



Oifig anStiúrthóir  
An tSeirbhís Náisiúnta,

Foirgneamh Aibhneacha, Crosbhóthar  
Thamhlachta, Tamhlacht,  
Baile Átha Cliath D24 XNP2

Office of the Director  
National Ambulance Service

Rivers Building, Tallaght Cross  
Tallaght, Dublin, D24 XNP2

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18 February 2025

Deputy Máire Devine TD  
Dáil Éireann  
Leinster House  
Dublin 2

**PQ25/4755**

To ask the Minister for Health the number of advanced paramedics the National Ambulance Service has employed in each county in each year from 2014 through 2024 inclusive; the number of advanced paramedics the National Ambulance Service has trained in each county in each year from 2014 through 2024 inclusive, and for which specific service they are employed (National Ambulance Service, Dublin Fire Brigade, the Defence Forces, Coastguard and the Dublin Airport Fire Service, and so on); the planned salary budget for advanced paramedics in the National Ambulance Service in each year from 2014 through 2024 inclusive; and the actual salary budget for Advanced Paramedics in the National Ambulance Service in each year from 2014 through 2024, in tabular form.

**PQ25/4756**

To ask the Minister for Health the number of advanced paramedics in the National Ambulance Service considered to be an appropriate and safe staffing level on a national basis; and the number of advanced paramedics considered appropriate and safe staffing levels per county, in tabular form

**PQ25/4757**

To ask the Minister for Health her Department's plans to internally hire and train advanced paramedics for the coming year; and if she will make a statement on the matter.

**PQ25/4758**

To ask the Minister for Health what the existing obstacles are to hiring and training advanced paramedics; how her Department plans to overcome these obstacles in detail; and if she will make a statement on the matter.

**PQ25/4759**

To ask the Minister for Health whether any patient deaths from 2014 through 2024 inclusive are attributed to the lack of trained advanced paramedics with the National Ambulance Service; in which county the patient lived and was treated; and if she will make a statement on the matter.

Dear Deputy Devine,

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





### **PQ25/4755**

There is no specific employment grade within the HSE called Advanced Paramedic and hence, a variety of grades of staff may be registered as an Advanced Paramedic with PHECC and be privileged to practice on behalf of the HSE.

There are currently over 400 HSE staff working in the NAS who are currently registered as an Advanced Paramedic with PHECC. Most of these have been educated through NAS, however, a growing number are direct entry staff who already hold PHECC registration as an Advanced Paramedic.

2016	158*
2019	254*
2021	302*
2024	374**
2025	417**

*\*estimate based on training profile*

*\*\*number confirmed for Internal Audit of payment of Advanced Paramedic allowance*

In relation to the specific information you have requested for county level, there is no service plan or operational reason for the creation of such reports. There are no clerical administrative staff available to undertake this work.

HSE employees who are registered as an Advanced Paramedic with PHECC and privileged to practice on behalf of the HSE, subject to the terms and conditions of the role, may receive an Advanced Paramedic allowance (€11,005 per annum – 1 October 2024 pay scales)

NAS has never received any specific budget to cover the costs of such payments which have had to be borne from within the overall budget allocation.

### **PQ25/4756**

There are no such approved staffing levels in existence.

### **PQ25/4757 and PQ25/4758**

In relation to Advanced Paramedic training, the MSc. in Specialist Paramedic Practice (Advanced) is run nationally in conjunction with University College Cork (UCC). Please note that Advanced Paramedic is a level of clinical practice, i.e. registered as an Advanced Paramedic with the Pre Hospital Emergency Care Council (PHECC).

Most of have been educated through NAS, however, a number recruited already held PHECC registration as an Advanced Paramedic. A recent analysis of Advanced Paramedic deployment has identified that while the number of patient contacts has increased, the level of patient benefit is not commensurate with the level of investment.





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The cost of Advanced Paramedic education is significant with staff historically receiving an allowance equivalent in excess of 20% additional pay, resulting in considerable competition for course places.

The HSE has informed the representative trade unions that there is a need to strengthen the deployment of existing staff with specialist skills to match patient requirements before any consideration can be given to increasing the number of staff with such training.

The work to do this is encompassed within a broader pay dispute, which is the subject of a WRC facilitated conciliation process, currently underway.

In the meantime, NAS has prioritised investment in an MSc. in Specialist Paramedic Practice (Community), again run nationally in conjunction with UCC. In excess of 20 Students are expected to graduate in 2025 with up to 24 Students expected to commence in 2025. These opportunities are advertised nationally for all staff to apply for.

Pending the resolution of matters before the WRC, there is no provision within the HSE' National Service Plan 2025, to commence an MSc. in Specialist Paramedic Practice (Advanced) programme in 2025.

Where the HSE National Service Plan 2026 makes provision for an MSc. in Specialist Paramedic Practice (Advanced) programme, advertisement would only occur in 2026 with any start date expected to commence in September 2026.

**PQ25/4759**

NAS is unable to speculate on the cause of death of patients who are not in cardiac arrest (clinical death) at the time of a 999 call but subsequently present to the arriving crew in cardiac arrest. For some patients, death may be expected (medical practitioner certifies death without a post-mortem). In contrast, for others, the nature and extent of their injuries are incompatible with life, e.g. blunt force trauma in a road traffic collision.

The only true correlation between whether an intervention MAY have prevented death, i.e. a preventable death, is where the Coroner makes such a determination. NAS has never received such a determination.

I hope you find this information helpful

Yours sincerely

Robert Morton  
Director  
National Ambulance Service

