

**Minutes of Regional Health Forum West Meeting held on  
Tuesday, 27<sup>th</sup> February 2024 at 1.00pm in Room 1, Education Centre,  
Merlin Park, Galway.**

Miontuairiscí chruinniú an Fhórait Sláinte Réigiúnaigh a tionóladh Dé Máirt, 27ú Feabhra 2024 ag 1.00  
i.n, i Seomra 1 an tIonad Oideachais,  
Feidhmeannacht na Seirbhíse Sláinte, Ospidéal Páirc Mheirlinne, Gaillimh

**Chairperson:** Cllr Donagh Killilea

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

**In attendance:**

Tony Canavan, Executive Lead, Regional Health Forum/Chief Executive Officer, Saolta University Health Care Group  
Ann Cosgrove, Chief Operating Officer, Saolta University Health Care Group  
Noreen Spillane, Chief Operating Officer, UL Hospitals Group  
Sonya Cotter, Acting Chief Executive Officer, UL Hospitals Group  
John Fitzmaurice, Chief Officer, Community Healthcare West  
Dermot Monaghan, Chief Officer, Community Healthcare Cavan, Donegal, Leitrim, Monaghan, Sligo  
Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare  
Marian Cavanagh, Regional Health Forum Office  
Anna Lyons, Regional Health Forum Office  
Pauline Clerkin, Regional Health Forum Office

**866/108/24 Minutes of previous meeting – 26<sup>th</sup> September 2023**

The minutes of the previous meeting held on the 26<sup>th</sup> September 2024 were proposed by Cllr Martin McLoughlin, seconded by Cllr John Cummins and adopted.

**867/108/24 Matters Arising:**

Cllr McLoughlin thanked John Fitzmaurice, Chief Officer, Community Healthcare West regarding the appointment of the new GP for Laherdaun.

Cllr Bree raised an issue regarding the request for an official derogation from the trade union Fórsa to allow Regional Health Forum meetings to proceed during the Industrial Action.

**868/108/24 Chairman's Address:**

Cllr Killilea welcomed the new member from Clare Council, Cllr Rita McNerney, who is replacing Cllr Bill Chambers. Cllr Killilea requested that Councillor McNerney convey the good wishes of the RHF West members to Cllr Bill Chambers.

**Request for Estates to attend the next Regional Health Forum Meeting, 26<sup>th</sup> March 2024:**

A number of members requested that Joe Hoare attend the next RHF West Meeting, 26<sup>th</sup> March 2024, via their Chairperson.

**Action:** Tony Canavan agreed to revert to Joe Hoare on this matter.

**869/108/24 Questions:**

**W108Q3825 & W108Q3826 - Progress regarding redeployment of Special Need Therapies:**

**Action:** Dermot Monaghan to revert to Cllr McMonagle by the end of this week (01.03.24) with formal responses to both Questions.

**W108Q3827 - Dental work under GA for children/young people with additional needs:**

**Action:** Maria Bridgeman to revert to Cllr Howard with any update on this service.

**W108Q3832 - Primary Care Centres in Clare, Ennistymon and Sixmilebridge:**

**Action:** Maria Bridgeman will discuss the above Primary Care Centres with Joe Hoare, Estates and revert to Cllr Murphy with an update on both locations.

**W108Q3833 - Diabetes services in the UHL Group:**

**Action:** Noreen Spillane to revert to Cllr Murphy regarding if the Insulin Pump Therapy Adult Service has commenced and the timeline.

**W108Q3834 - Emergency asthma admissions to UHL:**

**Action:** Noreen Spillane will make contact with Public Health to see if there is any other data stream available for this information and revert to Cllr Murphy.

**W108Q3836 - Gort Primary Care Centre:**

**Action:** Joe Hoare to provide more detail on the primary care operational lease programme and explanation of 'priced offer stage' to Cllr Parsons.

**W108Q3837 - HSE Plans including timelines for the two vacant HSE properties on the Ennis Road Gort:**

**Action:** Joe Hoare to revert to Cllr Parsons with more details on the timelines of the two vacant properties on the Ennis Road Gort and if the decision rests with the council.

**W108Q3838 - Health Centre in Ballygar:**

**Action:** John Fitzmaurice to revert to Cllr Parsons following a meeting on 11<sup>th</sup> March with Estates after which a more accurate timeline will be available regarding accommodation requirements in the Ballygar area for HSE services.

**W108Q3847 - Hydrotherapy pool in Cregg:**

**Action:** Dermot Monaghan to provide Cllr Bree with the dates and times from 1<sup>st</sup> August 2023 to present of meetings with Woodbrook Care and minutes of same, also when the pool will be available to the Disability Services in Sligo/Leitrim.

**W108Q3848 – Recruitment of Consultants for CAMHS ID Sligo, Leitrim, Donegal:**

**Action:** Dermot Monaghan to provide Cllr Bree with clarification regarding the Consultant replacement post in CAMHS ID service and why it is a replacement post.

**W108Q3850 - Day Care Hospital Services at Carndonagh Community Hospital:**

**Action:** Dermot Monaghan to provide a timeline to Cllr Doherty on the North Inishowen Day Care Service and agreed to a further meeting with the Committee for the Restoration of Carndonagh Day Care Services to update them.

**W108Q3852: Extension to Mortuary Services hours- Our Lady's Hospital Manorhamilton:**

**Action:** Tony Canavan will discuss with Cllr Gurn.

**W108Q3854 - Milltown House:**

**Action:** Joe Hoare to provide an update and the timeline for the refurbishment works at Milltown House to Cllr Doherty.

**W108Q3854 - Riverwalk House:**

**Action:** Dermot Monaghan to provide an update and the timeline for the flooring works at Riverwalk House to Cllr Doherty.

**W108Q3856 - Respite Services Lifford Community Hospital and St Joseph's catchment area:**

**Action:** Dermot Monaghan to provide clarification to Cllr Crawford regarding respite services in St Joseph's Hospital and the Finn Valley area.

**W108Q3857 - Lifford Community Hospital:**

**Action:** Dermot to revert to Cllr Crawford regarding if an inspection has been carried out at the Habinteg facility at Ballyduff Park in Lifford.

**W108Q3858 - Day care Services provision for St Joseph's Stranorlar area:**

**Action:** Dermot Monaghan to provide Cllr Crawford with an update on the situation in relation to day care provision in the St Joseph's Stranorlar area.

**W108Q3860 - Ophthalmic services and supports in Inishowen and Donegal:**

**Action:** Ann Cosgrove to provide Cllr Doherty with how many patients can and do benefit from the once a month cataract surgery at Letterkenny University Hospital.

**W108Q3862 - ED Consultants at GUH:**

**Action:** Ann Cosgrove to revert to Cllr Connolly regarding the start dates of the 4 new ED Consultants at GUH.

**W108Q3872 - School Immunisations in Co Galway:**

**Action:** John Fitzmaurice to provide Cllr Ó Cualáin with the number of Schools that do not allow access for immunisation to take place on the premises.

**870/108/24 Motions:**

**W108M172 - Life Saving First Aid to be completed by all students before completion of Junior Certificate:**

This motion was proposed by Cllr Donagh Killilea, seconded by Cllr Dáithí Ó Cualáin and agreed by all Councillors present.

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

**W108M173 – Invite new Chief Executive Officer HSE, to a meeting of the Forum:**

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

**Action:** Motion to be forwarded to Mr Bernard Gloster, CEO, HSE.

**W108M174 – Staffing and operation of a CAMHS Specialist ADHD Team:**

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

**W108M178 – National Children’s Hospital:**

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

**Action:** Motion to be forwarded to the Chairperson of the NPHDB and Chief Executive, Children’s Health Ireland.

**871/108/24 Date & Time of Next Meeting:**

The next **Regional Health Forum Meeting** will take place on Tuesday, 26<sup>th</sup> March 2024 at 2pm in Galway.

The next **Regional Health Forum Committee Meeting** will take place on Tuesday, 23<sup>rd</sup> April 2024 at 2pm in Manorhamilton.

This concluded the business of the meeting.

Signed:

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Cathaoirleach/Chairman

*Adopted at the Regional Health Forum West meeting*

**QUESTIONS AND RESPONSES RECEIVED**  
**REGIONAL HEALTH FORUM WEST – 26<sup>TH</sup> MARCH 2024**

<b>Number:</b>	<b>QUESTION</b>	<b>RAISED BY</b>	<b>Page No.</b>
<b>W109Q3885</b>	Progress of the new St Joseph's Hospital for Ennis.	<b>Cllr R McNerney</b>	<b>3</b>
<b>W109Q3886</b>	Mid West Readmission data re chemotherapy patients during treatment.	<b>Cllr R McNerney</b>	<b>3-4</b>
<b>W109Q3887</b>	Transport of physical patient files between sites in Mid West, cost and service satisfaction.	<b>Cllr R McNerney</b>	<b>4-5</b>
<b>W109Q3888</b>	Shannondoc- use of Video Consultations to triage patients.	<b>Cllr R McNerney</b>	<b>5</b>
<b>W109Q3889</b>	Vermin (Rat) control in public areas, responsibility for dealing with it?	<b>Cllr M Kilcoyne</b>	<b>5-6</b>
<b>W109Q3890</b>	Home help in Mayo.	<b>Cllr M Kilcoyne</b>	<b>6</b>
<b>W109Q3891</b>	New A & E at Mayo University Hospital, Progress on 70 bed extension.	<b>Cllr M Kilcoyne</b>	<b>6</b>
<b>W109Q3892</b>	Day Care Centre, Sacred Heart Hospital, Castlebar, change to 5 days opening?	<b>Cllr M Kilcoyne</b>	<b>6</b>
<b>W109Q3893</b>	Number of attendees through each MAUs in RHF West area hospitals, 2020- 2023.	<b>Cllr C Murphy</b>	<b>7</b>
<b>W109Q3894</b>	Number of attendees through the EDs in RHF West area hospitals, 2020-2023.	<b>Cllr C Murphy</b>	<b>8</b>
<b>W109Q3895</b>	New on-site GP service to assess attendees to the ED in UHL.	<b>Cllr C Murphy</b>	<b>9</b>
<b>W109Q3896</b>	Any plans for access to labs, scans and consultants at UHL, on a 7 days a week basis.	<b>Cllr C Murphy</b>	<b>9</b>
<b>W109Q3897</b>	Up to date position in relation to the extension to the Ballina District Hospital.	<b>Cllr J O'Hara</b>	<b>9</b>
<b>W109Q3898</b>	New build facilities in Co. Donegal over the past 4 years and services provided.	<b>Cllr G Crawford</b>	<b>10-15</b>
<b>W109Q3899</b>	How many staff are employed by the HSE in County Donegal.	<b>Cllr G Crawford</b>	<b>15</b>
<b>W109Q3900</b>	Patients availing of Cross Border Patient Treatment fund initiative in the past 4 years, CHO1 area.	<b>Cllr G Crawford</b>	<b>16-17</b>
<b>W109Q3901</b>	No. of GPs retired in the past 3 years in CHO1 area, how many have been replaced.	<b>Cllr G Crawford</b>	<b>17</b>
<b>W109Q3902</b>	Mental health support & treatments, plans for day hospital Inishowen.	<b>Cllr A Doherty</b>	<b>17-18</b>
<b>W109Q3903</b>	Update on the Old Health Centre Binion Clonmany.	<b>Cllr A Doherty</b>	<b>18</b>
<b>W109Q3904</b>	Update on the construction of Community Group Home, Carndonagh (Ref.23/51195), client numbers and staffing.	<b>Cllr A Doherty</b>	<b>18-19</b>
<b>W109Q3905</b>	Transfer of medical files from SUH to Diabetic, Orthopedic and Neurology Clinics.	<b>Cllr D Bree</b>	<b>19</b>
<b>W109Q3906</b>	Update on CAMHS ID service Sligo including staffing, waiting lists and time waiting.	<b>Cllr D Bree</b>	<b>19-20</b>
<b>W109Q3907</b>	SUH Endoscopy procedures by private companies, services provided and cost.	<b>Cllr D Bree</b>	<b>20</b>
<b>W109Q3908</b>	Invitations to official opening of Ambulatory Gynaecology Unit at SUH.	<b>Cllr D Bree</b>	<b>20</b>
<b>W109Q3909</b>	Update on proposed Primary Care Centre for Oranmore and timescale.	<b>Cllr L Carroll</b>	<b>21</b>
<b>W109Q3910</b>	Motion W105M158 re CAMHS monitoring and regulation.	<b>Cllr E Francis Parsons</b>	<b>21-22</b>
<b>W109Q3911</b>	Update on the progress regarding the St Brigid's Hospital Ballinasloe.	<b>Cllr E Francis Parsons</b>	<b>22</b>
<b>W109Q3912</b>	Accommodation measures for health care workers in PUH and Community Care.	<b>Cllr E Francis Parsons</b>	<b>22-23</b>

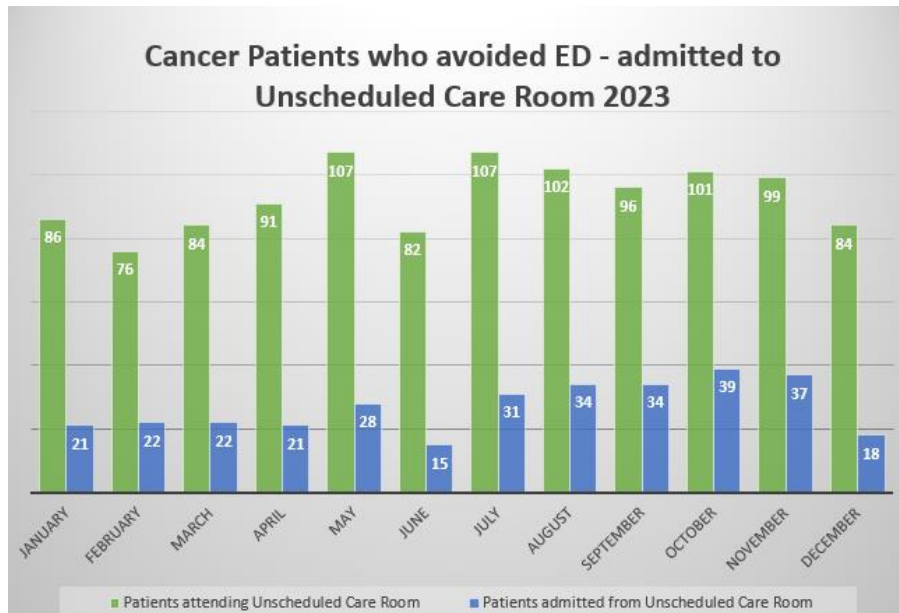
<b>W109Q3913</b>	Update on the progression of current and planned construction works in PUH.	<b>Cllr E Francis Parsons</b>	<b>23</b>
<b>W109Q3914</b>	Update on agency workers and vacancies in Aras Breffini, Manorhamilton.	<b>Cllr F Gurn</b>	<b>23</b>
<b>W109Q3915</b>	Update on agency workers in SUH and any positions that are not filled.	<b>Cllr F Gurn</b>	<b>23</b>
<b>W109Q3916</b>	Time between vetting and filling vacancy of doctor/nurse who return from abroad.	<b>Cllr F Gurn</b>	<b>24</b>
<b>W109Q3917</b>	Graduation of nurses and doctors into HSE sector yearly and number of positions that are taken up by graduates into the HSE.	<b>Cllr F Gurn</b>	<b>24-25</b>
<b>W109Q3918</b>	Galway Children's Disability Network Teams 4 - 9, numbers receiving intervention and numbers waiting assessment for each team.	<b>Cllr J Connolly</b>	<b>25-26</b>
<b>W109Q3919</b>	Agency partners night and day respite care (home and Centre based) for children and adults with disabilities in Galway 2023, number of nights, days, client and family numbers.	<b>Cllr J Connolly</b>	<b>26-27</b>
<b>W109Q3920</b>	Dental Services in CHO 2- staffing, Dental GA waiting lists and waiting time.	<b>Cllr J Connolly</b>	<b>27-29</b>
<b>W109Q3921</b>	Psychology services in community setting; staffing, locations and waiting lists.	<b>Cllr J Connolly</b>	<b>29-30</b>
<b>W109Q3922</b>	Number of HSE Community Speech and Language therapists in Galway city and county by area for adults and children, waiting lists and vacancies.	<b>Cllr D Ó Cualáin</b>	<b>30-31</b>
<b>W109Q3923</b>	Update re proposed new ambulance base in Recess in Connemara.	<b>Cllr D Ó Cualáin</b>	<b>31</b>
<b>W109Q3924</b>	Transport or funding for patients to attend hospital appointments or on discharge.	<b>Cllr D Ó Cualáin</b>	<b>32-33</b>
<b>W109Q3925</b>	Number of HSE Community Physiotherapists in Galway city and county by area for adults and children, waiting lists and vacancies.	<b>Cllr D Ó Cualáin</b>	<b>33-34</b>
<b>W109Q3926</b>	Respite Beds /child respite centres for Children with Disabilities in each CHO in the Saolta area.	<b>Cllr G McMonagle</b>	<b>34-36</b>
<b>W109Q3927</b>	Update on recruitment in Donegal Diabetic service; LUH Podiatrist Post and all other LUH Diabetic related posts.	<b>Cllr G McMonagle</b>	<b>36-38</b>
<b>W109Q3928</b>	Information leaflet and distribution of same re: supports for parents of children diagnosed with Autism.	<b>Cllr G McMonagle</b>	<b>38-39</b>
<b>W109Q3929</b>	Any HSE plans to develop a Paediatric Centre of Excellence for the North West?	<b>Cllr G McMonagle</b>	<b>39</b>
<b>W109Q3930</b>	Restoration of Day Care services Carndonagh.	<b>Cllr A Doherty</b>	<b>39-40</b>
<b>W109Q3931</b>	Steps taken to address challenges that patients with diabetes are facing, Donegal.	<b>Cllr C Brogan</b>	<b>40-42</b>
<b>W109Q3932</b>	Traffic management and car-parking in and around LUH, future plans.	<b>Cllr C Brogan</b>	<b>42-43</b>
<b>W109Q3933</b>	Ramelton CNU, ongoing works, future plans including day care services.	<b>Cllr C Brogan</b>	<b>43</b>
<b>W109Q3934</b>	Updated report on the filling of the vacant positions in LUH.	<b>Cllr C Brogan</b>	<b>43-45</b>

Number:	QUESTION	RAISED BY
<b>W109Q3885</b>	Given that planning permission was granted in May 2023 on a greenfield site, what is the progress of the new St Joseph's Hospital for Ennis?	<b>ClIr R McNerney</b>
<p>The above decision (P22/709) to grant permission for a 100 bed residential community nursing unit and other works remains subject to an appeal to An Bord Pleanála (APB). It was initially indicated that the case was intended to be determined before 14<sup>th</sup> December 2023. However, on 12<sup>th</sup> December 2023 we were informed that the Board was not now in a position to do so. We were advised that capacity at board level had been restored and that the Board was now addressing the existing backlog of cases.</p> <p>An update on the status of the appeal (ABP-317144-23) was subsequently requested. On 27<sup>th</sup> February 2024 we were advised that the case was presently at inspectorate level, waiting on an inspector to do a site visit and then complete their recommendations to the Board.</p> <p>ABP advises that it is currently experiencing a backlog of cases due to both a general increase in the volume of cases received and the complex nature of certain types of cases. Whilst the Board does not have a specific date as to when this case will be decided, it advises it will endeavor to determine the case in the shortest timeframe possible. With various recruitment campaigns and the recent appointment of new board members, planning inspectors and administrative staff, ABP hopes that this will help mitigate the current backlog of cases.</p> <p>Please see link to ABP statement in relation to the ongoing delays with cases in general.</p> <p><a href="https://www.pleanala.ie/en-IE/BacklogInformation">https://www.pleanala.ie/en-IE/BacklogInformation</a></p> <p><i>Joe Hoare, Assistant National Director, HSE Capital &amp; Estates/Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare</i></p>		
<b>W109Q3886</b>	Is there data available as to how frequently chemotherapy patients are readmitted to hospital, specifically during the period of their course of treatment in the Mid West?	<b>ClIr R McNerney</b>
<p>Data in relation to how frequently chemotherapy patients are readmitted to hospital is not currently collated in the manner requested.</p> <p>In 2023, a total of 785 patients who attended the ED were referred to our oncology and haematology teams. Of the 785 patients, 611 (77.8%) were admitted to hospital. We continually monitor this data and implement new strategies to improve this service for all unwell cancer patients.</p> <p>This does not relate specifically to chemotherapy patients however it does capture patients who have been readmitted to hospital during the course of their cancer treatment and includes patients who have been admitted under the care of our haematology/oncology teams.</p> <p>A key priority and focus of the Cancer Directorate at UL Hospitals Group has been to improve patient flow and ensure that patients undergoing Systemic Anti-Cancer Therapy (SACT) have an alternative pathway for unscheduled care presentations to support ED avoidance.</p> <p>In response to the Covid-19 pandemic, the HSE National Cancer Control Programme (NCCP) funded 26 Acute Oncology Nurses in hospitals nationwide, including at University Hospital Limerick. Patients undergoing active cancer treatment who become ill at home can contact the Acute Oncology Nurses via a dedicated phone service instead of ending up in the Emergency Department.</p> <p>While as many patients as possible will be kept at home through self-care or with community support, the Acute Oncology Nurses, together with the medical team, may deem it necessary for patients to come in for review. A designated unscheduled room has been available in the Haematology/Oncology Day Ward since November 2022 to review these</p>		

patients and to identify those who require admission. Up to five patients can be accommodated in the unscheduled room at any one time.

This room manages unwell cancer patients outside of routine appointments. On admission to the unscheduled care room, the patient is triaged and reviewed and is either discharged home with follow up or admitted. This service is available Monday – Friday between 9am – 5pm.

The below graph details the number of patients who were seen in the unscheduled care room in 2023 and the number of those patients admitted:



**C. Cowan, CEO, UL Hospitals Group**

<b>W109Q3887</b>	What is the annual cost and the service satisfaction for the HSE to transport physical patient files between sites in the Mid West?	<b>CIr R McInerney</b>
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The Healthcare Records Library recently relocated from University Hospital Limerick to an offsite HSE facility.

This move provides for automated shelving and allows for more efficient record storage and retrieval, resulting in faster access and improved organisation of healthcare records.

The new library offers increased storage capacity and computerised cataloguing and allows for streamlined record access. This move signifies improvements over the previous location, addressing limitations such as restricted access, limited capacity, and poor tracking practices.

This new contract commenced on the 15th January 2024 and its annual cost is €743,492.62.

The cost is not limited to medical records between the sites but also includes post, lab samples & reports, bloods, blood components/products, lab stores and supplies, liquid gases, CSSD, ENT and endoscopy equipment supplies, catering supplies, stock/non stock items, medication at a specified temperature or any packages/parcels within a specified weight.

Please note, approximately 66% of the costs were part of the previous arrangement. The remaining cost supports the movement of medical records to the new location. It is envisaged that this move will reduce the use of taxis for transporting items between sites.

**C. Cowan, CEO, UL Hospitals Group**



There is a transport system in place in the Older Persons Service in Mid West Community Healthcare for transportation of patient files & bloods between the Community Nursing Units and ULHG. This was provided at a cost of circa €14,000 in 2023.

**Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare**

<b>W109Q3888</b>	Has Shannondoc considered the possibility of utilising Video Consultations via applications such as Zoom, FaceTime etc to more effectively Triage patients ensuring enhanced knowledge of their issue and channelling them to the most appropriate service?	<b>Cllr R McInerney</b>
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ShannonDoc have an effective triage system in place which is working well. Patients receive a timely co-ordinated clinically appropriate response to their needs. This is evidenced by the activity data whereby urgent cases are prioritised and seen in line with the Service Level Agreement. Urgent cases are triaged by the nurse within 20 minutes and have an appointment within 2 hours of clinical assessment. ShannonDoc currently have no immediate plans to engage with telehealth medicine and do not have the infrastructure to provide video consultation. However, they may explore the telehealth option in the future.

**Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare**

<b>W109Q3889</b>	In the case of vermin (Rat) control in public areas who has responsibility for dealing with it? Is it the HSE or the Local Authority? If it is the HSE what is the procedure for a member of the public to bring it to their attention?	<b>Cllr M Kilcoyne</b>
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**HSE**

The HSE has no pest control service and has no responsibility for the control of Rodents i.e. Mice or Rat in Public areas. The HSE will advise private house holders and property owners on measures to deal with the problem of mice or rats within their property.

The HSE will advise on both treatment measures and measures to take to maintain the property hygienically and on removing conditions that promote rodent harbourage. The HSE does not provide any treatment and property owners would be advised to consult with an approved pest control company should treatment be warranted.

**Public areas.**

The council should be able to advise on measures they take to maintain the rat population and how they avoid them becoming a problem within a town or any public area.

Traditionally the control of Rats in towns /cities and on public land would have been under the remit of the councils. They would have had a baiting programme for public sewers (including maintenance plus repair of drains and manhole covers), control of surface water pipes discharging into a watercourse, maintenance and baiting of breach fronts, canals and Parkland. They also control litter and waste disposal and derelict sites within cities and towns which in turn controls rat activity.

**Agency involved in rodent control include the following**

- In relation to property or land owned and/or occupied by a local authority the complainant should be referred to that local authority who (as owner/occupier of the land) are responsible for maintenance of the land as per the Rats and Mice (Destruction) Act 1919.
- If the complaint refers to private rented housing, the complainant should be referred to the local authority who (as their role as housing authorities) are responsible for enforcing the minimum standards in rented accommodation as per Housing (Standards for Rented Housing) Regulations 2017 – 2019
- If the complaint refers to defective public drains or sewers, the complainant should be referred to Irish Water as the authority with primary responsibility as per the Water Services (No 2) Act 2013.

- Local authorities also have responsibility under the Derelict Sites Act 1990 including neglected, unsightly or objectionable condition of the land or of structures on it, or the presence, deposit or collection of litter, rubbish, debris or waste
- Local authorities and the EPA have responsibility under the Waste Management Act 1996. The Waste Management Act imposes a general duty of care on holders of waste, under which a person may not hold, transport, recover or dispose of waste in a manner that causes, or is likely to cause, environmental pollution. Enforcement actions against illegal waste activity are a matter for the local authorities and the Office of Environmental Enforcement (OEE) within the Environmental Protection Agency.

**Maria Horkan, Principal Environmental Health Officer**

<b>W109Q3890</b>	In the case of people in Mayo requiring Home Help how many people have applied to the HSE and have been approved and have yet not received any? How many people in Mayo who are receiving Home Help have sought additional Home Help hours and have not received it?	<b>Cllr M Kilcoyne</b>
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**Waiting List for Mayo as of 31/01/2024**

No. of people waiting on new home support service (community referral)	95
No. of people waiting on new home support service (acute referral)	25
No. of people waiting on additional home support service (community referral)	93
No. of people waiting on additional home support (acute referral)	7

**J Fitzmaurice, Chief Officer, Community Healthcare West**

<b>W109Q3891</b>	When is it likely that construction will commence on the new A & E at Mayo University Hospital? What progress if any has been made on the new extension to accommodate seventy additional beds at Mayo University Hospital and when do you expect construction to commence on this?	<b>Cllr M Kilcoyne</b>
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Planning permission was granted for the Emergency Department and Acute Medical Admissions Unit project at Mayo University Hospital on 11<sup>th</sup> March 2024. There are multiple phases of works planned to deliver this project, with the first enabling works anticipated to commence construction by mid-2024. Construction of the main building extension works is anticipated to commence by mid next year. The overall hospital campus has been reviewed in the context of the need to provide new inpatient ward accommodation as part of an overall site masterplan to guide future capital development. A main expansion zone has been identified to the North West of the site which has the potential to accommodate new acute inpatient wards on the upper floors. This proposal will need to be further considered and proofed against any other foreseeable future infrastructural hospital expansion needs. The ward block project is currently at feasibility stage. A capital submission including a project brief needs to be completed defining the scope of the project and the supporting business case. It is anticipated this would be done during 2024. A design team will then need to be appointed to progress the design, statutory approvals and tendering processes before any construction works can commence.

**Joe Hoare, Assistant National Director, HSE Capital & Estates**

<b>W109Q3892</b>	Is there a proposal to reduce the number of days per week that the Day Care Centre at the Sacred Heart Hospital in Castlebar will be open and if so why? It is currently open 5 days a week.	<b>Cllr M Kilcoyne</b>
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There is no proposal to reduce the Day Care Service at the Sacred Heart Hospital in Castlebar from the current service of five days per week.

**J Fitzmaurice, Chief Officer, Community Healthcare West**

<b>W109Q3893</b>	Can I be provided, in tabular form for the years 2020, 2021, 2022, 2023, with the number of attendees through each of the MAUs in all of the hospitals providing such service across this regional health forum	<b>Cllr C Murphy</b>
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The expanded Medical Assessment Unit services across UL Hospitals Group are making a significant and positive impact on delivering timely care to patients referred by their GPs to hospital for urgent medical assessment.

Funding of €5.2m approved by the HSE's National Acute Division in 2023 has allowed our MAUs at Ennis, Nenagh and St John's to move to a seven-day service.

In 2023, 15,006 patients were referred to our Medical Assessment Units in Ennis, Nenagh and St John's, representing an 18% increase on 2022.

MAUs provide diagnosis and treatment for patients referred with a wide variety of medical conditions, including chest infections, COPD (chronic obstructive pulmonary disease), pneumonia, urinary tract infections, fainting episodes, clots in the leg, and anaemia. Patients are reviewed by a senior clinician and may require x-rays, blood tests, scans or further diagnostic imaging,

Please see below the number of attendances at our MAUs for the years requested:

<b>MAU attendances</b>				
	<b>2020</b>	<b>2021</b>	<b>2022</b>	<b>2023</b>
<b>Ennis MAU</b>	6,228	6,791	7,735	7,397
<b>Nenagh MAU</b>	1,904	1,303	2,470	4,146
<b>St John's MAU</b>	1,960	2,477	2,478	3,463
<b>Total</b>	<b>10,092</b>	<b>10,571</b>	<b>12,683</b>	<b>15,006</b>

***C. Cowan, CEO, UL Hospitals Group***

<b>AMAU Medical Adm No.</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>	<b>2023</b>	<b>Grand Total</b>
Galway University Hospitals	20,470	17,143	14,909	15,569	68,091
Letterkenny University Hospital	11,236	11,541	11,569	10,946	45,292
Mayo University Hospital	7,727	8,484	8,567	10,057	34,835
Portiuncula University Hospital	4,159	3,977	4,298	4,526	16,960
Roscommon University Hospital	1,281	1,443	1,452	1,810	5,986
Sligo University Hospital	8,554	8,152	7,709	8,471	32,886
<b>Grand Total</b>	<b>53,427</b>	<b>50,740</b>	<b>48,504</b>	<b>51,379</b>	<b>204,050</b>

During the COVID 19 pandemic all hospitals in the Saolta Group lost their AMU as new patient pathways were required for infection control purposes. While all our hospitals are taking steps to reopen their AMUs they continue to be impacted at times by surge capacity requirements.

Due to these impacts, the data provided does not capture the full annual AMU service.

***A. Cosgrove, COO, Saolta University Health Care Group***

<b>W109Q3894</b>	Can I be provided with a breakdown, in tabular form for the years 2020, 2021, 2022, 2023, of the number of attendees through the EDs in all of the hospitals providing such service across this regional health forum	<b>Clr C Murphy</b>
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Please see below the number of attendances at the Emergency Department at University Hospital Limerick for the years requested:

Month	2020	2021	2022	2023
Jan	5652	4871	6625	5580
Feb	5401	4855	6232	6046
March	4481	6096	7102	7036
April	4651	6414	6625	6554
May	5463	6274	6747	7098
June	5665	6846	6413	6766
July	6118	7256	6249	6816
August	5930	6822	6638	6697
Sept	5936	7277	6640	6732
Oct	5656	7006	7158	6901
Nov	5311	6598	6657	6881
Dec	5687	6353	6806	7006
<b>Total</b>	<b>65951</b>	<b>76668</b>	<b>79892</b>	<b>80113</b>

As outlined above, University Hospital Limerick (UHL) continues to experience extremely high levels of attendances at the Emergency Department (ED).

The latest available data shows that up to the 03<sup>rd</sup> March 2024, ED presentations at UHL increased by 18% on last year and emergency admissions by 12%.

This trend is more pronounced still among the over-75s with ED presentations having increased by 23% and emergency admissions by 18%.

**C. Cowan, CEO, UL Hospitals Group**

Attendances	2020	2021	2022	2023	Grand Total
Galway University Hospitals	61,315	68,705	75,524	75,596	281,140
Letterkenny University Hospital	36,867	42,562	47,668	51,822	178,919
Mayo University Hospital	30,873	32,826	38,333	39,860	141,892
Portiuncula University Hospital	20,568	24,825	29,700	30,360	105,453
Sligo University Hospital	36,229	39,994	43,805	43,862	163,890
<b>Grand Total</b>	<b>185,852</b>	<b>208,912</b>	<b>235,030</b>	<b>241,500</b>	<b>871,294</b>

Admissions	2020	2021	2022	2023	Grand Total
Galway University Hospitals	12,810	11,400	18,304	18,514	61,028
Letterkenny University Hospital	14,405	17,629	19,879	18,429	70,342
Mayo University Hospital	8,416	10,784	14,428	12,678	46,306
Portiuncula University Hospital	5,525	6,189	8,780	9,065	29,559
Sligo University Hospital	10,956	11,848	10,704	10,677	44,185
<b>Grand Total</b>	<b>52,112</b>	<b>57,850</b>	<b>72,095</b>	<b>69,363</b>	<b>251,420</b>

**T. Canavan, Regional Executive Officer, HSE West and North West**

<b>W109Q3895</b>	I understand a new system to assess attendees to the ED in UHL is being rolled out through an on-site GP service. Can I be provided with the details of how this service will operate?	<b>Cllr C Murphy</b>
<p>A new primary care pathway will be offered to patients presenting to the Emergency Department at UHL in the coming weeks.</p> <p>This pathway will be offered to self-referral patients i.e. patients who have not been seen by their GP, patients who have not been brought in by ambulance and patients who have not suffered a traumatic injury.</p> <p>This cohort of patients will be streamed to this service and seen by a GP when they present to the ED. This service will be piloted in the coming weeks from 12 noon to 10pm 7 days a week.</p> <p><b>C. Cowan, CEO, UL Hospitals Group</b></p>		
<b>W109Q3896</b>	In light of the continuing overcrowding at UHL, can I be provided with the details of any plans the management have to provide access to labs, scans and consultants on a 7 day week basis.	<b>Cllr C Murphy</b>
<p>Consultants in Emergency Medicine (EM) at UHL are rostered to be on the floor of the Emergency Department between 8am and 8pm Monday to Friday and between 8am to 1pm at weekends and on public holidays.</p> <p>Consultants in EM in UHL have been providing this structured attendance on Saturdays and Sundays for approximately 10 years. Since December 2023 they have also provided an additional weekend afternoon presence on the floor as required.</p> <p>These arrangements ensure that there is at least one consultant, and on a number of days, two consultants, seeing patients in the Department up to 8pm on weekdays. These consultants also provide an on-call service throughout the night and at weekends.</p> <p>In addition, 28% of consultants employed at UL Hospitals Group have signed up to the new Public Only Consultant Contract. Under this contract, consultants can be asked to work from 8am to 10pm Monday to Friday and 8am to 6pm Saturday as part of their core 37-hour week.</p> <p>We continue to engage with consultants across the Group and encourage them to sign-up to this contract.</p> <p>There is 24/7 access to laboratory testing for all inpatients and patients in the Emergency Department at UHL. The lab also provides support for our MAUs at weekends.</p> <p>Our Radiology department operates a 24/7 service for x-ray and CT scans, serving hospital inpatients and patients in the Emergency Department.</p> <p>In addition, there is an MRI service available at the weekends which is operated by Alliance Medical which serves patients in the hospital and also provides a GP service during out-of-hours. There are five MRI slots available at the weekends for patients who have been discharged from UHL during the week and return at the weekend for their scan. Without this service, these patients would remain in hospital.</p> <p>Our Diagnostics service also provides a 24/7 on call service for urgent theatre procedures that require fluoroscopy imaging.</p> <p><b>C. Cowan, CEO, UL Hospitals Group</b></p>		
<b>W109Q3897</b>	What is the up to date position in relation to the extension to the Ballina District Hospital?	<b>Cllr J O'Hara</b>
<p>The proposed capital development for Ballina has been considered at national level and recommended for progression. It is now anticipated that formal approval will be issued shortly for the procurement of a design team to progress the scheme design for the project in 2024.</p> <p><b>Joe Hoare, Assistant National Director, HSE Capital &amp; Estates</b></p>		

<b>W109Q3898</b>	How many new build facilities have been opened or are under construction in County Donegal over the past 4 years. What services do these provide or will provide when completed. What services including additional services are now available in these areas. If known how many patients have availed of the services Or facilities.	<b>Clr G Crawford</b>
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**Letterkenny University Hospital  
Accommodation Projects Mar 2024**

**LUH:**

Since 2020, LUH have an additional 36 beds. 20 of these are in Medical 6. 16 in Medical 7. Both these wards are new and were built during the Pandemic.

	<b>Project Title</b>	<b>Brief Description</b>	<b>Funding Model</b>	<b>Status</b>	<b>PM</b>	<b>Timeline</b>
<b>1</b>	Physio/OT		Major C	<b>WIP. Stage 2c to be completed in Q4 2023. Tender to proceed subject to approval and funding. Due to commence in Q2 2024.</b>	MG	WIP
<b>2</b>	Infusion Unit	LUH Project with internal reconfiguration	TBC	Complete.	PB	WIP
<b>3</b>	Renal Dialysis Expansion	Expansion and reconfiguration of existing Renal facilities.	Major C	<b>WIP. Commencement date delayed due to cost increase. Stage 2A report awaiting national approval.</b>	MG	WIP
<b>4</b>	Lab Expansion -Microbiology	HSE Estates Project.	TBC	<b>WIP. Contract on track.</b>	MG	WIP
<b>5</b>	Paeds OPD	Off site location	TBC	<b>Project Team in Place. LMM appointed as HSE Estates Project Manager. Preliminary layouts being worked through.</b>	PB	Immediate
<b>6</b>	Medical Records Storage	Large footprint storage unit is required to replace existing stores. Some existing stores not fit for purpose.	TBC	<b>Project Team in place. Option appraisal complete and preferred option is now agreed. Funding requirement to be identified.</b>	PB	Immediate
<b>7</b>	Pharmacy Aseptic Unit	HSE Estates Project.	Major C	<b>Project Team in place. Location option approved by stakeholders and DT. Stage 1 report approved. Proceeded to scheme design.</b>	MG	WIP
<b>8</b>	Orthodontics Expansion	BC sent to SAOLTA for consideration.	TBC	<b>Project Team in Place. Preliminary capital submission approved by National HSE Estates. Detailed submission completed and sent in Aug 2023.</b>	SM	Immediate

**A. Cosgrove, COO, Saolta University Health Care Group**

**Primary Care Service:**

	<b>Name of Building</b>	<b>Primary Care Services Provided</b>	<b>Of these services, what services are additional</b>	<b>Other Services in Building</b>	<b>Approximate number of people seen per year</b>
1	<b><i>Donegal Town Primary Care Centre</i></b>	Physiotherapy, Occupational Therapy, Dietetics, Podiatry, Speech & Language Therapy, Social Work, Chronic Disease Management, Community Intervention Team Nursing, Public Health Nursing, Psychology, National Counselling Services, Community Medicine Visiting Clinics, Dental, GP,	Social Work, Dietetics, Community Intervention Team Nursing, Chronic Disease Management	National Ambulance Service, TUSLA, Home Support, CAMHS, Mental Health, CDNT	N/a
2	<b><i>Buncrana Primary Care Centre</i></b>	Physiotherapy, Occupational Therapy, Dietetics, Podiatry, Speech & Language Therapy, Social Work, Chronic Disease Management, Community Intervention Team Nursing, Public Health Nursing, Psychology, Community Medicine, Civil registration, Audiology, Ophthalmology, Dental, GP	Social Work, Dietetics, Community Intervention Team Nursing, Chronic Disease Management	Mental Health, CDNT, CAMHS, Home Support, TUSLA	N/a
3	<b><i>Newtowncunningham Primary Care Centre</i></b>	Physiotherapy, Podiatry, Occupational Therapy, Speech & Language Therapy, Dietetic, Public Health Nursing, GP Clinic Visiting clinics - Stop Smoking Clinic Vaccination Clinic Diabetic Clinic Pre-Diabetes Clinic Respiratory Clinic Autism Clinic CDNT	Stop Smoking Clinic Vaccination Clinic Diabetic Clinic Pre-Diabetes Clinic Respiratory Clinic Autism Clinic CDNT	N/A	N/a

4	<p><b>Dunfanaghy Primary Care Centre</b></p> <p><b><i>This Primary Care Centre is currently under construction and due to be operational in Q4 2024</i></b></p>	<p>Physiotherapy, Occupational Therapy, Dietetics, Speech &amp; Language Therapy, Social Work, Public Health Nursing, GP, Home Support</p>	n/a	N/A	n/a
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**Older Persons Services:**

Ballyshannon Community Hospital new build was completed in Q4 of 2023 and 26 residents relocated from the Rock Nursing Home Unit to this new building in February of 2024.

This new hospital has capacity for 80 beds when fully operational, which consist of 52 long-stay beds and 20 short-stay beds providing convalescence, rehabilitation, respite and palliative care beds, and a further 8 Dementia-specific assessment beds and a Day Hospital Service.

Ballyshannon Community Hospital will provide a full range of supporting professional services via Primary Care for older people in the South Donegal, North Leitrim and North Sligo areas, including speech and language therapy, occupational therapy, physiotherapy, dietician, podiatry, Tissue Viability Nurse Speciality, dentistry, audiology, Clinical Nurse Specialist Dementia, Psychiatry of Old Age and social worker, advocacy and spiritual services. In addition, a hairdressing facility, newspaper/magazine/shopping requirements, dry cleaning and taxis/transport will be made available to residents and patients.

The new community hospital in Ballyshannon also features rooftop gardens, a collection of books spanning three centuries and a new coffee dock for patients and visitors to enjoy.

The new community hospital in Letterkenny is the second new build planned for Co. Donegal and is due for completion in Q4 of 2025

It is envisioned there will be 110 beds in this facility, comprising of the following

- 3 x 25 long-term care bed units
- 1 X 25 short-term care beds (convalescence beds, palliative beds, rehabilitation beds and respite beds)
- 10 X Dementia-specific assessment beds.

This hospital will also include supporting professional services for the older person, including speech and language therapist, occupational therapist, and physiotherapist.

**Mental Health Services:**

Donegal Mental Health Services have benefited from the construction of two Primary Care Facilities, one based in Donegal Town and the other based in Buncrana within the last two years.

The Child and Adolescent Mental Health Service [CAMHS] for Donegal South area is now delivered from the Primary Care Facility in Donegal Town with the Adult Mental Health Services and CAMH Services for the Inishowen population being delivered from the new Primary Care Facility in Buncrana.

With regard to the number of patients who have availed of the services:



CAMHS Donegal South team have offered a total of 5903 appointments since moving to new Primary Care Centre in Donegal Town between the end March 2022 to the end February 2024. 5188 of these appointments were in clinic appointments and 715 of these were tele-health appointments.

CAMHS Inishowen Team have offered a total of 4022 appointments since moving to new Primary Care Centre in Buncrana from the end August 2022 to the end February 2024. 3194 of these were in clinic appointments and 828 of these were tele-health appointments.

**Disability Services:**

<b>Donegal Disability Services Property Completed/ Opened in past 4 years</b>			
<b>Year Opened</b>	<b>Address</b>	<b>Services</b>	<b>No. of residents</b>
<b>2022 Occupied</b>	Teach Iarnróid, 66 Railway Park, Donegal Town, Co. Donegal. F94 VYH6	Residential care for adults, both male and female, with an Intellectual Disability from 18 years of age, with no upper age limit.	4
<b>2022 Occupied</b>	Tus Nua Community Group Home 65 Drumrooske Estate, Donegal Town, Co. Donegal. F94 PNX2	Residential care for adults, both male and female, with an Intellectual Disability from 18 years of age, with no upper age limit.	4
<b>2023 Occupied</b>	Teach Inishal, Fairhill, Co Donegal, F94 XV0V	Residential care for adults, both male and female, with an Intellectual Disability from 18 years of age, with no upper age limit.	4
<b>2023 Occupied</b>	Teach Inishfree, Fairhill, Co Donegal, F94 X4AY	Residential care for adults, both male and female, with an Intellectual Disability from 18 years of age, with no upper age limit.	4
<b>2023 Occupied</b>	Teach Owey, Fairhill, Co Donegal, F94YHN9	Residential care for adults, both male and female, with an Intellectual Disability from 18 years of age, with no upper age limit.	4
<b>2023 Occupied</b>	Tús Álainn, Tír ná league, Carndonagh, Co. Donegal	Residential care for adults, both male and female, with an Intellectual Disability from 18 years of age, with no upper age limit.	1
<b>2023 Occupied x 1 resident to date</b>	Wood Rise The Glebe, Stranorlar, Co. Donegal	Residential care for adults, both male And female, with an Intellectual Disability from 18 years of age, with no upper age limit.	2

**Donegal Disability Day Services opened in past 4 years in Rented/Leased premises**

<b>Year Opened</b>	<b>Address</b>	<b>Services</b>	<b>No. of residents</b>
2018/2019	Community Inclusion Centre Dawn, Letterkenny, Co Donegal	Day Service for School Leavers with an Intellectual disability and some additional support needs.	15
2019/2020	Community Inclusion Centre, Donegal Town, Co Donegal	School leavers	14
2023	Community Inclusion centre, Cosan, Donegal Town, Co Donegal	Eco-therapy Programme for adults with intellectual disabilities and/or autism	10
2020	Community Inclusion Centre, Dungloe, Co Donegal	Day Service for School Leavers with an intellectual disability	12
2021	Community Inclusion Centre, Carndonagh, Co Donegal	Day Service for School Leavers with an intellectual disability	2
2021	Community Inclusion Centre, Verve, Letterkenny, Co Donegal	Day Service for School Leavers with an intellectual disability and some additional support needs.	8
2021	Community Inclusion Centre, Ballybofey, Co Donegal	Day Service for School Leavers with an intellectual disability	7

**Donegal Disability Services Property Currently Under Construction / Not Yet Opened**

<b>Year Opened</b>	<b>Address</b>	<b>Services</b>	<b>No. of residents</b>
2023 Construction Completed Transitioning of Residents in progress	Piermount House Dungloe Co.Donegal	Residential care for adults, both male and female, with an Intellectual Disability from 18 years of age, with no upper age limit.	4
2023 Construction Completed Transitioning of Residents in progress	Glenrowan House Raphoe, Co. Donegal	Residential care for adults, both male and female, with an Intellectual Disability from 18 years of age, with no upper age limit.	5
Sliabh Sneacht House 1 Construction Completed Transitioning of Residents in progress	Letterkenny Co.Donegal	Residential care for adults, both male and female, with an Intellectual Disability from 18 years of age, with no upper age limit.	1

Sliabh Sneacht House 2 Construction Completed Transitioning of Residents in progress	Letterkenny Co. Donegal	Residential care for adults, both male and female, with an Intellectual Disability from 18 years of age, with no upper age limit.	2
2024 At the final stages of construction Transitioning of Residents in progress	Cavan Lower1, Community Group Home, Killygordan, Co. Donegal	Residential care for adults, both male and female, with an Intellectual Disability from 18 years of age, with no upper age limit.	4
2024 At design stage New Build	Cavan Lower 2, Community Group Home, Killygordan, Co. Donegal	Residential care for adults, both male and female, with an Intellectual Disability from 18 years of age, with no upper age limit.	4
2024 At design stage Upgrade of existing premises	Mol an Oige Listillion Letterkenny Co. Donegal	Residential care for adults, both male and female, with an Intellectual Disability from 18 years of age, with no upper age limit.	3

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

**W109Q3899**

How many staff are employed by the HSE in County Donegal.

**Clr G Crawford**

Please find below the January WTE for LUH (February data not available yet)

Management/ Admin	329.37
Medical/ Dental	255.25
Nursing/ Midwifery	851.38
Health & Social Care Professionals	219.12
General Support	274.46
Patient & Client Care	276.13
<b>Total</b>	<b>2,205.71</b>

**A. Cosgrove, COO, Saolta University Health Care Group**

Please find below the WTE Census report for Feb 2024 which outlines the number of staff employed in CH CDLMS, Donegal.

<b>CH CDLMS – Donegal Census February 2024</b>	
Staff Category	Census WTE FEB 2024
Management & Administrative	346.05
Medical & Dental	83.31
Nursing & Midwifery	813.17
Health & Social Care Professionals	287.31
General Support	111.79
Patient & Client Care	1,278.77
<b>TOTAL</b>	<b>2,920.40</b>

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

**W109Q3900**

Is it known how many patients have availed of the cross border patient treatment fund initiative in the past 4 years in area CHO1.

**Cllr G Crawford****Northern Ireland Planned Healthcare Scheme (NIPHS) 2021-2023 (2020 data not available)**

County	2021	2022	2023	Total:
Donegal	331	890	1,300	2,521
Leitrim	16	56	74	146
Sligo	13	31	52	96

The Northern Ireland Planned Healthcare Scheme (NIPHS) became operational from 1 January 2021 on an administrative basis. The NIPHS will enable persons ordinarily resident in Ireland to access and be reimbursed for private healthcare in Northern Ireland by the HSE, provided such healthcare is publicly available within Ireland and that the patient is a public patient in Ireland.

The NIPHS operates in largely the same way as the Cross Border Directive (CBD) and was introduced following the UK exit from the EU (Brexit). Following Brexit patients were no longer able to avail of the provisions of the CBD in the UK including Northern Ireland. Recognising that Northern Ireland was the jurisdiction from which the greatest number of patients were accessing healthcare under the CBD, the Government introduced the NIPHS on an administrative basis, pending the drafting of legislation, to enable patients to continue to access healthcare in Northern Ireland. The NIPHS differs from the CBD in that patients may not access the healthcare under the NIPHS in the public healthcare sector in Northern Ireland and seek reimbursement. Similarly the provisions of EU social security legislation which governs access under the CBD does not apply to the NIPHS. Instead eligibility in respect of the NIPHS is based on residency only. To be eligible for healthcare reimbursement under the provisions of the NIPHS, a patient must be ordinarily resident in Ireland for a period of one year prior to the access to the healthcare.

The Department of Health is drafting legislation to put the NIPHS on a legal basis and this legislation will be published in due course.

The Northern Ireland Planned Healthcare Scheme (NIPHS) office is based in St Canice's Hospital Complex, Dublin Road, Kilkenny and Seville Lodge, Callan Road, Kilkenny. The NIPHS operates from the National Contact Point (NCP) office in conjunction with the Cross Border Directive (CBD) scheme.

Application forms for prior Notification and pro-forma invoices are issued by the Northern Ireland Planned Healthcare Scheme (NIPHS) office.

**Cross Border Directive (CBD) scheme 2020-2023**

County	2020	2021	2022	2023	Total:
Donegal	999	424	100	118	1,641
Leitrim	65	16	5	9	95
Sligo	52	20	7	16	95

The HSE operates the EU Cross Border Healthcare Directive (CBD), for persons entitled to public patient services in Ireland who may seek to avail of those services in another EU/EEA member state. The rules and provisions of the CBD are set out in Directive 2011/24/EU of the European Parliament and of the Council of 09 March 2011 on the application of patients' rights in cross-border healthcare, as per the procedures set out in governing EU Regulations and Directives and Irish legislation.

Within these governing EU and Irish legislation, the CBD provides for the cost of publicly funded healthcare in Ireland to be availed of in another EU/EEA country and the costs to be reimbursed to the patient, subject to compliance with the applicable administration processes and eligibility criteria. What this means is that if a patient is entitled to public health services in Ireland, he/she may opt to access those services in another EU/EEA member state. The cost of the services the patient avails of under the CBD in another EU/EEA member state is reimbursed at the cost of the service in the country where it was availed of or the cost in Ireland – whichever is the lesser.

Eligibility for reimbursement under the CBD is based on EU social security legislation. The CBD may not be used by pensioners, frontier workers, posted workers or their dependents from the UK or Switzerland living in Ireland.

Both the NIPHS and the CBD entitle patients to access healthcare which the patient is entitled to in the public healthcare system in Ireland. The patient simply opts to access it abroad under the provisions of the scheme of his/her choosing. The same rules which apply to accessing a treatment in Ireland equally apply to accessing the healthcare under both the schemes. Both schemes are based on the patient paying upfront for the healthcare and seeking reimbursement upon return to Ireland. Reimbursement is at the cost of the healthcare abroad or the cost of the healthcare in Ireland whichever is the lesser.

**National Schemes & Reimbursements**

<b>W109Q3901</b>	How many GPs have retired from GP practice in the past 3 years, in CHO1 How many have been replaced.	<b>Cllr G Crawford</b>
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During the period of time from Jan 2021 to Dec 2023 there has been 25 GMS GP retirements across Donegal, Sligo and Leitrim.

During that same period of time the Primary Care Development Unit in Donegal, Sligo and Leitrim have processed 33 new GMS GP Contracts, many providing a direct replacement for the outgoing GPs and others providing additional capacity in the system.

Furthermore 3 additional GMS GP contract applications are close to completion and will come on stream over the coming weeks.

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

<b>W109Q3902</b>	Inishowen needs to have access to residential care and supports that includes the provision of more mental health services in the local communities: Has the HSE to date initiated and provided for all current SRU clients, their families and staff, information on the timelines envisaged and the approach plan that will be commenced to implement and provide recovery-focused support and treatments for service users in their own homes in Inishowen? How advanced are HSE plans to establish a Day Hospital for the area which would provide an alternative to hospital admission for those who need more intensive acute care than currently provided by the community mental health team?	<b>Cllr A Doherty</b>
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Radharc na Sleibhte in Carndonagh is in the process of transitioning from a residential service to a community service. There has been a national policy in place for some years now within mental health services to reduce the level of service users residing in congregated settings. There is also a new draft Mental Health Act to be progressed shortly that requires residential settings to meet higher standards of care. The policy of moving away from institutional living is a longstanding goal of successive government policies over the last number of decades and replacing the institutional settings with appropriate community support structures to promote independent and integrated living within communities. This project will be a hugely positive step towards achieving this for the people of Inishowen.

Donegal Mental Health services have been consulting and planning with those affected in preparing to meet their obligations under these standards and part of that process is the transition of Radharc na Sleibhhte to meet the needs of the community into the future. It would be a retrograde step for the HSE to commit to restoring an institutional setting when the opportunity is here to progress services in such a positive way. Rather than closing the facility we have identified the need for a seven-day outreach service to support those who require it to remain in their own home and integrate with their local community.

This is a recovery based model promoting independence, hope and choice for all and will be a further development of the wellness café and nature walks that have been developed over the last few years.

We also plan to develop a day hospital service for more acute short term service users, similar to that available in Letterkenny for many years, which has been very successful in reducing the level of admissions that have been required to the Department of Psychiatry. This will support some of those with acute conditions to receive appropriate interventions while continuing to live in their own home and with their families.

We have been searching for respite accommodation in the area but unfortunately have been unable to find suitable accommodation. We now plan to use part of the building to provide this service. As I am sure you will be aware, the building is of an older style and will require some upgrading works over a period of time; however most of these services will be able to commence immediately and the upgrade works will be done alongside the delivery of the services as resources become available. Donegal Mental Health Services have requested funding for the upgrade of this building from the National Office. It is envisaged that the refurbishment would be phased over a couple of years. We will continue to work closely with service users, family and all stakeholders in taking forward these developments and improvements.

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

<b>W109Q3903</b>	Old Health Centre Binion Clonmany. Has the Property Management section and HSE legal team completed the review of the Tailte Eireann response and is an update to hand that will enable the process for disposal of the property at the old Health Centre to commence?	<b>Cllr A Doherty</b>
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Unfortunately it continues to take time to resolve title rectification matters. The Property Management Section continues to engage with our legal agent on this matter. Our legal agent is engaging with the Property Registration Authority (Tailte Éireann) on the matter. My understanding is that there are three properties adjacent to the HSE property that are not registered and we have been unsuccessful to date in identifying the owners. This information has been sought by the PRA. Our legal agent intends to advise the PRA that the owners are unknown to us and to seek further advice. Efforts to identify the owners of these properties will also continue.

***Joe Hoare, Assistant National Director, HSE Capital & Estates***

<b>W109Q3904</b>	Construction of Community Group Home, Carndonagh (Ref.23/51195). HSE (NW) were granted planning permission by DCC on 9th Nov.2023 for the demolition of the existing derelict school building and construction of a single storey community group home. When will the required building works commence on this site? What timelines are envisaged to enable the use and provision of residential accommodation care to people in need of care on site? How many clients will be accommodated and what is the make up and number of the work force that will be employed at the location?	<b>Cllr A Doherty</b>
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The agreement for transfer of the site into HSE ownership is currently being progressed through our legal agent. The invitation to tender and evaluation of tenders will then need to be progressed. This is likely to take approximately 4 months to complete. After that a 12 month construction period is anticipated on award of contract.

***Joe Hoare, Assistant National Director, HSE Capital & Estates***

This community group home will be a purpose-built home for four people with intellectual disabilities to live as independently as possible within the community. These service users will be supported at the group home with an appropriate skills mix to meet the individual needs of each person.

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

<b>W109Q3905</b>	How are medical records/files transferred from the Medical Records Department in Sligo University Hospital to (1) the Diabetic Clinic; (2) the Orthopaedic Clinic; (3) the Neurology Clinic.	<b>Cllr D Bree</b>
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The Healthcare records are transferred from the Medical Records Department to clinics held in the Diabetic unit via taxi service.

The Orthopaedic and Neurology clinics are held in SUH and the Healthcare records are transferred from the Medical Records Department to the Outpatients department by SUH porter.

The approximate number of charts transported to the Diabetes clinic is 4500 per annum.

***T. Canavan, Regional Executive Officer, HSE West and North West***

<b>W109Q3906</b>	Noting that the Forum at its meeting of the 27th February 2024, was told a permanent consultant post for the Camhs Intellectual Disability service in Sligo was advertised on the HSE Website in the period 28th September to the 12th of October 2023 and that following the interview neither of the two successful candidates accepted the post; and noting that the meeting was told that a consultant post for the Camhs Intellectual Disability Service had been filled by an Agency for 3 days per week from the 30th of January 2024; and further noting that an additional permanent post application had been submitted to CAAC for approval on the 12th of February 2024; can the meeting be provided with an update on the service, including details relating to the level of staffing; the number of young people on the waiting list; the average time a young person is expected to wait for a consultation with the service.	<b>Cllr D Bree</b>
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Having reviewed our records, I wish to advise that the response provided at the Regional Health Forum (RHF) on 27<sup>th</sup> February 2024, which related to W108Q3848 was incorrect, as the content of another RHF response which related to a separate Consultant Psychiatrist recruitment campaign in Sligo Leitrim was inadvertently provided in error.

On behalf of CH CDLMS, I would like to apologise for any confusion, or misunderstanding caused.

In order to provide the necessary clarity, the following outlines the factual position as they relate to the recruitment campaign for CAMHS MHID Consultant Psychiatrist post in Sligo Leitrim Mental Health Service.

Development post approval from National and Consultant Applications Advisory Committee (CAAC) was granted to Community Healthcare CDLMS to recruit for a Consultant Psychiatrist as follows:

- 0.5 WTE CAMHS MHID Consultant Psychiatrist for Sligo Leitrim.

In order to ensure greater potential success in attracting CAMHS MHID candidates to Sligo Leitrim, the Head of Service Mental Health CH CDLMS gave his approval to restructure the post, and seek the uplift of an additional 0.5 WTE increase for same.

However, as part of 2024 Budget messaging from HSE national office, all CHOs were advised that development posts previously approved that were not filled at 31<sup>st</sup> December 2023 were removed from the national profile. CH CDLMS continues to prioritise this locally uplifted post, as it is acknowledged from a clinical point of view there is an unmet clinical need in Sligo/Leitrim for children with a CAMHS MHID diagnosis.

The necessary applications to seek national and CAAC approval is currently being processed as a priority in conjunction with Medical Manpower. For information purposes the next meeting of CAAC is scheduled to be held on 9<sup>th</sup> April 2024.

As this post is subject to national and CAAC approval, we are unable at this time to provide any additional information on the post, and will be happy to do so as soon as the outcome of the application process is known. Meanwhile, preparatory HR arrangements to speedily progress recruitment are hand in anticipation of a positive outcome to our application.

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

<b>W109Q3907</b>	Which private companies did Sligo University Hospital engage to provide endoscopy procedures in 2023, on how many weekends did the private companies carry out the procedures in the hospital; what services, if any, did the hospital provide to the private companies which were engaged to carry out the procedures in the hospital; what was the total cost of the contracts entered into with the private companies.	<b>Cllr D Bree</b>
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The private companies that provided endoscopy procedures in 2023 for SUH are Totally Health Care and Alliance Clinical Services.

Totally Healthcare carried out symptomatic GI lists in 2023 for 14 weekends. Totally Healthcare delivered 472 additional scope procedures. The total cost of the scopes carried out was €472,000.

Alliance Clinical Services carried out a bowel screen list for 1 weekend and it was arranged and funded through the National Bowel Cancer Screening Programme, Bowelscreen.

Both companies used the services and equipment within the Endoscopy unit to carry out these procedures and they also used the Lab services for the histology results.

***A. Cosgrove, COO, Saolta University Health Care Group***

<b>W109Q3908</b>	Can the Forum be advised as to why the Cathaoirleach of Sligo County Council was not invited to participate in the official opening of the new Ambulatory Gynaecology Unit at Sligo University Hospital on the 23rd of February; and further can the Forum members be provided with the names of those people who were invited to the opening.	<b>Cllr D Bree</b>
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An invitation for the official opening of the Ambulatory Gynae unit was issued to the Cathaoirleach, Gerard Mullaney, by email on the 20<sup>th</sup> February. Mr Mullaney has also confirmed receipt of this invitation.

Please see list below of all Public Representatives who were also invited to the opening of Ambulatory Gynae:

- Cllr Gerard Mullaney, Cathaoirleach Sligo County Council
- County Manager for Sligo County Council
- Cllr Declan Bree, Mayor of Sligo and also public rep for Regional Health Forum
- Cllr Dara Mulvey, public rep for Regional Health Forum
- Cllr Donal Gilroy, public rep for Regional Health Forum
- Cllr Paddy Farrell, public rep for Regional Health Forum (Leitrim County Council)
- Cllr Felim Gurn, public rep for Regional Health Forum (Leitrim County Council)
- Cllr Finola Armstrong-McGuire, public rep for Regional Health Forum (Leitrim County Council)
- Deputy Frank Feighan
- Deputy Marian Harkin
- Deputy Marc MacSharry
- Deputy Martin Kenny

***T. Canavan, Regional Executive Officer, HSE West and North West***



<b>W109Q3909</b>	Could I please have an update on the position regarding the proposed Primary Care Centre for Oranmore. Have the HSE Capital and Estates division written to developers as promised at Regional Health Forum meeting in February and if so have they received a reply? If a new alternative site has to be secured, what steps have the Capital and Estates division taken to progress this? Will a new planning application have to be lodged and could I have a timescale as to when a New PCC will be operational in Oranmore given that the HSE "remains fully committed to the delivery of a Primary Care Centre in Oranmore"?	<b>Cllr L Carroll</b>
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The formal letter with deadlines will issue after Easter. If the current proposal does not then proceed in line with the advised deadlines the HSE will deem that the terms are rescinded and will proceed with alternative options. If the HSE as is likely re-advertises the location again it will be open to developers to put forward any sites they deem appropriate and such proposals will be then evaluated in accordance with the award criteria. Should a bid which includes an alternative site which does not have the appropriate planning permission be successful then a new planning application would have to be lodged. Given the uncertainty surrounding the ultimate solution it is very difficult to predict a timescale at the moment but it is hoped that the timescale for the project to be completed will become a lot clearer later this year.

*Joe Hoare, Assistant National Director, HSE Capital & Estates*

<b>W109Q3910</b>	In May 2023 the RHFV agreed a motion urgently calling upon the Minister of Health and Minister of Mental Health for the granting of regulatory powers to the Mental Health Commission over the Child and Adolescent Mental Health Services (CAMHS) under the Mental Health Act 2001 to ensure that an independent authority is given a statutory basis to monitor and regulate the quality and safety of CAMHS providing assurance that there is clear governance in place to manage risk, to provide full accountability to the public and most importantly to ensure standards of care to young people who rely on its services and management processes for mental health and well-being. Please provide the Forum with an update on the progression and status of this motion's request including any communication received.	<b>Cllr E Francis Parsons</b>
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**Response issued to RHF Members 22<sup>nd</sup> June 2023 at 11.17am**

The Government remains committed to the development of all aspects of mental health services nationally, including those for children and young people, under implementation of the widely agreed mental health policy Sharing the Vision and the suicide prevention policy Connecting for Life.

The total allocation for mental health services in 2023 is over €1.2 billion, which is another record budget for mental health services. Around €137 million is provided to Child and Adolescent Mental Health Services (CAMHS) annually. In addition, over €80 million was provided to community-based mental health organisations last year, with a significant proportion of this dedicated to supporting child and young people.

The HSE has over recent years invested in 'upstream' youth mental health services, including Jigsaw and other funded agencies in the community and voluntary sector, who are providing enhanced services for children and young people with mild to moderate mental health difficulties, who do not need to access specialist mental health services. A wide range of organisations and supports is available on [www.yourmentalhealth.ie](http://www.yourmentalhealth.ie) for those requiring mental health care.

Evidence shows that only 2% of children and young people need the support of the specialist CAMHS multidisciplinary teams. Access is on the basis of prioritised clinical assessment and all referrals to CAMHS are assessed by a multidisciplinary team. Between 2020 and 2021, referral rates into CAMHS increased by 33%, while the number of new cases seen increased by 21% in that same period. At present, 93% of urgent referrals to CAMHS are responded to within three working days, exceeding the 90% target. Some 225,000 appointments were facilitated by CAMHS multidisciplinary teams during 2022.

A priority under the HSE Service Plan 2023 is to improve access to CAMHS. The Government provided €6 million this year to HSE for a specific initiative to reduce CAMHS waiting lists nationally. It is hoped that over 2,000 will be removed from current lists, which is around 4,500 at present.

I recently completed a series of three high-level roundtables bringing together the Department of Health, the HSE, and other key stakeholders across the youth mental health area to drive improvement in CAMHS, with a focus on executive leadership, clinical expertise, and service provision. The rate of accepted referrals was also discussed. I await the outcomes of all audits underway on CAMHS nationally arising from the Maskey Report, as well as the final report of the independent review currently underway by the Mental Health Commission across CAMHS nationally. This will help to help inform any next steps necessary regarding CAMHS, including the outcome of the audit in relation to CAMHS Operational Guidelines.

The Government and the HSE are committed to implementing the recommendations of the Maskey Report as quickly as possible. The 35 recommendations have led to 63 actions, 19 of which (national and local) have been implemented, with others underway. In particular, and in the context of the issues raised in the Motion by Regional Health Forum West, the need to regulate CAMHS, which was referenced in the Mental Health Commission’s Interim Report and also previously identified by the Department, was built into the provisions of the upcoming revised Mental Health Bill. The annual thematic review of the Mental Health Commission’s Inspector is an important process for highlighting deficits in services and for drawing attention to those areas that need attention.

Each CAMHS team should have, under existing CAMHS Operational Guidelines, clear accountability structures in place to achieve the delivery of high-quality, safe and reliable services and all staff should be informed of and adhere to this. In addition, there is a clear management structure which includes corporate and clinical governance responsibilities and reporting relationships.

Steady progress is also being made on waiting lists in HSE Primary Care Child Psychology services. Around 3,500 were removed from this list nationally in 2022 and this initiative is continuing in 2023.

**Mary Butler TD, Minister for Mental Health and Older People**

<b>W109Q3911</b>	Please provide an update on the progress regarding the St Brigid’s Hospital Ballinasloe Property Campus portfolio including progression with Galway County Council on the acquisition of St Brigid's Nurse Home for the purposes of developing a much needed Domestic Violence Refuge for Women and Children within the county.	<b>Cllr E Francis Parsons</b>
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The update is more or less as recently advised on the 27<sup>th</sup> February 2024 last. An external professional property advisor has been appointed to advise and support the disposal of the surplus lands and buildings on the St Joseph’s Hospital campus. The progress update on this work is that a draft Valuation, Strategy and Agency Report on the St Brigid’s Campus, Ancillary Buildings and Lands has now been received. This draft report will now be subject to internal review over the coming weeks before finalisation. The report will then guide the approach to how the HSE disposes of the various lands and buildings that make up the portfolio along with any expressions of interest received from other State bodies. It is hoped to have better clarity on the overall plan in the coming weeks. Specifically in respect of Galway County Council the intention would be to arrange a meeting with them on the matter.

**Joe Hoare, Assistant National Director, HSE Capital & Estates**

<b>W109Q3912</b>	Will the HSE consider putting in place assured accommodation measures for health care workers who accept posts to fill advertised positions in PUH Ballinasloe and in community care as a significant number are encountering great difficulty accessing accommodation rentals?	<b>Cllr E Francis Parsons</b>
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Neither PUH nor any of the Saolta sites generally source accommodation for staff but on occasion do help find temporary accommodation for overseas international recruits for their first few weeks.

**A. Cosgrove, COO, Saolta University Health Care Group**

The issue has been included as an action item in the HSE Recruitment and Resourcing Strategy 2023. The actions include the establishment of a working group to explore remedies in sourcing and accessing accommodation for staff.

**J Fitzmaurice, Chief Officer, Community Healthcare West**

<b>W109Q3913</b>	Please provide an update on the progression with completion dates of current and planned construction works in PUH.	<b>Cllr E Francis Parsons</b>
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- Construction work is continuing on the new 50 bed replacement inpatient ward block and building work is expected to be completed in April 2024. It is planned to open the new block in September 2024.
- To progress the provision of additional capacity for the Emergency Department – A design team has been appointed and is currently working with a clinical team in relation to a design.
- CSSD to relocate to the under-croft area – It is intended that a design team will be appointed by mid-2024 to work with the local team.
- Approval received to purchase two properties between the Mortuary Gate and Hospital entrance. This will provide additional capacity and will provide an alternative entrance to the hospital in the future.
- Upgrade of the Hospital’s Fire Alarm system is on-going in 2024.
- Review and upgrade of the Hospital Signage to be progressed.
- Progressing a dedicated area for the Ambulatory Hysteroscopy Service – procurement process completed and developer in the process of being appointed - work to commence second quarter 2024.
- Upgrade of power supply: Installation of Sub-station 2 is ongoing, which will provide two additional transformers for the 50 bed inpatient ward block and future developments on the site.
- The provision of additional car parking was completed in February 2024.

**A. Cosgrove, COO, Saolta University Health Care Group**

<b>W109Q3914</b>	Can get up date of agency workers employed in Aras Breffini Manorhamilton and any positions that are vacancies	<b>Cllr F Gurn</b>
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Currently, there are only two agency staff, one Health Care Assistant and one Multi Task Assistant, covering the two vacant posts in Árus Breffni.

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

<b>W109Q3915</b>	Can get update of agency workers in SUH and any positions that are not filled in SUH.	<b>Cllr F Gurn</b>
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SUH uses agency workers for Medical, Nursing and Healthcare assistant posts. The level of usage is based on the service needs to cover urgent vacancies/shifts or leave within departments where reassignment of staff is not possible. The areas of the highest spend are for HCAs and Medical posts.

The table below shows the December 2023 WTE equivalent (most recent data available):

Staff Category	WTE
Admin	1
Medical	15
Nursing	31
Paramed	0
Support	64
Total	113

Currently the hospital has 20.5 positions to fill based on vacancies arising from January – March 2024, of which 13 are in Nursing / Midwifery and 7.5 across other hospital grades / departments.

**A. Cosgrove, COO, Saolta University Health Care Group**

<b>W109Q3916</b>	The length of time between vetting and filling vacancy of doctor or Nurse who comes back from America and Australia into HSE to fill a particular position.	<b>Cllr F Gurn</b>
<p>There are a number of pathways to which a doctor or nurse can seek to take up direct employment with the HSE, via normal recruitment processes as advertised or via the International Nurse recruitment campaign led by the National Recruitment Service.</p>		
<p>The same processes surrounding vetting regardless of whether the candidates are in Ireland or overseas applies, with the exception of Police Clearance being required for International applicants. The timeliness of the processing of vetting is dependent on the engagement of the candidates with the HSE and the HR departments. On average the processing of vetting can take 6-10 weeks depending on the candidate and the country involved.</p>		
<p><b><i>D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)</i></b></p>		
<p>Provided the candidates have registration with relevant body NMBI for nursing and Irish Medical Council, the process for recruitment of doctors and nurses does not differ irrespective if candidates are overseas or located in Ireland. If the candidates qualified abroad the process takes longer as they would need to seek recognition of their qualification prior to applying for registration, may need adaptation, may require travel visa.</p>		
<p>However, the length of time can vary due to individual candidate's availability to take up the post and the speed of which they complete their part of the vetting and pre-employment stages. For example, any candidate that has lived out of the country for a period of 6 months or more must provide a police clearance from the relevant country. It is out of our control in regard to ascertaining/obtaining same and often times out of the control of the individual. It is outlined in the additional campaign information for every post the requirement for police clearance and advised that it is a process which can take an amount of time and if a candidate is interested in a career within the HSE we would advise that they commence the process. Similarly, it is a matter for the candidate to complete the garda vetting form if they have been resident in Ireland previously and again, this is out of our control. Once the link is issued from the garda vetting bureau the candidate has 30 days to complete same and if they don't action in that time the link times out and they must reapply for same and process starts all over again. With regard to medical clearance it is up to the candidate to provide all their medical info on the medical form and return directly to Occupational Health. If they delay completing this or do not complete the form fully this will also delay the process for OH providing medical clearance. Once the candidate gives HR permission to seek references they are sought but on occasion candidates do not want their current line manager contacted for a reference until all the other documentation has cleared.</p>		
<p>The single biggest part is often the availability of candidate to take up the post pending the completion of the relevant pre-employment checks above, due to the relocation required.</p>		
<p>In summary, it is not possible to quantify a time in such instances, as it can range from approximately 3 months to 2 years.</p>		
<p><b><i>T. Canavan, Regional Executive Officer, HSE West and North West</i></b></p>		
<b>W109Q3917</b>	Graduation of nurses and doctors into HSE sector yearly and number of positions that are taken up by graduates into the HSE.	<b>Cllr F Gurn</b>
<p>Please see below information in relation to the RNID and MH Graduate Nurses in CH CDLMS Donegal and Sligo Leitrim for 2023.</p>		

Name of Returning Agency	Current number (Headcount) of Graduate Nurses & Midwives	Number of Graduate Nurses & Midwives being offered Contracts	WTE Graduate Nurses & Midwives being offered contracts	Number of Graduate Nurses & Midwives accepting contracts of offer	WTE Graduate Nurses & Midwives accepting contract of offer
CH CDLMS - Donegal / Sligo Leitrim	29	23	23	14	14

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

Name of Returning Agency	Current number (Headcount) of Graduate Nurses & Midwives	Number of Graduate Nurses & Midwives being offered Contracts	WTE Graduate Nurses & Midwives being offered contracts	Number of Graduate Nurses & Midwives accepting contract of offer	WTE Graduate Nurses & Midwives accepting contract of offer
Saolta Group (PUH and all Midwives)	23	22	22	22	21.28
GUH (SN only)	68	64	64	50	50
Letterkenny University Hospital	22	22	22	22	22
Sligo University Hospital	34	29	29	29	29
MUH (SN only)	20	18	14	14	14
<b>Total</b>	<b>167</b>	<b>155</b>	<b>151</b>	<b>137</b>	<b>136.28</b>
<i>All Graduate nurses are invited to interview but not all attend.</i>					

**Graduate Doctors:**

The process of graduate doctors is managed centrally for the HSE by National Doctors Training and Planning (NDTP) and National Recruitment Service (NRS). There are currently 878 interns nationwide of which 157 are based in the West North West intern network (which includes Saolta, GP practices and 3 private hospitals). NDTP have advised that all Irish medical graduates were offered intern posts in 2023.

**T. Canavan, Regional Executive Officer, HSE West and North West**

<b>W109Q3918</b>	<p>Can the Forum be provided with the number of children currently in receipt of intervention at each of the following Children Disability Network Teams? Can the forum also be advised of the number of children awaiting assessment with each team?</p> <ul style="list-style-type: none"> <li>West Galway Children's Disability Network Team 4</li> <li>Galway City West Children's Disability Network Team 5</li> </ul>	<b>ClIr J Connolly</b>
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	<ul style="list-style-type: none"> <li>• Central Galway and Galway City East Children’s Disability Network Team 6</li> <li>• North Galway Children’s Disability Network Team 7</li> <li>• East Galway and South Roscommon Children’s Disability Network Team 8</li> <li>• North Roscommon and North East Galway Children’s Disability Network Team 9</li> </ul>	
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The Progressing Disability Services for Children and Young People model is focused on improving supports for children by reorganising children’s services into multi-disciplinary Children’s Disability Network Teams providing for all children with disabilities based on need, regardless of diagnosis, where they live or where they go to school.

The Progressing Disability Services programme provides a clear pathway and fairer access to services, for all children with a disability. It makes the best use of available resources for the benefit of children and their families and ensures effective teams working in partnership with families and education staff to support children with a disability to reach their full potential.

The CDNTs operate an interdisciplinary model and do not provide uni-disciplinary support/intervention. Waiting lists for specific therapy interventions are not collated on this basis.

As of the end of January 2024, there are 3600 Children on the caseload for the Children’s Disability Network teams 4 to 9 across Community Healthcare West in Galway & Roscommon, 870 of whom are awaiting initial contact from the team (waiting 0-12 months).

The following gives a breakdown of the information on children waiting on a service as defined under the PDS Service Model:

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 <b>active caseload @ month end</b>	369	399	767	712	529	824
<b>On the active caseload the total no. of children waiting for an initial contact @ month end</b>	50	95	0	134	305	286

**J Fitzmaurice, Chief Officer, Community Healthcare West**

<b>W109Q3919</b>	Can the Forum be provided with the details on the cumulative total number of nights of overnight centre- based and overnight home-based respite care provided by agency partners for children and adults with disabilities annually in Co Galway in 2023? How many nights were facilitated by the respite and how many families benefitted? Can the Forum also be provided with the details on the cumulative total number of nights of daytime centre- based and daytime home-based respite care provided by agency partners for children and adults with disabilities annually in Co Galway in 2023? How many days were facilitated by the respite and how many families benefitted?	<b>Clr J Connolly</b>
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Agency		Year	Overnight Centre Based		Overnight Home Based Respite Care		Day time Centre Based Respite		Day time Home Based Respite	
			No of Nights	No of Families Benefitted	No of Nights (Hours)	No of Families Benefitted	No of Days / Sessions	No of Families Benefitted	No of Days / Sessions	No of Families Benefitted
Brothers of Charity Services Ireland - WEST REGION	Adult	2023	4193	58	2432	27	1537	31	1782	34
Brothers of Charity Services Ireland - WEST REGION	Child	2023	1644	27	228	12	2620	45	4467	75
Ability West	Adult	2023	10,110	149	12429	76	604	41	N/A	N/A
Ability West	Child	2023	2,275	36	1563	19	120	12	N/A	N/A
Greenpark Nursing Home	Adult	2023	591	31	N/A	N/A	N/A	N/A	N/A	N/A
Enable Ireland	Adult	2023	N/A	N/A	N/A	N/A	N/A	N/A	1566	13
Enable Ireland	Child	2023	N/A	N/A	N/A	N/A	175	52	1618	17

**Note**

Ability West do not provide Home Based respite, they provide community supports to 76 adults and 19 children with a total number of sessions in 2023 for adults 12,429 hours and children 1,563 hours.

The figures aligned to Ability West **Day time Centre Based Respite** relates to evening clubs.

**J Fitzmaurice, Chief Officer, Community Healthcare West**

<b>W109Q3920</b>	What is the full staffing cohort of the Dental Services in CHO 2? How many people are currently on the Dental GA treatment waiting list in CHO 2 and what is the approximate waiting time to be treated? Can the data be provided in tabular form according to age category and patients with additional needs?	<b>Clr J Connolly</b>
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Please see below the full staffing cohort of the Dental Services in Community Healthcare West:

<b>Mayo</b>		<b>Roscommon</b>		<b>Galway</b>	
Dentists	7.5	Dentists	3.45	Dentists	11.7
D Hygienists	1.4	D Hygienists	1	D Hygienists	1.4
Dental Nurses	8.87	Dental Nurses	5.85	Dental Nurses	10.2

The Dental GA treatment waiting list Community Healthcare West and waiting time:

<b>CHO2 MAYO</b>	<b>Age range</b>	<b>0-5</b>	<b>5-12</b>	<b>12-16</b>	<b>Number</b>	<b>Average waiting times</b>
Paediatric extraction only		19	89	4	112	28-36 months

Paediatric Special Care		1	45	22	68 (inc 12 Rosc)	17-24 months
Adult special Care	>16				17	4-6 months

CHO2 Roscommon	Age range	0-5	5-12	12-16	NUMBER	AVERAGE WAITING TIME
Paediatric extraction only( being seen PUH)		2	20	1	23	4-6MONTHS
Paediatric Special Care ADDED TO MAYO LIST		-	8	4	12 added to MUH list above	
Adult special Care	➤ 16				9	5-6 MONTHS

*J Fitzmaurice, Chief Officer, Community Healthcare West*

**Orthodontic Services:**

**IPDC**

**IPDC – Adults**

Specialty	(All)										
isadult	TRUE										
Count of Hospital Name	Column Labels										
Row Labels	0-3 Mths	3-6 Mths	6-9 Mths	9-12 Mths	12-15 Mths	15-18 Mths	18-24 Mths	24-36 Mths	36-48 Mths	48+ Mths	Grand Total
ACTIVE	23	24	22	12	10	12	22	20	3	3	151
PREADMIT	31	3	1								35
SUSPENSION	1	1	3	6	4	3	2			2	22
<b>Grand Total</b>	<b>55</b>	<b>28</b>	<b>26</b>	<b>18</b>	<b>14</b>	<b>15</b>	<b>24</b>	<b>20</b>	<b>3</b>	<b>5</b>	<b>208</b>

**IPDC – Children**

Specialty	(All)										
isadult	FALSE										
Count of Hospital Name	Column Labels										
Row Labels	0-3 Mths	3-6 Mths	6-9 Mths	9-12 Mths	12-15 Mths	15-18 Mths	18-24 Mths	24-36 Mths	Grand Total		
ACTIVE	16	6	7	1	4	1	8	1	44		
SUSPENSION	2	1				1			4		
<b>Grand Total</b>	<b>18</b>	<b>7</b>	<b>7</b>	<b>1</b>	<b>5</b>	<b>1</b>	<b>8</b>	<b>1</b>	<b>48</b>		



### OPD – Adult

Adult/Child	Adult																			
Primary Diagnosis	(Multiple Items)																			
Count of Patient Name	Column Labels																			
Row Labels	A. 0-3 months	B. 3-6 months	C. 6-9 months	D. 9-12 months	E. 12-15 months	F. 15-18 months	G. 18-21 months	H. 21-24 months	I. 24-36 months	J. 36-48 months	K. 48+ months	Grand Total								
Has Appointment Date	15	3	12	5	5	3			3	3		49								
No Appointment Date	158	144	81	63	42	38		27	36	88	74	114	865							
Suspended		5	2	26	26	14		11	21	75	70	207	457							
<b>Grand Total</b>	<b>173</b>	<b>152</b>	<b>95</b>	<b>94</b>	<b>73</b>	<b>55</b>		<b>38</b>	<b>60</b>	<b>166</b>	<b>144</b>	<b>321</b>	<b>1371</b>							

### OPD – Children

Adult/Child	Child																			
Primary Diagnosis	(Multiple Items)																			
Count of Patient Name	Column Labels																			
Row Labels	A. 0-3 months	B. 3-6 months	C. 6-9 months	D. 9-12 months	E. 12-15 months	F. 15-18 months	G. 18-21 months	H. 21-24 months	I. 24-36 months	J. 36-48 months	K. 48+ months	Grand Total								
Has Appointment Date	8	3	12	10	1	2				1		38								
No Appointment Date	38	29	11	13	5	15		3	5	5	1	127								
Suspended										1	1	2								
<b>Grand Total</b>	<b>46</b>	<b>32</b>	<b>23</b>	<b>23</b>	<b>6</b>	<b>17</b>		<b>3</b>	<b>5</b>	<b>7</b>	<b>2</b>	<b>167</b>								

### A Cosgrove, COO, Saolta University Health Care Group

<b>W109Q3921</b>	How many Psychologists are currently employed in the community setting through Primary Care in Co Galway? At which locations are the Psychologists currently providing a service? Is there a waiting list to access Psychological services and can the forum get an update on the number of people waiting and the Waiting List figures by wait time?	<b>Clr J Connolly</b>
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### Galway/Sth Roscommon Primary Care Child and Family Staffing Levels by Primary Care Network (4-8)

	Permanent	Temporary	Permanent Vacancies	Network Totals
<b>Network 4 Connemara</b>	1.5	0	0	1.5
<b>Network 5 City West and Centre</b>	2.0	2	0	4.0
<b>Network 6 City East/ Oranmore/Headford/Claregalway/Gort</b>	1.5	1	0	2.5
<b>Network 7 Tuam/Abbeyknockmoy/Athenry/Loughrea</b>	1.75	0	1	2.75
<b>Network 8 Ballinasloe/Monskland</b>	3.0	0	0	3.0
<b>Total by network</b>	<b>9.75</b>	<b>3</b>	<b>1</b>	<b>13.75</b>
<b>Principal Psychologist Specialist</b>	1.0			
<b>Total Galway/Sth Roscommon (Permanent and Temporary)</b>	<b>14.75</b>			

### Waitlists

Galway/Sth Roscommon Child and Family Psychology Waitlist as of 13.03.24

<b>Number of children awaiting PC Child Psychology service</b>
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0-12 weeks	12-26 weeks	26-39 weeks	39-52 weeks	52 + weeks	Total
50	113	108	94	531	896

**Psychology Services to Adults:**

As part of Enhanced Community Care, a new Primary Care Adult Psychology service was launched in Network 6 (Central and East Galway City). There is currently 1 part-time Senior Clinical Psychologist providing a service in this Network.

*J Fitzmaurice, Chief Officer, Community Healthcare West*

<b>W109Q3922</b>	Can I receive a breakdown of the number of HSE community Speech and Language therapists by area that are currently providing services in Galway city and county to adults and children. How many adults and children are currently on the waiting list to be seen? Are there any current vacancies unfilled in the service?	<b>Cllr D Ó Cualáin</b>
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Speech and Language Therapy is provided in the Community under the following structures: Primary Care Services and Community Network Disability Teams:

**Primary Care Services:**

Network	SLTs for children	SLTs for adults	No. of vacancies
Network 4 (West Galway)	3.6	1	1 in adult services, hoping to fill same in the coming weeks.
Network 5 (Galway City North and West)	5	2	No current vacancies
Network 6 (East Galway City/Central Galway)	4.7	2	No current vacancies
Network 7 (Tuam, Loughrea, Athenry)	6	2	No current vacancies
Network 8 (East Galway/South Roscommon)	4	1	No current vacancies

**Current Waiting Lists – Children**

Waiting time	0-4 months	4-8 months	8-12 months	12-18 months	18-24 months	≥ 24 months	Total waiting
Waiting Initial Assessment	437	354	135	6	0	0	932
Waiting Initial Therapy	123	123	56	10	4	0	316
Waiting Further Therapy	302	204	128	55	7	0	696

### Current Waiting Lists – Adults

Waiting time	0-4 months	4-8 months	8-12 months	12-18 months	18-24 months	≥ 24 months	Total waiting
Waiting Initial Assessment	85	10	4	0	0	0	99
Waiting Initial Therapy	6	0	0	0	0	0	6
Waiting Further Therapy	91	35	2	0	0	0	128

### Children’s Disability Network Teams (CDNTs):

Children’s Disability Network Teams (CDNTs) provide services to children with complex needs arising from their disability under the progressing disability services model of service delivery.

The CDNTs operate an interdisciplinary model and do not provide uni-disciplinary support/intervention. Waiting lists for specific therapy interventions are not collated on this basis.

A number of professionals from different disciplines work collaboratively with the child and family, by sharing information, decision-making and goal setting to meet the identified needs of the child. The needs of a child, captured and measured through the joint Individual Family Support Plan (IFSP), may require input of a number of disciplines.

The breakdown of the number of HSE community Speech and Language Therapists by area that are currently providing services in Galway city and county to children are as follows:

CDNT	Lead Agency	Allocated HSE employed Speech and Language Therapists/ Assistants	Allocated HSE staff noted vacant
CDNT 4 - Galway West	HSE	5 WTE	2 WTE – vacant post
CDNT 5 – Galway City West	Enable Ireland	1 WTE	0
CDNT 6 - Central Galway and Galway City East	Brothers of Charity	0	0
CDNT 7 - North Galway	HSE	6.5 WTE	4.5 WTE – vacant post
CDNT 8 -East Galway and South Roscommon	HSE	3.6 WTE	1 WTE vacant post

### *J Fitzmaurice, Chief Officer, Community Healthcare West*

<b>W109Q3923</b>	Can I receive an update in relation to the proposed new ambulance base in Recess in Connemara. At what stage of the planning process is this development and do the HSE and the National Ambulance Service intend continuing to progress this project in North Connemara?	<b>Cllr D Ó Cualáin</b>
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We do intend on progressing this project. Following the planning application, we received a request for further information from Galway County Council. Our design team informally discussed this with relevant representatives in the local authority and subsequently worked actively on providing the requested information. We have submitted a comprehensive response to the further information request early this month and await an answer.

*JJ McGowan, Chief Ambulance Officer - West*

<b>W109Q3924</b>	Does the HSE provide any means of transport or funding for patients to attend hospital appointments, or for patient's who are to be discharged from hospital, who have no means of travel or transport and find themselves struggling financially to attend such appointments or to be discharged from hospital?	<b>Cllr D Ó Cualáin</b>
<p><b>LUH:</b> Acute Hospital services provide transport for the attendance of Renal Dialysis patients to their Hospital appointments as per their entitlement. LUH does not provide transport for individuals to attend their hospital appointments. Services such as Irish Cancer Service may provide transport for patients attending for Oncology related appointments.</p> <p>Community Services also assist with transport requests. There is a bus transport service to Galway University Hospital transporting patients free of charge from Donegal to and from Galway Hospital for their Cancer treatment.</p> <p>In addition The Friends of Letterkenny University Hospital group provide a bus which transports Donegal patients to St Luke's Clinic in Dublin for Radiotherapy appointments. The bus is specially adapted, has been fitted with upgraded seats and tables and also has a toilet on board. These adaptations help to make the journey to and from Dublin more comfortable for patients from all over the North West who require much needed cancer treatment in Dublin.</p> <p>The management of LUH have received confirmation from The Friends of Letterkenny University Hospital group that their bus can be used to provide a five day Monday to Friday service for Donegal patients who must attend outpatient appointments in Galway. This will be introduced on a Pilot Scheme within the next few weeks. Further communication will be issued to publicise this new initiative.</p> <p><b>PUH:</b> We have no transport for patients. In very exceptional cases and via Social Work would we pay for transport home and this would be a local taxi.</p> <p><b>GUH:</b> With the exception of dialysis patients, it is the patients' responsibility to make their own way to the hospital for their appointment.</p> <p>In exceptional circumstances, whereby a patient requires transport to their home; ambulance transportation is arranged for the patient.</p> <p>For certain patients the following options may also be explored;</p> <ul style="list-style-type: none"> <li>• If the patient has a medical requirement for an ambulance, the patient's GP / Nursing Home Staff would need to contact the National Ambulance Service (NAS) to request same. The number is 0818-432-999. However, there is no guarantee that the NAS would have resources on the day to complete this transfer, and emergency calls would always take priority.</li> <li>• A request may be put into the local Order of Malta for transfer.</li> <li>• GP / Public Health Nurse may also be aware of local volunteer services providing transport for patients.</li> </ul> <p><b>SUH:</b> Transport facilities are in place for Renal patients who attend for dialysis services on a weekly basis. There is other scheduled transport facilities funded by the hospital to attend outpatient services, however there is also access to transport provided for patients attending Radiotherapy services in Galway.</p> <p><b>MUH:</b> MUH does not provide transport for patients to attend hospital appointments. Transport on discharge from hospital is provided where there is a clinical need based on medical or mobility factors as determined by Ward Clinical staff. On rare</p>		

occasions the Social Work Department will also be involved in decisions on patient transport. Transport facilities are in place for Renal patients who attend for dialysis services on a weekly basis.

**T. Canavan, Regional Executive Officer, HSE West and North West**

The NAS has – and continues to be – under pressure to meet the increased activity for urgent and emergency calls. As a result of this, the ability of the NAS to commit to non-emergency work is limited.

In 2011, the HSE introduced the HSE non-Ambulance Patient Transport policy which is designed to provide support to requests for transport when the NAS do not have the capacity to provide same. This policy sets out the pathways and process to seek and achieve sanction to access alternatives for patients as required. The policy can be accessed [here](#).

**JJ McGowan, Chief Ambulance Officer - West**

<b>W109Q3925</b>	Can I receive a breakdown of the number of HSE community Physiotherapists by area that are currently providing services in Galway city and county to adults and children. How many adults and children are currently on the waiting list to be seen? Are there any current vacancies unfilled in the service?	<b>Cllr D Ó Cualáin</b>
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The breakdown of the number of HSE community Physiotherapists by area that are currently providing services in Galway city and county to children are as follows:

CDNT	Lead Agency	Allocated HSE employed Physiotherapists	Allocated HSE staff noted vacant
CDNT 4 - Galway West	HSE	2 WTE	1
CDNT 5 – Galway City West	Enable Ireland	n/a	n/a
CDNT 6 - Central Galway and Galway City East	Brothers of Charity	1.5 WTE	0
CDNT 7 - North Galway	HSE	4.8 WTE	0
CDNT 8 -East Galway and South Roscommon	HSE	2.75 WTE	1 WTE vacant

Children’s Disability Network Teams (CDNTs) provide services to children with complex needs arising from their disability under the progressing disability services model of service delivery. The CDNTs operate an interdisciplinary model and do not provide uni-disciplinary support/intervention. Waiting lists for specific therapy interventions are not collated on this basis. A number of professionals from different disciplines work collaboratively with the child and family, by sharing information, decision-making and goal setting to meet the identified needs of the child. The needs of a child, captured and measured through the joint Individual Family Support Plan (IFSP), may require input of a number of disciplines.

In the Primary Care Enhanced Community Care Networks in Galway/South Roscommon there are 27.5 Physiotherapists for adults and 3.95 Physiotherapists for paediatrics. There are currently 4.3 vacant posts. The total number of people (adult and children) currently on the waiting list is 5,253. The waiting list figures are actively validated by the Physiotherapy Service. All physiotherapy referrals are triaged and prioritised according to clinical need. The breakdown for the number of persons waiting for assessment by age category and wait band is as follows:

<b>0 - 4 years</b>	
0 - 12 weeks	77
12 - 26 weeks	54
26 - 39 weeks	36
39 - 52 weeks	32
52 weeks	73
<b>Total</b>	<b>272</b>

5 - 17 years	
0 - 12 weeks	60
12 - 26 weeks	47
26 - 39 weeks	41
39 - 52 weeks	31
52 weeks	128
<b>Total</b>	<b>307</b>

18 - 64 years	
0 - 12 weeks	529
12 - 26 weeks	452
26 - 39 weeks	346
39 - 52 weeks	308
52 weeks	991
<b>Total</b>	<b>2626</b>

65 years +	
0 - 12 weeks	590
12 - 26 weeks	346
26 - 39 weeks	241
39 - 52 weeks	204
52 weeks	667
<b>Total</b>	<b>2048</b>

*J Fitzmaurice, Chief Officer, Community Healthcare West*

<b>W109Q3926</b>	Can I have a breakdown from each of the CHOs within SAOLTA in relation to how many Respite Beds are available to Families and Children with Disabilities in each of their respective areas, and how many Child Respite Centres are there in each CHO area and where are they located?	<b>Cllr G McMonagle</b>
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**Childrens Respite Information - March 2024**

Service Name	Address	No. of Respite Beds	Adults /Children	Comments (if any of the beds are currently blocked /inaccessible)
<b>Mayo</b>				
Western Care - St. Stephen's Respite Service	35 Leichin Village, Turlough, Castlebar, Co. Mayo	4	Children	Respite reduced for individuals due to one child residing on a full time basis
Western Care - Cara Service	Carrowntreila, Ballina, Co. Mayo	3	Children	
<b>Mayo</b>	<b>Total</b>	<b>7</b>		
<b>Roscommon</b>				
St Hilda's	Athlone	4 bed capacity	Children	4 bed capacity across 2 CHO areas

BOCSIRR - Ivy House	Castlerea	4 bed per night	Children	Open full time (one child left in services since October 23, this has had a knock-on impact on which other children can receive respite alongside him for safety reasons so most nights we can only accommodate one other child along with this individual)
<b>Roscommon</b>	<b>Total</b>	<b>8</b>		
<b>Galway</b>				
BOC - Crannog	Galway	3	Children	3 beds per night, open 23 nights per month
BOC - Cranmore	Galway	3	Children	3 beds per night, open full time (sometimes only 2 children can avail of respite per night due to compatibility and safety issues)
BOC - Riverside	Galway	1	Children	1 bed per night, open 4 nights per month
Ability West - Holly Services	Galway city	8	Children	8 beds registered but only 4 children per night due to complexities, all requiring 1:1 support.
Ability West - St Teresa's	Ballinasloe, Co Galway	5	Children	5 beds but only max 3 beds per night due to complexities. Open 22 nights per month.
<b>Galway</b>	<b>Total</b>	<b>20</b>		

***J Fitzmaurice, Chief Officer, Community Healthcare West***

There is no dedicated children's respite centre in the CHO1/CH CDLMS area currently. Due to geographical spread, most centres operate children and adult respite services on an alternate week basis.

The table below details the information requested by Cllr. McMonagle for CHO1/CH CDLMS where respite services are provided by the HSE CH CDLMS Disability Services or by service arrangement with another provider:

Provider	Respite Service	Location	HIQA ID	Max Occupancy/ Number Beds	Note

Rehab Group	Bayview	Tullaghan, Co Leitrim	5886	5	
North West Parents and Friends Association for Persons with Intellectual Disability	Sunbeam House	Carrick On Shannon, Co Leitrim	1933	3	
Rehab Group	Seaview Respite Centre	Mountcharles, Donegal	2521	4	
HSE CH CDLMS Disability Services	Drumboe Respite House	Drumboe Lower, Stranorlar, Co. Donegal	2531	5	Currently closed to respite due to being occupied by 3 people with disabilities who are homeless.
HSE CH CDLMS Disability Services	Ballymacool Respite House	Ballymacool, Letterkenny	2523	5	
CH CDLMS Disability Services	Riverwalk Respite House	Derry Road, Carndonagh, Co. Donegal	2501	3	Currently closed to respite following recently being vacated by 1 person with disabilities who was homeless. The centre is currently awaiting derogation to recruit the necessary staff to resume respite services.

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

**W109Q3927**

In relation to the Diabetic service in Donegal, in particular the vacant Podiatrist Post at LUH and all other vacant Diabetic related positions at LUH, can you update me on any progress on the recruitment or what is being done by LUH to seek the approval to advertise for these posts

**Clr G McMonagle**

LUH currently facilitate 4 adult outpatient clinics per month (2 Diabetic clinics, 1 Endocrine Clinic, 1 x GIM/Endocrine clinic). In addition to these clinics there are 1 x pump clinic & 1 x transition clinic)

There are four Paediatric Diabetes Outpatients Clinics per monthly. Two of these are Consultant led and the other two are nurse led.

We have been experiencing significant challenges in relation to Consultant Endocrinologist recruitment which is a problem shared by many model 3 hospitals across all specialties in Ireland. We do however acknowledge the particularly challenging situation in respect of recruitment in Letterkenny. We hope that the pilot scheme launched by the NDTP to encourage recruitment in model 3 hospitals will help with this situation. However, recent recruitment advertisements have provided some re-assurance that the situation will ease soon.



LUH is approved for 2.0 WTE Consultant posts with 100% commitment at LUH. In addition since October 2022, LUH was also approved for a further Consultant post (1.0 WTE) who has a 50% commitment to LUH and 50% commitment to Donegal Primary Care Service through the National Framework for the Integrated Prevention and Management of Chronic Disease, the National Clinical Programme (NCP) for Diabetes and the Enhanced Community Care Programme (ECC Programme). This is a substantial improvement in approved consultant posts in LUH and we appreciate this support. The current status of consultant endocrinologist staffing and recruitment is as follows :

- One consultant was employed in a permanent capacity up until 6<sup>th</sup> August 2023 when he resigned from his post. Since September 2023, he is contracted on a 12 hours per week basis to deliver Consultant Endocrinologist Services on an outpatient basis. This is a new Public Only Consultant Contract for 12 hours per week for a two year period and during this time, he provides two Consultant delivered outpatient diabetes clinics per week.
- A Consultant Physician with a special interest in Diabetes Mellitus continues to be employed at LUH and to provide a General Medical Consultant Service with a Special Interest in Diabetes. He provides an excellent service both on an inpatient and out-patient basis and currently provides additional clinical services and clinical governance to the ECC Programme.
- LUH has recently advertised all three of the permanent Consultant Endocrinologist positions through the Public Appointment Service. This is the only approved path to permanent consultant appointment in Ireland.
- Interviews took place on the 8<sup>th</sup> January 2024 for one of these posts. One candidate was offered the post but has since decided not to take up the post. This has now been re-advertised.
- LUH also re-advertised the two remaining permanent positions (Hospital & ECC posts) and we are happy to report that there are a number of candidates awaiting interview. Again, this recruitment is being managed by the Public Appointment Service as it is for permanent filling. We have attempted to recruit locums, pending the arrival of the permanent appointments and did secure a fixed term consultant from the Hospital/Community shared post for 12 months, ending in January 2024.
- LUH has employed a full-time experienced Registrar in Endocrinology who assists with the ECC programme and also the in-patient consult service at LUH.
- There is currently one Consultant Paediatrician with a Special Interest in Diabetes and in addition one Paediatric Registrar with a special interest in Diabetes. There is currently 1.0 x WTE ANP Paediatric Diabetes plus 1.0 WTE ANP Gestational Diabetes. Injection clinics and Pump Clinics are held twice per month and an ANP led clinic is facilitated twice weekly. It is envisaged that the Dose Adjustment for Normal Eating (DAFNE) programme will be introduced in LUH later in the year.
- There are currently 2.0 x WTE Acute Clinical Nurse Specialists in posts for the adult Diabetes Services. In addition, there is 1.0 WTE staff nurse and one Clerical Officer.
- There is one Basic Grade Podiatrist and one vacant Senior Grade Podiatrist. The Basic Grade Podiatrist has resigned and will be leaving in mid-April 2024.

LUH has been affected by the recruitment embargo that came into place in November 2023. This was a national directive. However, recent memo from Mr. Bernard Gloster HSE CEO dated the 28<sup>th</sup> February 2024 has outlined a number of exemptions for specific cohorts of staff for recruitment. LUH are currently liaising with Saolta Group management in relation to recruitment processes around same and submissions of posts for derogation. A derogation process had been

put in place at national level of which all requests across the Saolta Group can be submitted upwards for critical posts only. All vacant positions will be reviewed in line with management of WTE at site level.

There is currently 2.5 WTE dietitians posts allocated to Diabetes Services in LUH and all these positions are filled.

Letterkenny University Hospital is committed to improving access for our Diabetes patients. In the last year our focus has been on those awaiting a first appointment with a hospital consultant. In the last year we have reduced the total number waiting a first appointment from 243 to 85, and from a waiting time of just over 2 years to under 12 months.

Continuing this reduction in waiting times we have reduced our waiting list for Type 1 Diabetes from 39 in January 2024 to 10 in March 2024 and reduced the waiting time from 24 months to 3 months. All patients referred with Type 1 Diabetes are now offered an appointment within 6-8 weeks. Type 2 diabetes patients waiting lists have been reduced by almost 20% in the first three months of this year, with 44 patients awaiting an appointment date today, the majority of whom have been waiting less than 6 months.

Review appointment delays have been halved in the past twelve months. We acknowledge that we are not currently meeting best practice guidance for review frequency. The total number of patients delayed has been significantly reduced and we are currently focusing on further reductions in the length of these delays. Our new collaborative venture with the Chronic Disease Hub is also ensuring that Type 2 Diabetes patients are being monitored in both a timely manner and a more appropriate setting.

Both the Saolta Executive and Letterkenny University Hospital Management Teams fully recognise the significant impact of Diabetes on the community in Donegal and remain fully committed to the further development and enhancement of services to deliver a fit for purpose and sustainable service. This includes our commitment to developing an integrated primary, community, and acute service model as opposed to the traditional Hospital based service.

Although recruitment, and consultant recruitment in particular, has been particularly challenging we are glad to note that our new service model is proving more effective in attracting candidates. We are fortunate to have the ongoing support of our Consultant Endocrinologists at LUH and look forward to successfully recruiting new consultant colleagues in the coming months. We will also be working in collaboration with patients and the Donegal Branch of Diabetes Ireland to further define the multidisciplinary supports required for our patients.

***A Cosgrove, COO, Saolta University Health Care Group***

<b>W109Q3928</b>	Can an information/Fact Leaflet be drawn up outlining all the Supports available to Parents whose Children have been diagnosed with Autism and distributed to all GPS and Primary Care Centres across the CHO1 area?	<b>CIlr G McMonagle</b>
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Community Healthcare, Cavan, Donegal, Leitrim, Monaghan, Sligo (CH CDLMS) does not have the type of leaflet described in the Question. Given the diversity of provision of services to children and young people with autism across CH CDLMS, it would not be possible to explain autism supports in one generic leaflet. Different areas provide supports to people with autism in different ways. A general support leaflet for autistic children and young people should involve input from a wide range of services and government agencies if it is to try to meet any adequate level of support but, at the very least, it would need to be compiled by a team who are aware of the supports available across all agencies.

For example, in the CH CDLMS area, some ASD assessments are outsourced and the children who are provided with an outsourced autism assessment and a diagnosis are signposted to appropriate resources within their report compiled by the private provider. These recommendations are more specific to the child than anything that the service could produce, having not completed the assessment and in some cases having not met the child/young person.

The Children’s & Young People’s Services Committee (CYPSC) Cavan and Monaghan websites, as well as the WOW (“What’s on Where”) leaflets, already provide a lot of detail regarding local supports and services. The CYPSC website details a wide variety of child and family-based supports and has listed local links for children and young people’s services in a directory of services for each of the counties in CH CDLMS.

There is also an abundance of information available widely regarding Autism supports for children with ASD, as outlined below, and the CDNTs and Primary Care Services make parents and guardians aware of these information resources on an ongoing basis.

- **AsIAm Phone Line** for the Autistic Community Supported by the HSE - this Information Line operates for four hours per day, five days a week. The calls are responded to by either a clinician or an appropriately qualified autistic advisor to ensure appropriate responses and supports to meet the needs and concerns of the range of callers and to inform follow-on activity. The aim of the service is to develop the range of information resources, seminars and programmatic activity so that callers will receive the information and support they need. All callers will receive a follow-on email summarising their call and, where required, will be provided with follow-on information and supporting methods/tools. The service is being widely promoted nationally through a co-branded information campaign and will operate on both a phone line and instant messaging basis. Annual insight reports, in addition to interval data reports, on calls received and topics explored, will be provided to inform HSE and Government policy in the area of Autism.
- HSE website at [Autism - HSE.ie](http://Autism-HSE.ie)
- National Council for Special Education pamphlet – *Information for Parents/Guardians of Children and Young People with Autism Spectrum Disorder* – which informs parents and guardians of supports and services available for children and young people with autism spectrum disorder and their families
- The Shine Centre for Autism website at [www.shineireland.com](http://www.shineireland.com)
- Webinar available on Entitlements & Benefits which can signpost parents to various entitlements they may have, e.g. Domiciliary Care Allowance
- Information on Benefits and Entitlements at [Benefits and entitlements for carers of children with a disability - HSE.ie](http://Benefits and entitlements for carers of children with a disability - HSE.ie)

The nature of Progressing Disability Services is to move away from a diagnostic-led service, and therefore the Children’s Disability Network Teams (CDNTs) do not have plans to provide diagnostic-specific information/advice to GPs in the interests of equity. Parents of children who have been diagnosed with Autism are offered supports in the form of verbal information and written documentation from the CDNTs in CH CDLMS.

However, notwithstanding the above, the HSE will monitor and review the need for such a leaflet as we move into the Regional Health Authority structure. Given that disciplines/services are working collaboratively to meet the needs of children with Autism, the merits of developing a general information leaflet may be considered in the future.

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

<b>W109Q3929</b>	Has HSE any Plans to develop a Paediatric Center of Excellence for Children living in the North West as all other Centre of Excellence are below the Galway/Dublin line.	<b>Clr G McMonagle</b>
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The national Model of Care for Paediatric healthcare services provides a framework for the delivery of health services to children in Ireland.

Galway is the regional paediatric unit for the West, Northwest region. A regional network is in place with close links between Galway and the local paediatric units in Letterkenny, Sligo and Mayo. Close links are also in place between all sites and CHI where specialist care is delivered as well as shared care services.

The Model of Care sets out a vision for the delivery of services where all children should be able to access safe, high quality services in an appropriate location, within an appropriate timeframe, irrespective of their geographical location or social background. This requires the development of an integrated network for paediatric services nationally between the new children’s hospital, regional and local paediatric units. Detail is provided within the model of care on requirements for care provision at local and regional paediatric units, including workforce and conditions.

***T. Canavan, Regional Executive Officer, HSE West and North West***

<b>W109Q3930</b>	What were the pre-covid concerns investigated, the risk assessment and HSE response plans to address deficiencies at the Carndonagh Day Care Service? Who is presently involved and deemed as relevant stakeholders in the plan currently under review re:the restoration of the North Inishowen Day Care Service and what meetings have occurred to date? What pressing matters are currently with the HSE estates re: accommodation needs required to enable and facilitate the Restoration of Day Care services on Carndonagh?	<b>Cllr A Doherty</b>
<p>The shortcomings at Carndonagh Day Hospital from an Infection Prevention and Control (IPC) perspective were set out in the report, Infection Prevention &amp; Control Donegal HSE Area Report on Carndonagh Day Hospital, sited at Carndonagh Community Hospital, which was compiled by the IPC team, Community Healthcare, Cavan, Donegal, Leitrim, Monaghan and Sligo.</p> <p>The shortcomings in the following areas, from an IPC perspective, are outlined in the report including:</p> <ul style="list-style-type: none"> <li>➤ Sanitary Areas</li> <li>➤ Household/Cleaning Requirements</li> <li>➤ Kitchen/Catering</li> <li>➤ Consulting Examination Space / Nurses Office</li> <li>➤ Clinical Hand Hygiene Facilities</li> <li>➤ Activities Day Room.</li> </ul> <p>According to the report, many of the highlighted risks could not be mitigated against within the current footprint of the building. When the current location, layout and services of the Day Hospital was assessed against National and International Standards, the limitations and deficiencies could not be adequately mitigated in the current location. As a result, Donegal IPC recommended an urgent scoping exercise for an alternative location for a Day Hospital within the greater Carndonagh area that will adequately and respectfully meet the needs of both clients and staff, and promote and permit community integration.</p> <p>A working group comprised of staff members from HSE Estates, Older Persons Services and Primary Care have met to develop a schedule of potential accommodation and to prioritise services within the grounds of Carndonagh Community Hospital. The options currently being considered in relation to the restoration of day services are 1. capital works within the existing day services area; 2. capital works on a different site; 3. possible use of the James Connolly Memorial building; 4. Possible lease rental in Carndonagh town.</p> <p><b><i>D Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)</i></b></p>		
<b>W109Q3931</b>	Can we get an updated report on what steps are being taken to address the huge challenges that patients with diabetes type 1 & 2 are facing at the moment in Donegal and what steps we are taking to address these challenges?	<b>Cllr C Brogan</b>
<p>LUH currently facilitate 4 adult outpatient clinics per month (2 Diabetic clinics, 1 Endocrine Clinic, 1 x GIM/Endocrine clinic). In addition to these clinics there are 1 x pump clinic &amp; 1 x transition clinic)</p> <p>There are four Paediatric Diabetes Outpatients Clinics per monthly. Two of these are Consultant led and the other two are nurse led.</p> <p>We have been experiencing significant challenges in relation to Consultant Endocrinologist recruitment which is a problem shared by many model 3 hospitals across all specialties in Ireland. We do however acknowledge the particularly challenging situation in respect of recruitment in Letterkenny. We hope that the pilot scheme launched by the NDTP to encourage recruitment in model 3 hospitals will help with this situation. However, recent recruitment advertisements have provided some re-assurance that the situation will ease soon.</p>		

LUH is approved for 2.0 WTE Consultant posts with 100% commitment at LUH. In addition since October 2022, LUH was also approved for a further Consultant post (1.0 WTE) who has a 50% commitment to LUH and 50% commitment to Donegal Primary Care Service through the National Framework for the Integrated Prevention and Management of Chronic Disease, the National Clinical Programme (NCP) for Diabetes and the Enhanced Community Care Programme (ECC Programme). This is a substantial improvement in approved consultant posts in LUH and we appreciate this support. The current status of consultant endocrinologist staffing and recruitment is as follows:

- One consultant was employed in a permanent capacity up until 6<sup>th</sup> August 2023 when he resigned from his post. Since September 2023, he is contracted on a 12 hours per week basis to deliver Consultant Endocrinologist Services on an outpatient basis. This is a new Public Only Consultant Contract for 12 hours per week for a two year period and during this time, he provides two Consultant delivered outpatient diabetes clinics per week.
- A Consultant Physician with a special interest in Diabetes Mellitus continues to be employed at LUH and to provide a General Medical Consultant Service with a Special Interest in Diabetes. He provides an excellent service both on an inpatient and out-patient basis and currently provides additional clinical services and clinical governance to the ECC Programme.
- LUH has recently advertised all three of the permanent Consultant Endocrinologist positions through the Public Appointment Service. This is the only approved path to permanent consultant appointment in Ireland.
- Interviews took place on the 8<sup>th</sup> January 2024 for one of these posts. One candidate was offered the post but has since decided not to take up the post. This has now been re-advertised.
- LUH also re-advertised the two remaining permanent positions (Hospital & ECC posts) and we are happy to report that there are a number of candidates awaiting interview. Again, this recruitment is being managed by the Public Appointment Service as it is for permanent filling. We have attempted to recruit locums, pending the arrival of the permanent appointments and did secure a fixed term consultant from the Hospital/Community shared post for 12 months, ending in January 2024.
- LUH has employed a full-time experienced Registrar in Endocrinology who assists with the ECC programme and also the in-patient consult service at LUH.
- There is currently one Consultant Paediatrician with a Special Interest in Diabetes and in addition one Paediatric Registrar with a special interest in Diabetes. There is currently 1.0 x WTE ANP Paediatric Diabetes plus 1.0 WTE ANP Gestational Diabetes. Injection clinics and Pump Clinics are held twice per month and an ANP led clinic is facilitated twice weekly. It is envisaged that the Dose Adjustment for Normal Eating (DAFNE) programme will be introduced in LUH later in the year.
- There are currently 2.0 x WTE Acute Clinical Nurse Specialists in posts for the adult Diabetes Services. In addition, there is 1.0 WTE staff nurse and one Clerical Officer.
- There is one Basic Grade Podiatrist and one vacant Senior Grade Podiatrist. The Basic Grade Podiatrist has resigned and will be leaving in mid-April 2024.

LUH has been affected by the recruitment embargo that came into place in November 2023. This was a national directive. However, recent memo from Mr. Bernard Gloster HSE CEO dated the 28<sup>th</sup> February 2024 has outlined a number of exemptions for specific cohorts of staff for recruitment. LUH are currently liaising with Saolta Group management in relation to recruitment processes around same and submissions of posts for derogation. A derogation process had been put in place at national level of which all requests across the Saolta Group can be submitted upwards for critical posts only. All vacant positions will be reviewed in line with management of WTE at site level.

There is currently 2.5 WTE dietitians posts allocated to Diabetes Services in LUH and all these positions are filled.

Letterkenny University Hospital is committed to improving access for our Diabetes patients. In the last year our focus has been on those awaiting a first appointment with a hospital consultant. In the last year we have reduced the total number waiting a first appointment from 243 to 85, and from a waiting time of just over 2 years to under 12 months.

Continuing this reduction in waiting times we have reduced our waiting list for Type 1 Diabetes from 39 in January 2024 to 10 in March 2024 and reduced the waiting time from 24 months to 3 months. All patients referred with Type 1 Diabetes are now offered an appointment within 6-8 weeks. Type 2 diabetes patients waiting lists have been reduced by almost 20% in the first three months of this year, with 44 patients awaiting an appointment date today, the majority of whom have been waiting less than 6 months.

Review appointment delays have been halved in the past twelve months. We acknowledge that we are not currently meeting best practice guidance for review frequency. The total number of patients delayed has been significantly reduced and we are currently focusing on further reductions in the length of these delays. Our new collaborative venture with the Chronic Disease Hub is also ensuring that Type 2 Diabetes patients are being monitored in both a timely manner and a more appropriate setting.

Both the Saolta Executive and Letterkenny University Hospital Management Teams fully recognise the significant impact of Diabetes on the community in Donegal and remain fully committed to the further development and enhancement of services to deliver a fit for purpose and sustainable service. This includes our commitment to developing an integrated primary, community, and acute service model as opposed to the traditional Hospital based service.

Although recruitment, and consultant recruitment in particular, has been particularly challenging we are glad to note that our new service model is proving more effective in attracting candidates. We are fortunate to have the ongoing support of our Consultant Endocrinologists at LUH and look forward to successfully recruiting new consultant colleagues in the coming months. We will also be working in collaboration with patients and the Donegal Branch of Diabetes Ireland to further define the multidisciplinary supports required for our patients.

***A Cosgrove, COO, Saolta University Health Care Group***

**W109Q3932**

Can we get an updated report on what steps if any are being proposed by the management of Letterkenny University Hospital campus to address the challenges of traffic management and car-parking in and around the hospital for now and for future development & planning around the hospital campus?

**Cllr C Brogan**

The management, control and operation of the numerous car parks on the busy Letterkenny University Hospital (LUH) Campus requires an expert and experienced car park management company as there are over 2,500 staff permits to be managed on a daily basis with over 180,000 patients and visitors attending the hospital annually.

There are currently over 1,100 car parks spaces being managed on the campus including 105 spaces in a dedicated patient/visitor short term car park and almost 50 disabled parking bays.

Hospital Management in conjunction with the site car park management company are constantly striving to improve the car park facilities at the hospital and in the last 12 months have reconfigured reserved car park spaces to create an additional car park for patients and visitors close to the hospitals main entrance doors and reopened the dedicated short term car park following the COVID 19 Pandemic.

The named car park spaces have been removed and a dedicated reserved car park for nominated staff created which provided an additional 30+ spaces since 2023.

Staff are being encouraged and incentivised to use alternative transport methods to come to work i.e. carpooling, cycle to work, public transport etc.

A number of areas have been identified that could be developed to add further parking space. These have been shared by LUH with the HSE estates department to review viability.

Over the next few months, there are plans to upgrade the car park surface in a number of areas and to repaint some carriageways and car park spaces, which will include disabled parking bays. The medium term plans include discussion and consideration regarding reinstating the COVID 19 testing Centre which removed almost 100 spaces and our longer term plans include the construction of a multi-story car park on the campus.

**T. Canavan, Regional Executive Officer, HSE West and North West**

<b>W109Q3933</b>	Can I have an up to date report on the current status of the on-going works and future plans for Ramelton Community Nursing Unit including the day care services at the unit.	<b>Clr C Brogan</b>
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Fire Safety Upgrading works were completed in 2023 at Ramelton Community Nursing Unit. It is intended that there would be further capital investment delivered in the near future to further improve the quality of the built environment for residents. The scope of such works is subject to review over the coming months.

**Joe Hoare, Assistant National Director, HSE Capital & Estates**

Fire Safety upgrading works and redecorating works have been completed in Ramelton Community Hospital and the hospital is operating at full capacity of 30 beds.

A building has been provisionally identified for the restoration of day services for older people in the Ramelton area. HSE Estates, the developer and the Primary Care team are in discussion regarding this development.

In the meantime, and until such time as day services can be restored in Ramelton, service users are being facilitated in the voluntary day centres in Fanad and Rathmullan.

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

<b>W109Q3934</b>	Can we get an updated report on the filling of the various vacant positions in LUH and what steps are being taken to address these issues?	<b>Clr C Brogan</b>
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Since January 2022, LUH has had increase of 263.78 WTE across all groups of staff. As at end of February 2024, LUH has a WTE of 2205.71.

Staff Category\Calendar Year/Month	JAN 2022	JAN 2023	JAN 2024	Variance
Management & Administrative	276.22	304.16	329.37	53.15
Medical & Dental	225.75	235.89	255.25	29.50
Nursing & Midwifery	713.62	813.70	851.38	137.76
Health & Social Care Professionals	197.74	198.81	219.12	21.38
General Support	303.89	278.49	274.46	-29.43
Patient & Client Care	224.71	264.62	276.13	51.42
<b>Overall Result</b>	<b>1,941.93</b>	<b>2,095.67</b>	<b>2,205.71</b>	<b>263.78</b>

**VACANCIES LUH -FEBRUARY 2024 - vacant since 1.1.23 - REPLACEMENT POSTS ONLY**

LUH		Number vacant in Feb 2024
<b>Nursing/Midwifery</b>	Replacement Posts as per areas identified under exemption process	15.61
Total Approved Vacancies	Replacement posts that require derogation	10.48
<b>Total Vacancies</b>		<b>26.09</b>
<b>Health &amp; Social Care</b>	Replacement Posts as per areas identified under exemption process	0.63
Total Approved Vacancies	Replacement posts that require derogation	15.9
<b>Total Vacancies</b>		<b>16.53</b>
<b>General Support</b>	Not included as part of posts exempt to recruit	0
	Replacement posts that require derogation	5
<b>Total Vacancies</b>		<b>5</b>
<b>Patient &amp; Client Care</b>	Replacement posts that require derogation	8
<b>Total Vacancies</b>		<b>8</b>
<b>Management/Admin</b>	Not included as part of posts exempt to recruit	0
	Replacement posts that require derogation	12
<b>Total Vacancies</b>		<b>12</b>

Total replacement posts vacant as at 1.1.24 per exemption process	16.24
Total vacant replacement posts since 1.1.24 that require derogation	43.38
<b>Total</b>	<b>59.62</b>

LUH currently has approval of 80 WTE Consultant posts of which 55 WTE are filled on a permanent basis. There are currently 20.5 Vacant Posts are currently filled with locum consultants on a long term locum / temporary appointment basis, of which 16.5 are filled on payroll and 4.3 are filled by agency. There is currently 4.2 Consultant posts vacant and there are 2.5 Consultant posts awaiting approval with CAAC.

Two permanent post holders are due to commence shortly:

- A successful candidate takes up a permanent Consultant post in Emergency Medicine in March 2024.
- A successful candidate takes up a permanent Consultant Anaesthetist post in April 2024.

At present the following posts are awaiting interview at PAS:

1 x Consultant Endocrinologist – interview completed – candidate deemed successful – await clearances



1 x Community Respiratory Physician Post (ECC) – awaiting interviews  
1 x Consultant Respiratory Physician – awaiting interviews  
0.5 x Consultant Endocrinologist – awaiting interviews (1 candidate has now withdrawn from interview process)  
3 x Consultant Obstetrician and Gynaecologist – awaiting interviews  
4 x Consultant Radiologists – awaiting interviews  
1 x Consultant Urologist – awaiting interviews  
1 x Consultant Breast Radiologist – currently advertised (extended)  
2 x Consultant Geriatricians – currently advertised (extended)  
1.5 x Consultant Microbiologist – to be re-advertised  
0.5 Consultant Geriatrician (ECC Post) - to be advertised  
1.5 Consultant Cardiologists (Approved February 24) – to be advertised

***A Cosgrove, COO, Saolta University Health Care Group***