

REGIONAL HEALTH FORUM WEST – 27th November 2012

QUESTIONS & RESPONSES

NUMBER	QUESTION	RAISED BY										
W42Q1018	Is it possible for the HSE to facilitate the anonymous sharing of medical data and other relevant information to enable the development of an accessible statistically relevant data commons.	Cllr Brian Meaney										
HSE Reply: This has been referred to the HSE's Health Intelligence Unit for consideration & response.												
W42Q1019	I request a response from the HSE Health Forum West on the allegations contained in the email sent to me and other Councillors concerning fluoridation of water. Copy of email has been sent to the Executive of the Health Forum West.	Cllr Brian Meaney										
HSE Reply: The issues raised have been brought to the attention of the Asst. National Director of Environmental Health and Emergency Management.												
W42Q1020	I request an explanation of the role and function of the recently announced Directorates in the Mid-West. What are the Terms of Reference and Job Description for these positions and what effect will their establishment be on the current clinical and administrative structures in the Mid-West.	Cllr Brian Meaney										
HSE Reply: There will be four clinical directorates across the single hospital system. <ol style="list-style-type: none"> 1. Medicine which incorporates, cardiology, emergency medicine, general medicine and oncology. 2. Peri-operative which incorporates surgery and anaesthesia. 3. Diagnostics which incorporates laboratory and radiology. 4. Child and Maternal Health which incorporates the maternity services and paediatrics. <p>A Clinical Director has been appointed for each directorate and it is anticipated this new structure will be implemented early 2013. A lead Clinical Director has also been appointed. The clinical directorate will also be supported by a directorate manager, a nurse manager, a business manager, a patient quality and safety manager and a representative from the professionals allied to medicine. From a clinical governance perspective all matters relating to medicine for example will be dealt with by the medical directorate. The existing clinical and administrative staff will be aligned to a directorate.</p> <p>Ann Doherty, CEO, MWRHG</p>												
W42Q1021	I request an update on the current financial position in the HSE West.	Cllr Brian Meaney										
HSE Reply: Please refer to separate briefing document which provides the response to this question.												
W42Q1022	Has the budget been agreed for the provision of direct grant support for treatment centres in the Limerick area that provide counselling for drug and alcohol clients and can you provide a list of these centres for their respective claims.	Cllr Joe Leddin										
HSE Reply: <ol style="list-style-type: none"> 1. 2012 budgets in relation to grant aid would have been finalised in Jan / Feb 2012 once our HSE budget for the year had been confirmed 2. Similarly, 2013 budgets for grant aid to treatment centres will not be finalised until early next year. 3. We currently grant aid the following services in relation to counselling: <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 35%;">Project</th> <th style="width: 20%;">Role</th> <th style="width: 20%;">HSE Mid-West D&A funding 2012:</th> <th style="width: 20%;">MWRDTF 2012 Funding</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>				Project	Role	HSE Mid-West D&A funding 2012:	MWRDTF 2012 Funding					
	Project	Role	HSE Mid-West D&A funding 2012:	MWRDTF 2012 Funding								

1	Ana Liffey Drugs Project Mid-West	in relation to targeting the homeless population for treatment	HSE Mid-West D&A funding 2012: €23,500.00 (3 rd & 4 th Quarter funding subject to review re: progress of project set up)	145,750.00	
2	Cuan Mhuire, Bruree	in relation to provision of residential treatment for drug/alcohol misuse	HSE Mid-West D&A funding 2012: €152,868.00	15,666.00	
3	Limerick Youth Service	in relation to a pilot project Sign-Posting for Youth which offers counselling for young people with in the context of youth work	HSE Mid-West D&A funding 2012: €50,000.00	Not in receipt of RDTF funding	
4	Saoirse Treatment Centre	pilot programme in relation provision of structured day programmes	HSE Mid-West D&A funding 2012: €30,000.00	Not in receipt of RDTF funding	
5	Residential Treatment Budget	For purchasing residential treatment on a case by case basis for clients from the Mid-West where finance is a block to accessing treat	HSE Mid-West D&A funding 2012: €119,356.00 In relation to 34 cases of treatment with clients accessing Aiseri, Bushypark, Fellowship House, Tabor Lodge & Talbot Grove	N/A	

4. Most NGO treatment services in the Mid-West are funded by a separate body – the Mid-West Regional Drugs Task Force – as a member of the RDTF I can state that the RDTF has carried out planning and projections in relation to its existing strategic plan and anticipated cuts in its funding and this will be finalised post-budget day

Bernard Gloster, Area Manager PCCC MW

W42Q1023	In view of the cost over run of €19 million for the Mid-West Regional Hospital in Limerick can a breakdown of this figure be provided in terms of either agency costs, outstanding private health insurance payments, etc.	Cllr Joe Leddin
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HSE Reply:

The financial outturn for the period January to September 2012 is:

	Budget 000	Actual 000	Variance 000
Total	103,016	122,126	-19,110

The category analysis of this is as follows:

Pay	86,525	91,402	-4,877
Non Pay	42,271	54,277	-12,006

Gross Expenditure	128,796	145,679	-16,883
Income	25,780	23,553	-2,227

Included in the pay variance is a total of (1,573m) relating to Agency Costs in the Medical, Nursing, Paramedical and Other Client categories.

Under the non-pay heading the variances include:

Clinical Cost (Drugs, Medical and Surgical Supplies, Blood, Pathology and Radiology) at **(6.525m)** **Cleaning** **(1.100m)**, **Overseas Cases (.356m)**, **Radiotherapy (.395m)** and **Dialysis (.424m)**.

The Patient Income raised for the period is accounted for in the net expenditure at the end of September.

The value of insured debt outstanding at the September is 19,448m of this 14.488m is outstanding for less than one year and 4,961m greater than one year.

Ann Doherty, CEO, MWRHG

W42Q1024	Is there any medical evidence which would suggest that in exceptional circumstances where for example an expectant mother is at risk of developing septicaemia that the life of the mother could be saved by an early termination?	Cllr Joe Leddin
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HSE Reply:

It would not be appropriate for the HSE to comment on this matter while investigations are underway.

W42Q1025	Will the HSE reconsider the opening times of the A&E departments in Nenagh and Ennis General Hospital to relieve the pressure on the A&E in the Mid-Western Hospital?	Cllr Joe Leddin
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HSE Reply:

The National Clinical Programme for emergency medicine has indicated that the emergency departments in Ennis and Nenagh will be local injury units dealing with a very specific list of conditions. The emergency department in the MWRH in Limerick provides an emergency service in the region for patients who are very unwell and may potentially need critical care. Increasing the opening hours in Ennis and Nenagh would not help the MWRH in Limerick as the range of back up services are not available in the model two hospitals e.g. trauma, surgery, ICU, HDU, CCU etc.

Ann Doherty, CEO, MWRHG

W42Q1026	What is the current situation in relation to the return of Mammography Services at Sligo Regional Hospital? Why has the promised use of the 'Breastcheck' services at Sligo Regional Hospital as a temporary solution for follow up mammographies not been implemented as outlined in HSE reply to my question of June 26th 2012?	Cllr Sean MacManus
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HSE Reply:

Regarding the service to Sligo patients, all patients are placed on the common waiting list at the Symptomatic Breast Unit in GUH where they are seen on the basis of clinical priority. No differentiation is made with respect to county boundaries. The current waiting time for routine mammography at the unit is 3-4 months, which reflects our current deficit in the number of mammographers.

The September results for GUH show 100% of Urgent Referrals were offered an appointment within 2 weeks and 99.6% of Non Urgent Referrals were offered an appointment within 12 weeks. The NCCP target for both is 95%.

The principle obstacle to the establishment of the follow up service is the availability of trained mammographers. We continue to work through the normal recruitment channels and through a number of agencies to try to recruit suitably trained mammographers. Galway University Hospitals has had to go outside the exclusive agency arrangement in pursuit of mammographers and has contacted 12 additional recruitment agencies looking for mammographers. To date these efforts have been unsuccessful.

Our plan in July was that we would send radiographers from Galway to be trained as mammographers. Two of our radiographers have commenced training in Dublin; the training programme runs over 16 months. It is our intention to send more radiographers next year and so on in order to ensure availability of this skill set into the future.

GUH requested permission to rehire two staff members who retired from mammography, but the staff concerned declined. Additionally we checked the possibility of radiographic staff in local private hospitals doing hours here, but to no avail.

We had hoped that it would be possible to commence some of the follow up mammography in Sligo with the assistance of Breast Check. This arrangement would have been outside of their remit and would have been done on a co-operative basis. Unfortunately, we could not deliver on this proposed arrangement because of staffing difficulties in Breast Check itself.

Bill Maher, CEO, GRUHG

W42Q1027	Can you confirm to me if it is possible for a seriously ill patient to have an MRI Scan over the weekend in a Galway Hospital?	Cllr Mary Hoade
<p>HSE Reply: There is no on call service for MRI in GUH at weekends; there is an on call service for Cat Scan. Bill Maher, CEO, GRUHG</p>		
W42Q1028	Can you confirm to me that all theatres in GUH and Merlin Park are currently in operation, and what wards are currently closed? Is there any plans for any further closures before the end of the year?	Cllr Mary Hoade
<p>HSE Reply: All theatres in GUH are currently in operation. There are no planned closures before the end of year. Bill Maher, CEO, GRUHG</p>		
W42Q1029	What is the up to date position regarding the replacement of Insulin Pumps in Galway to Diabetic Patients?	Cllr Mary Hoade
<p>HSE Reply: Galway Roscommon University Hospital Group provides a limited number of insulin pumps to patients being treated in the Diabetic Department in University Hospital Galway. (Bill Maher)</p> <p>Galway PCCC provides funding to UCHG for the provision of a limited number of insulin pumps. It is a matter for the hospital, on the basis of clinical assessment, to determine priorities based on need. In relation to pump replacements, these are managed within the agreed funding levels. (C Cunningham)</p>		
W42Q1030	Can you confirm if any work has taken place in relation to the large number of outpatients on the waiting list. What proposals are in place to deal with this?	Cllr Mary Hoade
<p>HSE Reply: Galway University Hospitals has been working since May of this year on an initiative to reduce the number of long waiters on our outpatient waiting list. The outpatient waiting list is 41,122 patients at present, with half of these waiting longer than a year. On average GUH treats over 4,000 outpatients each week; every week patients are seen and taken off the list and new referrals are added. The Special Delivery Unit has identified key action points as part of a national outpatient performance improvement programme and we are working closely with the SDU to reduce the length of time that patients wait for an appointment. The key action points are:</p> <ul style="list-style-type: none"> • Validation of long waiters • Central registration/referral management • Management of referrals at the point of receipt • Governance of outpatient services • Consultant triage that is complete within 5 days 		

- 6 week notification for clinic cancellations

We have already validated all patients waiting between 2006 and 2008. We will be undertaking a validation exercise for 25,000 patients on the waiting list between now and the end of the year. This will involve sending letters and telephoning patients.

Bill Maher, CEO, GRUHG

W42Q1031	Can the HSE Executive please inform the members of the Forum of how much the HSE is paying to landlords for the rental of buildings in County Roscommon?	Clr Tony Ward
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HSE Reply:

LEASES TO HSE WEST - ROSCOMMON PCCC

	<u>Property</u>	<u>Use</u>	<u>Amount P.A</u>
1	Abbey Street , Roscommon	Childcare services	55,900.00
2	Lanesboro Rd, Roscommon	Service Delivery & PCCC HQ	370,000.00
3	Abbey Street Roscommon	E.H.O offices	67,167.00
4	Shannon Cove Ballyleague	Mental health & cwo services	10,400.00
5	Warehouse at Clooneybeirne, Roscommon	PCCC Stores	30,249.00
6	Riverside House, Front Unit, Main Street, Castlerea, Co. Roscommon	Intermediate Care Team & Mental Health Services	59,124.00
7	Knockroe, Castlerea, Co. Roscommon	Childcare services	25,000.00
8	Monksland Civic Centre, Monksland, Co. Roscommon, Unit 1	Family Support Services	16,000.00
9	Monksland	Health Centre	1.00
10	Castle Court House, (Stone Court), Roscommon	C & AMHS Galway PCCC	46,296.00
11	Ballaghadereen Primary Care Centre	PCC	18,000.00
12	Roscommon Primary Care Centre	Primary Care	328,098.00
13	Roscommon Primary Care Centre	Mental Health	123,948.00

SUB-TOTAL

1,150,183.00

Joe Molloy, Estates, HSE West

W42Q1032	Can the HSE Executive please inform the members of the Forum what is the waiting time for occupational therapy for children in the South Roscommon area and the rest of County Roscommon?	Clr Tony Ward
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HSE Reply:

The waiting times for Occupational Therapy for children in Co. Roscommon as at 31st Oct 2012 are as follows

1-16 weeks 37 children
 17-32 weeks 33 children
 33-52 weeks 28 children
 52+ weeks 35 children

By region

Southern Network –

1-16 weeks 15 children
 17-32 weeks 10 children
 33-52 weeks 9 children
 52+ weeks 11 children

Northern Network –

1-16 weeks 22 children
 17-32 weeks 23 children
 33-52 weeks 19 children

52+ weeks 24 children		
<p>The OT service in Roscommon continues to be managed in a very proactive way, in the context of constraints posed by the moratorium on public sector recruitment. Over the past 3 years changes in the way the service is delivered have resulted in waiting times reducing from 3 years to under 18 months. Our objective is to further reduce waiting times to 12 months and we hope to achieve this target by May 2013.</p> <p>Catherine Cunningham, Area Manager, Galway Roscommon PCCC</p>		
W42Q1033	Can the HSE Executive inform the members of the Forum due to the over spend of approximately four hundred million euro by the end of the year, what services will be affected by the cuts in the HSE West area?	Cllr Tony Ward
<p>HSE Reply: The additional measures being implemented from September to address slippage in the cost containment plans have been specifically targeted at the non service impacting areas of Agency, Overtime, Stock reductions and other non pay costs such as furniture and crockery, education and training, office expenses, computer, travel and taxis etc. In addition Home Help and Home Care packages are being brought back to Service Plan levels. Please also see September financial briefing at agenda item 6. Liam Minihan, Asst National Director, Finance</p> <p>The cost containment measures implemented by Galway Roscommon University Hospital Group are targeted such that the impact on front line services is minimised. Our focus is on reducing Overtime, Agency and On call payments, increasing the return of Private Insurance monies and eliminating discretionary spend. Bill Maher, CEO, GRUHG</p>		
W42Q1034	When will the Rheumatoid Arthritis treatment service be reinstated at Letterkenny General Hospital, thus alleviating Donegal patients travelling to Manorhamilton for this service?	Cllr Liam Blaney
<p>HSE Reply: The HSE has significantly developed rheumatology services in the North West over the past two years. This has involved the appointment of two permanent rheumatologists in mid 2010 who are responsible for the delivery of the service in the North West.</p> <p>It is intended to re-establish an outpatient clinic at Letterkenny General Hospital following the opening of the new Emergency Department and medical block and the return of one of the consultants from leave. John Hayes, Area Manager, Donegal</p>		
W42Q1035	To call on HSE West to confirm an opening date for the second 25 bed unit of the new development at Ennis General Hospital.	Cllr Tom McNamara
<p>HSE Reply: It is planned that the first floor of the new fifty bed unit will open on November 29th/30th Ann Doherty, CEO, MWRHG</p>		
W42Q1036	To call on HSE West to confirm the number of Home Help hours and home care packages that have been reduced in County Clare in 2011 and 2012 and what alternative plans have HSE West in place to provide an adequate service for this very vulnerable group of people.	Cllr Tom McNamara
<p>HSE Reply: In County Clare, 178,319 hours were delivered in 2011. The Service Plan target 2012 was 169,122. Taking the level of service provided at August 2012, it would have been likely that County Clare would have provided 165,000 hours by the end of the year. As part of the reductions to home help services for the last three months of the year, aimed at generating immediate savings, the Mid West Area received a target reduction for Clare of 6,167 hours. While it is unlikely that all of this target will be met by year end, it remains part of the overall planned reductions due to the national deficit on HSE finances. To date, as part of these reductions in Clare, 414 hours have been reduced and when calculated forward to year end this has a value of 3,362 hours which is 55% of target. The total number of people who have had hours reduced in Clare as part of this recent process is 133 people.</p>		

In relation to home care packages, County Clare provided these to 131 people in 2011 and the target for 2012 is slightly less at 128. At August 2012, County Clare had already provided packages to 144 people, that being in excess of target. It is often the case that a service may be below target in either home help hours or home care packages and above in the other and when both are considered together a more comprehensive picture emerges. There are no additional targeted reductions home care packages at this point in time given the combination of these two variables in County Clare.

Bernard Gloster, Area Manager MW PCCC

W42Q1037

When is it planned to commence colorectal screening under the National Colorectal Screening Programme and when is it hoped to have the new Endoscopy unit at the Mid West Regional Hospital Ennis accredited.

Cllr Tom McNamara

HSE Reply:

The commencement of colorectal screening will be decided by the National Cancer Control Programme. It is anticipated that the accreditation process should be complete in the first quarter of 2013.

Ann Doherty, CEO, MWRHG

W42Q1038

That this Health Forum receive full clarification on the kidney dialysis service in Merlin Park and the Regional Hospital including the number of beds, wards and staff allocated to this service in each of the Hospitals, the operating times, the number of beds empty at any given time and full clarification on the use of private companies by the HSE West in Galway in providing this service to public patients and in particular but not exclusively the Wellstone Clinic and including the number of patients referred to this company annually since this clinic was established in 2005, the number currently attending and the breakdown of the cost of same to the HSE West including full details on the nature of the contract if any entered into by the HSE West.

Cllr Catherine Connolly

HSE Reply:

The Galway and Roscommon University Hospital Group provides Renal services for Adult patients with End Stage Kidney Disease (ESKD). The demand for Haemodialysis (HD) has increased and we are working with the National Renal Office to anticipate and accommodate the growth in demand and also in planning and managing the strategic development of the renal service.

A comprehensive range of services are provided:

- Home therapies;
- Hospital/Clinic-based haemodialysis;
- Transplantation is the best therapy for suitable patients and we provide follow up treatment following discharge from Beaumont Hospital.

A number of initiatives are taking place in Dialysis. An Acute Unit opened in University Hospital Galway on 05 November which was seen as a clinical necessity for acutely unwell patients who are now able to have their dialysis on site and will not need to be transported to the Dialysis Unit in Merlin Park for treatment as had been the case previously. Coinciding with the opening of the Acute Unit, night time dialysis treatment in Unit 7 was discontinued. All dialysis is now provided during daytime hours. One of the priorities for the National Renal Office is to close night time dialysis and the change of opening hours at Unit 7 is in line with the national strategy.

Mayo General Hospital (MGH) dialysis is currently in a temporary location while work is taking place to commission additional dialysis stations. This work is scheduled to be completed by June 2013 and the increased capacity at MGH will meet the needs of County Mayo patients who will no longer need to use the GUH service. GUH also looks forward to bringing new developments in the near future such as home haemodialysis.

Patients can receive Haemodialysis treatment in one of the following 4 locations under the care of our 4 Nephrology consultants.

1. Unit 7 Merlin Park University Hospital.

Number of Haemodialysis stations 22 (20 plus 2 Isolation); 16 in use.
 Staff: Nursing – 22
 Opening times: 7.30am 20.30pm (Sun to Fri)
 Number of patients 63 patients.

2. Acute Unit, St. Teresa’s ward UHG.

Number of Haemodialysis stations 3 (2 plus 1 Isolation)
 Staff: Staff rotate from Unit 7
 Opening times: 7.30am - 22.00pm (7 Days)

3. HSE Satellite Unit, Mayo General Hospital

Number of Haemodialysis stations 11 (10 currently in use in a temporary location); will increase to 15 in June 2013
 Staffing: 2 CNM and 15.27 WTE staff nurses.
 Opening times: 7.30am -19.30pm Tues/Thurs/Sat
 7.30am - 12midnight Mon/Wed/Fri
 Number of patients: 48

4. Contracted Satellite HD Unit, Galway.

Number of Haemodialysis stations 16 Stations
 Opening Times: 7.30am - 19.00pm (Mon – Sat)
 Number of Patients 43 at the moment. Patient Numbers fluctuate.
 Cost to date: €5,765,342

There is a Service Level Agreement in place. This unit supports the service in Galway and patients from other counties also receive treatment as required e.g. Sligo. Offaly, Clare etc.

Bill Maher, CEO, GRUHG

W42Q1039	Please clarify the current position in relation to the provision of child development clinics in Galway including the number of children currently waiting for their first child development clinic together with a breakdown of their ages and further the waiting list in relation to subsequent child development clinics and the current position re nursing and medical vacancies in relation to this service in Galway City and County and what positions if any have been filled following the retirement of 12 nurses in 2012 on top of previous nursing and area medical officer vacancies.	CLlr Catherine Connolly
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HSE Reply:

The current position in relation to Child Health Development Clinics is set out below.

- Total Number of Pre-school children: 19,747
- The number of children awaiting a 7-9 month Development Clinic is 705 at present as compared with 959 in the first quarter of the year and 770 in the second quarter.
- The number awaiting a development check over 10 months is 1,094 as compared with 1,401 at the end of Quarter 1 and 1,207 at the end of Quarter 2.
- The number awaiting a review clinic appointment is 265
- The number of children awaiting a check at 3 months is 139
- The number awaiting an 18-24 month development check is 660 as compared with 761 in Quarter 1

These improvements have been achieved through changes in work practices, re-prioritisation of workloads and the filling of a number of nursing posts. In particular, the children in the 7-9 month age cohort have been prioritised for child health development screening and the percentage covered has risen from a low of 11% to 61% .

Regarding Public Health Nursing vacancies, there were 12 retirements during the year. The service was augmented by 6 Student Public Health Nurses, 2 RGNs and a PHN. All staff continue to provide cross cover throughout the county in order to minimise the impact on front-line services.

Regarding Medical vacancies, there are 3.5 wholtime equivalent Medical Officer posts vacant as a result of retirements or resignations. These posts are subject to the provisions of the recruitment moratorium and

consequently, are unfilled, however, additional hours have been approved to prioritise child development screening.

Catherine Cunningham, Area Manager, Galway Roscommon PCCC

W42Q1040

Please clarify the current position in relation to the provision of dental services to children both national and secondary school children in Galway City and County specifying what services are now available and/or not available to these children both within the school system and separately if a child has a dental problem and please clarify whether under current policy, parents and children are being informed that only extraction of teeth will be considered and not the provision of fillings

Clr Catherine Connolly

HSE Reply:

Galway Dental Service is currently being reorganised to ensure that resource use is optimised in the context of the challenges posed by the moratorium on public service recruitment. In order to provide a fair and equitable service across the county, it has been decided that all primary schools will have routine access to dental assessment and treatment at 6th class level. The school dentist will also assess the children in this class for orthodontic requirements.

Children with particular dental requirements and problems will also continue to be subject to regular review. As is the case in other areas, it is not routine practice to fill baby teeth.

Children under 16 can continue to access emergency care from the HSE. This service is intended for patients who suffer pain, sepsis or trauma to the teeth and this is usually a same day service.

Children over sixteen years with a medical card can access care through the Dental Treatment Services Scheme (DTSS).

These children may access dental services from the dentist of their choice via this scheme provided the dentist is a DTSS contractor.

Onward referral to Oromaxillofacial surgery is part of the HSE and DTSS service.

The department also provides a general anesthetic theatre service in UHG for :

- Extraction only service
- Special needs filling service.

The extraction only service undertakes approx. 120 appointments each year with the special needs filling service providing approx. 40 appointments each year.

Catherine Cunningham, Area Manager, Galway Roscommon PCCC

W42Q1041

Please give full details in relation to the current number of buildings rented/leased by the HSE West in Galway City and County specifying each building, the nature of the lease and the time span and the cost per annum as well as clarifying what progress if any has been made in relation to the leasing of the building on the Seamus Quirke Rd as well as the offices used by the finance department directly opposite the Regional Hospital.

Clr Catherine Connolly

HSE Reply:

In relation to the lease on the building on Seamus Quirke road – details are as per No. 7 on the attached table, see appendix 1. A break has been exercised in relation to the lease and the HSE are on schedule to terminate the lease in November 2013. A number of departments have already vacated the premises and a plan is in place for the relocation of the remaining departments.

In relation to the lease at 21 University Road– details are as per No. 73 on attached table. This lease is being terminated with effect from January 2013.

The HSE West is currently reviewing Mental Health houses with a view to providing further reductions to our rental costs in 2013.

Joe Molloy, Estates, HSE West

All staff previously accommodated in a leased building opposite UHG are now back on the grounds of the hospital and are accommodated in the Nurses Home. The lease agreement with regard to the building is due to terminate in the next couple of months.

Bill Maher, CEO, GRUHG

W42Q1042

To ask the Executive what are their plans if any with regard to the provision of a new Mental Health facility, in Mohill to replace the Centre that was located at Ashbrook House, which closed in August because the infrastructure was not suitable for purpose.

Cllr Sean McGowan

HSE Reply:

The facility of Ashbrook House is not required to meet the needs of a modern Mental Health Service and does not fit with the recommendations of Vision for Change.

Sligo/Leitrim Mental Health Services in accordance with the Leitrim Accommodation Strategy are planning to acquire a new Community Mental Health Team base including acute day hospital and day service located with primary care in Carrick on Shannon which will provide for the ongoing assessment and treatment of people with mental health problems in South Leitrim.

Sligo/Leitrim Mental Health Services are extending the Outreach Rehabilitation Team in Co Leitrim which will support people with long term and enduring mental health problems in their homes. We retain Hyde Terrace, Community Group Home in Mohill as part of our service.

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

W42Q1043

To again ask the Executive, when is it expected that work will commence on the Community Nursing unit and GP centre in Ballinamore.

Cllr Sean McGowan

HSE Reply:

The services to be provided are Long Term Care Community Nursing Unit and also a Primary Care Centre with visiting Allied Health Professionals, such as Public Health Nursing, Physiotherapy Services, Occupational Therapy Services, Dietetics, Speech and Language Therapy and Multidisciplinary bookable rooms for other visiting Health Professionals.

The expected time frame for commencement of building works is 4th February 2013. Negotiations with the builder have now commenced to put the contract in place. The project will take an estimated 12 months construction and 2 months commissioning.

I can confirm that the tender for the operation of the CNU has commenced and the procurement team are in place. We are currently finalising a specification for tender. This will run in parallel with the construction.

The allocation on the 2012 Capital plan is 300,000 and 72,000 has been spent to date. The 2013 Draft Capital Plan has an allowance of €3.5 million.

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

W42Q1044

At the November meeting of the Regional Health Forum West I will ask the Executive, has any progress been made with regard to restoring the G.P service one day a week in the Primary Care Centre in Dromod.
There is anger and concern within local community that there is no GP service at the centre and they are calling for it to be restored as quickly as possible
Also at a time when Diabetes and obesity are on the increase in the Country that the Diabetic nurse would hold a clinic at the centre once a month?

Cllr Sean McGowan

HSE Reply:

A GP service was operated in Dromod Primary Care Centre for a number of months in 2009 by the Mohill General Practice. The Service was withdrawn because the numbers attending were too low to justify the continuance of

the service. It is not the intention of the Mohill Practice to resume the service. Efforts were made in the past without success to ascertain whether other GPs practising in the general area would be interested in running a clinic in Dromod. Renewed efforts will be made again in Q1 2013 to ascertain whether there is any such interest but we have no indication any GPs are interested in offering the service. The Diabetic Nurses do not operate stand-alone clinics but operate in GP surgeries in liaison with and as a support to GPs and their practice nurses.

D McCallion, Area Manager, Sligo/Leitrim/W Cavan

W42Q1045	At the November meeting of the Regional Health Forum West I will ask the Executive to provide a detailed cost for each County in the region of what is paid in Taxi Fares in 2011 for transporting patients, for hospital appointments, Consultant appointments, Dialysis, etc. Also to provide a detailed cost for each County what is paid in Taxi Fares in 2011 for transporting staff ?	Cllr Sean McGowan
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HSE Reply:

Set out below is an analysis by county of the 2011 expenditure on taxis for patients and staff as requested:

Taxi Spend Summary		
	Patients €	Staff €
Donegal	60,736	6,960
Sligo Leitrim	96,925	7,727
Dialysis	339,564	
Non-county specific		2,052
Total Spend in 2011	497,225	16,739

Mayo	141,108	10,557
Galway	2,273,936	41,092
Roscommon	140,287	330
Non-county specific	9,622	4,195
Total Spend in 2011*	2,564,953	56,174

Clare	45,429	8,732
Limerick **	160,482	137,730
North Tipperary	10,675	368
Dialysis	1,006,023	
Non-county specific		4,195
Total spend in 2011	1,222,609	151,025

Overall regional spend in 2011 HSE West	4,284,787	223,938
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* dialysis expenditure is charged by county here

** This relates mainly to staff moving between regional maternity and the regional hospital

Liam Minihan, Asst. National Director, Finance

W42Q1046	There appears to be a significant number of HSE staff, especially in the nursing profession Nationally who wish to transfer to other locations within country Some HSE regions have a transfer policy with a dedicated team to process transfers while other do not . Minister James Reilly T D on the 11/11/12 stated in a response to a Question in the Dail that the HSE is in the process of formulating a National Transfer Policy for all grades of staff. In view of the Ministers stated policy and the clear need for such	Cllr Laurence Fallon
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	a policy when does the HSE West propose to establish a unit to facilitate the transfer of staff both within this region And between Regions?																	
<p>HSE Reply: There is currently no formal National Transfer Policy for Nurses within the HSE. A swap arrangement involving nurses of the same grade continues to be facilitated on an ad hoc basis. The facilitation of this arrangement requires the identification of two nurses who are willing to swap to the others location and have the approval of their respective line managers. A National Transfer Policy is being drafted for consultation with the Trade Unions with a focus on what will be a workable arrangement during the period of the Recruitment Moratorium. Within HSE West in conjunction with the Central Transfer Processing Unit in Manorhamilton and Central Recruitment in Merlin Park Galway, where transfers can be made as outlined above staff are being facilitated with their request. Every effort is being made to facilitate staff with transfers, in particular personal and family circumstances. Francis Rogers, Asst National Director, Human Resources</p>																		
W42Q1047	How many medical terminations were carried out at UHG from 1st January 2012 to 30th October 2012 and what protocols are in place to reassure expectant mothers who present in UHG?	Cllr Padraig Conneely																
<p>HSE Reply: It is not appropriate to comment on this matter while investigations are underway.</p>																		
W42Q1048	What is the current validated outpatients waiting list for UHG/Merlin Park and the length of time waiting across all departments?	Cllr Padraig Conneely																
<p>HSE Reply: The current outpatient waiting list in GUH has 41,122 patients. At present the longest person waiting was listed on 11/1/2007</p> <table border="1"> <thead> <tr> <th>Year</th> <th>2007</th> <th>2008</th> <th>2009</th> <th>2010</th> <th>2011</th> <th>2012</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Patients Waiting</td> <td>27</td> <td>765</td> <td>3186</td> <td>7519</td> <td>11014</td> <td>18611</td> <td>41122</td> </tr> </tbody> </table> <p>Bill Maher, CEO, GRUHG</p>			Year	2007	2008	2009	2010	2011	2012	Total	Patients Waiting	27	765	3186	7519	11014	18611	41122
Year	2007	2008	2009	2010	2011	2012	Total											
Patients Waiting	27	765	3186	7519	11014	18611	41122											
W42Q1049	What is the outstanding amount from Private Health Insurance Companies to UHG/Merlin Park and the period of same and the total for the West Region and what amount of the €125 million was allocated to UHG/Merlin Park and West Region?	Cllr Padraig Conneely																
<p>HSE Reply: GUH only '000 < 1 year: €10260 > 1 year: €4853 Total: €15103 There has been no allocation of the €125m that we are currently aware of. Bill Maher, CEO, GRUHG</p>																		
W42Q1050	Will the HSE confirm that a manager/supervisor employed at UHG is currently suspended on allege misuse of public funds and what is the current status of the investigation?	Cllr Padraig Conneely																
<p>HSE Reply: This question has not been responded to as it does not fall within the Forum's jurisdiction under Standing Orders.</p>																		
LATE QUESTIONS																		
W42Q1051	If Children First, National Guidelines/Guidance for the Protection and Welfare of Children has been 100% implemented across the	Cllr John Rocky McGrath																

	HSE West Region and if so on what date was Children First 100% implemented?	
HSE Reply: Response not available at time of printing.		
W42Q1052	If not 100% implemented across the HSE West Region, to what percentage extent has Children First been implemented and to clarify the reason why Children First has not been fully implemented across the HSE West Region in the last 13 years.	Clr John Rocky McGrath
HSE Reply: Response not available at time of printing.		
W42Q1053	If the HSE Children and Family Services “Staff Guidelines for Obtaining Consent for Non Emergency Treatment/Services from Parents of Children and Young People Under the Age of 18 years” has been 100% implemented across the HSE West Region and if so on what date was “Staff Guidelines for Obtaining Consent for Non Emergency Treatment/Services from Parents of Children and Young People Under the Age of 18 years” 100% implemented	Clr John Rocky McGrath
HSE Reply: Response not available at time of printing.		
W42Q1054	If not 100% implemented across the HSE West Region, to what percentage extent has “Staff Guidelines for Obtaining Consent for Non Emergency Treatment/Services from Parents of Children and Young People Under the Age of 18 years” been implemented and to clarify the reason why “Staff Guidelines for Obtaining Consent for Non Emergency Treatment/Services from Parents of Children and Young People Under the Age of 18 years” has not been fully implemented across the HSE West Region since July 2009.	Clr John Rocky McGrath
HSE Reply: Response not available at time of printing.		
W42Q1055	Can sufficient funding be allocated in 2013 HSE Budget Plan for the reopening of 22 beds in the Community Hospital of the Assumption in Thurles as these beds are critical to the people of the North Tipperary area?	Clr John Kennedy
HSE Reply: Bernard Gloster, Area Manager, Mid West Primary, Community & Continuing Care Services has recently discussed this issue with the Cllr. in the context of Special Delivery Unit funding made available in 2012 to support the respite needs for the people of North Tipperary. This support is currently being progressed through the Hospital of the Assumption to a number of people on the respite list and at the time of replying to this question the Cllr. is advised that 115 weeks of respite provision in private nursing homes has been provided to the people of North Tipperary since the SDU funding was allocate in early October 2012. It is planned that this will continue to the end of the year with further offers of services being made to people, known to or referred to the services. The Cllr. is further advised that the HSE undertaking to increase the bed provision from 45 to 50 at the Hosptial of the Assumption, Thurles, has been fulfilled earlier in the summer of 2012 and this was achieved through a number of efficiencies in conjunction with the other two Older Person’s Residential services in North Tipperary, (St. Conlon’s, Nenagh and Dean Maxwell, Roscrea). The Area Manager for the Mid West has agreed to ensure that the Cllr. is updated in the context of any future change to this position. Bernard Gloster, Area Manager PCCC MW		
W42Q1056	What progress has been made on the Primary Care Centre for	Clr John Kennedy

	Thurles?	
<p>HSE Reply: A Primary Care Centre for Thurles was indicated on a recent National list of potential centres to be provided under a Public Private Partnership model (PPP). The progressing of these centres is carried out in the early phase by the HSE then handed over to the National Finance and Development agencies under the auspices of the Department of Finance to be progressed as a PPP. At the present time 3 centres are potentially indicated at the Mid West, one being Thurles in North Tipperary. The HSE continues to engage with the General Practitioner community in Thurles as General Practitioner support and commitment is a key factor in advancing any potential project. While continuing to work closely and positively with the General Practitioners in the Thurles area, the HSE cannot at this point in time be satisfied that there is adequate support for the development of the PPP model, however this will be continued to be pursued as will other models and options which are potentially open to the HSE to develop a Primary Care Facility in Thurles.</p> <p>Bernard Gloster, Area Manager PCCC MW</p>		
W42Q1057	Has funding been allocated to the HSE from the Department of Finance to progress this Centre as it was in the Primary Care Centre plan announced recently?	Clr John Kennedy
<p>HSE Reply: The answer to this question relates directly to the answer to the foregoing W42Q1056. Funding is not allocated to any centre on the list at this point in time and is only allocated with the proposed centre reaches a particular point in progress under the PPP model. It is important to stress that the question of funding does not arise at this point in time in respect of this particular proposed project.</p> <p>Bernard Gloster, Area Manager PCCC MW</p>		