

Society of Actuaries in Ireland

Public Waiting Lists and the Role of the National Treatment Purchase Fund

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Public Waiting Lists and the Role of the National Treatment Purchase Fund



CHIEF EXECUTIVE
NATIONAL TREATMENT PURCHASE FUND

29 JANUARY, 2019

Statutory Role of the NTPF



- Arrange treatment
- Collect, collate and validate waiting lists
- Advise the Minister
- Do other work in respect of waiting lists, as mandated by the Minister
- Negotiate with Nursing Homes with regard to Fair Deal rates

Fewer patients now waiting for a hospital operation or procedure. Slaintecare report says patients should wait no more than 12 weeks. Numbers waiting longer down to 40,200 lowest since 2014. Increased spending and reform is working. Similar plan next to reduce outpatient waits.



Reduce Wait Times by



- Improving Processes
- Auditing Processes
- Improving information and tools
- Funding Care

NTPF - Resources



- Budget of €75m in 2019 €69m for commissioning Patient Care
- 61 Staff across 5 Directorates
 - Process Innovation
 - ICT and Business Intelligence
 - Audit, Quality Assurance and Research
 - o Finance
 - Corporate Services

Improving Processes



- Develop processes for the administration of waiting Lists
 - Inpatient Daycase Protocol
 - Clinical Prioritisation
 - Integration of Waiting Lists
 - National Centralised Validation Unit
 - Patient Access Management System
- Help hospitals adopt the processes

Audit, Quality Assurance and Research



- Audits hospitals in respect of their adherence to protocols
- Report to the hospitals, HSE and the Minister
- Statistical evaluation of anomalies of data received

Research best practice in waiting list management and reporting

Improving Information and Tools



- Each month, collects 4 million records from 48 sites and distributes 1,400 reports – specialism / hospital etc.
- Responds to queries
- Projects lists under different scenarios
- Provides stakeholders with access to Power BI dashboards
- Manages Minimum Dataset
- Patient Access Management System

Finance and Commissioning



- Negotiates with Nursing Homes
- Arranges Treatments for Patients

Lists Published by the NTPF



- Active Inpatient / Daycase (IPDC) List (70,204)
- Active GI Endoscopy List (18,847)
- Outpatient List (516,162)
- Pre Admit lists for IPDC and Scopes (25,113)
- Suspended Patients (14,027)
- Planned procedures (71,582)

HSE Throughput



IPDC

- HSE provides around 500,000 elective procedures each year.
- Without NTPF, the list grew by around 12,000 p.a. around 2.5% of throughput.

Outpatient

- HSE provides around 1 million outpatient consultations to new patients each year.
- Without NTPF, the list grew by around 40,000 p.a. around 4% of throughput

Mr MiCawber's Recipe for Happiness



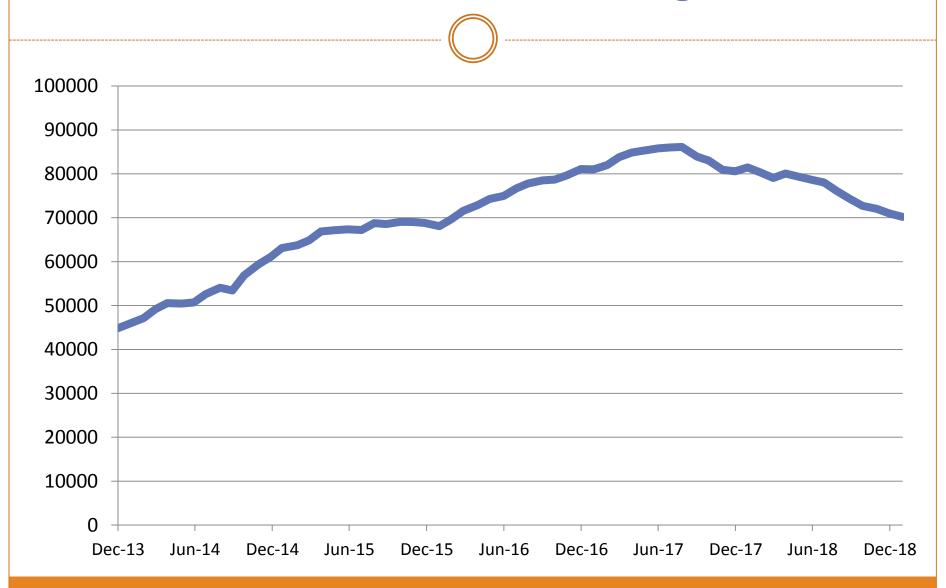
"Annual income twenty pounds, annual expenditure nineteen [pounds] nineteen [shillings] and six [pence], result **happiness**. Annual income twenty pounds, annual expenditure twenty pounds ought and six, result misery."

NTPF throughput in recent years



- NTPF activity ceased from 2014 to 2016
 - Waiting list grew by 36,000 (12,000 p.a.)
- 2017 Arranged treatment for 8,000 patients (€17.5m)
 - Waiting list was flat
- 2018 Arranged treatment for 22,000 patients (€50m)
 - Waiting list reduced by 11,000 (14%)
- 2019 To arrange treatment for 25,000 patients (€58m)
 - Waiting list projected to reduce by 10,000 (14%)

Patients on the IPDC Waiting List



NTPF Activity (1)



- In July 2017, 7 procedures accounted for 45% of patients waiting more than 9 months:
 - Cataracts
 - Joint replacements
 - Cystoscopies
 - Skin Lesions
 - Varicose Veins
 - Angiograms
 - Tonsils
- A further 40 procedures accounted for another 20% of those waiting more than 9 months
- These were the focus of the NTPF's activity

NTPF Activity (2)



- In 2018 and the second half of 2017, the NTPF arranged 30,000 procedures for those on the IPDC Waiting List:
 - 11,600 Cataract Surgeries
 - 3,600 Cystoscopies
 - 2,200 Joint Replacement
 - 1,900 Tonsillectomies
 - 1,700 Angiograms
 - 1,700 Varicose Veins
 - 1,500 Skin Lesions
 - 5,800 other procedures

Patients waiting more than 9 Months for Cataract Surgery



Impact of NTPF Activity



47% Reduction in patients waiting over 9 months

- 31% reduction in patients waiting over three months
- Number in the 7 high volume procedures waiting over 9 months reduced 80% from 12,571 to 2,518.

Three Worst Ways to Fund Healthcare ...



- Block Funding does not incentivise activity waiting lists
- Capitation leads to the gym approach incentive for suppliers to seek members that don't use the service
- Pay per service Incentive for Supplier Induced Demand
 - Cost Inflation

 Necessary to use all three, depending on what issue you are trying to address

NTPF Approach



- Private Hospitals
 - Qualify through a public tender process
 - Contracts provide for payment for the provision of specified treatments to named individuals
- Public Hospitals
 - Arrangements made directly with the NTPF
 - Memorandum of understanding provides
 - Treatment is additional
 - Costs are marginal
 - Again payment is for specified treatments to specified individuals
- NTPF treatments are provided 2:1 private to public hospitals

NTPF Process



- NTPF makes arrangements with treating hospital
- Individual patients with public hospitals are authorised for NTPF funded treatment – based on time waiting
- Public hospital offers the patient NTPF funded treatment, subject to clinical suitability
- If patient accepts the offer, the public hospital refers the patient to the treating hospital
- On discharge, documentation is sent to the referring hospital and GP and discharge summary and invoice to the NTPF

Stakeholders



NTPF's work relies on contributions by a large number of stakeholders working under competing pressures:

- O Patients
- Public hospitals
- Private Hospitals
- Clinicians
- Hospital managers and administrators
- O HSE
- Government Departments
- Government

Stakeholders(2)



- Must understand stakeholder requirements
- Endeavour to tailor our work in order to meet the requirements of stakeholders
- Where we can't, communicate with the stakeholders explain why and what we propose to do about it

Outpatient



- Extra Challenges for the NTPF in arranging outpatient appointments
- Who will provide follow-on care?
 - If it is the private hospital there is the issue of supplier induced demand
 - If it is the public hospital, the consultant in the public hospital may wish to see the patient again in outpatients
- NTPF is funding 40,000 outpatient appointments by
 - Funding extra clinics in public hospitals
 - Funding appointments with high discharge rates with private suppliers

Winter Plan



- NTPF allocated €1m to support the winter plan
- Arranged surgery for some patients who were waiting in hospital for surgery
- Funded access to diagnostics
- HSE also implemented a range of measures
- 16% reduction in the number of people on trolleys in ED Departments (impacted by a range of factors)
- NTPF successfully addressed access to diagnostics for Emergency Departments

Plans for 2019



- Funding of €75m
- Arrange Inpatient / Daycase treatments for 25,000 patients
- Arrange 5,000 GI Scopes
- Arrange Outpatient appointments for 40,000 patients
- Projected to reduce the Surgery waiting list by a further
 14% mainly impacting on longer waiting patients
- Scheduled Care Access Plan 2019 to be published shortly

Conclusion



- Enormous challenges remain in addressing public waiting lists in Ireland
- Since the NTPF was reactivated, significant progress is being made in respect of the surgery waiting list
- This is being achieved through improving processes, information, systems and funding hospital care
- NTPF's work is deepening and expanding year on year since reactivation
- We look forward to building on the progress made for those waiting for surgery and to increase our focus on outpatients and other areas