



# OneTeam

CUH Group Staff eNewsletter



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Welcome to the first edition of OneTeam, the new staff newsletter for Cork University Hospitals Group, filled with updates about our achievements and services. We are changing, we are improving and we have much to be proud of.

In the face of extraordinary times, you continue to rise to the challenge, time and again, continuously becoming more innovative and collaborative across all of our sites and services to deliver better care for our patients as OneTeam. Thank you.

Reflecting on my first year as CEO, while we rightly focus on what needs to be improved, we should also celebrate our many successes. By working in partnership and harnessing the full potential of the people that work for CUHG, we have been able to make considerable progress in a range of areas compared to previous years. To give just some tangible examples;

In Emergency Care, we have focussed on reducing the time ambulances wait at hospital to handover our patients and in turn improve 999 response times in Cork. Despite CUH Wilton being one of the busiest EDs in the country for ambulance attendances, we have seen a dramatic improvement, from an average turnaround time in excess of 95 minutes in December 2022 to just 45 minutes in June 2023,

# Welcome to our first edition of OneTeam – A Message from David Donegan, CEO

and perhaps more importantly the virtual elimination of delays over 2 hours when there were nearly 400 in Dec 2022. From being one of the worst performing Model 4's we are now one of the best. Mallow Hospital also successfully piloted a new approach to direct access for Ambulance borne patients to our MAU there, which is now being rolled out nationally. Bantry Hospital continues to be the only Model 2R hospital in Ireland, receiving undifferentiated ambulance patients to our MAU there 24/7.

In Elective Care, while waits in many areas remain far too long, we have reduced the Inpatient waiting list across all sites (from 6.6 years in August 2022 to 3.7 years in July 2023), the Day Case waiting list (from 6.1 years to 3.8 years). Our Outpatient waiting list has reduced (from 39,000 to 36,000), and the number of patients waiting over 4 years has reduced from 862 to 127 (103 of which are in Ophthalmology which has significant underlying capacity issues), and we plan to have eliminated all waits over 4 years by the end of 2023. Cancellations have also been reduced, significantly contributing to improved efficiency.

We have improved endoscopy care, with all P1 cases seen within the HSE standard of 28 days since Jan 2023, and we have reduced the number of Priority 2 cases waiting over the HSE standard of 9 months, from 37 a year ago to just 4 in July 2023, and we expect to be fully compliant within the next few months.

In Cancer Care, Symptomatic Breast performance has improved from 13% in May 2022 (35 patients treated within 10 days) to 78% in May 2023 (228 patients treated within KPI) and no patient now waits longer than 21 days. Routine breast performance is also improving despite a significant increase in referrals. Radiotherapy compliance has improved from 55% in May 2022 to 78% in May 2023.

Beyond clinical service performance, there is now a clear and evidence based capital and estates plan for the CUH Wilton campus which will, if fully funded, address our significant current and future deficits in capacity and physical infrastructure. The plan has been signed off in principle at a regional and national level by key stakeholders in the HSE and Department of Health, and is now going through the required capital approvals process. More details on this plan, including a 3D visualisation of the new Paediatric Centre, Cancer Centre, Elective Surgical Centre, Academic Centre and TACC Tower (Trauma, Acute and Critical Care), are available on our recently updated web-site. Finally, we have also produced comprehensive new plans to improve our governance (the way our hospitals are run), which will bring us more in line with our peers. These will, if fully funded and supported, address our considerable underlying deficit in management and leadership capacity, systems and processes at both a corporate and directorate level.

At a senior level I believe clinicians and other colleagues are much more positive about the future and working better as a team. There is a sense that we have begun to strengthen CUHG and provide better governance, transparency, vision, structure, engagement, decision making, direction, empowerment, clarity and grip. We know however that we have much more work to do to engage all our staff properly in this exciting journey that we are going on together.

I hope you all enjoy reading our first edition of OneTeamNews. Thank you to each and every one of you for your hard work and continued dedication to our patients and CUHG.



**David Donegan, CEO**  
**Cork University Hospitals Group**



A big Hello from the Medical Directorate at CUHG. The last number of years have truly been unprecedented and challenging for all our staff and patients. As a directorate we would like to thank you all for your continued hard-work, support, and patience. In addition, the Medical Directorate itself, in the last year, is going through a change in its governance structures, and its day-to-day engagement with both patients and staff. Our team of healthcare professionals comprises of a diverse and broad ranging group of medical specialties (and sub-specialities), including; Cardiology, Dermatology, Endocrinology, Gastroenterology, Geriatric Medicine, Infectious Diseases, Nephrology, Neurology, Liaison Psychiatry & Psychology, Respiratory,

and Rheumatology. In addition, these sub-specialities work closely with the Acute Medicine speciality and the Unscheduled Care team at CUH, supporting the general acute medicine commitment of the hospital. We are as a business unit supported by our newly appointed Business Manager, Aileen Horgan, and her team. We look forward to working with everybody to continue to effect positive change for both patients and staff over the coming year.

The Medical Directorate welcomes the new "OneTeam eNewsletter". We believe it has a great opportunity to enhance communication across our hospital group. In addition, it affords everybody the platform to show case some of the fabulous work of our teams. In this edition our Directorate have focused the spotlight on our state-of-the-art national stroke service (championing change in this important medical area for our community), and our Cystic Fibrosis Centre (only national designated centre for pre- and post- transplant CF care). We look forward to

sharing more of our success stories in future editions.

Finally, as we head into the Winter months, on a very important clinical note, the flu season and all its challenges for both patients and staff await us. Please remember to get your flu vaccine once available and advocate to your patients to do the same. Collectively the more engaged we all are in ensuring this, the better the outcome will be for our community. Thanks again for all your hard work.

**Professor Barry Plant**  
Consultant Respiratory Physician, Clinical Director for Medicine and Director of the Adult CF Centre at Cork University Hospital (CUH).



**Pictured above:** Micheál Martin with David Donegan, CEO CUH Group and Helen Cahalane, Director of Nursing CUH.

## State-of-the-art Stroke Unit

Our state-of-the-art stroke unit which was opened in CUH by Micheál Martin in November 2022 continues to be the country's busiest inpatient stroke service.



**Update from the Medical Directorate: CUH Wilton Stroke Centre & Stroke Team – SIM Stars winners 2023!**

# Stroke Team – SIM Stars winners 6th June 2023!

Almost nine months after the Taoiseach Micheal Martin officially opened our state of the art stroke centre on the grounds of CUH Wilton, the Stroke Team won the 2023 SimStars competition, a simulation scenario competition for the South/Southwest Hospital Group. The theme for the 2023 SimStars competition was communication. The scenario developed by members of the Stroke team at CUH involved a capacity assessment completed by healthcare professionals with a patient with severe aphasia post stroke. The assessment was decision and time specific in line with the assisted decision making and capacity (ADMCA) act and can be applied to a multitude of clinical scenarios for example where consent is required or decisions regarding patient care.



**Pictured above (l-r):** Jenny Gannon (Stroke Fellow), Marcia Ward (Neuropsychologist), Pat Barry (Stroke Consultant), Ines Saramago (Stroke Clinical Nurse Specialist) and Anne Barrett (Clinical Specialist in Speech and Language Therapy).

# CUH STROKE SERVICE

CUH is one of two national stroke thrombectomy centres, and the busiest inpatient stroke service in the country. The CUH inter-professional stroke team provide care for approx. 1,200 patients per year. It serves as a regional stroke thrombectomy centre for patients across Munster and runs 24 hours a day, 7 days per week. Our refurbished acute stroke unit has 31 beds and a dedicated rehabilitation gym.



**Pictured above (l-r):** Rojo George, HCA; Gillian Holt, Nutrition & Dietetics; Zakir Aleem, SHO Geriatric & Stroke Medicine; Soly Sabu, CNMII; Martin Hackett, Porter; Marcia Ward, Clinical Neuropsychology; Catherine Feeney, Physiotherapy; Kirstyn James, Consultant in Geriatric & Stroke Medicine; Sheila Robinson, Speech & Language Therapy; Karen Kelleher, Physiotherapy; Mary Tobin, Clinical Neuropsychology; Jewel Mathew, Staff Nurse; Leetha Gokul, Occupational Therapy; Aoife Hargadon, Occupational Therapy; Victoria Kenneally, Occupational Therapy; Eoin O’Sullivan, Physiotherapy.



# CUH Cystic Fibrosis (CF) Adult Centre

## Welcome Message

2023 marks the 16th year since the CUH formally established the Cystic Fibrosis (CF) adult centre. During this time our service, unit, team and patients and their families have been on a journey of exciting and also challenging transformation. This brief newsletter segment highlights some of the developments of local CF facilities, and nationally approved international therapies that are changing the trajectory of the disease for People With CF (PWCF).

## What is CF?

CF is a complex inherited condition. Due to a defect in the CFTR protein, PWCF experience a build-up of thick sticky mucus in the lungs, digestive system and other organs causing a wide range

of challenging symptoms affecting the entire body. As such our service interacts with a multitude of expertise and specialities both within and outside of CUH to treat and care for our patients.

## The Journey of Facilities/Unit

In 2007 the Pollock report acknowledged the lack of adult CF services. In response to this Prof Barry Plant and Dr Mike Henry took on the lead roles of developing an adult specific CF service. This was further supported by Cathy Shortt CNS for CF in CUH, who transitioned to exclusively lead out this new service from a nursing perspective. At that time there were 73 adults attending the service. Since its establishment, the service has rapidly developed to meet the ever-evolving needs of the growing adult CF population. Some seminal time points include:

## Service and Facilities

- June 2007: The newly established adult CF service provides 5-day access 8-6pm with direct phone access to CF CNS. The unit also established the “hospital in the home” service, whereby CF MDT visit patients at home. The Cork adult CF Centre is a leader in this area.
- June 2011: Through philanthropic funding, the adult CF Day Unit opened with 5 state of the art review rooms, a CF specific gym, and an MDT conference room.
- 2013: CFMATTERS: Cystic Fibrosis Microbiome-determined Antimicrobial Therapy Trial in Exacerbations: Results Stratified [www.cfmatters.eu](http://www.cfmatters.eu)
- October 2015: Saw the opening of 5B, a respiratory and CF ward, with 8 designated single en-suite rooms to cater for the inpatient needs.

- 2015: The National Clinical Programme (NCP) was established with the groups active involvement.
- 2018: Creation of bespoke website to aid communicating with our patients. <https://3cf.ie/>
- Sept 2019: The National model of care for CF was launched by NCP. [www.hse.ie/eng/about/who/cspd/ncps/cystic-fibrosis/resources/ncpcf-model-of-care-final-september-2019.pdf](http://www.hse.ie/eng/about/who/cspd/ncps/cystic-fibrosis/resources/ncpcf-model-of-care-final-september-2019.pdf)
- March 2020: The CF day unit implemented a TeleHealth service to care for PWCF during the COVID-19 pandemic and continue to operate a hybrid service post-pandemic.
- Nov 2022: Cystic Fibrosis and Lung Transplantation in Ireland NCP launched.



Above and centre: Respiratory/CF ward on 5B.

Above: Cystic Fibrosis Grand Rounds in collaboration with the HIHI at UCC.

## CF Multidisciplinary Team

- Over these 16 years the team has expanded at a clinical level with the support of the HSE to now include 1 consultant, 3 nurse specialists, 2 dieticians, 1 senior & 1 junior physiotherapist, 1 CF Pharmacist, and a CF registrar.
- We are very excited about the approval of 2 new consultants and 2 new psychologists to serve an ever-increasing population **that currently stands at 210 (threefold increase in the clinic numbers over 16 years).**
- The CF service also engage with numerous other specialities to manage this multi-faceted condition. Including: Renal, Endo/Diabetes, Gastro/Hepatology, interventional radiology/radiology, rheumatology, ENT, dermatology, psychiatry/ psychology.
- With the evolution of the aging disease and therapies, we now find ourselves reaching out to obstetrics/gynaecology, urology, cardiology, oncology, orthopaedic, general and colorectal surgery, older adult services, smoking cessation to tackle the complex issues of this patient group.

## The Journey of the Therapies and Surveillance Techniques

Modulators:

- 2012-2013: Ivacaftor (Kalydeco TM): available compassionately in Ireland. 25% of our CF patients benefited from this first highly effective mono CFTR modulator.
- 2017: Ivacaftor + Lumacaftor (Orkambi TM): was the first dual CFTR modulator that became available for the most common CF mutation Del508.

- 2019: Tezacaftor + Ivacaftor (Symkevi TM): the second dual CFTR modulator treatment which was beneficial to those unable to tolerate Orkambi and was made available in early 2019. And its use was also expanded to cover other minimal function CFTR mutations.
- 2019: Elexacaftor + Tezacaftor + Ivacaftor (Kaftrio TM): The first triple CFTR modulator and most effective modulator to date became available to our patients.
- Nebulised antibiotic treatments have been extremely effective over the years for suppression of pulmonary pathogens.
- Devices: Physiotherapy devices have also seen great changes over the years
- Diabetes: the use of the Freestyle Libre sensor has given great freedom to patients with CF related diabetes where continuous glucose monitoring can now be achieved.

## The Journey of the Patient

When the unit opened the majority of patients with CF in Ireland were less than 18 years of age, and as of 2021, 72% of patients on the CF Registry of Ireland are >18yrs old. The median survival age in Ireland for 2011 was 39.9, but this has increased to 51.8 in 2021. There has also been a decrease in the number of CF transplants, exacerbations, and need for ports and gastrostomy tubes. As patients are living longer and better as a result of new therapies and models of care, PWCF expectations and experiences are also changing. For example, attending third level education or full-time employment, travelling, applying for mortgages, and family/life planning.

We are also seeing an increase in the number of pregnancies. To date we have 21 Females who have encountered pregnancy, and some more than once. Natural, IUI and IVF are amongst the methods of conception. Planning a safe pregnancy is our main priority and this entails close collaboration with obstetrics in CUMH. We have 15 Males who have fathered children, primarily through assisted fertility due to congenital bilateral absence of the vas deferens in males with CF. Some of our patients are also now grandparents.

As 1 in 19 of us are carriers of a CF gene we offer carrier testing to partners of patients with CF. If the partner is a carrier there is a 50% chance of having a child with CF. Since July 2011, all babies born in Ireland are now tested for CF through the newborn bloodspot screening programme. Since 2012 there is the option of pre-implantation genetic diagnosis which allows genetic testing of embryos with the aim of subsequently selecting CF carrier embryos (non-carrier unavoidable given the patient with CF carrying 2 CF genes) for uterine transfer.



**Pictured above:** Team photo as part of RTÉ initiative highlighting rapid telehealth initiation during the COVID-19 pandemic.

This fertility treatment aims to eliminate the risk of a child with having CF.

Our centre cares for the needs of 18 patients post solid organ, in conjunction with their primary transplant centre. As transplanted patients can have significant extra pulmonary CF disease it is important that they have the CF team support post-transplant.

These new challenges has changed our surveillance practices. For example, the risk of colorectal cancer in adults with CF is 5-10 times higher than the general population, and 25-30 times greater in people with CF after an organ transplant. Since the CF colorectal cancer screening consensus document recommendations were published in 2018, we are now screening (colonoscopy) all patients with CF over 40 years and those over 30 years who have had transplant.

We have also expanded our radiology practices. Whilst traditionally, and on an ongoing basis, in emergent situations the input of interventional radiology as a life saving measure for massive haemoptysis remains, in addition over the last decade in collaboration with Prof Michael Maher and the Radiology department, we have developed a low-dose high-resolution CT thorax protocol that is allowing us visualise the lungs in a very detailed manner whilst simultaneously minimising the radiation exposure to that of a standard chest Xray. This development is changing how we monitor all patients on an ongoing basis.

**The Journey of Research in Unit**

We have also actively engaged with UCC HRB CRF-C to perform and undertake different research studies to further support the growing needs of our patients while also informing the scientific community. Our program is additionally supported by our basic research laboratory, also situated on the Wilton campus. Established thanks to generous philanthropic support, the laboratory

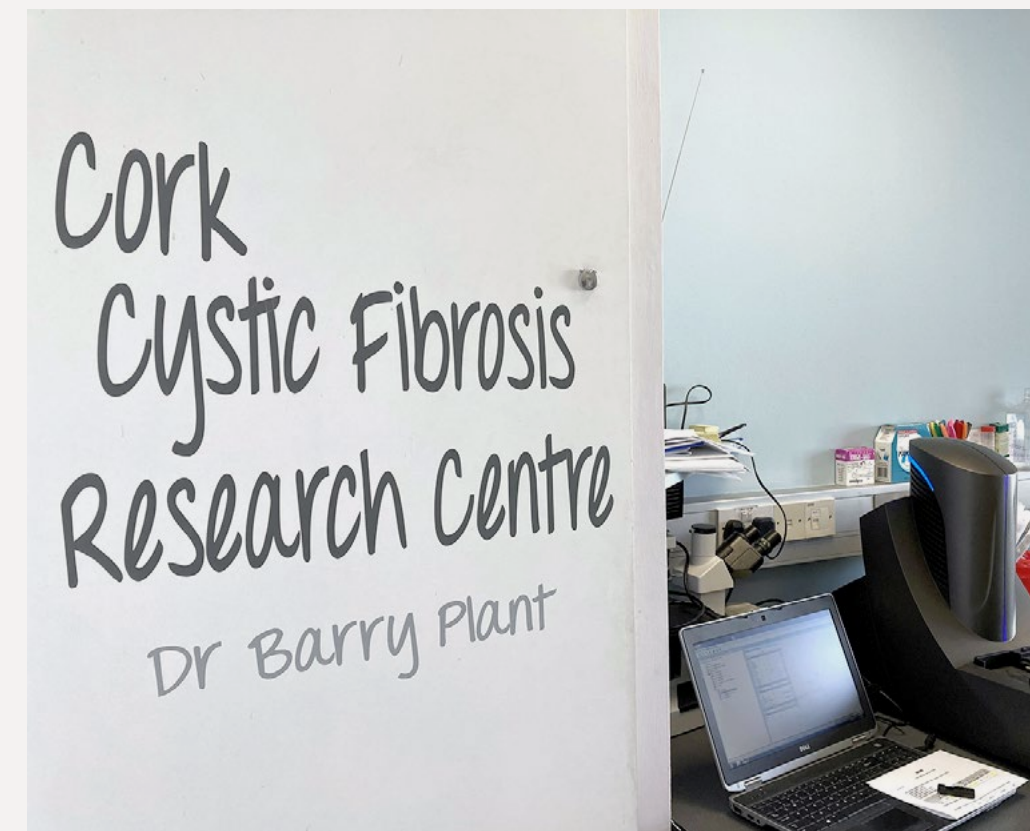
operates in keeping with our philosophy of bench-to-bedside, bedside-to-bench care. Research activities undertaken by the group include: Translational (Understanding inflammation in CF), Real-world (The CORK study; clinical outcomes in real world Kalydeco), Clinical Trials (we have participated in 5 different CFTR modulator studies in the last 5 years), European Funded FP7 (CFMATTERS. We were awarded a 6-million-euro research grant to lead this international research CF collaboration [www.cfmatters.eu](http://www.cfmatters.eu)), and Multi-centre collaborations.

More information on our service, activities, research outputs and publications, and bespoke patient education material can be found on our website: <https://3cf.ie/>

We would like to thank all the patients with CF and their families who attend our service for their ongoing support and cooperation. In addition, we would like to thank Cystic Fibrosis Ireland, The CF Registry of Ireland, Build4Life, and the many local CF fundraisers who have collectively supported both the clinical and the research components of our service since its initiation. We finally remember our patients who have sadly died from CF. Your struggle remains our inspiration.



**Above:** Snapshot of CF Virtual Experience: as part of our transition tool.



**Above:** CF Research Laboratory.



## MAJOR TRAUMA CENTRE AT CORK UNIVERSITY HOSPITAL, WILTON CAMPUS



We are making exciting progress in strengthening our trauma service here at CUH, and the changes we are implementing to support the patients we care for from across the southern 1/3rd of Ireland.

In April 2023, an Taoiseach Leo Varadkar formally launched CUH and the Mater Hospital as the two designated Major Trauma Centres (MTC) for Ireland. Trauma Networks and Major Trauma Centres have been associated with a 20% improvement in survival for patients when implemented in England, and as such, represent a significant step forward in the care for this patient group in Ireland.

Uniquely, CUH has already been providing care for these patients and this catchment for many years. Despite the fact that our catchment area has not changed, the HSE National Office for Trauma Services (NOTS) has invested an additional €7.3 million annually in CUH to recruit 73 new posts to work with you and support this service further. This funding is just the beginning of a phased investment in Trauma services at CUH and nationally over the next 5 years. We're delighted to say that most of these posts will have been commenced in their roles by the end of this year. These new colleagues will improve the capacity and capability of our multi-disciplinary and multi-speciality teams to deliver even better clinical outcomes, and also offer further educational and development opportunities for existing staff. In

many cases, they will also support and strengthen functions delivering benefits well beyond pure trauma.

At a time where the HSE is rightly looking to consolidate and reconfigure a number of specialist services across Ireland, CUH being designated as one of just two major trauma centres in the state, helps secure a more confident and sustainable future for us more generally. The HSE has now committed to CUH being one of Ireland's main providers of inter-related elective, cancer and emergency specialist services going forward, including (though not exclusively) Cardiothoracic, Neurosurgery, Vascular Surgery, Plastic Surgery, Orthopaedic Surgery, General Surgery and Interventional Radiology. Uniquely, we are also the only tertiary hospital in Ireland now with all specialities on the same site, delivering integrated care for adults, paediatrics and maternity on one campus.

This designation also strengthens our case when seeking the much needed infrastructural investment we know we need to support both trauma and non-trauma activities. For example, our ambitious Trauma, Acute & Critical Care (TACC) Tower proposal is presently going through the Strategic Advisory Review (SAR) process, and will hopefully deliver much needed and world class facilities which will benefit all services. There are other projects too which will be delivered over the next 18 months including the new Surgical Hub, a new hybrid vascular &

emergency theatre, the new helipad, a new Paediatric ED, a new CT scanner and 2 new Trauma Bays in ED, a 'Polytrauma Unit' on the 2nd floor, extra inpatient bed capacity, and a new OPD Centre in Curraheen that will support our requirements as an MTC and the hospital more broadly.

The EMB has listened to the understandable concerns raised regarding the potential impact our MTC designation might have on non-trauma, elective and cancer care. We have undertaken to monitor this closely as we go forward and we will act to ensure that other patient groups are not adversely affected. Many of the world's top hospitals (Including John Hopkins, Karolinska, St Georges & Addenbrookes) combine centres of excellence on one site, hosting MTCs, Cancer Centres and other specialist units on one campus, so that each service benefits from the co-location of expertise and infrastructure. That said, there are also risks, if individual services are not

adequately resourced or protected. In terms of mitigating this for trauma, in addition to working on significantly increasing bed capacity at CUH, the 'National Transfer of Care & Egress Policy' (QPulse Ref: EXT-CUH-EMD-1) was developed earlier this year to ensure the 'flow' of patients out of MTCs, to protect the function of the MTC and the broader hospital hosting it.

CUH has been a leader in Ireland in the delivery of trauma care for decades; there is great expertise amongst our staff. The designation as an MTC, and associated funding support, provides us an opportunity to do better what we have been doing for patients, aligning us with international MTC protocols and standards.

**Top left:** Professor Conor Deasy Clinical Director, Emergency and Acute Care, Clinical Lead South Trauma & MTA NOCA. **Top right:** Members of the Emergency and Acute Care Directorate. **Below:** CUH Trauma Staff.







# Pathfinder

Pathfinder Cork is a joint initiative between Cork University Hospital and the National Ambulance Office. The new team was launched on the 27th of March 2023. The service is established to provide alternative care pathways to patients aged 65 or over, with the potential to stay at home following a 999 call.

**Who's on the team?**

Advanced Paramedics, Occupational Therapists, Physiotherapists

**Our main objective is to:**

Assess the clinical needs of the patient and determine their suitability to safely receive their care in the home environment. The team provide rapid response to patients who have dialled 999 and also provide follow up to these patients for up to a week as required.

**Response Team Roles:**

- Service available 8am-8pm Monday – Friday.
- Clinical Care delivered by an Advanced Paramedic + a Physiotherapist or an Occupational Therapist.
- Responds to low acuity 999 calls (alpha, omega).
- Advanced Paramedic led CPG assessment.
- Therapy led assessment of functional ability and mobility.
- Replacement of blocked and dislodged urinary catheters by Advanced Paramedic.

**Follow up team:**

- Up to 7 days case management / rehabilitation in a patient's home by a Physiotherapist/ Occupational Therapist.

**What the Pathfinder service can do?**

- Enable referral to available and appropriate community services e.g. public health nurse, community occupational therapy/ physiotherapy, dementia services etc.
- Clinical assessment post fall; where no serious injuries have been reported to NEOC.
- Facilitate optimisation of mobility including transfers e.g. chair, bed, toilet.
- Minor equipment provision i.e. walking frame, toilet seat, commode etc.
- Delirium identification, prevention, and management.
- Assistance with setup of safer home environments as required.
- Education for patients, families and carers as required.



# FRAILTY TEAM

The Frailty Interdisciplinary Team (FIT) comprises of an inter-professional team which aims to provide high quality evidence based care; tailored to the individual needs of frail and older patients presenting to the ED. This is achieved through the use of comprehensive geriatric assessment, education, treatment and clinical innovation which align with what matters to the older adult and their family/caregivers. FIT has two main functions which include facilitating high quality discharges for older adults from ED and high quality assessment of frailty for those patients who are admitted.



**Pictured above (l-r):** Abby Murphy, GEMS Medical Registrar; Ellen Coakley, Occupational Therapist; Fiona Condon, Occupational Therapist; Lisa Walshe, Pharmacist; Bevelyn Mupada, CNM2; Anya Leonard, Speech and Language Therapist.

## Radiation Oncology Update

Patients will no longer need to travel to Dublin or be referred to the private sector to access this treatment for lung cancer

The department of Radiation Oncology CUH are delighted to have delivered their first Stereotactic Ablative Radiation Therapy (SABR) lung treatment on the 17th June 2023.

SABR is a type of external beam radiation therapy that delivers very high doses of radiation in a very precise manner to a tumour.

This advanced radiotherapy technique reduces the number of radiotherapy treatments that a patient requires while also improving treatment outcome and avoiding major surgery. Patients will no longer need to travel to Dublin or be referred to the private sector to access this treatment for lung cancer.

CUH is the first centre in Ireland to have undertaken Radiotherapy Trials Quality Assurance (RTTQA) Group credentialing for the Lung SABR. RTTQA Group is an independent, multidisciplinary network, with the remit to monitor safety, consistency and accuracy of treatment within clinical trials.

The delivery of SABR treatment in CUH is supported by the use of Surface Guided Radiation Therapy (SGRT). SGRT uses infrared technology to monitor the patient during treatment and to detect and movement or change in position thus improving the accuracy of treatment delivery. We are incredible grateful to Aid Cancer Treatment charity for installing this technology throughout the department.



**Pictured above:** The CUH Lung SABR team is a multidisciplinary team lead by Dr Carol McGibney (Consultant Oncologist, CUH) and Dr Faisal Jamaluddin (Radiation Oncologist, CUH) working with Michael Roche (Principal Physicist, CUH), Kylie Roche (Senior Dosimetrist), Ciara Hegarty (Dosimetrist, CUH), Suzanne Kelleher (Senior Physicist, Medical Physics, CUH), Darren Coen (Senior Medical Physicist, CUH), Paul Collins [Medical Physicist, Radiotherapy, CUH], Joanne O'Dwyer (Clinical Specialist Radiation Therapist), Shirley Collins (Radiation Therapist, CUH), Emma Meagher (Radiation Therapist CUH), Hollie Moffett (Radiation Therapist, CUH), Kate Lawless (CUH Radiation Therapist), Caitriona Little [Senior Physicist Radiotherapy CUH], Christopher Walker (Senior Medical Physicist, CUH), Eamonn Hayes (Principal Physicist, CUH), Patricia Coen (Senior Physicist, CUH) Gillian Grant (Senior Physicist, CUH), Helen Fahy (Dosimetrist, CUH), RB. Ezhilalan (Principal Physicist, CUH). Gillian McNamara (Senior Dosimetrist), Michael Moran (Medical Physicist, CUH) and Eoin McGrath (Deputy Radiation Therapy Services Manager).

# The Department of Radiation Oncology, Cork University Hospital Wins Irish Healthcare Centre Award for Introducing Tattooless Radiotherapy

The Radiation Oncology Department, Cork University Hospital won an award at the Irish Healthcare Centre Awards which took place in the Royal Marine Hotel Dun Laoghaire on Friday the 26th May. The team won the category 'Healthcare Initiative-Large/Teaching Hospital' for the project 'Introducing tattooless radiotherapy: Use of surface guidance to improve clinical practice'.

Surface guidance uses 3D cameras and computer vision to ensure that patients having radiotherapy are in the intended treatment position. The team in CUH have used the surface guidance technology to eliminate the need for permanent skin markings, or tattoos, in radiotherapy. Traditionally tattoos have been required for the accurate and reproducible daily delivery of radiotherapy. Eliminating this requirement has a major benefit for patients. Quote: "Permanent tattoos used in radiotherapy treatment can have a significant psychological impact on patients. They are

a long-lasting reminder of the cancer diagnosis and treatment, a time which patients want to move on from. We are delighted here at Cork University Hospital to offer tattooless radiotherapy to our patients."

The surface guidance technology was generously funded by Aid Cancer Treatment Charity (A.C.T.) who raised just under 1 million, to purchase this new technology that was developed and installed at the Radiation Oncology Centre, Cork University Hospital, by Vision RT. It is recognised that tattooless radiotherapy would not have been possible without the support of ACT.

Aid Cancer Treatment (A.C.T.) is a registered charity founded in 1983 and is a completely independent body whose members give their time voluntarily, thus every cent raised is spent to improve the facilities and services for Cancer Patients in Cork University Hospital (registered charity number: 6416).

Over the past 35 years Aid Cancer Treatment has raised approximately €7 million for the Cork University Hospital and is continuing to raise funds to invest in new developments for cancer services provision in the Cork University Hospital.

"Aid Cancer Treatment's mission is to improve the health and well-being of individuals and families in their cancer journey through the provision of equipment, investment in research and comfort for those living with cancer in our region."

Aid Cancer Treatment Charity are contactable on (021) 49234717



# Acute Oncology Service Update

The Acute Oncology Service (AOS) in CUH is new and evolving. The aim of the AOS is to ensure patients presenting unwell as a result of their cancer diagnosis or from side effects of their cancer treatment are cared for by health care professionals familiar with their history and treatment. Prior to the development of the AOS, the first point of contact for oncology patients presenting unwell to CUH was the Emergency Department. This was all too often a daunting and traumatic time for oncology patients when they were feeling most vulnerable. Cancer is always frightening but during a pandemic it was terrifying.

In March 2020, the AOS launched the Advanced Nurse Practitioner led Acute Oncology Assessment Service in an effort to avoid ED as first point of contact for medical oncology patients presenting unwell. This service was the first of its kind in the Republic of Ireland. Since then it has evolved into a highbred model of care, incorporating access to a range of health care professionals from the wider multidisciplinary teams to meet the complex care needs of this vulnerable patient cohort. Not all patients are suitable to attend the designated AOS pathway and may need to attend ED but the AOS team is mobile and aims to review all patients. The service currently operates Monday to Friday from 8am to 18.30pm. We operate on a referral system and aim to review all patients referred within 24hrs.

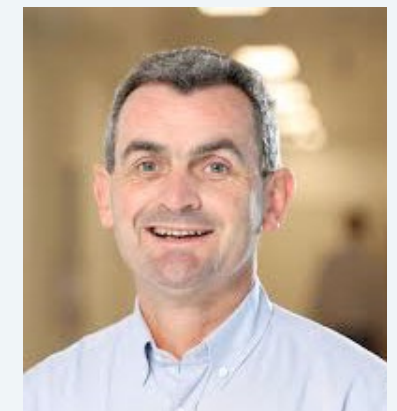
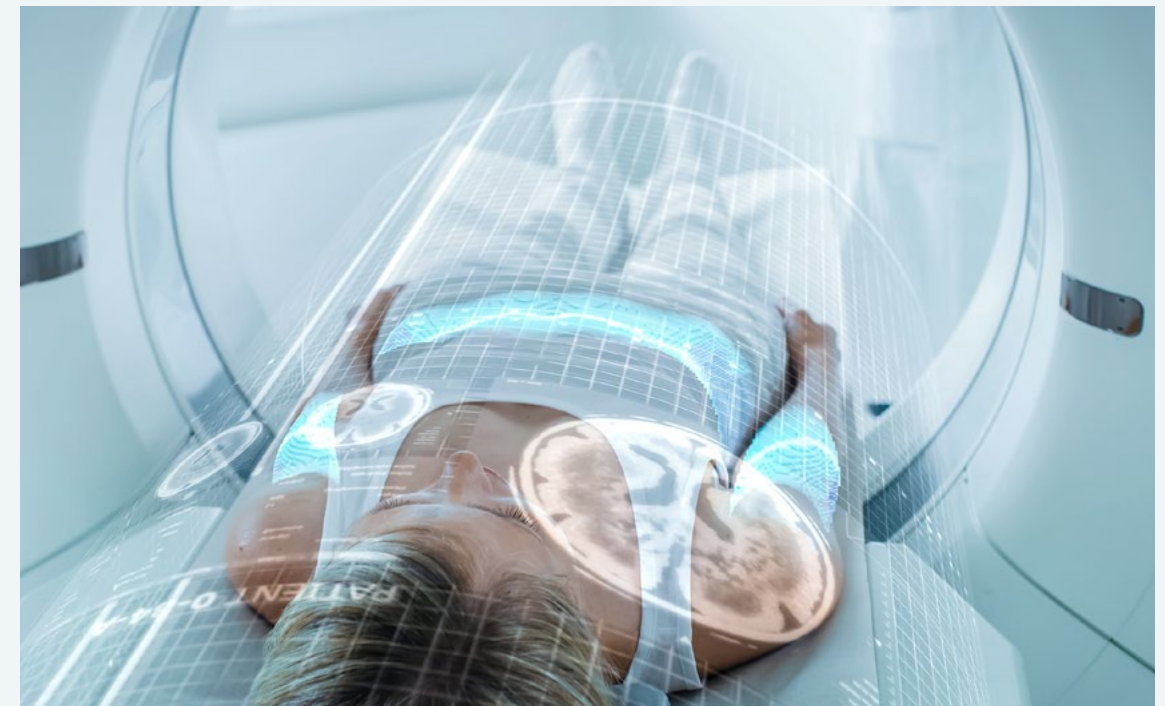
In May 2022 the Clinical Nurse Specialist led Telephone Triage service was introduced for Medical and Haematology patients with a cancer diagnosis on active treatment. This service is a vital resource for patients with

cancer who may have concerns or adverse side effects of their cancer treatment. The CNS in AOS has the clinical expertise to advise, support and make onward referral for in-person review as necessary. The triage line has, for many patients with cancer, been instrumental in preventing the need for review in-person enabling them to have appropriate intervention to meet their care needs in the comfort of their own home.

The AOS was a finalist in the 2021 Health Service Excellence Awards as an exemplary project in the category of Improving Patient Experience. While we have made great progress to date, we are conscious that there is much work to be done to meet the needs of patients with cancer. The immediate goal going forward is to develop and expand the AOS to include the care of patients with haematological cancer.

We would like to take this opportunity to express our gratitude to all our colleagues in CUH who support our service including; Medical Oncology Nurses and Doctors, Haematology Nurses and Doctors, ED, Radiology, Surgical teams, Laboratory, Physiotherapy, Dietetics, OT, Pharmacy, Portering, Catering, Medical teams, Psycho-Oncology, Palliative Care, Radiation Oncology, Bed management and charity office. Just a quick note of thanks to the Linehan and Murphy families who advocate for the AOS service and have undertaken charity fundraising events to help future proof this vital service in CUH.

**Far right centre:** Professor Seamus O'Reilly, Clinical Director of Cancer Services and Consultant Medical Oncologist.



# Cancer Awareness Stay Safe this Summer: Message from our Clinical Nurse Specialist Katrina Fogarty

The SunSmart program is dedicated to reducing skin cancer incidence, morbidity and mortality through targeted prevention and early detection.

As part of the SunSmart campaign the HSE's National Cancer Control Programme, in collaboration with Healthy Ireland and cross sectional partners are working to support people to protect their skin from the sun. The aim of the campaign is to increase awareness of the steps people can take to protect their skin from the sun and reduce their risk of skin cancer.

There are approximately 13,000 cases of skin cancer diagnosed in Ireland each year.

Actions we can take to reduce our risk of skin cancer such as following the SunSmart code and avoiding use of sunbeds.

**Pictured right:** Katrina Fogarty, Clinical Nurse Specialist Melanoma and Sinead Power, Cancer Nurse, joined by volunteers Theresa and Eleanor.

## 5 steps to protect our skin

1. Wear clothing that covers skin and wear long sleeves.
2. Wear Sunscreen.
3. Wear a wide brimmed hat.
4. Seek shade between 11am and 3pm.
5. Wear sunglasses.

Do not deliberately try to get a suntan. Avoid getting a sunburn. Never use a sunbed.



# CANCER DAFFODIL CENTRE

In the CUH Daffodil Centre, the Irish Cancer Society's local cancer information and support centre, you will find cancer nurses and trained volunteers on hand to answer your questions. Here you can find a confidential listening ear and information on everything from local support groups to advice on transport options/ financial concerns. We understand that the information and support needs of those affected by cancer will vary from person to person, so we work with each person, based on their particular needs. The Cancer Nurses provide free and easy to understand information on:

- Cancer types.
- Tests and investigations used to diagnose cancer.
- Cancer prevention and early detection.
- Screening and early detection of cancer.
- Cancer treatments and side effects.
- Local cancer support services.
- End of life services.
- Life after cancer treatment.
- Financial and practical supports.

Together we take the time to listen and provide information, advice and support tailored to your needs in confidence. Enquirers are welcome to browse the many booklets and leaflets we stock or use our internet access point to search through cancer related websites. A nurse or volunteer will be on hand to help you find what you are looking for.

## What other services do Daffodil Centres provide?

In addition to providing free practical information and support. The Daffodil Centre offers patient education programmes for those starting cancer treatments eg Chemotherapy **Chemotherapy | Irish Cancer Society**. The LACES programme is available to those who have completed their treatment. More information on the LACES programme is provided here **LACES Programme-HSE.ie**



**Pictured above and left:** CUH Daffodil Centre Trained Volunteers.

# LABORATORY SCIENCE

On Thursday the 6th July, 2023, the Blood Transfusion Laboratory at Cork University Hospital (CUH) were announced as winners of the “Operational Excellence Award” at the inaugural Life Science Industry Awards ceremony at the Crowne Plaza, Santry, Dublin.

The Life Sciences Industry Awards was established to recognise and celebrate excellence across a wide range of life science sectors in Ireland and was open to entrants operating in the pharmaceutical, biotechnology, medical devices and laboratory markets ranging from indigenous Irish companies to global multinational corporations.

In addition to winning the Operational Excellence award, the Blood Transfusion Laboratory was also successful in being shortlisted as finalists in the “Laboratory Excellence” and “Overall Excellence in Life Sciences” categories.

Against a very strong field of candidates in all categories, an independent panel of expert judges, drawn from academia, business and broader related sectors acknowledged the work and commitment of the team (that includes Medical Scientists, Haemovigilance Officers and Consultant Haematologists). This is a fantastic achievement by all the staff in the laboratory and worthy recognition of their efforts to enhance patient safety, drive continual improvement, advance service developments and operational excellence in the delivery of optimal healthcare to patients in Cork and the wider southern region.



**Pictured above:** Operational Excellence Award winners, includes Medical Scientists, Haemovigilance Officers and Consultant Haematologists.



## Opening of the latest Digital PET/CT scanner

**Pictured left:** David Donegan, CEO with members of the Diagnostics & Therapeutics Directorate.

CUH Wilton is one of 2 HSE sites in the state with this world class technology, which in addition to being capable of doing regular CT scans, and PET/CT scans, also allows us to do PSMA scans for prostate cancer for patients from across Munster and the South of Ireland.



**Pictured left (l-r):** Marie Cremin CNM2 Radiology, Roisin Kelly CNM2 Thrombectomy Co-ordinator Kavitha Chacko Staff Nurse Shilpa Manoj Staff Nurse Emer Fitzgerald Staff Nurse Damon Andrews Clinical Specialist Radiographer Sarah Daly Staff Nurse Noreen O’Connell CNM2 Radiology Amanda Bernardino Staff Nurse.

Above are some nurses and radiographers in the Neuro-interventional Suite in the Radiology Department of Cork University Hospital. This team, led by Dr Gerry Wyse, Prof. Noel Fanning and Dr. Aidan Hegarty (Consultant Neuro-radiologists), works in partnership with the Stroke team in CUH, and provides 24/7 emergency stroke intervention care (Thrombectomy) to the people of Munster. In the year up to August 2023, this team, led by performed 142 thrombectomies, which was a 18.3% increase from the same time frame year on year. This team in the interventional suite also do a significant amount of treatment for aneurysms and many other neurosurgical interventions, and are also on call 24/7 for Vascular interventional emergencies.

# Cork University Hospital Interventional Radiology Team: Time is Brain

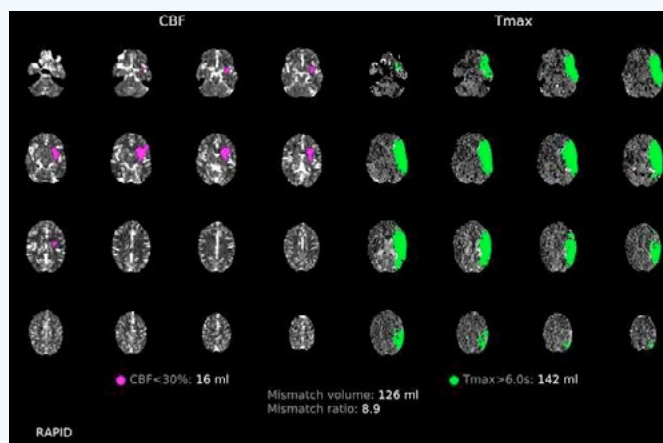
There's a lot that can be done for stroke these days. One recent major advance is a procedure called thrombectomy. This is a relatively new therapy for the treatment of severe strokes caused by a blood clot in a major blood vessel in the brain. It has revolutionised the treatment of big strokes.

Thrombectomy is an x-ray guided interventional procedure where Neuroradiologists use specialist equipment to mechanically remove the clot blocking a major artery within the brain. It involves a thin plastic tube (catheter) being inserted through an artery in the groin and guided to the affected blood vessel in the brain. A device is moved through the catheter to the site of the blockage to remove the clot and re-establish blood flow to the affected part of the brain.

Thrombectomy is only suitable for some patients with stroke (10-15%). The key is to find these patients quickly. This is where advanced CT imaging is used to triage stroke patients likely to benefit from thrombectomy: patients with an occluded artery supplying an area of brain that can regain normal function if blood flow is restored quickly enough. CT angiography is used to show the blocked artery and CT perfusion to show if the brain is still alive and can be saved.

Thrombectomy works. In eligible patients, thrombectomy up to 24 hours from a stroke has been shown to reduce the death rate from stroke by half and almost double the rate of recovery to complete independent living. Not every patient will

benefit (because some brain damage has already happened); however, 8 out of 20 patients that undergo thrombectomy will recover with less disability than those who do not have the procedure. Speedy treatment is critical for best outcomes. On average, for every minute you save in removing a clot, you gain a week of healthy living post stroke. Time matters: save a minute, gain a week. In addition to saving lives and reducing disability, thrombectomy is hugely cost effective and saves money.



Advanced brain imaging helps identify more patients who are eligible for thrombectomy. CT perfusion shows areas of the brain that are already damaged (pink) and areas that can be saved if blood flow is restored quickly enough (green).

Currently thrombectomy is carried out in two centres; Beaumont Hospital in Dublin and Cork University Hospital. In Cork University Hospital this team consists of Consultant Neuroradiologists Dr Gerald Wyse, Professor Noel Fanning, and Dr Aidan Hegarty. Alongside a team of radiographers and nursing staff, this crucial acute stroke treatment is offered

24 / 7 to the population of Munster. In 2021, when this service went full time, CUH performed 97 thrombectomies. In 2022 there was a 50% increase in patients (146 cases). It is expected that these numbers will continue to increase year on year.

According to international guidelines, based on high quality evidence, thrombectomy is the standard of care for patients with large vessel occlusion (LVO) leading to acute ischemic stroke up to 24hrs following the onset of symptoms, as long as the patients meet certain clinical and radiological criteria. Emergency endovascular thrombectomy (EVT: clot retrieval) is a procedure performed by interventional neuroradiologists to remove blood clots from an occluded intracranial vessel in patients with an acute large vessel occlusion stroke, restoring blood supply to the affected brain tissue.

Time is brain, and it is imperative that this brain emergency be attended to as soon as possible by the Neurointerventional Team.

In Cork University Hospital this team consists of Consultant Neuroradiologists Dr Gerald Wyse, Professor Noel Fanning, and Dr Aidan Hegarty. Alongside a team of radiographers and nursing staff, this crucial acute stroke treatment is offered 24 / 7 to the population of Munster. In 2021, when this service went full time, CUH performed 97 thrombectomies. In 2022 there was a 50% increase in patients (146 cases). It is expected that these numbers will continue to increase year on year.



**Pictured above (l-r):** Sarah Ní Chathasaigh, Clinical Specialist Radiographer, Damon Andrews, Clinical Specialist Radiographer, Róisín Kelly, Thrombectomy Coordinator, Professor Noel Fanning, Consultant Neuroradiologist, An Taoiseach Micheal Martin, Dr Gerald Wyse, Consultant Neuroradiologist, Ines Saramago, Stroke Clinical Nurse Specialist, at the official opening of the Stroke Unit in CUH.



**Pictured above (l-r):** Professor Noel Fanning, Dr Aidan Hegarty, Dr Gerry Wyse, Consultant Neuroradiologists CUH.

# Revolutionising Fracture Care in Cork University Hospital with Virtual Fracture Assessment (vFAC) Clinics

The Virtual Fracture Assessment Clinic marks a transformative milestone in fracture care delivery at Cork University Hospital.

It ensures that patients with stable injuries receive timely and personalized care without the need for physical visits.

These clinics were originally pioneered in Glasgow, Scotland in 2011 and they started in Ireland in 2016. As a result of the Covid-19 pandemic there has been a default national implementation, where we have gone from 2 sites to 18 sites throughout the country.

Since March 2020 the Cork vFAC clinic has seen 20,329 patients, with only 30.3% requiring an onward face to face fracture clinic appointment.

The vFAC clinic represents an important collaborative innovation with our Emergency Medicine colleagues. By using agreed evidence-based standard protocols, we enable patients to receive consistent treatment plans.

This healthcare delivery model stresses a team-orientated approach to patient care. Our team consists of a dedicated Nursing, Physiotherapy, Occupational therapy and Administration colleagues, guided by the Orthopaedic Consultants.

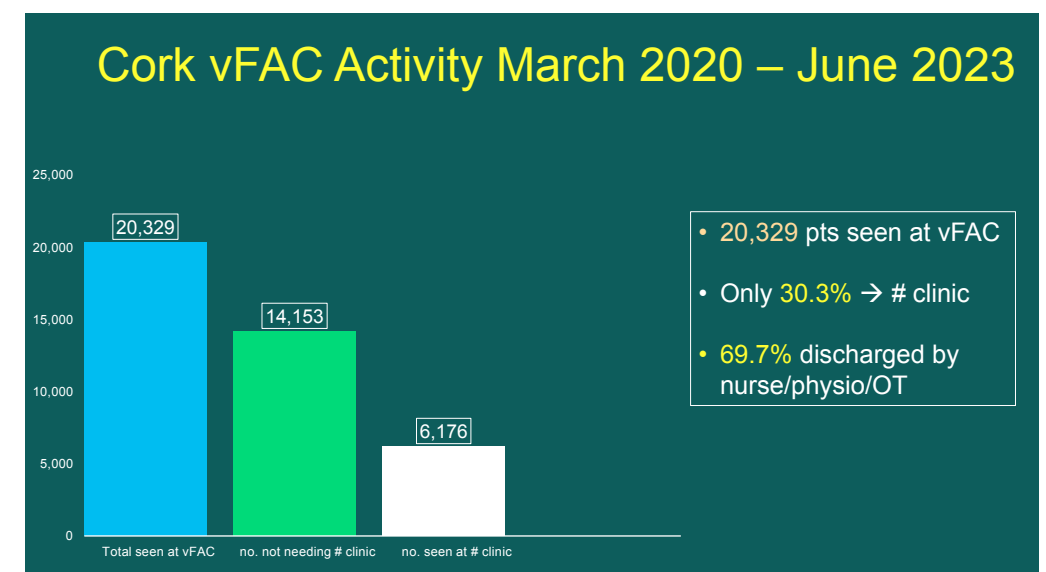
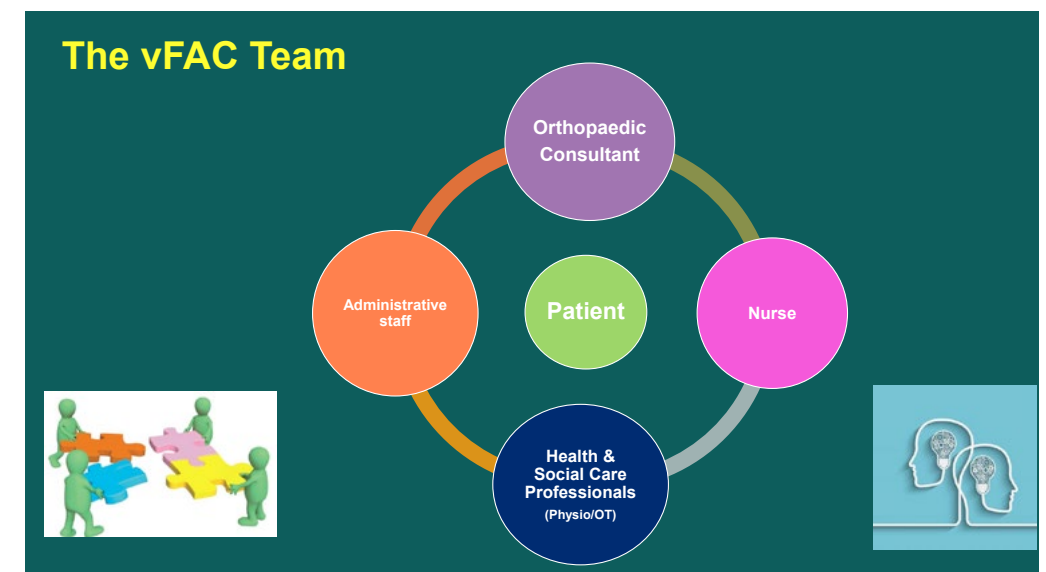
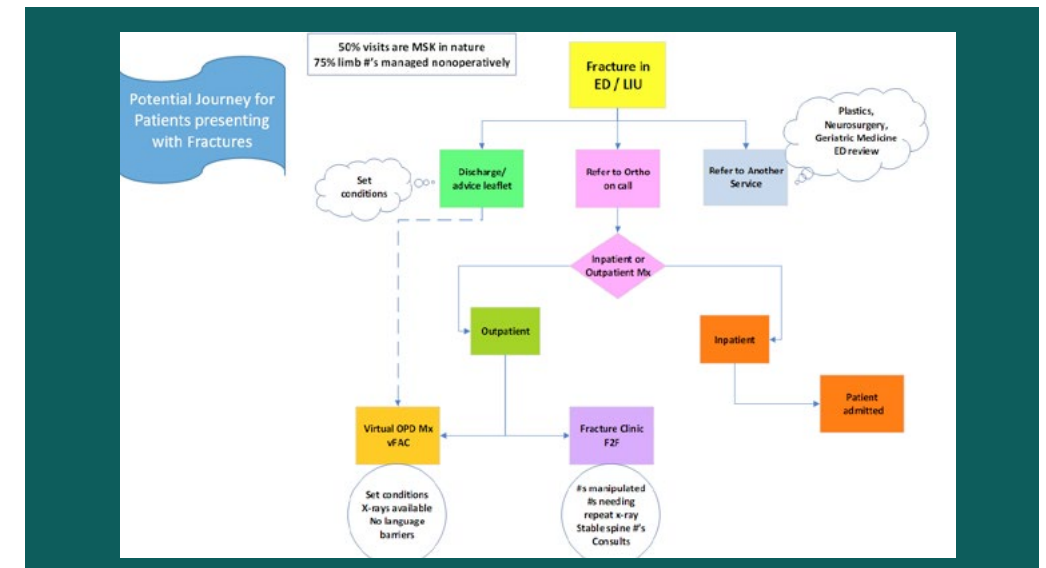
With this team, the vFAC clinic expedites the review process allowing patients to receive expert evaluation and early therapy recommendations promptly. This accelerated care pathway not only enables quicker recoveries, but also better outcome and improved patient satisfaction while building Emergency department and Fracture Clinic capacity through enhanced patient flow.

The vFAC Clinic not only benefits patients but also contributes to significant cost savings. For each in person visit avoided we save €436.40. This helps to optimise resource allocation and promote financial efficiency. Patients can save on transportation, parking costs and potentially avoid the need for time-consuming visits further enhancing the overall patient experience.

Moreover, adopting this virtual clinic aligns with our commitment to environmental sustainability, minimising patient travel translates to reduced carbon footprint and CO2 emissions, contributing to a greener and healthier planet.

At CUH, we are striving to be at the forefront of innovation, continuously exploring ways to enhance our services for patients and staff. The Cork vFAC clinic is currently the National Clinical Advisor on this service for Ireland.

We look forward to reporting on our upcoming enhanced electronic version of this clinic, which will further streamline our fracture care processes, making them more efficient, patient-centric, and data-driven.





## Paediatric Assessment Unit



### Paediatric Assessment Unit Cork University Hospital

- The PAU offers a rapid-access assessment service for children under the age of 16 who meet our referral criteria, detailed below.
- GP referral only
- 2 appointment slots will be reserved daily for referrals from the Emergency Department
- The PAU is open between 08.30-16.00 Monday - Friday (except Public Holidays)

The PAU is located in Seahorse Day Ward

Contact PAU on 0214922449 for general enquiries

1. GP to ring 0874108074 to speak with a Consultant Paediatrician and make a referral

2. An appointment will be made to see a Consultant Paediatrician or Advanced Nurse Practitioner

3. Send a referral letter via fax to 0214922592

## Farewell to our Colleague

We recently bid a fond farewell to our colleague Margaret Mary Barry, CNM1 PAU (Paediatric Assessment Unit), on the 18/07/2023 after her many years of service to children and their families.



## PAEDIATRIC DIABETES TEAM

The paediatric diabetes team in Cork University Hospital cares for over 500 children with Type 1 Diabetes and a handful of children with other forms of diabetes.

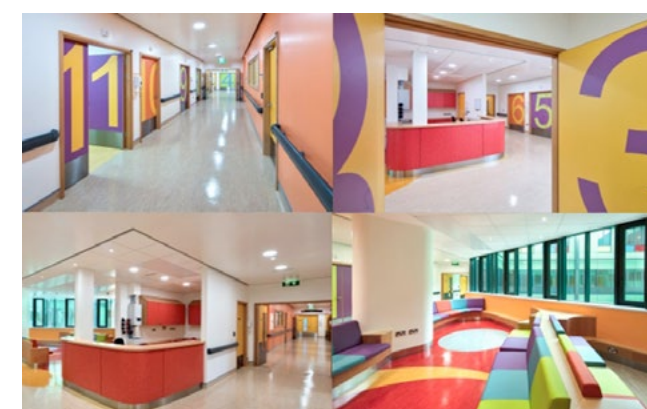
Out of this large number of children with Type 1 Diabetes, there is over 350 children on insulin pumps with the remaining using multiple daily injections of insulin.

The diabetes team partake in weekly diabetes clinics, carry out nurse led reviews, run pump schools, structured education programmes, partake in transition clinics alongside our colleagues in the adult service and run outreach clinics in South Tipperary General Hospital - with a view to extending these outreach clinics to Kerry General Hospital in the coming year.

A large part of our work is educating and supporting newly diagnosed children and their families on the children's ward with Diabetes.

A phone and email service is ran 5 days a week for children and their families in which we offer support and advice and troubleshoot any problems that they may be having at home.

On June 23rd the CUH paediatric diabetes team held its first outreach clinic at Tipperary University Hospital. This was the final step in bringing the full multidisciplinary diabetes programme from CUH to all children in the catchment. Since January 2023, all children and adolescents with new onset type 1 diabetes are transferred to CUH for initial standardised education. We now provide ongoing specialist paediatric diabetes care, including outreach clinics close to the families' homes. A similar model is under development for children attending University Hospital Kerry, with Tralee outreach clinics due to start in March 2024.



# STAFF AT CUH MARKING NATIONAL HSCP DAY 2023

National HSCP day took place on the 19th of April this year. CUH HSCP committee marked the day by holding a raffle and information desk at the main reception with each discipline displaying their information banner. The committee also hosted a webinar from the national HSCP office in the auditorium with guest speaker Ruth Kilcawley, Development manager in the National HSCP office (NHSCPO).



# National Health & Social Care Professional Official (NHSCPO) engagement July 2023

On the 11th of July the HSCP committee met with Deirdre Kenny, project officer, National HSCP office (NHSCPO). Deirdre outlined how the office has developed over the years since its establishment in 2017 to date. Deirdre also discussed the national HSCP strategic framework HSCP Deliver. This framework is designed to support HSCPs, who make up 25% of the healthcare workforce, to maximise their impact for the benefit of service users.

The session was a positive starting point for opening communication and engagement with NHSCPO to facilitate the strategic plan implementation with CUH HSCPs in due course.



**Pictured above:** Deirdre Kenny, project officer, National HSCP Office (NHSCPO) visiting with HPSC staff at CUH.

## 100 FEES completed at CUH

The Speech and language Therapy department achieved a major milestone with 100 Flexible Endoscopic Evaluation of Swallowing (FEES) studies completed. This service was introduced to CUH in 2021. FEES is an objective bedside swallow assessment. Best practice guidelines recommend FEES as the gold standard in complex dysphagia assessment, due to its availability at the bedside and suitability for medically compromised patients.

The service is led independently by a team of 7 Speech and Language Therapists in CUH, with support from our ENT colleagues in SIVUH.

FEES involves the passage of a nasendoscope transnasally into the pharynx to directly visualise the

anatomy and physiology of swallowing and voice. The purpose of this new service is to promote earlier diagnosis and management of dysphagia. The use of FEES at the bedside ensures more timely access to diagnostics, as well as ensuring improved patient outcomes, patient satisfaction, and participation in rehabilitation.

The SLT team are currently conducting an audit to review and evaluate service outcomes. Since introduction of the FEES service, SLT have been able to provide earlier diagnosis of dysphagia, improved rehab goal setting, improved accuracy and appropriateness of onward referral to ENT and inform decision making regarding tracheostomy weaning and indications for enteral feeding.



**Pictured above:** The Speech and language Therapy department Team at CUH.

## Physiotherapy

Our team raised over €86,000 for the charity. Some of the events included in the fundraising for the London marathon runners included a golf classic, a cookery demonstration, a few cake sales, pub quizzes, a Highland hike, plant sales & many others to help reopen our hydrotherapy pool & purchase equipment required for patient treatment.



**Pictured above:** CUH Physiotherapy Staff.



## Medical Social Work Department

The Medical Social Work Department have enhanced the hospital memory boxes for children and adults which often forms an important part of End of Life care for patients and their families in the hospital.

## Speech and Language Therapy International Publication

We were honoured to be part of this inaugural international publication 'Case studies in tracheostomy and ventilator dependent patients', Editors Roxann Diez Gross, Ph.D and Kristin King, Ph.D. Our case study 'Establishing Phonation/or Verbal Communication in Challenging Patients Across Settings' in an Adult with Head and Neck Cancer and Spinal Cord Injury highlights the benefits of a multidisciplinary team (MDT) working closely together putting the patient and family at the centre of care. Despite obstacles faced, the MDT worked 'outside the box' to successfully meet the wishes of a dying patient.

**Pictured right (l-r):** Margaret Mary Smith, Clinical Specialist, SLT; Ruth Mulcahy, Senior SLT, who contributed a case study to the book.



# Mallow General Hospital Extension

Mallow Hospital extension to be finished by the end of the year. The new build at Mallow General Hospital will see the numbers of beds increase from 37 to 71.



**Pictured above:** David Donegan, CEO Cork University Hospitals Group with Claire Crowley, Hospital Manager at Mallow General Hospital.



# Minister Stephen Donnelly visits Bantry General Hospital (BGH)



The Minister visited BGH on Friday 16th June 2023 where he was warmly welcomed and updated on progress with new developments and unique contribution to the people of West Cork and the CUHG.

**Above and left:** (Minister of Health Stephen Donnelly meets Laboratory staff during his visit to Bantry General Hospital in Bantry, Co. Cork. Pic Michael Mac Sweeney/Provision)



**iPM Team:** Laura Cullinane, Clodagh Macklin, Claire Irwin, AnnMarie Dineen.

The ICT Department at CUH is a focused, flexible unit that manages the ICT infrastructure and business/clinical applications at CUH, MGH, BGH and CUMH. We work in partnership with the HSE eHealth and Disruptive Technologies Office for the delivery of technology to support healthcare. The systems in use in CUH include a number that are hosted and managed centrally by the HSE, a number that are hosted and managed locally within CUH, and some locally developed applications. The following is a summary of recent developments.

**Ger Moloney ICT Manager CUHG**



**iCM Team:** Ber White, Fiona Verling, Ummi Fallon, Charles Martin.

## IPM – Patient Administration Management System Two Way Text Messaging

A pilot is currently in the planning and testing phase with initially one clinic within CUH with planning to roll this out across all clinics. This will enable reminder text message to be sent to the patient for OPD appointments and will allow the patient to text back confirming if they can attend or not. This will hopefully help to reduce patient DNA's attending the OPD department!



**ICT Infrastructure Team:** Gavin Fahy, Derek Martin, Jack Karbowski.



**BI Team:** Litha Anthony, Dave Doyle.

## iCM

iCM continues to expand and grow to support over 450 concurrent daily users across the SSWHG.

We support:

- Cardiology Imaging for CUH\BGH\MGH\UHK.
- Radiology Imaging for CUH \ BGH \ MGH \MUH \SIVUH and UHK.
- Pathology Results from All 5 labs with UHK newly added.
- Over 60 electronic referrals across all of our sites.
- Full Order Comms for Diagnostics.
- Integration with TPRO Documents from CUH\BGH\MGH\CUMH\UHK\SIVUH.

## Healthirl Migration

The purpose of HealthIRL is to migrate all users, devices and mailboxes from the 8 regional based domains to a central shared domain (database). This allows the HSE to have a central single view of all resources, which enables best practice identity management and access management controls, with centralised governance.

We are currently in the planning and testing phase for CUH.

## CPV – Consolidated Patient View

A CUH ICT in-house solution! This is a new project currently rolling out to end users/clinical staff across the hospital:

Multiple system outputs consolidated in one solution

- iCM Clinical Information
- iPM Patient Demographics
- DTOC KPIs

A joint effort between all teams in the ICT Department rolled out on our current Business Intelligence platform.

## WELCOME TO OUR NEW STAFF



**Professor Jack Gleeson**  
Medical Oncology  
Department

We are delighted to welcome **Professor Jack Gleeson** as our Consultant Medical Oncologist at Cork University Hospital and Associate Professor in Medical Oncology at UCC.

He is a UCC graduate (2012, Hons) who completed his Medical Oncology training in Ireland through the RCPI before being awarded the Irish Society of Medical Oncology (ISMO) Advanced Oncology Fellowship award in 2018 to undertake a fellowship in

Memorial Sloan Kettering Cancer Center (MSKCC), New York, which he completed in January 2021. He subsequently worked as a Consultant Medical Oncologist in CUH (locum, 2021) and Consultant Medical Oncologist in Kidney and Hepatobiliary cancers at The Christie hospital in Manchester, UK (2022) before returning to his current role in March 2023.

Prof Gleeson has had a number of high profile numerous publications

and awards in his career to date, including the UCC Ainsworth Scholarship, Merit Awards at the ASCO GU Cancers Symposium and International Kidney Cancer Symposium, as well as the prestigious ASCO/Conquer Cancer Foundation Young Investigator Award (YIA) for 2021/2022. Jack is interested in patient-focused research with a particular focus on predicting response to treatment and treatment efficacy as well as

the genetic determinants of cancer in the genitourinary cancer and brain tumour research spaces. His genitourinary research has primarily focused on kidney and testicular cancers, as well as survivorship care, while his brain tumour research focuses on high-grade glioma. He is also interested in the development of novel therapies for cancers with limited treatment options such as Glioblastoma (GBM).



**Professor Aisling Barry**  
Radiation Oncology  
Department

**Professor Aisling Barry** is Professor and Chair of Radiation Oncology at University College Cork and a consultant radiation oncologist at Cork University Hospital. She is the first radiation oncologist to hold such a position in Cork.

Professor Barry has recently returned from Toronto, Canada, where she worked as a radiation oncologist in the Radiation Medicine Program at the Princess Margaret Cancer Centre (PMCC) and Assistant Professor in the Department of Radiation Oncology at the University of Toronto. She was clinical lead of the Palliative Radiation and Oligo-metastatic Program and a member of the breast and gastro-intestinal groups prior to her departure.

Professor Barry received her undergraduate education at Trinity College Dublin (2005) and completed her radiation oncology specialty training through the RCSI/ St. Luke's Radiation Oncology Network. She subsequently completed fellowships in breast cancer radiotherapy (2014-2015) and stereotactic body radiotherapy (SBRT) - specifically for liver and lung cancers, at Princess Margaret Cancer Centre (2015-2016). She has also completed a Masters in Clinical Epidemiology at the University of Toronto on health-related quality of life outcomes in patients with oligo-metastatic disease. Professor Barry is a recipient of numerous awards including a Dr Richard Steevens' HSE award which enabled her to

complete dedicated SBRT fellowship training at PMCC, a Conquer Cancer Foundation of ASCO Merit Award at GI ASCO for her work on the use of SBRT as a bridging therapy to liver transplant and an Annual Lynn Sage Breast Cancer Symposium Award.

Professor Barry has expertise in the delivery of SBRT, specifically in the setting of primary and secondary liver malignancies, and oligo-metastatic disease.

She is currently a member of the liver radiotherapy clinical guideline group at the American Society for Radiation Oncology, co-authoring the first radiotherapy guidelines on the use of radiotherapy for the management of primary liver cancer. She has

delivered multiple invited national and international talks on this topic.

She is an accomplished researcher and has led numerous studies at PMCC, including investigator-initiated studies on the use of SBRT in the setting of oligo-progressive cancers, and the use of virtual biometric monitoring in patients receiving palliative radiotherapy. Professor Barry has also led and been co-investigator on a number of grants applying her research interests in the clinical setting. She is heavily involved in education and previously co-lead of the internationally renowned liver SBRT/IGRT educational course in the Accelerated Education Program at PMCC, and has supervised numerous resident and fellow research projects.



**Dr Louise Reid**  
Department of Psychology

**Dr Louise Reid** took up the post of Principal Psychology Manager in July 2023, having relocated to Cork from Edinburgh.

Louise was awarded a First Class Honours BSc Psychology degree from the University of Edinburgh in 2003. Following this, she worked for the university in a research capacity. She went on to complete her Doctorate in Clinical Psychology at the University of Glasgow in 2009, followed by a

Post-Graduate Diploma in Clinical Neuropsychology in 2014. She has also completed the Qualification in Clinical Neuropsychology and has been listed on the British Psychological Society's Specialist Register of Clinical Neuropsychologists since 2014.

Louise has predominantly worked in the field of neurorehabilitation since completing her doctorate. She has worked in inpatient, community and outpatient services. For the past three

years, she also worked in an inpatient Amputee rehabilitation unit.

She has acted as a reviewer for the journal Brain Injury and contributed to the University of Edinburgh Doctorate in Clinical Psychology training programme, both as an Honorary Lecturer and supervisor to Clinical Psychology trainees.

Louise's family originates from West Cork and she considers Bere Island to

be a second home, having spent all her childhood summer holidays there. She looks forward to seeing her own children enjoying the beauty of Bere Island and Ireland.

# 2 IN A ROW ... SCRUBS ARE IBEC WORKPLACE CHOIR OF THE YEAR AGAIN

There was much joy and celebration when SCRUBS were declared the IBEC Workplace Choir of the Year at the recent 2023 Cork International Choral festival. This is the 2nd year in a row for SCRUBS to win this prestigious award ,having been finalists each year since 2016.

Formed in 2015 to take part in the Workplace choir competition, SCRUBS Membership is made up of current and retired staff working on the CUH Campus. This includes Cork University Hospital, Cork University Maternity Hospital, Cork University Dental School and Hospital and Adult Acute Mental Health Unit. We currently have approximately 60 members drawn from various departments across the campus under the tutelage of musical director Patrick Dalton and accompanist Joseph Norton. Our rehearsals take place between September and May on Tuesday evenings between 5 and 7pm; this is an ideal way of unwinding after a stressful working day. It is also a great way of meeting colleagues from other departments in a relaxed environment as well as enabling retired staff to maintain a link with the hospital.

Since its formation SCRUBS has taken part in numerous events both within

and outside the CUH Campus. Every year, we take part in Feis Maitiu , Cork International choral festival, Christmas Carol services and Inter-choir nights. The choir has performed at various HSE events, happy times such as Nurse Graduations ,Charity Ball and Wellness performances as well as the sad occasions of memorial services for deceased colleagues.

One of the choirs highlights to date was in 2017 when we were invited to take part in Britain's Got Talent , progressing through the preliminary rounds to sing before the judges in Birmingham and getting 4 yesses!!! Although we didn't make the televised final heats , it was a still great experience which was much enjoyed by all concerned.

Another major event was representing the hospital in the Advent Singing Festival in Vienna in December 2018 where the choir was very well received. More great adventures are expected when we travel to Rome in March 2024 to take part in 10th International Choir and Orchestra Festival. Before that, SCRUBS will be hosting a major inter-choir night in November which will include local and visiting choirs.



While the choir is currently taking it's usual summer break, we are already looking forward to resuming rehearsals on Tuesday 29th August at 5pm in the Staff dining room. New members are very welcome to come along and try out the choir. No previous experience is necessary and you don't need to be able to read music as line tapes are provided. All you need is a basic singing ability (even if it was back in your schooldays) and a willingness and positive attitude to join in the fun. While we aim for regular and punctual attendance at weekly rehearsals ,we readily accommodate staff on shift and extended working hours. If you want any more information see the choir website [www.scrubschoir.ie](http://www.scrubschoir.ie) or contact any of the choir members.

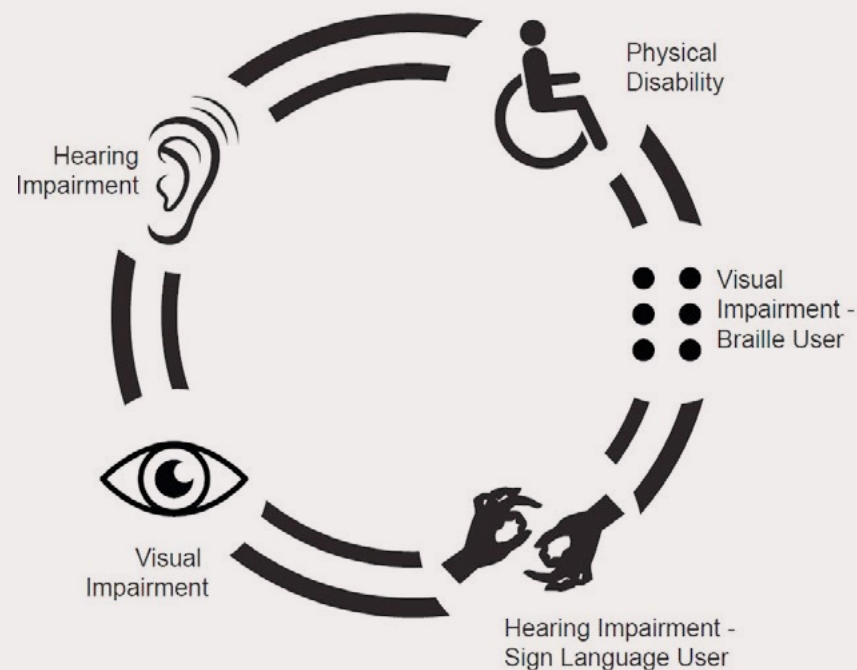


**Above top:** CEO David Donegan congratulating the choir during an impromptu performance in the sun.

## Accessibility Group

The CUH Accessibility Group is a multidisciplinary group with staff working in many departments across the hospital. Over the coming months we will be launching an accessibility sticker for medical charts, holding an Accessibility morning with a manned stand at the main reception and also looking for any suggestions for projects that will improve the patient experience in CUH.

The purpose of the Group is to provide assistance and direction to CUH in the development and implementation of policies, guidelines and quality initiatives relating to people with disabilities. The Disability Act 2005 places significant obligations on Public Bodies to make their buildings, services and information more accessible to people with disabilities. With this in mind the Group will strive to ensure that all staff members are aware of this commitment and are able to contribute to its successful delivery and awareness of their individual responsibility towards ensuring accessible services for all.



## Green Campus & Sustainability

### Update on CUH Staff Park & Ride

In April we launched a new CUH / CUMH staff Park & Ride (P&R) service to help our people with challenges currently being experienced regarding parking capacity on site. This was established as a six month pilot, free of charge to staff.

The service runs from the HSE Logistics Hub on Model Farm Road to CUH and now has a regular cohort of staff using it on a daily basis. Feedback from staff has been instrumental in providing and improving this service - including the extension of the service to provide additional bus transfers for those finishing work in the evenings (from 7:40pm to 9:20pm).



### Additional departures commencing Monday 24th July

We are pleased to announce that we have secured agreement with our bus service to provide additional services for those starting work around 12 noon. The additional services will depart Model Farm Road at 11:15am and 11:30am each day.

The full updated timetable in effect from Monday 24 July is shown below:

Parking at CUH continues to be a challenge, and we are working to provide solutions for staff, patients and visitors. We look forward to keeping you updated with news of further initiatives in the near future.

For further information please refer to our CUH Staff Parking Guide located on the Staff Directory:

[http://10.54.129.212/Menu\\_ApplicationForms/Staff\\_Info/CUH%20Staff%20Parking/CUH%20Staff%20Parking%20Guide.pdf](http://10.54.129.212/Menu_ApplicationForms/Staff_Info/CUH%20Staff%20Parking/CUH%20Staff%20Parking%20Guide.pdf)

For any additional queries or feedback feel free to contact us at:

[CUH.Parking@hse.ie](mailto:CUH.Parking@hse.ie)

## Green Campus: Introducing Reusable Coffee Cups In The Canteen

The wellbeing of the planet is to the fore of the agenda of CUH Green Campus Committee who are constantly striving to reduce the hospital's impact on the planet. After much planning and hard work behind the scenes, the committee is delighted to announce that single-use coffee cups are coming to a close in the main canteen. A "Keep Cup" system is

soon to be introduced along with designated rinsing stations. This is a progressive step forward in the management of environmental waste and also a huge financial saving for the hospital as disposable cups come at a big cost. It's a win all round. Every day and in every way we must work together to keep planet wellbeing part of all our decisions.



# Junior Doctor Awards

CUH End of Year Medical Awards were held in the CUH main auditorium on Wednesday 5th July.



**Pictured above (l-r):** Dr Mairead O'Donnell: Best Medical SHO Presentation (Prof Denis O'Sullivan Janssen Silver Medal). Dr Hannah Higgins: Medical SHO of Year (Joanne O'Donovan Memorial Medal and educational bursary). Dr Geolain Rust: Medical Registrar of the Year (Pat Beausang Memorial Medal and educational bursary). Dr Bridget Sheehan: Intern of the Year (Janssen Gold Medal).



**Above (l-r):** Dr Clifford Kiat, Dr Mairead O'Donnell, Brita O'Reilly, Janssen Market Access and Government Affairs Director.

Dr Mairead O'Donnell, winner of the Prof Denis O'Sullivan Janssen Silver Medal for Best Medical SHO Presentation.



**Above:** Dr Bridget Sheehan winner of the Janssen Gold Medal for "Intern of the Year", with Brita O'Reilly, Janssen.

Bridget received the most votes from Consultants and Registrars - working on services where Interns are attached - to win this prestigious award. It is the 35th year of this Intern award. We are extremely grateful to Janssen for sponsoring the gold and silver medals - which make these awards possible each year.



Dr Hannah Higgins, voted the 'Best Medical SHO' by her peers, receiving the Joanne O'Donovan Memorial Medal and educational bursary from Prof Liam Plant.



Dr Geolain Rust, voted the 'Best Medical Registrar' by her peers, receiving the Pat Beausang Memorial Medal and educational bursary from Prof Liam Plant.

## CUHG Master Classes

Compassionate Leadership for High Quality Care by Professor Michael West, CBE Lancaster University. A series of quarterly senior leadership events have commenced in 2023 for the top 250 clinical and administrative leaders from across CUH Group to discuss key issues and developments across our services as OneTeam.



## OECI (Organisation of European Cancer Institutes)

### Oncology Days Event in Paris 14th - 16th June 2023

This prestigious event was attended by more than 350 participants from across Europe. Together with UCC, we are members of the Office of European Cancer Institutes (OECI) and planning to undertake accreditation as an OECI Cancer Centre in 2024.



## Clinical Pastoral Education

The presentation of certificates from the latest Clinical Pastoral Education (CPE) programme at Cork University Hospital took place on 20 July following an intensive three months of training in spiritual and pastoral care. CPE is an internationally recognised training programme for healthcare chaplaincy and specialised pastoral ministry and has been in place at Cork University Hospital since 1982. The programme is run and directed by Dr Daniel Nuzum and is the educational side of the Chaplaincy Team at CUH.

by committed multidisciplinary clinical staff. Illness and frailty can be very challenging experiences for patients and our staff colleagues requiring a skillful, professional and compassionate approach to care. CPE provides a recognised way to develop these skills in our care of the human person at some of the most difficult times in their lives.”

Speaking at the presentation of certificates, Daniel said “I am very proud to provide this training programme in world class hospital alongside my chaplaincy colleagues and supported



**Pictured above (l-r):** Daniel Nuzum, Maura Smyth, John Patrick Doherty, David Donegan CEO, Conrad Forzeh, Stephen Sherry, Shaju Bernard (absent Patricia Lyne).

# COMMUNICATIONS STAFF SURVEY

The CUH Communications Committee would like to thank everyone who completed our recent survey to help us understand how you would like to be communicated with, and what is most important to you.

The preliminary results have proven very interesting and have given us some fantastic ideas and food for thought. We recognise there is a long way to go, but your input on the survey will help guide and focus the next steps.

The committee are exploring next steps and look forward to sharing further learnings and updates with you.



- 1. The vast majority completed the survey by following the QR code, which implies the posters, leaflets and face to face explanations were most popular ways to reach you.**
- 2. The consensus is that staff should be communicated with no less than once a month.**
- 3. Apps, website, digital newsletters and intranet were common suggestions from staff for better internal communications. However, flooded emails, lack of access to technology or lack of relevance were highlighted as hindrances. This implies a blended approach may need to be considered.**
- 4. Listening to staff, in person opportunities and having the opportunity to share your opinion and be heard was also highlighted regularly.**

## CUH Charity Shortlisted for Charity of the Year 2023

CUH Charity has been shortlisted for Charity of the Year in the CII Charity Excellence Awards. The category is hugely competitive and CUH Charity is in excellent company in this prestigious grouping.

*“The winning charity will have demonstrated an unwavering commitment to transparency and accountability, serving as a shining example of best practices and setting a benchmark for excellence in the charity sector.”*

As CUH Charity is Shortlisted, they are also eligible to win the People’s Choice award and this is where they need Cork Chamber Member’s Support.

Thank you to everyone who supports CUH Charity, and here’s hoping we’re bringing an award back to Cork soon!



## Medication Safety



**Pictured top left (l-r):** Ann Marie Galvin, CUH NPDU Co-Ordinator, Aoife Delaney Medication Safety Pharmacist, Therese Jordan, CNM2 Deteriorating Patient Services. **Top right (l-r):** Ann Marie Galvin, CUH NPDU Co-Ordinator and Jordan Tearle, 3rd year General Nursing student. **Left:** David Donegan pictured with staff promoting Pressure Ulcers to Zero SSKIN Care Bundle.



**Above:** SKINN Promotion at CUH.



**Above (l-r):** At the MUST Promotion at CUH; Vicky Baker, Nurse Tutor; Kathy Healy, CPC; Julie Deasy, Dietician.

## Nurse Practice & Development Initiatives

The following policies are relevant to this month's spotlight on Medication Safety, SSKIN and MUST

- PPG-CUH-NUR-16 PPG on principles of Medication Administration by Nurses in CUHG
- PPG-CUH-PHA-8 PPG on the Documentation of administration/ omission codes and management of misses and delayed doses of medication in adult patients in CUH
- PPG-CUH-CUH-35 Nutritional Screening and Management of Nutritional status of Adult Inpatients in CUHG
- PPG-CUH-CUH-155 Guidelines for the Risk Assessment, Prevention and Management of pressure Ulcers
- HSE Pressure Ulcers A Practical Guide for review (2022) <https://www.hse.ie/eng/about/who/nqpsd/qps-incidentmanagement/incident-management/pressure-ulcers-a-practicalguide-for-review-2022.pdf>

Screening Tool: PUTZ/SSKIN: Pressure ulcers can be painful, are debilitating and usually preventable. Evidence suggests that the best practice in pressure ulcer prevention is incorporating a SSKIN Care Bundle into the patient's care.

The SSKIN Care Bundle is initiated where a patient is deemed at risk of pressure ulcer development as indicated by clinical judgement and/or by their Waterlow Score. SSKIN is an acronym that identifies five key elements for pressure ulcer prevention: surface, skin inspection, keep moving, incontinence and nutrition.

MUST: Nutrition assessment and screening is done to identify patients at risk of malnutrition, establish a baseline for comparison and to ensure that the patient receives optimal nutrition to promote health and recovery by close monitoring of food and fluid intake. The aim is to prevent complications associated with under nourishment and promote a healthy recovery and early discharge.



### Safety Message

Cork University Hospitals Patient Safety Message

# Staff Wellbeing

Delighted to say discussions and planning are already underway for our fourth staff wellbeing seminar on Brain Health. Our UCC academic partners in the department of Anatomy and Neuroscience along with CUH expertise will come to the podium in CUH and share information, advice and encouragement on optimum brain healthy lifestyles. Keep an eye on Staff Wellbeing Screen at entrance to canteen and internal emails for Oct date and bookings.

Staff wellbeing seminars delivered via the CUH auditorium have become an increasingly popular event on campus. To facilitate maximum access the wellbeing events have been live streamed and recorded.

Drawing heavily on internal staff expertise as well as external experts, seminars to date have covered cardiovascular health, menopause and men's health. Feedback has been extremely positive with excellent auditorium attendance and over 1000 views of recordings!

# Reflective Practice – a Sharing Approach to Wellbeing

There is a strong link between emotional wellbeing of healthcare workers and carefully structured Reflective Practice. Discussing and sharing emotional and other work challenges with peers who fully understand the impact of the work is extremely powerful at a human level. Such carefully facilitated confidential discussions in a compassionate supportive space can bring about crucial insights.

Starting Sept 2023, key CUH staff will undergo training on a reflective practice model with a view to piloting the model in the hospital

# CUH Staff Wellbeing Library



CUH is fortunate to have a hugely supportive librarian staff. When the library was approached last year regarding the feasibility of compiling a wellbeing section for staff it was met with an immediate positive response! Soon to be unveiled a lovely section of wellbeing books will be available on loan to CUH staff.

Left: CUH Staff Wellbeing Library.

# It Can Feel Really Good to Talk in a Confidential Space

Just as we have physical health, we all have mental health and as life unfolds our mental health moves up and down along a spectrum from good to poor. When our mental health feels challenged, it can really help to talk to someone. Confidential support is there. All CUH staff have access to free confidential counselling from the **Employee Assistance Programme (EAP)**. You can self-refer at any time. EAP also offers one-to one support following a critical incident affecting you or your team. For more information follow the Link or ring 0818 327 327

\*Additionally, CUH employees have access to a free external 24 hour confidential counselling services called "Inspire Workplace". Staff wishing to use this service are entitled to 6 free counselling sessions. Dial 0818327 327 and select option 2.

## Submissions to the next edition of our OneTeam eNewsletter

Anyone who would like to contribute a news item or story to the next edition of our newsletter please email [Deirdre.okeeffe@hse.ie](mailto:Deirdre.okeeffe@hse.ie)

Cork University Hospitals Group is the HSE statutory hospital provider for all of Cork, operating 3 acute hospitals (CUH Wilton [Model 4], Mallow General Hospital [Model 2] and Bantry General Hospital [Model 2R]), 2 community in-patient units (St Finbars Hospital Rehabilitation Unit & Riverstick TCU), a nursing home (St Josephs), and a range of satellite outpatient and admin sites. We also provide services to/at voluntary hospitals (Mercy, South Infirmary, Marymount), community services (ECC/IGPOP/ Dental), the emergency services (NAS / App Car / Medico) and general practice.

