to the Programme to be lost to delayed transfers of care	0 bed days lost	No bed days were lost to delayed transfers of care in 2023

PAEDS Programme Highlights in 2023

CARF ACCREDITATION

In June 2023, the NRH Paediatric Programme sought and was successful in being awarded CARF Accreditation as a Paediatric Speciality Programme. The essence of a Paediatric Speciality Programme is family-centred care that is culturally sensitive, interdisciplinary, coordinated and focused on outcomes. The accreditation process in June involved a virtual survey, by a team of international surveyors, that included review of the Programme's policies and operating procedures and examples of embedded good practices, observation of clinical practice, and discussion with referrers, staff and with children and their families. The accreditation process was an opportunity for the Programme to look with fresh eyes at how and to whom it provides services and to showcase its everyday work. The surveyors recognised, "the positive environment created (in the Programme) that allows persons served and their families to have a happy, joyous, and camplike experience" during their rehabilitation. Attaining Paediatric Speciality CARF accreditation in addition to the Comprehensive Inpatient Rehabilitation Programme (CIIRP), allows the Paediatric Programme to progress on a continuous improvement journey.

The Paediatric Programme was commended by the CARF surveyors for its "reintegration process' for the persons served and their families", highlighting the essential focus that the team, in partnership with the children and young people and their families, put on the aims of rehabilitation- to optimise participation in all aspects of life.

- In 2023, with a modest increase in staffing and review of team procedures to maximise clinical time, the Paediatric team increased the number of children seen for ABI review clinics by 47%. In addition, the scope of the ABI review clinic was expanded, with a standardised protocol for information sharing and education to schools and community teams developed and implemented.

- Technology, for example, teleconference, virtual clinics, and online therapy groups such as 'Tech for Kids' are used to increase the reach of the specialist rehabilitation services in the NRH to CYP and those who support them in their communities, and to realise the 'hub and spoke' model of service delivery at national specialist tertiary service level.
- Inclusion in sport of all CYP with an acquired disability, in a safe and supportive environment, is an integral component of the NRH Paediatric Programme and is progressed through collaborative working with the Irish Wheelchair Association Liaison service. During 2023, the Programme made a concerted effort to increase links and build relationships with sports services and national bodies that support and encourage inclusive sports in the community such as Table Tennis Ireland, Boccia Ireland, Swim Ireland, Munster Wheelchair Hurling team and Disability Tennis. Several teenage patients attended the Paralympics Next Gen event.
- School and education play an integral role for CYP in the rehabilitation programme and following discharge from the NRH. In 2023, the NRH school patronage changed to the Dublin and Dun Laoghaire Education and Training Board (DDLETB). With the addition of one primary school teacher and two part time secondary school teachers, the NRH school can now offer more curriculum choice and options based on the specific needs of individual CYP, particularly at secondary level. We look forward to nurturing and strengthening the collaborative working relationships with the DDLETB.
- In 2023, parent and peer support continued to develop. The programme offers a weekly parents support group, group education and training sessions, and informal opportunities to share their experiences with other parents. Specialist camps and programmes allow CYP with similar needs, experiences, and challenges to come together to share and support each other. Young adults and their parents kindly return to the NRH to share experiences and provide peer support. The NRH 'SibShop' returned in 2023, providing invaluable support for siblings of children with acquired disability.

In 2023, representatives from the NRH Paediatric Programme, along with representatives from key stakeholder organisations authored a paper entitled, '*Rehabilitation for children and young people in Ireland following acquired brain injury: current services and potential future directions.*' The paper calls for collaboration between key stakeholders to develop, agree and implement a standardised pathway for rehabilitation for CYP with ABI. The NRH recognises similar pathways are required to meet the rehabilitation needs for CYP with spinal cord injury and limb absence and prosthesis and is committed to working to develop rehabilitation services nationally so that CYP can get the right rehabilitation in the right location at the right time, every time.

Every year, the Paediatric Programme benefits from various types of donations and sponsored awareness-raising activities, including those organised by the patients themselves and their families. The Programme gratefully acknowledges this generous support in 2023. We are also grateful to NRH volunteers both NRH volunteers and the Play Volunteers from Children in Hospital, Ireland. We also thank the many community organisations that we collaborate with during the year.

Programme Manager

Clare Hudson is Programme Manager for the Paediatric Family-Centred Programme.

Clinical Services delivered within the PAEDS Programme

- **Medical**

Medical services are provided by Consultant Paediatrician Dr Susan Finn, Medical Director of the Paediatric-Family Centred Programme, and Dr Irwin Gill, Consultant Paediatrician s.i Neurodisability who work collaboratively with their consultant colleagues in acute and community care for paediatric patients referred to the NRH. The shared posts across the acute and tertiary hospital settings support planning across the continuum of care, with consultant review of new referrals in their Inpatient setting to help plan their rehabilitation admission.

- **Nursing – Daisy Unit**

Nursing staff on Daisy Unit work collaboratively as members of the Interdisciplinary Team (IDT) to ensure delivery of a high-quality standard of care and rehabilitation to the children, young people, and their families. Nursing staff work with the children and their parents over 24 hours, providing care, education, supervision, and support. All patients and their parents continue to benefit from the Primary Nurse Initiative. In 2023 we welcomed a new Clinical Nurse Manager II who brings a wealth of paediatric nursing experience to the Programme. The candidate Advanced Nurse Practitioner in Paediatric Neurorehabilitation has also registered as a nurse prescriber.



- **Clinical Psychology**

The Clinical Paediatric Psychology and Neuropsychology service provides a range of clinical services which includes neuropsychological assessment, cognitive rehabilitation, and behavioural advice and support to parents and the team. They also provide therapeutic intervention, both individually and in group settings, drawing upon a range of therapeutic modalities based on the individual needs of each child. Along with other IDT colleagues, the psychologist also plays a key role in supporting and educating parents and the young person's siblings. The service plays a role in training and education at a national level.

- **Creative Arts Therapy (CAT) - Music Therapy and Art Therapy**

Music Therapy is an evidence-based profession using psychoanalytic theories to inform the therapy process by observing how the children and young people interact with the environment, the therapist, and the music. The children and young people receive individual interdisciplinary assessment and treatment interventions. Joint collaborative sessions involve the music therapist working with other professionals on addressing specific shared rehabilitation goals through music. There are also IDT group sessions where music-based methods are applied to support children in achieving their IDT goals.

Art therapy supports patients' rehabilitation goals and needs. Individual sessions (weekly evening sessions) address patients' emotional and communication needs utilising a dynamic psychotherapy framework. Patients are supported to engage in a range of art processes to express and externalise their experience.

- **Liaison Service**

Effective and on-going liaison with Children's Health Ireland (CHI) and other referring hospitals and community teams ensures a smooth transition from the acute or community setting to the NRH. The Liaison Nurse acts as an advocate for patients and families, providing information and education, and liaises with healthcare professionals in referring hospitals, community services and schools during the pre-admission, Inpatient and post discharge stages. The Liaison Nurse has an active role in the waiting list planning group, ensuring the gathering of information and reports, and using pre-admission planning documents to improve communication to the wider team. The Liaison Nurse is involved in triaging and assessing patients to ensure that the timing and delivery of their rehabilitation is appropriate.

- **Nutrition and Dietetics**

To meet the increasingly complex nutritional needs of children, the dietetic service continues to grow and implement practice to support children throughout their rehabilitation journey.

- **Occupational Therapy**

The Occupational Therapy (OT) service to the PAEDS Programme is an occupation focused, play and fun-filled team that strives towards evidenced based practice. OTs on the Programme have continued to contribute to IDT working and education. They have continued to network nationally with community and acute hospital colleagues to share knowledge and learning and promote an integrated care pathway for all children with acquired injury.

- **Pharmacy**

The Pharmacy Department conducts medication reconciliation on admission and discharge, to ensure that the medication list is accurate at transitions of care. The Pharmacists liaise with community pharmacies regarding sourcing of medication, both on admission and discharge. The Pharmacy Department provides advice on dosing and administration of medication to staff, and children and young people, and their families as appropriate to their needs.

- **Physiotherapy**

The Physiotherapy Team on the Paediatric Programme works closely with other members of the Interdisciplinary Team (IDT), providing specialist physical assessment and intervention to all CYP in the Programme. They provide assessment and treatment to both Inpatients and Day-patients, as well as to Outpatients through review clinics. The Physio team contributed to the IDT and Parent education series, as well as providing paediatric specific in-service education to staff-grade physiotherapists within the NRH. Physiotherapists and Occupational Therapists on the PAEDS Programme worked collaboratively with the IWA Liaison Service to promote participation in physical activity through weekly sports sessions and a monthly Sports Day.

- **Prosthetics and Orthotics**

Prosthetic and Orthotic Services for the PAEDS-POLAR Programme are delivered by our strategic partner, Opicare.

- **Radiology**

X-rays are occasionally used in the paediatric age group under strict controls due to radiation exposure concerns. Ultrasound is the preferred imaging modality in children, where appropriate. The paediatric DXA unit (for age 3-19 years) employs low dose techniques and uses dedicated paediatric software to diagnose and monitor children with suspected low bone density.

- **Social Work**

Social Workers for the Paediatric Unit (Daisy) involves supporting children from both Inpatient and Outpatient services as they adjust to their illness and disability, as well as assisting the families and carers of the children with the emotional and practical impact they are experiencing. They do this by providing counselling, care coordination, connections to important resources and addressing financial and housing concerns. The Social Worker, along with the identified key nurse, acts as a link between the family and carers and other team members, as well as with outside services and agencies, throughout the rehabilitation process. The Social Work Outpatient-Outreach post for the PAEDS Programme enhances supports for CYP, their families and carers at the pre-admission and post-discharge stage of their rehabilitation programme.

- **Speech & Language Therapy**

Speech and Language Therapists (SLTs) on the Paediatric Programme offer a combination of Inpatient and remote telehealth, direct and indirect interventions in a patient and family-centred approach to support the speech, language, communication and eating and swallowing skills of CYP. SLTs liaise with schools, primary care teams, and children's disability network teams to provide ABI specialist neuro-rehabilitation support and education. The SLT service on the Programme also provides education and training to third level students through lectures and by facilitating clinical placements.

A total of 92 participants competed in 20 different sports competitions or sporting demonstrations offered during the 10th Annual Sports Championships in 2023.





SECTION 2

NRH REHABILITATION PROGRAMMES

Outpatient Programme





Dr Amanda Carty
Outpatient Programme Manager

Alice Whyte
Outpatient Programme Manager
(from November)

The Outpatient Programme Department (OPD) provide a wide range of rehabilitation Outpatient Services to patients from the Brain Injury Programme, Stroke Speciality Programme, and the Spinal Cord System of Care Programme.

These activities include Consultant-led clinics such as doctor only clinics, Interdisciplinary Team (IDT) clinics (which include a consultant and members of the IDT present), and the Neuro-behavioural Clinic. Non-Consultant led activity includes the Advanced Nurse Practitioner (ANP) clinics and Individual and Group Therapy input.

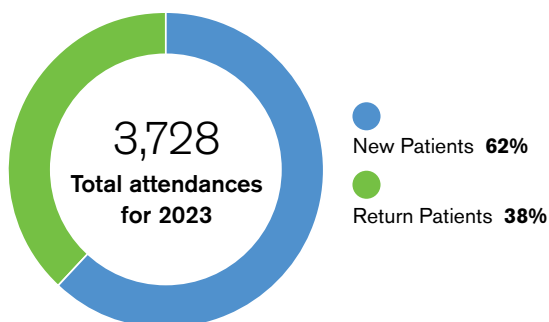
The OPD team contributed to a range of NRH events in 2023. These included: Wellness Day, Accessible Gaming event for SCSC patients, Farmer's Day and Ladies Day peer support and education events. The range of NRH Outpatient services enables our patients to avail of comprehensive care. All Outpatient services are offered via both in-person and telehealth modalities.

OPD Clinic Attendances

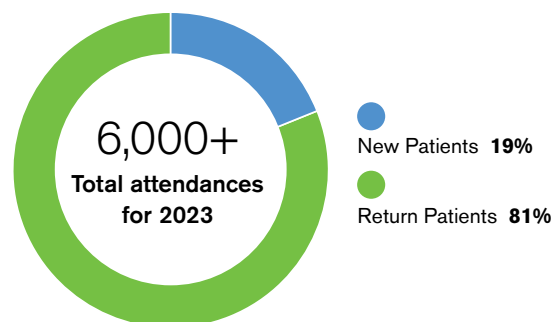
There is high demand nationally for the Brain Injury, Stroke and Spinal Outpatient services provided in the NRH which large volumes of patients attending Outpatient Consultant, Therapy and Nursing services.

Below is a summary of the Total OPD attendances for the Brain Injury Programme, Stroke Specialty Programme and the Spinal Cord System of Care Programme in 2023:

CONSULTANT LED CLINIC ATTENDANCES



NON-CONSULTANT LED CLINIC ATTENDANCES





Key Performance Indicators (KPIs)

Below is a table outlining our KPIs for 2023:

Indicator and Target Set – 2023	Average Waiting Times (weeks)
The time waiting for first Consultant Clinic appointment will be: Urgent Appointment: less than 13 weeks Routine Appointment: less than 26 weeks	Brain Injury Programme Urgent Appointment: 12 weeks Routine Appointment: 13 weeks
	Stroke Specialty Programme Urgent Appointment: 6 weeks Routine Appointment: 8 weeks
	Spinal Cord System of Care Programme Urgent Appointment: 18 weeks Routine Appointment: 25 weeks
The time waiting to access Therapy and Nursing input will be: Brain Injury Programme: less than 10 weeks Stroke Specialty Programmes: less than 10 weeks Spinal Cord System of Care: less than 6 weeks	Brain Injury: 16 weeks
	Stroke Specialty: 19 weeks
	Spinal Cord System of Care: 19 weeks
DNA Rates at Outpatient Consultant Clinics will be less than 10%	Brain Injury: 11%
	Stroke Specialty: 11%
	Spinal Cord System of Care: 6%
DNA Rates at Outpatient Non-Consultant Clinics will be less than 10%	Brain Injury: 11%
	Stroke Specialty: 11%
	Spinal Cord System of Care: 11%

OPD Programme Highlights 2023

- The NRH Outpatient Department was shortlisted for the Irish Healthcare Centre Awards in April 2023.
- In 2023, there was an uplift to the OPD Therapy staff which has allowed an increase in our MDT Clinics from 7 to 12 per month and an increased intensity in our therapy rehabilitation programs.
- Development of the Vocational IDT Service in 2023 has promoted effective, integrated vocational rehabilitation for our outpatients.
- New IDT upper limb pathway includes joint Occupational Therapy and Physiotherapy upper limb assessment and follow up individual or group (GRASP) intervention. This service will be further expanded in 2024 with the introduction of an OP Splinting pathway.
- In September 2023, the NRH had its own exhibitor stand at the National Ploughing Championships to offer injury prevention advice, support and education to some of the 300,000 visitors expected at this event. The event also offered the NRH a unique platform to explore recruitment and fundraising opportunities. This was a whole hospital initiative requiring commitment and support from various the hospital programmes and from the RTU, Finance Dept., IM&T, HR, Communications, Catering and NRH Foundation. A total of eight staff across various departments/programmes and disciplines managed the stand over the course of the three days.
- The Spinal Liaison Nursing Department underwent significant expansion in 2023 with the appointment of 2 Advanced Nurse Practitioners (ANP). These are the first ANP roles awarded in the NRH. ANP clinics run weekly in the Outpatients Department for return patients. Patient feedback to date has been extremely positive.

Challenges for OPD in 2023

Initial challenges experienced by the OPD department relating to the introduction of the Electronic Patient Record, TrakCare are being actively worked on with the aim of resolving them as quickly as possible.

Vacant posts in orthoptics, ophthalmology and dietetics have impacted on service provision in 2023. With the expansion of our staffing and services, space and facilities, there is a solution-focused approach to resolving any associated challenges as early as possible.

Future plans or developments for 2024

Plans are in place for the development of a robust spasticity and splinting service for the Outpatients Department. Planned new Outpatient Clinics include: an ADMA clinic, Post Concussion Clinic and Outpatient Splinting Clinic.

We continue with ongoing improvements to increase the accessibility to our service and reduction of our waitlists.

Clinical Services delivered within the OPD Programme include

- Medical
- Nursing
- Clinical Psychology
- Nutrition and Dietetics
- Occupational Therapy
- Pharmacy
- Physiotherapy
- Radiology
- Social Work
- Speech & Language Therapy



Section 3 Clinical Services Provided Across All Programmes



Dr Simone Carton
Head of Clinical Psychology



Alastair Boles
Senior Dental Surgeon (Special Needs) HSE Dun Laoghaire



Anne O'Loughlin
Principal Social Worker



Kim Sheil
Dietitian Manager



Rosie Kelly
Physiotherapy Manager



Cathy Quinn
Physiotherapy Manager



Róisín O'Murray
SLT Manager



Lisa Held
Occupational Therapy Manager



Prof Robert Flynn
Consultant Urologist



Rosie Conlon
Radiography Services Manager



Stuart McKeever
Therapeutic Recreational Specialist



Dr Brian McGlone
Consultant Radiologist



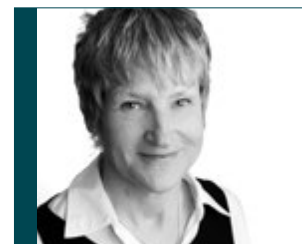
Dr Jacintha More O'Ferrall
Consultant in Occupational Health



David Farrell
Senior Clinical Engineer



Maureen Gallagher
Rehabilitative Training Unit Manager



Sheena Cheyne
Chief II Pharmacist



Sharon Hughes
IPC CNM III



Fiona Marsh
Acting DON from October

Nursing Department

FIONA MARSH
DIRECTOR OF NURSING, INTERIM

The NRH Nursing Department, with the Director of Nursing, Assistant Directors of Nursing (ADONs) and Nursing Management Team ensure that a high-quality service is delivered and maintained to all patients in the NRH.

We acknowledge all clinical staff for their ongoing commitment and resilience during 2023. We welcomed 36 new staff members to the Nursing Department following a huge drive for recruitment. Nursing Department staff reached 272, with plans to reach 307 staff within clinical and non-clinical areas for our 120 Inpatient beds and 9 day-patient beds. This could not have been achieved without the dedication and commitment of many staff, especially human resources, assistant directors of nursing, clinical facilitators, clinical nurse managers and specialist nurses.

We acknowledge the determination and willingness of our staff in embracing the new Electronic Patient Record (TrakCare) and Electronic Patient Medication Administration systems.

Senior Management Team

The ADON (Nurse Management Structure) and Clinical House Managers highlights the length and breadth of nursing involvement, scale and complexity of nursing operations and day to day management of over 200 staff. NRH nursing management continue to participate in monthly IEHG meetings.

Congratulations to all who pursued post graduate education and successfully completed this year. Congratulations also to all nursing staff who had special personal milestones to celebrate, and best wishes to our retired staff members.

New Developments

RESUSCITATION SERVICE

Cardiopulmonary Resuscitation (CPR) Courses continued in 2023 and 305 staff attended Certified courses divided between The Healthcare Provider, Heart Saver AED and Advanced Life Support programmes. 236 staff members and Transition Year Students attended workshops ranging from CPR concepts to National Early Warning System V2, Sepsis and Intraosseous Device use. The Graduating UCD Medical Students of 2023 (280 in total), also attended workshops provided by the NRH Resuscitation Department to hone their cardiac arrest emergency management skills.

Based on the successful delivery of five Advanced Cardiac Life Support Training Courses in 2023, the NRH plans to offer the course to external candidates and expand class sizes in 2024. The acquisition of new training equipment has facilitated one-to-one skills practice, ensuring more hands-on practice and a review of the Irish Heart Foundation's RQI device has offered possibilities for futuristic training possibilities.

Implementation of the INEWS/PEWS and Sepsis Quality Improvement Plan is ongoing with the aim to enhance the early recognition of deteriorating patients, thereby improving patient safety and outcomes. Sepsis and INEWS Training was delivered to all relevant staff and clinical staff were supported for the effective utilization of INEWS/PEWS and Sepsis pathway. In November, the NRH received the Certificate of Achievement for 'Most Improved Compliance in Sepsis Training Matters' by the IEHG, which empowered and uplifted staff towards the year end.

NURSING PRACTICE DEVELOPMENT DEPARTMENT

The Nursing Practice Development (NPD) team consists of Asha Alex, Nursing Practice Development Coordinator and Clinical Facilitators Komathi Narasimhan and Soumya Kalluveetil. The vision of the NPD department is to 'empower the nursing personnel including students to reach their maximum potential, in providing comprehensive, evidence-based, quality, safe and person-centred rehabilitation care in NRH'.



Key activities include:

- Induction programme for new RGNs and Health Care Assistants
- Identifying the learning needs and practice issues for nurses
- Supporting the continuing Professional Development of staff
- Standardising the nursing documentation and assisting with transition to the Electronic Patient Record (EPR), TrakCare
- Implementing and supporting Quality Improvement Initiatives
- Coordinating the nursing student placements
- Implementation of Quality Care Metrics Audits

With the support of unit nurses and managers, we have improved our preceptorship programme and have implemented the buddy nurse programme to facilitate the integration of all new nurses. The NPD team have also created new policies and have updated the hospital policies in line with identified needs of the hospital and changing national and international guidelines.

INFECTION PREVENTION AND CONTROL TEAM (IPCT)

The IPCT is led by a Consultant Microbiologist (sessional attachment), with one Clinical Nurse Manager III and one Clinical Nurse Manager II.

Education and Training

A broad range of educational activities for multiple specialities and grades of staff including students, volunteers and contract staff were carried out by the IPC team in 2023. These include:

- Formal and informal lectures in unit and department-based education sessions
- Hand hygiene training
- Standard precautions training
- COVID-19 PPE training
- CAUTI (catheter-associated urinary tract infections) prevention training
- Antimicrobial stewardship training
- Legionellosis prevention training
- Intravenous access device related infection prevention training
- The IPC team introduced Sharps Prevention Training in collaboration with the Occupational Health Department
- A Waste Management Training programme was also developed in conjunction with the risk management department.

The IPCT continued to liaise closely with clinical staff regarding the investigation and appropriate management of patients with infection and those known or suspected to be colonised with transmissible organisms. The IPCT liaise with and advise all departments on the prevention and control of infection and recommend the introduction of quality improvements where possible.

TISSUE VIABILITY SERVICE

This service, led by Lissy Augustine - Tissue Viability Nurse (CNS), provides specialist advice and evidence-based person-centred care to patients with a wide variety of complex and ongoing wounds. These include pressure injuries (both the prevention and management), vascular wounds, diabetic foot ulcers, surgical wounds traumatic injuries, complex and non-healing wounds. The service covers Inpatients, Day patients, Outpatients (Spinal, POLAR, Urology Outreach and links with spinal liaison service to review patients with wounds living in the community). The TVN specialty clinical practice role may be divided into direct and indirect care. Direct care comprises the assessment, planning, delivery, and evaluation of care to the patient, family and or carer. Indirect care relates to activities that influence and support the provision of direct care.

A total of 234 wounds were reviewed including 181 Inpatients, 4 Day-patients, and 49 Outpatients. 81% of the wounds healed and 18% of wounds improved before patient discharge. 1% disimprovement of wounds was due to underlying worsening disease conditions, these patients were not ready for rehab and were discharged to acute hospital for further treatment.

Education and training delivered to healthcare professionals on work placements within the hospital; in the community and in the wider healthcare system included: Skin Care and Pressure Injury Prevention relevant to all NRH Programmes, Pressure Ulcer to Zero collaborative - pressure injury prevention, Safety cross, SSKIN bundle, NRH Pressure Injury prevention and Management Protocols, and training on prevention and management of a range of specific wound types.

Sexual Wellbeing Service (SWS)

PAULINE SHEILS

CLINICAL NURSE SPECIALIST IN SEXUAL WELLBEING AND ILLNESS & DISABILITY, RNP

The Specialist service works across all five rehabilitation programmes in the NRH, limited this year by reduced resources in the service.

The patient, with or without their partner, remains as the focus of the service with support and counselling provided in relation to the impact of the illness and or disability on their sexuality, relationship, sexual function and fertility issues. Restrictions to the service in 2023 were due to the CNS also covering the role of Acting ADON for the spinal service. This has led to the creation of waiting lists for both Inpatient and Outpatient services.

CARF Accreditation: The 2023 CARF survey report recognised the Sexual Wellbeing Service as being of exemplary conformance, stating 'the service...continues as a leader in the field in addressing the area of sexuality after injury within the context of rehabilitation through consistent and sustained high-quality assessment and related individualised services. Persons served have benefited from such exemplary, individualised, comprehensive, and holistic healthcare.'

Succession planning: The NRH has successfully recruited for the post of CNS in Sexual Wellbeing to succeed the current CNS in her retirement in 2024.

The LGBTQI+ working group established in late 2021 has progressed to a working group of 10, the aim in to encourage inclusivity of all members of staff in the NRH. The group walked in the Pride parade under the NRH banner, and information and awareness stands were held during the year, promoting the working group and providing snippets of related knowledge as well as being a fun activity.

Education provided by the SWS Clinical Nurse Specialist in 2023:

- Sexuality and Disability Multidisciplinary Workshops to NRH Staff
- Patient Education sessions (Theme of the Week) on Rose, Willow, Ash, Daisy and Pine Units
- Patient Education 'Sexuality and Spinal Cord Injury'



Spinal Liaison Service

PAULA KEANE – ANP IN RESPIRATORY MANAGEMENT - NEUROREHABILITATION

SIOBHÁN O'DRISCOLL – ANP IN SPINAL CORD INJURY AND DYSFUNCTION

Overview of Services

The Spinal Liaison Nursing Department underwent significant expansion in 2023 with the appointment of two Advanced Nurse Practitioners (ANP) - the first ANP roles awarded in the NRH. An ANP can provide complete autonomous episodes of care and have prescribing authority. The roles will include Inpatient and outreach services. ANP clinics began in September and run weekly in the Outpatients Department. Joint ANP and Tissue Viability Nurse (TVN) clinics were initiated and rolled out with great success. Patient feedback following clinic attendance has been excellent. The Spinal Liaison Nursing Service provides care to the Spinal Cord Injured population across the entire continuum of care including: preadmission, Inpatients, post-discharge and Outpatient services and clinics.

LIAISON SERVICES

Edite Forstmane, CNMII joined the team in September 2023 and will provide care to the spinal cord injured population across the continuum of care including preadmission, Inpatients and post-discharge to include Outpatient services.

NEUROGENIC BOWEL CARE

Education and the effort to increase awareness, particularly in the area of neurogenic bowel care is ongoing. Delayed transfers of care for SCI patients are still affected by resource issues around neurogenic bowel care being delivered in the community. Monthly virtual training with support from Janette Hamill, NRH Academic Department. Strategic planning to link with Higher Education Institutions (HEIs) continues, with successful roll-out of an introduction to neurogenic bowel care to 2nd year undergraduate nursing students in UCD during their Neuro module.

Education and Training delivered by Paula Keane, ANP, in 2023:

- Neurogenic Bowel Dysfunction (NBD) – 12 courses delivered virtually; 296 people were trained
- Train the Trainer in Neurogenic Bowel Dysfunction – 2 in-person courses delivered; 21 people were trained
- MSc in Public Health Nursing UCD 'Neurogenic Bowel Dysfunction and Management; 63 people trained virtually
- Undergraduate General Nursing Students, UCD 'Introduction to Rehabilitation, SCI and NBD; 138 people were trained

Milestones for the Liaison Service in 2023

- Awarded the MASCIP Bursary for the update of the Healthcare Professionals Video on the Management of Neurogenic Bowel Dysfunction. The video has been updated and is available on the NRH Website.
- Presented at the annual MASCIP conference, 2023
- Poster presentation at the International Integrated Care Conference in UCD
- Successful weaning from a ventilator for 12 hours for a SCI Patient to enhance quality of life
- The SCSC and BI Programmes worked together successfully to admit a ventilated brain injury patient with complex needs

2023 Liaison Statistics

Post Discharge Phone Calls	68	Healthcare Professionals seeking advice and information	460
Patients Requesting Advice and Information	614	Home Visits	18
Families Requesting Advice and Information	144	Hospital Visits	12
Patient Annual Reviews	22	Pre-admission phone calls	26
Pre- admission Assessments	26		

Urology Department

PROFESSOR ROBERT FLYNN
CONSULTANT UROLOGIST

Urology Service

The Urology Department team includes Professor Robert Flynn; Georgina Rich, CNMII; Caroline Ahern, Advanced Nurse Practitioner (ANP); Edel Gormley, CNS Neuro-urology; Alina Matei, Urology Staff Nurse; Natasha King and Fiona Flatman, Urology Administrators, and Derek Cahill, Decontamination Technician.

The Urology Department provides a Monday to Friday service and is available to patients from all Rehabilitation Programmes at the NRH. Most referrals come from the Spinal Cord System of Care. We provide a full neuro-urology service for Inpatients and follow-up post discharge. We also support the management of other urological issues where necessary. The urology service strives to deliver patient-focused quality care and has been shaped around our commitment to providing best practice. Our clinic numbers continue to grow, while telephone calls to the department increased significantly reflecting the need for support and advice.

Urology Clinics

CONSULTANT CLINICS

Consultant Urologist Prof Flynn attends for two clinics per week and sees both Inpatients and Outpatients; procedures run in parallel with these clinics. 390 patients attended the Consultant Clinic in 2023.

NURSE-LED CLINICS

The Nurse-Led clinic (NLC) is a lifelong service with most spinal patients attending on an annual or bi-annual basis. This clinic incorporates a comprehensive assessment including imaging and phlebotomy. Advice is given and educational needs are addressed as part of the clinic. The NLC works closely with the Radiology Department to provide this service. Depending on patients' needs, we refer to the Rehabilitation Consultants, Multidisciplinary Clinics, Liaison Service, Sexual Wellbeing Service, Public Health Nurses or GPs. 772 patients attended this clinic in 2023.

URODYNAMIC CLINICS

The Urodynamic clinic operates one morning per week for Outpatients. Extra clinics are provided during the week to facilitate Inpatients. In 2023 we performed 164 procedures.

FLEXIBLE CYSTOSCOPY CLINIC

The Flexible Cystoscopy Service includes diagnostics, removal of small bladder stones and Suprapubic Catheter (SPC) insertions. This is a valuable service for our patients who would otherwise have to wait long periods to have these procedures performed in a general hospital. Patients can be seen quickly in the Urology Department by staff who are familiar with their needs. We provide education and training on the routine change of SPC for patients, family members, carers and healthcare professionals. 71 flexible cystoscopies and 13 SPC insertions were performed in 2023.

INTRAVESICAL BOTOX CLINIC

This service has proven to be invaluable for our patients who would otherwise have to wait for up to two years for the procedure in a general hospital. The service can be provided in a timely manner by staff who know the patients' needs, and feedback has been extremely positive. 62 Intravesical Botox procedures were performed in 2023.

We also facilitate the Speech and Language Therapy Service to perform Fiber-optic Endoscopic Evaluation of Swallow (FEES) procedures.

EDUCATION

Education is provided at each clinic and on an individual basis depending on patient needs. We also facilitate education with families, carers, and healthcare professionals by appointment and we support training, education and competencies for nursing staff within the NRH.



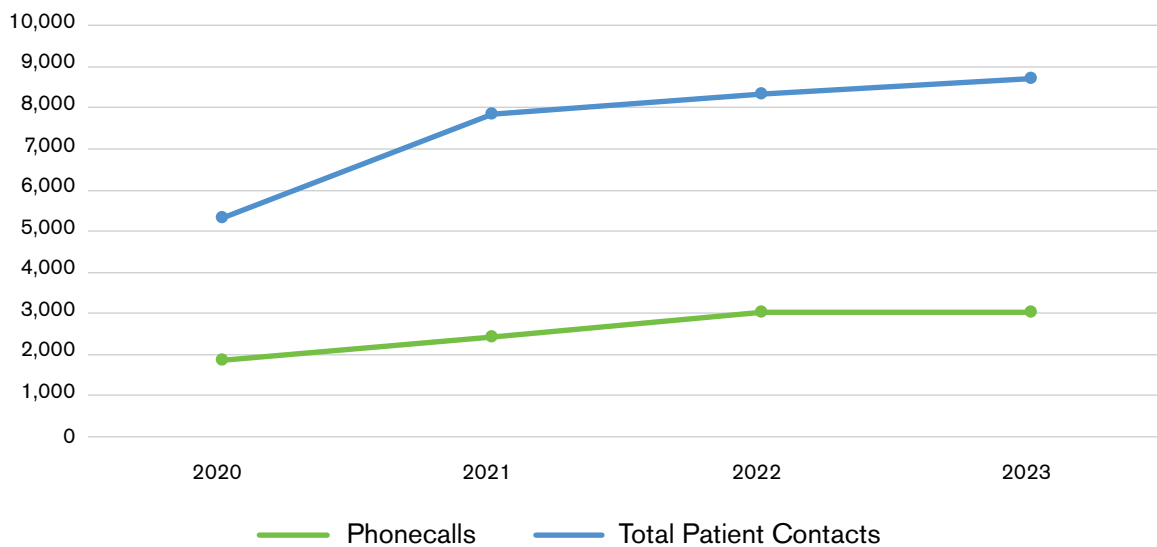
TELEPHONE SUPPORT

Telephone communication is vital in providing support and advice to our patients, their families and to other Healthcare Professionals. We received over 3,000 telephone calls from patients and Healthcare Professional seeking advice in 2023.

Our new Endoscopy Suite and decontamination equipment brings the department into line with the National Decontamination Standards.

UROLOGY DEPARTMENT ACTIVITY 2023

Clinic and Telephone Support



Education Delivered in 2023

- Caroline Ahern: Poster Presentation - Association for Continence Professionals (ACP), Athlone, 2023.

EDUCATION DELIVERED IN THE NRH, 2023

- Georgina Rich, Edel Gormley and Caroline Ahern: 'Management of the Neurogenic Bladder' - NRH Study Day for Community & Public Health Nurses, and nurses within the NRH.
- Georgina Rich, Edel Gormley and Caroline Ahern: Facilitated Education in Urology Department - Undergraduate and Post Graduate Nursing Students
- Georgina Rich, Edel Gormley and Caroline Ahern: 'Neurogenic Bladder Management' – Inpatient Education Sessions
- Edel Gormley: Poster Presentation – NRH Research, Clinical Audit and Quality Improvement event, November.
- Caroline Ahern: Oral Presentation – 'Management of the Neurogenic bladder post SCI' - Healthcare Professionals' Spinal Information Day

EDUCATION DELIVERED AT IRISH ASSOCIATION OF UROLOGY NURSES' (IAUN) CONFERENCE, LIMERICK, 2023

- Prof Robert Flynn, Caroline Ahern and Edel Gormley: 'Management of the Neurogenic Bladder post SCI' – Oral presentation.
- Caroline Ahern: Poster Presentation.

Clinical Engineering

DAVID FARRELL
SENIOR CLINICAL ENGINEER

Services Provided

Within the Clinical Engineering Department at the NRH, our work is a specialty that falls under biomedical engineering, but primarily works to develop, apply and implement medical technology for the delivery of patient care in the NRH.

Clinical Engineering provides technical support for a diverse range of medical devices in different areas such as High Dependency Units, Pharmacy, CSSD, Ophthalmology, Urology, Phlebotomy, Radiology, and Therapy services.

Clinical Engineering Upgrade Initiatives Completed in 2023

In 2023, Clinical Engineering in collaboration with our colleagues in point of care testing, Occupational Therapy, and Pharmacy achieved the following:

- Upgrading of our intrepid defibrillators with Quality Cardiopulmonary Resuscitation (QCPR) modules to provide higher-quality Cardiopulmonary Resuscitation (CPR)
 - Doubled NRH blood gasses capacity providing clinical staff with critical, actionable blood gas results that aid in patient diagnosis and treatment
 - Fast Upgrade and roll out of 10 undercounter pharmacy fridges. Each refrigerator is particularly made to meet the demanding DIN 58345 regulation.
-

Quality Improvement Initiatives Completed in 2023

- Rotation of our high usage hoists into less acute usage areas.
 - Additions to our suite of patient falls prevention with a range of discreet fall alarms and integrated falls alarm bed. Remote monitoring enables our nursing staff to make fact-based assessment and track fall prevention efforts from the nurse's station while maintaining patient dignity.
 - Further expansion of our range of equipment to aid complex admissions of bariatric patients and those at risk of falls and abscondment.
 - Planning and development of a new modern ergonomically designed Clinical Engineering and Wheelchair workshop, to encompass storage decontamination and repair of campus wide medical and therapy devices. In a medical devices workshop, this means creating an environment where tools are within easy reach and work surfaces are at the right height, ensuring productivity can be achieved safely and in a comfortable environment.
-

Medical Device Activities

In total, 1252 maintenance requests were received by Clinical Engineering in 2023. 1145 work orders were closed out by Clinical Engineering and 102 work orders were closed out by external service providers.

Future Developments

As the Clinical Engineering Department continues to develop and recruit new staff, the service aims to continue to make a difference in supporting patients and colleagues (clinical and non-clinical) in the provision of a comprehensive range of specialist rehabilitation services at the NRH.



Clinical Microbiology and Infection Prevention and Control

DR LAURA RYAN
CONSULTANT MICROBIOLOGIST

The Infection Prevention and Control (IPC) team consists of Dr Laura Ryan, Consultant Microbiologist, Asha Alex, IPC CNM III (to September 2022) and Maya Tom, IPC CNMII. The IPC team oversees infection prevention and control in the NRH in line with National and International best practice guidelines and recommendations. The IPC team aim to provide a safe environment for all patients while they participate in a full rehabilitation programme in the NRH. Key activities include:

- Monitoring and surveillance of healthcare associated infection (HCAI) and multidrug-resistant organisms (MDRO)
- Education and training
- Clinical Liaison and Consult service
- Hygiene, Audits and Surveillance
- Outbreak Management
- Committee membership including Reusable Invasive Medical devices (RIMD)

The Clinical Microbiology service also includes Antimicrobial Stewardship

Hygiene, Audits and Surveillance

The IPC team continuously monitor cleaning standards with regular audits of the environment and patient equipment. Audits on compliance with care bundles are also frequently monitored. Results of audits are fed back in real time to the Unit staff and to the Hygiene and Infection Prevention and Control Committee (HIPCC).

Surveillance of forms a crucial component of infection prevention and control in the NRH. As most of our patients are admitted from other healthcare organisations, large numbers of patients are already colonised with Multidrug Resistant Organisms (MDRO) on admission. We endeavour to ensure all patients with an identified MDRO are monitored and cared for with appropriate transmission-based precautions to limit the spread of resistant organisms in the NRH. Monthly updates on surveillance figures are reported to the HIPCC. The IPC team also now participate in the National Surveillance Programmes (National Enhanced Clostridioides difficile Surveillance) and submit relevant Key Performance Indicator (KPI) data on hospital acquired infections to HSE Acute Business Intelligence Unit monthly. The NRH also participates in biannual National Hand Hygiene Audits.

Education and Training

The IPC team provide education to all staff on hand hygiene, standard precautions, and other mandatory topics, as well as other important topics such as COVID-19, catheter-associated urinary tract infection prevention, legionellosis, antimicrobial stewardship and intravascular device infection prevention training.

Antimicrobial Stewardship

Weekly antimicrobial stewardship rounds are carried out by the Consultant Microbiologist and the antimicrobial Pharmacist. Prescriptions for every patient on antimicrobials are reviewed and key indicators are measured. Where necessary, advice and feedback is given in real time to the prescriber.

Challenges, Achievements, and Innovations in 2023

The IPC team continued to provide education, training, surveillance, management of and contact tracing for COVID-19, in conjunction with other NRH departments helping to ensure staff and patients were kept as safe as possible as the pandemic ended in 2023 and COVID-19 became part of the usual circulating respiratory viruses.

The IPC team have updated all COVID-19 related standard operating procedures and policies regularly in line with changing national and international guidelines and many specific COVID-19 policies were archived. New policies were developed, and existing policies updated based on identified needs of the hospital. We also celebrated WHO World Hand Hygiene Awareness Day, WHO Sepsis Awareness Day and European Antimicrobial Awareness Day in 2023, raising awareness and engaging with staff on these important topics. The IPC team in conjunction with the Quality and Risk Department and the Technical Services Department also held an inaugural Water Safety in Healthcare awareness stand for all staff to learn about the importance of water in healthcare associated infections and measures to mitigate the risk.

The NRH POLAR Programme provides both Inpatient and Day-patient Services for patients who living within commuting distance of the hospital.





Clinical Psychology

DR SIMONE CARTON
HEAD OF CLINICAL PSYCHOLOGY

The NRH Psychology Service

The priority for each member of the Psychology Team is to integrate 'rehabilitation thinking' with best: psychological theory and practice; research and education; clinical & service initiatives and innovation; and advocacy within NRH and the wider health care community, nationally and internationally. Examples of some of the achievements were illustrated in the many contributions of members of the department of psychology at the 14th International Brain Injury Association World Congress, Dublin in March, and the Psychological Society of Ireland Annual Conference, Cork in November. Throughout the year there was further consolidation of the three principal specialist posts in Adult and Paediatric Neuropsychology and Acquired Physical Disability. These posts have given scope and opportunity to develop services within NRH and beyond and are also an important part of the promotion and retention prospects for clinical psychology.

Summary of Key Developments and Milestones in 2023

Implementation of the Assisted Decision-Making (Capacity) Act (ADMA): For over 20 years, members of the Department of Psychology have developed a particular expertise providing opinion about patients' ability to make decisions and exercise their autonomy. Dr Simone Carton presented to the Oireachtas the limitations of Wards of Court and the need for a more comprehensive and human-rights based approach to supporting patients with acquired brain injury in decision-making and exercising their autonomy in 2013. Dr Sarah Casey, together with Social Work colleagues, IEHG and the Psychological Society of Ireland (PSI) has been centrally involved in advocating best practice in the implementation of the requirements the Assisted Decision Making (Capacity) Act enacted in 2023. Psychology, in conjunction with Social Work Colleagues have established the new ADMA office in the NRH.

Outpatient Psychology Service for Spinal Cord Injury Patients: A dedicated Psychology post providing an Outpatient service for patients with Spinal Cord Injury is now in place.

Positive Behaviour Support Group (Formerly the Behaviour Forum): The terms of reference were reviewed by obtaining feedback from stakeholders and external consultation with clinicians and relevant agencies. The policy on the Management of Behaviours and Events of Concern and Challenge was completed and submitted to QSR for ratification.

The Suicide Awareness Group: The NRH Suicide Awareness Group completed and launched the Suicide Awareness Toolkit providing information for NRH staff on how to respond and support a person who is experiencing thoughts of suicide.

Mind Matters-II: Acceptance and Commitment Therapy (ACT) - Informed Psychological Intervention Group: This is a new evidence-based group intervention and referral pathway for patients with brain injury or Stroke experiencing changes in their psychological well-being.

Development of a Sleep Assessment Service: Funding was secured from Spark (HSE Innovation Programme) to develop a sleep assessment protocol using actigraph watches and Cognitive Behaviour Therapy for Insomnia (CBT-I).

In 2023, Dr Sarah Casey, Senior Clinical Neuropsychologist left the NRH after seven years to take up a new role, we wish her every success and we look forward to our ongoing collaboration as colleagues within the healthcare system.

Psychology Services delivered within specific Rehabilitation Programmes are detailed in Section 2, the Clinical Programmes Section of this report. Other service developments are listed detailed below:

NEUROBEHAVIOUR CLINIC

This is an Outpatient clinic for patients who experience significant changes in mood and personality associated with brain injury or illness. In 2023, NBC celebrated its 20th year of practice at the NRH. The clinical leadership of NBC includes clinical neuropsychology (Drs. Simone Carton and Aisling Parsons) and neuropsychiatry; each speciality providing invaluable clinical perspectives, practices and clinical overlap, essential for delivery of expert assessment and opinion in this complex area. Increasingly in 2023, NBC with the Brain Injury Liaison team, provided consultations at pre-admission stage to offer support for the management of behaviour of prospective patients; on some occasions this was so successful the patients did not require admission to NRH specialist units.

VOCATIONAL IDT CLINIC

Psychology and Occupational Therapy colleagues launched this specialist service which enables patients to access all their vocational needs under one service.

POST-CONCUSSION SERVICE (PCS)

A specialist Post-Concussion Service (PCS) service is in development, including the IDT care pathway for PCS. In collaboration with Headway, NRH shared resources and promoted the need for an interdisciplinary approach to PCS by disseminating service-based research findings in the NRH and at external meetings including the International Brain Injury Association (IBIA) and Psychological Society of Ireland (PSI).

Professional Activity in 2023

RESEARCH

- Dr Simone Carton is co-investigator on a longitudinal study investigating the psychological status of patients 10 years post Acquired Brain Injury.
- Drs. Simone Carton and Aisling Parsons are co-investigators with Lynn White at TCD exploring the psychological impact on family members who have a close relative living with an acquired brain injury (under 65 years of age) residing in a nursing home.
- Drs. Aisling Lennon and Claire Keogh are co-investigators with Amanda Dunne, undertaking research 'The Experience of Fathers with Acquired Physical Disabilities' under the supervision of Dr Aisling Lennon.
- Drs. Sarah O'Doherty and Aisling Warren are collaborators on a 3-year study entitled 'Enhancing survivorship through rehabilitation for children, adolescents and young adults after childhood brain tumours (the Brain-Restore Youth study)' with RCSI.

AWARDS

Dr Sarah Casey received an award at the International Brain Injury Association World Congress 2023 for her poster detailing the quality improvement method for ADMA implementation at the NRH.

Dr Suvi Dockree was awarded 'Winner in Postgraduate Student Research Category' at the NRH Research, Quality Improvement and Clinical Audit Awards 2023.

Dr Suvi Dockree and Orla Lyons (OT) received an award for the 'Development of a Vocational Interdisciplinary Clinic for Patients with ABI in the NRH Outpatient Department' at the NRH Research, Quality Improvement and Clinical Audit Awards 2023.

Dr Emma Brennan was awarded an NRH Research, Quality Improvement and Clinical Adult Award for her work as Chair of the Suicide Awareness Group, and work together with her colleagues on the Suicide Awareness Toolkit project.



PUBLICATIONS

Dockree, S. P., Ffrench, C. W., O'Hara, J. A. L., Carroll, P. A., Dockree, P. M., & McGuire, B. E. (2023). Dissociating the impact of alexithymia and impaired self-awareness on emotional distress and aggression after traumatic brain injury. *Neuropsychology*.

Dockree et al. (2023). 'Stories from scientists, written for everyone to understand'. Kudos online platform publishing accessible stories.

McManus, C & **Casey, S.J.**, (2023). Special Feature: An Irish perspective on services and clinical interventions for Functional Neurological Disorder. *The Irish Psychologist*, 49(3), 52-57.

14th World Congress on Brain Injury Abstracts, *Brain Injury*, 37:sup1, 1-278, DOI: 10.1080/02699052.2023.2247822

DON Spotlight (2023). Recent PSI Division of Neuropsychology Events. *The Irish Psychologist*; Vol. 49:5 (112-115).

Deirdre M Twomey, Anna Igoe, Niamh Allen, Maria L.F. Agan, Aoife Hayes, Andrea Higgins, **Simone Carton**, Richard Roche, David Hevey, Jessica Bramham, Nuala Brady, Fiadhait O'Keeffe. Psychological Outcomes following Moderate-to-Severe Acquired Brain Injury: A Longitudinal Study. *Brain Impairment*, 2023.

CONFERENCE PRESENTATIONS IN 2023

14th International Brain Injury Association World Congress, Dublin, March 2023

- **Carton S.** Working with families after ABI using a systemic approach to navigate change over time. Platform presentation.
- **Casey, S.J.**, Harte, E., & Carroll, P.A. (2023). Using CBT to support adjustment in the context of interdisciplinary rehabilitation for covid-related Stroke. Platform presentation.
- **Cunningham, E.** (2023). Adapting CBT approaches for people with aphasia. Platform presentation
- **Dockree, S.P.**, (2023). Does Problem-Solving Therapy Reduce Caregiver Depression in the Context of Acquired Brain Injury? A Systematic Review. Platform presentation.

The Psychological Society of Ireland (PSI) Annual Conference, Cork, November 2023

- **Carton S.**, Parsons A, & O'Driscoll K. Person-centred neurorehabilitation through a psychological lens: A bite size blitz of psychologically informed service developments at NRH, a national tertiary neurorehabilitation hospital. Neurobehaviour Clinic at NRH, 20 years of service. Platform presentation.
- **Casey, S.J.**, Summers, R., Butler, P., O'Loughlin, A. (2023). Psychologists as clinical leaders in Assisted Decision-Making (Capacity) Act implementation: A psychologically informed approach to assisted decision-making and capacity assessment in a tertiary neurorehabilitation setting. Platform presentation.
- **Casey, S.J.**, Harte, E., & Carroll, P. A. (2023). Psychological formulation and intervention in the context of interdisciplinary neurorehabilitation for COVID-related Stroke. Platform presentation.
- **Cunningham, E. (2023)**. Adapting CBT for people with aphasia: An interdisciplinary approach. Platform presentation.
- **Dockree, S.P.**, Ffrench, C.W., O'Hara, J.A.L., Carroll, P.A., Dockree, P.M. & McGuire, B.E. (2023). Dissociating the Impact of Alexithymia and Impaired Self-Awareness on Emotional Distress and Aggression After Traumatic Brain Injury. Platform presentation.
- **Dockree, S.P.**, Ffrench, C.W., Wallace, E. & McGuire, B.E. (2023). Clinician Perspectives on Post-Concussion Syndrome Following Mild Traumatic Brain Injury. Platform presentation.
- **Fitzgerald, J.**, O'Doherty, S. & Warren, A. (2023). Differential diagnosis between ASD and ABI in a neurorehabilitation setting. Platform presentation.
- **O'Doherty, S.** (2023). Mild Traumatic Brain Injury (MTBI) / Concussion meets Functional Neurological Disorder (FND); cases from a paediatric Inpatient neurorehabilitation service. Platform presentation.
- **Parsons, A.** (2023). Case Study: Inpatient Neurorehabilitation for Functional Neurological Disorder (FND) – The Role of Clinical Neuropsychology. Platform presentation

RCPI Institute of Medicine Hot Topics for Acute Physicians – Rehabilitation: Changing times beyond paradigm and acute treatment. Webinar, October 2023

- **Casey, S.J.** (2023). Just decision-making? Supporting decision-making and capacity assessment in rehabilitation. Presentation

The NRH Brain Awareness Day, Patient Education Event, March 2023

- **Casey, S.J.** (2023). Golden Slumber: the importance of sleep for brain health, everyday functioning, and wellbeing. Open access presentation.

PROFESSIONAL REPRESENTATION NATIONALLY

- Claire Keogh, Aisling Lennon, and Emma Brennan are members of the SIPAG group: Spinal Injuries Psychology Advisory Group, MASCIP (Multidisciplinary Association for Spinal Cord Injury Professionals), and ESPA (European Spinal Psychologist Association).
- Drs Suvi Dockree, Toni Galligan, Sarah O'Doherty, and Simone Carton are committee members of the Psychological Society (PSI) of Ireland Division of Neuropsychology.
- Dr Sarah Casey participated in a working group collaborating on a submission to the Office of Parliamentary Council aiming to bring practitioner psychologists under the prescribed classes of professionals who can undertake assessments of decision-making capacity under the Assisted Decision-Making (Capacity) Act.
- Dr Eimear Cunningham is the PSI representative in the Stroke Council of Ireland.
- Drs. Suvi Dockree, Sarah O'Doherty and Sarah Casey were members of the IBIA Planning Committee for the World Congress held in Dublin in 2023.
- Dr Aisling Lennon is Secretary for International Spinal Cord Society (ISCoS) Climate and Health Special Interest Group
- Dr Simone Carton is a specialist member representing the Voluntary Hospitals Framework on the HSE committee reviewing the HSE policy on violence and aggression in health care.
- Dr Simone Carton is chair of the Hospital Group of the Heads of Psychology in Ireland.

DEPARTMENT OF PSYCHOLOGY REPRESENTATION ON NRH COMMITTEES

Dr Simone Carton is: Chair of the Health and Social Care Professional Leads (HSCP); Vice chair of the Academic Department; Chair of the Behaviour Forum; Therapy Representative on the Brain Injury & Stroke Steering Group; and member of NRH Ethics Committee.

Department of Psychology colleagues were members of the following NRH committees and working groups in 2023:

- Positive Working Environment Group (PWEG)
- SCSC Programme Education committee
- Health and Social Care Professional Leads (HSCP)
- Research Advisory Group
- Behaviour Support Forum
- Safeguarding and Patient Rights Committee
- Suicide Awareness Group (SAG)
- Maximising Opportunities for Rehabilitation (Max Rehab), Unit Facilitators and members of the Steering Committee.
- Steering Group for IFIC 'State of the Organisation' review.
- Brain Injury Programme Education Committee.
- Outpatients Department Steering Committee.



Dental Service

ALASTAIR BOLES

SENIOR DENTAL SURGEON (SPECIAL NEEDS), HSE DÚN LAOGHAIRE

The Dental Unit at the NRH provides a dental service for all Inpatients of the hospital, and also for Outpatients with additional needs from the Dún Laoghaire area. The dental unit mainly offers a primary care dental service. Dental treatment for Inpatients is mostly limited to treatment that can be provided within the time available while patients are admitted to the NRH. Onward referrals of patients being discharged from the hospital are organised to other regions of the country's public dental service as required.

Each year, students from the Dental Hospital are facilitated through observation of the Dental Service provided at NRH as part of their training.



The NRH Speech and Language Therapy Conference in 2023 brought together SLTs from throughout Ireland with a similar passion for improving outcomes for patients with communication and swallowing difficulties following Brain Injury or Spinal Cord Injury.

Nutrition & Dietetics

KIM SHEIL
DIETITIAN MANAGER

The Department of Nutrition & Dietetics strives to deliver high quality, evidence-based nutritional care based on clinical need, to all Inpatients of the NRH.

With its small staff complement (5.8WTE) dietitians are required to work across more than one clinical programme. To ensure continuity of service during periods of planned and unplanned leave, all dietitians must be skilled in providing nutritional care to meet the clinical and Programme-specific needs of each patient. Consultation is by referral.

In 2023, the main challenge for Nutrition and Dietetics related to staffing recruitment and retention, exacerbated by long-term sick leave. Staffing levels fell to 40% for some months. Thanks to the commitment and hard work of the team, patients at nutritional risk were safely managed. To assist in managing this crisis, a Dietetic Assistant (DA) was employed temporarily. The DA role includes administrative duties which frees up the dietitian to focus on clinical care. The role also includes defined clinical duties including monitoring nutrition care plans. The role has proven to be invaluable to the hospital and it is hoped that it will eventually become a permanent one. In 2023 a newly created 0.5WTE Senior Dietitian post was allocated for Outpatients and the service will become available when the post is filled.

Dietitian Prescribing

All dietitians completed Primary Care Reimbursement Service (PCRS) training as part of the national rollout of dietitian recommending of oral nutritional supplements. This enables dietitians to recommend oral nutritional supplements in the community, thus improving efficiency and effectiveness in managing patients' nutritional needs on discharge.

Student Placements

In 2023 Students from the UCD M.Sc. Dietetics Programme successfully completed placements in the NRH and provided excellent feedback on their experiences.

Continuous Professional Development (CPD)

Department members undertook a range of CPD activities including attendance at the: 30th Annual European Congress on Obesity; Irish Society for Clinical Nutrition & Metabolism Annual Conference; Diabetes Ireland Annual Study Day; 14th World Brain Injury Congress; Great Ormond Street Hospital Paediatric Nutrition Study Day; Feeding Tubes Management Webinar INDI. All dietitians completed PCRS Training in dietitian recommending of Oral Nutritional Supplements.

Committees and Working Groups

The Dietitians are active participants in the following:

- Diabetes Steering Committee
- Nutrition and Hydration Steering Committee
- Enteral Feeding Working Group
- Brain Injury Programme Executive

Weight Management Task Force

The Weight Management Task Force was established by the Nutrition and Dietetics department to address undesirable weight gain in NRH patients. A range of disciplines representing the Interdisciplinary Team are actively involved in the group. The work of the task force to date includes: participation in promotion of 'Making Every Contact Count' Training on HSE Land. This is important to equip team members with the skills to encourage patients to make healthier lifestyle choices, in a patient centred and non-stigmatising way. Some examples include: limiting high calorie snack options in the coffee shop; removing high calorie snack options on the Units; increasing availability of 'healthy' meal options at mealtimes.



Occupational Therapy

LISA HELD – OCCUPATIONAL THERAPY MANAGER

JOSEPHINE HERRIOTT – ACTING OT MANAGER IN CHARGE III (to December)

EMMA SHORTHALL – ACTING DEPUTY OT MANAGER (from September)

Overview of Occupational Therapy Services

The Occupational Therapy Department's mission is to advance NRH services by enhancing patients' participation in meaningful occupations as part of their rehabilitation journey, through evidence-based practice, innovative research, and education.

Occupational Therapy (OT) programmes are goal-orientated and designed specifically to meet the unique needs of each patient through individual and or group sessions focussing on physical, cognitive and behavioural rehabilitation. Interventions include personal care, home and community skills training, self-management, patient education and family training.

The OT service provides specialist intervention to patients from all clinical rehabilitation programmes as part of the Interdisciplinary Teams at the NRH. These Programmes include; Brain Injury; Stroke Specialty; Spinal Cord System of Care; Prosthetic Orthotic and Limb Absence Rehabilitation (POLAR), and Paediatric Programmes. OT activity specific to each of these programmes is outlined in Section Two (NRH Rehabilitation Programmes) of this report. OT services provided across all five Programmes (cross-programmatic) are outlined below:

OT Services Delivered Across all NRH Programmes (Cross-Programmatic Services)

- Assistive Technology
- Discharge Liaison Occupational Therapy (DLOT)
- Driving Assessment and Training
- Horticulture
- Practice Education
- Splinting
- Vocational Service
- Wheelchair and Seating
- Woodwork

ASSISTIVE TECHNOLOGY

The Assistive Technology (AT) Clinic offers a service to Inpatients and Outpatients of the NRH to explore and access AT including: Alternative and Augmentative Communication (AAC), computers and mobile devices, and environmental control systems (ECS). In 2023 the AT Clinic staff launched the NRH Smart Home in Woodpark pre-discharge unit; collaborated on a Smart Home Project with students from the University of the Sunshine Coast in Australia innovation module, trialed new products such as the Glassouse head mouse, and set up an AT gaming station.

DISCHARGE LIAISON OCCUPATIONAL THERAPY (DLOT) SERVICE

The purpose of the Discharge Liaison Occupational Therapy (DLOT) service facilitates timely assessment and discharge planning for Inpatients and Day-patients of the NRH rehabilitation programmes who live in the counties of Dublin, Wicklow and Kildare. The service works closely with NRH Programme Teams and the Complex Discharge Coordinator, and with services in the community, and local authorities where appropriate. The DLOT is Access Officer for the hospital and a member of the Accessibility Committee and Transport subcommittee; liaises closely with powered mobility committees and also with Technical Services in relation to vehicles and delivery of equipment. In collaboration with the OT Manger, a business plan is being devised for the expansion of the DLOT service.

DRIVING ASSESSMENT AND TRAINING

Fully licenced drivers across all Inpatient programmes have the opportunity to explore a return to driving. Occupational Therapy coordinates referrals with input from the medical team and the Irish Wheelchair Association (IWA). Office-based pre-driving screens and or on-road functional assessment and driving rehabilitation is available for medically appropriate patients. The IWA is available on-site two days a week for in-car assessments. Patients with visual or cognitive changes can be referred to Outpatients. The IWA have centres nationwide and can focus on teaching patients with physical difficulties to drive.

HORTICULTURE

The Horticulture service is ably delivered by horticultural therapist Rachel Gerrard. Sessions are delivered to patients from all Programmes and mostly take place in the therapeutic garden, but also in the potting shed and indoors if weather doesn't allow for outdoor activity. The TSD team worked with the horticultural service to deliver an upgrade to the therapeutic garden this year which has provided a very welcome facelift to this valuable therapeutic space.

PRACTICE EDUCATION (PE)

In 2023, the service facilitated 22 OT students on placement from Trinity College Dublin, University of Galway, and University of Limerick (UL). Our usual commitment is 24 students per year, however two placement offers were not taken up. Both Practice Educators provided teaching sessions in the Universities to support the students' preparation for going on placement. They co-facilitated educator workshops around Ireland as part of the Occupational Therapy Practice Education Network (OTPEN). Groups of students cohorted in the same clinical programmes showed increased opportunities for learning and an increase in peer support for the students.

SPLINTING

The Splinting Clinic provides an interdisciplinary service to Inpatients and Outpatients to assess for and provide: custom made elbow, wrist, hand, knee and ankle splints and casts; Follow up post Botulinum Toxin injections; advice about upper limb management and the role of splinting in upper limb care, in 2023 welcome developments included: additional clinical and admin staffing, and a review of delivery of splinting training to the wider team.

VOCATIONAL SERVICE

The Vocational Service provides vocational interview, assessment, review, advice and recommendations related to vocational needs of NRH Inpatients, Outpatients, and clients from the Rehabilitation Training Unit, as well as older children in the Paediatric Programme. It includes ergonomic advice, work site visits and ongoing support on return to work. External referrals come through NRH Consultants and from other hospitals and services. In addition, the service undertakes medico-legal vocational assessment reports and reviews on behalf of the NRH. Relocation of the service to the Outpatients Department has led to a greater understanding and awareness of the service, leading to an increase in referrals. The Vocational Service has led out on the establishment of a new national AOTI Advisory Group for Vocational Rehabilitation, with representatives from community, private, workplace, acute, and rehabilitation services nationally.

WHEELCHAIR AND SEATING CLINIC

The Wheelchair and Seating Clinic (WSC) is an interdisciplinary, cross-programmatic service, run jointly between the Occupational Therapy and Physiotherapy departments. In 2023, new developments included: producing an information leaflet and electronic visual library for patients and staff was developed to better inform service users of the process of wheelchair and seating prescription; close collaboration with seating service providers that offer moulded seating equipment. The uplift to a full time Physiotherapist assigned to the clinic has allowed the service to: reduce waiting list times; increase availability of review sessions and improve on key performance indicators.

WOODWORK

The woodwork service is run on a .5 WTE basis by Senior Woodwork Instructor Feargal McNee who has extensive experience of teaching woodwork to children and adults. The Woodwork service has been developed with an upgrade of the wood workshop and streamlining of processes to provide the most efficient and effective woodwork service for patients from all Programmes.



Outpatient Occupational Therapy Service

OUTPATIENT OT SERVICES INCLUDE:

- Individual and joint Interdisciplinary Assessment and Treatment offered as in-person or virtual sessions
- Groups interventions: Meet and Teach, GRASP, Making the Most of Your Memory, Open Mic
- Multidisciplinary Clinics
- Driving off-road and on-road assessment

OT Department Challenges in 2023

The main challenges experienced in 2023 were in relation to staff retention, turnover and unplanned leave. We have seen significant staff turnover in the Occupational Therapy Department which is associated with a number of factors. The loss of experienced staff has had a significant impact on the OT service and we have relied heavily on remaining experienced OT staff to upskill new starters. The combination of these issues along with no cover for planned or unplanned leave left teams very depleted and impacted our ability to deliver services at certain points. We finished 2023 with 6 WTE vacancies and it will be difficult for us to recruit in the current healthcare employment environment. Despite these challenges, the OT team have worked tirelessly to deliver a comprehensive and high standard service to our patients.

Developments in 2023 have included: development of a professional supervision structure across the OT Department; piloting of a new OT and HSCP induction Programme; launch of the Smart-Home Project in Woodpark pre-discharge unit, and continuation of activities to promote connectedness in the OT Team.



The Occupational Therapy Department are piloting a new OT and Health and Social Care Professionals (HSCP) Induction Programme, and continue with activities to promote connectedness in the OT team.

Pharmacy

SHEENA CHEYNE
CHIEF II PHARMACIST

Overview of Services

The Pharmacy Department provides a comprehensive pharmaceutical service, ensuring a safe, economic and efficient use of medications throughout the hospital.

2023 saw many significant advances in the NRH pharmacy services. The ePMA (electronic Prescribing and Medicines Administration) was introduced in all adult Inpatient Units, in conjunction with an electronic patient record (EPR). The pharmacy moved into a 'fit for purpose' facility. The pharmacy department continues to provide a comprehensive pharmaceutical service, ensuring a safe, economic and efficient use of medications throughout the hospital.

Pharmacy Services Delivered Across All Rehabilitation Programmes

THE PHARMACY DEPARTMENT:

- Procures, stores and supplies all medication in a safe, effective, economic and timely manner. Procurement is becoming challenging with many medication shortages. Pharmacy technicians ensure continuity of supply with diligent sourcing and intelligence gathering.
- Provides medication reconciliation of all admission and discharge prescriptions ensuring accurate medication lists at transitions of care.
- Attends Consultant rounds to advise and review proactively on medications at point of prescribing with the patient.
- Many interventions were made to improve patient care and directly reduced harm to patients.
- Participates in a weekly antimicrobial stewardship round with the Consultant Microbiologist ensuring the appropriate use of antimicrobials.
- Dispenses individualised medication for Inpatients and for therapeutic leave at home
- Liaises with community pharmacies and other hospitals regarding supplies of unusual, 'high tech' and unlicensed medications.
- Presents an interactive workshop for all new doctors to help with safe prescribing.
- Answers medical information queries from all members of the staff.
- Liaises with other departments such as Nutrition and Dietetics, Speech & Language Therapy, Sexual Wellbeing Service and Urology.
- Supports nurse prescribers.
- Educates patients and carers on their medications prior to discharge and provides patients with their individual medication list.
- Reports Incidents monthly to the Risk Department for inclusion in NIMS (National Incident Management System).
- Dispenses prescriptions to staff for the convenience and cost savings to staff.
- Identifying areas for development of clinical policy and working with members of the Interdisciplinary Team such as Buccal midazolam therapeutic leave form, and policy on the supply of methadone for adult patients.
- Pharmacy staff participate in the following committees: Drugs and Therapeutics; CPR; Deteriorating Patient; Quality, Safety and Risk; Operations Management; Heads of Departments; and Enteral Feeding Committee.



The Pharmacy Team were delighted to move into the new Pharmacy Department. The Pharmacists were instrumental in supporting Project Fusion in the roll out of the ePMA as part of the Electronic Patient Record (TrakCare) project.

Milestones in 2023 include:

- Planning and moving into a new Pharmacy Department.
- Supporting ePMA and roll out to all adult Inpatient Units as part of Project Fusion.
- Sourcing medications or alternatives, linking with HPR (Health Products Regulatory Authority) as national and worldwide shortages of many medications occurred to ensure continued supply and patient safety.
- Receiving a favourable report from HIQA on medication safety and participating in a successful CARF Accreditation Survey
- Expansion and updating of Guide Doc content to include: Antimicrobial guidelines and monographs for Injectable drugs; DOAC management of bleeding guidelines; eye preparations and oral care products formulary. The Steroid-induced Hyperglycaemia Standard Operating Procedure was produced.
- Annual aggregate report for medication incidents – results showing 99% 'near miss' or 'no harm'.
- Education and Information Sessions: Organised successful World Thrombosis day event in October, promoting awareness and prevention with quality, safety and risk and nursing staff; Epilepsy Study Day for NRH staff facilitated by Epilepsy Ireland in February; Medication information on anti-epileptics in June with medical, nursing and psychology staff; Intern pharmacist training delivered through the APPEL system; pharmacy technician also trained.
- Policies and Procedures produced include: Status Epilepticus, Nurse Prescribing, Management of Transdermal patches, Management of prescription pads, MDA medications, Intrathecal baclofen pump refill, safe administration of medicines to patients with dysphagia.
- Audits were completed on a wide range of pharmacy interventions.
- Poster entered for the National Association of Hospital Pharmacy Technicians (NAHPT) annual conference.

Physiotherapy

ROSIE KELLY
CATHY QUINN
PHYSIOTHERAPY MANAGERS

Despite a year of significant challenges for the Physiotherapy Department in 2023, the Physiotherapy teams were tireless in their commitment to delivering the highest standard of care based on national and international best practice guidelines. We would like to take this opportunity to acknowledge the dedication and commitment of the Physiotherapy staff to our patients and the development of our services throughout another year of staffing shortages, COVID-related sick leave and increased complexity of our patient cohort.

The Physiotherapy Department promotes best clinical practice and the highest standards of care based on national and international best practice in rehabilitation. The Physiotherapy services are delivered across the Interdisciplinary Teams (IDT) to provide a better patient experience and to maximise patient outcomes.

Specialist Physiotherapy Rehabilitation is delivered by expert staff across core Clinical Programmes as follows:

- Brain Injury Programme including Prolonged Disorders of Consciousness (PDOC)
- Stroke Specialty Programme
- Spinal Cord System of Care including ventilated patients
- Prosthetic Orthotic and Limb Absence Rehabilitation (POLAR) Programme including Inpatients and Day-patients
- Paediatric Family-Centred Rehabilitation Programme

Physiotherapy activity specific to each of the above programmes is detailed in Section Two (NRH Rehabilitation Programmes) of this Report. Physiotherapy Services delivered across all five Programmes (Cross-Programmatic) are outlined below:

Physiotherapy Services Delivered Across All Rehabilitation Programmes

The Physiotherapy Department provides specialist treatment across all programmes and adjunct services engaging with Interdisciplinary Teams, these include:

- Respiratory
- Aquatic Physiotherapy and Sports & Exercise Physiotherapy
- Vestibular Rehabilitation
- Physiotherapy Outpatient Service
- Clinical Practice Tutor
- Therapeutic Recreation Service
- Wheelchair and Seating Clinic
- Splinting
- Patient and Non-Patient Handling Co-ordinator



RESPIRATORY SERVICE

The Physiotherapy team supported the service through staffing challenges in 2023 to allow it to provide respiratory physiotherapy treatment as well as training to physios, nursing, NCHDs and other IDT colleagues. The Respiratory service is predominantly provided in acute Spinal Cord Injury and Prolonged Disorder of Conscious (PDOC) programmes. The service has a close liaison with SLT for dysphagic and respiratory issues and have attended Fiberoptic Endoscopic Evaluation of Swallowing (FEES) for patients deemed a high respiratory risk.

A total of 450 staff attended training provided by the Physiotherapy team (67 Doctors, 165 Nurses, 173 Physios, 26 SLTs, 6 OTs, and 13 Others).

The service oversees the emergency on-call service which operates 24-7-365. In 2023 there were 6 unscheduled call-outs at night or weekends and 94 scheduled sessions. 10 new staff have been trained and are now established on the on-call rota. There were nine tracheostomy patients in the service. Two of those patients were successfully decannulated. The tracheostomy IDT team meet weekly to review tracheostomy patients and complex respiratory cases as well as providing education for staff, including the annual Tracheostomy and Airway Management Days. This year 32 staff were upskilled in the management of patients with tracheostomy and ventilator dependence. The service provided respiratory training and Oral Healthcare training to staff throughout the year.

Challenges experienced in 2023 included staffing shortages impacting the service and volume of training, teaching and competency review required. There has been a notable increase in supply of Cough Assist to patients. Some challenges were experienced with handover to community teams for overview, servicing and maintenance of cough assist machines with community teams reporting a lack of resources, staff and competency. We provide training and upskilling where necessary.

AQUATIC PHYSIOTHERAPY AND SPORTS & EXERCISE PHYSIOTHERAPY

Sports, Exercise and Aquatic Physiotherapy provide a service to both adults and children from all rehabilitation programmes. Sports and Exercise Physiotherapy focused on increasing access to more sports, improved strength and conditioning programmes in the gym and inclusivity with a music and movement group in conjunction with the music therapy team. Aquatic Physiotherapy focused on providing 1:1 treatment sessions, as well as sessions in swimming, joint music therapy and kayaking. Group sessions included POLAR groups, swimming, joint music therapy, staff swim sessions and functional training groups. Kayaking sessions were offered to patients as appropriate, in conjunction with Canoe Ireland. Canoe Ireland provided a kayak for the department, extensive training for aquatics staff and ten joint in-pool kayaking sessions. This has been a very popular and successful collaboration. Sports, Exercise and Aquatic Physiotherapy staff worked tirelessly to maximise patient contacts despite staffing shortages and pool plant management challenges.

Following the launch of the TrakCare electronic patient recording system in October 2023, all Aquatics referrals and documentation are now entered on TrakCare. The department provides feedback on the new system to the project team for review - the need for increased PC access and additional working space become apparent since starting online documentation.

The department celebrated the 10th Annual NRH Sports Championship in September 2023. A total of 92 participants competed and 20 different sports competitions or demonstrations were offered. The event welcomed the involvement of new governing bodies such as Golf Ireland and IWA Self-defence, Paralympic swimming Ireland and welcomed back previous related agencies such as Paralympics Ireland, Irish Pickleball, Powerlifting Ireland, Table Tennis Ireland, Irish Wheelchair Association rugby, Active Disability Ireland, Acquired Brain Injury Ireland, Spinal Injuries Ireland, Football Association of Ireland, Trinity Shooting, Cycling Ireland, Swim Ireland and Canoe Ireland. We also welcomed previous patients, now Paralympians, Britney Arendse (Power Lifting) and Kerrie Leonard (Archery). Paralympics Ireland hosted their 5th Permanent TSB Next Generation event at the NRH alongside Cycling Ireland, to introduce new sporting opportunities and explore the potential of interested individuals. The introduction to Music therapy in the opening ceremony was very successful and the games were enjoyed by all patients and staff.

Senior Physiotherapist Avril Peevers was a key speaker at the Active Disability Ireland annual conference where discussions took place about sports and exercise and how the NRH promotes this internally and how we help patients integrate back into the community.

VESTIBULAR REHABILITATION

The Vestibular Physiotherapy service was staffed by a 0.5 WTE senior post in 2023. Vestibular rehabilitation involves an exercise-based programme for reducing symptoms associated with poor balance and dizziness or vertigo. The need for vestibular rehabilitation is evident as vestibular problems are highly prevalent and debilitating across the complex neurological cases seen across the services in the NRH. The service is provided to Inpatients and Out-patients from across all rehabilitation programmes (division of treating time 1:4 IP to OP) and additionally, accepts occupational health referrals. Goals for the service include reducing the Outpatient waitlist which can extend to 13 months. Training in vestibular rehabilitation was provided to physiotherapists in the Inpatient BI Programme and to all disciplines in the Outpatient Department. An external clinical specialist in vestibular physiotherapy provides supervision to the therapist currently in the role.

OUTPATIENT PHYSIOTHERAPY

The Outpatient Physiotherapy service comprises four part-time physiotherapists covering a flexible six-day service. The service delivers assessment and treatment in both individual and joint interdisciplinary therapy settings. Patients can attend virtually or in person for their appointments. The team run group interventions such as GRASP and Pilates as well as a quarterly Wellness Day. They are an integral part of several Multidisciplinary (MDT) clinics. In 2023, additional MDT clinics were established as follows: Dr Hanratty, two additional clinics per month; Dr McAllister, two additional clinics per month; Dr Zaparojan, one clinic per month. Planning for development of the splinting service and the Upper Limb IDT service are ongoing. Therapy involvement also included the ROSIA Project (Remote Rehabilitation Service for Isolated Areas), and the Rapid Improvement Project in conjunction with IEHG to improve the NRH referrals and admission processes.

CLINICAL PRACTICE TUTOR

In 2023 the NRH facilitated approximately 45 students placements from UCD and Trinity College, across all hospital Programmes. The physiotherapy tutor has provided external lectures in UCD, TDC and RCSI, neurological practical sessions and exam assessments in TCD and UCD. The predominant challenge has been Physiotherapy staff shortages which led to difficulty finding educators available to take a student with ongoing pressures in work caseload. Educators may have had to change from one programme to another during the student's placement to ensure adequate staffing and provision to service users. Ensuring a smooth transition to the electronic patient record (EPR) provided another challenge in the CPT post in 2023. The physiotherapy clinical tutors worked closely with the Fusion Project Team to ensure that students needs were incorporated into the new EPR (TrakCare) system and that students were inducted appropriately in its use.

THERAPEUTIC RECREATION SERVICE

Therapeutic Recreation Service (TRS) focuses on therapy that uses leisure activities to improve physical, social, cognitive, and emotional wellbeing of our patients; improving quality of life, and enabling patients to achieve their full potential. TRS was awarded 1st place in the NRH Research, Quality Improvement and Clinical Audit Awards 2023 in the 'Better Health & Wellbeing' category for the Introduction of the Peata Dog Therapy Programme in collaboration with the Volunteer Service. 31 patients were referred for Dog Therapy Visits and received 373 individual visits lasting between 10 – 30 minutes. Waiting time for the service reduced this year with 86% of patients seen within 3 weeks of referral compared with 14% in 2022. One-to-one patient treatment sessions increased by 55% in 2023 compared with the previous year. 40% of recreational activities were provided over weekends (including Sundays and Public Holidays). In response to patient and family feedback, additional activities were provided thereby expanding the service, and seeing the introduction of Cinema Outings, monthly Sunday evening musical performances and Bi-weekly Peata Dog Therapy Visits.

WHEELCHAIR & SEATING CLINIC

The NRH Wheelchair and Seating Clinic (WSC) is an interdisciplinary, cross-programmatic service, run jointly between the Occupational Therapy and Physiotherapy Departments. An information leaflet and electronic visual library for patients and staff was developed to better inform service users of the process of wheelchair and seating prescription. The team collaborates closely with seating service providers that offer moulded seating equipment as a critical requirement. Following a review of the clinic spaces by the Space Utilisation group, plans have been developed to reconfigure a larger space to relocate the WSC. In 2023 the clinic achieved reduced waiting times and increased availability of review sessions.



SPLINTING

Splinting is a cross-programmatic service which operates one morning a week, receiving referrals from NRH Inpatient and Outpatient services, community services and self-referrals from past patients. In 2023, staffing shortages impacted the splinting service. The team provided IDT cross-cover and services to Inpatients from all Programmes, decreasing capacity to provide concurrent interventions. The service has been adapted to the new electronic patient record having resolved some initial issues. A training plan has been developed to upskill a wider number of staff to a basic level to assist in managing the high number of referrals to a limited service. Collaboration with external stakeholders was ongoing to achieve timely person-centred services including NRH Outpatient therapists, Opcare Ltd and individual Outpatients and their families and carers.

PATIENT AND NON-PATIENT HANDLING

In 2023, the service underwent further development and co-ordination with Occupational Health, incorporating an Occupational Safety and Education service simultaneously. Staff Musculoskeletal Service as well as the staff injury rehabilitation classes and wellbeing initiatives continued in 2023. The primary focus this year was injury prevention, marked by the frequent staff rehabilitation classes, and patient handling education courses. Notably, the Patient and Manual Handling Coordinator spearheaded initiatives to prioritise the wellbeing of staff. Specialised training in Hoverjack sessions was delivered on the Units, ensuring staff proficiency in utilising Hoverjacks effectively in helping to reduce the risk of injury to staff when handling a patient who has fallen. The commitment to injury prevention and staff wellbeing remained steadfast throughout the year despite staffing challenges. We aim to collaborate with other healthcare departments, organisations and industry experts with can lead to shared insights, resources, and best practices in patient and manual handling.

Milestones and Issues for the Physiotherapy Service 2023

Throughout 2023, the inability to recruit CORU registered, appropriately experienced Physiotherapists was a serious challenge. Up to 14 posts were vacant in the department at one point, resulting in reduced service capacity and having to run some services on a half day basis. The managers worked closely with HR to look creatively at recruitment solutions including sourcing staff grade physiotherapists from agencies and increasing our Physiotherapy Assistant numbers to augment patient therapeutic activities. The loss of very experienced seniors resulted in a gap in experience and required extensive investment in staff grade upskilling, training and education. Unplanned leave due to COVID-19, and RSV in particular resulted in unplanned absences on top of the existing vacancies. Creative thinking was to the fore again as teams pulled together doing everything possible to ensure sufficient therapeutic activities for patients. With the significant number of vacancies and the ongoing issue of unplanned leave, the focus of therapy intensity remained from Monday to Friday, however, many services still offered patient sessions and events on Saturdays. The teams contributed to the competition of the schedules of accommodation for the planning of phase two of the new hospital.

Physiotherapy staff made a significant contribution to Project Fusion and the implementation of the electronic patient record (EPR) now embedded in the NRH. Physiotherapists Paul Griffin, Jessica Downey and Alice Wainwright led out on the project and contributed to delivering training on the new system for all NRH staff.

The department celebrated World Physiotherapy Day in September with several fun filled events for both patients and staff including a static bike cycle to Mayo, a Swiss ball challenge and a step-up competition. Physiotherapy staff continue to support the wellbeing, aiming to boost morale, of NRH staff. Such initiatives include Staff Swim 2 evenings a week, Physiotherapy treatment sessions for staff injuries, Back Rehab classes and Pilates classes. Three staff attended NCSCT training (National Centre for Smoking Cessation and Training) which will support the use of QuitManager platform and engage in development of the tobacco free Ireland programme.

The appointment of James Egan as a full-time senior physiotherapist in January 2023 has expanded the Wheelchair & Seating clinic as a fulltime cross-programmatic service.

The reintroduction of the Physiotherapy Christmas Coffee morning, which had been a long standing NRH tradition prior to the pandemic, was hugely successful. The coffee morning blended with Derek Green's retirement presentation in Cedars Day Room. We would like to take this opportunity to thank Derek for his leadership and guidance throughout his tenure at the NRH. We wish him luck on his retirement.

The Physiotherapy Team represent the NRH at a wide range of conferences and study days annually and receive many awards to acknowledge the quality of work of our Physiotherapy Staff.



AWARDS AND PRESENTATIONS IN 2023 THAT ACKNOWLEDGE THE QUALITY WORK OF OUR PHYSIOTHERAPY STAFF:

- Orla Friel and the Holly Interdisciplinary Team were presented with an award for the 'Development of a PDOC Registry'.
- Orla Friel presented on 'Postural Management of the Person with a Prolonged Disorder of Consciousness' at the Prolonged Disorders of Consciousness Information Day in June.
- Avril Peevers was awarded 2nd place in 'Effective Care and Support' NRH Research, Quality Improvement and Clinical Audit Awards 2023 for her poster on 'The incidence rate of posterior BPPV amongst traumatic brain injury patients admitted over a 9-month period to Ash and Rose Units'.
- Claire Hickey presented on her study: 'Fitness Apps and Wheelchair users with Spinal Cord Injury: A qualitative study' at ISCoS Annual Scientific Meeting in Edinburgh 2023.
- Avril Peevers was a panel member at Active Disability Seminar highlighting NRH activities and events which sparked interest in exploring potential collaboration opportunities.
- The spinal physiotherapy team were very involved in the popular Health Care Professional study day in September with over 55 participants.
- OPD submission on Wellness, submitted by Maeve Turner, was a finalist for the 2023 Irish Healthcare Centre Awards.
- Michelle Bryne submitted an upper limb pathway service development for the quality awards.
- Stuart McKeever and Jennifer Glansford 'Peata Dog Therapy' were awarded 1st place in the Better Health and Wellbeing Programme.



Psychiatry – Liaison Service

DR MARIA FRAMPTON
CONSULTANT PSYCHIATRIST

In medicine, the interaction between body and mind is well established (Rene Descartes 1596-1650). Liaison psychiatry examines this relationship and the link between a person's physical and mental health.

The Consultant Liaison Psychiatrist offers same-day access to comprehensive assessment, evaluation and management of adult Inpatients with mental health difficulties. Dr Frampton also works as a psychiatrist for 'Later Life' patients and applies this very relevant expertise in the NRH, especially in the Brain Injury Programme. The care approach provided by liaison psychiatry is patient-centred and evidence based, with a commitment to best practice. The model of care is biopsychosocial and spiritual, which is the integration of biological, psychological, socio-cultural and spiritual bodies of knowledge in relation to a person's health. Each patient's dignity and value as a human being is always respected.

Nature of Psychiatric Illness in NRH Patients

In patients who have experienced brain injury, spinal injury or loss of an extremity, international studies consistently show rates of psychological morbidity ranging from 20-60%. The broad variation in prevalence relates to Inpatient vs Outpatient populations, the duration in time from the traumatic event and in the case of brain injury, whether the injury was mild, moderate or severe. The number and complexity of referrals to liaison psychiatry continues to grow year on year, in part, due to increased awareness of mental health issues amongst staff, patients and carers, improved survival rates following complex trauma, increasing incidence of psychiatric co-morbidity.

Reasons patients may be referred to psychiatry

The range of psychiatric presentations and disorders seen in the NRH is very wide and includes all of the conditions described in a textbook of psychiatry. The most common reasons for referral are:

- Depression +/- suicidal ideation
- Adjustment disorder
- Anxiety
- Alcohol or drug abuse
- Behaviour disturbance
- Abulia
- Sexual disinhibition
- Pathological crying
- OCD
- Pica
- Medically unexplained symptoms
- Confusion or cognitive impairment
- Deliberate self-harm
- Paranoid psychosis
- Schizophrenia
- Schizoaffective disorder
- Post-natal depression
- Visual hallucinations
- Bulimia
- Personality disorder
- PTSD
- Grief reaction
- Medication review
- Capacity assessment

Anxiety, depression and adjustment reaction are the most common psychiatric diagnoses seen across all programmes. Personality change and behaviour disturbance may occur following brain injury. Suicide risk following an acquired disability is greater than the risk in the general population. Mental illness significantly impacts on a patient's ability to engage in therapies, can impede rehabilitative outcome and may result in delayed discharge. Early identification and treatment of mental health symptoms is therefore essential for progress in rehabilitation.

Treatment approach and interventions offered

- 1:1 biopsychosocial assessment, diagnosis formulation and treatment management plan for duration of a patient's stay, with regular reviews to monitor their mental state and response to treatment
- Liaison with Primary Care, Community Mental Health Teams, Voluntary Organisations
- Joint assessments with members of the Interdisciplinary Team Members, and liaison with clinical and non-clinical team members, all of whom are who are hugely valuable contributors to patient-centred care.
- Family and Carer Meetings, Informal guidance and support for NRH Staff, and Psychiatric and medico-legal reports are all a vital part of the service provided.

Service Developments and Initiatives

- Development and Launch of a Suicide Awareness and Prevention Toolkit for staff, patients and carers in the NRH, available on the NRH Intranet
- Protocols compilation of guidance on Pharmacological Management of Acute Behaviour Disturbance
- Member of the NRH Assisted Decision (Capacity) Making Act (ADMA) Committee
- Audit of Liaison Psychiatry Service examining annual referral patterns
- Psychology-Psychiatry Colloquia monthly meetings to discuss jointly managed complex cases and provide teaching
- Teaching programme participant in NRH and St Vincent's Hospital. Topics include: Liaison Psychiatry in the NRH, Management of Psychiatric Emergencies, Drug Treatment in Psychiatry, Resilience after Trauma, Personality Disorder, Addictions, Functional Neurological Disorder, and Caring for your Mental Health.

The Annual Sports Championships welcomed the involvement of sports governing bodies including Table Tennis Ireland in 2023.





Radiology

ROSIE CONLON
RADIOGRAPHY SERVICES MANAGER

Radiology Staffing and Services

In keeping with the mission of the NRH, the Radiology Department strives to provide high quality care and treatment to patients irrespective of background or status, but on the basis of clinical need. X-ray services are provided in a warm, welcoming, and caring environment. In 2023, service delivery was adapted to ensure adherence to local and national infection control guidelines.

Diagnostic imaging services were provided by a part-time Consultant Radiologist, a Radiology Services Manager, two Clinical Specialist Radiographers, a Senior Radiographer and two part-time Radiology HCAs.

The following services are provided to all Inpatient and Outpatient groups, including the Brain Injury and Stroke Programmes, Spinal Cord System of Care, Prosthetic, Orthotic and Limb Absence Rehabilitation (POLAR) Programme and Paediatric Programme:

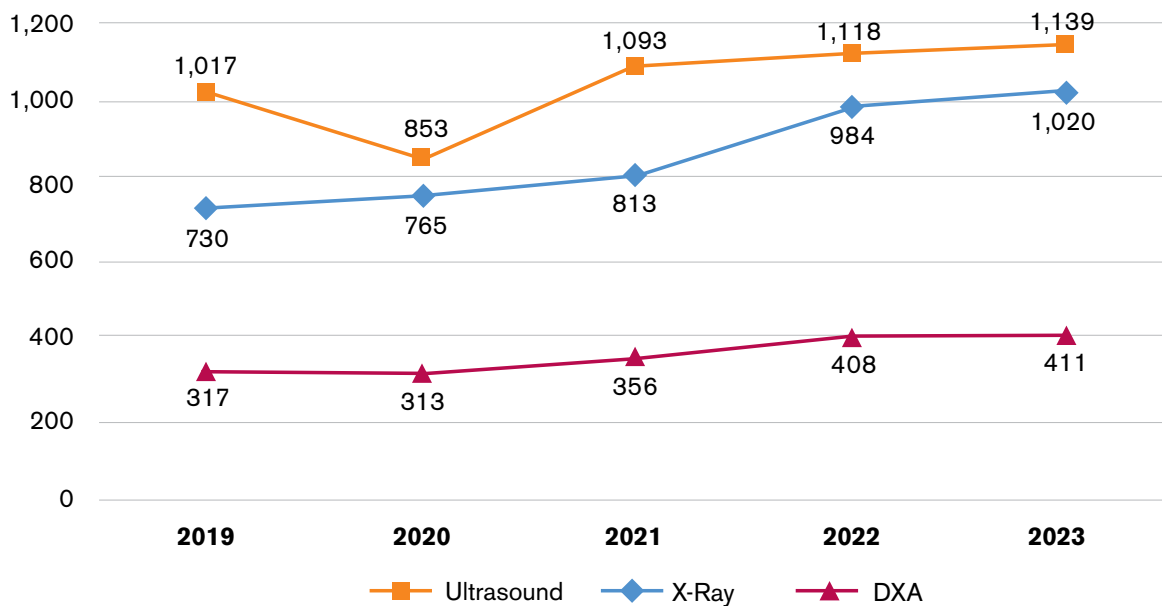
- General radiography, ultrasound (including portable service), mobile radiography, special procedures, and Dual-energy X-ray Absorptiometry (DXA) scanning.
- CT scanning service at St. Columille's Hospital, Loughlinstown.
- MRI available locally at Blackrock Clinic.
- 24-7 On-call radiography service at the NRH.

Activity Data

Radiology activity data for 2023:

- **Ultrasound** - 1,139 examinations were performed, an increase from 2022.
- **General X-Ray** - 1,020 examinations were performed, a significant increase from 2022.
- **DXA scans** - 411 were performed, a slight increase from 2022.

Radiology Annual Statistics 2019 – 2023



Services and Developments

DXA: The aim is to establish a Centre of Excellence for Bone Health and for fracture prevention in the neurologically injured patients of our national referral centre.

Ultrasound: The introduction and provision of a gynaecological ultrasound service at the NRH is a welcome development. A Musculoskeletal ultrasound service is now readily available with plans for further development. A portable Ultrasound machine is in use for specific patients to deliver point of care diagnostics at the bedside, where indicated.

X-Ray: The state-of-the-art portable digital x-ray machine installed and operational in the new hospital and has allowed an increased number of portable examinations as envisaged and required - this was particularly helpful during the pandemic.

Nurse prescribing: Nurse prescribing of ionising radiation at the NRH continues successfully within the nurse-led Urology service.

NIMIS (National Integrated Medical Imaging System): National NIMIS upgrades continue.

Key Milestones and Issues

RADIOLOGY PROTOCOLS AND POLICIES

New procedures are being developed to reflect the scope of work undertaken by radiology.

HIQA INSPECTION

In May 2023 radiology had its first HIQA audit. The department was assessed against 14 Regulations for compliance with medical exposure to ionising radiation, and was found to be compliant with all 14 Regulations. The report observed several examples of good practice, for example the multidisciplinary approach to optimisation and the 'proactive and cohesive approach taken to ensure the radiation protection of service users' HIQA (2023).

RADIATION SAFETY

The Radiation Safety Committee (RSC) chaired by Dr Brian McGlone convened twice in 2023 as required. The role of the RSC is to advise hospital management in relation to the protection of patients (SI 256), workers and members of the public (SI 30) regarding the use of ionising radiation in the NRH. Internal QA programmes continued throughout 2023 as well as participation in the National Radiology QI Programme of the RCPI.

Ongoing work in preparation for an imminent Environmental Protection Agency (EPA) inspection (regulatory authority for radiation protection of staff and members of the public) continued throughout the year.

The high quality and large number of Clinical Audits performed in 2022 was repeated in 2023. The high level of compliance remained across all audits, therefore it was decided at the RSC to reduce the frequency of these audits and introduce new clinical audits. The annual audit of the practice of both Urology Nurse referrers for ionising radiation at the NRH confirmed excellent compliance with referral criteria. Radiation safety training for new NRH employees is delivered at NRH Induction and online radiation training continues for NCHDs.

Under the Service Level Agreement with SVUH, assistance and expertise were received again during 2023 from Dr Julie Lucey as Radiation Protection Adviser (RPA) and from Medical Physics Expert (MPE), Ms. Danielle Maguire, Senior Physicist, SVUH. In late 2023, Dr Julie Lucey was replaced by Ms Anita Dowling as RPA. Both HIQA and the EPA were informed of the change in RPA and the CEO at the NRH in late 2023.

Carmel Kelly, Clinical Specialist Radiographer continues as the Radiation Protection Officer (RPO) for the NRH and presented to the Quality, Safety and Risk (QSR) Committee in December of behalf of the RSC.



The Radiology Department aims to establish a centre of excellence for bone health and fracture prevention in the neurologically injured patients in the NRH.

Training and Education

In addition to the extensive clinical and non-clinical placements facilitated by the NRH Radiology Department, and formal teaching at monthly Clinical-Radiology meetings and through the NCHD and Physio Educational programmes, the following education was delivered by NRH Radiology staff in 2023:

CONFERENCE PRESENTATIONS IN 2023

Presented to the Irish DXA Society Annual Meeting, Galway, March 2023 by Dr Susie van Baarsel and Dr Brian McGlone

- **Van Baarsel S., Vorster U., McGlone BS., Morgan J.:** DXA in an Inpatient Brain Injury Population: A single centre audit
- **Dr Brian McGlone** was also invited to present the following two lectures at the Irish DXA Society Annual Meeting:
 - The Diagnosis of Osteoporosis
 - Challenges and Opportunities for DXA in Ireland 2023 – a Radiologist's Perspective

ACADEMIC ACHIEVEMENTS AND AWARDS

Reilly C., McGlone B., Conlon R., Cardoso J. (in conjunction with the UCD Summer Student Research Project 2021 and NRH Department of Radiology), received the 'Undergraduate Student Research Category' at the NRH Research, Quality Improvement and Clinical Audit Awards 2023 for their research: The Value of Renal Tract Imaging as part of Annual Genitourinary Review for Patients with Spinal Cord Injury.

Accreditation achieved by NRH DXA staff from the International Society for Clinical Densitometry (ISCD) following examination:

- **Brian McGlone: Certified Clinical Densitometrist (CCD).**
- **Carmel Kelly: Certified Bone Densitometry Technologist (CBDT).**

Social Work

ANNE O'LOUGHLIN
PRINCIPAL SOCIAL WORKER

Service Provision

Social Work is a practice-based profession and an academic discipline that promotes social change, problem solving in human relationships and the empowerment and liberation of people to enhance wellbeing. Social Workers work alongside people to assist them to make positive change in their lives to improve their wellbeing. We work in a way that takes account of all parts of a person's life whilst striving to keep them at the center of decision making.

The services offered by the Social Work Department include: psychosocial assessment of the patient and family situation, counselling and support to patients and families, carer training programmes, care planning; complex discharge planning, advocacy and acting as the **Designated Persons** under both the Children First Legislation and the 'Safeguarding of Vulnerable Persons at Risk of Abuse' national policy.

Developments in 2023

Assisted Decision-Making (Capacity) Act 2015 (ADMA): A major development affecting the Social Work Service was the full commencement of the **ADMA** in April 2023. The Act established a new legal framework for supported decision-making and protects the right of individuals to be assisted to make decisions with legally recognised supports, regardless of disability, or any condition which may affect their decision-making capacity. The functional approach to decision-making means that assessment of capacity, which needs to be time and issue specific, is particularly relevant to many of our brain injury patients. The NRH in line with other Hospitals were tasked with setting up an ADMA Implementation Committee, chaired by Anne O'Loughlin, Principal Social Worker. The Hospital also attends the IEHG ADMA Oversight Committee meetings, and two members of the team are currently participating in the nine-month mentoring programme organised by the HSE. Following a presentation to the hospital Board by Renee Summers, Snr Social Worker and Dr Sarah Casey, Snr Clinical Neuropsychologist outlining the need for a dedicated ADMA Office to effectively implement the Act at the NRH, the two post holders were temporarily seconded, with the support of the Board, to establish the NRH ADMA Office which officially opened in December 2023 and has proved to be an invaluable resource to the clinical teams.

Complex Discharge Co-ordinator: This role has continued to develop with the key goal of increasing accessibility to the NRH through pre-admission advice and intervention as well and active management of Delayed Transfer of Care (DToC) cases. The NRH works in collaboration with the General Manager, Services for Older People and Community Operations, HSE as well as with the Unscheduled Care Performance and Improvement Lead, IEHG. At an operational level, this involves enhanced planning and engagement with referring hospitals and service providers as early as possible in the rehabilitation journey, preferably from the pre-admission phase. Challenges in relation to securing professional carers, funding for specialist placements for patients with complex behavioural needs and a lack of appropriate step-down facilities for those waiting on housing continue to affect egress from the NRH. The incidence of DToC has increased by 41% compared to 2022 to a record of days lost to DToC of 5, 378, representing a loss of €7.5 million and a loss of full rehabilitation programme to a further 60 patients. The allocation of a specific budget for NRH patients for intensive home care packages has been a major support however and this budget increased in the 2023 service plan to €3.2 million.

At a strategic level, meetings with the HSE, IEHG and the Clinical Lead for the Rehabilitation Medicine Programme are focused on developing a pathway approach to high complexity cases. In collaboration with NCPRM an initial meeting was held with the Minister for Housing to review and escalate the housing issues impacting on the discharge of NRH patients with complex needs with a consultation paper to be submitted in January 2024.

A major challenge towards the end of 2023 was the moratorium on HSCP posts. This resulted in a staffing shortage within the Social Work Team in late 2023 which has negatively impacted on therapeutic work with patients and families and in proactive discharge planning.

There has been a notable increase in psychosocial complexity of patients admitted to the NRH in relation to areas such as homelessness, refugee status, legal and financial issues and mental health concerns. The Social Work team has accessed extra training in social inclusion and addiction.



Group Work: Social Workers from both Inpatient and Outpatient Programmes have been able to reinstate Group Work (post-COVID) for patients and families or support persons which is a very welcome development. Peer support groups across Programmes are being well attended, as well as family days and events run with IDT colleagues.

Safeguarding: The Department continues to offer Designated Person support and intervention in relation to child and adult safeguarding issues. The Safeguarding and Patient Rights Committee (SPRC) has continued to work towards promoting the safety and rights of all NRH patients. Anne O'Loughlin attends relevant update meetings with IEHG and CHO East and is an external member of the SJH safeguarding committee. In 2023, 40 cases were referred to the Safeguarding service and a number of key policies were updated. The audit of compliance with Children First legislative requirements is managed by the Safeguarding Social Worker and reported into IEHG.

Research and Development: The guidelines for family meetings in the NRH based on feedback from research on patient, family, and staff experiences was completed in 2023 and a paper on this research was submitted. A research project on how staff interact with distressed families with Dr Paul Carroll, Consultant in Rehabilitation Medicine is ongoing. Phil Butler is completing her PhD on the lived experiences of mothers with acquired brain injury and she presented a poster on her work to date at the IBIA Conference in March 2023.

Senior MSWs Phil Butler and Renee Summers partnered with Peamount and ABII Social Workers to present a research poster at the IBIA 14th World Congress on Brain Injury in April 2023 on '**Developing a Competency Framework for Social Workers who Work with Adults who may have an Acquired Brain Injury**'. This competency framework was then compiled throughout the year, with participation from a range of other Irish Brain Injury Social Workers and was completed in December 2023. It is now with the Irish Association of Social Workers for final approval.

Phil Butler has completed the third and final section of the Parental ABI resource with a booklet for parents with ABI and their partners and family members. David de Lacey has completed co-ordination of a resource for parents with an SCI along with other colleagues and this is now ready for publication.

Activity for 2023

The Social Work services provided to the five Rehabilitation Programmes (Brain Injury, Stroke Specialty, Spinal Cord Injury, POLAR, and Paediatric Programmes) are detailed in the Programmatic Reports in Section Two of the Annual Report.

Social Work representation and expertise was provided to the following national committees as well as to a wide variety of internal NRH committees:

- National Clinical Programme for Rehabilitation Medicine Working Group
- Irish Heart Foundation Council on Stroke
- Social Workers in Disability National Committee
- IASW Special Interest Group for Adult Safeguarding
- Head Medical Social Work Forum
- International Social Workers in Acquired Brain Injury (INSWABI) Committee
- HSE Expert Advisory Group on the Disabled People on 65s in Nursing Home Project

Submissions were made to 'Adult Safeguarding' and to the Department of Social Protection – Cost of Disability Review

Education and Training

The Social Work Department provides placements for students on the Master's in Social Work on four-month block placements per year, and was involved in Online teaching to the Master's in Social Work Programme in both UCD and UCC.

I would like to thank all the Social Work Staff for all their hard work and dedication throughout 2023.

Speech and Language Therapy

ROISÍN O'MURRAY
SPEECH AND LANGUAGE THERAPY MANAGER

The Speech and Language Therapy (SLT) Department is driven to provide the best clinical practice and the highest standards of care based on national and international practice. The service provides comprehensive assessment, diagnosis and provision of therapeutic programmes for a range of language, speech, voice, social communication, cognitive communication and swallowing disorders. We work together with patients, their families and IDT colleagues as we aim to empower each patient with the skills and confidence to eat, drink and communicate to the best of their abilities. Education is a fundamental part of our service. We aim to share our knowledge, skills, and experience with stakeholders internal and external to the NRH.

The SLT Service is delivered across all NRH Clinical Programmes, with the Interdisciplinary Teams (IDT), to maximise patient outcomes. Specialist SLT is delivered by expert staff to patients admitted to the Brain Injury, Stroke, Spinal Cord Injury, Prosthetic, Orthotic and Limb Absence, and Paediatric Programmes. SLT services specific to each of the Inpatient Programmes are detailed in Section Two (NRH Rehabilitation Programmes) of this Report.

A summary of Adult Outpatient SLT service statistics are provided in 2023, compared with 2022:

	2023	2022
Total patients referred	128	123
Patients for SLT input only	76	46
Patients for Interdisciplinary Team input (including SLT)	52	77
Number of former NRH Inpatients referred to SLT OPD	15	18
Discharges from SLT only referrals	45	37

Outpatient Paediatric SLT service statistics are provided below:

- A total of 63 children and young people (CYP) attended the Outpatient ABI review clinic in 2023
- Additionally, 87% of the CYP who attended the clinic in 2023 received a school consult and 100% of the CYP received a post clinic community team consult

This service is invaluable in the support for children and young people in identifying strengths and needs post ABI, and achieving better care-coordination.

Cross-Programmatic SLT (services delivered across all Rehabilitation Programmes)

The SLT Department provides specialist treatment to patients from across all NRH Clinical Programmes (Cross-Programmatic Services), these include:

- Fiberoptic Endoscopic Evaluation of Swallowing (FEES)
- Assistive Technology (AT) Clinic
- Audiology
- Tracheostomy
- Voice Specialist Service
- Practice Education
- Group Therapy
- Speech and Language Therapy Assistant Service
- Support to NRH Vocational Service



Fibreoptic Endoscopic Evaluation of Swallowing (FEES): A total of 107 FEES procedures were carried out in 2023, an increase of 22 on the previous year. Following the implementation of a new, innovative treatment for swallowing impairment (Phagenyx), 13 patients completed the Phagenyx treatment programme in 2023, supported and guided by our FEES clinic. This treatment has supported several patients to return to full oral eating and drinking, from coming to the NRH with no nutrition or hydration possible by mouth, with a significant positive impact on patient quality of life.

Assistive Technology (AT) Clinic: SLT is an integral part of this AT clinic, which provides vital access to Alternative and Augmentative Communication (AAC), Computers and Environmental Control systems, on both Inpatient and Outpatient (adults and paediatric) services and provides consultation and education to external stakeholders in the provision of this specialist area of rehabilitation. In 2023, 122 patients accessed the service.

Audiology: The Audiology screening service is provided across all adult programmes and is a vital service to support patients with hearing loss, often caused or exacerbated by Acquired Brain Injury and Stroke. The NRH SLT Audiology service work closely with St Vincent's Hospital Audiology service for the care of patients. 29 Audiology screens were completed in 2023.

Tracheostomy: The SLT Department provides a specialist tracheostomy input to Inpatients across all programmes, and also provides ventilator-dependency care on Fern unit, within the Spinal Cord Injury Programme. In 2023, six patients with tracheostomy were admitted to the NRH (three patients with SCI and three with ABI). Education is a core part of the provision of the IDT Tracheostomy team at the NRH and several inhouse, practical trainings for clinical staff were provided over the year.

Voice specialist service: This newly established specialist service commenced in 2023 with the treatment of five patients on the Stroke Speciality Programme.

Practice Education: The SLT Department offers practice education placements to 12 SLT students from TCD, UL and NUIG in 2023. A new Practice Education placement for SLT Assistants from Pearse College continued in 2023. Practice Education was also provided to one Biomedical Engineering student from UCD via our AT clinic. As part of her role, our Practice Educator contributes to the education of undergraduate SLT students with HEIs nationally, a key support factor to growing the future workforce for the profession.

Speech & Language Therapy Assistant service: The SLT service could not operate without the invaluable SLTA service. In 2023, further resources were dedicated to the SLTA service, which now staffs three 3 full-time assistants. SLTAs provided clinical care support to patients and supported the operational management of the service, including the FEES, Audiology, AT clinic and Groups services.

Group Therapy: A core mode of the provision of all SLT (and IDT) rehabilitation at the NRH is via group therapy. There are a multitude of benefits to the patient in engaging in group therapy, many of which are core values of the SLT service provision: for example, peer support, education, communication and socialising opportunities, emotional and psychological support. In 2023, the SLT service developed a new, evidence-based group called the Social Spotlight Group. 12 patients across the Inpatient Brain Injury and Stroke Programmes attended the sessions. Our long-standing groups across the Inpatient and Outpatient programmes continue including the Living with Aphasia groups, Talking and Thinking groups, Paediatric Feel-Good Friday group and Spinal Voice Group.

Milestones and Challenges for the Speech and Language Therapy Service in 2023

- **Education:** Internal education continues for all NRH staff and external stakeholders, including the hosting of a National SLT Conference in October 2023.
- **NRH Patient Forum:** and other patient feedback supports and events.
- **Staffing:** We welcomed six new staff members and had a small addition to Adult OPD service staffing resource.
- **ADMA implementation support** to patients and NRH teams, including submission for SLT resource for the NRH ADMA office
- **Hospital projects support:** including IDT working (including new Goal Setting process implementation), ROSIA and Project FUSION.
- **Engagement with NRH volunteer service:** including coordinating four specific SLT service volunteers into SLT team.
- **Service QI:** NRH Oral healthcare project implementation, SMART-Home, Communication-Friendly Environment projects, including JAM (Just-A-Minute) card implementation, and Therapeutic MakeUp service pilot.
- **National work:** SLT Manager group liaison, IASLT & Neurorehabilitation Strategy Implementation, MCRN project support, and engagement with HSCP office.
- **Future planning** for SLT service, including for NRH Phase Two.

The NRH is privileged to have dedicated staff who are committed to supporting the delivery of patient-centred care.





Section 4 Corporate and Support Services



June Stanley
Deputy Chief Executive



Liam Whitty
Catering Manager



Olive Keenan
Human Resources Manager



Liz Maume
Patient Experience and Healthcare
Data Manager (to March)



Elayne Taylor
Risk Manager



Rosemarie Nolan
Communications Manager



Jason Farrell
A/Materials Manager



Rose Curtis
Occupational Health Nurse



Fr Michael Kennedy
Chaplaincy



Aoife Mac Giolla Rí
School Principal



John Maher
Information Management
and Technology Manager



Daragh Bolton
Head of Security
Services



Linda Byrne
Payroll and Superannuation
Manager



Peter Byrne
Technical Services Manager



Ruth Maher
Academic Lead



Carol Barton
Patient Experience and
Healthcare Data Manager
(from March)

Catering Department

LIAM WHITTY
CATERING MANAGER

The Catering Department provides catering services for patients, staff, and visitors across the NRH campus, including all food served on the Units, the Staff Canteen and the Coffee Shop. The Catering Team also prepares 'Meals on Wheels' for people living in two areas close to the hospital; the meals are delivered by volunteers to people in the Community who are unable to cook their own meals for various reasons, for example, illness or disability.

The cost of providing catering services to the hospital in 2023 was €607,540 (excluding wages) and the income was €594,847. I am proud to say that the staff in the Catering Department met the challenges of providing a high-quality service with professionalism and dedication to our patients and colleagues who avail of the catering service.

Highlights in 2023

In 2023 the catering service retained the **Irish Happy Heart Silver Plate Award** and the **Food Safety Assurance Award**, from the Food Safety Authority of Ireland.

The Catering Department held International themed lunch days and a celebratory lunch for Project Fusion - the 'Go-Live' of the new Electronic Patient Record system at the NRH. Other events held during 2023 include the Staff Summer BBQ and Annual Christmas Parties for Patients and Staff. All of these events were a great success and very much appreciated by our patients, staff and visitors who attended.

In 2023, Wiola Galus moved from the Catering Department to Payroll, and Margaret Dunne was appointed Catering Supervisor. We wish Wiola and Margaret every success in their new roles.

In collaboration with the UCD MSc in Clinical Nutrition and Dietetics programme and the Catering Department, two dietician students on placement carried out a Patient Mealtime Satisfaction survey.

Central Supplies

JASON FARRELL
A/MATERIALS MANAGER

The Central Supplies Department purchases and maintains stock materials for the day to day running of the hospital. Purchases for hospital equipment, patients' aids and appliances, and special requirements are managed by Central Supplies, in addition to placing purchase orders for service and maintenance contracts for Medical Equipment and Technical Services equipment. The Supplies Manager assists in Tenders preparation and loading onto the e-tenders website for open competitive Tenders in line with the Hospital's objective to obtain value for money in all purchasing decisions.

Cost-saving initiatives include, but are not limited to: Utilising HSE Framework agreements which are nationally negotiated, and continual evaluation of new products and services to reduce costs and improve efficiencies; maintaining access to the HSE Pricing and Assisted Sourcing System (PASS) which shows listings of the Health Business Section (HBS) Framework Agreements and Contracts, and the Office of Government Procurement (OGP) current Contracts and Frameworks.

Central Supplies works collaboratively with the Clinical Engineering Department in managing preventative maintenance contracts for medical equipment to reduce costly repairs and downtime on essential medical equipment.

The upgraded purchasing and inventory control logistics software programme has been successful for the department and the hospital. The end-of-year stock count was successfully completed with optimum stock value and quantity accuracy to provide efficient and effective services.

Throughout the year, the Central Supplies Department worked collaboratively with hospital departments to ensure compliance with HSE, HIOA and CARF accreditation standards. The Department sourced the most cost-efficient products for all services across the hospital.



Chaplaincy

FR. MICHAEL KENNEDY, CSSP

The Chaplaincy Service plays an important role in the overall aim of rehabilitation. It is a support service which provides spiritual, pastoral and listening care to patients, their families, staff and volunteers. It helps to meet the needs of the hospital community, providing a space for prayer and worship in the hospital chapel and multi-faith room, and celebrates Holy Mass during weekdays and Sundays. The chaplain is also involved with the local Parish Church.

Fr Michael Kennedy is the full-time RC Chaplain. The Reverend John Tanner and Susan Dawson are the chaplains assigned from their respective Church of Ireland and Presbyterian Church to the NRH. Ministers of other faiths can be contacted as requested. Eileen Roberts is part time sacristan. St. Vincent De Paul Society meet each week at the NRH and offer pastoral, listening and financial assistance to patients and their families.

VISITING PATIENTS

The Chaplain is on call 24/7 and the hospital provides onsite accommodation to facilitate the chaplain's availability to patients at all times of the day and night. The Chaplain visits patients on the Units on a regular basis at times that don't impact on treatment schedules. Chaplaincy is also a round-the-clock on-call service. The Chaplain is available to meet with patients and relatives for private consultation as requested. All visits are controlled by the patients.

CHAPLAINCY INVOLVEMENT

The Chaplain plays an important role in the pastoral care of staff and is available to meet with them on request. As far as possible, he also attends funeral services of family members of staff who have passed away. He is involved also in the following Committees: Ethics Committee, Heads of Departments, Liturgy Team, St. Vincent DePaul Conference, The Legion of Mary, the NRH Staff Induction Programme, and the Dublin Chaplain's Association.

HOLISTIC APPROACH

During the year, the Chaplaincy Department worked collaboratively with various clinical and therapy departments and provided assistance to patients who wished to attend Mass in the chapel with their therapists. This formed an important therapeutic and holistic part of their individual rehabilitation.

MILESTONES AND KEY ISSUES IN 2023

The Chaplaincy Department is delighted to have a streaming facility for patients who are unable to come to the chapel and can watch Holy Mass on the TV monitors in their rooms.

Retired staff returned to the hospital in November for the annual Mass for deceased staff. A Mass, organised by the family of a patient, was celebrated in December. This brought comfort to the family who travelled from Co Kerry.

I acknowledge my appreciation to Fr Michael O'Connor and Fr Arthur O'Neil for their availability to help with Holy Mass during times of annual leave. I also acknowledge my appreciation to Stuart McKeever and Alicja Chochorowska for all their support and inclusion of services on the patients' weekly activity schedule.

Communications

ROSEMARIE NOLAN
COMMUNICATIONS MANAGER

During 2023, The Communications Department worked closely with all Heads of Programmes, Departments and Services to ensure that accurate and timely information was available to all staff and patients, in a range of accessible formats. A range of information posters, leaflets and booklets for patients, staff and visitors were produced by the Communications Department and these were available on the hospital website. The Communications Department in collaboration with the IM&T Department and the Intranet Governance Group reinstated a development plan for digital communications which had previously been interrupted by the demands of the Pandemic initially and the subsequent prioritisation of resources to support major change initiatives across the NRH.

The Communications Department supported our colleagues from across the hospital in keeping staff informed about major projects, initiatives and events throughout the year. Some of these include:

EVENTS AND POLICY UPDATES RELEVANT TO PATIENTS, STAFF AND FAMILIES OR CARERS:

- Annual 'Life beyond the NRH' information day providing patients with an opportunity to meet representatives of external agencies that provide support services and peer support following their discharge from the NRH
- New NRH Assisted Decision Making Act (ADMA) Office
- Brain Awareness Week
- Accessibility Awareness Day focussing on emergency power outage planning for people who use electricity and battery dependent assistive technology and medical devices
- NRH Annual Sports Championships
- NRH Annual Farmers' Day
- NRH Ladies' Day run by the SCSC Programme
- NRH PAEDS-POLAR Patients and Family Day
- NRH Clinical Audit and Quality Awards celebrating Quality Improvement Initiatives in the NRH throughout the year
- A range of Awareness Initiatives for patients and staff including:
 - NRH Ladies' Day run by the SCSC Programme
 - NRH PAEDS-POLAR Patients and Family Day
 - NRH Research, Clinical Audit and Quality Awards celebrating Quality Improvement Initiatives in the NRH throughout the year
 - Awareness Initiative for patients and staff

NRH PROMOTION AND CONFERENCE MATERIALS DEVELOPED FOR EXTERNAL EVENTS:

- International Integrated Care Conference – UCD
- Prolonged Disorders of Consciousness Study Day
- Speech and Language Study Day
- Construction Industry Federation and Health and Safety Authority Safety Awareness Campaign
- Road Safety Authority Awareness Campaign
- National Ploughing Championships



MAJOR PROJECT UPDATES COMMUNICATED IN RELATION TO:

- The ROSIA (Remote Rehabilitation Services for Isolated Areas) Project – Funded by the European Commission 'Horizon 2020' fund
- Interdisciplinary Team (IDT) Quality Care Initiative
- Project Fusion – Project Updates for Staff, Patient Information, and Roll-out of the electronic patient record (EPR) for the NRH

INVOLVEMENT IN THE FOLLOWING PATIENT AND STAFF INFORMATION PROJECTS:

- Pre-admission Patient Information Booklet (across all Programmes)
- Pre-admission Patient Information Booklets for individual Programmes
- SCSC Suite of Patient Information Booklets for People with Spinal Cord Injury
- Participation in the NRH-IEHG Rapid Improvement Event focused on enhancing the hospital's Referral and Admission Process.

MILESTONES IN 2023:

Reinstatement of the following key communications projects:

- Upgrading of the NRH Intranet, in collaboration with IM&T Colleagues
- Implementing the infrastructure and resources for the NRH Social Media Platforms 'Go-Live'
- Digitising current patient information and resources
- NRH Styleguide and Accessibility Guidelines
- Communications Support Desk Ticketing System

Action plans have been put in place to develop our communications systems and processes to ensure we can optimise our time, effectiveness and efficiency as a team in contributing towards the strategic objectives and mission of the NRH and to enhance the services we provide to our patients, their families, our colleagues and the management team across the hospital.



The Communications Department supported the promotion of the 10th Annual Sports Championships in 2023.

Education and Research Report

RUTH MAHER
ACADEMIC LEAD

The National Rehabilitation Hospital continues its long history in educating current and future healthcare professionals to support our patients, their families and carers in their rehabilitation needs. The hospital plays a key role in providing clinical placements for students from several undergraduate and post graduate programmes.

University College Dublin has been our partner since 2021 in developing our education and research capacity in the NRH. In addition, the NRH works closely with Trinity College Dublin, RCSI University of Medicine and Health Sciences, University of Limerick, University of Galway and University College Cork, in providing clinical placements for their students.

Building on our capacity the NRH is further establishing our partnerships with academic institutions, including Colleges of Further Education, to ensure that the programmes delivered are providing the optimal clinical experiences to our students.

In ensuring we provide a continuum in education, the NRH also has a strong history in delivering ongoing education and training to its staff, and to our healthcare colleagues who work in other hospitals, community services and staff supporting patients and families in their homes.

The dedication and expert support offered by the staff of the Academic Department, Clinical Tutors, Practice Educators and staff throughout the hospital has ensured the success achieved with our Student Clinical Placements, our Continuing Professional Development Courses, and one-day conferences and study days.

Education and Training

Education and Training Facilities: The NRH has continued to invest in the facilities for education, training, research and innovation for staff and students and the new NRH Clinical Education Centre (CEC) was opened in the Cedars Building in 2023.

HSE Library: The NRH is mid-way through a three-year Agreement with the HSE for National Library Services for the NRH. This facility is available across the hospital and the Resource Room in the Ivy Building has been enhanced through the installation of additional PCs to enable staff and student access this resource.

New Hospital Development – Phase Two: The Academic Department has submitted a comprehensive paper on education, training, research and innovation facilities for consideration in Phase Two of the New Hospital Project. This paper set out a vision for the expansion of facilities and the further integration of education and research in the NRH, where new discoveries and patient participation are key to the development of rehabilitation research and improved patient outcomes through enhanced staff, student and patient education and training.

Virtual Careers Evening January 2023: The ongoing commitment of the NRH Secondary Education Programmes continued in 2023 with a NRH Virtual Careers Evening held on MS Teams. Out of 160 participants who registered, approximately 70 attended online. The evening consisted of eleven presentations by healthcare discipline and our Volunteers. The event is successfully promoted through TY Coordinators in Schools; Direct requests received via email; Internal advertising in the NRH on the Academic Portal; email and poster; on the NRH website; through the Institute of Guidance Counsellors and the National Careers Portal

The NRH Transition Year (TY) Programme 2023: Due to the success of the TY Programme in 2022, three TY Programmes were held during 2023. Each programme had 20 students attending - a total of 60 students attended from over twenty schools, of which eight schools were outside of Dublin. All events are coordinated through the Academic Department; staff from fifteen departments are involved in running the programme which includes both a 'World Café' Event for students to meet different health care professions and a 'Dragons Den Event'.



Clinical Placements: In the Academic year from January - December 2023 the NRH facilitated approximately 320 full clinical student placements across a number of disciplines. Our collaborating Higher Education Institutions included University College Dublin, Trinity College Dublin, University of Galway, RCSI University of Medicine and Health Sciences, University of Limerick, and University College Cork. Student placements ranged from one or two weeks to three months across a range of disciplines including Occupational Therapy, Physiotherapy, Nursing, Medicine, Psychology, Music Therapy, Medical Social Work, Speech and Language Therapy, Dietetics, and Pharmacy. The Academic Department has continued to work with our clinical colleagues to enhance the student experience. During 2023, new and enhanced electronic student placement processes to consolidate the requirements for student placements were introduced.

Continuous Professional Development: The Academic Department continues to support the development of a suite of graduate courses in the NRH. Following a survey of all staff in relation to education and training courses provided, over twenty-five responses were received from which a draft Prospectus has been developed. Electronic systems and processes to enable the smooth registration of participants for continuing professional development courses have also been developed by the Academic Department. In addition, nine NRH Grand Rounds were held in 2023, with over 360 staff attendances

In 2023, sixteen Neurogenic Bowel Courses (Including Management of Neurogenic Bowel, Train the Trainer in Neurogenic Bowel Care and specific courses for Community Organisations and Higher Education Institutions) for staff from within, and external to the NRH were held. A total of 295 participants attended these courses. In addition, three Neurogenic Bladder Courses were held with 39 participants attending.

The Academic Department also supported Departments and Programmes to run a number of study days and one-day courses in 2023 covering topics including Epilepsy Awareness, Spinal Cord Injury, Prosthetic Care and Speech and Language Therapy. A total of 160 participants took part in these courses.

Ernest Goulding Lectures 2023: During 2023 the NRH held two Ernest Goulding Memorial Lectures, as part of recalibrating our in-person events post COVID-19.

In March 2023 (for 2022), Dr. Ana Terrés, HSE Assistant National Director, Research and Evidence delivered a presentation entitled 'The Changing Landscape of Research in the Irish Health System'. The event was attended by over forty Board, Executive and Staff members.

In November 2023, Dr. Cliona McGovern, Head of Subject for Forensic & Legal Medicine, UCD Chair, National Research Ethics Committee for Clinical Trials and a member of the NRH Ethics Committee, delivered a presentation entitled 'Conducting Research in a Changing Clinical, Academic, and Legislative Environment'. This Ernest Goulding Memorial Lecture was attended by over fifty Board, Executive and Hospital Staff and was combined with the Inaugural Research Awards.

Research Activity

The Academic Department has an expanded role in supporting research activity within the NRH, through three discrete functions, namely:

- Research Support – supporting NRH Staff and external applicants with research concept proposals and submissions to the NRH Research Ethics Committee
- Operational Research Governance – ensuring that operational requirements are met as part of research applications
- Delegated role in supporting the running of the NRH Board Sub Committee on Research Ethics

In addition, the Ivy Building, hosts a number of research staff and coordinators who are employed through the NRH, or our Academic Partner, University College Dublin, on specific research projects under the direct supervision of a NRH Consultant Principal Investigator.

Inaugural NRH Research Awards as part of the Clinical Audit and Quality Improvement Awards: In November we saw the first NRH Research Awards as part of the newly established Research, Quality and Audit Awards. Research Awards were made in the following categories:

- Undergraduate Research Student Category – 'The Value of Renal Tract Imaging as Part of Annual Genito Urinary Review for Patients with Spinal Cord Injury'. Rosie Conlon, Joao Cardoso, Clodagh Reilly and Dr Brian McGlone

- Postgraduate Student Research Category – ‘Dissociating the impact of alexithymia and impaired self-awareness on emotional distress and aggression after traumatic brain injury’. Dr. Suvi Dockree, Cathal Ffrench, Jodie O’Hara, Dr. Paul Carroll, Paul Dockree and Brian McGuire
- Research Team Category - ‘A Person-Centred, Interdisciplinary Approach to Goal Setting in Ireland’s National Rehabilitation Hospital’. Prof Áine Carroll, Áine Trayer, Dr. Zsafia Torok and Dr. Lauren Christophers.

Research

The INSPIRE-NRH Research Team completed the first phase of the Goal Setting study. The second phase of the data collection is due to commence in January 2024. Two scoping reviews (Patient Experience in Rehabilitation Care; Learning Health Systems in Post-Acute Rehabilitation) were conducted, the findings are currently being prepared for publication. The findings from the Goal Setting study and the two scoping reviews will be presented at the ICIC24 conference held in Belfast 22-24 April 2024. The ‘Creation and Implementation of IDT Framework in the NRH’ study has been completed, an article is prepared for publication.

The NRH Hospital is also involved in the ROSIA Project - European Union Horizon 2020 Research and Innovation Project funded under Grant Agreement No 101017606 – ROSIA (Remote Rehabilitation Services for Isolated Areas is a Pre-Commercial Procurement (PCP) project involving 12 consortium members representing five countries; Ireland, Spain, Portugal, the Netherlands and Denmark. This is a very exciting project and the commencement of Phase 3 in 2024 will involve the NRH being one of three Pilot sites for the project.

In 2023, three new Research Projects were approved by the NRH Ethics Committee. Details are available on the NRH Website/Research.

UCD Clinical Research Centre (CRC): In May 2023 the UCD Clinical Research Centre had an Information Stand on World Clinical Trials Day. The UCD CRC Lead is Prof Áine Carroll. All UCD and NRH Researchers and Coordinators are based in the Ivy Building. Work is currently underway to identify and develop a UCD CRC Research Facility in the NRH to support clinical research in advance of the Phase Two development of the Hospital.

SIX NEW RESEARCH PROJECTS WERE APPROVED:

The Experiences of Fathers with Acquired Physical Disabilities

Principal Investigator: Dr. Jacqui Stow
Lead Researcher: Amanda Dunne
Supervisor: Dr. Christian Ryan, UCC

Communication Barriers in Specific Areas during SCI Rehabilitation

Principal Investigator: Dr. Cara McDonagh
Lead Researcher: Florence Anderson, Edel Gormley

Investigating the impact of collaborative music therapy and speech and language therapy on language and communication in children with acquired communication impairments.

Principal Investigator: Dr. Susan Finn and Dr. Irwin Gill
Lead Researcher: James Burns, PhD Candidate
Supervisor: Dr. Hilary Moss, UL

A service evaluation to explore if and how healthcare staff working within a specialist inpatient stroke service support patients with skills for self-management ahead of discharge

Principal Investigator: Dr. Kinley Roberts
Lead Researcher: Ms. Siobhan Kerr
Supervisor: Mr. Dominic Fisher, University of Plymouth

BioInnovate – Needs Led Innovation Research Programme - to commenced January 2023

NRH Principal Investigator: Prof. Áine Carroll
Principal Investigator: Prof. Martin O’Halloran, University of Galway
Research Co-ordinator: Ms. Ailish Walsh

An interview-based study using a patient co-creation process for developing a novel stroke rehabilitation therapy

NRH Principal Investigator: Dr. Kinley Roberts
Principal Investigator: Prof. Eleni Mangina, UCD
Lead Researcher: Dr. Jibraan Esoof, UCD



Health Planning

EMMA MULHALL – FACILITIES AND PROJECTS ADMINISTRATOR
JAMES WITHERO – CLERK OF WORKS

The Health Planning Team (HPT) assists with the planning, organising and securing of resources to achieve specific organisational goals, working within the hospital's original (Cedars) building and the New Hospital Development. The team further facilitate and or manage specific projects or parts thereof to enable hospital services to meet their unique goals and objectives.

New Hospital Development – Phase Two

The Health Planning Team (HPT) functions as the client's (NRH) representative on the New Hospital Project – a three-phase project. The primary responsibility of the HPT is to capture the requirements of our stakeholders both internal and external, and act as facilitators to work in partnership with the design team to translate those clinical, operational, and human requirements into a fit for purpose, accessible for all design, for the new hospital. Our stakeholders are defined as any individuals who will use the new buildings or any aspect of the NRH service. A fundamental responsibility of the NRH as an internationally accredited rehabilitation facility is to affect positive change in patients' functional ability, independence and self-reliance, while protecting and promoting the rights of the patients. The hospital design is patient-centred and endeavours to create that specific environment to facilitate the delivery of rehabilitation by an integrated team, which includes the patient.

The NRH site development was conceived in three principal phases, of which phase One is now complete. A Schedule of Accommodation and Requirements for Phase Two, submitted by all NRH Departments and Programmes to the HPT, was submitted to HSE Estates in August to allow the appointed financial consultants to complete a Strategic Assessment Report (SAR). A design team was appointed for a feasibility study to commence following completion of the SAR. Work continues by the HPT on preparation of the brief to include 60-80 Inpatient beds and the project plan for Phase Two.

Developments and Milestones in 2023

Minor Capital Projects Completed: The Spinal Gym (with additional IDT Treatment Rooms), external lift enabling additional access for patients to the garden, and relocation of the Pharmacy. Architects issued substantial completion for all three projects in November.

COVID-19 Memorial Garden Sculpture: Workshops facilitated by the Positive Working Environment Group (PWEG) resulted in staff expressing their wish to acknowledge the personal and collective loss suffered while also commemorating the collective resilience, determination, commitment to others and hope in the face of a sudden and prolonged crisis. The Health Planning team worked on a brief and completed a tender to commission a sculpture to mark the impact of COVID-19. The sculpture, entitled Spirit Sculpture, was installed in October 2023.



Emma O'Brien and James Withero, NRH Health Planning Team.

2023 Milestones include: Development of a traffic management plan for the campus, including discussions with Dún Laoghaire Rathdown County Council regarding provision of traffic calming measures onsite; completion of widening a footpath on the campus; completion of a car parking and mobility strategy report in conjunction with internal and external stakeholders - the report has been sent to our appointed architects, O'Connell Mahon for inclusion in the overall site plan.

Work continues on the upgrade of spaces in the Cedars Building. To date the following departments have been relocated: Fusion Project Offices; Clinical Education Centre; Occupational Health; and HPT Department, office accommodation was also provided for a number of Department Managers.

Human Resources

OLIVE KEENAN
DIRECTOR OF HUMAN RESOURCES

The Human Resources (HR) Department provides a range of services, such as recruitment and selection, personnel administration, employee relations, industrial relations, policy development, staff development, and ensuring compliance with legal, regulatory and Public Service Agreement requirements. The HR Department is also involved in a number of corporate initiatives and projects across the hospital. It endeavours to provide a professional and effective service to the NRH and support all staff through the lifecycle of their employment, in an environment where they can work well and thrive in their role.

Recruitment and Staffing

The HR team continues in our mission to support the hospital in delivering expert, high quality patient-centred care by recruiting, retaining, supporting and developing our staff. Our staffing ceiling further increased to 694.5 WTEs (795 headcount as of December 2023) in line with the HSE approved staffing for the NRH. The HR team have capably responded to the requirements in growing our workforce as well as meeting the increasing demands and complexity in HR activities across the hospital.

The biggest challenge for HR professionals continues to be staff recruitment and retention against a backdrop of shortages in Healthcare Professionals nationally, particularly Nursing, Medical and Health and Social Care Professionals. The department worked with the NRH Recruitment and Retention Working Group to develop strategies and actions around attracting and retaining talent.

The introduction of a recruitment embargo by the HSE in late 2023 extended to nearly all categories of staff and which further compounded our resourcing challenges as we endeavoured to maintain safe and appropriate quality hospital services.

HR Information Management System

Work has been ongoing to scope out requirements for an upgrade to our HR Information Management System (HRIS), which will facilitate a more updated and fit-for-purpose system, that will enhance the available workforce information for managers and provide reports to assist with decision-making processes. The upgrade project will be an exciting initiative and a welcome project for implementation in 2024 that will benefit both the department and the wider hospital.

Absenteeism

The staff absence rate for 2023 was 5.2% against a national target of 4.0%. The focus on absence management remains one of prevention, health and wellbeing promotion. The HR Department works closely with the Occupational Health Department to support managers in improving levels of attendance, staff health and morale through a broad spectrum of initiatives. By working together collaboratively, the aim is ongoing support of staff and to return to absenteeism rates below the HSE national target.



Music Therapy plays a vital role in a wide range of activities and events throughout the year in the NRH.

Employee Relations and Change Initiatives

The HR Department plays a key role in helping shape the NRH through organisational change and development plans in the achievement of its strategic and operational goals and objectives. The Department continued to support the 'Maximising Rehabilitation' initiative as we embedded our new ways of working in 2023. We worked with the Project Leads, Managers, Staff and their Union to implement a more flexible therapy service delivery over a six-day week and extended working day, to optimise NRH specialist resources for patient benefit. This expansion of rehabilitation opportunities for patients, within a culture of 24-7 rehabilitation and Interdisciplinary Team working has been a significant change for the staff involved. We gratefully acknowledge the collaborative working, commitment and valued contributions of all stakeholders involved in this important strategic initiative.

Work continued on the Nursing Review, which is being facilitated by The Ireland East Hospital Group (IEHG). The review is a tripartite process between the NRH, IEHG, and INMO, and overseen by a Local Implementation Group (LIG) led by the Chief Director of Nursing and Midwifery, IEHG, with the support and expert advice of the National Lead for Safe Nurse Staffing and Skill Mix. I would like to acknowledge the hard work, collaborations and dedicated commitment given to this process to date by the external Reviewer, the National Lead and all the stakeholders involved. The review report of the nursing staffing compliment is expected to issue in Q1 2024.

Employee Engagement

The HR Department works to foster a positive working environment and supportive culture within the hospital whereby staff can feel happy, healthy and well at work, and able to thrive and provide the best care and service to our patients. Many health and wellbeing initiatives are available for staff via our Occupational Health service. The Positive Working Environment Group (PWEG) has representation of staff from across the hospital and has responded to the needs of staff during a continued period of change and challenge in 2023. Many initiatives such as 'Staff Kindfulness Day' were facilitated. The subgroups of PWEG, namely the LGBTQ+ Group and Diversity, Equality and Inclusion Group, continue to promote inclusivity which is fundamental to the hospital ethos.

The Hospital was also shortlisted in the following two categories in the Irish CX Impact Awards 2023:

- **CX Impact in Government and Public Sector**
- **CX Impact in Pharmacy/Health**

Key Department Developments and Achievements in 2023

Some of the HR Departmental highlights include:

- The new monthly 'HR Drop-in Clinic' commenced as part of maintaining employee engagement and accessibility of HR services for staff. The department has an open-door policy and these clinics have been set up at convenient locations around the Hospital to ensure easy access for staff to HR advice and support.
- Continued development of the HR Portal site on the NRH Intranet.
- The Hospital is committed to promoting a learning culture and staff development. The Educational Assistance Steering Group (EASG) reviews and supports educational assistance applications from staff - 219 applications were supported in 2023. The EASG works collaboratively with our Academic and Research Department to encourage and provide opportunities for competency upskilling, growth and development for staff.
- Digitisation of HR Processes – the Joiners, Movers and Leavers process (JML) project is underway with the aim of exploring ways to improve, streamline and automate processes to create efficiencies for all staff involved and give time back to managers for clinical and services duties. There is currently an administrative burden in this area since the expansion of the NRH, with a substantial increase in manual processes, hard copy documentation and authorisation requirements for certain HR processes involved in JML. We look forward to implementing our enhanced JML processes on completion of the project.

Staff retirements

Our Chief Executive, Derek Greene, retired on the 31st December after a long, loyal and dedicated service to the Hospital of nearly 25 years. During his time in the NRH, Derek oversaw many significant changes, developments and expansion of our services, most notably the development and move into Phase 1 of the New Hospital. Derek has made an enormous contribution to both the Hospital and the lives of our patients over his many years; and will be hugely missed by the NRH.

During 2023, a total of six members of staff retired from the NRH with a collective 120 years of loyal and dedicated service. I would like to thank each and every one for their hard work and commitment to the NRH and the contributions made through their knowledge, expertise and professionalism. Every best wish is extended to all of our retirees for a long, happy and healthy retirement as they enter this new chapter in their lives.

During the year we welcomed new members of staff to the department. The HR team once again capably responded to the work demands, challenges and opportunities that presented in 2023. I wish to thank the HR team for all their hard work, support and commitment during the year. Special appreciation also to our Occupational Health Department who work tirelessly to promote and protect the health and wellbeing of our staff.



Information Management and Technology (IM&T)

JOHN MAHER

HEAD OF INFORMATION MANAGEMENT AND TECHNOLOGY (IM&T)

The Information Management and Technology (IM&T) Department is subdivided along service delivery lines with teams delivering:

- IM&T Operations and Service Desk
- Application Support
- Informatics
- Business Support (Project Management, Data Analytics)

Year in Review

2023 was by any measure an exceptionally busy and successful year for the IM&T Department as our Project Fusion Team supported the installation and go-live of the TrakCare Electronic Patient Record system and the Operations Team maintained our environments while delivering end user support. Project Fusion was not simply a large application installation, but importantly a very large change management initiative as many administrative processes and care delivery tasks moved away from the paper medical chart and associated paper documents to a fully electronic environment.

IM&T Operations: The Operations Team ensures the smooth running of the considerable ICT infrastructure within the NRH while maintaining the safety of its systems and data. This team also manages the Support Desk, where all staff ICT incidents and service requests are raised and managed. During 2023 the team received and resolved a total of 6,332 incidents - a 12.6% increase on 2022. This increase was expected due to the installation and go-live of our Electronic Patient Record, TrakCare. Service Requests totalled 695 and included the provision of IT Hardware to staff. The Operations Team also delivered:

- Expansion of the paging infrastructure to ensure improved coverage within the New Hospital building.
- Support to the expansion of networking infrastructure to the new Pharmacy, Occupational Health, Spinal Gym Offices, Academic Department CEC, and Project Fusion offices in the Cedars Building.
- Increased Cybersecurity awareness and Phishing simulations.

Project Fusion – Installation of the Electronic Patient Record (EPR) at the NRH

Project Fusion has been several years in the making and has been a joint project with the HSE, National Forensic Mental Health Services and InterSystems, the solution vendor to deliver an Electronic Patient Record (EPR).

PROJECT FUSION DELIVERED THE FOLLOWING TRAKCARE EPR MODULES IN 2023:

- Patient Administration
- Referrals and Waiting List
- Clinical Information System
- Encounter Record (Patient Episodes)
- Workload Management
- Internal Referrals
- Digital Documentation
- Order Communications
- Medicines Management
- Analytics and Reporting
- Single Sign-on
- 3rd Party Interfacing
 - Digital Dictation
 - NIMIS Radiology
 - Healthlink
 - IHI Individual Health Identifier
 - Eircode

THE TRAKCARE EPR WAS ROLLED OUT OVER THREE PHASES DURING 2023

Phase 1 - May 2023: The TrakCare system for patient administration tasks and a successful transition from our legacy provider of over 10,000 patient details was completed.

Phase 2 - October 2023: Deployment of the Clinical components of the system and the start of our Electronic Prescribing and Medicines Administration (EPMA) rollout to Poppy Unit. This phase allowed clinicians to access information from any device on the campus and for all clinical staff to record information on to the system.

Phase 3 - November 2023: The EPMA rollout continued and all remaining adult Inpatient Units were brought on stream. All prescribing of medicines and recording of medication administration for these Units is now completed electronically.

The success of the deployment to date has been based on the level of collaboration across the hospital through requirements, design, testing and training on the new system. Over 150 training sessions were provided for staff to support the phased rollout; over 650 staff have been trained on the system to date.

The Project Fusion Team would like to express their sincere gratitude to all staff at the NRH for their support and enthusiasm in adopting this significant change management project.

The benefits of the TrakCare EPR system include:

- Enhanced access to information for clinicians to support collaborative decision-making in the care of patients.
- Improved patient experience.
- Improved co-ordination of processes across the patient journey.
- Reducing duplication of information relating to patient care - freeing up clinicians and care staff to care for patients.
- Access to a single source of information to support auditing, reporting and service development requirements.
- Better quality and real-time patient data.
- Increased data security.

Ongoing TrakCare developments: In addition to system optimisation, additional documentation and functionality will be added to the system to ensure it continues to meet NRH needs and support the delivery of rehabilitation services to our patients. The year ahead will see the phased deployment of the Personal Community module which will provide a patient portal for users. This will enhance patient access to information and reflects the collaborative approach to rehabilitation across the hospital.

I acknowledge and sincerely thank the entire IM&T team for their considerable efforts during 2023.

Members of the Project Fusion Team who rolled out the EPR, TrakCare in three phases during 2023.





Occupational Health

DR JACINTHA MORE O'FERRALL
CONSULTANT IN OCCUPATIONAL HEALTH MEDICINE

The Occupational Health Department continues to offer support to all NRH staff through a wide variety of proactive and reactive strategies. 2023 was another challenging year for staff personally and professionally and a range of Occupational Health supports were offered. Over 2,124 contacts were made with the department in 2023.

Staffing of the department remained the same in 2023 with Zanele Bhebhe, Occupational Health Administrator, Arlita Patalinghug, CNM1, and Rose Curtis, CNM2. The team works closely with Dr Jacintha More O'Ferrall who continued to carry out on-site visits and offered on going supports through phone and other media. Referrals, when required, took place virtually or in-person in Medmark, Baggot St.

Consultations in 2023

In addition to the extensive range of employment related assessments, reviews and follow-ups available to staff, the Occupational Health Department provides services including: Blood Pressure Checks; Blood Tests; COVID-19 Consultations (staff); Coaching, and After Action Review; Contact Support Person for 'Dignity in the Workplace' programme; DXA Bone Density Programme; Employee Assistance (EAP) referrals; Ergonomic Assessments; Health Promotion events; Illness at Work support; Pregnancy Risk Assessment and Review; Sharps Injury follow-up and Sharps Injury Awareness Training; Smoking Cessation support; Stress Management; Staff Physiotherapy for work related injuries; Vaccinations for Seasonal Flu, Hepatitis B, Varicella, Measles, Mumps and Rubella; Absence Management (reviews, advice and follow-ups); work-related injury follow-ups, and pre-employment screening.

COMMITTEE PARTICIPATION BY OCCUPATIONAL HEALTH STAFF

- Behaviour Forum
- Hygiene, Infection Prevention and Control Committee
- Positive Working Environment Group
- Suicide Awareness Group
- Emergency Planning Group
- Quality, Safety and Risk
- Safeguarding and Patients' Rights Committee
- Inclusion and Diversity Committee

Key Milestones for Occupational Health in 2023

Due to the increasing demand for Occupational Health Physician review, Medmark began running a twice monthly onsite clinic - less staff now have to attend the Baggot Street offices and can be reviewed in the NRH. While Occupational Health continues to offer supports to all staff in the NRH, there is ongoing vital support from HR, Risk Management, Infection Prevention and Control, Executive Committee, Department Heads and staff throughout the organisation for which the department is very grateful. We relocated to a bright and spacious new department on the third floor of the Cedars building and are very grateful to everyone who helped make this happen.

Arlita Patalinghug commenced a post graduate diploma in Occupational Health Nursing with RCSI; Rose Curtis delivered training to Occupational Therapy, Medical Social Work, and Nursing Department in Coaching techniques which was very well received; since taking on the Staff Physiotherapist role in July, Ciara Murphy facilitated 19 back rehabilitation classes and 35 staff physiotherapy sessions.

Patient Experience and Healthcare Data Management

CAROL BARTON – PATIENT EXPERIENCE AND HEALTHCARE DATA MANAGER (from March)

PAULA CARROLL – INTERIM PATIENT EXPERIENCE AND HEALTHCARE DATA MANAGER (from August)

Stakeholder engagement is a vital part of providing quality patient-centred care. Feedback is received through various means, these include:

Comments, Suggestions, Compliments: Feedback is received and welcomed from patients, family members, carers, staff and volunteers through suggestion boxes, letters, email or verbally submitted. Positive feedback is shared with the team, and where necessary, corrective action is taken.

uSPEQ Questionnaires: Questionnaires are sent to patients three months post-discharge in line with CARF accreditation standards. Responses enable Clinical Programmes to review satisfaction levels and outcomes for patients who have completed their rehabilitation programme, and to measure its effectiveness in terms of coping in day-to-day life beyond the NRH and transition into the community or new care settings.

Patients' Forum: Patient Forum meetings are held monthly, providing an opportunity for patients to give feedback on their experience of NRH services. All feedback received is shared with the Unit IDT team and Heads of Services. Actions as a result of feedback received is made available to patients through subsequent Patient Forum meetings, via Patient Newsletter (a quarterly publication), or directly to the person who provided the feedback. The Chair of the Patient Forum is Tim Rice – a former NRH patient.

Parents' Forum: The frequency of the Parents' Forum was increased to six-weekly meetings, enabling parents to engage with hospital management and give feedback on their child's experience in the hospital or raise any concerns they may have.

Inter-Agency Forum: The Inter-agency forum members include representatives from hospital departments and external agencies who provide information, peer support and services for patients, both while in the hospital and post-discharge. The annual 'Life Beyond the NRH' Information Day was held in December.

Complaints: The NRH values complaints both as a learning exercise to resolve issues and bring about corrective action, but also as an invaluable tool for planning future services. In line with the complaints policy, the NRH aims to resolve as many complaints as possible at point of contact. All complaints are reviewed, and the hospital seeks to meet complainants at an early stage to discuss the complaint. A written response is issued for formal complaints following investigation.

Corporate Data Management: Bed Occupancy and Delayed Transfers of Care (DToC) are reported at Daily Operational Safety Huddle meetings. Activity levels compared with targets are monitored and a full monthly Patient Activity Report is provided for the Hospital Board and HSE. Ongoing review of DToC helps in managing waiting list numbers to ensure access to NRH services in as timely a manner as possible for patients awaiting admission.

Other services overseen by the Patient Experience and Healthcare Data Manager include: Admissions Administration, in collaboration with Nursing and Medical teams; Urology Administrative support provided for Consultant and Nurse-led Urology Clinics; Healthcare Records (HCR) – the HCR Steering Group is working closely with the Electronic Patient Record Project Team.



Risk Management

ELAYNE TAYLOR
QUALITY AND RISK MANAGER

The National Rehabilitation Hospital (NRH) is committed to providing effective and integrated care in an environment that is safe for our patients, staff and visitors. The Risk Management Department oversees the NRH risk management programme that aims to reduce risks within the organisation. It also ensures that systems and processes are in place to identify and to manage these risks to an acceptable level. The department is committed to managing risks in a proactive, integrated and accountable manner. It provides advice with regards to best practice in risk management, patient safety, and environmental health and safety issues. All staff levels within the NRH support the effective risk management processes in place and we are kept informed regarding developments in the domain of risk management in the organisation. The Risk Management Department prepares monthly quality and risk reports for the Board of Management, Quality, Safety and Risk Committee and the Executive Management Committee. These reports are also made available to all staff.

The NRH promotes a proactive health and safety culture by encouraging the reporting of all adverse and near miss events. All incidents are recorded using the National Incident Report Forms (NIRF) and are recorded onto the NIMS database (National Incident Management System). All reported incidents (clinical and non-clinical) are managed in line with the NRH Incident Management Policy supported by the HSE Incident Management Framework. All reported incidents are reviewed by the service line manager and the risk management team. The review type selected is based on both the category of incident and the severity rating of the incident. Review processes allow the NRH to learn from incidents and initiate change that will ultimately facilitate improvements in our standards of care. In addition to internal review processes, several external inspections took place during 2023 and quality improvement plans were developed in response to all recommendations made.

Alex Craft, Quality Improvement and Accreditation Officer, continued to support a number of quality initiatives during the year including incident reporting training, open disclosure awareness training, patient safety notices and quarterly patient safety staff newsletters. In November, the Risk Management Department in conjunction with the Academic Department hosted the Quality Improvement and Clinical Audit and Research Awards Day to celebrate the high-quality work undertaken by staff which supports the delivery of high-quality safe person-centred care.

Subject Access Requests

The Risk Management Department facilitates access to personal requests for information, such as Freedom of Information (FOI) requests. The department also responds to corporate requests for information. In 2023, a total of 288 requests were received. Of these, 266 were requests Data Protection requests and 22 were FOI requests.

In Summary

The Risk Management Department remains focused on identifying opportunities for improvement in our care standards and will continue to use information from numerous resources to support this, including implementation of national guidelines, findings from investigations into reported adverse incidents, along with findings and recommendations from site visits or inspections undertaken by authorised agencies.

School Report

AOIFE MAC GIOLLA RÍ
PRINCIPAL

Our Lady of Lourdes School is a registered Primary school which provides education to students of primary and second level (4 to 18 years old) admitted to the National Rehabilitation Hospital (NRH).

School Management

Policies in Our Lady of Lourdes School include a Health & Safety Statement, Code of Behaviour, Child Protection, Acceptable Use Policy, Data Protection, Information and Technology Policies.

Philosophy and Ethos of the Hospital School

The school promotes a child-centred philosophy where the pupil is central in a context of significant rehabilitation and educational support provided to young people recovering from acquired spinal injury, brain injury or limb absence. The education provided for each child is customised and as far as possible follows the State curriculum while supporting pupils in their holistic development. The emotional, physical, and spiritual wellbeing of pupils is paramount, and every effort is made to nurture pupils' unique skills and interests.

The Education provided in the NRH

On enrolment: Contact is made with the student's base school to ensure that continuity of work is maximised. School sessions are planned in line with the Interdisciplinary Team (IDT) goals for each child or young person.

The school liaises with the base school and uses email and phone communication between the student and their Home-School Liaison Teacher, Career Guidance Teacher or Resource Teacher as appropriate, in consultation with the base school's Principal.

On discharge: Our Lady of Lourdes School passes on the report-work and results of any educational diagnostic tests administered while in the NRH, to the pupil's base school.

Key Developments

The school classroom is located in Daisy Unit complete with interactive whiteboard, height adjustable and assistive classroom furniture to cater for students' various needs. The addition of the classroom at the Daisy Unit has enabled the school to collaborate further with the Paediatric Interdisciplinary Team (IDT) and allows students to access school with ease and comfort. The original classroom in the Cedars Building is open for pupils from other Units. The school's main focus has been on wellbeing - something that has been widely incorporated into group activities and sessions. In January 2023, a part-time Secondary School teacher was appointed to the school.



Technical Services Department

PETER BYRNE – TECHNICAL SERVICES MANAGER

DAVID DONOGHUE – TECHNICAL SERVICES DEPARTMENT

The Technical Services Department (TSD) completed many major projects in 2023 and many are still underway throughout the hospital and its campus. Some areas in the original hospital (Cedars building) are still occupied and works are ongoing to optimise use of all remaining space in the building. TSD continue to improve the buildings and grounds, and continue to work closely with teams from all departments in the hospital to provide a safe and comfortable environment for patients, staff and all stakeholders using our facilities.

Projects and Developments in 2023 included the following:

Cedars Building Developments: TSD along with the Health Planning Team are part of the Space Utilisation Group which focused in 2023 on relocation of some services to refurbished areas of the original hospital building (Cedars). Services that were relocated include: Occupational Health, Pharmacy, Spinal Gymnasium, and Health Planning and Design Team.

Soundproofing Works in the Outpatients Department: Soundproofing of five additional assessment rooms was completed, ensuring patient confidentiality. This work has the added benefit of insulating the rooms.

Lighting Upgrades: All old lighting was upgraded to LED lighting, which makes the NRH Campus more energy efficient and accessible. TSD continues to liaise with the HSE Energy Manager with regard to securing funding grants for all lighting and carbon saving upgrades for the NRH.

New Access to the Rehabilitative Training Unit (RTU): Access to the RTU has been upgraded to ensure a safer access route.

Energy Management: TSD is very active in working on energy management projects. Dave Donoghue and the NRH Energy Management Team are working alongside the HSE Energy Management Team, the Sustainable Energy Authority of Ireland (SEAI) and Office of Public Works (OPW), aiming to reduce our use of energy, which in turn reduces our carbon footprint. As part of this initiative, regular energy saving tips and information is circulated to staff.



TSD continue to improve the buildings and grounds to provide a safe and comfortable environment for patients, staff and visitors to the NRH.

The Triobike launch took place in the summer of 2023 and is greatly welcomed and appreciated by patients.



Expansion of the Academic Department: The Ivy Building upgrade was completed in 2023 and is now a functional space for the Academic Department. In addition, the refurbished former St. Gabriel's ward area and rooms are now part of the Academic Department facilities

NRH Vehicles: TSD manage the NRH road fleet ensuring our vehicles are maintained to the highest standards, are roadworthy and that the tie-down Parfit safety system is in place. TSD also provides training in vehicle safety checks as required.

New External Lift: The external lift will make the open garden area outside the Pine and Daisy Units accessible to all patients, staff, and visitors. This is a long-awaited facility which will be very welcome, particularly in the summer months when the garden is at its best.

New Bicycle Shelters and Trishaw Parking: Two new satellite bicycle parking shelters were installed in 2023. Both areas are covered and viewable from current security CCTV, and include Sheffield bar-type parking facilities which suit all bicycle types. A new storing area to accommodate the hospital's Trishaw bicycles is being installed also.

COVID-19 Memorial Sculpture: TSD have prepared for the installation of the COVID-19 Memorial Sculpture situated in the garden at the rear of the hospital, the project was managed by Emma O'Brien.

Other Projects and Ongoing Works in 2023 include: Management of the external landscaping company; ongoing painting and redecorating of the facilities throughout the NRH campus; continued installation of signage and wayfinding in conjunction with the Health Planning Team and Accessibility Committee; disconnection and removal of outdated electrical, lighting, heating, water and other supply services; management of installation of required safety items such as scaffolding and screening, and ongoing works and requests generated through the TSD support desk ticketing system.

TSD continues to work alongside contractors to ensure the NRH remains as accessible as possible with minimal disruption for our patients, staff and visitors.



Volunteer Service

JENNIFER GLANSFORD
VOLUNTEER CO-ORDINATOR

During 2023, NRH Volunteers along with volunteers from St Vincent de Paul, Children in Hospital Ireland and Peata Dog Therapy Service donated approximately 6,000 hours of their free time to the NRH – an increase of approximately 1000 hours compared with 2022. 133 active volunteers engaged over the year, with an additional group on our database who are available to assist with events when required. Alongside our regular volunteers, we have had support from over 40 corporate volunteers to assist, in particular, at the NRH Sports Championships in November. Corporate volunteers also donated time to help decorate parts of the hospital for Christmas.

Volunteers are supporting almost every Department at the NRH in their set roles, with other areas also being supported for ad hoc requests from staff. In particular, volunteers provide a vital role in supporting patient activities delivered by the Therapeutic Recreation Service and Music Therapy Department.

There has been a substantial increase in individual requests from Clinical and Therapy colleagues seeking volunteer support for patients. Some examples include: requests to visit patients who may be experiencing loneliness or isolation, support with patient socialisation, chess games, foreign language visitor requests, and digital literacy support. Staff also appreciate the support of volunteers with other internal events such as TY Week, and support over Bank Holidays.








Some new volunteer roles created in collaboration with individual Departments and the Volunteer Coordinator in 2023 include: facilitator support roles in the Rehabilitation Training Unit, a clinical psychology support role, POLAR (Prosthetic, Orthotic and Limb Absence Rehabilitation) administration support role, new patient socialisation groups for the Spinal Injury and Brain Injury Programmes on a weekly basis, and Triobike Volunteer Pilots.

The Peata Pet Therapy Service was launched in August. Six four-legged volunteers (and their humans!) provided 373 individual visits to patients in a truly collaborative project, with the Therapeutic Recreational Service coordinating the visits in 2023. Our Peata Pet Therapy Service was awarded first place in the Better Health and Wellbeing Category of the NRH Quality, Improvement and Audit Awards. In September, our Triobike Service was launched - this service will be rolled out fully in 2024.

There is a very active group of Unit-based volunteers who visit and chat to patients and who also provide mealtime assistance, patient socialisation and support activities. Patients with Prolonged Disorders of Consciousness (PDOC) benefit greatly from regular and consistent visits from volunteers. Our regular Music Volunteers who play in the Café on Thursdays (and other pop-up mini concerts!) are a huge hit with patients and families and we appreciate all the support they have given throughout the year.

We would like to express how immensely grateful we are to all our volunteers who consistently attend the NRH and give our patients and staff their valuable time, energy, skills, friendship, and kindness. On behalf of all patients, families and staff - THANK YOU!

Unit Guide

Unit Name	Symbol	Programme	Floor Level
Daisy		Paediatric Family Centred Rehabilitation	-1
Pine		Brain Injury	-1
Willow		Stroke Programme	G
Poppy		Prosthetic, Orthotic and Limb Absence (POLAR)	G
Ash		Brain Injury	1
Rose		Brain Injury	1
Holly		Brain Injury	1
Lily		Spinal Cord System of Care	2
Oak		Spinal Cord System of Care	2
Fern		Spinal Cord System of Care	2



Rochestown Avenue
Dún Laoghaire
Co. Dublin
Ireland

Tel: +353 1 235 5000
Fax: +353 1 285 1053
Email: enquiries@nrh.ie
www.nrh.ie