



Clontarf Hospital

Strategic Plan
2019 – 2024







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1 Foreword from the Chairman and Chief Executive Officer



Dr Gerard O'Connor
Chairman, Clontarf Hospital



Michelle Fanning
Chief Executive, Clontarf Hospital

We are delighted to present this Strategic Plan covering the period 2019 to 2024.

Clontarf Hospital has been a provider of rehabilitation services for over 140 years. Our goal is to ensure that patients overcome disabilities insofar as possible and return to active independent living. As a voluntary hospital, we work closely with the major academic teaching hospitals in order to identify patients who could benefit from our services. We also work with community care providers to ensure that following discharge, our patients have the appropriate supports in place.

Whilst the health sector has been through a period of uncertainty, the publication and adaptation of the principles of Sláintecare offer a clear vision and a pathway to an improved and robust service for our citizens. Included in its recommendations is the identification of the need to provide integrated care at the lowest level of complexity and to move the delivery of care away from the acute hospitals towards community-based planned and coordinated care. This will provide seamless continuity of care between delivery planes whether at hospital or community level.

This emphasis on integrated care offers a unique opportunity for Clontarf Hospital to develop and grow its services to patients and to the community, building upon the hospital's strong traditions. Clontarf Hospital plays a vital role in providing rehabilitation for patients following the

completion of their care episode in the acute hospital. Our strategy for the next five years involves enhancing the levels and scope of services currently provided, together with the introduction of newer modalities of rehabilitation medicine and the utilisation of the latest technological approaches required to deliver optimal care for our patients. This will necessitate embracing new models of care delivery together with individualised treatment to meet the specific needs of the patient. At the heart of this challenge lies the primacy of the patient and their independence.

Clontarf Hospital will examine opportunities and implement new developments and service expansions as appropriate to support our patients and the communities we serve. This includes engaging with the Health Service Executive/Community Healthcare Organisations in meeting the requirements for the coordinated development of rehabilitation services to support the needs of trauma patients in line with the recent report of the Trauma Steering Group. The hospital is particularly keen to participate with the delivery of care as part of the planned major trauma centre and trauma units in the Dublin metropolitan area.

We also intend to implement management programmes in line with best practice in e-health, service accreditation, eco-friendly service provision and operations management. The strategy is one where developments are fostered and delivered in an efficient, agile manner within a total



quality framework. This will ensure that the institution is fit for purpose into the future.

Clontarf Hospital is rightly proud of what has been achieved to date, and we continue to foster the very good name and reputation which our patients hold dear. This can only be done through the continued nurturing of all our staff, in terms of their commitment, welfare, ongoing education and career development. We value the implementation of relevant research programmes and links to academic institutions to foster a continuous learning environment that will continue to benefit both patients and staff.

We take nothing for granted and we recognise that our stakeholders and funders, our partner organisations and the public expect to see good value for money, which we will continue to deliver while holding to the highest standards of ethical probity. We will continue to work closely with all our partners in providing a high-quality rehabilitation service to all our patients. We look forward to expanding this valuable work in the coming years.

We would like to take this opportunity to thank the staff at Clontarf Hospital for their valuable contribution to the content of the Strategic Plan. We look forward to working with everyone on the implementation of the plan over the next five years. We also acknowledge and thank Crowe, who facilitated the Board and the Chief Executive Officer throughout the process.

Finally, on behalf of the Board, we wish to acknowledge the dedicated support of all our staff under the leadership of the Chief Executive, our Consultant Physician and the Director of Nursing. The outcomes of this Strategic Plan, when implemented, will bring the hospital to a new level of care delivery in rehabilitation medicine, to the benefit of all.





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2 Strategic Context



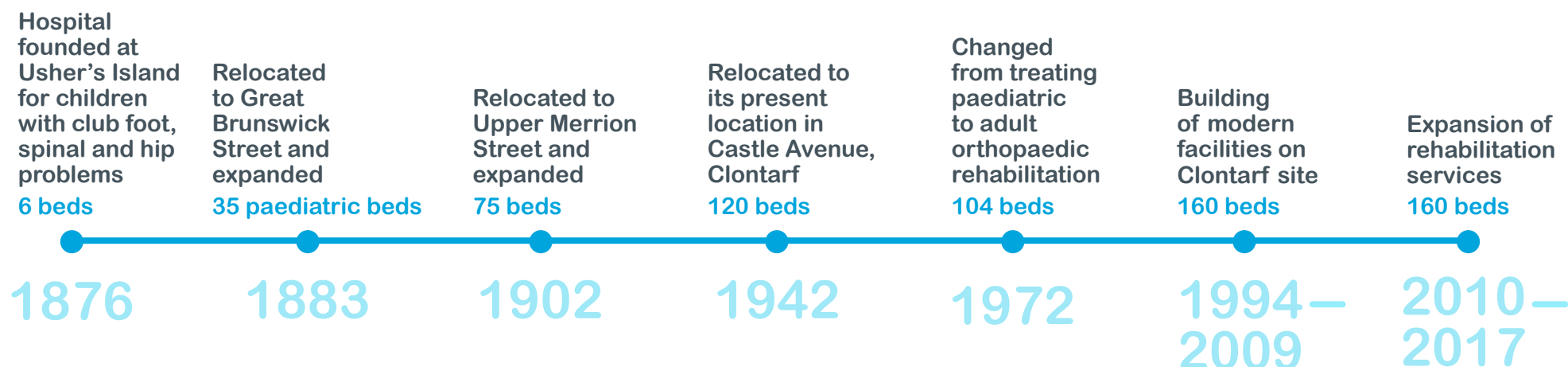
2.1 Background and history

Clontarf Hospital is a voluntary public hospital providing services under Section 38 of the Health Act 2004. The hospital provides rehabilitation services to patients referred from the acute hospitals in the Dublin area and is located in Clontarf on the north side of Dublin city. The hospital also provides an inpatient and outpatient X-ray service.

The hospital and dispensary were originally founded in 1876 by Dr Robert Lafayette Swan at 11 Usher's Island on Dublin's Quays to treat the high incidence of club foot in children, as well as spinal and hip problems. In later years it treated a large number of children with post-polio syndrome. An overview of our development over the following 140 years is shown below:

Today's Clontarf Hospital was constructed between 1994 and 2009. The hospital comprises the following:

- Nursing department
 - Physiotherapy department
 - Occupational therapy department
 - Medical Social Work
 - Dietetics department
 - Pharmacy department
 - X-ray department
 - Chaplaincy department
 - Medical department
 - Five wards
- Gymnasium
 - Outpatient department
 - Oratory
 - Finance and administration
 - Catering department
 - Maintenance department
 - General Services department



2.2 What we do



Clontarf Hospital is the **largest rehabilitation hospital in Ireland** with **160 beds**



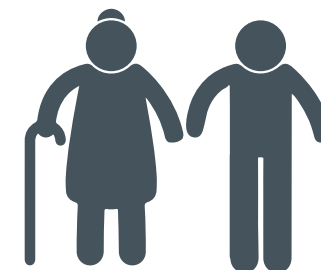
The average **length of stay** in 2018 was **37 days** with an emphasis on a safe discharge home



We **admitted 1,260** and **discharged 1,259** patients in 2018



Clontarf Hospital provided **46,503 physiotherapy treatments** to patients in 2018



Age range admitted in 2018:
27 to 102 years:

138 (11%) patients admitted were 64 years or younger
1,122 (89%) were 65 years or older
117 (9.2%) were 90 years or older



The **Occupational Therapy** department saw **1,260** patients referred to them in 2018



The **Medical Social Work** department had **770 new referrals** in 2018



There were **135 home visits** in 2018 to facilitate a **safe discharge home**, an **increase of 17.8%** on 2017.



The **X-Ray Department** carried out **3,849 x-ray procedures** on **2,994 patients** in 2018: 928 inpatients & 2,066 outpatients





2.3 Where we sit in the health system

Clontarf Hospital provides rehabilitation to patients following stays in acute hospitals. It interfaces between hi-tech and local care in the provision of rehabilitation medicine to those returning to daily life.

The hospital lies between acute hospital services and community services. It provides an enabling rehabilitation service that facilitates patients to overcome disability, frailty and illness and return home to live

independently. The hospital also ensures that patients have access to the necessary community care and support teams once they are discharged.



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2.4 Our policy context

Clontarf Hospital operates within the environment of government health policies and strategies, the most critical of which in terms of impact are outlined below.

National health system reform and Sláintecare

Clontarf Hospital is operating within the wider health system context. This represents a challenge as well as opportunities given the near-constant reform ongoing within the health services. The Sláintecare report from the committee on the Future of Healthcare has recommended a focus on integrated and community healthcare. **Sláintecare proposes a shift in focus from acute hospital care to community care, an area in which Clontarf Hospital has extensive experience.** The vision for the future is to provide seamless integrated care for patients, with community-based clinical leads that are ideally placed to co-ordinate care away from acute hospitals.

Section 38 agency status

Clontarf Hospital is funded under Section 38 of the Health Act 2004, which allows the HSE to fund and delegate to approved organisations the delivery of health services that are considered to be the State's responsibility to provide. As a Section 38 agency the hospital is contracted to provide services on behalf of the HSE. While funding from the HSE provides approximately 75% of the hospital's income the remainder comes from private patients. Clontarf Hospital is the largest provider of rehabilitation services in Ireland.

Community Healthcare Organisations (CHOs)

Another key healthcare structure reform in recent times is the creation by the HSE of CHOs as the units for the delivery of non-acute health and social care, including primary, mental health, health and wellbeing, and social care. These CHO areas do not share boundaries with hospital groups, nor indeed many other structures in relation to healthcare, social care, and related services. This may present challenges for Clontarf Hospital in its role as a bridge between acute and community care: whilst it is physically based in CHO 9, it takes patients from the acute system without specific reference to their home address, meaning that their progression from the hospital may be to a number of different CHOs. It is also a factor in the consideration of expanding services into the community. **The establishment of Integrated Care Organisations (ICOs) should act as an enabler to overcome some of these boundaries.**



Hospital groups

Some aspects of substantial recent reform are still in train, such as the formation of hospital groups for the delivery of acute care. Hospital groups, combining HSE and public voluntary acute hospitals, have the ultimate intention of operating as more autonomous hospital trusts delivering acute services across multiple sites as single organisations and are at varying stages of development and functionality. In some areas they are moving towards a more co-ordinated operation whilst in others the group is at an earlier stage in development.

No legal mandate has yet been given to the hospital groups, limiting their capacity to move forwards. The implications of hospital groups for Clontarf Hospital are manifold: the hospital currently works well with hospitals in three hospital groups in respect of its orthopaedic patients, whilst the older persons' rehabilitation patients come from hospitals in two different hospital groups. Continuing to build relationships not only with individual hospitals but with hospital group management, and positioning Clontarf Hospital in relation to the hospital group structures are key areas of interest and concern for the hospital.

Integrated Care Programme for Older Persons/ National Clinical Programme for Older Persons

Integrated Care is one of the HSE's most significant programmes. One Integrated Care Programme is working closely with the National Clinical Programme for Older Persons (NCPOP). The main aim of the programme is to develop and implement integrated services and pathways for older people with complex health and social care needs. **Importantly it shifts the delivery of care away from the acute hospitals and frontline services towards community based hospitals providing planned and coordinated care focused on discharging patients back to their own homes and communities.**

Clontarf Hospital has been providing these services for many years. It will be important for Clontarf Hospital to link in with the integrated care programme and the newer ICOs as it is being developed to ensure that the role of sub-acute care and rehabilitation for older people is prioritised and to identify service delivery and funding opportunities for the hospital in relation to such care.

The development of an outpatients department and day ward to support integrated care will be important for Clontarf Hospital in delivering services closer to patients home and away from an acute hospital centric model of care.



Delayed discharge and emergency department overcrowding

There has been much focus on the considerable difficulties and issues within hospital emergency departments, with long delays for patients awaiting admission to the acute hospitals. One factor highlighted in this has been the delays in discharging some patients from the acute sector due to a lack of suitable places in sub-acute, step-down and long-term care. Clontarf Hospital has a role to play in supporting the acute sector where suitable patients can move from acute hospital care to rehabilitation in Clontarf. Conversely, it is a concern of the hospital that patients who need to be referred back to the acute system can be caught up in the emergency department overcrowding problems. The new health strategy proposes the use of integrated pathways to ensure patients receive the appropriate care in suitable settings.

Clontarf Hospital can provide greater support to acute hospital services by accepting patients with greater dependencies and reducing referrals back to acute hospitals. This requires investment in our current rehabilitation resources by our funders.

Proposed future trauma system

The recently issued report of the Trauma Steering Group, A Trauma System for Ireland, proposes that the HSE should implement an inclusive hub-and-spoke system. This hub-and-spoke system should be configured around two major trauma centres, one in Dublin and one in Cork. The location of the Dublin centre is subject to an application process, and a rearrangement of services will also be required. Once the location is agreed, the remaining major hospitals will operate as trauma units.

The report also highlights the need for all trauma patients in major trauma centres and trauma units to have access to rehabilitation. To support this, the report recommends that the HSE should ensure coordinated development of rehabilitation services to meet the needs of trauma patients.

Clontarf Hospital, with its experience in delivering rehabilitation services, is well-positioned to provide rehabilitation services to the major trauma centre and trauma units in Dublin.



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3 Our Mission, Vision and Values

4.1 Mission

Clontarf Hospital's mission is to deliver an excellent interdisciplinary rehabilitation service for patients to enable them to achieve their optimum level of independence, health and wellbeing.

4.2 Vision

Clontarf Hospital's vision is to operate as a centre of excellence for rehabilitation while maintaining its voluntary hospital status.

4.3 Values

The values that underpin the ethos and work of the hospital are:



Integrity

Believe in high standards of care for all our patients



Trust

Rely upon and be confident and secure in the care provided at the hospital



Respect

Mutual regard and esteem between staff, patients and all who visit the hospital



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4 Key Challenges for Clontarf Hospital 2019 – 2024



As Clontarf Hospital considers the options for its five-year plan, a number of strategic considerations need to be borne in mind, and may help to shape the strategic choices available. The following key issues need to be taken into account:

Future development

There is a real opportunity for Clontarf Hospital to build on its reputation for excellence and to expand its service provision, without diluting or straying from its core specialism of rehabilitation.

Clontarf Hospital brand

Clontarf Hospital has to build a brand around its name, and create a clear identity for the hospital so the community better understands the services provided.

Governance and risk

Clontarf Hospital must maintain public confidence in its governance arrangements, alongside full regulatory compliance. This will include embracing a culture of greater accountability, openness, teamwork and diversity within the organisation.

Structure of the organisation

The organisational structure and human resources requirements need to be reviewed to enable Clontarf Hospital to effectively implement the new Strategic Plan and best deliver current and new services.

Funding services

Funding must be identified and secured for the increasing costs of providing our current healthcare services and further investment will be necessary for the development of services outlined in the strategic plan. The hospital's dependence on private health insurance affects the potential scope of services and alternative means of income will need to be identified.

Organisational infrastructure

Investment will be needed in the capital assets required for Clontarf Hospital to function effectively. This will include new IT systems and hardware, new medical equipment and the renovation, development, upgrading and modernisation of some parts of Clontarf Hospital's property estate.



5 Our Strategic Priorities for 2019 – 2024



5.1 Overview

We have developed this strategy around the following key strategic objectives:

Objective 1: Independence of the hospital

Maintaining the hospital's independent voluntary status and autonomy, with an emphasis on retaining independence for our rehabilitation services

Objective 2: Building on current strengths

Building on the current provision of rehabilitation services while considering the increasing need for rehabilitation services in national clinical and integrated care programmes, and how the hospital can configure services and contribute significantly to the rehabilitation healthcare needs of patients

Objective 3: Expanding the range of services

Providing a wider continuum of rehabilitation care to orthopaedic patients, older people and trauma patients by developing day hospital, outpatient and community outreach rehabilitation as well as complementary and integrated care services

Objective 4: Ensuring the highest quality of care to patients

Putting in place the appropriate clinical governance, risk management, information technology and human resources systems required to ensure the delivery of the highest quality of care to patients

Objective 5: New organisational structure

Developing a new organisational structure to support and drive strategy and service development so that there are sufficient resources to successfully implement the strategic objectives

Objective 6: Becoming a research-led institution

Developing the research capabilities within the organisation to improve care for patients of Clontarf Hospital and elsewhere, to position the organisation as a leading specialist institution for rehabilitation care, and to secure funding for such research

5.2 Strategic Objectives: Detailed forward actions

5.2.1 Objective 1: Independence of the hospital

Maintaining the hospital's independent voluntary status and autonomy

We aim to achieve this objective by:

- Working proactively with the HSE and acute hospital sector to clearly identify the unique role Clontarf Hospital plays in providing rehabilitation services within existing health structures while maintaining its independence.
- Ensuring clear protocols with clinical input and an evidence base are in place to support the admission decisions and selection of patients by the hospital.
- Exploring mechanisms for effective and constructive collaboration with other institutions to improve patient care and shared learning – and potentially available resources – that do not impinge on the organisational independence of the hospital.

What are the intended outcomes?

- Clontarf Hospital to remain a voluntary independent institution committed to working with the HSE and other hospitals for the benefit of patients.
- Working effectively with other healthcare agencies in meeting rehabilitation care needs.





5.2.2 Objective 2: Building on current strengths

Building on the current provision of rehabilitation services

We aim to achieve this objective by:

- Being clear about our unique role and purpose in the continuum of care for patients requiring rehabilitation.
- Working proactively with the HSE, CHOs and the acute hospitals to assess the need for specialist rehabilitation services and Clontarf Hospital's capacity to provide such services.
- Working with the HSE and acute hospitals on the implementation of the report of the Trauma Steering Group.
- Maintaining clear protocols for the selection of patients for the hospital from the acute sector.
- Developing clinical protocols and pathways within the hospital to ensure that patients can receive appropriate and timely care. Incorporating staff training needs analysis and delivering training as identified.
- Continuing to be flexible and responsive to demand whilst maintaining the hospital's core purpose and focus on rehabilitation.
- Ensuring that our rehabilitation services are provided as close to the patient's home as possible.

What are the intended outcomes?

- Clontarf Hospital's reputation for excellence in rehabilitation care to be maintained and strengthened.
- The capacity of the hospital to care for more patients to be increased by means of evidence-based care pathways.
- The hospital to be a key provider of rehabilitation services and to assist the HSE in reducing demands for acute services whilst ensuring that patients have the right care at the highest quality.
- Clontarf Hospital to continue to provide both orthopaedic and older people's rehabilitation services to the highest standards.
- Enable Clontarf Hospital to configure services to provide rehabilitation services closer to the patient's home which meet the rehabilitation demands of the communities we serve, while also reducing the need for acute hospital services and reducing cost.
- Support the national trauma clinical programme for post-acute trauma rehabilitation care.
- Provide more integrated care that is "patient-centred" and coordinated across healthcare settings.



5.2.3 Objective 3:

Expanding the range of services

Providing a wider continuum of rehabilitation by developing day hospital, outpatient and community outreach rehabilitation services

We aim to achieve this objective by:

- Undertaking a consultation with the key stakeholders, i.e. HSE, CHO, acute hospitals, community primary care providers and patients, to determine the scale and scope of the demand for such services.
- Engaging with the HSE and acute hospitals on the development of rehabilitation services to support the major trauma centre and the trauma units in Dublin, in line with the recent report of the Trauma Steering Group.
- Developing a business case for the HSE for the funding of an increased range of services, with the emphasis on the contribution this makes to reducing the impact on acute hospital services, maintaining independence and reducing the overall health system costs.
- Establishing an operational plan for the development of new services, setting out the timelines and priorities in which the new services can and will be developed and the key elements required to put each in place.
- Assessing options for the further development of the Clontarf Hospital site to support the expanded range of services.
- Undertaking a review of the physical

infrastructure of the Clontarf Hospital site to identify suitable space for new service provision.

- Developing a workforce plan identifying the number and skills of the staff that will be required to provide new services and how this will integrate with existing service provision and staff resourcing.

What are the intended outcomes?

- Clontarf Hospital providing high-quality rehabilitation services to a wider group of patients in a wider range of settings, in the form of day hospital, outpatient and community outreach services, and a step-up from the community through GP referrals.
- Additional rehabilitation services to support new models of trauma care in the Greater Dublin Area.
- Providing care at the lowest level of complexity, in the most appropriate care setting, closer to home, at reduced costs to the HSE and the national purse.
- Added value by reducing pressure on acute hospital beds.

5.2.4 Objective 4:

Ensuring the highest quality of care to patients

Maintaining the appropriate standard of clinical governance, risk management, and resources required to deliver the highest quality of care

We aim to achieve this objective by:

- Working to achieve international accreditation standards.
- Undertaking a full review of clinical governance and risk within the hospital.
- Undertaking an independent hospital-wide workforce review.
- Following on from this review, developing where necessary business cases for the HSE for the appointment of additional personnel for the maintenance of high-quality safe care delivery to patients that is ably supported by appropriately resourced administration personnel.
- Developing and maintaining the appropriate clinical skills for hospital staff to ensure that they have the capacity to deliver the highest-quality care and introduce a personal development plan for all staff.
- Ensuring the hospital is up-to-date in relation to evidence-based care and making appropriate changes when new evidence shows this is in the patients' best interests.
- Ensuring that clinical governance and risk

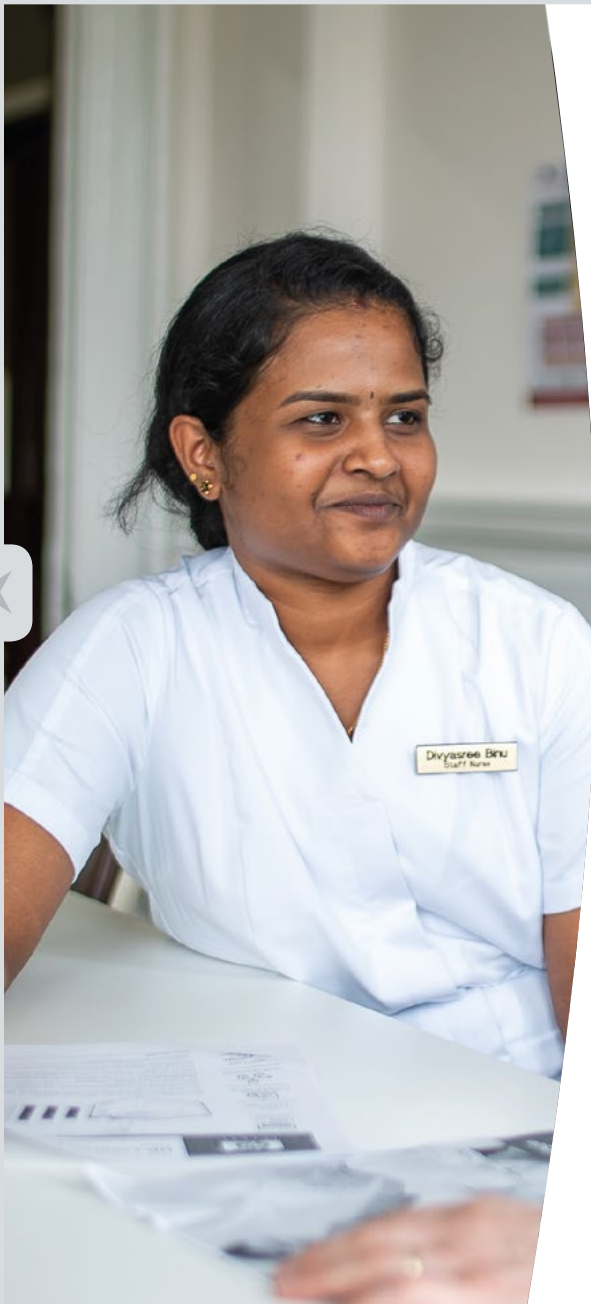
management procedures are in line with accreditation requirements.

- Reviewing the clinical governance and risk profile on an annual basis and taking action where necessary to address emerging risks or governance issues.

What are the intended outcomes?

- Clontarf Hospital continues to provide the highest standards of clinical care, with clear and appropriate governance and risk management procedures in place to ensure patients receive safe, quality care.
- The hospital is a patient-centred, evidence-led institution that delivers safe, effective, high-quality care.
- Clinical staff are well-supported by administration personnel.
- The achievement of international accreditation standards.





5.2.5 Objective 5:

New organisational structure

Developing a new organisational structure to support and drive the strategy and service development

We aim to achieve this objective by:

- Reviewing the current organisational structure to identify issues that might hinder the full and effective operation of the hospital, guided by the workforce review.
- Developing, if necessary, a revised structure to address the key concerns identified within the organisational structure review.
- Implementing a revised suite of internal controls underpinned by up-to-date policies and procedures.
- Undertaking reviews of current procedures and processes to ensure they reflect best practice.
- Ensuring appropriate corporate governance structures are in place to support the work of the hospital.
- Ensuring continuing compliance with HSE service-level agreement governance and compliance requirements.
- Ensuring we meet the standards that allow our professional healthcare staff to deliver care in the most effective way.
- Complying with the corporate governance

and internal control standards required for international accreditation.

- Developing a health information structure that will provide accurate statistical data to support services and inform how they should be developed.

What are the intended outcomes?

- An organisational structure that provides proper streamlined reporting lines for staff and appropriate span of control for senior managers.
- Efficient and effective processes in place across the organisation.
- Appropriate governance structures in place to ensure transparent and open decision-making, reporting and responsiveness.
- Compliance with all applicable regulatory requirements.
- Clontarf Hospital achieves international hospital accreditation.
- Adequate health informatics that inform and drive service delivery.

5.2.6 Objective 6:

Becoming a research-led institution

Developing research capabilities within the organisation to improve care for patients at Clontarf Hospital and elsewhere, to position the organisation as a leading specialist institution for rehabilitation and to secure funding for such research

We aim to achieve this objective by:

- Actively supporting hospital research projects and identifying funding streams at national and international level.
- Seeking to partner with academic institutions for the conduct of research.
- Ensuring to share learning both within the hospital and with national and international audiences.
- Making the hospital a patient-centred, evidence-led institution that is willing to adapt its models of care and delivery of treatment where a strong evidence base exists, so as to maintain and enhance its reputation as a leader in specialist rehabilitation care.

What are the intended outcomes?

- Clontarf Hospital is recognised as a leading and specialist institution in the field of orthopaedic and older people's rehabilitation, underpinned by its excellent research and evidence-led approach.
- The hospital has active research programmes running from the perspective of international best practice and the evidence from the hospital's own activities and patient outcomes.
- The hospital attracts high-quality staff who see the opportunity to be involved in research and development of care as well as in developing the delivery of care in the field of orthopaedic and older people's rehabilitation.





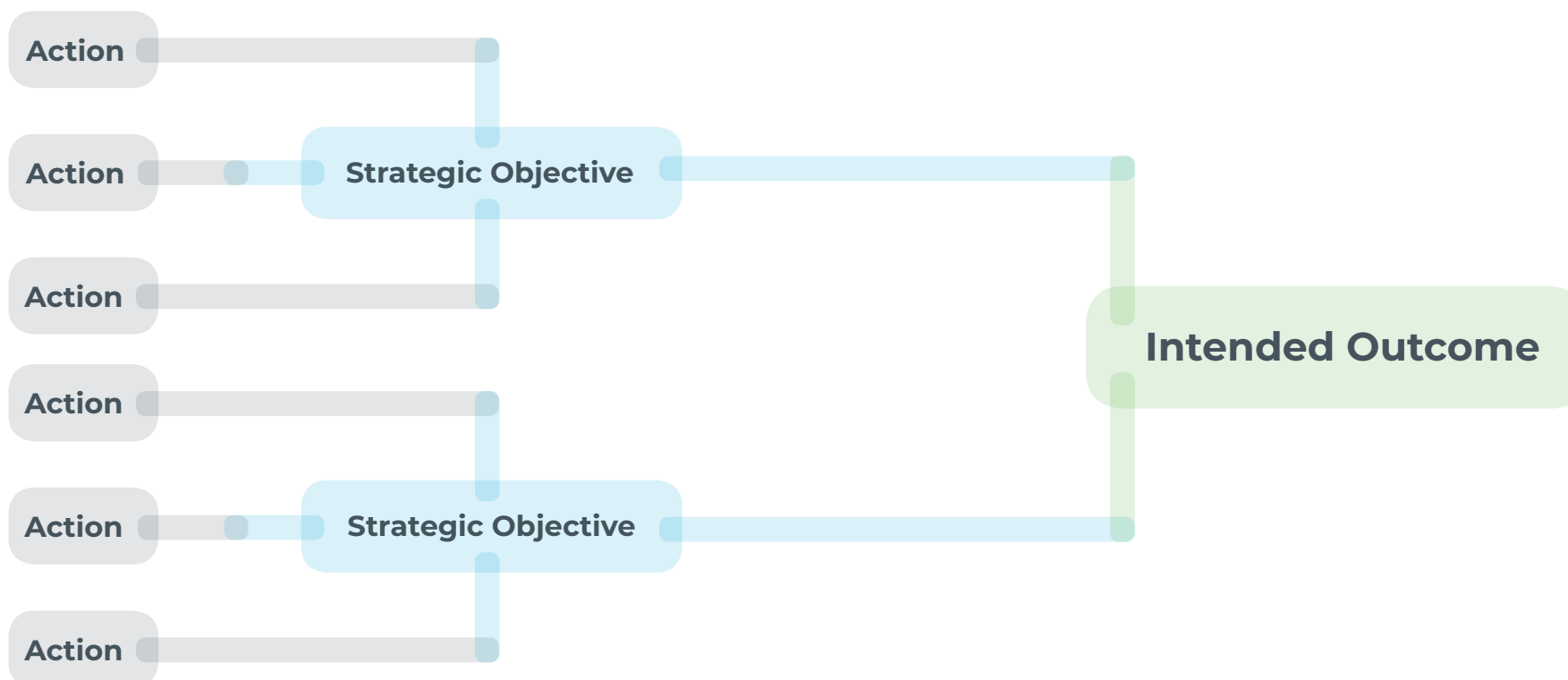
6 Implementing the Strategic Plan



The implementation of this Strategic Plan will be overseen by the Board of Clontarf Hospital, and will be based on a detailed Implementation Plan in which all of the above objectives will be supported by distinct actions. Each action will be specific, measurable, realistic, time-bound and assigned to a specific post in the organisation. In this way, the Implementation Plan will provide the basis for accountability for performance within Clontarf Hospital and through the CEO to the Board and its sub-committees.

Delivering outcomes

Progress on the agreed actions will be monitored on a six-monthly basis by the Board, and once each year the Board will formally review the Strategic Plan to ensure that it remains relevant and fit for purpose. The Board will also report on progress against each action in the Strategic Plan within our annual report to the AGM.





Timelines

The anticipated timelines for implementation of the Strategic Plan are presented below.

Objective 1

Strategic Priority: Independence

Identifying Clontarf Hospital's role within the health structures

Ensuring clear protocols for admissions and selection of patients

Exploring mechanisms for effective and constructive collaboration with other institutions

Objective 2

Strategic Priority: Building on current strengths

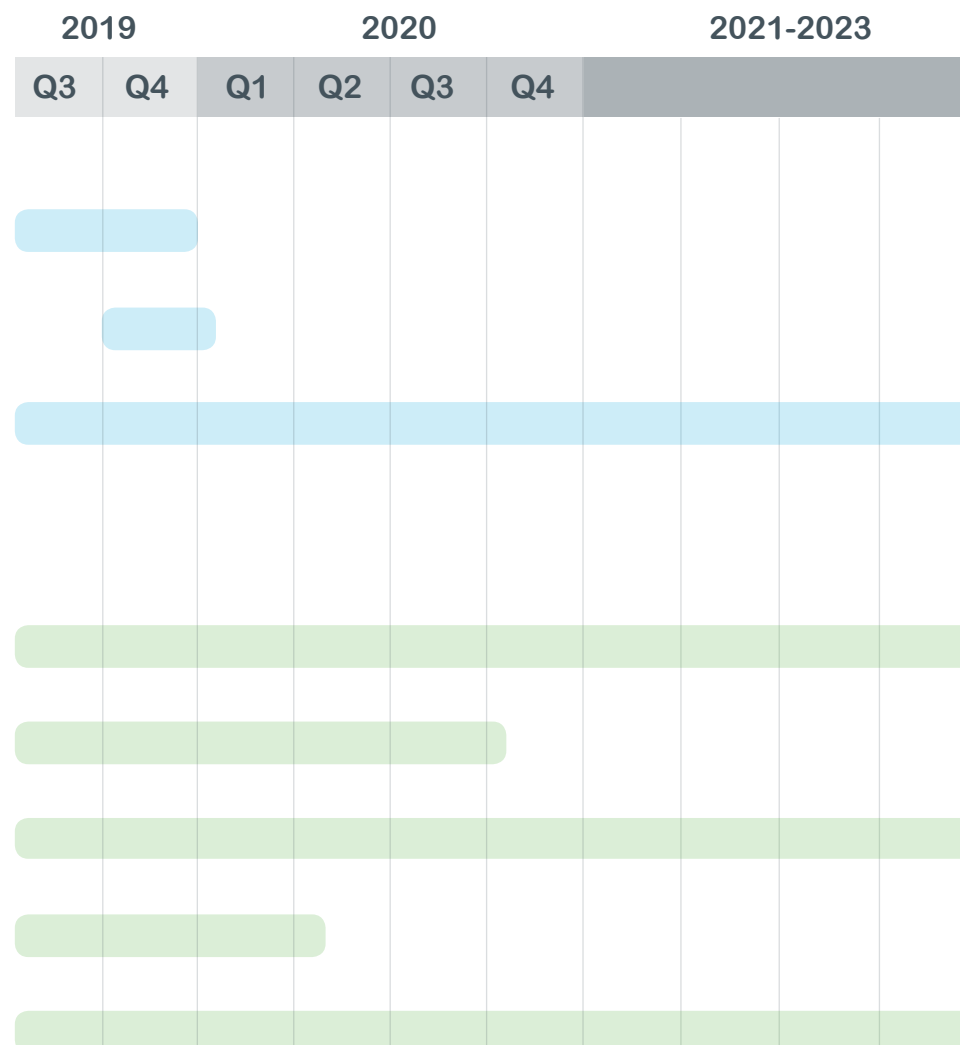
Ensuring clarity regarding role and purpose in continuum of care

Working with the acute hospitals and CHOs to assess need for specialist rehabilitation

Maintaining protocols for selection of patients

Developing clinical protocols and pathways to ensure patients receive appropriate and timely care

Continuing to be flexible and responsive to demand





Objective 3

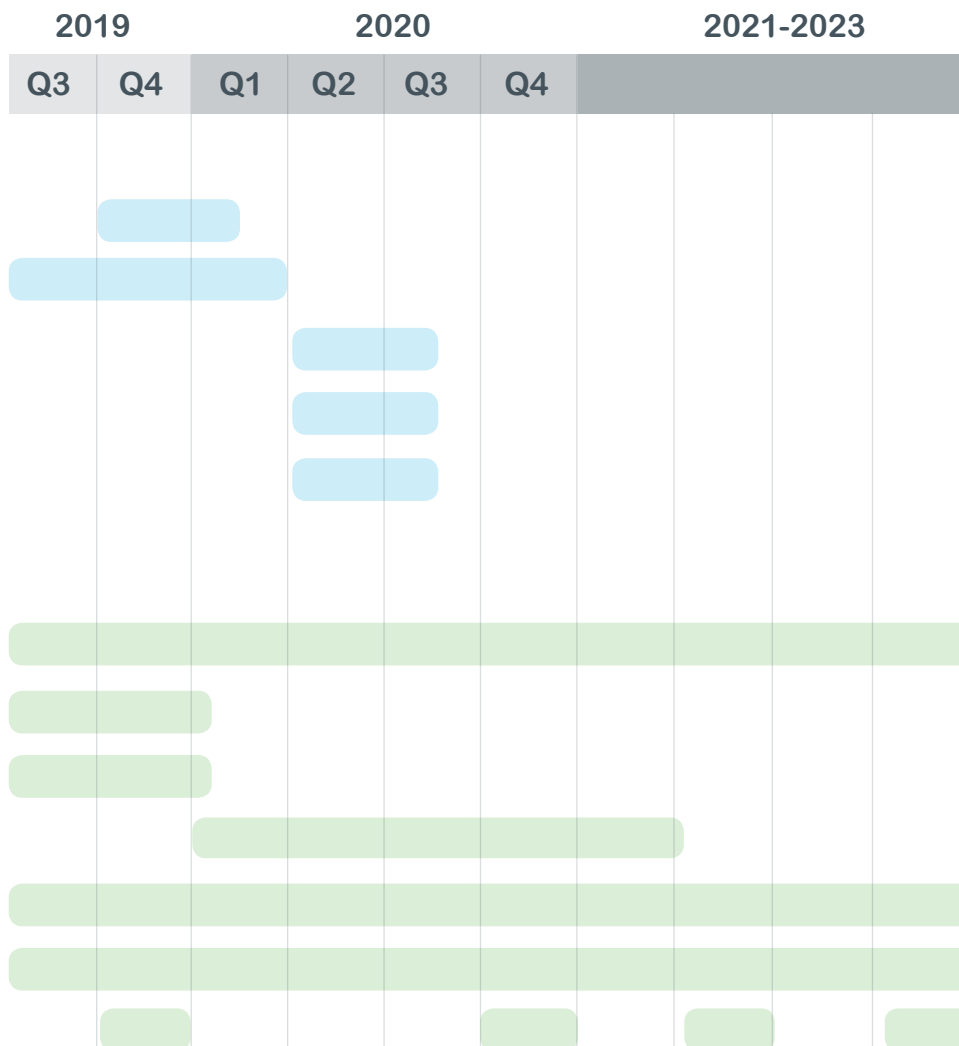
Strategic Priority: Expanding the range of services

- Undertake consultation with key stakeholders
- Developing business case for the funding of increased services
- Establishing an operational plan for development of new services
- Review physical infrastructure and identify space for new services
- Develop workforce plan for additional services

Objective 4

Strategic Priority: Ensuring highest quality of care to patients

- Work to achieve international accreditation
- Undertake a full review of clinical governance and risk
- Undertake a hospital wide workforce review
- Develop business cases for any additional posts identified by the review
- Develop and/or maintain the appropriate clinical skills
- Ensure the hospital is up to date in relation to evidence based care
- Reviewing clinical governance and risk profile annually





Objective 5

Strategic Priority: Organisational structure

Review the current organisational structure

Develop a revised structure

Implement a revised suite of internal controls underpinned by policies and procedures

Review current processes

Ensuring appropriate corporate governance structures are in place

Ensuring compliance with service level agreements

Ensuring the standards are in place to deliver care effectively

Objective 6

Strategic Priority: Becoming a research-led institution

Support research by hospital personnel

Actively seek funding for research

Seek to partner with academic institutions for the conduct of research

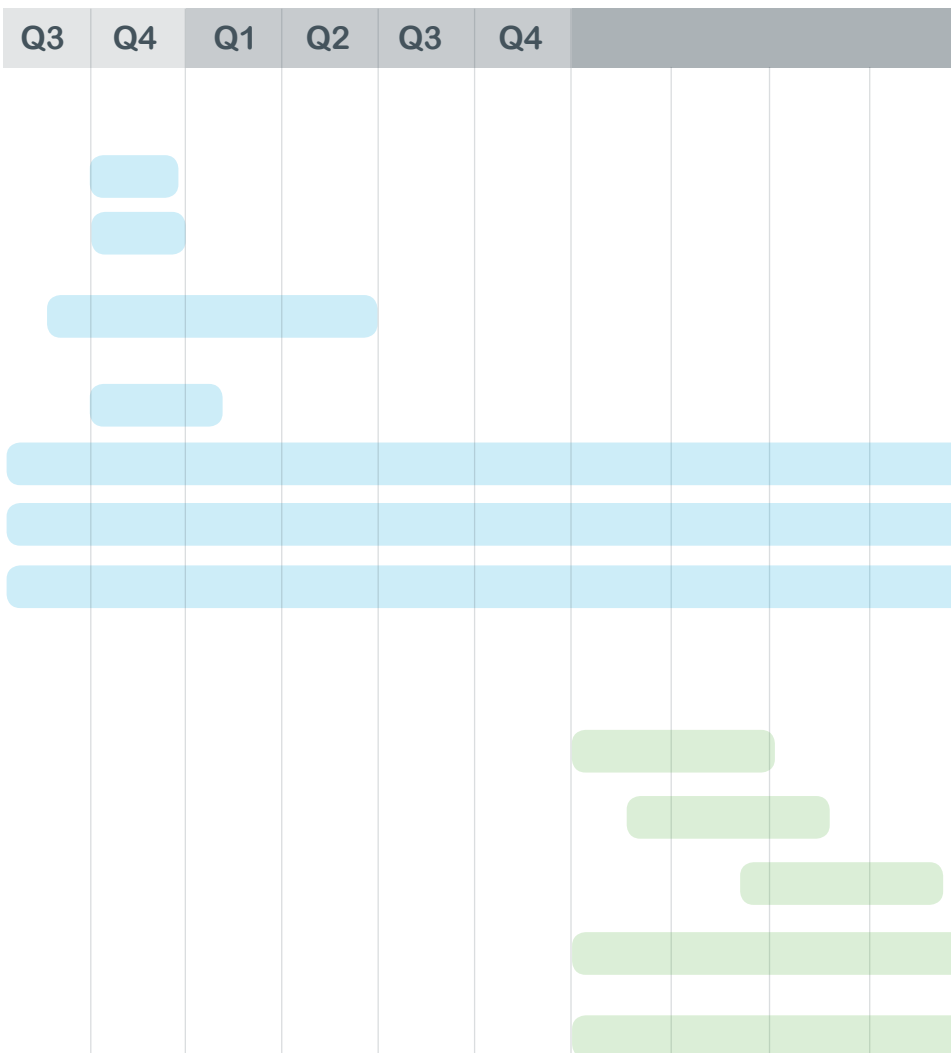
Ensuring shared learning within the hospital, nationally and internationally

Making the hospital a patient-centred, evidence-led institution

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7 Risk Management



In preparing this Strategic Plan, a range of significant strategic risks facing the hospital were identified. These risks are described below, together with the actions the Board will need to take to respond to the challenges they pose and mitigate their effect on the implementation of the plan.

Risk type	Nature of risk	Risk mitigation
Evolving and changing strategy for the overall healthcare system	There is continuing development and evolution of healthcare strategy from the Department of Health and the HSE in relation to the configuration of care and the role of sub-acute institutions such as Clontarf Hospital – any changes to the current model could negatively impact on the hospital.	Clontarf Hospital will continue to actively engage with the Department of Health and the HSE regarding the future role of the hospital within any proposed future model.
Budgetary and financial resources	Clontarf Hospital is dependent on the HSE to provide a significant portion of the annual operating budget. This may prevent the hospital from fully implementing the strategy as set in this plan.	The hospital will continue to work with the HSE to highlight the benefits of the services provided. Where new or additional services are proposed, business cases will be provided that highlight the value of the proposition.
Personnel	Loss of key staff members or failure to add necessary additional skills to the management team may have a significant impact on the operational effectiveness and implementation of the Strategic Plan.	Regular review of staffing requirements, succession planning and continued investment in our people.



Risk type	Nature of risk	Risk mitigation
Service demand	Meeting the future needs of patients may lead to a shift in focus. The hospital may have to move towards providing significantly more beds in relation to older person rehabilitation due to changing demographics. Meeting demand may be difficult for Clontarf Hospital to achieve, especially if it does not wish to move to offering solely older people's rehabilitation care.	To ensure that the hospital remains focused on both areas of interest, a clear process will need to be in place to assess patients for suitability prior to admission.
Implementation failure	Failure to ensure that the strategic and operational policies of Clontarf Hospital are properly developed and implemented and that targets are met. Poor communication with external stakeholders.	Continuous monitoring of our achievement of targets as set out in this plan, and swift remedial action where necessary. The hospital will continue to identify improvements in communication pathways with external stakeholders, especially hospitals referring patients to Clontarf Hospital for rehabilitation.

We will, over the life of this Strategic Plan, evaluate the above risks and ensure that all actions and initiatives undertaken engage with these challenges proactively, with risk mitigation and management actions being identified and implemented without delay, so that our mandate to our patients and stakeholders can be effectively pursued and delivered.



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