



**Oifig an Phríomhoifigigh Airgeadais**  
Feidhmeannachta Seirbhíse Sláinte,  
Seomra 125, Ospidéal Dr. Steevens,  
BÁC 8, D08 W2A8

**Office of Chief Financial Officer**  
Health Service Executive,  
Room 125, Dr Steevens Hospital,  
Dublin 8, D08 W2A8

**www.hse.ie**  
**@hselive**  
**t** 01 6352542  
**e** cfo@hse.ie

19<sup>th</sup> March 2025

Deputy Alan Kelly TD,  
Dáil Éireann,  
Leinster House,  
Kildare Street,  
Dublin 2.

**Re PQ 9551 25:** *To ask the Minister for Health to provide a full and total breakdown of all costs, including recruiting, hiring, and paying for agency staff across the HSE, including the acute sector, for the years 2022, 2023, 2024 and to date in 2025, in tabular form; and if she will make a statement on the matter.*

**Re PQ 9550 25:** *To ask the Minister for Health to provide the total number of agency workers in operation across the HSE, including the acute sector as of 26 February 2025, broken down by grade, category and location; and if she will make a statement on the matter.*

Dear Deputy Kelly,

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. Your PQs above have been referred to me for response.

### **Context**

The available supply in the labour market for health workforce continues to be a challenge. This is not unique to Ireland, but rather a global health workforce challenge. Recruitment and retention of Clinical, Nursing and other key staff is a constant challenge and impacts adversely on the ability to maintain safe and effective services. Therefore, as part of the HSE's overarching resourcing approach whereby direct employment does not meet the needs of service delivery requirements, agency staff are utilised. This can be for a variety of reasons, including sick absence replacement, both long and short term, to replace vacancies currently being actively recruited to, to replace maternity leave etc. There are also additional resourcing requirements with the replacement of lost hours in critical services areas following the reversal of the Haddington Road Agreement.

In advance of the filling of these hours via direct employees, there is a need to prioritise critical services for replacement through agency and overtime. Collectively, these give rise to the utilisation of agency resources however while simultaneously running large scale domestic and international recruitment campaigns to fill through direct employment. At times the HSE have been unable to fill a vacancy even via agency. The agencies have indicated that they are experiencing difficulty in recruiting themselves due to a lack of availability and also accommodation availability and costs.

While operating within spend limits, the HSE Senior Leadership Team have committed to fully deliver on the planned activity levels as set out in the HSE National Service Plan including the Waiting List Action Plan and Urgent and Emergency Care Plan. This requires the dual approach of improving the productivity of key services and managing the level and affordability of our workforce through the application of both the HSE's Pay and Non-Pay control limits. This is



particularly focused around staffing levels, including getting to levels of agency and overtime which is sustainable into 2025.

The HSE is focussed on maximum delivery of the savings agreed to as part of the two-year funding agreement set out in the National Service Plan for 2025 i.e. new for 2025 and any undelivered in 2024. As part of the overall financial stabilisation of the HSE, significant progress has been made on pay in terms of planning, allocation and control and the new control environment ensures there is absolute clarity on staffing parameters whilst embedding a culture of continuous improvement in productivity. There remains work still to do to achieve the level of agency and overtime savings required and fundamentally hospitals will be more challenged in terms of living within overall pay allocation including direct pay. The focus on 2025 will be reducing this challenge.

Please see **Appendix 1** (separate excel attachment) which shows total HSE expenditure on agency staff for the years 2022 to 2024 and for the month of January 2025 which is the most recent data available.

The breakdown provided is by the Department of Health staff categories i.e. Medical/Dental, Nursing, Management/Admin, Paramedical, Support Services and Maintenance/Technical staff. The data provided was sourced from the HSE Consolidated Financial Intelligence system and is for HSE Statutory services only. Please note that the figures for 2024 are draft only and are subject to change within the year end audit process and 2025 figures are draft only.

The majority of agency spend is salary and statutory pay costs such as PRSI, holiday allowance etc. In line with the Protection of Employees (Part -Time Work) Act agency staff have the right to the same basic employment conditions, this includes basic pay, shift premiums, unsocial hours and Sunday rates.

In relation to your query PQ 9550 25, I regret to inform you that the number of Agency workers in operation across the HSE is not centrally collated.

The shortcomings in the HSE legacy financial systems are well acknowledged and their replacement by a single standard financial system for the Health Sector is at the core of the Finance Reform programme initiated by the Department of Health.

If you have any queries, please do not hesitate to contact me at [sarah.anderson1@hse.ie](mailto:sarah.anderson1@hse.ie) or tel: 087 9423319.

Yours sincerely

**Sarah Anderson**

**Bainisteoir Ginearálta | General Manager**

HSE Airgeadais Corparáideach, An Rannóg Airgeadais Náisiúnta agus Soláthair HSE  
Teach Darach, Páirc na Mílaoise, An Nás, Co. Chill Dara, W91 KDC2.

HSE Corporate Finance, HSE National Finance & Procurement Division  
Oak House, Millennium Park, Naas, Co Kildare, W91 KDC2.

E: [sarah.anderson1@hse.ie](mailto:sarah.anderson1@hse.ie)

T: 087 9423319

## Appendix 1 to PQ 9551 25

Total Agency spend per HSE Division for the years 2022 to 2024 and for the month of January 2025 <i>HSE Statutory Services only</i>				
	2022	2023	*2024	*Jan 2025
HSE Division	€	€	€	€
Acute Hospitals Division	242,904,759	253,614,096	304,477,957	28,312,807
Primary Care Division	85,584,996	79,129,830	80,483,181	6,618,334
PCRS		3,718,462	585,171	16,292
Mental Health Division	87,123,337	105,400,088	106,380,567	9,696,162
Health & Wellbeing Division	6,875,295	51,208	324,364	-3,843
Support Services	28,077,557	12,049,055	16,132,271	1,191,739
Treatment Abroad and Cross Border Healthcare	1,060,813	1,006,195	877,759	48,279
Local Demand Led Schemes	112,358	41,880	85,103	8,580
Disabilities	48,103,497	61,279,393	77,903,414	7,757,900
CHO HQs & Community Services	2,270,638	2,514,104	2,248,719	187,412
National Ambulance Service	5,050,190	6,060,851	5,023,737	464,115
EU Schemes: European Health Insurance Card	41,434	3,801		
Older Persons Services	88,767,620	103,646,236	118,999,735	10,420,917
Clinical	1,548,861	6,020,182	4,171,279	360,866
National Screening Service	1,139,307			
National Services	255,555			
Health & Wellbeing Community	1,500,054	4,592,353	5,978,393	423,098
Testing & Tracing COVID 19 - Central	18,617,886	5,394,389	1,177,442	93,282
Quality & Patient Safety – Community	759,717	726,148	367,853	25,304
Community Operations – regional/national			156,569	12,874
Operational Performance & Integration		2,234,260	162,887	9,118
Public Involvement, Culture & Risk Mngt			771,573	25,109
<b>HSE Total</b>	<b>619,793,873</b>	<b>647,482,531</b>	<b>726,307,973</b>	<b>65,668,345</b>
<b>Source:</b> Consolidated Financial Intelligence System (CFI).				
<b>Note:</b> *2024 figures are draft and subject to change within the year end audit process. *2025 figures are draft only.				