

## REGIONAL HEALTH FORUM WEST – 1<sup>st</sup> April 2014

### QUESTIONS AND RESPONSES

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| W50Q1359 | Opening date for Health Centre, Corandulla?   | Cllr. Mary Hoade       | 10      |
| W50Q1360 | Cancelling and rescheduling of elective surgeries in GUH?   | Cllr. Mary Hoade       | 10      |
| W50Q1361 | Critical care/Intensive care beds in GUH?   | Cllr. C Connolly       | 10-11   |
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| W50Q1363 | Referral of out-patient and in-patient to private hospitals over last 3 years                               | Cllr. C Connolly       | 12      |
| W50Q1364 | Rented and leased properties by HSE West in Galway City   | Cllr. C Connolly       | 13-14   |
| W50Q1365 | Number of lost hours to ambulance services in Donegal because of delays from Letterkenny & Sligo hospitals? | Cllr. B McGuinness     | 14      |
| W50Q1366 | Total of legal costs, Consultant, Expert witnesses, PR – paid by HSE & UHG?                                 | Cllr. P Conneely       | 14      |
| W50Q1367 | Number of claims taken against UHG/Merlin from 2009 to date?  | Cllr. P Conneely       | 14      |
| W50Q1368 | Number of employees dismissed by UHG/Merlin Park from 2009 to date?   | Cllr. P Conneely       | 14      |
| W50Q1369 | Is HSE West concerned than an employee(Following a guilty plea) is now employed in HSE West?                | Cllr. P Conneely       | 14      |

| NUMBER   | QUESTION  | RAISED BY         |
|----------|---|-------------------|
| W50Q1329 | Why there are such long waiting lists in the HSE for Occupational Therapy? And what plans are being put in place to provide a proper service? Children with development delays who have been assessed and require the aid of an occupational therapist can be waiting up to twelve months to receive their treatment. It is extremely frustrating for parents to wait for such long periods when they can see how the delay in treatment is having long term effects on their children. | Cllr Sean McGowan |

There are two well developed Paediatric OT services in Sligo/Leitrim & West Cavan for the following age groups:

- Early Intervention Team 0-5 years (2 teams Leitrim and Sligo )
- School Aged Service 6-18 years( 2 locations Leitrim and Sligo)

The waiting lists at February 2014 are:

|                                  |         |    |
|----------------------------------|---------|----|
| Feb 2014 Wait List EIT 0-5 years | Sligo   | 26 |
|                                  | Leitrim | 13 |
|                                  | Total   | 39 |

|  |         |    |
|--|---------|----|
| Feb 2014 Wait List School Aged 6- 18 years | Sligo   | 48 |
|  | Leitrim | 21 |
|  | Total   | 69 |

The waiting lists have grown in the last half of 2013 due to resource pressures. The following guidelines are used when determining the priority of referral to the Paediatric Occupational Therapy Service. This rating is based primarily on Health and Safety needs of clients and carers as well as considering the impact of non-intervention and the age of the child.

Children are seen in date order from the date of referral. Children are prioritised into two categories:

|                     |             |  |
|---------------------|-------------|--|
| Priority 1-Urgent   | 1 month     | <p><b>Priority 1 – (Immediate Action) within 1 month</b><br/> <b>Children/Carers whose health and safety or development would be seriously impaired without immediate intervention.</b></p> <p>a) Urgent equipment provision e.g. hoists, toileting, pressure relief.<br/> b) Children with acquired injury or sudden deterioration requiring urgent intervention.<br/> c) Essential equipment repairs e.g. Wheelchair repairs for essential mobility.<br/> d) Terminal illness or palliative care.<br/> e) Hospital discharge.<br/> f) Children with a newly diagnosed physical and sensory disability.</p> |
| Priority 2-Standard | 6-12 months | All other referrals.   |

All urgent referrals are seen within one month.

The wait time at present for new referrals is 6 months and increasing due to high number of babies born last year with complex enduring disability requiring intensive OT input. The six month wait time is currently impacted by maternity leave and recent resignations.

**Damien McCallion, Area Manager, Sligo Leitrim W Cavan**

|          |   |                   |
|----------|---|-------------------|
| W50Q1330 | What is the up to date position with regard to providing G.P. service in the Primary Care Centre in Dromod? Since Dr. Peter Beirne, who provided a clinic every Tuesday morning left the area, there has been no G.P. service in the centre. The local community are anxious that the service be restored as quickly as possible. | Cllr Sean McGowan |
|----------|---|-------------------|

Unfortunately, it has not been possible to attract a GP to the Health Centre in Dromod. The HSE have continuously engaged with the local community and GP's on the matter but there are no GP's currently prepared to operate in the Health Centre.

The Centre is used regularly by the Leitrim School Nurse, by the Area Medical Officers (for BCG and other vaccination clinics) and by the Community Welfare Officer. Other services such as Speech and Language Therapy, Psychology and Child Development use the Centre on an occasional basis as the need arises. The GMS patients in the area receive a service from other GP's close to Dromod.

**Damien McCallion, Area Manager, Sligo, Leitrim, W Cavan**

| W50Q1331  | <b>What is the up to date position in relation to the provision of the new Community hospital / day centre at Carrick-on Shannon. Has funding been secured for this project?</b>   | <b>Clr Sean McGowan</b>  |        |   |                    |        |  |  |  |  |   |   |  |  |  |  |  |
|---|--|--------------------------|--------|---|--------------------|--------|--|--|--|--|---|---|--|--|--|--|--|
| <p>The provision of a new Community Hospital at Carrick -on-Shannon is included on the HSE future plans. St. Patrick's Community Hospital was constructed in 1841 and will not meet our needs in the medium/long term. St Patrick's Community Hospital is currently on the National Capital Replacement List, at priority two level currently, indicating development would commence in 2018. This is subject to funding availability at that time.</p> <p><i>Damien McCallion, Area Manager, Sligo, Leitrim, W Cavan</i></p>   |  |                          |        |   |                    |        |  |  |  |  |   |   |  |  |  |  |  |
| W50Q1332  | <b>To ask the Executive to outline a time frame for when construction will be complete on the new Community Nursing unit and GP centre in Ballinamore, and when is it expected to open for patients?</b>   | <b>Clr Sean McGowan</b>  |        |   |                    |        |  |  |  |  |   |   |  |  |  |  |  |
| <p>The centre will be completed and fitted out by October 2014. The Primary Care Centre will open shortly after the equipping is complete. The opening date for the Community Nursing Unit will be by agreement with the operator for which a tender process is ongoing. The advertisement for a Nursing Home Operator will be published in the next few weeks and it is our intention to have an operator appointed in advance of the completion of the Unit.</p> <p><i>Damien McCallion, Area Manager, Sligo, Leitrim, W Cavan</i></p>  |  |                          |        |   |                    |        |  |  |  |  |   |   |  |  |  |  |  |
| W50Q1333  | <b>To ask the Executive of the H.S.E North &amp; West what is the up to date position regarding a proposed completion date of the new €6m community hospital/day care centre in Ballinamore &amp; whether it is proposed to be run by a private operator or by the HSE directly?</b> | <b>Clr Gordon Hughes</b> |        |   |                    |        |  |  |  |  |   |   |  |  |  |  |  |
| <p>The centre will be completed and fitted out by October 2014. The Primary Care Centre will open shortly after the equipping is complete. The opening date for the Community Nursing Unit will be by agreement with the operator for which a tender process is ongoing. The advertisement for a Nursing Home Operator will be published in the next few weeks and it is our intention to have an operator appointed in advance of the completion of the Unit.</p> <p><i>Damien McCallion, Area Manager, Sligo, Leitrim, W Cavan</i></p>  |  |                          |        |   |                    |        |  |  |  |  |   |   |  |  |  |  |  |
| W50Q1334  | <b>To ask the Executive of the H.S.E if there are any plans for the HSE owned building at Church St, Ballinamore, Co. Leitrim. It has remained vacant for a number of years now and appears to be falling further into disrepair?</b>  | <b>Clr Gordon Hughes</b> |        |   |                    |        |  |  |  |  |   |   |  |  |  |  |  |
| <p>The HSE owned building at Church Street Ballinamore is an end - of - Terrace 3/4 bed roomed house that is over 50 years old. The house was previously used to provide residential and day care facilities for Mental Health Service Clients. Future use of this property was recently reviewed by the Mental Health Service and Property Management Service HSE NW. It has been decided that the property will be offered for Sale as it is no longer suitable for HSE proposes. The property will be placed on the open market over the coming weeks.</p> <p><i>Damien McCallion, Area Manager, Sligo, Leitrim, W Cavan</i></p> |  |                          |        |   |                    |        |  |  |  |  |   |   |  |  |  |  |  |
| W50Q1335  | <b>Currently, how any children under 5 have been identified / diagnosed as being on the autistic spectrum in the Mid West and West. Is a breakdown by county available containing the yearly instance of diagnosis, the category of autism, the age of diagnosis and gender?</b>     | <b>Clr Brian Meaney</b>  |        |   |                    |        |  |  |  |  |   |   |  |  |  |  |  |
| <p>The information provided is from HSE reference points in individual areas. However, depending on the interpretation of phrases identified and diagnosed, there could be some variation.</p>  |  |                          |        |   |                    |        |  |  |  |  |   |   |  |  |  |  |  |
| <table border="1"> <thead> <tr> <th data-bbox="79 1751 386 1971">Area</th> <th data-bbox="391 1751 689 1971">Children under 5 identified Autism Spectrum</th> <th data-bbox="694 1751 1032 1971">Category of Autism</th> <th colspan="2" data-bbox="1037 1751 1299 1933">Gender</th> </tr> <tr> <td colspan="3"></td> <th data-bbox="1037 1939 1163 1971">M</th> <th data-bbox="1168 1939 1299 1971">F</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>   |  |                          | Area   | Children under 5 identified Autism Spectrum | Category of Autism | Gender |  |  |  |  | M | F |  |  |  |  |  |
| Area  | Children under 5 identified Autism Spectrum  | Category of Autism       | Gender |   |                    |        |  |  |  |  |   |   |  |  |  |  |  |
|   |  |                          | M      | F   |                    |        |  |  |  |  |   |   |  |  |  |  |  |
|   |  |                          |        |   |                    |        |  |  |  |  |   |   |  |  |  |  |  |

|             |     |   |    |    |
|-------------|-----|---|----|----|
| Midwest*    | 107 | DSM 4 and 5 recommends that Autism and Autism Spectrum Disorder and Asperger's are all categorised as Autism now. If the query is the severity of Autism areas do not differentiate between the levels of Autism in the diagnostic categories so this information is not available. | 80 | 27 |
| Galway/Ross | 85  |   | 68 | 17 |
| Mayo        | 60  |   | 47 | 13 |
| SLWC**      | 13  |   | 12 | 1  |
| Donegal*    | 33  |   | 28 | 5  |

\*(estimated - extrapolated from assessment of need database compared to areas that returned information – not all parents apply for an assessment of need and hence may not be formally registered).

\*\* (There are an additional 10 – 15 children in Sligo/Leitrim/West Cavan currently undergoing assessment of need.)

**Damien McCallion, Area Manager, Sligo, Leitrim, W Cavan**

|                 |   |                          |
|-----------------|---|--------------------------|
| <b>W50Q1336</b> | <b>Should Schools and facilities that serve food be mandatorily required to have emergency epinephrine available on the premises? What are the issues involved?</b> | <b>ClIr Brian Meaney</b> |
|-----------------|---|--------------------------|

Emergency Epinephrine is known as Adrenaline in Ireland/UK. On advice of Public Health Department, there is no evidence base that the provision of adrenaline pens where food is served saves lives. There is a resource pack developed for schools and teachers by Anaphylaxis Ireland and other groups to help parents and schools manage anaphylaxis including how to develop emergency plans. Restaurants and schools should be prepared for anaphylaxis but there are many complex issues around training, administration, storage, cost and accountability when adrenaline is provided. The HSE takes this and every opportunity to encourage parents of children who have requirements to ensure they engage with schools and other organisations that they may be temporarily engaging with e.g. Youth clubs.

**Bernard Gloster, A/RDPI**

|                 |  |                          |
|-----------------|--|--------------------------|
| <b>W50Q1337</b> | <b>Councillors have been informed by an anti-fluoridation expert that Sudden Infant Death Syndrome (SIDs) in the 26 counties is substantially more prevalent per capita than in the six Northern counties where there is no fluoridation of public water supplies. I ask as a matter of urgency if this is the case and can exact figures be given for the last three full years for the comparison of SIDs between Northern Ireland and Eire?</b> | <b>ClIr Brian Meaney</b> |
|-----------------|--|--------------------------|

I have been advised by the Public Health Department, to attribute differences in mortality rates for any condition to potential risk factors requires complex epidemiological study. The cause of SIDS is not known. SIDS is a complex condition that is associated with multiple factors including sleeping position, parental smoking and many others. Thus differences in SIDS rates between Northern Ireland and Eire cannot be attributed to fluoridation of water supplies.

**Bernard Gloster, A/RDPI**

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| <b>W50Q1338</b> | <b>I request a case by case listing without details of claimants personal details of all Public and Employee claims lodged, settled or in process against the HSE West for the Years 2013 and 2012. Detail to include the amount claimed and the amount received, (if any) and legal costs, (if any) in each case?</b> | <b>ClIr Brian Meaney</b> |
|-----------------|--|--------------------------|

This request has been submitted to the State Claims Agency which since 2010 indemnifies the HSE in respect of any Claims for personal injury and we will forward their reply when received.

**L Minihan, Finance**

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|-----------------|---|---------------------------|
| <b>W50Q1339</b> | <b>To ask for a report on the removal of the mammography imaging equipment from Sligo Regional Hospital including a report on its disposal and for an outline of the source from which funding will be provided for the promised replacement machine and when such machine will be purchased?</b> | <b>ClIr Sean MacManus</b> |
|-----------------|---|---------------------------|

Two types of imaging equipment are used in a breast examination and are located in the Mammography Suite. These are Mammography

Imaging equipment and ultrasound imaging equipment. Mammography imaging equipment at Sligo Regional Hospital was decommissioned recently. This particular equipment which was funded by the hospital and which is over nine years old did not meet current guidelines for breast care services and even if repaired it would suffer from inadequate detector size, inferior imaging performance and inability to fit up to date software. It is not acceptable from a patient safety perspective to maintain or retain equipment that is not fit for purpose. Our priority at all times is to ensure the delivery of safe patient care.

It was decided that as this equipment was no longer viable that new equipment will be acquired once the staff resources are available to recommence this service. In the meantime the space in the unit will facilitate the provision of the ultrasound service to address growing demands, space limitations and waiting times.

Despite reports to the contrary the ultrasound machine, which was largely funded from donations following fundraising led by the former Mayor of Sligo, Rosaleen O Grady and the hundreds of other fundraisers who took part in the Inner Relief Road Walk in Sligo in 2005, is still in use in the hospital in the Maternity Services, having been assigned there following suspension of the mammography service in Sligo a few years ago.

**Bill Maher, CEO, West North West Hospital Group**

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| <b>W50Q1340</b> | <b>What concrete plans or proposal are there to move the Regional Maternity to the grounds of the University Hospital and where does this project feature in the HSE West capital plan?</b> | <b>Clr Joe Leddin</b> |
|-----------------|---|-----------------------|

The current site Masterplan for University Hospital Limerick includes a protected zone for the development of a new co-located maternity hospital building to replace the current city centre located facility.

It is planned to review the current brief for the project which was developed in 2008 to take on board the latest thinking and to then proceed with a cost benefit analysis for the project which will be required to support any future capital funding provision. The current HSE Capital Programme for 2014 includes funding provision to complete this initial stage of the process.

**Ann Doherty, CEO, UHL**

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|-----------------|---|-----------------------|
| <b>W50Q1341</b> | <b>Is there a current difficulty in the recruitment of doctors for the Limerick Regional Maternity and if so what plans are in place to resolve this problem?</b> | <b>Clr Joe Leddin</b> |
|-----------------|---|-----------------------|

We are currently encountering problems with non consultant hospital doctors (NCHD's) availability across the country in Obstetrics and Gynaecology. We have struggled to fill our compliment of doctors for this current six month period but we now have eleven of our twelve posts filled. Much work is ongoing in relation to planning for the future and in the last few weeks we were informed that an additional one of our posts will be converted to a Specialist Registrar post which will bring our cohort of Specialist Registrars to three. We are aware that a Workforce Plan is currently being progressed nationally with the principle aim of increasing numbers of higher specialist training posts and UL Hospitals has identified a number of its existing Registrar posts which would benefit from conversion to a higher specialist training post. In relation to SHO posts, we have similarly identified training capacity to support trainees from the nationally approved scheme in collaboration with the College of Physicians & Surgeons in Pakistan (CPSP) and we hope to attract trainees from this scheme to University Maternity Hospital Limerick. Currently our twelve posts are comprised of six Senior House Officers, four Registrars and two Specialist Registrars.

**Ann Doherty, CEO, UHL**

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|-----------------|--|-----------------------|
| <b>W50Q1342</b> | <b>Have any senior management or HSE West executives received or due to receive top up payments for services provided.</b> | <b>Clr Joe Leddin</b> |
|-----------------|--|-----------------------|

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

**F Rogers, Asst National Director, HR**

|  |   |                                 |
|--|---|---------------------------------|
| W50Q1343   | <p><b>Can I receive a report on the chronic overcrowding still being experienced by those presenting to the University Hospital Limerick and what plans in regard to more efficient bed management plan are been implemented?</b></p>   | <p><b>Clr Joe Leddin</b></p>    |
| <p>As part of the bed management response to hospital overcrowding we have implemented a number of measures to alleviate the problem as follows:</p> <ul style="list-style-type: none"> <li>• Twice daily bed meetings attended by bed management and ward managers - this forum discusses potential discharges as well as allocating beds to patients waiting in the ED, AMU, SAU and elective admissions. These meetings are supplemented by ward rounds by bed management staff.</li> <li>• Three patient flow managers have been appointed since July 2013, they are responsible for coordinating the transfer of patients from UHL to Ennis, Nenagh &amp; St. Johns Hospital.</li> <li>• The patient flow managers also liaise with diagnostics regarding patients who need investigations, thus preventing unnecessary delays.</li> <li>• Consultants are informed of the numbers waiting beds each day in the ED at 8am, and again as necessary.</li> <li>• The Assistant Bed Manager takes responsibility for coordinating discharge plans for patients requiring long term care via Fair Deal as well as other patients with complex discharges. She liaises with our colleagues in PCCC with regard to these discharges.</li> <li>• The Assistant Bed Manager also liaises with the rehab units in the Mid West regarding the transfer of patients waiting rehabilitation.</li> <li>• There is a daily teleconference held each day chaired by a member of the executive team, all hospitals within the group participate in the teleconference and the bed situation in all the hospitals is discussed.</li> <li>• The Acute Medical Unit has been opened - this unit takes direct referrals from GP's and referrals from the Emergency Department - there is a Consultant on duty there each day, ensuring patients are seen by a senior decision maker in a timely fashion with regard to decision to admit and plan for treatment. This unit takes patients who would otherwise be seen in the ED.</li> <li>• The Surgical Assessment Unit works in a similar fashion to the AMU - but for surgical patients.</li> </ul> <p>We are constantly striving to reduce the time a patient has to wait for a bed and with this in mind the following initiatives are currently being progressed:</p> <ul style="list-style-type: none"> <li>• Development of a "Navigational Hub" - a room where all patients are discussed by their ward managers with bed management and relevant clinicians. It is anticipated that potential delays will be identified at an early stage and addressed, as well as identification of diagnostics which if carried out will enable early discharge.</li> </ul> <p>It is planned to open a 17 bed short stay unit which will be managed by the acute medicine physicians, the ambition being to turn around patients within 48 hours of admission. It is anticipated that this unit will expand into an existing ward in the future increasing the capacity of the unit to 49 beds.</p> <p><b>Ann Doherty, CEO, UHL</b></p> |   |                                 |
| W50Q1344   | <p><b>To ask the HSE to respond to recent reports that maternity services in the west/northwest hospital group are under review and that a new state wide maternity strategy will be developed?</b></p> <p><b>Given that the Higgins report requires that each hospital group prepare a strategic plan for service configuration, consistent with national objectives for the delivery of patient services, can we be assured that maternity services at Sligo Regional Hospital will continue to be provided there on an on-going basis.</b></p> | <p><b>Clr Sean MacManus</b></p> |
| <p>In response to a series of reports into Ireland's maternity services, last year the HSE established a National Group to oversee the implementation of a series of recommendations arising from these reports. This group has developed implementation plans for 2014 which will build on the many initiatives that are already underway in maternity services to implement the recommendations.</p> <p>It is in this context that a review of the existing models of maternity services care is being conducted across the West/North West Hospitals Group including the maternity units at University Hospital Galway, Portlinculla Hospital Ballinasloe, Mayo General Hospital, Sligo Regional Hospital and Letterkenny General Hospital.</p> <p>The review is not yet complete and is expected to take a number of months. There are no planned closures of maternity services. When complete, the review of maternity services in the West/North West Hospitals Group will be considered as part of the broader national review of maternity services (as per the HIQA recommendations), which will be led by the Department of Health with input from the HSE.</p> <p><b>Bill Maher, CEO, West North West Hospital Group</b></p>   |   |                                 |

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| <b>W50Q1345</b>  | <b>Can the manager in the Galway/Rosc mental health area outline the enhanced services that are now available to the patient who historically presented themselves at the admissions in Ballinasloe?</b>                   | <b>Cllr Tim Broderick</b>     |
| <p>There is no change to the emergency services offered to patients requiring acute psychiatric care in Ballinasloe. Patients who historically presented at the Emergency Dept. of Portiuncula Hospital, Ballinasloe will continue to receive the same level of service. Patients are clinically assessed by a psychiatrist who makes an assessment of their clinical needs. The treatment plan provided is based on the individual's presentation and needs. Treatment and referral options include: inpatient admission to an acute psychiatric unit (GUH or Roscommon); or referral to the local community mental health team; or referral to the psychology services or referral to the patients GP service. The majority of patients accessing mental health services do so through their community health team or GP who are familiar with the patients needs and can refer directly to the relevant service.</p> <p><b>Catherine Cunningham, Area Manager, Galway Roscommon PCCC</b></p>  |  |                               |
| <b>W50Q1346</b>  | Can I be furnished with how many extra staff are used on a daily basis to ensure that the patients in the psychiatric unit on the UCHG campus can avail of a smoke as they so desire? Also what is the procedure at night? | <b>Cllr Tim Broderick</b>     |
| <p>GUH has a No Smoking Policy. However, the Acute Psychiatric Unit is exempt from this in that it has 2 designated smoking areas. One of these is in the area where one-to-one special care is provided to patients. The second area is a general ward where there is a policy regarding smoking that is managed by staff. No extra staff are required under this policy. There is no difference during the day as compared with night should a patient require to smoke. This is facilitated within the context of the policy.</p> <p><b>C Cunningham, Area Manager, Galway Roscommon PCCC</b></p>   |  |                               |
| <b>W50Q1347</b>  | <b>Can the forum furnish me with the precise national directive with regard to outdoor smoking areas? Also clarification of what is and is not permitted to be housed in these areas?</b>                                  | <b>Cllr Tim Broderick</b>     |
| <p>There is no such national directive. Consistent with the enforcement ban on smoking in the workplace, the HSE conducts inspections through its professional Environmental Health Services. Where such assessment leads to a view being formed that legislation is being breached, the matter can be progressed with engagement between the HSE and the proprietor up to and including court proceedings where the HSE assessment is independently judged. To assist the Councillor further, a copy of the legislative details are being emailed directly to him.</p> <p><b>M Mulcahy, Environmental Health Services</b></p>   |  |                               |
| <b>W50Q1348</b>  | <b>Taxi service to and from University Hospital Limerick. For the last three years, what is the total cost to the HSE annually?</b>  | <b>Cllr. Michael Hourigan</b> |
| <p>2011 = €1.200m. A total of 85% of this spend relates to Patient Transport associated with Dialysis and Oncology Patients.<br/> 2012 = €1.338m. A total of 85% of this spend relates to Patient Transport associated with Dialysis and Oncology Patients.<br/> 2013 = €1.186m. A total of 85% of this spend relates to Patient Transport associated with Dialysis and Oncology Patients.</p> <p><b>Ann Doherty, CEO, UHL</b></p>   |  |                               |
| <b>W50Q1349</b>  | When will the Dedicated Paediatric Diabetes Clinical Nurse Specialist be appointed to Letterkenny General Hospital?  | <b>Cllr. L. Blaney</b>        |
| <p>The National Clinical Programme for Diabetes was established in 2010 and the model of care for children was published in 2012. Letterkenny General Hospital submitted a Business Proposal in January 2013 to the National Clinical Lead outlining the requirements for the Diabetic Service in Donegal. This was unsuccessful at the time, verbal response stating we did not meet criteria in numbers for appointment of 3 Clinical Nurse Specialist in diabetes.</p> <p>However, the National Clinical Programme for Diabetes has created a new post for an Integrated Diabetes Clinical Nurse Specialist (<i>operating between Community and Acute Services</i>) and as a result, the nursing resource in Letterkenny General Hospital will be restructured, delivering benefits to both children and adults with Diabetes.</p> <p>There are currently two Clinical Nurse Specialist posts and one Staff Nurse post in the Diabetic service at Letterkenny General Hospital. These resources will remain unchanged. A new post of Integrated Diabetes Clinical Nurse Specialist will link diabetic hospital care to diabetic community services.</p> |  |                               |

The outcome of these changes will be that nursing support for children with diabetes within the hospital will remain at current levels. Overall services will be enhanced through the support of the Integrated Services Clinical Nurse Specialist, who will work across both the hospital and the community.

One of the two hospital Clinical Nurse Specialist posts will have a focus on children with diabetes and the other will have a focus on adults with diabetes. A staff nurse with experience in diabetes is being recruited to support both these roles. This arrangement is currently being reviewed by the Hospital in conjunction with the Diabetic Clinical Programme and any opportunity to further enhance the service provided for children with diabetes will be availed of.

The existing midwifery allocation to support pregnant women with diabetes will also continue unchanged.

The hospital is in the process of recruiting permanent Consultants to two vacant posts within the Paediatric service. One of these posts is being advertised as a Consultant Paediatrician with a Special Interest in Diabetes. In the interim, Consultant cover for children with diabetes is currently being provided by a locum Consultant Paediatrician. There are 144 Type 1 children being treated at Letterkenny.

**Bill Maher, CEO, West North West Hospital Group**

|                 |   |                        |
|-----------------|---|------------------------|
| <b>W50Q1350</b> | How much did it cost the HSE to fit out the premises at Justice Walsh Road, Letterkenny for the Outpatients Department? | <b>Cllr. L. Blaney</b> |
|-----------------|---|------------------------|

The Outpatients' Department in the hospital was one of the areas damaged by floodwaters and the Interim Out-Patients Dept is now located off the hospital campus in Scally Place, adjacent to the Courthouse in the centre of Letterkenny Town (opened on Monday 09 December 2013). The premises was upgraded and reconfigured to allow the opening of 27 modern dedicated clinic rooms with waiting areas and the necessary support accommodation. This was a critical initiative in ensuring that the outpatient service, which cares for more than 80,000 patients per year, could maintain full functionality throughout the rebuild period. The services will return to the hospital in due course.

This projected cost will be in the region of €1.25m. This cost reflects the purchase of equipment and furnishings to replace those lost in the flood of the hospital. This equipment will be transferred to the hospital when services return to the hospital site. Other costs associated with the relocation include lease costs; structural work to deliver an outpatient facility of the appropriate standard; costs associated with the transfer of clinical and support services and their maintenance off the hospital site; consumable costs stocking a new outpatient department; and communication materials and signage.

The Clinics which run from the New Interim Outpatients Department are

- Medical
- Surgical
- Haematology
- Renal
- Diabetic
- ENT
- Neurology
- Orthopaedic
- Fracture Clinics
- Maxillofacial
- Dermatology
- St. Luke's
- Geriatrics

**Bill Maher, CEO, West North West Hospital Group**

|                 |  |                        |
|-----------------|--|------------------------|
| <b>W50Q1351</b> | How much is it costing to rent the above premises per year and how many years is the contract for? | <b>Cllr. L. Blaney</b> |
|-----------------|--|------------------------|

A response to this question will issue as soon as possible.

**Bill Maher, CEO, West North West Hospital Group**

|  |  |                        |
|--|--|------------------------|
| W50Q1352   | <b>How much is it costing per week for the Digger Hire that is on 24 hour standby at Letterkenny General Hospital?</b>   | <b>Cllr. L. Blaney</b> |
| <p>The hire of the digger and associated staffing for the night of the flood, the subsequent clean up and standby facility to the beginning of March amounted to €28k.</p> <p><b>Bill Maher, CEO, West North West Hospital Group</b></p>   |  |                        |
| W50Q1353   | <b>In light of recent revelations in the Irish Times and on RTE in relation to poor ambulance response times would the HSE West now reconsider the decision to abandon a pilot study on ambulance response times which was agreed by the previous Chief Executive, Mr John Hennessy, last year?</b>                              | <b>Cllr L Fallon</b>   |
| <p>The National Ambulance Service (NAS) is not in a position to provide county based information. However the NAS is currently in the process of establishing a national capacity review. The Capacity Review has been commissioned which will model the ambulance resources required to cover the public need. This will be a technical exercise to identify where resources should be placed to best meet the anticipated needs of the service at a national level and a regional level. Terms of reference and timescales are currently being agreed.</p> <p><b>Paudie O’Riordan, Regional Operations Manager, National Ambulance Service</b></p>   |  |                        |
| W50Q1354   | <b>What is the updated position with regard to the refurbishment of the Sacred Heart Hospital Roscommon in order that it becomes compliant with HIQA standards?</b>  | <b>Cllr L Fallon</b>   |
| <p>There are nine Community Nursing Units in Galway/Roscommon out of a total of 129 such units nationally. All of these Units require work to a greater or lesser extent to become complaint with HIQA standards. Discussions are on-going nationally between the service areas, Estates and the regulatory bodies to agree the pathway to achieve compliance for all Units with HIQA standards. Galway/Roscommon PCCC services is committed to the Sacred Heart Home and to ensuring that it meets HIQA standards as the hospital is pivotal to the delivery of services to older people in Roscommon.</p> <p><b>Catherine Cunningham, Area Manager, Galway Roscommon PCCC</b></p>  |  |                        |
| W50Q1355   | <b>In light of the issues raised by Dr Patrick Nelligan and Dr Michael Scully re the shortage of intensive care beds, and in light of the fact that a 2008 report highlighted a shortage which continues to worsen, what action does the HSE West propose to take to remedy the problem?</b>                                     | <b>Cllr L Fallon</b>   |
| <p>All critical care beds have been centralised to UHL.. In late 2013 the intensive care unit transferred from the main building at UHL to the new critical care block. There are 7 ICU beds currently and the peri-operative directorate is recruiting and training staff to open an 8<sup>th</sup> bed in October 2014. The HDU Unit will be transferring to the new critical care block in Quarter 2, 2014 with 6 HDU beds. It is anticipated that a further 2 beds will open once staff have been recruited and trained during the summer.</p> <p><b>Ann Doherty, CEO, UHL</b></p> <p>We are looking to increase the number of staff and intensive care beds available across West North West Hospital Group. We have opened one additional bed in GUH and we are currently in the process of recruiting staff to open further beds.</p> <p><b>Bill Maher, CEO, West North West Hospital Group</b></p> |  |                        |
| W50Q1356   | <b>There appears to be increasing delays in the speed at which patients who apply for appliances such as wheelchairs or beds for home care delivery. Could the HSE West advise on the average delay between application for a new wheelchair or bed for home care patients in HSE West and receipt of same by the applicant?</b> | <b>Cllr L Fallon</b>   |
| <p>A new contract was put in place in 1<sup>st</sup> February, 2014. This involved a change of supplier and as a result some temporary delays are being experience. However, most appliances are delivered efficiently. Applications for these items are assessed by Clinicians and depending on the need are allocated based on a priority rating scale. To assist the Councillor further, a copy of the waiting times county by county will be emailed to him directly next week.</p> <p><b>Bernard Gloster, A/RDPI</b></p>  |  |                        |

|   |   |                        |
|---|---|------------------------|
| <b>W50Q1357</b>   | <b>Can you confirm to me what is the current situation with the withdrawal of dental services from Headford; will this service be reinstated? At present have all schools in the County a dental service? What classes are currently covered?</b>   | <b>ClIr M Hoade</b>    |
| <p>The Headford dental clinic requires some refurbishment work in order to bring it fully up to Health and Safety and HIQA standards. It is hoped to have repairs complete by summer 2014. When works have been completed a service by a dental team in Headford will be provided in the context of existing staffing resources.</p> <p>In order to provide a fair and equitable service across the entire county the school dental service has been re-organised. All of the 283 primary schools (including special schools) will now have access to dental assessment at 6<sup>th</sup> class. The 6<sup>th</sup> class was chosen as children have usually lost all of their baby teeth at that stage and the dentists can assess and treat their permanent teeth. By reorganising our reduced staff numbers we can provide an assessment service to every 6<sup>th</sup> class child and we can provide an emergency service for children who have severe pain or have had an accident that affects their teeth. This is often a same day service (Monday to Friday). This new system allows us to continue to provide orthodontic assessment and onward referral if required to the Orthodontic Department.</p> <p>The Department will also continue to provide:</p> <ul style="list-style-type: none"> <li>• A dental service for patients who are medically compromised, some who require a general anesthetic.</li> <li>• Referrals to University Hospital Galway (GUH) oral maxillofacial and orthodontic departments for advice, assessment and treatment.</li> <li>• Referrals for the extraction only service in hospital theatre UHG.</li> </ul> <p><b>Catherine Cunningham, Area Manager, Galway Roscommon PCCC</b></p> |   |                        |
| <b>W50Q1358</b>   | <b>What number of nursing posts are not filled in the Maternity Section of GUH? Following recent media reports it appears that the current ratio of nurses to patients is at a very high level. What plans are in place to replace those very critical posts?</b>   | <b>ClIr M Hoade</b>    |
| <p>Currently there are 6.7 vacancies which will be filled over the coming weeks following recent interviews.</p> <p><b>Bill Maher, CEO, West North West Hospital Group</b></p>  |   |                        |
| <b>W50Q1359</b>   | <b>What is the current situation regarding the Health Centre at Corrandulla. Has the necessary funding become available to carry out the works. Is there a planned opening date for this Health Centre?</b>   | <b>ClIr M Hoade</b>    |
| <p>An application has been made to the HSE Estates Dept for capital funding for refurbishment of this Health Centre and a plan for the work has been agreed. We continue efforts to secure the necessary capital funding of €35,000 to complete the refurbishment required to bring the Health Centre up to a suitable environmental standard. We await confirmation, from national level, as to when funding is being allocated and intend to commence the work immediately once funding is received. Patients in the interim are accessing a full range of services in the Health Centre in Turloughmore.</p> <p><b>Catherine Cunningham, Area Manager, Galway Roscommon PCCC</b></p>   |   |                        |
| <b>W50Q1360</b>   | <b>How many elective surgeries have been cancelled to date this year in GUH as a result of large numbers of patients waiting in E.D. Department? Patients who were cancelled, how long should they have to wait to be rescheduled?</b>  | <b>ClIr M Hoade</b>    |
| <p>526 patients had their elective procedure cancelled to date in 2014. If a patient's elective surgery is cancelled, it is hospital policy that they would be rebooked within 6 weeks.</p> <p><b>Bill Maher, CEO, West North West Hospital Group</b></p>   |   |                        |
| <b>W50Q1361</b>   | <b>Given the concern expressed in a letter to a national newspaper on Tuesday the 18<sup>th</sup> March 2014 by the Council of the Intensive Care Society of Ireland and signed by 20 Consultants including two consultants from the Regional Hospital, Galway who felt it necessary amongst other matters to "highlight the necessity for an expansion of critical care capacity" and noting that 'bed capacity has actively been reduced' notwithstanding the recommendation in the report -Toward Excellence in Critical Care- published in 2008- that intensive care capacity should be doubled by 2020' – I am asking for full clarification on the position re critical care/intensive care in the Regional Hospital in Galway including the complement of beds required, the number of beds actually available and similarly the situation re the complement of staff necessary vis a vis the number of staff actually working in this area as well as clarification on what specific improvement measures if any have been made since the report was published in 2008.</b> | <b>ClIr C Connolly</b> |

**1. Complement of beds required** (As per Critical care capacity planning report 2014-2016 - June 2013).

ICU x 14.5 beds

HDU x 21 beds

**2. Existing Critical Care Facility/Accommodation**

ICU x 12 beds

HDU x 6 beds

CTICU x 6 beds

**3. Existing Staffed Bed Capacity**

ICU x 10Beds

HDU x 6 beds

CTICU x 3 beds

**4. Planned Capacity Increases**

3 further ICU/CTICU beds will be opened as staff are recruited in Q2-Q4 2014.

**5. Current Staff Complement**

62 WTE

**6. Complement of Staff Necessary**

72 WTE

**Specific Improvements Measures**

Recruitment of 10 new staff nurses in 2014

**National Critical Care Programme**

As part of the implementation of the **National Critical Care Programme**, Critical Care will be getting an additional 3.5 WTES as part of the retrieval service and an additional 1.5 WTEs for Audit.

**Bill Maher, CEO, West North West Hospital Group**

*(ICU – Intensive Care Unit, HDU – High Dependency Unit, CTICU – Cardio Thoracic Intensive Care Unit)*

|                 |  |                       |
|-----------------|--|-----------------------|
| <b>W50Q1362</b> | <b>Please confirm the position in relation to the complement of social workers required in Galway City and County for the age group 18 years and upwards (separately from services required for the elderly) the number actually working and where they are based, what steps are in train to deal with any vacancies and the nature and numbers on a waiting list for these services.</b> | <b>Clr C Connolly</b> |
|-----------------|--|-----------------------|

The HSE service in Galway City and County has 16 Social workers. These figures include Social Workers in Adult Mental Health Services, Primary Care Services, Disability (Brothers of Charity) and Older People Services. The breakdown is as follows:-

**Mental Health**

- GR1 (Knocknarra to Connemara) - 2 WTE
- GR2 (Galway City) - 1 WTE
- GR3 (Oranmore/Headford/Gort) - 2.5 WTE
- GR4 (Tuam/Loughrea) - 2 WTE
- GR5 (Ballinasloe/Portumna) – 1.5 WTE
- Psychiatry of Later Life - 2 WTE
- There are 3 WTE assigned as Team Leader across the areas and in Rehabilitation Social Work.
- There are 2.5 WTE vacancies, 1 of which is a new Development Post in Intellectual Disabilities approved for filling.
- The remaining vacancies are being managed through the provision of cross cover.

Patients who are assessed as urgent are seen immediately. There are waiting lists for non urgent patients in Mental Health services as follows:

Tuam/Loughrea = 5: Ballinasloe/Portumna=15: Psychiatry of Later Life = 10.

All of these patients are seen within 4-6 weeks.

#### **Primary Care**

In Primary Care there are 2 Social Worker posts and 1.81 WTE. These are assigned to Galway City East and Galway City West respectively. The waiting lists are 7 in Galway City East and 12 in Galway City West. Patients who are assessed as urgent are seen immediately. All patients are seen in less than 12 weeks.

#### **Disability**

The Brothers of Charity Service, which is fully funded by the HSE has 7 Social Worker posts for adults with Disabilities in place. The service is provided to adults throughout Galway city and county. There are no vacancies and no waiting list with client protection issues and emergencies being prioritised for intervention.

#### **Older People**

Social Workers for Older People include 1 Specialist for Elder Abuse and 2 Generic Social Workers who cover Galway City & County.

***Catherine Cunningham, Area Manager, Galway Roscommon PCCC***

|                 |  |                        |
|-----------------|--|------------------------|
| <b>W50Q1363</b> | <b>Please confirm the private hospitals in Galway, Ireland and outside the county to which patients have been referred to from both the out-patient and in-patients lists in Galway City over the last three years giving the number of patients referred, the costs of same, the source of the monies and the numbers currently on the various outpatient and inpatients lists in Galway giving each list separately.</b> | <b>Cllr C Connolly</b> |
|-----------------|--|------------------------|

With respect to 2013 the figures are:

#### **2013 Outpatients**

- There were 7,268 patients from GUH, Portiuncula and Roscommon hospitals referred to the private sector for an outpatient appointment
  
- Referral Hospitals were
  - Mater Private
  - Galway Clinic
  - Bon Secours
  - St Josephs, Garden Hill, Sligo
  - St Francis Hospital Mullingar
  - Barringtons Hospital Limerick

Anticipated Cost: €1,277,190 Million *(to be verified)*

#### **2013 Inpatients:**

Numbers – 750 patients

Referral Hospitals were:

- Galway Clinic
- Bon Secours
- St Francis Hospital Mullingar
- Barringtons Hospital Limerick

Anticipated Cost: €1,538,419 million *(to be verified)*

We do not have figures for 2012 as these referrals were made directly by the Special Delivery Unit.. No patients were referred out in 2011.

***Bill Maher, CEO, West North West Hospital Group***

|          |  |                 |
|----------|--|-----------------|
| W50Q1364 | Please confirm the current position re rented/leased property by the HSE West in Galway City setting out the property rented/leased, the nature and length of the leases in question, the cost of same and including the up to date position re the property which was rented by the HSE West on the Seamus Quirke Rd including whether the HSE West have now vacated the premises, where the services have been relocated to and the cost of the penalty if any incurred. | Cllr C Connolly |
|----------|--|-----------------|

| LIST OF DEPARTMENTS THAT WERE LOCATED IN WEST CITY CENTRE | NEW LOCATION                                   |
|---|--|
| Health Promotion  | Merlin Park Campus                             |
| Adoption Services   | Merlin Park Campus                             |
| Nursing Homes   | La Nua, Ballybane                              |
| Pysiotherapy / Occupational Therapy                       | Premises at Lyradon, Salthill                  |
| ICT   | Merlin Park Campus                             |
| Early Intervention Team                                   | St. Brendans, Loughrea                         |
| Community Dieticians                                      | St. Francis Home                               |
| Knocknacarra PCT  | St. Francis Home                               |
| Home Management   | 25 Newcastle Road                              |
| Children & Family Services                                | 25 Newcastle Road                              |
| Social Workers  | La Nua, Ballybane                              |
| EHO   | IDA Business Park Dangan                       |
| Community Welfare Officers                                | As agreed with OPW in conjunction with the DSP |
| Elder Abuse   | 64 Domnick Street                              |
| Suicide Prevention  | 65 Domnick Street                              |

The HSE have vacated the West City Centre building which was leased.

The financial penalty incurred is equal to one year's rent @ €675,763.79

This penalty of one year's rent, was for the avoidance of 5 years rent (until next break clause) i.e. net saving is 4 years rent - €2,703,055.10.

| <b>LEASES IN GALWAY CITY - Jan 2014</b> |   |                                      |                             |               |
|---|---|--------------------------------------|-----------------------------|---------------|
|   | <b>Property</b>   | <b>Use</b>                           | <b>Term</b>                 | <b>Jan-14</b> |
|   | <b>Galway - PCCC</b>  |                                      | -                           |               |
| 1                                       | Unit 17, Briarhill, Business Pk                               | Stores & PHN accommodation           | October 2013 - October 2015 | 46,813.00     |
| 2                                       | 10 Ely Place Sea Road, Galway                                 | Audiology                            | 01 Feb 2004 - April 2028    | 31,700.00     |
| 3                                       | Ballybane Galway (La Nua) - SCCUL                             | Community and mental health service  | April 2005 - March 2040     | 205,000.00    |
| 4                                       | Ballard House   | CAMHT                                | 01-03-2012 until 31-04-2017 | 79,620.00     |
| 5                                       | 64 Dominic Street Galway                                      | Drug support services                | Feb 2002 - Jan 2006         | 21,770.00     |
| 6                                       | Ballybane Community Resource Centre Ballybane Family Services | Community, PHN, Family Support, etc. | 13 Jan 2005 - 12 Jan 2006   | 47,239.00     |
| 7                                       | Ballinfoyle NYP   | NYP                                  |                             | 495.00        |
| 8                                       | Lus Leana, headford road                                      | PHN Developmental Clinic             |                             | 2,340.00      |
|   | <b>Galway - Acute</b>   |                                      |                             |               |
| 9                                       | House   | Sexual Assault                       | 2 yrs June 2011             | 38,880.00     |
|   | <b>Corporate</b>  |                                      |                             |               |

|    |                  |                             |          |            |
|----|------------------|-----------------------------|----------|------------|
| 10 | Doughiska PCCC   | City East Primary Care Team | 25 years | 240,529.00 |
|    |                  |                             |          |            |
|    |                  |                             |          |            |
|    | <b>Sub-Total</b> |                             |          | 714,386.00 |

*Joe Molloy, Estates Manager, HSE West*

|                 |   |                         |
|-----------------|---|-------------------------|
| <b>W50Q1365</b> | <b>How many hours were lost each month to the ambulance service in Donegal because of delays in discharging patients at both Letterkenny and Sligo hospitals?</b> | <b>Clr B McGuinness</b> |
|-----------------|---|-------------------------|

The National Ambulance Service is not presently in a position to publish this data. The National Ambulance Service is currently developing a National Framework for capturing and validating ambulance turnaround times.

*Paudie O'Riordan, Regional Operations Manager, National Ambulance Service*

|                 |   |                       |
|-----------------|---|-----------------------|
| <b>W50Q1366</b> | <b>What are the total costs to date in relation to the death of Savita Halappanavar – Legal costs, Consultants, Expert witnesses, Public Relations – paid by the HSE and UHG?</b> | <b>Clr P Conneely</b> |
|-----------------|---|-----------------------|

This is a matter for the State Claims Agency.

*Bill Maher, CEO, West North West Hospital Group*

|                 |   |                       |
|-----------------|---|-----------------------|
| <b>W50Q1367</b> | <b>I am requesting the number of claims taken against UHG/Merlin Park for the period 1<sup>st</sup> January 2009 – to Date, what was paid out in compensation by UHG/Merlin Park (or Insurance Companies) or settlements including all costs in relation to same Legal Costs/Consultants/PR/Expert witnesses.</b> | <b>Clr P Conneely</b> |
|-----------------|---|-----------------------|

This is a matter for the State Claims Agency.

*Bill Maher, CEO, West North West Hospital Group*

|                 |   |                       |
|-----------------|---|-----------------------|
| <b>W50Q1368</b> | <b>How many employees were dismissed by UHG/Merlin Park for the period 1<sup>st</sup> January 2009 – to Date – and how many were re-instated on Appeal – and all costs/outlay legal etc associated with same.</b> | <b>Clr P Conneely</b> |
|-----------------|---|-----------------------|

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.

*Bill Maher, CEO, West North West Hospital Group*

|                 |   |                       |
|-----------------|---|-----------------------|
| <b>W50Q1369</b> | <b>Is the HSE (West) concerned that an employee (following a guilty plea in court to a serious offence) is now employed in the HSE (West)</b> | <b>Clr P Conneely</b> |
|-----------------|---|-----------------------|

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.

*Bill Maher, CEO, West North West Hospital Group*