

**Minutes of Regional Health Forum West held on
Tuesday, 24th May, 2016 at 2.00pm in Room 1, Education Centre,
HSE Offices, Merlin Park, Galway**

Miontuairiscí Cruinnithe Chinn Bhliana an Fhóraitm Réigiúnach Sláinte, a tionóladh ar an Mháirt 24, Bealtaine
2016 ag 2.00 .i.n, i Seomra 1 an tIonad Oideachais,
Feidhmeannacht na Seirbhíse Sláinte, Páirc Mheirlinne, Gaillimh

Chairperson: Cllr Rosaleen O’Grady

Members Present	Members Present (continued)	Apologies
Cllr Tim Broderick	Cllr Keith Henry	Cllr Finola Armstrong-McGuire
Cllr Ciaran Brogan	Cllr Mary Hoade	Cllr Michael Kilcoyne
Cllr John Carroll	Cllr Michael Hourigan	Cllr Bernard McGuinness
Cllr Michael Collins	Cllr. Paddy Kilduff	Cllr Tom McNamara
Cllr Pádraig Conneely	Cllr Michael McBride	Cllr Gino O’Boyle
Cllr Tom Connolly	Cllr Malachy McCreesh	Absent
Cllr Gerry Crawford	Cllr Gerry McMonagle	Cllr Pat Burke
Cllr Michael Creaton	Cllr Niall McNelis	Cllr Donagh Killilea
Cllr Ger D’Arcy	Cllr Ann Norton	Cllr Brendan Mulroy
Cllr Aidan Donohue	Cllr P J Ryan	Cllr Terry O’Flaherty
Cllr David Doran	Cllr Damien Ryan	
Cllr Caillian Ellis	Cllr Jerome Scanlan	
Cllr Michael Finnerty	Cllr Brigid Teefy	
Cllr Francis Foley	Cllr Tony Ward	
Cllr Felim Gurn		

In attendance:

Ann Cosgrove, Chief Operating Officer, Saolta University Health Care Group
Colette Cowan, Chief Executive Officer, UL Hospital Group
John Hayes, Chief Officer, Area 1
Tony Canavan, Executive Lead/Chief Officer, Area 2
Francis Rogers, A/National Director, HR
Padraig O’ Riordan, Area Operations Manager, West National Ambulance Service
Marian Cavanagh, Regional Health Forum Office
Norah Owens, Regional Health Forum Office

558/63/16 Minutes of previous meeting 22nd March, 2016

The minutes of the previous meeting held on the 22nd March, 2016 were proposed by Cllr P.J. Ryan, seconded by Cllr David Doran and adopted.

559/63/16 Matters Arising:

Operational Plan 2016:

Cllr Damien Ryan asked A Cosgrove, COO, Saolta Health Care Group to prioritise their efforts to deal with the day to day challenge of lack of beds in Mayo University Hospital.

560/63/16 Chairman's Address:

Election to Seanad

The Chairman on behalf of the Regional Health Forum members congratulated Cllr Maria Byrne who was elected to the Seanad.

New Councillor:

The Chairman also welcomed Cllr Niall McNelis, Galway City Council who replaced Cllr Catherine Connolly to his first Regional Health Forum meeting

561/63/16 Questions:

W63Q1794 – Post of Registrar in Thurles

Action: B Gloster to respond directly to Cllr David Doran to confirm this post will be filled on a permanent basis and the timeline until the post is filled.

W63Q1802 – Public Waiting Times UL Group

Action: CEO, UL Hospital Group to give an update to Cllr McCreesh on the breakdown of figures on inpatient/outpatient diagnostic work to include public/private waiting times.

W63Q1804 – Breakdown by month of OAP'S assigned to acute beds

Action: CEO, UL Hospital Group to give further detail to Cllr McCreesh on the number of delay discharges and the process in place in UL hospital.

W63Q1805 – Parking in UL Hospital

Action: CEO, UL Hospital Group to revert to Cllr McCreesh on the long term plans for parking facilities at UL Hospital

W63Q1807/Q1808– ED – Galway University Hospitals

Cllr Mary Hoade complimented the staff in the ED Department of Galway University Hospital for their hard work despite the conditions they work in.

Action: The results of a recent ED survey to be circulated to the staff once it is completed.

W63Q1818 – Shannondoc

Note for B Gloster – CHO – Area 3 - Cllr Brigid Teefy wished to put on the record the good work being done at Shannondoc, and she hoped this service would be retained as it would be a huge loss to the community.

562/63/16 – Motions

W63M61 – Wheelchair accessibility in UL Group

This motion was proposed by Cllr Ann Norton, seconded by Cllr. P.J. Ryan and adopted.

Action: CEO UL Hospital Group committed to reviewing the installation of wheelchair accessibility to all doors on the UHL campus.

W63M62 – HPV Vaccine

This motion was proposed by Cllr Felim Gurn, seconded by Cllr. Ann Norton and adopted.

(A Press Statement from the Department of Health was circulated at the meeting).

Action: RHF Office to write to National Director for Public Health for an update on this issue for the next meeting.

W63M64 – Meeting with Minister Simon Harris

This motion was proposed by Cllr Ciaran Brogan, seconded by Cllr Gerry Crawford and adopted.

Action: RHF Office to write to Minister Simon Harris and ask him to attend a meeting of the Regional Health Forum West

563/63/16 – Any Other Business:

Queries raised under any other business are solely regarding the administration of the Forum.

564/63/16 Date & time of Next Meeting:

The next **Regional Health Forum meeting** is now scheduled to take place on Tuesday, 28th June, 2016 at 2pm in Galway. This is the Annual General Meeting.

The next **Regional Health Forum Committee** meeting will take place on Tuesday, 25th October, 2016 at 2pm in Galway.

This concluded the business of the meeting.

Signed:

Cathaoirleach/Chairman

Adopted at the Regional Health Forum West meeting

QUESTIONS RECEIVED
REGIONAL HEALTH FORUM WEST
ANNUAL GENERAL MEETING– 28th June, 2016

NUMBER	QUESTION	RAISED BY	Page No:
W64Q1823	The up to date position on Roscommon University Hospital proposed rehabilitation unit?	Cllr M Creaton	2
W64Q1824	Recruitment of additional nurses for the Roscommon Galway Mental Health services?	Cllr M Creaton	2
W64Q1825	Post qualification work experience for student nurses?	Cllr K Henry	2
W64Q1826	Waiting lists for outpatient appointments at UHG and MPH, with a breakdown of the numbers by clinical specialty?	Cllr P Conneely	2-3
W64Q1827	The number of procedures and operations cancelled at UHG and MPH during 2013 to 2016 to date?	Cllr P Conneely	3
W64Q1828	Developments re any proposals of new Hospital build at Merlin Park and costs?	Cllr P Conneely	4
W64Q1829	Plans for a multi-storey car park at UHG?	Cllr P Conneely	4
W64Q1830	Funding to Dromcollogher Respite Care Centre for 2013 to 2016?	Cllr J Scanlan	4
W64Q1831	Reason for cancellation of elective surgeries and impact on waiting lists?	Cllr M Hoade	4-5
W64Q1832	Contract for two Community Respite beds at Carna Nursing and Retirement Home?	Cllr M Hoade	5
W64Q1833	Is the Dexa Scanner in operation full time and what are the current wait times?	Cllr M Hoade	5-6
W64Q1834	A & E improvements at MUH and trolley stats.	Cllr D Ryan	6-7
W64Q1835	Current status on Primary Care Centre Ballinrobe?	Cllr D Ryan	7
W64Q1836	Mental Health services in HSE West for 12 – 18 yrs age bracket?	Cllr G McMonagle	7-9
W64Q1837	What strategy is used for the increased demand on Home Help hours in CHO Area 1?	Cllr G McMonagle	9-10
W64Q1838	Ambulance response times in Rural Areas of Donegal?	Cllr G McMonagle	10-11
W64Q1839	Front line clinical vacancies in Letterkenny University Hospital and how recruitment restrictions impact on this?	Cllr G McMonagle	11

NUMBER	QUESTION	RAISED BY
W64Q1823	What is the up to date position on the proposed rehabilitation unit at Roscommon University Hospital. Is the Funding still in place and if so what time frame is there for its commencement.	Cllr M Creaton
<p>A Spatial Plan for the Roscommon University Hospital site, including provision for the Rehabilitation Unit has been developed by the HSE West Estates Office and agreed by the Saolta Hospital Group. The next step will be the establishment of a project team to develop a design for the project. Funding approval is now required from Estates nationally for this stage of process.</p> <p>A. Cosgrove, COO, Saolta University Health Care Group</p>		
W64Q1824	Are there plans to recruit additional nurses for the Roscommon Galway Mental Health services?	Cllr M Creaton
<p>Galway Roscommon Mental Health service has an ongoing recruitment process in place in relation to the recruitment of nursing staff.</p> <p>T. Canavan, Chief Officer, CHO 2</p>		
W64Q1825	Can this forum be informed if it is the case that final year student nurses have been informed that the HSE will not be in a position to offer them 6 month post qualification work experience?	Cllr K Henry
<p>Student nurses have not been told that the HSE will not be in a position to offer them 6 month post qualification work experience.</p> <p>However it is the case that no individual student nurse is guaranteed work placement.</p> <p>Interviews for the Mental Health division will commence in July. The CHO's will make offers to panels based on service requirements and their prioritised funded workforce plan.</p> <p>A similar process is being implemented in the two hospital groups.</p> <p>Francis Rogers, Assistant National Director of HR.</p>		
W64Q1826	The number of patients currently on waiting lists for outpatient appointments at UHG and MPH, with a breakdown of the numbers by clinical specialty, and a breakdown of the numbers to show the number of patients waiting between 0-6mts, 6mts-12mts, 12mts-24mts, 24mts-36mts, 36mts and longer.	Cllr P Conneely

Galway University Hospital												
Row Labels	0-3 Months	3-6 Months	6-9 Months	9-12 Months	12-15 Months	15-18 Months	18-21 Months	21-24 Months	24-36 Months	36-48 Months	48+ Months	Grand Total
Anaesthetics	93	104	94	88	100	78	58	50	64			729
Cardiology	536	312	241	80		1						1170
Clinical Immunology	102	79	57	61	42	34	15					390
Dermatology	641	449	348	325	262	48	11					2084
Gastro-Enterology	147	4										151
General Medicine	229	264	198	131	54	23	8					907
General Surgery	919	113	91	48	29	4						1204
Geriatric Medicine	11	4	4	1								20
Gynaecology	302	168	192	135	151	136	89	31	47			1251
Haematology	37											37
Infectious Diseases		1										1
Nephrology	75	52	61	40	37	20	6					291
Neurology	421	295	186	94	66	53	13					1128
Oncology		1										1
Ophthalmology	263	89	48	21	14							435
Oral Surgery	417	382	288	218	140	7			15			1467
Orthopaedics	1040	782	703	622	389	191	45	34	74	2		3882
Otolaryngology (ENT)	564	515	456	309	345	215	108	16			1	2529
Paediatrics	359	323	289	117	84	66	39	15	2			1294
Pathology	3											3
Plastic Surgery	606	371	233	123	5			1				1339
Respiratory Medicine	200	205	138	106	29	26	4					708
Rheumatology	328	259	193	155	160	133	75	87	123			1513
Urology	393	387	336	131	54	1						1302
Vascular Surgery	356	195	158	151	76	22						958
Grand Total	8042	5354	4314	2956	2037	1058	471	234	325	2	1	24794

A. Cosgrove, COO, Saolta University Health Care Group

W64Q1827	The number of procedures and operations cancelled at UHG and MPH during 2013, 2014, 2015 and 2016 to date.	ClIr P Conneely
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Hospital activity and bed capacity is reviewed on a daily basis, with particular focus on patient flow and early discharge in order to ensure maximum bed usage and avoid cancellations.

Procedures may be cancelled by the patient themselves or the hospital.

Factors affecting the cancellation of procedures by the hospital include: access to theatre, access to beds or staffing levels.

GUH Admission Cancellations, Inpatient and Day Case 2013-2016

	2013	2014	2015	2016 (up to 17.6.16)
Deferred by Hospital	2258	2993	3586	1290

Deferred by Patient	2696	2815	2921	1678
A. Cosgrove, COO, Saolta University Health Care Group				
W64Q1828	Has there been contact between the Hospital Group and the Department of Health regarding proposals to build a new hospital on lands at Merlin Park? What is the status of any such proposals? Has the cost of such proposals been estimated, and what is the estimated cost?			Cllr P Conneely
<p>GUH are currently reviewing the Development Control Plan for both UHG and MPH.</p> <p>Currently, there has been no formal contact/discussion with the Department of Health regarding a proposal.</p> <p>The single biggest priority for the Saolta University Health Care Group at the present time is the replacement of the Emergency Department at University Hospital Galway. We have an urgent requirement to replace the current facility to meet current and future capacity requirements. A Cost Benefit Analysis (CBA) was completed in April 2016 to be submitted by HSE Estates for approval at the National Acute Capital Steering Group.</p>				
A. Cosgrove, COO, Saolta University Health Care Group				
W64Q1829	Are plans being progressed at present in relation to the construction of a multi-storey car parking facility at UHG? What is the status of any such plans? How many car parking spaces will be created as part of any such plans? What will be the net increase in car parking capacity at UHG as a result of any such plans?			Cllr P Conneely
<p>There are no additional multi-storey car parking facilities being progressed at present.</p> <p>A new two-deck car park at UHG opened in December 2015. This replacement staff parking was required due to the construction of the new Adult Acute Mental Health Unit on the site of a former staff car park.</p> <p>The hospital has also converted two car parks which were previously used by staff, to paid public parking areas with seventy (70) additional parking spaces for public use, located outside Maternity and the Paediatric Departments.</p>				
A. Cosgrove, COO, Saolta University Health Care Group				
W64Q1830	I will ask as to the aggregate funding provided by HSE West to Dromcollogher Respite Care Centre in each of the financial years 2013, 14 & 15 and what is the expected allocation for 2016 please.			Cllr J Scanlan
<p>The following amounts were allocated by HSE Mid West Community Healthcare Organisation (CHO Area 3) to Dromcollogher Respite Care Centre from 2013 to date.</p> <p>2013 – Section 39 Funding of €321,678 and National Lottery Funding of €3,000 2014 – Section 39 Funding of €364,657 and National Lottery Funding of €3,700 2015 – Section 39 Funding of €424,231 and National Lottery Funding of €5,058</p> <p>Proposed funding for 2016 is as follows:</p>				

2016 – Section 39 Funding of €455,321 (this includes an amount of €33,275 paid by the HSE South in prior years but now administered through HSE Mid West)
 2016 – National Lottery Funding not yet prioritised.

B Gloster, Chief Officer, HSE Mid West Community Healthcare

W64Q1831	According to recent local media reports over 5000 elective surgeries in Galway were cancelled, can you confirm to me what is the main reasons for this? Given this level cancellation it will have a serious impact on waiting lists. Are we still working with other hospital's in the region to deal with waiting lists.	Cllr M Hoade
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Galway University Hospitals (GUH) continues to manage capacity across both sites, which presents challenges particularly in times of peak demand.

Hospital activity and bed capacity is reviewed on a daily basis, with particular focus on patient flow and early discharge in order to ensure maximum bed usage and avoid cancellations.

Procedures may be cancelled by the patient themselves or the hospital.

Factors affecting the cancellation of procedures by the hospital include: access to theatre, access to beds or staffing levels. It can particularly be an issue over the winter months and at times of peak activity in the hospital. Urgent cancer procedures and emergency care are also prioritized which also impacts on the cancellation of elective procedures. The hospital regrets having to cancel any patient and makes every effort to reschedule patients as appropriate.

GUH works closely with the other hospitals in the Group where there may be additional theatre and bed capacity and specialties such as General Surgery, Urology, Plastics, Maxillofacial etc are treated in Roscommon, Mayo and Portlinculla University Hospitals using any available capacity.

A. Cosgrove, COO, Saolta University Health Care Group

W64Q1832	Carna Nursing and Retirement Home has a 51 bedded unit and a 5 bedded assisted living unit on the same grounds. I understand from representations received from the area that the Western Health Board had a contract with them to use two beds for Community Respite care. These beds were used for people from all area's of Connemara. Clients could avail of respite up to four weeks in the year. The service has 24 hour doctor care 365 days a year and this prevented a lot of cases going to A&E. This contract ended on the 31st December 2013. Can we re-examine this with a view to reinstating this contract given the pressures on the ED department, and the distance that those patients have to travel.	Cllr M Hoade
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A National Transitional Care Funding Scheme was established in recent years.

The purpose of this scheme is to improve patient flow through Acute hospitals and timely reduce the numbers of patients on trolleys in Emergency Departments.

Under this scheme, clinically appropriate patients are offered a period of convalescence in a nursing home. The scheme is applicable to all nursing homes including Carna Nursing & Retirement Home. The primary criterion for selection of the nursing home is the patient's choice and in most cases, patients choose the nursing home closest to their home.

In light of the National Transitional Care Funding Scheme, and in the interests of fairness and equity, a decision was made not to renew the agreement with Carna Nursing and Retirement Home as this was the only Private Nursing Home in Co. Galway where this arrangement existed.

T. Canavan, Chief Officer, CHO 2

W64Q1833	Can you confirm to me if the Dexa scanner is in operation on a full time basis. What is the current waiting list? Can dexa scanner's be operated by specially trained nurses. Can G.P. interpret Dexa scan's.	Cllr M Hoade
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The existing DXA service is continuing and we plan to increase the service from the current one morning a week to two mornings a week in the short-term. We are continuing our efforts to recruit staff to fill the vacant radiographer posts across the hospital and, including a dedicated post for this service.

STATUS	TOTAL WAITING
GP Patients	3473
OUTPATIENTS	1158
INPATIENTS	4

Specially trained nurses can operate DXA scanners and are doing so in GP practices and other units in Galway at present; GUH scans are interpreted by a Consultant Rheumatologist.

A. Cosgrove, COO, Saolta University Health Care Group

W64Q1834	To ask what changes and improvements have been carried out at Mayo University Hospital since our last meeting with regard to A&E and the statistics regarding people on trolleys.	Cllr D Ryan
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Mayo University Hospital ED had attendances of 35,500 patients in 2015 (7.4% increase ytd in 2016 compared to 2015) The ED was originally designed to accommodate a capacity of 20,000 patients.

Options are being explored with Estates regionally for the feasibility of increased capacity on the site as a short to medium term project. A short term mobile accommodation option is being explored currently.

There was an increase of 19.6% in the numbers of people presenting to the ED from January to March this year there was a reduction in the numbers of patients awaiting admission in the ED from 607 to 452 a reduction of 25.5%.

Mayo University Hospital continues to follow the new System Wide Escalation Framework agreed by the National ED Taskforce in December.

Additional access to Radiology and Cardiology investigations was implemented as part of the winter initiative planning to support patient flow.

A frail elderly team is in place to specifically target elderly patient population presenting at ED and the Acute Medical Assessment Unit.

Among the other measures which have been implemented in the hospital to relieve pressure on the ED and reduce waiting times are: the utilisation of medical assessment and day surgery beds which have been staffed 24/7 when in escalation , the transfer of appropriate patients to community care settings, working

closely with community health teams, communication with GPs to ensure patients are referred to ED only where appropriate; extra ward rounds and postponement of non-urgent elective procedures.

In accordance with this Framework, additional patients have been placed on wards at MUH and in other hospitals across the Saolta Group to reduce pressure on the ED during very busy periods. For reasons of patient safety, it is preferable to have extra patients on wards rather than in an overcrowded ED.

The hospital has access to 120 District Hospital beds available on 3 sites across the county

The Hospital is currently engaged with GPs in the development of a new Primary Care Centre incorporating diagnostics & chronic disease management.

Services in MUH will move to the Primary Care Centre to alleviate pressure on hospital capacity. Direct access to the AMAU is provided for GPs.

Other initiatives in place include:

Involvement of GP in developing of Acute Medicine Programme

- ED Consultant links with GPs in relation to ED referrals
- GP representative on Older persons clinical care programme
- GP representative on the Stroke Clinical Care Programme
- GP representative on the Diabetes programme

Key linkages between the hospital and the community services include:

- CHO General Manager and GM for MUH jointly chair the Joint Implementation Group for Discharge Planning and Unscheduled Care Group
- Two weekly meetings between senior managers in CHO and the Hospital
- Public Health Liaison Nurse based in hospital
- Complex Discharge Meetings are jointly convened
- 36 Rehabilitation beds under supervision of Consultant Geriatricians
- Significant number of public and private nursing home beds available
- Consultant Geriatricians attend the District hospitals on a sessional basis
- Diabetic Services developed in line with national programme
- Mental Health liaison linked with ED
- Consultant Paediatrician with special interest in Disabilities based at MGH
- Consultant Physicians, Consultant Paediatricians and Consultant Obstetricians hold OPD clinics in District Hospitals
- Outreach X-ray Service provided in Ballina and Belmullet District Hospital
- MGH Laboratory provides a comprehensive service to Primary Care services
- MGH and CHO have a Virtual Ward in the Community

A development control plan is currently being developed for the Mayo University Hospital site which will

include review of ED capacity, and future needs.

Recent reductions in community care supports, for example, home care packages are negatively impacting on delayed discharge numbers which impacts on capacity. This is being actively escalated through the CHO and National Acute Services.

A. Cosgrove, COO, Saolta University Health Care Group

W64Q1835	To ask for a detailed report with regards to the primary care centre in Ballinrobe which construction has recently got underway, on the timeframe as to when the facility will be operational, and a schedule of what services will be available through there.	Cllr D Ryan
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Construction work on Ballinrobe Primary Care Centre has commenced and completion is expected in late 2017.

The Centre will provide a range of integrated Primary Care services including Community Mental Health services, Public Health Nursing, Physiotherapy, Occupational Therapy, Dental, Psychology, Speech and Language Therapy, Dietician, and other visiting services.

These services will be relocating from their existing bases.

The total HSE staff complement will be in the region of 15 staff.

The Centre also includes provision for two GP practices.

T. Canavan, Chief Officer, CHO 2

W64Q1836	What facilities do we have in the HSE West Region to deal with Mental Health issues in the 12 - 18 year old age bracket and what is the capacity of those facilities and how many clients are currently availing of treatment at these facilities and can you tell me how many staff and their professions work in these facilities?	Cllr G Mc Monagle
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Inpatient Unit – Merlin Park, Galway

The Inpatient Unit is a 20 bedded acute inpatient facility which admits children and adolescents with severe mental illness 24/7. There is also a Consultant Child and adolescent rota providing on call 24/7 and a 7day day hospital. The two teams consist of a Consultant Child Psychiatrist, Senior Registrar, Psychologist, Social Worker and Nursing Staff. There is 1 Occupational Therapist, a 0.5 Speech and Language Therapist and 1 Dietician who works between both teams. The Unit serves the old HSE West – Donegal to North Tipperary and when called upon, capacity allowing, young people from other areas will also be treated in the Unit.

CHO Area 1 - Outpatient

Sligo/Leitrim/West Cavan

Sligo Leitrim Child and Adolescent Services are based in Nazareth House, Church Hill, Sligo and have a staffing complement of:

- 1 x Consultant CAMHS (Locum)
- 1 x Consultant CAMHS vacant

- 1 x Clinical Nurse Specialist
- 1 x Clinical Nurse Manager (Team Co-ordinator)
- 1 x Senior Occupational Therapist
- 1 x Basic Occupational Therapist
- 1 x Senior Speech and Language Therapist
- 1 x Basic Speech and Language Therapist
- 2 x Senior Social Worker
- 1 x Basic Social Worker
- 2 x Senior Psychologist
- 1 x Basic Psychologist
- 1 x Social Care Worker
- 1 x Medical Secretary
- 1 x Clerical Officer

Donegal

There are two teams in Donegal – South and North.

The following table provides the breakdown of clinical staff.

South Donegal Team

Discipline	WTE	Comments
Consultant Child and Adolescent Psychiatrist	1	
Clinical Nurse Manager II	1	
Clinical Nurse Specialist	1	
Senior Social Worker	2	
Child Care Leader	1.8	
Speech and Language Therapist	1	
Senior Occupational Therapist	1	
Senior House Officer (SHO)	1	
Registrar	Vacant	Hire form submitted for approval
Clinical Psychologist	Vacant	Post not accepted by national panel candidates. New competition scheduled for September 2016

North Donegal Team

Discipline	WTE	Comments
Consultant Child and Adolescent Psychiatrist	1	
Clinical Nurse Manager II	1.75	
Clinical Nurse Specialist	1	
Senior Social Worker	1	
Child Care Worker	0.8	
Speech and Language Therapist	Vacant	Interviews on 11/7/2016

Senior Occupational Therapist	0.8	
Senior House Officer (SHO)	Vacant	Post being filled on 11/7/2016
Social Worker	Vacant	Hire form submitted for approval
Clinical Psychologist	1	

J Hayes, Chief Officer, Area 1

CHO Area 2 - Outpatient

There are currently 4 CAMHS multidisciplinary teams covering Galway/Roscommon. The community teams consist of the following which is a Clinical Lead who is a Consultant Child Psychiatrist; most teams have a Senior Registrar, Psychologist, Social Worker, OT, Social Care Workers and a Nurse.

At present there are four Community Teams in CAMHS Galway Roscommon, each team covers approximately a population of 85,000. There are minimal waiting lists for these teams.

T. Canavan, Chief Officer, Area 2

CHO Area 3 – Outpatient

The HSE Mid West Child and Adolescent Services (CAMHS) are served by five Community CAMHS teams and provide services to children up to 18 years of age including core initial mental health assessments, treatment and care. Additional services include domiciliary visiting, school visiting and classroom observation. Specialist therapies can also be offered including family and individual psychotherapy. Primary referrals are accepted from General Practitioners, Paediatricians, Adult Psychiatry, Consultant Child & Adolescent Psychiatrists, Early Intervention and School Age Services.

Referrals are prioritised according to levels of acuity and severity. High priority cases are usually seen within 24 hours while non-emergency referrals are discussed, allocated and prioritised at weekly team conferences.

People presenting in crisis outside the Monday to Friday 9.30am-5.00pm CAMHS emergency system would present to the ED in UHL for assessment.

B Gloster, Chief Officer, HSE Mid West Community Healthcare

W64Q1837	With the increasing number of people requiring Home Help in 2015 much higher than forecasts had predicted and the potential growing demand in 2016 with Donegal having the highest percentage difference between target hours versus the actual number of hours delivered out of all the counties in our organisational area, much higher than Cavan/Monaghan or Sligo/Leitrim what steps are being taken and strategies being implemented within CHO Area 1 to meet this increasing demand?	Cllr G Mc Monagle
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As the number of persons aged 65 years and over continues to grow, the demand for home care services, including home help and home care packages, also grows. The HSE has supported additional numbers in 2015 as a result of general increases in demand but also in an effort to support acute hospitals. This has continued into 2016, with the support an important factor in helping to free up beds on an ongoing basis in Letterkenny and Sligo University Hospitals and Donegal Community Hospitals, and helping to minimise the need for hospital admissions.

Home Care Packages and home help services continue to be allocated to new clients in 2016 having regard to the resources that become available through previous clients no longer requiring their home care service, and importantly, taking account of the overall resources available.

Within Community Healthcare Organisation Area 1 (Cavan, Donegal, Leitrim, Monaghan & Sligo), Home Care Services in Donegal are not the subject of any resource reduction this year but require prudent management for the remainder of the year, including the prioritising of needs and identification of risks, to meet the service plan expected activity for 2016 of 630,000 home help hours for all care groups and 340 Home Care Packages. It is anticipated that the summer period will help reduce the pressure on both hospital and community services and therefore help contain the levels of activity. This will be kept under review.

There is a robust process in place to ensure the clear identification of individuals' needs and the most suitable home help plan of care within available resources in consultation with their families and health professionals.

J Hayes, Chief Officer, Area 1

W64Q1838	Can I have an update as to the Steps being taken by the National Ambulance Service to improve response times in Rural Areas of Donegal, will the NAS be given the necessary resources ie: personnel, vehicles etc. to meet those challenges and will these extra resources include provision of a further ambulance and crew to be stationed Full Time in Inishowen due to its large geographical area and distance from Letterkenny University Hospital?	Cllr G Mc Monagle
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The National Ambulance Service continues to review its activity and responses time across the country on an ongoing basis. The establishment of the National Control Centre in Tallaght and Ballyshannon now gives visibility of crews across the country as to their availability and most appropriate response. This includes the nearest ambulance and the mix of staff including Advance Paramedic and Paramedic to selected calls. The Lightfoot report recently published, outlines the resources required and the challenges presented across the country and provides a template for future planning.

The NW and Donegal like many other areas across NAS provide challenges. There have been a number of ambulance service initiatives since 2012 into the NW with the objective of improving patient care and service delivery. In December 2012 an additional 21 Intermediate Care staff were introduced into the NW, 10 into Letterkenny and 11 into Sligo. These staff are tasked with low acuity calls such as hospital discharges which prior to this were carried out by front line emergency crews. Prior to this for example, an emergency front line crew were utilised in patient transfers to Dublin each morning and other crews in the area were utilised for discharge patients.

This has improved the availability of emergency crews in the area. These front line crews are now available to respond to emergency cover across the region. It has also allowed the Ambulance Service to eliminate on call in certain stations in the area which allows for improved response times at night and is a positive development for staff from a Health and Safety perspective to avoid fatigue from extended duties. In general an on call crew responding to a call adds an additional 20 minutes to the response.

In the service plan for 2016 an additional 20 staff will be employed into the NW to eliminate on call in the remaining stations. This has the benefit of improving the night time responses across the area, improvements in the Health and wellbeing of staff and the additional benefit of staff presently working in other parts of the service the opportunity of now returning to work in the NW.

By the end of 2016 the Ambulance Service in the NW including Donegal will have seen an increase of almost 60 staff, including the National Control Centre in Ballyshannon. Of the 60 staff, 40 of these have been into frontline and intermediate care staff.

While it is not envisaged to put an additional crew on a full time basis presently into the Inishowen Peninsula, the additional availability of emergency crews previously carrying out non emergency work allows control staff assigns an additional crew to the area on a daily basis.

P.O' Riordan, Area Operations Manager, West National Ambulance Service

W64Q1839	Can I have the number of front line clinical vacant Positions which currently exist at Letterkenny University hospital, and to give me details of all the positions which have already been sanctioned and how the latest HSE recruitment restrictions will impact on the hospital's ability to hire suitable candidates to fill these positions?	Cllr G Mc Monagle
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There are currently 26.4 vacancies in LUH. This includes 18 nursing posts, (nurse manager and staff nurse grades), two Health Care Assistant posts, three Radiographer posts, a Senior Respiratory Technician, a Pharmacy Technician, a Senior OT and a .5 Medical Scientist post. These posts are currently with the NRS. All posts are being actively monitored at Group level and National level to ensure that clinical risks are appropriately managed. Recruitment continues in areas where funding has been agreed, and in areas of critical care and emergency services.

A. Cosgrove, COO, Saolta University Health Care Group