

**Minutes of Regional Health Forum West meeting held on
Tuesday, 27th September, 2022 at 2.00pm in the Education Centre, Merlin Park,
Galway.**

Miontuairiscí chruinniú an Fhóraitm Sláinte Réigiúnaigh a tionóladh Dé Máirt, 27^ú Meán Fómhair 2022 ag 2.00 i.n,
i Seomra 1 an tIonad Oideachais, Feidhmeannacht na Seirbhíse Sláinte, Campas Ospidéal Páirc Mheirlinne,
Gaillimh

Chairperson: Cllr Gerry McMonagle

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

In attendance:

Ann Cosgrove, Acting Executive Lead, Chief Officer, Saolta University Health Care Group

Breda Crehan-Roche, Chief Officer, Community Healthcare West

Colette Cowan, CEO UL Hospitals Group

Maria Ferguson, Head of HR, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)

John Joe Mc Gowan, Chief Ambulance Officer - West

John Fitzmaurice, Head of Disability Services, Community Healthcare West

Mary Warde, Head of Primary Care, Community Healthcare West

Shannon Glynn Head of Older Persons Services, Community Healthcare West

Charlie Meehan, Head of Mental Health, Community Healthcare West

Marian Cavanagh, Regional Health Forum Office

Anna Lyons, Regional Health Forum Office

816/101/22

Minutes of previous meeting – 28th June 2022

The minutes of the previous meeting held on the 28th June 2022 were proposed by Cllr Albert Doherty and seconded by Cllr Tony Ward and adopted.

817/101/22 Matters Arising:

W100Q3384: New ambulance base and additional crews in north Connemara.

Action: JJ McGowan to provide Cllr Ó Cualáin with an updated response to the new ambulance base and additional crews in north Connemara following a meeting with Estates.

818/101/22 Chairman's Business:

Motion W101M132 Cllr D Gilroy:

This Motion was taken prior to the Questions as it required a Quorum of 20 members to comply with the Standing Orders if the Motion relates to an amendment to the Standing Orders. This Quorum was reached.

Proposed by: Cllr D Gilroy

Seconded by: Cllr S Morris

Motion carried unanimously by the members of the RHF West present in the room.

819/101/22 Questions:

W101Q3392 - Respite and Day Services at Sacred Heart Hospital Castlebar:

Action: Breda Crehan-Roche to revert to Cllr Kilcoyne regarding respite services at Sacred Heart Hospital, Castlebar.

Action: Breda Crehan-Roche to provide further clarity to Cllr Kilcoyne regarding the breakdown of the 10 people attending the Day Care Service over the 3 days.

W101Q3393 - MUH Discharge Procedures:

Action: Cllr Michael Kilcoyne to provide Ann Cosgrove with the specifics of a case regarding a discharge of a patient at Mayo University Hospital. Ann Cosgrove to revert to Cllr Kilcoyne on this matter.

W101Q3402 - Dental Medical Card Service Co. Clare:

Action: National Medical Card Unit to provide additional figures to Cllr Murphy regarding the above question.

Action: Maria Bridgeman to revert to Cllr Murphy regarding the gap in figures between the number of Dental Contractors registered under the DTSS and the number that received a payment under the DTSS.

W101Q3403 - The X-Ray and Diagnostic services in Tuam PCC:

Action: Joe Hoare to respond to Cllr Killilea with the cost of the development of the new X-Ray and Diagnostics for Tuam Primary Care Centre.

Action: Joe Hoare to review if a Minor Injuries Unit could be set up once the Diagnostics services are provided to Tuam Primary Care Centre and revert to Cllr Killilea.

W101Q3404 – Agricultural Lands at Toghermore:

Action: Joe Hoare to review the use of part of the agricultural lands at Toghermore and revert to Cllr Killilea regarding rezoning and inclusion for any future development.

W101Q3405 - New CNU and Grove facility development in Tuam:

Action: Breda Crehan-Roche to provide Cllr Killilea with additional information regarding Mental Health Services and Disability Services at the Grove facility.

W101Q3411 - The Development Plan for entrances and exits at Merlin Park University Hospital:

Action: Ann Cosgrove to ask Joe Hoare, Estates, if he is going to write and formally communicate regarding the need for two junctions and lights at Merlin Park University Hospital and flexibility for new entrances and exits in the future. The feedback is required for the Galway City Development Plan **by the 4th October 2022.**

W101Q3413 - Dental Services at Lifford Community Hospital:

Action: Dermot Monaghan to keep Cllr Crawford updated if there is any change to the Dental Services at Lifford Community Hospital.

W101Q3420 - Cashel na Cor Resource Centre:

Action: Dermot Monaghan to keep Cllr Doherty briefed on the staffing and opening days for Cashel na Cor resource centre.

W101Q3424 - Vacant or unused HSE properties in Co Galway:

Action: Joe Hoare to provide Cllr John Connolly with an explanation for the discrepancy in the figures provided in the response given on the spreadsheet (Appendix 1) '*list totals an overall gross internal area of 33,341 square metres*' and that in the Department of Health September 2022 report '*Analysis of Built Healthcare Infrastructure*', which listed '*50'000 m₂*'.

W101Q3440 - Dermatology Services at Sligo University Hospital:

Action: Ann Cosgrove to revert to Cllr Bree with the discrepancy in numbers of people waiting for a Dermatology appointments at Sligo University Hospital.

W101Q3441- Numbers of Staff currently employed at Sligo University Hospital and vacancies:

Action: Ann Cosgrove to review previous figures provided to Cllr Bree at the February Regional Health Forum meeting regarding the staffing numbers at Sligo University Hospital.

W101Q3443 - Community Volunteers for Defibrillators:

Action: JJ McGowan to provide Cllr Gilroy with the number of HSE employees and Voluntary trainers for 2019 and 2020 if available.

W101Q3445 - Movement of residents from accommodation units at HSE Cloonamahon Services:

Action: Dermot Monaghan to provide Cllr Donal Gilroy with the Service Evaluation Report on the transition from campus based residential care to community living for adults with an intellectual disability which was completed by the Disability Services Psychology Sligo/Leitrim in Quarter 2 of 2022.

Cllr Gilroy requested the Report also be forwarded to the North West Regional Health Forum Members.

W101Q3449 - Primary Care Centre Oranmore:

Action: Breda Crehan-Roche agreed to try and facilitate a meeting with Cllr Liam Carroll and Joe Hoare regarding the Primary Care Centre Oranmore.

W101Q3456 - lack of car-parking spaces at around Letterkenny's hospital campus:

Action: Ann Cosgrove to discuss with the Manager at Letterkenny University Hospital if additional parking could be added to the Development Control Plan and revert to Cllr Brogan.

820/101/22 Motions:

Cllr Bree had requested to postpone his Motion W100M131 Sláintecare to the next meeting.

As the Quorum was not reached the remaining Motions were deferred/adjourned until the next Meeting of the Regional Health Forum West, 22nd November 2022:

W101M133 – Cllr Felim Gurn

W101M134 – Cllr Armstrong McGuire

W101M135 – Cllr Albert Doherty

W101M136 – Cllr Paddy Farrell

821/101/22 Any Other Business:

822/101/22 Date & Time of Next Meeting:
Future Meetings:

The next **Regional Health Forum West** meeting will take place on Tuesday 22nd November, 2022 at 1pm.

The next **Regional Health Forum Committee** Meeting will take place on Tuesday 25th October 2022 at 2pm in Roscommon County Council.

This concluded the business of the meeting.

Signed:

Cathaoirleach/Chairman
Adopted at the Regional Health Forum West meeting

QUESTIONS AND RESPONSES RECEIVED
REGIONAL HEALTH FORUM WEST – 22ND NOVEMBER 2022

Number:	QUESTION	RAISED BY	Page No.
W102Q3460	Provision of Public Long Stay Beds for the Town of Roscrea.	ClIr J Carroll	4
W102Q3461	Proposed Plan for the Dean Maxwell Nursing Home in Roscrea?	ClIr J Carroll	4
W102Q3462	Has the HSE Examined the Community Proposal, Drawings and Concepts, which has the Support of all Oireachtas Members.	ClIr J Carroll	4
W102Q3463	Healthcare workers still awaiting their Covid-19 bonus payment from the State	ClIr L Grant	4-5
W102Q3464	Dental Medical Card Scheme in Mayo.	ClIr M Kilcoyne	5-6
W102Q3465	HSE staff in Mayo re the Covid-19 bonus payment from the State	ClIr M Kilcoyne	6-7
W102Q3466	GP's operating the Medical Card Scheme in Co. Mayo	ClIr M Kilcoyne	7
W102Q3467	Consultant Wait list number and wait times in Mayo.	ClIr M Kilcoyne	7-8
W102Q3468	Update on the roll out of the Community Paramedic Program in Co. Clare.	ClIr C Murphy	8
W102Q3469	Community Healthcare Networks (CHN) in the Mid West region; services, staffing, population.	ClIr C Murphy	8-10
W102Q3470	The Homecare waiting list for Clare, Limerick and Tipperary – Older Persons & Disability.	ClIr C Murphy	10-11
W102Q3471	Residential Care Centres in Clare, Beds numbers, currently vacant beds.	ClIr C Murphy	11-12
W102Q3472	Stand-alone Primary Care Centre for Kinlough/Tullaghan.	ClIr F Gurn	12
W102Q3473	Bed capacity of SUH, looking to up the bed capacity in the future?	ClIr F Gurn	12-13
W102Q3474	Ambulance service in Leitrim.	ClIr F Gurn	13
W102Q3475	HSE Procedures to ease the waiting periods in A&E in SUH.	ClIr P Farrell	13
W102Q3476	Update on services at Easkey Day Care Centre and Enniscrone Day Centre.	ClIr D Mulvey	14
W102Q3477	LUH Oncology and Haematology service and future plans for same.	ClIr A Doherty	14-15
W102Q3478	Dental Medical Card Service in Co. Donegal and staffing.	ClIr A Doherty	15
W102Q3479	Nowdoc GP provision for the Inishowen Region.	ClIr A Doherty	15-16
W102Q3480	Delayed Discharges of Care in LUH; 2020, 2021 and 2022, due to Home Care Staffing. Home care Recruitment.	ClIr A Doherty	16
W102Q3481	Would it be possible to have a Dialysis Unit located at Ballina District Hospital.	ClIr J O'Hara	16
W102Q3482	Update on the new build at Ballina District Hospital.	ClIr J O'Hara	16-17
W102Q3483	What are the plans for the old bungalow "The Care Takers House" at Ballina District Hospital?	ClIr J O'Hara	17
W102Q3484	Lack of medical services relocation to new build at the centre of Carrick on Shannon.	ClIr F Armstrong McGuire	17
W102Q3485	Morgues at hospitals, re-opening of Morgues?	ClIr F Armstrong McGuire	17
W102Q3486	Reinstatement of Day Care services in Carrick on Shannon, Mohill and Manorhamilton?	ClIr F Armstrong McGuire	17-18
W102Q3487	Update on work commencement and the time frame for the new 50	ClIr T Ward	18-19

	bedded Residential Care Centre on the site of the Sacred Heart Hospital at Roscommon.		
W102Q3488	Number of Home Care Packages and Home Help Hours provided to older people in Co. Roscommon during the years, 2020, 2021, 2022,	Cllr T Ward	19
W102Q3489	Have the Mental Health Services in Co. Roscommon a full compliment of staff.	Cllr T Ward	19
W102Q3490	Has planning permission been granted for extra car park spaces at Roscommon County Hospital.	Cllr T Ward	20
W102Q3491	Winter Plan 2022-2023. How successful has recruitment been in relation to the LUH, CH CDLMS Initiative.	Cllr G Crawford	20-21
W102Q3492	Chiropody service for Lifford.	Cllr G Crawford	21
W102Q3493	Number of vacant HSE properties in Co. Donegal and locations.	Cllr G Crawford	21-22
W102Q3494	Delayed Discharges and related Bed nights for Saolta Group hospitals to end Oct 2022.	Cllr J Connolly	22-23
W102Q3495	HSE National Support Team for A&E UHG.	Cllr J Connolly	23
W102Q3496	Children's Speech and Language therapy services Co. Galway, staffing and wait list.	Cllr J Connolly	24
W102Q3497	Eating Disorders Treatment Team, number of eating disorder referrals to CAMHS Galway to date in 2022.	Cllr J Connolly	24-25
W102Q3498	CHW Home Support Staff recruitment; applications received, Irish speaking applications, time frame for interviews and filling of positions.	Cllr D Ó Cualáin	25-26
W102Q3499	Update on the proposed Primary Care Centre for An Spidéal.	Cllr D Ó Cualáin	26
W102Q3500	Plans to deal with the Winter Surge GUH and wait times in ED.	Cllr D Ó Cualáin	26-27
W102Q3501	GP/Westdoc referral to ED GUH last 3 months, if seen by G.P. prior to referral to ED.	Cllr D Ó Cualáin	27
W102Q3502	What plans have SAOLTA to implement the directive of 'Model Of Care for Children with Type 1 Diabetes'.	Cllr G McMonagle	27-29
W102Q3503	Second Endocrinologist LUH, retention of 'locum Physician with a special interest in diabetes', and support team.	Cllr G McMonagle	29
W102Q3504	GP retirements in next 5 years, recruitment and increased patient capacity for GPs.	Cllr G McMonagle	29
W102Q3505	How many Community Intervention Teams are deployed in Donegal and where are they based?	Cllr G McMonagle	29
W102Q3506	Response requested by Cllr Bree 30 th September 2022 Cllr Bree correspondence re Home Help.	Cllr D Bree	30
W102Q3507	Staffing SUH.	Cllr D Bree	30-31
W102Q3508	Number of patients in SUH waiting for discharge to step down, respite or long term care in each week in August, September and October 2022.	Cllr D Bree	31
W102Q3509	Response requested by Cllr Bree 17 th October 2022 Cllr Bree correspondence re Children's Disability Network Team.	Cllr D Bree	32
W102Q3510	Update on the Specialist Menopause Clinic in GUH.	Cllr E Francis Parsons	32
W102Q3511	Update on the location for the Enhanced Community Care Network Hub for Ballinasloe (St Brigid's Hospital Campus?) and what is date of anticipated opening of same.	Cllr E Francis Parsons	32
W102Q3512	Provision of Dental Services CHO2 for Medical Card holders with disabilities.	Cllr E Francis Parsons	32-33

W102Q3513	HSE West admissions numbers to NRH Brain Injury and Stroke Specialty Programme since 2019 to date, wait times, age, location, current wait list and time. Any plans for Rehab Unit to be located in HSE West area?	Cllr E Francis Parsons	33
W102Q3514	Future plans/disposal of former Primary Care Centres at Cliffoney and Carrigeens in Co. Sligo.	Cllr D Gilroy	33
W102Q3515	Inpatient and Outpatient Waiting List Validation Scheme in SAOLTA University Hospital Care Group; costs and staffing.	Cllr D Gilroy	34-35
W102Q3516	Diabetes Services in SUH.	Cllr D Gilroy	35
W102Q3517	Up to date figures on ED Patient Experience Time at SUH (specifics listed).	Cllr D Gilroy	36

Number:	QUESTION	RAISED BY
W102Q3460	Is the HSE Committing to the Provision of Public Long Stay Beds for the Town of Roscrea, If so how many Beds.	Cllr J Carroll
<p>Following a meeting at Government buildings, HSE Mid-West Community Healthcare is finalising an initial assessment of options for Older Person Services in the North Tipperary area. As agreed at the meeting the service is reviewing all options for the Dean Maxwell Community Nursing Unit, the progression of the new Older Persons build in Nenagh, as well as the overall requirements for the Older Person Services in the region. HSE Mid-West Community Healthcare is committed to delivering the best Older Person Services to the people or North Tipperary and it is expected that an initial options paper will be presented before the end of quarter four 2022.</p> <p><i>Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare</i></p>		
W102Q3461	What is the Proposed Plan for the Dean Maxwell Nursing Home in Roscrea?	Cllr J Carroll
<p>The proposed plan for the Dean Maxwell Community Nursing Unit is to retain respite and day services on the site. Following a meeting at Government buildings, HSE Mid-West Community Healthcare is finalising an initial assessment of options for Older Persons' Services in the North Tipperary area. As agreed at the meeting the service is reviewing all options for the Dean Maxwell Unit, the progression of the new Older Persons build in Nenagh, as well as the overall requirements for the Older Person Services in the region. HSE Mid-West Community Healthcare is committed to delivering the best Older Person Services to the people or North Tipperary and it is expected that an initial options paper will be presented before the end of quarter four 2022.</p> <p><i>Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare</i></p>		
W102Q3462	Has the HSE Examined the Community Proposal, Drawings and Concepts, which has the Support of all Oireachtas Members.	Cllr J Carroll
<p>Following a meeting at Government buildings, HSE Mid-West Community Healthcare is finalising an initial assessment of options for Older Person Services in the North Tipperary area. As agreed at the meeting the service is reviewing all options for the Dean Maxwell Community Nursing Unit, the progression of the new Older Persons build in Nenagh, as well as the overall requirements for the Older Person Services in the region. The Community Proposal, drawings and concepts have been included in the initial assessment of options. HSE Mid-West Community Healthcare is committed to delivering the best Older Person Services to the people or North Tipperary and it is expected that an initial options paper will be presented before the end of quarter four 2022.</p> <p><i>Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare</i></p>		
W102Q3463	I would ask to forum why many healthcare workers have still not received their Covid-19 bonus payment from the State? The scheme was announced in January this year yet thousands of healthcare workers have not received their payment. When can these healthcare workers expect to get their payment?	Cllr L Grant
<p>The majority of eligible UL Hospitals Group staff have now received their Special Recognition Payment Award. To date, 4,964 UL Hospitals Group employees have received their payment.</p> <p>The appeals process closed on the 30th September 2022 and an independent appeals process nationally is currently underway.</p> <p>A separate process is being finalised nationally for Agency & Section 39 staff who may be eligible for the Special Recognition Payment.</p> <p><i>C. Cowan CEO UL Hospitals Group</i></p>		

To date 3,093 payments have been processed in pandemic payments for Mid-West Community Healthcare. The value of these payments equates to €2,978,200.

We are still in receipt of very small numbers of applications which are signed off by the relevant Service / Functional area. Subject to due diligence checks (e.g. checking payment not previously made), these are being processed promptly.

There is a nationally facilitated appeals process in place and it is our understanding that many thousands of appeals have been submitted nationally across the HSE. A separate working group has been assigned with this task, and the timeline for review of the appeal applications and any resultant payments has not yet been established.

These figures do not include section 38 agencies.

Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare

W102Q3464	How many dentists in Mayo are operating under the medical card scheme and list same. Are there any plans to increase this number? What dental services are available to patients under the medical card scheme?	Clr M Kilcoyne
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There are currently 19 practitioners in Mayo registered with the DTSS, see listing attached.

The Primary Care Services is not aware of any plans to increase this number.

The following services are available under the scheme:-

- Dental Exam – 1 per year
- Scale & Polish – 1 per year
- Dentures – every 5 years
- Extractions – As needed
- Fillings – 2 per calendar year

Dental Practitioners participating in DTSS Scheme Mayo November 2022

Tobin's Dental – 094-9025705

Dr. Leo Tobin

Dr. A. Dosah

Dr. Nicholas O'Neill

Dental Care Ireland – Castlebar – 094-9022317

Dr. Teresa Fitzgerald

Dr. Maebh McNamara

Dr. Rory Fleming

Dental Care Ireland - Westport – 098-28753

Dr. Henry Kaye

Dr. Rachel Goggins

Bourke's Dental – 094-9021497

Dr. Angus Bourke

Dr. Fiona Bourke

Dr. Shane Cadden – 094 - 9025281

Dr. Ingrid Kersbergen – 094-9028728

Erris Dental, Belmullet – 097-81933

Dr. David Hendrick

Dr. Emer Walshe

Dr. Paul Murphy, Claremorris – 094-9371207

Dr. Sean Kelly – 096-30675

Dr. Joe Durkan – 096-21009

Mayo Dental & Implant Clinic – 098-26611

Dr. Emer Monaghan

Dr. Shane Curran

Breda Crehan-Roche, Chief Officer, Community Healthcare West

W102Q3465

In relation to the €1,000 covid / pandemic payment proposed by the government almost a year ago how many HSE staff in Mayo have still not received it? How many agency staff employed in HSE facilities have still not received the covid/pandemic payment? How many staff of contractors eg cleaning, catering etc who work in HSE facilities in Mayo have not received the covid/ pandemic payment? How many staff in nursing homes in Co. Mayo have not received the covid/pandemic payment (if this figure is available to the HSE)?

Clr M Kilcoyne

Mayo University Hospital has confirmed that 1,482 staff were deemed eligible for the pandemic payment and all have now been paid.

Eligible frontline health care workers were assessed based on the particular additional risks they faced in the performance of their duties during the COVID-19 pandemic. This was managed in accordance with HR Circular 012/2022.

The circular stated: “Eligible employees must have been employed between 1st of March 2020 and 30th of June 2021 and have been identified as working in COVID-19 exposed healthcare environments.

“For part-time employees, the payment will be pro-rated on the following basis:

1. Employees whose contracted hours are equal to or greater than 60% WTE for their grade shall receive €1,000;
2. Employees whose contracted hours are less than 60% WTE for their grade shall receive €600.

Employees who worked less than 4 weeks in the specified period are not in scope.”

The guidance on who was eligible was set out in a separate FAQ and this is what MUH referred to when determining the payment of all such eligible staff. Please see attached document.

Any staff who were not deemed eligible have been guided towards the Appeals process. This is a National process, independent of any Hospital Group, set up to manage such appeals.

Non-HSE staff who carried out frontline roles will be assessed for this pandemic payment via a third party company. The contract for this work to pay eligible non-HSE/Section 38 employers, so that they can pass this on to their employees, was awarded last month. The company is now working with the HSE and Department of Health to

identify those covered and will be providing guidance on the process to those employers.

T. Canavan, CEO, Saolta University Health Care Group

To date all Community Healthcare West healthcare Staff in Mayo Facilities who were deemed eligible to qualify for HSE HR Circular 012/2022 were processed for the Pandemic Special Recognition Payment, the total processed for Community Healthcare West to date is 4,760 employees.

As outlined above all agency workers and staff employed by Section 39 Voluntary Agencies are to be included in a National process, the details of which are not available to us yet.

Additionally there is a nationally facilitated appeals process in place, and it is our understanding that a large number of appeals have been submitted nationally across the HSE. A separate National working group has been assigned with this task, and the timeline for review of the appeal applications and any resultant payments has not yet been established, or any timelines indicated to us.

Breda Crehan-Roche, Chief Officer, Community Healthcare West

W102Q3466	Is there a shortage of GP's operating the medical card scheme in Co. Mayo? What is a reasonable length of time for a medical card patient to have to wait for an urgent appointment with a GP? How long should a patient wait for an appointment before presenting at the E.D?	Cllr M Kilcoyne
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There are two GP vacancies in Mayo at present, one in Achill and another in Charlestown. However both are filled in temporary capacities by GPs employed through Locum Agencies. Therefore all GP positions in Mayo are filled either on a permanent or temporary basis so there is no shortage of GPs operating the Medical Card Scheme in the county. However some GPs are reluctant to accept new patients due to their existing workload.

The length of time that a medical card patient has to wait to get an appointment with their GP varies, depending on how urgent the appointment is, and how busy the practice is. Same day appointments are generally given in respect of urgent cases. Provision is also generally made in the appointments system to see emergencies as they arrive at the surgery.

On occasions the GP may refer a patient directly to the Emergency Department of an acute hospital based on the information received over the phone e.g. chest pain. Patients should generally be seen or assessed by their GP before presenting at an E.D. Department. However patients are permitted to attend an E.D. Department without being assessed by a GP if they feel that their symptoms warrant urgent hospital care.

Breda Crehan-Roche, Chief Officer, Community Healthcare West

W102Q3467	How many patients are on the waiting list to be seen by a consultant in Mayo (a) under a year and (b) over a year for their first appointment? How many patients having seen a consultant are waiting to have a procedure carried out (a) under a year and (b) over a year?	Cllr M Kilcoyne
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Mayo University Hospital:

Category	No. of patients
(a) Outpatient < 12 months	5805
(a) Outpatient > 12 months	3525
(b) Inpatient Day Case < 12 months	1289
(b) Inpatient Day Case > 12 months	246

Inpatient and Day Case Waiting List	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
General Medicine	2	5		1	1						9
General Surgery	31	20	12	6	2	2	8	6			87
Gynaecology	106	40	16	14	9	3	1		1		190

Orthopaedics	357	121	93	60	15	4	21	45	39	48	803
Grand Total	496	186	121	81	27	9	30	51	40	48	1089

GI Scope Waiting List	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
General Medicine	254	60	17	7	5	5	15	14	377
General Surgery	36	27	2	2	1		1		69
Grand Total	290	87	19	9	6	5	16	14	446

Outpatients Waiting List	0-3 Months	3-6 Months	6-9 Months	9-12 Months	12-15 Months	15-18 Months	18-21 Months	21-24 Months	24-36 Months	36-48 Months	48+ Months	Grand Total
Dermatology	52	51	30	16	28	32	26	29	73	82	151	570
General Medicine	416	297	267	178	175	104	87	133	299	128	112	2196
General Surgery	590	407	342	259	252	240	110	119	131	7		2457
Geriatric Medicine	35	4										39
Gynaecology	221	108	46	10								385
Nephrology	28	11	8	5	7	11	9	14	25	13	46	177
Orthopaedics	629	532	303	135	95	44	24	20	30	2		1814
Otolaryngology (ENT)	196	163	151	104	91	104	88	82	253	151	34	1417
Paediatrics	106	13	11	8	1	1						140
Urology	30	13	13	17	8	3	6	6	17	5	17	135
Grand Total	2303	1599	1171	732	657	539	350	403	828	388	360	9330

A. Cosgrove, COO, Saolta University Health Care Group

W102Q3468	Can I be updated as to the roll out of the community paramedic program in County Clare.	Cllr C Murphy
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The community paramedic programme for the Mid-West currently operates from Co Limerick. Although based in Co Limerick, the community paramedic responds to low acuity calls in Co Clare when the time response is not critical.

The National Ambulance Service is currently engaged with our regulator the Pre-Hospital Emergency Care Council (PHECC) in regards to inclusion of community paramedics on the licencing register for pre-hospital emergency care in Ireland.

When this is finalised it is envisaged that the expansion of the community paramedic programme will commence nationally.

JJ McGowan, Chief Ambulance Officer - West

W102Q3469	Can I be provided with a breakdown of all the services offered, and the staffing levels relevant to each of those services, for each of the Community Healthcare Networks (CHN) in the Mid West region alongside the populations that each CHN covers?	Cllr C Murphy
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Community Healthcare Networks (CHN's) are key to the expansion of services in the community as they serve as the "fundamental unit of organisation for the delivery of services" based on population need and size. Networks service an average population of 50,000 people. There are eight Community Healthcare Networks across the HSE Mid-West region (CHO3). The table below the details of the CHNs and the populations covered by each CHN:

Network	Areas covered	Population as per
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		Census 2016
1	West Clare – Ennis, Ennistymon, Kilkee & Kilrush	70,652
2	Nth. Tipperary – Borrisokane, Nenagh (2 PCTs), Roscrea, Templemore & Thurles (2 PCTs)	60,696
3	East Clare, Shannon & Sixmilebridge	33,945
4	West Limerick – Abbeyfeale, Dromcollogher, Glin, Newcastle West & Rathkeale	41,458
5	East Limerick/Ballina/Newport – Ballina, Killaloe, Newport, Castletroy, Mulcair & Cappamore	48,066
6	South Limerick (Learning Site) – Ballycummin, Ballylanders, Croom, Hospital, Kilmallock & Mague	59,664
7	South Limerick – Ballinacurra, Galvone & Market (2 PCTs)	33,802
8	Nth. Limerick City – Ballynanty, Kings Island, Thomond & Westbury	36,890

Note – the CHNs highlighted above have gone live. CHNs 1 and 2 are currently awaiting the appointment of a Network Manager.

PCT = Primary Care Teams (providing core Primary Care Services).

A separate document is attached which provides a breakdown of staffing in each of the CHNs (Appendix 1). This breakdown outlines the Primary Care staff who provide the core Primary Care Services (outlined overleaf) and also the administrative support within each of the networks.

All CHNs will have a GP Lead. Currently, CHN 6 (Learning Site) is the only CHN with a GP Lead in place. All of the other CHNs are awaiting the recruitment of a GP Lead (one day per week – 0.2 WTE). Each CHNs also have the support of a 1 x WTE Health Promotion & Improvement Officer.

The aim of the Primary Care Teams is to provide primary care services that are accessible, integrated, of a high quality and which meet the needs of the local population. General Practitioners (GPs) are aligned with Primary Care Teams and a GP can make a referral to the PCT on behalf of a patient. A Primary Care Team is made up of the following core Primary Care Services:

- Public Health Nursing
- Physiotherapy
- Occupational Therapy
- Social Work
- Speech & Language Therapy
- Podiatry
- Dietetics

Other Primary Care Services operate across the CHO area on a regional basis and the staff associated with these services report directly to a Service Manager. Regional services include the following:

- Audiology
- Ophthalmology
- Dental
- Psychology
- Civil Registration
- Community Medical Services (Area Medical Officers)

Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare

W102Q3470	Can I be provided with an up to date breakdown of a) the number of people on the homecare waiting list for Clare, Limerick and Tipperary, b) the level of personal assistant hours being provided for in counties Clare, Tipperary and Limerick, both as an aggregate and on a pro data population basis.	Cllr C Murphy
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Disability Services

The Home Care service for people with Disabilities in the Mid West is delivered through the provision of Personal Assistant (PA) hours and Home Support hours. The service is delivered in the main by agencies/private providers, on behalf of the HSE, with a small number of hours delivered by HSE Healthcare Support Assistants.

800 clients of the Disability service across the Mid West received a total of 420,095 Home Support hours from January to September 2022 comprising:

- 250,531 Personal Assistant (PA) Hours. This service was delivered to 507 clients, year to date. It is anticipated that the number will rise to approx 334,044 PA hours by year end.
- 169,564 Home Support hours. This service was delivered to 293 clients, year to date. It is anticipated that this number will rise to approx 226,080 hours by year end.

The breakdown per county is as follows:

Clare

In Clare, 132,723 hours were delivered from January- September 2022, representing 32% of the total hours delivered across the Mid West. 196 people with a Disability are in receipt of this home-based service. There are currently 17 on the waiting list

North Tipperary

In North Tipp, 135,014 hours were delivered in this time frame, also 32% of the total hours delivered in Mid West Community Healthcare. 368 clients are in receipt of the services. There is a waiting list of 24.

Limerick

152,357 hours were delivered to 236 people from January – September, representing 36% of the total hours delivered. There are 10 on the Limerick waiting list

There is a lack of availability of carers in this sector. HSE Disability Services continue to link with the Agency Providers on a weekly basis to encourage and support the recruitment of new carers across the Mid West.

Area	Number of Adults on Home Support/PA Waiting List	Number of Adults in Receipt of Home Support/PA Hours	Number of Home Support/PA Hours delivered in September 2022	Number of Home Support/PA Hours delivered from January-September incl September 2022	Population of 18-65 from Census 2016	% of population	% Hours Pro Rata	% Clients Pro Rata
Clare	17	196	14,785	132,723	59,333	27%	32%	25%
North Tipperary	24	368	17,180	135,014	62,134	28%	32%	46%
Limerick	10	236	18,460	152,357	101,004	45%	36%	30%
Total	51	800	50,425	420,094	222,471	100%	100%	100%

Older Person Services Home Support Services

In CHO3, the HSE delivered 1.4m hours of Home Support services up to the end of September in 2022. The following provides a summary of activity for the month of September:

Home Support Allocations & Population Profile

	September Hours				%	
	Provided	Clients	Population	% Hours	Clients	% Population
Clare	52,950	1,534	104,597	33	31	27
Limerick	64,010	1,840	219,948	40	38	57
North Tipperary	42,438	1,528	60,696	27	31	16
	159,398	4,902	385,241	100	100	100

In County Clare, we have delivered 475,521 hours up to the end of September which equates to 33% of the total hours delivered across the Mid West (Clare, Limerick and North Tipperary). CHO3 is on target to continue to deliver this level of service.

In County Clare, there are 157 new clients waiting for home support hours to commence and there are 129 clients in receipt of home support hours, waiting for additional hours. There is a significant lack of carers at this time for both the HSE and private providers, which is having a knock-on effect on the provision of Home Support services to people who have been approved for same. The HSE recruitment drive is ongoing for the direct employment of Healthcare Support Assistants.

In 2022, we have recruited an additional 26 home support carers in Clare, four new team members are being processed to commence employment and interviews will take place shortly to recruit additional carers.

Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare

W102Q3471	Can I be provided with a list of all the residential care centers in Clare, a breakdown of the number of beds available in each and a breakdown of all	Cllr C Murphy
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beds currently vacant in each.		
Older Persons Residential Units in Clare		
Unit	No. of beds in unit	No. of beds vacant 08/11/2022
St. Joseph's Hospital	84	2
Raheen CNU	23	0
Regina House	30	0
Ennistymon CNU	27	0
Total	164	2

Maria Bridgeman, Chief Officer, HSE Mid West Community Healthcare

W102Q3472	In North Leitrim with census population having risen in the county Kinlough/Tullaghan were the town and village has gone from 300 people to 1300 to 1400 no primary care service has been provided to the people. They have been caught in limbo because of location to Sligo/ Leitrim /Donegal via Grange/Manorhamilton/Bundoran. But there is urgent need for a suitable location in the village of Kinlough or Tullaghan to meet the needs of ageing population as stand-alone primary care service.	Clr F Gurn
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The Kinlough Health Centre is open four days per week. Services such as Public Health Nursing (PHN), Speech and Language Therapy (SLT) and Psychiatry are delivered from there, to those living in the Kinlough/Tullaghan area.

In addition, Mental Health Services, based in Manorhamilton Primary Care Centre, offer outreach clinics on an ad-hoc basis, from the Kinlough Health Centre. Túsla also avail of the Kinlough Health Centre, several times each month.

In January 2023, the SLT Service will significantly increase the number of paediatric clinics offered in Kinlough Health Centre.

The population of Kinlough/ Tullaghan are also able to access a wide variety of primary care services available to the Ballyshannon/ Bundoran/ Kinlough Primary Care team catchment area which are delivered in Ballyshannon Primary Care Centre – these include Physiotherapy/ Occupational Therapy and Podiatry. The Chronic Disease programmes also delivers a number of outreach clinics there for the local population including Cardiac Investigations and Diabetes Nurse Specialists.

In early 2023, the Kinlough/Ballyshannon/Bundoran Primary Care Team clinical meetings will also be re-established, as part of the implementation of HSE Enhanced Community Care programme.

As with all Primary Care Centres, the HSE will regularly review the Kinlough Health Centre and adapt its usage based on clinical need and staff skill mix.

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

W102Q3473	What is the bed capacity of Sligo University Hospital and will they be looking to up the bed capacity in the future.	Clr F Gurn
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Sligo University Hospital currently has 288 Inpatient beds and is set to increase beds by a further 42 with the development of new Capital Block Development. The project has commenced and is currently pre-qualifying contractors for this new build. It is expected that building will commence in 2023 with project due to complete in 2025, funding dependent.

Following the expansion of SUH Critical Care Unit in 2022, additional beds have been created and it is planned that the unit will increase from 6 to 8 critical care beds in 2023 once additional resources have been approved through

2023 Estimates process.

A. Cosgrove, COO, Saolta University Health Care Group

W102Q3474	Ambulance service in Leitrim update on geographic times and times people are waiting to get dispatched to A&E in SUH.	ClIr F Gurn
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Details below for SUH ambulance turnaround times. As and from the 31st October we have introduced a Hospital Ambulance Liaison Person (HALP) to Sligo University Hospital. The aim of this role is to work between SUH and the ambulance service in order to have ambulances turned around in a more efficient manner. Although early in the initiative, to date we have seen a positive impact for this role and will continue to monitor its progress over the coming weeks.

Saolta University Healthcare Group		September	2022
SLIGO GENERAL HOSPITAL			
Total AS1 & AS2 Ambulance Calls to Hospitals, Time calculated from arrival at Hospital until Clear	%	Total No of Calls	Average Time at Hospital
Cleared at Hospital in 20 Minutes or Less	1.6%	14	[1]:27:42
Cleared at Hospital in 30 Minutes or Less	5.4%	49	
Cleared at Hospital in 60 Minutes or Less	36.3%	328	
Cleared at Hospital 1 to 2 hours	44.1%	398	
Cleared at Hospital 2 to 3 hours	12.6%	114	
Cleared at Hospital 3 to 4 hours	4.1%	37	
Cleared at Hospital 4 to 5 hours	1.6%	14	
Cleared at Hospital 5 to 6 hours	0.6%	5	
Cleared at Hospital 6 to 7 hours	0.7%	6	
At Hospital 7 - 14hours	0.1%	1	
HOSP	100%	903	Total Time at Hospital 1319:59

JJ McGowan, Chief Ambulance Officer - West

W102Q3475	I call on the Health Service Executive to explain what procedures they have in place to help ease the waiting periods in A&E in Sligo General Hospital as it is getting worse by the day	ClIr P Farrell
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Below are a list of procedures in place to help ease the waiting periods in the Emergency Department in Sligo University Hospital:

- Due to open the New Isolation Area in ED with 3 additional treatment bays
- Reopened Discharge Lounge to assist with patient flow for November / December, and free up space in the ED. However new location for Discharge Lounge is required for January 2023.
- Appointment of Ambulance Liaison officer to improve flow of ambulances in and out – started in November 2022
- Frailty intervention team to reduce Length of stay and avoid admission in place
- Dedicated Ambulatory care area opened in 2022
- Regular communication with GPs and with the local media when Hospital is under extreme pressure for demand
- Resumption of GP access to Acute Assessment Unit in November 2022
- Increased psychiatry liaison service to support appropriate patients
- Streaming appropriate patients from ED to AAU to reduce congestion
- Improving post triage processes to improve patient experience times
- Clinical Pathways in place to support reduced admission and waiting times
- Ongoing campaigns for recruitment of Emergency Medicine doctors and nurses
- Appointment of additional Consultants in Emergency Medicine.

T. Canavan, CEO, Saolta University Health Care Group

W102Q3476	To ask the HSE for an update on when full services (4 day a week) will return to Easkey Day care centre and Enniscrone Day Centre, west Sligo.	Cllr D Mulvey
<p>Prior to the pandemic, Easkey Social Day Centre operated from Monday to Thursday each week, while Enniscrone Social Day Centre operated on Monday, Tuesday and Thursday each week.</p> <p>Currently, due to staff vacancies, the Easkey Social Day Centre operates on Wednesday and Thursday each week, while the Enniscrone Social Day Centre operates on Monday and Tuesday.</p> <p>A HSE recruitment campaign is underway and once the posts are in place, this will allow for the Services at Easkey Social Day Centre to re-open four days per week and those at Enniscrone Social Day Centre to re-open three days per week.</p> <p><i>Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)</i></p>		
W102Q3477	Will the HSE, a) Confirm the extension to the oncology unit at LUH is included in the 2023 Capital plan for prioritisation and consideration? b) Clarify the additional number of additional beds support sought for the haematology and oncology ward at LUH? c) Outline fully the specifics of the plans to improve the capacity and services of the haematology and oncology day-unit at LUH?	Cllr A Doherty
<p>LUH fully acknowledge the physical capacity constraints within which the Haematology and Medical Oncology Services operate. There is a significant capacity deficit in the Haematology Oncology Day Unit resulting from a combination of a reduction in treatment chair capacity from 13 to 11 in order to maintain social distancing in the context of Covid-19 and also the increase in patients requiring IV Chemotherapy on a Day Case basis. A number of measures to offset the reduction of the two treatment chairs have been implemented within LUH including enhanced use of oral chemotherapy where appropriate and relocation of patients requiring non-chemotherapy interventions.</p> <p>LUH acknowledges that the Unit does require expansion and whilst progressing a longer term strategy the hospital has also been working with HSE Estates to develop an interim enhancement of the unit.</p> <p>The first phase of this interim enhancement is a capital project to provide a new Pharmacy AsepticP Unit at LUH. This relocation of the Aseptic unit, which is currently co-located with the Haematology Oncology Day Unit will provide an increase in space within the Day Unit. The project is being led by HSE Estates, who are currently finalising the brief in order to tender for a Design Team which is to be issued in the coming weeks. It is anticipated it will be commissioned by 2025 subject to funding and the requisite approvals (Capital and Planning Approvals). The relocation of the Aseptic unit which is currently co-located with the Haematology Oncology Day Unit will provide an increase in space within the Day Unit The hospital is also working with Estates to extend the existing Day Unit and a Capital Project Submission to achieve this is being developed.</p> <p>More immediately, the hospital in conjunction with HSE Estates will be replacing our oldest Pharmacy Isolator next week. This represents €100K capital investment in the Pharmacy Oncology Service this year. (A Pharmacy Isolator was replaced in 2020 through funding provided by the NCCP.)</p> <p>These developments are designed to provide interim enhancement to the Haematology Oncology Day Unit, as demand for this service is projected to significantly increase. The Saolta Group recognise the need for new cancer facilities across the West and Northwest and this has been included in the National Development Plan 2021 – 2030 in line with regional balanced development. LUH management with the Saolta Cancer Managed Clinical & Academic Network (MCAN) have plans to progress this cancer infrastructure through the Public Spending Code in the shortest timeframe possible so that Donegal patients have access to modern fit for purpose infrastructure in the future. The plan is to develop an Ambulatory Cancer Facility at LUH incorporating Haematology & Medical Oncology OPD suite,</p>		

PASU and Rapid Access Breast Suite, including sufficient imaging to future proof the cancer programme at LUH.

A. Cosgrove, COO, Saolta University Health Care Group

W102Q3478	How many dentists are contracted with HSE to provide treatment for public patients in Co. Donegal and where are they located? How many dentists in Donegal have exited from HSE contracts since 2018? What recruitment plan has the HSE to replace dentists who have confirmed retirement dates and what efforts are currently in place to attract/entice replacement dentists to Donegal?	Cllr A Doherty
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There are **37** Dentists and **2** Dental Technicians currently contracted to operate the DTSS scheme in Donegal. One new Dental Surgeon is in the process of being awarded a contract.

The contracted DTSS Dentists practice at the following locations:

- Buncrana,
- Carndonagh
- Moville
- Letterkenny
- Ballybofey
- Stranorlar
- Donegal Town
- Ballyshannon
- Ardara
- Dungloe
- Gweedore

Two Dentists have resigned from the DTSS scheme since 2018 and one Dental Surgeon has retired from the DTSS since 2018 and has been replaced.

At present we are not aware of any recruitment plan that the HSE has, to replace dentists who retire or resign from the DTSS. In the public dental service the replacement of dentists retiring from the service is dealt with through the normal HSE recruitment services.

It is acknowledged that nationally there has been a reduction in the numbers of participating dental contractors and this is despite an increase in fees introduced on May 1st 2022. The Minister has promised a review of the scheme and nationally this sits under the remit of the Department of Health.

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

W102Q3479	The provision of one GP alone available and engaged with NowDoc on the bank holiday weekend to serve the entire Inishowen Region was insufficient and was a community health and care deficit. Will the HSE ensure that the provision of an adequate and sufficient GP complement is assured and in situ for delivery of NowDoc services in Inishowen with immediate effect?	Cllr A Doherty
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There are six GP's on duty to cover the NoWDOC service in Donegal, one of whom is based in Cardonagh to see patients in the CareDoc Centre and deal with any home visits in that area.

Due to the increase in the number of calls being received the week prior to the Bank Holiday weekend, the HSE agreed to fund an additional GP to cover the Bank Holiday weekend in Carndonagh.

The HSE continues to monitor the volume of calls being received into the centre on an ongoing basis and during

periods of peak activity additional resources, are put in place where required in the service.

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

W102Q3480	How many Delayed Discharges of Care in LUH" have occurred in 2020, 2021 and 2022 due to the shortfall in carers being available to provide home support? Will the HSE commence a recruitment of Home Care staff campaign and offer improved conditions of service and salary that will enable and result in employment conditions for Home Carers being a viable career option?	Cllr A Doherty
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Please see table below :

LUH	July to Dec 2020	2021	01/01/22 to 15/11/22
Number of Delayed discharges due to shortfall in carers (Type A Home)	38	57	81

A. Cosgrove, COO, Saolta University Health Care Group

There is a robust recruitment campaign for Health Care Support Assistants, HCSA (formerly called home helps) in the Donegal area. This process managed through the Human Resources Donegal Community Services has been in place for the past 3 years which to date has been very effective. The recruitment is based on a rolling campaign process and interviews are held every 6-8 weeks depending on the number of applicants and the service need in the individual areas.

Set out below is the number of Starters from 2020 - 2022

Jan to Dec 2020 = 39 starters

Jan to Dec 2021 = 92 starters (under the winter initiative and additional approvals)

Jan to date 2022 = 98 starters

In addition in line with the Nationally agreed Health Care Support Assistants Revised Contract, all HCSA's in Donegal have now received a HSE contract, which includes a job evaluation / rebanding process, which in turn offers an improvement in their remuneration, terms and conditions.

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

W102Q3481	Would it be possible to have a dialysis unit located at Ballina District Hospital.	Cllr J O'Hara
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The provision of an additional dialysis unit in Ballina is not in the immediate plans of the Saolta Group.

The Saolta Group views expanding capacity at hospital dialysis units while also prioritising home therapies as the preferred option to expand services.

Any new standalone unit would require a full options appraisal and would need to be considered in the context of necessary clinical governance.

There are significant pressures on dialysis units across our region and while work is ongoing to address the capacity issues in LUH and SUH, further consideration is required for the Galway, Mayo and Roscommon area.

A. Cosgrove, COO, Saolta University Health Care Group

W102Q3482	What is the position on the new build at Ballina District Hospital	Cllr J O'Hara
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It is proposed to replace both the current St Augustine's Community Nursing Unit and the current St Joseph's

District Hospital accommodation in Ballina with a new 75 bed unit for both residential care and short stay / respite services. It is felt that the current District Hospital site is potentially capable of accommodating the required new build accommodation although to deliver this option would require some demolition of existing facilities in advance in order to clear an adequate site area to be able to do this. Further work is required on how best to achieve the service objectives and to firm up on the exact scope of an agreed capital investment solution. The project is included for progression in the HSE Capital Plan and is at appraisal stage.

Joe Hoare, Assistant National Director Capital & Estates

W102Q3483	What are the plans for the old bungalow "The Care Takers House" which is still an eye sore at the entrance to Ballina District Hospital?	Cllr J O'Hara
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There are no current plans for capital investment in the old bungalow "The Care Takers House" at the entrance to Ballina District Hospital. It is most likely that any capital investment proposal for the redevelopment of the site would involve the demolition of this building.

Joe Hoare, Assistant National Director Capital & Estates

W102Q3484	Why has HSE not relocated medical services and NOWDOC at Invergeal, Cortober, Carrick on Shannon to new purpose designed and built suite at Centre of Carrick on Shannon?	Cllr F Armstrong McGuire
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The NoWDOC space within the new facility in Carrick-on-Shannon was being used as a Covid Vaccination Clinic up until mid-July and this delayed having specific and necessary works undertaken to allow for NoWDOC's occupancy. The relocation of NoWDOC to the new facility is dependent on these works being completed and agreement being reached between all parties concerned; however, we are hoping that the NoWDOC service will be in situ at the new facility by the end of January 2023. Dr. Pauric Fallon's GP Practice will also move into the Carrick on Shannon PCC when NoWDOC move from their current location.

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

W102Q3485	The services of the Morgues at hospitals in our towns were very much used and appreciated by the public. When will the Morgues be once again open to the public? Carrick on Shannon and Manorhamilton are two large towns that do not have an alternative space for use by bereaved families.	Cllr F Armstrong McGuire
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Hospital Mortuary Services are clinical settings where post mortems and remains of deceased patients are held pending removal by appointed Undertakers. There is no plan to expand these clinical services to other towns. Facilities for families are handled via Funeral Undertaker services in local communities.

T. Canavan, CEO, Saolta University Health Care Group

W102Q3486	Day Care services have been removed in Co. Leitrim from the familiar spaces in local towns such as Mohill, Carrick on Shannon and Manorhamilton to other centres some distance away. The change was as a result of Covid19 space upgrades. The services are being missed by many as the new locations are not being attended by all. Towns such as Manorhamilton and Carrick on Shannon should have services for all. When can we expect to see services resumed particularly in Carrick on Shannon, Mohill and Manorhamilton where the need is being felt most. Meals provided and nursing services were very much appreciated by those who attended and their families.	Cllr F Armstrong McGuire
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St. Patrick's Community Hospital, Carrick on Shannon

Day Hospital Services at St. Patrick's Community Hospital closed in March 2020, due to national and public health advice, which was secondary to the Covid-19 pandemic.

Prior to its closure, the Day Hospital at St. Patrick's was operational on Mondays, Wednesdays and Fridays. On average, fifteen clients per day attended the Day Hospital.

The Day Hospital remains closed pending commencement of works which will ensure compliance with Infection Prevention and Control standards. The works that are required to be undertaken are new flooring being laid, painting and the toilet facilities being upgraded. In the interim management/estates in St Patrick's Hospital have been looking for a suitable premises by which Day Hospital/Day Services can be delivered.

There are alternative Day Services available in Leitrim which clients can attend, for example, in Drumsna, Ballinaglera, Carrigallen, Ballinamore and Drumkeerin. Older Persons Services continue to provide Home Respite and Meals on Wheels in order to support older people and their families (based on an assessment of need being completed by the Public Health Nursing Service), whilst they await the re-opening of the Day Hospital. Additionally, clients can be referred to Day Services by their GP or Public Health Nurse.

Arus Carolan, Mohill, Co. Leitrim

The Mohill Social Day Centre was situated within a HIQA Designated Centre/HIQA Regulated Nursing Unit which included shared shower and toilet facilities. This situation was deemed non-compliant with HIQA Standards.

In order to ensure the availability of a Social Day Centre in the South Leitrim area, the purpose built Ballinamore Social Day Centre is being operated on behalf of the HSE by Leitrim Development Company.

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

Manorhamilton Hospital Day Services

Currently, the day hospital in Our Lady's Hospital, Manorhamilton provides services for patients as an extension of the acute care setting - SUH. Such services include clinics such as the Falls Team, Cardiology Clinic, Speech and Language Therapy and Pain Management Team.

Prior to COVID, service users attended a day centre type facility in the hospital. However, this day centre type service can be availed of in the Bee Park Centre and the referral pathway has remained unchanged (self-referral, GP, PHN, family). OLHM will continue to develop its day hospital service in line with our acute service so as to best meet the needs of our catchment area.

Meals on wheels can be availed of from Our Lady's Hospital and the request can be made through the PHN. There is also a meals on wheels service operating from The Rainbow Ballroom of Romance in Glenfarne and is available to anyone within a 50k radius.

A. Cosgrove, COO, Saolta University Health Care Group

W102Q3487	Can the HSE Executive provide an update on the time frame for the new 50 bedded Residential Care Centre on the site of the Sacred Heart Hospital at Roscommon. Can the HSE inform the meeting when will work commence on this site.	Cllr T Ward
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The HSE is committed to significant redevelopment works at the Sacred Heart Hospital in Roscommon as part of its overall programme of capital investment in public residential care. The project includes the construction of a new two storey 50 bed Community Nursing Unit, a new single storey kitchen to the east of the existing "link" corridor and a new single storey building linking the residential accommodation to the existing corridor along with refurbishment of parts of the existing single storey structures and other works. The design work for the scheme was advanced and a planning permission application was originally lodged on 29th April 2022. Unfortunately the application was subsequently deemed to be invalid by the Local Authority and returned on the 11th May 2022. The

HSE re-advertised the planning notice in the Roscommon Herald (17th May 2022) and resubmitted the planning permission application on 26th May 2022. On the 20th July 2022 the HSE received a Request For Further Information (FI) from the Local Authority and a period of six months was made available for the HSE and its design team to assess and respond to the request. A response to that FI Request was submitted to the Local Authority in October 2022. It is hoped that a positive decision on the planning permission application might be made by the Local Authority in early December 2022. If so a grant of planning permission could potentially then follow in January 2023. The timeframe for the delivery of the project is dependent in the first instance on when a grant of planning permission might be achieved. The detailed design of the works will subsequently need to be progressed followed by the tendering process and an award of contract before any works would commence on site. It would be hoped that if a grant of planning permission is achieved in January 2023 that construction works would commence on site in late 2023.

Joe Hoare, Assistant National Director Capital & Estates

W102Q3488	Can the HSE Executive inform members of the Forum of the number of Home Care Packages and Home Help Hours provided to older people in Co. Roscommon during the years, 2020, 2021, 2022,	Cllr T Ward
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Home Support Hours delivered in Co Roscommon are as follows:

2020	Hours Delivered	360,166
2021	Hours Delivered	430,133
2022 to end of Sept 22	Hours Delivered	326,174

- The hours above reflect both Home Help and Home Care Package hours.
- The numbers demonstrate that there is a year on year increase in Roscommon and the Home Support Service are projected to deliver more hours in Roscommon than previous years. However, both the HSE and private Service Providers are having difficulty in recruiting Health Care Support Assistant's (HCSA) across CHW.
- The HSE have a recruitment campaign currently underway for HCSA's (formerly known as Home Help) interviews for the posts are scheduled to take place week commencing 14th November 2022.
- In addition, the HSE engage with current staff within the HSE to offer them additional hours
- The Home Support Department also engages with the private home support providers who are continually recruiting to fill their vacancies.

Breda Crehan-Roche, Chief Officer, Community Healthcare West

W102Q3489	Can the HSE Executive inform members of the Forum. If the Mental Health Services in Co. Roscommon have a full compliment of staff to provide a services for the people of Co. Roscommon.	Cllr T Ward
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There is currently a staffing complement of 181.41 Whole Time Equivalents (WTE) in Roscommon Mental Health Services. There are currently 25.71 WTE vacancies. This service makes every effort to fill temporary vacancies through the use of cross cover, locum cover and approved overtime.

We are currently in the process of recruiting to these positions.

Breda Crehan-Roche, Chief Officer, Community Healthcare West

W102Q3490	Can the HSE Executive inform members of the Forum. Has planning permission been granted for extra car park spaces at Roscommon County Hospital.	Cllr T Ward
<p>The HSE Capital Plan includes for the development of a Rehabilitation Unit at Roscommon University Hospital. Following completion of the Stage 1 Preliminary Design for the proposed Rehabilitation Unit a number of options have been proposed in relation to the siting of that Unit within the Campus. Further consideration has also been given to the overall infrastructural requirements at the hospital in light of the increased activity of recent years. Furthermore the Covid-19 pandemic has highlighted the benefits of modern clinical spaces which meet the latest infection control standards. As a result, it is intended to review the overall site masterplan for Roscommon University Hospital to ensure it will allow for orderly development of sufficient new build facilities and refurbishment of any vacated spaces to meet all the envisaged accommodation needs of the hospital into the future. Concerns have also been raised with regard to traffic management and car parking at the hospital. The existing campus surface car parking spaces are fully utilised and the hospital also avails of the public car park at Dr. Hyde Park for overflow parking, using the majority of available spaces on each week day. The updated site masterplan will also therefore need to consider overall car parking requirements. There are no immediate plans to submit a planning permission application for car parking spaces at Roscommon University Hospital until work on an overall site masterplan is completed. It is more likely at that point that any car parking deficit might be addressed as part of a planning permission application for the intended Rehabilitation Unit rather than as a stand-alone application and in the context of an updated overall site Masterplan for the campus.</p>		
<p>Joe Hoare, Assistant National Director Capital & Estates</p>		
W102Q3491	<p>Winter Plan 2022-2023. How successful has recruitment been in relation to the LUH, CH CDLMS Initiative.</p>	Cllr G Crawford
<p>Letterkenny University Hospital (LUH) and Community Healthcare Cavan, Donegal, Leitrim, Monaghan, Sligo (CH CDLMS) are implementing further initiatives this Winter to support hospital admission avoidance and promote patient flow across all acute and community healthcare facilities through an integrated approach.</p>		
<p>The initiatives will maximise the use of available resources to manage unscheduled care pressure and support an overall improvement to the patient journey. The initiatives identified for 2022/2023 below are focused on established best practice in relation to patient flow and the enhanced GP/Hospital Liaison will support the provision of care, in the right place at the right time.</p>		
<p>LUH and CH CDLMS initiatives as part of the Winter Plan 2022/23 include:</p>		
<ul style="list-style-type: none"> • Recruitment of staff to maximise usage of community support services including community nursing service & chronic disease hub supports that will strengthen referral pathways to support admission avoidance and facilitate timely discharge seven days per week. • Enhancing minor injuries service in ED through the recruitment of ANP staff. • Recruitment of GP Liaison Nurse to support provision of the right care in the right place and facilitate admission avoidance. • Recruitment of staff to support and target weekend discharge from LUH. • 4 additional Emergency Medicine Consultants for LUH have been sanctioned for recruitment by the Minister for Health. • CH CDLMS will continue to provide rehabilitation, respite beds and short-stay beds to target admission avoidance and rapid discharge. • LUH and CH CDLMS will provide enhancement of GP Access to Diagnostics and Out-of-Hours (OOH) supports. 		
<p>The following posts have been approved under the Winter Plan for the Emergency Department Patient Flow/Pre Admission at LUH.</p>		

2.5 Clinical Nurse Managers 2
 1 Advanced Nurse Practitioner
 1 Health Care Assistant.

These posts are listed for ECC approval and will then be advertised. Panels are in place for both Advanced Nurse Practitioners and Health Care Assistants and we anticipate these posts will be filled within the coming weeks.

T. Canavan, CEO, Saolta University Health Care Group

Approval of Winter Initiative Funding 2022-2023 was received for:

- 6.0WTE Registered General Nurses to provide weekend nursing
- 2.0WTE Grade IV's and 2.0WTE HCA's to support the Chronic Disease Management Services in Donegal

Primary Notifications for these community posts were received on the 27th October 2022 and recruitment to these positions is progressing through Human Resources.

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

W102Q3492	Since July 2021 there have been no Chiropody service available in Lifford community Hospital. Will HSE seek an alternative location in Lifford to make this service more accessible to this catchment area.	Cllr G Crawford
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At the begin of Covid 19 the podiatry service across Donegal, centralised the service to Scally Place Primary Care Centre (PCC) Letterkenny; this clinic offered an emergency service to patients with active foot disease in order to avoid presentation at Letterkenny University Hospital. As the pandemic continue the resumption of podiatry services across Donegal was considered. Following review of the Infection Protection and Control self-assessment the clinic room in Lifford hospital would not meet the minimum clinic standard, alternative accommodation was considered and deemed not suitable for a clinical setting. At all stages patients in Donegal East had access to podiatry service in Scally Place PCC.

CHO1 Podiatry services is transitioning to the Slaintecare vision via the development of Community Healthcare Networks and Chronic Disease Management hubs. Based on the funding streams and models of care that impact on foot care provision, two distinct care pathways have been developed for clients to access Podiatry services; 1) The Diabetic Foot (Client with Diabetes) and 2) The Podiatric Need Foot (all other clients without Diabetes). Clients with Diabetes will now be managed by podiatrists who are aligned to the Chronic Disease Management hub for their specific needs. All other clients without diabetes will be seen by the primary care network podiatrist, which will mark the return to a local, needs led service.

From the end of November, the East Donegal network podiatry service is moving from Scally Place PCC Letterkenny to the new primary care centre in Newtowncunningham. A podiatry room and decontamination unit is also on the accommodation schedule for a proposed new primary care centre at Navenny House, Ballybofey, which is currently at an advanced stage with the Estates team. There are also plans to include a Podiatry Room as part of the Lifford Hospital/Primary Care Centre development in Lifford. In the future, this will enable clients in the East Donegal area to attend podiatry clinics in either Newtowncunningham, Ballybofey or Lifford.

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

W102Q3493	Is it known how many vacant properties that the HSE have in County Donegal and if so at what Locations.	Cllr G Crawford
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Attached please find the position as per our current records in terms of vacant HSE properties in County Donegal.

HSE Vacant Properties Donegal

Location	Description	Comments
Health Centre, Burtonport	Former Health Centre	Currently on intra state register. Sea Fisheries Protection Authority currently considering this building.
Clonmany Health Centre	Former Health Centre	HSE perfecting title - not fit for use - Plan is to dispose of this asset pending first registration in Land Registry
Carrick Health Centre	Former Health Centre	Currently with HSEs Solicitor to perfect title.
23 Claredon Drive, Donegal Town	3 bed semi detached house	Transaction agreed between DCC and the HSE under intra state - currently with solicitors for finalising
24 Claredon Drive, Donegal Town	3 bed semi detached house	Transaction agreed between DCC and the HSE under intra state - currently with solicitors for finalising
Health Centre Doochary	Former Health Centre	HSE engaging with local Development Group regarding interest in the property.
Ballynally Terrace, Moville	Former Health Centre	HSE transacting with DCC under intra state - currently with DCC solicitors.
Derrybeg Health Centre	Former Nurses' residence	HSE perfecting title - not fit for use - Plan is to dispose of this asset
Kilcar	Former Health Centre	HSE perfecting title to allow for the property to be put on the market.
Pettigo	Old Health Centre situated at Main Street, Pettigo	Perfecting title - not fit for use

Joe Hoare, Assistant National Director Capital & Estates

W102Q3494	Is there a standard procedure across Hospitals in the Saolta group as to when a patient is considered a delayed discharge? What is the total number of cumulative bed nights per hospital in the Saolta Group that are facilitating delayed discharges to the end of October 2022?	Clr J Connolly
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Please find definition of delayed transfer of care from the National DTOC Report:

Definition for 'Delayed discharge' or Delayed Transfer of Care (DTOC) occurs when a patient is ready to leave inpatient care but is still occupying an HSE funded bed.

This can occur in both Acute and Community settings.

A patient is ready to leave inpatient care when all of the following three conditions are met:

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

Below is a table of the cumulative bed days lost up to September 2022 for Saolta as a whole and then the individual sites – we will not receive the data for October until another few weeks.

Hospital	Total Bed Days Lost
Saolta	16356
GUH	4662
LUH	3874
MUH	2945
PUH	1295
RUH	754
SUH	2826

T. Canavan, CEO, Saolta University Health Care Group

W102Q3495

Minister Stephen Donnelly recently proposed the deployment of a HSE National Support Team to UHG to tackle overcrowding and delays at the A&E at the hospital. What is the medical composition of the support team and has the support team commenced their work yet? Can the forum be informed as to the operation and proposals of the support team?

Clr J Connolly

Membership of the HSE Support Team includes:

- National Clinical Advisor Acute Operations (Hospital Consultant)
- General Manager, Unscheduled Care Acute Operations
- Assistant National Director, Community Operations Primary Care
- Assistant National Director, Operational Performance and Integration
- National Director, Operational Performance and Integration
- Assistant National Director, Acute Operations
- General Manager, Performance Management Improvement Unit

As per Terms of Reference, the HSE National Support Team are reviewing the day to day functioning of UHG within a leadership, management, operational and clinical context to consider how improvements in UHG may be enabled in the short term. The duration of the team's engagement will be over six weeks and will be in the form of Primary and Secondary Engagement. The overall approach of the Support Team and their work programme will form a part of the overall review of unscheduled care and will be addressed in the context of the Winter Plan 2022/23 and the 3 year unscheduled care programme.

- The initial site engagement meeting took place on the 12th of October, 2022.
- The Operation and Patient Flow Observations took place over the last week of October and into the first week of November.
- On the 2nd of November, 2022 the HSE Support Team attended a meeting with representatives from Saolta, CHO2 and GUH. The Team visited the Acute floor, Acute wards and also attended a meeting with the Unscheduled Care Governance Group. This visit concluded with a close out meeting on site with both clinical and operational engagement.
- The HSE Support Team attended on site in UHG Thursday 10th November for further engagement with representatives from Patient Flow/Discharge/Bed Management and Unscheduled Care on site from both UHG and CHW.
- A summary report will be developed by the HSE Support Team Leads and signed off by the Chief Operations Officer with an action plan agreed at national, regional and local level.

A. Cosgrove, COO, Saolta University Health Care Group

W102Q3496	Have Children’s Speech and Language therapy services returned to pre-covid levels? How many public speech and languages therapists are employed in the service within county Galway? Is there currently a waiting list for assessment and how many children are on the waiting list?	Cllr J Connolly
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Since January 2022, the number of children waiting initial assessment for speech and language therapy services has remained stable. In addition, the length of time that children are waiting has shortened and there are no children waiting longer than 8-12 months.

There is a total of 28.6 WTEs Speech and Language Therapists employed in the Galway Primary Care service, of which 24 are working in the paediatric service.

There are 1,045 children on the waiting for assessment for Paediatric Speech and Language Services (Primary Care & Disability).

Breda Crehan-Roche, Chief Officer, Community Healthcare West

W102Q3497	In September 2021, the Forum were advised that a new community team was to be established in Galway to deal with the increasing the number of young people experiencing eating disorders presenting for treatment. Has the team been established? Are the team undertaking preventative work in the community with at-risk cohorts? Can the forum be informed of the number of eating disorder referrals to CAMHS Galway to date in 2022?	Cllr J Connolly
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We are actively recruiting to the CAMHS Eating Disorder Community Mental Health Team but to date have not yet been successful in recruiting a Clinical Lead, i.e. Consultant Psychiatrist. This is currently with the Public Appointments Commitment for recruitment. However, while awaiting the appointment of the clinical lead, recruited staff have been assigned to existing CAMHS CMHTs, in particular to support Eating Disorder presentations.

CAMHS Eating Disorder Team composition

Total number of posts approved:		9.2
Total recruited:		6
Total going through recruitment process: (awaiting the appointment of the Clinical Lead, i.e. Consultant before remaining posts are given start dates)		3.2
Post Description		WTE
Admin grade 4	Recruited	1.0
CNM1	Advanced stage of recruitment	1.0
NCHD	Recruited	1.0
Senior clinical Psychologist	Recruited	1.0
Senior social worker	Recruited	1.0
CNS MH	Recruited	1.0
Consultant Psychiatrist/ child psychiatrist	Unfilled	1.0
Consultant Paediatrician/ physician	Unfilled	0.2
Clinical coordinator- senior grade - Reconfigured to make 1 full time senior OT post for the Eating Disorder Team.	Advanced stage of recruitment	0.5

Senior Occupational therapist	Advanced stage of recruitment	0.5
Dietician	Recruited	1.0

The staff members who have been recruited to the Eating Disorder Team and who are currently working within with the Community Mental Health Teams, pending the recruitment of the Clinical Lead, are undertaking preventative work within these teams within their scope of practice and in line with the National HSE Clinical Programme.

In addition to the secondary care mental health service provision across the three counties, there are also a number of other programmes offered to schools in terms of preventative care.

The following workshops are available to school staff: LivingWorks Start, Safe TALK, ASIST and Understanding Self-harm. Both Safe TALK and Understanding Self-harm have been delivered in local education centres and schools. The Suicide Resource Officers also support the staff to support the students. There are a number of publications available to support school communities which have been developed locally such as Numbers if you need them all of which are available on the Westbewell website.

In the aftermath of a suicide, the Resource Officer for Suicide Prevention will work with NEPS to support the school community. Our bereavement programme: Guidance for communities on supporting people bereaved through suicide has been delivered in schools.

Jigsaw deliver the 'one good school' programme and carry out workshops with young people and they are funded by HSE.

Health Promotion and Improvement are involved in the delivering Schools Programmes that include:

- Zippy's Friends which is an International Programme and which aims is to promote the mental health and wellbeing of all young children (aged 5-7 years) by increasing coping skills to deal with problems in day-to-day life. Courses were delivered on-line this year to National School teachers.
- Mind-out which is a National programme for secondary level students and is aimed at promoting social and emotional wellbeing. Courses were delivered to Secondary School teachers on-line. A refresher course was also delivered to some teachers.

Mayo MHA deliver Schools Education Programme "Breathe" which was set up in 2013 to promote, participate and facilitate mental health awareness and well-being for students in an interactive format. This programme currently involves 24 secondary schools and engages up to 10,500 pupils.

In order to provide the figures each team had to manually review each referral and identify ED referrals (not all of which turned out to be ED cases). To get the waiting times, we would have to go back and manually trace those referrals to files for appointment dates – pull files etc. So as you can see, the data can be gotten but it is a significant effort and use of scarce team resources. Where records are not readily available, i.e. where we would have to create a new base record for reporting, practice is that we usually do not do so as not an efficient use of resources (this is the case in Finance also.)

Breda Crehan-Roche, Chief Officer, Community Healthcare West

W102Q3498	How many applications were received by Community Healthcare West for the recently advertised position of Home support staff (Home Help). How many of those applicants applied to undertake the interview in Irish and when will interviews be undertaken for the positions, how soon after the interviews is it envisaged that the positions will be filled?	Cllr D Ó Cualáin
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61 Applications for HCSA in total were received by Community Healthcare West.

- 1 Query received regarding the Interview to be undertaken in Irish.

- Interviews are scheduled for the 14th, 15th and 16th November.
- We anticipate that the vacant positions will be offered out after the panel has been formed i.e., immediately we hope to have people in the posts 6 weeks following interview, however this does depend on pre-clearances i.e. Garda Vetting/Occupational Health etc.

Breda Crehan-Roche, Chief Officer, Community Healthcare West

W102Q3499	Can I get an update on where things currently stand in relation to the proposed Primary Care Centre for An Spidéal Has a site been identified and when is it expected work will commence on the development?	Clr D Ó Cualáin
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The HSE is committed to the development of a new Primary Care Centre for An Spidéal. A process is underway with a view to securing the required accommodation via an operational lease. The overall accommodation requirements of the HSE have been reviewed and updated to make sure they reflect current needs. It is our intention to invite priced offers from the particular parties involved in the process shortly. The evaluation process for proposals received would then need to be completed before the necessary internal HSE approvals are sought to enter into an Agreement for Lease with a successful developer.

Joe Hoare, Assistant National Director Capital & Estates

W102Q3500	Given the continuous high number of patients on trolleys and awaiting admission to GUH in recent weeks, what plans do hospital management have to deal with the envisaged winter surge of admissions to GUH over the coming months and deal with the long waiting times being experienced by patients within the ED and awaiting Triage?	Clr D Ó Cualáin
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As high numbers of attendances to our ED Department continues, work to address the sustained pressure on UHG is ongoing. We continue to focus on a number of issues including trying to reduce numbers of patients on trolleys in ED, reduced wait times for bed allocation for the longest waiting patients in ED and a reduction of > 24 hour ED breaches.

We have implemented a targeted intervention plan over the last few months which is focusing on improving the patient journey throughout the hospital and to improve pathways of care.

- The key priority of this work is to reduce the number of patients on trolleys, while awaiting admission to a bed; focusing on timely diagnostics and decision making and the timely discharge of patients.

In order to achieve these priorities the following initiatives are being rolled out:

- We have successfully been approved to recruit additional patient flow co-ordinators (7WTE) and 1 Data Analyst for the acute floor.
- We have received approval for 2 WTE>14 LoS (Length of Stay) Round approved 1 WTE Medical Social Worker.
- We are seeking to increase private hospital capacity, currently engaging in discussions with the Galway Clinic. We currently have some capacity to egress to the Bon Secours.
- Expansion of current service– Phase 2 of the OPRAH (Older Person Rehabilitation at Home).
- Introduction of the Pathfinder pilot (alternative pathways for older patients who can be treated for non-urgent issues without having to attend ED).
- Continue to work with community colleagues on egress/ integrated discharge round to ensure we are utilising every possible avenue.

In addition to the above priorities:

- Our Flu Vaccination and Covid Booster programme for staff has been rolled out and is ongoing.
- Recruitment of Medical Staff is ongoing.
- We are also currently engaging with the National Support Team who are reviewing the day to day functioning of UHG within a leadership, management, operational and clinical context to consider how improvements in

UHG may be enabled in the short term.

T. Canavan, CEO, Saolta University Health Care Group

W102Q3501	How many G.P/Westdoc referrals have been made to the Emergency Department in GUH over the last 3 months and had a G.P seen all of the patient's referred to the department?	Cllr D Ó Cualáin
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September and October 2022:

Month	Number of GP Referrals
August 2022	2,497
September 2022	2,569
October 2022	2,631

The collected data is based on the type of referral when a patient presents to ED and this referral is noted on registration. GP referrals include out-of-hours GP referrals. However, this data does not capture whether a GP had seen all patients referred to the Emergency Department.

T. Canavan, CEO, Saolta University Health Care Group

948 patients were identified as having been referred to UHG emergency department.

A breakdown of that figure shows the following:

- 360 cases were referred to UHG emergency department by a doctor having been first triaged by a nurse. 131 of these cases were prioritised as 'emergency/urgent'. Of the 360 cases 155 also had treatment centre appointments.
- 260 cases prioritised as 'emergency/urgent' were managed by the triage nurse and referred directly to UHG emergency department.
- 328 cases having a priority of 'routine' were managed by the triage nurse and were advised to attend the emergency department in UHG following consultation with the doctor.

Breda Crehan-Roche, Chief Officer, Community Healthcare West

W102Q3502	What plans have SAOLTA to implement the directive of 'Model Of Care for Children with Type 1 Diabetes', published many years ago and being implemented everywhere outside the SAOLTA area. This directive demands a 'Centre of Excellence' for up to 300 T1 children with 2 full time Paediatric Endocrinologists to head up full teams, but must have consideration, implementation in recognition of special geographical areas' and how soon will it be until SAOLTA put in place the 'Shared Centre of Excellence between LUH & SUH', with a Paediatric Endocrinologist in each hospital as the most practical and safest way to provide appropriate care?	Cllr G McMonagle
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Letterkenny University Hospital currently has approval for two permanent Consultant Endocrinologist posts. One of these posts is filled in a permanent capacity. The second post is currently filled by a Locum Physician with an interest in diabetes. The post is advertised with the Public Appointment Service for permanent filling.

LUH & CHO1 have submitted an application to CACC for a further Consultant Endocrinologist with 0.5 WTE commitment to LUH and 0.5 WTE to Enhanced Community Care – Chronic Disease management programme. This programme aims to resource and scale up community healthcare services including specialist chronic disease

(Diabetes; Cardiology, Respiratory) services in line with the National Framework for the Integrated Prevention and Management of Chronic Disease. This position was approved at the recent CAAC meeting and the paperwork will be submitted to the NRS for advertising.

LUH have two approved CNS adult diabetes posts, one of which has just been filled and HR are awaiting confirmation of acceptance of the post. There is currently one ANP and one CNS in post for the paediatric diabetes service. An ANP in Diabetes in Pregnancy commenced in October 2022.

Currently one Adult Pump clinic is facilitated per month. In addition, there are paediatric Injection clinics and Pump Clinics held twice per month and an ANP clinic facilitated twice weekly.

This service is supported by Dietitians when available and a basic grade Podiatrist. There is a new senior podiatrist post approved and recruitment has commenced.

Following the appointment of a new paediatric endocrinology post in UHG in July 2018 (Dr Niamh McGrath) and the replacement paediatric consultant post in Sligo (Dr Sinead Glacken), the Saolta Children & Young Persons Diabetes network was established under the guidance of Siobhan Horkan (Saolta Director of Paediatric Nursing) with an aim to deliver high quality care to children with type 1 Diabetes closer to home in line with the National Model of care. Prior to this children travelled to Limerick or Dublin for insulin pump therapy.

The Saolta hospital group provides care to almost 600 children with type 1 diabetes in Ireland and care is delivered in line with the National Model of Care. The National model of care recommends the development of Paediatric Diabetes Networks for delivery of care to children with T1DM. We have established the first Children & Young Persons Diabetes network in Ireland.

The key objectives in this model of care are to:

- Commence local delivery of CSII to children in the area, who currently have no access to CSII therapy, prioritising CSII therapy initially to those on medical needs, where appropriate, in accordance with both the National Paediatric and Diabetes Clinical Programmes - All suitable children now have access to CSII therapy locally, with the prioritisation of children under 5 years of age
- Support the return to local service provision for children who have already had CSII commenced in another tertiary centre – all children have been repatriated back to local services
- Improve glycaemic control of the patient cohort through access to intensive diabetes management – all children with HbA1c >75mmol are enrolled in an intensive diabetes management pathway with weekly calls and 6 weekly visits.
- Reduce acute and chronic complications of type 1 diabetes through the availability of the CSII service locally and thus lessen the burden of healthcare in later life.
- Improve the quality of life of children and their families living with diabetes

The Sligo site and Galway sites work in partnership with each other in the provision of services across the Saolta region. All CSII-commencement for Sligo, Letterkenny, Leitrim and North-Mayo is delivered via SUH. Follow-on care to LUH is delivered via outreach clinics. Paediatric diabetes CNS/ANP support has been developed at all peripheral sites.

International multicentre studies across 18 centres demonstrate CSII usage between 15-80% (overall mean 33%) of their patient population. Most Tertiary centres in Ireland have between 40-50% of their clinic cohort on insulin pump therapy.

Current figures for Sligo University Hospital and Letterkenny University Hospital

Centre	Total number of Patients	Percentage of Children on insulin pump therapy
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SUH	82	48 (58.5%)
LUH	139	74 (53.0%)

A. Cosgrove, COO, Saolta University Health Care Group

W102Q3503	When the second Endocrinologist is appointed, can SAOLTA please confirm that this will be with a Full staffed support team and will the current 'locum Physician with a special interest in diabetes' be kept in post until Diabetes waiting lists at LUH are brought down to an acceptable level, of maximum 6 months reviews for every adult with T1 and finally, will the Second Endocrinologist be given direction to focus on introducing 'Pump Starts' to Adults with T1 Diabetes?	Cllr G McMonagle
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Letterkenny University Hospital currently has approval for two permanent Consultant Endocrinologist posts. One of these posts is filled in a permanent capacity. The second post is currently filled by a Locum Physician with an interest in diabetes. The post is advertised with the Public Appointment Service for permanent filling.

LUH & CHO1 have submitted an application to CACC for a further Consultant Endocrinologist with 0.5 WTE commitment to LUH and 0.5 WTE to Enhanced Community Care – Chronic Disease management programme. This programme aims to resource and scale up community healthcare services including specialist chronic disease (Diabetes; Cardiology, Respiratory) services in line with the National Framework for the Integrated Prevention and Management of Chronic Disease. A decision is awaited from the next scheduled CACC meeting on the 11th October.

LUH has just been notified by the Public Appointment Service that the second Endocrinologist post requires re-advertisement as the applicant has now withdrawn their application.

LUH will continue to work with their recruitment colleagues to ensure the post is re-advertised as quickly as possible. It is therefore not possible at this stage to make further plans regarding the service however we will continue to support the Endocrinology service to ensure optimal patient care.

A. Cosgrove, COO, Saolta University Health Care Group

W102Q3504	How Many GPs are expected to Retire in the next Five Years and what steps are being taken to fill the vacancies and to meet the growing Patient capacity that current GPs face?	Cllr G McMonagle
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Three GPs in Donegal will reach retirement age by 2027 and another GP has given notice of their intention to take early retirement. In three of the Practices, steps have already been taken in order to ensure there are adequate GP Services to meet the future needs of the population in those areas. The Primary Care Unit continues to support GP Practices with succession planning, including advertising, interviewing and recruiting new GPs.

The Donegal GP Training Scheme is also providing additional GP training places in Donegal. This is in line with the Government commitment to expand the number of GP training places nationally, in an effort to meet the requirements of the future GP workforce.

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

W102Q3505	How many Community Intervention Teams are deployed in Donegal and where are they based?	Cllr G McMonagle
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There is one Community Intervention Team (CIT) in Donegal with nurses based in Donegal Town, Buncrana, Letterkenny / East and Dungloe.

The team consists of CNM's x 3 WTE, CRGN's x 14 WTE and clerical staff x 2.5 WTE. This is a 7 day service operating from 8am- 8pm. The role of the Community Intervention Team is to expedite discharges from LUH, facilitate admission avoidance and bring care closer to home for patients in Donegal.

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

W102Q3506	To ask when the Chief Officer of Community Healthcare Cavan, Donegal, Leitrim, Monaghan and Sligo, will reply to the correspondence submitted on the 30 th September 2022 by Regional Health Forum member Cllr Declan Bree, seeking details of on-call service at weekends to address problems which might arise if a Home Help – Healthcare Support Assistant is unable to carry out his/her duties; and to ask that the response now be provided to this meeting of the Regional Health Forum; and to further ask what action the HSE intends to take to ensure that correspondence is responded to promptly and in accordance with the Ombudsman’s guide to standards of best practice.	Cllr D Bree
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The Home Support Service is funded by Government to deliver a volume of service each year as approved in the HSE National Service Plan. It is a non- statutory service and access to the current service is based on assessment of the person’s needs by the HSE and having regard to the available resources and the competing demands for the services from those people with assessed needs.

Home support staff who are directly employed by the HSE, have traditionally been, and remain, mainly part-time workers due to the nature and flexibility of the work involved and the care needs of clients that must be attended to within specific time frames during any day. The home support service which people receive is based on an individual client’s care needs which are assessed by clinical staff and the home support provided will vary dependent on the level of dependency and other support structures in place such as attendance at day care.

The HSE continues to actively recruit staff as required and acknowledges the valuable contribution that our home help staff make in the high level of care provided to our clients and the positive impact the home support service has on enabling older people to remain living in their own homes and communities.

The overall home care resource and the range of providers, including HSE directly employed staff, is carefully managed by local health offices within each community healthcare organisation, to ensure that this key service is available at the required times, in a flexible way and at the appropriate standard to support clients’ changing assessed needs.

The HSE is cognisant of increasing capacity issues across service provision and continues to advertise on an ongoing basis for Health Care Support Assistants (HCSAs) and recruits as many suitable candidates, where possible.

A joint work programme between the Department of Health and HSE, for the design and development of the new statutory Home Support Scheme and regulation, is underway with the Department of Health leading out on a detailed process to determine the future model of service delivery in Ireland, to reform how we meet the ongoing and evolving care needs of eligible adults 18 and over. Developing a new statutory scheme will be an important step in ensuring that the system operates in a consistent and fair manner for all those who need home support services.

The response to the correspondence referenced in Regional Health Forum question W102Q3506 was returned to Councillor Bree on Friday 4th November 2022. CH CDLMS apologies for the delay in response and will take all measures within its control to meet the Ombudsmans Standards.

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

W102Q3507	To ask how many staff (WTE) are currently employed at Sligo University Hospital and how many staff were employed at the same time in 2021? Please list by occupation/category and how many are permanent, temporary, agency. How many staff vacancies are there currently in the hospital? Please list by occupation.	Cllr D Bree
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Sligo University	September 2021 WTE	September 2022 WTE	Total
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Hospital									Vacant WTE in Recruit at 7/11/22*
Category of Staff	Perm WTE	Temp WTE	Agency WTE	Total WTE Sept 2021	Perm WTE	Temp WTE	Agency WTE	Total WTE Sept 2022	
Nursing/Midwifery	654.98	38.17	5.61	698.76	695.24	26.15	5.74	727.13	73.47
Medical/Dental	71.9	180.31	10.34	262.55	74.73	182.72	13.56	271.01	
Health & Social Care Professions	163.86	40.22	2.73	206.81	180.25	27.32	0.9	208.47	27.75
Management Admin	212.73	54.05		266.78	195.22	68.94		264.16	33.5
Patient & Client Care	154.22	6.85	43.39	204.46	165.97	23.38	52.55	241.9	18.1
General Support	165.48	49.39		214.87	169.74	67.72		237.46	9.08
TOTAL	1423.17	368.99	62.07	1854.23	1481.15	396.23	72.75	1950.13	161.9

Note: Oct 2022 WTE Report will publish 15/11/22 (Oct & Nov WTE Reports will update WTE of 89 posts recruited & started Oct)

*** SUH Vacant WTE in Recruitment at November 7th 2022**

Staff Category	Vacant WTE at 7/11/22	Breakdown of Vacant 161.9 vacant wte		
		Vacant Replacement Posts (WTE)	Vacant Sick/ Maternity Leave Backfill (WTE)	Vacant New Posts (WTE)
Nursing & Midwifery	73.47	37.47	15.50	20.50
HSCP	27.75	13.60	2.90	11.25
Management/Admin	33.50	18.50	2.00	13.00
Patient & Client	18.10	9.60	3.50	5.00
Support	9.08	6.58	2.00	0.50
Total	161.90	85.75	25.90	50.25

T. Canavan, CEO, Saolta University Health Care Group

W102Q3508	To ask how many patients medically fit for discharge in Sligo University Hospital were waiting for discharge to step down, respite or long term care in each week in August, September and October 2022.	Clr D Bree
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The peak in delayed discharges are mainly due to Covid Delays. Positive patients unable to access beds until isolation complete. There were also Covid outbreaks and Noro Virus outbreaks in residential settings in our catchment area during which time we could not access beds.

SUH	August 2022	September 2022	October 2022
Number of Delayed discharges waiting for discharge to step down, respite or LTC. Total for the month	18	16	21

Please note this data, provided by the Business Intelligence Unit, is a point in time. As such a patient may be included repeatedly week to week. Please see Appendix for week to week breakdown

T. Canavan, CEO, Saolta University Health Care Group

W102Q3509	To ask when the Chief Officer of Community Healthcare Cavan, Donegal, Leitrim, Monaghan and Sligo, will respond to the correspondence submitted on the 17 th October 2022 by Regional Health Forum member Cllr Declan Bree, in respect of a constituents referral to the Children's Disability Network Team; and to further ask what action the HSE intends to take to ensure that correspondence is responded to promptly and in accordance with the Ombudsman's guide to standards of best practice	Cllr D Bree
<p>The response to the correspondence referenced in Regional Health Forum question W102Q3509 was returned to Councillor Bree on Wednesday 9th November 2022. CH CDLMS apologies for the delay in response and will take all measures within its control to meet the Ombudsmans Standards.</p> <p>Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)</p>		
W102Q3510	Please provide update on roll out of Specialist Menopause Clinic in GUH signalled to be opened in Q3- staffing and resources, date of launch and provision of services.	Cllr E Francis Parsons
<p>The Complex Menopause Clinic is starting in GUH on Monday 14 November.</p> <p>A Consultant, CNM 2 and administration support have all been appointed.</p> <p>The Consultant and Administration support will be starting on the 14 November 2022. The CNM2 has been recruited and we are awaiting a release date.</p> <p>Currently, the service is in the process of defining the referral criteria and letters for the GPs.</p> <p>The clinic will run for one afternoon per week and it will see up to 10 women.</p> <p>A. Cosgrove, COO, Saolta University Health Care Group</p>		
W102Q3511	Please provide update on whether lands at St Brigid's Hospital campus Ballinasloe are being considered for the location for Enhanced Community Care Network Hub for Ballinasloe and what is date of anticipated opening of same.	Cllr E Francis Parsons
<p>The current Health Centre in Ballinasloe provides a good standard of accommodation but is no longer adequate to meet current service needs. The requirement for additional space is also increased significantly due to the roll out of the Enhanced Community Care (ECC) programme. Ballinasloe has been identified as one of three Ambulatory Care Hubs within Community Healthcare West. This requires the recruitment of significant additional staff to establish the East Galway and South Roscommon Community Health Network (CHN), along with delivery of the Integrated Care Pathway Older Person programme (ICPOP) and the Integrated Care Chronic Disease Management (ICPCDM) programme. As a result it is intended to develop a new hub for both primary care and enhanced community care services in Ballinasloe in addition to maintaining and reconfiguring the use of the existing Health Centre building. One option under active consideration is to develop the new facility on lands at Creagh Road, adjacent to St Brigid's Community Nursing Unit (CNU). This will be a significant development and is likely to take a number of years to deliver. In the interim, capital funding has been allocated and refurbishment work of the East Wing (former Our Lady's Ward) of the former admissions building (located behind the CNU) is underway to provide office accommodation for the new staff on the campus. Consideration is also been given as to how some interim additional clinical space might also be sourced or provided.</p> <p>Joe Hoare, Assistant National Director Capital & Estates</p>		
W102Q3512	Has there been a reduction in the number of dental practices in CHO2 providing medical card services to persons with disabilities who are valid MC holders in the past two years? Please outline the medical card dental services currently available to adult persons with disabilities including	Cllr E Francis Parsons

	<p>assistance with costs of extraction & denture provision? What safeguards, advocacy and alternative pathways are in place for adult medical card holders with disabilities in having their dental needs met if their local dental clinics withdraw from provision of medical card services?</p>	
<p>Over the past two years there has been a reduction in the number of dental practices across Community Healthcare West (Galway, Mayo, Roscommon) providing dental services under the Dental Treatment Service Scheme (DTSS). This reduction amounts to approximately one third of the pre-existing capacity.</p>		
<p>Medical card holders, including adults with disabilities, seek access to care with dentists who hold a contract for the DTSS: this includes extraction & denture provision. Care can be sought from practices in any county, however, Dental practices generally are not in a position to take on new patients, patients with and without disabilities. In May 2022, although the fee per item for the DTSS was significantly increased the issue is still capacity to manage the waiting list.</p>		
<p>Safeguards: Some adults with significant disabilities have been reviewed routinely by the HSE dental service. This review service has been challenged during Covid and staff changes however replacements are currently being recruited. This will help to restore the review element of the dental service in 2023. DTSS contractors can request approval for extra dental work for patients with significant disabilities and this allows greater access to care based on need.</p>		
<p>Advocacy: The HSE and patient representative organisations are aware of the access issues. Local dental service, where necessary, have occasionally assisted medical card holders to access treatment. HSE liaise with Department of Health and Dental Representatives to promote access to DTSS including those with disabilities.</p>		
<p>Alternative pathways: Disability Patients with complex needs are referred for care through Community Healthcare West Dental Departments and a limited number access care in Saolta University Healthcare Group hospitals. Extremely medically vulnerable patients are seen by Dublin Dental University Hospital.</p>		
<p>Patients with disabilities with Oral Surgery can be referred to University Hospital Galway Oral and Maxillofacial Surgery Department and triaged based on urgency. Community Healthcare West Dental service has a significant backlog of core services but has seen the occasional urgent emergency case.</p>		
<p>Breda Crehan-Roche, Chief Officer, Community Healthcare West</p>		
<p>W102Q3513</p>	<p>Please provide data on how many people from HSE West area were admitted to NRH for Brain Injury and Stroke Specialty Programme since 2019 to date- waiting times, age, location, plus how many are currently awaiting admission to NRH for this programme and awaiting times? What plans if any are there in HSE West for a similar Rehabilitation Unit to be located to serve the population of the west?</p>	<p>Cllr E Francis Parsons</p>
<p>Not available at time of printing.</p>		
<p>W102Q3514</p>	<p>Can the HSE report on what are the future plans for the Former Primary Care Centres at Cliffoney and Carrigeens in County Sligo and if the HSE plans to dispose of these buildings and what procedures will be used</p>	<p>Cllr D Gilroy</p>
<p>HSE Estates are carrying out accommodation review to identify the long term need for both Carrigans and Cliffoney at present. If the HSE does plan to dispose of the properties we will be obliged to follow the HSE procedures for disposal of HSE property. If buildings are surplus to requirement we will apply for approval to dispose of property to National HSE Capital & Estates Property Review group, if approved properties will be listed on Inter State Property Register. If no interest is expressed by Local Authority or State bodies property will be listed for sale on open market.</p>		
<p>Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)</p>		

W102Q3515	Can the HSE and SAOLTA University Hospital Care Group confirm what amount is spent on the administration of the Inpatient and Outpatient Waiting List Validation Scheme and to confirm how many WTE hours are allocated to this service. If the service is out sourced what is the annual cost and what HSE Costs are involved.	Clr D Gilroy
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Galway University Hospitals:

- The Validation process is primarily performed by the National Treatment Purchase Fund.
- The NTPF generate and send a letter (at least once a year) to each patient on the waiting list who has waited over 3 months (both outpatients and patients listed for a procedure) to confirm if the patient still requires to be reviewed or to proceed with treatment. The NTPF then collate the responses and add this information to the portal.
- GUH staff then are required to action the removals. This involves removing the patient from the waiting list and sending the patient and their GP a letter confirming the removal.
- In GUH, currently approximately 15 hours per Week (Clerical Grade III or IV) is allocated to action removals from this list, generate letters etc. This can vary week by week.

Portiuncula University Hospital:

PUH use the NTPF Validation portal – Mail Metrics – which is funded directly by the HSE for both Outpatient & IPDC Waiting lists validation. This process involves the NTPF generating a validation letter to all patient on the waiting list who has waited over 3 months.

PUH Admin have responsibility of managing patient queries regards the NTPF generate letter & are responsible for logging on daily to the Portal to action replies and generating appropriate correspondence informing the patients GP. There are no dedicate validation staff in PUH & the management of the portal is spread across 2 offices – utilising approximately 15 hours per Week of a WTE.

2022 to Nov 3rd PUH have managed the 5466 validations

Mayo University Hospital:

Outpatient, inpatient and day case validation is initiated through the NTPF for all HSE Hospitals and this is nationally funded. The out coming or actions of the validation cycles are carried out by validation staff on site.

Mayo University Hospital have 1 WTE (Grade IV) working on OPD/IPDC waiting list validation.

Roscommon University Hospital:

Inpatient and Outpatient validation is carried out by the NTPF, with outcomes from validation followed up locally in the hospital e.g. removal of patients from the waiting lists and issuing of confirmation letters to patients and GPs. The validation process also results in a significant volume of calls directly to the Hospital from patients. It is estimated that on average 15 hours per week is allocated to the validation process.

Sligo University Hospital:

2 Clinical Admin posts were approved in 2022 to deal with validation of waiting lists. One of these posts has been vacant for a number of months, with recruiting underway to fill this second post. Of these 2 posts (when filled), one is dedicated to waiting list validations.

Additionally, the HSE support validation of waiting lists where they issue all letters to patients and hospital manages all responses and administration of waiting lists.

Letterkenny University Hospital:

The validation of Inpatient and Outpatient waiting lists is managed and coordinated by the National Centralised Validation Unit which was established in the National Treatment Purchase Fund in 2018. The unit works in conjunction with hospitals to validate waiting lists using a streamlined and standardised process. The hospital does not have access to the costs or WTE hours allocated by the National Centralised Validation Unit to the validation of waiting lists.

LUH has 2 x WTE clerical staff in post to record, update and action the outcomes of the validation cycles on the hospital administration system.

This is a profile of the validation undertaken year to date across Saolta Group:

Group activity in 2022 as of 28th October 2022			
		No. Letters Sent	Total Patients removed (incl. non responders)
SAOLTA	IPDC	21,967	3,056
	OPD	126,008	19,891
	Total per group	147,975	22,947

A. Cosgrove, COO, Saolta University Health Care Group

W102Q3516	<p>Can the HSE confirm if it is policy that all diabetes patients both Type 1 and Type 2 are under Consultant led Care for the following</p> <ul style="list-style-type: none">a. Advanced Eye Diseaseb. Advanced Kidney Diseasec. History of Foot Ulcersd. Very Poor Diabetes Control <p>And to further confirm if the Diabetes Services in SUH continues to manage and care for Type 2 Patients with Complex and Complicated needs or are these now cared for in the community.</p>	Clr D Gilroy
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The HSE policy is for Consultant led Care to be provided to patients with complicated diabetes including people with Advanced Diabetic retinopathy and Advanced Diabetic Kidney Disease. In relation to people with a history of diabetic foot ulcers and people with sub-optimal blood sugar control, the care of some of these patients is shifting away from the acute setting under the umbrella of the Enhanced Community Care Programme. This will see patients with a history of foot ulcers and those with sub-optimal blood sugar control treated in the community.

Delivery of comprehensive specialist community diabetes teams is a core component of the Enhanced Community Care Programme (Sláintecare) which helps make community healthcare services more effective in managing chronic conditions including diabetes.

Community and acute specialist diabetes teams will work together to support their colleagues in General Practice to develop and implement ambulatory care pathways and to manage complex diabetes care, and associated co-morbidities, within the community setting (where appropriate) and in line with the Model of Integrated Care for Type 2 Diabetes.

People with Type 1 Diabetes are all invited to attend SUH for care. Patients with Type 2 diabetes and patients with complications are all triaged on a case by case basis. Most are in secondary care but some are not or choose to stay with their GP.

A. Cosgrove, COO, Saolta University Health Care Group

W102Q3517	<p>Can the RHFV be provided with a report on the most up to date figures on Emergency Department Patient Experience Time at Sligo University Hospital to include</p> <ul style="list-style-type: none"> • % Of all attendees at ED who are discharged or admitted within six hours of registration • % Of all attendees at ED who are discharged or admitted within nine hours of registration • % Of all attendees at ED who are in ED <24 hours • % Of all attendees aged 75 years and over at ED who are discharged or admitted within six hours of registration • % Of all attendees aged 75 years and over at ED who are discharged or admitted within nine hours of registration • % Of all attendees aged 75 years and over at ED who are discharged or admitted within 24 hours of registration • % Of all attendees aged 15 years and under (or Children) at ED who are discharged or admitted within six hours of registration • % Of all attendees aged 15 years and under (or Children) at ED who are discharged or admitted within nine hours of registration • % Of all attendees aged 15 years and under (or Children) at ED who are discharged or admitted within 24 hours of registration 	Clr D Gilroy
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Jan - Oct 2022 data

% Of all attendees at ED who are discharged or admitted within six hours of registration	47.8
% Of all attendees at ED who are discharged or admitted within nine hours of registration	65.3
% Of all attendees at ED who are in ED <24 hours	93.6
% Of all attendees aged 75 years and over at ED who are discharged or admitted within six hours of registration	27.3
% Of all attendees aged 75 years and over at ED who are discharged or admitted within nine hours of registration	44.3
% Of all attendees aged 75 years and over at ED who are discharged or admitted within 24 hours of registration	86.9
% Of all attendees aged 15 years and under (or Children) at ED who are discharged or admitted within six hours of registration	72.1
% Of all attendees aged 15 years and under (or Children) at ED who are discharged or admitted within nine hours of registration	89.8
% Of all attendees aged 15 years and under (or Children) at ED who are discharged or admitted within 24 hours of registration	99.9

T. Canavan, CEO, Saolta University Health Care Group

Appendix 1

Community Healthcare Networks HSE Mid West (CHO3)														
Breakdown of staff attached to CHNs (WTE = Wholetime Equivalent)														
CHN	Location of Network	Areas covered by CHN	Population of Network area (Census 2016)	CHN Manager	Administrative Support (for CHN Manager & PCTs)	GP Lead	Occupational Therapy Services	Speech & Language Therapy Services	Physiotherapy Services	Social Work	Podiatry Services	Dietetics Service	Public Health Nursing (PHN)	Community Registered General Nursing (CRGN)
				WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE
1	West Clare	Ennis, Ennistymon, Kilkee & Kilrush	70,652	1 (vacant)	6.1 (1 vacant)	0.2 (vacant)	8.8 (1.1 vacant)	9.1	8.5 (2.1 vacant - .8 filled by agency)	2??	2	5 (3 vacant)	22	10.7
2	Nth. Tipperary	Borrisokane, Nenagh (2 teams), Roscrea, Templemore & Thurles	60,696	1 (vacant)	6.5	0.2 (vacant)	9.08 (3 vacant, 1 filled by agency)	6.9	8.8 (5.2 vacant - cross cover within PCTs)	3	0.9 (.4 filled by agency)	5 (4 vacant)	17.2	7.5
3	East Clare	East Clare, Shannon & Sixmilebridge	33,945	1	5 (1 vacant)	0.2 (vacant)	4.6	3.4	2	1	0 (vacant covered by West Clare CHN)	1	10	5
4	West Limerick	Abbeyfeale, Dromcollogher, Glin, Newcastle West, Rathkeale	41,458	1	6.3	0.2 (vacant)	5 (1 vacant)	6 (1 vacant)	6 (1 vacant)	2.5 (vacant)	1 (vacant)	2 (1 vacant)	14	3.8

5	East Limerick/Ballina/Newport	Ballina, Killaloe, Newport, Castletroy, Mulcair & Cappamore	48,066	1	5.2 (1 vacant)	0.2 (vacant)	4.6	4.6 (1 vacant)	4.7 (1.6 vacant)	1 (vacant covered by other networks)	.5 (vacant covered by other networks)	0.5	10	8.1
6	South Limerick (Learning Site)	Ballycurmin, Ballylanders, Croom, Hospital, Kilmallock & Maigue	59,664	1	8.1 (2 vacant - filled by agency)	0.2	8 (2 vacant)	7.2 (1.6 vacant - 1 filled by agency)	8 (2 vacant and 1 filled via agency)	2 (1 vacant)	2 (1 vacant)	2 (1 vacant)	16	7.4
7	South Limerick	Ballinacurra, Galvone, Market (2 teams)	33,802	1 (currently vacant)	6 (3 vacant - 2 filled by agency)	0.2 (vacant)	4 (1 vacant - filled by agency)	5 (1 vacant - 0.6 filled by agency)	6.4 (2 vacant - 0.9 filled by agency)	3 (1 vacant)	3 (2 vacant - 1 filled by agency)	2 (2 vacant - 1 filled by agency)	9	4.1
8	North Limerick City	Ballynanty, Kings Island, Thomond, Westbury	36,890	1	5.8		3.4	4.7	3.9	0.5	0.5	0.5	10.8	4.6