



Oifig an Stiúrthóra Oibríochtaí  
An tSeirbhís Náisiúnta  
Bloc 4, Lárionad Gnó,  
Tulach Mhór,  
Co. Uíbh Fhailí, R35 FH59

Office of the Director of Operations  
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NM/PQ/15861.25

16<sup>th</sup> April 2025

Deputy Cathal Crowe TD  
Dáil Éireann  
Leinster House  
Dublin 2

PQ15861.25

To ask the Minister for Health if she will provide an overview of the National Ambulance Service's existing capacity to provide emergency cover to all of County Clare; provide an overview of any plans she and her Department has to improve the National Ambulance Service in County Clare; provide details of National Ambulance Service call-outs in County Clare from 1 January 2024 to 27 March 2025 where response times exceeded HSE targets; if she will investigate fully the circumstances which led to a woman having to wait over three hours for an ambulance to arrive to Doonbeg, County Clare on the morning of 24 March 2025 following a road traffic accident; and if she will make a statement on the matter. -Cathal Crowe

Dear Deputy Crowe

The Health Service Executive (HSE) National Ambulance Service (NAS) has been requested to reply directly to you in the context of the above parliamentary question which you submitted to the Minister for response.

### **Staffing in NAS, Midwest & Co. Clare**

NAS is one of the State's Principal Emergency Services (PES) serving the population of Ireland, i.e., over five million people. An independent demand and capacity analysis conducted in 2022, projected 999 activity to increase by up to 107% over the 10-year period from 2017 to 2027.

Demand via the 999 service has increased by 25% since 2019, with growth in 2024 up by 9% on 2023. The need for additional capacity is a matter of public record [https://www.oireachtas.ie/en/debates/debate/committee\\_of\\_public\\_accounts/2021-09-23/3/](https://www.oireachtas.ie/en/debates/debate/committee_of_public_accounts/2021-09-23/3/), whereby it was confirmed by the HSE (CEO and COO) in September 2021, that NAS had a then capacity deficit of 90 emergency ambulance crews daily (1,080 WTE).

The matter was the subject of further public record in February 2023 [https://data.oireachtas.ie/ie/oireachtas/committee/dail/33/joint\\_committee\\_on\\_health/submissions/2023/2023-02-22\\_opening-statement-robert-morton-director-national-ambulance-service-nas\\_en.pdf](https://data.oireachtas.ie/ie/oireachtas/committee/dail/33/joint_committee_on_health/submissions/2023/2023-02-22_opening-statement-robert-morton-director-national-ambulance-service-nas_en.pdf) following the finalisation of a NAS Workforce Plan 2022-2028 in June 2022, underpinned by an independent demand and capacity analysis, which identified the need for considerable growth in the workforce across the country, both now and into the future (2,579 additional WTE by 2028).

The HSE Pay and Numbers Strategy for 2024 set the WTE Ceiling for NAS at 2,321 WTE which represents a growth of almost 300 WTE since 2019.





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In comparison to NAS, the Welsh Ambulance Service NHS Trust has 4,079 WTE <https://senedd.wales/media/kradakaee/gen-ld16576-e.pdf> to serve 3.1m people (2021 Census), while the Scottish Ambulance Service has 5,837 WTE <https://www.scottishambulance.com/publications/annual-report-and-accounts/> to serve 5.4m people (2022 Census).

The National Ambulance Service (NAS) serves the Midwest – which includes Co. Clare - through a highly skilled workforce, a fleet consisting of emergency ambulances, intermediate care vehicles and rapid response vehicles and the NAS National Emergency Operations. The Midwest also has a large number of alternative care pathways, including but not limited to Community Paramedic, Pathfinder and the Alternative Prehospital Pathway, these resources serve the people of the Midwest offering a multitude of alternative pathways for care.

NAS continue to seek additional New Service Development posts through the Estimates process in order to increase its' workforce to serve the growing population and increase in demand for Co. Clare, the Midwest and Nationally.

Table 1 below gives details of the no of ambulances available, on average in the Midwest Region is as follows:

DAY	AVERAGE NO OF EA'S (DAY)	AVERAGE NO OF EA'S (NIGHT)
Monday	16	13
Tuesday	15	12
Wednesday	15	12
Thursday	16	12
Friday	14	13
Saturday	13	14
Sunday	13	13

Table 1: Average no of EA's -MidWest

### **Co. Clare call-outs 01.01.2024 – 30.03.2025**

In response to your query re Call-outs in Co. Clare, NAS report monthly on PURPLE (Echo) and RED (Delta) call activity, category AS1 (life threatening cardiac or respiratory arrest or life threatening other than cardiac or respiratory arrest) calls. Response times per county or CHO are not deemed a Key Performance Indicator (KPI) for the Health Information Quality Authority (HIQA), the Department of Health (DoH) or the National Ambulance Service (NAS). Therefore, reporting and publishing of response times on a county by county or CHO basis is not a requirement.

In 2025, the HSE National Service Plan set national aggregate Key Performance Indicator (KPI) targets for emergency calls as follows:

- PURPLE (Echo, life-threatening cardiac or respiratory arrest) (75% in 18 minutes, 59 seconds)
- RED (Delta, life-threatening illness or injury, other than cardiac or respiratory arrest) (45% in 18 minutes, 59 seconds)





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There are no response time targets for 999 calls that are neither life-threatening nor potentially life threatening. Hence during busy periods, patients triaged as non-serious or non-life threatening can and do unfortunately experience delays in our response.

Table 2 below gives details of the Key Performance Indicator (KPI) for emergency response times in the Midwest Region is as follows:

Reporting Period	PURPLE Response Time	RED Response Time
26 Feb 2024 – 30 Mar 2025	74.74%	48.61%

Table 2: Response times for Midwest Region 26 Feb 2024 – 30 Mar 2025

### **Call on 24.03.2025 – Doonbeg, Co. Clare.**

The HSE cannot comment on individual cases when to do so might reveal information in relation to identifiable individuals, breaching the ethical requirement on us to observe our duty of confidentiality.

From the review, the primary factors in the delay to respond was the demand of high acuity calls in that area during that particular time period. The detailed call review showed that the call takers and supervisors involved in the triaging and monitoring of the call were seen to correctly categorise the call and diligently attempted to get an available resource to the scene in the shortest time possible. The detailed review also showed that the call was regularly dispatch reviewed.

The NAS continues to work hard to deliver the highest standard of service expected from our organisation. NAS intend to continue to grow to meet and exceed current performance levels in the face of ever increasing demand.

I trust this information is of assistance.

Yours sincerely,

Niall Murray  
General Manager  
Area Operations NAS HSE MW

