

**Minutes of Regional Health Forum West held on Tuesday,  
24<sup>th</sup> February, 2015 at 2.00pm in Room 1, Education Centre,  
HSE Offices, Merlin Park, Galway**

Miontuairiscí Cruinnithe Chinn Bhliana an Fhóiraim Réigiúnach Sláinte, a tionóladh ar an Mháirt 24, Feabhra  
2015 ag 2.00 .i.n, i Seomra 1 an tIonad Oideachais,  
Feidhmeannacht na Seirbhíse Sláinte, Páirc Mheirlinne, Gaillimh

**Chairperson:** Cllr Tom McNamara

<b>Members Present</b>	<b>Members Present (continued)</b>	<b>Apologies</b>
Cllr Finola Armstrong-McGuire	Cllr Michael Hourigan	Cllr Aidan Donohue
Cllr Tim Broderick	Cllr Michael Kilcoyne	
Cllr Ciaran Brogan	Cllr Paddy Kilduff	<b>Absent</b>
Cllr Pat Burke	Cllr Donagh Killilea	Cllr Ger Darcy
Cllr Maria Byrne	Cllr Michael McBride	Cllr Henry Kenny
Cllr John Carroll	Cllr Malachy McCreesh	Cllr Bernard McGuinness
Cllr Lisa Chambers	Cllr Gerry McMonagle	Cllr Brendan Mulroy
Cllr Michael Collins	Cllr Ann Norton	
Cllr Pádraig Conneely	Cllr Seamus O'Boyle	
Cllr Catherine Connolly	Cllr Rosaleen O'Grady	
Cllr Gerry Crawford	Cllr Terry O'Flaherty	
Cllr Michael Creaton	Cllr. P.J. Ryan	
Cllr David Doran	Cllr Jerome Scanlan	
Cllr Caillian Ellis	Cllr Eamon Scanlon	
Cllr Michael Finnerty	Cllr Brigid Teefy	
Cllr Francis Foley	Cllr Tony Ward	
Cllr Felim Gurn		
Cllr Mary Hoade		

**In attendance:**

Maurice Power, A/Chief Executive Officer, Saolta University Health Care Group  
 Tony Canavan, Chief Operations Officer, Saolta University Health Care Group  
 Collette Cowan, Chief Executive Officer, UL Hospitals  
 Bernard Gloster, Interim Chief Officer, Area 2  
 Chris Rudland, Regional Manager, Consumer Affairs  
 Caitriona Meehan, Consumer Affairs.  
 Marian Cavanagh, Consumer Affairs.  
 Norah Owens, Consumer Affairs.

**503/55/15 Minutes of previous meeting 25<sup>th</sup> November, 2015**

The minutes of the previous meeting held on the 25<sup>th</sup> November, 2014 were proposed by Cllr John Carroll, seconded by Cllr. PJ Ryan and adopted.

**504/55/14 Matters Arising:**

**Q54Q1483:** Admission Policy for GUH – Cllr C Connolly is looking for the admission Policy for the new 75 bed block in GUH

Action: It was agreed to supply Cllr C Connolly with the current Admission Policy (ratio of Private v Public).

**Motion: W54M303: Consultant led Paediatric Rheumatologist clinics to be based at Letterkenny General Hospital**

Action: T Canavan to send an update on Donegal and cross border Rheumatology services to Cllr. G McMonagle before the next Regional Health Forum Meeting

**Drug Treatment Clinic, Mervue Health Centre– RHF June Meeting (24<sup>th</sup> June, 2014)**

Cllr. T O’Flaherty requested an update on the relocation of the Mervue Drugs Clinic

Action: F Murphy to revert to Cllr O’Flaherty with this update

**505/55/15 Chairman’s Address:**

Cllr Tom McNamara welcomed Bernard Gloster, Interim Chief Officer, Area 2 to the meeting and sympathised with him on behalf of the members of the Regional Health Forum on the death of his mother, Tess.

The Chairman also welcomed Collette Cowan, Chief Executive Officer, UL Hospital Group to the meeting.

**506/55/15 Questions:**

**W55Q1499 - Cllr. E Scanlan – Ballymote Health Centre**

Action: J Hayes to advise Cllr Scanlan on a more specific date for the commencement of construction of the Ballymote Health Centre.

**W55Q1500 & W55Q1539 – Grove Hospital, Tuam.**

Action: B Gloster agreed to provide clarity to Cllr Killilea & Cllr Hoade on when exactly the steps would be taken to appoint a design team for the Grove Hospital

**W55Q1504 – Cllr P Conneely , Imaging Centre lease, Merlin Park**

Action: T Canavan agreed to supply Cllr P Connelly with the names of the Directors of Alliance Medical – the new lessee of the Merlin Park Imaging Centre.

**W55Q1508 – Cllr T Ward , Speech & Language Services**

Action: B Gloster agreed to provide further clarification to Cllr. Ward in relation to any distinction with Speech & Language Therapy Services under and over 65 years.

**W55Q1513 – Cllr M Kilcoyne , Staff Levels in Mayo**

Action: B Gloster to revert to Cllr Kilcoyne on the breakdown of staff being recruited by service for Community Health Tony Canavan on the Mayo General Hospital.

**W55Q1514– Cllr M Kilcoyne , Staff Levels in Mayo**

Action: B Gloster gave an undertaking to Cllr Kilcoyne he would seek clarification on the Revenue Commissioners one page assessment form.

**W55Q1520 – Cllr G McMonagle - Colonoscopy Unit at Letterkenny General Hospital**

Action: T Canavan to revert to Cllr G McMonagle with the breakdown of the number of colonoscopies carried out in the new mobile Endoscopy Unit at Letterkenny General Hospital

**W55Q1523 – Cllr G McMonagle –Final Written report on the flooding at LGH**

Action: T Canavan to inform Cllr. G McMonagle with the exact date the Report on the Flooding at Letterkenny General Hospital is available.

**W55Q1529 – Cllr. C Ellis - Tender Documents for Ballinamore**

Action: J Hayes to revert to Cllr. C Ellis re clarification of the tender process underway re Ballinamore

**W55Q1532 – Cllr. C Cunningham - Public Health Nurse for Inis Oirr**

Action: B Gloster agreed to check any other avenues available to source a suitable qualified applicant for the island and will talk to HR in the context of advertising locally with a specific purpose contact.

**Standing Orders were suspended for 15 minutes in order to conclude the business of the meeting. This was proposed by Cllr C Connolly and seconded by Cllr. E Scanlan.**

**507/55/15 Motions**

**W55M304 – Cllr. D Killilea – Home Help**

This motion was withdrawn by Cllr. D Killilea

**W55M305 – Cllr. R O’Grady – Cardiac Catheterisation- Sligo General Hospital**

This motion was proposed by Cllr R O’Grady, seconded by Cllr. Eamon Scanlan  
This motion was adopted.

**W55M306 – Cllr. M Kilcoyne – Calculating the length of time on a Waiting List**

This motion was proposed by Cllr M Kilcoyne, seconded by Cllr. S O’Boyle and adopted.

**W55M307 – Symptomatic Breast Service at Letterkenny General Hospital**

This motion was proposed by Cllr. G McMonagle, seconded by Cllr C Brogan and adopted.

Action: T Canavan to contact the Donegal councillors as to when members of the SAOLTA Management team can meet with the Councillors and Oireachtas members re the future of Breast Cancer Services in Donegal.

**W55M308 – Merlin Park Imaging Centre**

This motion was proposed by Cllr. C Connolly, seconded by Cllr T Ward and adopted.

**Cllr. C Connolly agreed to take the Motion of the Agenda as it was agreed she would get a written detailed report answering each question asked in the motion**

Action: T Canavan agreed to provide this written response to Cllr. C Connolly

**508/55/15 Any Other Business:**

The next **Regional Health Forum meeting** is scheduled to take place on Tuesday, 24<sup>th</sup> March, 2015 at 2pm in Galway

The next Regional Health Forum **Committee** meeting will take place on Tuesday, 28<sup>th</sup> April, 2015 at 2pm in Limerick.

This concluded the business of the meeting.

Signed:

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Cathaoirleach/Chairman

*Adopted at the Regional Health Forum West meeting*

# QUESTIONS & RESPONSES

## REGIONAL HEALTH FORUM WEST – 24<sup>th</sup> March 2015

NUMBER	QUESTION	RAISED BY	PAGE NO.
W56Q1542	Endoscopy Unit, Roscommon	Cllr M Creaton	2
W56Q1543	Re-hired HSE Employees	Cllr P Conneely	2
W56Q1544	Agency Costs 2009 to 2014	Cllr P Conneely	2-4
W56Q1545	Payment to suspended HSE Manager	Cllr P Conneely	4
W56Q1546	Capitation Payments	Cllr P Conneely	4-5
W56Q1547	Unspent Mental Health Budget	Cllr D Killilea	5
W56Q1548	Maternity Services Portlincula Hospital	Cllr D Killilea	5-6
W56Q1549	Waiting times in Mental Health Service	Cllr D Killilea	6
W56Q1550	Status of CNM3 position	Cllr L Chambers	7
W56Q1551	A & E Department – Mayo General Hospital	Cllr L Chambers	7
W56Q1552	Nursing rosters – UL Group	Cllr T McNamara	7
W56Q1553	List of procedures - Ennis Hospital	Cllr T McNamara	7-8
W56Q1554	Raheen Community Hospital - Clare	Cllr P Burke	8
W56Q1555	Children's Diabetic Insulin Pump – Sligo Regional	Cllr R O'Grady	8
W56Q1556	Oral Maxillo Services at Sligo Regional Hospital	Cllr R O'Grady	9
W56Q1557	Deaths relating to heart attacks	Cllr D Killilea	9
W56Q1558	Orthodontic treatment for Galway City & County	Cllr C Connolly	10
W56Q1559	Art Therapist – Loughrea Training Centre	Cllr C Connolly	10
W56Q1560	Units 5 & 6 Merlin Park	Cllr C Connolly	11
W56Q1561	Temporary Helipad – Community Park Shantalla	Cllr C Connolly	11
W56Q1562	Outpatients Waiting List – UL Group	Cllr M McCreesh	11-12
W56Q1563	Nursing recruitment – UL Group	Cllr M McCreesh	12
W56Q1564	Tendering Process – ED Dept – UL Group	Cllr M McCreesh	12
W56Q1565	Emergency Plan – UL Hospital Limerick	Cllr M McCreesh	12-13
W56Q1566	Orthodontic Treatment – Galway area	Cllr M Hoade	13
W56Q1567	Merlin Park closed to admission from ED UHG	Cllr M Hoade	13
W56Q1568	Loughrea Community Workshop	Cllr M Hoade	13-14
W56Q1569	Future plans for the Health Centre in Tynagh	Cllr M Hoade	14
W56Q1570	€1.6m funding for St Brigid's Hospital, Ballinasloe	Cllr A Donohue	14
W56Q1571	Community Hospital - Thurles	Cllr D Doran	15
W56Q1572	HIQA standards at Lifford Community Hospital	Cllr G Crawford	15
W56Q1573	Re-hiring of Consultants at Letterkenny General	Cllr G Crawford	15-16
W56Q1574	Staffing at Ballyshannon Ambulance base on 22/12/14	Cllr G Crawford	16
W56Q1574	Flood report for Letterkenny General Hospital	Cllr C Brogan	16-17
W56Q1575	Paediatric palliative care nurse in Letterkenny General	Cllr C Brogan	17
W56Q1576	Rheumatology Services in Letterkenny General	Cllr C Brogan	17

<b>W56Q1542</b>	When will the Endoscopy Unit at Roscommon Co Hospital be completed and will there be additional nursing g staff required to operate this unit. If so, when will recruitment start for these positions?	<b>Cllr. Michael Creaton</b>
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Construction of the Endoscopy Unit expected to be completed by the end of June 2015. Medical equipping of the unit will take 3 further months.

Roscommon Hospital will require additional staff to open and operate the new Endoscopy unit. The process for seeking HSE approval and funding of these posts has commenced.

***T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group***

<b>W56Q1543</b>	How many ex-HSE employees are re-employed as consultants or otherwise engaged in the HSE West-North West, the salary, fees, and pensions payable to each, and the total cost of same	<b>Cllr Padraig Conneely</b>
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During 2014 37 retirees were employed in HSE West/North West.

The following table details the Staff Categories involved:

<b>Staff Category</b>	<b>Number Employed</b>
Medical	15
Nursing	10
Radiographers	2
Home Helps	2
Care Assistants	2
Administration	6
<b>TOTAL</b>	<b>37</b>

The total cost involved was €829,719.66

The retirees working in frontline patient services were rehired as a last resort where there was no other available option in order to ensure the continued provision of a safe service. The administrative staff were rehired to Chair Interview Boards where again there were no other available options.

***Francis Rogers, Asst National Director, Human Resources***

<b>W56Q1544</b>	How much has been paid to external agencies by the HSE West-North West from January 2009 to December 2014 to hire staff including nurses, the name of the agency and the amount paid to each agency	<b>Cllr Padraig Conneely</b>
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The HSE tendered for agencies to provide Agency staff in 2011. CPL Health Care (Nursing Staff) TPM (Health Care Assistants, Allied Health Professionals and Social Care Workers) and Locum Express (Agency Doctors) were the agencies appointed following the tender process. This tender is

due for renewal this year. The total Agency spend for medical and nursing staff in 2014 was €46,832,376. This figure includes staff salaries, holiday pay, public holiday pay, employer PRSI, Agency fees and Vat @ 23%. The substantive amount of expenditure on Agency related to salary payments.

The table below details agency staff cost, both medical and nursing and across community and hospital services from 2009 – 2014.

Agency Staff Cost - West Region							
Donegal		Actual 2009	Actual 2010	Actual 2011	Actual 2012	Actual 2013	Actual 2014
Medical	Sub Total	€916,907	€2,974,035	€4,778,946	€3,982,575	€3,905,913	€6,851,763
Nursing	Sub Total		€7,270	€44,800	€31,611	€21,373	€237,652
Total Donegal		€916,907	€2,981,305	€4,823,746	€4,014,186	€3,927,286	€7,089,415

Sligo		Actual 2009	Actual 2010	Actual 2011	Actual 2012	Actual 2013	Actual 2014
Medical	Sub Total	€791,594	€1,412,773	€1,142,476	€573,351	€1,407,992	€4,429,820
Nursing	Sub Total		€214,705	€172,858	€234,827	€324,366	€746,955
Total Sligo		€791,594	€1,627,478	€1,315,334	€808,178	€1,732,358	€5,176,775

Mayo		Actual 2009	Actual 2010	Actual 2011	Actual 2012	Actual 2013	Actual 2014
Medical	Sub Total	€665,381	€1,027,393	€1,462,467	€1,546,629	€2,109,587	€3,379,224
Nursing	Sub Total			€164,541	€647,130	€1,562,047	€1,428,332
Total Mayo		€665,381	€1,027,393	€1,627,008	€2,193,759	€3,671,634	€4,807,556

Galway		Actual 2009	Actual 2010	Actual 2011	Actual 2012	Actual 2013	Actual 2014
Medical	Sub Total	€1,131,817	€1,599,703	€2,201,804	€1,770,198	€3,265,126	€8,976,183
Nursing	Sub Total	€740,552	€455,068	€969,491	€1,030,037	€964,885	€1,488,089
Total Galway		€1,872,369	€2,054,771	€3,171,295	€2,800,235	€4,230,011	€10,464,272

Roscommon		Actual 2009	Actual 2010	Actual 2011	Actual 2012	Actual 2013	Actual 2014
Medical	Sub Total	€375,188	€963,768	€1,645,606	€212,618	€123,225	€956,270
Nursing	Sub Total	€494,924	€487,884	€831,201	€543,510	€852,851	€612,378
Total Roscommon		€870,112	€1,451,652	€2,476,807	€756,128	€976,076	€1,568,648

Clare		Actual 2009	Actual 2010	Actual 2011	Actual 2012	Actual 2013	Actual 2014
Medical	Sub Total	€390,962	€1,609,391	€1,009,820	€744,339	€1,390,804	€1,518,051
Nursing	Sub Total	€282,635	€459,030	€423,596	€663,768	€812,349	€1,067,675
Total Clare		€673,596	€2,068,421	€1,433,416	€1,408,107	€2,203,153	€2,585,726

Limerick		Actual 2009	Actual 2010	Actual 2011	Actual 2012	Actual 2013	Actual 2014
Medical	Sub Total	€444,233	€1,265,603	€2,096,879	€2,603,813	€5,506,137	€10,954,840
Nursing	Sub Total	€2,372,966	€3,810,570	€1,989,137	€1,934,245	€1,846,028	€1,745,276
Total Limerick		€2,817,199	€5,076,173	€4,086,016	€4,538,058	€7,352,165	€12,700,116

North Tipperary		Actual 2009	Actual 2010	Actual 2011	Actual 2012	Actual 2013	Actual 2014
Medical	Sub Total	€92,190	€615,904	€1,163,929	€1,132,250	€1,413,112	€2,116,415
Nursing	Sub Total	€169,635	€517,622	€812,549	€584,977	€421,980	€323,453
Total North Tipperary		€261,825	€1,133,526	€1,976,478	€1,717,227	€1,835,092	€2,439,868

	Actual 2009	Actual 2010	Actual 2011	Actual 2012	Actual 2013	Actual 2014
Medical Total	€4,808,270	€11,468,570	€15,501,926	€12,565,774	€19,121,896	€39,182,566
Nursing Total	€4,060,713	€5,952,149	€5,408,173	€5,670,105	€6,805,879	€7,649,810
Grand Total	€8,868,983	€17,420,719	€20,910,099	€18,235,879	€25,927,775	€46,832,376

A significant reduction in Agency costs in 2015 is a priority measure included in the West region's cost containment plans to achieve a budget breakeven year end out-turn.

The 2015 Staff Agency Budget for Medical and Nursing for the West Region is €23.939 million which is a 50% reduction on the 2014 out-turn of €46.832 million. During 2015 this budget reduction in the main will be addressed by the planned employment of Medical and Nursing Staff and the conversion of Agency Staff to HSE employee during 2015.

**F Rogers, A/National Director, HR & L Minihan, Finance**

<b>W56Q1545</b>	The amount paid to a HSE manager who was suspended with pay pending an investigation into alleged misconduct during his suspension between 2011 and August 2014, the amount paid in legal fees in relation to this matter during the same period, and the outcome of this process	<b>Cllr Padraig Conneely</b>
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This Question does not fall within the remit of the Regional Health Forum as per Clause 42-(2)-(d) of the Health Act 2004, which states:

2) The function of a regional health forum is to make such representations to the Executive as the forum considers appropriate on the range and operation of health and personal social services provided within its functional area, but it may not consider or make representations concerning any of the following matters:

(d) a matter relating to or affecting the terms or conditions (including those relating to superannuation benefits, disciplinary procedures or grievance procedures) of a contract of employment that the Executive has entered into or proposes to enter into.

**T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group**

<b>W56Q1546</b>	The total amount paid in capitation payments to GPs in respect of patients who were deceased prior to the centralization of administration to the PCRS, if any of this money was subsequently recouped, the efforts that were	<b>Cllr Padraig Conneely</b>
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	made to recoup the money, and the total amount that was recouped	
<p>In 2012 the Public Accounts Committee ( PAC) raised the issue of payments to GPs in respect of deceased medical card holders.</p> <p>A summary of the HSE response to the PAC, at that time, is as follows:</p> <ul style="list-style-type: none"> <li>▪ The issue of recouping capitation payments from GPs for deceased medical card holders between the date of death and removal of eligibility was complicated by the lack of a centralised system and ICT solution to adequately and in a timely manner gather information on death events and remove eligibility.</li> <li>▪ The issue of capitation underpayments to GPs resulting from delays in registering babies.</li> </ul> <p>Both of these issues have now been addressed following the centralisation of the medical cards system. The HSE has also undertaken a number of additional actions to address the issue of legacy overpayments and underpayments. These include;</p> <ul style="list-style-type: none"> <li>▪ The removal of the names of all deceased medical card holders from the database from date of death notification. Any overpayments are automatically recouped from the date of death to the date of their eligibility being removed.</li> <li>▪ GPs now have access to the medical card system, which allows them register babies from their date of birth. This ensures that the issue of underpayment to GPs for the period prior to a baby being formally registered is removed.</li> </ul> <p>The capitation amounts recouped in respect of clients who died, covering the period 2005 to 2012 is €3,095,180.30</p> <p><b>Kieran Healy, PCRS</b></p>		
<b>W56Q1547</b>	Could the relevant director confirm that 6.1million was returned to central government unspent from the Mental Health Budget and if this is the case which part of the service plan was not delivered on .ie. was it Capital or Service spend.	<b>Cllr Donagh Killilea</b>
<p>Galway Roscommon Mental Health Services has not reduced its expenditure; the actual spend in Galway Roscommon Mental Health has increased year on year from 2013; rising from €62.3m in 2013 to €63.4m in 2014 (an increase of €1.1m equating to 1.8%). The budget for 2015 is set at €65m which will allow for increased spending of €1.6m in 2015. This is before any allocation of the 2015 Development Funds which will further add to the €65m in 2015.</p> <p>I am advised that spending, adjusted for deprivation, in Galway Roscommon at €191 per head of population compares very favourably to the national average of €161 per head. Galway Roscommon has a deprivation index of 4.6 versus the national average of 4.5 meaning that it less deprived than the national average.</p> <p>The actual expenditure is the critical indicator of developments in Galway Roscommon Mental Health services and expenditure has increased year on year from 2013 in contrast to many public services. The realignment of historical budget lines is not resulting in any reduction of services in Galway Roscommon MHS; the service is actually benefiting from an increased budget in 2015.</p> <p><b>B. Gloster, Interim Chief Officer – Area 2</b></p>		

<b>W56Q1548</b>	In relation to the Maternity Service's at Portiuncula Hospital and given the latest report into the need to improve service delivery can the HSE confirm that the service will not be downgraded using the report as an excuse to do so and continue to invest in the maternity services at Portiuncula hospital.	<b>Cllr Donagh Killilea</b>
<p>I wish to advise that there are no plans to downgrade the Maternity Services at Portiuncula Hospital by the Saolta Group or the HSE.</p> <p>Currently, as you are aware, an independent review has been commissioned into the management of a number of cases in Portiuncula Hospital, which will take a number of months. We await the outcome of this review.</p> <p><b>T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group</b></p>		
<b>W56Q1549</b>	Within the mental health service could the HSE confirm the waiting time from initial contact to seeing a primary care councillor and is there any further investment into improving waiting times for those suffering mental anguish.	<b>Cllr Donagh Killilea</b>
<p>The Counselling and Primary Care (CIPC) Service was launched nationally in July 2013 and operates in each of the ten HSE National Counselling Service (NCS) areas.</p> <p><b>CH Area 1 Response</b></p> <p>The Counselling in Primary Care Service (CIPC) is managed on a Regional Basis for Sligo/Leitrim/Donegal. The CIPC is available to adults with a medical card. Patients are referred in writing by their GP and asked to opt in by ringing a free phone number. Once the patient has opted into the service they are assessed with a local CIPC Counsellor. The approximate wait time from referral to assessment is currently 3 to 4 weeks. However this is influenced by the time taken by the patient to opt in to the service.</p> <p><b>J Hayes, Chief Officer Area 1</b></p> <p><b>CH Area 2 Response</b></p> <p>The waiting times for Counselling in Primary Care (CIPC) for Galway, Mayo and Roscommon as of end of January 2015 is as follows:</p> <p>44 people waiting between 3 and 6 months</p> <p>It is proposed that an increase in funding will be provided for 2015 which should resolve these current waiting times.</p> <p><b>B Gloster, Interim Chief Officer, Area 2</b></p> <p><b>CH Area 3 Response</b></p> <p>Waiting times have reduced considerably in the Counselling and Primary Care Service provided in the Mid West with the addition of an extra day's service provided in Thurles and an additional day's service provided in Limerick city.</p> <p>Anyone waiting longer than 3 months for an appointment usually has specific requirements or requests – for example, they can only attend after 4pm; only on a Friday afternoon or at a specific Primary Care Centre etc.</p>		

Attendance rates are generally consistent month on month. Referrals to the Counselling and Primary Care Service are GP driven. There is regular discussion with GP's regarding referrals and all *Counselling in Primary Care* documentation is circulated to them.

Where there is a consistent increase in demand for service in any given area, the service considers increasing service provision in that location.

**B Gloster, Chief Officer, Area 3**

<b>W56Q1550</b>	Can you confirm to me the status of the CNM3 position relating to Health Care Assistants at Mayo General Hospital. Is the position still vacant? Has it been filled? If it has not been filled, why is that so? Are there plans to fill the position?	<b>Cllr Lisa Chambers</b>
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This position which was a 0.5 CNM3 was vacated in 2007 and there are no plans to replace this position. The plan is to have the HCA report to the CNM2 on the wards/ department they are working on, in the same way as all Staff Nurses and CNM1s do. We are working on this plan with Unions and staff and hope that in a short time this can be resolved.

**T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group**

<b>W56Q1551</b>	What happened in the A&E department of Mayo General Hospital the weekend of 20th - 22nd February where there are reports of the A&E department being cleared of patients on trolleys and patients not being seen in the A&E department but moved elsewhere out of sight, due to Minister for Health, Leo Varadkar, visiting Mayo General hospital on Saturday 21st February? Can the HSE confirm whether these reports are true? Were there instructions from hospital management to remove patients and/or trolleys from the A&E department? If this was done, what was the reasoning for it? Does the HSE consider this to be acceptable practice within our hospitals?	<b>Cllr Lisa Chambers</b>
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There were no special arrangements put in place relating to the transfer of patients in Mayo General Hospital in advance of or during Minister Varadkar's recent visit. No patients were transferred either internally or externally due to the Minister's visit.

There were no patients on trolleys from Saturday 21<sup>st</sup> February up to the morning of Thursday 26<sup>th</sup> February at 7am. Similarly to other Emergency Departments nationally, we frequently experience peaks and troughs in activity in our Emergency Department attendances.

**T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group**

<b>W56Q1552</b>	I call on the HSE West and the CEO of the UL Hospital group to outline why nurses who are rostered for duty in University College Hospital Ennis are being requested to report for duty to University College Hospital Limerick on an on going basis?	<b>Cllr. Tom McNamara</b>
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**On occasion when there are staffing deficits at University Hospital Limerick, combined with increased numbers of patients waiting in ED to be admitted support from the other hospitals including Ennis, Nenagh and Croom is requested. With regard to Ennis as they have additional**

staffing on duty at night compared to the other sites they have been asked on occasion to provide support. This has not been a daily request rather only when it is urgently required in the interest of delivering quality and safe patient care.

**C Cowan, CEO, UL Hospital Group**

<b>W56Q1553</b>	I call on the UL Hospital Group to provide a detailed list of procedures performed in the Surgical Day Unit and the Endoscopy Unit of University College Hospital Ennis on a daily basis for the month of February 2014 and February 2015 and provide a breakdown of the public v's private patients on this list?	<b>Cllr. Tom McNamara</b>
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	February 2014 Ennis Day Case activity		0-15 yrs		16-64 yrs		≥65 yrs		
			Public	Private	Public	Private	Public	Private	
Code	Specialty upon discharge	Unit Of Measure	Qty	Qty	Qty	Qty	Qty	Qty	
<b>0100</b>	Cardiology	Number Of Cases	0	0	2	0	0	0	2
<b>0300</b>	Dermatology	Number Of Cases	1	0	15	17	9	7	49
<b>0700</b>	Gastro-Enterology	Number Of Cases	0	0	27	6	36	1	70
<b>1503</b>	Gynaecology	Number Of Cases	0	0	9	2	1	0	12
<b>2000</b>	Plastic Surgery	Number Of Cases	0	1	1	2	9	1	14
<b>2003</b>	Maxillofacial	Number Of Cases	0	0	25	2	0	0	27
<b>2600</b>	General Surgery	Number Of Cases	10	0	92	24	34	5	165
<b>2604</b>	Vascular Surgery	Number Of Cases	0	0	5	3	1	1	10
<b>5000</b>	General Medicine	Number Of Cases	0	0	17	0	6	0	23
<b>7000</b>	Dental Surgery	Number Of Cases	24	0	1	0	0	0	25
<b>7800</b>	Urology	Number Of Cases	2	0	19	9	33	4	67
									<b>464</b>

Above BIU return for Feb 14 including all specialties and scopes. Below report for Feb 2015 BIU

	February 2015 Ennis Hospital		0-15 yrs		16-64 yrs		≥65 yrs		
			Public	Private	Public	Private	Public	Private	
Code	Specialty upon discharge	Unit Of Measure	Qty	Qty	Qty	Qty	Qty	Qty	
<b>0300</b>	Dermatology	Number Of Cases	1	0	5	9	10	17	<b>42</b>
<b>0700</b>	Gastro-Enterology	Number Of Cases	0	0	33	3	22	3	<b>61</b>
<b>1503</b>	Gynaecology	Number Of Cases	0	0	9	3	0	0	<b>12</b>
<b>2000</b>	Plastic Surgery	Number Of Cases	0	0	3	1	6	0	<b>10</b>
<b>2600</b>	General Surgery	Number Of Cases	11	1	129	28	46	12	<b>227</b>
<b>2604</b>	Vascular Surgery	Number Of Cases	0	0	9	8	1	0	<b>18</b>
<b>5000</b>	General Medicine	Number Of Cases	0	0	38	0	12	0	<b>50</b>
<b>7000</b>	Dental Surgery	Number Of Cases	12	0	0	0	0	0	<b>12</b>
<b>7800</b>	Urology	Number Of Cases	1	3	30	15	29	8	<b>86</b>
									<b>518</b>

**C Cowan, CEO, UL Hospital Group**

<b>W56Q1554</b>	Has capital funding been allocated for the planned extension to Raheen Community Hospital in Co. Clare and when can we expect work to commence?	<b>Cllr. Pat Burke</b>
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Not available at time of printing.		
<b>W56Q1555</b>	Could I please have an update on the provision of Children's Diabetic Insulin Pump Services at Sligo Regional Hospital ?	<b>Cllr. Rosaleen O'Grady</b>
<p>The implementation plan for the Paediatric Insulin Pump Service is well underway with the recruitment process taking place for both Clinical Nurse Specialist and Dietician posts in Sligo and Letterkenny. Transfer of existing children using insulin pumps has commenced for Sligo patients and transfer of Donegal patients will commence in late April/early May.</p> <p>The commencement of new patients on Insulin Pump Therapy is expected to start in Q2/Q3, depending on the start date of new recruits.</p> <p>Accommodation plans are still under development in Sligo to facilitate this service on the campus of SRH.</p> <p><b><i>T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group</i></b></p>		
<b>W56Q1556</b>	What is the current position at Sligo Regional Hospital regarding Oral Maxillo Services?	<b>Cllr. Rosaleen O'Grady</b>
<p>Following recent discussions between Sligo and Galway hospitals a plan has been agreed where all patients will now be referred into GUH Oral Max Service. Existing patients on Sligo waiting lists will be written to within the coming weeks advising them of same.</p> <p>Recruitment is also underway to help build resources in Galway to deal with this additional demand.</p> <p><b><i>T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group</i></b></p>		
<b>W56Q1557</b>	Could the HSE give me a breakdown of the numbers of deaths relating to Heart attacks in the HSE West hospitals on a hospital by hospital basis and also why a decision was made to censor the figures in a major report published by the HSE on Thursday 5th March 2015?	<b>Cllr. Donagh Killilea</b>
<p>The report the Councillor refers to is the First Annual Report of the National Healthcare Quality Reporting System (NHQRS) and was published by the Department of Health. The report is available here: -  <a href="http://health.gov.ie/wp-content/uploads/2015/03/NHQRS-Annual-Report-2014.pdf">http://health.gov.ie/wp-content/uploads/2015/03/NHQRS-Annual-Report-2014.pdf</a></p> <p>The HSE welcomed this report. Reporting of information on outcomes can lead to greater awareness for both the public and staff and help to drive improvements within our healthcare system. We note that the report emphasises that the indicators published are not intended to be direct measures of the quality of services but rather draw attention to issues that need further exploration and analysis. We note the Minister's view that it is important the information is used responsibly as variations between hospitals can be explained for reasons other than different standards or quality of care between hospitals. Among other potential reasons are:</p> <ul style="list-style-type: none"> <li>• Differences in the way information is collected between hospitals</li> <li>• Differences in the complexity of cases managed between hospitals</li> <li>• Differences in access to medical care prior to arrival at hospital</li> <li>• Transfer patterns of patients between different hospitals</li> </ul>		

In the areas selected for scrutiny, we have witnessed great improvements in outcome in recent years. Overall mortality from heart attacks in hospitals has fallen by 40% between 2004 and 2013 and mortality from the most common type of stroke has also fallen by 13.6%. New treatments exist for both of these conditions through our National Clinical Programmes in Acute Coronary Syndrome and Stroke which have helped to improve outcomes for patients. We have defined pathways and standards of care through these programmes to ensure that we deliver the most standardised treatments possible.

The HSE already works with Hospital Groups and individual hospitals in improving outcomes using a wider range of measurements of healthcare quality. The information provided by the report will, as intended, assist us to explore variations between hospitals in a considered manner with the common goal of continuous improvement and learning throughout all our hospitals.

***Tony Canavan, COO Saolta Health Care Group/Colette Cowan, CEO UL Hospital Group***

<b>W56Q1558</b>	What is the position in relation to Orthodontic treatment for children in Galway City and County, what service is currently available and the nature and duration of any/all waiting lists for this service, the criteria to get on the waiting lists and the cause of the waiting lists.	<b>Cllr. Catherine Connolly</b>
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School children are referred to the Orthodontic Department from Primary Community and Continuing Care dental services if the dentist feels that they will qualify for orthodontic treatment under the IOTN guidelines as set out by the Department of Health. They are then assessed in the Orthodontic Department and if they are deemed eligible for treatment they are placed on the treatment waiting list.

The waiting time for assessment is currently 3 – 4 months. The waiting time for treatment is currently 3 years. However, a small number of cases are placed on a priority waiting list due to the severity of the case or if their treatment is dependent on growth, this list currently has a 20 month wait time.

The criteria to qualify for orthodontic treatment are determined by the Department of Health. (Index of orthodontic treatment need - IOTN)

The orthodontic department provides services to children in Galway, Mayo and Roscommon.

***T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group***

<b>W56Q1559</b>	In relation to the position of Art Therapist/Craft Facilitator in the Day Centre/Training Centre in Loughrea what is the current position in relation to this post, is it vacant and if so for how long, is there a plan to fill this post and if so when and in the context of staff complement and make up what are the positions currently employed there and the number.	<b>Cllr. Catherine Connolly</b>
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Art Therapy was provided on a contract for services basis to clients attending the Day Centre/ Training Centre in Loughrea until August 2014. A review of the service being provided was conducted by Dr. Leona Spellman, Consultant Psychiatrist with a special interest in Rehabilitation and Recovery. Following Dr Spellman's recommendation arts and crafts classes are being

reintroduced for three hours per week, with the service scheduled to start on 25<sup>th</sup> March 2015. The facilitator will be made available from a reconfiguration of the existing staff complement.

The Staff compliment in the Loughrea Training Centre is as follows:

Manager full time;  
 Clerical officer full time  
 Woodwork instructor full time  
 IT instructor full time;  
 Job Coach full time (3 days in Portumna)  
 Social skills instructor 3 days per week (1 day in Portumna)  
 Catering instructor 3.5 days  
 Horticulture instructor 2 days per week

***B Gloster, Interim Chief Officer, Area 2***

<b>W56Q1560</b>	Please clarify the position re Units 5 and 6 in Merlin Park which were to begin accepting admissions prior to Christmas last and further clarify whether this happened and if so how many patients/residents have been admitted since the new admissions started and further how many patients/residents are in each unit currently, the full complement number of beds, any waiting list and if no new admissions commenced why not	<b>Cllr. Catherine Connolly</b>
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6 additional beds were opened in Merlin Park in Q4 in 2014 and these are short stay beds to facilitate discharges from the Acute Hospital.

Since opening 30 clients have been admitted to these beds for a period of convalescence, a further 2 beds have been opened in March 2015.

The bed complement is as follows;

Long Stay – 32, 29 occupied, 3 beds are temporarily closed and will reopen as short stay beds in the next month to two months.

Short Stay/ Community Respite – 12, all occupied

Convalescent Bed/Short Stay for Hospital Discharges – 8, all occupied

There are currently six clients on the waiting list for admission to Unit 6.

**B Gloster Interim CO Area 2**

<b>W56Q1561</b>	Please clarify the position re the temporary helicopter pad in the Community Park in Shantalla giving the time span given to City Councillors for the temporary installation of same and the time span for the refurbishment of the Community Park after the removal of the helicopter pad, clarifying where this process is at and the cost of same from start to finish.	<b>Cllr. Catherine Connolly</b>
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The helipad was relocated temporarily to enable the build of replacement car parking in advance of the building of the new Adult Mental Health Unit (AMHU) and Radiation Oncology Facility. Problems were encountered with the car park project, due to the discovery of waste on the site. Contractual issues in this regard are now in a formal conciliation process which is expected to conclude in April 2015. Following this process we will be in a position to clarify the time span for the return of the helipad to its original location.

**T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group**

<b>W56Q1562</b>	Can I be provided with the number of patients on Outpatient waiting lists across the UHL group, with a breakdown, of the procedure/speciality and the length of time individuals are waiting per hospital site?	<b>Cllr. Malachy McCreesh</b>
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<b>Hospital Group</b>		
Specialty	Numbers Waiting	Wait Time
Anaesthetics/Pain Relief	764	13 months
Cardiology	789	11 months
Dermatology	1791	11 months
Gastroenterology	543	14 months
General Medicine incorporating Endocrinology, Diabetes & Respiratory Medicine	1294	15 months
General Surgery	1322	14 months
Vascular Surgery	948	17 months
Geriatric Medicine	157	18 months
Gynaecology	1310	18 months
Haematology	110	5 months
Maxillo-facial	1323	13 months
Nephrology	111	10 months
Neurology	795	14 months
Ophthalmology	2069	24 months
Otolaryngology (ENT)	3488	27 months
Orthopaedics	3577	25 months
Paediatrics	1032	14 months
Plastic Surgery	486	20 months
Rheumatology	859	26 months
Urology	1124	22 months

**C Cowan, CEO, UL Hospital Group**

<b>W56Q1563</b>	How many new nurses have been recruited across the UHL hospitals since January 2015, with a breakdown per hospital site?	<b>Cllr. Malachy McCreesh</b>
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**To date we have appointed 33 staff nurse, of those 2 have been appointed to Nenagh, 2 in Croom, 1 Maternity and the balance to University Hospital Limerick.**

**C Cowan, CEO, UL Hospital Group**



<b>W56Q1564</b>	Can I be provided with a status update of the tendering process with regard to completing construction of the new Emergency Department at University Hospital Limerick?	<b>Cllr. Malachy McCreesh</b>
<p>Further to your query on the current status of the tendering process with regard to completing construction of the new Emergency Department at University Hospital Limerick we would advise as follows. Tenders have been received by the HSE for the works associated with the new Emergency Department at University Hospital Limerick. The current status is that the project design team are reviewing and evaluating the returned tenders in accordance with procurement procedures.</p> <p><b>C Cowan, CEO, UL Hospital Group</b></p>		
<b>W56Q1565</b>	Has there been a recent review of emergency plan for the University Hospital Limerick in the event of a potential disaster at Shannon Airport?	<b>Cllr. Malachy McCreesh</b>
<p>A review of the Major Emergency Plan for the UL Hospitals Group will be undertaken commencing on March 30<sup>th</sup> for a period of four months. This review and update will be undertaken by a member of staff within the Group who has experience in the area of Major Emergency Planning. This staff member will be seconded to update the plan and to commence a training and exercise programme related to the updated plan.</p> <p>The plan, once reviewed and updated, will be the UL Hospital Group response to any external Major Emergency, including, but not limited to an incident at Shannon Airport.</p> <p><b>C Cowan, CEO, UL Hospital Group</b></p>		
<b>W56Q1566</b>	Can you confirm to me what is the current waiting time for orthodontic treatment once a child has had its first appointment? Has any recruitment taken place in this area? Have all primary schools children cover at present?	<b>Cllr. Mary Hoade</b>
<p>The treatment waiting list is currently running at 3 years. However, a small number of cases are placed on a priority waiting list due to the severity of the case or if their treatment is dependent on growth, this list currently has a 20 month wait time.</p> <p>There have been a number of staff appointments to this unit and an additional Consultant Orthodontist has been approved and is currently being recruited.</p> <p>All primary school children are eligible to be assessed by the Department; and services are provided to children in Galway, Mayo and Roscommon.</p> <p><b>T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group</b></p>		
<b>W56Q1567</b>	I have been informed part of Merlin Park is now closed for admission from the ED department? Can you confirm if this is the case and if so how long will this last? Are all other wards in UCHG open?.	<b>Cllr. Mary Hoade</b>
<p>There have been no acute admissions to Merlin Park Hospital since June 2011. In January 2012, the Acute Medicine Programme was established and all acute medicine was transferred from the MPUH to the UHG site. As part of this programme, 32 acute medical beds and associated staff moved from MPUH to UHG. The remaining beds in MPUH were reconfigured as follows:</p> <ul style="list-style-type: none"> <li>• 27 elderly/stroke rehab beds</li> </ul>		

- 20 elective medical beds (all specialties)
- Designation of specialty beds by ward
- The remaining inpatient beds in MPUH are 25 elective orthopaedic beds and long stay elderly care beds.

As part of this change, an acute medical unit also opened 24 / 7 and all acute medical patients are triaged via ED and then transferred to AMU

I can confirm that all wards in UHG are open.

***T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group***

<b>W56Q1568</b>	It has been brought to my attention over the Summer that the Loughrea Community Workshop closed down without warning or notification to the clients. The Centre is used by people with mental or physical disabilities and some with both. I understand that over 15 to 20 clients attended this centre on a daily basis and it was a lifeline for many of them. The workshop is now operating in the grounds of St Brendan's Hospital in Loughrea, prior to that it was operating in a rented premises but then moved to a purpose built refurbished building at a cost of approx. 20,000 euro. Can you confirm to me what is the situation regarding this.	<b>Cllr. Mary Hoade</b>
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It is Government policy that public services be provided in publicly owned buildings to the greatest possible extent in order to ensure best value for money. Galway/Roscommon PCCC is implementing this policy where possible and appropriate.

Consequently, when capital funding became available, a building was specially refurbished on St. Brendan's Campus, Loughrea. This allowed for the movement of the Loughrea Community Workshop, from a property leased from the private sector to HSE owned property where rent no longer has to be paid to accommodate the service.

Clients were advised of the move once appropriate arrangements were in place to ensure continuity of service provision.

The HSE does not have any plans to relocate the service from St. Brendan's Campus.

***B Gloster, Interim Chief Officer, Area 2***

<b>W56Q1569</b>	What is the future for the Health Centre in Tynagh ( what are the opening hours) is there plans to close this Centre and what does it cost to run this Centre per annum	<b>Cllr. Mary Hoade</b>
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Tynagh Health Centre is open for clinics by Dr. Roderick Fahy for one morning per week for an hour.

The HSE met with the local representation group in September 2014.

We advised the group that the centre would remain open in the short term pending clarification over the ownership of the site. We are awaiting clarification from HSE Estates.

The cost of running the Centre in 2014 was €1719.17

***B Gloster, Interim Chief Officer, Area 2***

<b>W56Q1570</b>	Following recent announcements by the HSE of €1.6 million funding being allocated to St Bridget's Hospital Ballinasloe for the provision of new High Support Accommodation, can the HSE outline what the future plans for the site is and if possible what the total future spending on the site will be with the plans they have in mind	<b>Cllr. Aidan Donohue</b>
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The €1.6m funding allocated for St. Brigid's Hospital is for the relocation of 16 patients in the Psychiatry of Later Life, Day Facilities for patients in Mental Health services and patients in Mental Health Services with Intellectual Disabilities, accommodation for a Rehabilitation and Recovery Team base and the relocation of the Stores and Maintenance Departments from the old St. Brigid's Campus. We are also planning to open the 50 bed Community Nursing Unit once the patients in the Psychiatry of Later Life service have been relocated to a suitably refurbished ward in the Admissions Building.

There are no further plans for the site at present. When the current programme of work has been completed, a further review of service requirements will be undertaken in the context of long-term planning

***B Gloster, Interim Chief Officer, Area 2***

<b>W56Q1571</b>	I am asking the HSE to act immediately on the recent HIQA report concerning The community Hospital in Thurles and ensure that this very valued hospital in our community is at full bed capacity and complies with all safety standards.	<b>Cllr. David Doran</b>
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The environment in the Community Hospital of the Assumption is of a very high standard. The issue in the HIQA report in relation to the 4 bedded rooms relates to a technical measurement.

In relation to fire safety, staff at the Community Hospital of the Assumption can manage all fire related incidents. Fire safety experts have provided the appropriate training for managing fire and all recommendations issued by them are in place. Subsequent to the HIQA inspection further training and review by experts in the field of fire safety has been undertaken to provide assurance that staff can manage any fire incident.

The HSE is currently working with HIQA in relation to all of the public older person residential units across HSE Mid West Community Healthcare including the Community Hospital of the Assumption in Thurles. As part of this process the HSE Mid West is currently engaging with its Estates Department to draw up a clear plan in respect of each public residential older persons facility across the Mid West in terms of is compliance with built environment standards as set out by HIQA.

***B. Gloster, Chief Officer – Area 3***

W56Q1572	With Donegal's high proportion of older people and higher proportions of older elderly people, and the challenges to meet HIQA standards in community hospital reconfigurations and developments, What strategy does the HSE have in this regard including the future of Lifford Community Hospital?	Cllr. Gerry Crawford																				
<p>Donegal has eleven community hospitals/nursing units geographically dispersed across the county. Currently 2.5% of the over 65 population are in long stay nursing care in public or private facilities. This figure is low in relation to the rest of the country and the national planning norm of 4%. There are 377 beds in the 11 community hospitals/nursing units, including 162 long stay beds and 215 short stay beds.</p> <p>The HSE continues to liaise with HIQA to ensure continued registration of the public facilities while ongoing investment to address infrastructural deficits continues. Donegal has received an overall allocation of €875,000 to continue the programme of improvements in 2015.</p> <p>It is proposed to continue services at Lifford Community Hospital as a short stay unit. There are two major capital projects currently being planned in Letterkenny and Ballyshannon. The brief for the proposed new development in Letterkenny is currently being finalised and a design team has recently been appointment for the development in Ballyshannon. It is intended that planning permission will be obtained for both developments in 2015.</p> <p><b>J Hayes, Chief Officer – Area 1</b></p>																						
W56Q1573	How many consultants who have retired/resigned from Letterkenny General Hospital have been re engaged by the HSE?	Cllr. Gerry Crawford																				
<p>Two consultants who had retired/ resigned have been re-engaged by LGH. One consultant has been re-employed on a part-time basis to cover an essential clinical service while we seek to recruit in a specialty where nationally there are few eligible candidates. Another is engaged on an agency basis to assist with achieving waiting time targets.</p> <p>We have also engaged agency consultant cover when necessary to maintain clinical services some of whom would also have retired or resigned from other HSE hospitals.</p> <p><b>T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group</b></p>																						
W56Q1574	In HSE West area Ballyshannon how many Ambulance Officer grade staff were on actual duty at base over the Christmas /New Year period from 22d Dec to Sunday Jan 4th inclusive as compared to week 5th Jan to 11th. Jan 15	Cllr. Gerry Crawford																				
<p>Officers are contracted to work Monday to Friday – 9 am to 5pm. Ambulance Control has an officer available in Ballyshannon and Tallaght Central Control 24/7. In the North West there is no facility for operational officer cover outside of duty hours. Some officers make themselves available outside of duty hours for certain periods and log on with the control system. They respond to major incidents, emergency calls or serious untoward incidents.</p> <p><b>Period 1 - 22 Dec to 4<sup>th</sup> Jan</b></p> <table><tr><td>22/12/14</td><td>23/12</td><td>24/12</td><td>25/12</td><td>26/12</td><td>27/12</td><td>28/12</td><td>29/12</td><td>30/12</td><td>31/12</td></tr><tr><td></td><td></td><td></td><td>B/H</td><td>B/H</td><td>Sat</td><td>Sun</td><td></td><td></td><td></td></tr></table>			22/12/14	23/12	24/12	25/12	26/12	27/12	28/12	29/12	30/12	31/12				B/H	B/H	Sat	Sun			
22/12/14	23/12	24/12	25/12	26/12	27/12	28/12	29/12	30/12	31/12													
			B/H	B/H	Sat	Sun																

3 officers	2 officers	1 officer on call	0	0	0	0	3 officers	3 officers	2 officers
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<b>1/1/2015</b>	<b>2/1</b>	<b>3/1</b>	<b>4/1</b>
B/H		Sat	Sun
0	1 officer on call	0	0

**Period 2 - 5th Jan to 11th Jan**

<b>5/1/2015</b>	<b>6/1</b>	<b>7/1</b>	<b>8/1</b>	<b>9/1</b>	<b>10/1</b>	<b>11/1</b>
					Sat	Sun
3 officers	3 officers	2 officers	3 officers	3 officers	0	0

***P O'Riordan, Area Operations Manager, West National Ambulance Service***

<b>W56Q1574</b>	When will the flood report carried out at Letterkenny General Hospital be presented to us as members of the Regional Health Forum?	<b>Cllr Ciaran Brogan</b>
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The purpose of the HSE investigation was not just to establish the cause of the flooding but to identify the measures that need to be put in place to protect against flooding into the future. This has entailed identifying all the possible flooding risks on campus and in the surrounding catchment area, understanding the storm drainage in the area and developing strategies to minimize these risks. The investigation team has been working with the Hospital, Donegal County Council and Errigal College throughout this process.

The investigations identified as a matter of urgency what immediate remedial action needed to be taken to prevent a recurrence of the flooding problem and considerable work has taken place within the campus since Aug 5<sup>th</sup>, in addition to the work that commenced after the July 2013 flood.

We are satisfied that all of the people contributing to the investigation have worked very hard to not just establish what caused the flood on August 5<sup>th</sup> but also to establish the measures that need to be put in place to protect against flooding into the future. This is a complex investigation requiring a systematic and detailed approach.

As part of this systematic approach, the draft HSE report has been shared with named parties in the report and their views are being sought. This process is nearing completion.

The commitment remains to make the full report and all related documentation available to the public and local public representatives have already been briefed and consulted on the steps that are being taken as the report is brought to a conclusion.

***T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group***

<b>W56Q1575</b>	What steps will now be taken to fill the position of paediatric palliative care nurse in Letterkenny?	<b>Cllr Ciaran Brogan</b>
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We have received approval to fill the position of paediatric palliative care nurse in Donegal. This is a new post and is a joint Community and Hospital appointment. The Director of Nursing for LGH is currently liaising with our colleagues in PCCC to establish the most appropriate governance structure for this post. We will be going to the recruitment stage for this appointment shortly.

***T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group***

<b>W56Q1576</b>	When will the Rheumatology clinics resume in Letterkenny General Hospital?	<b>Cllr Ciaran Brogan</b>
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The rheumatology service in the north-west is part of a regional service, primarily based in Our Lady's Hospital in Manorhamilton, Co. Leitrim. There are two consultant rheumatologists providing the service. The current configuration of the service maximises the number of patients that can be seen, albeit at huge inconvenience to some patients who have to travel long distances. At the present time, if the outreach OPD clinics are reinstated in Letterkenny, it would lead to a reduction in the number of appointments available overall due to travel time of the clinicians and absence of some of the medical team from Manorhamilton. A business case and application for a 3rd Consultant Rheumatologist is being reviewed at Saolta Group level.

***T. Canavan, Chief Operating Officer, SAOLTA University Health Care Group***