

**Minutes of Regional Health Forum West meeting held on  
Tuesday, 28<sup>th</sup> June, 2022 at 2.00pm in the Education Centre, Merlin Park, Galway.**  
Miontuairiscí chruinniú an Fhórait Sláinte Réigiúnaigh a tionóladh Dé Máirt, 28<sup>ú</sup> Meitheamh 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 Declan Bree      | Cllr Donagh Killilea           | Cllr Ciaran Brogan    |
| Cllr Liam Carroll     | Cllr Seamus Morris             | Cllr Bill Chambers    |
| Cllr John Carroll     | Cllr Cillian Murphy            | Cllr Tom Crosby       |
| Cllr Tom Conaghan     | Cllr Martin McLoughlin         | Cllr Frankie Daly     |
| Cllr John Connolly    | Cllr Daithí Ó Cualáin          | Cllr John Egan        |
| Cllr Gerry Crawford   | Cllr John O'Hara               | Cllr Francis Foley    |
| Cllr John Cummins     | Cllr Dr Evelyn Francis Parsons | Cllr Liam Grant       |
| Cllr Albert Doherty   | Cllr John Sheahan              | Cllr Seán Hartigan    |
| Cllr Paddy Farrell    | Cllr Tony Ward                 | Cllr Dara Mulvey      |
| Cllr Blackie Gavin    |                                | Cllr Dan McSweeney    |
| Cllr Donal Gilroy     | <b>Apologies</b>               | Cllr Martina O'Connor |
| Cllr Felim Gurn       | Cllr Finola Armstrong McGuire  | Cllr Peter Roche      |
| Cllr Mary Howard      | Cllr Declan McDonnell          | Cllr Kevin Sheahan    |
| Cllr Michael Kilcoyne | Cllr Peggy Ryan                |                       |

**In attendance:**

Tony Canavan, Executive Lead, Regional Health Forum/CEO, Saolta University Health Care Group  
Ann Cosgrove, Chief Officer, Saolta University Health Care Group  
Noreen Spillane, Chief Operating Officer, UL Hospital Group  
Maria Bridgeman Chief Officer Community Healthcare Midwest  
Breda Crehan-Roche, Chief Officer, Community Healthcare West  
Dermot Monaghan Chief Officer, CHO, Area 1  
John Fitzmaurice, Head of Disability Services, Community Healthcare West  
Mary Warde, Head of Primary Care, Community Healthcare West  
Marian Cavanagh, Regional Health Forum Office  
Anna Lyons, Regional Health Forum Office

**809/100/22**

**Minutes of previous meeting – 24<sup>th</sup> May 2022**

The minutes of the previous meeting held on the 24<sup>th</sup> May 2022 were proposed by Cllr Blackie Gavin and seconded by Cllr Albert Doherty and adopted.

**810/100/22 Matters Arising:**

Cllr Donagh Killilea requested an update on the part of his Question W99Q3300 regarding the Aras Mhuire site and facility.

**Action:** Joe Hoare to respond to Cllr D Killilea with an update regarding Aras Mhuire site and facility.

## **811/100/22 Chairman's Business:**

### **812/99/22 Questions:**

#### **W100Q3333: Ambulance/Hospital protocol.**

**Action:** Noreen Spillane to advise Cllr Howard of the criteria for attendance at the Minor Injury Unit at Ennis, Nenagh and St John's Hospitals.

#### **W100Q3340: Timelines in relation to the new ED at Mayo University Hospital.**

**Action:** Joe Hoare to update Cllr Kilcoyne on the below, in relation to the new Emergency Department at Mayo University Hospital, when the timelines become available:

When will the plans be ready?

When do you intend to apply for Planning Permission?

When is it expected to be operational?

#### **W100Q3341: Operation of Day Care Centres for elderly patients in County Mayo.**

**Action:** Breda Crehan Roche to keep Cllr Kilcoyne updated on any extension to the number of days open, of the Day Services in Sacred Heart Hospital.

#### **W100Q3343: Crewed HSE ambulances County Mayo and locations.**

**Action:** JJ McGowan to respond to Cllr Kilcoyne in relation to: Are there always crewed ambulances based in Mayo, if the two ambulances listed in the response to Question W100Q3343 are out on duty and away from base, is there another ambulance providing back-up and where is it based, is it based in Co. Mayo?

#### **W100Q3349: Update on the diagnostic services for Tuam.**

**Action:** Breda Crehan-Roche to keep Cllr Killilea updated on the service for Tuam.

#### **W100Q3352: NAS Classifications and UHL attendances.**

**Action:** JJ McGowan to provide Cllr Murphy with a response to the numbers of each of those classifications for ambulance attendances at UHL for the year so far.

#### **W100Q3353: Update on the Pathfinder program for West Clare.**

**Action:** JJ McGowan to provide clarity to Cllr Murphy on what the 'Limerick Region' encompasses for the roll out of the Pathfinder program, will it include North and West Clare?

#### **W100Q3353: Update on the Pathfinder program**

Due to high interest in NAS Pathfinder model Tony Canavan Executive Chairman suggested a future RHF Committee presentation on this topic.

**Action:** RHF Office to liaise with JJ McGowan regarding a presentation on the Pathfinder model.

#### **W100Q3362: Old Health Centre, Binion Road, Clonmany**

**Action:** Dermot Monaghan to keep Cllr Doherty updated on the next step in the process of putting the old Health Centre Binion Road, Clonmany on the intra state register.

#### **W100Q3363: Updates on PUH re 50 bed unit and second CT scanner.**

**Action:** Ann Cosgrove to keep Cllr Parsons updated on the project timeline for the 50 bedded block at Portiuncula University Hospital when a timeline is available.

**Action:** Ann Cosgrove to keep Cllr Parsons updated regarding the 2<sup>nd</sup> CT Scanner for Portiuncula University Hospital.

**W100Q3364: Update on the status of the filling of Consultant posts in PUH since Feb 2021 (W92Q2917)**

**Action:** Ann Cosgrove to revert to Cllr Parsons regarding the 2 new appointment specialities and the WTE/sessional Commitments of the 6 posts in the recruitment process.

**W100Q3369: Home Help/Home Care staff**

**Action:** Dermot Monaghan to provide Cllr Bree with information on costs of using Agency staff as opposed to HSE Staff to provide Home Help/Home Care hours.

**W100Q3370: A & E attendances at SUH 2021, 2022.**

**Action:** Ann Cosgrove to provide Cllr Bree with the breakdown of the number of people attending ED on a weekly basis, from the response provided in Question W100Q3370.

**W100Q3377: Pharmacists and patients registered in Galway City participating in the Opioid Substitution Treatment Scheme?**

**Action:** Breda Crehan-Roche to revert to Cllr Connolly with an explanation on the reduction of those registered to receive opiate substitution treatment compared to July 2020.

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

**Action:** JJ McGowan to clarify to Cllr Ó Cualáin why the additional ambulance that was put in place for North Connemara is being deployed to Ballinrobe in Mayo rather than being retained within Connemara or indeed Galway? Cllr Ó Cualáin welcomes the planning application expected later this month or August but is concerned that in the interim the additional resources are being deployed outside the county.

**W100Q3386: Respite opportunities in the Lifford Community Hospital Area.**

**Action:** Dermot Monaghan to clarify to Cllr Crawford why the availability of respite in St Joseph's is 9 weeks compared to Lifford which was 6 weeks.

**W100Q3389: Day Care Services in the Lifford catchment area.**

**Action:** Dermot Monaghan to advise Cllr Crawford on the timeframe for the Habinteg Centre in Lifford to provide Community Day Hospital services.

**W100Q3390: Counselling Services**

**Action:** Dermot Monaghan to provide Cllr Gurn with the number of Counsellors in the Sligo/Leitrim Area.

**W100Q3391: HSE Properties**

**Action:** Dermot Monaghan to revert to Cllr Gurn regarding Foxes House.

**Action:** Joe Hoare to respond to Cllr Gurn regarding HSE Property Inspections.

**813/100/22 Motions:**

**W100M126: Amendment to the Standing Orders:**

This Motion was proposed by Cllr Donal Gilroy and seconded by Cllr Mary Howard.

**Action:** RHF Office to prepare a draft Motion to amend the Standing Orders to accommodate the above Motion.

**W100M130: St Brigid's Hospital buildings and campus in Ballinasloe:**

This Motion was proposed by Cllr Evelyn Francis Parsons and seconded by Cllr Donagh Killilea.

**Action:** Joe Hoare to update Cllr Parsons if the IDA is on the list for the intra state register.

**Action:** Joe Hoare to keep the Regional Health Forum members updated on the Motion

**814/100/22 Any Other Business:**

Cllr Liam Carroll noted that there was no update as per the follow up below:

**W99Q3326: Primary Care Centre Oranmore**

Joe Hoare to have an update for the next meeting regarding the Primary Care Centre Oranmore.

The Executive Chair Mr. Tony Canavan advised that he would request that an update on the Primary Care Centre in Oranmore would be sent to Cllr Liam Carroll.

**Action:** Joe Hoare to provide an update to Cllr Carroll with a copy to the Regional Health Forum office.

**815/100/22 Date & Time of Next Meeting:**

**Future Meetings:**

The next **Regional Health Forum West** meeting will take place on Tuesday 27<sup>th</sup> September, 2022 at 2pm.

The next **Regional Health Forum Committee** Meeting will take place on Tuesday 25<sup>th</sup> October 2022 at 2pm (Venue to be decided)

This concluded the business of the meeting.

Signed:

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Cathaoirleach/Chairman

*Adopted at the Regional Health Forum West meeting*

**QUESTIONS AND RESPONSES**  
**REGIONAL HEALTH FORUM WEST – 27<sup>TH</sup> SEPTEMBER 2022**

| <b>Number:</b>   | <b>QUESTION</b>  | <b>RAISED BY</b>               | <b>Page No.</b> |
|------------------|--|--------------------------------|-----------------|
| <b>W101Q3392</b> | Sacred Heart Hospital Castlebar update on Day Care Centre and Respite Services and attendance numbers.   | <b>Clr M Kilcoyne</b>          | <b>4</b>        |
| <b>W101Q3393</b> | Meetings with patient's family in MUH re Discharge; procedure/meetings/procedure of the meetings.        | <b>Clr M Kilcoyne</b>          | <b>4-5</b>      |
| <b>W101Q3394</b> | Any proposals to provide free parking for patients attending at MUH?                                     | <b>Clr M Kilcoyne</b>          | <b>5</b>        |
| <b>W101Q3395</b> | Home Help following Hospital Discharge.  | <b>Clr M Kilcoyne</b>          | <b>5</b>        |
| <b>W101Q3396</b> | Question converted to Motion.  | <b>Clr F Armstrong McGuire</b> | <b>5</b>        |
| <b>W101Q3397</b> | Update on the progress of the New HSE Hospital to replace St Patricks Hospital in Carrick on Shannon.    | <b>Clr F Armstrong McGuire</b> | <b>5-6</b>      |
| <b>W101Q3398</b> | Update on progress re extension of services at St Ciarans in Carrick on Shannon.                         | <b>Clr F Armstrong McGuire</b> | <b>6</b>        |
| <b>W101Q3399</b> | Update on the Pathfinder program in Clare.   | <b>Clr C Murphy</b>            | <b>6</b>        |
| <b>W101Q3400</b> | The Deloitte report into overcrowding at UHL.  | <b>Clr C Murphy</b>            | <b>6-8</b>      |
| <b>W101Q3401</b> | Detail re "no bathing" notices issued in Clare this year, HSE role?                                      | <b>Clr C Murphy</b>            | <b>8-9</b>      |
| <b>W101Q3402</b> | Dental Services available for Medical Card Holders in Clare 2019, 2020, 2021, 2022.                      | <b>Clr C Murphy</b>            | <b>9-11</b>     |
| <b>W101Q3403</b> | Update on the new X Ray and diagnostic services for Tuam and location?                                   | <b>Clr D Killilea</b>          | <b>11</b>       |
| <b>W101Q3404</b> | Update on use for the agricultural lands at Toghermore Tuam?   | <b>Clr D Killilea</b>          | <b>11</b>       |
| <b>W101Q3405</b> | Update on the progress and staffing of the New CNU and Grove facility development in Tuam.               | <b>Clr D Killilea</b>          | <b>11-12</b>    |
| <b>W101Q3406</b> | The ambulance service times and deployment in county Leitrim.  | <b>Clr F Gurn</b>              | <b>12-13</b>    |
| <b>W101Q3407</b> | Update on Staffing, Beds and location, number of patients presenting, MDT available re: Eating Disorders | <b>Clr G McMonagle</b>         | <b>13-15</b>    |
| <b>W101Q3408</b> | LUH ED presentations increase – hospital steps to address this.  | <b>Clr G McMonagle</b>         | <b>15-16</b>    |
| <b>W101Q3409</b> | LUH - Appointment of Endocrinologist for T1 Diabetes, development of Diabetes Centre at LUH              | <b>Clr G McMonagle</b>         | <b>16</b>       |
| <b>W101Q3410</b> | Patient numbers per speciality offered treatment via NTPF and NI Planned Health Care Scheme              | <b>Clr G McMonagle</b>         | <b>17-18</b>    |
| <b>W101Q3411</b> | Entrance and Exits at Merlin Park re Development Plan  | <b>Clr D McDonnell</b>         | <b>18-19</b>    |
| <b>W101Q3412</b> | Security Staff in Merlin Park early mornings?  | <b>Clr D McDonnell</b>         | <b>19</b>       |
| <b>W101Q3413</b> | Updated on the future of Dental services at Lifford Community Hospital?                                  | <b>Clr G Crawford</b>          | <b>19</b>       |
| <b>W101Q3414</b> | Wait times and numbers for Orthopaedic appointments/procedures at UHLKY.                                 | <b>Clr G Crawford</b>          | <b>19</b>       |
| <b>W101Q3415</b> | HSE Home support team recruitment in County Donegal in the last 12 months.                               | <b>Clr G Crawford</b>          | <b>19</b>       |

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| <b>W101Q3416</b> | Staffing shortages in the injury units in Limerick and Clare.  | <b>Cllr L Grant</b>           | <b>20</b>    |
| <b>W101Q3417</b> | ED at LUH; Garda Assistance Requested between Jan.1-Sept 12th, 2022.   | <b>Cllr A Doherty</b>         | <b>20</b>    |
| <b>W101Q3418</b> | Property sourced for the delivery and restoration of Day Services in Carndonagh?   | <b>Cllr A Doherty</b>         | <b>20</b>    |
| <b>W101Q3419</b> | Respite provision Inishowen, access for Respite provision at Riverwalk House and Milltown House in Carndonagh?   | <b>Cllr A Doherty</b>         | <b>20-21</b> |
| <b>W101Q3420</b> | Cashel na Cor Resource Centre – Management, staffing numbers, any increase to opening days.  | <b>Cllr A Doherty</b>         | <b>21</b>    |
| <b>W101Q3421</b> | Support services for adult psychiatric patients when discharged from LUH.  | <b>Cllr T Conaghan</b>        | <b>21</b>    |
| <b>W101Q3422</b> | Consultant post vacancies in the forum area, speciality and location.  | <b>Cllr J Connolly</b>        | <b>22-29</b> |
| <b>W101Q3423</b> | Opening date and official capacity of new Temporary A&E at GUH.  | <b>Cllr J Connolly</b>        | <b>29-30</b> |
| <b>W101Q3424</b> | Vacant/unused HSE properties Co. Galway, location, type and length of vacancy.   | <b>Cllr J Connolly</b>        | <b>30</b>    |
| <b>W101Q3425</b> | Update on efforts to develop a Primary care centre on the Western Side of Galway City.   | <b>Cllr J Connolly</b>        | <b>30</b>    |
| <b>W101Q3426</b> | Moving of children from South Roscommon area to CDNT8 in Loughrea Co. Galway?  | <b>Cllr T Ward</b>            | <b>30</b>    |
| <b>W101Q3427</b> | What percentage of these children from South Roscommon are currently receiving services? What services are they receiving?                                     | <b>Cllr T Ward</b>            | <b>30</b>    |
| <b>W101Q3428</b> | Are the families from South Roscommon expected to travel to Loughrea in Co. Galway for the services?   | <b>Cllr T Ward</b>            | <b>30-31</b> |
| <b>W101Q3429</b> | Are the children moved from Co. Roscommon C.D.N.T.9 to Loughrea C.D.N.T.8 guaranteed to retain the same services as in Co. Roscommon.                          | <b>Cllr T Ward</b>            | <b>31</b>    |
| <b>W101Q3430</b> | Suicide numbers CHO2 are since 2019. How many inquests have yet to be carried out for this period in these counties?   | <b>Cllr E Francis Parsons</b> | <b>31-32</b> |
| <b>W101Q3431</b> | Update on HSE vacating the buildings and progression of St Brigids's Hospital campus Ballinasloe for listing on state register DPER.                           | <b>Cllr E Francis Parsons</b> | <b>32</b>    |
| <b>W101Q3432</b> | 240 Ukrainian Doctors residing in HSE West area, registration timeframe for practice here, possible use in other health roles that don't require registration. | <b>Cllr E Francis Parsons</b> | <b>32-33</b> |
| <b>W101Q3433</b> | Waiting list for HSE orthodontics time/ age / gender in CHO 2 and the HSE procedures for referral to Orthodontics for children up to age 18.                   | <b>Cllr E Francis Parsons</b> | <b>33-34</b> |
| <b>W101Q3434</b> | How many people use the Minor injury unit in Nenagh, St Johns and Ennis by quarter since January 1 <sup>st</sup> 2019?   | <b>Cllr S Morris</b>          | <b>34-35</b> |
| <b>W101Q3435</b> | Breakdown of staffing levels in each unit quarterly since the above date?  | <b>Cllr S Morris</b>          | <b>35-38</b> |
| <b>W101Q3436</b> | At what point did management decide to close these units recently?   | <b>Cllr S Morris</b>          | <b>38</b>    |
| <b>W101Q3437</b> | Can you release the capacity v demand analysis of University Hospital Limerick for each quarter since January 1 <sup>st</sup> 2009?                            | <b>Cllr S Morris</b>          | <b>38-40</b> |
| <b>W101Q3438</b> | Please advise when a full time permanent Cath Lab service will be provided in SUH.   | <b>Cllr D Bree</b>            | <b>40</b>    |
| <b>W101Q3439</b> | HSE community step-down beds in the SUH catchment area, location, how many in 2021, 2020 and in 2019, any plans to increase the number.                        | <b>Cllr D Bree</b>            | <b>41</b>    |
| <b>W101Q3440</b> | Consultant Posts in SUH.   | <b>Cllr D Bree</b>            | <b>41-43</b> |

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| <b>W101Q3441</b> | Numbers of staff (WTE) currently employed at SUH and vacancies.  | <b>Cllr D Bree</b>      | <b>43</b>    |
| <b>W101Q3442</b> | Update on the provision of Cath Lab services at SUH.   | <b>Cllr D Gilroy</b>    | <b>44</b>    |
| <b>W101Q3443</b> | Training of Community Volunteers for Defibrillators.   | <b>Cllr D Gilroy</b>    | <b>44</b>    |
| <b>W101Q3444</b> | Report on the provision of full Adult Insulin Pump Therapy services for new patients at SUH and LUH.   | <b>Cllr D Gilroy</b>    | <b>44-45</b> |
| <b>W101Q3445</b> | Current use of accommodation units at HSE Cloonamahon Services and what effect the moving of the residents from their home of many years has had on their wellbeing.                             | <b>Cllr D Gilroy</b>    | <b>45-46</b> |
| <b>W101Q3446</b> | Provision of Public Long Stay Beds for the Town of Roscrea.  | <b>Cllr J Carroll</b>   | <b>46</b>    |
| <b>W101Q3447</b> | What is the Proposed Plan for the Dean Maxwell Nursing Home in Roscrea?  | <b>Cllr J Carroll</b>   | <b>46</b>    |
| <b>W101Q3448</b> | Has the HSE Examined the Community Proposal, Drawings and Concepts, which has the Support of all Oireachtas Members.   | <b>Cllr J Carroll</b>   | <b>46</b>    |
| <b>W101Q3449</b> | Update on the status of the proposed Primary Care Centre planned for Oranmore.   | <b>Cllr L Carroll</b>   | <b>46</b>    |
| <b>W101Q3450</b> | Number of Dentists employed by HSE West in Galway, wait list numbers and wait time.  | <b>Cllr L Carroll</b>   | <b>47</b>    |
| <b>W101Q3451</b> | Number of Orthodontists employed by HSE West in Galway, wait list numbers and wait time.   | <b>Cllr L Carroll</b>   | <b>47</b>    |
| <b>W101Q3452</b> | Home Support Staff in Connemara, recruitment and demand.   | <b>Cllr D Ó Cualáin</b> | <b>47</b>    |
| <b>W101Q3453</b> | Community Occupational Therapists for adults and children covering Galway West and the Connemara Area; numbers, location base, wait list.  | <b>Cllr D Ó Cualáin</b> | <b>47-49</b> |
| <b>W101Q3454</b> | Status of Day Care Service and Respite Beds re in Áras Mhic Dara CNU.  | <b>Cllr D Ó Cualáin</b> | <b>49</b>    |
| <b>W101Q3455</b> | Patients numbers brought by Ambulance to ED GUH in June, July and August 2022, time for patient transfer to hospital staff and Ambulance crew cleared, protocol for Ambulance Crew delays in ED. | <b>Cllr D Ó Cualáin</b> | <b>49-51</b> |
| <b>W101Q3456</b> | Update on the proposal to address the lack of car parking spaces LUH.  | <b>Cllr C Brogan</b>    | <b>51-52</b> |
| <b>W101Q3457</b> | Steps to address the huge delays that patients are experiencing at A&E in LUH.   | <b>Cllr C Brogan</b>    | <b>52-53</b> |
| <b>W101Q3458</b> | Update on the new community nursing unit in Letterkenny and the upgraded proposals for Ramelton community nursing unit?  | <b>Cllr C Brogan</b>    | <b>53</b>    |
| <b>W101Q3459</b> | Update on the availability of all services in LUH and the timeline for patients accessing the services?  | <b>Cllr C Brogan</b>    | <b>53</b>    |

| Number:   | QUESTION  | RAISED BY             |
|---|---|-----------------------|
| <b>W101Q3392</b>  | <p>Re: Sacred Heart Hospital Castlebar</p> <p>When is it proposed to fully open the Day Care Centre at The Sacred Heart Hospital? How many people are currently attending per day and the number of days per week? How many attended per day and the number of days per week in 2019?</p> <p>When will the Respite Service at the Sacred Heart Hospital, resume? When was the last respite care given at the Sacred Heart Hospital? How many beds are currently vacant at the Sacred Heart Hospital, across all departments? How many people received respite care in the Sacred Heart Hospital, in 2019?</p> | <b>Clr M Kilcoyne</b> |
| <ul style="list-style-type: none"> <li>• Currently there are remedial works being carried out which are due for completion by Quarter 1, 2023. The Day Care Centre in the Sacred Heart Hospital will be fully open once completed.</li> <li>• Currently the Day Care Service is operating three days a week accommodating up to ten clients per day.</li> <li>• In 2019 pre covid the service operated five days per week with an average of 25-30 clients attending daily.</li> <li>• Since the onset of Covid 19 and the need to implement and comply with infection, protection and control standards there are no respite beds available at present. The capacity is reduced in St Joseph's Rehab Ward from 36 to 24 beds with rehab taking priority. There are ongoing negotiations with Saolta University Health Care Group with regard to St John's Ward which is currently being used by Mayo University Hospital. Community Healthcare West currently provides respite beds in Ballina District Hospital, Swinford District Hospital, St. Fionnans Community Nursing Unit, Dalton Community Nursing Unit, Achill and Belmullet District Hospital.</li> <li>• The last admission for respite care was the 2<sup>nd</sup> March 2020 and the patient was discharged on the 9<sup>th</sup> March 2020. There has been no further respite provided as per above.</li> <li>• The number of beds currently vacant across all departments in the Sacred Heart Hospital Castlebar are as follows: <ul style="list-style-type: none"> <li>➤ 74 Long stay beds – 12 available (taking patients from waiting list).</li> <li>➤ 24 Rehab beds open and all occupied (no vacancies at present)</li> </ul> </li> <li>• In 2019, there were 52 admissions for respite care in the Sacred Heart Hospital with each patient availing of two weeks respite.</li> </ul> |   |                       |
| <p><b>Breda Crehan-Roche, Chief Officer, Community Healthcare West</b></p>  |   |                       |
| <b>W101Q3393</b>  | <p>What is the current procedure in Mayo University Hospital regarding discussions held with a family member of a patient regarding their loved one when the hospital is seeking to discharge them or move them elsewhere? How many staff members normally attend such a meeting? Is the family member informed that they can be accompanied by another person at the meeting? How much notice is given to the family that such a meeting is being planned? Are the meetings minuted and a copy given to the family member?</p>   | <b>Clr M Kilcoyne</b> |
| <p>The discussions around discharge are usually held with the patient if they have capacity. Conversations are also held with next of kin.</p> <p>In instances where patient cases are complex and family involvement is required, a Multidisciplinary Team (MDT) meeting can be held. This meeting can include the patient, their family and any member of the team who is involved in the patient care.</p>   |   |                       |



This meeting can be organised rather quickly when required but can also be scheduled up to a week in advance. The minutes are given to the family with the patients verbal consent if requested.

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

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| <b>W101Q3394</b> | Are there any proposals to provide free parking for patients attending at Mayo University Hospital? | <b>Clr M Kilcoyne</b> |
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There are no current proposals for free parking for patients attending Mayo University Hospital.

There are exceptions in place for Oncology, renal and other patients with specific requirements.

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

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| <b>W101Q3395</b> | Why does the HSE promise and agree to provide home help for a patient being discharged from hospital and then fail to honour that commitment? When such a patient is discharged is there any follow up after discharge to ensure the home help that has been promised has commenced? What department is responsible for this follow up? | <b>Clr M Kilcoyne</b> |
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Home Support is approved for individual clients following assessment and put in place by the Home Support Department pending the availability of Healthcare Support Assistants (HCSAs).

Clients are discussed at the Acute Home Support Forum and a decision is made regarding approval of Home Support. The hospital discharge co-ordinator advises the clients and their families of the outcome of this meeting. If Home Support Services are unable to source sufficient staff for the individual, there are a number of possible scenarios depending on his/her needs. In some cases, they may transfer to a step-down bed or avail of a transitional care bed. Some clients may decide to return home on their existing Home Support package. Where there is a requirement for enhanced package of care every effort will be made by Home Support, however this is dependent on the resources available in the geographic area. Home Support Staff follow up with clients upon discharge from hospital in relation to the status of their Home Support application.

Due to an extreme shortage of Healthcare Support Assistants (HCSAs) both directly employed by the HSE and Private Providers, the Home Support Department are extremely challenged in sourcing HCSAs' to provide the required service for clients approved across Galway, Roscommon and Mayo.

At present, Community Healthcare West is providing Home Support services to 6,456 clients. However there are an additional 230 clients awaiting a new service and 262 awaiting an enhanced package. County Mayo has 131 clients on a waiting list for a new service and 111 clients awaiting an enhanced service.

Every effort is made to source HCSAs' to provide support for clients that have been approved both with HSE and Private Providers. Community Healthcare West, Home Support Services have recently interviewed for directly employed HCSAs' and over thirty are currently being processed by Human Resources. In addition to this, a rolling recruitment campaign for the employment of HCSAs is in the process of commencing in Community Healthcare West and will be widely advertised.

**Breda Crehan-Roche, Chief Officer, Community Healthcare West**

|                  |                               |                                |
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| <b>W101Q3396</b> | Question converted to Motion. | <b>Clr F Armstrong McGuire</b> |
|------------------|-------------------------------|--------------------------------|

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| <b>W101Q3397</b> | May I have an update on the progress of the New HSE Hospital to replace St Patricks Hospital in Carrick on Shannon. | <b>Clr F Armstrong McGuire</b> |
|------------------|---|--------------------------------|

The intended new Community Nursing Unit for Carrick on Shannon is to be a ninety bed residential facility. The development received a grant of planning permission in 2020. The design team are currently completing the detailed

design and will then prepare the tender documents. The site for the new facility has been secured. It is intended to proceed to tender for the building works in Quarter 4 2022, with approval to award a works contract expected to be subsequently progressed in Quarter 1 2023. Subject to an award of contract in early 2023, the current anticipated completion date would be Quarter 1 2025.

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

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| <b>W101Q3398</b> | I ask for an update on progress re extension of services at St Ciarans in Carrick on Shannon with particular request for information on respite care for adults with complex disabilities in South Leitrim. | <b>Clr F Armstrong McGuire</b> |
|------------------|---|--------------------------------|

It is acknowledged that there is a need for additional respite for families residing in the South Leitrim area, particularly for adults with complex disability. Plans are being progressed in terms of a long-term respite facility for the area. An interim arrangement is also warranted.

Disability Services are progressing the extension of Respite Service at Bayview Tullaghan, Co. Leitrim in order to extend the respite service to seven days/nights per week, inclusive of bank holidays, over fifty weeks per year. Every effort is being made to ensure the extension of respite at Tullaghan, Co. Leitrim is progressed without delay in order to meet the needs of our service users and families.

Please be assured the provision of enhanced respite is a priority for Disability Services at this time.

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

|                  |  |                     |
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| <b>W101Q3399</b> | Can I be advised as to when the roll out of the Pathfinder program will take place in Clare and the details of how it will be implemented in geographic terms? | <b>Clr C Murphy</b> |
|------------------|--|---------------------|

The Limerick Pathfinder team (who will be tasked to calls in the surrounding area (like the Community Paramedics) once the patient meets the criteria, will be going live in October 2022.

We have three of the four Whole Time Equivalent (WTE) H&SCP's started in Limerick who have already carried out a visit and ride along with the Beaumont team. We are just waiting for the start date for the final appointment of the Clinical Specialist Occupational Therapist (OT).

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

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| <b>W101Q3400</b> | Can I be provided with the terms of reference for the Deloitte report into overcrowding at UHL, as well as the details of the experts who are undertaking that work, and their relevance to those terms of reference. When will this report be published? | <b>Clr C Murphy</b> |
|------------------|---|---------------------|

The UL Hospitals Group CEO commissioned Deloitte to provide a comprehensive review of Patient Flow through the ED at UHL. This review commenced on the 28th March 2022 and is currently in the final phase of completion. It is anticipated that the report will be published in the coming weeks. UL Hospitals Group will be hosting a briefing for RHF members from Limerick, Clare and Tipperary on the findings of the Deloitte Report on patient flow over the coming weeks.

The primary objectives of this review is to define and describe the source(s) of patient flow challenges experienced within the ED and UHL, determine possible opportunities to enhance the existing patient flow approach; and reflect on the effectiveness and impact of patient flow initiatives introduced to date by UHL.

**Please see below for the reports terms of reference:**

**1. Introduction**

University Hospital Limerick (UHL) continues to deal with record volumes of patients attending its Emergency Department (ED), a pattern that has been sustained over a number of months and is evident in other Hospital Groups across Ireland. The ED in UHL is the second busiest in the country and has some of the longest PET times. ED overcrowding is symptomatic of a wider issue of capacity within the Group.

This project is intended to provide an independent and comprehensive overview of patient flow through the ED at UHL whilst demonstrating the use of resources, processes in place and identifying any constraints in the process. The method to completing this shall be threefold:

- The initial phase will focus on completing a detailed analysis of the activity data to inform the second
- The second phase of work will focus on in-person patient pathway mapping and analysis. This will be supported and supplemented by a structured consultation approach with UHL representatives.
- The final phase involves the drafting and review of a final report for first consideration by UHL before being circulated to other external representatives as agreed.

## **2. Project Objectives**

The primary objective of this project is to analyse and review patient flow through the Emergency Department at UHL to:

- Define and describe the source(s) of flow challenges experienced within the ED and UHL
- Determine and comment on possible opportunities to enhance the existing patient flow approach and
- Reflect on the effectiveness and impact of patient flow initiatives introduced to date by UHL

Critical enablers to achieving the above will include

- Leveraging UHL data to profile patient flow challenges experienced within the ED and providing evidence for the conclusions / recommendations detailed within the final report
- Consulting with UHL stakeholders to inform findings with respect to the as-is, opportunities for improvement, and recommendations

## **3. Activities / Scope**

### **Phase 1: Data Analysis & Discovery**

- Gather and analyse detailed data across ULHG including ED attendance data, timeframes, reason for admission, admitting speciality or consultant across sites
- Document key findings from analysis
- Identify data gaps that require follow up during in-person workflow analysis
- Identify key questions to be further explored during patient pathway mapping

### **Phase 2: Pathway Mapping & Review**

- Complete stakeholder consultation with key clinical leads, patient flow and bed management teams to understand the process for managing patient flow, interface with the community and across the Group
- Conduct sampling to supplement any gaps in data
- Map and analyse the ED pathway / patient flow model through UHL to identify any capacity constraints or areas for improvement

### **Phase 3: Final Report**

- Complete final report documenting key findings and recommendations
- Recommendations will be structured in terms of:
  - Shape or reduce demand
  - Match capacity & demand
  - System redesign
  - Patient flow optimisation

## **4. Responsibilities**

### **ULHG representatives will:**

- Facilitate and oversee all information/data requests as issued by Deloitte during this project.
- Support project team discussions as scheduled / agreed.
- Provide direction to Deloitte regarding key areas of focus / flow processes and procedures as required.
- Review draft components, and the final overarching draft of the project report.

**Deloitte will:**

- Complete a detailed analysis of the activity data
- Conduct sampling to supplement any gaps in data
- Facilitate onsite and online stakeholder consultation sessions to understand and document the patient flow management process as well as areas of constraint
- Conduct an on-site analysis and observational study with respect to the ED pathways at UHL, initiatives and processes to support ED patient flow, and capacity constraints impacting on ED flow
- Lead the development of the final report which documents the key findings and recommendations

**Please see below details of the experts who are undertaking this report:**

- Senior Manager - Rebecca Ring  
Rebecca is a senior manager in the healthcare consulting practice in Deloitte and has over ten years experience in large-scale strategic healthcare projects.  
Rebecca brings deep industry experience to healthcare clients via her 10 year involvement in a range of large scale strategic programmes. Before joining Deloitte Rebecca worked with the Children’s Hospital on their strategic transformation programme for 5 years before joining VHI Health & Wellbeing as a Programme Manager.  
In this role she oversaw a programme to introduce new services and new facilities. Since joining Deloitte Rebecca has worked on a number of healthcare consulting engagements across the public and private sector. Of particular relevance Rebecca led the data analysis element of the capacity report for the proposal to develop a private facility within the Mid West in conjunction with ULHG. Rebecca also most recently supported ULHG and HSE Estates in developing the SAR and PBC for the new proposed 96 bed block on the UHL campus.
- Senior Consultant - Lambert Montevecchi  
Lambert Montevecchi is a supporting member of the Deloitte Healthcare team.  
Lambert spent two decades working for international management consulting firms focused on performance improvement, reengineering and cost reduction : [www.alexanderproudfoot.com](http://www.alexanderproudfoot.com) , [www.mcgpl.com](http://www.mcgpl.com) , [www.hitachiconsulting.com](http://www.hitachiconsulting.com) In these companies, he held senior executive positions such as head of auditing and assessment , business development and country manager.  
Lambert has been focusing on healthcare since 2007. He has carried out 40+ healthcare delivery projects (mainly hospitals) in Europe, USA, Australia, Asia and the Middle East for clients such as: French Ministry of Health, ARS Basse-Normandie, Hospitals of the Unicancer Group France, University of California Davis, Southern Adelaide Health Service, leading hospitals in the Middle East... All projects are different but what they have in common is that they all contributed to improve patient care and quality, streamline pathways, boost efficiency and reduce costs.
- Consultant - Cian Fahy  
Cian is a Consultant in the Operations Transformation team within Deloitte Ireland’s Business Operations consulting practice.  
Since joining in 2019, he has gained experience working with several clients across various industries including the Judicial, Healthcare, Agricultural and Banking sectors - most notably playing a key programme management and governance role in supporting the implementation of a large-scale public sector transformation programme.  
Cian holds a BSc in Biomedical Health and Life Sciences from University College Dublin, giving him a strong knowledge and understanding of modern medical and biopharmaceutical practices.

**C. Cowan CEO UL Hospitals Group**

|                  |  |                     |
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| <b>W101Q3401</b> | Can I be provided with any details the HSE have that resulted in all the “no bathing” notices issued in Clare bathing amenities this year? Does the HSE have an enforcement or advisory role in these cases? If so, what are the details of that role, how many HSE personnel are involved and are there any vacancies in these posts? | <b>Clr C Murphy</b> |
|------------------|--|---------------------|

Directive 2006/7/EC concerning the management of bathing water quality came into force in March 2006. This Directive gives stronger focus to the protection of public health and is implemented in Ireland through the Bathing Water Quality Regulations (S.I. No. 79 of 2008). There are specific provisions within these Regulations which require a Local Authority to promptly notify the EPA and the HSE about any situation that has, or could reasonably be expected to have, an adverse impact on bathing water quality and on the health of bathers. Section 15(5) of the Regulations states "A Local Authority shall promptly notify the EPA and the Health Service Executive of any situation that has, or could reasonably be expected to have, an adverse impact on bathing water quality and on the health of bathers". The HSE's Environmental Health Services and Departments of Public Health may be required to give advice to Local Authorities on bathing water quality with respect to incidents of microbiological pollution and/or other adverse circumstances. However, it is primarily the decision and responsibility of the Local Authority to advise the public of bathing water incidents and related bathing water advice and prohibitions.

The HSE ensures that there is a measured and consistent approach when such consultations arise to provide the most effective health protective response.

During the 2022 Bathing Water season, the HSE gave advice in relation to the following Bathing Water Advisory and Bathing Water Prohibition notices in Co. Clare:

1. Cappagh – Bathing Water Prohibition Notice erected on 15<sup>th</sup> June and removed on 17<sup>th</sup> June 2022
2. Lahinch – Bathing Water Advisory Notice erected on 3<sup>rd</sup> August and removed on 5<sup>th</sup> August 2022
3. Kilkee – Bathing Water Prohibition Notice erected on 4<sup>th</sup> September and removed on 7<sup>th</sup> September 2022
4. Kilkee – Bathing Water Prohibition issued on 11<sup>th</sup> September and is still in place on today's date 12<sup>th</sup> September
5. Lough Derg (Mountshannon & Ballycuggeran) Bathing Water Prohibition Notice erected on 31<sup>st</sup> August 2022. It was removed for Ballycuggeran on 9<sup>th</sup> September. It is still in place for Mountshannon.

The initial point of contact from the Local Authority (Clare Co. Council) is the Principal Environmental Health Officer or their delegate. The Principal Environmental Health Officer consults with the HSE Public Health Department before issuing appropriate advice.

The Principal Environmental Health Officer post is currently filled in a permanent capacity in HSE Clare.

***Environmental Health Office, Clare***

|                  |   |                      |
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| <b>W101Q3402</b> | Can I be provided in tabular form the number of dentists in Clare that accepted medical card holders for the years 2019, 2020, 2021 and also for 2022, and can I be provided in tabular form for the same years the amount of people in Clare that are eligible for dental treatment under the medical card system? | <b>Cllr C Murphy</b> |
|------------------|---|----------------------|

Private dental practitioners contracted under the Dental Treatment Services Scheme (DTSS) provide dental services to medical card holders (adults over 16 years of age). The Primary Care Reimbursement Service (PCRS) processes the claims submitted by the DTSS contracted dental practitioners/practices for dental services provided to medical card holders under the scheme.

The Principal Dental Surgeon (CHO3) has provided the following breakdown which he has received from the PCRS in respect of payments made to contracted dentists in 2021 & to date in 2022. It outlines the number of dental practitioners who were contracted under the DTSS in Co. Clare in both of these years and also confirms the number of those who received payments from the PCRS in respect of claims made for dental treatment carried out for medical card patients.

|       | 2021               |                        | 2022               |                                 |
|-------|--------------------|------------------------|--------------------|---------------------------------|
| Month | No. of contractors | No. of contractors who | No. of contractors | No. of contractors who received |
|       |                    |                        |                    |                                 |

|       |    | received a payment under the DTSS |    | a payment under the DTSS |
|-------|----|-----------------------------------|----|--------------------------|
| Jan   | -  | -                                 | 17 | 14                       |
| Feb   | 20 | 15                                | 17 | 14                       |
| March | 20 | 16                                | 17 | 14                       |
| April | 20 | 14                                | 16 | 13                       |
| May   | 20 | 16                                | 16 | 12                       |
| June  | 20 | 14                                | 16 | 12                       |
| July  | 20 | 15                                | 15 | 11                       |
| Aug   | 19 | 14                                | 15 | 09                       |
| Sept  | 19 | 13                                |    |                          |
| Oct   | 19 | 14                                |    |                          |
| Nov   | 18 | 12                                |    |                          |
| Dec   | 17 | 14                                |    |                          |

The Principal Dental Surgeon has provided the following breakdown of patients who received treatment from dental practitioners in Co. Clare contracted under the DTSS in Co. Clare in the years 2019, 2021 and to date in 2022 v's the number of medical cards holders in Co. Clare who were eligible for treatment under the DTSS in each of these years.

|               | No. of patients treated by dental practitioners in Co. Clare under DTSS | No. of patients eligible for treatment under the DTSS (by virtue of holding a valid medical card) |
|---------------|---|---|
| December 2019 | 8,683   | 31,909  |
| December 2021 | 5,762   | 31,999  |
| August 2022   | 3,661   | 33,064  |

Please note that under the DTSS a medical card holder is not restricted to attending a DTSS contracted dental practitioner in their own county. They can attend a DTSS contracted dental practitioner anywhere in the country for dental treatment if the dental practitioner is in a position to take them on.

Therefore, medical card holders from Co. Clare can travel outside of Co. Clare to avail of dental treatment under the scheme and, likewise, medical card holders from outside of Co. Clare can avail of dental treatment in Co. Clare if they

can secure the services of a DTSS contracted dentist. Payments to contracted dental practitioners are reflected in the figures in whichever county/CHO area the treatment is carried out.

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

A report on the number of Eligible Persons with Medical Cards by CHO, Gender and Age Group is available on the below link by clicking - Access the Reporting and Open Data Area, Click – Eligibility Reports and then Click Age Groups.

<https://scanner.topsec.com/?d=2104&r=show&u=https%3A%2F%2Fwww.hse.ie%2Feng%2Fstaff%2Fpcrs%2Fpcrs-publications&t=7610b6bcf44eed3fbed22f492c351144711139f8>

The number of people Eligible for Medical Cards in Clare over 16

| No. of people Eligible for Medical Cards In Clare<br>Age 16 Years and Over |        |
|--|--------|
| As at 31st December 2018   | 32,249 |
| As at 31st December 2019   | 31,842 |
| As at 31st December 2020   | 32,745 |
| As at 31st December 2021   | 31,898 |
| As at 31st August 2022   | 33,175 |

We have sought additional information from the National Medical Card Unit but was not available at time of printing.

**National Medical Card Unit**

|                  |   |                       |
|------------------|---|-----------------------|
| <b>W101Q3403</b> | Can the HSE give an update on the new X Ray and diagnostic services for Tuam?<br>Is there a decision made yet on where it is to be? | <b>Clr D Killilea</b> |
|------------------|---|-----------------------|

National HSE Estates continues to work with Public/Private Partnership Company with plans to commence development in final quarter of 2022. The X ray and Diagnostics service will be located in Tuam PCC and it is expected to be operational in Q2 2023.

**Breda Crehan-Roche, Chief Officer, Community Healthcare West**

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|------------------|---|-----------------------|
| <b>W101Q3404</b> | Can the HSE confirm what is proposed for the agricultural lands at Toghermore Tuam? | <b>Clr D Killilea</b> |
|------------------|---|-----------------------|

There is no decision yet made regarding the future long term use of Toghermore House and lands. There are a number of significant capital developments currently underway in the Tuam area to enable enhanced delivery of healthcare services. Existing facilities such as at Toghermore will be the subject of engagement between HSE Capital & Estates and Community Healthcare West to consider overall healthcare service needs in the first instance in the context of any future proposal for the site including the agricultural lands.

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

|                  |   |                       |
|------------------|---|-----------------------|
| <b>W101Q3405</b> | Can the HSE confirm the progress on the New CNU and Grove facility development in Tuam are they on time and coming in under budget? What is the | <b>Clr D Killilea</b> |
|------------------|---|-----------------------|

|   |  |                    |
|---|--|--------------------|
|   | staffing requirement needed to get them operational and what additional staff will be hired both clinical and support?   |                    |
| <p>Both of these capital projects are progressing well and in line with anticipated cost projections. There have been significant challenges arising for the construction sector due to a combination of Covid-19, Brexit and the war in Ukraine particularly in terms of managing supply chains and lead times for the procurement of materials. The Grove project also includes the refurbishment of an existing old facility where minor unknown issues can arise during the works. It is anticipated that there will likely be some programme slippage on both projects as a result of all these factors but that construction works on both projects will still be completed by the end of Quarter 1 2023. Final project costs will also include payment to deal with material inflation in line with recent government policy. Both developments are to accommodate existing services and so the staffing is largely already in place. Community Healthcare West will be reviewing and progressing their plans to put these new facilities into use over the coming months and will be in a position to advise on the staffing details.</p> <p><b>Joe Hoare, Assistant National Director, Capital &amp; Estates</b></p> <p>The new Tuam Community Nursing Unit will be opening on a phased basis initially with the transfer of the Residents from Áras Mhuire and it is expected to be operational in Q2 2023.</p> <p>Staffing requirements are not available at this stage as it is based on future resident's needs and demands.</p> <p>The current base for the Community Mental Health Team and Day Hospital in Tuam is at the Toghermore Campus on the outskirts of Tuam. The new location for these services will be in the Grove facility in the centre of Tuam and will allow for easier access for both the people of Tuam and the wider catchment area, through local transport systems going directly to the centre of the town. This new Community Mental Health Team Headquarters will be the community base for the General Adult Community Mental Health Team comprising of:</p> <ul style="list-style-type: none"> <li>Consultant Psychiatrist</li> <li>Senior Registrar and NCHD</li> <li>Clinical Psychologist</li> <li>Occupational Therapist</li> <li>Social Worker</li> <li>Peer Support Worker</li> <li>Multi Task Attendants</li> <li>Nursing Staff</li> <li>Mental Health Association Support Staff</li> <li>Clerical Administration Staff</li> </ul> <p>The services that will be provided from the new Community Mental Health Hub will include; Out Patient Clinics, Therapeutic Programmes. Specialist Counselling Services, e.g. Family Therapy, Cognitive Behavioural Therapy, Psychological Therapy, Addiction Counselling along with 1:1 supportive counselling from staff.</p> <p>Some of the groups which will be facilitated will include; WRAP (Wellness Recovery Action Planning), Solutions for Wellness, Distress Tolerance/Emotional regulation, Anxiety Management, Mindfulness, Education on Medication/Mental Wellbeing as well as 1:1 occupational assessments.</p> <p>There will be no additional staffing requirements needed to support this transition.</p> <p><b>Breda Crehan-Roche, Chief Officer, Community Healthcare West</b></p> |  |                    |
| <b>W101Q3406</b>  | The ambulance service is not fit for purpose in county Leitrim. Where ambulance times have escalated in Carrick on Shannon and Manorhamilton. Geographically it has got to be looked at again where ambulances are being deployed into neighbouring counties and at the expense of people lives in Leitrim. What steps | <b>Cllr F Gurn</b> |



|   |   |                                    |
|---|---|------------------------------------|
|   | <p>are being taken by NAS to improve the ambulance times in Carrick on Shannon and Manorhamilton? Can a review be done geographically to look at where ambulances are being deployed into neighbouring counties?</p>  |                                    |
| <p>The National Ambulance Service currently operate from Manorhamilton and Carrick on Shannon in County Leitrim. This is further supported by stations in surrounding areas which are Sligo, Boyle, Longford and Cavan. Manorhamilton and Carrick on Shannon operates one day and one night crew.</p> <p>Sligo this year has been upgraded and now has three day crews and two night crews. Via dynamic deployment when either Manorhamilton or Carrick on Shannon crews are attached to calls, we send crews from areas such as Sligo to cover if available.</p> <p>It is envisaged that in 2023, and following a successful recruitment campaign, we hope to further enhance the crewing levels in Sligo and then look at the surrounding areas.</p> <p><b>JJ McGowan, Chief Ambulance Officer - West</b></p>   |   |                                    |
| <p><b>W101Q3407</b></p>   | <p>Can I have an update on Staffing and Beds available and the number of patients presenting with an Eating Disorder and do we have dedicated eating disorder multi-disciplinary teams available to deal with the increase in patients presenting with an eating disorder and where are these beds and staff located?</p> | <p><b>Cllr G<br/>McMonagle</b></p> |
| <p><b><u>Sligo Leitrim Mental Health Service;</u></b></p> <p>As regards the Sligo-Leitrim area, I take it from the question that the information requested is for inpatient presentations with eating disorders. The following is an outline of the admission numbers over the past 5 years to the Medical South ward of Sligo University Hospital, for treatment of severe eating disorders (adult and child):</p> <ul style="list-style-type: none"> <li>• 2017 - 4 admissions (136 bed days)</li> <li>• 2018 - 3 admissions (92 bed days)</li> <li>• 2019 - 3 admissions (82 bed days)</li> <li>• 2020 - 10 admissions (224 bed days)</li> <li>• 2021 - 15 admissions (409 bed days)</li> </ul> <p>There has been no increase in the staffing level of the inpatient teams (medical and mental health liaison) during this period and none planned. The clinicians who treat these patients (both medical and mental health) are not dedicated to eating disorders. It is the same set of clinicians who treat these patients and they do work in a multidisciplinary team manner. However, they take on this additional eating disorder workload in addition to their other full-time roles. There are no dedicated or funded eating disorder beds in SUH.</p> <p>There has been an increased allocation of staffing to the community eating disorder team - with funding approved and recruitment starting in 2022 - of the following:</p> <ul style="list-style-type: none"> <li>• 1 x Senior Psychologist</li> <li>• 1 x Senior Dietician</li> <li>• 1 x Grade IV admin support</li> <li>• 0.2 wte Consultant Psychiatrist</li> </ul> <p>None of the above posts have as yet been filled (as of 12.09.2022) The new clinicians will work in the community rather than in SUH so their appointments will not ease the clinical burden of the inpatient service.</p> <p><b><u>Donegal Mental Health Service;</u></b></p> |   |                                    |

Donegal Mental Health Service do not have the systems that allow us to extract statistics on numbers of patients or on numbers of patients by diagnosis.

Cognitive Behaviour Therapy-Enhanced service for eating disorders is established in all four adult Community Mental Health Teams and is part of the National Clinical Care Programme for eating disorders.

Outpatient department is considered the most appropriate treatment setting for adults with eating disorders if the patient is medically stable with support. Some patients with very low weight, lack of treatment response or comorbidity may need a more highly structured setting than outpatient can provide. Medical admissions to acute hospitals are required for physical stabilisation in severe restricting eating disorders.

In Outpatients Donegal Mental health service offers Cognitive Behaviour Therapy-Enhanced for eating disorders. This is a manualised CBT-ED treatment with 20 or 40 session format starting with twice weekly sessions. The patient is weighed by the therapist as part of therapy. It is an outpatient treatment.

CHO 1 when indicated on clinical grounds will provide funding for admission to private/ independent inpatient eating disorder providers in Ireland.

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

**Community Healthcare West:**

Services to clients with Eating Disorders are provided via Community Outpatient Clinics and the Acute Mental Health Inpatient Units. There are no designated Eating Disorder inpatient beds in Community Healthcare West.

Community Healthcare West has no Adult Specialist Eating Disorders Hub at present and there has been no sanction to date for a specific Adult Specialist Eating Disorder Team. We have however received approval through 2022 Service Development funding to recruit an additional five Senior Dietician's to augment our Adult Community Mental Health Team's and we are continuing to advocate for a full Adult Eating Disorder Team for the Area at National Level.

We have recently received approval to establish a CAMHS Eating Disorder (ED) Specialist Team, and the following is the up to date position on the staffing of our team as of 31.08.2022.

| Location | Grade/Grade Code  | WTE | Status of Recruitment                                |
|----------|---|-----|--|
| CHO2     | Consultant, Child Psychiatrist  | 1   | With Public Appointment Service/awaiting advertising |
|          | Registrar   | 1   | Post filled July 2021                                |
|          | Psychologist, Senior Clinical   | 1   | Post filled Dec 2021                                 |
|          | Social Worker, Senior Medical   | 1   | Post filled March 2022                               |
|          | Clinical Nurse Manager Specialist 1 (Mental Health)   | 1   | Campaign Commenced                                   |
|          | Clinical Nurse Specialist (Mental Health)   | 1   | Interviews complete                                  |
|          | Occupational Therapist, Senior (0.5 coordinator post added to the 0.5 OT post to convert to Fulltime) | 1   | In recruitment process                               |
|          | Dietician, Senior   | 1   | Post filled July 2022                                |
|          | Consultant, Paediatrician   | 0.2 | Progressing with medical manpower GUH                |

|           |          |     |                        |
|-----------|----------|-----|------------------------|
|           | Grade IV | 1   | Post filled March 2022 |
| Total WTE |          | 9.2 |                        |

At the moment the team is operating as support for complex cases from Community Mental Health Teams across the region, when the team becomes fully operational a permanent base will be sought to facilitate the team in Galway City which will cover the 3 counties, Galway, Roscommon and Mayo.

Our systems do not record and report client data by diagnosis - by e.g. Eating Disorder vs ADHD vs Schizophrenia etc.

The Numbers of patients who were admitted since 2020 to the Acute Adult Mental Health Unit, Galway is 10.

Of Note: these numbers represent the numbers of patients not the numbers of admissions - some of these patients were admitted multiple times over the course of a year.

Admissions since 2020 is 7 to the Acute Mental Health Unit, Mayo with an eating disorder.

There are no staff currently working on the AMHU, Mayo, with specialist training in eating disorders and we have no dietician.

CAMHS inpatient admissions for eating disorders (all anorexia nervosa)

2021 - 18

To-date 2022 - 9

**Breda Crehan-Roche, Chief Officer, Community Healthcare West**

|                  |  |                            |
|------------------|--|----------------------------|
| <b>W101Q3408</b> | With patients who present at Letterkenny University Hospital ED continuing to increase, what steps do the hospital intend to take to address this worsening situation? | <b>Clr G<br/>McMonagle</b> |
|------------------|--|----------------------------|

| ED Performance YoY August 2022 vs 2021 |                 |                 |                    |                      |
|--|-----------------|-----------------|--------------------|----------------------|
| Category                               | End August 2021 | End August 2022 | Change 2022 v 2021 | % change 2022 v 2021 |
| 8am Trolley numbers                    | 61              | 136             | 75                 | 44.85%               |
| ED Attendances                         | 27879           | 31077           | 3198               | 11%                  |
| ED Admissions                          | 5049            | 5471            | 422                | 8%                   |

**The following pathways have been introduced to improve the patients experience in the Emergency Department.**

Community Intervention Team - Since the Community Intervention Team commenced its service in February this year it has grown from strength to strength. They provide care to patients in their own homes avoiding hospital attendance/admission and facilitating early discharges from hospital. There are several scenarios which have involved an experienced member of staff from the Community Intervention Team (CIT) attending a patient in their own home, providing an acute episode of care thus enabling the patient and their family to remain at home. Additional funding and resources have been allocated for enhanced CIT.

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

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

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

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

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

Frailty at the Front Door service has commenced. This services carries out a comprehensive assessment on older people looking at alternative pathways to avoid admission or to allow early discharge.

Pathfinder - LUH is a pilot for The Pathfinders Project and this will support pathways to the ICOP team. The recruitment process is underway for this project. This new service aims to safely keep vulnerable older people who have phoned 999/112, in their own home rather than transporting them to the ED for assessment. A specific team of staff will be employed to deliver this service including Advanced Paramedics (AP), Occupational Therapists (OT) and Physiotherapists (PT); will include a Rapid Response Vehicle (RRV) and an Electronic Patient Care Record (EPCR).

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

|                  |   |                            |
|------------------|---|----------------------------|
| <b>W101Q3409</b> | What steps are being taken to ensure the appointment of a second Full Time Endocrinologist for Adults with T1 diabetes at LUH and can I have an update on the LUH plans for the future development of a Proper Diabetes Centre for treating Donegal diabetic patients at LUH? | <b>Clr G<br/>McMonagle</b> |
|------------------|---|----------------------------|

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 currently with the Public Appointment Service for permanent filling. LUH & CHO1 are currently preparing an application for a further Consultant Endocrinologist with 0.5 WTE commitment to LUH and 0.5 WTE to Enhanced Community Care – Chronic Disease management programme.

LUH have two approved CNS adult diabetes posts, one of which is currently vacant and recruitment is ongoing. This post has been advertised and interviews are due to be scheduled for the coming weeks. There is currently one ANP and one CNS in post for the paediatric diabetes service. An ANP in Diabetes in Pregnancy is due to commence 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. Recently the Saolta Group approved a new senior podiatrist post and recruitment has commenced.

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

**W101Q3410**

How many patients are being offered treatment under the NTPF and NI Planned Health Care Scheme on a cross border basis to reduce waiting lists and can I have the numbers as per specialty?

**Clr G  
McMonagle**

The provisions of the Northern Ireland Planned Healthcare Scheme (NIPHS) are implemented on an administrative basis. In general the NIPHS allows public patients to access healthcare in the private healthcare sector in Northern Ireland which they are entitled to access in the public healthcare sector in Ireland. The patient pays for the treatment up front and claims reimbursement upon return to Ireland. Reimbursement is at the cost of the treatment in the private healthcare sector in Northern Ireland or the cost of the treatment in the public healthcare service Ireland whichever is the lesser. Public patient pathways as they apply to accessing the healthcare in Ireland equally apply to accessing the healthcare abroad under the NIPHS.

The scheme is not specific to patients on waiting lists; patients who are not on waiting lists may opt to use the scheme.

|                           | Outpatient |            |    |    |             | Day Case   |            |    |    |            | Inpatient  |            |    |    |       | 2022<br>Total |
|---------------------------|------------|------------|----|----|-------------|------------|------------|----|----|------------|------------|------------|----|----|-------|---------------|
|                           | Q1         | Q2         | Q3 | Q4 | Total       | Q1         | Q2         | Q3 | Q4 | Total      | Q1         | Q2         | Q3 | Q4 | Total |               |
| Orthopaedics              | 433        | 328        |    |    | 761         | 36         | 28         |    |    | 64         | 167        | 127        |    |    | 294   | 1119          |
| Ophthalmology             | 218        | 241        |    |    | 459         | 228        | 278        |    |    | 506        | 0          | 0          |    |    | 0     | 965           |
| ENT                       | 78         | 67         |    |    | 145         | 10         | 5          |    |    | 15         | 20         | 11         |    |    | 31    | 191           |
| Neurology                 | 35         | 31         |    |    | 66          | 7          | 11         |    |    | 18         | 5          | 6          |    |    | 11    | 95            |
| Gynaecology               | 26         | 52         |    |    | 78          | 5          | 7          |    |    | 12         | 10         | 14         |    |    | 24    | 114           |
| General Surgery           | 26         | 20         |    |    | 46          | 10         | 5          |    |    | 15         | 10         | 3          |    |    | 13    | 74            |
| Gastroenterology          | 25         | 6          |    |    | 31          | 11         | 3          |    |    | 14         | 1          | 1          |    |    | 2     | 47            |
| Rehabilitation            | 0          | 2          |    |    | 2           | 0          | 0          |    |    | 0          | 0          | 0          |    |    | 0     | 2             |
| Urology                   | 16         | 10         |    |    | 26          | 10         | 6          |    |    | 16         | 3          | 0          |    |    | 3     | 45            |
| Vascular                  | 19         | 9          |    |    | 28          | 14         | 10         |    |    | 24         | 0          | 0          |    |    | 0     | 52            |
| Cardiology                | 5          | 2          |    |    | 7           | 0          | 0          |    |    | 0          | 0          | 0          |    |    | 0     | 7             |
| Dermatology               | 10         | 11         |    |    | 21          | 0          | 0          |    |    | 0          | 0          | 0          |    |    | 0     | 21            |
| Oral & Maxillo<br>-Facial | 7          | 6          |    |    | 13          | 3          | 1          |    |    | 4          | 0          | 0          |    |    | 0     | 17            |
| Plastic Surgery           | 8          | 7          |    |    | 15          | 2          | 1          |    |    | 3          | 1          | 1          |    |    | 2     | 20            |
| Radiology                 | 1          | 2          |    |    | 3           | 0          | 0          |    |    | 0          | 0          | 0          |    |    | 0     | 3             |
| Podiatric                 | 10         | 2          |    |    | 12          | 6          | 3          |    |    | 9          | 0          | 0          |    |    | 0     | 21            |
| Rheumatology              | 9          | 8          |    |    | 17          | 0          | 0          |    |    | 0          | 0          | 0          |    |    | 0     | 17            |
| Dental                    | 8          | 4          |    |    | 12          | 5          | 6          |    |    | 11         | 0          | 0          |    |    | 0     | 23            |
| Pain Management           | 2          | 4          |    |    | 6           | 3          | 3          |    |    | 6          | 0          | 0          |    |    | 0     | 12            |
| Colorectal                | 1          | 1          |    |    | 2           | 0          | 1          |    |    | 1          | 0          | 0          |    |    | 0     | 3             |
| Orthodontics              | 1          | 5          |    |    | 6           | 0          | 0          |    |    | 0          | 0          | 0          |    |    | 0     | 6             |
| Endocrinology             | 0          | 4          |    |    | 4           | 0          | 0          |    |    | 0          | 0          | 0          |    |    | 0     | 4             |
| Paediatrics               | 7          | 2          |    |    | 9           | 0          | 0          |    |    | 0          | 0          | 0          |    |    | 0     | 9             |
| <b>Grand Total</b>        | <b>945</b> | <b>824</b> |    |    | <b>1769</b> | <b>350</b> | <b>368</b> |    |    | <b>718</b> | <b>217</b> | <b>163</b> |    |    |       | <b>2867</b>   |

Above is activity for 2022 by specialty as requested for Jan to June inclusive.

**EU & North/South Health Unit**

Please see below by speciality NTPF outsourcing offers by speciality for Letterkenny University Hospital.

To date there has been 3,100 patients offered an opportunity to have their inpatient, day case or GI scope procedure carried out by a private provider. Of those 1,587 patients have accepted this offer.

For OPD commissioning, 3,740 patients have been offered an opportunity to be outsourced. Of these 1,978 have accepted the offer.

| IPDC 2022     | Offers | Accepted |
|---------------|--------|----------|
| Gen Surgery   | 533    | 312      |
| Gynaecology   | 471    | 59       |
| Orthopaediacs | 182    | 129      |
| Urology       | 525    | 189      |
| Ophthamology  | 43     | 19       |
| Endo          | 1346   | 879      |
|               | 3100   | 1587     |

| OPD 2022     | Offers | Accepted |
|--------------|--------|----------|
| ENT          | 1557   | 845      |
| Othopaediacs | 597    | 310      |
| Cardiology   | 951    | 528      |
| Urology      | 522    | 225      |
| Gynaecology  | 71     | 41       |
| Vascular     | 42     | 29       |
|              | 3740   | 1978     |

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

|                  |   |                         |
|------------------|---|-------------------------|
| <b>W101Q3411</b> | Could the executive please confirm that they are in favour of options being available in the Development Plan for entrances and exits being available at Merlin Park or do they want to retain only the existing entrance and exit? | <b>Cllr D McDonnell</b> |
|------------------|---|-------------------------|

Yes, we are very much in favour of options being available in the Development Plan for entrances and exits being available at Merlin Park. It is felt that this flexibility is very important to support the strategic development of the site. It is considered that the potential new access route proposed opposite Galway Crystal would support orderly development

and safe access in the future in the context of anticipated future capital developments. It is also felt that the existing entrance you refer to could also be retained and could service primarily the lower end of the site but flexibility for new entrances and exits should be retained in the Development Plan.

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

|                  |  |                        |
|------------------|--|------------------------|
| <b>W101Q3412</b> | Could the HSE please confirm that there is adequate security for staff walking to work in Merlin Park in early mornings because of the anti-social behaviour that is taking place in the vicinity? | <b>Clr D McDonnell</b> |
|------------------|--|------------------------|

Galway University Hospitals have Security staff based at Merlin Park University Hospitals on a 24/7 basis. The Security team at Merlin Park manage instances of anti-social behaviour in conjunction with An Garda Síochána.

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

|                  |  |                       |
|------------------|--|-----------------------|
| <b>W101Q3413</b> | Can I be updated on the future of Dental services at Lifford Community Hospital? | <b>Clr G Crawford</b> |
|------------------|--|-----------------------|

Dental services are currently provided to the people of Lifford and surrounding areas via the dental clinic at Lifford Community Hospital. Going forward, dental services will still be provided to the people of Lifford and surrounding areas via the dental clinic at Lifford Community Hospital

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

|                  |  |                       |
|------------------|--|-----------------------|
| <b>W101Q3414</b> | How many people are awaiting an initial Orthopaedic appointment at UHLKY. How many of them are waiting follow on procedures. How long are is the waiting time. | <b>Clr G Crawford</b> |
|------------------|--|-----------------------|

The following table shows the number of patients awaiting initial consultation with Orthopaedics and also those that are awaiting an Orthopaedic procedure.

Letterkenny University Hospital continues to work with the National Treatment Purchase Fund (NTPF) to validate all waiting lists and to offer patients earlier appointments through outsourcing.

NTPF full package of care is been offered to those awaiting initial consultation in Orthopaedics, in chronological order, with 597 offers issued year to date and 310 patients accepting.

NTPF are also offering outsourcing for a number of Orthopaedic procedures with 182 offers issued year to date and 129 patients accepted.

| Specialty                              | 0-3 Months | 3-6 Months | 6-9 Months | 9-12 Months | 12-18 Months | > 18Months | Total |
|--|------------|------------|------------|-------------|--------------|------------|-------|
| Awaiting Orthopaedic 1st Consultation. | 827        | 590        | 525        | 431         | 472          | 647        | 3492  |
| Awaiting Orthopaedic Procedures        | 204        | 90         | 55         | 57          | 69           | 210        | 685   |

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

|                  |  |                       |
|------------------|--|-----------------------|
| <b>W101Q3415</b> | How many home support workers has been recruited in County Donegal in the last 12 months into the HSE home support team. | <b>Clr G Crawford</b> |
|------------------|--|-----------------------|

There were 101 home care assistants recruited in Co. Donegal between August 2021 and August 2022.

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

|   |   |                       |
|---|---|-----------------------|
| <b>W101Q3416</b>  | I wish to ask the regional health forum to give an overview of the staffing shortages in the injury units in Limerick and Clare. How did we end up in a situation where these injury units were temporarily closed? What is being done to ensure that this doesn't happen again? Who is to take responsibility for this?                    | <b>Cllr L Grant</b>   |
| <p>I wish to acknowledge the staffing issues which in recent weeks resulted in the temporary closure of our Injury Units in Nenagh, Ennis and St John's hospitals. These regrettable service disruptions were all communicated to the public in advance through the media and on social media, including advice on the most appropriate alternatives to access care.</p> <p>These staffing issues related in the main to NCHD resources post the annual changeover and to COVID-19. Plans are at an advanced stage to stabilise medical staffing for these important services and we expect that these temporary closures will be kept to a minimum going forward.</p> <p>These recent disruptions in service are unfortunate as the increase in activity through all three Injury Units is a very positive development. In 2021, a total of 35,860 patients attended our Injury Units, meaning almost one in three patients who needed unscheduled care in our Group appropriately accessed same in Ennis, Nenagh or St John's. This exceeded the level of presentations across our Injury units prior to the pandemic. In the first five months of 2022, attendances at Ennis (+26%) and Nenagh (+60%) Injury Units have increased significantly.</p> <p>UL Hospitals Group would like to apologise to patients who were inconvenienced by these closures in recent weeks, which were made to ensure patient safety, which we strive to protect at all times.</p> <p><b>C. Cowan CEO UL Hospitals Group</b></p> |   |                       |
| <b>W101Q3417</b>  | Emergency dept. LUH and Garda Assistance Requested between Jan.1-Sept 12th, 2022.How many times have security at LUH deemed it necessary and requested Garda to attend the Emergency Department at the Hospital? How often did Gardai respond and attend the Emergency dept in the period Jan 1 <sup>st</sup> - Sept 12 <sup>th</sup> 2022? | <b>Cllr A Doherty</b> |
| <p>The Gardaí were contacted 21 times by security at LUH during the period January 1<sup>st</sup> 2022 to September 12<sup>th</sup> 2022 and responded on all occasions.</p> <p><b>A. Cosgrove, COO, Saolta University Health Care Group</b></p>  |   |                       |
| <b>W101Q3418</b>  | Has an appropriate property been sourced for the delivery and restoration of Day Services in Carndonagh? What current actions are the HSE taking to secure a suitable property for the provision of Day Services in Carndonagh?   | <b>Cllr A Doherty</b> |
| <p>The Day Hospital at Carndonagh Community Hospital is no longer suitable for the provision of a day hospital service and, despite ongoing efforts, it has proven extremely challenging to identify an existing building in the locality that was fit for purpose for the provision of day services.</p> <p>However, a community centre in the locality has recently been identified as a potential Day Hospital to serve the local community. HSE Property Management has deemed the premises as suitable for purpose and HSE Estates has also carried out a technical inspection to determine its suitability as a day hospital. We are now awaiting a technical report from HSE Estates and if deemed suitable, the appropriate paperwork will be drawn up for a potential lease agreement for the premises.</p> <p><b>Dermot Monaghan, Chief Officer, Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo)</b></p>  |   |                       |
| <b>W101Q3419</b>  | Respite provision.<br>How many Inishowen based families have received respite assistance in the period Jan 1 <sup>st</sup> to Sept 12 <sup>th</sup> 2022? What access for Respite provision is presently available at Riverwalk House and Milltown House in Carndonagh?   | <b>Cllr A Doherty</b> |



A total of 17 people from Inishowen have availed of respite at Ballymacool Respite House, Letterkenny from 1<sup>st</sup> January 2022 to 12<sup>th</sup> September 2022. Whilst arrangements are being progressed to have the two people residing in Riverwalk House provided with permanent accommodation, respite grants are also offered to families where respite is required.

There is currently no respite available in Inishowen as Riverwalk Respite House has two people residing there permanently. Urgent referrals for respite are referred to Ballymacool Respite House for consideration and if no respite is available, families are offered a respite grant.

Milltown House is not currently set up for respite and the building is under review with HSE Estates in order to progress the delivery of respite services from this location.

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

|                  |   |                      |
|------------------|---|----------------------|
| <b>W101Q3420</b> | Cashel na Cor Resource Centre.<br>What is the current management and staffing personnel numbers at Cashel na Cor? Will the HSE increase the number of opening days at Cashel na Cor and provide day services for clients similar to what was in situ pre Covid? | <b>Clr A Doherty</b> |
|------------------|---|----------------------|

Approved staffing at Cashel na Cor Disability Day Service, Buncrana, comprises a Manager, Nurse and Health Care Assistants (HCAs). As at August 2022, there were 17.26 Whole-time Equivalent (WTE) staff members working in Cashel na Cor.

The two posts critical for opening Cashel na Cor to pre-COVID levels are a manager and staff nurse and Community Healthcare Cavan Donegal Leitrim Monaghan Sligo (CH CDLMS) Disability Services in conjunction with HR and Recruitment departments are working to expedite replacements for both these posts. The current level of day services will be increased to pre-Covid levels once a manager and nurse have been recruited. These roles are currently being covered from existing staff resources within the wider Disability Services which is impacting on capacity. The post for manager was approved last November but recruitment has been challenging to date. Interviews are due to take place this month and the service, with HR and Recruitment support, aims to have a person in this role as soon as possible.

CH CDLMSI Disability Services are currently undertaking a review of the service delivery and staff skill mix within Cashel na Cor Day Service. This is being progressed alongside recruitment. This review will ensure consideration is given to staff skill mix which will match to the needs of service users and help towards advancing a return to pre-COVID day service levels at the centre.

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

|                  |  |                       |
|------------------|--|-----------------------|
| <b>W101Q3421</b> | Regarding adult psychiatric patients that have been admitted to Letterkenny General Hospital, what support services are in place when they have been discharged? | <b>Clr T Conaghan</b> |
|------------------|--|-----------------------|

All patients discharged have the support of one of six community mental health teams located around the county. These multidisciplinary teams offer outpatient clinics, Clinical Nurse Specialist, Occupational Therapy, Social Work and Clinical Psychology support.

In addition Addiction counsellors and Cognitive Behavioural Therapists make up the team complement and are also available. Extra support is available depending on the client's needs from a 7/7 weekend service and a medium support team for those with enduring needs. Day centres are available in some areas.

All discharged clients have a care plan including contact numbers and safety nets such as the Emergency Department based Deliberate Self Harm Nurses identified.

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

|                  |  |                       |
|------------------|--|-----------------------|
| <b>W101Q3422</b> | How many consultants posts are currently vacant with the Forum Area? In what area of health speciality are the posts vacant and in what locations? | <b>Clr J Connolly</b> |
|------------------|--|-----------------------|

**Saolta University Health Care Group:**

**Mayo University Hospital:**

| No. of Vacant Consultant Posts | Location  | Speciality                      |
|--------------------------------|-----------|---------------------------------|
| 1                              | MUH       | Surgeon                         |
| 1                              | MUH & CHO | Respiratory 0.5 CHO and 0.5 MUH |
| 1                              | MUH       | Geriatric ICPOP                 |
| 1                              | MUH       | Cardiologist                    |
| 1                              | MUH       | Obs & Gynaecology               |
| 2                              | MUH       | Paediatric                      |
| 2                              | MUH       | Orthopaedic                     |

**Roscommon University Hospital:**

Roscommon University Hospital have no vacant Consultant posts. However, we have posts in the following specialities Anaesthetics and Medicine filled on a temporary basis while we continue with recruitment process to fill them permanently.

**Galway University Hospital:**

There are 31 vacant Consultant posts in Galway University Hospitals, 4 are replacement posts and 27 are new posts.

All of the posts are in the process of being advertised/filled.

| Department         | Post   | New/Replacement |
|--------------------|--|-----------------|
|                    |  |                 |
| Emergency Medicine | Consultant in Paediatrician Emergency Medicine | New             |
| Emergency Medicine | Consultant in Emergency Medicine               | New             |
| Emergency Medicine | Consultant in Emergency Medicine               | New             |
| Emergency Medicine | Consultant in Emergency Medicine               | New             |
|                    |  |                 |
| Gastroenterology   | Consultant Gastroenterology si Liver Disease   | New             |
|                    |  |                 |
| General Medicine   | Consultant General Physician                   | New             |
|                    |  |                 |
| Geriatric Medicine | Consultant in Geriatric Medicine               | New             |
| Geriatric Medicine | Consultant in Geriatric Medicine               | New             |
| Geriatric Medicine | Consultant in Geriatric Medicine               | New             |
|                    |  |                 |
| Histopathology     | Consultant Histopathologist                    | Replacement     |
| Histopathology     | Consultant Histopathologist                    | New             |

|                          |   |             |
|--------------------------|---|-------------|
|                          |   |             |
| Intensive Care           | Consultant Intensivist  | New         |
|                          |   |             |
| Medical Oncology         | Consultant Medical Oncologist   | New         |
| Medical Oncology         | Professor/Consultant Medical Oncologist                                       | New         |
|                          |   |             |
| Microbiology             | Consultant Microbiologist   | New         |
|                          |   |             |
| Nephrology               | Consultant Nephrologist   | New         |
|                          |   |             |
| Neurophysiologist        | Consultant Clinical Neurophysiologist   | New         |
|                          |   |             |
| Obstetrics & Gynaecology | Consultant Obstetrician & Gynaecologist SATU                                  | New         |
| Obstetrics & Gynaecology | Consultant Obstetrician & Gynaecologist Oncology                              | New         |
|                          |   |             |
| Oral & Maxillofacial     | Consultant Oral & Maxillofacial Surgeon                                       | New         |
|                          |   |             |
| Orthopaedic Surgery      | Consultant Trauma and Orthopaedic Surgeon                                     | Replacement |
| Orthopaedic Surgery      | Consultant Trauma and Orthopaedic Surgeon s.i. paediatric orthopaedic surgery | New         |
| Orthopaedic Surgery      | Consultant Trauma and Orthopaedic Surgeon s.i. paediatric orthopaedic surgery | New         |
|                          |   |             |
| Paediatrics              | Consultant Paediatrician CASATS   | New         |
| Paediatrics              | Consultant Paediatrician CASATS   | New         |
|                          |   |             |
| Radiation Oncology       | Consultant Radiation Oncologist   | Replacement |
| Radiation Oncology       | Consultant Radiation Oncologist   | New         |
|                          |   |             |
| Radiology                | Consultant Radiologist si Intervention  | Replacement |
|                          |   |             |
| Respiratory              | Consultant Respiratory & General Physician                                    | New         |
| Respiratory              | Consultant Respiratory & General Physician                                    | New         |
| Respiratory              | Consultant Respiratory & General Physician                                    | New         |

**Portiuncula Hospital:**

|             | Vacant | Filled with Temporary Cons |  |
|-------------|--------|----------------------------|--|
| Medicine    | 7      | 2                          | 3 Community Enhanced Posts at Interview (50:50)<br>2 ICOP Post for Interview |
| Surgery     | 1      | 0                          |  |
| Paediatrics | 1      | 1                          | Permanent Cons due to start shortly  |

|                    |   |   |                                       |
|--------------------|---|---|---------------------------------------|
| Obs/Gynae          | 1 | 1 | Post approved at CAAC 13/09/22        |
| Anaesthetics       | 1 | 1 | Post interviewed awaiting appointment |
| Emergency Medicine | 1 | 1 |                                       |

**Letterkenny University Hospital** currently have 74 Approved Consultant posts.

Of these 22.3 posts are not filled on a permanent capacity, however all except 6 are filled on a long term temporary basis.

The 6 unfilled posts are in the areas of Microbiology, Anaesthesia, Community Geriatrics (0.5 WTE), Community Respiratory (0.5 WTE) and Radiology.

**Sligo University Hospital:**

|                    | Vacant | Filled with Temporary Cons |   |
|--------------------|--------|----------------------------|---|
| Medicine           | 4      |                            | <u>Oncology (x1)</u> : Permanent appointee will take up post on October 3 <sup>rd</sup><br><u>Dermatology (x1)</u><br><u>GIM Acute Physician (x1)</u><br><u>GIM Infectious Diseases (x1)</u> – awaiting start date from recommended applicant |
| Surgery            | 1      |                            | <u>Orthopaedics (x1)</u> : awaiting outcome of interview for permanent post (held on 21/09/22)  |
| Paediatrics        | 0      |                            |   |
| Obs/Gynae          | 0      |                            |   |
| Anaesthetics       | 1.5    |                            |   |
| Emergency Medicine |        |                            |   |

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

**Mid West Community Healthcare:**

There are 17 Vacant Posts (see table below)

- 11 Development Roles (4 Mental Health, 3 Primary Care, 4 Older Person's) and
- 6 Replacement Consultant Posts (6 Mental Health)

| Service Area         | Development Roles to be recruited across Mid West Community Healthcare   | Replacement Posts in Mid West Community Healthcare   |
|----------------------|--|--|
| <b>Mental Health</b> | <ol style="list-style-type: none"> <li>1. Consultant General Adult Psychiatrist – General Adult - Clare</li> <li>2. Consultant Child &amp; Adolescent Psychiatrist - CAMHS Hub – Limerick</li> <li>3. Consultant General Adult Psychiatrist – Dual Diagnosis Clinical Programme - Limerick</li> <li>4. Consultant General Adult Psychiatrist – Adult Crisis Resolution Team</li> </ol>   | <ol style="list-style-type: none"> <li>1. Consultant General Adult Psychiatrist – Limerick</li> <li>2. Consultant General Adult Psychiatrist – Limerick</li> <li>3. Consultant General Psychiatrist – North Tipp</li> <li>4. Consultant Child &amp; Adolescent Psychiatrist - Learning Disability - Limerick</li> <li>5. Consultant Adult Psychiatrist – Learning Disability – Limerick</li> <li>6. Consultant Child &amp; Adolescent Psychiatrist - Limerick</li> </ol> |
| <b>Primary Care</b>  | <ol style="list-style-type: none"> <li>1. Consultant Cardiologist – Community Specialist Team - CHO</li> <li>2. Consultant Ophthalmic Surgeon – Limerick</li> <li>3. Consultant Respiratory &amp; General Physician – CDM Acute Support – Limerick</li> </ol>  |  |
| <b>Older Persons</b> | <ol style="list-style-type: none"> <li>1. Consultant Physician in Geriatric Medicine – Community Specialist Team ICPOP – Clare</li> <li>2. Consultant Physician in Geriatric Medicine – Memory Assessment &amp; Support Services – National Dementia Strategy</li> <li>3. Consultant Physician in Geriatric Medicine – Community Specialist Team ICPOP - Limerick</li> <li>4. Consultant General Physician – Frailty at the Front Door – ICPOP – Limerick</li> </ol> |  |

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

***Community Healthcare Organisation, (Cavan, Donegal, Leitrim, Monaghan, Sligo):***

Schedule A below provides a list of the consultant posts which are currently vacant. These posts cover a range of disciplines across CHO1 and fall under the Primary Care, Mental Health and Older People Services. Many of these positions were approved under the National Service Plan 2021/2022.

Included in the schedule provided below are Consultant positions under the ECC Programmes who provide integrated care across the Acute and Community Services; Acute Services are carrying out the recruitment process for these positions. The CHO1 Medical Manpower Manager is co-ordinating the recruitment process for the remaining vacant / development posts. A number of the development posts were approved in recent months and currently going through the CAAC approval process, the remaining positions have been approved by CAAC and are at the recruitment stage.

| Care Group    | Geographical Area (i.e. County) | Replacement/ Development position | Job Title                                   | Service co-ordinating Recruitment | WTE |
|---------------|---------------------------------|-----------------------------------|---|-----------------------------------|-----|
| Mental Health | Sligo                           | Development                       | Consultant General Adult Psychiatrist       | CHO1 Medical Manpower             | 1   |
| Mental Health | Sligo/Leitrim                   | Development                       | Consultant General Adult Psychiatrist       | CHO1 Medical Manpower             | 0.2 |
| Mental Health | Sligo/Leitrim                   | Development                       | Consultant General Adult Psychiatrist       | CHO1 Medical Manpower             | 0.2 |
| Mental Health | Donegal                         | Replacement                       | Consultant General Adult Psychiatrist       | CHO <sup>1</sup> Medical Manpower | 1   |
| Mental Health | Sligo/Leitrim                   | Development                       | Consultant General Adult Psychiatrist       | CHO1 Medical Manpower             | 0.2 |
| Mental Health | Sligo/Leitrim & Donegal         | Development                       | Consultant General Adult Psychiatrist       | CHO1 Medical Manpower             | 1   |
| Mental Health | Donegal                         | Replacement                       | Consultant General Adult Psychiatrist       | CHO1 Medical Manpower             | 1   |
| Mental Health | Sligo                           | Replacement                       | Consultant General Adult Psychiatrist       | CHO1 Medical Manpower             | 1   |
| Older People  | Donegal                         | Development                       | Consultant Physician in Geriatric Medicine* | Acute                             | 1   |
| Older People  | Donegal                         | Development                       | Consultant Psychiatrist of Old Age          | Acute                             | 0.5 |
| Older People  | Sligo/ Leitrim                  | Development                       | Consultant Physician in Geriatric Medicine  | Acute                             | 0.2 |
| Older People  | Sligo/ Leitrim                  | Development                       | Consultant Neurologist                      | Acute                             | 0.1 |

|              |               |             |  |                       |   |
|--------------|---------------|-------------|--|-----------------------|---|
| Primary Care | Donegal       | Replacement | Consultant Ophthalmic Surgeon / Ophthalmologist  | CHO1 Medical Manpower | 1 |
| Primary Care | Sligo Leitrim | Development | Consultant Ophthalmic Surgeon / Ophthalmologist  | CHO1 Medical Manpower | 1 |
| Primary Care | Donegal       | Development | Consultant in Endocrinology, Lead in Integrated Diabetes Care *  | Acute                 | 1 |
| Primary Care | Donegal       | Development | Consultant in Respiratory Medicine, Lead in Integrated Respiratory Care and General Internal Medicine* | Acute                 | 1 |
| Primary Care | Sligo         | Development | Consultant in Respiratory Medicine, Lead in Integrated Respiratory Care and General Internal Medicine* | Acute                 | 1 |

There are 3 methods of consultant recruitment all of which deliver a “wrap around” service. These are Permanent, HSE Locum and Agency Locum. The Human Resources Department continues to work with all stakeholders including the HBS in the recruitment to these posts. There are a number of consultant posts which remain vacant, despite advertising in national and international media. Efforts are continuing to attract persons to the region to take up consultant posts. One such initiative is being led by Ms Eithne Fox, Assistant National Director of Recruitment, Reform and Resourcing HSE National HR, to look at these “difficult to recruit to” posts. The CHO1 Medical Manpower Manager is working closely with Ms. Fox in this regard representing CHOs. Currently there are three main approaches to this work:

1. Identify the pros and cons of each role i.e. what is most attractive and can be highlighted
2. Establish the best lines of communication to reach potential candidates e.g. professional connections, conferences, training bodies, international journals/websites
3. Develop the content of promotional materials around the benefits of working and living in Donegal e.g. lifestyle, schools, housing, national/international transport links

Focus Groups have commenced in the CHO1 areas to address difficult to fill posts in our area.

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

**Community Healthcare West:**

| Vacant Consultant Posts |                             |   |
|-------------------------|-----------------------------|---|
| CHO 2                   | CAMHS Galway Roscommon Mayo | Consultant Child & Adolescent Psychiatrist  |
|                         | CAMHS Galway Roscommon Mayo | Consultant Child & Adolescent Psychiatrist s.i. psychiatry of learning disability |
|                         | CAMHS Galway Roscommon Mayo | Consultant Child & Adolescent Psychiatrist Roscommon/ Ballinasloe                 |
|                         | MHS Galway / Roscommon      | Consultant Psychiatrist of Learning Disability (adult)                            |

|  |                           |  |
|--|---------------------------|--|
|  | <b>MHS Mayo</b>           | Consultant General Adult Psychiatrist      |
|  | <b>CHO 2 Galway</b>       | Consultant Medical Ophthalmologist         |
|  | <b>CHO 2 Mayo</b>         | Consultant Medical Ophthalmologist         |
|  | <b>CHO 2 Roscommon</b>    | Consultant Medical Ophthalmologist         |
|  | <b>CHO2/ MUH 0.5/ 0.5</b> | Consultant Respiratory & General Physician |

**Breda Crehan-Roche, Chief Officer, Community Healthcare West**

**UL Hospitals Group:**

The recruitment of additional consultants is a priority for UL Hospitals Group. It is one of the key elements in our efforts to improve hospital waiting lists in this region, along with the recruitment of additional NCHDs, Advanced Nurse Practitioners, Clinical Nurse Specialists, Extended Scope Physiotherapists and Clerical/Admin Staff Grades.

It should be noted that the challenges for healthcare recruitment are not unique or specific to the Mid-West. These challenges are also being experienced nationally and globally. Other factors to be considered include the timeframe between interview of candidates and appointment of consultants, which can be significant. In UL Hospitals Group, the typical timeframe ranges from three months up to nine months. This depends on several factors, including specialist registration, completion of fellowships or appointments abroad, and the quite lengthy clearance process in line with national processes and codes of practice around the appointment of posts to the civil and public service.

UL Hospitals Group operates under the auspices of the national HSE Performance & Accountability Framework, where any posts for recruitment progression must advance through our local Employment Control Committee for approval and similarly any senior posts, must be approved at a national level. Increases in WTEs over the last few years have been largely concentrated on new bed capacity development and sanctioned funding initiatives under the HSE National Service Plan & Winter Service Plan. Similar to any organisation, a significant part of vacancies arise due to natural attrition such as retirement. As travel opportunities open up post-pandemic, it is expected that some staff may choose to avail of same. ULHG is constantly recruiting and is committed to having a well-resourced workforce to support the patient needs of the Mid-West.

Please see below details of permanent vacant consultant posts across the organisation, these do not include posts filled by locum consultants.

| <b>Location</b>    | <b>Subspecialty</b> | <b>Number of vacant posts</b> | <b>Title of Post</b>  |
|--------------------|---------------------|-------------------------------|---|
| UL Hospitals Group | Anaesthesiology     | 3                             | -Consultant Anaesthesiologist<br>- Consultant in Pain Medicine<br>- Consultant Anesthesiologist (intensive care medicine) |
| UL Hospitals Group | Otolaryngology      | 1                             | Consultant Otolaryngologist   |



|  |                                   |    |  |
|--|-----------------------------------|----|--|
| UL Hospitals Group                         | Infectious Diseases               | 1  | Consultant Physician in Infectious Diseases                            |
| UL Hospitals Group /University of Limerick | General Medicine                  | 1  | Consultant General Physician/Senior Lecturer University of Limerick    |
| UL Hospitals Group                         | Gastroenterology                  | 3  | Consultant Gastroenterologist & General Physician                      |
| UL Hospitals Group                         | General Paediatrics               | 1  | Consultant Paediatrician (respiratory medicine)                        |
| UL Hospitals Group                         | Neurology                         | 1  | Consultant Paediatric Neurologist                                      |
| UL Hospitals Group /CHO 3                  | Geriatric Medicine                | 2  | Consultant Physician in Geriatric Medicine Integrated Care             |
| UL Hospitals Group /CHO 3                  | Cardiology                        | 1  | Consultant Cardiologist Integrated Care                                |
| UL Hospitals Group                         | Radiology                         | 2  | -Consultant Radiologist<br>- Consultant Radiologist (breast radiology) |
| UL Hospitals Group                         | Endocrinology & Diabetes Mellitus | 1  | Consultant Physician in Endocrinology and Diabetes Mellitus            |
| UL Hospitals Group                         | Nephrology                        | 1  | Consultant Nephrologist & General Physician                            |
| UL Hospitals Group                         | Obstetrics & Gynaecology          | 1  | Consultant Obstetrician & Gynaecologist                                |
| <b>Total</b>                               |                                   | 19 |  |

**C. Cowan CEO UL Hospitals Group**

**W101Q3423**

What date will the new Temporary A&E at GUH open and what is the official capacity of the new facility?

**Clr J Connolly**

The construction of the interim (temporary) ED commenced in June 2021 and is programmed to be completed in Q3 2022. The handover of the Phase 1 temporary Emergency Department from the contractor occurred in August 2022, with commissioning currently underway. The aim is to open the temporary ED by the end of September/beginning of October 2022. The temporary ED will have more capacity with 43 patient bays compared to 34 bays in the pre-COVID ED. The temporary ED will provide 43 single closed cubicles & extra Resuscitation bays providing greater dignity and privacy for patients.

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

|                  |  |                        |
|------------------|--|------------------------|
| <b>W101Q3424</b> | According to HSE Capital & Estates, 2021, there is 50'000 m <sub>2</sub> of vacant or unused HSE properties in Co Galway. Can the forum be informed of the location and type of property and for how long each property has been vacant? | <b>Cllr J Connolly</b> |
|------------------|--|------------------------|

I am unclear of the exact source of information referred to in the question where it is advised that a figure of 50,000 m<sub>2</sub> has been formally advised previously for vacant or unused HSE properties in County Galway. I am attaching a spreadsheet (Appendix 1) which lists the current vacant or unused HSE properties in Co. Galway as requested. This list totals an overall gross internal area of 33,341 square metres of which 96% or 31,941 square metres relates to the St Brigid's Campus in Ballinasloe.

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

|                  |  |                        |
|------------------|--|------------------------|
| <b>W101Q3425</b> | Can the Forum be updated on efforts to develop a Primary care centre on the Western Side of Galway City? | <b>Cllr J Connolly</b> |
|------------------|--|------------------------|

Engagement between the HSE's Capital & Estates division and the successful bidder for the delivery of primary care accommodation for Galway City West is ongoing. Our understanding is that there was a requirement identified in order to accurately assess vehicular traffic data and to inform the design process for some traffic engineering studies to be carried out during the school term. A report on same is to be completed and submitted as part of the planning permission application. This matter has been progressed and a preplanning meeting is due to be held with the local authority in the coming week. Further engagement with the HSE on the latest scheme to review layouts, adjacencies etc. is also planned for the coming weeks. It is anticipated that a planning permission can be lodged by early December 2022.

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

|                  |  |                    |
|------------------|--|--------------------|
| <b>W101Q3426</b> | In relation to the children's Disability Network Team, why were children from the South Roscommon area, moved from the Roscommon area to region CDNT8 in Loughrea Co Galway? | <b>Cllr T Ward</b> |
|------------------|--|--------------------|

Children's Disability Network Teams (CDNT) in Community Healthcare West area are aligned with the Community Healthcare Networks & Primary Care Teams in line with national practice. This Community Healthcare Network geographical map was agreed on a national basis and this is inclusive of the 9 CDNTs in Community Healthcare West. Whilst the team base is currently Loughrea services are delivered from a number of locations including Loughrea, Ballinasloe and Monksland

**Breda Crehan-Roche, Chief Officer, Community Healthcare West**

|                  |  |                    |
|------------------|--|--------------------|
| <b>W101Q3427</b> | What percentage of these children from South Roscommon are currently receiving services? what services are they receiving? | <b>Cllr T Ward</b> |
|------------------|--|--------------------|

58% of children are active on the CDNT 8 caseload as per 13<sup>th</sup> Sept 2022.

The CDNT members deliver services to children 0-18 years. Input to each child is on a needs basis. The CDNT 8 comprises of the following disciplines: Speech & Language Therapy (SLT), Physiotherapy, Psychology, Occupational Therapy, Social Work, Nursing, Behaviour Support etc.

**Breda Crehan-Roche, Chief Officer, Community Healthcare West**

|                  |  |                    |
|------------------|--|--------------------|
| <b>W101Q3428</b> | Are the families from South Roscommon expected to travel to Loughrea in Co. Galway for the services? | <b>Cllr T Ward</b> |
|------------------|--|--------------------|

The location of CDNT 8 is currently based in Loughrea. It is envisaged that the team will relocate to a Ballinasloe/South Roscommon base when suitable accommodation is available.

At this time CDNT 8 members use a number of locations for therapy intervention and meetings which include Ballinasloe, Monksland and Loughrea locations.

Delivery of service can also take place in the family home, school, preschool etc.

Input to each child is needs based and this includes family circumstances and are resource dependent.

**Breda Crehan-Roche, Chief Officer, Community Healthcare West**

|                  |   |                    |
|------------------|---|--------------------|
| <b>W101Q3429</b> | Are the children that were moved from Co. Roscommon C.D.N.T.9 to Loughrea C.D.N.T.8 are they guaranteed to retain the same services that they were receiving in Co Roscommon. | <b>Cllr T Ward</b> |
|------------------|---|--------------------|

Input for each child is needs based with continuity of care paramount for any child transferring across teams. All CDNTs have a similar skill mix inclusive of SLT, Physiotherapy, Psychology, Occupational Therapy, Social Work, Nursing staffing. Whilst every effort will be made to ensure services are delivered to the child in a consistent way this may not be possible in every situation as there are staff vacancies as a result of recruitment challenges.

At this time CDNT 8 members use a number of locations for therapy intervention and meetings which include Ballinasloe, Monksland and Loughrea locations.

**Breda Crehan-Roche, Chief Officer, Community Healthcare West**

|                  |  |                               |
|------------------|--|-------------------------------|
| <b>W101Q3430</b> | Numbers Suicides recorded annually since 2019 to date in CHO2 breakdown by year, age, sex, and county. How many inquests have yet to be carried out for this period in these counties? | <b>Cllr E Francis Parsons</b> |
|------------------|--|-------------------------------|

In Ireland, the decision as to whether someone has died by suicide is a *legal* determination made by Coroners, *not* a medical decision by doctors or the HSE.

Death due to intentional self-harm is classified as an unnatural death and therefore, must be referred to the Coroner for investigation. This investigation can take a protracted length of time to complete for various reasons (such as getting medical reports, health and safety reports, engineer's report, the involvement of the Director of Public Prosecutions etc.) and this delays the registration of such deaths. A standard of proof (beyond reasonable doubt) is required for a suicide verdict.

**Data available from the CSO:**

Annual data from the CSO is delivered in three stages;

1. Provided firstly by year of registration – “provisional”
2. Revised later, by year of occurrence – “official”
3. Revised later again, to include “late registrations”.

The CSO have published their new bulletin on suicide statistics (including 2015-2019 summaries), available on below link:

<https://www.cso.ie/en/releasesandpublications/ep/p-ss/suicidestatistics2019/>

In relation to the number of inquests carried out, HSE does not collate this data.

**Further information:**

It may be of interest that the NOSP is currently in on-going discussions with other key national agencies to improve the availability of accurate and timely data. This will involve the development of comprehensive data-sharing agreements and protocols with agencies independent from the HSE, and will support key objectives in Connecting for Life, Ireland's National Strategy to Reduce.

**Breda Crehan-Roche, Chief Officer, Community Healthcare West**

|                  |   |                               |
|------------------|---|-------------------------------|
| <b>W101Q3431</b> | Update on HSE vacating the buildings and progression of St Brigid's Hospital campus Ballinasloe for listing on state register DPER. | <b>Cllr E Francis Parsons</b> |
|------------------|---|-------------------------------|

Under the Protocol for the Intra State Transfer and Sharing of State Property Assets and the Protocol for the Policy for Property Acquisition and for Disposal of Surplus Property, the HSE identified various properties within St. Brigid's Campus including the former Mental Health facility on the State Property Register as surplus/available property. In September 2018, the Office of Public Works (OPW) expressed an initial only interest in considering St Brigid's Hospital and adjacent lands for their business needs. The following October 2019, after examination and consideration the OPW advised they were not interested as they believed the property was not suitable.

In October 2020, the Department of Education and Skills made a formal expression of interest for the transfer of 4 acres of land for the provision of new school accommodation. This sale has been agreed and is subject to planning permission which the Department of Education & Skills are progressing.

HSE will be retaining existing health facilities currently in operation along with elements of land for potential future use and development. This will likely include a potential development site for a proposed new Primary & Ambulatory Care Centre in the context of the Enhanced Community Care (ECC) programme. The remaining surplus lands and buildings including the old hospital buildings are to be disposed of. In order for the HSE to dispose of the former mental health buildings & land identified as surplus to requirements, the HSE is working through some steps to prepare the property for disposal. This has recently included decanting of some remaining mental health services. There are some further services to be decanted along with the preparation/rectification of title/folios maps and decommissioning of utility services. It is hoped to commence work on a strategy for disposal of the site before the end of this year.

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

|                  |   |                               |
|------------------|---|-------------------------------|
| <b>W101Q3432</b> | 50,000 Ukrainians have arrived in Ireland The HSE has had contact with approx. 240 Ukrainian doctors here who have provided details about their experience. Can details be provided on how many Ukrainian Drs are residing within HSE West Area? How long before they can be fully registered with Medical Council and allowed to practice here? What interim options are HSE West exploring to expand their use in other health roles which do not require registration? | <b>Cllr E Francis Parsons</b> |
|------------------|---|-------------------------------|

The HSE has been engaging with Ukrainian Doctors from multiple contact points including those who registered with the HSE online portal (approx. 240) and those referred through various informal channels. We cannot confirm where people are currently located as we believe many have been relocated since providing the information.

The HSE has put these doctors in contact with the relevant postgraduate training bodies, and provided information about the engagement with the Medical Council. They have also been provided with access to HSE library resources to facilitate their further learning and maintenance of professional knowledge. For many doctors arriving from Ukraine the immediate challenge is to obtain the necessary English language proficiency and we know many are engaging in learning English.

HSE is developing a new policy proposal to facilitate doctors who may be awaiting registration to undertake "observerships", which are a defined period of time where these doctors can attend a hospital or health service to observe the practice of medicine in that environment, and become more familiar with the processes and procedures without being directly involved in patient care and in a strictly supervised fashion. A number of hospitals have already

facilitated doctors in this way. These roles are not paid, are closely restricted and are not working as doctors or providing patient care.

The HSE is not able to employ doctors to practice in Ireland without appropriate registration. The authority for registration and recognition of qualifications is the Medical Council of Ireland. HSE are engaging closely with the Medical Council to explore any and all options available in this regard. The Medical Council may be able to provide details on how long it would take for the registration process to be completed.

We are aware that some doctors have been employed as clerical staff, translators and other work within the health system which does not require registration. The HSE is exploring the potential to expand and build on this. Developing opportunities to employ these doctors is part of an active programme of work within HSE involving senior staff in Clinical, operational and Human Resources working in close collaboration.

There is also close and active collaboration ongoing in respect of Ukrainian doctors arriving into Ireland between the HSE, the Department of Health, the Medical Council and the postgraduate training bodies for medical specialties, with meetings occurring on a weekly basis.

The Department of Health has been working to provide a range of practical supports and they can provide details on this. This is in addition to the other supports being put in place for those arriving from Ukraine generally such as language classes.

The various postgraduate training bodies have individually provided a variety of supports to doctors from their area of specialties who have been identified to them

**Strategic Planning Unit, HSE**

|                  |   |                              |
|------------------|---|------------------------------|
| <b>W101Q3433</b> | Please outline the waiting list for HSE orthodontics time/ age / gender in CHO 2 and the HSE procedures for referral to Orthodontics for children up to age 18. | <b>Clr E Francis Parsons</b> |
|------------------|---|------------------------------|

The Orthodontic Department is a referral based service providing orthodontic treatment for patients referred in mainly by their school dental service in Galway, Mayo and Roscommon. These patients are usually referred in following their school screening at 2nd, 4th and 6th Class in primary school or occasionally private dentists if there might be an orthodontic treatment need. All patients must be under 16 years of age at the time of referral. These patients are then assessed at a clinic to determine if they are eligible for treatment within our service - using defined national criteria - the Index of Orthodontic Treatment Need (IOTN) modified for HSE use. See attached.



[hse-orthodontic-eligibility-guidelines.p](#)

Currently there are 1,372 patients on the Orthodontic Treatment Waiting List. The Treatment Waiting List is 3 years and 2 months. Between July 2021 and July 2022 a total of 1,893 patients were assessed with 863 commencing treatment during the same period.

The Assessment Waiting List is approximately 3 months and there are 431 patients on this assessment waiting list (all of these patients have appointments booked).

**The gender breakdown is displayed as follows:**

| <u>Gender</u> | <u>Number</u> |
|---------------|---------------|
| Female        | 716           |

|      |     |
|------|-----|
| Male | 656 |
|------|-----|

The Age breakdown is as follows:

| Age   | No. of Patients | Age     | No. of Patients |
|-------|-----------------|---------|-----------------|
| >17   | 1               | 10-11   | 145             |
| 16-17 | 36              | 9-10    | 68              |
| 15-16 | 148             | 8-9     | 27              |
| 14-15 | 217             | 7-8     | 9               |
| 13-14 | 271             | 6-7     | 3               |
| 12-13 | 232             | Under 6 | 0               |
| 11-12 | 215             |         |                 |

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

|                  |  |                      |
|------------------|--|----------------------|
| <b>W101Q3434</b> | How many people use the Minor injury unit in Nenagh, St Johns and Ennis by quarter since January 1 <sup>st</sup> 2019? | <b>Cllr S Morris</b> |
|------------------|--|----------------------|

Please see below for a breakdown of the numbers of persons who used the Injury Units at Nenagh, Ennis and St John's Hospitals by quarter since January 1<sup>st</sup> 2019:

| Location        | Year | Q1    | Q2    | Q3    | Q4    | Total         |
|-----------------|------|-------|-------|-------|-------|---------------|
| Ennis Hospital  | 2019 | 2,618 | 3,134 | 3,203 | 2,568 | <b>11,523</b> |
| Ennis Hospital  | 2020 | 2,380 | 2,144 | 2,968 | 2,045 | <b>9,537</b>  |
| Ennis Hospital  | 2021 | 1,963 | 3,172 | 3,379 | 2,705 | <b>11,219</b> |
| Ennis Hospital  | 2022 | 2,657 | 3,606 |       |       | <b>6,263</b>  |
|                 |      |       |       |       |       |               |
| Nenagh Hospital | 2019 | 2,229 | 2,654 | 2,892 | 2,250 | <b>10,025</b> |
| Nenagh Hospital | 2020 | 2,116 | 1,874 | 2,672 | 2,010 | <b>8,672</b>  |

|                              |      |       |       |       |       |                |
|------------------------------|------|-------|-------|-------|-------|----------------|
| Nenagh Hospital              | 2021 | 1,501 | 2,795 | 3,112 | 2,563 | 9,971          |
| Nenagh Hospital              | 2022 | 2,732 | 3,620 |       |       | 6,352          |
|                              |      |       |       |       |       |                |
| St. John's Hospital Limerick | 2019 | 2,676 | 2,973 | 3,055 | 2,817 | 11,521         |
| St. John's Hospital Limerick | 2020 | 2,617 | 2,811 | 3,587 | 2,693 | 11,708         |
| St. John's Hospital Limerick | 2021 | 2,258 | 5,118 | 3,619 | 3,675 | 14,670         |
| St. John's Hospital Limerick | 2022 | 5,111 | 4,596 |       |       | 9,707          |
| <b>Overall Total:</b>        |      |       |       |       |       | <b>121,168</b> |

**C. Cowan CEO UL Hospitals Group**

|                  |  |                      |
|------------------|--|----------------------|
| <b>W101Q3435</b> | Can I have a breakdown of staffing levels in each unit quarterly since the above date? | <b>Cllr S Morris</b> |
|------------------|--|----------------------|

Please see below for a breakdown of the staffing levels in the Injury Units at Nenagh, Ennis and St John's Hospitals since January 1<sup>st</sup> 2019:

**Ennis Injury Unit:**

| Year | Staffing levels  |
|------|--|
| 2019 | 2 emergency care physicians<br>1 Advanced Nurse Practitioner<br>2.4 WTE portering staff<br>2.65 WTE clerical staff<br>2.22 WTE hygiene support |

|      |  |
|------|--|
| 2020 | 2 emergency care physicians<br>2 Advanced Nurse Practitioners<br>2.4 WTE portering staff<br>2.65 WTE clerical staff<br>2.22 WTE hygiene support  |
| 2021 | 2 emergency care physicians<br>2 Advanced Nurse Practitioners<br>1 candidate Advanced Nurse Practitioner<br>2.4 WTE portering staff<br>2.65 WTE clerical staff<br>2.22 WTE hygiene support |
| 2022 | 2 emergency care physicians<br>2 Advanced Nurse Practitioners<br>1 candidate Advanced Nurse Practitioner<br>2.4 WTE portering staff<br>2.65 WTE clerical staff<br>2.22 WTE hygiene support |

**Nenagh Injury Unit:**

| <b>Year</b> | <b>Staffing levels</b>  |
|-------------|---|
| 2019        | 2 emergency care physicians<br>3.6 WTE Staff Nurses<br>1 Advanced Nurse Practitioners<br>2.65 WTE clerical staff<br>0.5 WTE hygiene support |
| 2020        | 2 emergency care physicians<br>3.6 WTE Staff Nurses<br>3 Advanced Nurse Practitioners<br>2.65 WTE clerical staff<br>0.5 WTE hygiene support |
| 2021        | 2 emergency care physicians<br>3.6 WTE Staff Nurses<br>3 Advanced Nurse Practitioners   |



|      |   |
|------|---|
|      | 2.65 WTE clerical staff<br>0.5 WTE hygiene support  |
| 2022 | 2 emergency care physicians<br>3.6 WTE Staff Nurses<br>3 Advanced Nurse Practitioners<br>2 candidate Advanced Nurse Practitioners<br>2.65 WTE clerical staff<br>0.5 WTE hygiene support |

**St John's Injury Unit:**

| Year | Staffing levels   |
|------|---|
| 2019 | 1 Consultant<br>2 Registrars<br>2 Staff Nurses<br>2 Advanced Nurse Practitioners<br>1 Candidate Advanced Nurse Practitioner<br>1 WTE clerical staff<br>1 WTE Porter<br>1 WTE Radiographer |
| 2020 | 1 Consultant<br>2 Registrars<br>2 Staff Nurses<br>2 Advanced Nurse Practitioners<br>1 Candidate Advanced Nurse Practitioner<br>1 WTE clerical staff<br>1 WTE Porter<br>1 WTE Radiographer |
| 2021 | 1 Consultant<br>2 Registrars<br>2 Staff Nurses<br>3 Advanced Nurse Practitioners<br>1 Candidate Advanced Nurse Practitioner<br>1 WTE clerical staff<br>1 WTE Porter<br>1 WTE Radiographer |
| 2022 | 1 Consultant<br>2 Registrars<br>2 Staff Nurses<br>3 Advanced Nurse Practitioners  |

1 Candidate Advanced Nurse Practitioner  
 1 WTE clerical staff  
 1 WTE Porter  
 1 WTE Radiographer

**C. Cowan CEO UL Hospitals Group**

|                  |   |                      |
|------------------|---|----------------------|
| <b>W101Q3436</b> | <b>At what point did management decide to close these units recently?</b> | <b>Cllr S Morris</b> |
|------------------|---|----------------------|

I wish to acknowledge the staffing issues which in recent weeks resulted in the temporary closure of our Injury Units in Nenagh, Ennis and St John's hospitals. These regrettable service disruptions were all communicated to the public in advance through the media and on social media, including advice on the most appropriate alternatives to access care.

These staffing issues related in the main to NCHD resources post the annual changeover and to COVID-19. Plans are at an advanced stage to stabilise medical staffing for these important services and we expect that these temporary closures will be kept to a minimum going forward.

These recent disruptions in service are unfortunate as the increase in activity through all three Injury Units is a very positive development. In 2021, a total of 35,860 patients attended our Injury Units, meaning almost one in three patients who needed unscheduled care in our Group appropriately accessed same in Ennis, Nenagh or St John's. This exceeded the level of presentations across our Injury units prior to the pandemic. In the first five months of 2022, attendances at Ennis (+26%) and Nenagh (+60%) Injury Units have increased significantly.

UL Hospitals Group would like to apologise to patients who were inconvenienced by these closures in recent weeks, which were made to ensure patient safety, which we strive to protect at all times.

**C. Cowan CEO UL Hospitals Group**

|                  |   |                      |
|------------------|---|----------------------|
| <b>W101Q3437</b> | <b>Can you release the capacity v demand analysis of University Hospital Limerick for each quarter since January 1<sup>st</sup> 2009?</b> | <b>Cllr S Morris</b> |
|------------------|---|----------------------|

Managing crowding at University Hospital Limerick (UHL) remains a priority for the executive of UL Hospitals Group and all our site managers.

During busy periods, our Escalation Plan is activated which includes additional ward rounds and identifying patients for discharge or transfer to Model 2 hospitals in Ennis, Nenagh and St John's Hospitals. We also work together with our colleagues in HSE Midwest Community Healthcare in order to expedite discharges

Unfortunately, UL Hospitals Group does not have data outlining the capacity vs demand for University Hospital Limerick for each quarter since January 1<sup>st</sup> 2009. However, I can advise that bed capacity at UHL often operates above capacity. For example, in 2021, UHL's bed capacity was operating at 105%, please see below for a breakdown:

| Hospital | 2021 available bed nights | 2021 Actual Bed Nights | Occupancy Rate |
|----------|---------------------------|------------------------|----------------|
| UHL      | 182,135                   | 190,693                | 105%           |

In addition, prior to the COVID-19 pandemic, Emergency Department demand was measured via the Full Capacity Protocol (FCP). This protocol would be activated to alleviate pressure on the ED. The FCP was activated once the number

of admitted patients waiting on trolleys in the ED exceeded 16. This practice was also common in other major acute hospitals around the country when significant capacity issues were faced.

The below table outlines the number of times the FCP had been used in University Hospital Limerick between 2011 – 2018.

| <b>Year</b> | <b>Number of days FCP was used</b> |
|-------------|------------------------------------|
| 2011        | 69                                 |
| 2012        | 314                                |
| 2013        | 109                                |
| 2014        | 143                                |
| 2015        | 217                                |
| 2016        | 304                                |
| 2017        | 361                                |
| 2018        | 364                                |

It is essential that seriously ill or injured patients requiring emergency care attend the ED at UHL, where care is prioritised for those who need it most urgently. We continue to urge people with less serious ailments and injuries to consider the alternatives to ED, which include family doctors, out-of-hours GP services, pharmacies, and the Injury Units in Ennis, Nenagh and St John's Hospitals.

In the longer term, we have been working with a team of HSE experts on unscheduled care and ED management. This HSE support team has also been engaging with colleagues in HSE MidWest Community Healthcare. As part of our Winter Plan, we welcome the additional supports to improve patient flow.

In addition, the CEO of UL Hospitals Group has commissioned Deloitte to conduct an external review of patient flow at UHL and provide an independent and comprehensive overview of patient flow through the ED while also looking at use of resources and processes in place and identifying any constraints.

The longstanding efforts of local management and staff, and of the HSE nationally, to alleviate pressure on the ED through adding capacity, resources and providing alternatives also need to be acknowledged.

These include a 37% increase in staff across UL Hospitals Group since December 2019; and an increase in bed capacity at UHL of 98 inpatient beds and 10 critical care beds since the start of the pandemic. More patients have been receiving care than ever before at UHL, with an increase of 24% in inpatient discharges between 2019 and 2021 and a further year-on-year increase of 12% in the first quarter of 2022.

In addition, the contractor for the new 96-bed block project at UHL has been appointed, and is scheduled to be on site by October of this year.

We continue to work with colleagues in HSE Mid West Community Healthcare on integrated care pathways and hospital avoidance, including initiatives focused on older people living with frailty. These initiatives include:

- Integrated Care Programme for Older Persons (ICPOP): a community-based specialist service that provides rapid access to a multidisciplinary-delivered comprehensive geriatric assessment (CGA) for older adults living with frailty or at risk of developing frailty. To the end of June this year, ICPOP teams in Clare, Limerick and North Tipperary have received approximately 400 referrals and completed approximately 3,000 assessments and interventions.
- Almost 6,000 radiology tests completed up to the end of April 2022 under the direct GP access Community Diagnostics Programme.
- Community Intervention Teams (CIT) based in Clare, Limerick and North Tipperary focus on hospital avoidance and early supported discharge to the person's home.

None of this is to minimise the impact of long waits on patients and their loved ones, and we apologise to everyone who has been impacted. All of the measures outlined above are a patient-centred response to the challenges of unprecedented and rising demand for emergency care in the MidWest over the past 15 months. Last year, the ED at UHL saw a record 76,473 attendances, 17% greater than in 2020. In the first four months of 2022, there were 26,548 ED attendances, an increase of 20% on the corresponding period in 2021. The number of over 75s attending our ED has risen by an even greater proportion.

It remains the strong belief of UL Hospitals Group that the Mid-West must have an elective hospital to serve the needs of patients here. The Group has made its case directly to the Minister for Health, and expressed concern about the Mid-West not being included in national plans for elective sites agreed for Galway and Cork. We urge all stakeholders in healthcare in the Mid-West to come together in an effort to ensure the development of an elective-only hospital for this region. This will help to ensure a level of public hospital care that the people of the Midwest deserve into the future, with an equal focus on efficient delivery of elective and emergency care.

**C. Cowan CEO UL Hospitals Group**

|                  |   |                    |
|------------------|---|--------------------|
| <b>W101Q3438</b> | Noting that the provision of a full time catheterisation lab for Sligo was recommended by the HSE's North West Cardiology Review Group in 2013; and noting that the Saolta University Health Care Group in 2017 called for the provision of a full time permanent Cath Lab service at Sligo University Hospital; and further noting that the part time mobile Cath Lab service at the Hospital ceased operation on the 30 <sup>th</sup> of June this year; can the Health Forum now be advised when a full time permanent Cath Lab service will be provided in Sligo University Hospital. | <b>Cllr D Bree</b> |
|------------------|---|--------------------|

Following the decision of a private company to cease the mobile Cath Lab Services at Sligo University Hospital, the Saolta Group worked with hospital management on possible contingency measures.

As a result the service is being temporarily provided at University Hospital Galway. Referrals in Sligo for Cardiology angiograms and angioplasty are completed in Galway University Hospital Cath Lab with a Consultant Cardiologist from Sligo University Hospital undertaking the procedures on a weekly basis.

Designated access is provided for Sligo patients at the UHG Cath Lab unit. This arrangement will stay in place until the publication of the National Review of Cardiac Services.

Extensive discussions have taken place between hospital and Saolta Management, HSE representatives and Department of Health regarding future developments in Cardiology Services in Sligo University Hospital. This has led to Minister Donnelly giving a commitment towards the development of Cardiology CT service together with an increase in Consultant Cardiologist and support team. This service expansion will allow the hospital to provide the most up to date and modern diagnostic service for patients in the locality. This will also provide better opportunity to attract high calibre Consultant Cardiologists into the cardiology service.

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

|                  |   |                    |
|------------------|---|--------------------|
| <b>W101Q3439</b> | How many HSE community step-down beds are there currently in the Sligo University Hospital catchment area and where are they located: how many were there in 2021, 2020 and in 2019, and what plans are there to increase the number of community step-down beds. | <b>ClIr D Bree</b> |
|------------------|---|--------------------|

**How many HSE Community step-down beds are there currently in the Sligo University Hospital Catchment area?**

There are eighty two step down beds in the Sligo University Hospital catchment area, currently of which sixty seven beds are operational. There are ten step down beds temporarily closed to facilitate upgrade works in St. John's Community Hospital and five step down beds temporarily closed in Arus Carolan, due to fire safety works. It is anticipated that these beds will become operational in Quarter 4 of 2022.

**Where are they located?**

- 5 beds in Arus Carolan, Mohill, Co. Leitrim (5 temporary closed).
- 33 beds in St. Johns Hospital, Sligo (10 temporary closed).
- 22 beds in St. Patrick's Community Hospital, Leitrim.
- 14 beds in Nazareth House Nursing Unit, Sligo.
- 8 beds in the Community Nursing Unit, Ballymote, Co. Sligo.

**How many were there in 2021, 2020 and in 2019?**

- As of December 2019, there were a total of 73 step down beds available.
- As of December 2020, there were a total of 80 step down beds available.
- As of December 2021, there were a total of 82 step down beds available.

**What plans are there to increase the number of community step down beds?**

Currently, there are no plans to increase the number of community step down beds within Sligo / Leitrim.

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

|                  |   |                    |
|------------------|---|--------------------|
| <b>W101Q3440</b> | How many approved consultant posts are filled on a permanent basis in Sligo University Hospital; how many are filled on a temporary basis; how many are vacant and can we have a breakdown of the specialties in each category. | <b>ClIr D Bree</b> |
|------------------|---|--------------------|

There are 64 Permanent Consultant posts in SUH; as below table:

| Speciality        | WTE |
|-------------------|-----|
| <b>Medical:</b>   |     |
| GIM / Geriatrics  | 3   |
| Cardiology        | 1   |
| Gastroenterology  | 2   |
| Endocrinology     | 2   |
| Respiratory       | 1   |
| <b>Nephrology</b> | 1   |

|                               |   |
|-------------------------------|---|
| Neurology                     | 3 |
| Haematology / Oncology        | 3 |
| Dermatology                   | 1 |
| Rheumatology                  | 3 |
| Ophthalmology                 | 3 |
| ENT                           | 3 |
| Paediatrics                   | 2 |
| Anaesthetics                  | 7 |
| Emergency Medicine            | 3 |
| Radiology                     | 7 |
| Histopathology / Microbiology | 3 |
| Surgical                      | 3 |
| Urology                       | 2 |
| Orthopaedics                  | 5 |
| Obstetrics / Gynaecology      | 4 |
| Palliative Medicine           | 2 |

There are 19 Consultant WTE posts filled by temporary contracts, as per below table:

| Speciality                    | WTE |
|-------------------------------|-----|
| Cardiology                    | 1   |
| Geriatrics                    | 1   |
| Nephrology                    | 1   |
| ENT                           | 2   |
| Paediatrics                   | 4   |
| Anaesthesiology               | 5   |
| Emergency Medicine            | 2   |
| Histopathology / Microbiology | 2   |
| Obstetrics / Gynaecology      | 1   |

There are 1.5 Consultant WTE posts filled by Agency Locums:

| Speciality      | WTE |
|-----------------|-----|
| Cardiology      | .5  |
| General Surgery | 1   |

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

|                  |   |                   |
|------------------|---|-------------------|
| <b>W101Q3441</b> | How many staff (WTE) are currently employed at Sligo University Hospital? Please list by staff category and how many are permanent, temporary, agency. How many staff vacancies are there currently in the hospital? Please list by staff category. | <b>Clr D Bree</b> |
|------------------|---|-------------------|

Below is a table of the staff (WTE) in SUH:

**Sligo University Hospital - August 22**

| Row Labels                         | Permanent (WTE) | Temporary (WTE) | Agency (WTE) | Total          |
|------------------------------------|-----------------|-----------------|--------------|----------------|
| General Support                    | 167.76          | 73.3            |              | 241.06         |
| Health & Social Care Professionals | 176.25          | 32.25           | 0.9          | 209.4          |
| Management/ Admin                  | 198.93          | 70.2            |              | 269.13         |
| Medical/ Dental                    | 75.06           | 178.65          | 12.4         | 266.11         |
| Nursing/ Midwifery                 | 699.72          | 30.39           | 4.49         | 734.6          |
| Patient & Client Care              | 162.98          | 24.07           | 53           | 240.05         |
| <b>Grand Total</b>                 | <b>1480.7</b>   | <b>408.86</b>   | <b>70.79</b> | <b>1960.35</b> |

Below is a table that outlines the staff vacancies currently in SUH as at 2<sup>nd</sup> September 2022:

| Category                                | Vacant WTE at 2/9/22 | Vacant Replacement Posts (WTE) | Vacant Sick/ Maternity Leave Backfill (WTE) | Vacant New Posts (WTE) |
|---|----------------------|--------------------------------|---|------------------------|
| *Staff Nurse                            | 47.37                | 23.87                          | 15.00                                       | 8.50                   |
| Nursing & Midwifery excluding S/N posts | 37.60                | 20.60                          | 2.00  | 15.00                  |
| HSCP **                                 | 39.88                | 19.48                          | 5.90  | 14.50                  |
| Management/Adm in                       | 40.00                | 25.00                          | 1.00  | 14.00                  |
| Patient & Client                        | 15.10                | 8.60                           | 1.50  | 5.00                   |
| Support **                              | 10.21                | 9.21                           | 1.00  | 0.00                   |
| <b>Total</b>                            | <b>190.16</b>        | <b>106.76</b>                  | <b>26.40</b>                                | <b>57.00</b>           |

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

|                  |  |                      |
|------------------|--|----------------------|
| <b>W101Q3442</b> | Can the RHFV be provided with a clear report on the provision of Cath Lab services at Sligo University Hospital and confirm if the HSE has received a confirmation on when, or if, this service will be provided for Patients at SUH by the Department of Health | <b>Cllr D Gilroy</b> |
|------------------|--|----------------------|

Following the decision of a private company to cease the mobile Cath Lab Services at Sligo University Hospital, the Saolta Group worked with hospital management on possible contingency measures.

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Extensive discussions have taken place between hospital and Saolta Management, HSE representatives and Department of Health regarding future developments in Cardiology Services in Sligo University Hospital. This has led to Minister Donnelly giving a commitment towards the development of Cardiology CT service together with an increase in Consultant Cardiologist and support team. This service expansion will allow the hospital to provide the most up to date and modern diagnostic service for patients in the locality. This will also provide better opportunity to attract high calibre Consultant Cardiologists into the cardiology service.

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

|                  |   |                      |
|------------------|---|----------------------|
| <b>W101Q3443</b> | Can the HSE provide an update on availability of volunteer trainers to train community volunteers in the use of Defibrillators. Report to include how many HSE Employed Trainers and Voluntary Trainers were available on January 1 <sup>st</sup> 2019, 2020, 2021 and 2022 | <b>Cllr D Gilroy</b> |
|------------------|---|----------------------|

We currently have 344 instructors on our system who are available through our three training sites, NAS North Leinster, West and South.

More specifically, the West area has 44 volunteer instructors who vary from being NAS staff to firefighters, Gardaí and members of Community First Responder schemes.

In January 2021, we had circa 130 instructors available to the community and this has grown steadily due to funding secured from the Out Of Hospital Cardiac Arrest Strategy for Ireland. This enabled us to train over 200 more instructors in the past twelve months.

Data relating to 2019 and 2020 is not available due to a loss of files.

It is never easy to say how many instructors are available on any given week or month as they are all volunteers and more often than not have fulltime jobs so they contribute to training when they can.

It is also important to mention that these instructors are selected for suitability based on a number of aspects such as their previous participation in community events and training and interaction with Community First Responder groups, we do not provide instructor course as a matter of course to those requesting them and never to private industry.

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

|                  |  |                      |
|------------------|--|----------------------|
| <b>W101Q3444</b> | Can the RHFV Provide a report on the provision of full Adult Insulin Pump Therapy services for new patients at Sligo and Letterkenny University Hospitals. | <b>Cllr D Gilroy</b> |
|------------------|--|----------------------|

**Sligo University Hospital:**



The provision of a Clinical Nurse Specialist is required to run an adult pump service, which has not yet been approved or identified. This staffing requirement has been included again in Service Plan Estimates but have not yet been approved. Unfortunately, we are still unable to provide this service until staffing is available to safely deliver same.

**Letterkenny University Hospital:**

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. Recently the Saolta Group approved a new senior podiatrist post and recruitment has commenced.

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

|                  |   |                      |
|------------------|---|----------------------|
| <b>W101Q3445</b> | Can the RHFV provide a report to explain for what purpose the accommodation units at HSE Cloonamahon Services are now being used for, and what effect the moving of the residents from their home of many years has had on their wellbeing. | <b>Cllr D Gilroy</b> |
|------------------|---|----------------------|

A number of the accommodation units at Cloonamahon continue to be used for the care of the twenty one HSE residents with an intellectual disability, who are currently living on site at Cloonamahon.

The remainder of the units at Cloonamahon are used as follows:

- To provide accommodation for HSE Support Services staff – clerical and administrative grades principally from Disability Services.
- To provide accommodation for Disability Services Management staff.
- To provide accommodation for the Community Healthcare Cavan, Donegal, Leitrim, Monaghan & Sligo Digital Health Team.
- The provision of Day Services for Service Users with intellectual disability.
- Kitchen/Catering and Dining Space for service users, staff and community services.
- Base and accommodation for Disability Services Maintenance Team.
- HSE Meeting and Training Rooms.

Of note in terms of HSE staff based at Cloonamahon is that a number of staff required relocation to Cloonamahon from the Cregg Services accommodation at Rosses Point, Sligo, following the sale of the property by the Sisters of Wisdom.

With regard to the question as to what effect moving residents from their home of many years has had on their wellbeing, I can confirm that supporting individuals with an intellectual disability to live in community settings and to live a life of their choosing is central to the ethos of service delivery in Disability Services in Community Healthcare Cavan, Donegal, Leitrim, Monaghan & Sligo. In keeping with national policy, 'Time to Move on from Congregated Settings', HSE 2011, both the former Cregg and Cloonamahon Disability Services embarked on decongregating services moving from institutional models of care to a rights based, community living model of care.

Empirical evidence demonstrates that the move to community living has been associated with improved quality of life for persons with an intellectual disability, affording individuals greater autonomy and choice in their lives.

At a local level, Disability Services Psychology Sligo/Leitrim completed a Service Evaluation in Quarter 2 of 2022, in order to identify perspectives on the transition from campus based residential care to community living for adults with an intellectual disability.

Findings indicated that decongregation has generally been experienced positively with improved accommodation, staffing and resources within homes in the community. Staff noted increased choice for residents and the provision of more individualised services, with resulting positive impacts on the emotional well-being, physical health and participation of persons with a disability. Staff reported that, in general, residents settled into their new homes quickly and easily.

A group comprised of persons with a disability, family representatives, advocacy and voluntary sector members as well as Disability Services staff, have met on an ongoing basis for the past six years to support and inform the decongregation planning in respect of both Cregg and Cloonamahon services. This group, known as the Quality Improvement and Performance Management Group, support measures required to ensure individual residents needs are met and heard ongoing in terms of each person's person centred plan as well as their care and support plan.

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

|                  |   |                       |
|------------------|---|-----------------------|
| <b>W101Q3446</b> | Is the HSE Committing to the Provision of Public Long Stay Beds for the Town of Roscrea, If so how many Beds. | <b>Cllr J Carroll</b> |
|------------------|---|-----------------------|

Following a meeting last month at Government buildings, HSE Mid-West Community Healthcare is in the process of preparing an options appraisal document for Older Person 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 Older Person Services in the region. HSE Mid-West Community Healthcare is committed to delivering the best Older Person Services to the people of North Tipperary and it is expected an options paper will be presented in quarter four of 2022.

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

|                  |   |                       |
|------------------|---|-----------------------|
| <b>W101Q3447</b> | What is the Proposed Plan for the Dean Maxwell Nursing Home in Roscrea? | <b>Cllr J Carroll</b> |
|------------------|---|-----------------------|

Following a meeting last month at Government buildings, HSE Mid-West Community Healthcare is in the process of preparing an options appraisal document for Older Person 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 Older Person Services in the region. HSE Mid-West Community Healthcare is committed to delivering the best Older Person Services to the people of North Tipperary and it is expected an options paper will be presented in quarter four of 2022.

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

|                  |  |                       |
|------------------|--|-----------------------|
| <b>W101Q3448</b> | Has the HSE Examined the Community Proposal, Drawings and Concepts, which has the Support of all Oireachtas Members. | <b>Cllr J Carroll</b> |
|------------------|--|-----------------------|

Following a meeting last month at Government buildings, HSE Mid-West Community Healthcare is in the process of preparing an options appraisal document for Older Person 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 Older Person Services in the region. HSE Mid-West Community Healthcare is committed to delivering the best Older Person Services to the people of North Tipperary and it is expected an options paper will be presented in quarter four of 2022.

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

|                  |   |                       |
|------------------|---|-----------------------|
| <b>W101Q3449</b> | Could I please have an update on the status of the proposed Primary Care Centre planned for Oranmore. | <b>Cllr L Carroll</b> |
|------------------|---|-----------------------|

The current status of the project is that the legal documentation namely an Agreement for Lease (AFL) needs to be signed by both parties in order for the construction works to proceed. The developer has advised that the original commercial deal offered to the HSE is no longer viable in light of current market conditions and so the developer is seeking to agree new commercial terms in advance of the signing of an AFL. There have been recent discussions and communications between the parties on the developers proposals. Any revised commercial deal would require a new HSE Board Approval before it could be progressed to AFL stage.

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

|  |  |                         |
|--|--|-------------------------|
| <b>W101Q3450</b>   | Could I be informed of the number of Dentists employed by HSE West in Galway and the length of time and numbers of individuals on a waiting list.  | <b>Cllr L Carroll</b>   |
| <p>The number of dentists employed by the HSE in Galway Primary Care is 13 which equates to 10 whole time equivalent WTE.</p> <p>The number of people waiting assessment is approximately 5,000 – this is 6<sup>th</sup> class children across Galway City and County schools from the years 2020, 2021 and the current year 2022. Following assessment, a waiting list will be created for treatments as required.</p> <p>A waiting list for treatment follows assessment and therefore the exact number waiting for treatment cannot be known until the assessments are carried out.</p> <p>The length of waiting time for treatment is generally one to two years and this backlog is due to a number of factors predominately Covid-19 and staff vacancies.</p> <p><i>Breda Crehan-Roche, Chief Officer, Community Healthcare West</i></p> |  |                         |
| <b>W101Q3451</b>   | Could I be informed of the number of Orthodontists employed by HSE West in Galway and the length of time and numbers of individuals on the public waiting list.  | <b>Cllr L Carroll</b>   |
| <p>There are 3 Consultant Orthodontists, 3 Specialist Orthodontists and 1 Dentist with a special interest in Orthodontics employed within our region covering Galway, Mayo and Roscommon.</p> <p>Currently there are 1,372 patients on the Orthodontic Treatment Waiting List. The Treatment Waiting List is 3 years and 2 months.</p> <p>The Assessment Waiting List is approximately 3 months and there are 431 patients on this assessment waiting list (all of these patients have appointments booked).</p> <p><i>A. Cosgrove, COO, Saolta University Health Care Group</i></p>   |  |                         |
| <b>W101Q3452</b>   | When did Community Healthcare West last advertise for Home Support Staff in Connemara? How were the positions advertised? How many applied for the positions? Was there a specific campaign aimed for Irish Speakers in Gaeltacht Area's? How many Home support staff are currently needed to meet the demand of the service in Connemara?           | <b>Cllr D Ó Cualáin</b> |
| <p>Home Support ran a campaign to recruit Health Care Support Assistants across Community Healthcare West in November of 2021. This campaign was advertised on HSE website and all the local papers. The HSE did not run a specific campaign for Irish Speakers, however all applicants for the roles can seek to be interviewed in Irish if they so wish.</p> <p>The HSE were unable to fill a number of post in Galway and Mayo and have re-advertised these HCSA posts on the 14/09/2022. In addition to this, home support are seeking approval to fill a number of additional posts in the following areas throughout Connemara - Carraroe, Lettermore, Spiddal, Carna, Clifden, Aran Islands, Innisboffin, Leenane and Rosmuc.</p> <p><i>Breda Crehan-Roche, Chief Officer, Community Healthcare West</i></p>                            |  |                         |
| <b>W101Q3453</b>   | Can I get a breakdown of the number of Community Occupational Therapists for adults and children covering Galway West and the Connemara Area? Can I get a tabular breakdown of where the community occupational therapists are based? How many adults and children are awaiting community Occupational Therapy appointment in Galway West/Connemara. | <b>Cllr D Ó Cualáin</b> |

| Service →  |   | Adults  | Adult vacancy                                  | Children   | Total       |               |
|--|---|---|--|--|-------------|---------------|
| <b>A breakdown of the number of Community Occupational Therapists for adults and children covering Galway West and the Connemara Area?</b> |   | <b>#Community Occupational Therapists = 4 (WTE=4)</b> | <b># Community Occupational Therapists = 1</b> | <b># Community Occupational Therapists s = 3 (WTE=3)</b> | <b>8</b>    |               |
| <b>Can I get a tabular breakdown of where the Community Occupational Therapists are based?</b>   | <b>CHO2 - 4 West Galway - COTs based in:</b>  |   |  |  |             |               |
|  | Clifden Health Centre, Hospital Road, Clifden covering (Carna, Clifden, Inishboffin, Roundstone & Tully-Renvyle Health Centres) | <b>1</b>  |  |  |             |               |
|  | Moycullen Health Centre, Ballyquirke, Moycullen covering (Barna, Clonbur, Leenane, Moycullen & Oughterard Health Centres)       | <b>1</b>  | <b>1</b>                                       |  |             |               |
|  | Tully/Ballinahown Health Centre, Ballinahown covering (Carraroe, Lettermore, Rosmuc Health Centres)                             | <b>1</b>  |  |  |             |               |
|  | Tully/Ballinahown Health Centre, Ballinahown - covering (Aran Islands, Spiddal, Inverin & Ballinahown Health Centres).          | <b>1</b>  |  |  |             |               |
|  | Lyradoon Children's Services, PCCC, 65 Lower Salthill, Galway   |   |  | <b>1</b>   |             |               |
|  | Children's Disability Network Team, An tSean Cheibh, Spiddal  |   |  | <b>2</b>   |             |               |
|  | <b>Age Category</b>   | <b>18-64</b>  | <b>65 +</b>                                    | <b>0-4</b>   | <b>5-17</b> | <b>TOTALS</b> |

|   |  |     |     |  |    |    |      |
|---|--|-----|-----|--|----|----|------|
| <b>How many adults and children are awaiting community Occupational Therapy appointment in Galway West/Connemara?</b> | the number waiting less than < 4 months  | 13  | 69  |  | 1  | 51 | 134  |
|   | the number waiting 4-12 months   | 3   | 38  |  | 0  | 20 | 61   |
|   | the number waiting more than > 12 months   | 0   | 0   |  | 0  | 0  | 0    |
|   | <b>Total Check</b>   | 16  | 107 |  | 1  | 71 | 195  |
|   | Currently there are 123 Adults and 72 children awaiting a Community Occupational Therapy appointment in Galway West/Connemara - CHO2- as at 31/08/2022.        | 123 |     |  | 72 |    | *195 |
| <b>Note 1:</b>  | <i>*The 195 Adults &amp; Children currently on the waitlist are prioritised as Priority 2 Clients. There are <b>no Priority 1</b> clients on the waitlist.</i> |     |     |  |    |    |      |
| <b>Note 2:</b>  | <i>Compiled from CompStats Metrics Monthly Activity Reports @31/08/2022</i>  |     |     |  |    |    |      |

**Breda Crehan-Roche, Chief Officer, Community Healthcare West**

|   |   |                         |
|---|---|-------------------------|
| <b>W101Q3454</b>  | Has the day care service in Áras Mhic Dara CNU reopened? If not why? Is Áras Mhic Dara back to it's full capacity and are all respite beds currently open?  | <b>Cllr D Ó Cualáin</b> |
| <p>At present, Older Peoples Services have been unable to open the Day Care Service in Áras Mhic Dara due to the difficulty in recruiting staff. This has also impacted on our ability to fully reopen all the beds in the Centre. Admissions are continuing to the Centre as vacancies arise, within cohort of staff resources. At present we expect to have 31 beds occupied by 26/9/2022.</p> <p>Respite service in Galway has been consolidated to Merlin Park CNU Unit 5 and Clifden District Hospital. There are no respite provisions therefore at Áras Mhic Dara.</p> |   |                         |
| <b>Breda Crehan-Roche, Chief Officer, Community Healthcare West</b>   |   |                         |
| <b>W101Q3455</b>  | Can I get a breakdown on the number of patients who were brought to the Emergency Department in GUH via Ambulance in June, July and August 2022? Can I also get a breakdown on how long it took for those patient's to be transferred to a hospital trolley/chair and taken over by hospital staff (ED,ASAU,AMAU) and the Ambulance crew cleared to respond to other calls? What protocol is in place to deal with Ambulance crew delays within the ED if there is no capacity for Ambulance crews to hand over patients? | <b>Cllr D Ó Cualáin</b> |

Saolta University Healthcare Group

June

2022

UNIVERSITY HOSPITAL GALWAY

| 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  | 1.5%  | 19                | [1]:07:12                         |
| Cleared at Hospital in 30 Minutes or Less  | 8.6%  | 111               |                                   |
| Cleared at Hospital in 60 Minutes or Less  | 51.0% | 658               |                                   |
| Cleared at Hospital 1 to 2 hours   | 42.6% | 550               |                                   |
| Cleared at Hospital 2 to 3 hours   | 4.4%  | 57                |                                   |
| Cleared at Hospital 3 to 4 hours   | 0.9%  | 12                |                                   |
| Cleared at Hospital 4 to 5 hours   | 0.6%  | 8                 |                                   |
| Cleared at Hospital 5 to 6 hours   | 0.2%  | 3                 |                                   |
| Cleared at Hospital 6 to 7 hours   | 0.1%  | 1                 |                                   |
| At Hospital 7 - 14hours  | 0.2%  | 2                 |                                   |
| HOSP   | 100%  | 1291              | Total Time at Hospital<br>1445:54 |

Saolta University Healthcare Group

July

2022

UNIVERSITY HOSPITAL GALWAY

| 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  | 1.4%  | 19                | [1]:10:46                         |
| Cleared at Hospital in 30 Minutes or Less  | 8.3%  | 109               |                                   |
| Cleared at Hospital in 60 Minutes or Less  | 51.9% | 682               |                                   |
| Cleared at Hospital 1 to 2 hours   | 37.7% | 496               |                                   |
| Cleared at Hospital 2 to 3 hours   | 6.8%  | 90                |                                   |
| Cleared at Hospital 3 to 4 hours   | 1.6%  | 21                |                                   |
| Cleared at Hospital 4 to 5 hours   | 1.1%  | 14                |                                   |
| Cleared at Hospital 5 to 6 hours   | 0.5%  | 6                 |                                   |
| Cleared at Hospital 6 to 7 hours   | 0.3%  | 4                 |                                   |
| At Hospital 7 - 14hours  | 0.1%  | 1                 |                                   |
| HOSP   | 100%  | 1314              | Total Time at Hospital<br>1549:51 |

## UNIVERSITY HOSPITAL GALWAY

| 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  | 3.3%  | 44                | [1]:18:53                |
| Cleared at Hospital in 30 Minutes or Less  | 9.9%  | 134               |                          |
| Cleared at Hospital in 60 Minutes or Less  | 47.8% | 646               |                          |
| Cleared at Hospital 1 to 2 hours   | 38.3% | 517               |                          |
| Cleared at Hospital 2 to 3 hours   | 6.2%  | 84                |                          |
| Cleared at Hospital 3 to 4 hours   | 3.6%  | 48                |                          |
| Cleared at Hospital 4 to 5 hours   | 2.3%  | 31                |                          |
| Cleared at Hospital 5 to 6 hours   | 1.4%  | 19                |                          |
| Cleared at Hospital 6 to 7 hours   | 0.4%  | 5                 |                          |
| At Hospital 7 - 14hours  |       |                   | Total Time at Hospital   |
| HOSP   | 100%  | 1351              | 1774:46                  |

Continuous extensive engagement continues on a daily basis between the National Ambulance Service (NAS) and Hospitals in relation to ambulance to hospital (A2H) delays. However, in the context of month on month worsening of A2H delays, NAS and Hospitals are now considering a range of steps to alleviate the pressures and protect our capacity to respond to 112/999 calls. The steps include:

- **Fit2Sit** – where patients are capable of sitting, then crews will focus on finding a safe place for the patient and effecting a clinical handover as quickly as possible
- **Rapid Handover Protocol** – the current arrangements are not effective and in this regard, crews will be provided with revised protocols on how to be more proactive in effecting patient disposition at the Emergency Department in a timely manner. The Rapid Handover Protocol will provide for red flagging of sites where A2H delays present a real risk of harm to patients awaiting a 999 response in the community.
- **NAS Cohorting** – where necessary and in the absence of clear clinical governance of patients awaiting clinical handover in the Emergency Department, NAS will request staff to engage in cohorting of patients at Emergency Departments to facilitate release of an emergency ambulance to respond to an awaiting 999 call. Crews will be provided with guidelines on how to do this safely.

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

In GUH, we do have an Escalation Policy in place in relation to ED Capacity issues and this is currently under review.

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

|                  |  |                     |
|------------------|--|---------------------|
| <b>W101Q3456</b> | Can we have an updated report on the proposal to address the on- going lack of car-parking spaces in at around Letterkenny's hospital campus both short term and long term plan? | <b>Clr C Brogan</b> |
|------------------|--|---------------------|

There is an ongoing issue with the lack of car park spaces for patients, visitors and staff at Letterkenny University Hospital and in order to ensure that we are maximising the use of our current stock of 1,100 spaces, there is a plan to review the existing car parking arrangements.

As part of this review we plan to consult with all LUH Staff in relation to the following  
 Reinstating the short term car park for patients and visitors only.  
 Removing the named car park spaces and creating a dedicated reserved car park for nominated staff only.  
 Encouraging and incentivising staff to use alternative transport methods to come to work ie carpooling, cycle to work, public transport etc.  
 A period of staff consultation is now underway and the outcome of this process will influence the reconfiguration.

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

|                  |   |                      |
|------------------|---|----------------------|
| <b>W101Q3457</b> | What steps are been taken to address the huge delays that patients are experiencing at A&E in Letterkenny hospital? | <b>Cllr C Brogan</b> |
|------------------|---|----------------------|

| ED Performance YoY August 2022 vs 2021 |                 |                 |                    |                      |  |
|--|-----------------|-----------------|--------------------|----------------------|--|
| Category                               | End August 2021 | End August 2022 | Change 2022 v 2021 | % change 2022 v 2021 |  |
| 8am Trolley numbers                    | 61              | 136             | 75                 | 44.85%               |  |
| ED Attendances                         | 27879           | 31077           | 3198               | 11%                  |  |
| ED Admissions                          | 5049            | 5471            | 422                | 8%                   |  |

**The following pathways have been introduced to improve the patients experience in the Emergency Department.**  
Community Intervention Team - Since the Community Intervention Team commenced its service in February this year it has grown from strength to strength. They provide care to patients in their own homes avoiding hospital attendance/admission and facilitating early discharges from hospital. There are several scenarios which have involved an experienced member of staff from the Community Intervention Team (CIT) attending a patient in their own home, providing an acute episode of care thus enabling the patient and their family to remain at home. Additional funding and resources have been allocated for enhanced CIT.

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

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

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

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



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

**Frailty at the Front Door** service has commenced. This services carries out a comprehensive assessment on older people looking at alternative pathways to avoid admission or to allow early discharge.

**Pathfinder** - LUH is a pilot for The Pathfinders Project and this will support pathways to the ICOP team. The recruitment process is underway for this project. This new service aims to safely keep vulnerable older people who have phoned 999/112, in their own home rather than transporting them to the ED for assessment. A specific team of staff will be employed to deliver this service including Advanced Paramedics (AP), Occupational Therapists (OT) and Physiotherapists (PT); will include a Rapid Response Vehicle (RRV) and an Electronic Patient Care Record (EPCR).

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

|                  |  |                      |
|------------------|--|----------------------|
| <b>W101Q3458</b> | Can we have an updated report on the new community nursing unit in Letterkenny and the upgraded proposals for Ramelton community nursing unit? | <b>Cllr C Brogan</b> |
|------------------|--|----------------------|

**Letterkenny Community Hospital**

The proposed community hospital in Letterkenny, consisting of 110 beds comprised of long and short stay bed spaces, as well as a dedicated rehabilitation unit, is currently at detail design stage. It is scheduled to issue for tender in Q4 2022 and, subject to funding, construction is expected to commence in Q1 2023.

**Ramelton Community Nursing Unit**

The appointment of Design Teams for the major capital projects at St. Joseph's and Ramelton Community Hospitals will progress in 2022. It is intended to proceed with tender and construction in 2023.

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

|                  |   |                      |
|------------------|---|----------------------|
| <b>W101Q3459</b> | Can we get an updated report on the availability of all services in Letterkenny's university hospital and the timeline for patients accessing the services? | <b>Cllr C Brogan</b> |
|------------------|---|----------------------|

Outpatient clinics are available and restored to pre-covid levels of service with the addition of clinics for cardiothoracic supported from GUH. 73.5% of patients are on the waiting lists less than the National Target of 18 months, with an average wait time of 14 months. In addition to this LUH have increased capacity through the development of Advanced Clinical Prioritisation clinics in a number of specialities as well as NTPF funded insourcing initiative clinics to help address the longest waiting patients.

Elective surgery for both in-patients and day cases is also available. 60% of in-patients and 73.5% of day cases are on the waiting list less than the National Target of 12 months with an average wait time of 12 months for inpatients and 9 months for day cases. Day case capacity will also be increased through NTPF funded insourcing sessions where resources are available.

Endoscopy services are also available and restored to pre-covid levels with capacity increased by additional sessions every weekend. The wait time for an urgent colonoscopy is less than 28 days in line with National Targets and 83.1% of all other procedures are on the list less than the National Target of 12 months with an average wait time of 7 months.

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

# Appendix 1

| HSE Property Database - Data Extracted for 'Vacant Buildings', September 2022 |                                 |         |                               |                                  |             |      |           |             |           |             |                       |          |           |                       |                  |  |
|---|---------------------------------|---------|-------------------------------|----------------------------------|-------------|------|-----------|-------------|-----------|-------------|-----------------------|----------|-----------|-----------------------|------------------|--|
| Question Cllr John Connolly W101Q8424 for the Regional Health Forum Meeting   |                                 |         |                               |                                  |             |      |           |             |           |             |                       |          |           |                       |                  |  |
| SiteCode  | SiteName                        | BlockNo | BlockName                     | Add1                             | Add2        | Add3 | CHO/HG    | Town        | Code      | County      | Use                   | Tenure   | GIA       | Status                | How long vacant? | Comments   |
| GY0018  | St. Brigids Hospital Campus     | 01      | Main Block                    | St. Brigids Hospital Campus      |             |      | CHO 2     | Ballinasloe | H53 N243  | Galway East | Mental Health         | Freehold | 29,266.00 | Vacant - Under Review | 2012             | Decant of Campus to be finalised. Future use and disposal strategy to be developed.  |
| GY0018  | St. Brigids Hospital Campus     | 04      | St. Josephs Day Centre        | St. Brigids Hospital Campus      |             |      | CHO 2     | Ballinasloe | H53 N243  | Galway East | Mental Health         | Freehold | 807.00    | Vacant - Under Review | 2012             | Decant of campus to be finalised. Future use and disposal strategy to be developed.  |
| GY0018  | St. Brigids Hospital Campus     | 05      | Nurses Home                   | St. Brigids Hospital Campus      |             |      | CHO 2     | Ballinasloe | H53 N243  | Galway East | Mental Health         | Freehold | 1,518.00  | Vacant - Under Review | 2012             | Decant of campus to be finalised. Future use and disposal strategy to be developed.  |
| GY0018  | St. Brigids Hospital Campus     | 08      | Recreation Hall               | St. Brigids Hospital Campus      |             |      | CHO 2     | Ballinasloe | H53 N243  | Galway East | Mental Health         | Freehold | 350.00    | Vacant - Under Review | 2012             | Decant of campus to be finalised. Future use and disposal strategy to be developed.  |
| GY0043  | Ballygar Health Centre          | 01      | Ballygar Health Centre        | Ballygar Health Centre           | High Street |      | CHO 2     | Ballygar    | F42 HK53  | Galway East | Primary Care Centre   | Freehold | 314.00    | Vacant - Under Review | Feb-21           | Premises Destroyed by Fire   |
| GY0112  | Merlin Park University Hospital | 27      | Former Mortuary               | Merlin Park Hospital Campus      |             |      | Saolta Un | Merlin Park | H91 N973  | Galway West | Hospital              | Freehold | 150.00    | Vacant - Under Review | 20 years +       | Standalone Remote Building, Unusable - Requires demolition   |
| GY0112  | Merlin Park University Hospital | 31      | Matrons Chaiet                | Merlin Park Hospital Campus      |             |      | Saolta Un | Merlin Park | H91 N973  | Galway West | Hospital              | Freehold | 86.00     | Vacant - Under Review | 20 years +       | Standalone Remote Building, Unusable - Requires demolition   |
| GY0123  | Grove House                     | 01      | Grove House (2 semi-detached) | High Support Hostel, Grove House | Ernis Road  |      | CHO 2     | Gort        | H91 P2/K4 | Galway East | Mental Health         | Freehold | 240.00    | Vacant - Under Review | 3 Years +        | Future use/possible disposal needs to be identified. Engagements have commenced with Brothers of Charity on potential future use.  |
| GY0126  | Site - Tubber Road, Gort        | 01      | Tubber Road Site              | Site                             | Tubber Road |      | CHO 2     | Gort        |           | Galway East | Undeveloped Site/Land | Freehold | 0.00      | Vacant - Under Review | 3 Years +        | Future use/possible disposal needs to be identified. Engagements have commenced with Brothers of Charity on potential future use.  |
| GY0144  | St. Brendan's Campus            | 18      | Mis Toppings Apartments       |                                  |             |      | CHO 2     | Loughrea    | H62 X951  | Galway East | Older People Services | Freehold | 199.41    | Vacant - Under Review | 10 Years +       | Original derelict bungalow property (Old Nun's House) demolished and new property (2 apartments) constructed for HSE by Toppings Trust Funds - PRG Approval for Lease between HSE & BOSCI Granted in Sept 2022 - Board Approval/Legals underway - Anticipated occupancy of the newly constructed properties will commence late Q4 2022 / early Q1 2023 |
| GY0176  | Recess Health Centre            | 01      | Recess Health Centre          | Recess Health Centre             | Lisoughter  |      | CHO 2     | Recess      | H91 V176  | Galway West | Primary Care Building | Freehold | 70.00     | Vacant - Under Review | 2020             | Future use as Ambulance Base is under review (Sept 2022)   |

HSE Property Database - Data Extracted for 'In Disposal Buildings', September 2022

Question Clir-John Connolly W101Q3424 for the Regional Health Forum Meeting

In Disposal - For Sale: 4  
 In Disposal - Sale Agreed: 1

| Site Code | Site Name                                   | Block No | Block Name             | Add1  | Add2           | Organisation | Town     | Prode    | County      | Use                   | Tenure   | GIA    | Disposal Status           | How long vacant? | Comments   |
|-----------|---|----------|------------------------|---|----------------|--------------|----------|----------|-------------|-----------------------|----------|--------|---------------------------|------------------|--|
| GY0015    | Aughrim Health Centre                       | 01       | Aughrim Health Centre  | Aughrim Health Centre                       |                | CHO 2        | Aughrim  | H53 PT02 | Galway East | Primary Care Centre   | Freehold | 55.00  | In Disposal - For Sale    | c. 5 Years Plus  | DPER Process - Public Stakeholder has expressed an interest.   |
| GY0046    | Caltra Health Centre                        | 01       | Caltra Health Centre   | Caltra Health Centre                        |                | CHO 2        | Caltra   | H53 F2D1 | Galway East | Primary Care Centre   | Freehold | 100.00 | In Disposal - For Sale    | c. 5 Years Plus  | Will be disposed of on Open Market in Q4 2022 / Q1 2023 - No public stakeholder interest expressed from DPER Process in January 2022 |
| GY0127    | Gorteeny Health Centre                      | 01       | Gorteeny Health Centre | Gorteeny Health Centre                      |                | CHO 2        | Gorteeny | H62 EK70 | Galway East | Primary Care Centre   | Freehold | 55.00  | In Disposal - For Sale    | c. 5 Years Plus  | Will be disposed of on Open Market in Q4 2022 / Q1 2023 - No public stakeholder interest expressed from DPER Process in January 2022 |
| GY0159    | Loughrea Health Centre - Store & Playschool | 01       | Loughrea Health Centre | Loughrea Health Centre - Store & Playschool | 60 Main Street | CHO 2        | Loughrea | H62 T851 | Galway East | Primary Care Building | Freehold | 100.00 | In Disposal - For Sale    | c. 5 Years Plus  | DPER Process - Public Stakeholder has expressed an interest.   |
| GY0167    | Oranmore Health Centre                      | 01       | Oranmore Health Centre | Oranmore Health Centre                      | Dublin Road    | CHO 2        | Oranmore | H91 ED65 | Galway East | Primary Care Building | Freehold | 31.00  | In Disposal - Sale Agreed | c. 5 Years Plus  | Property is Sale Agreed  |