

## REGIONAL HEALTH FORUM WEST QUESTIONS & RESPONSES

**For Reply at meeting of 22<sup>nd</sup> February, 2011**

	NUMBER	QUESTION	RAISED BY	Page Number
1	W31Q694	What are General Practitioners charged for blood sample testing carried out at HSE laboratories on their behalf. What is the cost to the HSE of fully testing one blood sample. On average how many blood samples are carried out by the HSE West Each Year. Does the HSE collect and deliver samples to and from GP surgeries, and are GP's provided with and charged for the necessary equipment (syringes, vials, paperwork etc.) required for blood sampling?	Cllr Brian Meaney	5 - 6
2	W31Q695	I request an explanation of the high security costs at Limerick Regional Hospital as given to me in reply to my question at a previous health forum meeting, How does this compare to other city Hospitals . I request a report of all incidents that required the intervention of the Gardai over the last three years at Ennis General Hospital and Limerick Regional Hospital. This was not supplied in response to my previous question to the forum on this matter.	Cllr Brian Meaney	6
3	W31Q696	What is the current suicide rate per 100,000 population by county in the HSE health forum west area. What are the incidents of suicide in the traveller community. How are trends in suicide monitored and is the HSE confident that the statistics are accurate	Cllr Brian Meaney	6 - 7
4	W31Q697	I request a list of all properties the HSE in the West area own or are in control of, for which the HSE West receives a rent. I request a list of the area and nature of the property's and the amount of monies received for each property and total cumulative amount for 2010. I request a list of all property the HSE west own or are in control of, which is not in use by HSE West from which no rent is collected.	Cllr Brian Meaney	7 - 8
5	W31Q698	When will the Acute Mental Health Unit in Letterkenny be opened?	Cllr Ciaran Brogan	8
6	W31Q699	When will the new A&E Medical Assessment unit be completed in Letterkenny?	Cllr Ciaran Brogan	8
7	W31Q700	When will an Occupational Therapist as part of the Child & Adolescent Mental Health Service for Donegal be likely to happen?	Cllr Ciaran Brogan	8
8	W31Q701	“To ask if the HSE has received a request from the Board of Management of the Holy Family National School, Tubbercurry, Co Sligo, to make available a portion of HSE lands adjacent to the school for off road parking, and to ask if the HSE will sympathetically consider the request particularly taking into consideration the safety needs of parents and pupils.”	Cllr Declan Bree	8
9	W31Q702	In the absence of residential rehabilitation for Clare people under the age of 65 suffering from brain damage, how does the HSE West propose to provide a service for this very needy group of people?	Cllr Tom McNamara	8 - 9

10	<b>W31Q703</b>	What services will be available at Ennis General Hospital post reconfiguration and what are the agreed WTE levels of the different grades of staff for the delivery of this service?	<b>Cllr Tom McNamara</b>	<b>9 - 10</b>
11	<b>W31Q704</b>	What are the long term plans for the delivery of acute residential psychiatric care for the people of Co.Clare?	<b>Cllr Tom McNamara</b>	<b>10</b>
12	<b>W31Q705</b>	Can you confirm to me what progress has the A & E Forum made with A & E in U.C.H.G. It still appears that there are serious issues in A & E.	<b>Cllr Mary Hoade</b>	<b>10 - 11</b>
13	<b>W31Q706</b>	Can you confirm is there a review of the Nursing home's that are currently listed for step –down by the HSE. How are those nursing homes selecting.	<b>Cllr Mary Hoade</b>	<b>11</b>
14	<b>W31Q707</b>	Can you confirm to me when medical card expire, if the medical card holders are notified as I have been informed by some cardholders that they were unaware that their card had expired until they were told by their G.P.	<b>Cllr Mary Hoade</b>	<b>11 - 12</b>
15	<b>W31Q708</b>	“That the Forum be provided with a list of properties which the HSE is renting to third parties in Sligo and Leitrim, including the names of the companies/individuals who are renting the properties and the details of the rent received for each property.”	<b>Cllr Declan Bree</b>	<b>12</b>
16	<b>W31Q709</b>	“To ask if the HSE has made any submission to Government seeking to have the administration and payment of Carer’s Allowance transferred from the Department of Social Protection to the HSE.”	<b>Cllr Declan Bree</b>	<b>12</b>
17	<b>W31Q710</b>	“What level of staffing and resources including mammography services is being currently provided for follow up treatment for breast cancer patients in Sligo General Hospital.”	<b>Cllr Declan Bree</b>	<b>13</b>
18	<b>W31Q711</b>	Please clarify the position in relation to the roll out of Primary Care Teams in Galway City and County including clarifying the result of the advertising of expressions of interest, what the plan is now and setting out the site of each Primary Care Team in the City and County and the status and make up of same.	<b>Cllr Catherine Connolly</b>	<b>13 - 14</b>
19	<b>W31Q712</b>	Please clarify how many employees took the most recent redundancy package with its deadline before Christmas- clarifying what grades of employees left, from which department and how these positions have been filled.	<b>Cllr Catherine Connolly</b>	<b>14</b>
20	<b>W31Q713</b>	Please clarify what the position is in relation to services in Galway City and County, for children who have been sexually assaulted including the nature of the services, where they are being provided and by whom and the nature of the contract if any in place.	<b>Cllr Catherine Connolly</b>	<b>14 – 15</b>
21	<b>W31Q714</b>	Please clarify the current position and status of the proposal for a further hospital on the grounds of the Regional Hospital Galway and in particular the nature of the proposal, where it fits into the overall plan for the Hospital, who is proposing this hospital, where it is to be based and full details on what exactly is proposed	<b>Cllr Catherine Connolly</b>	<b>15</b>

22	<b>W31Q715</b>	How many public patients are currently on a waiting list for Medical Imaging, MRI/CT/Scans/other at UHG and Merlin Park, and what payments have been made from the HSE or NPTF for Medical Imaging Scans or other services to the Merlin Park Imaging Centre in Merlin Park for 2010, and how many public patients have been referred to the Merlin Park Imaging Centre for Medical Imaging Scans or other for 2010 and what is the cost of each Medical Image / Scan or other, and the Total amount paid to Merlin park Imaging Centre for all above for 2005 to 2009?	<b>Cllr Pdraig Conneely</b>	<b>15 - 16</b>
23	<b>W31Q716</b>	How many patients were on trolleys at UHG from 1 <sup>st</sup> Jan 2011 to date – total for that period?	<b>Cllr Pdraig Conneely</b>	<b>16 - 18</b>
24	<b>W31Q717</b>	What is the current status of the Capital Building Programme for UHG?	<b>Cllr Pdraig Conneely</b>	<b>18 - 19</b>
25	<b>W31Q718</b>	Can you please let me know when it is proposed to fully open and occupy the newly constructed Community Nursing Home in Ballinasloe, and have the required Human Resources been allocated for this Facility ?.	<b>Cllr Michael Mullins</b>	<b>19</b>
26	<b>W31Q719</b>	Can I please have details of the current Staffing levels in the Pharmacy, Occupational Therapy, and Physiotherapy Departments in Portiuncula Hospital. How many vacancies exist in each Department and what plans are being put in place to fill these critical vacancies. Why are these Posts that are not subject to the moratorium, not being signed off on?	<b>Cllr Michael Mullins</b>	<b>19</b>
27	<b>W31Q720</b>	Can you please let me have details of the HSE Plan for the provision of Acute Mental Health Services in County Galway, and let me know what role the Admissions Unit at St. Bridget's Hospital in Ballinasloe will play in this provision?	<b>Cllr Michael Mullins</b>	<b>19 - 20</b>
28	<b>W31Q721</b>	Has the HSE any plans to act on the Research carried out by Dr. Conor Farren, Consultant Psychiatrist at St. Patrick's Univ. Hospital. Dublin, that states that many codeine based medicines, such as Solpadine and Nurofen Plus, should be made Prescription only, because they are "too addictive and too dangerous " to be sold over the counter ?	<b>Cllr Michael Mullins</b>	<b>20 - 21</b>
29	<b>W31Q722</b>	To ask the HSE to give an update on the number of beds presently in Raheen Community Hospital; report on the classification of those beds and their usage and if there are plans to cut further beds at the Hospital.	<b>Cllr Joe Cooney</b>	<b>21 - 22</b>

<b>W31Q694</b>	What are General Practitioners charged for blood sample testing carried out at HSE laboratories on their behalf. What is the cost to the HSE of fully testing one blood sample. On average how many blood samples are carried out by the HSE West Each Year. Does the HSE collect and deliver samples to and from GP surgeries, and are GP's provided with and charged for the necessary equipment (syringes, vials, paperwork etc.) required for blood sampling?	<b>Cllr Brian Meaney</b>
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ISA Area	What are General Practitioners charge for blood sample testing carried out at HSE Laboratories on their behalf?	What is the cost to the HSE of fully testing one blood sample?	On average how many blood samples are carried out by the HSE West each Year (avg 2009- 2010?)	Does the HSE collect and deliver samples to and from GP surgeries?	Are GPs provided with and charged for the necessary equipment required for blood sampling?
Donegal	No charge	Varies depending on test	1,080,580 in 2009	HSE collects samples from some GP surgeries, but do not deliver.	All laboratory consumables are provided fee of charge to all GP practices.
Sligo / Leitrim					
Mayo	No charge	Varies depending on test	325,037 on average per annum.	Westdoc and some taxi services collect samples from GP practices.  Supplies are also delivered this way.	All laboratory consumables are provided fee of charge to all GP practices.
Mid West					
Galway GUH	No charge	Varies depending on the nature and complexity of the test.  Lab Costs for GP tests 2009: Supplies = €221,000 Assoc. Staff Costs = €764,000 Analytical Costs = €1,166,000 Overall GP Cost = €2,151,000  Testing GP samples is 47% of work volume but constitutes only 14% of the lab operating costs.	An average of 11.7 million blood tests were carried out in GUH each of the years 2009 and 2010.	Yes- there are courier services organised and paid by PCCC. The lab delivers electronics reports through a third party "Health – links"	All laboratory consumables are provided fee of charge to all GP practices.
Galway PCCC	No charge	GUH have this info	GUH have this info	Yes	All laboratory consumables are provided fee of charge to all GP practices.
Portiuncula Hospital	No charges are applied	Varies depending on test	626,000 tests	Westdoc provide a collection service	All laboratory consumables are provided fee of charge to all GP

					practices.
<b>Roscommon County Hospital</b>					
<b>Roscommon PCCC</b>					

<b>W31Q695</b>	I request an explanation of the high security costs at Limerick Regional Hospital as given to me in reply to my question at a previous health forum meeting. How does this compare to other city Hospitals . I request a report of all incidents that required the intervention of the Gardai over the last three years at Ennis General Hospital and Limerick Regional Hospital. This was not supplied in response to my previous question to the forum on this matter.	<b>Cllr Brian Meaney</b>
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<b>W31Q696</b>	What is the current suicide rate per 100,000 population by county in the HSE health forum west area. What are the incidents of suicide in the traveller community. How are trends in suicide monitored and is the HSE confident that the statistics are accurate	<b>Cllr Brian Meaney</b>
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**1. Suicide rates per 100,000 by county in HSE West area:**

<b>County</b>	<b>Rate</b>
Donegal	10.3
Leitrim	14.5
Sligo	11.2
Galway	10.7
Mayo	12.3
Roscommon	12.3
Clare	13.2
Limerick	12.9
North Tipperary	17.6
State	11.3

The data is aggregated from 2003-2007 to give the most meaningful and comparable figures. Please note that 2007 is the year for which we have the most recent official data for the following reasons; The CSO makes two mortality data sets available

- Deaths by 'year of occurrence' and
- Deaths by 'year of registration' (*or* provisional data).

Data by year of occurrence is the official data, and refers to deaths that occurred in that calendar year. 2007 is the most recent year for which data by year of occurrence is available.

Data by year of registration refers to deaths which were registered with the CSO in a particular year. Deaths which occur from an suicide, homicide or accident are often not registered in the year in which they occur, as registration happens after an inquest closes.

As inquests may not take place until the following calendar year, there is an inevitable delay in registering these deaths.

It is important to note that the data by registration data set is provisional, and not comparable to data by year of occurrence.

Data for 2008 and later is only provisional and, therefore, not useful. Also, the registration data set does not breakdown the information by county.

**2. Incidents of suicide in the Traveller community:**

The most recent research, published in the *All Ireland Traveller Health Study* (UCD, 2010), indicated that there were 12 confirmed deaths by suicide in a one-year period in the Traveller population. Based on the General Register Office (GRO) confirmed suicide figures – the following rates have been calculated when compared with the general population;

Suicide rates are nearly 7 times higher in Traveller men compared with the general population and suicide rates in females are nearly 5 times higher.

**3. How trends in suicide are monitored:**

The trends in deaths by suicide can be tracked in the annual report of the National Office for Suicide Prevention, which provides rates by age, gender and method each year. ([www.nosp.ie](http://www.nosp.ie))

The information is sourced from the Central Statistics Office.

**4. Accuracy of statistics**

Statistics on deaths by suicide are provided annually by the Central Statistics Office (CSO). The data is of international standards and recognized as highly accurate. The CSO data are informed by the Medical Cause of Death Certificate, the Coroner’s certificate and FORM 104, a statistical form which is completed by An Garda Síochána after an inquest.

A number of deaths remain unclassified each year (119 in 2007), and are named “Undetermined”. It is thought that some of these may be deaths by suicide (e.g. it may not always be possible to determine if a death by overdose was accidental or intentional). Therefore, full accuracy is never possible as some deaths by suicide will always fall into the “undetermined” category.

<b>W31Q697</b>	I request a list of all properties the HSE in the West area own or are in control of, for which the HSE West receives a rent . I request a list of the area and nature of the property’s and the amount of monies received for each property and total cumulative amount for 2010. I request a list of all property the HSE west own or are in control of, which is not in use by HSE West from which no rent is collected.	<b>Cllr Brian Meaney</b>
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Not available at the time of printing.		
<b>W31Q698</b>	When will the Acute Mental Health Unit in Letterkenny be opened?	<b>Cllr Ciaran Brogan</b>
The Acute Mental Health Unit in Letterkenny is scheduled for completion in April 2011.		
<b>W31Q699</b>	When will the new A&E Medical Assessment unit be completed in Letterkenny?	<b>Cllr Ciaran Brogan</b>
The HSE is advancing legal and financial discussions with the McNamara bondsman for the completion of the hospital works. The bondsman has made certain proposals to the HSE which are now being costed and considered at a detailed level. Once the final agreement has been reached with the bondsman, it should be possible for the works to recommence within a matter of weeks.		
<b>W31Q700</b>	When will an Occupational Therapist as part of the Child & Adolescent Mental Health Service for Donegal be likely to happen?	<b>Cllr Ciaran Brogan</b>
The need for an Occupational Therapist as part of the Child and Adolescent Mental Health Service (CAMHS) for Donegal is accepted and is recommended in the national policy document "Vision for Change". In the absence of new funding and the creation of a new post, it will be necessary to suppress an equivalent post. The option for resolving the issue in this manner is currently being reviewed.		
<b>W31Q701</b>	"To ask if the HSE has received a request from the Board of Management of the Holy Family National School, Tubbercurry, Co Sligo, to make available a portion of HSE lands adjacent to the school for off road parking, and to ask if the HSE will sympathetically consider the request particularly taking into consideration the safety needs of parents and pupils."	<b>Cllr Declan Bree</b>
The HSE did receive a number of representations requesting that it would make available a portion of lands adjoining Holy Family National School, Tubbercurry. Estates Department did undertake a "technical review" of the site in question and concluded that to concede to such a request, would significantly impact future potential of the site. Accordingly, the request could not be granted.		
<b>W31Q702</b>	In the absence of residential rehabilitation for Clare people under the age of 65 suffering from brain damage, how does the HSE West propose to provide a service for this very needy group of people?	<b>Cllr Tom McNamara</b>
The HSE funds 8 residential rehabilitation beds for people under the age of 65 suffering from brain damage. These beds are provided by Acquired Brain Injury Ireland (The Peter Bradley Foundation), who is grant aided by the HSE.		
In addition, in the Mental Health 'Vision for Change' two neuropsychiatry multidisciplinary teams based in Dublin and Cork are recommended. It is estimated that there will be		

30-35 referrals per year per 100,000 population. These neuropsychiatry teams will have access to a six to ten bedded neuropsychiatry unit.

**W31Q703**

What services will be available at Ennis General Hospital post reconfiguration and what are the agreed WTE levels of the different grades of staff for the delivery of this service?

**Cllr Tom McNamara**

### **Emergency Medicine**

The emergency department in Ennis is part of a single region wide department of emergency medicine. The local emergency centre will continue to operate from 8am to 8pm. The ambulance service in Clare has been enhanced through the employment of additional paramedic staff. This improved ambulance cover has facilitated the introduction of a dedicated advanced paramedic service in Clare. Pre hospital Thrombolysis, provided by the advanced paramedic service across the region commenced in March 2010. Four new Advanced Nurse Practitioners (ANPs) have been approved for the Mid West Region and are currently being recruited. The ANPs will rotate through the emergency departments across the region.

### **Surgery**

Ennis hospital is part of a Region wide Department of Surgery. All Acute surgery, complex surgery and all cancer surgery is now being carried out in the Mid-Western Regional Hospital, Limerick. Clare patients requiring acute surgery can be referred to the surgical assessment unit in the Mid West Regional Hospital Limerick, which was set up as part of the reconfiguration of acute surgery to provide rapid access to senior decision makers in surgery and bypass the Emergency Department altogether. Five day elective surgery is carried out in St. John's Hospital.

Day surgery is undertaken at Ennis, Nenagh and St. John's Hospitals, with a 33% increase in Ennis in 2010 compared to 2008. Nine of the general surgeons are now providing subspecialty services to either Ennis or Nenagh while orthopaedics, plastics, maxillo-facial, ENT and urology are either being introduced for the first time or expanded further. Further expansion of surgical day services in Ennis and Nenagh will be facilitated by the new endoscopy suites - currently all endoscopy procedures are performed in theatre. The endoscopy suite in Ennis is under construction and will be completed in April 2011. On completion the new suite in Ennis will be used for colonoscopy screening under the National Cancer Care Programme. A new 12 bedded day surgical ward is also part of this development in Ennis.

### **Medicine**

The next stage in the reconfiguration programme is the implementation of a new model of care for acute medical patients. General medicine will continue to be provided in Ennis, as part of the acute medicine programme. The majority of medical patients will continue to be treated in the local hospital. It is envisaged that this programme will be implemented in the next six months.

Two physicians in the Mid West are leading out on the formulation of the medical model for the Mid West Hospital Group. This plan will be consistent with the national acute medicine programme. Medical Assessments Units will be developed in Ennis as part of the acute medicine programme. A new fifty bedded unit is planned for Ennis Hospital. Construction will commence in the next two weeks and will be completed by end of 2011.

### **Cardiology**

Acute cardiology will be centralised to the Mid Western Regional Hospital Limerick during 2011. The appointment of a 4<sup>th</sup> Cardiologist has been approved and the recruitment process has commenced. This appointment will facilitate a separate cardiology rota giving the patients of the Mid West access to a Cardiologist on a 24 /7 basis.

Interventional cardiology, i.e. angioplasty will be performed in the designated cardiac catheterisation laboratory in the Mid Western Regional Hospital Limerick thereby giving the



patients of the Mid West region the best possible outcome in the event of an acute cardiac episode. Six additional in-patient cardiology beds are being designated in the Mid Western Regional Hospital Limerick.

Out patient and cardiac day services will continue to be provided by the cardiologists and the specialist cardiac teams in Ennis hospital and further enhancement of these services is planned, i.e. cardiac failure clinics, cardiac rehab, etc.

**Diagnostics**

The introduction of a unified region wide diagnostics service through the new national NIMIS (National Integrated Medical Imaging System) project is probably one of the most important features of the reconfiguration of acute hospital services in the Mid West. It is anticipated that this project will be implemented in the Mid West in September 2011.

A CT scanner has been commissioned in Ennis. A second CT scanner has been put in place in the MWRH Limerick to increase diagnostic access for all emergency patients, as well as back up for the current scanner.

<b>W31Q704</b>	What are the long term plans for the delivery of acute residential psychiatric care for the people of Co. Clare ?	<b>Cllr Tom McNamara</b>
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Currently there is a 39 bed acute psychiatric unit in Ennis and a 50 bedded acute psychiatric unit in Limerick.

'Vision for Change' recommends one 50 bedded acute unit for populations of 350,000. It is envisaged that acute psychiatric services for the Mid West will be reviewed in line with the recommendations of 'Vision for Change'.

<b>W31Q705</b>	Can you confirm to me what progress has the A & E Forum made with A & E in U.C.H.G. It still appears that there are serious issues in A & E.	<b>Cllr Mary Hoade</b>
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Waiting times in the Emergency Department (ED) remains a priority focus for GUH.

**GUH have implemented a number of initiatives to assist with ED waiting times;**

- IT system to capture data on wait times introduced November 2010.
- Triage system reviewed to ensure effective streaming of patient – streamed into minor injuries, medical/surgical/orthopaedics, resuscitation etc.
- Rapid Access Lung Clinic set up and running every Monday. Referrals seen within 2 weeks.

	<ul style="list-style-type: none"> <li>• A 2 bedded Oncology Assessment area was opened October 2010 to review oncology patients being admitted through ED.</li> <li>• TIA clinic commenced August 2010 which runs Tuesday &amp; Friday referrals initially from Medical Assessment Unit (MAU) &amp; ED.</li> <li>• GP direct admission commenced to MAU in March 2010. Use of the MAU by GP's directly has improved significantly &amp; there is still further capacity to be availed of.</li> <li>• Phlebotomy Service commenced in ED August 2010.</li> </ul>	
<b>W31Q706</b>	Can you confirm is there a review of the Nursing home's that are currently listed for step –down by the HSE. How are those nursing homes selecting.	<b>Cllr Mary Hoade</b>
<p>The Nursing Homes Support Scheme was introduced at the end of October, 2009. Since its introduction, state financial support for all new applicants for long term residential care can only be accessed through the Fair Deal. In that context, all contract bed arrangements with private nursing homes for long term residential care is being phased out.</p> <p>In Galway, there are a decreasing number of contract bed arrangements with private nursing homes. In respect of Older Persons Services, there have been no new contract beds in the past year.</p> <p>The only review that is taking place is in relation to some patients who may wish to apply for financial support under the Nursing Homes Support Scheme.</p>		
<b>W31Q707</b>	Can you confirm to me when medical card expire, if the medical card holders are notified as I have been informed by some cardholders that they were unaware that their card had expired until they were told by their G.P.	<b>Cllr Mary Hoade</b>
<p>In accordance with the Medical Card Guidelines, reviews are carried out in respect of all medical card holders. When the results of the review indicate that the cardholder is no longer eligible for a medical card a letter is forwarded to the principal cardholder informing them that their card has been deleted. Relevant data relating to their assessment is included in this letter.</p> <p>I should point out that some cards are deleted due to non-return of Review Forms and in this context the following procedure is in place:</p> <p>Three months prior to expiry of medical card the principal card holder receives a Review Form which they are asked to fully complete and return to Medical Card Department within a specified time. A 'notice' is enclosed with the Review Form outlining that if they do not return the form within the specified time their card will be deleted without further notice.</p>		
<b>W31Q708</b>	“That the Forum be provided with a list of properties which the HSE is renting to third parties in Sligo and Leitrim, including the names of the companies/individuals who are renting the properties and the details of the rent received for each property.”	<b>Cllr Declan Bree</b>

Not available at the time of printing.

<b>W31Q709</b>	“To ask if the HSE has made any submission to Government seeking to have the administration and payment of Carer’s Allowance transferred from the Department of Social Protection to the HSE.”	<b>Cllr Declan Bree</b>
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The Carers Allowance is administered by the Department of Social Protection. One of the principal functions of this Department is to design, develop and deliver effective and cost-efficient income supports, activation and employment services.

The Department plays a key role in supporting those most in need and administers over 50 separate schemes and services which impact on the lives of a large number of people in the State. Services of the Department include:-

- the development of appropriate social policy, including pension policy;
- administration of a wide range of social insurance and social assistance schemes including pensions, benefits, allowances and grants;
- activation, employment and community services and programmes to promote development, progression, participation and social involvement by people of working age, including Back to Work and Back to Education Allowances, the Rural Social Scheme and Community Services Programme (administered on an agency basis by Pobal) and community employment schemes;
- administration of the Supplementary Welfare Allowance scheme and Rent and Mortgage Interest Supplements;
- ensuring compliance with the social insurance scheme and administration of the Employer PRSI Exemption Scheme and the Redundancy and Insolvency Payment Schemes;
- provision of social welfare information, directly and through the Citizens Information Board and the Money Advice and Budgeting Service (MABS);
- provision of an independent redress system through the Social Welfare Appeals Office; and
- administration, by the General Register Office (GRO), of the Civil Registration Service (for the registration of births, marriages and deaths in the State).

The HSE has not made any submission to Government seeking to have the administration and payment of the Carer’s Allowance transferred from the Department of Social Protection to the HSE. The ‘Carers Allowance’ is an income support scheme, designed to provide an income for those unable to partake in the workforce due to the commitment involved in providing care for a dependent person. Income maintenance schemes are administered by the Dept. of Social Protection.

<b>W31Q710</b>	“What level of staffing and resources including mammography services is being currently provided for follow up treatment for breast cancer patients in Sligo General Hospital.”	<b>Cllr Declan Bree</b>
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The transition of Breast Care Services in August 2009 included a plan whereby follow-up Mammography Services would be provided in Sligo General Hospital for the catchment population.

In order to implement this and to meet the national standards, (both for Radiographers and Radiologists), it is necessary for these resources to be provided from the Cancer Centre, i.e. University College Hospital Galway.

Due to the staffing moratorium it has not been possible to recruit the necessary resources from UCHG and as such patients continue to travel to Galway for their follow-up Mammograms.

Mammography equipment continues to remain in place pending the re-instatement of Mammography Services. However, some costs will be involved in order to re-licence this equipment.

Staff who were previously involved in this Mammography Service with Sligo General Hospital have been re-deployed to other Radiology services within Sligo General Hospital, in the context of the National moratorium and continued reduction in staffing.

<b>W31Q711</b>	Please clarify the position in relation to the roll out of Primary Care Teams in Galway City and County including clarifying the result of the advertising of expressions of interest, what the plan is now and setting out the site of each Primary Care Team in the City and County and the status and make up of same.	<b>Cllr Catherine Connolly</b>
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**Development of the Primary Care Teams within Galway PCCC.**

Teams are considered to be functioning when they have all team members in place and they are holding clinical team meetings, However it takes time from the initial team development to working well as a team. Within Galway PCCC there will be 26 primary care teams which will be established by the end of 2011, as per service plan targets.

**There are currently 15 in place and a further 11 in development. The following teams have been developed in the following years:**

- 2007: Tuam, South Connemara, Oughterard
- 2008: Shantalla, Knocknacarra, Athenry
- 2009/2010: Ballinasloe, Loughrea, Gort, Clifden, Mountbellew, Glenamaddy, City East(2), Turloughmore
- 2011: Portumna, Eyrecourt, Oranmore, Castlegar, Salthill, City Centre, Moycullen, Aran Islands, Spiddal, Abbeyknockmoy, Headford

Expressions of interest were advertised for the provision of Primary Care Centres within Galway PCCC, this is under the national Primary Care Infrastructure programme.

Please find enclosed a summary of the outcome

**Tuam:** no expression of interest, project closed.

**Turloughmore:** Letter of intent issued, plans being finalized.

**Athenry:** Letter of intent issued, awaiting planning permission.

**City East:** Agreement to lease signed, for completion June 2010.

**City Centre:** proposal going to HSE Board.

**City West:** Letter of intent issued, site being confirmed prior to completing plans. **Oughterard:** no successful outcome, project closed.

<p><b>Spiddal:</b> no expression of interest, project closed.</p> <p><b>Headford:</b> no expression of interest, project closed.</p> <p><b>Gort:</b> no expression of interest, project closed.</p> <p><b>Clifden:</b> Letter of intent issued. Plans being agreed at present.</p> <p><b>Mountbellew:</b> Letter of intent issued. Plans being agreed at present.</p> <p><b>Portumna:</b> Letter of intent issued. Plans being agreed at present.</p> <p><b>Oranmore:</b> currently following up expressions of interest.</p> <p><b>Moycullen:</b> short term lease in place.</p> <p><b><u>Primary care teams generally consist of the following personnel:</u></b></p> <p>A GP, a PHN, a range of Allied Health Professionals and clerical support.</p>		
<b>W31Q712</b>	Please clarify how many employees took the most recent redundancy package with its deadline before Christmas- clarifying what grades of employees left, from which department and how these positions have been filled.	<b>Cllr Catherine Connolly</b>
Not available at time of printing.		
<b>W31Q713</b>	Please clarify what the position is in relation to services in Galway City and County, for children who have been sexually assaulted including the nature of the services, where they are being provided and by whom and the nature of the contract if any in place.	<b>Cllr Catherine Connolly</b>
<p>Galway PCCC have a range of services in place to support children who have been sexually assaulted. In addition to a Specialist Social Worker we also have a number of other Social Work and Psychology staff who are trained and able to provide sexual abuse assessments. Discussion with regard to the medical input into these assessments is ongoing currently.</p> <p>In addition to the abuse services we have the Athru service in place under our Child and Adolescent Mental Health services which deals with teenage sexual offenders.</p>		
<b>W31Q714</b>	Please clarify the current position and status of the proposal for a further hospital on the grounds of the Regional Hospital Galway and in particular the nature of the proposal, where it fits into the overall plan for the Hospital, who is proposing this hospital, where it is to be based and full details on what exactly is proposed	<b>Cllr Catherine Connolly</b>
The development Control Plan for UHG includes the development of an 8 storey block incorporating 6 floors of replacement ward accommodation, to replace existing older wards within the hospital and to enable the consolidation of acute medicine on the UHG site.		

Work is currently being undertaken on a cost benefit analysis in the context of a PPP proposal for this proposed development of a ward block on the UHG site and a Day Services Unit on MPUH site to enable the relocation of high activity day and outpatient services from the UHG to MPUH site.

<b>W31Q715</b>	How many public patients are currently on a waiting list for Medical Imaging, MRI/CT/Scans/other at UHG and Merlin Park, and what payments have been made from the HSE or NPTF for Medical Imaging Scans or other services to the Merlin Park Imaging Centre in Merlin Park for 2010, and how many public patients have been referred to the Merlin Park Imaging Centre for Medical Imaging Scans or other for 2010 and what is the cost of each Medical Image / Scan or other, and the Total amount paid to Merlin park Imaging Centre for all above for 2005 to 2009?	<b>Cllr Pdraig Conneely</b>
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The MPIC entered into a lease and Service level agreement with the former Western Health Board on 16th June 2003 for a period of 9 years and 11 months with a required rent review at year five. The annual rent agreed was €9,220 plus 500 free scans for public patients, this increased to €12,500 plus 500 free scans per annum from 2009. The lease is due to expire on 15th June 2013.

- 1. How many public patients are currently on a waiting list for medical imaging, MRI/CT/Scans/Other at UHG & MPUH?**  
There are currently 2162 public patients on the waiting list at Galway University Hospitals (UHG & MPUH) for diagnostic imaging.
- 2. What Payments have been made from the HSE or NTPF for Medical Imaging Scans or other services to the Merlin Park Imaging Centre in Merlin Park for 2010?**  
€400,000 was paid to MPIC in 2010 for medical imaging scans and other services.
- 3. How many public patients have been referred to the Merlin Park Imaging Centre for Medical Imaging Scans or other in 2010?**  
2314 studies were performed in MPIC on behalf of GUH in 2010.

<b>PUBLIC PATIENTS STUDIES PERFORMED IN MPIC 2010</b>	<b>IN-PTS PUBLIC</b>	<b>OPD PUBLIC</b>	<b>TOTALS</b>
CT	1022	486	<b>1508</b>
MRI	204	602	<b>806</b>
TOTAL IN- PATIENTS STUDIES FOR 2010	<b>1226</b>		
TOTAL OPD STUDIES FOR 2010		<b>1088</b>	
<b>*TOTAL STUDIES PERFORMED IN MPIC 2010</b>			<b>2314</b>

\*Please note that some of the studies performed contain multiple scans and may be charged accordingly e.g. CT Thorax/Abdomen/Pelvis. These studies are counted as 1 in the above stats

Exact number for multiple studies and associated charges will be available from MPIC.

**4. The total amount paid to Merlin Park Imaging Centre for all above for 2005 to 2009?**

The following amounts have been paid by GUH or HSE West/WHB

2005	-	€ 250,500
2006	-	€ 247,660
2007	-	€ 166,500
2008	-	€ 178,200
2009	-	€ 337,083

<b>W31Q716</b>	How many patients were on trolleys at UHG from 1 <sup>st</sup> Jan 2011 to date – total for that period?	<b>Cllr Pdraig Conneely</b>
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2pm total = 627 from 1<sup>st</sup> Jan 2011 to date as outlined below (15/02/2011)

**Numbers of admitted patients on trolleys awaiting inpatient beds in the Emergency Department**

<b>Dates</b>	<b>Numbers at 1400</b>
01/01/2011	2
02/01/2011	6
03/01/2011	18
04/01/2011	24
05/01/2011	22
06/01/2011	7
07/01/2011	10
08/01/2011	7
09/01/2011	18
10/01/2011	12

11/01/2011	22
12/01/2011	20
13/01/2011	22
14/01/2011	16
15/01/2011	9
16/01/2011	11
17/01/2011	18
18/01/2011	16
19/01/2011	21
20/01/2011	8
21/01/2011	8
22/01/2011	17
23/01/2011	21
24/01/2011	12
25/01/2011	24
26/01/2011	18
27/01/2011	19
28/01/2011	16
29/01/2011	3
30/01/2011	20
31/01/2011	20
01/02/2011	26
02/02/2011	17
03/02/2011	4
04/02/2011	14
05/02/2011	10
06/02/2011	6
07/02/2011	17
08/02/2011	18
09/02/2011	9
10/02/2011	8
11/02/2011	14



12/02/2011	1	
13/02/2011	2	
14/02/2011	4	
15/02/2011	10	
<b>Total</b>	<b>627</b>	
<b>W31Q717</b>	What is the current status of the Capital Building Programme for UHG?	<b>Cllr Pdraig Conneely</b>
<p>Currently there are two active projects on the UHG site. The first involving the upgrade of two fifth floor wards with the installation of a ventilation system due to be completed shortly, The second involving, the upgrade of the Neonatal Unit which is due to commence in the next few months. Enabling works are currently at an advanced stage.</p> <p>In addition to ongoing minor capital improvement works, there are other projects in the design/planning stage including the National Programme for Radiation Oncology facility and associated enabling works. The enabling works for this NPRO project include a replacement Acute Mental Health Facility on the grounds and associated displaced car parking.</p> <p>A proposal for a replacement ward block is currently being evaluated in the context of a PPP proposal together with a Day Services Unit on the MPUH site.</p> <p>In partnership with NUIG and HRB a new Clinical Research Facility is being developed on the UHG site and we are hopeful that this project will commence on site later this year.</p>		
<b>W31Q718</b>	Can you please let me know when it is proposed to fully open and occupy the newly constructed Community Nursing Home in Ballinasloe, and have the required Human Resources been allocated for this Facility ?.	<b>Cllr Michael Mullins</b>
<p>The new 50 bed CNU in Ballinasloe has not yet been formally handed over by the builders to the HSE as ‘snagging’ has not been completed. During the month of December 2010 it was necessary to transfer 14 patients from St. Brigids Hospital to the CNU as the heating in their ward failed during the cold weather.</p> <p>We have advertised internally seeking expressions of interest from nursing and support staff to work in the new unit once it is opened. This process is ongoing currently.</p>		
<b>W31Q719</b>	Can I please have details of the current Staffing levels in the Pharmacy, Occupational Therapy, and Physiotherapy Departments in Portiuncula Hospital. How many vacancies exist in each Department and what plans are being put in place to fill these critical vacancies. Why are these Posts that are not subject to the moratorium, not being signed off on?	<b>Cllr Michael Mullins</b>
<p><b>Occupational Therapy:</b> 2 Basic Grade Occupational Therapists  <b>Physiotherapy:</b> 2.85 Physiotherapists</p>		

<b>Pharmacy:</b>	1.3 Pharmacists	
<b>W31Q720</b>	Can you please let me have details of the HSE Plan for the provision of Acute Mental Health Services in County Galway, and let me know what role the Admissions Unit at St. Bridget's Hospital in Ballinasloe will play in this provision?	<b>Cllr Michael Mullins</b>
<b><u>The National Mental Health Service Plan for 2011 has identified key areas for implementation of the National Policy in Mental Health “A Vision for Change”:</u></b>		
<ul style="list-style-type: none"> <li>➤ Completion of Executive Clinical Director (ECD) teams</li> <li>➤ ICT</li> <li>➤ Service User participation</li> <li>➤ Care Planning</li> <li>➤ Mental Health Primary Care</li> <li>➤ Reductions in Inpatient beds</li> <li>➤ Community Mental Health Teams (CMHT'S)</li> <li>➤ Discontinue direct management of Medium and Low Support provision</li> <li>➤ Implement measures to increase residential capacity</li> <li>➤ Compliance with the Criminal Law (Insanity) Act</li> <li>➤ Progress the National Forensic Hospital (CMH), the four Intensive Care Rehabilitation Units (ICRUS), Child and Adolescent and Mental health and Intellectual Disability Forensic Services</li> </ul> <p>The Executive Clinical Director – Dr. Laura Mannion has recently been appointed for the area, and the consultation/planning has commenced in implementing the Vision for Change key results area for 2011, this includes planning for reduction in inpatient bed numbers.</p> <p>Recently 16 beds within the Ballinasloe Community Nursing Unit were given Approved Centre status by the Mental Health Commission and 14 patients have been transferred there from St. Brigid’s Hospital on 21 December 2010. These beds remain under the management of the Mental Health Services.</p> <p>In recent years, East Galway Mental Health Services has implemented a very ambitious plan to re-orientate services from Hospital to Community with a consequent reduction for demand on In-patient beds.</p>		
<b>W31Q721</b>	Has the HSE any plans to act on the Research carried out by Dr. Conor Farren, Consultant Psychiatrist at St. Patrick's Univ Hospital. Dublin, that states that many codeine based medicines, such as Solpadine and Nurofen Plus, should be made Prescription only, because they are "too addictive and too dangerous " to be sold over the counter ?	<b>Cllr Michael Mullins</b>
<p>The Public Health Department of the HSE wrote to the Irish Medicines Board on foot of this request , please see response from their medical assessors below:</p> <p>‘Further to your request for information, the IMB has monitored experience with adverse reaction reporting associated with codeine-containing medicines over the years and highlighted the importance of healthcare professionals following up with patients through its Drug Safety Newsletter and monthly articles in MIMS (Ireland) in 2004 and 2005, available on the IMB website.</p>		

In the context of availability of some of the codeine-containing products as OTC medicines, the IMB articles stressed the importance of enquiring about use of non-prescribed medicines and the need to advise patients taking codeine-containing medicines to strictly adhere to the recommended dosage and duration of use and to avoid chronic use, which is associated with dependence, as well as encouraging further reporting.

The IMB highlighted these articles and its review of the issue with the Pharmaceutical Society of Ireland (PSI), given the important role of pharmacists in dispensing these medicines, who also reviewed the situation and conducted a consultation, resulting in the guidance issued earlier this year. Further information on the PSI consultation and guidance may be available from the PSI, who may also be able to provide information related to usage estimates before and after introduction of the guidance, based on feedback from some of their members.

The Medicines and Healthcare Regulatory Authority (MHRA), which is the competent authority for medicines in the UK, also reviewed this issue and a copy of their public assessment report is available on their website, which may be of interest is attached for your information. The IMB reviewed this report in the context of its existing advice and product labelling, concluding that the warning statements in the product information (SmPC and PL) for these products were appropriate and consistent with the outcome of the MHRA review also. The warnings are as follows:

#### **SmPC Section 4.4**

Prolonged regular use, except under medical supervision, may lead to physical and psychological dependence (addiction) and result in withdrawal symptoms such as restlessness and irritability, once the drug is stopped.

#### **Patient Information Leaflet:**

This product contains codeine.

This medicine should only be taken when necessary.

Do not take more than the stated dose and do not take every day for more than 3 days unless told to do so by your doctor.

Prolonged regular use, except under medical supervision, may lead to physical and psychological dependence (addiction) and result in withdrawal symptoms such as restlessness and irritability, once the drug is stopped. If you find you need to use this product all the time, it is important to consult your doctor.

In addition, the following warnings currently must appear on the outer label:

#### **Label:**

Please read the enclosed leaflet carefully.

Contains codeine.

Prolonged regular use may be habit forming.

Do not take more than the stated dose and do not take every day for more than 3 days, unless told to do so by your doctor.

However, it was recommended that the statement 'Prolonged regular use may be **habit forming**', which must be present on the outer label for such products, should be replaced by 'Prolonged regular use can lead to **addiction**' and that this warning should be prominently placed on the front of the pack.

The PSI may be able to provide additional information as they have published “Guidance for Pharmacists in relation to the supply of codeine containing medicines.”

<b>W31Q722</b>	To ask the HSE to give an update on the number of beds presently in Raheen Community Hospital; report on the classification of those beds and their usage and if there are plans to cut further beds at the Hospital.	<b>Cllr Joe Cooney</b>
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The total bed complement in Raheen Community Hospital is 28 and the bed categories are as follows

Bed Categories	Number per category
Continuing Care Beds	15
Assessment Care Beds	6
Respite Care Beds	5
Palliative Care Beds	2

Currently there are no further plans to reduce the beds in Raheen Community Hospital. This may have to be reviewed in the light of HIQA standards and requirements.