



Deputy Richard Boyd Barrett
Dáil Éireann
Leinster House
Dublin 2

7th August 2024

PQ 28820/24 - To ask the Minister for Health the estimated full-year cost of permanently increasing and staffing fully and on a permanent basis the number of acute beds to get 85% occupancy in our hospital network. - Richard Boyd Barrett

Dear Deputy Boyd Barrett,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary question, which you submitted to the Minister for Health for response.

The Department of Health published the Acute Inpatient Hospital Bed Expansion Plan on the 29th May 2024 with a plan to deliver an additional 3438* acute beds between now and 2031.

Total Additional Acute Beds	Total Replacement Acute Beds	Total new and replacement acute beds
3438*	929	4367

*includes 106 critical care beds

The plan was based on the 2018 Health Service Capacity Review which identified bed deficits in the service and projected capacity requirements out to 2031, noting that overall bed requirements could be reduced via health service reforms in acute hospitals, community services and by improving health and wellbeing of people using those services. The 2018 review identified a requirement for between 2,100 - 5,800 inpatient beds at an occupancy level of 85% based on population and demographic projects at that time dependant of programmes of reforms including Enhanced Community Care. The Department of Health, in conjunction with the ESRI, has commenced a process to refresh the 2018 Capacity Review.

In the interim, HSE modelling was conducted to identify additional acute inpatient capacity requirements to support the three year Urgent and Emergency Care Plan. The outputs of this modelling, combined with data on the current bed census baseline were used to inform the allocation of acute inpatient beds for the immediate period to 2027.

The demand analysis referred to, and the Health Service Capacity Review were used as the basis of the Acute Inpatient Bed Capacity Expansion Plan 2024-2031. The plan represents a total planned capacity for delivery of 3438 additional and 929 replacement acute inpatient beds over its lifetime.

A large number of factors have a bearing on the cost of implementing the acute bed capacity plan.

The revenue costs are estimated on a range of 3 to 4 whole time equivalent (WTE) staffing per acute inpatient bed, and an indicative figure of 9 WTE per critical care bed, dependent on the bed type, location, complexity of service, specialty etc. It should also be noted that this range per bed relates to the in-patient / ward accommodation, and does not account for key



clinical departments such as radiology, operating departments, neurology etc; which are project specific and sit outside of this staffing range.

I trust this is helpful.

Yours sincerely,

A handwritten signature in black ink that reads "Jacqueline McNulty". The signature is written in a cursive, flowing style.

Jacqueline McNulty
General Manager Access & Integration