

Miontuairiscí cruinniú ginearálta bliantúil
an Fhóraitm Sláinte Réigiúnaigh a tionóladh Dé Máirt, 24 Meán Fómhair 2024
ag 2.00 i.n, i Seomra 1 an tIonad Oideachais, Feidhmeannacht na Seirbhíse Sláinte,
Ospidéal Ollscoile Páirc Mheirlinne, Gaillimh
Minutes of Regional Health Forum West Annual General Meeting held on
Tuesday, 24th September 2024 at 2.00pm in Room 1, Education Centre,
Merlin Park University, Galway.

Chairperson: Cllr Michael Kilcoyne

Members Present	Members Present (continued)	Members Present (continued)
Cllr Sharon Benson	Cllr Mary Howard	Apologies
Cllr Declan Bree	Cllr Emer Kelly	Cllr Ciaran Brogan
Cllr Phyll Bugler	Cllr Donagh Killilea	Cllr Ryan O'Meara
Cllr Marie Casserly	Cllr Michael Loftus	
Cllr Bridie Collins	Cllr Eileen Mannion	
Cllr Micheal Collins	Cllr Declan Meehan	Members Absent
Cllr John Connolly	Cllr Seamus Morris	Cllr Antoinette Bashua Baker
Cllr Greg Conway	Cllr Sean Moylan	Cllr Aisling Burke
Cllr Gary Doherty	Cllr Donna McGettigan	Cllr John Caulfield
Cllr Paddy Farrell	Cllr Rita McInerney	Cllr Shaun Cunniffe
Cllr Francis Foley	Cllr Gerry McMonagle	Cllr Ita Flynn Reynolds
Cllr Shane Forde	Cllr Edel McSharry	
Cllr Alma Gallagher	Cllr Micheál Naughton	
Cllr Liam Galvin	Cllr Elisa O'Donovan	
Cllr Felim Gurn	Cllr Dr Evelyn Francis Parsons	
Cllr Alan Harney	Cllr Gareth Scahill	

In attendance:

Tony Canavan, Executive Lead, Regional Health Forum/ Regional Executive Officer, HSE West and North West
Ann Cosgrove, Interim CEO, Saolta University Health Care Group
Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare
John Fitzmaurice, Chief Officer, Community Healthcare West
Maria Ferguson, Head of Human Resources, Community Healthcare Cavan, Donegal, Leitrim, Monaghan, Sligo
Noreen Spillane, A/CEO, UL Hospitals Group
Niall Murray, General Manager, Area Operations, NAS
Marian Cavanagh, Regional Health Forum Office
Anna Lyons, Regional Health Forum Office

900/112/24 Minutes of previous meeting – 16th July 2024

The minutes of the previous meeting held on the 16th July 2024 were proposed by Cllr Liam Galvin and seconded by Cllr Bridie Collins and adopted.

901/112/24 Matters Arising:

Cllr Donagh Killilea wanted it noted that he wished to thank Joe Hoare for the response to follow up query regarding Toghermore and for agreeing to liaise further with Galway County Council.

902/112/24 Chairman's Address:

903/112/24 Questions:

W112Q4067 – Access for resident of Merlin Lane through the new barrier system:

Action: Ann Cosgrove to feedback to the Hospital site Manager to re-engage with the residents of Merlin lane regarding access via the barrier system.

W112Q4069 – Patient use for Bus transport system operating between Merlin Park and UCHG:

Action: Ann Cosgrove to feedback to the Hospital site Manager in relation to patient use of this service and the possibility of advising patients of the available times.

W112Q4070 – Absenteeism in Galway University Hospitals:

Action: Ann Cosgrove to revert to Cllr Shane Forde with the yearly absenteeism analysis and if available, the percentages in numbers from table provided in this response.

W112Q4071 – Long Term Covid:

Action: Ann Cosgrove to revert to Cllr Felim Gurn with a summary of a current medical overview of Covid-19 if available.

W112Q4073 – State Claims Agency cases for CHO1:

Action: Dermot Monaghan to provide Cllr Felim Gurn with additional details or link to the information on the cases referred to in the response.

W112Q4079 – Referral pathway to Addiction Counsellors in the Ballinasloe area:

Action: John Fitzmaurice to provide Cllr Evelyn Francis Parsons with the self-referral pathway to addiction counselling services Ballinasloe.

W112Q4087 – HPV Vaccination Programme:

Action: John Fitzmaurice will feedback into the system Cllr Evelyn Francis Parsons concerns regarding a catch up vaccine programme.

W112Q4092 – Presentation on Unscheduled and scheduled care, waiting list and new facilities:

Action: RHF Office to organise a presentation at a Regional Health Forum Committee on Unscheduled and Scheduled care, Waiting Lists and new facilities (surgical hub and plans for the elective hospital).

W112Q4095 & W112Q4096 – January 2024 HIQA Inspection - St Joseph's Hospital, Stranorlar:

Action: Dermot Monaghan to provide Cllr Gary Doherty with clarification regarding if there were previous warnings to HSE Management in relation to 'significant fire risk that required urgent attention'.

W112Q4115 – Tender for the development and leases of the Primary Care Centres Galway:

Action: Micheál Conneely to advise Cllr John Connolly when the new tenders are published for Primary Care Centres; Galway City West, An Spidéal, Claregalway and Oranmore.

W112Q4120 – Ambulance service Loughglynn, Co. Roscommon.

Action: JJ McGowan to contact Cllr Gareth Scahill to discuss supporting future demands on the ambulance services in the Loughglynn area.

W112Q4121 - Specialist supports for those living with Endometriosis and PCOS in Limerick:

Action: Noreen Spillane to revert to Cllr Elisa O'Donovan in relation to the referral pathway for the PCOS and Endometriosis Clinics at University Hospital Limerick.

W112Q4124 – Consultant Post for the CAMHS ID Service in Sligo:

Action: Dermot Monaghan to keep the Regional Health Forum West members informed of any progress on the filling of the CAMHS ID Consultant post in Sligo.

W112Q4130 – GP Services West Clare:

Action: Maria Bridgeman to revert to Cllr Rita McNerney if the 15 HSE Mid-West area places from the International Medical Graduate Rural GP Programme are vacant?

W112Q4136 – New Ambulance Base for North Connemara:

Action: JJ McGowan to revert to Cllr Eileen Mannion regarding how the new ambulance base for North Connemara will impact on the Ambulance base in Clifden.

W112Q4140 - Support for people living with acquired brain injuries in Galway and Roscommon:

Action: John Fitzmaurice to update Cllr Alan Harney regarding any further engagement with Acquired Brain Injury Ireland.

W112Q4141 – Ambulance base at Portiuncula University Hospital:

Action: JJ McGowan to provide Cllr Alan Harney with the figures for the call volumes after 23.00 for the National Ambulance Services base at Portiuncula University Hospital.

W112Q4142 – HSE plans for the former Health Centre in Ballygar:

Action: John Fitzmaurice to revert to Cllr Alan Harney regarding the decision on the future HSE use or disposal of the building.

W112Q4143 – St Brigid's Hospital in Ballinasloe:

Action: John Fitzmaurice to provide an update to Cllr Alan Harney on the timeline of the internal review process based on the completed professional valuation, in relation to St Brigid's Hospital.

Standing orders were suspended due to time; Cllr Declan Bree proposed the continuation and it was seconded by Cllr Gerry McMonagle and carried. The meeting resumed.

904/112/24 Motions:

W112M190 – Funding for ADHD Teams in each CHO:

This motion was proposed by Cllr John Connolly, seconded by Cllr Declan Bree and agreed by all Councillors present.

W112M191 – Specialist inpatient beds in UHG for people with eating disorder:

This Motion was proposed by Cllr Elisa O'Donovan and seconded by Cllr Declan Bree and agreed by all Councillors present.

W112M192 –Ring fencing of Sligo Leitrim south Donegal and west Cavan mental health services staff funding and initially agreed numbers:

This Motion was proposed by Cllr Edel McSharry and seconded by Cllr Declan Bree and agreed by all Councillors present. The REO Tony Canavan present as Executive Chairperson noted that while the Motion was agreed and passed by the Members, the Executive would not be supporting this motion.

W112M193 – Dental Treatment Services Scheme:

This Motion was proposed by Cllr Declan Bree and seconded by Cllr Gerry McMonagle and agreed by all Councillors present.

W112M194 – Extension of Hours for the MAU Ennis:

This Motion was proposed by Cllr Rita McInerney and seconded by Cllr Declan Bree and agreed by all Councillors present.

905/112/24 Any other Business:

906/112/24 Date & Time of Next Meeting:

The next **Regional Health Forum Committee Meeting** will take place on Tuesday, 22nd October 2024 at 2pm in Castlebar.

The next **Regional Health Forum Meeting** will take place on Tuesday, 26th November 2024 at 1pm in Galway.

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 – 26TH NOVEMBER 2024

Number:	QUESTION	RAISED BY	Page No.
W113Q4148	Collooney Day Care centre, staffing and days open.	ClIr M Casserly	4
W113Q4149	Sligo Leitrim Mental Health Services, recruitment drive request.	ClIr M Casserly	4-5
W113Q4150	Ballaghaderreen Primary Health Care Centre: commencement date on site?	ClIr S Moylan	5
W113Q4151	Ballaghaderreen Primary Health Care Centre: Key dates schedule.	ClIr S Moylan	5
W113Q4152	Ballaghaderreen Primary Health Care Centre: Timeline for operational.	ClIr S Moylan	5
W113Q4153	Status of the O Toole CNU in Tuam, registration details with HIQA 2023 to date.	ClIr D Killilea	5
W113Q4154	Patients over 100 days in GUH, Merlin Park and Portiuncula and movement plans.	ClIr D Killilea	5-6
W113Q4155	HSE CNUs in Galway; bed capacity, wait lists, winter plan.	ClIr D Killilea	7
W113Q4156	Galway city and county HSE properties owned or leased that are currently not in use for patient care,	ClIr D Killilea	7-8
W113Q4157	ED at UHL Fire Safety inspections; dates, reviews, actions, Jan 2022 – June 2024.	ClIr S Morris	8
W113Q4158	Step-down facility at Tyone Nenagh; contract start and finish date, eligible patients, what care available there.	ClIr S Morris	8
W113Q4159	North Tipperary Children's Disability Services; measures are being taken to address the current gaps re wait times, future resource allocation.	ClIr S Morris	9
W113Q4160	North Tipperary Mental health and Youth Mental Health services; HSE strategies to enhance service, evaluation of initiatives?	ClIr S Morris	10
W113Q4161	Expansion of Anterior Hip Surgery at SUH to other Orthopaedic Hospitals, Croom?	ClIr G Conway	11
W113Q4162	Any plans for extension of the opening hours of the public MRI machine at UHL?	ClIr R McNerney	11
W113Q4163	Public Orthodontic Service Ennis; fully staffed? Current wait times for treatment?	ClIr R McNerney	11-12
W113Q4164	Is a radiographer available in the Small Injury Clinic in Ennis from 8am-8pm 7 days a week?	ClIr R McNerney	12
W113Q4165	Will the haemodialysis unit at Ennis Hospital be operational by the end of 2024?	ClIr R McNerney	12
W113Q4166	MUH Daily Patients on Trollies 01.01.2024, wait time for bed, total current bed number in MUH.	ClIr M Kilcoyne	12-13
W113Q4167	How many times in the last 2 months has the ambulance base in Castlebar been left without an ambulance crew at base?	ClIr M Kilcoyne	13
W113Q4168	MUH: what constitutes: (a) private accommodation (b) what is multi-occupancy (c) is there private accommodation for children at the hospital?	ClIr M Kilcoyne	13-14
W113Q4169	Sacred Heart Hospital, Castlebar; full patient occupancy? Bed numbers by type and use, number used by MUH, number of days any of these vacant in last month.	ClIr M Kilcoyne	14

W113Q4170	Will the HSE commit to expediting the expansion of the permanent ambulance base at Ballinasloe Portiuncula University Hospital?	Cllr E F Parsons	14
W113Q4171	HRT supply in relation to: free HRT from January.	Cllr E F Parsons	14-15
W113Q4172	Paediatric Rheumatology in the region.	Cllr J Connolly	15-16
W113Q4173	Update on the masterplan and Major Capital Projects on the GUH Campus.	Cllr J Connolly	16-18
W113Q4174	Aras Mhic Dara in An Cheathrú Rua; capacity, current resident numbers, applications not facilitated.	Cllr J Connolly	19
W113Q4175	CDNT teams County Galway; Staffing, caseload numbers of each team.	Cllr J Connolly	19
W113Q4176	PET Scan available in Mid West? Access for Mid West residents to PET scans.	Cllr E O'Donovan	19-20
W113Q4177	Number of children and young persons on wait list for psychology services in primary care, CAHMS and disability services in CHO3?	Cllr E O'Donovan	20-21
W113Q4178	Services and supports in Limerick for people living with Motor Neurone Disease and their families?	Cllr E O'Donovan	21-22
W113Q4179	Response times NAS Limerick being met? (purple and red activity calls).	Cllr E O'Donovan	23
W113Q4180	Plan for two private Nursing Homes which the HSE has stepped in to take over as the registered provider since June 29 and August 6 respectively?	Cllr E F Parsons	23
W113Q4181	HSE plans to achieve The National Cancer Strategy 2017-2026 KPI of enrolling 6% of cancer patients in therapeutic clinical trials annually by 2026?	Cllr E F Parson	23-24
W113Q4182	Update on the proposed new 42 bed ward block at Sligo University Hospital.	Cllr D Bree	24-25
W113Q4183	Update on the appointment of a permanent consultant for the CAMHS ID service in Sligo.	Cllr D Bree	25
W113Q4184	Agency staff in the HSE in County Sligo (in Sligo University Hospital and St. John's Hospital), cost and cost of direct employment, 2023 and 2024 to date.	Cllr D Bree	25
W113Q4185	Properties rented by the HSE in Sligo and Leitrim; identity, purpose, annual rent, rent per Sq ft, date of rental agreement.	Cllr D Bree	26-29
W113Q4186	Report on the primary care centre for Abbeyfeale Co Limerick.	Cllr L Galvin	29-30
W113Q4187	Update on the property evaluation for St. Brigid's Hospital, Ballinasloe, plans to clean up the campus and stabilise buildings?	Cllr A Harney	30
W113Q4188	Issues with phone signal in the new ward blocks at PUH.	Cllr A Harney	30
W113Q4189	Availability of training places for advanced paramedics in Ballinasloe.	Cllr A Harney	30
W113Q4190	Any plans for an increase in capacity in GP services in Ballinasloe, Co Galway?	Cllr A Harney	30-31
W113Q4191	Criteria for removal of a Service User from CDNT to another Team, numbers removed from CDNT Donegal East from 01.01.2024, transferred to what service?	Cllr G McMonagle	31-32
W113Q4192	For each Donegal CDNT area as of 01.11.2024: staff by Grade Code, vacancies by Grade Code	Cllr G McMonagle	32-34
W113Q4193	What measures are being taken by the HSE to fill the OT vacancies in Donegal?	Cllr G McMonagle	34-35

W113Q4194	Riverwalk House in Carndonagh, Respite resumption and provision of 5 day service? Milltown House, update on the planning and provision of Respite and short break services.	Cllr G McMonagle	35-36
W113Q4195	Ballyhaunis Primary Health Care Centre, programme of works with timeframes.	Cllr A Gallagher	36
W113Q4196	Ballyhaunis Primary Health Care Centre, What date will the HSE occupy the building.	Cllr A Gallagher	36
W113Q4197	What is the HSE doing to ensure that the Ballyhaunis Primary Health Care Centre project will be completed?	Cllr A Gallagher	36
W113Q4198	Update on the commencement of the Regional Rehabilitation Unit at RUH.	Cllr G Scahill	36
W113Q4199	Consultants posts for Roscommon; number, speciality, temporary /permanent/vacant.	Cllr G Scahill	37
W113Q4200	Progress report on the Central Sterile Services Department (CSSD) at RUH.	Cllr G Scahill	37
W113Q4201	Update on any plans for additional parking at RUH.	Cllr G Scahill	37
W113Q4202	Numbers of staff deployed to Donegal in the NAS and updated report on the Pathfinder programme.	Cllr C Brogan	37-39
W113Q4203	Waiting times in all categories in LUH; in-patient and outpatient, day-case.	Cllr C Brogan	39-40
W113Q4204	Update on additional accommodation at Donegal Hospice and on the Community Palliative Care Services in Donegal.	Cllr C Brogan	40
W113Q4205	Can we have an updated report on all our capital investment projects in Donegal?	Cllr C Brogan	40-43
W113Q4206	Can I have a breakdown of the numbers of patients on the Home Care waiting list in each administrative area of Donegal?	Cllr G Doherty	43
W113Q4207	Can I have a breakdown of the numbers of staff working in Home Care provision in each administrative area of Donegal?	Cllr G Doherty	43-45
W113Q4208	Can I have a breakdown of the numbers of staff hired as Home Care providers in each administrative area of Donegal in each of the last five years?	Cllr G Doherty	45
W113Q4209	Can I have a breakdown of the numbers of Home Care staff who have left the service in each administrative area of Donegal in each of the last five years?	Cllr G Doherty	45

Number:	QUESTION	RAISED BY
W113Q4148	To request that Collooney Day Care centre be staffed fully in order to provide service users with a 5 day as opposed to the current 3 day service that is available at present.	CLlr M Casserly

Currently, the Collooney Social Day Centre operates three days per week and has a maximum capacity of fifteen service users per day. Each day the service users are engaged in social and recreational activities such as bingo, quizzes, current affairs and exercise programmes etc. Attendees also receive a two course hot meal, morning and afternoon refreshments are also served. The average daily attendance during 2024 is detailed in the table below:

Average daily attendance at Collooney Social Day Centre in quarters 1, 2 and 3 of 2024	
Period	Average Daily Attendance
Quarter 1	9
Quarter 2	11
Quarter 3	11

In order to operate the Day Service 5 days per week this would require additional resources. This will be kept under review as will any waiting lists for services. We are presently offering places and actively promoting the service on the 3 days per week that it runs, thus ensuring maximum daily attendance.

HSE West and North West is fully committed to supporting older people to remain at home for as long as possible where this is their wish.

J Fitzmaurice, Integrated Health Area Manager, Sligo, Leitrim, South Donegal, West Cavan

W113Q4149	To request that an active recruitment drive be initiated urgently in the Sligo Leitrim Mental Health Services to fill the over 30 WTE unfilled posts.	CLlr M Casserly
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The establishment of Health Regions allows each area to plan and deliver services around the specific needs of people in each area, and to provide a consistent quality of care across the country. Each region has its own budget, leadership team and responsibility for local decision-making.

The HSE North West Region has been provided with its own specified number of WTEs and can, within that approved number, replace, recruit and prioritise posts. Nationally the approved number represents a 25% increase when compared to 2019 staffing levels. This provides greater flexibility for Health Regions and national services to respond to the needs of the population and prioritise posts appropriately.

At present Sligo Leitrim Mental Health Service have a number of vacancies, clinical leads within services are risk assessing the clinical impact of non-replacement of staff on team functioning and direct clinical care, and are taking the appropriate measures within their teams to adapt to the non-replacement of staff, including the use of agency staff.

Sligo Leitrim Mental Health Services are happy to report that HR along with Medical Manpower have completed or are actively recruiting the following posts:

Replacement Posts:

- Senior Occupational Therapist – Position Filled
- Senior Psychologist – Position has been offered to the panel in NRS
- Assistant Director Of Nursing (ADON) (12 Month Temporary Contract) Campaign to be launched

Development posts:

- ADON CAMHS – Position Filled
- GP Trainee – Position Filled
- ANP – Campaign Live
- Clinical Nurse Specialist (Eating Disorders) – To be expressed to the panel

Seven Staff Nurse Positions have also been filled and the clearance process has been initiated.

A number of Clinical Positions are for review for decision making. All other vacant posts will be filled in line with our allocated budget and WTE ceiling.

J Fitzmaurice, Integrated Health Area Manager, Sligo, Leitrim, South Donegal, West Cavan

W113Q4150	Ballaghaderreen Primary Health Care Centre: What date is the developer due to commence work on site?	Cllr S Moylan
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The developer signed the Agreement for Lease (AFL) in October 2024. The HSE currently awaits a hardcopy of same. On signing the AFL, the Developer has committed to commencing construction of the project within three months of the signing date. As such, works must commence by mid-January (approx.). Failure to commence works within the three months would entitle the HSE to terminate the Agreement for Lease.

M Conneely, Assistant National Director, Capital & Estates

W113Q4151	Ballaghaderreen Primary Health Care Centre: Can you provide me with details of key development milestones with dates of this work or has the HSE been provided with this schedule yet?	Cllr S Moylan
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The HSE is yet to be provided with a full and detailed programme for the works from the Developer.

M Conneely, Assistant National Director, Capital & Estates

W113Q4152	Ballaghaderreen Primary Health Care Centre: Can the HSE provide a timeline on when you expect to occupy the building, staffed and delivering?	Cllr S Moylan
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The HSE is yet to be provided with a full and detailed programme for the works from the Developer. Typically a building of the size in question would take approximately 18 months to build and 4 months to equip thereafter.

M Conneely, Assistant National Director, Capital & Estates

W113Q4153	Can the HSE confirm the status of the O Toole CNU in Tuam please. Also, registration details with HIQA from 2023 to date.	Cllr D Killilea
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Presently the Joe & Helen O'Toole CNU is registered with HIQA for twenty five beds on the ground floor.

An application to HIQA to open the 25 additional beds is in the process at the moment.

A Cosgrove, Integrated Health Area Manager, Galway Roscommon

W113Q4154	Can the HSE confirm how many patients are in GUH, Merlin Park and Portiuncula for more that 100 days and what plan is in place to move to the community or other care facilities.	Cllr D Killilea
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Galway University Hospital:

In Galway University Hospitals, as of 15th of November, 2024 there were 16 adults in GUH who are more than 100 days in Hospital.

8 Adults are in UHG and 8 Adults are in MPUH.

These patients are reviewed regularly with regards to their requirements for discharge.

GUH Discharge Co-Ordinators, Patient Flow Co-Ordinators, Medical Social Work, Nursing and Community colleagues carry out Length of Stay rounds twice weekly to review all such cases.

Definition of a Delayed Transfer of Care

Delayed Transfer of Care (DTOC) Definition, also referred to as 'Delayed Discharge' occurs when a patient is ready to leave inpatient care but is still occupying an HSE funded bed. This can occur in both Acute and Community settings. A patient is ready to leave inpatient care when all of the following three conditions are met:

- a clinical decision has been made that the patient is medically ready for discharge to their home or for transfer to a non-acute setting (MFFD)
- a multidisciplinary team (MDT) have reviewed the patient and a decision has been made that the patient is ready for transfer home or to an alternate care setting
- The patient is considered to be safe to discharge to their home /transfer to a non-acute setting.

There are 8 different types of Delayed Discharge with multiple subheading within each one.

The 8 types are:

- Home Supports
- Residential Care Needs
- Rehabilitation Needs
- Complex Needs
- Housing/Homelessness
- Legal Complexity/Ward of Court
- Non-Compliance
- COVID-19

Within the area of **Home Supports**, there are 7 subheadings covering awaiting assessments for support, awaiting funding and delays in securing providers.

For **Residential Care Needs**, there are 15 subheadings include waiting on patient/family to complete and submit application, waiting for review of application, application rejected, applying for supports and funding, or waiting to secure care setting.

Rehabilitation Needs has 7 subsections covering awaiting access to National Rehabilitation Hospital/Neuro Rehabilitation setting, awaiting rehabilitation in designated older person's beds in community setting, or other rehabilitation setting.

Complex Needs has 10 subheadings covering requiring bespoke care at home/residential placement. Patient with high physical dependency. Awaiting palliative/hospice care or awaiting transfer to other jurisdiction.

Housing/Homelessness has 9 subheadings ranging from patients awaiting access to specific community services to awaiting discharge to emergency accommodation. This also covers homeless patients who are foreign nationals with no entitlement to accommodation within the State.

Legal Complexity has 3 subcategories covering needs specific placements for refugees/asylum seekers, patients who are wards of court and where safeguarding concerns emerge.

Non Compliance or Cooperation with Process has 2 subcategories covering patients/families refusing to co-operate with care detailed in discharge plan or refusing to cooperate with NHSS process.

COVID-19 covers 15 subcategories ranging from impact of COVID 19 on home support staff, Covid positive patients requiring discharge to a stepdown bed prior to discharge home to patients unable to access rehabilitation or residential services due to COVID-19 guidance.

Portiuncula University Hospital:

Portiuncula University Hospital currently has no patient more than 100 days.

A Cosgrove, Integrated Health Area Manager, Galway Roscommon

W113Q4155	Can the HSE confirm what bed capacity is available in each HSE CNU in Galway, what are the waiting lists on each and what plan is in place to cater for winter plan.	CLlr D Killilea
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Public Residential Centre Name	NHSS Beds	Short Stay Beds	Total NHSS Beds (Currently Open)	Total Short Stay Beds in Unit (Currently Open)
Aras Mac Dara	38	0	29	0
Joe & Helen OToole CNU	25	0	25	0
Aras Ronan	11	1	10	0
St Annes Community NU	22	0	21	0
St Brendans Home	87	13	79	13
Units 5 6 Merlin Park Hosp	25	26	25	23
Ballinasloe	49	1	37	2
Clifden District Hospital	0	12	0	7

A Cosgrove, Integrated Health Area Manager, Galway Roscommon		
W113Q4156	Can the HSE confirm the list of properties owned or leased that are currently not in use for patient care in Co Galway and City.	CLlr D Killilea

See below current list of properties that are currently vacant or not in use. Please note that support accommodation such as maintenance, stores, office etc. have not been included in this table, however these functions perform a valuable task in relation to supporting the delivery of patient care.

PROPERTY SITE REFERENCE	BLOCK NAME	STATUS	TENURE TYPE
Aughrim Health Centre	Aughrim Health Centre	In-disposal - For Sale	Freehold
St. Brigids Hospital Campus	Main Block	Vacant Under Review	Freehold
St. Brigids Hospital Campus	St. Josephs Day Centre	Vacant Under Review	Freehold
St. Brigids Hospital Campus	Nurses Home	Vacant Under Review	Freehold
St. Brigids Hospital Campus	Recreation Hall	Vacant Under Review	Freehold
St. Brigids Hospital Campus	Oak Grove (House)	In Disposal - For Disposal	Freehold
Ballygar Health Centre	Ballygar Health Centre	Vacant Under Review	Freehold
Cashel Health Centre	Cashel Health Centre	Vacant Under Review	Leasehold
Merlin Park University Hospital	Mortuary	Retained Asset	Freehold
Grove House Gort	Grove House Gort (2 semi-detached)	In Disposal	Freehold
Site - Tubber Road, Gort	Tubber Road Site	Retained Asset /Potential Use	Freehold

Loughrea Health Centre - Store & Playschool	Loughrea Health Centre	Vacant for sale	Freehold
Oranmore Health Centre	Oranmore Health Centre	Vacant For Sale	Freehold
Tynagh Health Centre	Tynagh Health Centre	Vacant under review	Freehold

M Conneely, Assistant National Director, Capital & Estates

W113Q4157	Can the HSE provide a complete breakdown of any Fire Safety inspections and reviews and actions as a result of the Inspections and Reviews carried out at the Emergency Department of UHL, with dates of the inspections and reviews from January 2022 to June 2024?	Clr S Morris
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Fire safety consultants Maurice Johnson & Partners carried out inspections at University Hospital Limerick's Emergency Department (ED) on January 3rd, 2023; January 18th, 2024 and January 24th, 2024.

During these inspections, the consultants were updated on the escalation measures in place to manage risks during busy periods.

Key actions arising:

- Temporary trolley positions are clearly marked on the conspicuous floor markings to highlight the importance of keeping compartment door swings clear.
- Clear routes in place should an evacuation be necessary.
- A dedicated security resource with a specific responsibility of ensuring a path for movement of trolleys and patients be kept clear at all times.
- A number of fire drills have taken place this year to ensure preparedness.
- All staff in the ED are provided with basic fire training including simulated evacuation, fire marshal training and fire extinguisher training in line with the HSE national fire safety training policy.
- There is also a trained fire marshal available in the ED at all times.

I Carter, CEO Mid West Acute and Older People Services, HSE

W113Q4158	When did the contract to run the step-down facility at Tyone Nenagh start, and what is the finish date? How is the HSE choosing who they send to the facility, and what care is provided in the facility?	Clr S Morris
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The Nenagh Rehabilitation Unit commenced operations on the 9th September 2024. The contract is due to expire in August 2025.

Patients identified for referral to this facility receive a comprehensive standardised assessment by their admitting consultant team (i.e. the consultant under which the patient is admitted to in the acute hospital). Rehabilitation coordinators then work with bed management to arrange suitable transfers.

Nenagh is a Level 2 rehabilitation unit that caters for patients with moderate complexity, moderate intensity rehabilitation needs. Appropriately referred patients who meet the inclusion criteria will receive rehabilitation from expert staff in a dedicated unit with appropriate specialist facilities.

The model of care is a consultant-led, interdisciplinary model and is tailored to each individual patient depending on their specific requirements and rehabilitation goals.

Up to the 17th November 2024, 97 patients have transferred to this facility.

I Carter, CEO Mid West Acute and Older People Services, HSE

W113Q4159	Children's Disability Services. What measures are being taken to address the current gaps in the North Tipperary Children's Disability Services, particularly in reducing waiting times for assessments and interventions? How is the HSE ensuring that children with complex needs receive timely and adequate support, and what are the plans for future resource allocation for this critical service?	ClIr S Morris
<p>HSE Mid West has eight Children's Disability Network Teams (CDNTs) providing a multidisciplinary and family-centred approach to a caseload of 5,945 children.</p> <p>With regards to the North Tipperary CDNT, as of October 2024:</p> <ul style="list-style-type: none"> • North Tipperary had the second largest caseload, equating to 20% of all cases across the Mid West. • The average staff to client ratio across the Mid West CDNTs is 34:1, North Tipperary's CDNT staff to client ratio is 69:1. <p>Several local and national recruitment campaigns have been conducted specifically for clinical staff across HSE, Section 38 and Section 39 agencies in 2024.</p> <p>A national CDNT staff campaign was held in January/February of this year. Enable Ireland conducted interviews across a range of disciplines including physiotherapy, speech and language therapy, occupational therapy, psychology and social work under this campaign.</p> <p>Most of the local campaigns were run a number of times with some still being run on a continuous basis.</p> <p>What measures are being taken to address the current gaps in the North Tipperary Children's Disability Services, particularly in reducing waiting times for assessments and interventions?</p> <p>Over the past number of years the caseload for the North Tipperary CDNT has grown significantly. Unfortunately, an equivalent growth in staffing has not occurred to meet this growing demand. As such, the wait time for supports has increased.</p> <p>The North Tipperary CDNT continuously review wait times for assessments and interventions. At present, the following measures are being taken, within current resources, to address wait times:</p> <ul style="list-style-type: none"> • The team assigned to manage 9-18 year-olds is currently conducting a review of its active caseload. The team will continue to balance provision of service to those on the active caseload with taking children off the waiting list. This will be done using existing resources. • Where private provider capacity allows, specific assessments and interventions are outsourced to private providers in order to reduce the waiting list. Outsourced services include : <ul style="list-style-type: none"> ○ Autism assessments – outsourced to two private providers. The team are engaging with another private provider to maximise capacity locally. ○ Speech and Language Therapy (SLT) – the team have engaged with a private SLT practice who have completed SLT sessions for a number of services users. ○ Dietician Services – the team are currently engaging with a private dietician with a view to outsourcing a number of cases. This is pending confirmation of appropriate qualifications to undertake same. <p>How is the HSE ensuring that children with complex needs receive timely and adequate support, and what are the plans for future resource allocation for this critical service?</p> <p>The Mid West CDNT has submitted a proposal for additional resources for children's disability services. In the HSE National Service Plan 2024 the Mid West was allocated funding for therapy assistant posts equating to approximately 11 WTE. The HSE is in the process of commencing recruitment for these posts. This will include posts for the North Tipperary CDNT.</p> <p><i>M Bridgeman, Integrated Health Area Manager, HSE Mid West</i></p>		

W113Q4160	<p>Youth Mental health services. Given the rising demand for mental health services, what comprehensive strategies are being implemented by the HSE to enhance the availability, quality, and accessibility of mental health support in North Tipperary and particularly for youth Mental Health? How are these initiatives being evaluated for their effectiveness and impact on the community?</p>	Clr S Morris
<p>A second Child & Adolescent Mental Health Services (CAMHS) team commenced in North Tipperary in January 2024. This has improved access to clinicians for clients in both the Roscrea/Thurles (East team) and Nenagh (West team) areas.</p> <p>As a result, wait times for clients have reduced from 20 months to 4 months on both teams. These teams offer interdisciplinary inputs (permanent consultants, doctors, nurses, social workers, psychology, speech and language therapists with admin support) for children and adolescents presenting with severe mental health difficulties up until their 18th birthday.</p> <p>The teams work with a number of agencies to support these children including Tusla, schools, Meitheal conferences and other local mental health agencies.</p> <p>A considerable number of children with autism, who also have severe mental health difficulties, are receiving significant input from the CAMHS teams.</p> <p>Same day assessments for children and adolescents presenting with acute psychiatric emergencies are provided within our base clinics in North Tipperary.</p> <p>Regional developments that will further support children include the development of a CAMHS Hub. A consultant and psychologist have been appointed to support this regional team.</p> <p>CAMHS North Tipperary have a dedicated eating disorder advanced nurse practitioner who deals exclusively with children and adolescents presenting with eating disorders. She is supported locally and nationally by the national eating disorder programme.</p> <p>CAMHS North Tipperary have also commenced a social farming programme in conjunction with Social Farming Ireland. The feedback from families has been extremely positive as participants learn skills such as problem-solving and teamwork. The first group to participate in the initiative have reported increased confidence and self-esteem. A second group are progressing through the programme.</p> <p>In addition, CAMHS North Tipperary, working with Tipperary Sports Partnership and Nenagh Olympic, are planning to use the Nenagh indoor track facilities to provide children attending CAMHS with opportunities to receive coaching in athletics.</p> <p>HSE primary care psychology continues to provide support to children and families presenting with complex primary care mental health issues.</p> <p>Jigsaw and Pieta House provide additional services to the youth of North Tipperary who present with mild to moderate acute mental health difficulties. Jigsaw are considering a satellite clinic in Nenagh.</p> <p>How are these initiatives being evaluated for their effectiveness and impact on the community?</p> <p>All programs undertaken by CAMHS North Tipperary teams are evidence-based and led by a shared care planning process; being client-centred and focused on the needs of the child and their family.</p> <p>CAMHS teams meet with Children's Disability Network Team and primary care teams regularly to review pathways and referrals and consider how access can be improved. CAMHS teams have established transfer of care meetings for adolescents making the transition to the Adult Mental Health Service. They are actively building working relationships with these teams to support the young person as they transfer to the adult team.</p> <p>M Bridgeman, Integrated Health Area Manager, HSE Mid West</p>		

W113Q4161	As to when the new Anterior Hip Surgery which is currently been carried out in Sligo University Hospital might be performed in other Orthopaedic Hospitals e.g. Croom, Co. limerick.	Cllr G Conway
<p>There are no plans to introduce an anterior approach to hip replacement surgery at Croom Orthopaedic Hospital.</p> <p>However, we are currently exploring an option to introduce a pathway for day case hip and knee surgery through a traditional surgical approach. It is envisaged that this service will commence in 2025.</p> <p><i>I Carter, CEO Mid West Acute and Older People Services, HSE Mid West</i></p>		
W113Q4162	Are there any plans to extend the opening hours of the public MRI machine at UHL to evenings and weekends?	Cllr R McNerney
<p>There are two MRI scanners at University Hospital Limerick, one of which is owned by the HSE and operates from Monday to Friday. There are at present no plans to extend operating hours for this scanner.</p> <p>The second scanner is operated by an outside provider seven days a week, focusing on inpatients during core business hours; and on outpatients and GP referrals in the evenings and at weekends.</p> <p>Through this service, MRI slots are available at the weekends for patients who have been discharged from UHL during the week to return at the weekend for their scan. Without this service, these patients would remain in hospital. Planning permission was granted in October 2023 for an extension to the Radiology Department at UHL. This includes a single-storey extension to the MRI Department for an additional MRI scanner. We expect the project to be completed in Q1 2026.</p> <p>Please note that in 2023, over 19,000 radiology scans (including MRIs) were carried out in the HSE Mid West under the GP Access to Community Diagnostics Scheme, thereby reducing referrals to the Emergency Department, Acute Medical Units and Outpatient Departments.</p> <p><i>I Carter, CEO Mid West Acute and Older People Services, HSE Mid West</i></p>		
W113Q4163	Is the Public Orthodontic Service in Ennis fully staffed and what is the current wait time for treatment?	Cllr R McNerney
<p>The Specialist Orthodontist in County Clare retired from the HSE in July 2023.</p> <p>Since May 2022, the HSE has conducted six recruitment campaigns (most recently, in August 2024) in an attempt to backfill three vacant Specialist Orthodontist posts across the Mid West orthodontic service.</p> <p>Successful candidates who expressed an interest in the vacant posts were interviewed and offered positions within the service. One candidate accepted a position with the service and they are based in the HSE Orthodontic & Restorative at St. Camillus Hospital in Limerick.</p> <p>The most recent recruitment campaign attracted no interested candidates. While every effort has been made to fill the existing vacancies within the service, unfortunately, the pool of Specialist Orthodontists is very limited. The HSE Mid West will continue its efforts to fill these roles within the Orthodontic service and it is now planned to proceed with an international recruitment campaign in respect of the Specialist Orthodontist vacancies.</p> <p>The Lead Orthodontist has confirmed that patients from County Clare who had been in active treatment prior to the retirement of the Specialist Orthodontist continue to have their orthodontic care needs provided by Specialist Orthodontists within the service.</p> <p>Despite the challenge of reduced staffing levels within the service, patients from the Clare region continue to be called from the orthodontic treatment waiting lists.</p> <p>Patients who have been considered to be eligible for HSE orthodontic treatment are categorised into 2 Grades:</p>		

- Grade 5: Severe malocclusion e.g. impacted teeth, multiple missing teeth, increased overjet (prominence of the teeth);
- Grade 4: Less severe malocclusion e.g. deep overbite, cross-bite, crowding.

While Grade 5 patients are given priority within the existing waiting list protocol, given the demands on the HSE Orthodontic service and the current resources in terms of manpower, the waiting time for treatment is 4.5 years.

It must be stressed that this waiting time is not unique to the Mid West area and national data confirms that patients in other regions experience a similar waiting time for treatment.

Most Grade 4 patients (with the exception of those who have a surgical component to their treatment needs) are outsourced to private service providers through the National Orthodontic Waiting List Initiative which has been ongoing since 2016. It can be anticipated that continued funding for this scheme will continue to have a very positive impact on the waiting times for Grade 4 patients. For those Grade 4 patients who require treatment to be completed within the service, the waiting time is over 4 years.

Similar to the situation in other regions, the demand for orthodontic treatment greatly exceeds the availability of resources.

Patients who have been considered to be eligible for HSE Orthodontic treatment may avail of treatment in Northern Ireland under the Northern Ireland Planned Healthcare Scheme. Under this scheme, the HSE will reimburse up to €2,100 towards the cost of treatment or the cost of treatment whichever is the lesser. All of the treatment must be completed within Northern Ireland to be eligible for reimbursement. Any patient who has been considered to be eligible for HSE orthodontic treatment can avail of this scheme from the time of assessment onwards.

Orthodontics differs from other clinical disciplines in that a course of treatment takes on average 18-24 months to complete. Therefore, the waiting time for treatment is not merely a function of the chronological position of a given patient on the treatment waiting list but rather is a function of the number of patients in active treatment at any given time, the complexity of treatment and the time taken to complete treatment.

The HSE Orthodontic Service in the HSE Mid West area is making every effort to see patients in as timely a manner as is possible within the resources which are currently available to the service.

M Bridgeman, Integrated Health Area Manager, HSE Mid West

W113Q4164	Is a radiographer available in the Small Injury Clinic in Ennis from 8am-8pm 7 days a week?	Clr R McNerney
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The Injury Unit in Ennis is open daily from 8am-8pm, 365 days a year.

A radiographer is available during these hours.

I Carter, CEO Mid West Acute and Older People Services, HSE Mid West

W113Q4165	Will the haemodialysis unit at Ennis Hospital be operational by the end of 2024?	Clr R McNerney
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HSE Board Approval for the provision of a contracted satellite haemodialysis unit in Ennis was recently received.

It is envisaged that this new service will be operational by Q2 2026.

I Carter, CEO Mid West Acute and Older People Services, HSE Mid West

W113Q4166	List the number of patients on trollies at Mayo University Hospital for each day since 1 st Jan 2024 and the length of time from when they arrived in A&E until they got a bed and the total number of beds currently in Mayo University Hospital?	Clr M Kilcoyne
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The HSE publish a daily report which shows how many people admitted to hospital are:

- on trollies in an emergency department

- on trolleys in a ward
- experiencing a delay in being discharged home or into care elsewhere
- using a bed as part of the hospital's surge capacity

The daily urgent and emergency care data for MUH is available retrospectively and reports can be accessed here: <https://www2.hse.ie/services/urgent-emergency-care-report/>

The report shows the number of patients:

- on trolleys or other inappropriate beds
- in beds not usually used for patients admitted through the emergency department - this is known as surge capacity
- waiting to be discharged home or into care elsewhere
- on trolleys for more than 24 hours
- aged 75 or older who are on trolleys for more than 24 hours

Daily trolley count

These figures show the number of people on trolleys in:

- emergency departments (ED)
- hospital wards (ward)

These are patients who have been admitted to hospital but do not have a bed on a ward. The figures do not include patients waiting to be seen or triaged in the ED.

Trolley means any bed that is put in an area that is not appropriate. This includes any beds put in corridors or areas where there is not usually a bed.

The current total number of beds in MUH is 374 including day case and inpatient beds.

M Warde, Integrated Health Area Manager, Mayo

W113Q4167	How many times in the last 2 months has the ambulance base in Castlebar been left without an ambulance crew at base?	Cllr M Kilcoyne
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It would require a thorough and time-intensive review to examine each day over a two-month period to identify how many times the base was without an ambulance crew. While periods without a crew at base is at times inevitable due to fluctuations in demand, it is not indicative of the base's overall efficiency or the quality of service provided to the community.

During the last two months, we experienced seven instances where a single shift could not be fully staffed, known as "single dropped shifts." On four occasions, the solo rostered staff member was an Advanced Paramedic (AP) who was put onto a Rapid Response Vehicle (RRV) to ensure coverage. For the remaining three instances, we paired the solo rostered staff member with another solo shift from a nearby area to optimise our resources and maintain a responsive service.

Whenever a shift drops, typically due to short-notice sick leave or unforeseen circumstances, every effort is made to cover these shifts. When coverage isn't immediately available, alternative arrangements—such as those described above—are promptly implemented to ensure continued service in the region.

JJ McGowan, Chief Ambulance Officer - West

W113Q4168	In relation to patients at Mayo University Hospital, what constitutes: (a) private accommodation (b) what is multi-occupancy (c) is there private accommodation for children at the hospital?	Cllr M Kilcoyne
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Mayo University Hospital has single rooms and multi-occupancy rooms. Multi-occupancy rooms hold either four or six beds, we do not have any two beds and there is a maximum of six beds per room. Single rooms / isolation rooms are predominantly

used for clinical reasons. Private patients are accommodated throughout the hospital and may be accommodated in single rooms, however as Mayo University Hospital is a public hospital we do not have designated private rooms.

M Warde, Integrated Health Area Manager, Mayo

W113Q4169	Is there now full patient occupancy in the Sacred Heart Hospital, Castlebar. How many long term beds and how many short term beds and respite care bed are in this hospital? How many beds in the Sacred Heart Hospital are being operated by Mayo University Hospital and of these on how many days in the last month were any of them vacant	Cllr M Kilcoyne
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There is now full patient occupancy in the Sacred Heart Hospital, Castlebar. The unit has 68 long term beds, 27 Rehab beds and one respite care bed.

MUH are currently occupying 34 out of 40 beds in St John's Ward in the Sacred Heart Hospital for acute medical patients. To note, an audit was undertaken in 2023 which noted that occupancy rates were greater or equal to 80% occupancy (which is the HIQA standard for optimum occupancy), today (22nd November 2024) by midday we expect to have full occupancy of 100%.

M Warde, Integrated Health Area Manager, Mayo

W113Q4170	Given the surge in demand for National Ambulance Services evidenced from 2016 to 2023 in Co Galway, which had the highest <u>national</u> growth demand for Ambulance services, and now with demand further augmented by increased and aging population, will the HSE commit to expediting the expansion of the permanent ambulance base at Ballinasloe Portiuncula University Hospital to ensure timely and reliable emergency response for our communities well in advance of the estimated 10 year timeline?	Cllr E F Parsons
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Please see hereunder response already provided on question W111Q4037 in relation to the expansion of Ballinalsoe.

This remains the case and will remain our focus for all regions. As part of our estates review, the National Ambulance Service, in conjunction with HSE Estates, is currently reviewing the needs associated with the National Ambulance Service in Ballinasloe. Once refined, we will be able to determine how this best fits with the current HSE estates portfolio in the area. This process is very much in its infancy, and no changes are expected in the short term.

Question Number W111Q4037 from the RHF West 16th July 2024

The current location for the ambulance base in Ballinasloe is on the grounds of Portiuncula Hospital.

As part of our estates review, the National Ambulance Service, in conjunction with HSE Estates, is currently reviewing the needs associated with the National Ambulance Service in Ballinasloe. Once refined, we will be able to determine how this best fits with the current HSE estates portfolio in the area. This process is very much in its infancy, and no changes are expected in the short term.

JJ McGowan, Chief Ambulance Officer - West

W113Q4171	With the welcome roll out of free HRT in January, please outline how provision of same will be ensured in view of reports of poor availability and shortages of HRT in Ireland.	Cllr E F Parsons
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Shortages are a global issue experienced by all countries regardless of size or economic status. Their incidence is increasing. The Medicines Shortage Framework (MSF) has been in place since 2018 when the Department requested that the HPR assume responsibility for its coordination. Since its inception, the framework has been of enormous benefit nationally. It has served to avoid the occurrence of potential medicine shortages and, where they have occurred, ensured appropriate mitigation is in place.

There has been intermittent supply of some hormone replacement therapy (HRT) presentations over recent years, not just in Ireland but also in other countries, due to a significant increase in demand and manufacturing issues which are limiting the ability to meet this increased demand.

In European law, pharmaceutical companies and wholesalers should ensure an appropriate and continuous supply of the medicines they market. Companies are required to notify the HPRA of medicines shortages or potential shortages impacting the Irish market. The HPRA maintains a list of current and resolved shortages on its website and is in regular contact with suppliers in relation to these shortages with a view to minimising their duration and impact on patients. The webpage is updated daily as the HPRA receives new information.

Persistent product shortages across this therapeutic area (HRT) have been managed and continue to be managed via the framework, operated by the HPRA. The MSF involves a multi-stakeholder approach to handling shortages of human medicinal products, and the HPRA engages with all such stakeholders, in all cases where it is required to, until such a time it is established that there is sufficient supply of medicinal products to meet the demand and continuity of care. In case of shortages with a significant public health impact, the HSE can issue clinical guidance to healthcare professionals, where appropriate, to mitigate the impact of a shortage. There have been a number of such shortages where the HSE has issued clinical guidance as a mitigation measure, including this therapeutic area (see HSE Medicines Management Guidance issued in 2022).

The HPRA, along with other health service entities, is actively monitoring the national supply, and the current status is that HRT medicines are generally available. The HPRA awaits further clarification from the responsible companies for some lines but remains actively engaged and all presentations that are currently in short supply are due to return to stock in 2024. The HPRA has engaged with relevant suppliers to understand the reasons for current reports and to examine opportunities for regulatory flexibilities to assist meeting current demand. There are a number of medicines authorised for use in Ireland as HRT for the treatment of symptoms of menopause. In the event that patients are unable to source a medicinal product due to supply constraints, they are advised discuss possible alternatives with their healthcare professional pending the resumption of normal supply.

Medicine Shortages and Borderline Classification (MSBC) Manager

W113Q4172	How many children in the region are awaiting an initial appointment for Paediatric Rheumatology? What hospital or centre are children referred to when they are referred for a Paediatric Rheumatology consultation? What is the average waiting time for a child awaiting their first appointment?	Cllr J Connolly
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Galway University Hospital:

In GUH, we do not have a Paediatric Rheumatology Waiting List.

All children referred, will be seen by a General Paediatrician in GUH who can initiate investigations but if a formal Paediatric Rheumatology opinion is required then these children are referred on by that Paediatrician to Children's Health Ireland at Crumlin.

Portiuncula University Hospital:

Portiuncula University Hospital does not have a Paediatric Rheumatology service. Paediatric patients are referred to CHI, Crumlin in Dublin.

A Cosgrove, Integrated Health Area Manager, Galway Roscommon

Mayo University Hospital

Mayo University Hospital do not provide the services noted above and as such do not have any data to provide.

M Warde, Integrated Health Area Manager, Mayo

Sligo University Hospital:

All children with Rheumatologic disease are referred to Crumlin CHI, where they diagnosis and manage the care of these patients.

J Fitzmaurice, Integrated Health Area Manager, Sligo, Leitrim, South Donegal, West Cavan

Letterkenny University Hospital:

LUH do not have a Consultant Paediatric Rheumatologist, our patients are referred to Children's Health Ireland at Crumlin.

D Monaghan, Integrated Health Area Manager, Donegal

Paediatric patients in HSE Mid West who require a consultation with a Paediatric Rheumatologist are referred to Children's Health Ireland at Crumlin.

As such, information regarding the number of patients referred to this service and their wait times is not available locally.

I Carter, CEO Mid West Acute and Older People Services, HSE Mid West

W113Q4173	Can the Forum be Updated on the works to date of the design team and Project Manager appointed to develop the masterplan and Major Capital Projects on the GUH Campus? Is there an Estimated Date for the conclusion of their pre-planning work?	Cllr J Connolly
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Galway University Hospitals, Infrastructure Update, November 2024.

- Galway University Hospitals is the only Model 4 Hospital in the HSE West North West Region. It provides secondary care for Galway city and surrounds and tertiary care for the region West North West (catchment population of circa 850,000).
- The major requirement for healthcare in the region is the provision of protected Emergency Care, Elective Scheduled Care and Cancer Care. A Capital Programme Board has developed a masterplan encompassing projects of significant scale on the campus. The key projects are:
 - New Inpatient Wards UHG
 - Emergency Department UHG
 - Women & Children's Department, UHG
 - Laboratory UHG
 - Ambulatory Cancer Centre UHG
 - Theatres & Critical Care
- Additionally the Surgical Hub, Outpatients Department including and Adult OPD Cystic Fibrosis Unit and Elective Hospital are in progress on our MPUH campus.
- The new plan will see the high volume, low complexity cases such as elective, day surgery and ambulatory care move to the MPUH campus.
- Complex acute care, urgent and emergency, inpatients and day cases, cancer, maternity and paediatric inpatient care will remain in UHG.
- It will also provide the required bed capacity to address the demand for increased inpatient beds and additional day case requirements for future demands.
- Each of the projects for the UHG campus has been reviewed from a technical and architectural perspective to ascertain how each block can fit on the UHG site and that each building can proceed independently of each other

while remaining part of an agreed integrated plan, maintaining all of the necessary clinical adjacencies. The delivery of each, either individually, or in parallel, will result in significant improvements in the capacity of the hospital to meet the needs of the population into the future. When all projects are complete, with parallel development of support accommodation, they will integrate fully to become a functioning future-proofed Model 4 hospital for the region.

- The Masterplan will play a pivotal role in delivering on National and Regional healthcare policies. It will be used to support capital submissions for priority capital projects and to secure investment.
- Work is also progressing on decanting some services to the Merlin Park site. The build for Phase One of the Outpatient Department block in MPUH has completed and is now at commissioning stage. Phase Two of this development which will relocate the majority of outpatient appointments to Merlin Park is currently at design stage
- Plans for an elective hospital and surgical hub are also progressing for the MPUH campus with construction work now underway on the surgical hub and design team about to be appointed on the new elective hospital.
- The Acute Inpatient Hospital Bed Expansion Plan (2024 -2031) has detailed an additional 228 beds for Galway over a number of years and will be factored into the DCP plans which will play significant role in helping GUH to meet the growing health needs of our population. This will address part of the need, however, the DCP will set out the full requirement for the sites up to 2048.

Key Priority Developments

1. New Inpatient Wards

The development of Ward Blocks will provide much needed bed capacity to support the urgent emergency and cancer care needs for the region. It will ultimately allow the decanting and upgrading of older accommodation. The space vacated by the old wards will facilitate the provision of diagnostic facilities and accommodation for HSCP and pharmacy services.

2. Emergency Department

The development of a new Emergency Department at UHG is crucial to address current suboptimal accommodation and associated patient risk issues. The new block is intended to provide Emergency Department accommodation at ground and first floor levels and includes the acute floor services.

3. Women's & Children's Block

The Women's & Children's department is currently operating out of sub-optimal facilities with infrastructure that is not fit for purpose. This new block which will see the Women's and Children's department occupy four floors, will provide a modern and fit for purpose development. It will include state-of-the-art obstetrics and gynaecology infrastructure. It will also ensure adjacencies to critical services and address service capacity and risk issues.

4. Laboratory Replacement Development

The replacement laboratory will play a pivotal role in delivering on national and regional healthcare policy, including its critical role as a Regional Trauma Unit, Regional Cancer Centre, Regional Paediatric and Maternity service, and Cardiac centre. The facility will be a modern fit for purpose unit with a capacity to meet the demand of the service from the hospital and community.

5. Cancer Services

The Cancer Centre will provide additional bed capacity, ambulatory care, theatres and critical care to meet the needs of the region and ensure we meet our cancer KPIs. Appropriate education, training, research, innovation facilities will also be included.

The Cancer Centre was included in the National Development Plan 2021-2030.

6. The Elective Hospital

The Elective hospital is part of a national Sláintecare programme. This Galway centre will be situated in MPUH. It includes a significant number of operating theatres, endoscopy suites and minor operation rooms and is forecast to provide 175,000 additional procedures, treatments and diagnostic appointments per year and will provide better care and outcomes for all patients. The appointment of the design team is imminent.

The new Elective Hospital will provide significant additional capacity, enabling the separation of scheduled and unscheduled care. This will change the way in which day cases, scheduled procedures, surgeries, scans and outpatient services can be better arranged across the region, ensuring greater capacity in the future and helping to address waiting times.

7. Surgical Hub

Construction of the surgical hub is currently underway on the Merlin Park campus. It is expected that the building infrastructure will be completed in Q4 2025 and the hub will be commissioned soon thereafter.

The surgical hubs will provide regional capacity and will operate under the governance of GUH.

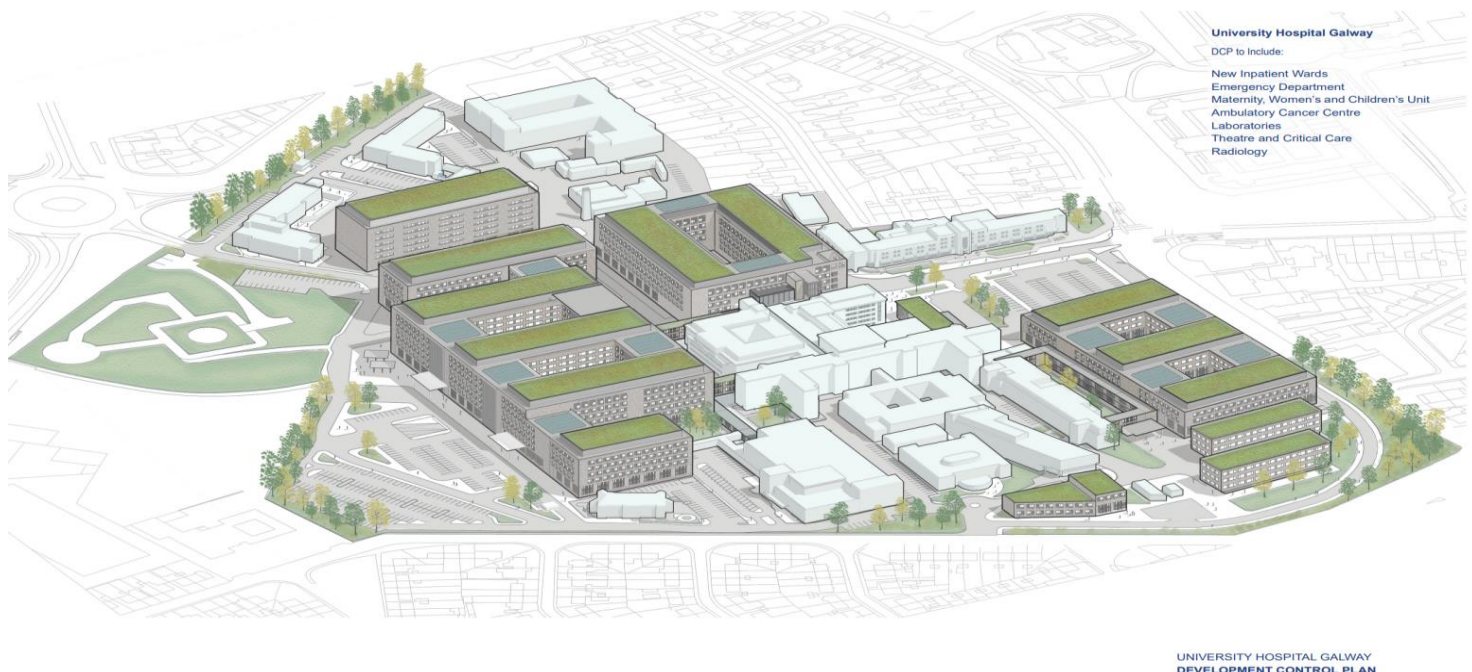
The facility will support decongestion on the University Hospital Galway (UHG) site, where there are significant demands and volumes of scheduled and unscheduled patient services, including many planned / scheduled day case procedures and a very significant unscheduled care stream.

1.1 Out-Patient Department and Adult CF Merlin Park University Hospital

This consists of a two-storey OPD and an adjacent separate single storey Adult Cystic Fibrosis OPD. The building project is now complete. The Adult CF OPD will open later this year with the general OPD due to open in Q1 2025. This will allow the first phase of decanting out-patient services from UHG to MPUH.

1.2 Out-Patient Department Phase II

Phase 2 OPD will deal with decanting more of the procedure based outpatients from UHG and also some other decants from the UHG site i.e. paed's opd and some further unmet needs related to new service developments and regional services. Capital approval for Phase II was granted in May, 2024 and the design team were appointed in summer 2024. Work is commencing on detailed design.



W113Q4174	What is the full capacity of Aras Mhic Dara in An Cheathrú Rua? How many residents are currently residing at Aras Mhic Dara? How many applications have been received from patients wishing to enter Aras Mhic Dara which have not been facilitated?	Cllr J Connolly
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Áras Mhic Dara is registered with HIQA for 38 beds.

29 beds are open and safely staffed at the moment.

The number of applications vary and it is impossible to provide the exact numbers as admissions are based on the existing waiting list and beds becoming available and on referrals from University Hospital Galway.

A Cosgrove, Integrated Health Area Manager, Galway Roscommon

W113Q4175	Can the forum be advised of the full staffing cohort of each of the CDNT teams in County Galway? How many children are on the caseload of each of the individual teams?	Cllr J Connolly
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Allocation of current staff employed at month end October 2024.

	CDNT 4 West Galway WTE	CDNT 5 Galway City West WTE	CDNT 6 Central Galway and Galway City East WTE	CDNT 7 North Galway WTE	CDNT 8 East Galway and South Roscommon WTE	CDNT 9 Roscommon & North East Galway WTE
Speech & Language Therapists	5 WTE	4.2 WTE	6.11 WTE	7.5 WTE *	4.6 WTE	6.5 WTE
Occupational Therapists	3 WTE	2.91 WTE	5.7 WTE	6.59 WTE *	4.56 WTE	4 WTE
Psychologists	3.3 WTE	3 WTE	6.3 WTE *	5.4 WTE *	3.6 WTE *	4 WTE *
Physiotherapists	2 WTE	2.54 WTE	5.6 WTE	4.8 WTE *	2.75 WTE	3 WTE
Nursing	0.5 WTE	0.49 WTE	1 WTE	1 WTE	1 WTE	2.25 WTE
Behaviour Support	0.5 WTE	0.5 WTE	0 WTE	1 WTE	1 WTE	1.4 WTE
Social Workers	1 WTE	2 WTE	2.514 WTE	1.8 WTE	2 WTE	2.3 WTE
Preschool liaison teachers/Supports Advisor	0.3 WTE	.26 WTE	0.5 WTE	0.81 WTE	1 WTE	0 WTE
Clerical Support	2.4 WTE	2.47 WTE	2.5 WTE	3 WTE	3 WTE	3.94 WTE
CDNM	1 WTE	1 WTE	1 WTE	1 WTE	1 WTE	1 WTE

Note: * denotes therapy assistant posts also noted as working on CDNTs

Metric	CDNT 4	CDNT 5	CDNT 6	CDNT 7	CDNT 8	CDNT 9
	Gal West	Gal City W	Gal City E	E Galway	G R	Rosc
No. of children on open caseload @ month end	352	379	760	609	558	489

A Cosgrove, Integrated Health Area Manager, Galway Roscommon

W113Q4176	Is there a PET (positron emission tomography) scan available for use within the Mid-West and where do people living in the Mid-West access PET scans if required?	Cllr E O'Donovan
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HSE Mid West acute hospitals do not perform PET scans.

Patients who require PET scans are referred externally via their medical team.

Plans are currently being developed for the provision of PET scan in the Mid West which will obviously be subject to funding availability in 2025/2026.

I Carter, CEO Mid West Acute and Older People Services, HSE Mid West

W113Q4177	How many children and young persons are on the waiting list for psychology services in primary care, CAHMS and disability services in CHO3?	Cllr E O'Donovan
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Primary care psychology service:

	0-4 years	5-17 years
Limerick	69	394
Nth. Tipp/East Limerick	21	156
Clare	24	323
Totals	114	873

CAMHS Psychology service:

The Child & Adolescent Mental Health Service (CAMHS) psychologists do not maintain discipline-specific waiting lists. Their waiting list is combined with the overall CAMHS team waiting list. The table below shows the overall waiting list within CAMHS.

	Clare West	Clare East	Limk West	Limk East	Limk Central	N Tipp East	N Tipp West
0 to 3 months	22	11	8	58	6	1	4
3 to 6 months	11		9	27	11	2	3
6 to 9 months	2		4	1	12		
9 to 12 months				1	3		
12 to 15 months					4		
15 to 18 months					2		
18 to 21 months					2		
21 to 24 months					3		
24 to 27 months							
27 to 30 months							
30 to 33 months							
<i>Total</i>	35	11	21	87	43	3	7

Disability psychology services:

The Children's Disability Network Team do not maintain discipline-specific waiting list. The table below shows the overall waiting list within Children's Disability Network Team Services.

Oct-24	CDNT 1	CDNT 2	CDNT 3	CDNT 4	CDNT 5	CDNT 6	CDNT 7	TOTALS
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Wait-time for initial assessment for CDNTs	Blackberry Park	Clare	East Limerick	North Tipperary	South City	Treehouse	West Limerick	
0-3 months	44	31	22	25	37	28	28	215
4-6 months	28	15	25	30	23	41	27	189
7-12 months	54	7	37	57	51	61	35	302
over 12 months	43	0	124	225	112	78	13	595
Total no. of children	169	53	208	337	223	208	103	1301

M Bridgeman, Integrated Health Area Manager, HSE Mid West

W113Q4178	Can I please request detailed information of the services and supports available locally in Limerick for people living with Motor Neurone Disease and their families?	Clr E O'Donovan
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Primary Care Occupational Therapy Services:

People with Motor Neurone Disease have access to Primary Care Occupational Therapy (PCOT) and are prioritised as category 1 clients. Occupational therapists (OTs) assess clients for functional ability and make recommendations in relation to any environmental adaption to their home environment. Clients are signposted to their local authority to apply for housing adaption grants.

In conjunction with the primary care team, the PCOT team provide support in relation to fatigue management, energy conservation and aids and appliances, including manual wheelchairs and power mobility devices.

The PCOT also liaise with the Motor Neurone Disease (MND) Association and MND nurse to support clients.

The Central Remedial Clinic (CRC) has a service level arrangement with the MND Association and undertakes assessments for MND clients with complex postural support needs and prescribe manual and power mobility devices which is funded by the HSE.

If the person with MND's condition deteriorates, the Primary Care Occupational Therapist links with Milford palliative care multidisciplinary team (MDT) in relation to symptom management and ongoing care requirements.

Primary Care Physiotherapy Services:

People with MND can access primary care (PC) physiotherapy services and are prioritised as category 1 clients.

The physiotherapists engage as appropriate with other primary care team members, e.g. OT, community nursing, to meet the person's needs. However, as the client's condition escalates, care is transferred to Milford Care Centre. Milford Care Palliative Services provides a more specialised MDT service and manage more complex care e.g. respiratory including specialist respiratory adjuncts and equipment; swallow and breathing assistance; providing client and family supports etc.

Primary Care Speech Language Therapy (SLT) Services:

Adults with MND have access to and are seen by primary care speech and language therapists. Speech and language therapists (SLTs) provide these clients with augmentative and alternative communication (AAC) support and voice banking as required and also link with the Irish MND Association. SLTs work within the wider primary care multidisciplinary teams and with specialist medical teams and palliative care to support people with MND.

Milford Care Centre (MCC) Services:

Clients who have been diagnosed with MND can access services at Milford Care Centre (MCC). Referrals to MCC are completed by GP or acute hospital teams. The client is triaged by a clinical nurse specialist and the triage team to identify an appropriate pathway for the client:

- **Milford Ambulatory Palliative (MAP) Clinic** - The Milford Ambulatory Palliative clinic is a multi-disciplinary team clinic that sees clients in Milford Care Centre or at its Ennis base. The client is assessed by at least two disciplines and a care plan is established
- **Specialist Palliative Care Day Unit (SPCDU)** – A specialist palliative day care is run as an eight-week program during which the client has their needs assessed and a care plan established. The SPCDU provides multiple therapies including horticulture, art and music therapy. They have access to Physiotherapy, Occupational Therapy, Speech and Language Therapy, Dietician and Nursing care. Clients can also have access to jacuzzi baths (hoists available), aromatherapy and chaplaincy.
- **Specialist Palliative Care Community Services (SPCCS)** - Clients who have specialist palliative care needs who are unable to attend MCC are referred to the Community Services. They will be assessed in their home and a care plan developed. If a client requires input from physiotherapy, occupational therapy or social work, this is arranged.
- **Outpatient department** - Clients also attend outpatient clinics as appropriate.
- **Inpatient unit (IPU)** - Clients may require admission to the inpatient unit for short periods of time to manage symptoms. Clients may also avail of respite or end-of-life care within the IPU.

Disability Services

Adults with MND have access to Disability Services by self-referral or by referral from their GP, Primary Care team staff or the Irish MND Association.

Available disability services supports include personal and/or in-home supports and overnight respite in a designated residential centre:

Personal & In-Home Supports:

Personal Care Supports are provided to support with activities of daily living skills such as meal prep and light housework, and assistance to medical appointments (not including transport). A needs assessment is completed by a service provider and is subject to a regular review due to changing need. Disability Case Management engage on a regular basis with the service user, their family and the appointed MND Association nurse. Service providers include:

- The Irish Wheelchair Association
- Clarecare
- Home Instead
- Care About You
- Bluebirdcare
- Communicare
- West Limerick and Thurles Centres for Independent Living.

Residential Respite (Overnight):

Overnight residential care is provided in Cairdeas, Patrickswell, by Rehabcare. If nursing care is required, Disability Services will seek alternative placement.

M Bridgeman, Integrated Health Area Manager, HSE Mid West

Acute services:

Patients living with motor neurone disease in the Mid West region are seen in neurology clinics in University Hospital Limerick.

Patients can also be referred to acute services through the Motor Neurone Disease Association's nurse referral pathway.

I Carter, CEO Mid West Acute and Older People Services, HSE Mid West

W113Q4179	I would like the recommended response time for purple and red activity calls for ambulance services in Limerick and if those response times are being met and if not, why not?	Cllr E O'Donovan
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NAS report monthly on PURPLE (Echo) and RED (Delta) call activity, category AS1 (life threatening cardiac or respiratory arrest or life threatening other than cardiac or respiratory arrest) calls. Response times per county or CHO are not deemed a Key Performance Indicator (KPI) for the Health Information Quality Authority (HIQA), the Department of Health (DoH) or the National Ambulance Service (NAS). Therefore, reporting and publishing of response times on a county by county or CHO basis is not a requirement.

- PURPLE (Echo, life-threatening cardiac or respiratory arrest) (75% in 18 minutes, 59 seconds)
- RED (Delta, life-threatening illness or injury, other than cardiac or respiratory arrest) (45% in 18 minutes, 59 seconds)

The National Ambulance Service has received 210,774 AS1 and AS2 calls by the end of Q2 2024. By comparison, in 2023 the figure to the end of Q2 was 192,570 and in 2022 it was 190,935. The NAS daily average of calls until the end of Q2 in 2024 was 1,158; it was 1,058 in 2023. NAS emergency call volume to date this year are already up 11% on the same period in 2023.

Despite this year-on-year rise in demand, the NAS has improved service response times for both PURPLE and RED calls. The table below outlines NAS HSE MW response times KPI for the Jan – Nov 2024 (week 1 – week 46 inclusive)

Emergency Call Category	Midwest - Jan – Nov 24
PURPLE (life-threatening cardiac or respiratory arrest)	74.84%
RED (life-threatening illness or injury, other than cardiac or respiratory arrest)	49.56%

N Murray, General Manager Area Operations, NAS.

W113Q4180	Can the HSE please outline its plan for long term management for care provision of current residents of the two private Nursing Homes, Aperee Living Ballinasloe and Aperee Living Galway, which the HSE has stepped in to take over as the registered provider since June 29 and August 6 respectively?	Cllr E F Parsons
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HSE are appointed registered provider of last resort to Aperee Ballinasloe and Aperee Galway.

The preferred option for the long term management of the Residents is that the nursing homes are purchased by and operated by private providers. Both Aperee Galway and Aperee Ballinasloe are currently on the open market.

A Cosgrove, Integrated Health Area Manager, Galway Roscommon

W113Q4181	The National Cancer Strategy 2017-2026 sets a key performance indicator of enrolling 6% of cancer patients in therapeutic clinical trials annually. Currently, only about 2% of patients are being enrolled. Given the high and rising cancer rates, and particularly the high incidence and lower survival rates in the West of Ireland, how does the HSE plan to urgently address this shortfall on both a regional and national level to meet the crucial target they have set before 2026?	Cllr E F Parson
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The HSE West North West - University of Galway Cancer Clinical Trials Annual Plan 2025 aims to harmonise our actions and work toward meeting the national target. The annual plan details five specific objectives and actions to address the shortfall of clinical trial activity at regional level and are listed below.

HSE West North West - University of Galway Cancer Clinical Trials Program Vision, Mission and Core Values

The Vision of the HSE West North West -University of Galway Cancer Clinical Trials program is to provide an inclusive, collaborative, internationally recognised centre of cancer clinical trial excellence where the treatments of the future are tested.

The National Cancer Strategy set a target that 6% of cancer patients in Ireland are enrolled on therapeutic clinical trials by 2026. The objective of the annual cancer clinical trials plan 2025 is to harmonise our actions and work together toward meeting the national target and also core standards set by of Organisation of European Cancer Institutes.

The ambition for HSE West North West - University of Galway Cancer Trials program is to provide the population in the region access to cancer clinical trials and to increase diversity of cancer trials being conducted, increase the number of patients participating on clinical trials and improve patient experience and patient outcome

Our overarching mission parallels with that of our Clinical Trials Institute which is to improve health by supporting the development of better and safer treatments and diagnostics for disease management and prevention through a platform of excellence, partnership , clinical need ,integration, sustainability and inclusion.

Our core values align with those of the University of Galway and the HSE West North West - these are to build a sustainable platform and relationships nationally and internationally to deliver trials to cancer patients within the region.

We aim to achieve this through working closely with key stakeholders who include; University of Galway and HSE West North West Management Team, Managed Clinical Academic Cancer Network for Cancer, Translational and Clinical Investigators within the HSE West North West region, Cancer Care Clinicians and Allied Health Professionals, Cancer Community Groups , Patients and Public within the region Industry and Academic Partners :Organisational networks: TMRN, Clinical Trials Institute, Cancer trials Ireland, Irish Cancer Society, Science Foundation Ireland and the Health Research Board,

Inputs into the HSE West North West - University of Galway Cancer Clinical Trials Annual Plan 2025 include:
CTEA grant 2023-001, Saolta University Health Care Group Strategy 2019- 2023 & 2024 Addendum. University of Galway Strategic Plan *Shared vision shaped by values 2020-2025*,
Institute for Clinical Trials Future Trials Strategy 2023-2026. HRB Strategic Plan 2021-2025- Health research -making an impact and National Cancer Strategy 2017-2026.

The purpose of this annual plan is to define the goals and objectives for advancing Cancer Clinical trials across HSE West North West - University of Galway for the period January 1st 2025- December 31 2025.

It provides a roadmap to enable a clear and unified sense of direction, create efficiency and increase clinical trial activity and accessibility in the West of Ireland.

A Cosgrove, Integrated Health Area Manager, Galway Roscommon

A National Clinical Trials Oversight Group was established in July 2024 which involves the Department, the HSE, the HRB and other stakeholders with the aim of doubling the number of clinical trials taking place in Ireland, and that this is a key objective under the National Cancer Strategy, the National Strategy for Accelerating Genetics and Genomics, and Impact 2030: Ireland's Research and Innovation Strategy.

National Cancer Control Programme

W113Q4182	Noting that the former Taoiseach told the Dail in November 2022 that construction was intended to commence on the proposed new 42 bed ward block at Sligo University Hospital in Quarter 1 of 2023; can the Forum have an up to date report indicating when work is expected to commence on the extension and when it is expected to be completed.	Cllr D Bree
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In relation to 42 bed ward for SUH, a tender competition was held in 2024 to undertake the works to the main block associated with this project. Approval was obtained to award a contract for same, however the Contractor identified has withdrawn from the Tender process. A new tender process will commence. This will push the timescale of the project out by approximately 3 months with the expectation that Contractor will now be onsite late Q1 or early Q2 2025, following successful outcome from this process.

This project is comprised of a number of elements and all works bar the main block has been completed. These include:

- (i) alterations to the existing Out Patients Car Park;
- (ii) provision of a new fire tender vehicular entrance from the Mall;
- (iii) relocation of the existing CAT Scan unit with connecting corridor to Level 3 concourse;
- (iv) construction of a single tier multi storey complex with the provision of 90 no. parking spaces;
- (v) all landscaping, site works and services associated with completed elements of the works relating to the multi-level car park have been completed.

M Conneely, Assistant National Director, Capital & Estates

W113Q4183	While welcoming the appointment of an agency consultant for the CAMHS ID service in Sligo, can the Forum be provided with an update in regard to the appointment of a permanent consultant for the service.	Cllr D Bree
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As advised previously the appointment of a permanent consultant for the CAMHS ID service in Sligo is currently advertised on the PAS website and has been since 18th June 2024.

In order to enhance the recruitment campaign further a Consultant MHID Child & Adolescent Brochure was uploaded to the PAS website in an attempt to attract candidates to apply for this post. Regrettably despite best efforts no applications have been received to date.

The agency MHID CAMHS consultant commenced in the service on the 19th November 2024 and not 4th November 2024 as previously stated.

J Fitzmaurice, Integrated Health Area Manager, Sligo, Leitrim, South Donegal, West Cavan

W113Q4184	How many agency staff in total are currently working in the HSE in County Sligo (in Sligo University Hospital and St. John's Hospital); what is the total cost of employing these agency staff and if these people had been employed directly by the HSE what the cost would have been in 2023 and in 2024 to date.	Cllr D Bree
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There was an average of 38 agency staff working in Sligo University Hospital during October.
There was an average of 22 WTE agency staff working in St. John's Hospital during October.

Agency workers are hired to cover short term needs such as filling in for shifts or covering employees on leave. This flexibility allows each of the services to maintain operational continuity without long term commitments. However, a small percentage of agency workers are used for full time cover. Employing agency workers full time can also offer services the ability to adapt quickly to fluctuating demands without the costs or obligations associated with permanent hires.

SUH	2023	2024 (Jan-Sep)
Total cost for Agency staff	€11.17m	€8.652m
Estimated figures if staff directly employed by HSE	€7.260m	€5.624m
St John's Hospital		
Total cost for Agency staff	Not available at time of issue	€1.6m
Estimated figures if staff directly employed by HSE	Not available at time of issue	€1.2m

J Fitzmaurice, Integrated Health Area Manager, Sligo, Leitrim, South Donegal, West Cavan

W113Q4185	I ask that the Forum be provided with up to date details including the identity of each property rented by the HSE in Sligo and Leitrim, the purpose for which each property is used by the HSE, the annual rent paid for each property, the rent paid per square foot, and the date on which the rental agreement was entered into in respect of each property.	Cllr D Bree
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See attached table.

Sligo Leitrim - Schedule of Operating Leases 2024						
Address of Property	Service	User	Total Yearly Payment €	Area (GIA/NIA) sq.ft	Payment/ Sq.ft €	Commencement Date
406 & 407 Millbrook, Sligo	Sligo General Hospital		€22,569.96	Data not Available	Data not Available	24/05/2001
Cherrymount, Ardaghown, Sligo	Sligo General Hospital	SUH Finance	€41,140.08	Data not Available	Data not Available	14/08/2001
Hughes' House, Ardaghown, Sligo	Mental Health Service	SUH Finance	€14,216.32	Data not Available	Data not Available	06/05/2001
49 Yeats Heights, Sligo	Ambulance Service	Mental Health Service	€7,200.00	1507	4.78	01/01/2006
Tullyleague, Carrick on Shannon Co.Roscommon	Disabilities		€23,000.00	Data not Available	Data not Available	01/11/2020
1 Glendallon	Disabilities	Disability Residential	€12,087.92	1922	6.29	09/04/2015
60 Glendallon, Sligo	Community Services	Disabilities	€3,397.68	1922	1.77	01/01/2000
Dromod, Co Leitrim	Children's And Families (10%) (Tusla)	Carmel Carthy Poc	€5,000.00	Data not Available	Data not Available	Data not Available
JFK House ,JFK Parade ,Sligo	Community Services (90%)		€20,734.00	753	27.52	Data not Available
JFK House ,JFK Parade ,Sligo	Learning Disabilities Service	Primary Care	€186,606.00	6781	27.52	01/03/2002
22 Steeple View, Collooney, Sligo	Disabilities		€13,200.00	1830	7.21	12/08/2002
21 Steeple View, Collooney, Sligo	National Pensions/ Helpdesk	Disabilities	€13,200.00	1830	7.21	12/08/2002
Cluainin Enterprise Centre, Manorhamilton units 4,5,6,7	National HR Services	HR	€0.00	Data not Available	Data not Available	01/01/2002
Cluainin Enterprise Centre, Manorhamilton Units 1,2,3,8,9, 10,11	Finance/ Learning Disabilities Services/Property Management	HR	€0.00	Data not Available	Data not Available	01/04/2013
Hilldrum House, Carrick-on-Shannon	Community Services	Primary Care	€7,749.00	Data not Available	Data not Available	04/02/2002

Units 3,4, Willow Grove, Carrick-on-Shannon	Community Services	Primary Care	€10,710.00	Data not Available	Data not Available	01/10/2001
Units 5,6,7 & 8 Willow Grove, Carrick-on-Shannon	Public Health Office	Primary Care	€21,150.00	Data not Available	Data not Available	01/07/2000
Bridgewater House, Sligo	Learning Disabilities Service		€35,002.92	Data not Available	Data not Available	01/05/2001
13 Mail Coach Road, Sligo	Mental Health Service		€24,300.00	Data not Available	Data not Available	01/01/2023
Ardaghown, Sligo (Brian Lang)	Disabilities	Community Services Liaison Team	€7,249.92	Data not Available	Data not Available	07/06/2001
48 Yeats Heights, Sligo	Mental Health Service	Disabilities	€7,200.00	1507	4.78	07/02/2005
6 Greenfort, Sligo	Sligo General Hospital	Mental Health Service	€7,200.00	Data not Available	Data not Available	14/02/2005
Portocabin (SGH) Maintenance	Learning Disabilities Service		€33,248.80	4844	6.86	01/01/2005
35 Highfield, Charlestown Road, Tubbercurry, Co. Sligo	Disabilities		€4,200.00	1830	2.30	01/01/2007
Loughtown House, Summerhill, Carrick-on-Shannon	Disabilities	Disabilities	€11,400.00	Data not Available	Data not Available	01/07/2007
Rusheen House, Doonally, Ballygawley, Sligo	Mental Health Service	Disability Residential	€10,800.00	2772	3.90	01/08/2007
St Martin's Strandhill Road, Sligo	Mental Health Service	Residential Care	€24,000.00	2153	11.15	01/02/2017
12 Keenaghan Crescent, Ballymote, Co. Sligo	Mental Health Service	Mental Health Service	€6,000.00	Data not Available	Data not Available	05/08/2006
68 John Street, Sligo	Disabilities	Regional Counselling Service	€14,870.00	1788	8.32	01/08/2006
Juderobe, Ballinode, Sligo	Mental Health Service	Disability Residential	€15,600.00	Data not Available	Data not Available	01/09/2005
Liscarney, Pearse Road, Sligo	Community Services		€32,500.00	2153	15.10	02/01/2004
Spa Brae, Kinlough, County Leitrim	Disabilities	Primary Care	€9,500.00	Data not Available	Data not Available	01/03/2005
8 Shannon Quay, Rooskey, Co Leitrim	Disabilities	Disability Residential	€10,800.00	Data not Available	Data not Available	01/04/2018
Invergeal, Carrick-on-Shannon (includes service charge)	Occupational Therapy Service	Children Disability Network Team	€23,500.00	Data not Available	Data not Available	01/05/2004
1A Ballytivnan, Sligo	PPARS National Project & IPMS		€8,610.00	Data not Available	Data not Available	01/09/2004

C/o Feehily's Duck St, Sligo	Disabilities	IT, IFMS,E-Health	€150,000.00	12413	12.08	01/09/2004
36 Aylesbury, Strandhill Road, Sligo	Sligo General Hospital	Disabilities	€13,800.00	1507	9.16	17/05/2004
St. Francis, Ardaghowen, Sligo	Disabilities		€30,000.00	2647	11.33	30/05/2005
Medi Centre, Kempton Parade, Sligo	Sligo General Hospital	Iona Steps	€27,000.00	3000	9.00	20/12/1999
Portocabin	Mental Health Service		€23,450.08	Data not Available	Data not Available	01/01/2007
1A Caltragh, Sligo	Employee Assistance Programme		€13,320.00	Data not Available	Data not Available	02/01/2004
2ND Floor, Carroll House	Camhs	HR	€16,690.00	Data not Available	Data not Available	04/10/2017
3rd floor,Waterfront House, Sligo	Mental Health Service	Mental Health Service	€43,600.00	4329	10.07	30/12/1999
Teach Laighne, One Stop Shop, Tubbercurry, Co. Sligo	Environmental Health	Community Services (50%)	€28,176.16	3895	7.23	06/01/2004
Teach Laighne, One Stop Shop, Tubbercurry, Co. Sligo	Primary Care	Environmental Health	€23,123.90	1281	18.05	06/01/2004
Teach Laighne, One Stop Shop, Tubbercurry, Co. Sligo	Mental Health Service	Primary Care	€21,957.99	1216	18.05	06/01/2004
One Stop Shop, Tubbercurry, Co. Sligo	Mental Health Service	Community Services	€11,270.47	624	18.05	06/01/2004
68A John Street, Sligo	Disabilities	Regional Counselling Service	€12,480.00	1044	11.95	01/10/2014
Nephin Drive, Enniscrone, Co. Sligo	Mental Health Service	Disability Residential	€19,200.00	1507	12.74	01/06/2001
12 Rathanna, Sligo	Community Services	Mental Health Service	€18,000.00	Data not Available	Data not Available	24/05/2019
Portocabin, Markievicz Hse, Sligo	HSE Procurement/Purchasing		€950.40	Data not Available	Data not Available	26/02/2000
Unit 1, 1A, 2 & 9 St Colms Finisklin Business Park	Learning Disabilities Service		€120,000.00	9025	13.30	01/01/2013
The square, tubbercurry, co Sligo	Internal Audit		€1,560.00	Data not Available	Data not Available	Data not Available
The square, tubbercurry, co Sligo	Disabilities		€1,560.00	Data not Available	Data not Available	Data not Available
Nazareth House, Sligo	Disabilities	Children Disability Services	€100.00	78943	0.00	Data not Available
Cregg House, Sligo	Disabilities	Steps/Iona Day Services	€98,400.00	7480	13.16	01/09/2021

3 Lime Walk, Tubbercurry, Sligo	Regional Counselling Service	Disability Residential	€16,536.00	3810	4.34	01/01/2013
Hartley House, Carrick on Shannon	Disabilities		€16,200.00	Data not Available	Data not Available	01/08/2015
32 Laurel Lodge, Sligo	Disabilities	Disability Residential	€10,380.00	Data not Available	Data not Available	01/10/2016
15 Laurel Lodge	Mental Health Service	Disability Residential	€10,200.00	Data not Available	Data not Available	Data not Available
23 Knocknaganny Park, Sligo	Disabilities	Mental Health Service	€11,820.00	1615	7.32	01/01/2016
Strandbeg Apartment, Summerville, Standhill, Sligo	Learning Disability Service	Disability Services	€23,200.00	Data not Available	Data not Available	01/01/216
13 The Strand, Enniscrone, Sligo	Management Services		€10,200.00	Data not Available	Data not Available	15/02/2016
Finisklin Business Park	Temporary Testing Centre		€33,319.00	Data not Available	Data not Available	01/01/2022
Unit 1, North West Business Park, Carrick on Shannon	Primary Care		€24,999.96	Data not Available	Data not Available	Data not Available
Coen's House, Tubbercurry, Co. Sligo	HR/Disabilities Day Centre		€12,800.00	Data not Available	Data not Available	Data not Available
Cleveragh Business Park	Disability Day Services		€49,932.00	Data not Available	Data not Available	09/12/2023
Cortober, Carrick on Shannon, Co. Roscommon	Older Person's Services		€28,500.00	Data not Available	Data not Available	01/11/2017
Woodhaven Sligo	Mental Health Service	ICPOP, Enhanced Community Care Team Sligo	€67,500.00	Data not Available	Data not Available	01/10/2022
69 John St. Sligo	Disabilities	Regional Counselling Services	€15,000.00	1044	14.37	01/03/2022
Unit 52 Fairgreen Ballysadare Co. Sligo	CMNE	Disability Day Services	€51,765.00	Data not Available	Data not Available	26/08/2021
2nd Floor, Block 8, the Grove, Clarion Road, Sligo. F91 A2FP	Social Inclusion	CMNE	€120,000.00	7750	15.48	16/08/2024
2nd Floor, Block 8, the Grove, Clarion Road, Sligo. F91 A2FP	Disabilities	Social Inclusion & Children First	€42,153.79	4090	10.31	16/08/2024
Unit 2 Duncans Island, Finisklin Business park, Sligo	Disabilities	Disability Day Services	€35,000.00	Data not Available	Data not Available	01/12/2023

M Conneely, Assistant National Director, Capital & Estates

W113Q4186	Can I ask for a detailed report on the primary care centre for Abbeyfeale Co Limerick.	Clr L Galvin
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The HSE is committed to the delivery of primary care centre accommodation for Abbeyfeale, Co Limerick. It is intended to deliver the new Primary Care Centre in Abbeyfeale, Co. Limerick via the Operational Lease Model. Primary Care Services in Abbeyfeale are currently delivered from various locations in the town so the development of a new primary care centre in this location would allow for both the co-location and expansion of services. Services intended to be delivered from the new Primary Care Centre include Public Health Nursing Services, Physiotherapy Services, Speech and Language Therapy Services, Occupational Therapy Services, Social Work Services, Dietetic Services, Dental Services and various satellite clinics.

A procurement process is currently underway for this location. Expressions of interest have been sought via advertisement on e-tenders. An evaluation of the submissions received is being undertaken. It is intended to progress to the next stage of the process in the coming weeks where priced offers will be sought for the project. Tenders are anticipated to be returned in Q1 2025 and a successful tender will subsequently be identified. Further information will be available on the project delivery plan at that point in time.

Joe Hoare, Assistant National Director, HSE Capital & Estates

W113Q4187	Please provide an update on the property evaluation report for St. Brigid's Hospital, Ballinasloe and any plans to clean up the campus and stabilise buildings.	Clr A Harney
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The evaluation report has been reviewed in draft format. Further discussion is required with stakeholders in relation to aspects of the report. It is anticipated that approval will be sought to dispose of elements of the portfolio in early 2025.

Unfortunately we have a limited Maintenance budget and we will always prioritise works required in our existing buildings in use by our service users and the general public.

M Conneely, Assistant National Director, Capital & Estates

W113Q4188	I understand there are issues with phone signal in the new ward blocks at Portiuncula University Hospital, are plans in place to remedy this?	Clr A Harney
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There is currently an issue with mobile phone coverage in the new 50 bedded replacement ward block. This is similar to other sites. Nationally IT are reviewing all sites and are prioritising sites to improve cellular coverage – this work will progress in 2025.

A Cosgrove, Integrated Health Area Manager, Galway Roscommon

W113Q4189	Please provide information on the availability of training places for advanced paramedics in Ballinasloe.	Clr A Harney
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Regarding the privileging course for paramedics, due to the significant intake of new Student Paramedic, the privileging course has not yet taken place. However, the NAS is reviewing the privileging process for Advanced Paramedics and, following consultation with union representatives, has committed to providing programmes for privileging upon completion of the review of the current process, where the needs arises, and in-line with the operational requirements of the Service. The intention is to present such courses of privileging centrally in the National Ambulance Service College.

The privileging course is available to people (Advanced Paramedics) who have been away from the service for a while or for Paramedics in recognition of prior learning.

JJ McGowan, Chief Ambulance Officer - West

W113Q4190	There is a need for an increase in capacity in GP services in Ballinasloe, Co Galway, are there plans in place to increase capacity?	Clr A Harney
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It is recognised that there is currently an undersupply of GPs in Ireland. We are faced with a recruitment and retention challenge in the speciality. Our population is growing and GP Visit Card Eligibility is being extended on an incremental basis. In an effort to deal with this matter, the Health Service Executive, in conjunction with the Irish College of General Practitioners (ICGP), is working hard to increase the number of GPs in Ireland. The number of doctors being accepted for training under the GP Training Schemes throughout the country has increased incrementally in recent years from 236 in 2021, 258 in 2022, 285 in 2023 to 350 in 2024 (an increase of 48% on the 2021 figure), and is likely to increase further going forward. The GP Training

Programme is a four year programme so it is hoped that the increase in the number of qualified GPs will assist with the problems in the future.

In relation specifically to GP services in Ballinasloe, Co. Galway there are two GP practices in the town with six GPs holding contracts with the HSE for the provision of services to Medical Card holders under the General Medical Services (GMS) Scheme. The number of Medical Card holders receiving services from those GPs is 6,293 (an average of 1,049 per GP). Under the terms of the GMS Scheme, GPs are permitted to have 2,200 on their panels but most GPs opt to close their panels before this figure is reached. There are no vacancies at present for GPs under the GMS Scheme in the town, so the HSE is not in a position to advertise for additional GPs there. However the practices can employ additional GPs to work with them in private capacities if they so wish.

Under the terms of the GMS Scheme, any qualified General Practitioner, who is on the Specialist Register in the speciality of General Practice with the Irish Medical Council, is entitled to apply for entry to the GMS Scheme through an Open Entry Arrangement. If successful, the GP is granted a GMS Contract without a panel of patients. This GP can then accept new Medical Card patients on to their GMS panel, or existing Medical Card patients can transfer to the new GP if they wish. Most GPs who join the GMS Scheme in this way, join existing GP practices, as it would be very difficult for a new GP to set up business on their own without a panel of patients. The initiative to join the GMS Scheme in this way must come from the GP, as the HSE has no panel of patients to offer to potential candidates.

A Cosgrove, Integrated Health Area Manager, Galway Roscommon

W113Q4191	Can the HSE please outline the criteria for removal of a Service User from CDNT to another Team ie: Primary Care and provide me with a breakdown of the numbers of Children removed from the CDNT in Donegal East since 1 st January 2024 and a breakdown of what Services these were transferred to?	Cllr G McMonagle
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In line with the National Policy on Discharge/Closure and Transfer from CDNTs to other services, the following are the criteria for discharge from CDNTs

Reasons for Discharge/Closure

A service for a child may be finished because:

- The young person has reached the age of 18 years, or has completed second level school if later and service was extended to his or her 19th birthday to meet the young person's specific needs
- The child has attained the expected outcomes of service interventions or has made significant gains and no longer requires intervention
- Discharge is requested by the parents, or by the young person if over the age of 16 years
- The family has not brought their child for services on a persistent and ongoing basis despite efforts by the team to engage and facilitate them

In line with the National Policy on Discharge/Closure and Transfer from CDNTs, the following are reasons for transfer from CDNTs.

Transfer of Services

A child may be transferred to another service because:

- The child has moved address and no longer lives in the team's geographic area and so is transferring to another team
- The child's needs have changed and could be met by Primary Care Services
- The child's needs are more appropriately met by CAMHS

The decision makers in this process are the members of the interdisciplinary CDNT team.

The following table outlines the breakdown of what services children were transferred to from 1st January 2024:

Children's Disability Network Team (CDNT)	Month in 2024	Total # of Children Discharged from CDNT	Transferred to Adult Services	Discharged from all services – No longer require intervention	Discharged at request of family or young person over 16	Discharged due to non attendance/ non engagement	Transferred to Primary Care	Transferred to CAMHS	Transferred to another CDNT – from change of address	Other – e.g. NEPS, Behaviour Clinic etc.
Donegal East CDNT	January	-	-	-	-	-	-	-	-	-
	February	2	-	-	-	1	-	-	1	-
	March	2	-	-	-	-	2	-	-	-
	April	2	-	1	-	-	1	-	-	-
	May	11	-	1	-	1	8	-	1	-
	June	3	-	-	-	-	2	1	-	-
	July	9	-	-	1	-	8	-	-	-
	August	11	1	-	-	-	7	1	2	-
	September	11	-	-	-	3	6	-	1	1
	October	7	1	-	-	-	5	-	1	-
	Total	58	2	2	1	5	39	2	6	1

D Monaghan, Integrated Health Area Manager, Donegal

W113Q4192	Can I be provided with a current breakdown of Staff in place by Grade Code as of November 1 st 2024 in each Donegal CDNT area and what is the current vacancies by Grade Code in each of the CDNT areas (Donegal East, Donegal South West, Donegal North, Donegal Inishowen) as of 1 st November 2024?	Cllr G McMonagle
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The tables below outline the current breakdown of staff in place and the current vacancies, by grade code, in each County Donegal CDNT area, i.e., Donegal East, Donegal South West, Donegal North and Donegal Inishowen, as of 1st November, 2024.

Children's Disability Network Team Posts in place in Co. Donegal as at 1 st November, 2024			
CDNT	Discipline	Grade Code	WTE in place
Donegal Inishowen	Children's Disability Network Manager	6010	1
	Staff Grade Psychologist, Clinical	3689	1
	Senior Clinical Psychologist	367Y	1
	Senior Occupational Therapist	3301	1
	Senior Occupational Therapist	3301	0.8
	Senior Speech & Language Therapist	3379	1
	Social Worker	3017	1
	Clinical Nurse Specialist	2119	1
	Grade III Clerical Officer	0609	1
	Social Care Worker	2119	1
	Autism Therapist	3029	1
Donegal South West	Senior Speech & Language Therapist	3379	2.6
	Speech & Language Therapist	336Y	2

	Senior Psychologist	3692	0.8
	Senior Clinical Psychologist	367Y	1
	Psychologist Assistant	6521	1
	Social Care Leader	3030	0.9
	Community Facilitator Disability	3919	1
	Social Worker	3017	1
	Children's Disability Network Manager	6010	1
	Clinical Specialist Occupational Therapist	3824	1
	Senior Occupational Therapist	3301	1
	Staff Grade Occupational Therapist	3298	2
	Senior Physiotherapist	3158	2
	Clinical Nurse Specialist	2632	1
	Grade V Staff Officer	566	1
	Grade III Clerical Officer	0609	1.5
	Senior Dietitian	3395	0.25
Donegal East	Senior Speech & Language Therapist	3379	1
	Senior Psychologist	3693	1
	Staff Grade Psychologist, Clinical	3689	1
	Senior Occupational Therapist	3301	1
	Staff Grade Occupational Therapist	3298	1
	Children's Disability Network Manager	6010	1
	Social Worker	3017	1
	Grade III Clerical Officer	609	1
Donegal North	Social Care Worker	3029	1
	Social Care Worker	3029	1
	Social Care Leader	3029	1
	Grade IV Assistant Staff Officer	558	1
	Grade III Clerical Officer	0609	1
	Grade V Staff Officer	566	1
	Senior Speech & Language Therapist	3379	1
	Speech & Language Therapist	336Y	1
	Speech & Language Therapist	336Y	1
	Autism Therapist	3029	1
	Senior Psychologist	3692	1
	Social Worker, Team Leader	3902	1
	Senior Occupational Therapist	3301	1
	Senior Occupational Therapist	3301	0.5
	Staff Grade Occupational Therapist	3298	1
	Senior Physiotherapist	3158	1
	Children's Disability Network Manager	6010	1
	Senior Speech & Language Therapist	3379	1
	Senior Occupational Therapist	3301	1
	Physiotherapist, Senior	3158	1
	Social Worker, Senior	3019	1

Children's Disability Network Team Vacant Posts in Co. Donegal as at 1st November, 2024

CDNT	Discipline	Grade Code	WTE
Donegal Inishowen	Senior Physiotherapist	3158	0.8
	Speech & Language Therapist	336Y	0.8
	Grade III Clerical Officer	609	1
Donegal South West	Social Care Worker	3029	1.8
	Staff Grade Occupational Therapist	3298	1
	Senior Occupational Therapist	3301	0.8
Donegal East	Senior Speech & Language Therapist	3379	0.8
	Speech & Language Therapist	336Y	1
	Clinical Specialist Occupational Therapist	3824	1
	Senior Physiotherapist	3158	1
	Staff Grade Physiotherapist	314x	1
	Grade V Staff Officer	566	1
Donegal North	Social Care Worker	3029	1.8
	Senior Speech & Language Therapist	3379	2
	Staff Grade Psychologist	3689	1
	Social Worker, Team Leader	3902	1
	Senior Occupational Therapist	3301	1
	Staff Grade Physiotherapist	314x	1
	Senior Clinical Psychologist	367Y	1

Actions taken to address CDNT vacancies include:

CDNT rolling campaigns are continuing. Interviews for these rolling campaigns take place routinely across all grades for CDNTs, and interview dates are arranged with CDNTs on an ongoing basis.

Continued focus on establishing panels across all grades – rolling campaigns ongoing.

Posts are expressed to all panels in an effort to fill.

Information on all vacancies are tracked on a weekly basis to ensure any appropriate follow up actions are progressed as timely as possible.

Weekly report received by the National Recruitment Service on posts they are expressing to panels to track progress.

45 CDNT posts have been filled since October 2023.

In addition, staff from HR and service representatives attended a Recruitment Fair in the Atlantic Technological University (ATU), Letterkenny on 21st October 2024 to promote positions within the HSE, including CDNTs. The 'Staff HSE West North West' Facebook page is regularly updated with information on vacant CDNT posts.

Further bursary sponsorship provided to students of Letterkenny ATU in the areas of Physiotherapy, Occupational Therapy and Dietetics with a view of them taking up employment in CDNTs when they graduate.

D Monaghan, Integrated Health Area Manager, Donegal

W113Q4193

What MEASURES are being taken by the HSE to fill the OT vacancies in Donegal especially those responsible for carrying out Housing adaptation assessments

Clr G McMonagle

	these vacancies are in resulting in delays for people in need of these housing adaptation Grants?	
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The Donegal Primary and Social Care Occupational Therapy (OT) Service has had ongoing significant staffing issues since early 2023, which have impacted response times to referrals made by Donegal County Council to the service. The service has kept Donegal County Council informed of this matter at regular intervals.

Due to these staffing issues, the OT team have been operating within a county-wide contingency service plan since 16th September 2024. This contingency plan outlines that priority 1 referrals for clients with the highest priority clinical need can only be responded to at this time. This is necessary to ensure that safe quality care can be provided by the limited staff resources available in the service. Should clients with the highest priority clinical need require assessment under the Housing Adaptation Grant process, this will occur as it arises for these clients as part of their intervention by an OT. All those prioritised as Priority 2 have been added to the waiting list and cannot currently be responded to by the Primary Care OT Service.

Recruitment to vacant OT posts is being progressed in line with the HSE National Pay & Numbers Strategy.

To attempt to meet the crucial need for OT's to continue to work collaboratively with Donegal County Council, the OT Service has implemented a waitlist initiative to respond to longer waiting referrals, i.e., over 6 months, for Housing Adaptation Grants. This, coupled with the continued work by the Primary Care OT's with those clients presenting with highest priority clinical need, means that there have been in excess of 50 of these referrals responded to and dealt with in 2024 to date. The OT Service plans to continue with this initiative to address the remaining referrals waiting for assessment and will respond to these in date order.

In the meantime, it should be noted that any client wishing to pursue a private OT assessment to progress their Housing Adaptation Grant can do so at any time, with reimbursement possible via the grant funding. This is outlined in the application form for the Adaptation Grant.

A service level agreement between the OT Service and Donegal County Council has been in place for many years and is reviewed annually. The OT Service will continue to work in collaboration with the Council in relation to the Housing Adaptation Grant. In this regard, a meeting will be convened shortly between the OT Service and Housing and Corporate Services in Donegal County Council to discuss the OT service contingency plan and national developments in relation to the Housing Adaptation Grant process.

D Monaghan, Integrated Health Area Manager, Donegal

W113Q4194	Has Respite services resumption and the provision of five day service commenced at Riverwalk House in Carndonagh and can I get an update on the planning and provision of Respite and short break services at Milltown House also in Carndonagh?	Cllr G McMonagle
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Riverwalk Respite House

Respite Services at Riverwalk Respite House in Carndonagh have not yet resumed as the recruitment of the complement of staff required to open the centre remains in progress as follows:

- Two health care assistant positions are at pre-employment clearance stage.
- Two staff nurse positions are at expression of interest stage.

No interest has been expressed for the staff nurse positions from the candidates on the initial panel to which the positions were expressed. However, the HSE Human Resource department are in the process of expressing the posts to additional staff nurse panels in Donegal, Sligo, Leitrim, Cavan and Monaghan Community Services.

In recognition of the national and international shortage of qualified health and social care professionals, including registered nurses, Donegal Disability Services, continue to collaborate with the HSE Human Resource department to develop bespoke recruitment strategies such as: local, national, and London recruitment fairs, bank nurse panel and incentivised recruitment campaigns targeting the Irish nursing diaspora.

In the meantime, Ballymacool Respite House in Letterkenny and Seaview Respite House in Mountcharles, are providing extended respite services for people with disabilities in Donegal.

Milltown Respite House, Carndonagh

HSE Estates and Donegal Disability Services are currently assessing the feasibility of upgrading this facility which is currently not fit for purpose to deliver support services. HSE Estates have conducted a technical evaluation to determine the necessary work, and are now awaiting projected costs to inform a decision as to whether to move forward with the project which, if progressed, will require capital funding to bring it to a fit state of purpose.

D Monaghan, Integrated Health Area Manager, Donegal

W113Q4195	I seek an update on the progress of Ballyhaunis Primary Health Care Centre. I now request a programme of works with timeframes that I have requested on numerous occasions. On the 24 th of September 2024 it was stated in a reply this would be available in a matter of weeks. I now ask that I am furnished with this information.	Cllr A Gallagher
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Since September 2024 the Developer has been assessing existing services, completing minor repairs and coordinating a programme for full return to site with subcontractors. The Works have commenced week beginning 18th November, the extent of which is being monitored with practical completion expected in May 2025. The HSE awaits a detailed breakdown of the Developers proposed programme.

The works undertaken on site to date have been intermittent. The HSE remains in contract with the Developer and progress is being monitored.

M Conneely, Assistant National Director, Capital & Estates

W113Q4196	Ballyhaunis Primary Health Care Centre What date will the HSE occupy the building. On the 24 th of September I was informed that it was a ten-month building programme. Ten months from when?	Cllr A Gallagher
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The Developer has advised that Practical Completion is to be expected in May 2025. On handover, the HSE is afforded a minimum of two months to fit out the building with equipment and furniture.

Assuming the building is delivered to the HSE within the contracted timeframe the HSE expect to occupy the building in late summer 2025. Exact dates will be dependent on equipment deliveries.

M Conneely, Assistant National Director, Capital & Estates

W113Q4197	What is the HSE doing to ensure that the Ballyhaunis Primary Health Care Centre project will be completed?	Cllr A Gallagher
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The HSE continues to monitor the progress of the contract. The HSE solicitors have written to the developers noting if construction does not commence and continue to completion, the HSE will withdraw the agreement for lease for the building.

M Conneely, Assistant National Director, Capital & Estates

W113Q4198	Can you provide me with an update on the commencement of the Regional Rehabilitation Unit at Roscommon University Hospital promised in 2015 and postponed in 2020.	Cllr G Scahill
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A spatial development plan for Roscommon University Hospital is currently underway. This will demonstrate how current service requirements are to be incorporated into the site. Current requirements for the site include bed capacity, acute inpatient mental health services, replacement theatres, Rehabilitation Unit etc. It is anticipated that the first draft of the spatial development plan will be ready for review in December 2024.

M Conneely, Assistant National Director, Capital & Estates

W113Q4199	How many approved consultants posts are there for Roscommon for each speciality and how many are filled on a Permanent basis, how many on a Temporary Basis and how many are vacant?	CLlr G Scahill
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Roscommon University Hospital			
Department	Approved Consultant Post	Consultant Posts Filled Permanent Contract	Consultant Posts Filled Temporary Contract
Medicine	3	2	1
Surgery	2	2	-----
Radiology	2	1	1
Anaesthetics	2	0	2
Total	9	5	4

The above table illustrates the number of approved Consultant Posts which are employed full time by Roscommon University Hospital (RUH). As you are aware RUH have visiting Consultants with sessional commitments.

I can confirm the recruitment process has initiated for the following posts and we will endeavour to fill them as soon as possible:

- Temporary Medical consultant Post - 1 WTE
- Temporary Consultant Radiologist Post - 1WTE
- Temporary Consultant Anaesthetist – 1WTE

A Cosgrove, Integrated Health Area Manager, Galway Roscommon

W113Q4200	Can you provide a progress report on the Central Sterile Services Department (CSSD) at Roscommon Hospital which was agreed between HSE Estates and the Saolta University Health Care Group in 2018?	CLlr G Scahill
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As per the HSE 2024 Capital Plan, the project to replace the Central Sterile Services Decontamination (CSSD) Unit for Reusable Invasive Medical Devices in PUH is at appraisal stage. PUH currently provide an excellent service to Roscommon University Hospital. The new development in PUH will continue to provide a service for RUH and will accommodate any future expansion of services in RUH.

Transporting equipment from RUH to PUH for CSSD remains the most practical and cost effective option.

A Cosgrove, Integrated Health Area Manager, Galway Roscommon

W113Q4201	There is a massive need for additional parking at Roscommon University Hospital, with the current services provided and the age demographic of the majority of people attending it is not acceptable that patients have to walk from the parking available on front of the Hyde Centre. Can you provide me with an update on your plans to facilitate more parking at this site?	CLlr G Scahill
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Roscommon University Hospital is currently engaged with the Estates department in the development of a Spatial Plan for the site which will include plans for provision of additional parking on the site, which is extremely limited at present.

A Cosgrove, Integrated Health Area Manager, Galway Roscommon

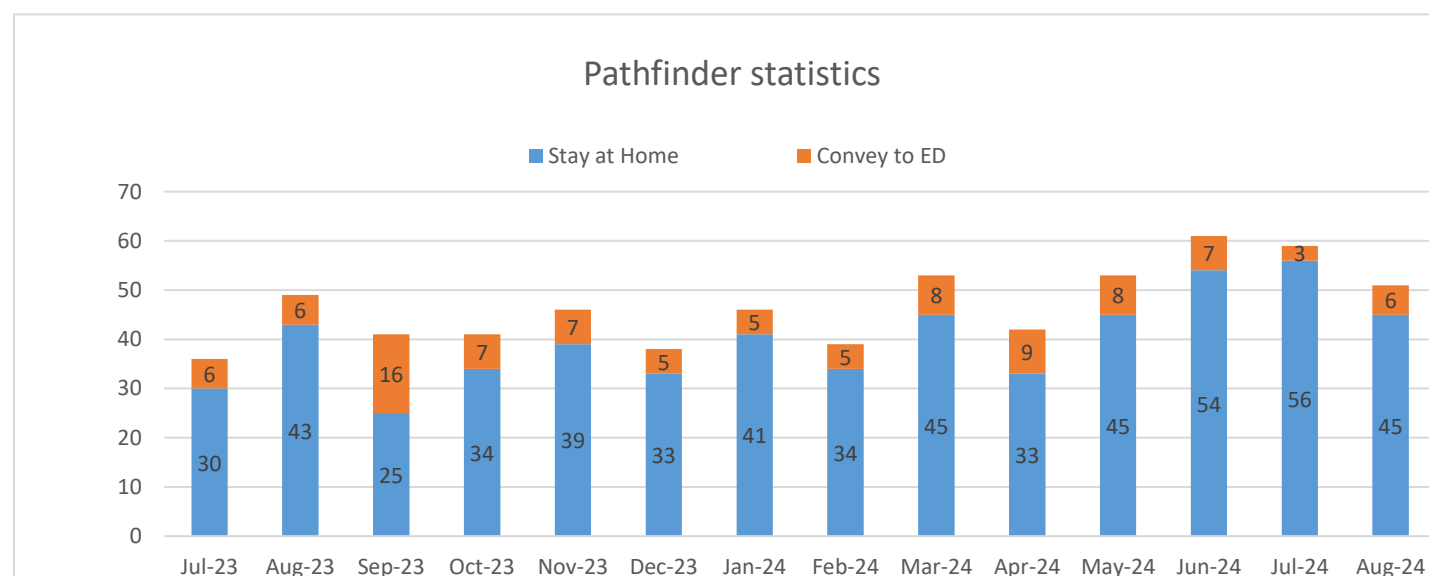
W113Q4202	Can we have an updated report on the numbers of staff deployed to Donegal in the national ambulance service and an updated report in the Pathfinder programme?	CLlr C Brogan
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Staff deployed to Donegal in the NAS – In 2024 there has been 2 cohorts in which we gained a total of 14 new members of NAS staff who were deployed to the various stations throughout the county.

Letterkenny Pathfinder went live on the 12th April 2023.

The ED Avoidance project helps the over 65s to be treated and cared for safely within their own homes. It runs from Mon-Fri 8-8.

To date 869 pathfinder patients in total have been seen by the service and 730 patients have been kept at home safely post call out, giving us a 84% success rate so far.



The types of patients that Pathfinder has been seeing include :

- Falls
- Distal trauma
- Non traumatic back pains
- Generally unwell – including UTIs and chest infections, with a few exacerbations of COPD
- Declining function in their own home
- Blocked/ routine catheter changes
- Oncology/Palliative care patients – Letterkenny Pathfinder had the privileged to keep x2 patients at home with their loved ones who were end of life care.

The continued success is with the warm collaboration with Donegal GP, PHNs and community networks. We all aim to get the appropriate care in place for each patient at the right time. This is in keeping with our Sláintecare Implementation Strategy and Action plan 2021-2023 'Improving safe, timely access to care and promoting health and wellbeing' Treating the Right patient, at the right place, in the right time.

Pathfinder has had patients where clinical decisions had to be made for our patients to convey to ED. Reasons for these patients that have had to go to hospital are as follows

- Fractures
- Sepsis
- Dehydration
- New fast Atrial Fibrillation
- Abdominal pain
- DVT
- CVA/Stroke

- GP requests
- Unsafe to be left at home

Pathfinder has been continuously building bridges and connections in the community with GPs, Public health nurses and other community teams such as CIT, ICTOP, Chronic disease Hubs, and X-ray hubs in the community to keep as many patients as we can safely at home and hope to expand our services for the people of county Donegal.

Letterkenny Pathfinder have also introduced point of care blood testing at home for the first time in the National Ambulance service. This launched in April 2024 and is continuing to grow success with GPs and other community services. The point of care bloods will allow patients to safely receive IV fluids or antibiotics in their home from the NAS. To date Letterkenny Pathfinder have won 3 awards for this initiative and is currently collecting data of their first 50 patients to publish their research findings in the new year.

JJ McGowan, Chief Ambulance Officer - West

W113Q4203	Can we have an updated report on the waiting times in all categories in LUH both in-patient and outpatient and daycare procedure?	ClIr C Brogan
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The report on the waiting times are set out below:

OCT OPD	0-3 Months	3-6 Months	6-12 Months	> 12 Months	Grand Total
Cardiology	589	566	829	56	2040
Dermatology	311	289	381	450	1431
Endocrinology	176	16	10	0	202
Gastro-Enterology	418	246	259	3	926
General Medicine	138	97	21	0	256
General Surgery	964	314	70	11	1359
Geriatric Medicine	153	25	12	6	196
Gynaecology	817	173	17	0	1007
Haematology	129	149	185	105	568
Maxillo-Facial	38	0	0	0	38
Nephrology	60	44	27	1	132
Neurology	169	110	150	247	676
Oncology	34	0	0	1	35
Orthopaedics	1171	470	31	10	1682
Otolaryngology (ENT)	631	325	378	327	1661
Paediatrics	398	101	15	0	514
Pain Relief	20	13	0	0	33
Respiratory Medicine	441	312	454	754	1961
Urology	410	154	2	0	566
Vascular Surgery	28	4	0	0	32
Grand Total	7095	3408	2841	1971	15315

OCT DAY CASE	0-3 Months	3-6 Months	6-12 Months	> 12 Months	Grand Total
Cardiology	33	4	4	0	41
General Surgery	283	59	39	10	391
Gynaecology	49	5	3	0	57
Ophthalmology	1	0	0	0	1
Orthopaedics	234	41	43	33	351
Pain Relief	1	0	1	0	2
Respiratory Medicine	6	1	0	0	7
Urology	110	11	7	7	135
Grand Total	717	121	97	50	985

OCT IPDC	0-3 Months	3-6 Months	6-12 Months	> 12 Months	Grand Total
General Surgery	47	20	18	31	116
Gynaecology	41	15	17	4	77
Orthopaedics	40	11	14	12	77
Urology	17	11	15	21	64
Grand Total	145	57	64	68	334

OCT ENDO	0-3 Months	3-6 Months	6-12 Months	> 12 Months	Grand Total
COLONOSCOPY	486	162	4	1	653
Gastroscopy	400	208	326	6	940
Grand Total	886	370	330	7	1593

D Monaghan, Integrated Health Area Manager, Donegal

W113Q4204	Can we have an updated report the additional accommodation at Donegal Hospice and on the community palliative care services in donegal?	ClIr C Brogan
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Upgrade works are currently being planned at Donegal Hospice, including the development of four new apartments at the premises. These four additional apartments, along with the two current apartments at the Hospice, will provide a larger and more comfortable space for families who are spending time with their loved ones at end of life or who wish to remain with loved ones for symptom control admissions.

At present, Donegal Community Palliative Care is providing palliative care on 5/7 days a week, which is delivered by Palliative Care Clinical Nurse Specialists. Although the Service does not provide a seven-day service, it has alternative support services in place to minimise the impact on patients in the community at weekends.

Some of these supports include a Friday afternoon handover to the NoWDOC service, a 24/7 phone line service, and on-call doctors who can be contacted via the Letterkenny University Hospital switchboard. If symptom control advice is needed after hours or at weekends, the patient / carer / healthcare professional can ring the Hospice and speak initially to the very experienced ward nurses on duty. The Service also has an on-call Registrar and on-call Consultant every night and weekend for backup advice.

D Monaghan, Integrated Health Area Manager, Donegal

W113Q4205	Can we have an updated report on all our capital investment projects in Donegal?	ClIr C Brogan
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Facility	Project	Current Status
Letterkenny University Hospital	Fire Safety Works to Medical Ward Block	Due to go to tender in Q4 2024
Letterkenny University Hospital	Renal Dialysis expansion. Increasing Capacity from 14 to 21.	Detailed Design
Letterkenny University Hospital	Fire Safety Upgrade - Fire Alarm upgrade & new Emergency lighting system.	Complete
Cleary Centre, Donegal Town	New ID Adult Day Services facility	Detailed Design- currently awaiting a grant of planning permission.
Letterkenny University Hospital	Electrical Infrastructure Upgrade, 1980's building. Phases 2 & 3.	Detailed Design
Letterkenny University Hospital	Boiler replacement	Due to go to tender in Q4 2024
Letterkenny University Hospital	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.	Completed in 2024
Letterkenny University Hospital	Accommodation for Physio and OT department at LUH.	Tender stage
Letterkenny University Hospital	New Aseptic Compounding unit. Extension and reconfiguration of the existing	Detailed Design
Donegal Hospice	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. Funded by Donegal Hospice.	Detailed Design
St Conal's Hospital	St. Conal's Refurbishment - fabric upgrade of Block R	Completed in 2024
Letterkenny University Hospital	Weather proofing: Flat roof covering repair and balcony spalling repair works, phased project.	Ongoing project with multiple phases. Phase one is currently under construction

Lifford	Proposed 25 bed Community Nursing Unit at Lifford to replace the existing.	Appraisal- negotiations ongoing to purchase site from Donegal County Council
Lifford	Proposed new Primary Care Centre at Lifford.	Appraisal- negotiations ongoing to purchase site from Donegal County Council
Letterkenny University Hospital	Extension to the existing Orthodontics Dept. The extension will create additional space for new radiology equipment, 2 no. additional treatment rooms, new reception and waiting area and refurbish existing space	Appraisal
Letterkenny University Hospital	Relocate existing AMAU and admin accommodation to a new extension providing 6 no. single rooms. Reconfigure vacated space to provide additional enclosed single ED cubicles (6 No.) & to create separate enclosed ED Paediatric Treatment single cubicles (4 No.) and a stand-alone waiting room.	Appraisal
Buncrana	Renovation of an existing old HSE health centre at McGinn Avenue, Buncrana and conversion to an ambulance base.	Appraisal
St Conal's Hospital	St. Conal's Refurbishment - Redevelopment of existing building to provide a permanent Admin Hub.	Capital Submission Stage
Letterkenny CNU	110 Bed CNU & Medical Rehab to replace existing beds and address capacity deficit as per Service Priority List (formerly PPP). Board Decision no: 300623/42	Under Construction- Due for completion Q1 2026
Falcarragh CNU	Refurbishment (HIQA agreement to follow Dungloe) - 35 beds	Construction- phase 2 to be completed in Q4 2024
Buncranna CNU	Refurbishment (To follow Carndonagh) - 30 beds	To go to tender 2025
Ramelton CNU	HIQA Compliance - Refurbishment - 30 beds	Appraisal
St Joseph's Stranorlar	HIQA Compliance - Refurbishment - 67 beds	Appraisal
Ballinacor, Killygordon, Lifford, Co. Donegal	Purchase and refurbishment of residential dwelling at Ballinacor, Killygordon, Lifford	Detailed Design- planning to be submitted in Q4 2024.

Millbrae, Carndonagh , Co. Donegal	Purchase of a site demolition of the existing building and the construction of a new house for De-congregation.	Detailed Design
Tiernaleague, Carndonagh, Co. Donegal	Purchase and refurbishment of residential dwelling at Tiernaleague, Carndonagh, Co. Donegal for four residents	Detailed Design
Mol an Oige, Stranorlar	Refurb and extend HSE-owned property to decongregate 4 residents from Ard Greine Court	Detailed Design
Cavan Lower, Stranorlar	Refurb and extend HSE-owned property to decongregate 4 residents from Ard Greine Court	Detailed Design
Old Girls' School, Carndonagh	Build on HSE-owned site to decongregate 4 residents from James Connolly Memorial.	Detailed Design
HUB 01 - St. Conals, Letterkenny	Extension to existing Chronic Disease Management Hub to provide support accommodation	Detailed Design
HUB 01 - St. Conals, Letterkenny	New building to house ECC Hub to include ICPOP, ICPCD, Diagnostics etc. A road realignment is required as enabling works	Appraisal

M Conneely, Assistant National Director, Capital & Estates

W113Q4206	Can I have a breakdown of the numbers of patients on the Home Care waiting list in each administrative area of Donegal?	Cllr G Doherty
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As of Tuesday, 12th November 2024, there are 373 clients in Co. Donegal awaiting a new home support service or an increase in their current package of care. Please see below table for a breakdown of the current waiting list per network area.

Donegal Home Support Waiting List by Network Area	
Network Area	# Clients on Waiting List
East	120
Inishowen	40
North	75
South	138
Total	373

D Monaghan, Integrated Health Area Manager, Donegal

W113Q4207	Can I have a breakdown of the numbers of staff working in Home Care provision in each administrative area of Donegal?	Cllr G Doherty
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Staff complement, Donegal Home Support Service End October, 2024	
Network Area	Active Staff

East	138
Inishowen	148
North	228
South	182
Total	696

The establishment of the new Health Regions allows each area to plan and deliver services around the specific needs of people in their area, and to provide a consistent quality of care across the country. Each region has its own budget, leadership team and responsibility for local decision-making.

The HSE recruitment embargo ended on Monday 15th July 2024 with the release of a Pay and Numbers Strategy which was approved by the Department of Health and the Department of Public Expenditure and Reform. The HSE West North West Region has been provided with its own specified number of WTEs and can, within that approved number, replace, recruit and prioritise posts. This provides greater flexibility for Health Regions and national services to respond to the needs of the population and prioritise posts appropriately.

It is important to note that although the resources allocated for Home Support Services across the system are substantial, they are finite; and service delivery must therefore be delivered within the funding available and remain within the Pay and Numbers Strategy.

Donegal Home Support Staffing has increased during 2023 and 2024 as outlined in the table below.

Donegal Home Support Staffing		
Jan 2023 WTE	Dec 2023 WTE	Sept 2024 WTE
452.72	572.15	631.47

This staffing increase has facilitated the Service to reach and exceed the target hours for home support delivery in 2023 and 2024 YTD.

The target for the delivery in 2024 of Home Support in Donegal is set at 1,249,536 hours. Preliminary data currently available reflects the period to the end of September 2024. As of September 2024, a total of 1,053,968 home support hours were delivered across Donegal.

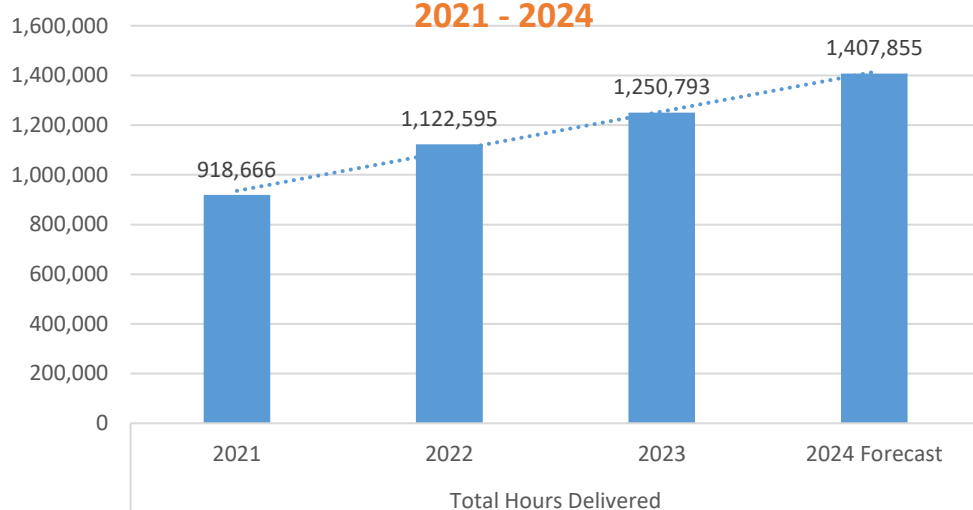
The September forecast projects to year end that the delivery of Home Support in Donegal will be 1,407,855 hours in 2024. This would indicate Home Support Services in Donegal are operating at 158,319 (12.7%) hours above the national service plan target set for 2024.

When comparing the home support hours delivered in Donegal for 2023 with the forecast for 2024, this indicates a year-on-year increase of 157,062 hours (12.6%).

The Chart set out below reflects the Home Support delivery hours across Donegal from 2021-2024 (forecast)

Comparison of Activity for Donegal Home Support Hours Delivered 2021 - 2024

Donegal Home Support Hours Delivered 2021 - 2024



D Monaghan, Integrated Health Area Manager, Donegal

W113Q4208

Can I have a breakdown of the numbers of staff hired as Home Care providers in each administrative area of Donegal in each of the last five years?

Cllr G Doherty

Staff recruited to Donegal Home Support Service 2020 – 2024 to date

Network Area	2020	2021	2022	2023	2024 to date
East	2	19	16	17	25
Inishowen	4	25	23	33	14
North	8	27	32	20	14
South	11	21	30	22	17
Total	25	92	101	92	70

In relation to your query above regarding the breakdown of the number of staff hired as Home Care Providers, our interpretation is that this refers to Donegal Home Support Services.

D Monaghan, Integrated Health Area Manager, Donegal

W113Q4209

Can I have a breakdown of the numbers of Home Care staff who have left the service in each administrative area of Donegal in each of the last five years?

Cllr G Doherty

No. staff who have left Donegal Home Support Service 2020 – 2024 to date

Network Area	2020	2021	2022	2023	2024 to date
East	14	2	6	17	1
Inishowen	9	5	3	33	2
North	17	12	6	20	3
South	15	12	6	22	10
Total	55	31	21	92	16

D Monaghan, Integrated Health Area Manager, Donegal