

**Private & Confidential**

**27<sup>th</sup> October, 2021**

**Deputy P. Daly, TD  
Dail Eireann,  
Leinster House,  
Kildare St, Dublin 2**

**PQ Number: 46151/21**

**Dear Deputy Daly,**

The Health Service Executive (HSE) – South (Cork & Kerry) has been requested to reply directly to you in the context of the following Parliamentary Question, which was submitted to this office for response.

**PQ:** To ask the Minister for Health the timeline by which his Department and the HSE will deliver a plan to address staff shortages, cancelled surgeries and staff retention issues at University Hospital Kerry; and if he will make a statement on the matter. -Pa Daly

The SSWHG and UHK Management Teams met with the 5 Kerry TDs on 11<sup>th</sup> October and gave a full briefing on all services at the hospital including the issues that you have raised in your PQ. The reply confirms the details advised.

Due to a combination of increased ED presentations year to date (10%), increasing delayed transfer of care (DTC) patients in house (approx. 20+pts/day) and an increasing Covid-19 burden on the hospital (14 day incidence increasing in Kerry, 646 on the 13/10/21 compared to 352 on the 12/9/21), with resultant increase in hospital in-patients.( 30 patients on the 20<sup>th</sup> October compared to 12 Covid-19 in-patients on 12/9/21.) UHK has been obliged to cancel non-urgent elective surgeries since the start of September and this has resulted in the deferral of 59 surgeries to date. **Time critical, cancer and all endoscopy day cases are continuing.**

The above situation has been further compounded by 3 other factors.

1. Covid-19 outbreak on one of our general wards taking approx. 140 bed days out of the system
2. Staffing shortages across the hospital due to multiple factors
3. The temporary loss of the hospital Day ward due to the construction/relocation of the hospital High Dependency Unit (these works commenced in August and will be on-going until Jan 2022).

The unfortunate knock on effect of all of the above is that as of Monday 11/10/21, UHK has had to open beds on a second general ward to accommodate the rising number of Covid-19 in-patients.

UHK has actively engaged with the SSWHG and CKCH to assist with improving hospital egress, however there are capacity issues and staffing challenges here as well.

UHK have been working with the Bon Secours Tralee within the current Safety Net Agreement to aid patient flow and extra to this UHK/SSWHG have negotiated access to private hospital capacity in the Bon Secours hospital Tralee and these 12 beds opened on Monday 18<sup>th</sup> October to aid the Unscheduled Care flow.

UHK are engaging directly with the construction team of the HDU to see if access to the Day ward can be facilitated whilst construction work is on-going but have as yet no definitive answer.

To maintain some elective work the UHK Orthopaedic surgeons are currently utilizing two Orthopaedic theatre lists a week in the Bon Secours Tralee.

UHK and SSWHG management will continue to review the situation of recommencing Scheduled Care taking into account a reduction in the Covid-19 burden and improvement in unscheduled care demand. This will be aided by the guaranteed access to 12 in-patient beds for approx. 4 months in the BSHT, improvement of egress for Delayed Transfer off Care patients to the community setting, and if possible the early access to the Day ward.

Additionally, UHK is exploring all possible opportunities regarding the in-sourcing or outsourcing of this deferred elective work.

Concerning staff shortages, UHK as outlined at the briefing on the 11<sup>th</sup> October is experiencing challenges concerning nurse recruitment and that this is in line with all healthcare providers across the acute, voluntary and private settings. The September position was 19.32 wte permanent unfilled nurse vacancies and some of this will be offset by the recent recruitment of 31 graduate nurses and furthermore by 30 international nurses who are currently completing the adaptation programme. The hospital has been running vigorous nurse recruitment campaign for the last number of months and continues to do so, but for the reasons identified above, nurse recruitment across all sectors is extremely challenging. The hospital also promotes flexible working and family arrangements and has been as adaptable as possible during Covid. Since 2018 nurse staffing has increased by 42.5 nurses.

I trust this response is to your satisfaction; should you have any further queries however, please do not hesitate to contact me.

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**Yours sincerely,**



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**Fearghal Grimes**  
**General Manager**  
**University Hospital Kerry**