

Health Service Executive

Oifig an Stiúrthóra Náisiúnta, Acmhainní Daonna Feidhmeannacht na Seirbhísí Sláinte Ospidéal Dr. Steevens' Baile Átha Cliath 8

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Richard Boyd Barrett, T.D.

4th June 2020

PQ 7023 20

To ask the Minister for Health the details of the deal with a company (details supplied) and other recruitment agencies to recruit healthcare workers to deal with the Covid-19 crisis; the amount the company or other such agencies are being paid; the number of healthcare workers which have been recruited; the reason this method to recruit has been chosen rather than recruiting directly to the HSE in view of the fact a permanent increase in capacity across the health service will be needed; and if he will make a statement on the matter. **Details Supplied:** CPL HealthCare

- Richard Boyd Barrett

Dear Deputy,

I refer to your recent PQ which was forwarded to the HSE for reply.

Context

From mid February 2020 the HSE began to make preparations to increase significantly the capacity within the health services in anticipation of an unprecedented demand as a result of the global pandemic COVID-19

From a staffing perspective this included a number of strategies inclusive of exploiting all existing recruitment pools, maximising agency staff, rehiring of recently retired clinicians, increasing hours of part time staff, encouraging staff to return from career breaks and the postponement of annual leave.

Redeployment right across the public and civil service was also a key feature of the resourcing plan together with the utilising of the skills and the resources of healthcare providers within the private and voluntary sector.

It should be noted that at that time Ireland was potentially facing a similar situation to that of the health services in Spain and Italy

Be On Call for Ireland

One additional strategy was the 'Be on Call for Ireland' initiative which was launched on St Patricks Day. The purpose of which was to provide 'job ready' health care professionals to the health services in the event of the anticipated increase in hospital beds.

Thankfully due to the collaborative national effort in flattening the curve the projected numbers were not realised.

This programme was developed using existing HSE Procurement Frameworks. The costs associated with the development of this programme are currently being collated.

As this programme was established in the context of the likely possibility that a percentage of HSE staff would become ill through COVID it was essential that this programme did not threaten the stability of the existing HSE HR/Payroll infrastructure. Therefore as part of the contingency planning any appointments made through this programme were processed through the agency payroll

The terms and conditions for these employees mirrored that of HSE staff with the exception of sick pay for which the DSPEA COVID pay applied. These candidates were offered 3 month contracts with a view to extension.

It should be noted that consideration is currently being given to transferring these staff and all other appointments from this programme onto the HSE payroll.

To date 1930 people have been deemed successful, 111 have been appointed and 663 are "Job Ready " and available for employment when they are required.

Yours sincerely

Marie 2' Sullwan

HSE National HR