

**Minutes of Regional Health Forum West Meeting held on
Tuesday, 23rd May 2023 at 2.00pm in Room 1, Education Centre,
Merlin Park, Galway.**

Miontuairiscí chruinniú an Fhóraitm Sláinte Réigiúnaigh a tionóladh Dé Máirt, 23ú Bealtaine 2023 ag
2.00 i.n, i Seomra 1 an tIonad Oideachais,
Feidhmeannacht na Seirbhíse Sláinte, Ospidéal Páirc Mheirlinne, Gaillimh

Chairperson: Cllr Gerry McMonagle

Members Present	Members Present (continued)	Members Apologies
Cllr Finola Armstrong McGuire	Cllr Mary Howard	Cllr Seamus Morris
Cllr Declan Bree	Cllr Michael Kilcoyne	
Cllr Ciaran Brogan	Cllr Donagh Killilea	Members Absent
Cllr John Carroll	Cllr Dara Mulvey	Cllr Bill Chambers
Cllr Liam Carroll	Cllr Cillian Murphy	Cllr Tom Crosby
Cllr Tom Conaghan	Cllr Declan McDonnell	Cllr Frankie Daly
Cllr John Connolly	Cllr Martin McLoughlin	Cllr Francis Foley
Cllr Gerry Crawford	Cllr Dan McSweeney	Cllr Liam Grant
Cllr John Cummins	Cllr Martina O'Connor	Cllr Peter Roche
Cllr Albert Doherty	Cllr Daithí Ó Cualáin	Cllr Kevin Sheahan
Cllr John Egan	Cllr John O'Hara	
Cllr Paddy Farrell	Cllr Dr Evelyn Francis Parsons	
Cllr Blackie Gavin	Cllr Peggy Ryan	
Cllr Donal Gilroy	Cllr John Sheahan	
Cllr Felim Gurn	Cllr Tony Ward	
Cllr Seán Hartigan		

In attendance:

Tony Canavan, Executive Lead, Regional Health Forum/CEO, Saolta University Health Care Group
Ann Cosgrove, COO, Saolta University Health Care Group
John Joe McGowan, General Manager, NAS
Noreen Spillane, COO, UL Hospitals Group
Breda Crehan Roche, CO, Community Healthcare West
Des Mulligan, Head of Service, Older People Services, Community Healthcare West
Dermot Monaghan, Chief Officer, Community Healthcare Cavan, Donegal, Leitrim, Monaghan, Sligo
Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare
Joe Hoare, Assistant National Director, HSE Capital & Estates
Marian Cavanagh, Regional Health Forum Office
Anna Lyons, Regional Health Forum Office
Pauline Clerkin, Regional Health Forum Office

844/105/23

Minutes of previous meeting – 28th March 2023

The minutes of the previous meeting held on the 28th March 2023 were proposed by Cllr John Carroll and seconded by Cllr John Cummins and adopted.

845/105/23 Matters Arising:

W104Q3596 - Old Health Centre at Binion Road Clonmany:

Action: Joe Hoare undertook to revert to Cllr Albert Doherty next week regarding the timeline on the Old Health Centre at Binion Road, Clonmany.

846/105/23 Chairman's Business:

Cllr Gerry McMonagle wished Breda Crehan Roche, Chief Officer, Community Healthcare West well in her early retirement and thanked her for the contribution and engagement over the years with the Regional Health Forum West. These good wishes and thanks were supported by numerous Councillors.

847/105/23 Questions:

W105Q3642/3666/3673/3685/3689: Funding Allocation to North West STOP.

Action: Dermot Monaghan will ask the Head of Service Mental Health to engage directly with STOP North West to open communication regarding any help/support that can be given around funding applications.

W105Q3644 - Presentation on the Impact of Vaping:

Tony Canavan suggested that a presentation on the impact of Vaping be considered for a Regional Health Forum Committee meeting.

Action: RHF Office to organise.

W105Q3646 - Grove and Community Nursing Unit in Tuam:

Action: Joe Hoare to provide Cllr Donagh Killilea with the total approximate costing of both the Grove and Community Nursing Unit in Tuam.

W105Q3648 - Issues re Registration with GP's in Donegal:

Action: Dermot Monaghan to revert to Cllr Gerry Crawford regarding are the number of GP practices at full capacity in the Primary Care Centres in Donegal.

W105Q3653 - CFR Groups:

Action: JJ McGowan to follow up with the Community Liaison Officer to remind the Community First Responders to log their arrival with the Control Centre.

W105Q3659 - Waiting list for Home Support in Galway City:

Action: Breda Crehan Roche to provide Cllr Declan McDonnell with a category breakdown of how many of the 95 people on the Home Support Waiting list in Galway City are people with a disability and are older people.

W105Q3661 - Lyme disease Campaigns:

Action: Maria Bridgeman undertook to follow up with Health and Wellbeing nationally to see if any public campaigns or programmes of education are planned for Lyme disease and will revert to Cllr Evelyn Francis Parsons.

W105Q3662 - Recruitment of Senior Radiographer for Carndonagh:

Action: Dermot Monaghan to keep Cllr Albert Doherty briefed on the recruitment process and outcome for a Senior Radiographer in Carndonagh.

W105Q3663 - Respite Services in Inishowen:

Action: Dermot Monaghan to keep Cllr Albert Doherty briefed on the timeline for resumption of respite services in Inishowen.

W105Q3681 - Primary Care Centre An Spidéal:

Action: Joe Hoare is to respond to Cllr Dáithí Ó Cualáin with the timeline for progression of the Primary Care Centre An Spidéal.

W105Q3688 - Waiting time for MRI's, Ultrasound, X-ray, CT and DEXA Scans:

Action: Tony Canavan to revert to Cllr Donal Gilroy with the breakdown of waiting times for referral by category (a) When referred by a GP (b) When referred by a GP Direct Access for GPs Scheme (c) When referred by a Consultant through the Hospital system for an MRI, Ultrasound, X-ray, CT and DEXA Scans at Sligo University Hospital.

W105Q3690 - Pandemic Special Recognition Payment:

Action: Dermot Monaghan to revert to Cllr Donal Gilroy with the most appropriate/effective pathway to follow up on Section 39 or contracted service employees, regarding the Pandemic Special Recognition Payment.

W105Q3692 - Waiting list for Therapeutic Interventions:

Action: Breda Crehan Roche to revert to Cllr John Connolly with a breakdown of the waiting list for individual therapeutic interventions.

W105Q3694 - Knocknacarra Integrated Care Hub:

Action: Breda Crehan Roche will check with Estates and revert to Cllr John Connolly in relation to the availability of the Floor Plan of the Knocknacarra Integrated Care Hub.

W105Q3695 - Radium machine in Limerick UHL:

Action: Noreen Spillane to revert to the Mater Private Network for the specific times over the last year that the machine has been faulty and broken down (not planned down time) and the cost of the repairs and provide this information to Cllr Peggy Ryan.

Standing Orders were suspended due to time; Cllr John Sheahan proposed the continuation and it was seconded by Cllr Dáithí Ó Cualáin.

848/105/23 Motions:

W105M156 - Pilot project to determine the County of origin of each attendee to the ED at UHL:

This motion was proposed by Cllr Cillian Murphy and seconded by Cllr John Sheahan and unanimously supported by all Councillors present.

Action: Noreen explained the difficulty with extracting the data with the current national system in use.

W105M157 - Structure of the Regional Health Forum:

This motion was proposed by Cllr John Sheahan and seconded by Cllr John Egan and unanimously supported by all Councillors present.

Action: Motion to be forwarded to the Minister for Health, Department of Health.

Action: Tony to revert to Cllr John Sheahan with the progress of the Regional Health Authorities.

W105M158 – Granting of regulatory powers to the MHC over CAMHS:

This motion was proposed by Cllr Evelyn Francis Parsons and seconded by Cllr Martina O'Connor and unanimously supported by all Councillors present.

Action: Motion to be forwarded to the Minister for Mental Health and Older People, Department of Health.

W105M159 – Hydrotherapy Pool at Sligo/Leitrim/Donegal Region:

This motion was proposed by Cllr Declan Bree and seconded by Cllr Paddy Farrell and unanimously supported by all Councillors present.

Action: Motion to be forwarded to Dermot Monaghan for response to Cllr Declan Bree.

W105M161 – Aras Mhic Dara, Community Nursing Unit, Carraroe:

This motion was proposed by Cllr Dáithí Ó Cualáin and seconded by Cllr John Connolly and unanimously supported by all Councillors present.

W105M162 – Funding for North West Stop:

This motion was proposed by Cllr Paddy Farrell and seconded by Cllr Albert Doherty and unanimously supported by all Councillors present.

849/105/23 Any Other Business:

850/105/23 Date & Time of Next Meeting:

The next **Regional Health Forum AGM** will take place on Tuesday, 27th June 2023 at 2pm in Galway.

The next **Regional Health Forum Committee** meeting will take place on Tuesday, 24th October 2023.

This concluded the business of the meeting.

Signed:

Cathaoirleach/Chairman

Adopted at the Regional Health Forum West meeting

QUESTIONS AND RESPONSES RECEIVED
REGIONAL HEALTH FORUM WEST – 27TH JUNE 2023

Number:	QUESTION	RAISED BY	Page No.
W106Q3696	Lands at Toghermore, Tuam	ClIr D Killilea	3
W106Q3697	Plans for Aras Mhuire Nursing Home site on Dublin Road, Tuam.	ClIr D Killilea	3
W106Q3698	Cost of the new CNU & Grove Hospital developments in Tuam.	ClIr D Killilea	3-4
W106Q3699	Oversight by HSE Community of Ability West services, Galway City and County.	ClIr D Killilea	4
W106Q3700	Update on construction works incl. the 50 bed block at PUH.	ClIr E F Parsons	4
W106Q3701	List of DTSS participating dentists servicing the CHO2 area.	ClIr E F Parsons	5-6
W106Q3702	Update on Easkey Day care centre and Enniscrone Day Centre, West Sligo.	ClIr D Mulvey	6
W106Q3703	Specialist Memory Assessment and Support Services in CHO2.	ClIr E F Parsons	6-7
W106Q3704	Rationale re decision to relocate the 7 Springs Day Centre Loughrea.	ClIr E Parsons	7-8
W106Q3705	Alternative to Ozempic for type 2 diabetes given worldwide shortage.	ClIr F Gurn	8-10
W106Q3706	HSE plans for increased demand for services over summer.	ClIr F Gurn	10-12
W106Q3707	Process for hiring overseas consultants - IMC licensing requirements.	ClIr M Kilcoyne	12-14
W106Q3708	Vacant GP positions in Mayo and of GPs on specialist register.	ClIr M Kilcoyne	14
W106Q3709	How many have been approved for home help in Mayo but not yet received.	ClIr M Kilcoyne	14
W106Q3710	Public information for early detection, diagnosis and treatment of Lyme Disease.	ClIr M Kilcoyne	14-15
W106Q3711	Donegal dentists retiring 2023/ 2024, plan for filling vacancies, review of DTSS.	ClIr A Doherty	15-16
W106Q3712	Progress at Health Centre at Binion Clonmany, timeline and plans.	ClIr A Doherty	16
W106Q3713	4.24 million Euro Capital Development and Carndonagh Community Hospital.	ClIr A Doherty	16
W106Q3714	Riverwalk Respite House reopening and services at Milltown House.	ClIr A Doherty	16-17
W106Q3715	Dedicated car parking spaces at the back of the hospital for discharge of patients.	ClIr D McDonnell	17
W106Q3716	Update on the Review of the Now Doc Service for Donegal.	ClIr G McMonagle	17
W106Q3717	Any plans to develop a Day Hospital to support the CAMHS Service in Donegal.	ClIr G McMonagle	17-18
W106Q3718	Any plans to provide a Crisis Resolution Team for North and West Donegal.	ClIr G McMonagle	18
W106Q3719	Endocrinologist Posts- LUH, timeline envisaged to fill posts and temporary cover.	ClIr G McMonagle	18
W106Q3720	Incidence and staging of invasive cancers in the Midwest, 5 year survival rates.	ClIr M Howard	18-20
W106Q3721	Audiology/ Ophthalmology- children in Co Clare, waiting lists and times. School screening /testing and plans for a National Eye and Ear Screening Programme.	ClIr M Howard	20-21
W106Q3722	Shortage of Dentists when it comes to Medical Card patients in County Mayo.	ClIr J O'Hara	21-22
W106Q3723	What is the up-to-date position to the extension at Ballina District Hospital.	ClIr J O'Hara	22
W106Q3724	24/7 GP cover in a Medical Centre in Ballina to ease numbers in ED, MUH.	ClIr J O'Hara	22

W106Q3725	Waiting time in Co Roscommon suffering with Cataracts to have them removed.	Cllr T Ward	22
W106Q3726	Extend the opening hours of the minor injuries unit at Roscommon Hospital.	Cllr T Ward	23
W106Q3727	Update on the new rehab unit at Roscommon County Hospital.	Cllr T Ward	23
W106Q3728	How many children have to go outside Roscommon to avail of range of services for children with Autism, Speech and Language and Disabilities.	Cllr T Ward	23-24
W106Q3729	Beds in Ennis Hospital, average length of occupancy and length of time vacant.	Cllr C Murphy	24
W106Q3730	June BH weekend, numbers at ED- UHL/ on trolleys/ NAS callouts (Clare) /calls to Shannondoc/ occupancy levels in the MAU in Ennis.	Cllr C Murphy	25-26
W106Q3731	Opening hours- MAU and LIU in Ennis, and updated pathways/protocols to access those facilities, for the public, the NAS and for GPs.	Cllr C Murphy	26-27
W106Q3732	Agency staff (WTE) employed in Sligo University Hospital.	Cllr D Bree	27
W106Q3733	Services at PCC Seamus Quirke Road & Integrated Care Hub/ PCC Knocknacarra.	Cllr D Bree	27-28
W106Q3734	Locum consultants employed in each Saolta hospital in March 22 /March 2023.	Cllr D Bree	28-31
W106Q3735	Negotiations re hydrotherapy pool at Cregg/ status of pool at Manorhamilton.	Cllr D Bree	31
W106Q3736	Overnight respite care by agency partners annually in Co Galway since 2018?	Cllr J Connolly	31-33
W106Q3737	New 5 bedded respite house for children with complex medical needs, Galway.	Cllr J Connolly	33-34
W106Q3738	Therapists employed and vacant positions in Child Disability Network in Galway?	Cllr J Connolly	34-35
W106Q3739	Acute Mental Health Facility, GUH – occupancy levels (2022). Details re overcapacity reported and how accommodation needs were met.	Cllr J Connolly	36
W106Q3740	Updated report on proposed works in the community nursing unit in Ramelton?	Cllr C Brogan	36-37
W106Q3741	Delayed discharge, overcrowding and delays at accident- A&E, LUH- steps being taken and comparison to other hospitals.	Cllr C Brogan	37-39
W106Q3742	Updated report on Donegal projects included in the capital plan 2023.	Cllr C Brogan	39-44
W106Q3743	Extended ambulance services and investments in Donegal in the last 2 years?	Cllr C Brogan	44-45
W106Q3744	Westdoc out of hours G.P service – emergency/ urgent service provided.	Cllr D Ó Cualáin	45
W106Q3745	Children waiting for ophthalmology appt in G.U.H. How many have a disability?	Cllr D Ó Cualáin	45
W106Q3746	Vacant ophthalmologist physician position in GUH.	Cllr D Ó Cualáin	45
W106Q3747	G.P vacancy in An Cheathrú Rua- Actions taken.	Cllr D Ó Cualáin	45
W106Q3748	Injury Unit, Nenagh- Days unable to carry out its duties 8am- 8pm and why.	Cllr S Morris	46
W106Q3749	Podiatry Services at the Grange and Drumcliffe Primary Care Centres.	Cllr D Gilroy	46
W106Q3750	Parking at outpatients, SUH for people with mobility issues.	Cllr D Gilroy	46-47
W106Q3751	Updated report on Ambulance response times in the CHO1 area?	Cllr D Gilroy	47
W106Q3752	Staff for services users from Cregg House /Cloonamahon, HSE and agency.	Cllr D Gilroy	47

Number:	QUESTION	RAISED BY
W106Q3696	Can the HSE confirm that the lands formally used as a pitch and put course in Toghermore, Tuam can be offered to Galway Co Co to be used as Recreation and Amenity for interested groups within the area of Tuam. The lands not being used at Toghermore are lying idle for nearly 20 years and are serviced by separate entrances, they offer an ideal location for sports groups/community facilities. If CHO2 can confirm they have no use/limited use for some or all of these lands it would help greatly in the process. For the purposes of clarity this is lands under folio GY45999 (containing 16.03ha/29ac owned by HSE since 11/10/2018 in Full). If estates can also confirm if they have control of lands Folio GY46566 at Toghermore Campus, Tuam. Formally owned by PETER KELLY (Very Reverend) of THE PRESBYTERY, TUAM, COUNTY GALWAY containing 2.6861ha/6.6 acres.	Cllr D Killilea
<p>A number of significant capital developments have been underway in the Tuam area to better enable an enhanced delivery of healthcare in respect of mental health, disability and older persons services. The HSE is conscious that questions have been raised in terms of the future use of existing land and buildings such as at Toghermore and Aras Mhuire in this context. While the future use of such facilities is an important consideration the main focus to date has been on the delivery of the new infrastructure and on the service planning for putting these buildings into operation. It is acknowledged that the Toghermore campus has potential for recreation and amenity use by interested groups such as local sports groups etc. Galway County Council have recently approached the HSE to discuss the potential future of the lands in Toghermore in the context of community facilities. Separately, the HSE has received representation on behalf of ChildVision in relation to a proposal for a National Equine Assisted Therapy Centre. The HSE would support the inclusion of ChildVision in any plans for the Toghermore lands in the context of the therapeutic benefit of equine therapy for children with disability, which is evidence based. Whilst Community Healthcare West have indicated the intention to retain the use of the house and admin offices into the future in an administrative capacity it would be intended to formalise an overall property and accommodation plan for the Tuam area in the coming months. This will consider what options might be available to best meet the HSE's accommodation needs into the future including a retention of Toghermore as an administrative base. The plan will align all accommodation needs with capacity and set out the basis for any future acquisitions or disposals. The HSE is amenable to supporting the various proposals for the Toghermore lands and will engage with the relevant parties to explore how this might be achieved. In terms of the specific query regarding the control of lands, the HSE are the owners of these lands notwithstanding there is some work that remains to be completed in respect of title rectification.</p> <p>Joe Hoare, Assistant National Director, HSE Capital & Estates</p>		
W106Q3697	Can the HSE confirm what plans or discussions are taking place in relation to Aras Mhuire Nursing Home site on Dublin Road, Tuam. What plans are being prepared for same once the transition to the new CNU are completed in Sept/Oct 2023.	Cllr D Killilea
<p>Community Healthcare West have expressed a desire to hold on to the Arás Mhuire site largely for administration accommodation once current services are relocated to the new facilities. Further discussions are required to define overall needs and how the facility might be best used as part of an overall accommodation plan. While the location is good the existing property may need significant investment in the future. The HSE have also had an enquiry from the Department of Education & Skills in connection with the potential availability of the site to allow for a possible expansion of an existing post primary school in Tuam which is located on a small site adjacent to Áras Mhuire Community Nursing Unit.</p> <p>Joe Hoare, Assistant National Director, HSE Capital & Estates</p>		
W106Q3698	Can the HSE confirm the total cost of the new CNU & Grove Hospital developments in Tuam, and what was the contribution amount given by the O'Toole family to the CNU. (estimated costs of both build and fit out will do).	Cllr D Killilea

The total capital budget for the new CNU in Tuam (Joe & Helen O'Toole CNU) is €25.15 million and the total capital budget for the Tuam Mental Health Team Base and Early Intervention Centre (Disability Services) is €13.4 million. The figure of €25.15 million includes the charitable donation of €7 million from the O'Toole family.

Joe Hoare, Assistant National Director, HSE Capital & Estates

W106Q3699	<p>Could the HSE confirm what oversight there is by HSE Community on the services that are being run by Ability west that cater for HSE patients with intellectual disabilities in Galway City and County? Following my question at the last RHF meeting in relation to HIQUA inspections and that the HSE provide an annual operational budget of €30m to Ability west I have received many calls in relation to Transport, Respite Services, day care services from Ability West. The general consensus from callers is that there is little interaction between management and the families or carers of service users. Shortage of transport for service users, no respite for service users and shortage of staffing that deal directly with patients at day care centres.</p>	Cllr D Killilea
------------------	---	------------------------

The HSE have a Service Arrangement in place with Ability West. The Service Arrangement is monitored under The HSE Framework for the Governance of Non Statutory Agencies.

The HSE meet with Ability West formally, ten times per year to review service activity and monitor performance against various schedules set out in the Service Arrangement.

Ability West are currently experiencing significant staffing challenges which is having an impact on the delivery of core services inclusive of day, respite and residential services.

The HSE are working with the organisation to support them in addressing their current challenges. The HSE have proposed establishing a Service Improvement Framework to assist in addressing current issues.

This has been agreed in principle by the Board of Ability West, with the aim of providing safe and effective services. Engagement with families will be a core element of this framework.

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3700	<p>Please provide an update on all planned construction works including the current build 50 bed block with completion dates, at Portiuncula University Hospital.</p>	Cllr E Francis Parsons
------------------	---	-------------------------------

50 Bedded Replacement Ward Block

Construction work is on-going on the 50 bedded replacement ward block and is due to be completed in the 3rd Quarter of 2024.

12 Bedded Ward

Work is on-going and is almost complete. We expect to have the new ward opened in September of this year. This development will provide additional bed capacity and the area will accommodate service users requiring isolation rooms for end of life care.

CT Scanner

The new CT scanner is installed and operational in the under-croft of the Theatre.

Plans are also underway to develop our Ambulatory Gynaecology unit. We hope to complete this later in the year.

Ambulatory Gynaecology

Proposals for an Ambulatory Gynaecology unit have been scoped and the project is due to go to tender in the coming weeks with works anticipated to be progressed in Q4 2023.

A. Cosgrove, COO, Saolta University Health Care Group/Joe Hoare, Assistant National Director, HSE Capital & Estates

W106Q3701	The severe lack of access to Dental Treatment Services Scheme for medical card holders is a critical issue impacting disproportionately on persons living with disabilities for whom complex oral health, travel difficulties and capacity issues commonly impact. Please provide a list of DTSS participating dentists servicing the CHO2 area to be made available to the public and advocacy groups.	Cllr E Francis Parsons
------------------	---	-------------------------------

The HSE provides Dental Services to Medical Card holders. Some services are provided by dentists employed by the HSE, and some by private dentists. Medical Card holders can get a list of participating Private Dental Practitioners from their [Local Health Office](#) or HSE Dental Clinic.

Galway Dentists Operating the DTSS (Medical Cards)

Galway City

Dr Rachel King, 5 Commerce House, Flood St,	091 507001
Dr. Vincent OConnor, Eglinton St, Galway	091 567694
Dr. Brid McGlacken, Forester Court Galway	091 562223
R – Dent Dental, Unit 70, Headford Rd, Galway	091 563792
Dr J McEvaddy, Devon Park, Salthill	091 520222
Dr. McEvaddy, Middle St.	091 566517
Dr Kelly, Liosbaun Ind. Est. Tuam Rd.	091 770670
Dr McGee,, Merchants Rd	091 566614
Dr D O'Reilly, Newcastle	091 525688
Dr O'Hagan, Galway Dental, Salthill	091 582222
Dr C Long, Lower Cross St	091 564272
Dr. C. Davitt, Laura Ashley Building, Tuam Rd	091 756222
Westend Dental Practice	091 863826

Galway East

Dr McCarthy, Claregalway	091 798333
Dr. Una Burke, Gort	091 630731
Seaport Dental . Gort	091 631276
Dr McGuckin, Ballinasloe	090 9643041
Dr Whitney, Oranmore	091 795195
Dr Mangan,Walsh ,Athenry	091 845945
Seaport Dental Loughrea	091 841466
Oranmore Dental Care, Cloonarkin Drive,	091 790609
Mountbellow Dental Practice, College Road,	090 9623794

Galway West

Dr Kirrane, Oughterard	091 866018
Dr John Flavelle, Spiddal	091 558944

DTSS Participating Dentists Servicing Mayo and Roscommon 9 June 2023

Location	Dental Practice	Contact Number
Athlone	Dr Elizabeth Boland	090 6475956

Athlone	Dr Daniel Harney – Westside Dental	090 6494110
Boyle	Dr Killian Vaughan / Dr Yasmin Ali	071 9670838
Castlerea	Dr Adrian Boyle	094 9622829
Roscommon Town	Dr Eleanor Keaveney	090 6627707
Castlebar	Tobin’s Dental	094 9025705
Castlebar	Dental Care Ireland	094 9022317
Castlebar	Bourke’s Dental	094 9021497
Castlebar	Dr Shane Cadden	094 9025281
Castlebar	Dr Ingrid Kersbergen	094 9028728
Westport	Dental Care Ireland	098 28753
Belmullet	Erris Dental	097 81933
Claremorris	Dr Paul Murphy	094 9371207
Crossmolina	Dr Sean Kelly	096 30675
Ballina	Dr Joe Durkan	096 21009

Please note, some dental practices are advising that they are at capacity at the moment and may not be able to take on new patients.

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3702	Can I ask for a progress update from the HSE on when full services (4 day a week) will return to Easkey Day care centre and Enniscrone Day Centre, West Sligo.	Clr D Mulvey
------------------	--	---------------------

Prior to the Covid 19 pandemic, Easkey Social Day Centre operated from Monday to Thursday each week, while Enniscrone Social Day Centre operated on Monday, Tuesday and Thursday each week.

Currently, due to staff vacancies, the Easkey Social Day Centre operates on Wednesday and Thursday each week, while the Enniscrone Social Day Centre operates on Monday and Tuesday each week.

A HSE recruitment campaign is currently at screening stage. When the vacant posts have been filled, it will be possible to resume operating Services at Easkey Social Day Centre four days per week and those at Enniscrone Social Day Centre three days per week.

Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W106Q3703	Please provide update on Specialist Memory Assessment and Support Services in CHO2 in relation to the implementation of the National Dementia Strategy.	Clr E Francis Parsons
------------------	---	------------------------------

Memory Assessment Support Services (MASS) are currently provided in Community Healthcare West via existing services including Psychiatry for Later Life services, integrated care teams geriatrician lead, geriatric outpatient clinics (Mayo, Roscommon and Galway) and neurology teams (particularly young onset dementias). There has been recent funding from the National Dementia Strategy for a regional specialist memory service for the Saolta Region. Posts are in recruitment and awaiting consultant posts but ANPs have commenced in last few weeks and the service is getting underway but is limited by clinical assessment space for teams working in the area. This is MASS level 3 (highest level of specialist service) and the plan is to serve the whole Saolta area for specialist memory assessment which will encompass future treatments etc.

The National Dementia strategy also outlines the need to provide MASS Level 2 support for patients with a diagnosis and post diagnostic support – this is currently being provided from existing services as outlined above but we are liaising with the national dementia office regarding the need for additional funding in addition to existing services given the fact that this area has been traditionally under resourced from a memory perspective and did not have an established MASS 2 service. In order to make the most of these new and existing resources the Memory services will work closely with existing services to streamline referrals and pathways to various linked services but as with any new services this will take time as staff come on board and space is available for clinics.

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3704	Please outline the rationale and under pinning procedure followed in the HSE with regard to their decision to relocate the 7 Springs Day Centre Loughrea from its current location at the front of St Brendan's to the rear workhouse location amid significant local opposition which included public protest marches and signed petition of 2500 signatures.	Clr E Francis Parsons
------------------	--	------------------------------

Historical background

St Brendan’s when built was built to the standard in place at that time for older persons designated centres. Developments and requirements have changed and registration and use of rooms reflect those changes. It replaced the old St Brendan’s which was located on the same campus in a Victorian era building, known by some as the workhouse.

Seven Springs Day Service in St. Brendan’s was not in the footprint of the residential unit in 2019. Due to the COVID-19 pandemic, the Day Service was closed in March 2020 in accordance with national guidelines. During this time, the residential unit began to utilize the space to ensure compliance with National Infection Prevention Control guidance around social distancing in order to ensure residents’ activities, residents’ functions, music, Christmas and residents’ birthday parties along with staff break times could continue during this very difficult time. This area was always utilised when the Day Service was not in operation.

St. Brendan’s Community Nursing Unit (CNU) had an unannounced HIQA inspection in August 2020. The inspector was aware that CNU was using this space for the above stated purpose and informed the CNU that they needed to submit an “Application to Vary” if they wanted to continue to use it, otherwise the residents could not use this facility. The application was submitted in November 2020 in a COVID-19 pandemic environment. The re-registration of the CNU reflects this now and the Day Service is permitted for 14 people on a Wednesday as part of that.

Silver Springs area used presently as follows

- OT and Physio clinical rooms
- 15/20 residents use day room at various times daily for activities throughout week
- Day service user on Wednesday can access hairdresser and chapel. Smoking room is for residents use.

Recommencement of Day services post Covid 19 restrictions

In an effort to ensure people residing within the Loughrea area could attend a Day Service following the lifting of the COVID-19 restrictions, the HSE began to provide a Day Service 3 days a week in a local hotel as HIQA would not permit the provision of said service 4 days a week in St. Brendan’s CNU. This temporary Day Service will continue to operate until such time as the new facility in St. Brendan’s Campus is operational.

Day Service 2023

- Operates Monday -Thursday 4 days per week
- Operates Seven Springs on Wednesday – limited to 14 as per HIQA registration
- 20 -22 attend on the 3 other days when it operates in the Hotel
- Transport provided for attendees by private bus companies
- Clinical Nurse Manager 2 (CNM2) oversees 2 hours per day in conjunction with other work requirements
- Operates normally in ballroom though occasionally on top floor in alternate venue - HSE management have visited when the Day Service is operational and note it is suitable
- Staff very committed to service
- No clinical interventions in the service - social model of care
- Feedback from attendees is they are glad to be back in day service
- Personal care /support provided by HCA/MTA

New Day Centre and concerns raised

The HSE acknowledge the concerns raised. However, the provision of the Day Service in the new facility will ensure a sustainable long term solution and allow up to 25 people to be supported daily, 5 days a week. The HSE has the best interest of all those who attend the Day Service at heart and are making every effort to have the new facility ready by Q4, 2023. The capital cost is being supported by the Toppings Trust and the new Day Service tender has been issued.

HSE management, including the Chief Officer has met with local Political representatives and community representatives, most recently 8th May 2023 and on two previous occasions, to update them on the plan to provide the Day Service from the new facility on the St. Brendan's campus.

The tender for constructing the new day centre is due to close on 9th June 2023 and it is expected this new centre will be ready for occupation in late 2023. The new day centre will allow for return of a 5 days a week service Monday to Friday for up to 25 people.

All possible alternatives to this option were assessed and the new centre was the one that provided the most sensible, least impactful and long-term solution to provide enhanced day care.

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3705	Some diabetics who use Ozempic have a worldwide shortage supply of the drug for type diabetes 2 due to it been used and endorsed by practitioners for use for obesity has the HSE got alternative drug that has been approved and are available for the North west region.	Cllr F Gurn
------------------	--	--------------------

'Ozempic' is a branded medicine and its active ingredient is Semaglutide and there are other drugs in this family used for the management of diabetes type 2 for example Exanetide, Liraglutide, Dulaglutide etc.

There is particular pressure on the supply chain for Semaglutide as demand for this drug has increased due to its use in addressing obesity.

T. Canavan, CEO, Saolta University Health Care Group**Additional Information:**

Medicines are added to the formal Reimbursement List following detailed assessments which include assessment of the clinical evidence, the economic evidence and the budget impact of a decision to reimburse specific indications of a medicine. The Primary Care Reimbursement Service is required to reimburse in line with approved decisions of the HSE and the HSE is required to formally assess each medicines and each specific use of such medicines before reimbursing them.

Ozempic® (semaglutide) is licensed with the Health Products Regulatory Authority (HPRA) in Ireland and indicated as an adjunct to diet and exercise to improve glycaemic control in adults with type 2 diabetes mellitus. Ozempic® was approved by the HSE for addition to the Reimbursement List for the treatment of Diabetes in 2018. Diabetes is one of the Long Term Illness (LTI) conditions for which eligible LTI persons can access their medicines to treat their Diabetes free of charge.

Controls are in place within the Primary Care Reimbursement Service scheme management systems (and are put in place and updated as required) on claiming processes to ensure that only HSE approved indications are reimbursed across a range of medicines. Controls are currently in place for Ozempic® to restrict reimbursement support to the HSE approved indication of Diabetes. PCRS wrote to GPs last year to state that reimbursement of Ozempic® is only intended in relation to treatment of Diabetes.

Communication was issued to community pharmacy contractors through Circular in 2020 regarding the approved reimbursement indication <https://www.hse.ie/eng/staff/pcrs/circulars/pharmacy/pharmacy-circular-022-20-semaglutide-ozempic%C2%AE-.pdf>.

Novo Nordisk, the marketing authorisation holder for Ozempic®, has notified the HPRA of intermittent supply issues with Ozempic® products, due to a global increased demand. The company anticipates that intermittent supply will continue into 2023.

Novo Nordisk has informed the HPRA that it has implemented monthly allocations to help ensure continuity of supply and equitable distribution of Ozempic® stock to Irish patients. The company has issued letters to relevant stakeholders, including healthcare professionals to ensure they are aware of this supply issue and how it is being managed <https://www.hpra.ie/docs/default-source/Shortages-Docs/ozempic-letter-for-hpra-website.pdf?sfvrsn=2>.

Furthermore, the independent regulators the Pharmaceutical Society of Ireland (PSI) and Medical Council have communicated advice to pharmacists and doctors recently (19th May 2023) which is intended to conserve supplies of the product Ozempic for diabetic patients.

Wegovy® (semaglutide) is indicated as an adjunct to a reduced-calorie diet and increased physical activity for weight management, however the product is not currently available in Ireland. The HSE expects that as and when the applicant company, Novo Nordisk decides to launch Wegovy® (semaglutide) in Ireland it will progress an application for pricing and reimbursement under Community Drug Schemes.

To enable same the HSE has commissioned a Health Technology Assessment (HTA) for this medicine which will be efficiently assessed when a dossier is submitted by Novo Nordisk. Novo Nordisk have not submitted a dossier to date. Specific queries in relation to plans to market this medicine in Ireland should be directed to Novo Nordisk.

Liraglutide (Saxenda®) 6 mg/ml solution for injection in pre-filled pen is available for reimbursement under the Community Drug Schemes (specifically the Drugs Payment and General Medical Services Schemes) since 1st January 2023.

In line with the HSE reimbursement approval above, the HSE Medicines Management Programme (MMP) developed a Managed Access Protocol (MAP for liraglutide (Saxenda®) as an adjunct to a reduced-calorie diet and increased physical activity for weight management in adult patients, with an initial BMI of ≥ 35 kg/m² with prediabetes and high-risk for cardiovascular disease.

This MAP outlines the criteria that must be satisfied in order for a patient to be recommended for reimbursement of liraglutide (Saxenda®); further information is available on the MMP website <https://www.hse.ie/eng/about/who/cspd/ncps/medicines-management/managed-access-protocols/liraglutide-saxenda-/liraglutide-saxenda.html>.

As outlined in this MAP, and in line with the reimbursement recommendation, reimbursement is supported for the following subgroup of the licensed population:

- Age 18 - 74 years

- BMI \geq 35 kg/m²

Confirmation of:

- Participation in non-pharmacological interventions which includes a reduced-calorie diet and increased physical activity e.g. HSE Diabetes Prevention Programme.
- Diagnosis of prediabetes - fasting plasma glucose level between 5.5 - 6.9 mmol/L and Haemoglobin A1c (HbA1c) level between 42 - 47 mmol/mol.
- High-risk for cardiovascular disease – either a total fasting cholesterol level > 5 mmol/L, or mean systolic blood pressure > 140 mmHg

Clinicians are required to submit an application for reimbursement support of liraglutide (Saxenda®) for their patients through an online application system.

Applications are reviewed by the MMP on a case-by-case basis, and a reimbursement recommendation is communicated back to the clinician or further information may be requested if required.

The company Novo Nordisk have not submitted a reimbursement application for any other group of the licensed population to the HSE.

Primary Care Reimbursement Service (PCRS)

W106Q3706	With the influx of visitors to the region attending various festivals and sporting events throughout the summer particularly at bank holiday weekends does the HSE have a plan in place with inevitable increase in demand for medical services other than recently issued advice to contact their GP or Nowdoc or caredoc services. Some of these events are planned a year in advance and has discussions taken place with HSE to put extra services in place.	Cllr F Gurn
------------------	--	--------------------

Primary Care Services in Donegal review these events on an ongoing basis and additional staff are rostered to the relevant services where required; e.g., Out of Hours services and Community Intervention Team nursing.

GP out of hours services are operational from 8 pm to 8 am Monday to Friday and from 6 pm Fridays to 8 am Mondays and also all Bank Holidays. The HSE works closely with Out of Hours providers to ensure that GP hours rostered are matching anticipated needs and are increased in cases of any anticipated surge.

Visitors from Northern Ireland and the UK are entitled to access free Medical Care under the common travel arrangement and visitors from the EU are also entitled to access urgent Medical Care with the EHIC Card.

Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

The organisers of an event (>5,000 audience in a venue not already licenced in this regard) are required to produce an Event Management Plan (EMP).

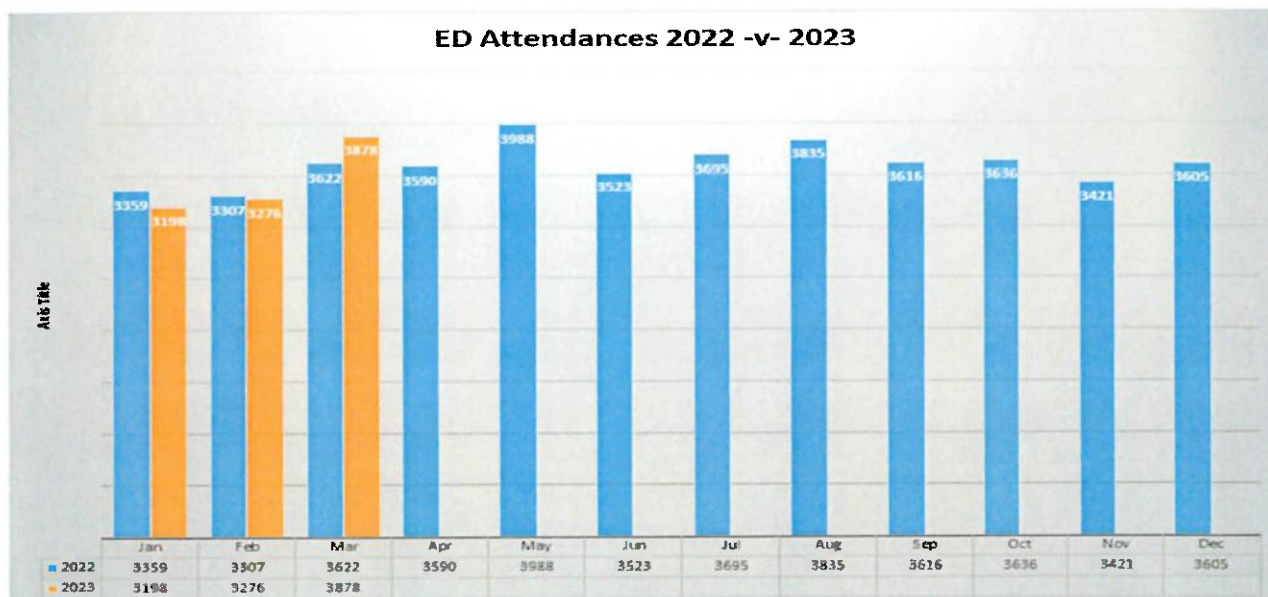
One of the many components of the EMP are details of the medical cover the organiser puts in place to ensure the health needs of the audience are met and those of the local population are not compromised by the event. Also, as part of the licencing process, the HSE as a prescribed body will be invited to partake in a number of meetings and provide input from a health perspective on the conditions of the grant of a licence.

Once the HSE are notified of the event, the details are circulated to the relevant services to consider. Specifics to the event HSE services will implement as appropriate extra resources if **deemed necessary** outside of their already existing services escalation plans.

Kay Kennington Regional Chief Emergency Management Officer

Attendances at Emergency Departments across the country have seen a significant increase, for the full year of 2022 attendances were up by 14.8% compared to 2021, and this trend has continued into 2023.

The Emergency Department in Sligo University Hospital has also seen sustained pressure with attendances in 2022 up by 8% compared to 2021. As such, contingency plans are put in place at all times during the year to ensure that SUH can meet service demands. There is no evidence to suggest that services are more impacted during the summer season due to tourism and as such, no separate summer plan is required. The below graph illustrates that ED attendances during the summer months of 2022 were consistent with other months.



Separately, Safer Staffing levels for ED nursing staff have recently been reviewed and approval has been received to recruit additional resources. A number of nursing staff have recently commenced post within the ED. Additional nursing resources to fully implement Safer Staffing in our ED will commence taking up post from May 2023. We also recruited two additional WTE Emergency Medicine consultants, who work extended days providing senior decision managers on ED floor.

Currently there are 3 Advanced Nurse Practitioners working independently in the department. Their role is to review, treat and discharge a cohort of patients with non-life/non limb threatening injuries. Since the introduction of the service we have reduced waiting times for this cohort of patients. The ANP service is available between the core hours of 08:00 to 20:00 over 7 days per week. It is a developing service with SUH in the process of recruiting for further practitioners.

During times of major events the department reviews and revise rotas ensuring nursing and medical cover is maximised.

The Acute Assessment Unit is operational Monday to Friday for GP referrals for specific number of patients each day. It is also used as a surge for admitted patients over the weekends to relieve the overcrowding in ED.

We are focused on increasing bed capacity and made 8 extra bed spaces available in early 2023. Work is expected to commence on the new 42-bed inpatient block at SUH following completion of tender process in Q4 2023.

The introduction of Hospital Ambulance Liaison person since late 2022 assists daily in terms of improving Ambulance Turnaround times and works 7/7 11am to 22.00 hrs.

SUH puts an operational plan in place for all Bank Holiday periods to provide additional responses to service pressures which include senior decision makers onsite, additional diagnostic measures, additional resources in ED and coordination with CHO services regarding supports for relevant discharge plans. There is also a discharge planning meeting held on Friday afternoons with Consultants / Teams to focus on discharges over the weekend.

CIT Coordinator was also recruited in recent months to assist with earlier discharges from hospital and admission avoidance where possible.

A. Cosgrove, COO, Saolta University Health Care Group

The National Ambulance Service (NAS) operates the National Ambulance Service Capacity Action Plan (NASCAP) this provides a consistent approach for the ambulance service to the management of pressure across emergency and urgent care.

The purpose of this plan is to support and enable a consistent approach to strategic escalation in response to varying levels of service pressure. To ensure a consistent understanding of pressure levels across the wider HSE, this plan is aligned to the Emergency Department (ED) Escalation Framework 2015.

A national approach to capacity planning enables a consistent sector approach to patient safety, risk mitigation as well as system and resilience understanding at times of escalating pressure. It provides systems partners and stakeholders with a clear visual representation of the issues faced and actions being considered and taken.

NASCAP provides NAS with a consistent and coordinated approach across the organisation to the management of response in situations where demand or other significant factors within NAS, precipitate an increase in demand and a challenge to the capacity to manage it.

The four levels defined in this plan are used to determine which actions are required to protect core services at each level of pressure and provide the most proportionate and safe level of service with the resources available. These levels will provide uniformity of pressure and understanding in all foreseeable scenarios.

In addition, the National Ambulance Service do not provide specific cover for such events. However we do work with organisers and review medical plans for certain events prior to the events happening and depending on the scale and type of event may put on additional cover if available in some areas if demand predictions would show the requirement for same. A prime example of this would be the work done with Sea Sessions festival and the Donegal motor club last weekend.

JJ McGowan, Chief Ambulance Officer - West

W106Q3707	What is the process followed by the HSE to hire overseas consultant doctors as consultants in Ireland considering their previous experience and with consideration to licensing requirements from the Irish Medical Council?	Cllr M Kilcoyne
------------------	--	------------------------

Recruitment to the civil service and a range of other public bodies is handled under the Public Service Management (Recruitment and Appointments) Acts 2004 to 2013 which established the Public Appointments Service (PAS) as a central recruitment agency for this purpose. PAS is responsible for the recruitment of all permanent consultant appointments in the HSE irrespective of overseas or other candidates. It strives to safeguard the integrity of the recruitment, selection and appointment of people to publicly funded positions and to engender widespread confidence in the ability of those appointed to contribute to the delivery of first-rate public services. The Commission publishes Codes of Practice which prescribe recruitment and selection standards that Public Bodies within its remit are required to meet. Appointment processes to all positions within the remit of the Public Service Management (Recruitment and Appointments) Acts 2004 to 2013 are subject to Codes of Practice published by the Commission.

It noted that the appointment processes involves the following stages or events:

- The HSE provides PAS with the Letter of Approval from National Doctor’s Training and Planning Unit for the filling of the position along with a detailed job and person specification, names of suggested interview board members, material for including in the job advertisement and the name of an contact person familiar with the clinical setting who is available to provide further information on the post to potential candidates;

- PAS usually advertise each position individually on www.publicjobs.ie and is open to exploring other channels such as the British Medical Journal; However if there is more than one vacancy in a particular specialty, PAS is open to running one appointment process to fill more than one vacancy
- Candidates apply on-line to PAS. The application includes a detailed structured application form, CV and the names of three referees;
- If there are more than 7 candidates for a position, PAS will generally include a shortlisting stage;
- The shortlisting stage – where deployed – is normally conducted by telephone conference;

Interviews are scheduled to last for 45 minutes and follow a consistent pattern:

- Introduction by the Chair
- Exploration of the Candidate's CV/Career Achievements
- Questioning the candidates' knowledge of/suitability for the specific challenges of this role
- Questioning on Management/Leadership and Interpersonal skills
- Conclusion/Wrap up

Appointment processes for academic/teaching positions also include a presentation in advance of the Interview. Candidates are generally asked to outline in their presentation the specific challenges of the role and how the candidate proposes addressing these challenges. The Selection Board may question the candidates on the contents of their presentation; PAS generally has 4 people on the interview boards with an additional professional/academic person included for positions involving academic/teaching duties. The structure of the selection board is as follows:-

- An Independent Chairperson
- A Clinical/Professional Nominee from the Service
- An External Clinical/Professional Expert
- A Management Nominee
- Selection Board members are asked to declare any possible conflicts of interest and sign a declaration confirming that they will respect the confidentiality of all information in relation to the appointment process;
- PAS also supply a representative to act as secretary to the Board and to support the chairperson on briefing and guiding the board members;
- A detailed shortlisting/interview guide is circulated to all members of the selection Board. The guide sets out in detail the manner in which the Shortlisting/Interview will be conducted, the selection criteria to be employed; the manner in which candidates will be scored and suggested question areas the board may use in the course of the interview, how the board will manage connections between candidates and board members;
- After each candidates' interview, the selection boards carry out an initial evaluation and award provisional scores before they are provided with copies of the References procured by PAS;
- At the conclusion of the Interviews, the secretary of the Board prepares an Order of Merit which is signed by all board members along with a report which details the conclusions reached by the selection board;
- The successful candidate qualifications and experience is validated by PAS to ensure that they are eligible and suitable for appointment;

All locum appointments are managed by the respective local hospital site and follow the following process:

- Posts are advertised individually across relevant media fora's and may include, HSE website, Saolta website, British Medical Journal, national newspapers of which is dependent on the respective vacancy;
- Applications are accepted in both electronic and hard copy formats;
- Applications are reviewed by consultants in that speciality/Head of Dept and Associate Clinical Director to confirm suitability to interview;
- Interviews are held either in person or by zoom/MS Teams dependent on candidate circumstances;
- Interviews are competency based (similar to PAS interviews);

- Interview boards consist of Associate Clinical directors, local speciality consultant/leads, Medical Manpower Managers;
- Following interviews, order of merit is established and appointment offers made accordingly;
- All necessary pre-employment checks are conducted by local Medical Manpower departments and include the following;
 - Satisfactory references
 - Garda vetting (Irish) and overseas police clearance
 - Occupational health clearance
 - Confirmation of registration with Irish Medical Council
 - Confirmation of previous experience at consultant level

Only following satisfactory conclusion of all of the pre-employment checks will offer of employment and subsequent contracting process be complete.

T. Canavan, CEO, Saolta University Health Care Group

W106Q3708	What % of GP positions in Co. Mayo are filled by people not on the specialist GP register? How many GP positions are currently vacant in Mayo and for how long they have been vacant?	Cllr M Kilcoyne
------------------	---	------------------------

It became a requirement in 2012 that GPs joining the GMS Scheme had to be on the Specialist Register, all GPs who joined the GMS Scheme in Mayo since 2012 have satisfied this requirement. Prior to this date GPs were not required to be on this register when they became GMS Contract holders. In Mayo 16% of GPs joined the scheme prior to 2012 and as result are not on the Specialist Register in the specialty of General Practice with the Irish Medical Council.

Two GP positions are currently vacant in Mayo. One of those positions is in Achill which has been vacant since July 2020. The second is in in Charlestown which has been vacant since January 2022. Both have been advertised on a number of occasions without success. However the positions are filled by GPs employed through a Locum Agency, so there has been no disruption in services to the patients.

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3709	What is the current status in Co. Mayo of the HSE West providing Home Care for those who have been approved for it. How many have been approved for home help and have not yet received it?	Cllr M Kilcoyne
------------------	---	------------------------

Home Support Services in Mayo are providing service to 1,954 clients. As of the 31st May 2023 there are 307 people waiting for a new and additional home support service in Co. Mayo.

The HSE is actively recruiting Health Care Support Assistants, there is an ongoing rolling campaign in place. Interviews for Health Care Support Assistant were held on 8th June, 2023, and a panel is in place, albeit a small panel due to lack of interest.

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3710	What is the up to date position of the HSE regarding the provision of public information for early detection, diagnosis and treatment of Lyme Disease?	Cllr M Kilcoyne
------------------	--	------------------------

The HSE Health Protection Surveillance Centre (HPSC) released a Press Statement and Awareness Campaign on Tick Awareness Day (10th May 2023). This included radio station news syndication with Dr Paul McKeown, Specialist in Public Health Medicine.

People can find lots of information and resources about Lyme disease on the [HPSC website](#) and on the [HSE website](#). The HSE Health Protection Surveillance Centre (HPSC) has some practical advice on how to protect yourself against ticks, whose bite can cause Lyme disease on their website and on social media, including twitter.

Ticks are present everywhere in Ireland, including both urban and rural areas and are active from spring to autumn. They are tiny spider-like creatures that feed on the blood of humans, animals and birds, and are more numerous and more active in the summer months. From April onwards is the time when we expect to see cases of Lyme disease most frequently in Ireland, because this is when ticks are most plentiful.

Tick bites can be prevented by:

- Wearing long trousers, long sleeved shirt and shoes
- Wearing a hat and tuck in hair
- Using an insect repellent (preferably containing the active ingredient DEET)
- Checking skin, hair and warm skin folds (especially the neck and scalp of children) for ticks, after a day out
- Checking for ticks and removing any from your pets/ clothing/ outdoor gear
- Removing any ticks and consulting with a GP if symptoms develop.

Ticks will bite adult humans most commonly on the legs and also the arms. But they can bite on any part of the body, especially warm and sweaty parts of the body not covered by clothing. In children, ticks are most likely to bite around the head and neck. These are the areas to cover up and protect. These are also the areas to check following time spent outdoors. You can even check yourself and your children during the day.

Rash

Most cases of Lyme disease are very mild and many infected people may not have symptoms. The most common sign of infection is a skin rash (known as Bullseye rash or erythema migrans). In a small number of cases however, the infection can be more severe, leading to serious nervous system, heart and joint disease.

Anyone who develops a rash or other symptoms should visit their GP and explain that they have been bitten by a tick. If you think you may have been bitten by a tick and you develop a skin rash speak to your GP. Your GP may prescribe antibiotics if it is likely to be Lyme disease, which will clear the infection.

Pictures of the Lyme disease skin rash can be found on the HSE website.

How to remove a tick

A minority of ticks can carry Lyme disease. If a tick is removed within the first number of hours, the risk of infection is very low. The entire tick, including its mouthparts which might break off, should be removed with a tweezers by gripping it close to the skin. The skin where the tick was found should then be washed with soap and water and the area checked over the next few weeks for swelling or redness.

You can see instructions on how to remove a tick on the HSE website <https://www2.hse.ie/conditions/lyme-disease/>

Neuroborreliosis

Cases of a more severe form of Lyme disease – neuroborreliosis – have to be reported to HPSC by doctors and laboratories in Ireland. There are approximately 10-20 cases of neuroborreliosis notified in Ireland each year. However, as some people will not be aware that they are infected, or will not seek medical help when unwell, the true number of Lyme disease cases is not known. It is likely that there are at least 200 cases of the milder forms of Lyme disease in Ireland annually.

Department of Public Health

W106Q3711	How many dentists in Donegal have indicated an intention to retire and/or served notice to exit from their HSE contracts in Calendar years 2023 and 2024. Where are the affected locations? Has the HSE an ongoing recruitment plan to fill any future vacancies. Has the Minister for Health and his Dept. completed the review of the DTSS scheme as promised?	Cllr A Doherty
------------------	--	-----------------------

Response (Interim)

Currently not available at time of issue, will be furnished as soon as possible.

Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W106Q3712

Health Centre at Binion Clonmany, What progress developments have occurred since my previous questions? When was the property first put on the state register? When does the timeline end for the interest/expression of interest from other public bodies? Will the HSE prioritise the placing of the building on the open market and invite the interest of locally active sports clubs?

Clr A Doherty

There has not been any significant progress made by Property Management since the previous question on the matter for the Regional Health Forum meeting of 28th March 2023. The difficulty is that title issues remain to be resolved in the first instance to enable disposal of the property. The HSE's legal agent is currently engaging with the Property Registration Authority (PRA) with a view to finalising title in relation to this property. The property is currently on the intra state register. Once title is in order, the HSE will look at expediting the disposal of the property. If no interest is noted, then we will proceed to put the property on the market at the earliest possible opportunity. HSE will notify locally active sports clubs/other interested parties that we are aware of if and when the property is to be placed on the open market.

Joe Hoare, Assistant National Director, HSE Capital & Estates

W106Q3713

How will the 4.24 million Euro Capital Development funding plan allocation to Carndonagh Community Hospital address the shortcomings identified by the HSE Estates & the HSE Infection Control Team (including inadequate space noted) and enable the prompt restoration by the HSE of Day Services provision at the Carndonagh community Hospital location?

Clr A Doherty

The major capital development funding did not include works to the former Day Services area in Carndonagh Community Hospital and was not intended to address issues identified by the HSE Estates and Infection Prevention and Control (IPC) teams in relation to the safe provision of day services at the hospital. The capital funding was limited to residential areas of the hospital. In terms of assessing the suitability of Carndonagh Community Hospital for the delivery of day services, HSE Estates and IPC will undertake a review of the premises to determine its suitability as a potential day care centre in the future.

Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W106Q3714

When will Riverwalk Respite House reopen and enable the provision of respite services for people with disabilities living in the Inishowen area, and What respite support services and activities are currently available at Milltown House and will the HSE progress the provision of Additional Respite support at Milltown House and include the access and use of Hydrotherapy Services at this location?

Clr A Doherty

A new home has been located for the resident currently living in Riverwalk Respite House and extensive refurbishment of this property has been carried out to bring it up to the appropriate regulatory standard of compliance as outlined by the Health Information and Quality Authority (HIQA).

The position of Clinical Nurse Manager/Person in Charge for this residential accommodation has been accepted and the successful candidate has completed the required clearances with the HSE in order to take up the position. This candidate has also completed the process of registration of becoming a Person in Charge with HIQA which is required to register the home.

An expression of interest for two staff nurse positions has been issued and one staff nurse has expressed interest in a position. This staff nurse will undertake the clearance process with HR and the second vacant staff nurse position is being re-issued as an expression of interest to the current Registered Nurse Intellectual Disability (RNID) and Registered General Nurse (RGN) panels and to the new nursing graduate panel to try to recruit to it.

The resident currently living in Riverwalk Respite House will move to the new residential accommodation once the registration process of the house with HIQA is completed and the required complement of staff is in place to provide a safe service for the resident. Riverwalk Respite House will then be in a position to reopen respite services for people with disabilities living in the Inishowen area.

HSE Estates are currently awaiting the results of a specialist structural and mica assessment of Milltown House, which has now been completed. It is expected that Milltown House will require significant upgrade works and these works can only be progressed when the outcome of the specialist mica assessment is available.

Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W106Q3715

To ask that UHG Management urgently provide dedicated car parking spaces at the back of the hospital to allow for the safe and smooth discharge of patients. Currently relatives of discharged patients are under severe pressure and stress trying to access any sort of parking. This area could be barrier controlled with an access code provided by the Ward the patient is being discharged from.

Clr D McDonnell

A review will be undertaken in relation to the above proposal to provide dedicated car parking spaces for discharged patients.

We will provide an update after further discussions take place.

T. Canavan, CEO, Saolta University Health Care Group

W106Q3716

Can I have an update on where the Review of the Now Doc Service for Donegal is currently at?

Clr G McMonagle

The NoWDOC GP Out of Hours Service provides an urgent GP service to patients in Co Donegal and South Leitrim.

The current operating model of GP OOH Service is managed and delivered by the HSE (NoWDOC) as part of a hybrid model with Caredoc providing GP's for the delivery of care.

The examination of the service and discussions with relevant stakeholders surrounding the most effective arrangements needed to continue to deliver a safe quality driven service for our community are ongoing at this time.

We remain fully committed to supporting our staff who are working in our NoWDOC service, and we will continue to ensure that we maintain excellent working relationships with all our partners and are very focused on working with staff and their representative bodies to explore all options available for the potential redesign of the operating model for the GP Out of Hours service in Donegal and South Leitrim to meet any challenges which are being identified.

We have given assurances that the HSE are continuing to work in partnership with NoWDOC & Caredoc to ensure that the public using the GP Out of Hours Service, and the staff working in the service, are provided with the necessary supports to deliver the best care to our service users, while ensuring that patient safety and quality of service are at the forefront of service delivery.

The HSE will continue to communicate and engage with all relevant stakeholders to ensure they are fully apprised of, and consulted on, any future developments.

Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W106Q3717

Has the HSE any future plans to develop a Day Hospital to support the CAMHS Service in Donegal?

Clr G McMonagle

At this time there are no plans underway to develop a CAMHS Day Hospital in Donegal.

Donegal CAMHS is delivered to children, young people and families through its three multidisciplinary teams. The Donegal Mental Health Management Team funded quality improvement projects last year and this year, which includes securing

services through third party providers. The services will deliver interventions such as anxiety management, non-complex Cognitive Behavioural Therapy, as well as the provision of individual support.
Donegal CAMHS has secured software packages to assist in assessing youth and adult mental health, which will cover common emotional and behavioural disorders.

These interventions are in addition to service delivered by CAMHS.

The Donegal Mental Health Service strives to develop and implement innovative approaches to supporting the needs of children, young people and families through CAMHS, at present and as outlined above, and into the future, and will keep the matter of a Day Hospital under review.

Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W106Q3718	Has the HSE any Plans to provide a Crisis Resolution Team for North and West Donegal to meet the needs of crisis intervention in relation to People with Mental Health issues?	Clr G McMonagle
------------------	--	------------------------

At present, Donegal Mental Health Service does not have a Crisis Resolution team. The development of such a team is a key priority for Donegal in 2024 and we can confirm that work is in progress to secure resources for its establishment.

Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

W106Q3719	What steps are being taken to fill the vacant Endocrinologist Posts at LUH and is a timeline envisaged when this might happen and is there any temporary cover in place to serve the needs of those patients attending the Endocrinology Clinics?	Clr G McMonagle
------------------	---	------------------------

Letterkenny University Hospital currently has approval for three Consultant Endocrinologist posts, two of which are Hospital based and one of which has a 0.5 WTE commitment to LUH and 0.5 WTE to Enhanced Community Care – Chronic Disease management programme.

One of the three Consultant Endocrinologist posts, is filled in a permanent capacity with a full time Consultant Endocrinologist at LUH, however he has recently submitted his resignation and will be leaving in the coming months. However he has agreed to continue providing his two Outpatient clinics per week on an ongoing basis following his resignation in August.

The approved Consultant Endocrinologist post shared between LUH and Donegal CHO is a new post. This development will provide greater integrated services for people with Diabetes in Donegal. This post is currently filled by a Consultant Endocrinologist on a locum basis (since the 6th of March 2023) whilst the permanent post is currently going through the recruitment process.

LUH is actively working to recruit to the Endocrinologist vacancies. The current advertisement which went live in March 2022 continues to be advertised on Publicjobs.ie and to date has not had any eligible candidates.

In the interim we are also exploring options to maximise the level of cover that we can provide for diabetic patients.

A. Cosgrove, COO, Saolta University Health Care Group

W106Q3720	On foot of a recent question put to the forum regarding cancer detection, treatment and outcomes the midwest - Clare, Limerick and Tipperary statistics were not included - thus can I get up to date information on the incidence and staging of invasive cancers on initial presentation or detection in the Midwest are and the overall 5 year survival rates in comparison to the national average.	Clr M Howard
------------------	---	---------------------

The National Cancer Registry of Ireland (NCRI) collects all cancer-related data from all hospitals in Ireland and reports on the number of people diagnosed with cancer and the types of cancer they have.

The 2022 Annual Statistical Report summarises cancer-related data up to the year 2020. It includes incidence, mortality and survival rates.

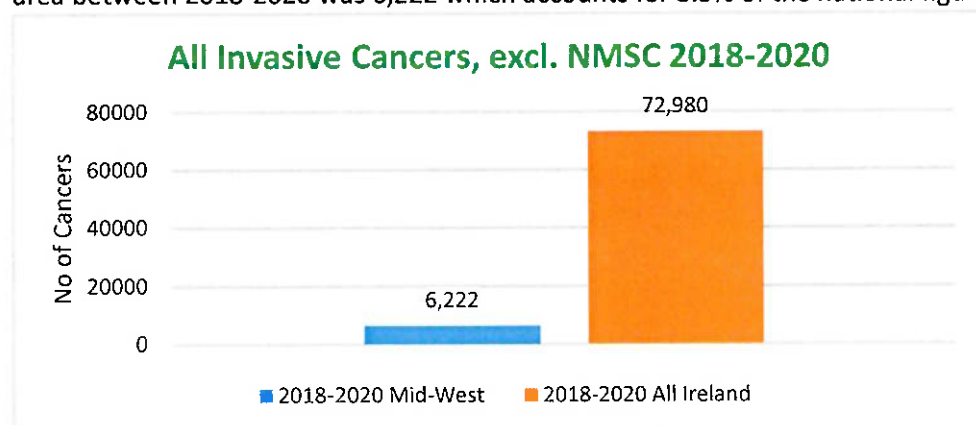
The report can be accessed at the link below:

<https://www.ncri.ie/news/article/latest-annual-statistical-report-national-cancer-registry-just-published>

The below table outlines the incidence of invasive cancers on initial presentation or detection in the Mid-West region (Limerick, Clare and North Tipperary):

	2018	2019	2020
All invasive cancer excluding Non-Melanoma Skin Cancer			
Limerick	1,022	1,059	984
Clare	671	660	652
North Tipperary	410	382	382
Total	2,103	2,101	2,018

As outlined above, the total number of all invasive cancers excluding Non-Melanoma Skin Cancer registered in the Mid-West area between 2018-2020 was 6,222 which accounts for 8.5% of the national figure (72,980).



As part of the Organisation of European Cancer Institutes (OECI) accreditation process at UL Hospitals Group, we are currently in the process of hiring a data scientist. This will allow us to develop a database across all tumour sites within UL Hospitals Group. This will enable us to collect data locally and allow for greater access to information on incidence and staging across all tumour groups.

Please see below the National Cancer Registry age-standardised estimates of net survival for colorectal, lung and breast cancer in the Mid-West health region between 2014-2018. Please note, the Mid-West region includes all patients diagnosed with cancer residing in Clare, Limerick and North Tipperary regardless of where they were diagnosed or treated and not necessarily patients attending UL Hospitals Group services.

Cancer type	Region	Years	Net Survival	Difference
Colorectal	National	2014-2018	65.9%	
Colorectal	Mid-West RHA	2014-2018	64.4%	-1.5%
Cancer Type				
Lung	National	2014-2018	24.3%	
Lung	Mid-West RHA	2014-2018	17.4%	-6.9%
Cancer Type				
Breast	National	2014-2018	88.2%	
Breast	Mid-West RHA	2014-2018	81.6%	-6.6%

Source for national survival estimates: *Cancer in Ireland 1994-2020: Annual Statistical Report of the National Cancer Registry 2022*

The new data support function as outlined above will enable UL Hospitals Group patient data to be collected. It is also important to note that this data applies to patients treated up until 2018 only.

The Cancer Inequalities Report for Ireland 2004-2018 measures differences in cancer incidence, five-year survival and stage at presentation between populations living in the most and least deprived areas in Ireland between 2014-2018. The Deloitte Report on Patient Flow published by UL Hospitals Group last year sets out a number of demographic factors that are driving demand for unscheduled care in our region. This includes a population that is older than average and a population that contains high pockets of social deprivation around Limerick city. Similar demographic factors influence demand for cancer services.

A range of potential factors contribute to disparities across the cancer continuum, including differences in general health, exposure to particular risk factors, health-seeking behaviour (i.e. awareness of symptoms, participation in screening and presentation at GP services, influencing early detection), access to healthcare, or other factors that may be linked to socioeconomic or geographic factors.

The report can be accessed in full at the link below: https://www.ncri.ie/sites/ncri/files/pubs/cancer-inequality-report-2016_0.pdf

C. Cowan, CEO, UL Hospitals Group

W106Q3721	There has been no Audiology or Ophthalmology testing for toddlers and young children in school for at least five years. How many children (by age) are waiting to be (a) tested and (b) see consultants in both therapies? How many are waiting over a year for an appointment? When will the school screening /testing be reinstated? Are their plans for a National Eye and Ear Screening Programme for Children?	Clr M Howard
Under the National Eye & Ear Screening Programme for Children, the Public Health Nurse (PHN) School Screening team provide vision and hearing screening to all children in Junior Infants in Primary School in Co. Clare (whose parents/guardians have consented to the screening).		

The Director of Public Health Nursing (DPHN) has confirmed that this screening has not been discontinued and was facilitated throughout the pandemic in line with the government restrictions and guidelines in place at the time. When the School Screening Team was not permitted to attend Primary Schools, the assessments were carried out in Health Centres, ensuring that the children were screened at the optimum time and referred appropriately.

The DPHN has confirmed that the following number of children were screened by the PHN School Screening Team in the past five years:

No. of visual/hearing assessments carried out by the PHN School Screening Team in Co. Clare					
Junior Infants by Academic year	2018/2019	2019-2020	2020-2021	2021-2022	2022-2023*
No. of visual assessments carried out	1735	1536	1646	1605	1587
No. of hearing assessments carried out	1739	1537	1651	1582	1737

*The vision and hearing screening for school year 2022/2023 is in progress and will be completed in July 2023. Therefore, the figures outlined in the above table for this period will increase.

The DPHN has advised that there has been a notable increase in the school going population in recent years. A number of families who have been displaced from their native countries are being accommodated in Co. Clare and these children continue to be integrated into Primary Schools across the county.

Following screening by the PHN School Screening Team, the team will forward a direct referral to the Primary Care Audiology & Ophthalmology services for those children who require an assessment by the service.

Outlined in the table below are the number of children who are awaiting assessment by the Primary Care Audiology & Ophthalmology services as requested:

Primary Care Ophthalmology Services:

Age of child	No. of children awaiting assessment @ 31/05/2023	No. of children waiting 52 weeks and over for assessment at 31/05/2023
0-4 years	59	29
5-17 years	305	173

Primary Care Audiology Services:

Age of child	No. of children awaiting assessment @ 31/05/2023	No. of children waiting 52 weeks and over for assessment at 31/05/2023
0-4 years	79	13
5-17 years	236	146

Maria Bridgeman, Chief Officer, CHO3

W106Q3722	Why is there a shortage of Dentists when it comes to Medical Card patients in County Mayo?	Clr J O'Hara
------------------	---	---------------------

The DTSS Dental Treatment Services Scheme allows Medical Card patients to access a limited menu of dental treatments.

A list of contracted private dentists is provided to Medical Card patients on request, with contact details.

The capacity of such practices does not meet the demand.

The factors impacting on access are:-

- Difficulties recruiting Dentists and Dental Nurses.
- An ongoing dispute over fees.
- An increase in demand in all counties

The numbers of contractors operating the scheme has fallen due mainly to retirements and resignations in Co. Mayo. The PCRS is currently validating the list, by the end of June this exercise will demonstrate how many contractors are active. An adjustment to the fee structure in 2021 did little to attract new contractors or increase DTSS activity in Co. Mayo. Access to Dentists in Co. Mayo will continue to be a serious challenge until there is an increase in capacity via recruitment of Dentists and Dental Nurses.

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3723	What is the up-to-date position to the extension at Ballina District Hospital.	Cllr J O'Hara
------------------	---	----------------------

The scope of the proposed project at Ballina District Hospital and the overall masterplan capacity requirements for the site and how it might be best achieved are currently under review. This is in the context of ensuring for the future provision of additional and not just replacement capacity in Mayo for community services to include rehabilitation for the wider population and older people as well as the ongoing wider community bed capacity planning. Local engagement between service and estates personnel is planned over the summer months with a view to progressing this work and putting forward an updated project proposal in September 2023 for national consideration for inclusion in the HSE Capital Plan 2024.

Joe Hoare, Assistant National Director, HSE Capital & Estates

W106Q3724	Can 24/7 GP cover be provided in a Medical Centre in Ballina in order to triage patients and ease the numbers travelling to the ED Department in Mayo University Hospital?	Cllr J O'Hara
------------------	---	----------------------

A 24/7 GP service is available in Ballina as in all areas of Community Healthcare West. The service in Ballina is provided during normal working hours, Monday to Friday, by the GPs in the town. Outside of normal working hours i.e. from 6.00pm to 8.00am Monday to Friday and 24 hours per day on Saturdays, Sundays and Bank Holidays, the service is provided by Westdoc, the GP Out of Hours service. Referrals to the Emergency Department at Mayo University Hospital, in respect of patients seen by GPs, is based on the clinical judgement of the individual GP. It is not a requirement to be assessed by a GP before attending an Emergency Department so some patients attend such departments without seeing a GP.

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3725	Can the HSE inform the members what is the waiting time for patients in Co Roscommon suffering with Cataracts to have them removed.	Cllr T Ward
------------------	--	--------------------

Saolta have a total of 1000 patients waiting for cataract surgery across the group with breakdown by hospital site below.

Cataracts Surgery	Count of MRN
Galway University Hospitals	551
Letterkenny University Hospital	22
Sligo University Hospital	427
Grand Total	1000

Of the 1000 patients awaiting treatment, 83 have their area of residence listed as Roscommon.

Cataracts Surgery	0-3 Mths	3-6 Mths	6-9 Mths	9-12 Mths	12-15 Mths	15-18 Mths	24 + Mths	Grand Total
Roscommon	34	23	9	7	3	2	5	83
Grand Total	34	23	9	7	3	2	5	83

A. Cosgrove, COO, Saolta University Health Care Group

W106Q3726	Can the HSE inform the members if they could extend the opening hours of the minor injuries unit at Roscommon County Hospital.	Cllr T Ward
------------------	--	--------------------

A review of all 13 Injury Units around the country has recently been completed. HSE Operations: Integrated Planning Full Report Review of Injury Units April 2023 has recommended that all 13 Injury Units should open 8am to 8pm. At present only four Units out of 13 open 12 hours a day (8 to 8) across the 7 days and Roscommon is one of those four. The 8am to 8pm working recommendation was based on a review of activity within the thirteen Injury Units. The aim of this is to standardise access to treatment across the country – “In order to ensure there is a clear and simple message to the public, it was recommended to move to a standard opening hours of 8am – 8pm, 7 days per week.”

T. Canavan, CEO, Saolta University Health Care Group

W106Q3727	Can the HSE inform the members and give update on the new rehab unit at Roscommon County Hospital.	Cllr T Ward
------------------	--	--------------------

The HSE Capital Plan includes for the development of a Rehabilitation Unit at Roscommon University Hospital. This project is likely to take a number of years to complete. Following completion of the Stage 1 Preliminary Design for the proposed Rehabilitation Unit a number of options were identified in relation to the siting of that Unit within the Campus. Further consideration has since been given to the overall infrastructural requirements at the hospital in light of future activity projections and the benefits of having modern clinical spaces which meet the latest infection control standards. As a result, prior to finalising the exact location and footprint for the new Rehabilitation Unit it is intended to review the overall site masterplan for Roscommon University Hospital to ensure it will allow for orderly development of sufficient new build facilities and refurbishment of any vacated spaces to meet all the envisaged accommodation needs of the hospital into the future. For example the siting of the intended Rehab Unit will need to allow for the development of other infrastructure in future years such as a replacement medical ward block. The development of a spatial plan to cater for all future developments is a priority for progress before the end of 2023. This would then enable the Rehab project to be progressed onwards through design and hopefully achieve planning permission in 2024.

Joe Hoare, Assistant National Director, Capital & Estates West

W106Q3728	Can the HSE inform the members how many children have to go outside the county of Roscommon to avail of range of services for children with Autism, Speech and Language and Disabilities.	Cllr T Ward
------------------	---	--------------------

Children in Co Roscommon are support by two teams:
 CDNT8 covers East Galway and South Roscommon
 CDNT9 covers Roscommon - Ballaghaderreen, Boyle, Castlerea, Glenamaddy, Roscommon and Strokestown.

CDNT8 is temporarily based in Loughrea, Co Galway. Children from South Roscommon may need to travel to Loughrea for appointments, but the team do travel to Roscommon for appointments as much as possible (this includes Athlone PCC, home visits, school visits etc). HSE Estates are actively looking for a more centrally based site for CDNT8. Once this base is secured, Children will no longer have to travel to Loughrea

CDNT9 meet children on their caseload in Co Roscommon.

The only other time children might avail of services outside Co Roscommon is when they are linked with an external agency for an assessments. In these situations families are asked if they are able to travel to Galway. If not, they will be met in Roscommon (Castlerea).

Primary Care Services;-

Speech and Language	Occupational Therapy	Psychology
0	0	13

<p>No Children are sent outside the county.</p>	<p>OT do not out source Occupational Therapy to private service or services in other counties.</p>	<p>Since November 2022 to date, 13 children from the Primary Care Child Psychology Service in Roscommon have been offered an Autism assessment in County Mayo. These assessments were provided by a Private Assessment Service on behalf of the Mayo/Roscommon Primary Care Services.</p>
---	--	---

J Fitzmaurice, Chief Officer, Community Healthcare West

<p>W106Q3729</p>	<p>Can I be provided with details of the total number of beds available in Ennis Hospital, the average length of occupancy and the number and length of time beds are vacant.</p>	<p>Clr C Murphy</p>
-------------------------	---	----------------------------

Ennis Hospital's bed complement is made up of 50 inpatient beds. Patients are admitted to Ennis Hospital via the Medical Assessment Unit, Injury Unit and transfers from University Hospital Limerick for step-down care.

The average length of stay for patients attending Ennis Hospital during 2022 was 2.1 days. In addition, during 2022 Ennis Hospital had a bed occupancy rate of 96%. UL Hospitals Group, including Ennis Hospital, routinely operates in excess of the international norms on bed occupancy.

For example, for the first quarter of this year, Ennis Hospital operated at 105% capacity as surge capacity was opened to accommodate the increase in acutely unwell medical inpatients associated with a wave of respiratory illnesses over the winter period.

We are committed to investing in Ennis Hospital to improve patient care. For example, the new Outpatients Department at Ennis Hospital opened on Monday, March 29th 2021. The new OPD, located at an off-site facility on the Kílrush Road has 15 clinical rooms, in addition to a phlebotomy bay, four waiting areas, offices and staff changing rooms. During 2022, Ennis OPD saw 16,018 (new and review) patients.

A theatre upgrade was also approved for Ennis Hospital as part of the HSE's Capital Programme for 2022. The approved capital budget for this project is €9.95m. It is envisaged that an application for planning permission will be submitted for this project in July 2023.

Ennis Hospital also provides a range of day surgery services including colorectal surgery, breast day-case procedures, gynaecology surgery, dental surgery, general surgery, vascular surgery, dermatology and urology diagnostic assessments and surgery.

In addition, Ennis Injury Unit had its busiest year to date last year. During 2022, a total of 11,854 patients attended the service there, representing a 25% increase on 2021. To date in 2023, 5,831 patients have attended our Injury Unit at Ennis Hospital. The Medical Assessment Unit in Ennis Hospital is open from 8am-8pm seven days per week. Attendances at Ennis MAU grew from 6,830 in 2021 to 7,768 last year, representing an increase of 14%. To date, 3,640 patients have attended the MAU at Ennis Hospital.

C. Cowan, CEO, UL Hospitals Group

W106Q3730

With regards to the June BH weekend, Can I be provided with an update as to the daily numbers attending the ED in UHL, the numbers waiting on trolleys in UHL, the number of callouts within Clare from the NAS and details of how long the ambulance bases in West Clare were without a resource onsite, the number of calls to Shannondoc and details of occupancy levels in the MAU in Ennis

Cllr C Murphy

Please see below for the total number of Emergency Department presentations over the June Bank Holiday weekend. Also included below are the number of admitted patients who waited on a trolley for an inpatient bed outside of a designated bed space as of 8am on those days.

Date	Total ED presentations	Trolley Numbers
03/06/2023	184	57
04/06/2023	174	24
05/06/2023	193	34

In addition, please see below for the number of slots utilised at Ennis MAU for the same period. The Medical Assessment Unit in Ennis Hospital treats patients referred by GPs, ShannonDoc and NAS paramedics. It is important to note that this is not a walk-in service and referrals can only be accepted when patients meet the agreed clinical criteria.

Date	Ennis MAU
03/06/2023	15
04/06/2023	13
05/06/2023	13

In advance of the Bank Holiday weekend, UL Hospitals Group in collaboration with Mid-West Community Healthcare encouraged members of the public to explore all available healthcare options before attending the ED including Injury Units, Medical Assessment Units, GP out of hours services and local chemists. These messages were conveyed to the public by way of local media and on our social media channels.

Additional staff were also rostered by UL Hospitals Group and Mid-West Community Healthcare to ensure that patient flow and access to healthcare facilities was maximised over the long weekend.

For example, an additional complement of triage staff rostered in the Emergency Department supported efforts to reduce time between presentation and discharge or the decision to admit.

We also rostered additional staff across a number of disciplines, including radiology to improve inpatient and ED diagnostics over the weekend, and additional allied health professions (Occupational Therapy, Medical Social Work) who assisted with facilitating patient discharges on Bank Holiday Monday.

C. Cowan, CEO, UL Hospitals Group

There were a total of 113 emergency calls activated on over the five day period (2nd – 6th June 2023) within county Clare, out of this 97 calls were not stopped which would indicate that transport to hospital was completed in these cases.

NAS do not currently measure the time spent away from a base.

Niall Murray, General Manager Area Operations, NAS.

CH03: ShannonDoc	Date	No. of Contacts to GP OOH Service - Triage Only	No. of Contacts to GP OOH Service - Treatment Centre	No. of Contacts to GP OOH Service - Home Visit	No. of Contacts to GP OOH Service - Other	Total Number of GPOOH contacts for period	No. of Contacts referred to - ED	No. of Contacts age Breakdown - unknown age	No. of Contacts age Breakdown - 0 to 16 years	No. of Contacts age Breakdown - 16 to 65 years	No. of Contacts age Breakdown - 65 years or older
Friday	02/06/2023	26	82	8	22	138	19	0	53	56	29
Saturday	03/06/2023	80	338	19	84	521	62	1	183	214	123
Sunday	04/06/2023	49	326	19	86	480	48	0	177	198	105
Monday	05/06/2023	83	349	22	88	542	60	1	193	236	112

Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare

W106Q3731

Can I be provided with clarity as to the opening hours of the MAU and LIU in Ennis, and the updated pathways/protocols as to accessing those facilities, for the public, the NAS and for GPs

Clr C Murphy

Ennis Injury Unit is open every day for minor injuries in adults and children aged 5 and upwards from 8am – 8pm. The Injury Unit is a walk-in service, patients do not need an appointment. Patients can also be referred by their GP.

Patients attending the Injury Unit in Ennis benefit from the expertise and care of a consultant-led team of doctors, Registered Advanced Nurse Practitioners (RANPs), nurses, and other healthcare professionals who are highly experienced in the treatment of injuries that may not be life-threatening, but which nonetheless require medical attention and treatment.

Ennis Injury Unit had its busiest year to date last year. During 2022, a total of 11,854 patients attended this service, representing a 25% increase on 2021. To date in 2023, 5,831 patients have attended our Injury Unit at Ennis Hospital.

The Medical Assessment Unit in Ennis Hospital is open from 8am-8pm seven days per week. The Medical Assessment Unit in Ennis Hospital treats patients referred by GPs, ShannonDoc and NAS paramedics. MAU referrals can only be accepted when patients meet the agreed clinical criteria.

As you may be aware, recent funding approval of €5.2m by the HSE's National Acute Division allows all ULHG MAUs to open seven days per week.

Recruitment is ongoing for an additional 51.45 WTE across a number of specialties including medical doctors, nurses, allied health professionals, health and social care professionals and administrative staff.

As more of these staff take up post, the number of additional slots available for medical assessment will gradually increase. Once all staff are in post, the overall effect of this investment will be the creation of an additional 7,176 slots per annum across the three sites.

Separately, additional staff and targeted initiatives such as the NTPF has enabled Ennis MAU to significantly increase the number of assessment slots available over the past two years. For example, attendances at Ennis MAU grew from 6,830 in 2021 to 7,768 last year, representing an increase of 14%. To date in 2023, 3,640 patients have been treated in Ennis MAU.

C. Cowan, CEO, UL Hospitals Group

112/999 patients can be transported directly to the Medical Assessment Unit in Ennis Hospital providing:

- The patient meets the agreed clinical criteria
- The patient has been accepted by the MAU Physician in Ennis.

This pathway for Ennis MAU commenced at 0800 on January 9th 2023

If the patient is accepted by the receiving physician, transport the patient directly to Ennis MAU. If the patient is not deemed suitable, the patient should be transported to the nearest Emergency Department as per normal procedure.

Niall Murray, General Manager Area Operations, NAS.

W106Q3732	How many agency staff (WTE) are currently employed in Sligo University Hospital. The reply to include the number in each category.	Clr D Bree
------------------	--	-------------------

Agency Equivalent WTE as at 30th April 2023:

Category	SUH Agency WTE April 2023
HSCP	0.52
Medical Dental	9.41
Mgmt Admin	0.52
Nursing/ Midwifery	12.16
Patient & Client Care*	56.23
Support Services	
Grand Total	78.84

* Patient & Client Care Agency April 2023 = All Agency are HCA 56.23 wte equivalent in April 2023 (predominantly Patient Specials as/when required)

T. Canavan, CEO, Saolta University Health Care Group

W106Q3733	Noting that arrangements are being made by the HSE to develop:- (A) a Primary Care Centre at Seamus Quirke Road, Galway; (B) an Integrated Care Hub and Primary Care Service at Knocknacarra, Galway, can I be advised what services will be provided in each location; the distance between both locations and whether consideration has been given to locating all the services in one location.	Clr D Bree
------------------	--	-------------------

The table below outlines the listing of services to be accommodated in each of the proposed buildings;-

Proposed Galway City West PCC	Knocknacarra Ambulatory Care Hub/PCC
Shantalla and City Centre PCT's*	Salthill and Knocknacarra PCT's*
Community Mental Health teams x 4	Paediatric Network team
Mental Health Day Hospital	West Galway Community Health Network
Community Dental services	Integrated Care Team for Older Persons
Community Ophthalmology services	Integrated Care Team for Chronic Disease
Diagnostic Hub to include CT, MRI, X Ray, Dexa, Ultrasound	Community Medical Doctors and Home support
Ambulance base	Diagnostics (X-Ray, Echocardiography, Spirometry and Pulmonary Function testing)
Community services administration base	Health and Wellbeing support

* Note: PCT services to include Public Health Nursing, Occupational Therapy, Physiotherapy, Speech and Language Therapy, Dietetics, Social Work and administration support.

The distances between the two buildings is 2.1km. Community Healthcare West and HSE Estates carried out an option appraisal on potential solutions to meet accommodation needs for developing Enhanced Community Care services (Integrated Care Teams for Chronic Disease/Older Persons and Community Health Networks).

This included the potential to accommodate the ECC services within proposed Galway City West PCC, the schedule of accommodation for the PCC was already quite significant and the site did not have capacity to accommodate the scale of accommodation required for an Integrated Care Hub. Alternative solutions were examined within HSE sites and within the open market and the Knocknacarra building proposal has been progressed as the agreed solution. Community Healthcare West and HSE Estates have been working to progress Primary Care Facilities on the West of Galway City for some time and welcome the opportunity to develop the above buildings to support the delivery of the range of current and developing services.

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3734

How many locum consultants were employed in each Saolta hospital in March 2022 and in March 2023. The breakdown to include speciality.

Clr D Bree

Saolta Hospital Group - March 2022

Saolta Hospital Group - March 2023

Galway University Hospitals

Department	Vacant Posts filled with Locum On Payroll	Vacant Posts filled with Locum on Agency
Medicine	21	0
Surgery	6	2
Orthopaedics	2	0
Obs/Gynae	2	0
Paediatrics	4	0
Anaesthetics	6	0
ED	1	0
Radiology	3	0
Pathology	3	0
Total	48	2

Galway University Hospitals

Department	Vacant Posts filled with Locum On Payroll	Vacant Posts filled with Locum on Agency
Medicine	17	1
Surgery	6	2
Orthopaedics	3	0
Obs/Gynae	1	0
Paediatrics	2	0
Anaesthetics	5	0
ED	2	0
Radiology	4	1
Pathology	2	0
Total	42	4

Mayo University Hospitals

Department	Vacant Posts filled with Locum On Payroll	Vacant Posts filled with Locum on Agency
Medicine	1	2
Surgery	0	0

Mayo University Hospitals

Department	Vacant Posts filled with Locum On Payroll	Vacant Posts filled with Locum on Agency
Medicine	2	1
Surgery	0	1

Orthopaedics	0	0
Obs/Gynae	0	0
Paediatrics	1	0
Anaesthetics	1	0
ED	2	0
Radiology	0	0
Pathology	0	0
Total	5	2

Orthopaedics	1	0
Obs/Gynae	1	0
Paediatrics	1	0
Anaesthetics	0	0
ED	2	0
Radiology	0	0
Pathology	0	0
Total	7	2

Roscommon University Hospitals		
Department	Vacant Posts filled with Locum On Payroll	Vacant Posts filled with Locum on Agency
Medicine	2	0
Surgery	0	0
Orthopaedics	0	0
Obs/Gynae	0	0
Paediatrics	0	0
Anaesthetics	2	0
ED	0	0
Radiology	1	0
Pathology	0	0
Total	5	0

Roscommon University Hospitals		
Department	Vacant Posts filled with Locum On Payroll	Vacant Posts filled with Locum on Agency
Medicine	2	0
Surgery	0	0
Orthopaedics	0	0
Obs/Gynae	0	0
Paediatrics	0	0
Anaesthetics	1	0
ED	0	0
Radiology	0	0
Pathology	0	0
Total	3	0

Sligo University Hospitals		
Department	Vacant Posts filled with Locum On Payroll	Vacant Posts filled with Locum on Agency
Medicine	4	0
Surgery	0	0

Sligo University Hospitals		
Department	Vacant Posts filled with Locum On Payroll	Vacant Posts filled with Locum on Agency
Medicine	3	2
Surgery	1	3

Orthopaedics	0	0
Obs/Gynae	0	2
Paediatrics	1	5
Anaesthetics	4	5
ED	1	0
Radiology	0	0
Pathology	0	0
Total	10	12

Orthopaedics	1	0
Obs/Gynae	1	2
Paediatrics	0	0
Anaesthetics	5	7
ED	1	0
Radiology	0	0
Pathology	0	0
Total	12	14

Portiuncula University Hospitals		
Department	Vacant Posts filled with Locum On Payroll	Vacant Posts filled with Locum on Agency
Medicine	2	0
Surgery	0	0
Orthopaedics	0	0
Obs/Gynae	0	1
Paediatrics	0	0
Anaesthetics	0	1
ED	0	0
Radiology	0	0
Pathology	0	0
Total	2	2

Portiuncula University Hospitals		
Department	Vacant Posts filled with Locum On Payroll	Vacant Posts filled with Locum on Agency
Medicine	3	0
Surgery	1	0
Orthopaedics	0	0
Obs/Gynae	0	1
Paediatrics	0	1
Anaesthetics	0	0
ED	0	0
Radiology	0	0
Pathology	0	0
Total	4	2

Letterkenny University Hospitals		
Department	Vacant Posts filled with Locum On Payroll	Vacant Posts filled with Locum on Agency
Medicine	2	3
Surgery	0	0
Orthopaedics	1	1

Letterkenny University Hospitals		
Department	Vacant Posts filled with Locum On Payroll	Vacant Posts filled with Locum on Agency
Medicine	1.5	3
Surgery	1	0
Orthopaedics	1	0

Obs/Gynae	0	1	Obs/Gynae	2	1
Paediatrics	1	0	Paediatrics	0	0
Anaesthetics	2	2	Anaesthetics	2	1
ED	2	0	ED	2	1
Radiology	3.5	0	Radiology	4	0
Pathology	0	0	Pathology	0	0
Total	11.5	7	Total	13.5	6

T. Canavan, CEO, Saolta University Health Care Group

W106Q3735	Noting that the Cregg management is agreeable to renegotiate the current lease with the HSE to include the hydrotherapy pool at Cregg, Co Sligo, can we be advised as to the outcome of the negotiations; and further can we be advised as to the current status of the hydrotherapy pool in Our Lady's Hospital, Manorhamilton, has it been reopened and is it being used to full capacity.	Clr D Bree
------------------	--	-------------------

The Estates Manager for the HSE North West met with the owner of the Cregg campus on the week of May 29th 2023 to discuss the current lease agreement the HSE has for a small portion of the campus and to look at the possibility of leasing the hydrotherapy pool on the campus. The owner has requested a proposal from the HSE outlining how many individuals accessing disability services are seeking to access the pool and how many days per week the pool will require to be opened. The HSE is currently working on this proposal and will issue a response to the owner of the Cregg campus in the coming weeks. It is important to note that the owner of the Cregg campus has highlighted that there are significant maintenance works required on the hydrotherapy pool before it would be available for use. A pool attendant would also need to be employed by the owner of the Cregg campus who would be responsible for the management of the hydrotherapy pool.

Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

The Hydrotherapy pool repair works at Manorhamilton are completed and the pool will be available for use from July. As indicated previously, the Hydro pool is available for other service users on Tuesday and Thursday 3.30pm to 4.30pm and Friday 2pm to 4pm.

A. Cosgrove, COO, Saolta University Health Care Group

W106Q3736	Can the Forum be provided with the details on the cumulative total number of nights of overnight centre- based and overnight home-based respite care provided by agency partners for children and adults with disabilities annually in Co Galway since 2018? How many nights were facilitated by the respite and how many families benefitted?	Clr J Connolly																												
	Children																													
	<table border="1"> <thead> <tr> <th rowspan="2">Agency</th> <th rowspan="2">Year</th> <th colspan="2">Centre Based</th> <th colspan="2">Home Based</th> </tr> <tr> <th>No of Nights</th> <th>No of Families</th> <th>No of Nights</th> <th>No of Families</th> </tr> </thead> <tbody> <tr> <td>Ability West</td> <td>2018</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Ability West</td> <td>2019</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Ability West</td> <td>2020</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Agency	Year	Centre Based		Home Based		No of Nights	No of Families	No of Nights	No of Families	Ability West	2018					Ability West	2019					Ability West	2020					
Agency	Year			Centre Based		Home Based																								
		No of Nights	No of Families	No of Nights	No of Families																									
Ability West	2018																													
Ability West	2019																													
Ability West	2020																													

Ability West	2021				
Ability West	2022				

Agency	Year	Centre Based		Home Based	
		No of Nights	No of Families	No of Nights	No of Families
Brothers of Charity	2018				
Brothers of Charity	2019				
Brothers of Charity	2020				
Brothers of Charity	2021				
Brothers of Charity	2022				

Adults

Agency	Year	Centre Based		Home Based	
		No of Nights	No of Families	No of Nights	No of Families
Ability West	2018				
Ability West	2019				
Ability West	2020				
Ability West	2021				
Ability West	2022				

Agency	Year	Centre Based		Home Based	
		No of Nights	No of Families	No of Nights	No of Families
Brothers of Charity	2018				
Brothers of Charity	2019				
Brothers of Charity	2020				
Brothers of Charity	2021				
Brothers of Charity	2022				

Agency	Year	Centre Based		Home Based		
		No of Nights	No of Families	No of Nights	No of Families	
Brothers of Charity Services Ireland - WEST REGION	Adult	2018	2745	62	2554	46
Brothers of Charity Services Ireland - WEST REGION	Adult	2019	4269	56	2633	62

Brothers of Charity Services Ireland - WEST REGION	Adult	2020	2715	68	2431	43
Brothers of Charity Services Ireland - WEST REGION	Adult	2021	2805	66	2819	37
Brothers of Charity Services Ireland - WEST REGION	Adult	2022	3974	58	3104	42
Brothers of Charity Services Ireland - WEST REGION	Child	2018	1997	75	198	3
Brothers of Charity Services Ireland - WEST REGION	Child	2019	2096	75	154	6
Brothers of Charity Services Ireland - WEST REGION	Child	2020	1419	60	167	6
Brothers of Charity Services Ireland - WEST REGION	Child	2021	1562	57	167	6
Brothers of Charity Services Ireland - WEST REGION	Child	2022	1582	61	244	9
Ability West	Adult	2018	9562	243	4664	99
Ability West	Adult	2019	9325	209	4095	69
Ability West	Adult	2020	8709	195	3664	60
Ability West	Adult	2021	8063	189	2297	46
Ability West	Adult	2022	7148	236	4136	57
Ability West	Child	2018	1682	51	564	14
Ability West	Child	2019	1939	44	599	11
Ability West	Child	2020	1639	35	197	8
Ability West	Child	2021	1667	40	180	6
Ability West	Child	2022	2124	48	173	5

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3737

In June 2022, the Forum were advised that a new 5 bedded respite house for children with complex medical needs was to be opened in Galway at the end of quarter 1 2023. Has this house been opened and what level of occupancy has been provided by the house since opening?

Clr J Connolly

Under the HSE National Service Plan 2023, Community Healthcare West received funding to provide additional respite. This funding allocated to CHW will support the opening of Summer Lodge in Claregalway.

The HSE continue to engage with a service provider with regard to the development of a site in Craughwell to support both Children and Adults with complex medical needs. The project has undergone a re-evaluation on the basis of need and the requirement to provide more individually based units as opposed to a single centre based service. It is planned to progress this further throughout 2023.

Summer Lodge will provide respite for up to 14 persons supported on a waiting list for centre based respite. It will also support seven people requiring enhanced hours to meet unmet needs. In addition, the service will meet the respite needs of seven 2022 / 2023 School Leavers.

The development will consist of one respite house supporting the provision of four respite beds per night for people with disability and high support complex medical needs whilst also providing a service for young adults with disability and complex autism and behaviours of concern.

Summer Lodge will provide respite services 361 days per year providing an extra 1444 respite bed nights per year.

This respite development has been prioritised on the basis of need. It is acknowledged that there is a requirement for additional respite across both children and adult services. The primary focus is to maximise the current capacity within our service system and we are working with local agencies to scale up the current services wherever possible. In addition we are also looking at alternative respite such as evening supports and weekend supports (day). It is important to note this is funding dependent in line with National Service Plan developments.

The service will be staffed by a team of 13.83 WTE consisting of nurses, support workers and household staff. Recruitment has commenced, however, given the recruitment challenges currently being experienced in the sector it is difficult to give an exact timeframe for opening – likely to be Q4 2023.

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3738

How many of each of the following therapists are employed in Child Disability Network Teams in each of the teams across County Galway? How many positions for therapists are current vacant across each of the teams?

Cllr J Connolly

Employed

	Galway West	Galway City West	Galway City East	Galway City Central & East	Galway North	Galway East/South Roscommon
Occupational Therapists						
Psychologists						
Physiotherapists						
Speech & Language Therapists						
Social Workers						

Vacant Positions

	Galway West	Galway City West	Galway City East	Galway City Central & East	Galway North	Galway East/South Roscommon
Occupational Therapists						
Psychologists						
Physiotherapists						

	Speech & Language Therapists							
	Social Workers							

Employed

	Galway West CDNT 4	Galway City West CDNT 5	Galway City Central & East CDNT 6	Galway North CDNT 7	Galway East/South Roscommon CDNT 8
Occupational Therapists	3.4	5.36	5.7	5.3	2.54
Psychologists	1.9	3.5	5.57	2.9	2.5
Physiotherapists	2.5	2.5	4.3	3.8	1.75
Speech & Language Therapists	5	4.5	7.2	6.5	4.6
Social Workers	0.9	2	2.5	1.7	1.4

Vacant Positions

	Galway West	Galway City West	Galway City Central & East	Galway North	Galway East/South Roscommon
Occupational Therapists	0.4	0	1	2	1
Psychologists	0	0	0	1	0
Physiotherapists	2.5	1	0	0	1.5
Speech & Language Therapists	0	0	1	1	0
Social Workers	0.9	0	0.6	0	0

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3739	Can the forum be provided with the monthly occupancy levels of the Acute Mental Health Facility at GUH for 2022? Can the forum also be advised during which month the nine reported incidents of overcapacity recorded in the mental health commission's annual report occurred? Can the forum also be advised how the centre provided for the accommodation needs of additional patients during the incidents of overcapacity?	Clr J Connolly
------------------	---	-----------------------

Bed Occupancy at AAMHU on a monthly basis in 2022	
Month	Bed Nights
January	1399
February	1340
March	1503
April	1469
May	1495
June	1407
July	1551
August	1568
September	1516
October	1594
November	1394
December	1488
Total Beds Occupied	17724
Total Beds available	18250
Occupancy Rate 2022	97%

The nine reported incidents of overcapacity:

- 1 incident of overcapacity reported in December 22
- 3 incidents of overcapacity reported in October 22
- 3 incidents of overcapacity reported in August 22
- 2 incidents of overcapacity reported in April 22

The centre provided for the accommodation needs of additional patients during the incidents of overcapacity:

Contingency measures in the event of an increased capacity requirement:

- Neighbouring hospitals accept patients if the AAMHU is at capacity
- Senior clinical staff are available 7 days per week to review patients who may be suitable for discharge or periods of leave to create capacity
- Emergency additional accommodation can be provided for a patient at the AAMHU, whilst also maintaining their privacy and dignity, if an urgent need arises
- As a last resort patients wait in A&E until a bed becomes available – wait times depend on a variety of factors which change day to day, most important of which is the level of demand for the service on a specific day.

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3740	Can we have an updated report on the proposed works in the community nursing unit in Ramelton?	Clr C Brogan
------------------	--	---------------------

A strategy has been developed for proposed capital works at Ramelton which involves the replacement of existing single rooms with new ensuite rooms to provide a higher quality environment for residents. A project brief is being finalised for the procurement of a design team with expression of interest to be sought by HSE Capital & Estates in Q3 2023.

Joe Hoare, Assistant National Director, HSE Capital & Estates

W106Q3741	Can we get a updated report on what steps are being proposed to address the delayed discharge times and on-going overcrowding and huge delays at accident & emergencies at Letterkenny University Hospital (LUH) and what steps are being taken by Hospital Management, Ambulance management, Primary care, Now Doc and GPs and also a report on the comparison of LUH to other hospitals within our group?	Cllr C Brogan
------------------	---	----------------------

The Emergency Department has developed a number of Pathways aimed at reducing the patient's time spent in the Emergency Department.

Local Injury Unit - operational since 9th May 2022. A "Purple Pathway" has been established within existing resources, this is an ambulatory stream created in ED which provides a protected space where Advanced Nurse Practitioners and an Emergency Doctor Registrar review patients with minor injury assessment and provide treatment. This has been working well with direct streaming from triage. LUH in conjunction with CHO1 has made a submission for further funding to extend the opening hours of this local injury unit as part of the Winter Plan.

Portering – An additional porter has been rostered to the Emergency Department to assist with admission and timely movements for diagnostics.

PALS –Patient Advice & Liaison Service – Two posts have been recruited. One PALS officer has commenced in LUH with the second currently awaiting clearance.

Frailty at the Front Door service is also in place in the Emergency Department. This teams assess patients over the age of 75 years with the aim to identify patients in need of frailty support or/and further assessment. It carries out a comprehensive assessment on older people reviewing alternative pathways to avoid admission or to allow early discharge.

The Emergency Department has also developed a number of Admission Avoidance Pathways including a Stable Chest Pain Pathway and a Stable Upper GI Bleed Pathway.

Chest Pain Pathway- operational since 25th April 2022. The Cardiac Investigation Department have ringfenced 2 slots for Exercise Stress Tests per day. This streamlines the pathway for patients presenting at ED with chest pains and has resulted in a reduction of admissions.

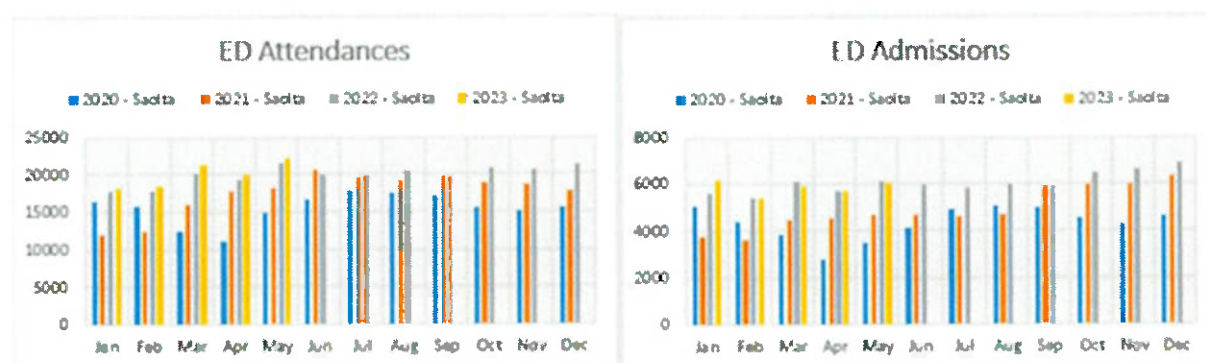
Stable Upper GI Bleed- operational since 20th May 2022. Patients are triaged as per the Glasgow-Blatchford Score, which stratifies upper GI bleeding patients who are 'low-risk' and candidates for outpatient management.

The Pathfinder Service was also introduced recently. This service assesses lower acuity ambulance calls in the Community and arranges/recommends alternative health care whenever appropriate. The new service aims to safely keep vulnerable older people who have phoned 999/112, in their own home rather than transporting them to the ED for assessment. A specific team of staff are employed to deliver this service including Advanced Paramedics (AP), Occupational Therapists (OT) and Physiotherapists (PT); will include a Rapid Response Vehicle (RRV) and an Electronic Patient Care Record (EPCR).

LUH is working closely with both Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo) and NAS to ensure all available care options are utilised and patients are directed to and provided with the proper care pathway. These

is also significant work taking place to progress discharges and treat patients in the community. This work includes liaising with Community-Based Health Care Professionals about Delayed Transfers of Care from Letterkenny University Hospital, development of a future OPATs service and the Community Intervention Team Referrals.

This conjoined working is well established and has led to a wide range of care options which are further outlined below.



A. Cosgrove, COO, Saolta University Health Care Group

Donegal Primary Care interface working with Letterkenny University Hospital (LUH) to improve patient flow.

Community Diagnostics

- Some 4,900 X-rays have been carried out at the five newly-refurbished community X-ray facilities to date this year. Plain film X-rays are being completed for repeat outpatient appointments to support care closer to the person's home.
- Unscheduled Care meetings are attended by senior staff from Primary Care, including the Head of Service CHO1, Donegal General Manager, Director of Public Health Nursing and members of the Community Intervention Team (CIT), Integrated Care Programme for Older Persons (ICPOP) and Chronic Disease Management (CDM) team to review the flow of unscheduled care in LUH.

Palliative Care In-reach and Outpatients

- Consultants from Donegal Hospice carry out daily rounds in LUH and additional outpatients clinics are held with the LUH Oncology team.
- Integrated Discharge Planning Rounds: Primary Care staff, ICPOP, CIT and PHN services are represented in the weekly integrated discharge planning rounds. The Donegal Primary Care General Manager's office also reviews the daily lists of the Delayed Transfers of care.

Community Intervention Teams (CITs)

- The CITs facilitate acute, short-term nursing interventions, including wound management, oncology care, medication administration and management, patient education and support, to promote self-management of catheters and stoma care.
- CIT staff attend a weekly Integrated Discharge Round (IDR) in LUH to identify patients who are suitable for early discharge and who meet the criteria for CIT care. The IDR also promotes early discharge planning for complex patients and creates a clear plan of care for the PC teams involved in the patient's discharge.

Chronic Disease Management Donegal

- Cardiology – Heart Failure – Primary Care nursing staff, i.e. Advanced Nurse Practitioner (ANP), Clinical Nurse Specialist (CNS); Diagnostic ECHO service - direct referral from GPs
- Cardiac Rehab Coordinator supported by Primary Care physiotherapists
- Supporting LUH cardiac rehab service as there is no clinical governance to commence community service at present.

Diabetes

- Dietetics – supported by Primary Care ANP and CNS; Podiatry service, Dietetic service; Type 2 Diabetes Digital Media 1:1 consultations operational; DESMOND education, Diabetes Prevention Programme and Best Health weight management programmes.
- Integrated Endocrinology Consultants in post

Respiratory

- Assessment clinics – inhaler review, airways clearance
- Pulmonary Rehabilitation
- O2 clinics
- Non-acute respiratory symptoms management clinic
- Pulmonary Rehabilitation education

Community Diagnostic Heart Failure services

- Reduction in LUH Cardiac out-patient wait list of 114 people as a result of ongoing review of LUH OPD Cardiology list by the Cardiac Physiologist with notifications to the Cardiac Investigations Department, LUH to advise of those patients who have had an ECHO completed.

NowDOC

- In times of a surge additional GP's & Nursing staff are put in place.
- Additional GP's & Nursing staff are also put in place for Bank Holidays and large scale events.

Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

Continuous extensive engagement continues on a daily basis between the National Ambulance Service (NAS) and Hospitals in relation to ambulance to hospital (A2H) delays. In addition various steps have been introduced to alleviate the issue. The steps include:

- **Hospital Ambulance Liaison Person (HALP)** - The aim of this role is to work between the hospital and the ambulance service in order to have ambulance turned around in a more efficient manner. To date we have seen a positive impact for this role and will continue to monitor its progress over the coming period as per question W106Q3743 this role has been extended for the remainder of 2023 and we are seeking permanent funding for same.
- **Fit2Sit** – where patients are capable of sitting, then crews will focus on finding a safe place for the patient and effecting a clinical handover as quickly as possible
- **Rapid Handover Protocol** – the current arrangements are not effective and in this regard, crews will be provided with revised protocols on how to be more proactive in effecting patient disposition at the Emergency Department in a timely manner. The Rapid Handover Protocol will provide for red flagging of sites where A2H delays present a real risk of harm to patients awaiting a 999 response in the community.
- **NAS Cohorting** – where necessary and in the absence of clear clinical governance of patients awaiting clinical handover in the Emergency Department, NAS will request staff to engage in cohorting of patients at Emergency Departments to facilitate release of an emergency ambulance to respond to an awaiting 999 call. Crews will be provided with guidelines on how to do this safely.

JJ McGowan, Chief Ambulance Officer - West

W106Q3742

Can we get an updated report on the Donegal projects included in the capital plan 2023 building and equipment and a timeframe for the programme of investment in our health services?

Clr C Brogan

Please find below capital projects report in tabular form. The works / projects below form part of an ongoing multi annual programme of investment in health services infrastructure in Co. Donegal. Major projects are typically cash flowed over several years from initiation to completion.

Facility	Programme	Sub-Programme	Brief Description of Project	Current Stage (June 2023)
Donegal Town	Community Care	Primary Care	Primary Care Centre – Operational Lease	Operational
Newtowncunningham	Community Care	Primary Care	Primary Care Centre - HSE own build	Operational
Letterkenny University Hospital	Acute	Other Acute	Renal Dialysis expansion. Increasing Capacity from 14 to 21.	Detailed Design
Buncrana	Community Care	Primary Care	Primary Care Centre - Operational lease	Operational
Dungloe	Community Care	Primary Care	Primary Care Centre - Operational Lease	Design Feasibility
Letterkenny University Hospital	Acute	Infrastructural Upgrade / Maintenance	Fire Safety Upgrade - Fire Alarm upgrade & new Emergency lighting system.	Construction
Letterkenny University Hospital	Acute	Infrastructural Upgrade / Maintenance	Fire Safety Works to Medical Ward Block	Detailed Design
Cleary Centre, Donegal Town	Community Care	Disability	New ID Adult Day Services facility	Appraisal / Project Brief
Killybegs Primary Care Centre	Community Care	Primary Care	Primary Care Centre - Operational lease	Appraisal
Letterkenny University Hospital	Acute	Infrastructural Upgrade / Maintenance	Electrical Infrastructure Upgrade, 1980's building. Phases 2 & 3. Equipment purchase in 2021	Preliminary Design
Letterkenny University Hospital	Acute	Infrastructural Upgrade / Maintenance	Boiler replacement (Enabling works 2022, new gas tank)	Detailed Design
Letterkenny University Hospital	Community Care	Mental Health	AMHU anti ligature works (Tenders back April 2022)	Construction

Letterkenny University Hospital	Acute	Other Acute	Extension to Laboratory (Microbiology, Virology and Immunology) to provide capacity for Additional Covid 19 Testing (additional equipment and staff already in place) and to bring the Lab up to current standards (not upgraded post flooding event). Stage 2c June 22	Construction
Letterkenny University Hospital	Acute	Other Acute	Accommodation for Physio and OT dept at LUH (420sqm). This accommodation is to reinstate accommodation dispersed due to flooding at LUH.	Detailed Design
Letterkenny University Hospital	Acute	Other Acute	New Aseptic Compounding unit.	Appraisal
Letterkenny University Hospital	Acute	Other Acute	Extension and reconfiguration of the existing Oncology Day unit (8 No. treatment spaces to 15 No). Subject to new submission	Initiation
Donegal Hospice	Community Care	Palliative/Chronic Illness	New extension to Donegal Hospice to provide 4 No. bedrooms with family/visitor accommodation. 4 No. existing bedrooms are to be converted for administration/clinical use. Overall bed capacity will remain as existing.	Design Feasibility

			Funding by Donegal Hospice.	
Letterkenny	Community Care	Infrastructural Upgrade / Maintenance	St. Conal's Refurbishment - fabric upgrade of Block R	Construction
Letterkenny University Hospital	Acute	Infrastructural Upgrade / Maintenance	Flat roof covering repair and balcony spalling repair works.	Appraisal
Lifford	Community Care	Older People	Proposed 25 bed Community Nursing Unit (approx 1600sqm) at Lifford to replace the existing. Site being secured, DCC owned	Appraisal / Project Brief
Lifford	Community Care	Primary Care	Proposed new Primary Care Centre (approx 3000sqm) at Lifford.	Appraisal / Project Brief
Letterkenny	Community Care	Older People	110 Bed CNU & Medical Rehab to replace existing beds and address capacity deficit as per Service Priority List (formerly PPP).	Contract Award Stage
Ballyshannon	Community Care	Older People	80 Bed CNU to replace existing beds at the Sheil & the Rock as per Service Priority List.	Construction
Dungloe Community Hospital	Community Care	Older People	Refurbishment (must be completed in advance of Falcarragh) - 34 beds	Operational
Falcarragh CNU	Community Care	Older People	Refurbishment (HIQA agreement to follow Dungloe) - 35 beds	Detailed Design
Carndonagh Community Hospital	Community Care	Older People	Refurbishment (must be completed in advance of	Operational

			Buncrana) - 48 beds. Some additional works in Demential Unit, 2023 - Fire upgrade/I Control	
Buncrana CNU	Community Care	Older People	Refurbishment (To follow Carndonagh) - 30 beds	Detailed Design
Ramelton CNU	Community Care	Older People	HIQA Compliance - Refurbishment - 30 beds	Appraisal / Project Brief
St Joseph's, Stranorlar	Community Care	Older People	HIQA Compliance - Refurbishment - 67 beds	Appraisal / Project Brief
Cavan Lower, Killygordon, Lifford, Co. Donegal.	Community Care	Disability	The purchase and renovation of residential dwelling at Cavan Lower, Killygordon, Lifford, Co. Donegal.	Construction
Glebe House, Stranorlar	Community Care	Disability	Refurbishment of a house owned by the Donegal Association of Parents and Friends of People with Intellectual Disabilities CLG. For 2 No. Residents. HSE to take out 99 year lease.	Operational
Sliabh Sneacht, Letterkenny	Community Care	Disability	Refurbishment of two residential building owned by the HSE. 24 Sliabh Sneacht Road, 1 no. resident, and 28 Sliabh Sneacht Close, 2 no. residents.	Construction
Dunfanaghy Primary Care Centre	Community Care	Primary Care	New Primary Care Centre	Construction
HUB 01 - St. Conals, Letterkenny	Community Care	Primary Care	Extension (200sqm) to existing Chronic Disease	Detailed Design

Ballyboffey / Stranorlar Ambulance Base	Acute	Ambulance Service	Management Hub to provide support accommodation. The provision of an Ambulance Base at St Joseph's Hospital Stranorlar	Operational
Various Community Locations	CHO 1	Primary Care	Fire Alarm / Emergency Lighting Upgrades	Construction

Joe Hoare, Assistant National Director, HSE Capital & Estates

W106Q3743	Can we have an updated report on the extended ambulance services and investments in Donegal in the last 2 years?	Cllr C Brogan
------------------	--	----------------------

At the Regional Health Forum meeting, 28th February 2023 the following response was issued in relation to the expansion to the ambulance services in Donegal over a 3 year period:

National Ambulance Service West have faced significant challenges since 2020. With COVID 19, we had to find ways to deal with service demands while striving to keep patients and staff as safe as possible and try to maintain the level of service during COVID staff absences. The National Ambulance Service has been at the forefront of the response to the pandemic 2020. The surging infection rates over this winter assures that COVID-19 is still a threat especially to those with other serious underlying medical conditions and the elderly.

The National Ambulance Service (NAS) developed a 7-day community testing service in conjunction with CHO1, which commenced in March 2020. The NAS plays an ongoing key role in swabbing. It also played a vital role in the rollout of the vaccination programme both as vaccinators and in the establishment of temporary vaccine clinics.

- Expansion of Buncrana roster from 8 to 12 hrs shifts 7 days per week. Currently operating 10am-10pm previously operating 10am-7pm
- Expansion of Stranorlar roster to now operate 24/7. This encompasses the inclusion on a night crew 7 days per week.
- Introduction of emerging threat team operating 7 days a week and now responsible for all Covid
- Introduction of Hospital Ambulance Liaison Person in order to safeguard response capacity by reducing ambulance turnaround times and initiate measures to free up ambulances quicker.
- Change over from a pilot project to inclusion in everyday operations of the Community Paramedic Programme.
- Introduction of the Pathfinder system to enhance hospital avoidance measures. (go live 3rd April 2023)
- Introduction of and training staff on new Clinical practice guidelines which enhances advance life support and hospital avoidance measures.
- Introduction of 24/7 tactical shift manager to provide governance additional governance inside of normal operating hours and governance outside of these hours.
- Additional 12 Paramedics utilised for the backfill of operational shifts due to Annual leave, Sick leave etc. etc and 2 Community Paramedics.
- Fleet replacement of 12 Emergency Ambulances to keep in line with National Ambulance Service fleet replacement programme. Further investment in fleet since 2020 is detailed below:
 - 2 x Replacement Intermediate Care Vehicles
 - 3 x Replacement Response Vehicles
 - 2 x Lorries for transportation of Major Emergency Equipment supporting front line service
 - 1 Pathfinder vehicle
- Retrofit of Letterkenny ambulance base and introduction of an additional 5 ambulance parking spaces.
- New base built in Donegal Town and Stranorlar which are now fully operational.
- NAS management restructure re-alignment with Slaintecare, Regional Health Area F.

As an update to this the following services have been expanded since.

Pathfinder Letterkenny has become operational with the provision of services across Donegal. This encompasses staffing of 2 Occupational therapists, 2 Physio therapists and 2 Advanced Paramedics.

The Hospital Ambulance Liaison Person was initially winter funding and not recurring. However due to its success we have extended this role for the remaining period of 2023.

All Donegal staff are now fully trained on the new Clinical practice guidelines which enhances advance life support and hospital avoidance measures.

In addition NAS Donegal hope to see an addition 6 paramedic Interns becoming operational across the county in Q4 2023. This will see the further expansion of the Buncrana roster to incorporate a night shift.

JJ McGowan, Chief Ambulance Officer - West

W106Q3744

Does the Westdoc out of hours G.P service provide suturing/stitching and tetanus injections to patients? What emergency/urgent services does the westdoc service provide exactly?

Cllr D Ó Cualáin

All Westdoc treatment centres are stocked with all the necessary supplies to carry out minor wound suturing. Medical decision on appropriate treatments is made by the attending Doctor.

Westdoc does not provide Tetanus injections. Tetanus injections have specific temperature storage requirements and Westdoc by the nature of its service cannot guarantee full compliance.

Westdoc is a provider of out of hours urgent GP medical care, it is not an emergency care provider. Westdoc provides a Doctor lead service consisting of telephone Nurse triage and Doctor advice/care; all clinical decisions are based on presenting symptoms.

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3745

How many children are currently awaiting an appointment with an ophthalmologist physician in G.U.H. for assessment and treatment? Of that total how many have a disability?

Cllr D Ó Cualáin

Currently, there are 374 Paediatric patients waiting for an outpatient appointment. There are 76 paediatric patients waiting for an appointment for their inpatient day case procedure. We cannot confirm the number of patients with disabilities, at present as we do not record on iPMS.

A. Cosgrove, COO, Saolta University Health Care Group

W106Q3746

Is it correct that a position for a ophthalmologist physician who treated Children is currently vacant in G.U.H? When will this vacant position be filled and who is currently seeing these patient's in G.U.H?

Cllr D Ó Cualáin

The current position of the Paediatric ophthalmology physician is vacant and a locum is being sought in the interim. This doctor also provided some clinics for adult patients.

An application has been submitted for approval of a full time Paediatric Ophthalmology Consultant and work is progressing to complete this job specification. Once complete, this post will be processed for advertising.

A. Cosgrove, COO, Saolta University Health Care Group

W106Q3747

What action has HSE community healthcare west taken to fill the permanant G.P vacancy in An Cheathrú Rua? When does the HSE expect this position to be filled permanently? (The service is currently being provided by a locum Agency G.P).

Cllr D Ó Cualáin

The GP position in An Cheathru Rua became vacant in December 2021. It has been advertised on five occasions since it became vacant. No applications were received in respect of the first four advertisements. The fifth recruitment process is currently underway. The position has been filled by GPs employed through a Locum Agency since it became vacant, so there has been no disruption in services being provided to the patients.

J Fitzmaurice, Chief Officer, Community Healthcare West

W106Q3748	I am hearing testimonies from patients of our Injury Unit in Nenagh having to close early 3 o'clock in the day or patients having to leave before closing (8 o'clock) to be sent elsewhere due to lack of staff "Can the HSE confirm how many days the Injury Unit in Nenagh was unable to carry out its full duties from 8 am to 8 pm in 2023 and why.	Clr S Morris
<p>Nenagh Injury Unit is open every day for minor injuries in adults and children aged 5 and upwards from 8am – 8pm.</p> <p>Patients attending the Injury Unit in Nenagh benefit from the expertise and care of a consultant-led team of doctors, Registered Advanced Nurse Practitioners (RANPs), nurses, and other healthcare professionals who are highly experienced in the treatment of injuries that may not be life-threatening, but which nonetheless require medical attention and treatment. There have been no closures at Nenagh Injury Unit this year. However, on three days including the 30th May 2023, 01st June 2023 and the 02nd June 2023, Nenagh Injury Unit operated at reduced capacity due to unplanned staffing deficits.</p> <p>Please note, the Injury Unit did not close early, however capacity to see new patients was reduced. All patients continued to be triaged and referred elsewhere as appropriate or asked to return to Nenagh Injury Unit on the following day. Nenagh Injury Unit had its busiest year to date in 2022 with a total of 10,216 patients attending. This represents a 30% increase on 2021.</p> <p>In addition, there has been a 7% increase in the total Injury Unit presentations across the Group in the first four months of this year in comparison to 2022.</p> <p>C. Cowan, CEO, UL Hospitals Group</p>		
W106Q3749	Can the HSE provide an update on when Podiatry Services in general and in particular for patients with Type 2 Diabetes will be provided at the Grange and Drumcliffe Primary Care Centres.	Clr D Gilroy
<p>Primary Care Podiatry Services in Sligo South Donegal CHN network are delivered from:</p> <ol style="list-style-type: none"> 1. Markievicz House, Sligo 2. Ballymote PCC, 3. Enniscrone HC, 4. Ballyshannon PCC 5. Chronic Disease Hub, Clarion Road, Sligo <p>All clinical rooms are dedicated to the podiatry service only and meet the stringent Infection Prevention Control and Health and safety standards required for this service.</p> <p>It is not feasible for the HSE to have a dedicated podiatry room in all primary care centres, but the above locations ensure that the population of the area have access to clinical service within a reasonable distance from their home.</p> <p>Service users from Grange / Drumcliffe will be provided with an appointment at either Markievicz House (non diabetics) or Chronic Disease Hub, Sligo (diabetics) and could be facilitated in Ballyshannon PCC either if that was their preference.</p> <p>Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)</p>		
W106Q3750	Can the HSE confirm what procedures are in place for patients with very restricted mobility issues to park at out patients department at Sligo University Hospital. The space is limited and patients with extreme needs should be able to pre book a space at the out patients department.	Clr D Gilroy
<p>There are 20 designated disabled car park spaces on campus at Sligo University Hospital. There are 8 designated disabled carpark spaces at the temporary front entrance of SUH and this area is manned by car parking attendants from Euro Parks.</p>		

There are also 4 designated disabled car parking spaces beside the bus shelter in the main car park of SUH. The bus is wheelchair accessible and it operates from 7am to 8pm, Monday to Friday and it operates from the main car park and drops off at the main entrance near the outpatients department.

There is also 1 designated disabled car park space in the car park for Orthodontics, 3 designated disabled car park spaces in the car park at the Diabetes centre and 2 designated disabled car park spaces at the car park beside the Orthopaedics ward and 2 designated disabled car park spaces in the car park beside the Renal Dialysis unit.

T. Canavan, CEO, Saolta University Health Care Group

W106Q3751	Can the RHFWS give an updated report on Ambulance response times in the CHO1 area?	Cllr D Gilroy
------------------	--	----------------------

April @ Scene <19Mins	Echo	Delta
West	57%	41%
North West	58%	55%
Total Number of Calls	36W & 27NW	1291W & 924NW
Calls @ Night	37 % West	36 % North West

JJ McGowan, Chief Ambulance Officer - West

W106Q3752	Can the RHFWS provide figures on how many additional Nursing and Care staff are required to care for the service users at Cregg House and Cloonamahon who have been move to smaller congregated houses in the community. Can the RHFWS confirm if all of these staff have been provided by the HSE and how many are agency staff.	Cllr D Gilroy
------------------	---	----------------------

Please see the table below outlining the staffing required for the people with disabilities who moved to from Rainbow View, Cloonamahon to Damson View Community Group Home as part of the decongregation of Cloonamahon programme:

Staff Category	No. of Staff Cloonamahon	No. of Staff Damson View
Nursing Staff	4 WTE	5 WTE
Health Care Assistants	6 WTE	7 WTE

WTE = Whole Time Equivalent

The additional staff, 1 WTE Nursing staff and 1 WTE Health Care Assistant posts required for Damson View are presently being filled by agency staff, but are approved for HSE recruitment and are going through the recruitment process under the HSE HR department.

In relation to the staffing figures for Cregg's de-congregation programme, the process commenced in 2015 and a total of 112 people moved to the community over the following six years.

The number of additional staff needed overall for Sligo/Leitrim Disability Services was 16 WTE Staff Nurses & 110 WTE Care Assistants. Approved development posts under the decongregation programme were progressed for recruitment by the HSE. Where necessary agency staff are used to fill vacancies arising from recruitment challenges, to cover leave and/or to respond to emergency needs.

Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)